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.
Medical Board of California Newsletter

Winter 2016

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Medical consultants needed

Especially from 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 Investigation 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 Investigation Unit Commander John Hirai at (562) 402-4668.

Best wishes to readers for a healthy and exciting 2016.

By Susan Wolbarst

Editor's Spotlight

As is traditional, this Winter issue of the Newsletter contains summaries of 45 newly-passed California laws of special interest to Medical Board licensees.

Some of these laws could have profound impacts on both the public and the medical community. One in that category is the End of Life Option Act. An overview of the legislation is included in this issue on page 12.

Another significant piece of legislation is SB 643, which spells out physician conduct relative to recommending marijuana for medical purposes. The bill creates specific penalties for violations and requires the Board to consult with the California Marijuana Research Program on developing and adopting medical guidelines for the appropriate administration and use of cannabis. The bill’s author, Senator Mike McGuire (D-Healdsburg), is profiled on page 4.

Senator McGuire’s bill is one of three newly-passed bills that created the new Marijuana Regulation and Safety Act. Beginning on or about January 1, 2018, a statewide medical marijuana regulatory structure will take effect. A Bureau of Medical Marijuana Regulation under the Department of Consumer Affairs will issue licenses for distributors, dispensaries, and transporters.

Interested in becoming an expert reviewer?

If you are actively practicing in California and interested in becoming an expert reviewer (expert), applications are accepted continuously. The Medical Board of California established its Expert Reviewer Program in July 1994 as an impartial and professional means 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 examinations, medical and psychiatric evaluations.

The Board is currently looking specifically for experts in the following specialties: addiction medicine with added certification in family medicine or internal medicine or psychiatry, dermatology, family medicine, neurological surgery, neurology, ob/gyn, pathology, pain medicine, plastic surgery, psychiatry, surgery, and urology, as well as midwife reviewers.

Actively practicing physicians from all other specialties not listed above are also welcome to apply and participate in the review process. Physicians must be board certified, have been practicing their specialty for a minimum of three years after board certification, have no current complaints, no prior discipline, and must be willing to testify in court. Midwives must have an active midwifery practice for the past two years, have no current complaints, no prior discipline, and must be willing to testify in court.

For more information regarding compensation and how to apply, please visit: http://www.mbc.ca.gov/Enforcement/Expert_Reviewer/ or contact the Board’s expert program at: MBCMedicalExpertProgram@mbc.ca.gov.
President’s Message

Our Winter Newsletter contains all the 2015 legislation that is pertinent to the Medical Board of California and its stakeholders and was signed into law by Governor Brown. There are a couple of new laws I would like to specifically point out.

Senate Bill 396 (Hill, Chapter 287) requires physicians and surgeons working in accredited outpatient settings to be peer reviewed every two years. It also allows accredited outpatient setting facility inspections, performed by an Accreditation Agency (AA), to be unannounced (after the initial inspection). However, the AA must provide at least a 60-day window to the outpatient setting. In addition, an accredited outpatient setting and a facility certified to participate in the federal Medicare Program as an ambulatory surgical center (ASC) will be allowed to determine if a report pursuant to Business and Professions Code section 805 has been reported to the Board prior to credentialing, granting or renewing staff privileges for providers at that facility. As a member of the Board’s Outpatient Surgery Setting Task Force, I am extremely pleased to see this law go into effect as it promotes the Board’s mission of consumer protection.

In addition, the Board sponsored Senate Bill 408 (Morrell, Chapter 280), which ensures that midwife assistants meet minimum training requirements and sets forth the types of duties they can perform, which are technical support services only. It also allows the Board to adopt regulations identifying additional midwifery technical support services.

In 2016 the Board plans to continue to expand its goal to educate and protect consumers. We want every Californian to know who and what the Medical Board of California is and does, and know what information is available to help them make informed decisions about their health care. We will be working on achieving a more “global presence”.

Finally, I would like to briefly address the recent tragedy in San Bernardino. As you know, 14 people lost their lives and another 21 were injured, many critically. Six victims were taken to the trauma center at Arrowhead Regional Medical Center in Colton, California where our Board Vice President, Dr. Dev GnanaDev, is the Chief of Surgery. Dr. GnanaDev and his staff were able to save all six of the individuals brought to their trauma center and CNN highlighted their excellent work: http://www.cnn.com/videos/us/2015/12/04/inside-er-san-bernardino-shooting-dnt-gupta-ac.cnn.

I am looking forward to the Medical Board’s continued improvement in serving our licensees and consumers throughout 2016.

Kristina Daniel Lawson Welcomed As New Medical Board Member

Kristina Daniel Lawson, of Walnut Creek, has been appointed to the Medical Board of California. Lawson is a partner at Manatt, Phelps and Phillips, LLP in San Francisco, where she practices land use and environmental law. Lawson was a member of the Walnut Creek City Council from 2010 to 2014, and served as Walnut Creek’s Mayor in 2014. Lawson earned a Juris Doctor degree from the Santa Clara University School of Law and a B.A. from the University of Arizona.
Mike McGuire was elected to the California State Senate in 2014, representing one of the largest and most diverse districts in California – a largely rural area spanning the North Coast from the Golden Gate Bridge to the Oregon border.

Senator McGuire has prioritized the needs of rural residents, including jobs and accessing quality health care and mental health services, while expanding resources for public schools and career training programs. He worked hard with fellow legislators on both sides of the aisle to ensure communities have the resources they need to combat the state’s historic drought, and to maintain a balanced budget that prioritizes spending on education, Medi-Cal increases, and fixing crumbling infrastructure.

The youngest member of the State Senate, Senator McGuire serves as Chair of the Human Services Committee. Under his leadership, the Human Services Committee has focused on the needs of the state’s disadvantaged youth, as well as the most medically fragile adults in developmental and regional centers. He also chairs the Joint Committee on Fisheries and Aquaculture and he’s Vice Chair of the Democratic Caucus.

Representing the four counties where the majority of the nation’s marijuana is grown, Senator McGuire was successful in passing the most comprehensive set of medical marijuana laws in the country. His bill, SB 643, is one of three pieces of medical marijuana legislation approved in 2015 that will change the face of the multi-billion dollar industry that has gone largely unregulated for almost 20 years.

“From seed to sale, medical marijuana will now be regulated across the state of California,” Senator Mike McGuire said. “This legislation will help make our communities safer, we’ll have resources to protect our environment and Californians will benefit from enhanced patient protections and strict health and safety standards.”

The three historic medical marijuana bills cover every aspect of the commercial medical marijuana industry, which will be regulated and subject to licensure – both by the state and local authorities. The bills create a Bureau of Medical Marijuana Regulation under the Department of Consumer Affairs and communities will now be able to tax medical cannabis. Key to SB 643 are provisions that will track and trace all marijuana products, and a provision that will make medical marijuana an agricultural product in California. Cultivators will have to abide by the same rules and regulations regarding water use, water discharge, pesticide and insecticide use as all other agriculture producers. In consultation with physicians, SB 643 includes oversight provisions for medical professionals and sweeping health and safety standards that will protect patients.

In his first year in office, Senator McGuire was successful in moving forward other legislation and initiatives that benefit schools and students, including securing $400 million for Career Technical Education, increases for school transportation funding and legislation that will help advance desperately needed infrastructure projects.

Senator McGuire and his wife, Erika, an assistant principal at their local middle school, live in Healdsburg.
You Asked For It
Questions received from the Web
By Chris Valine, Public Information Analyst

Q. I am a licensed California physician and I do not prescribe controlled substances to my patients. Am I required to register for CURES?

A. According to the law, you are required to register for CURES if you are a California licensed physician and have a valid DEA registration that permits you to prescribe or administer controlled substances in Schedules II - IV regardless of whether you actually do prescribe or administer controlled substances.

Q. I just heard the deadline for registering for the CURES program has been extended to July 1, 2016. What is the penalty if I do not register?

A. There is no penalty discussed in the bill. If the issue of non-compliance is brought to the Board’s attention, the non-compliance may be investigated and appropriate action taken. The Board’s goal is to ensure physicians are in compliance with the requirement to register.

Q. I have a patient that has requested a copy of her medical records; however, she owes me a substantial amount of money. Can I refuse to provide her with a copy of her records until she pays her bill?

A. No. California Health and Safety Code 123110(j) states you may not withhold patient records because of an unpaid bill.

Q. I was disciplined by the Medical Board in 2001 and completed probation in 2003. I do not want my disciplinary action published on the website forever. I have not received any further discipline or broken any laws since my license was placed on probation over 10 years ago. Is it possible to have this disciplinary action removed from your website?

