

**STATE OF NEW HAMPSHIRE
BOARD OF MEDICINE**

In the matter of:
Pierre Angier, D.O.
Lic. #16812

DOCKET #2022-MED-010

VOLUNTARY SURRENDER OF LICENSE

In order to avoid the delay and expense of further proceedings before the New Hampshire Board of Medicine ("Board"), I, Pierre Angier, D.O., per Med 412.03, do hereby voluntarily surrender my New Hampshire license (#16812) to practice medicine, effective as of the date I sign this document.

By voluntarily surrendering my license, I understand that:

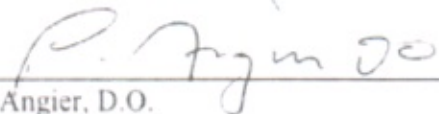
1. I relinquish all rights and privileges to practice medicine in the State of New Hampshire, effective as of the date I sign this document.
2. The Board has commenced an investigation into my practice pursuant to RSA 329:18. The Board has not issued a Notice of Hearing.
3. This license surrender has occurred in settlement of pending allegations concerning interactions with patients and staff.
4. I deny the allegations and admit to no violations of any statutes, including RSA 329:17, VI, or any administrative rules or ethics provisions adopted by the Board.
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. The pending 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, including, but not limited to, those based on RSA 332-G:8 and 9. I also waive any potential issues regarding a lack of a speedy hearing or spoliation of the evidence.

7. Once this this document goes into effect, it will be reported as discipline and distributed to all relevant licensing authorities and professional societies in the same manner as a final decision making specific findings of professional misconduct.
8. This document shall become a permanent part of my file, and will be maintained by the Board as a public document.
9. 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.
10. I have had the opportunity to seek and obtain the advice of an attorney of my choosing in connection with my decision to sign this document.
11. I am of sound mind and not under the influence of any substance that would impair my judgment at the time I sign this document.

FOR RESPONDENT

4/4/23
Date



Pierre Angier, D.O.

FOR THE BOARD*/

New Hampshire Board of Medicine
In the Matter of Pierre Angier, D.O.
Voluntary Surrender of License

ACCEPTED BY THE BOARD OF MEDICINE on this 5th day of April, 2021st

Date: _____

Ellen Baker
(Signature)

Emily R Baker, MD
(Print or Type Name)

Authorized Representative of the
New Hampshire Board of Medicine

* Board members recused: