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8
9 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:
13 **HAMID TABATABAI, M.D.**
Franklin Square Hospital
14 Department of Psychiatry
9000 Franklin Square Drive
15 Baltimore, MD 21237

16 **Physician's and Surgeon's Certificate**
17 **No. C 52106**

18 Respondent.

Case No. 800-2020-073474

**DEFAULT DECISION
AND ORDER**

[Gov. Code § 11520]

19
20 **FINDINGS OF FACT**

21 1. On June 17, 2021, an employee of the Medical Board of California (Board), served
22 by Certified Mail a copy of the Accusation No. 800-2020-073474, Statement to Respondent,
23 Notice of Defense in blank, copies of the relevant sections of the California Administrative
24 Procedure Act as required by section 11505 of the Government Code, and a request for discovery,
25 to Hamid Tabatabai, M.D. (Respondent)'s address of record with the Board, which was and is
26 Franklin Square Hospital, Department of Psychiatry, 9000 Franklin Square Drive, Baltimore MD
27 21237. The United States Post Office tracking system noted the package was delivered on June
28 23, 2021. (Exhibit Package, Exhibit 1: Accusation package, proof of service, USPS tracking

1 notice.¹.)

2 2. There was no response to the Accusation. On July 14, 2021, an employee of the
3 Attorney General's Office sent a Courtesy Notice of Default, by certified mail, addressed to
4 Respondent at the address of record above. The Courtesy Notice of Default advised Respondent
5 of the service of the Accusation, and provided him with an opportunity to file a Notice of Defense
6 and request relief from default. (Exhibit Package, Exhibit 2: Courtesy Notice of Default, proof of
7 service.)

8 3. Respondent has not responded to service of the Accusation or the Notice of Default.
9 He has not filed a Notice of Defense. As a result, Respondent has waived his right to a hearing
10 on the merits to contest the allegations contained in the Accusation.

11 4. William Prasifka is the Board's Executive Director. The charges and allegations in
12 the Accusation were at all times brought and maintained solely in the official capacity as the
13 Board's Executive Director.

14 5. On or about October 21, 2005, the Board issued Physician's and Surgeon's Certificate
15 No. C 52106 to Respondent. The Physician's and Surgeon's Certificate was in full force and
16 effect at all times relevant to the charges brought herein and will expire on September 30, 2021,
17 unless renewed. (Exhibit Package, Exhibit 3: Certificate of Licensure.)

18 6. On June 17, 2021, Respondent was duly served with an Accusation, alleging causes
19 for discipline against Respondent's license. A Courtesy Notice of Default was thereafter served
20 on Respondent. Respondent has failed to file a Notice of Defense.

21 7. The allegations contained in the Accusation, as set forth in this paragraph 7 through
22 18, are true as follows:

23 On November 18, 2020, the Maryland State Board of Physicians (the Maryland Board)
24 issued a Consent Order signed by Respondent. Respondent's Maryland license was accordingly
25 disciplined, restricted, and limited. The circumstances are as follows:

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27
28 ¹ The evidence in support of this Default Decision and Order is submitted herewith as the
"Exhibit Package."

1 At all times relevant to the underlying matter, Respondent was licensed to practice
2 medicine in the State of Maryland and practiced at a Maryland health care facility (the Facility).

3 8. On November 18, 2020, the Maryland Board issued a Consent Order (the Maryland
4 Order) regarding Respondent. (Exhibit Package, Exhibit 4: Maryland Order.) Respondent
5 signed the Consent Order on November 14, 2020, which contained several findings of fact.

6 9. The Maryland Order found that Respondent sexually harassed two female employees
7 (Staff Person 1 and Staff Person 2) over whom he exercised professional authority. Neither Staff
8 Person 1 nor Staff Person 2 was a physician. Respondent's behavior included unwanted
9 attention, commenting on their physical appearance, inappropriate disclosures, nonconsensual
10 touching, and improper remarks.

11 10. As set forth in the Maryland Order, Respondent worked at the Facility with Staff
12 Person 1 from 1996 to 2019. During the course of working together at the Facility, Respondent
13 commented on Staff Person 1's appearance and complimented her on how she smelled. For
14 example, Respondent told Staff Person 1 that blue clothing made her "very attractive" and
15 "excited" him. When commenting to Staff Person 1 about her appearance, the Respondent would
16 at times whisper, "I have to be quick so no one sees me." As a result of Respondent's statements,
17 Staff Person 1 adjusted her hair style, makeup, and clothing to prevent Respondent's unwanted
18 attention. Staff Person 1 also attempted to minimize contacts with Respondent.

19 11. Respondent initiated unwanted physical contact with Staff Person 1 when she was
20 alone in her office or when other staff were not present. Respondent regularly hugged and kissed
21 Staff Person 1 without her permission, which made her uncomfortable and avoidant. Respondent
22 kissed Staff Person 1 on the cheek approximately three to five times per month. Respondent
23 began to hug Staff Person 1 for longer periods of time and with increasing force over the course
24 of their working together at the Facility.

25 12. In September 2019, Respondent stated to Staff Person 1 that they should
26 "consummate" their "work marriage" when they were alone in her office with the door closed.
27 After making this sexual overture, Respondent approached Staff Person 1, hugged her, placed his
28 nose in her hair, smelled her hair, and kissed her on top of the head. During an interview with

1 staff from the Maryland Board, Respondent acknowledged that he “might have [kissed staff] on
2 the cheek.”

3 13. As set forth in the Maryland Order, Respondent worked at the Facility with Staff
4 Person 2 from 2010 to 2019.

5 14. During the course of working together, Respondent periodically kissed Staff Person 2
6 on the cheek when greeting her and frequently commented on her appearance. Staff Person 2
7 asked Respondent to refrain from discussing her appearance, yet he continued to make such
8 comments on at least a weekly basis. On a day that Staff Person 2 wore blue clothing to work,
9 Respondent came to the door of her office and stated, “Wow, oh, wow” before walking away. On
10 a separate occasion, Respondent stated to Staff Person 2, “I am glad you don’t get offended when
11 we talk like this.” During another interaction, Respondent stated to Staff Person 2 in the presence
12 of Staff Person 1 “[l]ook at the beautiful face that looks so tired.”

13 15. Around October 2018, Respondent stated to Staff Person 2 that he was “in love” with
14 her. The Respondent stated to Staff Person 2 that he could not stop thinking about her and that he
15 was feeling like an “eighteen-year-old boy.” Around November 2018, Respondent apologized to
16 Staff Person 2 for any discomfort his statements may have caused. Staff Person 2 stated to
17 Respondent that she could continue to work at the Facility if Respondent never again talked about
18 his feelings for her. In December 2018 or January 2019, Respondent learned that Staff Person 2
19 had discussed Respondent’s statements with her spouse. When Respondent asked Staff Person 2
20 what she had told her spouse, Staff Person 2 told Respondent not to question her again about her
21 marital communications. During the next ten months, Respondent asked Staff Person 2 on
22 multiple occasions about the private discussions she had about Respondent’s statements and
23 conduct, including one incident where Respondent entered Staff Person 2’s office, closed the
24 door, and stated, “Tell me again what you told your husband I said to you.”

25 16. Staff Person 2 resigned, stating that Respondent’s conduct towards her was a
26 contributing factor in her resignation. Upon learning from a Human Resources representative that
27 Staff Person 2 had resigned, the Respondent began crying and stated, “This is because of me.”
28

1 The Facility initiated an investigation of sexual harassment and suspended Respondent pending
2 its investigation. Respondent voluntarily resigned in lieu of termination.

3 17. The Maryland Order concluded that Respondent's actions, as described below and in
4 the Maryland Order, constituted a violation of Maryland's licensing statute regarding
5 unprofessional conduct and a violation of Maryland's licensing regulation regarding sexual
6 misconduct.

7 18. The Maryland Order accordingly disciplined, restricted, and limited Respondent's
8 license, in that the Maryland Order required, among other items, that Respondent:

- 9 • be placed on probation for a minimum of three years;
- 10 • enroll in the Maryland Professional Rehabilitation Program;
- 11 • complete an approved course in maintenance of professional boundaries; and
- 12 • pay a \$1,000 civil fine.

13 **DETERMINATION OF ISSUES**

14 19. Pursuant to the foregoing Findings of Fact, the actions of the Maryland State
15 Board of Physicians constitute cause for discipline against Respondent pursuant to Business and
16 Professions Code sections 2305 and 141(a).

17 20. The conduct underlying the Maryland Order represents unprofessional conduct of
18 an egregious nature. The Maryland Board found that Respondent sexually harassed two
19 subordinate employees. His behavior included unwanted attention, comments on their physical
20 appearance, inappropriate disclosures, nonconsensual touching, and improper remarks. The
21 Maryland Board found that Respondent violated its regulation regarding sexual misconduct. Yet
22 Respondent has failed to appear in this matter. He has presented no information or evidence in
23 mitigation of the acts of serious misconduct. Even without default (and Respondent has
24 defaulted), revocation is the correct result.

25 **ORDER**

26 IT IS SO ORDERED that Physician's and Surgeon's Certificate No. C 52106, heretofore
27 issued to Respondent HAMID TABATABAI, M.D., is revoked.
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Pursuant to Government Code section 11520, subdivision (c), Respondent may serve a written motion requesting that the Decision be vacated and stating the grounds relied on within seven (7) days after service of the Decision on Respondent. The agency in its discretion may vacate the Decision and grant a hearing on a showing of good cause, as defined in the statute.

