

**Before the  
New Hampshire Board of Medicine  
Concord, New Hampshire 03301**

In the Matter of:  
**Roger Ian Hardy, M.D.**  
**Licensee No.: 8890**

**VOLUNTARY SURRENDER OF LICENSE**

Recognizing that professional misconduct allegations are now pending against me before the New Hampshire Board of Medicine ("Board"), I, Roger Ian Hardy, M.D., hereby voluntarily surrender my New Hampshire license (#8890) effective on the date that the Board accepts this offer of voluntary surrender.

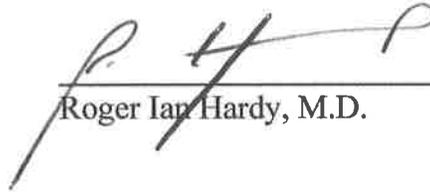
By voluntarily surrendering my license, I understand that:

1. I relinquish all rights and privileges to practice medicine in the State of New Hampshire effective upon the Board's acceptance of this voluntary surrender.
2. I acknowledge that this license surrender has occurred during a Board investigation and in settlement of pending disciplinary allegations of inappropriately touching patients in a sexual manner and touching the breast of a female employee.
3. On April 23, 2014, the Board issued an Emergency Order of Suspension and Notice of Hearing.
4. I admit to no violations of RSA 329:17, VI, and dispute the factual allegations; I recognize the fact that my voluntary surrender will be distributed by the Board as a disciplinary action.

5. Should I again seek licensure in the State of New Hampshire, I must meet and shall bear the burden of proving compliance with all of the standards and prerequisites then required by the Board for new applicants, including professional character requirements.
6. I understand that the pending disciplinary allegations shall be resolved in any future licensure application I may submit in New Hampshire. I hereby specifically waive any statute of limitations or laches defense, which might then be available as to these misconduct allegations.
7. I understand that if the Board chooses to accept my surrender of license, this document shall be distributed to all relevant licensing authorities and professional societies in the same manner as a final decision making specific finding of professional misconduct. I recognize that the fact of my voluntary surrender will be distributed by the Board as a disciplinary action. I further understand that this document shall become a permanent part of my file, and will be maintained by the Board as a public document.
8. I voluntarily submit this surrender of license to the Board and state that no promises or representations have been made to me other than those terms and conditions expressly stated herein.

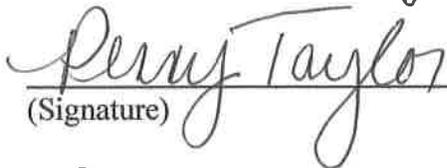
New Hampshire Board of Medicine  
In the Matter of Roger Ian Hardy, M.D.  
Voluntary Surrender of License

IN WITNESS WHEREOF, I hereby affix my signature on this 3<sup>rd</sup> day of April,  
2014.

  
\_\_\_\_\_  
Roger Ian Hardy, M.D.

ACCEPTED BY THE BOARD OF MEDICINE on this 7<sup>th</sup> day of May,  
2014.

Effective Date: May 9, 2014

  
\_\_\_\_\_  
(Signature)

PENNY TAYLOR  
\_\_\_\_\_  
(Print or Type Name)  
Authorized Representative of the  
New Hampshire Board of Medicine