



Medical Board of California Newsletter

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Legislative Update



Photo by Charlotte Clark

Allied Health Professionals

[AB 2235 \(Thurmond, Chapter 519\)](#)

Board of Dentistry: Pediatric Anesthesia

This bill declares the Legislature's intent that the Dental Board of California (DBC) encourage dental sedation providers in this state to submit data regarding pediatric sedation events to a research database in order to improve the quality of services provided to pediatric dental anesthesia patients, as specified. This bill requires the DBC, on or before January 1, 2017, to provide a report to the Legislature on whether current statutes and regulations for the administration and monitoring of pediatric anesthesia in dentistry provide adequate protection of pediatric dental patients. This bill specifies the minimum information that a licensee must report to the DBC in the event of a death of his or her patient or removal of a sedation or anesthesia patient to a hospital or emergency center for medical treatment, as specified. This bill authorizes the DBC to assess a fine on any licensee that fails to report an adverse

Legislative Update (continued on page 6)

The Mission of the Medical Board of California

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

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All editions are available as digital publications via email or viewable on the Board's website: <http://www.mbc.ca.gov>. Additionally, the Winter edition is printed in hard copy for distribution via the U.S. Postal Service to those physicians or interested parties without an email.

Submission of original articles is welcome, but all submissions become the property of the Medical Board of California and are subject to editing.

Medical consultants needed

Especially from San Dimas, Valencia and Fresno 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 (<https://jobs.ca.gov/JOBSGEN/5CACC.PDF>). If you have any questions, please contact Division of Investigation, Health Quality Investigation Unit Commander Bob Pulido at (909) 421-5800 or email Robert.Pulido@mbc.ca.gov.

Expert reviewer applications are accepted continuously!

If you are residing in California with a full-time active practice in California, apply to be an expert reviewer (expert) for the Medical Board of California (Board). The Board 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 looking for experts in the following specialties: addiction medicine with added certification in family medicine or internal medicine or psychiatry; colon/rectal surgery; dermatology; family medicine; neurological surgery; neurology; pathology (preferably from the following counties: Orange, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, and Ventura); pain medicine; pediatric surgery; pediatric cardiac surgery; pediatric pulmonology; psychiatry (forensic and addiction); surgery; urology; and vascular surgery, as well as midwife reviewers.

Actively practicing physicians from all other specialties not listed above are also welcome to apply and participate in the program. 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 and available to testify in court.

For more information regarding compensation and how to apply, please visit: www.mbc.ca.gov/enforcement/expert_reviewer/ or email the Board's expert program at: MBCMedicalExpertProgram@mbc.ca.gov.

Editor's Spotlight

By Susan Wolbarst

This edition of the Newsletter provides descriptions of new laws beginning on page **1** and Mandatory Reporting starting on page **14**. Please read the article on page **13** about new rules for prescribing psychotropic medications to children in foster care.

Have you ever wondered what it is like to be an expert reviewer for the Medical Board of California? A doctor shares his story on page **19**. Learn about Coccidioidomycosis, a disease reported more than 3,000 times in California in 2015, on page **20**.

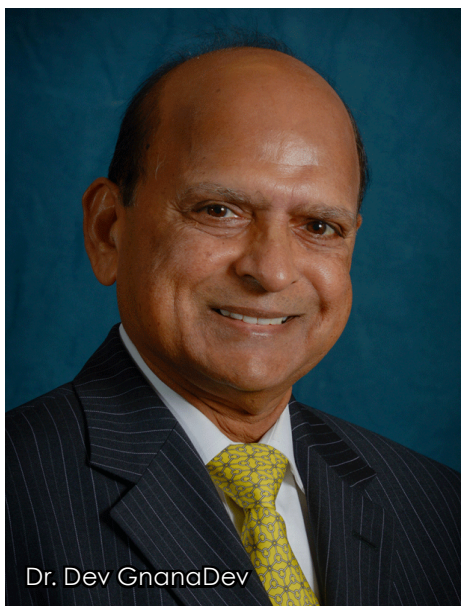
The expanding profession of midwifery is covered in an article beginning on page **22** and what physicians need to know about supervising physician assistants can be found in an article beginning on page **23**.

Considering retirement? You may be interested in learning which license status is right for you, starting on page **26**.

Need A Speaker?

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

President's Message



Dr. Dev GnanaDev

Happy New Year to all and, as always, our Winter Newsletter contains all the 2016 legislation passed and signed by the Governor that pertains to the Medical Board and its stakeholders. I recommend you take a look at the new laws coming into effect that will impact physicians. Bills of importance to the Board include Senate Bill (SB) 1174 (McGuire, Chapter 840) and SB 1177 (Galgiani, Chapter 591).

SB 1174 authorizes the Board to collect and analyze data submitted

by the Department of Health Care Services and the Department of Social Services relating to the prescribing of psychotropic drugs to foster care children. This will allow the Board to investigate physicians who may be inappropriately over prescribing psychotropic drugs and provide consumer protection to these children. Please see related article on page [13](#).

SB 1177 authorizes the establishment of a physician and surgeon health and wellness program (program) under the auspices of the Board. During fiscal year 2015/16 the Board implemented the Uniform Standards for Substance-Abusing Licensees, which ensure that all substance-abusing licensees are held to the same standards. Pursuant to SB 1177 this program will require all participants to comply with these Uniform Standards. The program will be run by a private third-party independent administering entity. Physicians will be able to self-refer into this program.

The Board's [Annual Report for 2015/16](#) is now available and posted on the Board's website. The Annual

Report shows the work that has been performed by the Board during the last fiscal year. It is noteworthy that the number of licensed physicians, applications received, licenses issued, and complaints received have all seen a significant increase. Specifically, the number of applications for a physician's and surgeon's license increased by over 900 applications, and the Board licensed 435 more physicians than the previous year. In addition, the number of complaints received by the Board increased by over 400 complaints.

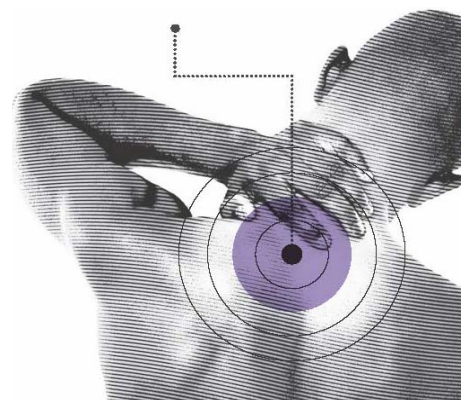
On December 1, 2016, the Board released its [Sunset Review Report](#) to the Legislature. This report includes background information about the Board, performance statistics, as well as new issues that may result in legislative changes. The Sunset Review Report is posted on the Board's website.

I hope you will take the time to read both our Annual Report and Sunset Review Report. The Board looks forward to another successful year and continuing its mission of consumer protection and access to care for all Californians in 2017.

Free Pocket Guide to Tapering Opioids for Chronic Pain Available from CDC

The Centers for Disease Control and Prevention (CDC) has prepared a free pocket guide to help physicians considering reducing or eliminating opioid dosage to chronic pain patients. The guide aims to help physicians understand how and when to begin the tapering process and minimize withdrawal symptoms

while maximizing non-opioid pain treatments. Physicians who have reviewed the guide have praised its succinct language and the ease of using it in practice. The guide is available at https://www.cdc.gov/drugoverdose/pdf/clinical_pocket_guide_tapering-a.pdf.



Legislator Profile

Assemblymember Marc Levine



Assemblymember Marc Levine was elected in November 2012 and re-elected in 2014 and 2016 to represent Marin and Sonoma Counties.

His priorities include improving the quality of public K-12 education, funding higher education, protecting California's precious water supply, making government more transparent and accountable, and funding for improving the state's transportation infrastructure. Additionally, he supports efforts to pay down California's wall of debt and control spending in order to continue funding for vital public services.

He currently chairs the Assembly Committee on Water, Parks, and Wildlife. This committee is responsible for overseeing Water Bond expenditures, implementation of a long-term plan to protect California's beautiful parks, and protecting endangered species, migratory birds, and other wildlife.

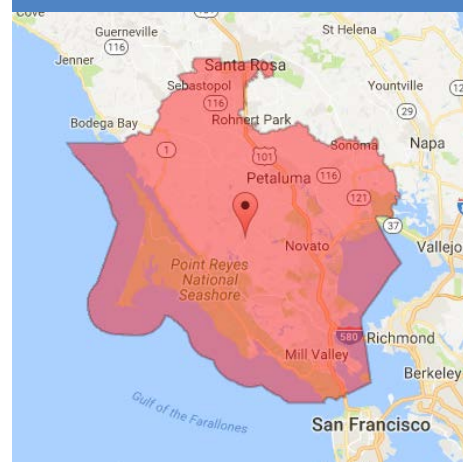
In the 2015/2016 Session, Governor Brown signed into law 30 bills authored by Assemblymember Levine. These bills include mechanisms for traffic congestion reduction in the North Bay, wildlife corridor conservation, advance mitigation, immigrant juvenile refugee protection, expanded markets for local businesses, water conservation and improvements to California State Parks.