This Decision shall become effective on SEP 17 2021.

It is so ORDERED AUG 18 2021



WILLIAM PRASIFKA, EXECUTIVE DIRECTOR
FOR THE MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS

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9 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
10 **DEPARTMENT OF CONSUMER AFFAIRS**
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12 In the Matter of the Accusation Against:

Case No. 800-2020-073474

13 **Hamid Tabatabai, M.D.**
14 **Franklin Square Hospital**
15 **Department of Psychiatry**
16 **9000 Franklin Square Drive**
Baltimore, MD 21237

A C C U S A T I O N

17 **Physician's and Surgeon's Certificate**
18 **No. C 52106,**

Respondent.

19
20
21 **PARTIES**

22 1. William Prasifka (Complainant) brings this Accusation solely in his official capacity
23 as the Executive Director of the Medical Board of California, Department of Consumer Affairs
24 (Board).

25 2. On October 21, 2005, the Medical Board issued Physician's and Surgeon's Certificate
26 Number C 52106 to Hamid Tabatabai, M.D. (Respondent). The Physician's and Surgeon's
27 Certificate was in full force and effect at all times relevant to the charges brought herein and will
28 expire on September 30, 2021, unless renewed.

JURISDICTION

1
2 3. This Accusation is brought before the Board, under the authority of the following
3 laws. All section references are to the Business and Professions Code (Code) unless otherwise
4 indicated.

5 A. Section 2227 of the Code provides, in part, that the Board may revoke, suspend for a
6 period not to exceed one year, or place on probation, the license of any licensee who has been
7 found guilty under the Medical Practice Act, and may recover the costs of probation monitoring.

8 B. Section 2234 of the Code provides, in part, that the Board shall take action against
9 any licensee who is charged with unprofessional conduct.

10 C. Section 2305 of the Code provides, in part, that the revocation, suspension, or other
11 discipline, restriction or limitation imposed by another state upon a license to practice medicine
12 issued by that state, or the revocation, suspension, or restriction of the authority to practice
13 medicine by any agency of the federal government, that would have been grounds for discipline
14 in California under the Medical Practice Act, constitutes grounds for discipline for unprofessional
15 conduct against the licensee in California.

16 D. Section 141 of the Code provides:

17 “(a) For any licensee holding a license issued by a board under the jurisdiction of a
18 department, a disciplinary action taken by another state, by any agency of the federal government,
19 or by another country for any act substantially related to the practice regulated by the California
20 license, may be a ground for disciplinary action by the respective state licensing board. A
21 certified copy of the record of the disciplinary action taken against the licensee by another state,
22 an agency of the federal government, or another country shall be conclusive evidence of the
23 events related therein.

24 (b) Nothing in this section shall preclude a board from applying a specific statutory
25 provision in the licensing act administered by the board that provides for discipline based upon a
26 disciplinary action taken against the licensee by another state, an agency of the federal
27 government, or another country.”

1 **CAUSE FOR DISCIPLINE**

2 **(Discipline, Restriction, or Limitation Imposed by Another State)**

3 4. Respondent Hamid Tabatabai, M.D. (Respondent) is subject to disciplinary action
4 under sections 2305 and/or 141 of the Code in that on November 18, 2020, the Maryland State
5 Board of Physicians (the Maryland Board) issued a Consent Order signed by Respondent.
6 Respondent's Maryland license was accordingly disciplined, restricted, and limited. The
7 circumstances are as follows:

8 5. At all times relevant to the underlying matter, Respondent was licensed to practice
9 medicine in the State of Maryland and practiced at a Maryland health care facility (the Facility).

10 6. On November 18, 2020, the Maryland Board issued a Consent Order (the Maryland
11 Order) regarding Respondent. A true and correct copy of the Maryland Order is attached as
12 Exhibit A. Respondent signed the Consent Order on November 14, 2020, which contained
13 several findings of fact.

14 7. The Maryland Order found that Respondent sexually harassed two female employees
15 (Staff Person 1 and Staff Person 2) over whom he exercised professional authority. Neither Staff
16 Person 1 nor Staff Person 2 was a physician. Respondent's behavior included unwanted
17 attention, commenting on their physical appearance, inappropriate disclosures, nonconsensual
18 touching, and improper remarks.

19 8. As set forth in the Maryland Order, Respondent worked at the Facility with Staff
20 Person 1 from 1996 to 2019. During the course of working together at the Facility, Respondent
21 commented on Staff Person 1's appearance and complimented her on how she smelled. For
22 example, Respondent told Staff Person 1 that blue clothing made her "very attractive" and
23 "excited" him. When commenting to Staff Person 1 about her appearance, the Respondent would
24 at times whisper, "I have to be quick so no one sees me." As a result of Respondent's statements,
25 Staff Person 1 adjusted her hair style, makeup, and clothing to prevent Respondent's unwanted
26 attention. Staff Person 1 also attempted to minimize contacts with Respondent.

