MEDICAL BOARD OF CALIFORNIA
Newsletter

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Legislative Update

Board-sponsored legislation:

AB 1127 (Brownley, Chapter 115) - **Failing to attend physician interview**
This Medical Board-sponsored bill makes it a violation of unprofessional conduct for a physician, who is the subject of an investigation by the Medical Board of California (the Board), to repeatedly fail, absent good cause, to attend and participate in an interview scheduled by mutual agreement of the physician and the Board.

AB 1267 (Halderman, Chapter 169) - **Disclosure of inactive status due to incarceration**
This Medical Board-sponsored bill authorizes the Board to automatically place a physician's license on inactive status when a physician is incarcerated after the conviction of a misdemeanor for the period of incarceration. This bill allows the Board to disclose the reason for the inactive status on the Board's Internet Web site. This bill requires the Board to change the physician's license status back to its prior or appropriate status within five business days of receiving notice that the physician is no longer incarcerated. This bill requires the Board to adopt regulations to specify the type of notice required to be submitted to the Board.

SB 541 (Price, Chapter 339) - **Utilizing expert consultants**
This bill is co-sponsored by the Medical Board and the Contractors State License Board and enables all boards and bureaus in the Department of Consumer Affairs (DCA) to continue to utilize expert consultants, using a simplified contract and an expedited contracting process, without having to go through the formal contracting process. This bill specifies that nothing in this bill shall be construed to expand the scope of practice of an expert consultant providing services.

Physician's Practice:

SB 360 (DeSaulnier, Chapter 418) - **Controlled Substance Utilization Review and Evaluation System (CURES)**
This bill makes changes to existing law regarding security printers for prescription forms for controlled substance prescriptions, as specified. This bill revises the CURES Prescription Drug Monitoring Program to allow

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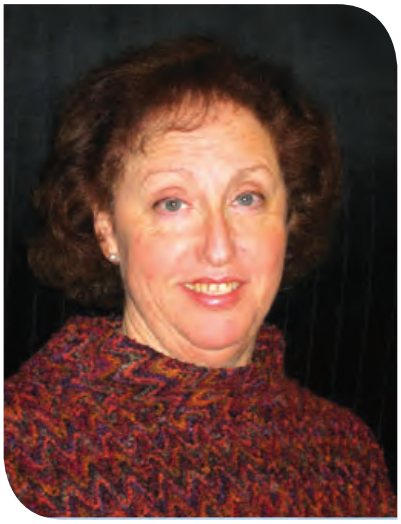
The mission of the Medical Board of California

The mission of the Medical Board of California is to protect health care consumers through proper licensing and regulation of physicians and surgeons and certain allied health care professions and through the vigorous, objective enforcement of the Medical Practice Act, and, to promote access to quality medical care through the Board's licensing and regulatory functions.

President's Message - New Year - New Challenges

Welcome to 2012! It is always a personal and professional honor to wish our Medical Board of California associates, colleagues and their families a truly wonderful New Year filled with joy, good health, creative solutions and proactive initiatives. Thank you to my fellow Board Members, the staff of the Medical Board, and the organizations we work with, for their dedication to making sure California consumers have access to the best medical care professionals throughout this State.



Barbara Yaroslavsky
President, Medical Board of California

The year ahead, as always, brings us new challenges, large and small. There will be new proposed legislation affecting consumers and we will strive, once again, to be the advocates for consumers and, as well, California's medical professionals. Our staff is positioned to implement, develop and process strategies as the Board directs, which then can and will be implemented.

As you are aware, the hiring freeze was recently lifted and our executive team was able to add sorely needed staff in virtually every part of the Medical Board and fill positions long left vacant. For many years, staff has met the challenge of multi-tasking and stepping "up" when called upon to provide much needed services and internal managerial functions. We know the new Board Members will go the distance to coordinate our mission like never before.

One important addition is the filling of the Public Information Officer (PIO) which has been vacant for more than a year. During that time, our Chief of Legislation Jennifer Simoes was performing double-duty, and I thank and commend her for a job well done. I am pleased to welcome Dan Wood as the Board's new Public Information Officer. Dan is a former broadcast journalist with more than 30 years experience, most recently working for CBS affiliate KOVR in Sacramento. I am excited about what Dan has in the works for our communications program. We all will be enjoying substantive and graphic changes to our newsletter, our Web site, and several of our publications. Jennifer now can devote her considerable skills to the legislative process providing the Board a much stronger presence with the Legislature and Governor. Again, my personal thanks to Jennifer for a successful year of guiding our Board through a reorganization and employment freeze. We all appreciate the leadership "quotient" required to achieve the outcomes the Medical Board of California has successfully implemented in spite of our State's fiscal upheaval.

As our February 2-3, 2012 Board Meeting approaches, I welcome all of our licensees and consumers to join us in San Francisco. At this meeting, the Board will finalize its strategic plan that will greatly assist us in formulating our response to the upcoming sunset review process that takes place in 2013. The sunset review process will determine the validity and viability of our existence, mandating the input of all parties to the legislative mission we seek to achieve each and every day.

So, here we are, just days into 2012 and we are already addressing 2013. This truly promises to be a remarkable year for all of us at the Medical Board of California, and I remain grateful for the opportunity to work with such a dedicated and purposeful team to achieve meaningful, durable and beneficial oversight of the delivery of quality healthcare to all Californians! With every good wish!

Editor's spotlight

In our October 2011, we included an update on the 2011 award recipients of the Steven M. Thompson Loan Repayment Program. We thought you might enjoy learning more about some of these well-deserving physicians and the dedicated services they bring to California's medically underserved communities — see page 7.

The Board's Licensing Program staff shared an informational overview of physician and surgeon international medical school (IMG) graduates and international medical schools at our quarterly meeting in October. The presentation

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Legislator profile:
Senator Ed Hernandez, OD

Sen. Ed Hernandez (D - Los Angeles)

Senator Ed Hernandez (D-Los Angeles) was elected to the Senate in 2010.

Dr. Hernandez represents the 24th Senate District. He first was elected to the California State Assembly in 2006, and was re-elected to a second term in 2008.

Dr. Hernandez serves as Chair for the Senate Committee on Health. He is also a member of the Business, Professions, and Economic Development Committee, as well as the Governance and Finance Committee and the Governmental Organization Committee.

Dr. Hernandez' legislative bills that affect Medical Board of California licensees and health care consumers include (2011/SB 635), which addresses the statewide shortages of health providers which currently exist in several major health professions such as nursing, primary care providers, and allied health. SB 635, if enacted, would require that any amount of funds deposited into the Managed Care Administrative Fines and Penalties Fund in excess of $1 million be transferred each year to the Office of Statewide Health Planning and Development for the purpose of the Song-Brown Health Care Workforce Training Act. The Act addresses the shortage of physicians engaged in family practice in California by providing financial support to family practice residency, nurse practitioner, physician assistant, and registered nurse education programs.

In addition, Dr. Hernandez authored (2011/SB 703), and if enacted, would implement the Basic Health Program (BHP) state option contained in the federal health care reform law. The intent of the BHP is to provide low-income Californians with equal or better benefit levels, and less expensive health plan premiums using exclusively federal dollars.

Dr. Hernandez obtained his California license to practice optometry in 1986 and set up his first practice in his hometown of La Puente, California.

California 24th Senate District map

Editor's spotlight *(continued from page 2)*

covered the process of IMGs obtaining licensure, including minimum requirements, forms that must be submitted, clinical rotation challenges and remedies, and international medical schools listed by the World Health Organization. To view their presentation, go to: http://www.mbc.ca.gov/board/meetings/materials_2011_10-27_licensing-4&5.pdf

At the same meeting, the Board had the pleasure of hearing from Drs. David Greenberg and Michel Sucher on their California Physicians Health Program and their philosophies and experiences in dealing with physician health issues that surround substance use disorders and other impairing conditions. See page 16 to learn the details. A recording of this presentation may be requested through our Webmaster at webmaster@mbc.ca.gov.

I hope you enjoy our first MBC Newsletter incorporating an interactive style for our readers. The change is intended to provide easy, convenient access to linked articles, information and Web sites directly to your fingertips. Let us know what you think at webmaster@mbc.ca.gov.

Debbie Nelson, Editor

controlled substance subscribers and pharmacists to have Internet access to the controlled substance prescription history of persons under their care, as specified.

AB 499 (Atkins, Chapter 652) - **Minors consent to medical care**
This bill authorizes a minor, who is at minimum only 12 years of age or older, to consent to medical care related to the prevention of a sexually transmitted disease.

AB 507 (Hayashi, Chapter 396) - **Chronic pain**
This bill makes technical and conforming changes to existing law related to severe chronic intractable pain and to the California Intractable Pain Treatment Act. This bill also repeals existing law that allows the Department of Justice to employ physicians for interviewing and examining patients related to prescription possession and use of controlled substances.

SB 514 (Simitian, Chapter 199) - **Dextromethorphan: Sale to Minors Prohibited**
Prohibits any person, corporation, or retail distributor from knowingly supplying, delivering, or giving possession of a drug, material, compound, mixture, preparation or substance containing any quantity of dextromethorphan to a person under the age of 18 without a prescription.

SB 41 (Yee, Chapter 738) - **Hypodermic needles**
This bill suspends certain provisions of the Disease Prevention Demonstration Project, and until January 1, 2015, permits pharmacists and physicians to furnish up to 30 hypodermic needles and syringes for human use, without a prescription or city/county authorization, to a person 18 years or older, as specified.

SB 233 (Pavley, Chapter 333) - **Appropriate licensed care in emergency setting**
This bill specifically clarifies that appropriate licensed persons can provide treatment and consultation in an emergency care setting, under the supervision of a physician, if their license allows them to do so. This bill further specifies that it does not expand the scope of licensure for licensed persons providing services under this bill.

State administrative mandates:

AB 536 (Ma, Chapter 379) - **Posting expungement orders**
This bill requires the Medical Board of California to post expungement orders and the date of expungement on the Board's Internet Web site within six months of the receipt of the certified expungement order from a licensee.

SB 380 (Wright, Chapter 236) - **Chronic disease educational content**
This bill authorizes the Board to set content standards for any educational activity concerning a chronic disease that includes appropriate information on the impact, prevention, and cure of the chronic disease by the application of changes in nutrition and lifestyle behavior. This bill requires the Board to periodically disseminate information and educational material regarding the prevention and treatment of chronic disease by the application of changes in nutrition and lifestyle behavior to each licensed physician and surgeon and to each general acute care hospital in California. This bill also requires the Board to convene a working group of interested parties to discuss nutrition and lifestyle behavior for the prevention and treatment of chronic disease at a quarterly board meeting within three years of the effective date of this bill.

SB 543 (Steinberg, Chapter 448) - **Business and Professions: Regulatory Boards**
Among other provisions, this omnibus bill adds language to allow the Department of Consumer Affairs (DCA) to request the Department of Finance to augment the budgets of the Board (and other boards and bureaus under DCA), in order to allow payment of the Breeze project; this provision sunsets upon enactment of the Budget Act of 2012. This bill also specifies that no physical therapist shall be subject to discipline by the Physical Therapy Board for providing

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physical therapy services as a professional employee of a professional medical corporation; this provision sunsets on January 1, 2013.

SB 824 (Negrete McLeod, Chapter 389) - **Registered Dispensing Optician**
This bill requires a registered dispensing optician (RDO) assuming ownership of a business and the RDO selling or transferring ownership of a business to both file the notice with the Board within 10 days of the completion of the transfer of ownership. This bill would also make the RDO selling or transferring the ownership interest responsible for complying with all laws relating to the place of business until the cancellation notice is received by the Board.

