

JUL 15 2009

**STATE OF OHIO  
THE STATE MEDICAL BOARD  
VOLUNTARY RETIREMENT FROM THE  
PRACTICE OF MEDICINE AND SURGERY**

I, Andrew John Nutini, 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, Andrew John Nutini, M.D., do hereby voluntarily, knowingly, and intelligently retire from the practice of medicine and surgery, effective upon the last date of signature below.

I, Andrew John Nutini, M.D., do hereby voluntarily, knowingly and intelligently surrender my renewal card in connection with my certificate to practice medicine and surgery, License # 35.052780, to the State Medical Board of Ohio [Board].

I understand that as a result of the surrender herein 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 or restoration of certificate to practice medicine and surgery License # 35.052780 or issuance of any other certificate pursuant to the authority of the State Medical Board of Ohio, on or after the date of signing this Voluntary Retirement from the Practice of Medicine and Surgery. Any such attempted reapplication shall be considered null and void and shall not be processed by the Board.

I, Andrew John Nutini, M.D., hereby release the State Medical Board of Ohio, its members, employees, agents and officers, jointly and severally, from any and all liability arising from the within matter.

This document shall be considered a public record as that term is used in Section 149.43, Ohio Revised Code. Further, this information may be reported to appropriate organizations, data banks and governmental bodies. I, Andrew John Nutini, M.D., acknowledge that my social security number will be used if this information is so reported and agree to provide my social security number to the Board for such purposes.

Voluntary Retirement  
Andrew John Nutini, M.D.

I stipulate and agree that I am taking the action described herein in lieu of further investigation by the Board related to a possible violation of Section 4731.22(B)(19), Ohio Revised Code, as I am permanently disabled due to a neurologic disorder.

**EFFECTIVE DATE**

It is expressly understood that this Voluntary Retirement is subject to ratification by the Board prior to signature by the Secretary and Supervising Member and shall become effective upon the last date of signature below.

Andrew J. Nutini M.D.  
ANDREW JOHN NUTINI, M.D.

Lance A. Talmage M.D.  
LANCE A. TALMAGE, M.D.  
Secretary

July 12<sup>th</sup> 2009  
DATE

8-12-09  
DATE

Raymond J. Albert  
RAYMOND J. ALBERT  
Supervising Member

8/12/09  
DATE

Mark R. Blackmer  
MARK R. BLACKMER  
Enforcement Attorney

July 20, 2009  
DATE

MEDICAL BOARD  
JUL 15 2009