

COMMONWEALTH OF MASSACHUSETTS

MIDDLESEX, SS.

BOARD OF REGISTRATION
IN MEDICINE

Docket No.

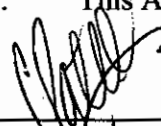
_____)
In the Matter of)
Charmaine K. Patel, M.D.)
_____)

VOLUNTARY AGREEMENT NOT TO PRACTICE MEDICINE
(NON-DISCIPLINARY)

1. I agree to cease my practice of medicine in the Commonwealth of Massachusetts effective immediately.
2. This Voluntary Agreement Not to Practice (hereinafter "Agreement") will remain in effect until the Board of Registration in Medicine (hereinafter "Board") determines that this Agreement should be modified or terminated; or until the Board takes other action against my license to practice medicine.
3. I am entering this Agreement voluntarily.
4. I understand that this Agreement is a public document and may be subject to a press release.
5. I understand that this Agreement will be reported by the Board to all appropriate federal databanks and national reporting organizations.
6. Any violation of this Agreement shall be prima facie evidence for immediate summary suspension of my license to practice medicine.
7. I understand that by voluntarily agreeing not to practice medicine in the Commonwealth of Massachusetts pursuant to this Agreement, I do not waive my right to contest any allegations brought against me by the Board and my signature to this Agreement does not constitute any admissions on my part. Nothing contained in this Agreement shall be construed as an admission or acknowledgment by me as to wrongdoing of any kind in the practice of medicine or otherwise.

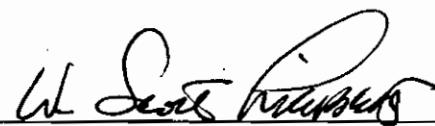
8. I agree to provide a complete copy of this Agreement, within twenty-four (24) hours of notification of the Board's acceptance of this Agreement, by certified mail, return receipt requested, or by hand delivery to the following designated entities: any in-state or out-of-state hospital, nursing home, clinic, other licensed facility, or municipal, state, or federal facility at which I practice medicine; any in-state or out-of-state health maintenance organization, with which I have privileges or any other kind of association; any state agency, in-or-out-of state, with which I have a provider contract; any in-state or out-of-state medical employer, whether or not I practice medicine there; the Drug Enforcement Administration Boston Diversion Group; the Massachusetts Department of Public Health Drug Control Program; and the state licensing boards of all states in which I have any kind of license to practice medicine. I will certify to the Board within seven (7) days that I have complied with this directive. The Board expressly reserves the authority to independently notify, at any time, any of the entities designated above or any other affected entity, of any action it has taken.

9. This Agreement represents the entire agreement between the parties at this time.



Charmaine K. Patel, M.D.

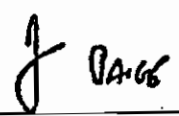
03/12/10
Date



W. Scott Liebert, Esq.

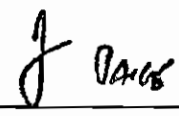
3/15/2010
Date

Accepted by the Board of Registration in Medicine this 15th day of March, 2010.



Board Designee

Ratified by vote of the Board of Registration in Medicine this 17th day of March 2010.



Board of Registration in Medicine

COMMONWEALTH OF MASSACHUSETTS

MIDDLESEX, ss.

BOARD OF REGISTRATION
IN MEDICINE

_____)
 IN THE MATTER OF)
)
 Charmaine K. Patel, M.D.)
 _____)

ORDER

At its meeting of March 17, 2010, the Board of Registration in Medicine (hereinafter "the Board") voted to find the above-named Licensee in violation of her November 5, 2008 Letter of Agreement. The Board, after reviewing the evidence referenced in the March 3, 2010 notice from the Board's Physician Health & Compliance Counsel, determined that the Licensee failed to comply with Paragraph I of her Letter of Agreement.

The Board deferred action on this violation pending further investigation.

The Licensee may request a hearing, the purpose of which is to determine, solely as a matter of fact, whether the Licensee has been in compliance with her Letter of Agreement.

A request for a hearing shall be made in writing and directed to the Executive Director of the Board. The Board must receive any request by 5:00 p.m., Friday, April 2, 2010. If such a request is received, the Board will promptly schedule a hearing at a mutually convenient time.

Date: March 17, 2010



 Peter Paige, M.D.
 Chair
 Board of Registration in Medicine