SB 943 (Comm. on Business, Professions & Economic Development, Chapter 350) - **Healing Arts**
Among other provisions, this omnibus bill clarifies the grandfathering provisions in existing law related to polysomnographic technologists. This bill authorizes current practitioners to be grandfathered in by allowing them to apply for registration as a certified polysomnographic technologist if they submit proof to the Board of five years of experience in practicing polysomnography in a manner that is acceptable to the Board. The grandfathering provision language allows current practitioners three years to meet the new requirements for certification as a polysomnographic technologist. This bill also requires the Board to report on the number of reports received pursuant to Section 805.01 of the Business and Professions Code in its Annual Report.

Enforcement related legislation:

AB 655 (Hayashi, Chapter 380) - **Peer review**
This bill revises the medical peer review process and requires a peer review body to respond to the request of another peer review body and produce specified information concerning a licentiate under review.

AB 1424 (Perea, Chapter 455) - **Suspension of professional license of delinquent tax debtor**
Beginning July 1, 2012, this bill requires a state governmental licensing entity (SGLE), including the Medical Board of California, to suspend a state occupational, professional, or drivers license of a tax debtor whose name appears on the Franchise Tax Board or the State Board of Equalization's lists of the largest tax delinquencies.

SB 100 (Price, Chapter 645) - **Healing Arts: Outpatient Settings**
This bill covers a variety of subjects related to outpatient settings. This bill requires the Board to obtain and maintain a listing of specified information on outpatient settings on its Internet Web site; requires the Board to adopt regulations on or before January 1, 2013, on the appropriate level of physician availability necessary within clinics or other settings using laser or intense pulse light devices for elective cosmetic surgery; and revises the existing definition of "outpatient settings" to include fertility clinics that offer in vitro fertilization.

This bill also makes a number of changes regarding the approval, oversight and inspection of "outpatient settings" by the Board and accreditation agencies (AAs) approved by the Board, including the following: requires the Board to investigate all complaints concerning a violation of the provisions of this bill; requires the Board, upon discovery that an outpatient setting in operation but not accredited, to bring an action to enjoin the outpatient setting's operation when appropriate; requires all outpatient settings with multiple service locations to have all sites inspected; provides that all final inspection reports, which include the lists of deficiencies, plans of correction or requirements for improvements and correction, and corrective action completed, to be public records open to public inspection; and requires, when an accrediting agency denies an accreditation and the outpatient setting applies to a different accrediting agency, the new accrediting agency to ensure that all previous deficiencies have been corrected and a new onsite inspection must be conducted.

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Legislative Update *(continued from page 5)*

Health Care Coverage:

SB 222 (Evans, Chapter 509) - **Maternity services**
This bill requires every individual health insurance policy to provide coverage for maternity services for all insureds covered under the policy on or before July 1, 2012. This bill defines "maternity services" to include prenatal care, ambulatory care maternity services, involuntary complications of pregnancy, neonatal care, and inpatient hospital maternity care, including labor and delivery and postpartum care.

SB 946 (Health Committee, Chapter 650) - **Autism**
This bill requires health plans and health insurance policies to cover behavioral health therapy for pervasive developmental disorder or autism, requires plans and insurers to maintain adequate networks of autism service providers, establishes an Autism Advisory Task Force in the Department of Managed Health Care, sunsets this bill's autism mandate provisions on July 1, 2014, and makes other technical changes to existing law regarding HIV reporting and mental health services payments.

Health Care Reform/Technology:

AB 415 (Logue, Chapter 547) - **Telemedicine**
This bill repeals existing law related to telemedicine and replaces this law with the Telehealth Advancement Act of 2011 (Act). This Act revises and updates existing law to facilitate the advancement of telehealth as a service delivery mode in managed care and the Medi-Cal Program.

AB 1296 (Bonilla, Chapter 641) - **Patient Protections and Affordable Care Act**
This bill enacts the Health Care Eligibility Reform, Enrollment, and Retention Planning Act, which requires the California Health and Human Services Agency, in consultation with the Department of Health Care Services, Managed Risk Medical Insurance Board, the California Health Benefit Exchange, the California Office of Systems Integration, counties, health care services plans, consumer advocates, and other stakeholders to undertake a planning and development process regarding the federal Patient Protections and Affordable Care Act, including regulations or guidance related to eligibility, enrollment, and retention in state health subsidy programs.

SB 850 (Leno, Chapter 714) - **Electronic health record systems**
This bill requires electronic health record systems or electronic medical record systems (EHR/EMR systems) to preserve the integrity of electronic medical information and automatically record and preserve any change or deletion of any electronically stored medical information, as specified, which mirrors recently released and pending federal regulations that create new minimum data integrity and consumer access standards for data stored in EHR/EMR systems.

Miscellaneous legislation:

AJR 13 (Lara, Chapter 85) - **Physician supply in CA**
This resolution urges the President and U.S. Congress to continue to provide funding to increase the physician supply in California and encourages consideration of solutions in order to increase the number of graduate medical education slots in California.

SB 746 (Lieu, Chapter 664) - **Ultraviolet tanning device**
This bill prohibits persons less than 18 years of age from using an ultraviolet tanning device. This bill removes the consent provision in existing law for persons between 14 and 18 years of age. This bill also specifies that it does not prohibit a physician and surgeon from prescribing the use of a phototherapy device to a patient of any age.

Dateline change: The Medical Board of California is changing the dateline of its newsletter from a specific month to a more useful identifier — Winter, Spring, Summer, and Fall issues. This change better reflects the fact that the newsletter is a quarterly publication. As you will note, the change is effective with this issue. Enjoy!

Medical Board vacancies filled by Governor

Medical Board President Barbara Yaroslavsky and Executive Director Linda Whitney are pleased to announce Governor Brown has appointed two physicians to fill two of the six member vacancies on the Board.

Michael Bishop, M.D., of San Diego, has been appointed to the Medical Board. He is director of anesthesia for same-day surgery at the University of California, San Diego Medical Center in Hillcrest and held this position since 2008. He is an attending anesthesiologist and clinical professor of anesthesiology at the University of California, San Diego and serves as quality officer for the Department of Anesthesiology. Dr. Bishop worked as a private practice anesthesiologist from 1992 to 2006. He received his medical degree from the University of California, San Francisco School of Medicine.

Dev GnanaDev, M.D., of Upland, also has been appointed to the Medical Board. He serves as the president of the Arrowhead Regional Medical Center and chair of the Department of Surgery, a position he has held since 1989. He is a clinical professor of surgery at Western University for Health Sciences and an associate professor of surgery at Loma Linda University. He served as President of the California Medical Association from 2008 to 2009. Dr. GnanaDev has received a multitude of honors and recognition for his outstanding work and commitment to those who utilize public health programs, including the Medical Board's Physician Recognition Award in February 2005. He earned his medical degree from the Kurnool Medical College in Kurnool, Andhra Pradesh, India.

Both Drs. Bishop and GnanaDev now must be confirmed by the Senate.

Meet a few of the latest Steven M. Thompson Loan Repayment Program recipients:

In the last newsletter we provided the names of the 2011 Steven M. Thompson Loan Repayment Program recipients. Below are photos and short bios on a few of the recipients that were provided by the Health Professions Education Foundation (HPEF). The HPEF has administered statewide scholarship and loan repayment programs for a wide range of health-professions students, and they receive administrative support from the Office of Statewide Health Planning and Development. Details on additional physician recipients will be shared in our April issue.

Elizabeth Davis, M.D. is a general internist in the General Medicine Clinic at San Francisco General Hospital and was awarded $105,000 during the August 2011 application cycle. "Since submitting my application, I have been working on improving care for our highest-risk patients — those who have chronic medical problems and frequent hospitalizations. My patients have incredibly varied backgrounds and many have not had medical care for a long time."

Gina-Nga Nguyen, M.D. is a family physician at the Nhan Hoa Clinic in Orange County and was awarded $105,000 during the March 2011 application cycle. In addition to her focus on preventative care for women and her general medicine practice, Dr. Nga Nguyen has also served as the Women's Health Director. "My entire women's health department is dedicated to preventive care services, from cervical and breast cancer, to STD's and pregnancy prevention. I am committed to making a difference and serving the uninsured patients in our community."

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Steven M. Thompson Loan Repayment Program recipients *(continued from page 7)*

Lauren Worth, M.D. is a general internist and pediatrician at Family Health Centers of San Diego and was awarded $80,076 during the August 2011 application cycle. Since submitting her application, Dr. Worth has received her board certification in internal medicine. She also has helped to initiate a partnership with legal aid in her clinic to help patients on all fronts of their healthcare, including insurance or custody issues and habitability of homes. Dr. Worth volunteers with UrbanLife, which is an organization that mentors kids in the inner city and elevates indigenous leaders to change the community.

Mimi Carter, M.D. is a family practice physician at the John C. Fremont Healthcare District in Mariposa County and was awarded $58,786 during the August 2011 application cycle. The John C. Fremont Clinic is a rural health clinic and hospital that provides much needed care to a rural community just outside of Yosemite National Park. "I have the opportunity to have a wonderful family practice taking care of my patients in the clinic and in the hospital. I make early morning rounds in the hospital and then head to the clinic, then, back to the hospital before going home each night. It's a pleasure to be a community doctor."

Additional clarification on important legislation that may affect your practice

In our Legislative Update, we provided short summaries on new legislation relating to the practice of medicine and/or newly mandated state requirements. The following expanded descriptions and clarifications on Senate Bill 100 and Assembly Bill 1424 may be helpful to you.

SB 100 (Price, Chapter 645) This law relates to outpatient surgery settings, and requires the Board to adopt regulations on or before January 1, 2013.

Board requirements:
The Medical Board is required to maintain a listing of information on outpatient surgery settings on its Web site; adopt standards as necessary, for outpatient surgery settings that offer in vitro fertilization; adopt regulations to specify procedures that should be performed in an accreditation setting that are outside the definition of an outpatient setting; evaluate accreditation agencies every three years; ensure agencies inspect outpatient settings (evaluate responses to complaints against an agency and evaluate complaints against the accreditation of outpatient settings); and provide a system to keep all inspection results, including the plan or correction. Final reports are public documents and will list deficiencies and plans of correction, requirements for improvement and notes regarding completion of corrective action.

Outpatient setting requirements:
The outpatient surgery settings must post a plan of correction to violations for public view; remove certificates of accreditation if suspended, revoked, or if accreditation is denied; disclose a full report of denial if applying for accreditation with a different agency; add in vitro fertilization facilities to the definition of "outpatient setting", subject to adverse event reporting requirements and associated penalties; submit for approval by agency at the time of accreditation, a detailed plan, standardized procedures, and protocols to be followed in the event of serious complications; and, comply with corrective action within a time frame specified by agency and if it does not comply, the agency shall issue a reprimand, place on probation, or suspend or revoke the certification.

Accreditation agency requirements:
The accreditation agencies are required to conduct

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Additional clarification *(continued from page 8)*

a reasonable investigation of the history of the outpatient setting as part of the accreditation process; periodically inspect outpatient settings — no less than once every three years; inspections must be onsite; upon receipt of a complaint from the Board regarding a setting that poses an immediate risk to public safety, the agency must inspect and report its findings within five business days; on any other complaints received by the Board, the agency must report its findings to the Board within 30 days; notify and update the Board on all outpatient settings that are accredited; notify the Board within 24 hours when a setting's accreditation is denied; and, when a setting's accreditation is revoked, requires a notification letter be sent stating it is no longer allowed to perform procedures requiring accreditation, and specifies that if one agency denies, revokes, or suspends accreditation, the setting must re-apply and disclose the full accreditation report to the new agency.

AB 1424 (Perea, Chapter 455) This bill requires a board, bureau commission, committee, or program under the Department of Consumer Affairs (DCA) to take action against certain licensees who fail to pay outstanding tax liabilities due to the Franchise Tax Board (FTB) or Board of Equalization (BOE) and appears on either the FTB or BOE's certified lists of top 500 tax delinquencies over $100,000— effective July 1, 2012.

