

Medical Board of California Newsletter



A Quarterly Publication

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2013-2014 ANNUAL REPORT

Read it at [http://www.mbc.ca.gov/
Publications/Annual_Reports/
annual_report_2013-2014.pdf](http://www.mbc.ca.gov/Publications/Annual_Reports/annual_report_2013-2014.pdf)

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Legislative Update

Allied Health Professionals

[AB 1743 \(Ting, Chapter 331\)](#)

Hypodermic Needles and Syringes

This bill deletes the limit on the number of syringes a pharmacist has the discretion to sell to an adult without a prescription and extends, until January 1, 2021, the statewide authorization for pharmacists to sell syringes without a prescription, as specified.

[AB 1841 \(Mullin, Chapter 333\)](#)

Medical Assistants

This bill allows medical assistants (MA) to hand to patients properly-labeled and pre-packaged prescription drugs that have been ordered by a licensed physician, podiatrist, physician assistant (PA), nurse practitioner (NP), or a certified nurse-midwife (CNM).

This bill requires the properly-labeled and pre-packaged prescription drug to have the patient's name affixed to the package and for the physician, podiatrist, PA, NP, or CNM to verify that it is the correct medication and dosage for that specific patient and provide the appropriate patient consultation regarding use of the drug, prior to the MA handing the medication to a patient. This bill excludes controlled substances.

[AB 2143 \(Williams, Chapter 269\)](#)

Clinical Laboratories: Chiropractors

This bill exempts chiropractors listed on the federal Department of Transportation National Registry of Certified Medical Examiners, who perform specific waived clinical laboratory tests for the sole purpose of completing the Department of Motor Vehicles medical examination report, if they obtain a valid certificate of waiver for the performance of waived clinical laboratory tests. This bill requires a chiropractor who receives an abnormal finding to refer the applicant to his or her primary care physician.



Legislative Update (continued on page 6)

The Mission of the Medical Board of California

The mission of the Medical Board of California is to protect health care consumers through the 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.

Published quarterly by:

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The Spring, Summer, and Fall editions are available as digital publications via email or viewable on the Board's website: <http://www.mbc.ca.gov>. The Winter edition is printed in hardcopy for distribution via regular postal service to those physicians or interested parties without an email.

To subscribe or unsubscribe, please use the following link: <http://www.mbc.ca.gov/Subscribers/>. Submission of original-written articles is welcome, but all submissions become the property of the Board and are subject to editing.

Medical consultants needed

Especially from San Bernardino, San Diego, San Dimas, and Valencia areas

Are you interested in being an integral part of the Medical Board of California enforcement process? Do you have the ability to conduct interviews, exercise sound judgment in reviewing conflicting medical reports and preparing opinions, analyzing problems and taking appropriate action? This is an excellent opportunity to help your community and obtain valuable experience. The Department of Consumer Affairs, Division of Investigation, Health Quality Investigations Unit is seeking well-qualified individuals to be Medical Consultants. Interested individuals must submit an application for examination; see link for additional information and instructions (<http://jobs.ca.gov/JOBSGEN/1CADD.PDF>). If you have any questions, please contact Division of Investigation, Health Quality Investigations Unit Commander John Hirai at (562) 402-4668.

Interested in becoming an expert reviewer?

The Medical Board of California established the Expert Reviewer Program in July 1994 as an impartial and professional means by which to support the investigation and enforcement functions of the Board. Experts assist the Board by providing reviews and opinions on Board cases and conducting professional competency exams, physical exams and psychiatric exams. The Board is currently looking specifically for experts in dermatology, neurological surgery, pain medicine, pathology, spine surgery and transplant surgery. For more information regarding compensation and how to apply, please visit: http://www.mbc.ca.gov/Enforcement/Expert_Reviewer/.

Editor's Spotlight

By Susan Wolbarst

Like all issues of the Medical Board of California's (MBC) Newsletter, this Winter issue is packed with information.

The legislative update for 2014 is a traditional recap of some of the more health and medical-centric of the 930 new pieces of legislation which recently made their way into state law. MBC President David Serrano Sewell draws special attention to two pieces of legislation sponsored by the MBC in his President's Message.

The article, "What Should You Expect if There is an Investigation after a Complaint has been Filed?" dovetails with last quarter's article on "What Should You Expect if a Complaint is Filed Against You?" Taken together, these provide some insight into the process set in motion when complaints are filed at the MBC. For your information, more than 8,300 complaints were filed against California-licensed physicians in fiscal year 2013-14. "Every single one of them is taken seriously and reviewed," according to Paulette Romero, who oversees enforcement managers at MBC.

"When Do I Need a Fictitious Name Permit?" is discussed in this issue, as is "What You Should Know About CURES and Overprescribing."

We also introduce our new Deputy Director, Liz Amaral.

This issue contains updated Mandatory Reporting Requirements, as well as our regular features. I hope you enjoy it and find the information useful.

If you have any ideas for articles, or suggestions for improving the Newsletter, please contact me at (916) 263-2480 or at Susan.Wolbarst@mbc.ca.gov. I look forward to hearing from you.

Need A Speaker?

If you would like a speaker from the Medical Board of California to address your group or organization, please contact Public Affairs Manager Cassandra Hockenson at Cassandra.hockenson@mbc.ca.gov.

President's Message



David Serrano Sewell, J.D.

This Winter Newsletter contains information on all the bills passed by the Legislature and signed by the Governor in 2014 impacting the Medical Board and physicians. I would like to draw your attention to two bills that were sponsored by the Medical Board, [AB 1838 \(Bonilla, Chapter 143\)](#) – Medical School Accreditation, and [AB 1886 \(Eggman,](#)

[Chapter 285\)](#) – Public Disclosure of Enforcement Documents.

AB 1838 allows graduates of accelerated and competency-based medical school programs to be eligible for licensure in California, if the program is properly accredited. Part of the Medical Board's mission is access to care, and in today's medical environment the need for more physicians is apparent. This bill will allow individuals to get licensed and begin practicing in a more timely fashion, thus meeting the Medical Board's mission.

AB 1886 provides more transparency by posting documents regarding serious disciplinary actions for as long as they remain public. The Medical Board's number one priority is consumer protection and this bill furthers that mission. In today's society government transparency is an important consumer right and this bill provides these public documents to consumers.

I am very proud that the Medical Board was able to get both of these bills signed into law.

I would also like to draw your attention to "part two" of the Medical Board's series on what a physician can expect if a complaint is filed. It started with "[Do Not Panic! What Should You Expect if a Complaint is Filed Against You?](#)" in our Fall 2014 Newsletter. In this Newsletter we will look at "What Should You Expect if There is an Investigation after a Complaint has been Filed?" and the process from beginning to end. This entire series is intended to inform and educate physicians, as well as provide information on physician discipline.

Finally, the Medical Board's [2013-2014 Annual Report](#) has been released and is available online. I encourage you to take a look at it.

I hope you find this winter edition of the Newsletter very informative.

Video Tutorial Available for License Applicants

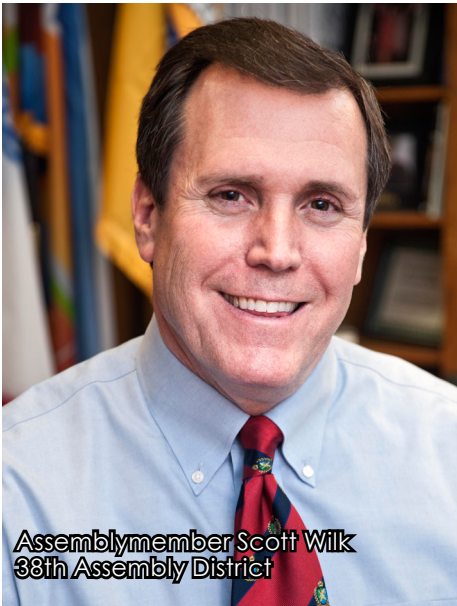
Have questions about the physician's and surgeon's licensing application?

A video tutorial may be able to clear up a lot of confusion in about 21 minutes. The video, <https://www.youtube.com/watch?v=sjHEBP9EUGA&feature=youtu.be>, is aimed at graduates of U.S. and Canadian medical schools who are planning to apply for licensure by mail, but the general information it contains should also be helpful to those U.S. and Canadian graduates applying online using the BreEZe system and to international graduates applying for licensure or Postgraduate Training Authorization Letters (PTALs).

As Curtis Worden, Chief of Licensing for the Medical Board of California (MBC), notes at the beginning of the video, the MBC receives about 6,500 applications for physician's and surgeon's licenses per year. Of these, *approximately 88 percent are incomplete*. This tutorial can help applicants understand exactly what is required to complete the application, potentially saving them from time-consuming delays caused by submitting incomplete applications.

Legislator Profile

Assemblymember Scott Wilk



Assemblymember Scott Wilk
38th Assembly District

Scott Wilk was elected to the California State Assembly in 2012. He represents the 38th Assembly District which encompasses Simi Valley, the northwestern section of the San Fernando Valley, and most of the Santa Clarita Valley, including the city of Santa Clarita and the communities of Agua Dulce, Castaic, Stevenson Ranch, and Val Verde.

As a member of the Business and Professions Committee (BPC), Wilk is committed to ensuring consumer protection by overseeing vital legislation that comes before him. The BPC has jurisdiction over the following: occupational licensing (medical and non-medical), including private postsecondary and vocational education; creation and elimination of regulatory agencies, boards and commissions under the Department of Consumer Affairs; charitable solicitations; and product labeling (excluding agriculture and medical) under the Department of General Services.

In addition to his role on the BPC, Wilk was named by Assembly

Speaker Toni Atkins as Vice Chairman of the Committee on Privacy and Consumer Protection. This committee is responsible for a wide variety of issues important to consumers, both online and off. It will hear legislation related to all aspects of information privacy (such as medical, financial and educational information), as well as other issues in the broader field of technology: the security of data, protection of personal information, information technology, and California's Department of Technology. The committee will also be responsible for legislation related to false advertising, product labeling and consumer protection.

He also serves on the Budget Committee (Sub 4 - State Administration), the Governmental Organization Committee and the Joint Committee on Arts.

For the 2015-16 legislative sessions, Wilk will be focusing on passing legislation to keep our government transparent, hold legislators accountable and to reprioritize our budget priorities.

During his first term in office, Wilk quickly established himself as a results-oriented leader and was appointed as Republican Caucus Chair for the Assembly Republican Caucus Leadership Team. The Caucus Chair is the number-two position in the Republican leadership structure and Caucus Chair assists the Leader in overseeing caucus operations, advancing

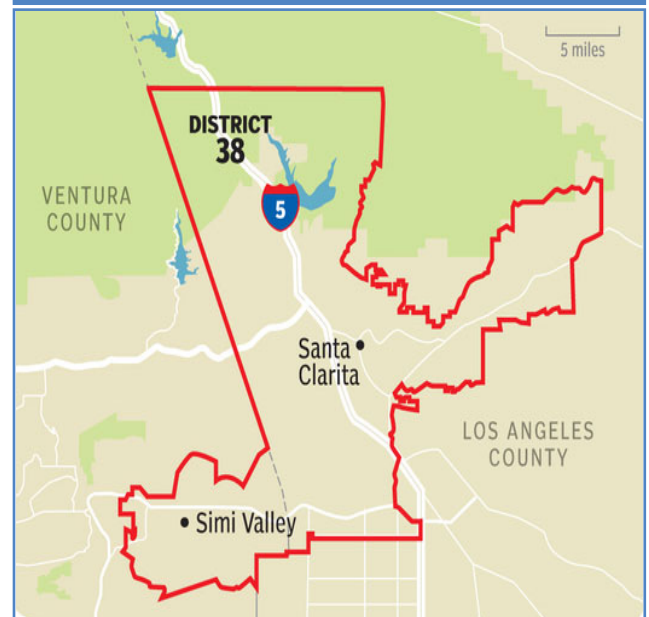
the Republican policy agenda, and achieving the Caucus's legislative goals.