Levine has also worked as an advisor and consultant to social enterprise and high tech startups. He developed award-winning technology for human rights organizations, in the process raising millions in funding from the U.S. State Department, the Soros Foundation and other funders to create technology that is now used globally. Additionally, Levine has worked to create innovative programs that use technology to foster learning in underserved classrooms.

Levine earned his master's degree in national security affairs from the Naval Postgraduate School in Monterey, California, and was recognized with a Special Act Award for his work to promote the elite graduate school around the world. While earning his bachelor's degree in political science at California State University, Northridge, he was elected chair of the California State Student Association, representing over 400,000 students to the State Legislature and Board of Trustees.

Assemblymember Levine lives in Marin County with his wife Wendy and their two children.

District Map



Doctors' Day is March 30

The idea of setting aside a day to honor physicians was devised by Eudora Brown Almond, wife of Dr. Charles B. Almond, and the first Doctors' Day was observed on March 30, 1933 in Winder, Georgia. The date of March 30 was selected to mark the anniversary of the first use of anesthesia in surgery 91 years previously in Jefferson, Georgia, by Dr. Crawford Williamson Long, who had witnessed patients enduring the pain of surgery during his medical training. On March 30, 1842, Dr. Long used sulfuric ether gas on a patient before removing a tumor from the patient's neck, reported as the first documented use of ether in surgery.

Decades passed until a bill was introduced in Congress to declare March 30 as National Doctors' Day. The United States Senate and House of Representatives approved the measure in 1990 and it was signed into law by George H. W. Bush. The day celebrates the contributions of physicians who serve our country by caring for its citizens.

You Asked For It

Questions received from the Web

By Christine Valine, Public Information Analyst

Q. Is my medical assistant permitted to take a verbal order from me?

A. Yes. A physician may give a medical assistant a patient-specific verbal order; however, a record must be made in the patient chart or other record including a computerized record, if any, of each technical supportive service performed by the medical assistant, indicating the name, initials, or other identifier of the medical assistant, the date and time, a description of the service performed, and the name of the appropriate supervisor who gave the medical assistant patient-specific authorization to perform the task.

Q. I am retiring in a year. What are my legal responsibilities to my patients and their charts after retirement?

A. It is your responsibility as the physician to notify your patients of any change to your medical practice. This is best done by a letter to each patient explaining the change and the final date of practice. The California Medical Association (CMA) recommends, if possible, that letters be sent by certified mail, return receipt requested, and that a copy of the letter with the return receipt be kept. To inform inactive patients or those who have moved away, the CMA also recommends placing an advertisement in a local newspaper. Advise your patients as to where their medical records will be stored, including how they may access them. To facilitate the transfer of medical records to the new treating physician, include an authorization form in the letter. If your practice is being taken over by another physician or another physician can be recommended, the patients can be referred to that physician.

Q. If I have verified the medication and dosage, is my medical assistant permitted to hand to a patient a properly labeled prescription medication if it is a non-controlled substance?

A. Yes. In certain locations, such as a licensed non-profit clinic or free clinic identified in Business and Professions Code sections 4180 and 4190, other than facilities licensed by the state, medical assistants may hand patients properly-labeled and pre-packaged prescription drugs (excluding controlled substances) that have been ordered by a licensed physician, podiatrist, physician assistant, nurse practitioner, or nurse midwife. The properly-labeled and pre-packaged prescription drug must have the patient's name affixed to the package, and the physician, podiatrist, physician assistant, nurse practitioner, or nurse midwife must verify it is the correct medication and dosage for that specific patient and provide the appropriate patient consultation regarding use of the drug prior to the medical assistant handing medication to a patient.

Q. A former physician in our medical group, who is deceased, continues to receive renewal notices and other mail at our office from the Medical Board. How can I have him removed from your mailing list?

A. In order for the Board to update its files, the Board must receive either a copy of the Certificate of Death or a notarized statement attesting to the physician's death. When possible, please include the physician's medical license number. You may either fax this document to the Board at (916) 263-2479 or mail to 2005 Evergreen Street, Suite 1200, Sacramento, CA 95815.

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.



event within a seven-day period and provides that the licensee may dispute a penalty within ten days. This bill specifies the minimum information that a licensee must include on the written informed consent in the case of a minor.

Health Care Coverage

[AB 59 \(Waldron, Chapter 251\)](#)

Mental Health Services: Assisted Outpatient Treatment

Extends the repeal date of the Assisted Outpatient Treatment (AOT) Demonstration Project Act of 2002, or “Laura’s Law,” by five years, to January 1, 2022, and deletes and recasts in existing law the Department of Health Care Services’ reporting requirement, as specified, regarding the AOT services a county provides.

[AB 72 \(Bonta, Chapter 492\)](#)

Health Care Coverage: Out-of-Network Coverage

Establishes a payment rate, which is the greater of the average of a health care service plan or health insurer’s contracted rate, as specified, or 125% of the amount Medicare reimburses for the same or similar services, and an independent dispute resolution process for claims and claim disputes related to covered services provided at a contracted health facility by a non-contracting individual health care professional for health plan contracts and health policies issued, amended, or renewed on or after July 1, 2017. This bill limits enrollee and insured cost sharing for these covered services to no more than the cost sharing required had the services been provided by a contracting health professional.

[AB 796 \(Nazarian, Chapter 493\)](#)

Health Care Coverage: Autism and Pervasive Developmental Disorders

Requires the Board of Psychology to convene a committee to create a list of evidence-based treatment modalities for purposes of developing mandated behavioral health treatment (BHT) modalities for pervasive development disorder or autism (PDD/A). This bill extends the sunset provisions requiring health care service plans to provide health coverage for BHT for PDD/A to January 1, 2022.

[AB 1299 \(Ridley-Thomas, Chapter 603\)](#)

Medi-Cal: Specialty Mental Health Services: Foster Children

Provides for the presumptive transfer of responsibility from the county of original jurisdiction to the foster child’s county of residence for providing or arranging mental health services for foster youth, as specified.

[AB 1696 \(Holden, Chapter 606\)](#)

Medi-Cal: Tobacco Cessation Services

Requires Medi-Cal to cover tobacco cessation services, as specified.

[AB 1795 \(Atkins, Chapter 608\)](#)

Health Care Programs: Cancer

Changes provisions of the Every Woman Counts program and the Breast and Cervical Cancer Treatment program within the Department of Health Care Services regarding eligibility for screenings, period of treatment, and eligibility of coverage after reoccurrence of cancer, as specified.

[AB 1954 \(Burke, Chapter 495\)](#)

Health Care Coverage: Reproductive Health Care Services

Establishes the Direct Access to Reproductive Health Care Act, which prohibits health care service plans and health insurers from requiring an enrollee to receive a referral prior to receiving coverage or services for reproductive and sexual health care.

[AB 2394 \(Garcia, E., Chapter 615\)](#)

Medi-Cal: Nonmedical Transportation

Requires Medi-Cal to cover nonmedical transportation for a beneficiary to obtain covered Medi-Cal services commencing on July 1, 2017 or the effective date of any necessary federal approvals, whichever is later.

[SB 10 \(Lara, Chapter 22\)](#)

Health Care Coverage: Immigration Status

Requires Covered California to apply to the United States Department of Health and Human Services for a Section 1332 waiver to allow persons who are not otherwise able to obtain coverage through Covered California by reason of immigration status, to obtain coverage from Covered California by waiving the requirement that Covered California offer only qualified health plans.

[SB 923 \(Hernandez, Chapter 192\)](#)

Health Care Coverage: Cost-Sharing Changes

This bill prohibits a health plan contract or health insurance policy from changing any cost-sharing design during the plan or policy year, except when required by state or federal law. This bill applies this prohibition to non-grandfathered health plan contracts and health insurance policies in the individual and small group markets and grandfathered health plan contracts and insurance policies in the individual market that are issued, amended, or renewed on or after January 1, 2017.

[SB 999 \(Pavley, Chapter 499\)](#)

Health Care Coverage: Contraceptives: Annual Supply

Authorizes a pharmacist to dispense a 12-month supply of United States Food and Drug Administration-approved, self-administered hormonal contraceptives and requires insurance to cover the cost.

[SB 1076 \(Hernandez, Chapter 723\)](#)

General Acute Care Hospitals: Observation Services

Establishes new requirements for observation services provided by a hospital, including that observation services provided in an outpatient observation unit comply with the same nurse-to-patient ratios as emergency services, and requiring patients to receive written notice when they are receiving observation services in an inpatient unit of the hospital.

[SB 1135 \(Monning, Chapter 500\)](#)

Health Care Coverage: Notice of Timely Access to Care

Requires health plans, health insurers and Medi-Cal managed care plans to notify enrollees and contracted providers about information on timely access to care standards and information about interpreter services, on at least an annual basis.