A. Effective January 1, 2015, Assembly Bill 1886 (Eggman, Chapter 285) amended Business and Professions (B&P) Code section 2027. The law states that the Board shall post on its Internet website certain historical information in its possession, custody, or control regarding all current and former licensees. B&P Code section 2027(b) states revocations, suspensions or probations ordered by the Board or the board of another jurisdiction shall remain on the Board's website indefinitely. Therefore, the information posted on the Board's website regarding a prior probation order is in accordance with the law and cannot be removed.

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)

AB 1073 (Ting, Chapter 784)
Pharmacy: Prescription Drug Labels
This bill requires dispensers, upon request of a patient or patient’s representative, to provide translated directions, provided by the Board of Pharmacy, for use on prescription containers. This bill specifies that a dispenser is responsible for the accuracy of the English-language directions provided to the patient.

SB 337 (Pavley, Chapter 536)
Physician Assistants
This bill establishes alternative means for a supervising physician to ensure adequate supervision of a physician assistant for routine care and the administration, provision, or issuance of a Schedule II drug.

SB 408 (Morrell, Chapter 280)
Midwife Assistants
This Board-sponsored bill ensures that midwife assistants meet minimum training requirements and sets forth the duties that a midwife assistant could perform, which are technical support services only. This bill allows the Board to adopt regulations and standards for any additional midwife technical support services.

SB 671 (Hill, Chapter 545)
Pharmacy: Biological Product
This bill authorizes a pharmacist to substitute an alternative biological product when filling a prescription for a prescribed biological product if the alternative biological product is designated as interchangeable with the reference product, among other conditions, and communication is provided to the patient and physician that a substitution was made. It also requires the Board of Pharmacy to maintain a link on its website to the list of biological products recognized as interchangeable by the Federal Food and Drug Administration.

Health Care Coverage

AB 339 (Gordon, Chapter 619)
Health Care Coverage: Outpatient Prescription Drugs
This bill requires health plans and health insurers that provide coverage for outpatient prescription drugs to have formularies that do not discourage the enrollment of individuals with health conditions, and requires combination antiretrovirals drug treatment coverage of a single-tablet that is as effective as a multi-tablet regimen for treatment of human immunodeficiency virus infection and acquired immune deficiency syndrome (HIV/AIDS), as specified. This bill places in state law, federal requirements related to pharmacy and therapeutics committees, access to in-network retail pharmacies, standardized formulary requirements, formulary tier requirements similar to those required of health plans and insurers participating in Covered California, and copayment caps of $250 and $500 for a supply of up to 30 days for an individual prescription, as specified.

AB 374 (Nazarian, Chapter 621)
Health Care Coverage: Prescription Drugs
This bill creates a process for prescribers to request an override of a health plan or health insurer’s step therapy requirement.

AB 1124 (Perea, Chapter 525)
Workers’ Compensation: Prescription Medication Formulary
This bill requires the Administrative Director of the Division of Workers’ Compensation to adopt a prescription drug formulary for workers’ compensation benefits by July 1, 2017.

SB 43 (Hernandez, Chapter 648)
Health Care Coverage: Essential Health Benefits
This bill updates California’s essential health benefits law to make it consistent with new federal requirements promulgated under the Affordable Care Act, which include adoption of the federally required definition of habilitative services and devices.

SB 137 (Hernandez, Chapter 649)
Health Care Coverage: Provider Directories
This bill requires a health plan or insurer to make available a provider directory or directories that provide information on contracting providers, including those that accept new patients. This bill prohibits a provider directory from including information on a provider that does not have a current contract with the plan or insurer.

Legislative Update (continued on page 7)
**Legislative Update** (continued from page 6)

**SB 282 (Hernandez, Chapter 654)**
**Prescription Drugs**
This bill permits the use of alternative methods of electronic prior authorization of prescription drugs, other than the required standardized form, and exempts physician groups with delegated financial risk from the standardized prior authorization process.

**Medical Education**

**SJR 7 (Pan, Chapter 90)**
**Medical Residency Programs**
This resolution urges the Congress and the President of the United States to renew funding for the Health Resources and Services Administration’s Teaching Health Center and Primary Care Residency Expansion Graduate Medical Education Programs, and to lift the freeze on residency positions funded by Medicare to expand physician supply and improve access to care.

**Medical Practice and Ethics**

**AB 258 (Levine, Chapter 51)**
**Organ Transplants: Medical Marijuana: Qualified Patients**
This bill prohibits the eligibility determination of a patient on the organ transplant waiting list from being based solely on his or her status as a qualified patient for medical marijuana, as specified, or based solely on a positive test for the use of medical marijuana by a qualified patient.

**AB 389 (Chau, Chapter 327)**
**Hospitals: Language Assistance Services**
This bill requires general acute care hospitals to post their language assistance policies on their websites in English and up to five of the other languages most commonly spoken in the hospital’s service area. Requires the California Department of Public Health to post each hospital’s language assistance policy on its website.

**AB 444 (Gipson, Chapter 198)**
**Health Facilities: Epidural and Enteral Feeding Connectors**
This bill delays, until July 1, 2016, the deadline prohibiting general acute care, acute psychiatric, special hospitals, and skilled nursing facilities (SNFs) from using certain enteral connector devices. It also delays, until January 1, 2017, the deadline prohibiting general acute care, acute psychiatric, special hospitals, and SNFs from using certain epidural connector devices.

**AB 664 (Dodd, Chapter 367)**
**Medi-Cal: Universal Assessment Tool Report**
This bill requires, on or before January 1, 2017, the Department of Health Care Services, Department of Social Services, and the California Department of Aging to, in consultation with a stakeholder workgroup, evaluate and report to the Legislature on outcomes and lessons of the existing Medi-Cal universal assessment tool (UAT) pilot. This bill requires the UAT report to include findings from consumers assessed using the UAT and from consumers choosing to be assessed using previous assessment tools; data regarding the amount and type of services identified by the previous assessment tools as compared to the amount and types of services determined through the UAT; and data regarding home and community based services utilization and costs, and percentages of consumers experiencing hospitalization and skilled nursing facility stays.

**AB 775 (Chiu, Chapter 700)**
**Reproductive FACT Act**
This bill enacts the Reproductive Freedom, Accountability, Comprehensive Care, and Transparency Act and requires clinics and other facilities that provide family planning or pregnancy-related services to provide specified notices to clients.

**AB 848 (Stone, M., Chapter 744)**
**Alcoholism and Drug Abuse Treatment Facilities**
This bill authorizes alcoholism and drug treatment facilities to allow a licensed physician, or other health care practitioner, to provide incidental medical services to a resident of the facility and requires the Department of Health Care Services to conduct an evaluation of the program on or before July 1, 2018.
Legislative Update (continued from page 7)

AB 1129 (Burke, Chapter 377)
Emergency Medical Services: Data and Information System
This bill requires an emergency medical services provider, when collecting and submitting data to a local emergency medical services agency (LEMSA), to use an electronic health record system compliant with California Emergency Medical Services Information System and National Emergency Medical Services Information System standards, as specified, and includes those data elements that are required by the LEMSA.

AB 1337 (Linder, Chapter 528)
Medical Records: Electronic Delivery
This bill provides a standardized authorization form for medical records’ requests and requires a medical provider, as defined, to provide electronic copies of medical records, as specified.

AB 1423 (Stone, M., Chapter 381)
Prisoners: Medical Treatment
This bill creates a new process for appointing a person to make medical care decisions on behalf of a prison inmate who is not competent to make such decisions, as specified.

ABX2 15 (Eggman, Chapter 1)
End of Life
This bill establishes the End of Life Option Act (Act) in California, which will remain in effect until January 1, 2026. This Act gives a mentally competent, adult California resident who has a terminal disease the legal right to ask for and receive a prescription from his or her physician to hasten death, as long as required criteria are met. See article on page 12 for more information.

SB 299 (Monning, Chapter 271)
Medi-Cal: Provider Enrollment
This bill exempts health care providers submitting a Medi-Cal provider application package to the Department of Health Care Services (DHCS) Medi-Cal provider enrollment division from the current notarization requirements if the provider enrolls electronically. This bill conforms state law to federal regulation by requiring DHCS to designate a provider or applicant as a “high” categorical risk if DHCS lifted a temporary moratorium within the previous six months for the particular provider type submitting the application.

SB 453 (Pan, Chapter 260)
Prisons: Involuntary Medication
This bill provides that when the treating psychiatrist of a person who is incompetent to stand trial concludes that another psychiatrist should be designated to seek an order for involuntary medication, the facility director may make such a designation. This bill also requires the treating psychiatrist to brief the designated psychiatrist about the case and requires the designated prescribing psychiatrist to examine the person as to whom the involuntary medication order is sought.

SB 464 (Hernandez, Chapter 387)
Healing Arts: Self-Reporting Tools
This bill authorizes specified health care practitioners to use a self-screening tool that will identify patient risk factors for the use of self-administered hormonal contraceptives by a patient, and after an appropriate prior examination, prescribe, furnish, or dispense self-administered hormonal contraceptives to the patient.