Wilk was named "Legislator of the Year" by the California Podiatric Medical Association and received the 2014 Patient Advocate Award as a result of his support of podiatric medicine and its important role in keeping Californians healthy, active and productive.

Wilk was born in Lancaster, California, and graduated with a B.A. in Political Science from California State University, Bakersfield. Prior to his election to the Assembly, he served on the Board of Directors for the Henry Mayo Newhall Memorial Hospital Foundation and the Santa Clarita Community College District; he also worked as a small business owner, ran a communications firm, and was a former legislative staffer.

He and his wife, Vanessa, live in Santa Clarita; they have two adult children.

District Map



You Asked For It

Questions received from the Web

By Chris Valine, Public Information Analyst

Q. Does the physician always need to be on the premises when a medical assistant is performing medical tasks?

A. The supervising physician may, at his or her discretion, provide written instructions to be followed by the medical assistant, and those written instructions may provide that a physician assistant, nurse practitioner, or nurse midwife may supervise the medical assistant while the physician is off the premises.

Q. I am writing in regard to your question and answer in the Fall 2014 issue that service dogs in a physician's office must have service animal tags. It is my understanding that service animal tags are not required by law.

A. California Civil Code Section 54.2 states that a service dog must be on a leash and tagged by an identification tag issued by the county clerk, animal control department, or other agency. However, the American Disabilities Act (ADA Title II, 28 CFR Part 35) states that there is no requirement for documentation that the service dog has been certified, trained, or licensed as a service dog or that the service dog wear an identifying vest.

The ADA further states that if the need for a service dog is not obvious, such as a mental disability, the physician or staff member is permitted to ask two questions regarding the legitimacy of the service dog: (1) Is this animal required because of a disability, and (2) What work or task has this animal been trained to perform. Specific training means the dog has been trained to perform a specific response every time a person has, for example, an anxiety attack or panic attack (ADA Title II, 28 CFR Part 35). If this is the case, the service dog must be accommodated.

A comfort companion (pet) that has not been trained to provide a specific response for a certain action does not need to be accommodated, even if the individual has a physician's note. For more information, visit http://www.ada.gov/service_animals_2010.htm.

Q. Is it true that I, as a California physician, am legally required to provide my email address to the Medical Board of California?

A. Yes. California Business and Professions Code section 2021 requires applicants and licensees who have an email address to report their email address to the Medical Board no later than July 1, 2014, by submitting a Change of Address Form. If you have not already provided your email address, please use this link to obtain the form: http://www.mbc.ca.gov/Forms/Applicants/address_change_request.pdf.

Q. I am in the process of closing my practice. How many days' notice am I required to give my patients?

A. The law does not specify the exact number of days required to notice patients prior to closing. The sooner you can notify your patients, the better, as you want to allow your patients enough time to find another physician, so you do not risk liability for "patient abandonment." The California Medical Association suggests you send each patient notice by certified mail, return receipt requested, and maintain those documents in the patient's medical record. You should also inform inactive patients, or those who may have moved, by placing an advertisement in a local newspaper, through your answering service, and posting a notice in your reception area. You will want to provide your patients with information on how to obtain a copy of their medical records. You should check with your professional liability carrier as to how long you should maintain patient records so as not to jeopardize your malpractice tail coverage (the extended coverage after the cancellation or termination of a policy).

Have a question?

If you have a question, write to Webmaster@mbc.ca.gov. Although only some questions may be featured here in "YOU ASKED FOR IT," all questions will receive an email response, so let us hear from you.



Legislative Update *(continued from page 1)*

[SB 1039 \(Hernandez, Chapter 319\)](#)

Pharmacy

This bill makes changes to the authorized tasks of a pharmacy technician under the direct supervision or control of a pharmacist; and authorizes intern pharmacists to perform specified tasks.

[SB 1083 \(Pavley, Chapter 438\)](#)

Physician Assistants: Disability Certifications

This bill authorizes PAs to certify claims for disability insurance with the Employment Development Department (EDD). The PA would first have to perform a physical exam under the supervision of a physician, pursuant to existing law. The EDD must implement this provision on or before January 1, 2017.

Health Care Coverage

[SB 1004 \(Hernandez, Chapter 574\)](#)

Health Care: Palliative Care

This bill requires the Department of Health Care Services (DHCS) to assist Medi-Cal managed care plans in delivering palliative care services, and requires DHCS to consult with stakeholders. This bill directs DHCS to ensure the delivery of palliative care services is provided in a manner that is cost-neutral to the General Fund, to the extent practicable.

[SB 1052 \(Torres, Chapter 575\)](#)

Health Care Coverage

This bill requires health plans and insurers to use standard drug formulary templates to display their drug formularies and to post their formularies on their Internet websites. This bill requires the California Health Benefit Exchange (Covered California) to provide links to the formularies.

[SB 1053 \(Mitchell, Chapter 576\)](#)

Health Care Coverage: Contraceptives

This bill requires, effective January 1, 2016, most health plans and insurers to cover a variety of Food and Drug Administration-approved contraceptive drugs, devices, and products for women, as well as related counseling and follow-up services and voluntary sterilization procedures. This bill prohibits cost-sharing, restrictions, or delays in the provision of covered services, but allows cost-sharing and utilization-management procedures if a therapeutic equivalent drug or device is offered by the plan with no cost-sharing.

[SB 1340 \(Hernandez, Chapter 83\)](#)

Health Care Coverage: Provider Contracts

This bill expands provisions related to gag clauses in contracts between health plans or insurers and providers.

Medical Education

[AB 496 \(Gordon, Chapter 630\)](#)

Continuing Medical Education (CME): Sexual Orientation, Gender Identity, and Gender Expression

This bill amends the existing cultural competency CME course requirement to also include information pertinent to the provision of appropriate treatment and care to the lesbian, gay, bisexual, transgender, and intersex communities.

[AB 1838 \(Bonilla, Chapter 143\)](#)

Healing Arts: Medical School Accreditation

This Medical Board-sponsored bill allows graduates of accelerated and competency-based medical school programs to be eligible for licensure in California if the program is accredited by the Liaison Committee on Medical Education, the Committee on Accreditation of Canadian Medical Schools, or the Commission on Osteopathic College Accreditation.

[AB 2214 \(Fox, Chapter 422\)](#)

Emergency Room Physicians and Surgeons: Continuing Medical Education: Geriatric Care

This bill enacts the Dolores H. Fox Act and requires the Board, when determining CME requirements, to consider including a course in geriatric care for emergency room physicians.

Medical Practice and Ethics

[AB 809 \(Logue, Chapter 404\)](#)

Healing Arts: Telehealth

This bill revises the informed consent requirements relating to the delivery of health care via telehealth by permitting consent to be made verbally or in writing, and by deleting the requirement that the health care provider who obtains the consent be at the originating site where the patient is physically located. This act is an urgency statute, which means it took effect immediately upon being signed into law on September 18, 2014.

Legislative Update (continued on page 7)

Legislative Update *(continued from page 6)*

[AB 1577 \(Atkins, Chapter 631\)](#)

Certificates of Death: Gender Identity

This bill requires, beginning July 1, 2015, a person completing a death certificate to record the decedent's sex reflecting the decedent's gender identity as reported by the person or source best qualified to supply this information, unless presented with specified legal documents identifying the decedent's gender.

[AB 2139 \(Eggman, Chapter 568\)](#)

End-of-Life Care: Patient Notification

This bill requires a health care provider that makes a diagnosis that a patient has a terminal illness to notify the patient, or when applicable, another person authorized to make health care decisions for the patient, of the patient's right to comprehensive information and counseling regarding legal end-of-life options pursuant to existing law. This bill specifies that this notification may be provided at the time of diagnosis or at a subsequent visit in which the provider discusses treatment options with the patient or the other authorized person. This bill also specifies that it shall not be construed to interfere with the clinical judgment of a health care provider in recommending the course of treatment.

[ACR 152 \(Pan, Chapter 143\)](#)

Patient-Centered Medical Homes

This resolution states that the Legislature supports and encourages the development and expansion of a California health care delivery system that identifies patient-centered medical homes and is based upon certain principles of coordination of patient care.

[SB 906 \(Correa, Chapter 368\)](#)

Elective Percutaneous Coronary Intervention (PCI) Program

This bill creates the PCI Offsite Program in the California Department of Public Health (CDPH) to certify an unlimited number of general acute care hospitals that are licensed to provide cardiac catheterization laboratory service in California, and that meet prescribed additional criteria, to perform scheduled, elective PCI. This bill authorizes a hospital that was participating in the Elective PCI Pilot Program as of December 31, 2014, to continue to perform elective PCI but requires the hospital to obtain a certification, as specified, by January 1, 2016. This bill requires the Office of Statewide Health Planning and Development to annually develop and make available to

the public a report regarding each participating hospital's performance, as specified, and authorizes CDPH to form an advisory oversight committee for the purpose of analyzing those reports and recommending changes.

[SB 973 \(Hernandez, Chapter 484\)](#)

Narcotic Treatment Programs

This bill revises existing law related to patient treatment in narcotic treatment programs (NTP). This bill permits a NTP to admit a patient to narcotic maintenance or detoxification treatment at the discretion of a NTP's medical director, rather than after seven days after completion of a prior treatment episode. This bill requires NTPs to assign a unique identifier to, and maintain an individual record for, each patient of the program rather than assigning consecutive numbers to each patient.

[SB 1135 \(Jackson, Chapter 558\)](#)

Inmates: Sterilization

This bill prohibits sterilization for the purpose of birth control of an individual under the control of the California Department of Corrections and Rehabilitation (CDCR), as specified. This bill requires CDCR to publish data on its website related to the number of sterilizations performed, as specified.

[SB 1256 \(Mitchell, Chapter 256\)](#)

Medical Services: Credit

This bill extends existing consumer protections regarding lines of credit for dental services to all types of medical or healing arts services by requiring a licensee to provide a patient with a treatment plan, a disclosure form, and information about third-party payment coverage, and also establishes language and competency requirements.

[SB 1457 \(Evans, Chapter 849\)](#)

Medical Care: Electronic Treatment Authorization Requests

This bill requires requests for authorization for treatment or services in the Medi-Cal program, California Children's Services (CCS) Program, and the Genetically Handicapped Persons Program (GHPP), excluding those submitted by dental providers enrolled in the Medi-Cal Dental Program, to be submitted in an electronic format determined by DHCS via its website or other electronic means designated by DHCS. This bill requires DHCS to implement an alternate format for submission when DHCS's website is unavailable due to a system disruption. This bill implements this requirement by July 1, 2015, or a subsequent date determined by DHCS.

Legislative Update (continued on page 8)

Legislative Update *(continued from page 7)*

Prescription Drugs/Controlled Substances

[AB 467 \(Stone, Chapter 10\)](#)

Prescription Drugs:

Collection and Distribution Program

This bill establishes a license and regulatory framework in the Board of Pharmacy (BOP) for a “surplus medication collection and distribution intermediary” to facilitate the donation of surplus medications in California.

