GOVERNMENT OF THE DISTRICT OF COLUMBIA
BOARD OF MEDICINE

IN RE:	:
MARY JACOBSON, M.D.	:
License No.: MD048920	:
Respondent	:

CONSENT ORDER

This matter comes before the District of Columbia Board of Medicine (the "Board" or "D.C. Board") pursuant to the Health Occupations Revision Act ("HORA") (D.C. Official Code § 3-1201.01, *et seq.*). The HORA authorizes the Board to regulate the practice of medicine in the District of Columbia. The Board has broad jurisdiction to impose a variety of disciplinary sanctions upon a finding of a violation of the HORA. D.C. Official Code, § 3-1201.03; *Mannan v. District of Columbia Board of Medicine*, 558 A.2d 329, 333 (D.C. 1989). The Council of the District of Columbia, in amending the HORA, "intended to strengthen enforcement of its licensing laws." *Davidson v. District of Columbia Board of Medicine*, 562 A.2d 109, 113 (D.C. 1989). And the HORA "was designed to 'address modern advances and community needs *with the paramount consideration of protecting the public interest.*'" *Joseph v. District of Columbia Board of Medicine*, 587 A.2d 1085, 1088 (D.C. 1991) (*quoting* Report of the D.C. Council on Consumer and Regulatory Affairs on Bill 6-317, at 7 (November 26, 1985)) (emphasis added by court).

Background

Dr. Mary Jacobson (Respondent) has been licensed to practice medicine in the District of Columbia since December 9, 2020. Her license expires April 30, 2026. Respondent is licensed

> Each board, subject to the right of a hearing as provided by this subchapter, on an affirmative vote of a quorum of its appointed members may take one or more of the disciplinary actions…against any person permitted by this subchapter to practice a health occupation regulated by the board in the District **who is disciplined by a licensing or disciplinary authority…of any jurisdiction for conduct that would be grounds for disciplinary action under this section**. (emphasis added)

Under the law, a physician licensed in the District must conform to standards of acceptable conduct and prevailing practice within a health profession or be subject to disciplinary action. *See* D.C. Official Code §§ 3-1205.14(a)(26). Respondent's conduct in Mississippi did not conform to the standards of acceptable conduct in the practice of medicine, so as to constitute a violation of D.C. Official Code §3-1205.14(a)(26) had that conduct occurred in the District of Columbia. Respondent also violated D.C. Official Code §3-1205.14(a)(25)(violated any District of Columbia of federal law, regulation or rule related to the practice of a health profession or drugs) in that she violated D.C. Official Code § 3-201.05, the District's law on telehealth, and 17 DCMR § 4618, the telemedicine regulations for physicians which require, among other things, the creation of a physician-patient relationship using real-time telemedicine, and a patient evaluation prior to providing any treatment or prescribing any medications. Accordingly, Respondent's conduct has provided the Board with a basis in law and fact to take action against Respondent under the authority of D.C. Official Code §§ 3-1205.14(a)(3), (25) and (26).

The Board has a primary duty to protect the public and ensure that all physicians who practice in the District, including those who practice through telemedicine, do so in accordance with the standard of care necessary to competently treat District residents. The Board recognizes that the Mississippi Board has already required Respondent to take appropriate continuing medical education regarding professional conduct.

ORDER

Based on the foregoing, Respondent and the Board agree that:

1. Respondent shall pay a fine of five thousand dollars ($5000.00). This fine is due within three months of the date Respondent signs this Consent Order. Respondent shall pay by check or money order made out to "D.C. Treasurer" and mail it to: D.C. Board of Medicine, Health Systems and Preparedness Administration, DC Health, 2nd Floor, 2201 Shannon Place SE, Washington DC 20020. A copy of this Consent Order should accompany the payment.

2. Respondent shall not use any of the CME awarded for completion of the PROBE course to satisfy the CME requirements for renewal of her medical license.

3. If Respondent fails to satisfactorily fulfill the terms of this Consent Order, the Board may take further disciplinary action against Respondent's license and Respondent will be provided with a notice and an opportunity for a hearing.

4. Respondent shall comply with all laws, regulations and policies of the District of Columbia Board of Medicine.

ORDERED, that this is a public document.

DISTRICT OF COLUMBIA BOARD OF MEDICINE

May 18, 2026
Date

By: Andrea Anderson, MD, MEd, FAAFP
Chairperson

AGREEMENT OF RESPONDENT

By signing this public consent order, I agree to accept and abide by its terms. I acknowledge its validity and acknowledge that I have agreed to the terms set forth in this agreement. I fully acknowledge that by signing this consent order, I am waiving my right to confront witnesses, to give testimony, to call witnesses on my behalf, and to all other substantive and procedural protections provided by law. I also recognize that I am waiving my right to appeal any adverse ruling by the Board that might have followed any such hearing. By signing this settlement agreement, I waive all such rights.

I have had the opportunity to review this document and to seek the advice of my own legal counsel. I choose to sign this consent order willingly and without reservation and am fully aware of its meaning and effect.

1 MAY 2026
Date

Mary Jacobson, MD
Mary Jacobson, M.D.
License No.:MD048920

Sworn to and subscribed before me this _____ day of _____, 2026.

_____
Notary Public

This Consent Order shall be deemed a public document and shall be distributed as appropriate.

CALIFORNIA JURAT WITH AFFIANT STATEMENT **GOVERNMENT CODE § 8202**

☒ See Attached Document (Notary to cross out lines 1–6 below)
☐ See Statement Below (Lines 1–6 to be completed only by document signer[s], not Notary)

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____

Signature of Document Signer No. 1 *Signature of Document Signer No. 2 (if any)*

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of San Mateo

LUIS GUERRA
Notary Public - California
San Mateo County
Commission # 2534804
My Comm. Expires Oct 9, 2029

Place Notary Seal and/or Stamp Above

Subscribed and sworn to (or affirmed) before me

on this 1st day of May, 20 26,
by *Date* *Month* *Year*

(1) Mary Jacobson, M.D.

(and (2) _____),
Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature _____
Signature of Notary Public

OPTIONAL

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Consent Order

Document Date: No date Number of Pages: Five

Signer(s) Other Than Named Above: No other signers

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