

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF PROFESSIONAL LICENSING  
BOARD OF MEDICINE  
DISCIPLINARY SUBCOMMITTEE

In the Matter of

SAMUEL MARK SHOR, M.D.  
License No. 43-01-500735  
Respondent.

File No. 43-25-000139

CONSENT ORDER

On January 24, 2025, the Department of Licensing and Regulatory Affairs executed an Administrative Complaint charging Respondent with violating the Public Health Code, MCL 333.1101 *et seq.*

Respondent has admitted that the facts alleged in the Complaint are true and constitute violation(s) of the Public Health Code. The Michigan Board of Medicine's Disciplinary Subcommittee (DSC) has reviewed this Consent Order and Stipulation and agrees that the public interest is best served by resolution of the outstanding Complaint.

Therefore, IT IS FOUND that the facts alleged in the Complaint are true and constitute violation(s) of MCL 333.16221(b)(x) and (f).

Accordingly, IT IS ORDERED that for the cited violations of the Public Health Code:

Respondent's license to practice medicine in the state of Michigan is LIMITED for a minimum of one (1) day, commencing on the effective date of this Order.

The terms of limitation shall be as follows:

1. **Respondent shall not engage in the practice of medicine in the state of Michigan until** Respondent provides written documentation from the Virginia Board of Medicine that is satisfactory to the Department verifying Respondent has fully complied with the terms of discipline imposed by the Virginia Amended Order dated October 22, 2024, and that Respondent holds a full and unencumbered license to practice medicine in the Commonwealth of Virginia.
2. Respondent shall report any change in the status of Respondent's Virginia medical license to the Department electronically, as set forth below, within 30 days of such change.

Upon receipt of proof that is satisfactory to the Department that Respondent has complied with the terms of limitation of this Order, Respondent's limited license in the state of Michigan shall be automatically reclassified to a full and unlimited status, PROVIDED Respondent has paid the fine as set forth below, has complied with the terms of this Order and has not violated the Public Health Code.

Respondent is FINED \$500.00 to be paid to the State of Michigan within 60 days of the effective date of this Order. The fine **shall be paid electronically** through Respondent's [MiPLUS account](#) **OR** by mail with a check or money order directly to: Department of Licensing and Regulatory Affairs, Enforcement Division, Compliance Section, P.O. Box 30189, Lansing, MI 48909. If the fine is paid by mail, the check or money order shall be made payable to the State of Michigan and shall clearly display File Number 43-25-000139.

Respondent shall upload reports and other documents to the EDOC Record found under the Enforcement tab in Respondent's [MiPLUS account](#) or send as an email attachment to [BPL-Monitoring@michigan.gov](mailto:BPL-Monitoring@michigan.gov). Questions, requests for approval, or other communications shall be emailed to [BPL-Monitoring@michigan.gov](mailto:BPL-Monitoring@michigan.gov).

Respondent shall be solely responsible for payment of all costs incurred in complying with the terms of this Order.

If Respondent fails to pay the fine under the terms of this Order or fails to comply with any other term of this Order, Respondent's license shall be automatically suspended for a minimum of one (1) day. If, within six (6) months of the suspension of the license, Respondent complies with the terms of this Order, the license shall be automatically reinstated.

If Respondent's license remains suspended for more than six (6) months, reinstatement is not automatic. If Respondent applies for reinstatement of the license, application for reinstatement shall be in accordance with sections MCL 333.16245 and 333.16247.

If Respondent violates any provision of this Order, or fails to complete any term of this Order, the DSC may take disciplinary action pursuant to Mich Admin Code, R 338.1632 and MCL 333.16221(h).

This Order shall be effective 30 days from the date signed by the DSC's Chairperson or authorized representative, as set forth below.

