BOARD STRUCTURE AND FUNCTION

Because of major changes during the past year, the Board of Medical Quality Assurance would like to use this edition of the Action Report to bring the public and physicians up to date on the Board and its staff. It is hoped that the information below will increase understanding of the Board structure and functions and facilitate interaction with the Board and its staff.

The Board of Medical Quality Assurance is an administrative agency within the State Department of Consumer Affairs. The Board consists of 19 members (12 physicians and 7 public members), all appointed by the Governor for four year terms. The Board is divided into three autonomous divisions. The functions of each division are as follows:

**Division of Medical Quality**
- A. Review quality of medical practice carried out by a physician and surgeon certificate holder under the jurisdiction of the Board;
- B. The administration and hearing of disciplinary actions;
- C. Carrying out disciplinary action appropriate to findings made by a Medical Quality Review Committee, Administrative Law Judge, or the Division.

**Division of Licensing**
- A. Developing and administering the physicians and surgeons examinations;
- B. Issuing licenses and certificates;
- C. Suspending, revoking or limiting licenses and certificates upon order of Division of Medical Quality;
- D. Administering a program of continuing education for certificate holders;
- E. Approving undergraduate and graduate medical education programs;
- F. Approving clinical clerkships and special internship programs;
- G. Administering student loan programs and grants.

**Division of Allied Health Professions**
- A. Jurisdiction over the activities of the examining committees and nonphysician certificate holders under the jurisdiction of the Board;
- B. Discipline of nonphysician certificate holders to the extent such discipline is not within the jurisdiction of an examining committee;
- C. Acting as liaison with other healing arts boards concerning the activities of their licentiates.

The following allied health professions are, to varying degrees, within the jurisdiction of the Division of Allied Health Professions:
- Audiologist
- Hearing Aid Dispenser
- Physician’s Assistant
- Psychologist
- Speech Pathologist
- Acupuncturist
- Physical Therapist
- Podiatrist
- Registered Dispensing Optician

William Gerber, M.D., of San Francisco, is President of the Board of Medical Quality Assurance. Division Presidents are: Eugene Feldman, M.D., Medical Quality; John Bunker, M.D., Licensing; and Jeoffry Gordon, M.D., Allied Health Professions.

Within the State there are also fourteen Medical Quality Review Committees established on a geographical basis. Membership on the committees ranges from 10 to 20 members, both physicians and public members, all appointed by the governor. Medical Quality Review Committees have the authority and duty to initiate reviews of the quality of medical care practiced by physicians, to investigate all matters assigned to them by the Division of Medical Quality, to initiate investigations of complaints that a physician has been guilty of unprofessional conduct, to investigate circumstances which have resulted in any judgments requiring a physician to pay in damages in excess of a cumulative total of $30,000, and to seek injunctions or restraining orders. They may also hold disciplinary hearings.

**SPECIAL REPORTS**

The following are special reports that have been mandated by the Legislation which was enacted December 12, 1975 (AB 1xx).

1. The Division of Allied Health Professions has submitted a report to the Legislature and the Governor concerning the desirability of certifying currently non-certified categories providing health services of a technical nature. This report was submitted to the Legislature on April 1, 1977. There are a limited number of these reports available in the Sacramento headquarters office.
2. In order to insure the continuing competence of physicians and surgeons, the Division of Licensing has adopted regulations for standards of continuing medical education. All licensees have been notified of these requirements. Elsewhere in this publication, a clarification of the continuing medical education requirements will be found. Regulations are now being finalized, and when completed will be made available to all licensees.

3. On July 1, 1977, the Division of Medical Quality submitted a report to the Legislature and the Governor which recommended a program whereby activities of Medical Quality Review Committees and professional standards review organizations can be integrated to ensure the maintenance of high quality medical practice, and the establishment of individual performance evaluation standards. Another report will be submitted to the Legislature and the Governor on January 1, 1978, which will recommend a program by which to insure the continuing competence of physicians and surgeons on the basis of individual performance evaluation.

In order to do this, the Division of Medical Quality will seek advice and consultation from Medical Quality Review Committees, professional standards review organizations, professional medical societies, and other appropriate persons.