Legislative Update (continued on page 9)
### SB 643 (McGuire, Chapter 719)
#### Medical Marijuana
This bill includes in the Medical Board’s priorities cases that allege a physician has recommended cannabis to patients for medical purposes without a good faith prior examination and medical reason therefor. This bill creates a new section in law related to recommending medical cannabis which states that a physician recommending cannabis to a patient for a medical purpose without an appropriate prior examination and a medical indication constitutes unprofessional conduct. This bill prohibits a physician from recommending cannabis to a patient unless that physician is the patient’s attending physician, as defined. This bill subjects physicians recommending cannabis to the definition of “financial interest” in existing law and does not allow a physician to accept, solicit, or offer any form of remuneration from or to a licensed dispensary, producer or processor of cannabis products in which the licensee or his or her immediate family has a financial interest. This bill does not allow a cannabis clinic or dispensary to directly or indirectly employ physicians to provide marijuana recommendations; a violation would constitute unprofessional conduct. This bill does not allow a person to distribute any form of advertising for physician recommendations for medical cannabis unless the advertisement contains a notice to consumers, as specified. This bill requires the Board to consult with the California Marijuana Research Program on developing and adopting medical guidelines for the appropriate administration and use of cannabis. This bill specifies that a violation of the new section of law regulating medical cannabis recommendations is a misdemeanor punishable by up to one year in a county jail and a fine of up to five thousand dollars or by civil penalties of up to five thousand dollars and shall constitute unprofessional conduct.

### SB 738 (Huff, Chapter 132)
#### Pupil Health: Epinephrine Auto-Injectors: Liability Limitation
This bill provides liability protection for physicians writing standing order prescriptions for epinephrine auto-injectors for school districts, county offices of education and charter schools.

### Prescription Drugs/Controlled Substances

#### AB 679 (Allen, T., Chapter 778)
#### Controlled Substances
This bill amends existing law that requires all health care practitioners who are authorized to prescribe, order, administer, furnish or dispense Schedule II, III or IV controlled substances and pharmacists to be registered with CURES by extending the deadline from January 1, 2016 to July 1, 2016.

#### ACR 26 (Levine, Chapter 16)
#### Prescription Drug Abuse Awareness Month
This resolution proclaims the month of March 2015 as Prescription Drug Abuse Awareness Month and encourages all citizens to actively participate in prevention programs and activities, and to safely store and dispose of their medications on a continual basis.

#### SB 238 (Mitchell, Chapter 534)
#### Foster Care: Psychotropic Medication
This bill requires certification and training programs for foster parents, child welfare social workers, group home administrators, public health nurses, dependency court judges and court appointed council to include training on psychotropic medication, trauma and behavioral health, as specified, for children receiving child welfare services. This bill requires the Judicial Council to amend and adopt rules of court and develop appropriate forms pertaining to the authorization of psychotropic medication for foster youth on or before July 1, 2016.

#### SB 319 (Beall, Chapter 535)
#### Child Welfare Services: Public Health Nursing
This bill expands the duties of the foster care public health nurse to include monitoring and oversight of the administration of psychotropic medication to foster children, as specified.

#### SB 484 (Beall, Chapter 540)
#### Juveniles
This bill requires the California Department of Social Services to establish a methodology for identifying group homes that have levels of psychotropic drug utilization warranting additional review, and to inspect identified facilities at least once a year, as specified.
Legislative Update (continued from page 9)

Public Health

ACR 29 (Frazier, Chapter 42)
Donate Life California Day: Driver’s License
This resolution makes findings and declarations regarding the importance of organ donation. This resolution proclaims April 20, 2015 as Department of Motor Vehicles (DMV)/Donate Life California Day and the month of April 2015 as DMV/Donate Life California Month in California. This resolution encourages all Californians to register with the Donate Life California Registry when applying for or renewing a driver’s license or identification card.

ACR 38 (Brown, Chapter 200)
California Task Force on Family Caregiving
This resolution establishes the California Task Force on Family Caregiving to meet and report to the Legislature findings by January 1, 2018, on challenges faced by family caregivers, opportunities to improve caregiver support, and to review the current network and the services and supports available to caregivers.

SB 277 (Pan, Chapter 35)
Public Health: Vaccinations
This bill deletes the personal belief exemption from the existing immunization requirements. This bill specifies that if the California Department of Public Health adds an immunization to the list in the future, that personal belief exemptions would be allowed for that additional immunization. This bill exempts a child in a home-based private school or a pupil who is enrolled in independent study from the immunization requirements. This bill allows a child who has submitted a personal belief exemption prior to January 1, 2016 to continue to attend school or daycare under the personal belief exemption until enrollment in the next grade span. This bill defines grade span as birth to preschool, kindergarten to grade 6 or grades 7 to 12. Lastly, this bill specifies that when issuing a medical exemption, a physician must consider the family medical history of the child.

SB 613 (Allen, D., Chapter 577)
State Department of Public Health: Dementia Guidelines: Workgroup
This bill requires the California Department of Public Health (CDPH) to convene a workgroup to update the 2008 Guidelines for Alzheimer’s Disease Management in California to address changes in the health care system and requires CDPH to submit a report of the updates and recommendations from the working group to the Legislature on or before March 1, 2017.

SB 792 (Mendoza, Chapter 807)
Day Care Facilities: Immunizations: Exemptions
This bill prohibits, commencing September 1, 2016, a person from being employed or volunteering at a day care center or a day care home if he or she has not been immunized against influenza, pertussis and measles.

SCR 4 (Pan, Chapter 3)
Physician Anesthesiologist Week
This bill designates the week of January 11 to January 17, 2015, as Physician Anesthesiologist Week.

SCR 13 (Jackson, Chapter 22)
American Heart Month and Wear Red Day in California
This resolution recognizes the month of February 2015 as American Heart Month in California and February 6, 2015 as Wear Red Day in California in order to raise awareness about the importance of the ongoing fight against heart disease and stroke.

State Administration Mandates

AB 1352 (Eggman, Chapter 646)
Deferred Entry of Judgment: Withdrawal of Plea
This bill requires the court to permit a defendant who was granted deferred entry of judgment (DEJ) on or after January 1, 1997, and who has performed satisfactorily during the period in which DEJ was granted and for whom the criminal charge or charges were dismissed, to withdraw his or her plea and enter a plea of not guilty.

SB 396 (Hill, Chapter 287)
Health Care: Outpatient Settings: Licensure and Enforcement
This bill requires peer review evaluations for physicians and surgeons working in accredited outpatient settings. This bill allows accredited outpatient setting facility inspections performed by Accreditation Agencies (AAs) be unannounced (after the initial inspection). For unannounced inspections, AAs must provide at least a 60-day window to the outpatient setting. The bill allows an accredited outpatient setting and a “Medicare certified ambulatory surgical center” (ASC) to access 805 reports from the Board when credentialing, granting or renewing staff privileges for providers at that facility.

Legislative Update (continued on page 11)
Educating Patients About Sharps Disposal

An estimated one million Californians inject medications, according to the California Product Stewardship Council (CPSC). This activity generates more than 389 million used sharps a year. Throwing these in the trash or recycling bin or flushing them down the toilet is illegal and poses health risks for sanitation workers and others who might suffer accidental needle sticks.

Preliminary results of a survey being conducted by CPSC in Alameda County suggest that physicians and other health care professionals may not be effectively educating patients on how to manage the disposal of used sharps. To date, of the 159 people who answered the survey question: “Does your physician, pharmacist, veterinarian, or medication/sharps manufacturer provide guidance about how to properly handle, store, and dispose of used sharps?” 44.6 percent said yes and 55.4 percent said no. When asked who provided guidance on sharps disposal, the 69 individuals who answered that question to date responded as follows: 60.8 percent said physician, 40.5 percent said pharmacist, 37.7 percent said medication or sharps manufacturer, and 18.8 percent said veterinarian.

Disposal methods vary around the state. In some areas, free mail-back programs available from local governments or drug manufacturers offer the most convenient legal disposal method. Some hospitals and doctor’s offices may collect their patients’ used sharps. More information about disposal options is available from http://www.calrecycle.ca.gov/homehazwaste/sharps.

State law requires used sharps to be transported to an approved disposal site in a puncture-proof sharps container. A table of California cities and counties offering free sharps containers to the public can be found at http://calpsc.org/mobius/cpsc-content/uploads/2015/01/CA_Cities_Counties_Offering_No_Cost_Sharps_Containers_4_9_2014.pdf.

Legislative Update (continued from page 10)

SB 800 (Sen. B&P Comm., Chapter 426)

Healing Arts
This bill clarifies that registration is required to practice as a polysomnographic technologist, technician, or trainee in California. This bill also makes other technical, clarifying changes to fix an incorrect code section reference in existing law, delete an outdated section of statute related to a pilot project that no longer exists, and clarify that a licensee cannot call him or herself “doctor”, “physician”, “Dr.” or “M.D.”, if his or her license to practice medicine has been suspended or revoked.

