

**State of New Hampshire  
Board of Medicine  
Concord, New Hampshire**

In the Matter of:  
**Conor Shea, M.D.**  
**License No. 16462**  
**(Adjudicatory Proceedings)**

Docket No. \_\_\_\_\_

**PRELIMINARY AGREEMENT FOR PRACTICE RESTRICTIONS**

The New Hampshire Board of Medicine ("Board") first granted Conor Shea, M.D. ("Dr. Shea" or "Respondent") a State of New Hampshire license to practice medicine on January 8, 2014. Dr. Shea holds license number 16462 and practices Internal Medicine in Nashua, New Hampshire. Dr. Shea enters into a Preliminary Agreement with the Board as follows:

1. Recognizing that I am currently under investigation by the Board, I, Conor Shea, M.D., hereby voluntarily agree to abide by certain restrictions to my license to practice in the State of New Hampshire.

2. I voluntarily agree not to practice medicine, not to write prescriptions, and not to treat or see patients in the State of New Hampshire until such time as I have contracted with the New Hampshire Physician's Health Program ("NPHP") and have received written clearance to resume the practice medicine from both the Director of the NPHP and the Board.

3. I voluntarily agree that a copy of my contract with the NPHP shall be provided to the Board, under seal, for its confidential review. In addition, any written clearance to resume the practice of medicine that I receive from the Director of the NPHP shall be provided to the Board.

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4. I admit to no violations of RSA 329:17, VI or any other laws, statutes or regulations.

5. I hereby specifically waive any statute of limitations or laches defense, which might then be available as to any misconduct allegations that may be pending against me, due to the duration of this agreement.

6. 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.

7. I voluntarily enter into this agreement with the Board and state that no promises or representations have been made to me other than those terms and conditions expressly stated herein.

**FOR RESPONDENT**

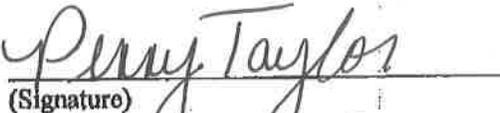
Date: 7/27/2014

  
Conor Shea, M.D.  
Respondent

**FOR THE BOARD\***

This Preliminary Agreement is hereby accepted in accordance with the binding terms and conditions set forth above.

Date: 8-14-2014

  
(Signature)  
PENNY TAYLOR  
Name  
Authorized Representative of the  
New Hampshire Board of Medicine

\*/ Louis Rosenthal, MD Recused members not participating