COMMONWEALTH OF MASSACHUSETTS

**BOARD OF REGISTRATION IN MEDICINE**

Middlesex, ss. Adjudicatory Case No. 2020-014

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

)

In the Matter of )

) **Order**

Sabrina Popp, M.D. )

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

On the date referenced below, at a duly convened meeting of the Board of Registration in Medicine (the "Board"), the Board considered the statement of the above-named physician setting forth the terms of resignation attached hereto and pursuant to 243 CMR 1.05(5)(a), during the pendency of an investigation by the Board.

Having determined that the resignation is in conformity with the requirements of 243 CMR 1.05(5)(a), the Board voted to accept the resignation of Dr. Popp’s license to practice medicine.

The Respondent shall provide a complete copy of this Resignation and Order within (10) days by certified mail, return receipt requested, or by hand delivery to the following designated entities: any in- or out-of-state hospital, nursing home, clinic, other licensed facility, or municipal, state, or federal facility at which she practices medicine; any in-or out-of-state health maintenance organization with whom she has privileges or any other kind of association; any state agency, in- or out-of-state, with which she has a provider contract; any in- or out-of-state medical employer, whether or not she practices medicine there; and the state licensing boards of all states in which she has any kind of license to practice medicine, and the Drug Enforcement Administration Boston Diversion Group and the DPH Drug Control Program. The Respondent shall also provide this notification to any such designated entities with which she becomes associated for the duration of this Resignation and Order. The Respondent is further directed to certify to the Board within ten (10) days that she has complied with this directive.

Date: March 5, 2020 Signed by Candace Lapidus Sloane, M.D.

Candace Lapidus Sloane, M.D.  
 Board Chair