COMMONWEALTH OF MASSACHUSETTS

Middlesex, SS. 

Board of Registration in Medicine

Adjudicatory Case No. 2018-035

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In the Matter of
______________________________
DANIEL MAROTTA, M.D.

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STATEMENT OF ALLEGATIONS

The Board of Registration in Medicine (Board) has determined that good cause exists to believe the following acts occurred and constitute a violation for which a licensee may be sanctioned by the Board. The Board therefore alleges that Daniel Marotta, M.D. (Respondent) has practiced medicine in violation of law, regulation, and/or good and accepted medical practice, as set forth herein. The investigative docket number associated with this order to show cause is Docket No. 16-448.

FINDINGS OF FACT

1. The Respondent was born on March 21, 1983. He graduated from Saint George’s University School of Medicine in Grenada and has held a limited license to practice medicine in Massachusetts since July of 2015 under certificate number 263954. The Respondent is currently a third-year psychiatric resident at Baystate Medical Center (hereinafter “Baystate”).

2. On January 10, 2016, the Respondent was arrested for operating under the influence of alcohol in Northampton, MA. He later admitted that there were sufficient facts to find him guilty of operating under the influence of alcohol. The matter was continued without a finding (CWOF) for a period of one year at the conclusion of which the charge was dismissed.

3. In February of 2016 the Respondent self-referred to Physician Health Services of the Massachusetts Medical Society (hereinafter “PHS”).
4. In March of 2016 the Respondent took a voluntary leave of absence from his residency program at Baystate to attend a substance abuse treatment program.

5. On May 19, 2016, the Respondent voluntarily entered into a Substance Abuse Monitoring contract with PHS. The contract required him, among other things, to remain alcohol free and submit to random alcohol screens.

6. In June of 2016 the Respondent submitted a Limited License Renewal Application. In his application the Respondent disclosed that he had been charged with operating under the influence of alcohol and suffered from an alcohol use disorder which interfered with his ability to practice medicine. Additionally, the Respondent reported that he had entered into a voluntary contract with PHS.

7. On June 30, 2016, the Board approved the Respondent’s Limited License Renewal Application upon the conditions that the Respondent comply with his PHS Substance Abuse Monitoring contract and submit weekly progress reports from his residency program director.

8. On October 17, 2016, the Respondent failed to report for his randomly scheduled PHS alcohol screen. He went the following day and submitted a sample which was negative.

9. On November 2, 2016, the Respondent failed to report for his randomly scheduled PHS alcohol screen. He went the following day and submitted a sample which was negative.

10. On November 30, 2016, the Respondent failed to report for his randomly scheduled PHS alcohol screen. He went the following day and submitted a sample which was negative.

11. On January 25, 2017, the Respondent consumed three alcoholic beverages while on his honeymoon. On February 3, 2017, the Respondent disclosed to PHS and his workplace monitor that he had consumed alcohol in violation of his PHS contract.

12. In May of 2017 the Respondent took a voluntary leave of absence from his residency program at Baystate to attend a substance abuse treatment program.
Legal Basis for Proposed Relief

A. Pursuant to Levy v. Board of Registration in Medicine, 378 Mass. 519 (1979); Raymond v. Board of Registration in Medicine, 387 Mass. 708 (1982), and Sugarman v. Board of Registration in Medicine, 422 Mass. 338 (1996), the Board may discipline a physician upon proof satisfactory to a majority of the Board that said physician lacks good moral character and has engaged in conduct that undermines the public confidence in the integrity of the medical profession.

B. Pursuant to G.L. c. 112, §5, ninth par. (c) and 243 CMR 1.03(5)(a)3 the Board may discipline a physician upon proof satisfactory to a majority of the Board that said physician engaged in conduct that places into question his competence to practice medicine.

The Board has jurisdiction over this matter pursuant to G.L. c. 112, §§ 5, 61 and 62. This adjudicatory proceeding will be conducted in accordance with the provisions of G.L. c. 30A and 801 CMR 1.01.

Nature of Relief Sought

The Board is authorized and empowered to order appropriate disciplinary action, which may include revocation or suspension of the Respondent's license to practice medicine. The Board may also order, in addition to or instead of revocation or suspension, one or more of the following: admonishment, censure, reprimand, fine, the performance of uncompensated public service, a course of education or training, or other restrictions upon the Respondent's practice of medicine.

Order

Wherefore, it is hereby ORDERED that the Respondent show cause why the Board should not discipline the Respondent for the conduct described herein.
By the Board of Registration in Medicine,

Candace Lapidus Sloane, M.D.
Board Chair

Date: August 9, 2018