Once it has been determined that a licensee is on a certified list, the licensee has 90 days from the issuance of a "Preliminary Notice of the Intent to Suspend" to either satisfy all outstanding tax obligations or enter into a payment installment program with the FTB or BOE. If the licensee fails to come into compliance, they will have their license suspended until the board, bureau, commission or committee receives a release from the FTB or BOE.

The FTB and BOE are currently expanding the certified lists from 250 to 500, but you can check to see if you are currently on the FTB's certified list at: www.ftb.ca.gov/individuals/txdlnqnt.shtml , or the BOE's certified list at: www.boe.ca.gov/cgi-bin/deliq.cgi . If you believe you are on either list in error, please call the FTB at (886) 418-3702, or the BOE at (916) 445-5167.

Board hires new Public Information Officer

In December, the Medical Board welcomed Dan Wood as the new Public Information Officer. Dan is the primary contact person and source of information for the media, physician community and other agencies and organizations regarding the programs, policies and activities of the Board. He consults with and advises the Executive Director and Board Members on strategies for addressing sensitive and controversial issues that have been, or may become, the subject of media attention and publicity. Dan also will work with them on proactively informing the public and the medical profession of the work of the Board.

Dan is a professional journalist and brings to the Board his 30 years of experience working in television broadcasting. He spent more than 17 years at KOVR in Sacramento as a journalist producer. Most recently, Dan has been the director of marketing and communications for a variety of businesses, including NorCal ACE retailers group. Dan graduated with a bachelor of science degree, with honors, from the University of Texas, Austin, in radio, television and film. **Dan can be contacted at** Dan.Wood@mbc.ca.gov

New regulations that may be of interest to you:

The Medical Board of California held a hearing on November 5, 2010 in Long Beach, California on two proposed regulations: Amendments to the Board's "Manual of Model Disciplinary Orders and Disciplinary Guidelines," and the proposed implementation of a Polysomnography Program. The proposed regulations are in the review process at this time.

Amending the Medical Board's "Manual of Model Disciplinary Orders and Disciplinary Guidelines"

Current law authorizes the Medical Board of California to investigate complaints filed against physicians and surgeons and take disciplinary action against the license should a violation of law be proven. Section 2227 of the Business and Professions Code (Code) authorizes the Board to place licensees on probation following an evidentiary hearing or the execution of a stipulated settlement. Section 2228 of the Code specifies the terms and conditions that may be included in the term of a licensee 's probation, including but is not limited to additional training, restrictions on practice, and successful completion of diagnostic examinations. Business and Professions Code Section 2229 also requires that, wherever possible, the Board should take action that is calculated to aid in the rehabilitation of the licensee and order actions to include further education, restrictions from practice, or other means, that will remove the identified deficiencies. The *Manual of Model Disciplinary Orders and Disciplinary Guidelines* referenced in the current regulation (10th Edition/2008) contains model terms and conditions that can be ordered to rehabilitate physicians as part of a probationary order while allowing the Board to honor its primary obligation of public protection.

The amendment to existing regulation incorporates by reference the 11th Edition/2012 of the Manual of Model Disciplinary Orders and Disciplinary Guidelines, reflecting changes in law, as well as making technical changes to address unnecessary and duplicative elements, and to more accurately reflect the current probationary environment. These regulations are now final and available online at http://www.mbc.ca.gov/laws/regulations_proposed.html

The Polysomnography Program (*new program, not addressed in current regulation*)

These proposed regulations will establish the Polysomnography (sleep medicine) Program, including the application and registration requirements, required education and examinations, disciplinary actions, etc. The regulation impacts those persons applying to the Medical Board of California for licensure as polysomnography technologists, technicians and trainees, as well as those licensed physicians and surgeons who elect to supervise them. The proposed regulations may create jobs in California as they prescribe a pathway for persons to become licensed in a health care field. Supervising physicians may hire registrants to provide these services.

This regulation is required in order for the Medical Board of California to implement legislation, SB 132, relative to the qualifications for certified polysomnographic technologists, technicians and trainees, and prohibition against a person using the title "certified polysomnographic technologist" or engaging in the practice of polysomnography unless he or she is registered as a certified polysomnographic technologist in California.

The Board anticipates that these proposed regulations will become effective by Spring 2012. To learn more about these proposed regulations, and others that may be of interest to you, click on the following link: http://www.mbc.ca.gov/laws/regulations_proposed.html

Coalition for Compassionate Care of California (CCCC) holds 4th Annual Conference in San Diego, February 15-16, 2012

If you are interested in improving care for people with an advanced or terminal illness, you may want to attend this upcoming conference. The first day seminars will be devoted to Creating a Culture of Compassion; and the second day, Partners in POLST: Honoring Patient Wishes across Care Settings. To learn more, please visit the CCCC Web site at http://www.coalitionccc.org/documents/CCCC_2012_conference.pdf

Candid photos from the Medical Board's October 2011 quarterly Board meeting in San Diego

Carlos Ramirez, Senior Assistant Attorney General
of the Health Quality Enforcement Section providing the vertical enforcement program report

Karen Ehrlich, Chair, Midwifery Advisory Council
presenting her update

Chief of Licensing Curt Worden w/Licensing Manager Cindi Oseto
presenting the Licensing Program report

Chief of Legislation Jennifer Simoes
presenting her legislative update

Toni J. Sullivan, EdD, RN, FAAN
presented on collaborative care

Revised Pharmacists Protocol for Dispensing Emergency Contraception

In 2004, the Medical Board of California adopted a statewide protocol for pharmacists furnishing emergency contraception (EC) medications. This protocol was required to be developed and approved by both the Medical Board and the Board of Pharmacy per SB 490 (Alpert, Chapter 651, Statutes of 2003).

More recently, at the Medical Board's July 28, 2011 quarterly meeting, the Board adopted an amendment to the protocol, now known as Business and Professions Code section 4052.3(a)(2). The entire EC protocol is provided below. Please note that the July amendment to the protocol is bolded for your convenience.

4052.3(a) — Notwithstanding any other provision of law, a pharmacist may furnish emergency contraception drug therapy in accordance with either of the following:

(1) Standardized procedures or protocols developed by the pharmacist and an authorized prescriber who is acting within his or her scope of practice.

(2) Standardized procedures or protocols developed and approved by both the board (Board of Pharmacy) and the Medical Board of California in consultation with the American College of Obstetricians and Gynecologists, the California Pharmacist Association, and other appropriate entities. Both the board and the Medical Board of California shall have authority to ensure compliance with this clause, and both boards are specifically charged with the enforcement of this provision with respect to their respective licensees. Nothing in this clause shall be construed to expand the authority of a pharmacist to prescribe any prescription medication.

(b) Prior to performing a procedure authorized under this paragraph, a pharmacist shall complete a training program on emergency contraception that consists of at least one hour of approved continuing education on emergency contraception drug therapy.

(c) A pharmacist, pharmacist's employer, or pharmacist's agent may not directly charge a patient a separate consultation fee for emergency contraception drug therapy services initiated pursuant to this paragraph, but may charge an administrative fee not to exceed ten dollars ($10) above the retail cost of the drug. Upon an oral, telephonic, electronic, or written request from a patient or customer, a pharmacist or pharmacist's employee shall disclose the total retail price that a consumer would pay for emergency contraception drug therapy. As used in this subparagraph, total retail price includes providing the consumer with specific information regarding the price of the emergency contraception drugs and the price of the administrative fee charged. This limitation is not intended to interfere with other contractually agreed-upon terms between a pharmacist, a pharmacist's employer, or a pharmacist's agent, and a health care service plan or insurer. Patients who are insured or covered and receive a pharmacy benefit that covers the cost of emergency contraception shall not be required to pay an administrative fee. These patients shall be required to pay co-payments pursuant to the terms and conditions of their coverage. The provisions of this subparagraph shall cease to be operative for dedicated emergency contraception drugs when these drugs are reclassified in over-the-counter products by the federal Food and Drug Administration.

(d) A pharmacist may not require a patient to provide individually identifiable medical information that is not specified in Section 1707.1 of Title 16 of the California Code of Regulations before initiating emergency contraception drug therapy pursuant to this section.

(e) For each emergency contraception drug therapy initiated pursuant to this section, the pharmacist shall provide the recipient of the emergency contraception drugs with a standardized factsheet that includes, but is not limited to, the indications for use of the drug, the appropriate method for using the drug, the need for medical follow-up, and other appropriate information. The board shall develop this form in consultation with the State Department of Public Health, the American College of Obstetricians and Gynecologists, the California Pharmacists Association, and other health care organizations. The provisions of this section do not preclude the use of existing publications developed by nationally recognized medical organizations.

Clinical Laboratory Improvement Amendments (CLIA) News

Do you perform patient laboratory testing such as urine dipsticks or examine microscopy slides in your office? Did you know there are separate state registration requirements in addition to federal CLIA certification requirements you must meet prior to performing such testing?

California law requires a physician office laboratory to register with the California Department of Public Health prior to performing laboratory testing categorized as waived or provider performed microscopic procedures. Recently, over 150 physician office laboratories have failed to renew their state registration. The state has referred these cases to the federal CLIA program for deactivation of the laboratories' CLIA certificates, as compliance with state requirements is a prerequisite for CLIA certification.

Failure to meet the state registration requirements puts the physician at risk for liability during the period patients are tested, and the physician's office is not in compliance with state law. The same applies for failure to comply with the federal CLIA law. In addition, deactivation of the CLIA certificate means the physician will no longer be able to receive Medicare or MediCal reimbursement for testing.

Please check to make sure your office's laboratory is properly registered with the state and properly CLIA certified to perform patient laboratory testing. If your office is in default with the state requirements, please contact the California Department of Public Health, Laboratory Field Services, 850 Marina Bay Parkway, Bldg P, 1st Floor, Richmond, CA 94804-6403, telephone 510-620-3796, email contact LeoncioJun.Mallillin@cdph.ca.gov .

Laboratory Testing Requirements in California

California law requires that facilities performing laboratory testing on patient specimens be registered or licensed by the state. This state requirement is in addition to the federal CLIA certification requirement.

If you have a current CLIA certificate and are not registered or licensed as appropriate by the state, your CLIA certificate is in jeopardy of being deactivated. Failure to meet the state registration/license requirement puts the physician at risk for liability during the period patients are tested and the physician's office is not in compliance with state law. The same applies for failure to comply with the federal CLIA law. In addition, deactivation of the CLIA certificate means the physician will no longer be able to receive Medicare or MediCal reimbursement for testing.

Click on the following link for instructions on how to apply for or renew a state registration or license: http://cdph.ca.gov/programs/lfs/Pages/ClinicalLaboratoryfacilities.aspx . You may also contact the California Department of Public Health, Laboratory Field Services at 850 Marina Bay Parkway, Bldg. P, 1st Floor, Richmond, CA 94804-6403, telephone 510/620-3796, or email LeoncioJun.Mallillin@cdph.ca.gov for further information.

A Reminder from the Department of Motor Vehicles

When a person applies for a Disabled Person (DP) placard, the applicant needs a certification from their physician, surgeon, chiropractor, optometrist, physician assistant, nurse practitioner or certified nurse midwife. The required form is the Application for Disabled Person Placard or Plates (REG 195) and sections "F" and "G" on the back of the form must be filled out completely by the authorized medical provider.

Quite often the DMV receives applications missing pertinent information like the disabled person's name or a box that has not been checked and the form has to be returned to the applicant. This delays the DP placard being issued and creates extra paperwork.

Next time, take a minute and make sure that sections "F" and "G" of the REG 195 are filled out completely, it could save your patient valuable time and unnecessary inconvenience.