RDO Program Moving - Dennis Frankenstein and Jennifer Saucedo of the Medical Board’s Business Services Office load boxes in preparation for moving records pertaining to the Registered Dispensing Optician (RDO) Program. AB 684 (Alejo, Chapter 405) transfers the RDO Program from the Board to the California State Board of Optometry as well as making other changes to the Program.
Overview of the California End Of Life Option Act

By Nathan Fairman, M.D., M.P.H.
Psychiatry, Palliative Care and Psycho-Oncology
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On October 5, 2015, Governor Jerry Brown signed the End of Life Option Act into law, making California the fourth state in which mentally-competent, terminally-ill patients may request prescriptions from their physicians to hasten death.

The law will take effect 90 days after the special session on health care and financing ends. Already, there are efforts to engage the palliative care and bioethics communities in guiding implementation practices for the new law, to help support institutions in developing policies mindful of the complicated ethical issues that surround aid-in-dying. As well, clinicians are likely to encounter new educational needs – concerning aid-in-dying specifically but also palliative care more generally – as patients inquire about this new option for end-of-life care. To help prepare physicians to respond to patients’ inquiries, what follows is an overview of the practice and specific details about the new California law.

The California End of Life Option Act

What does the new California law do?
The law authorizes a California resident adult, who has been determined to be terminally-ill and mentally-competent, to make a request for a drug prescribed for the purpose of ending his or her life.

What safeguards are included in the law?
The Act includes several safeguards, which are aimed at restricting access to patients who are terminally-ill and mentally-competent:

- Two physician assessments are required. The “attending” and “consulting” physicians must each independently determine that the individual has a terminal disease with a prognosis of six months or less, and is able to provide informed consent. Elements of informed consent, including disclosure of relevant information, assessment of decisional capacity and assurance of voluntariness, are stipulated in the law.
- If either physician is aware of any “indications of a mental disorder,” a mental health specialist assessment must be arranged to determine that the individual “has the capacity to make medical decisions and is not suffering from impaired judgment due to a mental disorder.”
- The attending physician must provide counseling about the importance of the following: “having another person present when he or she ingests the aid-in-dying drug, not ingesting the aid-in-dying drug in a public place, notifying the next-of-kin of his or her request for the aid-in-dying drug, participating in a hospice program and maintaining the aid-in-dying drug in a safe and secure location.”
- The attending physician must offer the individual the opportunity to withdraw his or her request for the aid-in-dying drug at any time.
- The individual must make two oral requests, separated by a minimum of fifteen days, and one written request for the aid-in-dying drug.
- The written request must be observed by two adult witnesses, who attest that the patient is “of sound mind and not under duress, fraud or undue influence.”
- The patient must make a “final attestation,” forty-eight hours before he or she intends to ingest the medication.
- Only the person diagnosed with the terminal disease may request a prescription for the aid-in-dying drug (i.e., surrogate requests are not permitted).
- The individual must be able to self-administer the medication.

What are the documentation and reporting requirements?
The law explicitly stipulates a number of requirements for documentation in the patient’s medical record, largely
Dr. Jennifer Elizondo, recipient of the Steven M. Thompson Physician Corps Loan Repayment Award, was born and raised in what she describes as, “one of the most crime-infested housing projects of East Los Angeles.” One of seven children of “completely dedicated” parents, her passion for learning music, sports and martial arts – as well as excelling in academics – led to her acceptance at Massachusetts Institute of Technology (MIT), where she majored in biology and minored in psychology. Her engagement in multiple research projects at MIT prompted the realization that medicine suited her career goals. She attended Wake Forest University School of Medicine in Winston-Salem, NC and completed her residency at Michigan State University/Sparrow Hospital in Lansing, MI.

“Currently, I work in the underserved communities of Los Angeles with the Comprehensive Community Health Centers. I hope to make great strides in education and preventive medicine. I believe as their family doctor, I can empower my patients to strive for higher levels of intellect and well-being,” Dr. Elizondo said.

“Thanks to the Steven M. Thompson Loan Repayment Program, I am able to work with the patient population that requires the most help, care and sensitivity. I am grateful and honored to serve those who are most likely to be ignored and neglected,” she added.

At least once a year, Dr. Elizondo also participates in a medical mission in a developing country “to bring health care to those who have never seen a physician.” She recently returned from 10 days in a remote village in Romania, where she found medical problems (such as uncontrolled diabetes, hypertension, depression, chronic pain, gastroesophageal reflux disease and alcoholism) similar to those she sees in the underserved communities of Los Angeles, except for “severely diseased dentition,” which she observed in residents of all ages. “From the child of two to the elderly, that smile was the same. It caused me pain and it warmed my heart,” Dr. Elizondo said.

End of Life Option Act (continued from page 12)

corresponding to the safeguards above. In addition, the law creates two reporting obligations:

1. Within 30 days of writing a prescription for an aid-in-dying drug, the attending physician must submit to the California Department of Public Health (CDPH) a copy of the qualifying patient’s written request, an attending physician checklist and compliance form, and a consulting physician’s compliance form.

2. Within 30 days following the individual’s death, the attending physician must submit a follow-up form to CDPH. All forms will be posted on the CDPH and Medical Board websites.

Is participation compulsory?

No. Participation in the law is voluntary for all parties. Individual providers – and institutions as well – may make personal, conscience-based decisions about whether or not to participate.
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. Physicians 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 a 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 a 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 a specific time frame: http://www.mbc.ca.gov/Forms/Reporting/enf-801.pdf (Business and Professions Code §801.01)

Reporting requirements 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 the adverse event is detected. http://www.mbc.ca.gov/Consumers/Outpatient_Surgery/outpatient_adverse_event_form.pdf (Business and Professions Code §2216.3)


Mandatory Reporting (continued on page 15)
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:
Reportable to the 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&sectionNum=11160
(Penal Code §11160)
Reportable to local law enforcement.

Child abuse:
http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=PEN&sectionNum=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&sectionNum=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&sectionNum=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&sectionNum=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&sectionNum=105200
(Health and Safety Code §105200)
Physicians must report pesticide illnesses to the local health officer by telephone within 24 hours.
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 to 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 Professionals 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&sectionNum=109277
(Health and Safety Code §109277)
Importance of Discussing Potential Risks of Pain Medication on Vehicle Operation

By Brittan Durham, M.D.
Health Quality Investigation Unit, Tustin Office

The Medical Board of California (Board) remains vigilant in its mission to protect the public and works with many government entities to identify adverse events, and preventable morbidity and mortality. The Board has partnered with the U.S. Drug Enforcement Administration (DEA) in investigating deaths associated with controlled substances.

The National Transportation Safety Board (NTSB), the federal agency charged with investigating civil aviation accidents in the United States as well as significant accidents on railroads, highways and waterways, is now voicing concerns regarding the use of controlled substances and the potential for impairment in driving, aviation, watercraft operations and accidents associated with working with heavy machinery.

The NTSB has recommended that state medical boards develop guidelines for prescribing controlled substances which include recommendations for health care providers to discuss with patients the effects their medical condition and medication use may have on their ability to safely operate motor vehicles, aircraft, boats, and any ancillary machinery.

The Board adopted the Guidelines for Prescribing Controlled Substances for Pain (Guidelines) with the intent of helping physicians improve patient care outcomes and prevent morbidity and mortality associated with the use and misuse of controlled substances. The Guidelines include an informed consent and treatment agreement for those patients who are taking controlled substances on a medium- and long-term basis. The patient consent and a pain management agreement can be combined into one document for convenience.

When considering long-term use of opioids, physicians should discuss the risks and benefits of the treatment plan with the patient and document this process in the medical records. The risks of medication should be considered in the context of the patient’s potential impairment with respect to activities such as driving, flying and working with machinery.

Risks as defined by the Guidelines include:

- Potential side effects (both short- and long-term) of the medication, such as nausea, opioid-induced constipation and cognitive impairment.
- The likelihood that some medications will cause tolerance and physical dependence to develop.
- The risk of drug interactions and over-sedation.
- The risk of respiratory depression.
- The risk of impaired motor skills (affecting driving and other tasks).
- The risk of opioid misuse, dependence, addiction and overdose.
- The limited evidence as to the benefit of long-term opioid therapy.

