

NEIL R. WOODS, D.D.S.
License Number: 5244

James P. Goldsmith, D.M.D.
Board President
Maryland State Board of Dental Examiners
55 Wade Avenue/Tulip Drive
Catonsville, Maryland 21613

RE: **PERMANENT SURRENDER OF LICENSE**
License Number: 5244
Case Numbers: 2012-243, 2013-075, 2016-157,
2017-020, 2017-083, 2019-007 & 2019-034

RECEIVED

FEB 06 2020

BOARD OF DENTAL EXAMINERS

Dear Dr. Goldsmith and Members of the Board:

Please be advised that I have decided to **PERMANENTLY SURRENDER** my license to practice dentistry in the State of Maryland, License Number 5244, effective ninety (90) days from the execution of this letter by the Board President. I understand and agree that immediately upon the Board's acceptance of this permanent letter of surrender (including during the 90 day period between the execution and the effective date of the permanent letter of surrender), I may not represent myself to the public by title, description of services, methods, procedures, or otherwise that I am licensed to practice dentistry in Maryland. Moreover, I may not practice dentistry in the State of Maryland as it is defined in the Maryland Dentistry Act (the "Act"), Md. Code Ann., Health Occ. ("Health Occ.") § 4-101 (2014 Repl. Vol.).

I understand that upon the Board's acceptance, this Permanent Letter of Surrender becomes a **FINAL ORDER** of the Board. I understand that the permanent surrender of my license means that I am in the same position as an unlicensed individual.

My decision to surrender my license to practice dentistry in Maryland was prompted by the Maryland State Board of Dental Examiners' (the "Board's") investigation of my license and its subsequent issuance of disciplinary charges (the "Charges"), dated April 17, 2019, as well as for medical reasons. The Board based its Charges on grounds that I violated the following provisions of the Act: fraudulently or deceptively obtaining or attempting to obtain a license for the licensee, in violation of Health Occ. § 4-315(a)(1); practicing dentistry in a professionally incompetent manner or in a grossly incompetent manner, in violation of Health Occ. § 4-315(a)(6); behaving dishonorably or unprofessionally, or violating a professional code of ethics pertaining to the dentistry profession, in violation of Health Occ. § 4-315(a)(16); and violating any rule or regulation

Permanent Letter of Surrender

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adopted by the Board, i.e. COMAR 10.44.23.03(A), (B)(2), and (B)(8), COMAR 10.44.30.02(B)(1), (K)(1)-(2), (K)(5), and (U), and COMAR 10.44.30.03(A)(5), (A)(7), (A)(11)(a)-(d), (A)(12)-(13), and (A)(15), in violation of Health Occ. § 4-315(a)(20).

The Board's investigation, concluded that with respect to dental charts of twenty patients, my care and treatment of the patients was deficient for reasons including, but not limited to: failing to conduct and/or document basic clinical charting items such as periodontal charting, informed consent, diagnosis or treatment notes. The investigation also concluded that radiographs were not of diagnostic quality and were ordered in excessive quantities. The Board's investigation concluded that the level of care provided all 20 patients was concerning to the Board, and that the number of dental implants of eleven patients that it believed were improperly placed and resulted in adverse effects. The Board's investigation further concluded a repeated failure to monitor the patients after tooth extraction, the failure to treat noted dental decay, the improper performance of endodontic therapy and restorative care, and prescriptions for excessive amounts of narcotics. The Board's investigation also concluded that with respect to a twenty—first patient, I made an inappropriate comment to the patient and his wife. Finally, the Board's investigation concluded that I also failed to disclose on my 2014 and 2016 renewal applications that I was under investigation by the Board.

Solely for the purposes of this licensing action, I have decided to permanently surrender my license due to health reasons and to avoid the time, effort, and cost to defend against these disciplinary charges. Nevertheless, I understand that the Board believes that if it were to proceed with an evidentiary hearing in this matter, the State would be able to prove by the applicable standard that I violated the foregoing provisions of the Act.