To view the REG 195, go to: http://www.dmv.ca.gov/forms/reg/reg195.pdf

The link up to: Mandatory reporting requirements for physicians and others:

Reporting to the Board:

- Insurers' Report of Malpractice Settlement or Arbitration Award: http://www.mbc.ca.gov/forms/enf-801.pdf
  (Business and Professions Code §801.01)
- Self-Insured Employers of Physicians: http://www.mbc.ca.gov/forms/enf-801.pdf
  (Business and Professions Code §801.01)
- Physicians without malpractice insurance must also report: http://www.mbc.ca.gov/forms/enf-801.pdf
  (Business and Professions Code §801.01(6)(2). The same holds true for attorneys representing such physicians)
- State or Local Government Agencies that Self-Insure Physicians: http://www.mbc.ca.gov/forms/enf-801.pdf (Business and Professions Code §801.01)
- Physician Reporting - Criminal Actions: http://www.mbc.ca.gov/forms/enf-802.pdf
  (Business and Professions Code §802.1)
- Peer Review/Health Facility Reporting: http://www.mbc.ca.gov/forms/enf-805.pdf
  (Business and Professions Code §805)
- Reporting for Coroners: http://www.mbc.ca.gov/forms/coroner_report.pdf
  (Business and Professions Code §802.5)
- Reporting Requirements for Court Clerks and Prosecuting Agencies: http://www.mbc.ca.gov/forms/enf-803.pdf
  (Business and Professions Code §803, 803.5 and 803.6)
- Transfer to Hospital from, or Death of Patient in Outpatient Surgery Setting: http://www.mbc.ca.gov/forms/patient_death.pdf
  (Business and Professions Code §2240)

Reporting to other entities:

- Birth and death certificates must be registered with the local registrar within 10 days following the events of births and deaths for the district in which the birth or death occurred (Health and Safety Code §§102400, 102795 and 102825).
- Certificates of fetal death must be completed by the physician, if any, in attendance within 15 hours after the delivery (Health and Safety Code §102975).

Diseases reportable by health care providers in California:

- http://www.cdph.ca.gov/HealthInfo/discond/Documents/SSS_Reportable_Diseases.pdf, or see July 2011 MBC Newsletter: http://www.mbc.ca.gov/publications/newsletters/newsletter_2011_10.pdf
- Injuries by deadly weapon or criminal act: http://www.leginfo.ca.gov/calaw.html (Penal Code §11160)
- Pesticide poisoning: http://www.leginfo.ca.gov/calaw.html (Labor Code §6409(a))
- Child abuse: http://www.leginfo.ca.gov/calaw.html (Penal Code §§11165.7(a)(21), 11165.9, 11166(a)(c)).
- Adult/Elder abuse: http://www.leginfo.ca.gov/calaw.html (Welfare and Institutions Code §15630)
- Injuries resulting from neglect or abuse: http://www.leginfo.ca.gov/calaw.html (Penal Code §11161.8)
- Lapses of Consciousness: http://www.leginfo.ca.gov/calaw.html (Health and Safety Code §103900)

continued on page 15

Miscellaneous reporting requirements:

- Notification of Name Change: http://www.mbc.ca.gov/licensee/name_change.html
- Address of Record: http://www.mbc.ca.gov/licensee/address_record.html
- Reporting Requirements for Lost or Stolen Controlled Substances or Prescription Forms Reporting Obligations for Illegal Use of Your DEA Number: http://www.mbc.ca.gov/licensee/dea_reporting.html

Required written information physicians must provide patients:

www.mbc.ca.gov/publications

1. A Patient's Guide to Blood Transfusion (Health and Safety Code §1645)
2. A Woman's Guide to Breast Cancer Diagnosis & Treatment (Health and Safety Code §109275)
3. Gynecologic Cancers…What Women Need to Know (Health and Safety Code §109278)
4. Professional Therapy Never Includes Sex (Business and Professionals Code §728)
5. Things to Consider Before Your Silicone Implant Surgery (Business and Professions Code §2259)
6. What You Need to Know About Prostate Cancer (Business and Professions Code §2248; Health and Safety Code §109280)

Mandatory physician signage:

- Notice to Consumer regulation: http://www.mbc.ca.gov/licensee/notice_to_consumers_regulation.html CCR 1355.4 (the actual regulation)
- AB 583 Education Disclosure: http://www.mbc.ca.gov/licensee/notices_to_consumers.html (Business and Professions Code §680.5)
- Prostate Cancer "Be Informed" Notice: http://www.mbc.ca.gov/licensee/notices_prostate.html (Health and Safety Code §109282)
- Breast Cancer "Be Informed" Notice: http://www.leginfo.ca.gov/calaw.html (Health and Safety Code §109277)

A peek into the future

2012 will be an exciting year for consumers accessing the Medical Board of California. Some forms that traditionally had to be filled out and mailed in will become "web friendly". This will allow visitors to our Web site, http://www.mbc.ca.gov/ to submit some forms with a click of their mouse.

Also coming in the New Year is the addition of QR codes. QR stands for Quick Response. These codes, which look like a crossword puzzle, can be used to instantly direct a consumer to the Web site or information available over the Internet. They can be easily scanned by applications on smart phones. The QR code can contain much more information than a standard bar code or web link.

The Medical Board's very own Web site will also be taking on a fresh new look with more information and easier navigation. Look for these changes and more as 2012 will be a year of greatly improved communication.

Scan this to visit the Board's homepage

Social Media: A distraction or helpful tool?

With the explosion of electronic devices interwoven into the core of our daily lives, it seems timely for the Board to share the following information regarding the use of social media, cell phones and smart phones, in your practice. We encourage you to review the American Medical Association's (AMA) policy regarding Professionalism in the Use of Social Media — a link to the policy is provided below. This policy takes a look at the electronic sharing of information and communication as it pertains to the physician-patient relationship.

Also included is the link to a recent article from the New York Times entitled, "As Doctors Use More Devices, Potential for Distraction Grows," with a focus on similar challenges that social media brings to the practice of medicine. We strongly urge you to read the New York Times article, as it gives an excellent view of the need for guidelines.

AMA Policy: Professionalism in the Use of Social Media.
http://www.ama-assn.org/ama/pub/meeting/professionalism-social-media.shtml

N.Y. Times article:
http://www.nytimes.com/2011/12/15/health/as-doctors-use-more-devices-potential-for-distraction-grows.html?pagewanted=all

California Physicians Health Program (CAPHP)

The Medical Board Members and staff had the privilege of listening to an informative presentation by Drs. David G. Greenberg and Michel A. Sucher at the Board's October quarterly meeting in San Diego. The presentation focused on their philosophy and approach to physician health issues, diagnosis of substance use disorders and other potentially impairing conditions, and methodology for determining a physician's fitness for duty and safety to practice medicine.

Dr. Greenberg completed medical school at the University of California, Davis in 1979. He was board certified in Addiction Medicine in 1987, and has extensive knowledge and experience in the areas of alcohol and drug dependency, chronic pain treatment, and patient safety.

Dr. Sucher received his medical degree in 1972 from Wayne State University. He is a Fellow of the American College of Emergency Physicians and a Fellow of the American Society of Addiction Medicine. He was granted Diplomate Status by the American Board of Addiction Medicine in 2009. The core of his vast background is emergency medicine, addiction medicine, mental health treatment, and physician health.

Drs. Greenberg and Sucher assess, evaluate, and monitor health care professionals along with workers in high risk occupational fields for public regulatory agencies and the private sector.

Using the following link, the Board recommends viewing this power point presentation to learn more about the CAPHP, their private monitoring programs, and the Mission Pacific Coast Recovery programs that provide professional evaluation and assessment services, and much more, click on view presentation at: http://www.mbc.ca.gov/board/meetings/Index_2011.html

All incoming 7th Graders will need proof of a Pertussis Booster (Tdap) to enter school in 2012-2013: Immunize 6th Graders Now

A big Thank You, from the California Department of Public Health, Immunization Branch for your diligence in immunizing 7th through 12th grade students with Tdap to meet the new 2011-2012 school year requirement. California health care providers and schools have immunized and reviewed documentation for more than three million students. This has been one of the largest student immunization programs in California's history. Your efforts are now protecting the health of students and communities throughout California and are deeply appreciated.

Beginning with the 2012-2013 school year and annually thereafter, all students entering 7th grade will need documentation of having met the pertussis booster shot requirement. To protect your patients against the ongoing risk of pertussis, it is important to immunize your 6th graders with Tdap now if they haven't received it yet. This is a great opportunity to provide other recommended immunizations (MCV4, HPV, and influenza vaccines), catch-up immunizations (e.g., 2nd dose of varicella and MMR), and comprehensive care.

In 2011, the federal Advisory Committee on Immunization Practices published updated recommendations at http://www.cdc.gov/vaccines/pubs/acip-list.htm which include:

- There is no minimum interval between Tdap and the last Td vaccine.
  Don't delay in immunizing your adolescents even if they have received a recent Td but not Tdap yet.
- For pregnant adolescents who haven't yet received Tdap, health care providers should administer Tdap during pregnancy, preferably after 20 weeks' gestation.

Different vaccines have similar names and abbreviations that can confuse the school staff who monitor the new law. Records must clearly show whether a student received a dose of Tdap, which meets the new requirement, or Td, which does not. Please make sure your patients' records for school clearly state which vaccine has been given. The California Immunization Registry (www.cairweb.org) can assist in keeping your patients on schedule with their immunizations, while providing clear records for schools.

For additional information, please visit http://www.shotsforschool.org/ , or contact the CDPH Immunization Branch at (510) 620-3737. You may also contact your local health department's immunization program.

To help us with implementation of the new Tdap requirement, you are invited to take a brief survey (approximately five minutes) at https://www.surveymonkey.com/s/29ZL73C . Your input is greatly appreciated.

Opioid Drugs and Risk Evaluation and Mitigation Strategies (REMS)

Opioids are at the center of a major public health crisis of addiction, misuse, abuse, overdose and death. FDA is taking action to protect patients from serious harm due to these drugs. This action represents a careful balance between continued access to these necessary medications and stronger measures to reduce their risks. For more information on opioid products and an update on implementation of opioids REMS, please visit www.fda.gov/Drugs/DrugSafety/InformationbyDrugClass/ucm163647.htm

New swine, drug-resistant flu strains tracked

Condensed from a S.F. Chronicle article, January 7, 2012 by Erin Allday, Chronicle Staff Writer

The flu season hasn't kicked in yet, but San Francisco Bay Area infectious disease experts are on the alert for new strains of the virus, including another swine flu that's popped up in parts of the United States and a drug-resistant flu circulating in the Southern Hemisphere.

It's possible that these strains of influenza will never arrive in California, where the flu season officially starts in October but doesn't usually pick up steam until January or February. So far, very few cases of influenza have been reported statewide. One person, a Bakersfield man, has died from the flu. Bottom line: **Get a flu shot!**

Persistent cough in an adult? — Think Pertussis

by A. Nelson El Amin, M.D., and Julia Heinzerling, M.P.H., Immunization Program Los Angeles County Department of Public Health

In 2010 the highest rates of pertussis in over half a century were reported in California, based on more than 9,000 cases and 10 infant deaths. Rates have decreased in 2011 but remain high. Although many clinicians consider pertussis to be a childhood disease, studies suggest that 12% - 32% of adults with unremitting cough can have pertussis.[1, 2]

Persons 19 years of age and older accounted for 25% of the California pertussis cases reported in 2010. Regular contact with children is not a prerequisite; and, an adult can contract pertussis from an individual of any age at home, work, or a public setting.

The following case should remind all primary care, specialty, and Emergency Department physicians to consider pertussis in the differential diagnosis for patients of all ages presenting with persistent cough.

"On September 3, 2011, a 43-year-old woman had the onset of a cough that increased in severity. Three days later, she saw her otolaryngologist, who suspected her symptoms to be an exacerbation of her chronic gastro-esophageal reflux disease (GERD) and allergies. Her medication for reflux was increased, and she was started on an antibiotic.

Over the next 7 days, her cough became more severe, paroxysmal in nature and accompanied by post-tussive vomiting as well as post-tussive enuresis. Her otolaryngologist saw her again and referred her to a gastroenterologist for GERD. The gastroenterologist adjusted the dose of her anti-reflux medication and scheduled her for endoscopy the next day (about two weeks after the onset of her unremitting cough).