Medical Education

[SB 1139 \(Lara, Chapter 786\)](#)

Health Professionals: Medical Degree Programs: Healing Arts Residency Training Programs: Undocumented Immigrants: Nonimmigrant Aliens: Scholarships, Loans and Loan Repayment

Prohibits a student, including a person without lawful immigration status, and/or a person who is exempt from nonresident tuition, who meets the requirements for admission to a medical degree program at any public or private postsecondary educational institution that offers such a program, or who meets the requirements for admission to a healing arts residency training program whose participants are not paid, from being denied admission based on his or her citizenship or immigration status. This bill prohibits specified grant and loan repayment and forgiveness programs from denying an application based on an applicant's citizenship or immigration status.

Medical Practice and Ethics

[AB 1244 \(Gray, Chapter 842\)](#)

Workers' Compensation

Specifies the circumstances in which a medical provider must be suspended from participating in the workers' compensation system. Upon suspension, the Administrative Director (AD) of the Division of Workers' Compensation (DWC) must notify the relevant licensing, certification, or registration board, including the Medical Board. This bill also requires the director of the Department of Health Care Services (DHCS) to notify the AD of the DWC if a medical provider is added to the Suspended or Ineligible Provider List (this notification from DHCS is already required to be provided to the Medical Board), among other provisions.

Physicians with an email address are required (per Business and Professions Code section 2021(d)) to report it to the Medical Board of California. The email address shall be considered confidential and not subject to public disclosure.

[AB 1703 \(Santiago, Chapter 65\)](#)

Inmates: Medical Treatment

Expands the definition of “immediate medical or hospital care” for inmates to include critical specialty medical procedures or treatment, such as dialysis, which cannot be performed at a city or county jail.

[AB 2024 \(Wood, Chapter 496\)](#)

Critical Access Hospitals: Employment

Authorizes, until January 1, 2024, a federally certified critical access hospital (CAH) to employ physicians and charge for professional services. A CAH can only employ physicians if the medical staff concurs by an affirmative vote that employing physicians is in the best interest of the communities served by the CAH and if the CAH does not interfere with, control or otherwise direct the professional judgement of a physician. This bill requires the Office of Statewide Health Planning and Development (OSHPD), on or before July 1, 2023, to provide a report to the Legislature regarding the impact of CAH’s employing physicians and their ability to recruit and retain physicians between January 1, 2017 and January 1, 2023, inclusive. This bill requires the CAHs to also submit reports to OSHPD on an annual basis.

[AB 2119 \(Chu, Chapter 690\)](#)

Medical Information: Disclosure: Medical Examiners and Forensic Pathologists

Authorizes licensed physicians who perform official autopsies on behalf of a county coroner’s office or the medical examiner’s office to receive medical information for specified purposes. This bill requires a health facility, as defined, a health or behavioral health facility or clinic, and the physician in charge of the patient to release a patient’s medical record relating to community mental health services, voluntary admissions and judicial commitments to mental hospitals, and county psychiatric hospitals to a medical examiner, forensic pathologist, or coroner, as specified, upon request, when a patient dies from any cause, natural or otherwise.

[AB 2503 \(Obernolte, Chapter 885\)](#)

Workers’ Compensation: Utilization Review

Requires a treating physician to file requests for authorization of treatment with the appropriate entity, as set forth in regulations to be adopted by the Administrative Director of the Department of Workers’ Compensation.

[AB 2744 \(Gordon, Chapter 360\)](#)

Healing Arts: Referrals

Expressly provides that payment or receipt of consideration for advertising, where a licensee offers or sells services through a third-party advertiser, does not constitute a referral of patients when the third-party advertiser does not itself recommend, endorse, or otherwise select a licensee. This bill specifies that the fee paid to the third-party advertiser must be commensurate with the service provided by the third-party advertiser. This bill requires the purchaser to receive a refund of the full purchase price if the licensee determines, after consultation with the purchaser of the service, that the service is not appropriate for the purchaser. It must be disclosed in the advertisement that this consultation is required and the purchaser will receive a refund if not eligible to receive the service. This bill specifies that it does not apply to basic health care services or essential health benefits, as specified. This bill requires a third-party advertiser to make advertisements available to prospective purchasers for all services of licensees in the applicable geographic region.

[SB 1160 \(Mendoza, Chapter 868\)](#)

Workers’ Compensation

Among other provisions, this bill prohibits an employer, or any entity conducting workers’ compensation utilization review on behalf of an employer, from providing any financial incentive or consideration to a physician based on the number of modifications, delays, or denials made by the physician.

[SB 1189 \(Pan and Jackson, Chapter 787\)](#)

Forensic Autopsies: Physicians and Surgeons

Requires that a forensic autopsy be conducted by a licensed physician and surgeon and requires that the results of a forensic autopsy can only be determined by a licensed physician and surgeon.

[SB 1408 \(Allen, Chapter 18\)](#)

Tissue Donation

Allows for the transplantation of organs into the body of a person when the donor of the organ has human immunodeficiency virus (HIV). The bill requires a physician and surgeon performing the transplantation of an organ from an HIV-reactive donor to ensure that the recipient is also HIV reactive and complying with federal law, as

specified. This bill exempts a physician and surgeon who performs organ transplants in compliance with this bill from disciplinary action. This bill contains an urgency clause to ensure that the provisions of this bill go into immediate effect upon enactment.

Prescription Drugs/Controlled Substances

[AB 1386 \(Low, Chapter 374\)](#)

Emergency Medical Care: Epinephrine Auto-Injectors

Permits a pharmacy to furnish epinephrine auto-injectors (EAI) to an authorized entity, as specified, if the EAI are furnished exclusively for use at or in connection with an authorized entity, as specified; an authorized health care provider provides a prescription and the records are maintained by the authorized entity for three years. This bill requires the authorized entity to create and maintain an operations plan related to its use of EAI, makes other technical and clarifying amendments and contains specified immunity provisions.

[AB 1668 \(Calderon, Chapter 684\)](#)

Investigational Drugs, Biological Products, and Devices

Authorizes the manufacturer of an investigational drug, biological product, or device that is not yet approved by the United States Food and Drug Administration (FDA) to make the investigational drug available to a patient with a serious or immediately life-threatening disease, when that patient has considered all other treatment options currently approved by the FDA, has been unable to participate in a relevant clinical trial, and for whom the investigational drug has been recommended by the patient's primary physician and a consulting physician. This bill specifies other criteria and requirements for the use of investigational drugs.

[AB 1748 \(Mayes, Chapter 557\)](#)

Pupils: Pupil Health: Opioid Antagonist

Authorizes school nurses and other trained personnel to use naloxone hydrochloride or another opioid antagonist to provide emergency medical aid to persons suffering, or reasonably believed to be suffering, from an opioid overdose.

[SB 482 \(Lara, Chapter 708\)](#)

Controlled Substances: CURES Database

Requires a health care practitioner that is authorized to

prescribe, order, administer or furnish a controlled substance to consult the CURES database to review a patient's controlled substance history before prescribing a Schedule II, III or IV controlled substance for the first time to that patient and at least once every four months thereafter, if the prescribed controlled substance remains part of the patient's treatment, with specified exemptions. This bill requires a health care practitioner to obtain a patient's controlled substance history from the CURES database no earlier than 24 hours before the medication is prescribed, ordered, administered, furnished or dispensed. If a health care practitioner is exempted from checking CURES before prescribing a controlled substance for the first time pursuant to this bill, they are required to consult CURES before subsequently prescribing a controlled substance to the patient at least every four months thereafter if the substance remains part of the treatment of the patient. This bill defines "first time" to mean the initial occurrence in which a health care practitioner intends to prescribe, order, administer, furnish or dispense a Schedule II, III, or IV controlled substance to a patient and has not previously prescribed a controlled substance to that patient.

This bill specifies that it is not operative until six months after the Department of Justice (DOJ) certifies that the CURES database is ready for statewide use and that DOJ has adequate staff, which, at a minimum, shall be consistent with the appropriation authorized in the Budget Act of 2016. This bill requires DOJ to notify the Secretary of State and the Office of Legislative Counsel of the date of that certification.

[AB 1069 \(Gordon, Chapter 316\)](#)

Prescription Drugs: Collection and Distribution Program

Authorizes a pharmacy that exists solely to operate the existing county-operated prescription drug collection and distribution program to repackage a reasonable quantity of donated medicine in anticipation of dispensing the medicine to its patient population. This bill requires the pharmacy to have repackaging policies and procedures in place for identifying and recalling medications; and requires the medication that is repackaged to be labeled with the earliest expiration date.

[SR 55 \(Bates, Adopted\)](#)

Relative to Drug Facts Week

This resolution makes legislative findings and recognizes the week of January 25-31 as Drug Facts Week.

Public Health

[AB 1639 \(Maienschein, Chapter 792\)](#)

Pupil Health: The Eric Paredes Sudden Cardiac Arrest Prevention Act

Establishes the Eric Paredes Sudden Cardiac Arrest Prevention Act and requires the California Department of Education to make available specified guidelines and materials on sudden cardiac arrest. This bill requires pupils and parents to sign informational materials before athletic participation, requires training of coaches and sets requirements for action in the event a pupil experiences specified symptoms.