27 9. Respondent initiated unwanted physical contact with Staff Person 1 when she was
28 alone in her office or when other staff were not present. Respondent regularly hugged and kissed

1 Staff Person 1 without her permission, which made her uncomfortable and avoidant. Respondent
2 kissed Staff Person 1 on the cheek approximately three to five times per month. Respondent
3 began to hug Staff Person 1 for longer periods of time and with increasing force over the course
4 of their working together at the Facility.

5 10. In September 2019, Respondent stated to Staff Person 1 that they should
6 “consummate” their “work marriage” when they were alone in her office with the door closed.
7 After making this sexual overture, Respondent approached Staff Person 1, hugged her, placed his
8 nose in her hair, smelled her hair, and kissed her on top of the head. During an interview with
9 staff from the Maryland Board, Respondent acknowledged that he “might have [kissed staff] on
10 the cheek.”

11 11. As set forth in the Maryland Order, Respondent worked at the Facility with Staff
12 Person 2 from 2010 to 2019.

13 12. During the course of working together, Respondent periodically kissed Staff Person 2
14 on the cheek when greeting her and frequently commented on her appearance. Staff Person 2
15 asked Respondent to refrain from discussing her appearance, yet he continued to make such
16 comments on at least a weekly basis. On a day that Staff Person 2 wore blue clothing to work,
17 Respondent came to the door of her office and stated, “Wow, oh, wow” before walking away. On
18 a separate occasion, Respondent stated to Staff Person 2, “I am glad you don’t get offended when
19 we talk like this.” During another interaction, Respondent stated to Staff Person 2 in the presence
20 of Staff Person 1 “[l]ook at the beautiful face that looks so tired.”

21 13. Around October 2018, Respondent stated to Staff Person 2 that he was “in love” with
22 her. The Respondent stated to Staff Person 2 that he could not stop thinking about her and that he
23 was feeling like an “eighteen-year-old boy.” Around November 2018, Respondent apologized to
24 Staff Person 2 for any discomfort his statements may have caused. Staff Person 2 stated to
25 Respondent that she could continue to work at the Facility if Respondent never again talked about
26 his feelings for her. In December 2018 or January 2019, Respondent learned that Staff Person 2
27 had discussed Respondent’s statements with her spouse. When Respondent asked Staff Person 2
28 what she had told her spouse, Staff Person 2 told Respondent not to question her again about her

1 marital communications. During the next ten months, Respondent asked Staff Person 2 on
2 multiple occasions about the private discussions she had about Respondent's statements and
3 conduct, including one incident where Respondent entered Staff Person 2's office, closed the
4 door, and stated, "Tell me again what you told your husband I said to you."

5 14. Staff Person 2 resigned, stating that Respondent's conduct towards her was a
6 contributing factor in her resignation. Upon learning from a Human Resources representative that
7 Staff Person 2 had resigned, the Respondent began crying and stated, "This is because of me."
8 The Facility initiated an investigation of sexual harassment and suspended Respondent pending
9 its investigation. Respondent voluntarily resigned in lieu of termination.

10 15. The Maryland Order concluded that Respondent's actions, as described below and in
11 the Maryland Order, constituted a violation of Maryland's licensing statute regarding
12 unprofessional conduct and a violation of Maryland's licensing regulation regarding sexual
13 misconduct.

14 16. The Maryland Order accordingly disciplined, restricted, and limited Respondent's
15 license, in that the Maryland Order required, among other items, that Respondent:

- 16 • be placed on probation for a minimum of three years;
- 17 • enroll in the Maryland Professional Rehabilitation Program;
- 18 • complete an approved course in maintenance of professional boundaries; and
- 19 • pay a \$1,000 civil fine.

20 17. The actions of the Maryland State Board of Physicians and the Maryland Order, as set
21 forth above and in the attached Maryland Order, constitute cause for discipline pursuant to
22 sections 2305 and/or 141 of the Code.

23 **PRAYER**

24 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
25 and that following the hearing, the Medical Board of California issue a decision:


26 1. Revoking or suspending Physician's and Surgeon's Certificate Number C 52106,
27 issued to Hamid Tabatabai, M.D.;

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- 2. Revoking, suspending or denying approval of Hamid Tabatabai, M.D.'s authority to supervise physician assistants and advanced practice nurses;
- 3. Ordering Hamid Tabatabai, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and
- 4. Taking such other and further action as deemed necessary and proper.