During endoscopy she experienced laryngospasm and was referred to an emergency room where she was evaluated by a different otolaryngologist, who diagnosed her with GERD and allergies and hospitalized her overnight for observation given her respiratory distress during the procedure.

Prior to hospital admission an astute Emergency Department physician obtained from her a nasopharyngeal specimen for pertussis PCR testing, which detected Bordetella pertussis nucleic acid. Treatment for pertussis was initiated 2 days after her hospital discharge, and her cough gradually resolved. The local health department conducted a contact investigation and ensured the availability of antibiotic prophylaxis for her close contacts."

There is often a delay in diagnosing pertussis in patients with chronic cough or respiratory difficulties. It is important to consider pertussis in such patients when their baseline respiratory condition/symptoms significantly worsen and especially if they experience one or more of the following:

- Paroxysmal cough
- Post-tussive vomiting
- Choking and gagging
- Absence of post-tussive "whoop" that is characteristic in young children with pertussis

Please report all suspected pertussis cases to your local department of public health within one working day of identification - don't wait for lab confirmation to report.

Finally, you can prevent pertussis by immunizing all adults, including those 65 years and older, with Tdap (Tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis) vaccine. To protect the most vulnerable, adults who anticipate close contact with an infant younger than 12 months of age, (including women who are or may become pregnant) and health care workers providing direct patient care should get a dose of Tdap now if they have not previously received it. Tdap can be given at any time after prior Td. Tdap should not be delayed when indicated.

Information about diagnosing and treating pertussis is available at:

- www.cdph.ca.gov/programs/immunize/Documents/PertussisLaboratoryTesting.pdf
- www.cdph.ca.gov/HealthInfo/discond/Documents/CDPHPertussisQuicksheet(3)201010.pdf
- www.cdph.ca.gov/programs/immunize/Documents/PertussisWebinar_Sept2_2010slides.ppt
- www.cdc.gov/mmwr/preview/mmwrhtml/mm6001a4.htm?s_cid=mm6001a4_w

References

[1] Cherry JD, Grimprel E, Guiso N, et al. Defining pertussis epidemiology, clinical, microbiologic and serologic perspectives. Pediatr Infect Dis J. 2005; 24 (suppl);S25-S34.

[2] Dworkin MS. Adults are whooping, but are internists listening. Ann Intern Med. 2005; 142:832-835.

Learning online: Physician-supported website helps physicians meet special state CME requirements with programs that are proven educationally effective

by John M. Harris, Jr., M.D., M.B.A., President, Medical Directions, Inc.

The Virtual Lecture Hall® (www.VLH.com) is a CME Website that is 100% funded by physician users. It offers a number of online programs to help physicians meet special state CME requirements, several of which were developed with research funding from the National Institutes of Health (NIH):

- **Culture & End of Life Care –** Learn cultural competency in an end of life and geriatric care setting in this new series developed with NIH support. This multimedia online program provides up to 4.0 CME credits. Evaluated in a recent randomized controlled trial with a group of 227 family medicine physicians, these three courses were enthusiastically received and associated with increases in knowledge and self-reported cultural competence behaviors at 9-week follow-up. This program provides AAFP Prescribed Credit and helps meet California's geriatric medicine CME requirement.
- **Improving Outcomes in Chronic Pain –** A comprehensive, multimedia, 14.5 credit program also developed with NIH research support. Written by national pain experts and shown to be educationally effective in a randomized trial.[1] Physicians can take all 14.5 credits or as much as they need. This course can be combined with other programs on The Virtual Lecture Hall to meet California's CME requirement for training in pain management and end of life care.
- **Current Management of Domestic Violence (DV): Responding to Intimate Partner Violence –** Learn how to comfortably and successfully manage the difficult clinical problems posed by DV. Physicians can earn 0.75-16 credits in this case-based program that deals with DV presentations in five primary care specialties. The program was prepared by DV experts and developed as part of an NIH-funded research project. It has been shown to be educationally effective in a randomized trial.[2]
- **Managing Type 2 Diabetes in Diverse Populations –** Enhance your knowledge of the current therapy of type 2 diabetes and improve your cultural competency. Physicians can earn from 0.5-9 credits in this NIH-funded, case-based program authored by cultural competency and diabetes experts.

The Virtual Lecture Hall offers additional CME programs covering many special topics, including: medical errors, patient relations/safety, professional responsibility, ethics, prescribing practices, patient communication, risk management, and child abuse. The Virtual Lecture Hall (www.VLH.com) does not contain advertising or offer CME programs that are underwritten by commercial interests. The site is entirely supported by its users.

[1] Harris JM, Elliott TE, Davis BE, et al. Educating generalist physicians about chronic pain: Live experts and online education can provide durable benefits. Pain Medicine. 2008;9:555-563

[2] Short LM, Surprenant ZJ, Harris JM. A community-based trial of an online intimate partner violence CME program. American Journal of Preventive Medicine. 2006;30:181-185.

Note: *MBC Newsletter readers can take these programs for free by creating a complimentary account at www.VLH.com - use Special Registration Code 5040 (membership usually costs $25). CME credit is $25 per credit. The site's owner advises that California physicians can determine how many physicians already have used these courses and how they have rated them without having to subscribe to the site.*

Medical Professionalism – In the New Millennium: A Physician Charter

ABIM Foundation; ACP Foundation; European Federation of Internal Medicine (With permission, the Medical Board of California shares highlights of this document below. Go to the link at the end of this article to view the full physician charter.)

Commitment to improving quality of care

Physicians must be dedicated to continuous improvement in the quality of health care. This commitment entails not only maintaining clinical competence but also working collaboratively with other professionals to reduce medical error, increase patient safety, minimize overuse of health care resources, and optimize the outcomes of care. Physicians must actively participate in the development of better measures of quality of care and the application of quality measures to assess routinely the performance of all individuals, institutions, and systems responsible for health care delivery. Physicians, both individually and through their professional associations, must take responsibility for assisting in the creation and implementation of mechanisms designed to encourage continuous improvement in the quality of care.

Commitment to improving access to care

Medical professionalism demands that the objective of all health care systems be the availability of a uniform and adequate standard of care. Physicians must individually and collectively strive to reduce barriers to equitable health care. Within each system, the physician should work to eliminate barriers to access based on education, laws, finances, geography, and social discrimination. A commitment to equity entails the promotion of public health and preventive medicine, as well as public advocacy on the part of each physician, without concern for the self-interest of the physician or the profession.

Commitment to maintaining trust by managing conflicts of interest

Medical professionals and their organizations have many opportunities to compromise their professional responsibilities by pursuing private gain or personal advantage. Such compromises are especially threatening in the pursuit of personal or organizational interactions with for-profit industries, including medical equipment manufacturers, insurance companies, and pharmaceutical firms. Physicians have an obligation to recognize, disclose to the general public, and deal with conflicts of interest that arise in the course of their professional duties and activities. Relationships between industry and opinion leaders should be disclosed, especially when the latter determine the criteria for conducting and reporting clinical trials, writing editorials or therapeutic guidelines, or serving as editors of scientific journals.

Commitment to professional responsibilities

As members of a profession, physicians are expected to work collaboratively to maximize patient care, be respectful of one another, and participate in the processes of self regulation, including remediation and discipline of members who have failed to meet professional standards. The profession should also define and organize the educational and standard-setting process for current and future members. Physicians have both individual and collective obligations to participate in these processes. These obligations include engaging in internal assessment and accepting external scrutiny of all aspects of their professional performance.

To read the full physician charter, visit http://www.abimfoundation.org/professionalism/physician-charter.aspx

Help the Board go green

This newsletter is being sent via email to all physicians who have provided an email address on the Board's physician survey or application form. The Board only is printing the winter issue of the newsletter. The spring, summer and fall issues will be available only online. To receive an email notification when the latest newsletter has been posted online, join the Board's Subscribers' List at www.mbc.ca.gov/subscribers.html. Let's go green!

Administrative actions: August 1, 2011 – October 31, 2011

Physicians and Surgeons

ABARBANEL, ANDREW, M.D. (G 47490), Soquel, CA
Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, excessive prescribing, prescribing without a prior examination and failure to maintain adequate and accurate medical records in the care and treatment of four patients and for failing to follow the Board's guidelines for treating patients with chronic pain. Revoked, stayed, placed on 3 years probation with terms and conditions including, but not limited to, completing an educational course, a prescribing practices course, a medical record keeping course, and an ethics course. October 28, 2011

ABDEL-AL, NAGLAA ZIDAN ELSAYED (A 99938) Washington, IN
Stipulated Decision. Disciplined by Arizona for suspected use of a general anesthetic/sedative. Surrender of License. September 19, 2011

ALI, ZULFIQAR, M.D. (A 38449), Fremont, CA
Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts and incompetence in the care and treatment of a patient for failing to correctly interpret an angiogram of the right coronary artery and for performing a stenting procedure without adequate documentation of the need for this procedure. Physician must complete a clinical training program and a medical record keeping course. Public Reprimand.
October 27, 2011

AMIR-JAHED, A.K. (A 41879), Los Angeles, CA
Stipulated Decision. Violated his Board-ordered probation by failing to comply with terms and conditions including, but not limited to, obeying all laws and paying cost recovery. Surrender of License. September 30, 2011

ANDREWS, LESLIE JEAN, M.D. (G 51253) Mount Shasta, CA
Stipulated Decision. No admissions but charged with repeated negligent acts in the care and treatment provided to a patient during a surgical procedure for recurrent urinary incontinence. Revoked, stayed, placed on 3 years probation with terms and conditions including, but not limited to, completing an educational course and a clinical training program. September 8, 2011

ATHARI, MOHAMMAD AHMAD, M.D. (A 31090) Houston, TX
Stipulated Decision. Disciplined by Texas for performing numerous unnecessary diagnostics and therapies on five patients and failing to maintain adequate medical records

Explanation of disciplinary language and actions

"Effective date of decision" — Example: "August 17, 2011" at the bottom of the summary means the date the disciplinary decision goes into operation.

"Gross negligence" — An extreme deviation from the standard of practice. "Incompetence" — Lack of knowledge or skills in discharging professional obligations.

"Judicial review pending" — The disciplinary decision is being challenged through the court system, i.e., Superior Court, Court of Appeal, or State Supreme Court. The discipline is currently in effect.

"Probationary License" — A conditional license issued to an applicant on probationary terms and conditions. This is done when good cause exists for denial of the license application.

"Public Letter of Reprimand" — A lesser form of discipline that can be negotiated for minor violations, usually before the filing of formal charges (Accusations). The licensee is disciplined in the form of a public letter.

"Revoked" — The license is canceled, voided, annulled, rescinded. The right to practice is ended.

"Revoked, stayed, five years probation on terms and conditions, including 60 days suspension" — "Stayed" means the revocation is postponed. Professional practice may continue so long as the licensee complies with specified probationary terms and conditions, which, in this example, includes 60 days of actual suspension from practice. Violation of probation may result in the revocation that was postponed.

"Stipulated Decision" — A form of plea bargaining. The case is formally negotiated and settled prior to trial.

"Surrender" — To resolve a disciplinary action, the licensee has given up his or her license — subject to acceptance by the Board.