[AB 1823 \(Bonilla, Chapter 661\)](#)

California Cancer Trials Program

Requests the University of California (UC) to establish and designate an institute or office with the authority to solicit and receive funds from business, industry, foundations, and other private and federal sources for the purpose of administering the Cancer Clinical Trials Program (the program) to increase patient access to cancer clinical trials. This bill establishes a five-member board to administer the program. This bill authorizes the UC to use its own state source funds for oversight and administration of the program relating to the initial start-up costs of the program only, provided the UC is reimbursed from federal and private source funds. This bill requires the program, on receipt of funds totaling \$500,000, to establish the Cancer Clinical Trials Grant Program to increase patient access to cancer clinical trials in underserved or disadvantaged communities and populations. This bill limits administrative expenses to 20% of funds that are made available, but authorizes the use of more than 20% for the first year of the program. This bill allows UC to discontinue the program for various reasons.

[AB 2325 \(Bonilla, Chapter 354\)](#)

Ken Maddy California Cancer Registry

Requires, on or after January 1, 2019, a pathologist diagnosing cancer to report cancer diagnoses to the California Department of Public Health (CDPH) by

electronic means in a format prescribed by CDPH and establishes a pilot project to enable CDPH and authorized users to conduct electronic specific data element searches of the information collected by the Ken Maddy California Cancer Registry.

[AB 2640 \(Gipson, Chapter 670\)](#)

Public Health: HIV

Requires a medical care provider or person administering a test for HIV to provide patients who test negative for HIV infection, and are determined to be at high risk for HIV infection by the medical provider or person administering the test, with information about methods that prevent or reduce the risk of contracting HIV, including, but not limited to, pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP), consistent with guidance of the federal Centers for Disease Control and Prevention (CDC).

[AB 2696 \(Gaines, B., Chapter 108\)](#)

Diabetes Prevention and Management

Requires CDPH to submit a report to the Legislature, as specified with certain criteria, regarding the prevention and management of diabetes and its complications. This bill requires CDPH to annually post specified information on its internet website.

[ACR 119 \(Chiu, Chapter 15\)](#)

Physician Anesthesiologist Week

This resolution designates the week of January 31, 2016, to February 6, 2016, inclusive, as Physician Anesthesiologist Week.

[SB 1095 \(Pan, Chapter 393\)](#)

Newborn Screening Program

Requires CDPH to expand statewide screening of newborns to include screening for any disease, as specified.

[SB 1159 \(Hernandez, Chapter 727\)](#)

California Health Care Cost, Quality, and Equity Data Atlas

Requires the California Health and Human Services Agency to research the options for developing a cost, quality, and equity transparency database that is consistent with the confidentiality of medical information in existing law.

[SCR 117 \(Pan, Chapter 96\)](#)

Palliative Care

This resolution encourages California to study palliative care and develop solutions, tools, and best practices for providing better patient-centered care and information to individuals with chronic diseases.

[SR 71 \(Berryhill, Adopted\)](#)

Relative to Organ Donation

This resolution makes legislative findings and proclaims the month of April 2016 as DMV/Donate Life Partnership Month in the State of California.

State Administration Mandates

[AB 635 \(Atkins, Chapter 600\)](#)

Medical Interpretation Services

Requires DHCS to work with identified stakeholders to conduct a study to identify current requirements for medical interpretation services as well as education, training, and licensure requirements, analyze other state Medicaid programs, and make recommendations on strategies that may be employed regarding the provision of medical interpretation services for Medi-Cal beneficiaries who are limited English proficient (LEP), in compliance with applicable state and federal requirements.

[AB 1962 \(Dodd, Chapter 405\)](#)

Criminal Proceedings: Mental Competence

Requires the Department of State Hospitals to establish guidelines on education and training for psychologists and psychiatrists to be appointed by the court to determine a defendant's mental competence.

[AB 2048 \(Gray, Chapter 454\)](#)

National Health Service Corps State Loan Repayment Program

Requires OSHPD, in its administration of the National Health Service Corps State Loan Repayment Program, to include all federally qualified health centers located in California on the program's certified eligible site list.

[AB 2745 \(Holden, Chapter 303\)](#)

Healing Arts: Licensing and Certification

This Board-sponsored bill allows all physician and surgeon licensees to apply for a limited practice license (LPL) at any time. This bill ensures that physicians who have a disabled

status license and want to change to an LPL meet the same requirements as in existing law for an LPL. This bill clarifies that the Board can deny a postgraduate training authorization letter for the same reasons it can deny an application for a license in existing law. This bill allows the Board to send a written request for medical records of a deceased patient to the facility where the care occurred or where the records are located without approval of the next of kin as long as reasonable efforts to get approval have been made.

[SB 1039 \(Hill, Chapter 799\)](#)

Professions and Vocations

Among other provisions, this bill requires that certain businesses that provide telephone medical advice services (TMAS) to a patient at a California address be registered as a TMAS and further requires TMAS to comply with the requirements established by the Department of Consumer Affairs (DCA). This bill specifies that the respective healing arts licensing boards (including the Medical Board) shall be responsible for enforcing the TMAS laws and any other laws and regulations affecting California licensed health care professionals providing TMAS.

[SB 1174 \(McGuire, Chapter 840\)](#)

Medi-Cal: Foster Children: Prescribing Patterns: Psychotropic Medications

This bill adds to the Board's priorities, repeated acts of clearly excessive prescribing, furnishing, or administering psychotropic medications to children without a good faith prior exam and medical reason. This bill requires the Board to confidentially collect and analyze data submitted by DHCS and the Department of Social Services (DSS), related to physicians prescribing psychotropic medications to foster children. This bill requires the Board to review this data on a quarterly basis to determine if any potential violations of law or excessive prescribing of psychotropic medications inconsistent with the standard of care exist and, if warranted, conduct an investigation. This bill specifies that the Board shall contract for consulting services from, if available, a psychiatrist who has expertise and specializes in pediatric care for the purpose of reviewing the data provided to the Board. This bill requires the consultant to consider the treatment guidelines published by DHCS and DSS when assessing prescribing patterns. If the Board investigates a physician for inappropriate prescribing and concludes that there

is a violation of law, the Board must take appropriate disciplinary action. The Board is required to report this data annually to the Legislature in its annual report.

On or before January 1, 2022, this bill requires the Board, in conjunction with DHCS and DSS, to conduct an internal review of its data, investigative, and disciplinary activities undertaken for the purpose of determining the efficacy of these activities and the Board must revise its procedures, if determined necessary. This bill will sunset in 10 years, unless a later enacted statute deletes or extends that date.

[SB 1177 \(Galgiani, Chapter 591\)](#)

Physician and Surgeon Health and Wellness Program

Authorizes the establishment of a Physician and Surgeon Health and Wellness Program (PHWP) within the Board. The PHWP will provide for the early identification of, and appropriate interventions to support a licensee in the rehabilitation from substance abuse and to ensure that the licensee remains able to practice medicine in a manner that will not endanger the public health and safety. The PHWP is required to provide for the education of all licensed physicians and surgeons with respect to the recognition and prevention of physical, emotional, and psychological problems; offer assistance to a physician in identifying substance abuse problems; evaluate the extent of substance abuse problems and refer the physician to the appropriate treatment by executing a written agreement with the physician participant; provide for the confidential participation by a physician with substance abuse issues who does not have a restriction on his or her practice related to those substance abuse issues; and comply with the Uniform Standards for Substance-Abusing Healing Arts Licensees as adopted by the Substance Abuse Coordination Committee of the DCA pursuant to Business and Professions Code section 315.

Authorizes the Board to contract with a private third-party independent administering entity to administer the program that must meet specified requirements and must have a system for immediately reporting a physician from the program to the Board, including but not limited to, a physician who withdraws or is terminated from the program. This bill requires a physician, as a condition of participation in the PHWP, to enter into an individual agreement with the PHWP and agree to pay expenses

related to treatment, monitoring, laboratory tests, and other activities specified in the written agreement. Any fees collected from participants shall be deposited into the new fund created by this bill and upon appropriation by the Legislature, shall be available for support of the PHWP. The Board is required to adopt regulations to determine the appropriate fee that a physician participating in the PHWP shall pay. The fee is required to be set at a level sufficient to cover all costs of participating in the PHWP, including any administrative costs incurred by the Board to administer the PHWP. This bill allows the Board, subject to appropriation by the Legislature, to use moneys from the Board's existing contingent fund to support the initial costs for the Board to establish the PHWP.

[SB 1261 \(Stone, Chapter 239\)](#)

Physicians and Surgeons: Fee Exemption: Residency

Deletes the California residency requirement for voluntary status licenses. This bill allows an out-of-state individual to apply for a California license and ask for it to be put in voluntary status. This option will result in the initial license fee and/or subsequent renewal fees being waived. In order to be issued a voluntary status license, a licensee must certify to the Board that the sole purpose of his or her license is to provide voluntary, unpaid service.