[AB 1535 \(Bloom, Chapter 326\)](#)

Pharmacists: Naloxone Hydrochloride

This bill allows pharmacists to furnish naloxone hydrochloride in accordance with standardized procedures or protocols developed and approved by the BOP and the Medical Board, in consultation with the California Society of Addiction Medicine, the California Pharmacists Association, and other appropriate entities. This bill specifies that a pharmacist furnishing naloxone hydrochloride shall not permit the person to whom the drug is being furnished to waive the consultation required by the Medical Board and the BOP. This bill requires a pharmacist to complete a training program on the use of opioid antagonists that consists of at least one hour of approved continuing education on the use of naloxone hydrochloride, before furnishing naloxone hydrochloride. This bill allows the BOP to adopt emergency regulations to establish the standardized procedures or protocols that would remain in effect until the final standardized procedures or protocols are developed.

[AB 1735 \(Hall, Chapter 458\)](#)

Nitrous Oxide: Dispensing and Distributing

This bill makes it a misdemeanor for any person to dispense or distribute nitrous oxide to another person if it is known or should have been known that the nitrous oxide will be ingested or inhaled by the person for the purposes of causing intoxication, and that the person will proximately cause great bodily injury or death to himself, herself, or any other person.

[SB 600 \(Lieu, Chapter 492\)](#)

Drugs

This bill repeals provisions of existing Pharmacy Law to conform to the federal Drug Quality and Security Act. This bill declares any that foreign dangerous drug that is not approved by the United States Food and Drug Administration or that is obtained outside the state-

licensed supply chain is misbranded. This bill provides that anyone who purchases that drug is guilty of a misdemeanor and subject to a fine of not more than \$10,000.

[SB 1438 \(Pavley, Chapter 491\)](#)

Controlled Substances: Opioid Antagonists

This bill requires the Emergency Medical Services Authority to develop and adopt training and standards for all prehospital emergency care personnel regarding the use and administration of naloxone hydrochloride (naloxone) and other opioid antagonists and to include the administration of naloxone in the training and scope of practice, consistent with current law, for Emergency Medical Technician I certification. This bill requires the Attorney General to authorize hospitals and trauma centers to share data on controlled substance overdose trends with local law enforcement agencies and local emergency medical services agencies, as specified.

Public Health

[AB 2069 \(Maienschein, Chapter 357\)](#)

Immunizations: Influenza

This bill requires CDPH to post educational information on its website, in accordance with the latest recommendations of the Centers for Disease Control and Prevention, regarding influenza disease and the availability of the flu vaccine.

[ACR 107 \(Bloom, Chapter 82\)](#)

Year of the Family Physician

This resolution made legislative findings and declarations and designated 2014 as the Year of the Family Physician.

[ACR 110 \(Fox, Chapter 55\)](#)

Health Care District Month

This resolution proclaimed the month of May 2014 as Health Care District Month in California and recognized the essential role that health care districts have in the State of California.

[ACR 111 \(Levine, Chapter 25\)](#)

Colorectal Cancer Awareness Month

This resolution made legislative findings and declarations and designated the month of March 2014 as Colorectal Cancer Awareness Month.

Legislative Update (continued on page 9)

Legislative Update *(continued from page 8)*

[ACR 125 \(John Perez, Chapter 27\)](#)

Donate Life California Day: Driver's License

This resolution designated April 7, 2014, as DMV/Donate Life California Day and the month of April 2014, as "DMV/Donate Life California Month," and encouraged all Californians to sign up with the Donate Life California Organ and Tissue Donor Registry.

State Administration Mandates

[AB 186 \(Maienschein, Chapter 640\)](#)

Military Spouses: Temporary Licenses

This bill allows spouses of military personnel who have moved to California based upon active duty orders of the military spouse, and who have a physician's and surgeon's license in another state, to receive a 12-month temporary license if they meet the temporary licensing requirements, complete an application, and provide specified information.

[AB 1843 \(Jones, Chapter 283\)](#)

Child Custody Evaluations: Confidentiality

This bill authorizes the disclosure of a child custody report to the licensing entity of the child custody evaluator.

This bill requires that all confidential information in the child custody report that is disclosed to the licensing entity shall remain confidential and shall only be used for investigating allegations of unprofessional conduct. This bill requires the licensing entity, upon receipt of a child custody evaluation report, to notify the non-complaining party in the underlying custody dispute of the pending investigation of the child custody evaluator.

[AB 1886 \(Eggman, Chapter 285\)](#)

Medical Board of California (Board)

Currently, most public disciplinary information for currently and formerly licensed physicians can only be posted on the Board's website for 10 years. This Board-sponsored bill now allows the Board to post the most serious disciplinary information on the Board's website for as long as it remains public. This bill also changes the Board's website posting requirements, as follows: requires malpractice settlement information to be posted over a 5-year period, instead of a 10-year period (the posting would be in the same manner as specified in Business and Professions Code Section 803.1); and requires citations to be posted that have not been resolved or appealed within 30 days, and once the citation has been resolved, to only be posted for 3 years, instead of 5 years.

[SB 1116 \(Torres, Chapter 439\)](#)

Physicians and Surgeons

This bill requires the Board, by July 1, 2015, to develop a mechanism for physicians to pay a voluntary contribution, at the time of application for initial license or renewal, to the Steven M. Thompson Loan Repayment Program.

[SB 1159 \(Lara, Chapter 752\)](#)

License Applicants: Individual Tax ID Number

This bill prohibits licensing boards under the Department of Consumer Affairs (DCA) from denying licensure to an applicant based on his or her citizenship or immigration status, and requires licensing boards, the State Bar, and the Bureau of Real Estate to require, by January 1, 2016, that an applicant for licensure provide his or her individual taxpayer identification number or a social security number for an initial or renewal license.

[SB 1226 \(Correa, Chapter 657\)](#)

Veterans: Professional Licensing

This bill requires DCA boards and bureaus to expedite applications from honorably discharged veterans.

[SB 1315 \(Monning, Chapter 844\)](#)

Medi-Cal Providers

This bill requires a notice of temporary suspension issued to a health care provider by DHCS Medi-Cal Provider Enrollment Division to include a list of discrepancies required to be remediated and the timeframe in which a provider can demonstrate that the discrepancies identified have been remediated, which must be at least 60 days from the date the notice is issued. This bill requires the provider to be removed from enrollment as a Medi-Cal provider if a provider fails to remediate the identified discrepancies, as specified.

[SB 1466 \(Sen. B&P Committee, Chapter 316\)](#)

Health Care Professionals

This bill is the vehicle by which omnibus legislation has been carried by the Senate Business, Professions and Economic Development Committee. The omnibus language includes making the American Osteopathic Association-Healthcare Facilities Accreditation Program an approved accreditation agency for hospitals offering accredited postgraduate training programs. This bill would also strike "scheduled" from existing law that requires physicians who perform a "scheduled" medical procedure outside of a hospital, that results in a death, to report the occurrence to the Board within 15 days.

New Deputy Director



Liz Amaral

Liz Amaral joined the Medical Board of California (Board) in December 2014 as the Deputy Director. Liz comes to the Board from the California Health Benefit Exchange (Covered California) where she served as the Chief of Financial Planning as Covered California implemented the Affordable Care Act. As one of the first employees in Covered California, she established the administrative and financial divisions for the agency.

Prior to working at Covered California, Liz worked for the California Department of Corrections and Rehabilitation (CDCR). During her tenure with CDCR, Liz was a member of the management team in Budgets,

Business Services, Labor Relations and Human Resources. She has over 25 years of state experience in all of the administrative disciplines with a focus in fiscal services.

“Liz will be responsible for overseeing the Medical Board’s daily administrative operations and the delivery of program services to the consumers and physicians of California. She will work closely with the Board to promote effective planning and implementation of Board policies into program operations. We are extremely pleased to have her join the Medical Board team,” says Kimberly Kirchmeyer, Executive Director.

Steven M. Thompson Loan Repayment Program Recipient

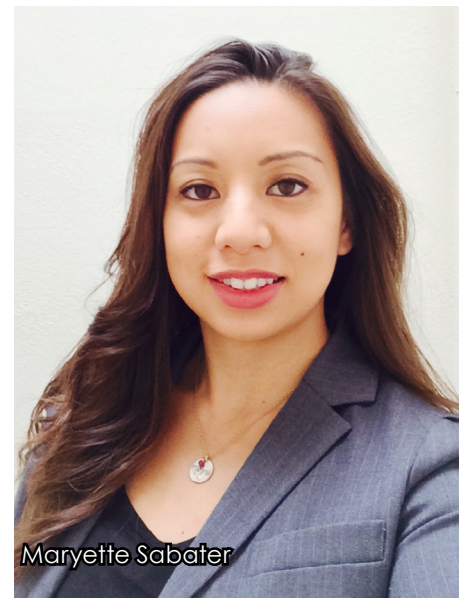
Maryette Sabater is a board-certified family physician at MayView Community Health Center in Mountain View, where she provides health care services for low-income and medically-underserved populations in her community. She studied at the University of California, Davis and completed her medical education at Ross University School of Medicine.

Dr. Sabater’s commitment and interest in community outreach and health promotion began early in her career. As a resident at Inspira Medical Center in New Jersey, Dr. Sabater implemented a community outreach program called Healthy Habits, which targeted childhood obesity prevention in partnership with the American Academy of

Family Physicians. She organized a community health fair and conducted monthly group workshops for patients and their families. “I believe that community health centers are key in helping address the gap in access to early medical care and prevention.”

Dr. Sabater also mentors medical students at Stanford University, teaching them the importance of community medicine and the impact it has on reducing health disparities among those experiencing barriers to health care.

She and her husband are new parents to a baby girl, Makena Gianna, and enjoy every minute spent with her. “I am so thankful for receiving this award. The Steven M. Thompson Loan Repayment Program is allowing me to work in a field that I am most



Maryette Sabater

passionate about, while serving those who might not otherwise receive the medical care they so desperately need.”

What Should You Expect if There is an Investigation after a Complaint has been Filed?

(Part 2 in a 2-part series)

Editor's note: Part 1 of this series, "Do Not Panic! What Should You Expect if a Complaint is Filed Against You?" was published in the Fall 2014 issue of this Newsletter: http://www.mbc.ca.gov/Publications/Newsletters/newsletter_2014_11.pdf.

Complaints are referred for investigation when the Medical Board of California (Board) needs to gather evidence to determine whether or not a violation of the Medical Practice Act has occurred that would warrant discipline. The Medical Practice Act is found within the California Business and Professions (B&P) Code, specifically sections 2000 -2448, and can be viewed at http://www.mbc.ca.gov/About_Us/Laws/California_Law.aspx. The complete B&P Code governs multiple professions in California. Examples of violations include substandard care, criminal conduct and sexual misconduct. Consumer protection is the ultimate mission of the Board and the goal of all investigations.

Any complaint where it appears there may be a violation of the law that needs further evidence to prove/disprove such an allegation will be investigated. Complaints alleging negligence resulting in patient death or serious bodily injury, physician impairment, sexual misconduct or complaints representing an immediate threat to public safety receive the highest priority.

First steps in the investigative process - two paths

Investigations may be conducted either by a non-sworn investigator or an investigator who is a sworn peace officer. Non-sworn investigators (those who are not peace officers) in the Board's Complaint Investigation Office handle arrest/conviction cases, petitions for reinstatement of licensure, out-of-state discipline cases and medical malpractice cases.

