

Trevia Hayden, MD

Harbhajan Ajrawat, MD., Chair  
Disciplinary Panel B  
Maryland State Board of Physicians  
4201 Patterson, Ave., 4th Floor  
Baltimore, MD 212215-2299

Re: Surrender of License to Practice Medicine  
Trevia Hayden, MD, License Number D53096  
Case Number: 2224-0026

Dear Dr. Ajrawat and Members of Disciplinary Panel B,

Please be advised that pursuant to Md. Code Ann., Health Occ. ("Health Occ.") §12-403, I have decided to **SURRENDER** my license to practice medicine in the State of Maryland, D53096, effective immediately due to my permanent medical disability. I retired permanently from the practice of Medicine October 31, 2023. I understand that upon my surrender of my license, I may not give medical advice or treatment to any individual with or without compensation, and cannot prescribe medications or otherwise engage in the practice of medicine in the State of Maryland as it is defined in the Maryland Medical Practice act (the "Act"), Health Occ § 14-101 *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 Disciplinary Panel B's ("Panel B") acceptance, becomes a **FINAL ORDER** of Panel B of the Maryland State Board of Physicians (the "Board").

I acknowledge that the Board received a referral from the Office of Controlled Substance Administration ("OCSA") stating that I am prescribing excessively high doses of benzodiazepines to patients, sometimes in combination with additional different high dose benzodiazepines. The board began an investigation of these allegations. To be clear, 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 the Board will advise the Federation of State Medical Boards and 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., Prov. §§ 4-101., and that this Letter of Surrender constitutes a disciplinary action by Panel B.

I affirm that I will provide access to and copies of medical records to my patients in compliance with Title 4, subtitle 3 of the Health General Article. I also agree to surrender my Controlled Dangerous Substance Registration to the Office of Controlled Substance Administration. I further recognize and agree that by submitting this Letter of Surrender, my License will remain surrendered unless and until the Board grants reinstatement. I further understand that if I ever file a petition for reinstatement, I will approach Panel B 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 am making clear that I have been advised of my right to be represented by an attorney of my choice throughout proceedings before Panel B, including the right to consult with an attorney prior to signing this Letter of Surrender. I understand both the nature of Panel B'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 made this decision knowingly and voluntarily.

Respectfully,

*Signature On File*

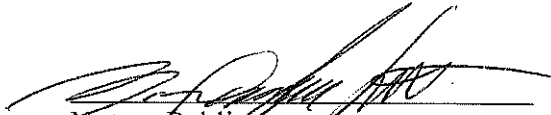
Trevia Hayden, MD

NOTARY

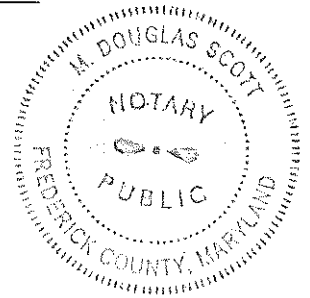
STATE OF Maryland  
CITY/COUNTY OF Frederick

I HEREBY CERTIFY that on this 29<sup>TH</sup> day of November, 2023, before me, a Notary Public of the City/County aforesaid, personally appeared Trevia Hayden, M.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: 07/16/2026



ACCEPTANCE

On behalf of Disciplinary Panel B, on this 1<sup>st</sup> day of December, 2023, I, Christine A. Farrelly, accept the **PUBLIC SURRENDER** of Trevia Hayden, M.D.'s license to practice medicine in the State of Maryland.

***Signature On File***

Christine A. Farrelly, Executive Director  
Maryland Board of Physicians