[SB 1478 \(Business, Professions and Economic Development Committee\)](#)

Healing Arts

Among other provisions, this bill clarifies that the annual fee for CURES shall not be applied to licensees in retired or inactive status, beginning July 1, 2017.

Moving?

Remember to notify the Board within 30 days of your new address.

(Per Business and Professions Code section 2021(b)).

Find everything you need at:

http://www.mbc.ca.gov/Licensees/Address_of_Record.aspx

Prescribing Psychotropic Medications to Children in Foster Care

Physicians who prescribe for foster children or wards of the court should be aware of changes to the Welfare and Institutions Code ([section 369.5](#) and [section 739.5](#))



as well as the California Rules of Court ([rule 5.640](#)) which took effect in 2016. The changes concern requirements for prescribing psychotropic medications to minors who have been removed from the custody of their parents or guardian. All psychotropic medications administered to such children must be authorized by the court. Physicians must fill out the six-page [Form JV-220 \(A\)](#) in order for the court to authorize the administration of such drugs. Physicians must fill out the four-page [Form JV 220 \(B\)](#) to continue a psychotropic medication previously-prescribed by the same physician.

These forms replace other forms used previously, which are no longer acceptable to the court and should be discarded. Using outdated forms will slow down the process of getting appropriate treatment for the children.

The form filled out by the treating physician is considered by the judge, who also considers input from several parties prior to authorizing the medication: the child, the child's caregiver, the parents, the child's Indian tribe, and the Court Appointed Special Advocate, if applicable. For more information, please see the [Guide to Psychotropic Medication Forms](#) (form JV-217-INFO).

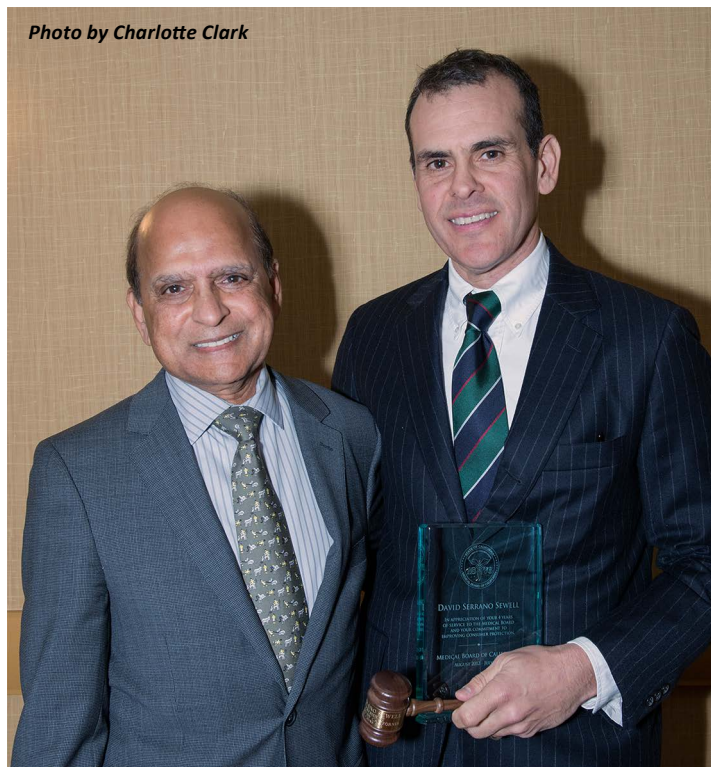
Former Board President Honored

David Serrano Sewell, former president of the Medical Board of California, was honored for his work at the Board's January meeting in Sacramento. He is pictured at right with current Board President Dr. Dev GnanaDev. In recognition of his service to the Board, the Board members gave Mr. Serrano Sewell a gavel and a plaque.

Mr. Serrano Sewell, an attorney, was originally appointed to the Board in 2012 by Governor Jerry Brown. He served as the Board's vice president before being elected president in 2014, then re-elected in 2015.

A long-time health advocate, he was appointed in 2014 as regional vice president for the San Francisco district of the Hospital Council of Northern and Central California. He also previously served on the California Institute for Regenerative Medicine's Independent Citizens Oversight Committee, and was a Deputy City Attorney for the City and County of San Francisco.

Photo by Charlotte Clark



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/Licensees/Address_of_Record.aspx
(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)

Peer Review/Health Facility Reporting:

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

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

Reporting 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-803.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)

Reporting Transfer of Planned Out-of-Hospital Births:

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

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

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:
<https://www.cdph.ca.gov/HealthInfo/Pages/ReportableDiseases.aspx>
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§ionNum=11160
(Penal Code §11160)
Reportable to local law enforcement.

Child abuse:

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

Adult/Elder abuse:

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

Injuries resulting from neglect or abuse:

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

Lapses of Consciousness:

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

Pesticide poisoning/illness:

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

Please Take Our Survey

Please take a moment to share your thoughts about the Medical Board's Newsletter. Have a particular section that you like or an idea on how to improve our publication? We want to hear from you! Click the link below to take the survey:
https://www.surveymonkey.com/s/mbc_newsletter_survey



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 Treatment
(Health and Safety Code §109275)

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

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

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

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

Mandatory Physician Signage

Notice to consumer:

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

(Title 16, California Code of Regulations §1355.4)

Education disclosure:

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

(Business and Professions Code §680.5)

Prostate cancer "Be Informed" notice:

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

(Health and Safety Code §109282)

Breast cancer "Be Informed" notice:

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

(Health and Safety Code §109277)



Pill Can Protect Users from Contracting HIV From Sex or Used Needles

A daily pill can reportedly protect those who are HIV negative and at a substantial risk of contracting HIV from sex or used needles. The pill, a fixed dose combination tablet containing emtricitabine and tenofovir disoproxil fumarate, is marketed under the brand name Truvada. The Centers for Disease Control and Prevention (CDC) said regular daily dosing of the pills, known as pre-exposure prophylaxis or PrEP, can significantly reduce an at-risk person's chance of contracting HIV. The CDC has said that one in three physicians and nurses nationwide say they have never heard of PrEP. Approximately 5,000 new cases of HIV are diagnosed in California each year. More information and PrEP resources for physicians can be found at <https://www.cdc.gov/hiv/risk/prep/>.

Talking To Patients About Opioids May Reduce Addiction Risk

A research brief published in *Annals of Family Medicine* suggests that when physicians take time to discuss the potential for long-term addiction to opioid painkillers with patients, the patients are less likely to save unused pills for future use by themselves or family members. Saving pills is considered "high-risk abuse behavior." The brief is based on two studies – one national and the other done in Massachusetts. Respondents who recalled speaking to their physician about addiction risks were 60 percent less likely to save pills for future use, researchers said. For more information, see <http://www.annfammed.org/content/14/6/575.full>.

Flu Vaccines for the 2016-2017 Season

According to the Centers for Disease Control and Prevention (CDC), everyone over the age of six months should be vaccinated annually against influenza (flu). Available vaccines protect against either three (trivalent vaccines) or four (quadrivalent vaccines) types of flu expected to be most prevalent this season.

New this year from the CDC: nasal spray flu vaccine (live attenuated influenza vaccine or LAIV) should not be used during 2016-2017. For free patient education materials in multiple languages, visit <http://www.cdc.gov/flu/professionals/>.

Tech Med Corner

Travelers Can Receive Automated ZIKA Updates on the Fly

Travelers concerned about Zika virus can use a smart phone to receive automated text messages from the Centers for Disease Control and Prevention (CDC) regarding the presence of Zika at their destination(s). To receive the messages, enter this number in your contact list: 855-255-2606. Then send a text message to that number with the word PLAN. Almost immediately, a text will be received asking what state or country the traveler is visiting. These must be entered one at a time. An almost-instantaneous text is received, telling the traveler whether or not there is a Zika outbreak in that area then referring the traveler to a website for detailed information. The updates can be stopped at any time by texting the word STOP.

According to the CDC, pregnant women should not travel to areas with active Zika virus transmission. This includes numerous countries as well as parts of Florida and Texas.

CDC Offers Webinar on Tickborne Diseases

In the United States, some ticks carry pathogens that can cause human disease. Perhaps the best known of these in California are Lyme disease and tularemia. Other tickborne diseases found in California include: anaplasmosis, tickborne relapsing fever (TBRF) and 364D rickettsiosis (*Rickettsia phillipi*, proposed).

A webinar called "Trends in Tickborne Diseases in the United States," developed by the U.S. Department of Health and Human Services, is now available for viewing at <http://www.cdc.gov/ticks/diseases/index.html#video>. The video lasts slightly under one and a half hours and includes a segment by Dr. Alan Barbour from the University of California, Irvine.

Steven M. Thompson Physician Corps Loan Repayment Program Recipient



Dr. Claudia Borzutzky enjoying a day in the redwoods with husband Angel and children Violet, 6; Theo, 9; and Maya, 11.