**MICHIGAN BOARD OF MEDICINE**

By: Lauren Brown for \_\_\_\_\_  
Chairperson, Disciplinary Subcommittee

Dated: May 21, 2025

## STIPULATION

1. The facts alleged in the Complaint are true and constitute violation(s) of MCL 333.16221(b)(x) and (f).
  
2. Respondent understands and intends that by signing this Stipulation Respondent is waiving the right, pursuant to the Public Health Code, the rules promulgated thereunder, and the Administrative Procedures Act, MCL 24.201 *et seq.*, to require the Department to prove the charges set forth in the Complaint by presentation of evidence and legal authority, and Respondent is waiving the right to appear with an attorney and such witnesses as Respondent may desire to present a defense to the charges.
  
3. This matter is a public record required to be published and made available to the public pursuant to the Michigan Freedom of Information Act, MCL 15.231 *et seq.*, and this action will be reported to the National Practitioner Data Bank and any other entity as required by state or federal law.
  
4. The Department's representative is free to discuss this matter with the DSC and recommend acceptance of the resolution set forth in the Order.
  
5. This Order is approved as to form and substance by Respondent and the Department and may be entered as the final order of the DSC in this matter.

6. This proposal is conditioned upon acceptance by the DSC. Respondent and the Department expressly reserve the right to further proceedings without prejudice should this Order be rejected.

AGREED TO BY:



Madison Edmunds, Analyst  
Regulation Section I  
Enforcement Division

Dated: 3/13/2025

AGREED TO BY:



Samuel Mark Shor, M.D.  
Respondent

Dated: 3/12/05

MRE/lfm

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF PROFESSIONAL LICENSING  
BOARD OF MEDICINE  
DISCIPLINARY SUBCOMMITTEE

In the Matter of

SAMUEL MARK SHOR, M.D.  
License No. 43-01-500735,  
Respondent.

File No. 43-25-000139

ADMINISTRATIVE COMPLAINT

The Michigan Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, complains against Respondent as follows:

1. The Michigan Board of Medicine is an administrative agency established by the Public Health Code, MCL 333.1101 *et seq.* Pursuant to MCL 333.16226, the Board's Disciplinary Subcommittee (DSC) is empowered to discipline persons for violations of the Public Health Code.

2. Respondent is currently licensed to practice medicine in the state of Michigan. Respondent's address of record with the Department is in Reston, Virginia.

3. On October 22, 2024, the Virginia Board of Medicine (Virginia Board) executed an Amended Order (Order), that, in part, reprimanded and placed Respondent's medical license on probation for three (3) years, with terms and conditions. The Virginia Board action was based on the care and treatment rendered by Respondent to patient A

from approximately December 2008 through March 2019. A copy of the Order, marked Exhibit A, is attached, and incorporated.

4. Respondent failed to notify the Department of the action taken by the Virginia Board within 30 days after the date of the action.

#### COUNT I

The action by the Virginia Board, as set forth above, constitutes a final adverse administrative action by a licensure, registration, disciplinary, or certification board involving the holder of, or an applicant for, a license or registration regulated by another state or a territory of the United States, in violation of MCL 333.16221(b)(x).

#### COUNT II

Respondent's conduct, as set forth above, evidences a failure to notify the Department of the disciplinary action by the Virginia Board within 30 days after the date of the action, as required by MCL 333.16222(4), in violation of MCL 333.16221(f).

RESPONDENT IS NOTIFIED that, pursuant to MCL 333.16231(8), Respondent has 30 days from the date of receipt of this Complaint to submit a written response to the allegations contained in it. Pursuant to MCL 333.16192(2), Respondent is deemed to be in receipt of the Complaint three (3) days after the date of mailing listed in the attached proof of service. The written response shall be submitted by email to the Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing to

[LARA-BPL-RegulationSection@michigan.gov](mailto:LARA-BPL-RegulationSection@michigan.gov). If unable to submit a response by email, Respondent may submit by regular mail to the **Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, P.O. Box 30670, Lansing, MI 48909.**

Respondent's failure to submit an answer within 30 days is an admission of the allegations in this Complaint. If Respondent fails to answer, the Department shall transmit this Complaint directly to the Board's Disciplinary Subcommittee to impose a sanction, pursuant to MCL 333.16231(9).