The Board's Complaint Investigation Office receives these cases from a variety of sources. When a physician applies for a license, he or she is required to be fingerprinted. If a physician is subsequently arrested, the Board receives a notice of the arrest from the Department of Justice. The Board investigates whether the arrest and/or subsequent conviction is substantially related to the practice of medicine. If so, the Board may take action against a

physician for unprofessional conduct (B&P Code section 2234) and conviction of a crime (B&P Code section 2236). Petitions for reinstatement are filed by former physicians whose licenses have been revoked or surrendered. B&P Code section 2307 lists specific requirements for reinstatement. B&P Code section 801.01 requires insurance companies, the physician or his or her attorney, or a government agency that self-insures the physician to report settlements, judgments and/or arbitration awards over \$30,000 in cases of alleged negligence, error or omission in practice or in rendering unauthorized professional services. Such reports must be made within specified timelines and are investigated by the Board to determine if the care was within the standard of practice. Finally, the Board receives reports from the Federation of State Medical Boards or the National Practitioner Data Bank regarding discipline from other states. Once the Board receives notification that a California-licensed physician has been disciplined in another state, the case is reviewed to determine if a violation of the California law (section 141 and 2305 of the B&P Code) occurred and needs further investigation.

Cases other than the types described above are assigned to sworn peace officers who have the authority to pursue criminal and administrative violations of the law and make arrests. These investigators work in 13 field offices of the Health Quality Investigation Unit (HQIU) of the Department of Consumer Affairs. A case is assigned to the office nearest where the incident occurred. A supervising investigator reviews the case and assigns it to an investigator. The investigator reviews the case, determines the proper steps to thoroughly investigate the complaint, and reviews the plan with an assigned prosecutor/Deputy Attorney General (DAG).

A medical consultant (a physician employed by HQIU) is also assigned to the case and provides technical medical advice to investigators and the DAG. The medical consultant reviews complaints and medical records, participates in interviews, and helps select an expert reviewer for the case. (Physicians interested in being a medical consultant for the Board can go to http://www.mbc.ca.gov/About_Us/Careers/Physicians_Investigations.aspx for more information.)

Investigation (continued on page 12)

Investigation *(continued from page 11)*

Additional steps in the investigative process

Investigative steps may include, but are not limited to, the following:

- Obtaining further medical records or other information/evidence;
- Locating and interviewing the complainant and/or patient, any witnesses, and the subject physician;
- Obtaining expert review of the case;
- Drafting and serving investigational subpoenas;
- Inspecting the location where the allegations occurred;
- Executing search warrants;
- Conducting undercover operations.

Physicians will be contacted

Once the investigative process has begun, a physician will be contacted by the investigator and asked to participate in an interview to discuss the details of the complaint. The investigator, a medical consultant, and a DAG will be in attendance for the interview. A physician may bring his or her legal representative. It is important that physicians always notify the Board in writing of any address and telephone number changes. If one has not already been received previously, a physician may request a summary of the complaint pursuant to B&P Code section 800(c). This section requires the Board to provide a comprehensive summary of the complaint, upon request.

Expert review

Once all the evidence has been collected, certain cases, specifically those with quality of care issues, are reviewed by an expert reviewer. This expert reviewer is a physician that is not an employee of the Board or HQUI, but contracts with the Board. The expert reviewer reviews the materials from the case, e.g. medical records, physician interviews, etc., and will determine if there was a departure from the standard of care in the treatment provided by the subject physician or if there is evidence of a violation of the Medical Practice Act. The expert reviewer must have expertise in the practice area of the subject physician and will need to testify at the administrative hearing, if the case does not settle. (Physicians interested in being an expert reviewer for the Board should see page 2 of this Newsletter for more information.)

Disposition of the complaint

The purpose of the investigation is to gather evidence

to determine whether or not a violation has occurred, and the intent is to do this in an objective, fact-based approach. The standard of proof for administrative cases, which must be proven before an administrative law judge, is “clear and convincing evidence to a reasonable certainty” that a violation occurred.

If the findings of the investigation do not support the claim that a violation of the law occurred, the case is closed. Additionally, if the evidence obtained confirms a violation occurred, but is insufficient to support administrative action, the case is closed and maintained on file for future reference. The investigator will notify the physician and all other involved parties of the disposition of the complaint.

If the investigation reveals sufficient evidence of violations of the Medical Practice Act, the case is referred to the Office of the Attorney General (AG), Health Quality Enforcement Section, for administrative action.

Disciplinary process

A DAG reviews the case to determine which charges can be substantiated by the evidence obtained. The DAG determines if an accusation or a petition to require competency, psychological or physical examination of the physician should be filed. Each case is unique. The Board and the AG’s Office determine the most reasonable and appropriate

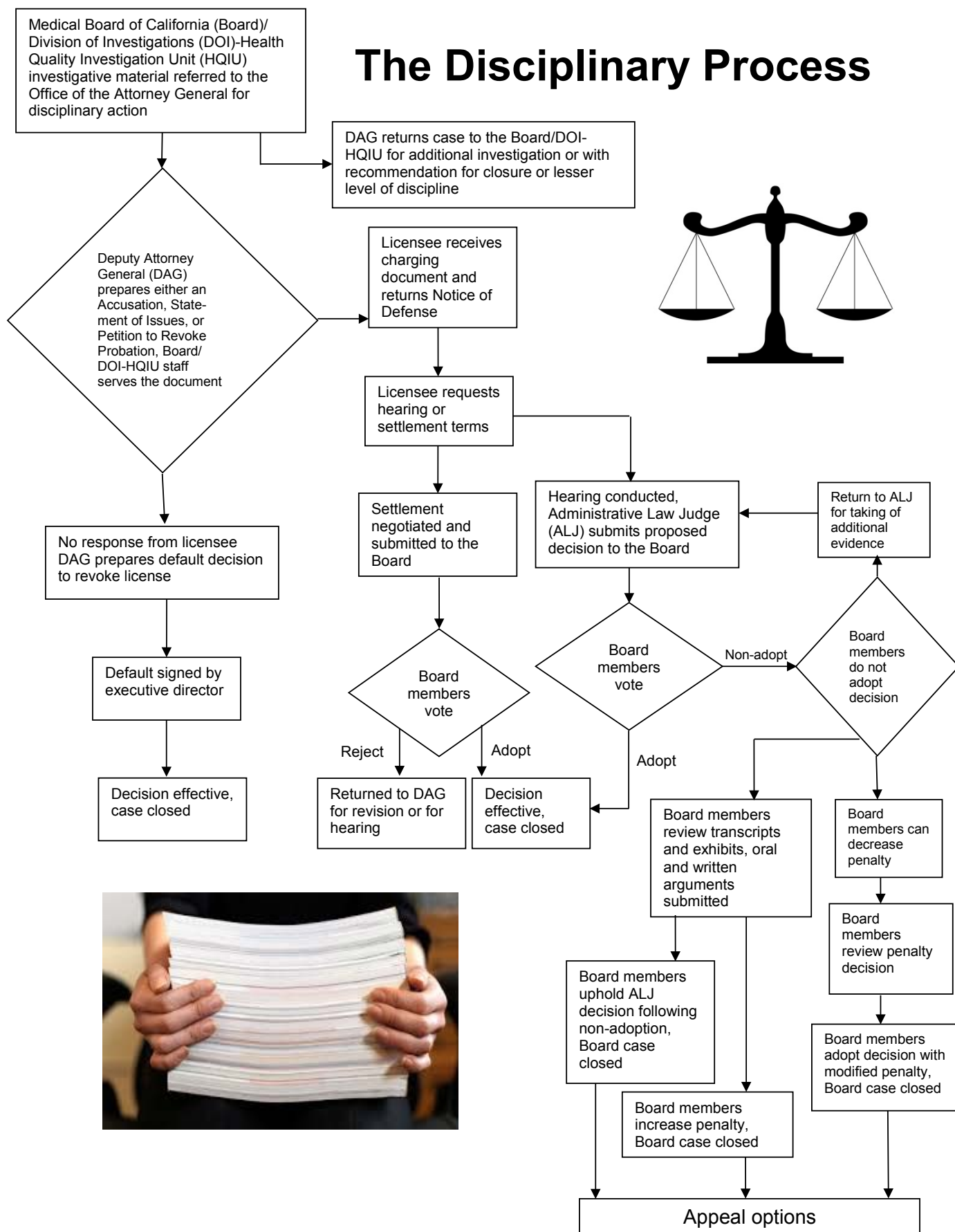
**Please see graphic on page 13
-- The Disciplinary Process -- to
understand the various routes a case
can take to disposition.**

action to take to protect the public during this process. If it is felt that there is an imminent danger to the public, the Board may move to restrict or suspend a physician’s license while a case is adjudicated.

The DAG will draft an accusation based upon the charges that can be substantiated after the investigation. An accusation is a legal document that lists the charges and/or the section(s) of law alleged to have been violated and is served on the physician. Unless a suspension order has been issued, the accusation is the first document that is available to the public. It is posted on the Board’s website on the physician’s profile. After the accusation has been filed, the physician has three options for resolution of the case. One, the physician can choose to not file a Notice of Defense (a document stating the physician intends to contest the charges and requests a hearing on the matter) and just let the charges stand as alleged. In this instance the Board will issue a default decision revoking the

Investigation (continued on page 22)

The Disciplinary Process



Mandatory Reporting Requirements for Physicians and Others

Reporting to the Board

Physicians

Physicians without malpractice insurance must report a Settlement (over \$30,000), Judgment (any amount) or Arbitration Award (any amount) within a specific time frame.

<http://www.mbc.ca.gov/Forms/Reporting/enf-801.pdf>
(Business and Professions Code §801.01)

The same holds true for attorneys representing such physicians.

Physician Reporting - Criminal Actions. An indictment or information charging a felony or any conviction of any felony or misdemeanor must be reported within 30 days.

<http://www.mbc.ca.gov/Forms/Reporting/enf-802.pdf>
(Business and Professions Code §802.1)

Transfer to Hospital from, or Death of Patient in Outpatient Surgery Setting. Physicians performing a medical procedure outside of a general acute care hospital resulting in patient death must report within 15 days. Physician performing a medical procedure outside of a general acute care hospital resulting in a patient transfer to a hospital for treatment of more than 24 hours must be reported within 15 days.

http://www.mbc.ca.gov/Forms/Reporting/patient_death.pdf
<http://www.mbc.ca.gov/Forms/Reporting/enf-2240b.pdf>
(Business and Professions Code §2240)

Notification of Name Change – name changes must be reported within 30 days.

http://www.mbc.ca.gov/Licensees/Name_Change.aspx
(Business and Professions Code §2021(c))

Address of Record – a change of address must be reported within 30 days.

http://www.mbc.ca.gov/Licensees/Address_of_Record.aspx
(Business and Professions Code §2021(b))

Email address – any physician with an email account is required to notify the Board of his or her email address.

http://www.mbc.ca.gov/Forms/Applicants/address_change_request.pdf
(Business and Professions Code §2021(d))

Others

Insurers' report of Malpractice Settlement or Arbitration Award within specific time frame:

<http://www.mbc.ca.gov/Forms/Reporting/enf-801.pdf>
(Business and Professions Code §801.01)

Self-Insured employers of physicians report of Settlement, Judgment or Arbitration Award within specific time frame:

<http://www.mbc.ca.gov/Forms/Reporting/enf-801.pdf>
(Business and Professions Code §801.01)

State or local government agencies that self-insure physicians, report of Settlement, Judgment or Arbitration Award within specific time frame:

<http://www.mbc.ca.gov/Forms/Reporting/enf-801.pdf>
(Business and Professions Code §801.01)

Peer Review/Health Facility Reporting:

<http://www.mbc.ca.gov/Forms/Reporting/enf-805.pdf>
(Business and Professions Code §805)

<http://www.mbc.ca.gov/Forms/Reporting/enf-805-01.pdf>
(Business and Professions Code §805.01)