DATED: **JUN 17 2021**



WILLIAM PRASIFKA
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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EXHIBIT A

(Accusation No. 800-2020-073474)

IN THE MATTER OF
HAMID TABATABAI, M.D.

Respondent

License Number: D18739

* BEFORE THE
* MARYLAND STATE
* BOARD OF PHYSICIANS
* Case Number: 2220-0149B

* * * * *

CONSENT ORDER

On August 12, 2020, Disciplinary Panel B ("Panel B") of the Maryland State Board of Physicians (the "Board") charged **HAMID TABATABAI, M.D.** (the "Respondent"), License Number D18739, under the Maryland Medical Practice Act (the "Act"), Md. Code Ann., Health Occ. ("Health Occ.") §§ 14-101 *et seq.* (2014 Repl. Vol. & 2019 Supp.). On September 11, 2020, Panel B issued amended charges. Panel B charged the Respondent with violating the following provisions of the Act under Health Occ. § 14-404 and Health Occ. § 1-212:

Health Occ. § 14-404. License denial, suspension, or revocation

(a) *In general.*-- Subject to the hearing provisions of § 14-405 of this subtitle, a disciplinary panel, on the affirmative vote of a majority of the quorum of the disciplinary panel, may reprimand any licensee, place any licensee on probation, or suspend or revoke a license if the licensee:

- ...
(3) Is guilty of:
 - ...
(ii) Unprofessional conduct in the practice of medicine; [and/or]
 - ...
(33) Fails to cooperate with a lawful investigation conducted by the Board or a disciplinary panel[.]

Health Occ. § 1-212. Health occupations boards; regulations

- (a) Each health occupations board authorized to issue a license or certificate under this article shall adopt regulations that:
 - (1) Prohibit sexual misconduct; and

- (2) Provide for the discipline of a licensee or certificate holder found to be guilty of sexual misconduct.

The pertinent regulations promulgated by the Board provide the following:

COMAR 10.32.17.01 Scope.

This chapter prohibits sexual misconduct by health care practitioners.

COMAR 10.32.17.02 Definitions.

...
B. Terms Defined.

- (4) "Sexual harassment" means an unwelcome sexual advance, request for sexual favor, or other verbal or physical conduct of a sexual nature.

COMAR 10.32.17.03 Sexual Misconduct.

- A. Health care practitioners may not engage in sexual misconduct.
- B. Health Occupations Article . . . § 14-404(a)(3) . . . includes, but is not limited to, sexual misconduct.
- C. Sexual misconduct includes, but is not limited to:
 - (1) Engaging in sexual harassment of a patient, key third party, employee, student, or coworker regardless of whether the sexual harassment occurs inside or outside of a professional setting;
 - ...
 - (4) Discussing the health care practitioner's sexual problems, sexual likes or dislikes, or sexual fantasies[.].

On October 21, 2020, Panel B was convened as a Disciplinary Committee for Case Resolution ("DCCR") in this matter. Based on negotiations occurring as a result of this DCCR, the Respondent agreed to enter into this Consent Order, consisting of Findings of Fact, Conclusions of Law, Order, and Consent.

FINDINGS OF FACT

Panel B finds the following facts:

I. BACKGROUND

1. At all times relevant to these charges, the Respondent was and is licensed to practice medicine in the State of Maryland. The Respondent was originally licensed to practice medicine on November 20, 1975, under License Number D18739. The Respondent's license is current through September 30, 2021.
2. The Respondent is board-certified in Psychiatry with a sub-certification in Child Psychiatry.
3. At all times relevant to these charges, the Respondent practiced at a health care facility (the "Facility")¹ in Baltimore, Maryland.

II. THE REPORT

4. On or about October 10, 2019, the Board received a Mandated 10-Day Report (the "Report")² from the Facility stating that the Respondent had been suspended following a complaint of workplace harassment and thereafter resigned in lieu of termination.
5. After reviewing the Report, the Board initiated an investigation of this matter. In furtherance of the investigation, the Board interviewed under oath witnesses and subpoenaed³ the Respondent's human resources records. The results of the Board's investigation are set forth *infra*.

1 To ensure confidentiality, the names of any patients, coworkers, or health care facilities will not be identified in this document.

2 Pursuant to Health Occ. § 14-413(a)(1)(i), a hospital is required to submit a report to the Board within ten (10) days of a physician's resignation if there may be grounds for discipline under Health Occ. § 14-404.

3 See Health Occ. §§ 14-206(a), 14-404.1(i) (authorizing the Board to issue subpoenas "in connection with any investigation").