The treatment agreement should outline joint prescriber and patient responsibilities so there is a documented understanding that the patient agrees to use medications safely while performing tasks that might be compromised by impaired motor skills and cognitive function. It should highlight the importance of documented routine discussions regarding a patient’s medical condition and the drugs he or she takes with respect to his or her ability to safely operate any transportation vehicle with the goal of preventing accidents and saving lives.
Administrative Actions:
August 1, 2015 – October 31, 2015

Physicians and Surgeons

ABBASSI, ALEX (C 37895)
Tarzana, CA
License Surrendered
August 31, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=
C&licenseNumber=37895

ABRAHAMS, PEZ (A 71500)
Winnetka, CA
License Surrendered
August 4, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=
A&licenseNumber=71500

AKMAKJIAN, JACK H., M.D. (G 62470)
Riverside, CA
Revoked, stayed, placed on 2 years' probation with terms and
conditions
October 16, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=
G&licenseNumber=62470

ANDERSON, DANIEL DEAN, M.D. (G 64471)
San Diego, CA
Revoked, stayed, placed on 7 years' probation with terms and
conditions
September 4, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=
G&licenseNumber=64471

ARATANI, ASHLEY KAZUKO, M.D. (A 138414)
Palo Alto, CA
Probationary License issued with 3 years' probation and terms
and conditions
September 24, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=
A&licenseNumber=138414

AZEVEDO, ALAN JOHN, M.D. (G 32695)
Chico, CA
Revoked, stayed, placed on 7 years' probation with terms and
conditions
September 18, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=
G&licenseNumber=32695

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.
BANG, DENNIS J., M.D. (A 60220)
Los Angeles, CA
Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233
October 23, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=60220

BARTOLINI, SUSAN, M.D. (A 98927)
Santa Maria, CA
Revoked, stayed, placed on 5 years' probation with terms and conditions
August 21, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=98927

BECK, JOHN C. (C 23621)
Lancaster, CA
License Surrendered
September 8, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=23621

BERARD, WILLIAM MARK, M.D. (A 65401)
Oxnard, CA
Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233
August 28, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=65401

BHAKTA, CHITRA ANJANI, M.D. (A 63631)
Irvine, CA
Public Reprimand with terms and conditions
October 29, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=63631

BIVENS, JOSEPH K., M.D. (G 60000)
Garden Grove, CA
Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233
September 22, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=60000

BREADON, JANNE NOEL, M.D. (A 138867)
Santa Rosa, CA
Probationary License issued with 3 years' probation and terms and conditions
October 13, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=138867

BUTEL, AIMMEE LORINE (A 87162)
Phoenix, AZ
License Revoked
August 20, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=87162

CANGA, CYNTHIA ROSE C., M.D. (A 72274)
Bountiful, UT
Revoked, stayed, placed on 5 years' probation with terms and conditions
August 31, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=72274

CAREY, JOSEPH NICHOLAS, M.D. (A 87082)
Los Angeles, CA
Revoked, stayed, placed on 5 years' probation with terms and conditions
September 16, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=87082

CHAN, JOSEPH LING-HANG (G 50691)
Oakland, CA
License Surrendered
September 11, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=50691

CHEN, CHUNG-LIEN, M.D. (A 39685)
Whittier, CA
Public Reprimand with terms and conditions
October 23, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=39685

Moving? Remember: a change of address of record must be reported to the Medical Board of California within 30 days at http://www.mbc.ca.gov/Licensees/Address_of_Record.aspx.
CHRISTENSEN, DAVID GED, M.D. (G 81578)
San Luis Obispo, CA
Public Reprimand with terms and conditions
August 14, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licens
eType=G&licenseNumber=81578

COHEN, LISA MICHELE, M.D. (G 88258)
Lexington, MA
Public Letter of Reprimand issued pursuant to Business
and Professions Code section 2233
September 11, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licens
eType=G&licenseNumber=88258

CRONIN, LAWRENCE ROBERT (G 54386)
Tucson, AZ
License Surrendered
August 28, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licens
eType=G&licenseNumber=54386

DANG, SATINDER KAUR, M.D. (A 31227)
Fountain Valley, CA
Revoked, stayed, placed on 7 years' probation with terms
and conditions including a condition precedent to the
practice of medicine
August 28, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licens
eType=A&licenseNumber=31227

DE GUZMAN, MAGNOLIA KABIGTING, M.D. (A 98689)
Victorville, CA
Revoked, stayed, placed on 5 years' probation with terms
and conditions
September 16, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licens
eType=A&licenseNumber=98689

DEAN, RANDY MITCHELL (G 86250)
Coral Springs, FL
License Surrendered
August 14, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licens
eType=G&licenseNumber=86250

DENNIS, NILOUFER S., M.D. (A 101524)
San Diego, CA
Revoked, stayed, placed on 7 years' probation with terms
and conditions
October 28, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licens
eType=A&licenseNumber=101524

DRISKILL, CHRISTOPER SHAY (A 75590)
Hobbs, NM
License Surrendered
August 28, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licens
eType=A&licenseNumber=75590

FAZILAT, BAHAREH, M.D. (A 90071)
San Fernando, CA
Public Letter of Reprimand issued pursuant to Business
and Professions Code section 2233
August 6, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licens
eType=A&licenseNumber=90071

FLETCHER, JAMES ROBERT (G 83420)
Shirley, MA
License Revoked
August 21, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licens
eType=G&licenseNumber=83420

GATUS, LEANDRO GULAPA, M.D. (A 45231)
Tarzana, CA
Revoked, stayed, placed on 5 years' probation with terms
and conditions, including a condition precedent to the
practice of medicine
October 29, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licens
eType=A&licenseNumber=45231

GERBER, BRET ROBERT, M.D. (G 79213)
San Diego, CA
Revoked, stayed, placed on 2 years' probation with terms
and conditions
August 27, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licens
eType=G&licenseNumber=79213
GROSSLIGHT, KENNETH RUSSELL, M.D. (G 89451)  
Blythewood, SC  
Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233  
October 29, 2015  
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=89451

GUPTA, MADHUSUDHAN TALTIKONDA (A 38511)  
Palm Springs, CA  
License Surrendered  
September 29, 2015  
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=38511

HABTEZGHI, HAGOS (C 41500)  
Whittier, CA  
License Surrendered  
September 21, 2015  
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=41500

HESS, JASON R., M.D. (A 104343)  
San Diego, CA  
Revoked, stayed, placed on 5 years' probation with terms and conditions  
August 27, 2015  
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=104343

HIRSCH, JASON GABRIEL, M.D. (A 114749)  
Los Angeles, CA  
Revoked, stayed, placed on 5 years' probation with terms and conditions  
September 18, 2015  
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=114749

HLAVA, NICOLE BETH, M.D. (A 87960)  
Palo Alto, CA  
Revoked, stayed, placed on 5 years' probation with terms and conditions  
August 27, 2015  
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=87960

HOLDEN, PAUL KENNETH (A 95064)  
Scottsdale, AZ  
License Surrendered  
August 7, 2015  
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=95064

HSIEH, KEVIN EUGENE, M.D. (C 137973)  
Atlanta, GA  
Probationary License issued with 3 years' probation and terms and conditions  
August 28, 2015  
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=137973

IANACONE, DAVID CHRISTOPHER (G 75636)  
Vero Beach, FL  
License Surrendered  
August 31, 2015  
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=75636

IMBERNINO, ROBERT P. (G 9206)  
Irvine, CA  
License Revoked  
September 11, 2015  
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=9206

JAIN, SUPRABHA N., M.D. (A 67699)  
Walnut Creek, CA  
Revoked, stayed, probation extended to April 7, 2018 with the addition of the time during which Respondent's present cease practice order, which does not apply to the reduction of Respondent's probationary time period, was in effect, with terms and conditions  
September 17, 2015  
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=67699

JANDA, JOHN P. S., M.D. (A 37510)  
Fresno, CA  
Revoked, stayed, placed on 3 years' probation with terms and conditions  
October 16, 2015  
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=37510
JUAN, DAVID (G 78505)
Sunnyvale, CA
License Surrendered
September 9, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=G&licenseNumber=78505

KAUFMAN, BENJAMIN (A 20912)
Sacramento, CA
License Surrendered
October 7, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=A&licenseNumber=20912

KELLER, ROBERT P. K., M.D. (G 29481)
Monterey, CA
Public Reprimand with terms and conditions
August 7, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=G&licenseNumber=29481

KELLY, BERNADETTE ANN, M.D. (A 55070)
Folsom, CA
Public Reprimand with terms and conditions
October 16, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=A&licenseNumber=55070

KELLY, ELEANOR MARIE, M.D. (A 64544)
Irvine, CA
Revoked, stayed, placed on 5 years' probation with terms and conditions
October 21, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=A&licenseNumber=64544

KERR, DOUGLAS PAUL, M.D. (G 69670)
Emeryville, CA
Revoked, stayed, placed on 5 years' probation with terms and conditions
August 7, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=G&licenseNumber=69670

KHAMISHON, ILYA, M.D. (A 54344)
Folsom, CA
Revoked, stayed, placed on 5 years' probation with terms and conditions
September 10, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=A&licenseNumber=54344

KLEIN, ARNOLD WILLIAM, M.D. (A 24719)
Beverly Hills, CA
Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233
September 28, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=A&licenseNumber=24719

