COMMONWEALTH OF MASSACHUSETTS

MIDDLESEX, ss. Board of Registration

in Medicine

Adjudicatory Case No.

)

In the Matter of )

ASHLEY E. AARON, M.D. )

)

Registration No. 276841 )

)

RESIGNATION

I, ASHLEY E. AARON, M.D., being duly sworn, depose and state:

1. I desire to resign my license to practice medicine and/or my inchoate right to renew said license in the Commonwealth of Massachusetts pursuant to the terms of 243 CMR 1.05(5)(b).

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 understand that my resignation is a disciplinary action that is reportable to any national data reporting agency, pursuant to G.L. c. 112, § 2, the Health Care Quality Improvement Act of 1986 (as amended), and Sections 1921 and 1128E of the Social Security Act.

Signed under the penalties of perjury this 4\_\_\_\_\_day of January , 2024.

Signed by Ashley E. Aaron

ASHLEY E. AARON, M.D.

Then personally appeared before me the above-named ASHLEY E. AARON, M.D., who signed the foregoing resignation in my presence and acknowledged said resignation to be her free act and deed.

Dated:1/4/24 Signed by Jessica D. Alston

Notary Public

My Commission Expires: February 28, 2027

Notary Public Seal  
Chatham County  
North Carolina