III. INVESTIGATIVE ALLEGATIONS

6. The Respondent worked at the Facility with Staff Person 1 ("Staff Person 1") from 1996 to 2019. The Respondent worked at the Facility with Staff Person 2 ("Staff Person 2") from 2010 to 2019. The Respondent was the medical director of the Child and Adolescent Inpatient Psychiatry Unit (the "Unit") of the Facility. The Respondent exercised authority over both Staff Person 1 and Staff Person 2. Staff Person 1 supervised Staff Person 2. The offices of both Staff Person 1 and Staff Person 2 were located on the same floor as the Unit the Respondent directed. Neither Staff Person 1 nor Staff Person 2 was a physician. The Respondent was aware that both Staff Person 1 and Staff Person 2 were married to individuals who did not work at the Facility.

A. Sexual Harassment of Facility Staff

7. The Board's investigation revealed that the Respondent sexually harassed Staff Person 1 and Staff Person 2, individuals over whom the Respondent exercised professional authority. The Respondent's behavior included unwanted attention, commenting on their physical appearance, inappropriate disclosures, nonconsensual touching, and improper remarks.

Staff Person 1

8. The Respondent and Staff Person 1 interacted almost daily until the mid-2000's. In or around 2006, Staff Person 1 changed positions within the Unit resulting in less frequent weekly interactions with the Respondent. During the course of working together in the Unit of the Facility, the Respondent commented on Staff Person 1's appearance and complimented her on how she smelled.

9. The Respondent stated to Staff Person 1 when she wore blue clothing that it made her "very attractive" and "excited" him. The Respondent asked Staff Person 1 why she never wore eye shadow and told her that he did not like her hair when she wore it straight. When commenting

to Staff Person 1 about her appearance, the Respondent would at times whisper, "I have to be quick so no one sees me." As a result of the Respondent's statements, Staff Person 1 adjusted her hair style, makeup, and clothing to prevent the Respondent's unwanted attention. Staff Person 1 also attempted to minimize contacts with the Respondent.

10. Approximately fifteen (15) years prior, the Respondent disclosed to Staff Person 1 marital difficulties he was having. Shortly thereafter, the Respondent expressed romantic feelings to Staff Person 1 as well as his desire for her to leave her husband in order to be with him.

11. During the course of working together in the Unit of the Facility, the Respondent initiated unwanted physical contact with Staff Person 1 when she was alone in her office or when other staff were not present. The Respondent regularly hugged and kissed Staff Person 1 without her permission, which made her uncomfortable and avoidant. The Respondent kissed Staff Person 1 on the cheek approximately three (3) to five (5) times per month. The Respondent began to hug Staff Person 1 for longer periods of time and with increasing force over the course of their working together at the Facility.

12. In September of 2019, the Respondent stated to Staff Person 1 that they should "consummate" their "work marriage" when they were alone in her office with the door closed. After making this sexual overture, the Respondent approached Staff Person 1, hugged her, placed his nose in her hair, smelled her hair, and kissed her atop the head.

13. On or about March 2, 2020, Board staff interviewed the Respondent under oath in the presence of his counsel, and the Respondent acknowledged that he "might have [kissed staff] on the cheek." The Respondent described his feelings for Staff Person 1, stating, "I think I had mentioned something about she and I liking each other a lot. Nothing happened between us. No

sex, nothing physical. But the feelings were there and I think I mentioned to her that I go home and feel guilty towards my wife."

Staff Person 2

14. The Respondent worked in the Unit with Staff Person 2 nearly five (5) days per week for approximately seven (7) years between 2012 and 2019. During the course of working in the Unit together, the Respondent periodically kissed Staff Person 2 on the cheek when greeting her and frequently commented on her appearance. Staff Person 2 asked the Respondent to refrain from discussing her appearance, yet he continued to make such comments on at least a weekly basis.

15. On a day that Staff Person 2 wore blue clothing to work, the Respondent came to the door of her office and stated, "Wow, oh, wow" before walking away. On a separate occasion, the Respondent stated to Staff Person 2, "I am glad you don't get offended when we talk like this." During another interaction, the Respondent stated to Staff Person 2 in the presence of Staff Person 1, "Look at the beautiful face that looks so tired."

16. In or around October of 2018, the Respondent stated to Staff Person 2 that he was "in love" with her. The Respondent stated to Staff Person 2 that he could not stop thinking about her and that he was feeling like an "eighteen-year-old boy." In or around November of 2018, the Respondent apologized to Staff Person 2 for any discomfort his statements may have caused. Staff Person 2 stated to the Respondent that she could continue to work at the Facility if he never again talked about his feelings for her. In December 2018 or January 2019, the Respondent learned that Staff Person 2 had discussed the Respondent's statements with her spouse. When the Respondent asked Staff Person 2 what she had told her spouse, Staff Person 2 told the Respondent not to question her again about her marital communications. During the next ten

(10) months, the Respondent asked Staff Person 2 on multiple occasions about the private discussions she had about the Respondent's statements and conduct.

