

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF HEALTH
HEALTH REGULATION AND LICENSING ADMINISTRATION**



IN THE MATTER OF:

MARK J. MCCLURE, DDS

Respondent.

NOTICE OF SUMMARY ACTION TO SUSPEND LICENSE

To: Mark J. McClure, DDS
c/o Dane Keller Rutledge
150 E. 39th St., Suite 903
New York, NY 10016

Mark J. McClure, DDS
National Integrated Health Associates
5225 Wisconsin Ave., N.W., Suite 402
Washington, D.C. 20015

In accordance with the provisions of the District of Columbia Administrative Procedure Act, D.C. Code § 2-509; the District of Columbia Health Occupations Revision Act of 1985, D.C. Code § 3-1205.15(a); and 17 DCMR § 4118, the District of Columbia Department of Health (D.C. Health) gives you notice of the summary suspension of your Dental License No. DEN5755, under D.C. Code § 3-1205.15(a).

Your license is summarily suspended effective immediately upon the receipt of this notice. If you wish to appeal this summary suspension of your license, you must file a request for a hearing within 72 hours after service of this notice. Should you request a hearing, one will be held within 72 hours of a timely request, and a decision will be rendered within 72 hours after the close of the hearing. The request for a hearing must be submitted in writing to Carla Williams, Senior Assistant General Counsel, Department of Health. The request may be submitted by email to Carla.Williams@dc.gov or by mail to 899 North Capital Street, N.E., 6th Floor, Washington, D.C. 20002. Ms. Williams can be reached at (202) 442-5977.

The District of Columbia is represented by the Office of the Attorney General for the District of Columbia. A copy of your hearing request and any pleading or other written communication addressed to the Department must also be delivered to Anthony Celo* and Alycia Hogenmiller**, Assistant Attorneys General, at the Office of the Attorney General for the District of Columbia, Civil Enforcement Section, 400 Sixth Street, N.W., Suite 10100, Washington, D.C. 20001. AAG Celo can be reached at (202) 735-7559 or by email at Anthony.Celo@dc.gov and AAG Hogenmiller can be reached at (202) 256-9692 or by email at Alycia.Hogenmiller@dc.gov.

You may appear personally at the hearing and you may be represented by legal counsel. You have the right to produce witnesses and evidence, to cross-examine witnesses against you, to examine evidence produced, and to have subpoenas issued to require the production of witnesses and evidence.

All hearings are conducted before an administrative judge in the English language. If you or any witnesses to be called are deaf, have a hearing impediment or cannot readily understand or communicate the spoken English language, an application may be made to the Administrative Law Judge for the appointment of a qualified interpreter.

A request for a hearing will not stay the suspension of your license.

The charge upon which the summary suspension is based is set forth below.

Charge I:

Your sexual harassment and sexual assault of a patient, and your practice outside the acceptable standards of care for the practice of dentistry presents an imminent danger to the health and safety of the public, for which the Board can take summary action to suspend your license under D.C. Code § 3-1205.15(a)(1)(D).

A. May 24, 2021 Signed Consent Order

On May 24, 2021, you signed a Consent Order with the Board to resolve a February 11, 2019 Notice of Intent to Take Disciplinary Action. Since entering the Consent Order, your dental license status is PROBATION. And you agreed to, among other things,

- have a Board-approved dentist supervise you during your two-period probationary period;

* Admitted to practice only in Pennsylvania and Ohio. Practicing in the District of Columbia under the direct supervision of Charles J. Coughlin, a member of the D.C. Bar under D.C. Court of Appeals Rule 49(c)(4).

** Admitted to practice only in Virginia. Practicing in the District of Columbia under the direct supervision of Charles J. Coughlin, a member of the D.C. Bar, under D.C. Court of Appeals Rule 49(c)(4).

- not offer or create a treatment plan or perform treatment or any service for any part of the body or any condition below a patient's collarbone or in a patient's ear or shoulder;
- not perform neural therapy, Autonomic Response Testing (ART), Allergy Elimination Technique (AET), or administer DMPS, which is 2-3 dimercapto-1-propanesulfonic acid and is an agent to remove mercury from the body;
- not perform neuralgia inducing cavitation osteonecrosis removal;
- not inject any substance into a patient using a stabident injection for any purpose other than to act as an anesthetic to perform dental procedures;
- not inject gold, silver, ozone, arnica montana, quercetin, bromelain or zell lymphs into patients; and
- practice within the scope of practice for dentistry.