KOMAR, KARL JOSEPH (G 88998)
Watertown, NY
License Surrendered
October 9, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=G&licenseNumber=88998

KRAMER, DAVID RANDALL (G 83509)
Saint George, UT
License Revoked
September 18, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=G&licenseNumber=83509

KUO, SU-CHIAO, M.D. (A 42078)
Medina, OH
Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233
August 10, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=A&licenseNumber=42078

LEDESMA, GLENN N. (G 44761)
Beverly Hills, CA
License Revoked
August 31, 2015
Judicial review pending
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=G&licenseNumber=44761

LEHR, BENJAMIN (C 25019)
El Centro, CA
License Surrendered
October 28, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=C&licenseNumber=25019

LIN, THOMAS H.T., M.D. (A 64211)
Monterey Park, CA
Revoked, stayed, placed on 10 years' probation with terms and conditions, including 90 days actual suspension and a condition precedent to the practice of medicine.
August 12, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licensetype=A&licenseNumber=64211
LOWE, DAVID HUEI-CHUNG, M.D. (G 24041)
Camarillo, CA
Revoked, stayed, placed on 3 years' probation with terms and conditions
August 7, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=24041

MANGOBA, LUTHER BIEN, M.D. (A 77574)
Riverside, CA
Revoked, stayed, placed on 7 years' probation with terms and conditions
September 4, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=77574

MARDONES, JOHN A., M.D. (A 41581)
Palm Springs, CA
Revoked, stayed, placed on 3 years' probation with terms and conditions
August 26, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=41581

MARIANO, ROBERTO HERNANDEZ, M.D. (G 73610)
North Hollywood, CA
Revoked, stayed, placed on 3 years' probation with terms and conditions
October 21, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=73610

MAZUR, DENNIS JOHN (G 42966)
Wheeler, OR
License Revoked
September 24, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=42966

MENNIS, ROBERT GORDON (C 33287)
Melbourne Beach, FL
License Surrendered
October 9, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=33287

MICHELENA, JORDAN JOHN, M.D. (A 101937)
Los Angeles, CA
Revoked, stayed, placed on 7 years' probation with terms and conditions, including a condition precedent to the practice of medicine
September 4, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=101937

MUNN, WILLIAM CHARLES II (C 31843)
Fairfield, CA
License Surrendered
October 28, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=31843

MYGDAL, PETER KARL (A 97698)
Iowa City, IA
License Revoked
October 9, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=97698

NAJERA, JOHN MICHAEL (A 60358)
Gladstone, OR
License Revoked
September 17, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=60358

NASSI, SHILLA, M.D. (A 138352)
Los Angeles, CA
Probationary License issued with 35 months' probation and terms and conditions
September 18, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=138352

NEVINS, JAMES PHILLIP, M.D. (A 26710)
Temecula, CA
Revoked, stayed, placed on 5 years' probation with terms and conditions
August 26, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=26710

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.
NOVELLI, WILLIAM JOSEPH, JR. (C 40555)
Beaumont, TX
License Revoked
September 17, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=40555

ODOM, DAVID MALCOLM, M.D. (C 33440)
Menifee, CA
Revoked, stayed, placed on 5 years' probation with terms and conditions
August 28, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=33440

ORENGO-MCFARLANE, MICHELLE ANNE, M.D. (A 108738)
Martinez, CA
Revoked, stayed, placed on 3 years' probation with terms and conditions
August 7, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=108738

PATHI, RAMA THIRU, M.D. (A 42515)
Apple Valley, CA
Public Reprimand with terms and conditions
August 5, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=42515

PIERRE, EDGAR JOSEPH, M.D. (G 138868)
Miami, FL
Probationary License issued with 3 years' probation and terms and conditions
October 13, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=138868

REBONG, KENNETH POMAR, M.D. (A 45813)
San Jose, CA
Revoked, stayed, placed on 3 years' probation with terms and conditions
October 9, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=45813

SAJEDI, EBRABIM, M.D. (A 62264)
Culver City, CA
Revoked, stayed, placed on 1 additional year of probation with terms and conditions
August 7, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=62264

SCHAFFNER, DANIEL L. M.D. (G 57725)
Coarsegold, CA
Public Reprimand with terms and conditions
October 29, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=57725

SCOMA, JOSEPH ANTHONY (C 33898)
San Diego, CA
License Surrendered
August 11, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=33898

SEVERT, RAYMOND (G 63482)
Santa Rosa, CA
License Revoked
August 21, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=63482

SHAMLOO, JAMSHEED JAMES, M.D. (A 55193)
Encino, CA
Revoked, stayed, placed on 4 years' probation with terms and conditions
October 29, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=55193

SHANKAR, PRITHVI NAMBALAT, M.D. (A 92177)
Modesto, CA
Revoked, stayed, placed on 3 years' probation with terms and conditions
September 4, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=92177

SHARMA, NEERAJ, M.D. (A 138039)
Winnetka, CA
Probationary License issued with 3 years' probation and terms and conditions
August 31, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=138039

SHARMA, RAHUL, M.D. (A 72532)
Bakersfield, CA
Revoked, stayed, placed on 3 years' probation with terms and conditions
August 7, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=72532

Home
SHAW, STEPHEN ROBERT (G 47926)
Ventura, CA
License Revoked
October 30, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=47926

SHERUKDE, SAVITA PRASAD (A 86017)
Bakersfield, CA
License Revoked
August 21, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=86017

SHIDELER, BLYNN LEWIS, M.D. (G 23099)
Carmel, CA
Public Reprimand
September 2, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=23099

SHIN, SOOK-JA, M.D. (A 37091)
Los Angeles, CA
Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233
September 25, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=37091

SINGER, STEVEN A., M.D. (G 58336)
Littleton, CO
Public Reprimand with terms and conditions
September 25, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=58336

SMITH, GREGORY ALAN, M.D. (A 50680)
Torrance, CA
Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233
August 6, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=50680

STANGER, TERRY EDWARD (A 34136)
Agoura Hills, CA
License Surrendered
August 18, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=34136

STRAATON, KARIN VIVIAN, M.D. (G 49554)
Mountain Brook, AL
Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233
September 3, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=49554

STROHMEYER, KATHLEEN MCHUGH, M.D. (A 102724)
Tempe, AZ
Revoked, stayed, placed on 5 years' probation with terms and conditions
September 4, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=102724

SUN, ANDREW S. (G 13537)
Los Angeles, CA
License Surrendered
August 25, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=13537

THIENE, PAMELA DEVON, M.D. (G 68347)
Santa Barbara, CA
Revoked, stayed, placed on 4 years' probation with terms and conditions
September 2, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=68347

TURNER, GILBERT R. (A 18624)
Upland, CA
License Surrendered
September 24, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=18624

VAGHASIA, PRAMIL BABU, M.D. (A 137848)
Sacramento, CA
Probationary License issued with 3 years' probation and terms and conditions
August 19, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=137848

WALKER, JOHN W.T., M.D. (A 92111)
Pasadena, CA
Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233
October 21, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=92111
WHITE, JAMES GREGORY (A 30743)
Redding, CA
License Surrendered
August 31, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=30743

WILLIAMS, JOAN RYAN, M.D. (A 130696)
Santa Monica, CA
Public Reprimand
September 23, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=130696

YANKE, TRACI LYNN, M.D. (C 56144)
Scottsdale, AZ
Revoked, stayed, placed on 5 years' probation with terms and conditions, including a condition precedent to the practice of medicine
August 7, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=56144

YEE, CARY KA-HUM (A 39133)
Riverside, CA
License Revoked
August 20, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=39133

YEREVANIAN, GARO (A 26637)
San Diego, CA
License Surrendered
August 4, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=26637

ZAHEDI, MARCO MOHAMMAD, M.D. (A 138224)
Newport Coast, CA
Probationary License issued with 3 years' probation and terms and conditions
September 11, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=138224

Zhang, Frank Yun Jia (A 53395)
Fremont, CA
License Surrendered
October 1, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=53395

Podiatrists

NORDYKE, RANDOLPH W. (E 4245)
San Diego, CA
License Revoked
October 9, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=E&licenseNumber=4245

Physician Assistants

BUTLER, RORY LEE, P.A. (PA 13360)
Torrance, CA
Revoked, stayed, placed on 3 years' probation with terms and conditions
October 9, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=13360

KRAMER, EVELYN AGUILERA (PA 12331)
Mendota, CA
License Surrendered
August 17, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=12331

REGALADO, RICHARD HERNANDEZ (PA 10871)
Merced, CA
License Surrendered
October 12, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=10871

SIMMONS, LAWRENCE ANTHONY (PA 18350)
Houston, TX
License Revoked
October 16, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=18350