Reporting for coroners:

http://www.mbc.ca.gov/Forms/Reporting/coroner_report.pdf
(Business and Professions Code §802.5)

Reporting requirements for court clerks and prosecuting agencies:

<http://www.mbc.ca.gov/Forms/Reporting/enf-805-01.pdf>
(Business and Professions Code §§803, 803.5 and 803.6)

Accredited Outpatient Surgery Settings must report adverse events to the Board no later than five days after the adverse event is detected, or, if that event is an ongoing urgent or emergent threat to the health and safety of patients, personnel or visitors, not later than 24 hours after adverse event is detected.

http://www.mbc.ca.gov/Consumers/Outpatient_Surgery/outpatient_adverse_event_form.pdf
(Business and Professions Code §2216.3)

Reporting Transfer of Planned Out-of-Hospital Births:

A hospital shall report each transfer by a licensed midwife of a planned out-of-hospital birth to the Medical Board of California and the California Maternal Quality Care Collaborative.

http://www.mbc.ca.gov/Forms/Licensees/midwives_out-of-hospital_delivery.pdf
(Business and Professions Code §2510)

Mandatory Reporting (continued on page 15)

Mandatory Reporting *(continued from page 14)*

Reporting to Other Entities

Live births must be registered with the local registrar of births and deaths for the district in which the birth occurred within 10 days following the date of the event.
(Health and Safety Code §102400)

Medical and health section data and the time of death shall be completed and attested to by the physician last in attendance, or, in some cases, by a licensed physician assistant. Physicians or licensed physician assistants in certain cases, will state conditions contributing to death (except in cases to be investigated by the coroner) and the hour and day the death occurred on a certificate of death and indicate the existence of cancer.
(Health and Safety Code §§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 physicians, physician assistants, nurses, midwives and others in California:
http://www.cdph.ca.gov/HealthInfo/discond/Documents/SSS_Reportable_Diseases.pdf

Reportable to local health officer for jurisdiction where patient resides.
(Title 17 California Code of Regulations §2500)

Injuries by deadly weapon or criminal act:
http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=PEN§ionNum=11160
(Penal Code §11160)
Reportable to local law enforcement.

Child abuse:
http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=PEN§ionNum=11165.7
(Penal Code §§11165.7(a)(21), 11165.9, 11166(a)(c))
Reportable to local law enforcement, county probation department, or county welfare department.

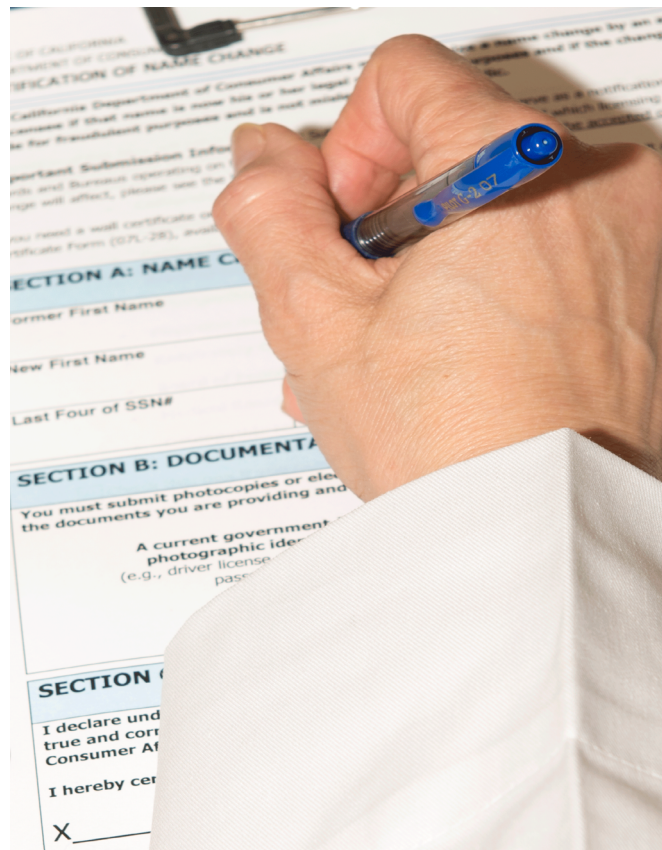
Adult/Elder abuse:
http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=WIC§ionNum=15630
(Welfare and Institutions Code §15630)
Reportable to local law enforcement or an adult protective service agency.

Injuries resulting from neglect or abuse:
http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=PEN§ionNum=11161.8
(Penal Code §11161.8)
Reportable to local law enforcement and the county health department.

Lapses of Consciousness:
http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=HSC§ionNum=103900
(Health and Safety Code §103900)
Reportable to local health officer.

Pesticide poisoning/illness
http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=HSC§ionNum=105200
(Health and Safety Code §105200)
Physician must report pesticide illness to local health officer by telephone within 24 hours.

Mandatory Reporting *(continued on page 21)*



When Do I Need a Fictitious Name Permit?

The Board issues Fictitious Name Permits (FNP) to a California licensed physician and surgeon or a licensed podiatrist. The requirements regarding the need for an FNP became effective on January 1, 1980.

The purpose of an FNP is to allow a licensed physician and surgeon or podiatrist to practice under a name other than his or her own. Business and Professions Code section 2285 states in part: "The use of any fictitious, false, or assumed name, or any name other than his or her own by a licensee either alone, in conjunction with a partnership or group, or as the name of a professional corporation, in any public communication, advertisement, sign, or announcement of his or her practice without a fictitious-name permit obtained pursuant to Section 2415 constitutes unprofessional conduct." The intent of the law is to ensure that consumers are able to identify and locate physicians practicing under an FNP.

The following are some of the common questions regarding an FNP:

When do I need a fictitious name permit?

- If you are a licensed physician and surgeon, or podiatrist, and want to practice under a name other than the name on your license.
- If you have a professional corporation in a name other than your own.
- If you have a partnership or group practice or are using a name other than the name on your license in any public communication, advertisement, sign or announcement.

Is the FNP the same as having the name registered as a trademarked name?

- No.

I have a city and/or county- issued fictitious business name. Therefore, I do not need an FNP from the Board, correct?

- No. A city/county fictitious business name is not the same as the Board's FNP.

Why do physicians get into trouble when they do not have an FNP?

- Some physicians incorrectly believe that having a city/county fictitious business name is all that they need to practice under a name other than their own.
- It is unprofessional conduct to practice without an FNP when one is required.

Can a layperson be an owner or partial owner of an FNP?

- No.

What type of corporation is necessary to meet the requirements for an FNP?

- The Medical Board can only accept corporations that are formed in California and are professional medical corporations. No out-of-state (foreign), limited liability, or general corporations are allowed.

Are Limited Liability Partnerships (LLP) or Limited Liability Corporations (LLC) allowed?

- No. Physicians cannot practice medicine as LLPs or LLCs.

Fictitious Name Permit (continued on page 17)

Fictitious Name Permit *(continued from page 16)*

Who can form a partnership with a physician to practice medicine?

- Physicians may only be partners with other physicians and osteopaths or podiatrists.

Is the FNP transferable if a medical practice is purchased by another physician?

- No. The former owner must submit an application for cancellation of the FNP to cancel the permit and the new owner must submit an application for a new FNP.

Can shareholders or partners be added or deleted from the FNP?

- Yes. If there are multiple owners of the permit, and you would like to associate or disassociate shareholders or partners, complete the [FNP Notification of Shareholders Change](#) (if a corporation), or [FNP Notification of Partnership Change](#) (if a partnership) form and mail it to the Medical Board.

Does each physician need a separate FNP?

- No. However, each physician owner will need to be listed on the FNP application. If the application is approved, only one FNP is issued.

Do I have to have an FNP if I am just working at a facility and I am not the owner?

- No. However, there are restrictions in statute as to who can employ a physician. Physicians cannot be employed by laypersons.



I am a licensed physician. Do I need a separate FNP if I am working for a partnership, group or professional corporation?

- No. Physicians who are employed by a partnership, a group, or a professional corporation that holds an FNP that is in a renewed and current status do not need an FNP.

Do I need an FNP to practice under my own name as listed on my license?

- No. For example the following do not need an FNP:
 - Jane Doe, M.D.
 - Jane Doe, M.D., Inc.
 - Jane Doe, M.D., A Professional Corporation.

Additional information and frequently asked questions regarding FNPs and forms may be found on the Board's website: http://www.mbc.ca.gov/Applicants/Fictitious_Name/ or by calling the Board at (800) 633-2322 or (916) 263-2382.

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY - Department of Consumer Affairs		EDMUND G. BROWN JR., Governor	
			
MEDICAL BOARD OF CALIFORNIA Licensing Program			
FICTITIOUS NAME PERMIT APPLICATION		FOR OFFICE USE ONLY	
		Fee Paid:	Receipt No.:
INSTRUCTIONS: Please print or type. ALL INCOMPLETE OR COPIED APPLICATIONS WILL BE RETURNED. For Individuals (Sole Proprietor) or Partnerships* : fill out items 1, 2, 3, 4, and 5 and mail with the \$50 fee. For Corporations** : fill out items 1, 2, 3, 6a or 6b and 7 and mail with a copy of the endorsed Articles of Incorporation (articles that were originally filed with the Secretary of State and any amendments) and the \$50 fee. * For Partnerships comprised of corporations, submit endorsed Articles of Incorporation for each corporation. ** In California you may only practice medicine as a corporation if you are a California Professional Medical Corporation (Business and Professions Code §2402, Corporations Code §13401.5).			
Fee: \$50 (non-refundable) check, money order or cashier's check Payable to: Medical Board of California		Mail application to: Medical Board of California Licensing Program 2005 Evergreen Street, Suite 1200 Sacramento, CA 95815-3831	
1. Practice Address (must be a physical address in California)			
Physician or Corporation Name			
Street Address (P.O. Boxes are not acceptable)			
City	State	Zip Code	Telephone No.
CA			
Additional Practice Locations: Yes <input type="checkbox"/> No <input type="checkbox"/> (List additional practice address(es) and telephone number(s) on a separate attachment)			
Mailing Address for the Fictitious Name Permit (if different than the practice address)			
Name			
Address			
City	State	Zip Code	
Person to be contacted regarding this application			
Name			Telephone No.
Address	City	State	Zip Code
2. Business Type			
The applicant is applying as: (check only one) <input type="checkbox"/> Individual (Sole Proprietor)			
<input type="checkbox"/> Professional Medical Corporation*		<input type="checkbox"/> Partnership	
<input type="checkbox"/> Professional Podiatry Corporation		<input type="checkbox"/> Medical Group	
*The corporation must be a California professional medical corporation incorporated under California Corporations Code §13400 et. seq.			
FNP-001 Revised 8/2013			
2005 Evergreen Street, Suite 1200, Sacramento, CA 95815-3831 (916) 263-2382 (800) 633-2322 FAX: (916) 274-6181 www.mbc.ca.gov			

What You Should Know About CURES and Overprescribing

By Brittan Durham, M.D.,

Health Quality Investigative Unit, Tustin Office

According to the Centers for Disease Control and Prevention, approximately 7 million Americans abuse prescribed medicines classified as controlled substances. Opioid analgesics -- one class of controlled substances widely used for management of moderate to severe pain -- are also widely abused and diverted for non-medical uses. *This abuse results in more deaths from overdose than deaths from motor vehicle accidents.*

Recognizing that inappropriate prescribing of controlled substances is a patient safety and consumer protection issue, the Medical Board of California (Board) updated its previously published prescribing guidelines in an attempt to assist prescribers in addressing the issue.