17. In or around the spring of 2019, the Respondent discussed a sexually intimate matter with Staff Person 2. In or around April of 2019, the Respondent expressed to Staff Person 2 his fantasy of rescuing her. The Respondent stated to Staff Person 2 that "my fantasy never involved taking you to the Sheraton."

18. On or about September 6, 2019, the Respondent entered Staff Person 2's office, closed the door, and stated, "Tell me again what you told your husband I said to you."

19. On or about September 12, 2019, Staff Person 2 submitted her resignation to Staff Person 1 stating that the Respondent's conduct towards her was a contributing factor in her resignation. Staff Person 2 told Staff Person 1 that the Respondent made statements to her that made her uncomfortable. Staff Person 2 described the Respondent's conduct to Staff Person 1, who reported the information to the Facility's Human Resources personnel. Upon learning from a Human Resources representative that Staff Person 2 had resigned, the Respondent began crying and stated, "This is because of me."

20. The Facility initiated an investigation of the allegations. On or about September 27, 2019, the Facility suspended the Respondent pending its investigation of the sexual harassment claims. On or about October 4, 2019, the Respondent voluntarily resigned in lieu of termination.

21. The Respondent's actions, as described above, constitute, in whole or in part, a violation of the following provision of the Act under Health Occ. § 14-404(a): (3) Is guilty of: (ii) Unprofessional conduct in the practice of medicine.

CONCLUSIONS OF LAW

The Respondent's actions, as described above, constitute, in whole or in part, a violation of the following provisions of the Act under Health Occ. § 14-404(a): (3) Is guilty of: (ii) Unprofessional conduct in the practice of medicine. The charges related to 14-404(a)(33) are dismissed. The Respondent's actions, as described above are a violation of the Board's sexual misconduct regulations located in Code of Maryland Regulations 10.32.17.03A ([h]ealth care practitioners may not engage in sexual misconduct), promulgated pursuant to Health Occ. § 1-212(a)(1) (prohibiting sexual misconduct).

ORDER

It is thus by Disciplinary Panel B of the Board, hereby:

ORDERED that the Respondent, Hamid Tabatabai, M.D., License No. D18739, is **REPRIMANDED**; and it is further

ORDERED that the Respondent is placed on **PROBATION** for a minimum of three (3) years.⁴ During probation, the Respondent shall comply with the following terms and conditions of probation:

1. The Respondent shall enroll in the Maryland Professional Rehabilitation Program ("MPRP") as follows:
 - (a) Within five (5) business days of the effective date of this Consent Order, the Respondent shall contact MPRP to schedule a consultation for enrollment;

⁴ If the Respondent's license expires during the period of probation, the probation and any conditions will be tolled.

(b) Within fifteen (15) business days of the effective date of this Consent Order, the Respondent shall enter into a Participant Rehabilitation Agreement and Participant Rehabilitation Plan with MPRP;

(c) the Respondent shall fully and timely cooperate and comply with all MPRP's referrals, rules, and requirements, including, but not limited to, the terms and conditions of the Participant Rehabilitation Agreement(s) and Participant Rehabilitation Plan(s) entered with MPRP, and shall fully participate and comply with all therapy, treatment, evaluations, and screenings as directed by MPRP;

(d) the Respondent shall sign and update the written release/consent forms requested by the Board and MPRP, including release/consent forms to authorize MPRP to make verbal and written disclosures to the Board and to authorize the Board to disclose relevant information from MPRP records and files in a public order. The Respondent shall not withdraw his release/consent;

(e) the Respondent shall also sign any written release/consent forms to authorize MPRP to exchange with (i.e., disclose to and receive from) outside entities (including all of the Respondent's current therapists and treatment providers) verbal and written information concerning the Respondent and to ensure that MPRP is authorized to receive the medical records of the Respondent, including, but not limited to, mental health and drug or alcohol evaluation and treatment records. The Respondent shall not withdraw his release/consent;

(f) the Respondent's failure to comply with any of the above terms or conditions including terms or conditions of the Participant Rehabilitation Agreement(s) or Participant Rehabilitation Plan(s) constitutes a violation of this Consent Order;

and as a condition of Probation,

2. Within **SIX (6) MONTHS** of the effective date of this Consent Order, the Respondent must take and complete a Board-approved course in maintenance of professional boundaries. The following terms apply:
 - (a) it is the Respondent's responsibility to locate, enroll in and obtain the disciplinary panel's approval of the course before the course is begun;
 - (b) because of the COVID-19 pandemic, the disciplinary panel will accept an in-person course or a course taken over the internet;
 - (c) the Respondent must provide documentation to the disciplinary panel that the Respondent has successfully completed the course;
 - (d) the course may not be used to fulfill the continuing medical education credits required for license renewal;
 - (e) the Respondent is responsible for the cost of the course.
3. Within **ONE YEAR** of the effective date of this Consent Order, the Respondent shall pay a civil fine of \$1,000. The Payment shall be by money order or bank certified check made payable to the Maryland Board of Physicians and mailed to P.O. Box 37217, Baltimore, Maryland 21297. The Board will not renew or reinstate the Respondent's license if the Respondent fails to timely pay the fine to the Board; and it is further