Between June 2021 until February 2022, you practiced without the required monitoring in violation of the Consent Order. And since February 2022, you have had a practice monitor who conducts reviews once a month and is not present in the office every day to oversee your actions.

B. Sexual Harassment, Sexual Assault, and Practice Outside the Scope of Dentistry with Then-Patient K.G.

On April 6, 2021, the District of Columbia Board of Dentistry's (the Board) Health Licensing Specialist received an anonymous complaint from the Board hotline alleging you sexually harassed and sexually assaulted your female patient, K.G., during dental procedures, office visits, and outside of the office. The complaint and the subsequent investigation revealed that K.G. was your patient from September 2017 through May 2020. While purportedly treating her, you engaged in a pattern of diagnosing her with conditions beyond the scope of your practice as a dentist. Initially, you treated her with procedures not approved by the Food and Drug Administration (FDA) or American Dental Association (ADA). You then escalated your practice and made statements to develop a relationship with K.G., ultimately sexually assaulting her under the guise of performing pseudoscientific quasi-medical procedures.

You began treating K.G. for an infected root canal in September 2017, and administered diagnoses, tests, and treatments beyond the scope of your dentistry practice, including: 1) confirming Dr. H.K's prior diagnosis of K.G. with mercury poisoning and heavy metal toxicity; 2) recommending the removal of metal fillings to remove mercury; 3) suggesting a DMPS to remove mercury from her body; 4) performing ART and AET; and 5) treating her for general parasites in her gut.

As additional diagnoses and treatment beyond the scope of your dentistry practice, in February 2018, you told K.G. she may be a good candidate for

neural therapy (muscle testing), which requires injections at various points in the body. Over three years, you performed neural therapy injections on K.G. one or two times a week. For example, you injected K.G.'s episiotomy scar twice, which is a scar created by a surgical cut made at the opening of the vagina during childbirth. You also injected K.G.'s spine and the area around her liver and kidneys. On April 7, 2018, you injected around K.G.'s head, calling the area "the crown of thorns."

During her treatments from February 2020 through May 2020, there were times when you administered injections into K.G.'s pelvic bone and vaginal area, claiming there were heavy metals inhibiting her libido. You would perform a test in her vaginal area where you would place your fingers outside the vaginal area. K.G. would be seated in the dental chair with her pants and underwear removed and a gown covering her. K.G. said she thought it was strange she would need to have injections in her vaginal area for a dental procedure but that she needed to get her dental work done.

During one office visit, you claimed K.G. had blockage in her vagina and that you needed to "test" various areas of her vagina to determine where to inject. You placed your fingers on K.G.'s vulva, opened K.G.'s vagina, and injected the inside of her vagina. During another office visit, you told K.G. you had no gown for her to wear while she received spinal injections. You instead had K.G. remove her shirt and hold it in front of her chest while you injected her. After the injections, you moved in front of K.G. and stared at her. You also gave K.G. procaine shots, which made her drowsy, relaxed, and in a trance-like state. On at least one occasion, after that shot, you said that despite her body showing no blockages, you wanted to perform a pelvic block and attempted to unbutton and unzip K.G.'s pants until she told you to stop.

Throughout your treatment of K.G., you also performed 25 psychokinesiology sessions with her, which was beyond the scope of your practice as a dentist. Psychokinesiology involved testing K.G. for emotional components to her symptoms inhibiting her treatment. You asked K.G. questions and observed whether her muscles reacted to identify any emotional trigger. You used this procedure to repeatedly ask questions inappropriate for a dentist.

In early 2018, during a dental procedure, you told K.G. "you are the soul of my aborted daughter." During the next psychokinesiology session, you tested K.G.'s body for the soul of your aborted daughter and held K.G. in your arms like a baby. While holding K.G., you put your hand up her sweatshirt and rubbed her back. After this incident, your wife began calling K.G. and said you had engaged in a similar pattern with other women.

You also developed your relationship with K.G. by asking for favors, such as giving you a ride home after appointments from Washington, D.C. to Frederick, Maryland and asking her to give you interior design advice for your

proposed new office. Once while K.G. was driving home, you told her you badly needed to go to the bathroom, and while K.G. looked for an exit, you pulled out your penis and urinated into a water bottle.

On separate occasions, you told K.G.:

- You masturbated most nights.
- You were a “master at oral sex.”
- If you saw a hot girl, you would sometimes try to remember what they looked like so you could “mind-fuck them later.”
- “In our next life I want to be lying down next to you, but with you on top and me on the bottom.”