The Board approved new revised [Guidelines for Prescribing Controlled Substances for Pain](#) at its quarterly meeting on October 14, 2014. These guidelines are intended to improve effective pain management in California by avoiding undertreatment, overtreatment, or other inappropriate treatment of a patient's pain. The guidelines also clarify the principles of professional medical practice in the context of overprescribing laws versus patient pain treatment satisfaction surveys that are reported to hospitals and to the Centers of Medicare Services (CMS) which often criticize medical professionals for the undertreatment of pain. These guidelines also address terminal illness, pediatrics, geriatrics, and the California Intractable Pain Treatment Act (CIPTA).

The Controlled Substance Utilization Review and Evaluation System (CURES) is a California state database that contains over 100 million controlled substance prescription records. The system was created to facilitate prescriber review of prescription information to help identify potential drug abuse, diversion, or overprescribing of Schedule II, III and IV controlled substances. The online CURES system allows authorized prescribers to quickly review controlled substance information via the automated Patient Activity Report (PAR) as part of California's Prescription Drug Monitoring Program (PDMP).

The revised Board guidelines recommend the use of CURES reports in assessing patient adherence to pain treatment plans, and to ensure that patients are not receiving controlled substances from multiple prescribers.

Most overprescribing cases that come to the attention of the Board fall under Business and Professions Code



section 725, pertaining to excessive controlled substance prescribing. CURES is a valuable investigative tool for law enforcement and regulatory boards, as well as an important practice tool for physicians and pharmacists. Once an allegation or an investigation begins, the Board uses CURES as an investigative instrument to assess licensee prescribing patterns. Complaints of alleged overprescribing of controlled substances come to the Board in various ways including:

- Referrals from local law enforcement after an arrest of a patient for a drug violation.
- Coroners' 802 reports indicating prescription drug overdose as the cause of death.
- Complaints from relatives of patients who have been admitted with an overdose, or for detoxification.
- Referrals from the DEA.
- Referrals from medical insurance companies.
- Referrals from pharmacies using CURES.
- 801 civil litigation cases.

Overprescribing (continued on page 19)

Overprescribing *(continued from page 18)*

Complaints of overprescribing are often closed after the Board reviews the CURES reports. When good cause exists to suspect overprescribing, the case (including the CURES reports) is reviewed by an expert with the same specialty or area of practice as the physician being investigated to determine if a departure from the standard of care has occurred. Action against the prescriber's license may proceed if a departure is identified.

Medical professionals can use CURES to evaluate their patients' care and assist those patients who may be

abusing controlled substances. The Board expects physicians and other prescribers to follow the standard of care in managing pain patients and to use compliance tools such as CURES to monitor adherence to treatment plans. The CURES/PDMP is a valuable investigative, preventive, and educational tool for law enforcement, regulatory boards, and the health care community. For more information about registering for CURES access, visit http://www.mbc.ca.gov/Licensees/Prescribing/cures_notice.pdf.

Package Guidelines Clarify Drug Risks/Benefits for Pregnant and Lactating Women

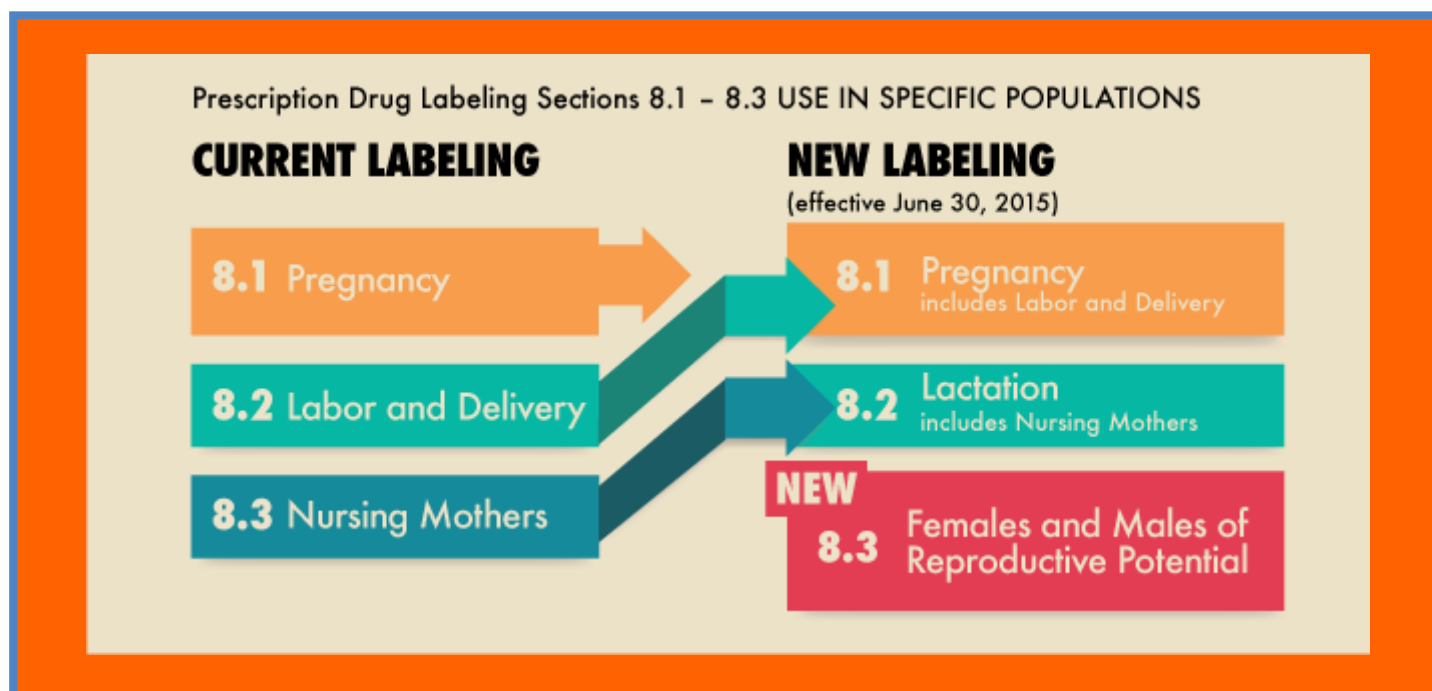
The U.S. Food and Drug Administration (FDA) has developed new package insert guidelines to provide a more consistent way to include information about the risks and benefits of prescription drugs and biological products used during pregnancy and breastfeeding. The final rule replaces the current product letter categories – A,B,C,D and X – used to classify the risks of using prescription drugs during pregnancy with three detailed subsections that describe risks within the real-world context of caring for pregnant women who may need medication.

“Prescribing decisions during pregnancy and lactation are individualized and involve complex maternal, fetal and infant risk-benefit considerations. The letter category system was overly simplistic and was misinterpreted as a

grading system, which gave an oversimplified view of the product risk,” said Sandra Kweder, M.D., deputy director of the Office of New Drugs in the FDA's Center for Drug Evaluation and Research.

The final rule, which takes effect June 30, 2015, requires the use of three subsections in the labeling titled “Pregnancy,” “Lactation” and “Females and Males of Reproductive Potential.” The final subsection will include information about pregnancy testing, contraception and about infertility as related to the drug.

For more information, please see [Pregnancy and Lactation Labeling Rule](#) (PLLR). Below is a comparison of the current prescription drug insert guidelines (labeling) and the new PLLR requirements.



U.S. Centers for Disease Control (cdc.gov)

Measles making a comeback. An ongoing outbreak linked to visitors to Disneyland or Disney California Adventure Park, both in Anaheim, continues spreading in multiple states. According to the U.S. Centers for Disease Control, “providers should be especially aware of the possibility of measles in people with fever and rash who have recently traveled abroad or who have had contact with international travelers.” Such contact can occur at tourist attractions, malls and airports. Most people getting measles in the recent outbreak are unvaccinated. Measles is highly infectious. Cases have been documented involving airborne transmission via respiratory droplets up to two hours after the person with measles occupied a closed room, such as an examination room. Physicians can test patients for measles immunity, and two doses of vaccine have been recommended since 1989. The United States experienced 644 measles cases during 2014 in 27 states -- the greatest number since measles “elimination” was documented in the U.S. in 2000. (<http://www.cdc.gov/measles/cases-outbreaks.html>, http://www.immunize.org/askexperts/experts_mmr.asp and <http://wwwnc.cdc.gov/travel/notices/watch/measles-philippines>) Editor's note: useful information on measles, including a CDC Measles Fact Sheet for Parents, can be accessed at the Board's website, <http://www.mbc.ca.gov/Licensees/Measles.aspx>.

The American Association for Cancer Research (aacr.org)

Call for Regulation of E-cigarettes and other Electronic Nicotine Delivery Systems. The American Association for Cancer Research (AACR) and the American Society of Clinical Oncology (ASCO) have outlined steps in a joint statement to guide policymakers as they work to minimize the potential negative consequences of electronic cigarettes (e-cigarettes) and other electronic nicotine delivery systems (ENDS) without undermining their potential to reduce harm as a smoking cessation tool. Because e-cigarettes and other ENDS are not currently regulated by the U.S. Food and Drug Administration, they can be sold and marketed to children. Some contain “candy and other youth-friendly/youth-oriented flavors,” according to the joint statement. (<http://www.aacr.org/Newsroom/Pages/News-Release-Detail.aspx?ItemID=651>)

Tech Med Corner

iHealthBeat (ihealthbeat.org) *Providers Use Smartphone Apps To Track Mental Health Symptoms.* An article in *The Wall Street Journal* describes how some health care providers are using mobile apps to survey patients’ mental health. One such app in use by gynecologists can track phone habits of pregnant patients to see if the data might help gauge risk of postpartum depression. (1/6/15) <http://www.ihealthbeat.org/articles/2015/1/6/providers-use-smartphone-apps-to-track-mental-health-symptoms>.

iHealthbeat (ihealthbeat.org) *Study: Text Messages Prompted Parents to Get Second Flu Shots for their Kids.* *MedPage Today* (12/29/14) reported that text messages with reminders and additional health information proved more effective at nudging parents to get their kids a second dose of flu vaccine than either written reminders or text messages without additional educational material. The study's lead author hypothesized that the educational text messages may have succeeded because they conveyed a sense of urgency. <http://www.ihealthbeat.org/articles/2015/1/5/texts-prompt-more-parents-to-complete-flu-vaccinations-for-children>

Free Online CME Class: Internet Drug Sellers: What Providers Need to Know

The Alliance for Safe Online Pharmacies (ASOP) and the Federation of State Medical Boards (FSMB) announce the availability of a free online continuing education program (CME/CPE) entitled “Internet Drug Sellers: What Providers Need to Know,” focused on how to protect patients from illegal online drug sales. According to ASOP and FSMB, recent studies found that nearly 97 percent of online drug sellers are operating illegally, and one in two websites selling medicine online peddles counterfeit drugs.

For more information about the CME/CPE, please visit <https://www.ccity.com/ce-bin/owa/bel?cc=MCK&aid=15952>.