"Suspension from practice" — The licensee is prohibited from practicing for a specific period of time.

by neglecting to document his justifications for the various neurological diagnostic tests. Public Reprimand. October 27, 2011

BACON, MERRILL PHILLIP, M.D. (C 31585)
Ventura, CA
Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts in the care and treatment of three patients by failing to perform an appropriate medical history and physical examination, failing to maintain adequate and accurate medical records, failing to provide proper oversight and monitoring of the patient's use of controlled substances in the management of chronic pain and failing to refer patients to a specialist for treatment of chronic or ongoing medical problems. Revoked, stayed, placed on 2 years probation with terms and conditions including, but not limited to, prohibited from prescribing controlled substances except as an anesthesiologist in a hospital or surgery center, maintaining a practice monitor, completing a prescribing practices course, a medical record keeping course, and an educational course. September 2, 2011

BANKER, NITESH ARUN, M.D. (G 87724)
Woodlands, TX
Stipulated Decision. Disciplined by Texas for committing unprofessional conduct by performing a subclavian central line placement on a 76-year old male patient in lieu of a peripherally inserted central catheter (PICC) line placement, and for failing to document the justification for the change in the line placement and the rationale for not following the family's request for a PICC line. Public Reprimand. September 23, 2011

BERNAD, PETER GABOR, M.D. (G 30338)
Woodbridge, VA
Stipulated Decision. Disciplined by Virginia for failing to perform and/or document an adequate examination, failing to document an appropriate treatment plan and failing to timely respond to the patient's changing pathology. Public Reprimand. September 22, 2011

BERZ, DAVID, M.D. (A 118786)
Saint John, NB, Canada
Stipulated Decision. Disclosed on his application for licensure that he resigned his Rhode Island Hospital privileges in May 2010 while the subject of an on-going investigation, and disclosed his current monitoring agreement with the Rhode Island Medical Society Physicians Health Committee. Probationary license issued, placed on 7 years probation with terms and conditions including, but not limited to, completing a professional enhancement program and prohibited from engaging in the solo practice of medicine. Probationary license issued October 21, 2011.

BITTNER, CRAIG ALAN (A 53795), Los Angeles, CA
Stipulated Decision. Aided and abetted the unlicensed practice of medicine. Surrender of License. October 14, 2011

BLEVINS, JONATHAN WILLIAM, M.D. (A 117764)
San Francisco, CA
Stipulated Decision. Disclosed on his application for licensure that disciplinary action was taken by Pennsylvania which resulted in his Graduate Medical Trainee license being placed on probation for 6 months for writing prescriptions of Tylenol #3 for his brother's girlfriend and for writing prescriptions without conducting a physical examination. Probationary license issued, placed on 35 months probation with terms and conditions including, but not limited to, completing a prescribing practices course, a medical record keeping course and an ethics course, and maintaining a record of all controlled substances ordered, prescribed, dispensed, administered, possessed and any recommendation or approval for marijuana. Probationary license issued August 3, 2011.

BUCHBINDER, MAURICE, M.D. (A 38176)
Encinitas, CA
Committed gross negligence and unprofessional conduct in the care and treatment of a patient in that he made inappropriate comments to the patient during a cardiac catheterization procedure. Physician completed an ethics course and a one-year board-approved anger management program. Public Reprimand. September 19, 2011

BUNCHIEN, ARIN, M.D. (A 118815), Chico, CA
Stipulated Decision. Failed to disclose on his application for licensure that his contract for a successive year of postgraduate training had not been renewed and that he was placed on probation for the first year of postgraduate training in the Flushing Hospital Medical Center New York internal medicine residency program. Probationary

license issued, placed on 3 years probation with terms and conditions including, but not limited to, completing an ethics course. Probationary license issued October 26, 2011.

CASEY, KIRK CHRISTOPHER (G 61633), Chico, CA
Stipulated Decision. No admissions but charged with dishonest acts and engaging in acts that would warrant denial of an application for licensure by violating his Board-ordered probation by failing to comply with terms and conditions of probation including, but not limited to, abstaining from use or possession of controlled substances and submitting to biological fluid testing. Surrender of License. September 29, 2011

CASTANON-HILL, RITO, M.D. (A 71843)
Los Angeles, CA
Committed acts of dishonesty and unprofessional conduct related to a felony conviction for facilitating the unlicensed practice of medicine. Revoked, stayed, placed on 7 years probation with terms and conditions including, but not limited to, 30 days actual suspension, completing an ethics course, and obtaining a billing monitor. October 21, 2011

CHAMBI, ENOC, M.D. (A 42966), Montclair, CA
Stipulated Decision. Committed gross negligence, repeated negligent acts and failed to maintain accurate and adequate and medical records in the care and treatment of two patients in that he failed to adequately perform cosmetic procedures and failed to maintain adequate malpractice liability insurance. Revoked, stayed, placed on 3 years probation with terms and conditions including, but not limited to, completing an ethics course, a medical record keeping course, and a clinical training program, obtaining a practice monitor, and prohibited from performing surgeries without adequate malpractice liability insurance coverage. October 28, 2011

CHERNOFF, WILLIAM GREGORY, M.D. (A 51787)
Santa Rosa, CA
Stipulated Decision. Disciplined by Indiana for engaging in fraud or material deception to obtain a license to practice for failing to disclose pending criminal charges in Indiana and discipline against his California medical license on his Indiana license renewal form, and violated his Board-ordered probation by failing to obey all laws. Revoked, stayed, current probationary period of 3 years is extended for 1 year with terms and conditions including, but not limited to, completing a clinical training program, maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana, prohibited from engaging in the solo practice of medicine, completing an ethics course, a prescribing practices course, a medical record keeping course, and an educational course, abstaining from the use of alcohol, and submitting to biological fluid testing. September 1, 2011

CHOU, STELLA YI, M.D. (C 52753), Sandy, UT
Stipulated Decision. Disciplined by Nevada for failing to adequately supervise medical assistants and continually failing to exercise the skill or diligence or use the methods ordinarily exercised under the same circumstances by physicians in good stand practicing in the same specialty or field. Public Reprimand. September 15, 2011

CHUN, GEORGE M.G., M.D. (A 50023)
Laguna Niguel, CA
Stipulated Decision. Failed to recognize venous injury during a tunneled catheter placement and misinterpreted an episode of hypotension as a vasovagal response. Public Letter of Reprimand. August 16, 2011

COLUCCI, STEPHEN, M.D. (G 21782), Riverside, CA
Stipulated Decision. Failed to provide proper oversight in monitoring a patient's use of controlled substances, displayed a lack of knowledge about opioid medication, and was deficient in his documentation of a patient's chronic pain condition. Public Letter of Reprimand. October 10, 2011

DUTTA-CHOUDHURY, AMRITA (A 75362)
Mill Valley, CA
Default Decision. Physician has a condition affecting her ability to practice medicine safely. Revoked. September 23, 2011

ERMENTROUT, ROBERT MITCHELL, M.D. (A 118012)
Seal Beach, CA
Stipulated Decision. Disclosed on his application for licensure three alcohol-related incidents that resulted in two misdemeanor convictions. Probationary license issued, placed on 5 years probation with terms and conditions including, but not limited to, submitting to biological fluid testing and abstaining from the use of alcohol and controlled substances. Probationary license issued August 16, 2011.

FLYNN, DONNA LYNN (G 80223), Simi Valley, CA
Default Decision. Failed to submit to a Board-ordered exam. Revoked. October 28, 2011

FEINBERG, MICHAEL JACK, M.D. (G 68023)
Santa Barbara, CA
Stipulated Decision. Prescribed controlled substances and dangerous drugs to persons in California over the Internet without conducting an in-person examination. Public Letter of Reprimand. September 22, 2011

GHERMAN, CHARLES (A 19240), San Francisco, CA
Stipulated Decision. No admissions but charged with unprofessional conduct and negligence in the treatment of three female patients for failing to provide informed consent prior to performing an examination of patients breasts, abdomen, groin and failing to maintain adequate and accurate medical records of his examination and/or findings. Surrender of License. August 31, 2011

GOHARBIN, AMIR, M.D. (A 118063)
Rancho Cucamonga, CA
Stipulated Decision. Failed to disclose information on his application for licensure related to his previous participation in and resignation from three postgraduate training programs and that the third postgraduate training program declined to renew his training contract. Probationary license issued, placed on 3 years probation with terms and conditions including, but not limited to, completing an ethics course and a professional enhancement program. Probationary license issued August 17, 2011.

GRANT, JOHN F. (A 63101), Frazier Park, CA
Default Decision. Violated his Board-ordered probation by failing to enroll in a clinical training or educational program. Revoked. September 2, 2011

GROLLMUS, JOHN MARK (C 27979), San Francisco, CA
Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, incompetence and failure to maintain adequate and accurate medical records in the care and treatment of five patients. Surrender of License. August 17, 2011

GURNEY, MELVIN, M.D. (G 60352), Santa Rosa, CA
Stipulated Decision. Physician has a condition affecting his ability to practice due to substance use dependence, committed acts that violated drug statutes by using, administering and furnishing controlled substances and/or dangerous drugs to his wife and to himself without an appropriate prior examination, and failed to maintain and/or was dishonest in his failure to maintain records regarding his prescribing of controlled substances and/or dangerous drugs. Revoked, stayed, placed on 5 years probation with terms and conditions including, but not limited to, abstaining from use of controlled substances, submitting to biological fluid testing, maintaining a record of all controlled substances, obtaining a practice monitor, and prohibited from engaging in the solo practice of medicine. August 5, 2011

HAN, ABRAHAM, M.D. (G 72378)
Hacienda Heights, CA
Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts and failure to maintain adequate and accurate medical records in the care and treatment of a patient by failing to timely diagnose and treat a post-operative infection and failing to timely refer the patient to a specialist for treatment and, aiding and abetting the unlicensed practice of medicine by instructing his medical assistant to provide wound care and administer intramuscular antibiotics to the patient while he was out of the office. Respondent shall cease the practice of liposuction and a Public Reprimand to be issued upon completion of a medical record-keeping course, a supervision of medical assistants' course and an early detection and treatment of infection course.
October 28, 2011

HANSON, LARS ERIK, M.D. (G 79925), San Gabriel, CA
Stipulated Decision. No admissions but charged with gross negligence, unprofessional conduct, repeated negligent acts for his maintenance and operation of an outpatient abortion clinic and for the care and treatment provided to a patient. Physician must complete an ethics course. Public Reprimand. September 8, 2011

HO, ANHNGUYET T., M.D. (G 61604), Downey, CA
Stipulated Decision. Failed to recognize and respond to the diminishing heart rate of a baby during labor and delivery. Public Letter of Reprimand. August 10, 2011

HOBAN, DAVID LOUIS, M.D. (G 21690)
Santa Cruz, CA
Stipulated Decision. Convicted of a misdemeanor for falsifying public records while employed as a psychiatrist

for the Department of Corrections. Revoked, stayed, placed on 5 years probation with terms and conditions including, but not limited to, 135 days suspension, completing an ethics course and obtaining a billing monitor. September 30, 2011

HUFNAGEL-PINNEY, BIRGITTA, M.D. (A 53494)
San Diego, CA
Stipulated Decision. Failed to properly manage a patient's lipid disorder and demonstrated a lack of knowledge of the contraindication of prescribing a combination of simvastatin and gemfibrozil and of the common conditions that can increase the risk of acute rhabdomyolysis. Public Letter of Reprimand. September 27, 2011

IGWEGBE, IFEANYI CHARLES (C 52936), Yuba City, CA
Used alcoholic beverages to the extent and in such a manner as to be dangerous or injurious to himself or to any other person or to the public and in such a manner as to impair his ability to practice medicine safely. Revoked. October 21, 2011

ISRAELSTAM, DAVID M., M.D. (C 26177), Madison, WI
Stipulated Decision. Disciplined by Wisconsin for committing a negligent act in the care of a female patient whose medical history included physical and sexual abuse by her step-father in that he violated the physician/patient boundary by asking the patient if she was interested in meeting a young man who was looking for a sexual relationship. Public Letter of Reprimand. August 17, 2011

JACKSON, D. ANTHONY (G 33174), Inglewood, CA
Convicted of two misdemeanors for driving under the influence of alcohol, committed acts of dishonesty for the unlawful use and possession of a false driver's license while trying to board an aircraft, misuse of alcohol in such a manner as to be dangerous or injurious to himself or others, and violated the terms and conditions of his Board-ordered probation by failing to obey all laws. Revoked. August 19, 2011. Judicial Review Pending.