Dated: 1/24/2025

Attachment

  
\_\_\_\_\_  
Madison Edmunds, Analyst  
Regulation Section I  
Enforcement Division

MRE/lfm

**PUBLIC HEALTH CODE (EXCERPT)**  
**Act 368 of 1978**

**333.16221 Investigation of licensee, registrant, or applicant for licensure or registration; hearings, oaths, and testimony; complaint; grounds for proceeding under MCL 333.16226.**

Sec. 16221. Subject to section 16221b, the department shall investigate any allegation that 1 or more of the grounds for disciplinary subcommittee action under this section exist, and may investigate activities related to the practice of a health profession by a licensee, a registrant, or an applicant for licensure or registration. The department may hold hearings, administer oaths, and order the taking of relevant testimony. After its investigation, the department shall provide a copy of the administrative complaint to the appropriate disciplinary subcommittee. The disciplinary subcommittee shall proceed under section 16226 if it finds that 1 or more of the following grounds exist:

(a) Except as otherwise specifically provided in this section, a violation of general duty, consisting of negligence or failure to exercise due care, including negligent delegation to or supervision of employees or other individuals, whether or not injury results, or any conduct, practice, or condition that impairs, or may impair, the ability to safely and skillfully engage in the practice of the health profession.

(b) Personal disqualifications, consisting of 1 or more of the following:

(i) Incompetence.

(ii) Subject to sections 16165 to 16170a, substance use disorder as that term is defined in section 100d of the mental health code, 1974 PA 258, MCL 330.1100d.

(iii) Mental or physical inability reasonably related to and adversely affecting the licensee's or registrant's ability to practice in a safe and competent manner.

(iv) Declaration of mental incompetence by a court of competent jurisdiction.

(v) Conviction of a misdemeanor punishable by imprisonment for a maximum term of 2 years; conviction of a misdemeanor involving the illegal delivery, possession, or use of a controlled substance; or conviction of any felony other than a felony listed or described in another subparagraph of this subdivision. A certified copy of the court record is conclusive evidence of the conviction.

(vi) Lack of good moral character.

(vii) Conviction of a criminal offense under section 520e or 520g of the Michigan penal code, 1931 PA 328, MCL 750.520e and 750.520g. A certified copy of the court record is conclusive evidence of the conviction.

(viii) Conviction of a violation of section 492a of the Michigan penal code, 1931 PA 328, MCL 750.492a. A certified copy of the court record is conclusive evidence of the conviction.

(ix) Conviction of a misdemeanor or felony involving fraud in obtaining or attempting to obtain fees related to the practice of a health profession. A certified copy of the court record is conclusive evidence of the conviction.

(x) Final adverse administrative action by a licensure, registration, disciplinary, or certification board involving the holder of, or an applicant for, a license or registration regulated by another state or a territory of the United States, by the United States military, by the federal government, or by another country. A certified copy of the record of the board is conclusive evidence of the final action.

(xi) Conviction of a misdemeanor that is reasonably related to or that adversely affects the licensee's or registrant's ability to practice in a safe and competent manner. A certified copy of the court record is conclusive evidence of the conviction.

(xii) Conviction of a violation of section 430 of the Michigan penal code, 1931 PA 328, MCL 750.430. A certified copy of the court record is conclusive evidence of the conviction.

(xiii) Conviction of a criminal offense under section 83, 84, 316, 317, 321, 520b, 520c, 520d, or 520f of the Michigan penal code, 1931 PA 328, MCL 750.83, 750.84, 750.316, 750.317, 750.321, 750.520b, 750.520c, 750.520d, and 750.520f. A certified copy of the court record is conclusive evidence of the conviction.

(xiv) Conviction of a violation of section 136 or 136a of the Michigan penal code, 1931 PA 328, MCL 750.136 and 750.136a. A certified copy of the court record is conclusive evidence of the conviction.

(xv) Conviction of a violation of section 90 of the Michigan penal code, 1931 PA 328, MCL 750.90, or a violation of a state or federal crime that is substantially similar to the violation described in this subparagraph. A certified copy of the court record is conclusive evidence of the conviction.