Mandatory Reporting *(continued from page 15)*

Miscellaneous Reporting Requirements

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/Licensees/Prescribing/DEA_Reporting.aspx

Additional Requirements

Required written information physicians must provide patients: <http://www.mbc.ca.gov/publications>

A Patient's Guide to Blood Transfusion
(Health and Safety Code §1645)

A Woman's Guide to Breast Cancer Diagnosis & Treatment
(Health and Safety Code §109275)

Gynecologic Cancers...What Women Need to Know
(Health and Safety Code §109278)

Professional Therapy Never Includes Sex
(Business and Professions Code §728)

Things to Consider Before Your Silicone Implant Surgery
(Business and Professions Code §2259)

What You Need to Know About Prostate Cancer
(Business and Professions Code §2248; Health and Safety Code §109280)

Mandatory Physician Signage

Notice to consumer:

http://www.mbc.ca.gov/Licensees/Notices/Notice_to_Consumers.aspx

(Title 16, California Code of Regulations §1355.4)

Education disclosure:

<http://www.mbc.ca.gov/Licensees/Notices/Education.aspx>

(Business and Professions Code §680.5)

Prostate cancer "Be Informed" notice:

http://www.mbc.ca.gov/Licensees/Notices/Prostate_Cancer.aspx

(Health and Safety Code §109282)

Breast cancer "Be Informed" notice:

http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=HSC§ionNum=109277

(Health and Safety Code §109277)



Investigation *(continued from page 12)*

physician's license. Two, the physician can file a Notice of Defense and take the matter to hearing. In this instance an Administrative Law Judge issues a proposed decision, which is then reviewed by the members of the Board who make the final decision. Third, the physician can file a Notice of Defense, however, during the course of discussion with the AG's office, the matter can be resolved via a stipulation between the Board and the physician on the disciplinary action that will be imposed.

Disciplinary actions

A variety of disciplinary actions may be taken, ranging from a Public Letter of Reprimand, which can include educational or clinical training requirements, to license revocation. Please see page 23 of this Newsletter for an explanation of disciplinary terms and actions. Probation for varying lengths of time, with conditions addressing issues that led to the complaint, may be the outcome. Probation with conditions is ordered to allow the physician to continue to practice while also protecting the public and addressing the issues which led to the discipline. As of July 1, 2014, 645 licensed California physicians were on probation with the Board, out of a total of 106,284 licensed physicians with a California address and another 24,442 licensed in California and residing out-of-state.

When a formal disciplinary order is issued, a physician on probation is required to notify his or her hospital, any other facility where the physician practices, and his or her malpractice insurance carrier. The physician must then provide the Board with confirmation that the required notifications have occurred.

Tips from the Board

- A physician should not panic when he or she receives a letter from the Board. As previously mentioned, the investigation is intended to gather evidence to determine whether or not a violation has occurred, and the intent is to do this in an objective, fact-based approach.
- When a physician is contacted by the Board, he or she should respond within the requested time frame.
- When a physician is requested to do so, he or she should provide as much information as possible regarding the incident. This may result in a more timely resolution of the matter.

- A physician should know that the Board must look into every complaint that is received and be aware that the Board is contacting the physician to obtain his or her details on the complaint in order to obtain all the evidence.
- Honesty is the best policy. If a physician is completing any forms for the Board, he or she should ensure all forms are accurate and complete.

Confidentiality

Details regarding a complaint and investigation are not available to the public unless an accusation or petition to revoke probation is filed, when they become part of the public record.

For more information

If you have additional questions about the enforcement process, please contact the Board at (800) 633-2322 or by email at webmaster@mbc.ca.gov.

**To the extent possible,
Board meetings will be
webcast and offered
via teleconference.
Visit our website at
<http://www.mbc.ca.gov>
for details.**





Administrative Actions:

August 1, 2014 – October 31, 2014

Physicians and Surgeons

ABEDI, BABAK, M.D. (A 95902)

Hollywood, CA

Revoked, stayed, placed on 3 years probation with terms and conditions, including a condition precedent to the practice of medicine

October 8, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=95902>

ADAMS, JAN RUDALGO (A 51004)

Fountain Valley, CA

License Revoked

October 10, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=51004>

ALI, MOHAMED SADAT, M.D. (A 67534)

Rancho Cucamonga, CA

Public Reprimand

September 11, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=67534>

ALI, WAQAS (C 55857)

Tremont, IL

License Revoked

August 29, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=55857>

ANDERSON, SCOTT DODD (G 33616)

Carmichael, CA

License Revoked

October 9, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=33616>

ANDO, DALE GENJI (G 50003)

Walnut Creek, CA

License Surrendered

August 22, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=50003>

APREC, JOSEPH MALIG, M.D. (A 41691)

Lake Elsinore, CA

Revoked, stayed, placed on 3 years probation with terms and conditions, including a condition precedent to the practice of medicine

August 14, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=41691>

Explanation of disciplinary language and actions

“Effective date of decision” — Example: “March 14, 2012” at the bottom of the summary means the date the disciplinary decision goes into operation.

“Gross negligence” — An extreme deviation or departure from the standard of care.

“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 with probationary terms and conditions. This is done when cause exists to deny the license application, but limitations can be put in place to protect the public.

“Public Letter of Reprimand” — A lesser form of discipline that can be negotiated after or in lieu of the filing of formal charges. The reprimand may include educational and clinical training requirements.

“Revoked” — The right to practice is ended due to disciplinary action. The license is invalidated, voided, annulled, or rescinded.

“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 any term of probation may result in the revocation that was postponed.

“Stipulated Decision or Settlement” — A form of plea bargaining. The case is formally negotiated and settled prior to hearing.

“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.

BADR, MOHAMED IBRAHIM (A 56397)

Lake Elsinore, CA
License Revoked
October 14, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=56397>

BASCO, MICHAEL ANGELO, M.D. (G 88898)

Washington, DC
Public Reprimand with conditions
September 26, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=88898>

BICKMAN, SCOTT COLEMAN (G 76532)

Hawthorne, CA
License Revoked
October 31, 2014
Judicial Review Pending

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=76532>

BROOMBERG, BARRY JULIAN (C 41796)

San Diego, CA
License Surrendered
October 17, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=41796>

BUEHNER, THOMAS SEVERIN (G 49061)

Palm Springs, CA
License Surrendered
September 11, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=49061>

BUETOW, NORMAN THEODORE, JR., M.D. (G 40726)

Murrieta, CA
Revoked, stayed, placed on 5 years probation with terms and conditions, including 45 days actual suspension
October 31, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=40726>

BURLACOFF, SUSAN GAYLE (A 54033)

Toronto, Ontario
License Revoked
August 8, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=54033>

BYRD, JENNIE GAIL, M.D. (C 40889)

Benicia, CA
Public Reprimand
September 4, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=40889>

CARR, MIANDA CHEREE, M.D. (A 104660)

Chula Vista, CA
Public Reprimand with conditions
September 26, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=104660>

CHANG, CANDACE SHIAO-RONG (A 62000)

Riverside, CA
License Surrendered
September 12, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=62000>

CHO, KISUK, JAY, M.D. (A 51445)

Santa Clara, CA
Revoked, stayed, placed on 5 years probation with terms and conditions
October 13, 2014
Judicial Review Pending

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=51445>

CHUNG, STANLEY BO-SHUI (G 27903)

Toronto, Ontario
License Surrendered
September 29, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=27903>

CLOPTON, JAMES KIRK (G 69788)

El Dorado Hills, CA
License Revoked
October 17, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=69788>

DAVIS, SCOTT MITCHELL, M.D. (G 75950)

Northridge, CA
Revoked, stayed, placed on 5 years probation with terms and conditions, including a condition precedent to the practice of medicine
September 26, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=75950>

DE JESUS, VIOLETA MOYER, M.D. (A 48057)

Anaheim, CA
Revoked, stayed, placed on 5 years probation with terms and conditions, including a condition precedent to the practice of medicine
October 9, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=48057>

DUCK, CRAIG STEVEN, M.D. (A 61484)

Encinitas, CA

Revoked, stayed, placed on 3 years probation with terms and conditions

October 8, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=61484>

ELZIK, EKRAM KAMEL (A 42054)

San Clemente, CA

License Surrendered

September 15, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=42054>

FARRAR, CHARLES W. (C 23581)

San Francisco, CA

License Surrendered

August 8, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=23581>

FARRELL, JULIE ANN, M.D. (G 88765)

Augusta, KY

Public Letter of Reprimand issued pursuant to California Business and Professions Code Section 2233

September 15, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=88765>

FAZIL, MOHAMMAD (A 35835)

Pico Rivera, CA

License Surrendered

August 19, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=35835>

FOSTER, ROBERT WAYNE, M.D. (G 56132)

La Mesa, CA

Public Reprimand with conditions

September 19, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=56132>

FRIESE, STEVEN BUCKLES, M.D. (A 85938)

Anchorage, AK

Public Reprimand with conditions

September 5, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=85938>

GILL, VIVEK SINGH, M.D. (A 61054)

Phelan, CA

Revoked, stayed, placed on 5 years probation with terms and conditions, including actual suspension until completion of a condition

August 27, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=61054>

GLOUSMAN, RONALD ERIC, M.D. (G 45186)

Tarzana, CA

Revoked, stayed, placed on 7 years probation with terms and conditions

September 3, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=45186>

GOGNA, RAVI KANT, M.D. (A 39659)

Manteca, CA

Revoked, stayed, placed on 3 years probation with terms and conditions

August 29, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=39659>

GOODWIN, JEREMY LR, M.D. (G 76323)

Mount Shasta, CA

Revoked, stayed, placed on 5 years probation with terms and conditions

September 3, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=76323>

GREER, SCOTT DOUGLAS, M.D. (G 45636)

San Diego, CA

Revoked, stayed, placed on 7 years probation with terms and conditions, including 30 days actual suspension

October 8, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=45636>

GUPTA, KAJAL, M.D. (A 92637)

Upland, CA

Revoked, stayed, placed on 3 years probation with terms and conditions

September 12, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=92637>

HAMID, SULTAN SAID (C 42153)

Concord, CA

License Surrendered

September 15, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=42153>

HARTLEROAD, JAMES A., M.D. (G 74901)

San Bernardino, CA

Public Letter of Reprimand issued pursuant to California
Business and Professions Code Section 2233

October 6, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=74901>

HASS, WILLIAM HERMAN, M.D. (G 25981)

Pensacola, FL

Public Reprimand

September 3, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=25981>

HAY, DONALD T. (A 18121)

Walnut Creek, CA

License Surrendered

October 21, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=18121>

HICKS, DAVID LAWRENCE (A 78818)

Concord, CA

License Surrendered

October 13, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=78818>

HOMAN, DAVID JOHN, M.D. (A 119413)

San Diego, CA

Public Letter of Reprimand issued pursuant to California
Business and Professions Code Section 2233

September 16, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=119413>

HUI, ESTHER YUN-LING, M.D. (A 81053)

North Highlands, CA

Revoked, stayed, placed on 3 years probation with terms
and conditions

August 8, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=81053>

JAIN, ASHOK KUMAR, M.D. (A 31286)

Redding, CA

Revoked, stayed, placed on 4 years probation with terms
and conditions

October 31, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=31286>

KALEKA, VIRENDER S., M.D. (A 43546)

Selma, CA

Public Letter of Reprimand issued pursuant to California
Business and Professions Code Section 2233

September 25, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=43546>

KAMAKA, JOSEPH KALANIHULI, III (G 88657)

Wailuku, HI

License Surrendered

August 27, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=88657>

KAPLAN, JEVIN HART (A 48217)

Redding, CA

License Surrendered

August 5, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=48217>

KATZMAN, SCOTT STEVEN, M.D. (G 71106)

Fort Pierce, FL

Public Letter of Reprimand issued pursuant to California
Business and Professions Code Section 2233

August 11, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=71106>

KROUPA, VLADIMIR (A 48466)

Porterville, CA

License Surrendered

September 17, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=48466>

LEE, JAMES HO, M.D. (G 84634)

Fresno, CA

Revoked, stayed, placed on 5 years probation with terms
and conditions

August 8, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=84634>

LYNCH, TIMOTHY EUGENE, M.D. (G 74208)