As a student at the University of California, Berkeley, Claudia Borzutzky began volunteering at a teen clinic in Oakland. Before she knew it, she was "... falling in love with urban teenagers, quirky as they may be." She made the decision to devote her career to working with young people.

She went to medical school at the University of California, Los Angeles (UCLA), then completed a family medicine residency at Harbor-UCLA Medical Center, one of Los Angeles' county hospitals, followed by a fellowship in adolescent medicine at Children's Hospital Los Angeles (CHLA). "I feel most fulfilled when working with and advocating for underserved youth," she said.

"After spending several years working in college health, I had the opportunity to return to working with underserved teens at CHLA, where the patient population is both medically and psychosocially complex, and largely publicly insured. I now had three children and was living in one of the most expensive cities in the United States, so the financial decision to change jobs, which involved a pay cut, was not an easy one," Dr. Borzutzky explained.

She applied for and was awarded a Steven M. Thompson Physician Corps Loan Repayment Program (STLRP) grant. "My financial stress was greatly alleviated and, moreover, I felt not only encouraged and supported, but rewarded for working with this high need population," she said.

Her work at CHLA is varied, which she loves. "Some days I see teens and young adults with chronic illness and disabilities which have greatly impacted their lives. Their strength and resilience, as well as that of their families, never ceases to amaze me," Dr. Borzutzky said. "Other days, I see youth in need of sexual and reproductive health care. I relish the opportunity to help them stay on track with their education and life plans by helping to prevent unplanned pregnancies and sexually transmitted infections. And I know, too, that they love having a supportive, non-judgmental, respectful medical provider to whom they can turn for this care." She also works with morbidly obese youth who are trying to turn their health around through difficult but necessary lifestyle change.

"In short, I feel like I am doing my life's work. However, given the reality of today's U.S. health economics, without the assistance provided by STLRP, I would be much more hard-pressed financially. I am so grateful and indebted to you – thank you STLRP!" Dr. Borzutzky said.

Got Debt?

Physicians working in underserved areas have until February 28, 2017 to apply for up to \$105,000 in student loan repayment funds. To learn more about the Steven M. Thompson Physician Corps Loan Repayment Program, please contact the Health Professions Education Foundation at (916) 326-3640 or visit their website at www.oshpd.ca.gov/HPEF.

Doctor Shares His Expert Reviewer Experience

By Susan Wolbarst

Dr. Daniel Delgado is a full-time clinician who has practiced emergency medicine at a community hospital in Fresno for more than 30 years. He first got involved as a reviewer about 16 years ago, participating in a panel review of physician quality. Since then, he has analyzed about a dozen cases as an expert reviewer for the Medical Board of California (Board). What follows is an interview with him about his experience as an expert reviewer. What motivated him to become an expert reviewer? "At the outset, it was the intellectual challenge and a desire to contribute," he said. "I strongly believed that quality review of physician care is essential to the profession and is what our patients deserve. With a little experience and wisdom, I have come to more deeply comprehend the importance of what we in our profession do. Who we are and what we represent is immensely important to society and we each have a personal responsibility to our patients and to each other."

Dr. Delgado said the best thing about serving as an expert reviewer is how much he learns from each case. "It's not just the review of the medical evidence and reflection on the standard of care. It's also a better understanding of how we make decisions and what influences our actions. I think this has helped me be a better physician and helps me better enjoy what I do as a clinician."

The worst part, by contrast, is hitting the deadline, Dr. Delgado said. "We are given a time frame to complete the reviews, but the investigators are always gracious about letting me have a little more time. I know that

many people are expectantly waiting for resolution of these reviews and everyone involved deserves my best effort in analysis and communication. I really do spend a great many hours sweating over these cases," he said.

Dr. Delgado has testified twice at hearings. "Overall, testifying was not an especially difficult experience. Staffers were kind and helpful in orienting me to the process ... Although the hearings are conducted in a courtroom format, as a witness, I did not feel the same kind of adversarial tension that I have observed in typical criminal or civil litigation. I felt as though my role was to simply articulate medical practice and professional standards, and the goal was a search for the truth and finding fairness," he said.

He attended the Board's Expert Reviewer Training on November 5, 2016, at the University of California, Los Angeles, an event he categorized as "outstanding." Dr. Delgado said, "Although over the years I had repeatedly reviewed written training material and have had innumerable conversations with Board personnel, the opportunity to have a focused day-long session with a thorough discussion of the depth and nuance of the review process was extremely helpful ... it was very gratifying to share this event with a room full of other reviewers, each with different specialties and experiences, who were able to contribute both questions and answers. These reviewers were uniformly a very astute, accomplished, and independent group of physicians who obviously deeply care about the review process. What I came away with is the confirmation that



the Board review process is led by physicians and committed to fairness, accuracy, and integrity. I simply wouldn't participate if I had any other impression."

Dr. Delgado said he would recommend serving as an expert reviewer to his colleagues because, "our profession needs you. Questions of care will inevitably emerge. Society and our patients deserve that these questions are respected and that they are fairly and diligently reviewed. Our profession has rightly declared that the expertise of physicians is essential to a full understanding and interpretation of a physician's actions. So that means we need doctors to step up and perform these reviews. Because if we don't do it, someone less qualified will do it for us."

To become a Board expert reviewer or to be notified of future expert reviewer training opportunities, email mbcmedicalexpertprogram@mbc.ca.gov or call Rebecca Grigsby at (818) 539-8314 or Susan Goetzinger at (818) 551-2129.

Update on Coccidioidomycosis in California

By Gail Sondermeyer Cooksey, M.P.H., Barbara Materna, Ph.D., C.I.H., and Duc Vugia, M.D., M.P.H.
Infectious Diseases Branch and Occupational Health Branch, California Department of Public Health

Coccidioidomycosis, commonly known as Valley Fever, is one of the most commonly reported diseases in California with over 3,000 cases reported in 2015.¹ It is caused by the fungal pathogen *Coccidioides spp.* which resides in the soil of endemic areas. When soil in those areas is disturbed, fungal spores can become airborne and, following inhalation, may cause a respiratory infection.

Although most of those infected will not have any symptoms, symptomatic disease will develop in approximately 40% of patients and can range from a self-limited influenza-like illness to severe disseminated disease, including meningitis. Most of those infected will recover and develop lifelong immunity; however, coccidioidomycosis can be fatal and contributes to an average of 78 deaths in California annually.² Persons at risk for severe coccidioidomycosis include the elderly, African Americans, Filipinos, pregnant women, and persons with diabetes or weakened immune systems.

Endemic areas for coccidioidomycosis include the southwestern United States, particularly Arizona and California, as well as parts of Mexico and Central and South America. Recent reports have also shown that the range of coccidioidomycosis has expanded as far north as Washington State.³

Reported Cases in California

In California, providers and laboratories are required to report cases of coccidioidomycosis to the local health department, as mandated by Title 17 of the California Code of Regulations. In the past decade, the annual number of coccidioidomycosis cases reported in California reached a peak of 5,217 in 2011, declined to 2,293 in 2014, and then increased to 3,064 in 2015.¹

In California, the highest coccidioidomycosis rates are reported in the Central Valley and Central Coast regions, particularly Fresno, Kern, Kings, Madera, Merced, Monterey, San Luis Obispo, and Tulare counties (see map). Although more than half of California cases are typically residents of these counties, it is likely the *Coccidioides* fungus is also present in other counties outside of this region.

Soil Disruption and Risk of Infection

Occupational or recreational activities that disrupt soil in endemic areas can increase the risk of coccidioidomycosis. Natural events, such as strong winds or earthquakes, can also disrupt soil, and therefore anyone who is outdoors in an endemic area may become infected. Since coccidioidomycosis has a low infectious dose, even limited travel through an endemic area, such as driving through the California Central Valley, could lead to an infection.

During 2011–2014, an outbreak of coccidioidomycosis occurred among workers constructing solar power farms in San Luis Obispo County resulting in 44 confirmed cases, of which nine were hospitalized and two had disseminated disease.⁴ In 2012, an outbreak with five confirmed and five probable cases occurred among cast and crew members at an outdoor television filming event in Los Angeles County where soil-disruptive work was done to grade roads and parking areas and create the set.⁵ For both outbreaks, review of Doctor's First Reports of Occupational Injury and Illness were essential in identifying and investigating the outbreak. Providers should consider coccidioidomycosis when evaluating workers with prolonged febrile illness or unresolved pneumonia who work outdoors in endemic areas, and they should follow all statutory requirements for documenting and reporting an occupational illness. Providers can find a free continuing medical education (CME) course titled, "Update on Coccidioidomycosis Occupational Health Issues" at the following link: <https://cmecalifornia.com/Activity/5210283/Detail.aspx#lnk5210283>.