**DISCIPLINARY ACTIONS**

4/1/77  5/31/77

April 28, 1977.

<table>
<thead>
<tr>
<th>Name</th>
<th>City</th>
<th>Date</th>
<th>Reason</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADAMS, ROBERT W., M. D.</td>
<td>Patton</td>
<td>2/28/77</td>
<td>Use of alcoholic beverages to the extent to be dangerous to himself and to the public.</td>
<td>Revoked, December 28, 1977</td>
</tr>
<tr>
<td>AHLSTROM, HOWARD, M. D.</td>
<td>Whittier</td>
<td>2/28/77</td>
<td>Use of alcoholic beverages to the extent to be dangerous to himself and to the public, attending patients while intoxicated.</td>
<td>Revoked, stayed, 10 years probation with actual suspension until he obtains employment in approved supervised environment, and other terms and conditions. April 28, 1977</td>
</tr>
<tr>
<td>BRANDWEIN, HOWARD J., M. D.</td>
<td>Marina Del Rey</td>
<td>2/28/77</td>
<td>Violations of statutes regulating narcotics, dangerous drugs, or controlled substances. Suspended 25 days, stayed, 1 year probation with terms and conditions. April 28, 1977.</td>
<td></td>
</tr>
<tr>
<td>BROWNING, ROBERT C., M. D.</td>
<td>Auburn</td>
<td>5/31/77</td>
<td>Excessive prescribing or administering of drugs, prescribing drugs without good faith prior examination or medical indication. Revoked, stayed, 5 years probation with terms and conditions. April 28, 1977.</td>
<td></td>
</tr>
<tr>
<td>FERRISS, ALFRED W., M. D.</td>
<td>Oakland</td>
<td>5/31/77</td>
<td>Violation of statutes regulating narcotics, dangerous drugs, or controlled substances. Suspended 50 days, stayed, 5 years probation with terms and conditions. May 11, 1977.</td>
<td></td>
</tr>
<tr>
<td>HULING, JOHN, M. D.</td>
<td>Los Angeles</td>
<td>5/31/77</td>
<td>Conviction of felony involving moral turpitude, prescribing drugs for persons not under his treatment, prescribing drugs without good faith prior examination or medical indication. Revoked, April 28, 1977.</td>
<td></td>
</tr>
<tr>
<td>JENKINS, RACHEL E., M. D.</td>
<td>Lomita</td>
<td>2/28/77</td>
<td>Aiding or abetting unlicensed person to practice medicine. 10 days suspension, stayed, 1 year probation with terms and conditions. April 28, 1977.</td>
<td></td>
</tr>
<tr>
<td>LAWSHE, ROGER D., M. D.</td>
<td>San Diego</td>
<td>2/28/77</td>
<td>Conviction of act involving moral turpitude, dishonesty and corruption; violation of statutes regulating dangerous drugs; prescribing drugs without good faith, prior examination, or medical indication. Revoked, stayed, 5 years probation with terms and conditions. April 28, 1977.</td>
<td></td>
</tr>
<tr>
<td>ORROCK, PAT M., M. D.</td>
<td>Brea</td>
<td>2/28/77</td>
<td>Gross negligence and incompetence, failure to properly administer to and properly direct and control cardio-pulmonary resuscitation of heart attack victim. Revoked, stayed, 6 months suspension (retraining program required), 5 years probation with terms and conditions. May 20, 1977.</td>
<td></td>
</tr>
<tr>
<td>PAYNE, ROBERT AL, CHESTER, M. D.</td>
<td>11/30/77</td>
<td>2/28/77</td>
<td>Aiding and abetting unlicensed person to practice medicine. Revoked, stayed, 60 days suspension. 5 years probation on terms and conditions. April 28, 1977.</td>
<td></td>
</tr>
<tr>
<td>SLATER, ROGER C., M. D.</td>
<td>Blythe</td>
<td>2/28/77</td>
<td>Aiding unlicensed person to practice medicine. Approval to supervise physician's assistant suspended, stayed, 2 years probation with terms and conditions. May 20, 1977.</td>
<td></td>
</tr>
<tr>
<td>SMITH, MARION, M. D.</td>
<td>Riverside</td>
<td>2/28/77</td>
<td>Conviction of a crime involving moral turpitude, excessive prescribing of drugs, violation of statutes regulating dangerous drugs. Revoked, stayed, 5 years probation with terms and conditions. April 28, 1977.</td>
<td></td>
</tr>
</tbody>
</table>