I wish to state clearly that I have voluntarily, knowingly, and freely chosen to submit this Permanent Letter of Surrender. I understand that by signing this Permanent Letter of Surrender, I am waiving the right to contest the Charges in a formal evidentiary hearing at which I would have the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf and to all other substantive and procedural protections provided by law, including the right to appeal.

I acknowledge that upon the execution of this Permanent Letter of Surrender, I shall surrender to the Board any indicia of Maryland dentistry license that is in my possession, including my Maryland dental license, number 5244, any wall certificate, renewal certificates and wallet-sized renewal cards. I understand that the Board will advise the National Practitioner Data Bank of this Permanent Letter of Surrender, and in any response to inquiry, that I have surrendered my license in lieu of disciplinary action under the Act as resolution of the matters pending against me. I also understand that in the event I should apply for licensure in any form in any other state or jurisdiction, that this Permanent Letter of Surrender, and all underlying documents, may be released or published by the Board to

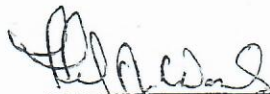
the same extent as a final order that would result from disciplinary action pursuant to Md. Code Ann., General Prov. §§ 4-101 *et seq.* (2014).

I further recognize and agree that by submitting this Permanent Letter of Surrender, my license in Maryland will remain permanently surrendered. In other words, I agree that I have no right to reapply for a license to practice dentistry in the State of Maryland. I further agree that the Board is not obligated to consider any application for licensure that I might file at a future date and that I waive any hearing rights that I might possess regarding any such application.

I acknowledge that I may not rescind this Permanent Letter of Surrender in part or in its entirety for any reason whatsoever. I understand the nature and effect of both the Board's actions and this Permanent Letter of Surrender fully. I acknowledge that I understand the language, meaning, terms, and effect of this Permanent Letter of Surrender. I acknowledge that I had the opportunity with an attorney before signing this Letter of Surrender, and I make this decision knowingly and voluntarily and without any duress.

Sincerely yours,

2/5/2020
Date


Neil R. Woods

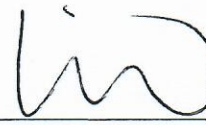
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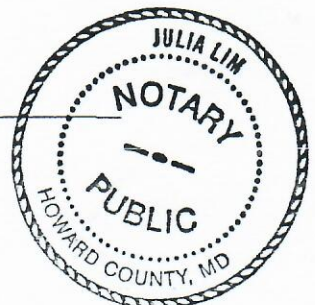
STATE OF Maryland

CITY/COUNTY OF Howard

I HEREBY CERTIFY that on this 5 day of February, 2020, before me, a Notary Public of the State and City/County aforesaid, personally appeared Neil R. Woods, and declared and affirmed under the penalties of perjury that signing the foregoing Permanent Letter of Surrender was his voluntary act and deed.

AS WITNESS my hand and Notarial seal.


Notary Public



SWORN TO AND SUBSCRIBED BEFORE ME
THIS 5 DAY OF Feb., 2020
WITNESS MY HAND AND OFFICIAL SEAL

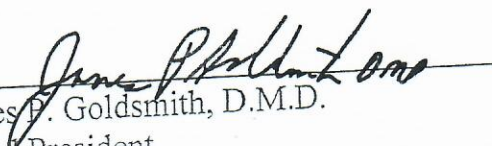
MY COMMISSION EXPIRES 4/17/2023

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My Commission expires: 4/17/2023

ACCEPTANCE

On this 7th day of February, 2020, I, James P. Goldsmith, D.M.D., on behalf of the Maryland State Board of Dental Examiners, accept Neil R. Woods' **PUBLIC PERMANENT SURRENDER** of his license to practice dentistry in the State of Maryland.


James P. Goldsmith, D.M.D.
Board President
Maryland State Board of Dental Examiners