

COMMONWEALTH OF MASSACHUSETTS

Middlesex, SS.

Board of Registration in Medicine

Docket No. AC18-002

_____)
 In the Matter of)
)
 QUNHAO ZHANG, LIC. AC.)
)
 Registration No. 205901)
 _____)

AGREEMENT NOT TO PRACTICE ACUPUNCTURE

1. I agree to cease my practice of acupuncture in the Commonwealth of Massachusetts effective immediately.

2. This Agreement will remain in effect until the Committee on Acupuncture (“Committee”) determines that this Agreement should be modified or terminated; or until the Committee takes other action against my license to practice acupuncture; or until the Committee takes final action on the above-referenced matter.

3. I understand that this Agreement is a public document and may be subject to a press release.

4. I understand that this action will be reported to all databases as required.

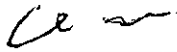
5. Any violation of this Agreement shall be prima facie evidence for immediate summary suspension of my license to practice acupuncture.

6. I understand that by voluntarily agreeing not to practice acupuncture in the Commonwealth of Massachusetts pursuant to this Agreement, I do not waive my right to contest any allegations brought against me by the Committee and my signature to this Agreement does not constitute any admissions on my part. Nothing contained in this Agreement shall be construed as an admission or acknowledgment by me as to wrongdoing of any kind in the practice of acupuncture or otherwise.

7. I agree to provide a complete copy of this Agreement, within twenty-four (24) hours of notification of the Committee’s acceptance of this Agreement, by certified mail, return receipt requested, or by hand delivery to the following designated entities: any in-state or out-of-state hospital, nursing home, clinic, other licensed facility, or municipal, state, or federal facility at which I practice acupuncture; any in-state or out-of-state health maintenance organization with which I

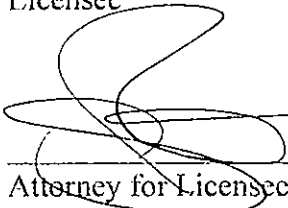
have privileges or any other kind of association; any state agency, in-or-out-of state, with which I have a provider contract; any in-state or out-of-state employer, whether or not I practice acupuncture there; and the state licensing agencies of all states in which I have any kind of license to practice acupuncture. I will certify to the Committee within seven (7) days that I have complied with this directive. The Committee expressly reserves the authority to independently notify, at any time, any of the entities designated above or any other affected entity, of any action it has taken.

8. This Agreement represents the entire agreement between the parties at this time.



Licensee

12/12/18
Date



Attorney for Licensee

1/2/19
Date

Accepted by the Committee on Acupuncture this 13th day of December, 2018



Committee Chair or Designee

Ratified by vote of the Committee on Acupuncture this 3 day of January, 2019.



Committee Chair or Designee