

VOLUNTARY SURRENDER OF CERTIFICATE  
TO PRACTICE MEDICINE AND SURGERY

I, Edward T. Juler, M. D., am aware of my rights to representation by counsel, the right of being formally charged and having a formal adjudicative hearing, and do hereby freely execute this document and choose to take the actions described herein.

I, Edward T. Juler, M. D., do hereby voluntarily, knowingly, and intelligently surrender all rights to practice medicine under my certificate to practice medicine and surgery, No. 13872, to the Ohio State Medical Board.

I understand that as a result of the surrender herein that I am no longer permitted to practice medicine and surgery in any form or manner in the State of Ohio.

I agree that I shall be ineligible for, and shall not apply for, reinstatement of certificate to practice medicine and surgery No. 13872, or issuance of any other certificate pursuant to Chapters 4730. and 4731., Ohio Revised Code, on or after the date of signing this Voluntary Surrender of Certificate to Practice Medicine and Surgery.

I hereby authorize the State Medical Board of Ohio to enter upon its Journal an Order revoking my certificate to practice medicine and surgery, No. 13872, in conjunction with which I expressly waive the provision of Section 4731.22(B), Ohio Revised Code, requiring that six (6) Board Members vote to revoke said certificate, and further expressly and forever waive all rights as set forth in Chapter 119., Ohio Revised Code, including but not limited to my right to counsel, right to a hearing, right to present evidence, right to cross-examine witnesses, and right to appeal the Order of the Board revoking my certificate to practice medicine and surgery.

I stipulate and agree that I am taking the action described herein in lieu of formal disciplinary proceedings pursuant to Section 4731.22(B) Ohio Revised Code.

ROBERT W. WORTH  
ATTORNEY AND COUNSEL

Signed this 16<sup>th</sup> day of November, 1987 at the office of \_\_\_\_\_  
Edward T. Juler, M.D.

8:21 NOV 19 1987  
OHIO STATE MEDICAL BOARD

Edward T. Juler

Joyce A. Masteller  
WITNESS

Robert W. Worth, Atty.  
WITNESS

SEAL

ROBERT W. WORTH, Attorney at Law  
NOTARY PUBLIC - STATE OF OHIO  
My Commission expires on 08/31/92  
State Succession 447221 & G.

Robert W. Worth  
Notary Public

STATE OF OHIO  
THE STATE MEDICAL BOARD  
Suite 510  
65 South Front Street  
Columbus, Ohio 43215

May 13, 1983

Edward T. Juler, M.D.  
4140 Hamilton Avenue  
Cincinnati, OH 45233

Dear Doctor Juler:

In accordance with Chapter 119., Ohio Revised Code, you are hereby notified that the State Medical Board of Ohio intends to determine whether or not to limit, revoke, suspend, refuse to register or reinstate your certificate to practice medicine and surgery or to reprimand or place you on probation for the following reason:

You are unable to practice according to acceptable and prevailing standards of care by reason of illness, excessive use of alcohol, excessive use of controlled substances, drugs, or chemicals, or as a result of a mental or physical condition.

Pursuant to Section 4731.22(B)(15), Ohio Revised Code, effective August 27, 1982, the Ohio Medical Board may limit, revoke, suspend, refuse to register or reinstate a certificate or reprimand or place on probation the holder of a certificate for one or more of the reasons listed above.

Further, Section 4731.22(B)(16), Ohio Revised Code, as in effect prior to August 27, 1982, authorizes the Board to limit, reprimand, revoke, suspend, place on probation, refuse to register, or reinstate a certificate upon a finding of inability to practice according to acceptable and prevailing standards of care by reason of illness, excessive use of alcohol, excessive use of controlled substances, chemicals, or as a result of a physical condition.

Pursuant to Chapter 119., Ohio Revised Code, you are hereby advised that you are entitled to a hearing in this matter. If you wish to request such hearing, that request must be made within thirty (30) days of the time of mailing of this notice.

You are further advised that you are entitled to appear at such hearing in person, or by your attorney, or you may present your position, arguments, or contentions in writing, and that at the hearing you may present evidence and examine witnesses appearing for or against you.

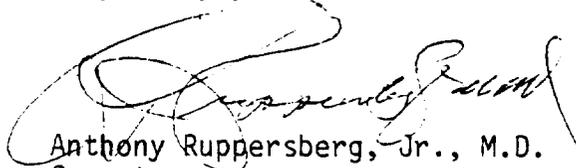
STATE OF OHIO  
THE STATE MEDICAL BOARD

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In the event that there is no request for such hearing made within thirty (30) days of the time of mailing of this notice, the State Medical Board may, in your absence and upon consideration of this matter, determine whether or not to limit, revoke, suspend, refuse to register or reinstate your certificate to practice medicine and surgery or to reprimand or place you on probation.

Enclosed for your examination are copies of Section 4731.22, Ohio Revised Code as in effect prior to August 27, 1982 and as in effect after August 27, 1982.

Very truly yours,



Anthony Ruppertsberg, Jr., M.D.  
Secretary

AR:ls

Enclosures

CERTIFIED MAIL NO. P354 447 868  
RETURN RECEIPT REQUESTED