JASPER, IRINA, M.D. (A 73109), Pasadena, CA
Stipulated Decision. Failed to report a misdemeanor conviction for reckless driving and falsely indicated on her license renewal that she had not been convicted of a crime. Public Letter of Reprimand. August 24, 2011

JEFFERSON, RICHARD J. (G 15425), Los Angeles, CA
Stipulated Decision. No admissions but charged with having a condition affecting his ability to practice medicine safely and violating his Board-ordered probation by failing to complete a clinical training program. Surrender of License. September 22, 2011

JONES, CHARLES F., II, M.D. (A46217)
Los Angeles, CA
Physician has a condition affecting his ability to practice medicine safely. Revoked, stayed, placed on 5 years probation with conditions including, but not limited to, completing a clinical training program. August 19, 2011

JOPLIN, JESSE JAMES (G 41971), Santa Clara, CA
Stipulated Decision. No admissions but charged with having a condition affecting his ability to practice medicine safely. Surrender of License. September 20, 2011

KARUBIAN, FREDERICK J., M.D. (A 42957)
Santa Monica, CA
Stipulated Decision. Failed to maintain adequate and accurate medical records in that he dictated a history and physical and back-dated notes into the patient's medical records for times he had not actually examined or questioned the patient. Revoked, stayed, placed on 4 years probation with terms and conditions including, but not limited to, completing a medical record keeping course and an ethics course. September 21, 2011

KIRKPATRICK, JOHN STEWART, M.D. (GFE 71108)
Birmingham, AL
Stipulated Decision. Disciplined by Florida for failing to adequately document justification for the course and the results of a surgical procedure performed on a patient. Public Letter of Reprimand. September 28, 2011

LARSSON, JAN O. (A 52928), Encino, CA
Default Decision. Convicted of a misdemeanor for failure to file an income tax return. Revoked. September 15, 2011

LASH, AMOS LUTHER (G 34981), Silver City, NM
Default Decision. Committed gross negligence, repeated negligent acts and failed to maintain adequate and accurate medical records in the care and treatment of a patient by failing to perform a radical perineal prostectomy and failing to inform the patient that he did not completely remove his prostate and therefore did not completely remove his prostate cancer. Revoked. October 21, 2011

LIN, DARLENE D., M.D. (A 96223), Hayward, CA
Stipulated Decision. Failed to perform an adequate review of a patient's earlier upper tract studies at the time of performing a cystoscopy, failed to perform an adequate bladder examination and failed to order appropriate tests to confirm or rule out diagnosis of gross hematuria and chronic prostatitis. Public Letter of Reprimand.
September 6, 2011

LIN, JAMES T., M.D. (A 86869), Simi Valley, CA
Stipulated Decision. No admissions but charged with repeated negligent acts and failure to maintain adequate and accurate medical records in the care and treatment of two pain management patients. Physician must complete a prescribing practices course and a medical record keeping course. Public Letter of Reprimand.
September 30, 2011

LIZARRAGA, JUAN, M.D. (A 49181), Fullerton, CA
Stipulated Decision. Violated his Board ordered probation by failing to pay cost recovery and probation monitoring costs. Revoked, stayed, will remain on probation until he reimburses the Board for the outstanding cost recovery and probation monitoring costs but is relieved from the prior condition prohibiting the supervision of physician assistants. October 28, 2011

LORENZO, AGNES LOPEZ (AFE 41404)
Mira Loma, CA
Stipulated Decision. Convicted of a misdemeanor for alteration or modification of medical records or creation of false medical records with fraudulent intent involving Medicare beneficiaries which resulted in a loss to Medicare of $6,652,364.39. Surrender of License.
October 25, 2011

MADRID, CECELIA T., M.D. (G 48480), Burbank, CA
Stipulated Decision. Committed gross negligence, repeated negligent acts, furnished dangerous drugs without appropriate examination, excessive prescribing, failed to maintain adequate and accurate medical records in failing to follow the recommended guidelines for caring for patients with chronic pain. Revoked, stayed, placed on 7 years probation with terms and conditions including, but not limited to, prohibited from engaging in the solo practice of medicine, prohibited from ordering, prescribing, dispensing, administering or possessing any schedule II controlled substances, prohibited from treating patients with chronic pain, completing a prescribing practices course, a medical record keeping course, an educational course, and a clinical training program, and maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed.
October 20, 2011

MAHARAM, LEWIS G., M.D. (G 88831), New York, NY
Stipulated Decision. Disciplined by New York for conviction of a misdemeanor for failing to file personal income tax returns in 2007. Public Letter of Reprimand.
October 25, 2011

MALOSCHIK, CHRISTIAN JOSEPH, M.D. (A 118024)
Orange, CA
Stipulated Decision. Disclosed on his application of licensure a misdemeanor conviction for driving under the influence. Probationary license issued, placed on 5 years probation with terms and conditions including, but not limited to, submitting to biological fluid testing and abstaining from use of alcohol and controlled substances. Probationary license issued August 15, 2011.

MARSHAK, HERBERT, M.D. (A 29118)
Los Angeles, CA
Stipulated Decision. Committed repeated negligent acts and failed to maintain adequate and accurate medical records in the care and treatment of a patient in that he failed to communicate with other health care practitioners. Physician must complete a prescribing practices course and a medical record keeping course. Public Reprimand. September 23, 2011

MCCOLE, JAMES (G 23824), Sausalito, CA
Stipulated Decision. Has a condition affecting his ability to practice medicine safely. Surrender of License.
September 14, 2011

MILLER, RUSSELL LOWELL, M.D. (G 22063)
Westbury, NY
Stipulated Decision. Disciplined by New York for failing to retain multiple patient records for at least six years, and until one year after a minor patient reached the age of eighteen. Public Letter of Reprimand. October 26, 2011

MIYASHITA, JEAN TOMI, M.D. (G 79761)
Sherman Oaks, CA
Stipulated Decision. No admission but charged with having a condition affecting her ability to practice medicine safely.

Revoked, stayed, placed on 5 years probation with terms and conditions including, but not limited to, taking and passing Special Purpose Examination (SPEX) as a condition precedent to restoring license to active status, completing a prescribing practices course, a medical record keeping course, an ethics course, and obtaining a practice monitor. October 28, 2011

MOSCOSO, JUAN (G 86605), Los Angeles, CA
Stipulated Decision. Convicted of a felony for possession of child pornography in violation of Title 18, United States Code section 2252(a)(b) and required to register as a sex offender. Surrender of License. August 23, 2011

MUKERJI, SASANKA (A 16848), Napa, CA
Default Decision. Violated his Board-ordered probation by failing to comply with numerous terms and conditions of probation including, but not limited to, taking and passing an oral and/or written examination, submitting quarterly declarations, paying probation monitoring costs, and paying the costs of an oral/written examination. Revoked. September 9, 2011

MULTANI, SALIMA (A51179), Pasadena, CA
Stipulated Decision. Voluntarily tendered his license due to retirement, health reasons, or is otherwise unable to satisfy the terms and conditions of probation. Surrender of license. August 25, 2011

NEWHARD, HORACE (C 35133), Novato, CA
Stipulated Decision. No admissions but charged with unprofessional conduct, gross negligence for his inappropriate conduct toward two female patients, repeated negligent acts in failing to monitor medications inappropriately prescribed to an elderly female patient, and failure to maintain adequate and accurate medical records. Surrender of License. October 28, 2011

NGUYEN, THUAN T., M.D. (A 55079)
Fountain Valley, CA
Stipulated Decision. Failed to evaluate a patient's postoperative complaints of worsening pain and nausea following an abdominal liposuction procedure. Public Letter of Reprimand. October 20, 2011

OH, SUN KWA (A 32180), Los Angeles, CA
Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, and failure to maintain adequate and accurate medical records in the treatment of two patients for failing to assess symptoms or signs of encephalopathy, failing to perform a neurological examination, failing to assess side effects of medication, failing to assess patients' compliance with medications and failing to complete and authenticate progress notes and provider orders in a legible manner. Surrender of License. October 26, 2011

PACKARD, STEVEN HOWARD, M.D. (G 28211)
Champaign, IL
Stipulated Decision. Disciplined by Illinois for failing to follow-up with a patient regarding the findings from a pathology report indicating a diagnosis of cancer. Public Letter of Reprimand. September 2, 2011

PASKEWITZ, MARK THOMAS (G 75246)
Valley Village, CA
Default Decision. Convicted of 5 felony counts of healthcare fraud, committed acts of dishonesty by billing for physical therapy services that were not provided and aided and abetted the unlicensed practice of medicine. Revoked. September 2, 2011

PASUHUK, EDWIN H. (A 39666), Highland, CA
Stipulated Decision. Committed acts of aiding and abetting the unlicensed practice of medicine, fraudulent billing, dishonesty, created false and fraudulent medical records, failed to maintain adequate and accurate medical records and violated his Board ordered probation by failing to comply with numerous terms and conditions including, but not limited to, allowing medical assistants to render patient care, failing to timely terminate his medical financial relationship with unlicensed persons, and failing to sell his practice in Riverside. Surrender of License. October 14, 2011

PELLERITO, JOHN THOMAS, JR., M.D. (G 81846)
Tucson, AZ
Stipulated Decision. Disciplined by the Arizona Board for inappropriate prescribing practices and inadequate record keeping which put a patient at risk for unnecessary and incorrect medical treatment. Public Letter of Reprimand. September 26, 2011

PEREZ, CLIFFORD MICHAEL, M.D. (C 53721), Davis, CA
Stipulated Decision. Disciplined by the United States Air Force (USAF) for failing to use appropriate general surgery technique during laparoscopic surgeries performed on

multiple patients. Revoked, stayed, placed on 4 years probation with terms and conditions including, but not limited to, completing a clinical training program and an educational course, and obtaining a practice monitor. September 7, 2011

PHAM, DAI T., M.D. (A 50227), San Jose, CA
Committed repeated acts of negligence and incompetence in the care and treatment of a patient for failing to perform a fundoscopic examination or check the patient's peripheral pulses. Revoked, stayed, placed on 3 years probation with terms and conditions including, but not limited to, completing a clinical training program. September 16, 2011

POQUECHOQUE, ROBERT, M.D. (A 118031)
Loma Linda, CA
Stipulated Decision. Failed to disclose on his application for licensure that he had been disciplined or placed under investigation, and that limitations and/or restrictions were placed upon him during his postgraduate training. Probationary license issued, placed on 3 years probation with terms and conditions including, but not limited to, completing an ethics course. Probationary license issued August 15, 2011

PORMIR, HOSHANG, M.D. (A 49827), Yorba Linda, CA
Stipulated Decision. No admissions but charged with gross negligence and repeated negligent acts in the care and treatment of four patients for failing to assess and examine the patients before ordering antipsychotic medications, failing to obtain informed consents before treating the patients with antipsychotic medications and failing to appropriately act as a medical director of a skilled nursing facility. Revoked, stayed, placed on 2 years probation with terms and conditions including, but not limited to, completing a clinical training program prior to resuming the practice of medicine, completing a prescribing practices course, prohibited from engaging in the solo practice of medicine, and prohibited from practicing medicine in skilled nursing facilities, convalescent homes and assisted living facilities. September 14, 2011

QUEST, CHARLES, M.D. (C 33972), Half Moon Bay, CA
Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, incompetence and failure to maintain adequate and accurate medical records in the care and treatment of a patient with chronic cough and dyspnea. Revoked, stayed, placed on 3 years probation with the following terms and conditions including, but not limited to, completing a medical record keeping course and an educational course, and providing 60 hours of free medical services to a community or non-profit organization. August 12, 2011