SUOR, PISETH, P.A. (PA 17756)
Stockton, CA
Revoked, stayed, placed on 5 years' probation with terms and conditions, including a condition precedent to the practice of medicine
August 21, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=17756
Registered Spectacle and Contact Lens Dispensers

GONZALEZ, MICHAEL (SL 6373)
Pomona, CA
Registration Revoked
October 1, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=SL&licenseNumber=6373

JULIAN, ADLAI A. (CL 2122)
Brawley, CA
Registrations Revoked
October 23, 2015
http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=SL&licenseNumber=6171

SUMMARY OF THE ACTIONS
August 1, 2015 – October 31, 2015

The actions taken include charges or findings based on the following:

Physicians and Surgeons

- Administered excessive steroid injections to patients
- Aided and abetted the unlicensed practice of medicine
- Allowed a patient to mix and self-administer intravenous antibiotics, inadequately monitored the antibiotic treatment, and failed to communicate with home nursing staff and/or patient on a regular basis as to the patient’s status
- Committed dishonest acts by representing to a Board investigator that he was a part-time employee and had no ownership of a center, when in fact, he signed a Fictitious Name Permit identifying himself as a 51% owner of the center
- Committed gross negligence in the care and treatment of two patients by failing to respond in a timely and appropriate manner to one patient’s acute limb ischemia and the other patient’s anastomotic leak
- Committed gross negligence in the care and treatment of several female patients, including failing to treat a patient’s uterine rupture and postpartum hemorrhage properly, which led to the patient’s death
- Committed gross negligence in the obstetrics and gynecological care and treatment of three patients by failing to identify a placental previa and breech presentation, by failing to adjust a due date based on the findings of an ultrasound, and by failing to properly and fully evaluate a complaint of decreased fetal movement
- Committed multiple fraudulent acts: by engaging in false advertising of a weight loss clinic, by failing to disclose to potential weight loss patients that they would be enrolled in the Family PACT program and providing illegal kickbacks to individuals who referred additional patients; procuring phentermine to be dispensed at a weight loss clinic by issuing prescriptions to the physician; storing phentermine in an unsecured location without a proper label, which made the drug available for sale by an unlicensed person who worked at the clinic; and continuing to prescribe or dispense controlled substances in violation of a court order that prohibited the physician from doing so
- Consumed various dangerous drugs and passed out in the operating room, while providing anesthesia, during a surgery
- Convicted of aiding and abetting the unlicensed practice of medicine by having two unlicensed persons perform laser treatments and diagnose and treat six patients for hair removal, skin rejuvenation and tattoo removal
- Continued to schedule and perform new elective procedures on a non-compliant patient
- Convicted of driving a motor vehicle while having 0.08% or more, by weight of alcohol in his blood, causing injury to three persons
- Convicted of driving under the influence of alcohol
- Convicted of driving with a blood alcohol level of .08% or more; blood alcohol level measured at 0.26 percent
- Convicted of a felony violation for health care fraud for submitting false and fraudulent claims to Medicare totaling over $3,000,000, while on a Board-ordered probation
- Convicted of issuing a prescription for a controlled substance for a non-legitimate medical purpose, failed to report the conviction to the Board, and failed to comply with the terms and conditions of a Board-ordered probation by failing to obey all laws
- Convicted of, and required to register as a sex offender for, attempting a lewd act upon a child under the age of 14, distribution of lewd material to a minor, contacting and communicating with a minor for the purpose of engaging in lewd and lascivious behavior, and unlawfully annoying or molesting a child under the age of 18
- Convicted of narcotics distribution via the internet: engaged in a scheme to sell, distribute and dispense prescription drugs over the internet, and to deliver those prescription drugs to customers without the issuance of valid prescriptions
- Convicted of theft and possession of drug paraphernalia for entering a pharmacy without authorization and removing five boxes of cocaine solution
- Convicted of transporting hydrocodone between non-contiguous countries and unlawfully issuing a prescription for hydrocodone
- Convicted multiple times for driving under the influence of an alcoholic beverage
- Convicted of willful cruelty to an elder or dependent adult (wife)
- Court-martialed and found guilty of conspiracy to commit robbery and aggravated assault, conduct unbecoming of an officer, and soliciting another to commit assault and larceny, receipt of stolen property and communicating a threat
- Created a false medical record to obtain prescriptions for narcotics for personal use
- Demonstrated a lack of knowledge regarding the conversion factors and/or equivalencies for the various narcotics and controlled substances that the physician prescribed to a patient; patient died from acute Oxycodone toxicity
- Disciplined by a federal agency for ordering more than 5,000,000 units of hydrocodone that the physician failed to properly account for and/or secure
- Disciplined by another state based on a citation for driving under the influence, which resulted in evaluation by that state’s physician health program, wherein the physician was deemed not safe to practice medicine
- Disciplined by another state based on a conviction for misbranding; purchased and used foreign oncology drugs that were not approved by the FDA
- Disciplined by another state based on a self-report of conviction for driving under the influence of alcohol and failing to remain at the scene of a fatal collision
- Disciplined by another state based on a self-report of narcotic use and diversion
- Disciplined by another state for accessing medical records of two individuals with whom the physician had a personal, but not professional, relationship on a number of occasions, without a clinical or other permissible purpose
- Disciplined by another state for attempting to obtain, maintain or renew a license in that state by bribery, fraud or misrepresentation or by any false, misleading, inaccurate or incomplete statements
- Disciplined by another state for engaging in a sexual relationship with a patient
- Disciplined by another state for engaging in sexual relationships with several patients, prescribing controlled substances to one of the patients without maintaining proper medical records, and being under the influence of alcohol during hours when the physician was at work and on call
- Disciplined by another state for failing to adequately supervise a Physician Assistant who prescribed excessive amounts of high dose opioids for vague and unsubstantiated pain complaints, provided early refills without performing urine drug screenings, and ignored several red flag warnings that the patient was abusing pain medication
- Disciplined by another state for failing to conform to the standards of acceptable and prevailing medical practices by consulting with and informing a surgeon that a patient met the criteria for a prescription of methadone for postoperative acute pain after undergoing a tonsillectomy and adenoidectomy.
- Disciplined by another state for failing to keep appropriate, legible medical records by failing to document an adequate operative report of the surgical procedures performed on a patient
- Disciplined by another state for fraud or misrepresentation in applying for or procuring a license or registration
- Disciplined by another state for failing to report an arrest for a motor vehicle related offense on a license renewal application
- Disciplined by another state for non-therapeutically prescribing controlled substances to patients
- Disciplined by another state for prescribing drugs, including controlled substances, without appropriate examination, assessment or documentation, in inappropriate and excessive quantities, and without appropriate monitoring
- Disciplined by another state for prescribing phentermine and prescribing four times the recommended dose of a thyroid hormone to a patient with cardiomyopathy
- Disciplined by another state for providing medical care to a patient while under the influence of alcohol and failing to adequately document the physician’s care and treatment of the patient
- Disciplined by another state for submitting false information on a license renewal application regarding continuing medical education (CME) credits
- Engaged in a sexual relationship with a patient
- Failed to adequately diagnose and manage chronic alcoholism leading to an irreversible neurological condition which resulted in the incapacitation of the patient
- Failed to adequately document the care and treatment of a patient
- Failed to adequately supervise employees in relation to their prescribing, monitoring and/or administering medicines to a patient and failed to keep adequate and accurate records
- Failed to comply with the terms and conditions of probation
- Failed to document intraoperative and/or postoperative procedures performed on two patients and failed to continuously monitor the ETCO2 waveform of a patient under anesthesia
- Failed to evaluate and treat a patient’s symptoms of depression
- Failed to follow up with timely diagnostic studies or reassessment of a patient who presented with a new mass
- Failed to maintain adequate and accurate medical records
- Failed to obtain informed consent from a patient
- Failed to perform an appropriate examination prior to prescribing medications to patients
- Failed to document treating a patient for sepsis and failed to document that patient had left against medical advice
- Failed to properly treat a patient with active tuberculosis and/or refer patient to a specialist
- Failed to provide appropriate care and treatment to a patient following repeated presentations with elevated blood pressures; patient died as a result of a massive intracranial hemorrhage
- Failed to recognize a complication during a hernia repair surgery that resulted in the rupture of the small bowel and ascending colon resulting in the death of the patient
- Failed to recognize and treat a patient for Systemic Inflammatory Response Syndrome that was caused by an infection
- Failed to recognize significant and obvious findings on CT scans of four patients, i.e., tumor of the right posterior chest wall, an intracranial hemorrhage, a pulmonary embolism, and an abnormal appendix and free pelvic fluid
- Failed to refer drug-abusing patient to an addiction specialist
- Failed to stabilize a long bone fracture without documentation explaining such and delayed in obtaining temporary fracture control as well as not obtaining definitive fracture fixation until two months later
- Failed to treat post-operative infection, interpret and investigate abnormal lab tests, relied on the primary physician for hospital admission and failed to adequately discuss with the family the risks of delaying aggressive treatment or documenting the discussion in the record
- Ordered and performed an abdominal ultrasound examination prior to obtaining a medical history or performing a physical examination and charging for an aorta ultrasound and spirometry test that were not performed
- Performed an abdominoplasty on a patient with uncontrolled diabetes without a documented preoperative history in the patient’s medical records; notes were illegible and not completed timely
- Prescribed controlled substances and/or dangerous drugs without performing a physical exam and/or without medical indication
- Prescribed excessive amounts of opioids to a patient despite a lack of clear treatment objectives, despite the patient’s extensive history of and continued aberrant behaviors and without documented consultation with a pain specialist
- Prescribed excessive amounts of controlled substances or other dangerous drugs to addicts, several of whom died as a result of drug overdoses.
- Prescribed excessive amounts of controlled substances to patients the physician knew or should have known were addicts
- Prescribed methadone for opiate withdrawal despite the fact the the physician did not have the appropriate license
- Prescribed Targretin to an elderly patient for problems with short-term memory when the drug had not been approved for treatment of dementia and failed to appropriately monitor the patient while on the drug
- Provided inaccurate information on an evaluation form for the Department of Social Services to assist a patient in obtaining in-home supportive services; provided false information on a Multiple Impairment Questionnaire to assist a patient in obtaining Social Security disability benefits
- Submitted disability insurance claims averring to total disability and applying for and accepting disability insurance benefits under two policies, subsequently stated on an application for a medical license in another state that the physician did not have a medical condition which impaired the physician’s ability to practice medicine safely
- Suffered a physical impairment affecting competency following a stroke
- Suffers from mental/physical illness affecting competency
- Suffers from permanent, severe right hemiparesis and expressive aphasia secondary to a massive intracranial hemorrhage and is unable to communicate thoughts and not capable of making decisions
- Suffers from physical and mental deterioration due to advanced age
- While on a Board-ordered probation, underwent neuropsychological examination that revealed a severe impairment that affects the ability to practice medicine safely
- Used alcoholic beverages, to the extent, or in a manner dangerous or injurious to the physician or others
- Used and administered controlled substances in a manner dangerous or injurious to the physician
- Used controlled substances while working as an anesthesiologist during surgical procedures
- Used excessive force to dislodge a shoulder dystocia resulting in injury to the patient