Santa Ana, CA

Revoked, stayed, placed on 5 years probation with terms
and conditions

October 3, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=74208>

LUM, OWEN MYUNG CHI (C 37864)

San Jose, CA

License Surrendered

October 29, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=37864>

MAHMOOD, HAAD A., M.D. (A 132056)

Pasadena, CA

Probationary License issued with 3 years probation and terms and conditions

August 8, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=132056>

MANTIS, JOHN KELLY (G 39199)

Manhattan Beach, CA

License Surrendered

October 10, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=39199>

MCQUADE, MARY VIRGINIA, M.D. (G 59938)

Carmel, CA

Revoked, stayed placed on 5 years probation with terms and conditions

August 28, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=59938>

MEADOWS, LEE HASTINGS (G 51817)

Tamuning, Guam

License Surrendered

October 3, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=51817>

MEHTA, ANUPAMA, M.D. (A 132021)

Chicago, IL

Probationary License issued with 3 years probation and terms and conditions

August 7, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=132021>

MILAZZO, CAROL FRANCES, M.D. (G 85272)

Roseville, CA

Public Reprimand with conditions

October 31, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=85272>

MOHAN, DEEPAK, M.D. (A 85611)

French Camp, CA

Revoked, stayed, placed on 4 years probation with terms and conditions

October 31, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=85611>

MORGAN, LOREN R., M.D. (C 23681)

Chico, CA

Revoked, stayed, probation extended for 5 years from the effective date of this decision with terms and conditions

September 5, 2014

Judicial Review Pending

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=23681>

MUNSIF, ANAND NACHIKET (A 50992)

Livingston, NJ

License Revoked

October 17, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=50992>

NARAYAN, PRATAP LAKSHMI, M.D. (C 52001)

Folsom, CA

Revoked, stayed, placed on 5 years probation with terms and conditions

September 19, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=52001>

NASEEM, SHAHZAD, M.D. (A 75541)

Yuba City, CA

Revoked, stayed, placed on 5 years probation with terms and conditions

September 5, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=75541>

NAWROSKI-WOZNIAK, JOANNA D., M.D. (A 39627)

San Diego, CA

Revoked, stayed, placed on 5 years probation with terms and conditions

August 15, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=39627>

NELSON, JANE CAROLYN, M.D. (G 66123)

Austin, TX

Public Letter of Reprimand issued pursuant to California Business and Professions Code Section 2233

August 18, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=66123>

NIELSEN, ERIC JON (G 66218)

Sacramento, CA
License Surrendered
September 12, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=66218>

NWAIGWE, MANASSEH C., M.D. (A 42532)

Glendale, CA
Revoked, stayed, placed on 3 years probation with terms and conditions
October 23, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=42532>

OLMEZ, INAN, M.D. (A 132057)

Los Angeles, CA
Probationary License issued with 3 years probation and terms and conditions
August 7, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=132057>

ORVALD, THOMAS OWEN (C 36899)

Yakima, WA
License Surrendered
October 9, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=36899>

OU, TING-WEI, M.D. (A 133010)

Lawrenceville, GA
Probationary License issued with 3 years probation and terms and conditions
October 27, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=133010>

PEREZ-MUNOZ, ANTONIO, M.D. (G 86746)

Palm Springs, CA
Revoked, stayed, placed on 3 years probation with terms and conditions
August 6, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=86746>

PERIC, JOHN MARIO, M.D. (A 79419)

Burbank, CA
Revoked, stayed, placed on 5 years probation with terms and conditions
August 8, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=79419>

POSER, JOHN SHEARER (A 26206)

Tioga, FL
License Surrendered
September 22, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=26206>

PRESSMAN, PETER (A 77300)

Jacksonville, FL
License Surrendered
August 21, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=77300>

REMIS, PAUL MICHAEL, M.D. (A 24123)

San Luis Obispo, CA
Revoked, stayed, placed on 5 years probation with terms and conditions
September 12, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=24123>

RINZLER, GARY SCOTT, M.D. (G 67994)

Sacramento, CA
Revoked, stayed, placed on 5 years probation with terms and conditions
September 19, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=67994>

RUMINSON, RONALD RAY (A 44627)

Dinuba, CA
License Surrendered
September 9, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=44627>

SABIT, ARIA OMAR (A 108433)

Southfield, MI
License Surrendered
August 25, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=108433>

SALZMAN, BARNETT S. (G 12176)

Fresno, CA
License Revoked
October 15, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=12176>

SANCHEZ, ALEJANDRO MACIAS, M.D. (A 30158)

West Covina, CA

Public Letter of Reprimand issued pursuant to California
Business and Professions Code Section 2233

August 20, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=30158>

SANDHU, NARINDER, M.D. (A 56411)

Sacramento, CA

Revoked, stayed, placed on 5 years probation with terms
and conditions

September 19, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=56411>

SANDHU, SURINDER, M.D. (A 38536)

Fremont, CA

Revoked, stayed, placed on 5 years probation with terms
and conditions

September 19, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=38536>

SCHWIED, ELLIS MICHAEL, M.D. (A 39245)

Laguna Niguel, CA

Revoked, stayed, placed on 7 years probation with terms
and conditions, including 15 days actual suspension

September 19, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=39245>

SHAGRUN, LAMIA MOHAMED (A 74933)

San Francisco, CA

License Revoked

October 31, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=74933>

SHEIKH, RAFIQ AHMED, M.D. (A 54469)

Sacramento, CA

Public Reprimand with conditions

September 25, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=54469>

SMITH, RONALD D. (C 21528)

Fresno, CA

License Surrendered

September 23, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=21528>

SOLIMAN, MIKHAYL SAMY (C 54595)

Wayne, MI

License Revoked

October 10, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=54595>

STAAHL, THEODORE EDMUND, M.D. (G 37452)

Modesto, CA

Public Reprimand with conditions

October 10, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=37452>

STIMMLER, WILLIAM HAROLD (G 50833)

Whittier, CA

License Surrendered

August 13, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=50833>

STOCK, JOSEPH VINCENT, M.D. (A 91231)

Chicago, IL

Public Reprimand

September 19, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=91231>

SULEIMAN, MUSTAFA ISMAIL (A 48051)

Seal Beach, CA

License Revoked

September 12, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=48051>

SUTHERLAND, ELIZABETH ANNE, M.D. (G 40463)

Danville, CA

Probationary License issued with 5 years probation and
terms and conditions

August 7, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=40463>

SYPHUS, MERRILL T. (A 19993)

Altadena, CA

License Surrendered

October 10, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=19993>

TANK, DAYALAL DEVRAJ, M.D. (A 53624)

Walnut, CA

Revoked, stayed, placed on 5 years probation with terms
and conditions, including a condition precedent to the
practice of medicine

August 8, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=53624>

TESSIER, DERON JEAN, M.D. (A 99173)

Fontana, CA
Revoked, stayed, placed on 5 years probation with terms
and conditions
October 31, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=99173>

TORREY, ROBERT RUSSELL, M.D. (G 34160)

Redlands, CA
Public Reprimand with conditions
September 12, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=34160>

TRAN, DZU, M.D. (G 83361)

Westminster, CA
Public Letter of Reprimand issued pursuant to California
Business and Professions Code Section 2233
August 8, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=83361>

TRAUBA, THOMAS KENT (G 66615)

Salt Lake City, UT
License Revoked
October 10, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=66615>

VENNING, DALE RANDALL (G 35217)

Anaheim, CA
License Revoked
October 8, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=35217>

WALTERS, DANIEL GLYWN (G 39049)

Palm Springs, CA
License Revoked
October 9, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=39049>

WATSON, LOUIS HERMAN (G 32156)

Claremont, CA
License Revoked
September 12, 2014
Judicial Review Pending

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=32156>

WEBBER, JAMES TERRY (G 29186)

San Diego, CA
License Surrendered
October 15, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=29186>

WILLIAMS, CALVIN E. (G 66782)

New Orleans, LA
License Revoked
August 15, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=66782>

WILLIAMS, DALLAS DE VERE (G 20740)

Milliken, CO
License Revoked
August 13, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=20740>

WILLIAMS, JOHN GAVIN (C 38680)

Moreno Valley, CA
License Surrendered
September 29, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=38680>

WILLIAMS, TROY CHRISTOPHER, M.D. (A 103922)

Westlake Village, CA
Public Reprimand with conditions
August 18, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=103922>

WOODWARD, ARTIS, M.D. (A 40488)

Garden Grove, CA
Revoked, stayed, placed on 5 years probation with terms
and conditions
September 12, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=40488>

YOUNG, TIMOTHY LEE, M.D. (A 41608)

Clearlake, CA
Public Reprimand with conditions
September 19, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=41608>

ZARATE, ENRIQUE, M.D. (C 41534)

Tracy, CA
Revoked, stayed, placed on 5 years probation with terms
and conditions
September 25, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=41534>

ZHAO, XUEREN, M.D. (A 105851)

Riverside, CA
Revoked, stayed, placed on 5 years probation with terms
and conditions
September 26, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=105851>

Physician Assistants

HAMPTON, JESSICA LYNN, P.A. (PA 51886)

Modesto, CA

Probationary License issued with 2 years probation and terms and conditions

September 5, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=51886>

LIM, VINCENT PHUOC, P.A. (PA 51836)

San Gabriel, CA

Probationary License issued with 2 years probation and terms and conditions

August 14, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=51836>

LOPEZ, GLORIA (PA 14725)

La Puente, CA

License Revoked

September 5, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=14725>

MARTINEZ, ANITA (PA 12172)

Westminster, CO

License Surrendered

October 23, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=12172>

SAX, LINDA J., P.A. (PA 13785)

Franklin, NC

Public Reprimand with cost recovery in the amount of \$3,000

September 5, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=13785>

WARREN, ROBERT COLIN, P.A. (PA 11746)

Novato, CA

Revoked, stayed, placed on 7 years probation with terms and conditions

October 24, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=11746>

Podiatrists

NGUYEN, TAN DUY (E 3377)

San Leandro, CA

License Surrendered

October 3, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=E&licenseNumber=3377>

Licensed Midwives

DEAN, MELISSA, LM (LM 304)

Morgan Hill, CA

Public Reprimand with cost recovery in the amount of \$3,000

August 29, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=LM&licenseNumber=304>

Registered Spectacle Lens Dispensers

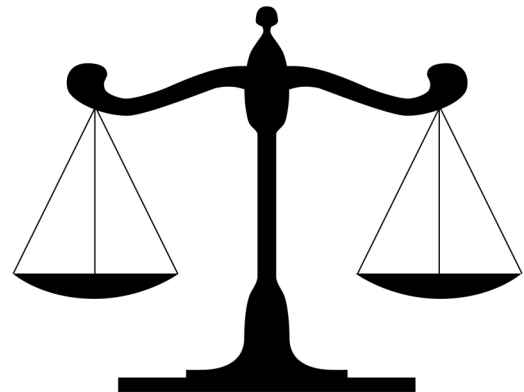
MATRANGA, DIANA DEE (SL 5396)

South Lake Tahoe, CA

Registration Revoked

October 15, 2014

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=SL&licenseNumber=5396>



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Medical Board of California
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http://www.mbc.ca.gov/Licensees/Address_of_Record.aspx

Board Meetings — 2015

May 7 - 8, 2015: Los Angeles Area

July 30 - 31, 2015: San Francisco Area

October 29 - 30, 2015: San Diego Area

All meetings are open to the public. To the extent possible, meetings will be webcast and offered via teleconference. Visit our website at <http://www.mbc.ca.gov>



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Medical Board of California

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