(c) Prohibited acts, consisting of 1 or more of the following:

(i) Fraud or deceit in obtaining or renewing a license or registration.

(ii) Permitting a license or registration to be used by an unauthorized person.

(iii) Practice outside the scope of a license.

(iv) Obtaining, possessing, or attempting to obtain or possess a controlled substance or a drug as that term

is defined in section 7105 without lawful authority; or selling, prescribing, giving away, or administering drugs for other than lawful diagnostic or therapeutic purposes.

(d) Except as otherwise specifically provided in this section, unethical business practices, consisting of 1 or more of the following:

(i) False or misleading advertising.

(ii) Dividing fees for referral of patients or accepting kickbacks on medical or surgical services, appliances, or medications purchased by or in behalf of patients.

(iii) Fraud or deceit in obtaining or attempting to obtain third party reimbursement.

(e) Except as otherwise specifically provided in this section, unprofessional conduct, consisting of 1 or more of the following:

(i) Misrepresentation to a consumer or patient or in obtaining or attempting to obtain third party reimbursement in the course of professional practice.

(ii) Betrayal of a professional confidence.

(iii) Promotion for personal gain of an unnecessary drug, device, treatment, procedure, or service.

(iv) Either of the following:

(A) A requirement by a licensee other than a physician or a registrant that an individual purchase or secure a drug, device, treatment, procedure, or service from another person, place, facility, or business in which the licensee or registrant has a financial interest.

(B) A referral by a physician for a designated health service that violates 42 USC 1395nn or a regulation promulgated under that section. For purposes of this subdivision, 42 USC 1395nn and the regulations promulgated under that section as they exist on June 3, 2002 are incorporated by reference. A disciplinary subcommittee shall apply 42 USC 1395nn and the regulations promulgated under that section regardless of the source of payment for the designated health service referred and rendered. If 42 USC 1395nn or a regulation promulgated under that section is revised after June 3, 2002, the department shall officially take notice of the revision. Within 30 days after taking notice of the revision, the department shall decide whether or not the revision pertains to referral by physicians for designated health services and continues to protect the public from inappropriate referrals by physicians. If the department decides that the revision does both of those things, the department may promulgate rules to incorporate the revision by reference. If the department does promulgate rules to incorporate the revision by reference, the department shall not make any changes to the revision. As used in this sub-subparagraph, "designated health service" means that term as defined in 42 USC 1395nn and the regulations promulgated under that section and "physician" means that term as defined in sections 17001 and 17501.

(v) For a physician who makes referrals under 42 USC 1395nn or a regulation promulgated under that section, refusing to accept a reasonable proportion of patients eligible for Medicaid and refusing to accept payment from Medicaid or Medicare as payment in full for a treatment, procedure, or service for which the physician refers the individual and in which the physician has a financial interest. A physician who owns all or part of a facility in which the physician provides surgical services is not subject to this subparagraph if a referred surgical procedure the physician performs in the facility is not reimbursed at a minimum of the appropriate Medicaid or Medicare outpatient fee schedule, including the combined technical and professional components.

(vi) Any conduct by a licensee or registrant with a patient while the licensee or registrant is acting within the health profession for which the licensee or registrant is licensed or registered, including conduct initiated by a patient or to which the patient consents, that is sexual or may reasonably be interpreted as sexual, including, but not limited to, sexual intercourse, kissing in a sexual manner, or touching of a body part for any purpose other than appropriate examination, treatment, or comfort.

(vii) Offering to provide practice-related services, such as drugs, in exchange for sexual favors.

(viii) A violation of section 16655(4) by a dental therapist.

(f) Failure to notify under section 16222(3) or (4).

(g) Failure to report a change of name or mailing address as required in section 16192.

(h) A violation, or aiding or abetting in a violation, of this article or of a rule promulgated under this article.

(i) Failure to comply with a subpoena issued pursuant to this part, failure to respond to a complaint issued under this article, article 7, or article 8, failure to appear at a compliance conference or an administrative hearing, or failure to report under section 16222(1) or 16223.