Podiatrists
- Failed to comply with the terms and conditions of probation

Physician Assistants
- Disciplined by another state for prescribing inappropriate combinations and dosages of narcotics, benzodiazepines and tranquilizers to numerous patients who reported symptoms of chronic pain; failing to obtain copies of prior treatment records; failing to obtain necessary imaging studies; failing to conduct random drug screens; and failing to adequately document treatment of patients
- Failed to recognize and obtain immediate treatment for a patient’s life-threatening myocardial infarction
- Failed to order laboratory tests and take other measures despite being aware that the patient had a long history of diabetes and treatment with insulin and also had a seven pound weight loss in three weeks’ time
- Prescribed and administered controlled substances to a patient and performed interventional pain procedures on a patient without an active supervising physician and without an active delegation of services agreement with a supervising physician
- Self-prescribed narcotics, prescribed narcotics to patients without an appropriate history, physical examination, valid medical indication, assessment of the pain, or assessment of the patient’s physical and psychological function and failed to maintain complete and accurate medical records

Registered Spectacle Lens Dispensers
- Convicted of driving with a blood alcohol level of .08% or more; breath tests yielded results of .193% and .223%
- Convicted of transportation of illegal aliens and aiding and abetting

Attorney General Says Medical Assistants May Perform Spirometry in Offices Where Test Is Customary

Medical assistants may lawfully perform spirometric pulmonary function testing (spirometry), if the test is a usual and customary part of the medical practice where the medical assistant is employed and the requirements for training, competency, authorization, and supervision are satisfied, according to an October 15, 2015 opinion issued by California Attorney General Kamala D. Harris. The test requires patients to breathe into a tube connected to a medical device called a spirometer. Spirometry is frequently performed as a screening procedure to diagnose lung disease.

As with other kinds of testing they are permitted to perform, medical assistants are not permitted to interpret test findings or results.

Physicians are responsible for oversight of medical assistants, as well as their training and periodic evaluation of their performance in conducting pulmonary function tests.

For more information about medical assistants’ scope of practice, please see http://www.mbc.ca.gov/Licensees/Physicians_and_Surgeons/Medical_Assistants/.
State's First Flu-Related Death of Infant This Season

The California Department of Public Health (CDPH) reported the state’s first “influenza-associated fatality” of the season in a child under one year old in Stanislaus County in early November 2015. According to CDPH, “Young children less than one year of age are at increased risk of severe influenza.” However, babies cannot be vaccinated for the flu until they are six months old.

“To protect babies who cannot yet be vaccinated, we should get our flu shots,” according to CDPH State Public Health Officer Dr. Karen Smith. “Preventing the spread of this often deadly disease is why getting vaccinated is so important,” she said.

There were 78 influenza-related deaths in California in persons under age 65 during the 2014-2015 flu season. CDPH recommends the annual flu vaccine for anyone six months of age or older, including pregnant women. Influenza virus levels peak from December through April.

Hepatitis B "Very Common" in Asian Americans and Pacific Islanders - CDC Offers Posters, Fact Sheets, Videos in Multiple Languages for Physicians

The Centers for Disease Control and Prevention (CDC) has created multi-language informational materials physicians can use to help educate patients about Hepatitis B, a virus causing a lifelong illness which can, over time, cause serious problems such as liver cancer and liver failure.

“In the U.S., Hepatitis B is very common among Asian Americans and Pacific Islanders (AAPIs) with up to one in twelve AAPIs living with Hepatitis B. Even though AAPIs make up less than 5% of the U.S. population, they account for up to half of the 1.2 million Americans living with Hepatitis B,” according to the CDC.

“Many people with Hepatitis B infection do not know they are infected since they do not feel or look sick. However, they can still spread the virus to others and are at risk of serious health problems themselves,” the CDC said.

“Hepatitis B is spread when blood or other bodily fluid infected with Hepatitis B enters the body of a person who is not infected,” the CDC said. “Hepatitis B is not spread through sharing meals, bowls or utensils with someone who has the virus. It is also not spread by breastfeeding, hugging, kissing, holding hands, coughing, or sneezing,” according to the CDC.

The CDC is offering posters, videos, fact sheets and other materials in English, Chinese, Vietnamese, Korean, Burmese, Hmong, Kmer, Mandarin, Cantonese, Lao, French, Russian, Spanish and Tagalog. (Not every piece is available in all languages.) These can be downloaded free of charge from the CDC website at [www.cdc.gov/knowhepatitisb/materials.htm#posters](http://www.cdc.gov/knowhepatitisb/materials.htm#posters).

Tech Med Corner

FDA Approves Nasal Spray to Treat Opioid Overdose. The U.S. Food and Drug Administration (FDA) has approved a nasal spray version of naloxone hydrochloride, a life-saving medication that can reverse or stop the effects of an opioid overdose. The nasal spray, marketed under the brand name Narcan, is sprayed into one nostril while the patient lies on his or her back. Immediate medical care should be sought after Narcan is administered. Narcan will be available by prescription in early 2016. The release price for group purchasers such as fire departments will be $75 for two doses. For more information, visit [http://www.fda.gov/Drugs/](http://www.fda.gov/Drugs/).

Uber Exploring Health Care Partnerships. Ride service Uber partnered with Epidemico and Passport Health in a bid to deliver thousands of flu shots to people in 36 cities (including Los Angeles and San Francisco, as well as Orange County) on a single day. Users were charged $10 for a registered nurse to arrive at their home or office in an Uber-driven vehicle with enough vaccine and other supplies to vaccinate 10 people at each site. There was no fee for the additional nine vaccinations. According to the Boston Globe, Uber “planned to deliver 10,000 vaccines, but the data wasn’t in yet on how many had been given out.” In another experiment, Uber partnered with Voalte and Practo to provide a service “that will allow patients scheduling doctors’ appointments to schedule rides to those appointments with Uber at the same time.” ([MobiHealthNews](http://mobihealthnews.com), 11-20-15, [http://mobihealthnews.com/48727/with-slew-of-partnerships-uber-rolls-up-to-healthcare-space](http://mobihealthnews.com/48727/with-slew-of-partnerships-uber-rolls-up-to-healthcare-space)).
Business and Professions Code § 2021(b) and (c) require physicians to inform the Medical Board in writing of any name, email or address change. Go to:  
http://www.mbc.ca.gov/Licensees/Address_of_Record.aspx

MBC Meetings — 2016

January 21-22: Sacramento Area
May 5-6, 2016: Los Angeles Area
July 28-29, 2016: San Francisco Area
October 27-28, 2016: 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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