Resources on Diagnosis and Management

It is important for providers to be familiar with the signs and symptoms that may warrant testing for coccidioidomycosis. The "2016 Infectious Diseases Society of America (IDSA) Clinical Practice Guideline for the Treatment of Coccidioidomycosis" was recently published by a panel of experts.⁶ The revised guidelines "expanded recommendations for diagnosing and managing early coccidioidal infections," and the recommendations are organized "to address actionable questions concerning the entire spectrum of clinical syndromes," from initial pulmonary infection to pulmonary and extrapulmonary complications.

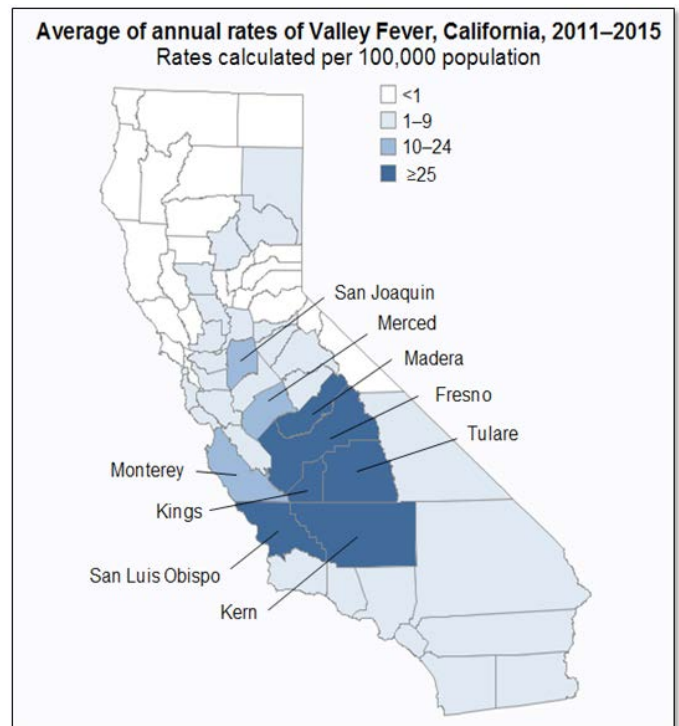
What Physicians Can Do

With the expanding range of coccidioidomycosis in the United States and the recent increase in California, it is an important time for California providers to:

- Be conscious that coccidioidomycosis exists in many parts of California but is most common in the Central Valley and Central Coast;
- Inform diagnostic decisions when a patient's clinical presentation is consistent with coccidioidomycosis by:
 - Asking patients about occupation and possible exposure to excessive dust, particularly in an endemic area; and
 - If outside of the Central Valley and Central Coast, asking patients about recent travel;
- Review the recent IDSA guidelines in order to refresh knowledge on how to diagnose and treat or when to refer patients with coccidioidomycosis; and
- Report cases of coccidioidomycosis to their local health departments.

For more information and CME credit training on coccidioidomycosis, providers can reference the links below.

CDPH Valley Fever Web Page: Includes posters, factsheets, and brochures for patient education (English, Spanish, and Tagalog), provider resources, and data and statistics.
<http://www.cdph.ca.gov/healthinfo/discond/Pages/Coccidioidomycosis.aspx>



Work-Related Valley Fever

<http://www.cdph.ca.gov/programs/ohb/pages/cocci.aspx>

Continuing Medical Education

Update on Coccidioidomycosis Occupational Health Issues.
<https://cmecalifornia.com/Activity/5210283/Detail.aspx#lnk5210283>

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Midwifery Expanding in Scope and Expertise

By Natalie Lowe
Licensing Program Manager

Have you had the opportunity to work with a licensed midwife yet? Chances are if the answer is no, you may be doing so in the very near future. Licensed midwives (midwives) have been regulated by the Medical Board of California (Board) for over 20 years, during which time the profession has continuously grown, from the number of midwives practicing in California, to the expanded scope and expertise of the individuals in the field. Through years of training, client interactions, and the sheer passion for their work, midwives are raising the standards and expectations of their profession.

In California, midwives can be found practicing in a variety of settings, including private offices, physician offices, clinics, client homes, maternity homes, birthing centers, and hospitals, providing an array of services to women, ranging from well-women health services to delivering and caring for the newborn infant and mother during the postnatal period.

In the midwifery community, it is widely known that the best approach to caring for an expecting mother is to understand her needs, and to assist with fulfilling her wishes for the ideal delivery. However, when that ideal delivery in an out-of-hospital setting does not come to fruition, whether it be due to a lack of progress, a sign of fetal distress, or any other number of elective or emergent reasons, a transfer to the local hospital or emergency room may be required. When this occurs, knowing your role is critical.

Upon recognizing the need for a transfer, the midwife will immediately make arrangements to transfer the client to the hospital, which may include calling ahead to inform hospital staff of the impending arrival. As outlined in [*Business and Professions \(B&P\) Code section 2510*](#), during the transfer the midwife must provide the client's records, including prenatal records, and speak *directly with the receiving physician* about labor up to the point of transfer. This may be a brief conversation that occurs by telephone or in person, but must be sufficient to allow the midwife to provide an overview of the treatment that has been rendered. Following the transfer to a physician, the midwife will, if possible, remain in consultation with the physician in accordance with the client's wishes, remain present throughout the birth, and may resume postpartum care, if appropriate.

[*B&P Code section 2510*](#) also requires *the hospital* to report each transfer of a planned out-of-hospital birth to the Board and to the California Maternal Quality Care Collaborative (CMQCC) using a standardized form developed by the Board ([*Transfer Form*](#)), available on the Board's website. The Transfer Form may be completed by the receiving physician, a hospital administrator, or another health professional appropriate to review and provide applicable information related to the transfer. Upon completion, the Transfer Form should be submitted to the Board and CMQCC.

As with any profession, the laws and regulations pertaining to the practice of midwifery have evolved over the years, resulting in an expanded

scope of practice, and the ability to provide additional services to clients. The passage of [*Assembly Bill \(AB\) 1308 \(Bonilla, Chapter 665, Statutes of 2013\)*](#) brought significant change to the practice of midwifery in California, most notably, the removal of physician supervision as a requirement for midwives to practice, and the ability for midwives to directly obtain supplies and devices, obtain and administer drugs and diagnostic tests, order testing, and receive reports consistent with the practice of midwifery.

Coinciding with the expanded scope, new limitations were placed on client selection. [*B&P Code section 2507 \(b\)\(1\)*](#) allows a licensed midwife to assist clients if they are in a normal pregnancy and childbirth, which is defined as meeting the following conditions: an absence of any preexisting maternal disease or condition likely to affect the pregnancy, an absence of any significant disease arising from the pregnancy, there is a singleton fetus, there is a cephalic presentation, the gestational age of the fetus is greater than 37 0/7 weeks and less than 42 0/7 completed weeks of pregnancy, and the labor is spontaneous or induced in an outpatient setting.

If at any time the client presents with a preexisting maternal disease or condition that would likely affect the pregnancy, or has a significant disease which has arisen from the pregnancy, in order for the midwife to continue care, the midwife must provide the client with a referral for an examination by a physician and surgeon trained in obstetrics and gynecology. Following the examination, if the physician

Midwifery (continued on page 23)



Midwifery (continued from page 22)

determines that the risk factors presented by the client's disease or condition are not likely to significantly affect the course of pregnancy and childbirth, care can be resumed by the midwife. If the physician determines that the client's condition or concern has *not* been resolved, the licensed

midwife may not resume primary care of the client. Should this occur, if authorized by the client, the midwife may provide concurrent care with a physician, be present during the labor and childbirth, and may resume postpartum care, if appropriate.

The Board has been tasked with drafting regulatory language to define "preexisting maternal disease or condition" and "significant disease arising from the pregnancy". Pursuant to [B&P 2507 Code section \(b\)\(3\)](#), the Board must adopt regulations to identify a list of conditions requiring a referral to a physician for consultation prior to the midwife continuing care for a particular client. Interested parties have been working to draft regulations, and will be meeting throughout the spring to ensure that the language drafted will uphold the Board's mission of providing consumer protection and promoting access to quality medical care.

To get involved, obtain additional information on the midwifery program, be informed of changes to laws and regulations, or to find out about upcoming meetings, visit the Board's [website](#) or contact the Board at 1-800-633-2322.

What Physicians Need to Know about Supervising Physician Assistants

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

The traditional role of physicians as the single health care clinicians has evolved over recent decades into a system that includes numerous health care providers with many titles, different training, varied scopes of practice, and diverse regulatory requirements.

Non-physician health care providers integrated into the formal health care system include physician assistants (PA), nurse practitioners (NP), midwives and pharmacists. These providers have formal certification and accreditation through different governmental licensing bodies. All are restricted in their health care practice by California state laws. It is the objective of this article to review the relevant regulations regarding the physician's responsibilities for clinical patient care collaboration with PAs.

Most importantly, all care provided to a patient by a PA is the ultimate responsibility of the supervising physician.

A PA is a licensed health care professional, trained to provide patient evaluation, education, and health care services. NPs and PAs are often referred to as mid-level physician health extenders. A PA works with a physician to provide medical care and is regulated by the Physician Assistant Board (PAB).