(j) Failure to pay an installment of an assessment levied under the insurance code of 1956, 1956 PA 218, MCL 500.100 to 500.8302, within 60 days after notice by the appropriate board.

(k) A violation of section 17013 or 17513.

(l) Failure to meet 1 or more of the requirements for licensure or registration under section 16174.

- (m) A violation of section 17015, 17015a, or 17515.
- (n) Failure to comply with section 9206(3).
- (o) A violation of section 5654 or 5655.
- (p) A violation of section 16274.
- (q) A violation of section 17020 or 17520.
- (r) A violation of the medical records access act, 2004 PA 47, MCL 333.26261 to 333.26271.
- (s) A violation of section 17764(2).
- (t) Failure to comply with the terms of a practice agreement described in section 17047(2)(a) or (b), 17547(2)(a) or (b), or 18047(2)(a) or (b).
- (u) A violation of section 7303a(2).
- (v) A violation of section 7303a(4) or (5).
- (w) A violation of section 7303b.
- (x) A violation of section 17754a.
- (y) Beginning January 1, 2021, a violation of section 24507 or 24509.

**History:** 1978, Act 368, Eff. Sept. 30, 1978;—Am. 1986, Act 174, Imd. Eff. July 7, 1986;—Am. 1986, Act 195, Imd. Eff. July 8, 1986;—Am. 1986, Act 319, Imd. Eff. Dec. 26, 1986;—Am. 1987, Act 178, Imd. Eff. Nov. 19, 1987;—Am. 1989, Act 15, Imd. Eff. May 15, 1989;—Am. 1993, Act 79, Eff. Apr. 1, 1994;—Am. 1993, Act 133, Eff. Apr. 1, 1994;—Am. 1995, Act 196, Imd. Eff. Nov. 22, 1995;—Am. 1996, Act 273, Eff. Mar. 31, 1997;—Am. 1996, Act 540, Imd. Eff. Jan. 15, 1997;—Am. 1996, Act 594, Eff. Mar. 31, 1997;—Am. 1998, Act 109, Eff. Mar. 23, 1999;—Am. 1998, Act 227, Imd. Eff. July 3, 1998;—Am. 2000, Act 29, Imd. Eff. Mar. 15, 2000;—Am. 2002, Act 402, Imd. Eff. June 3, 2002;—Am. 2003, Act 234, Imd. Eff. Dec. 29, 2003;—Am. 2004, Act 48, Imd. Eff. Apr. 1, 2004;—Am. 2004, Act 214, Eff. Oct. 12, 2004;—Am. 2011, Act 222, Imd. Eff. Nov. 15, 2011;—Am. 2012, Act 499, Eff. Mar. 31, 2013;—Am. 2012, Act 501, Eff. Jan. 1, 2013;—Am. 2013, Act 268, Imd. Eff. Dec. 30, 2013;—Am. 2014, Act 97, Eff. July 1, 2014;—Am. 2014, Act 411, Eff. Mar. 30, 2015;—Am. 2016, Act 379, Eff. Mar. 22, 2017;—Am. 2017, Act 75, Eff. Oct. 9, 2017;—Am. 2017, Act 246, Imd. Eff. Dec. 27, 2017;—Am. 2017, Act 247, Imd. Eff. Dec. 27, 2017;—Am. 2017, Act 249, Imd. Eff. Dec. 27, 2017;—Am. 2018, Act 463, Eff. Mar. 27, 2019;—Am. 2020, Act 135, Imd. Eff. July 8, 2020;—Am. 2020, Act 232, Imd. Eff. Oct. 22, 2020;—Am. 2023, Act 47, Eff. Sept. 27, 2023;—Am. 2023, Act 209, Eff. Feb. 13, 2024.

**Compiler's note:** Section 3 of Act 174 of 1986 provides: "This amendatory act shall only apply to contested cases filed on or after July 1, 1986."

Section 2 of Act 319 of 1986 provides: "Section 16221(e)(iv) of Act No. 368 of the Public Acts of 1978, as added by this amendatory act, shall take effect April 1, 1987."

**Popular name:** Act 368