

MAR 05 2019

Paul Siegmund, H.A.D.

Date: 2/28/2019

Dr. Jennifer Mertes, Au.D., Board Chair
Board of Audiologists, Hearing Aid Dispensers & Speech-Language Pathologists
4201 Patterson Avenue
Baltimore, MD 21215-2299

Re: Surrender of License to Practice Hearing Aid Dispensing
Paul Siegmund, H.A.D., License Number: 02242
Case Number: AHS-12-2017

Dear Dr. Mertes and Members of the Board,

Please be advised that, pursuant to Md. Code Ann., Health Occ. ("Health Occ.") § 2-313 (2014 Repl. Vol. & 2017 Supp.), I have decided to **SURRENDER** my license to practice Hearing Aid Dispensing in the State of Maryland, License Number 02242, effective immediately. I understand that upon surrender of my license, I may not engage in the practice of Hearing Aid Dispensing in the State of Maryland as it is defined in the Maryland Audiology, Hearing Aid Dispensing, and Speech-Language Pathology Act (the "Act"), Health Occ. §§ 2-101 *et seq.* and other applicable laws. In other words, as of the effective date of this Letter of Surrender, I understand that the surrender of my license means that I am in the same position as an unlicensed individual in the State of Maryland.

I understand that this Letter of Surrender is a **PUBLIC DOCUMENT**, and upon its acceptance, becomes a **FINAL ORDER** of Board of Audiologists, Hearing Aid Dispensers & Speech-Language Pathologists (the "Board").

I acknowledge that the Board received a complaint from a patient regarding my practice and that the Board initiated an investigation. The investigation indicated recordkeeping and practice violations regarding my failure to complete and/or document all appropriate procedures required pursuant to COMAR 10.41.08.08. I have decided to surrender my license to practice Hearing Aid Dispensing in the State of Maryland to avoid further investigation and prosecution of these allegations and due to my retirement. Although I do not agree with the allegations, I recognize that for all purposes relevant to licensure that these allegations shall be treated as proven and that these allegations, if presented at a hearing, would support a finding of violation of Health Occ. § 2-314(10) ("Commits any act of unprofessional conduct in the practice of audiology, hearing aid dispensing, or speech-language pathology, or the assistance of the practice of speech-language pathology).

I wish to make it clear that I have voluntarily, knowingly and freely chosen to submit this Letter of Surrender to avoid the issuance of charges and prosecution of the aforementioned allegations. I understand that by executing this Letter of Surrender I am

waiving my right to contest any charges that would issue from the Board's investigative findings in a formal evidentiary hearing at which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf and all other substantive and procedural protections provided by law, including the right to appeal to circuit court. I understand that by signing this letter, the Board is agreeing to forego any charges related to this matter.

I understand that the Board may advise the National Practitioner Data Bank of this Letter of Surrender. I also understand that in the event I would apply for licensure in any form in any other state or jurisdiction that this Letter of Surrender 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., Gen. Prov. §§ 4-101 *et seq.* (2014 Repl. Vol. & 2017 Supp.), and that this Letter of Surrender constitutes a disciplinary action by the Board.

I further recognize and agree that by submitting this Letter of Surrender, my license will remain surrendered unless and until the Board grants reinstatement. In the event that I apply for reinstatement of my Maryland License, I understand that the Board or its successor is not required to grant reinstatement; and, if it does grant reinstatement, may impose any terms and conditions the Board considers appropriate. I understand that if I ever file a petition for reinstatement, I will approach the Board or its successor in the same position as an individual whose license has been revoked.

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason whatsoever. Finally, I wish to make clear that I have been advised of my right to be represented by an attorney of my choice throughout proceedings before the Board, including the right to consult with an attorney prior to signing this Letter of Surrender. I have knowingly and willfully waived my right to be represented by an attorney before signing this letter surrendering my license to practice Hearing Aid Dispensing in Maryland. I understand both the nature of the Board's actions and this Letter of Surrender fully. I acknowledge that I understand and comprehend the language, meaning and terms and effect of this Letter of Surrender. I make this decision knowingly and voluntarily.

2/29/2019

Date



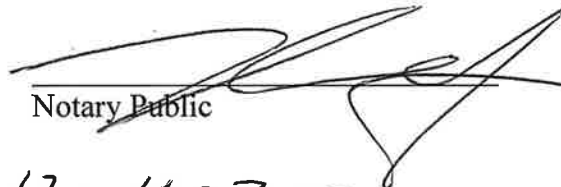
Paul Siegmund, H.A.D.

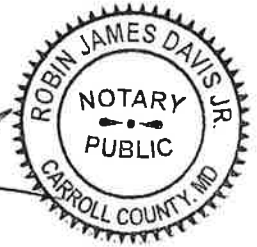
NOTARY

STATE OF Maryland
CITY/COUNTY OF Carroll

I HEREBY CERTIFY that on this 28 day of February, 2019 before me, a Notary Public of the City/County aforesaid, personally appeared Paul Siegmund, H.A.D., and declared and affirmed under the penalties of perjury that the signing of this Letter of Surrender was voluntary.

AS WITNESS my hand and Notarial seal.

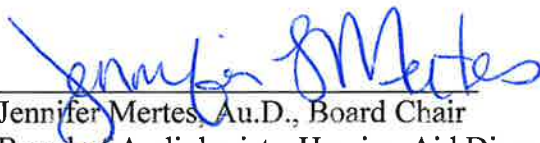

Notary Public



My commission expires: 12-4-2022

BOARD ACCEPTANCE

On behalf of the Board, on this 18th day of APRIL, 2019, I, Jennifer Mertes, Au.D., Board Chair, accept the **PUBLIC SURRENDER** of Paul Siegmund, H.A.D.'s license to practice Hearing Aid Dispensing in the State of Maryland.


Jennifer Mertes, Au.D., Board Chair
Board of Audiologists, Hearing Aid Dispensers &
Speech-Language Pathologists