ORDERED that the effective date of the Consent Order is the date the Consent Order is signed by the Executive Director of the Board or her designee. The Executive Director or her designee signs the Consent Order on behalf of the disciplinary panel which has imposed the terms and conditions of this Consent Order, and it is further

ORDERED that the Respondent is responsible for all costs incurred in fulfilling the terms and conditions of this Consent Order; and it is further


ORDERED that, if the Respondent allegedly fails to comply with any term or condition imposed by this Consent Order, the Respondent shall be given notice and an opportunity for a hearing. If the disciplinary panel determines there is a genuine dispute as to a material fact, the hearing shall be before an Administrative Law Judge of the Office of Administrative Hearings followed by an exceptions process before a disciplinary panel; and if the disciplinary panel determines there is no genuine dispute as to a material fact, the Respondent shall be given a show cause hearing before a disciplinary panel; and it is further

ORDERED that after the appropriate hearing, if the disciplinary panel determines that the Respondent has failed to comply with any term or condition imposed by this Consent Order, the disciplinary panel may reprimand the Respondent, place the Respondent on probation with appropriate terms and conditions, or suspend with appropriate terms and conditions, or revoke the Respondent's license to practice medicine in Maryland. The disciplinary panel may, in addition to one or more of the sanctions set forth above, impose a civil monetary fine on the Respondent; and it is further

ORDERED that this Consent Order is a public document. *See* Health Occ. §§ 1-607, 14-411.1(b)(2) and Gen. Prov. § 4-333(b)(6).

11/18/2020
Date

Signature on File

Christine A. Farrelly | U 
Executive Director
Maryland State Board of Physicians

CONSENT

I, Hamid Tabatabai, M.D., acknowledge that I have consulted with counsel before signing this document.

By this Consent, I agree to be bound by this Consent Order and all its terms and conditions and understand that the disciplinary panel will not entertain any request for amendments or modifications to any condition.

I assert that I am aware of my right to a formal evidentiary hearing, pursuant to Md. Code Ann., Health Occ. § 14-405 and Md. Code Ann., State Gov't §§ 10-201 *et seq.* concerning the pending charges. I waive this right and have elected to sign this Consent Order instead.

I acknowledge the validity and enforceability of this Consent Order as if entered after the conclusion of a formal evidentiary hearing in which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my behalf, and to all other substantive and procedural protections as provided by law. I waive those procedural and substantive protections. I acknowledge the legal authority and the jurisdiction of the disciplinary panel to initiate these proceedings and to issue and enforce this Consent Order.

I voluntarily enter into and agree to comply with the terms and conditions set forth in the Consent Order as a resolution of the charges. I waive any right to contest the Findings of Fact and Conclusions of Law and Order set out in the Consent Order. I waive all rights to appeal this Consent Order.

I sign this Consent Order, without reservation, and fully understand the language and meaning of its terms.

Signature on File

11/14/20
Date

Hamid Tabatabai, M.D.
Respondent

**SOLEMNLY ATTEST AND CERTIFY UNDER
PENALTY OF PERJURY ON 02-03-2021
THAT THE FORGOING DOCUMENT IS A
FULL, TRUE AND CORRECT COPY OF
THE ORIGINAL ON FILE IN MY OFFICE
AND IN MY LEGAL CUSTODY.**
Christine A. Ganelly
**EXECUTIVE DIRECTOR
MARYLAND BOARD OF PHYSICIANS**

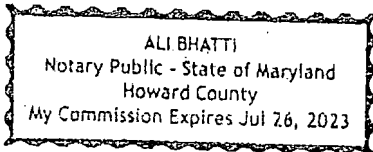
NOTARY

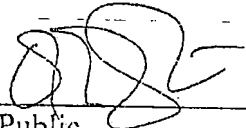
STATE OF MARYLAND

CITY/COUNTY OF HOWARD

I HEREBY CERTIFY that on this 14th day of NOVEMBER,
2020, before me, a Notary Public of the foregoing State and City/County, did personally appear
Hamid Tabatabai, M.D., and made oath in due form of law that signing the foregoing Consent
Order was his voluntary act and deed.

AS WITNESSETH my hand and seal.





Notary Public

My commission expires: 7/26/2023