

**Jorge Malouf, D.C.**  
**8121 Georgia Avenue, #102**  
**Silver Spring, Maryland 21234**

Date: 9/14/15

Laurie Sheffield-James, Executive Director  
Maryland Board of Chiropractic & Massage Therapy Examiners  
4201 Patterson Avenue, 3<sup>rd</sup> Floor  
Baltimore, Maryland 21215

RE: Surrender of License to Practice Chiropractic  
License Number: 02148  
Case Number: 13-46C

Dear Ms. Sheffield-James and Members of the Board:

Please be advised that I have decided to **SURRENDER** my license to practice chiropractic in the State of Maryland, License Number 02148, effective immediately. I understand that upon surrender of my license, I may not practice chiropractic, with or without supervision and/or compensation, as it is defined in the Maryland Chiropractic Act (the "Act"), Md. Code Ann., Health Occ. ("Health Occ.") § 3-101 *et seq.* (2014 Repl. Vol.).

In addition, I will refrain from identifying myself as a practitioner of chiropractic; I will remove all signs or similar advertisements that indicate authority to practice chiropractic; and I will not use letterhead or business cards indicating authority to practice chiropractic.

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.<sup>1</sup> I understand that this Letter of Surrender is a **PUBLIC** document and on the Board of Chiropractic and Massage Therapy Examiners' (the "Board's") acceptance becomes a **FINAL ORDER** of the Board.

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<sup>1</sup> Effective September 1, 2015, the Respondent allowed his license to practice chiropractic to expire. Health Occ. § 3-312(a) provides in pertinent part, "...a licensed chiropractor may not surrender the license nor may the license lapse by operation of law while the licensee is under investigation or while charges are pending against the chiropractor."

My decision to surrender my license to practice chiropractic in the State of Maryland has been prompted by an investigation of my license by the Board and the Office of the Attorney General resulting in charges that I violated Md. Code Ann., Health Occ. § 3-313(8)(Is unethical in the conduct of the practice of chiropractic), (12)(makes or files a false report or record in the practice of chiropractic), (19) (violates any rule or regulation adopted by the Board),<sup>2</sup> (21)(commits an act of unprofessional conduct in the practice of chiropractic) and (25)(submits false statements to collect fees for which services were not rendered).

The Board's charges were based on allegations that I had filed insurance claims with eight separate insurance companies for multiple patients for chiropractic services not rendered between February 2008 and January 2012.

I have decided to surrender my license to practice chiropractic in the State of Maryland to resolve this matter and to avoid prosecution of charges against me by the Board. I wish to make it clear that I have voluntarily, knowingly and freely chosen to submit this Letter of Surrender. I acknowledge that the Office of the Attorney General has legally sufficient evidence to prove by a preponderance of the evidence at an administrative hearing that I violated the Act under Health Occ. § 3-313(8), (12), (19), (21) and (25).

I understand that by executing this Letter of Surrender I am waiving any right to contest the charges 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.

I acknowledge that on or before the effective date of this Letter of Surrender, I shall present to the Board my Maryland chiropractic license, including any renewal certificates and wallet-sized renewal cards.

I understand that the Board will advise the National Practitioner's Data Bank, and the Health Care Integrity Data Bank, and any other required entities of this Letter of Surrender, and in response to any inquiry, will advise that I have surrendered my

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<sup>2</sup> Md. Code Regs. 10.43.14.03C provide in pertinent part as follows: (2) A chiropractor ... shall be professional in conduct, with honesty, integrity, self-respect, and fairness; (4) Provide accurate fee information to the patient, the individual responsible for payment for treatment, and the insurer; and D(2) A chiropractor ... may not knowingly engage in or condone behavior that is fraudulent, dishonest, or deceitful, or involves moral turpitude[.]

license in lieu of disciplinary action under the Act as a resolution of the matters pending against me. I also understand that, in the event that I would apply for licensure in any form in any other state or jurisdiction, that this 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., Gen. Prov. § 4-101 *et seq.* (2014). Finally, I understand that this Letter of Surrender is considered a disciplinary action by the Board.

I further recognize and agree that by submitting this Letter of Surrender my license will remain surrendered for **FIVE (5) YEARS**.

I understand that after five years, if I apply for reinstatement or a new Maryland license, I bear the burden of demonstrating to the Board that I am professionally and mentally competent to practice chiropractic under the Act and that I possess good moral character, as required under Health Occ. § 3-302(b). I understand that when applying for reinstatement or new licensure, I approach the Board in the same posture as one whose license has been revoked based on the facts contained herein and that my application may be accepted or denied by the Board in its sole discretion.

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 consulted with an attorney before signing this Letter of Surrender. 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, terms and effect of this Letter of Surrender. I make this decision knowingly and voluntarily.

Sincerely,  
  
Jorge Malouf

Reviewed by:



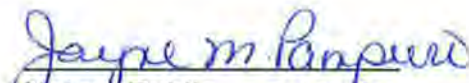
Paul J. Weber, Esquire

**NOTARY SEAL**

STATE OF MARYLAND


CITY/COUNTY:

I HEREBY CERTIFY that on this 9<sup>th</sup> day of September, 2015, before me, a Notary Public of the State and City/County aforesaid personally appeared Jorge Malouf and declared and affirmed under the penalties of perjury that signing the foregoing Letter of Surrender was his voluntary act and deed.

  
Notary Public 2/21/16

**ACCEPTANCE**

On behalf of the Maryland Board of Chiropractic and Massage Therapy Examiners, on this 16<sup>th</sup> day of September, 2015, I accept Jorge Malouf's **PUBLIC SURRENDER** of his license to practice ~~massage therapy~~ <sup>CHIROPRACTIC</sup> in the State of Maryland.

  
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Dr. Jonathan Nou, President  
Board of Chiropractic & Massage Therapy Examiners