K.G. said you prescribed numerous medications to her, including Xanax and Zolpidem (Ambien). Although there is no record of these prescriptions in your dental records for K.G., a review of pharmacy records confirmed that you prescribed the medications to K.G., who explained that she received the following prescriptions:

- 6/24/18: Nizonide 500 for the treatment of “general parasites in the gut. . .”
- 9/7/18: Artesun 60 mg Injectable for the treatment of “parasites.” According to the complaint, she was provided a prescription of this medication, which was later injected by the respondent in “multiple places in my body.”
- 10/16/18: Biltricide 600 mg
- 11/02/18: Daraprim 50 mg
- 12/27/18: Pyrimetlamine 25 mg

When asked to recall why you prescribed the various medications throughout the dental care, K.G. said she had a history of Lyme disease. K.G. also claimed she had liver flukes and was treated for babesia and toxoplasmosis.

On September 10, 2020, K.G. reported the sexual assault to her primary care physician, Dr. H.K., M.D., who is your mentee. According to K.G., Dr. H.K. told her not to report you, or her “life will go straight to hell” and that you would pursue a civil suit and K.G. would lose everything. And Dr. H.K., K.G., and you met at your office. You and Dr. H.K. told K.G. that if she reported the allegations, K.G. “will ruin it for other patients that need neural therapy” and will ruin your life.

C. Keisha Marie Hall

On December 13, 2021, the Board received a complaint from Keisha Marie Hall, who worked at your practice, National Integrated Health Associates (NIHA) for 13 years until December 13, 2021, as a Front Desk Administrator

and Financial Product Coordinator responsible for billing accounts of the dental and medical supplies. Ms. Hall's complaint and the subsequent investigation revealed that you still perform muscle testing, AET, and ART. According to Ms. Hall, you "will have the patient hold instruments (vials/tubes) in their hands; the tubes will indicate any allergic reactions, Lyme disease or mercury for example." And you still inject patients with ozone and "desensitize the patient before [you] perform[] the mercury removal or the indications of mercury." You list AET and ART as dental office visits in the chart and code these procedures as "neurological reprogramming." Those procedures are used as anti-fungal treatment and to detect yeast and muscle resistance. And Ms. Hall stated that there were 21 patients who received these treatments either directly from you or from another NIHA employee under your supervision and based on your explicit direction. Finally, you also keep handwritten notes in a separate file cabinet and do not include these notes in the patient's electronic medical records. These practices demonstrate that you have continued pseudoscientific practices since entering into the Consent Order.

Additionally, the Board received complaints from another former employee of your office who also said you are still practicing outside the scope of your dental license and that you hide your conduct by not documenting the procedures in patient records. Instead, you use vague terms in the records and keep a separate filing system of handwritten notes called "outcome cards" to conceal the unauthorized procedures. The Board has subpoenaed your records in response to these complaints, and your office denied knowing about any "outcome card" and produced no outcome cards in response to the subpoena. And according to Ms. Hall, NIHA staff have been in the process of removing information from the dental records and shredding patient documents since November 2021.

D. Other Complaints and Records

Review of your dental records revealed that on May 25, 2021, you performed allergy elimination testing on patient N.S. You are listed as the provider of record for this procedure. On October 14, October 27, November 6, November 12, December 8, December 29, 2021 and January 24, 2022, you performed neurologic reprogramming on patient A.N. These records further demonstrate your continued pseudoscientific practices since entering the Consent Order.

According to one complainant, neurological programming is a new term being used for neural therapy, which is the procedure you performed on K.G. and is a procedure you are prohibited from performing under the Consent Order and because it is outside the scope of practice for dentistry. However, the patient records do not identify you as the provider for the service and only list "NIHA Provider." You were directed to provide information about the NIHA Provider

performing the procedure, but you refused to provide the information, in violation of the directive and 17 DCMR § 4213.4(a)(9).

Please note under 17 DCMR § 4103.2, your failure to appear at the time and place set for the hearing, either in person or through counsel, or both, will not preclude the Health Regulation and Licensing Administration's proceeding in this matter.

May 27, 2022
DATE

Sharon Williams Lewis
SHARON WILLIAMS LEWIS, DHA, RN-BC, CPM
Senior Deputy Director
Department of Health
Health Regulation and Licensing Administration