COMMONWEALTH OF MASSACHUSETTS

Board of Registration in Medicine

	Adjudicatory No. 2013-007
In the Matter of) Richard G. Traister, M.D. Registration No. 46413)	
	RESIGNATION
I, Ri	ichard G. Traister, M.D., being duly sworn, depose and state:
1.	I desire to resign my license to practice medicine in the Commonwealth of Massachusetts pursuant to the terms of 243 CMR 1.05(5)(a).
2.	My resignation is tendered voluntarily.
3.	I realize that this resignation is a final act that deprives me of all privileges of registration and is not subject to reconsideration or judicial review.
4.	I will resign any other licenses contemporaneously with my resignation in Massachusetts, and I will make no attempt to seek licensure elsewhere.
5.	I understand that my resignation is a disciplinary action that is reportable to any national data reporting agency, pursuant to G.L. c. 112, §2.
Sign	ed under the penalties of perjury this 4th day of APRIL 2013.

Then personally appeared before me the above-named Lichard M.D. who signed the foregoing resignation in my presence and acknowledged said resignation to be his free act and deed.

Dated: 4 4 2013

Middlesex, ss

KRYSTLE A. LABONTE
Notary Public
Commonweal T. Of the Sachusetts
My Commission Expires
June 13, 2019

My Commission Expires: 0/13/2019