**ROSENBOOM, ALAN, M. D.**

Pico Rivera

Conviction of any act involving moral turpitude, excessive prescribing of drugs, violation of statutes regulating dangerous drugs. Revoked, stayed, 5 years probation with terms and conditions. April 28, 1977.

Conviction of a crime involving moral turpitude, excessive prescribing of drugs, violation of statutes regulating dangerous drugs. Revoked, stayed, 5 years probation with terms and conditions. April 28, 1977.

Conviction of act involving moral turpitude, excessive prescribing of drugs, violation of statutes regulating dangerous drugs. Revoked, stayed, 5 years probation with terms and conditions. April 28, 1977.

Conviction of act involving moral turpitude, excessive prescribing of drugs, violation of statutes regulating dangerous drugs. Revoked, stayed, 5 years probation with terms and conditions. April 28, 1977.

Conviction of act involving moral turpitude, excessive prescribing of drugs, violation of statutes regulating dangerous drugs. Revoked, stayed, 5 years probation with terms and conditions. April 28, 1977.
PHYSICIAN RESPONSIBILITY REGARDING COMPLETION OF DEATH CERTIFICATES

Funeral directors have complained to the Board of Medical Quality Assurance regarding the difficulty which they encounter at times in getting the physician to complete the physician portion of the death certificate within a reasonable period of time following the death of a patient.

Please note the following sections of the Health & Safety Code dealing with the physician’s responsibility in completing death certificates:

Section 10203 Chapter 5 Article 1:

The medical and health section data and the time of death shall be completed and attested to by the physician last in attendance; provided, such physician is legally authorized to certify and attest to these facts, or by the coroner in those cases in which he is required to complete the medical and health section data and certify and attest to these facts.

Section 10204 Chapter 5 Article 1:

The medical and health section data and the physician’s or coroner’s certification shall be completed by the attending physician within 15 hours after the death, or by the coroner within three days after examination of the body.

The physician shall within 15 hours after the death deposit the certificate at the place of death, or deliver it to the attending funeral director at his place of business or at the office of the physician.

Section 10180 Chapter 4 Article 2:

The physician, if any, in attendance on the delivery of a fetus beyond the 20th week of uterogestation shall within 15 hours after the delivery state on the certificate of fetal death the time of fetal death or delivery, the direct causes of the fetal death, the conditions, if any, which gave rise to these causes, and such other medical and health section data as may be required on the certificate, and shall sign the certificate in attest to these facts.

The physician shall within 15 hours after the death deposit the certificate at the place of death, or deliver it to the attending funeral director at his place of business or at the office of the physician.

PRESCRIBING OF DANGEROUS DRUGS

Prescribing, dispensing or furnishing dangerous drugs without a good faith prior examination and medical indication constitutes unprofessional conduct pursuant to Section 2399.5 of the Business and Professions Code.

Physicians should be aware of their vulnerability, especially when issuing “telephone prescriptions” without examining or seeing the patient. Special care must also be taken when one physician is covering for another.

The above section of the Code would obviously not apply to prescriptions for patients who have been previously examined by the physician and whose medical record shows that a need for re-examination does not exist.

A recent article in the San Francisco Medical Society Bulletin cautions against the apparently “straight” narcotics abuser. One example is a young man who describes himself as a stockbroker, working for a major brokerage house in another city. He is being treated with “Dilaudid” (brand of hydromorphone sulfate), and has run out, lost, been robbed of, etc., his supply. He is most helpful: He will pay for the long distance call to his physician (number supplied). When contacted, a sincere voice will sympathetically verify the story in detail, sometimes adding more details. But a check with the authorities will reveal that no such physician exists, or if he exists, he isn’t at that number.