RIOS, FELICIANO, M.D. (G 33272), Chula Vista, CA
Stipulated Decision. Convicted of multiple felony convictions for insurance fraud, perjury, and possession of ammunition by a felon. Revoked, stayed, placed on 5 years probation with terms and conditions including, but not limited to 60 days actual suspension, completing an ethics course, obtaining a billing monitor, and prohibited from engaging in the solo practice of medicine.
September 15, 2011

RISK, WINTHROP SPIRIDON, II (A 78798)
Cedar Rapids, IA
Stipulated Decision. Disciplined by Iowa for engaging in a pattern of willful and repeated violations of the standard of practice for appropriate pain management by prescribing excessive controlled substances to numerous patients. Surrender of License.
September 22, 2011

ROCA, MARGO HIRSHMAN, M.D. (G 88118)
Port Charlotte, FL
Stipulated Decision. Discipline by Florida for failing to recognize a large mass adjacent to a patient's left psoas muscle during an interpretation of an MRI. Public Letter of Reprimand. September 28, 2011

ROMANO, THOMAS, M.D. (G 31881), Long Beach, CA
Stipulated Decision. Prescribed controlled substances to a family member and did not maintain appropriate medical records. Public Letter of Reprimand. September 15, 2011

ROSE, JOHN SPENCER, M.D. (G 75451)
Sacramento, CA
Stipulated Decision. Committed acts of unprofessional conduct due to his self use of controlled substances, unlawfully procuring controlled substances, and engaged in dishonest or corrupt acts by procuring narcotics, creating fictitious patients, writing false prescriptions on UC Davis Medical Center scripts, creating fictitious addresses for fictitious patients and also prescribing drugs to the fictitious patients to make the pattern of prescribing

more believable. Revoked, stayed, placed on 5 years probation with terms and conditions including, but not limited to, 30 days actual suspension, abstaining from the use of controlled substances and alcohol, submitting to biological fluid testing, completing an ethics course, maintaining a practice monitor, and prohibited from engaging in the solo practice of medicine. August 5, 2011

SADAI, JONATHAN (G 22542), Newport Beach, CA
Stipulated Decision. No admissions but charged with dishonesty, falsifying and fraudulent medical records, failure to maintain adequate and accurate medical records, gross negligence, repeated negligent acts and incompetence in the care and treatment of a patient in that he represented that he had performed allergy testing when he had not and he allowed testing to be performed by a person whose training was unknown to him. Surrender of License. October 27, 2011

SANTIAGO, ELEANOR (A 30385), Irvine, CA
Stipulated Decision. Voluntarily tendered her license due to retirement, health reasons, or is otherwise unable to satisfy the terms and conditions of probation. Surrender of license. October 27, 2011

SAZANI, THOMAS A., M.D. (A 42368), Orcutt, CA
Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, unprofessional conduct, and failure to maintain adequate and accurate medical records in the care and treatment of five patients for failing to conduct a good faith history or examination prior to providing marijuana recommendation and failing to discuss the proposed treatment plan and side effects or potential adverse consequences of using marijuana. Revoked, stayed, placed on 5 years probation with terms and conditions including, but not limited to, 70 days actual suspension, maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana, completing an educational course, a medical record keeping course, and an ethics course, and obtaining a practice monitor. August 26, 2011

SEIDEMAN, SUSAN E., M.D. (G 33438)
Redondo Beach, CA
Stipulated Decision. No admissions but charged with a felony conviction for filing a false tax return in violation of California Revenue and Taxation Code section 19705(a). Revoked, stayed, placed on 5 years probation with terms and conditions including, but not limited to, completing an ethics course. October 21, 2011

SHETH, SUSHIL ANIRUDDH (A 49675), Burr Ridge, IL
Disciplined by Illinois for a criminal conviction for health care fraud involving numerous private and federal health care benefit programs including Medicare, and fraudulently submitted reimbursements claims for services he did not provide resulting in the amount of $12 million. Revoked. August 5, 2011

SHULER, WILLIAM HENRY, M.D. (A 103402), Tulsa, OK
Stipulated Decision. Disciplined by Utah for issuing online prescriptions under an expired license to Utah residents for medications which were dispensed by a pharmacy located in the State of Florida. Public Letter of Reprimand. September 28, 2011

SILVERMAN, LAURANCE, M.D. (A 43134), Tucson, AZ
Stipulated Decision. Disciplined by Arizona for failing to obtain an informed consent form from a patient undergoing a cosmetic procedure and failing to have after-hours phone support available to patients in the event of complications following cosmetic procedures. Public Letter of Reprimand. September 21, 2011

SOMMERS, JONATHAN (G 41535), Albuquerque, NM
Stipulated Decision. No admissions but charged with unprofessional conduct, gross negligence, repeated negligent acts, and excessive prescribing in the treatment of five patients. Surrender of License. October 27, 2011

SORIANO, MELISSA (A 98336), San Francisco, CA
Stipulated Decision. No admissions but charged with having a condition affecting her ability to practice medicine safely. Surrender of License. August 9, 2011

STICKLAND, JEFFREY DEAN, M.D. (A 81465)
Marina Del Rey, CA
Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts and failure to maintain adequate and accurate medical records in the care and treatment of two patients. Revoked, stayed, placed on 35 months probation with terms and conditions including, but not limited to, completing a clinical education program, an educational course, a medical record keeping course, and prohibited from engaging in the solo practice of medicine. August 5, 2011

SU, WU-HSIUNG (A 33249), Rancho Cordova, CA
Stipulated Decision. No admissions but charged with gross negligence, incompetence, repeated negligent acts, and failure to maintain adequate and accurate medical records in the care and treatment of a patient for failing to notify patient of abnormal mammogram results, failing to document the results and follow-up plan in the patient's chart, failing to order appropriate follow-up studies, failing to perform a proper physical examination, failing to refer patient for a mammogram, and for performing and interpreting diagnostic procedures without the appropriate knowledge and training. Surrender of License. October 14, 2011

SWEENEY, JAMES PATRICK, M.D. (G 54293)
Colorado Springs, CO
Stipulated Decision. Disciplined by Colorado for misinterpreting an ultrasound of a 34-year-old female patient and failed to recommend a biopsy of suspicious tissue which resulted in a delay of the diagnosis of Stage II breast cancer. Public Letter of Reprimand. August 15, 2011

SWERDLICK, PETER, M.D. (A 40060)
North Hollywood, CA
Committed acts of repeated negligent acts, dispensed dangerous drugs without proper labeling, and failed to maintain adequate and accurate medical records in the care and treatment of two patients. Revoked, stayed, placed on 5 years probation with terms and conditions including, but not limited to, completing a medical record keeping course. September 9, 2011

VELA-VICTA, POLY MORALES, M.D. (A 73001)
Martinez, CA
Stipulated Decision. No admissions but charged with gross negligence and incompetence in the care and treatment of an 85-year-old patient residing in an assisted living facility with respect to the management of the patient's medication levels. Public Reprimand. September 8, 2011

WARAICH, AMNA MAHMOOD, M.D. (A 118041)
Carmichael, CA
Stipulated Decision. Failed to disclose on her application for licensure that her contract for a successive year of postgraduate training in the University of California, San Francisco-Fresno internal medicine residency program was not renewed. Probationary license issued, placed on 3 years probation with terms and conditions including, but not limited to, completing an ethics course. Probationary license issued August 15, 2011.

WEBB, JENNIFER LEE, M.D. (G 88918)
Bloomfield Township, MI
Stipulated Decision. Disciplined by Florida for failing to timely comply with a citation resulting from a Continuing Medical Education (CME) audit by failing to provide proof of completion of 40 hours of CME, failing to pay an administrative fine and additional costs. Public Letter of Reprimand. August 5, 2011

WHITFIELD, DENNIS W., M.D. (C 42238)
St. Helena, CA
Stipulated Decision. Committed gross negligence and repeated negligent acts by failing to obtain a CT scan or an MRI of a patient, despite x-ray findings indicating the view of C7 was suboptimal, and failing to elicit significant available historical information regarding the patient's numbness and tingling in her arm consistent with a potential neurological emergency prior to discharging the patient. Public Reprimand. September 8, 2011

WILLIAMS, MERLIN (C 38127), Los Angeles, CA
Stipulated Decision. Convicted of a misdemeanor for knowingly and intentionally distributing approximately 16.6 grams of pure oxycodone, a Schedule II narcotic drug controlled substance without a legitimate medical purpose. Surrender of License. August 9, 2011

YANKES, MAX EDWARD, M.D. (A 81907), Visalia, CA
Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, and incompetence in the care and treatment of a patient for failing to provide follow-up treatment and failing to timely notify patient of the abnormal abdominal ultrasound results which was suggestive of metastasized liver cancer. Public Reprimand. October 14, 2011

Physician Assistants

GREGORY, JOSEPH EDWARD, P.A. (PA 19779)
Clovis, CA
Stipulated Decision. Convicted of two misdemeanors for driving under the influence of alcohol. Revoked, stayed, placed on 5 years probation with terms and conditions

including, but not limited to, abstaining from controlled substances and alcohol, submitting to biological fluid testing, and completing 120 hours of community service-free services. September 28, 2011

LIU, FEI FAN, P.A. (PA 13731), Rowland Heights, CA
Stipulated Decision. Committed acts of gross negligence and repeated negligent acts in the care and treatment of one patient for administering a controlled substance (phentermine) without advance approval by a supervising physician. Revoked, stayed, placed on 3 years probation with terms and conditions including, but not limited to, completing a medical record keeping course and a clinical training course. October 26, 2011

SANTOS, TAMLIN CONNEL (PA 16171), Palo Alto, CA
Stipulated Decision. No admissions but charged with practicing medicine without a supervising physician, prescribing dangerous drugs without an appropriate prior examination and/or medical indication, violating Federal and State laws regarding dangerous drugs or controlled substances, failure to maintain adequate and accurate medical records, dishonesty, gross negligence and repeated negligent acts. Surrender of License.
August 16, 2011

SAHIH, LIORA, P.A, (PA 21743), Beverly Hills, CA
Stipulated Decision. Disclosed a misdemeanor conviction on her application for licensure. Placed on 3 years probation with terms and conditions. Probationary license issued August 9, 2011.

UDENGWU, IKE FERDINAND, P.A. (PA 21815)
Hawthorne, CA
Stipulated Decision. Engaged in the unlicensed practice of medicine and failed to disclose factual information on his previous application for licensure. Physician Assistant license granted, immediately revoked, stayed, placed on 3 years probation with terms and conditions including, but not limited to, completing a clinical training program and recertification through the National Commission on Certification of Physician Assistants as conditions precedent to practicing as a physician assistant. License issued September 8, 2011.

Doctors of Podiatric Medicine

BRISKIN, GARY, D.P.M. (E 3141), Santa Monica, CA
Stipulated Decision. Failed to document a surgical error, failed to obtain written consent, prescribed Ambien to a family member without written records, and prescribed narcotics without an interim evaluation or failure to supervise those prescriptions. Public Letter of Reprimand.
August 24, 2011

REDKO, PETER M., D.P.M. (E 4517), Petaluma, CA
Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts and failure to maintain adequate and accurate medical records in the care and treatment of two patients. Revoked, stayed, placed on 35 months probation with terms and conditions including but not limited to, completing a clinical training program.
October 14, 2011

SUBOTNICK, STEVEN I., D.P.M. (E 1340)
San Leandro, CA
Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, failure to maintain adequate and accurate medical records in the care and treatment of one patient. Revoked, stayed, placed on 35 months probation with terms and conditions including, but not limited to, completing an educational course.
August 12, 2011

Registered Dispensing Optician

CHALJIAN, SARKIS (SL 357)
Stipulated Decision. Convicted of felony for one count of grand theft for unlawfully taking $102,242.00 from the Medi-Cal program. Surrender of License.
October 27, 2011

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(All meetings are open to the public)

February 2-3, 2012: San Francisco
May 3-4, 2012: Los Angeles
July 19-20, 2012: Sacramento
October 25-26, 2012: San Diego

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