(Our thanks to the San Francisco Medical Society for permission to use material from its newsletter.)

CONTINUING MEDICAL EDUCATION REQUIREMENTS CLARIFICATION

Physicians wishing to renew their licenses in California in 1980 will have to demonstrate that they have completed a minimum of fifteen and an average of twenty-five hours per year of formal continuing education courses.

The Division of Licensing will accept AMA and CMA category I courses, AAFP prescribed courses, and other courses which meet its criteria. The Division’s criteria for acceptable courses and reporting forms will be available shortly.

Physicians may report their continuing education hours to the CMA, to the AAFP or directly to the Division. The first reporting period which will be used is the one beginning in 1977. For physicians who report to the CMA, this will be the reporting period beginning July 1, 1977.

Any course submitted for credit must be a legitimate structured learning experience which focuses on patient care or community health. You are urged to report to the Division of Licensing any course being offered for continuing education credit which you feel may not meet Division criteria. We are anxious to work with you to assure quality continuing education for the physicians of the State.
CHANGES IN BOARD MEMBERS

Governor Brown recently made two appointments to the Board of Medical Quality Assurance. Michael Carella, Ph.D., of San Diego was appointed to the Division of Medical Quality. He replaced Michael Greer who resigned after being appointed to the Superior Court bench. Dr. Carella is currently a professor of philosophy at San Diego State University where his teaching includes a course in medical ethics. He holds degrees from St. Joseph’s College, St. Louis University and the University of Louvain.

Louis Simpson, Jr., M.D. of Venice, was appointed to the Division of Licensing. Dr. Simpson is a graduate of Howard University Medical School. He is currently serving as Chairman of the Governor’s Interim Advisory Committee for Camarillo State Hospital. He is also director of patient care at the Central City Mental Health Center in Los Angeles.

Dr. Simpson replaces Paul J. Dugan, M.D. of Roseville who had served on the Board since 1969. Dr. Dugan served as President of the Board during 1973 and also as President of the Division of Licensing.

BOARD OF MEDICAL QUALITY ASSURANCE Hires Executive Director

After an extensive search, the Board of Medical Quality Assurance has selected Robert Rowland as its Executive Director. Mr. Rowland, 30, received an M.B.A. from the Stanford University Graduate School of Business and served as Business Manager for the Department of Medicine at Stanford School of Medicine prior to coming to the Board. He also served as Coordinator of the Quality of Care Program and Director of the Northern California Field Office for the California Regional Medical Program.

The Board had an excellent field of applicants from which to select its Executive Director. Over 200 applications were received. These were finally narrowed by the Executive Committee to ten applicants. The ten “finalists” then participated in an extensive two-day interview process.

Mr. Rowland takes over the duties of Executive Director from Joseph P. Cosentino, M.D., who has been performing those duties in an acting capacity since October, 1976. Dr. Cosentino was formerly a medical consultant for the Board and was asked to assume the duties of Executive Director on an interim basis while the Board conducted its search. Dr. Cosentino helped the Board through a difficult transition period. He was instrumental in establishing regional offices for the Board and in organizing the Board’s investigation unit when the Board was given the authority to hire its own investigators.

MEETING DATES

Meeting dates for the Board and its Divisions have been scheduled as follows: These are public meetings and physicians, as well as consumers, are invited.

Sept. 29, 30, Oct. 1, 1977 455 Golden Gate Avenue
San Francisco, CA.

Oct. 27, 28, 29, 1977 1020 N Street
Sacramento, CA.

Nov. 17, 18, 19, 1977 Plaza International Hotel
1515 Hotel Circle
San Diego, CA.

Dec. 15, 16, 17, 1977 107 So. Broadway
Los Angeles, CA.

MISSING “M.D.’s”

We have received a number of inquiries about the absence of “M.D.” or other degrees on the Action Report address labels. These labels are printed in a central data processing facility which omits degrees from all labels. To include degrees on the Action Report would be prohibitively expensive and we ask for your understanding.