Supervising PAs (continued on page 24)

Physicians who plan to supervise PAs should carefully review **[Business and Professions \(B&P\) Code sections 3502](#)** and **[3502.1](#)** and **[Section 1399.545 of Title 16 of the California Code of Regulations](#)** (CCR). A complete listing of supervision requirements is available on the PAB's website **www.pac.ca.gov**.

Current law allows a physician to supervise no more than four PAs at any moment in time with some exceptions. Per **[16 CCR section 1399.545](#)**, the physician must be available in person to the PA or be available via electronic communications at all times when the PA is caring for patients.

PA issues regarding health care regulations related to the Medical Practice Act of California are reviewed by the PAB and may include quality of care, felony charges, peer review **[B&P Code section 805](#)** reporting, overprescribing, sexual misconduct, impairment, corporate practice of medicine, and misleading advertisement. These investigations, as with investigations of physicians, are integrated with the Department of Justice. Physicians should review a PA's background in the context of these issues before a supervision agreement is considered.

Before authorizing a PA to perform any medical procedure, the supervising physician is responsible for evaluating the PA's education, experience, knowledge, and ability to perform the procedure safely and competently. In addition, the physician should verify that the PA has a current California license issued by the PAB. Physicians have been prosecuted for allowing PAs without current licenses to practice medicine on patients and have been found guilty of aiding and abetting the unlicensed practice of medicine.

The supervising physician is required to adopt written protocols that specifically guide the actions of the PA. The supervising physician must use one or more of the following mechanisms to ensure adequate supervision of the PA:

- (1) The supervising physician shall review, countersign, and date a sample consisting of, at a minimum, 5 percent of the medical records of patients treated by the PA functioning under the protocols within 30 days of the date of treatment by the PA; and/or

- (2) The supervising physician and PA shall conduct a medical records review meeting at least once a month during at least 10 months of the year. During any month in which a medical records review meeting occurs, the supervising physician and PA shall review an aggregate of at least 10 medical records of patients treated by the PA functioning under protocols. Documentation of medical records reviewed during the month shall be jointly signed and dated by the supervising physician and surgeon and the PA; and/or
- (3) The supervising physician shall review a sample of at least 10 medical records per month, at least 10 months during the year, using a combination of the countersignature mechanism described in (1) and the medical records review mechanism described in (2). During each month for which a sample is reviewed, at least one of the medical records in the sample shall be reviewed using the mechanism in (1) and at least one of the medical records in the sample shall be reviewed using the mechanism described in (2).

The supervising physician shall select for review those cases that by diagnosis, problem, treatment, or procedure represent, in his or her judgment, the most significant risk to the patient.

The PA Practice Act and PA regulations require a supervising physician to delegate in writing, for each supervised PA, those medical services which the PA may provide. That document is referred to as a Delegation of Services Agreement (DSA). The DSA is used by supervising physicians and PAs to meet requirements of **[B&P Code section 3502](#)**. The DSA is the foundation of the relationship between a supervising physician and the PA, and specifies the name of the supervising physician and the PA, what types of medical services the PA can perform, how they are performed, how the physician will provide supervision, and what type of medications the PA will transmit on behalf of the supervising physician.

Medical tasks, which are delegated by a supervising physician, may be only those that are usual and customary to the physician's practice. Physicians have been



investigated and disciplinary action has been taken by the Medical Board of California (Board) against supervising physicians who do not have appropriate training to oversee the PA's practice. PAs may not be majority owners of a medical practice per the portion of the Corporations Code dealing with professional corporations, beginning with [section 13400](#). Furthermore, PAs may not hire their supervisors. For further details, refer to corporate practice of medicine laws. In one case reviewed by the Board, a physician anesthesiologist without liposuction training was listed as the supervising physician of a PA who was performing lipo-sculpting procedures. The PA had opened the body sculpting business and hired the anesthesiologist. Both the physician and the PA were disciplined.

Current law permits PAs to write and sign prescription drug orders when authorized to do so by their supervising physician for Schedule II-V medications upon meeting certain conditions. [B&P Code section 4024](#) authorizes licensed pharmacists to dispense drugs or devices based on a PA's drug order. Current law also allows PAs to obtain their own U.S. Drug Enforcement Administration (DEA) numbers for use when writing prescription drug orders for controlled substances. A PA cannot administer, provide, or issue a drug order to a patient for Schedule II through Schedule V controlled substances without advance approval by the supervising physician unless

the PA has completed an education course that covers controlled substances and meets standards approved by the PAB. If the PA will administer, provide, or issue a drug order for Schedule II controlled substances, the course must contain a minimum of three hours exclusively on Schedule II controlled substances. Completion of these training requirements must be verified and documented.

The supervising physician must use one or more of the following mechanisms to ensure adequate supervision of the administration, provision, or issuance by a PA of a prescription drug order to a patient for Schedule II controlled substances:

- (1) The physician supervisor must review, sign, and date the patient's medical record, within seven days; or
- (2) If the PA has completed the education course identified above, the supervising physician must review, sign and date, within seven days, a sample consisting of the medical records of at least 20 percent of the patients cared for by the PA.

All California-licensed health care providers, including PAs authorized to prescribe, order, administer, furnish, or dispense Schedule II, III, and IV controlled substances, must be registered to access CURES (Controlled Substance Utilization Review and Evaluation System) as required by [California Health and Safety Code section 11165.1](#).

Health care providers who provide continued pain management to patients should be familiar with the Guidelines for Prescribing Controlled Substances for Pain published by the Board at www.mbc.ca.gov/licensees/prescribing/pain_guidelines.pdf. Many PAs and their supervising physicians have received disciplinary action against their licenses by the PAB and the Board for departing from the standards of care regarding controlled substances prescribing.

Physicians who plan to supervise PAs should educate themselves about the significant responsibilities they take on as supervising physicians. Overlooking these responsibilities can, and often do, trigger action by the Board against the supervising physician's license, but knowing and following the law protects patients as well as the physician's license.

Which License Status Is Right for You?

As physicians plan for retirement, questions often arise about choosing a license status that would be most appropriate for the individual. Just answering the question, "Are you retired? Yes or No," on the physician survey included with each renewal notice does not change the status of your license.

Active Status

An active status license allows full and unrestricted practice of medicine in California. Such a license must be renewed every two years. It expires at midnight on the last day of the physician's birth month. The cost to renew an active license is \$783 per renewal plus \$25 to the Steven M. Thompson Physician Corps Loan Repayment Program and a \$12 mandatory fee to the Controlled Substance Utilization Review and Evaluation System/Prescription Drug Monitoring Program (CURES/PDMP) for a total cost of \$820. Renewal also requires 50 hours of continuing medical education (CME) every two years.

Retired License

A retired license status currently requires the following mandatory fees every two years: \$25 to the Steven M. Thompson Physician Corps Loan Repayment Program and a \$12 mandatory fee to the CURES/PDMP for a total cost of \$37. (Please note: a new law, SB 1478, Committee on Business, Professions and Economic Development, Statutes of 2016, Chapter 489, which takes effect July 1, 2017, will exempt physicians whose license is in a retired status from the CURES fee requirement.) No CME is required.

A physician can apply to place his or her renewed and current California

medical license in a retired status at any time by submitting a completed application to the Board. Once a license is placed in a retired status, one cannot practice medicine or write prescriptions. If a physician decides to come out of retirement status, an application to restore the license must be submitted to the Board. The full fee for an active license must be paid and documentation showing completion of 50 hours of CME must also be submitted before an active license is issued.

Disabled/Limited Practice License

A disabled license involves the complete inability to practice medicine.

To obtain a disabled license status a physician must submit a completed application to the Board. At the time of the application the physician must demonstrate to the satisfaction of the Board that he or she is unable to practice due to a disability. Once a license is placed in a disabled status, the physician cannot practice medicine.

A disabled status requires the following mandatory fees every two years: \$25 to the Steven M. Thompson Physician Corps Loan Repayment Program and a \$12 mandatory fee for the CURES/PDMP for a total cost of \$37. (Please note: a new law, SB 1478, Committee on Business, Professions and Economic Development, Statutes of 2016, Chapter 489, which takes effect July 1, 2017, will exempt physicians whose license is in a retired status from the CURES fee requirement.) CME is required unless a waiver is requested and approved due to the disability.

When applying for a limited practice license, a physician signs an agreement with the Board, under penalty of perjury, to limit his or her practice in the manner prescribed by a reviewing physician. A limited status allows the physician to continue to practice, albeit in a limited capacity, and requires the physician to pay the full licensing fee as well as complete the required CME hours.

To return to full practice from any disabled/limited practice license, the physician must prove to the satisfaction of the Board that the disability no longer exists, or does not affect his or her ability to practice medicine safely. Under new law (AB 2745, Holden, Chapter 303, Statutes of 2016) the Board is also authorized to require the physician to undergo an independent clinical evaluation to assess his or ability to practice medicine safely.

Answers to frequently asked questions about disabled licenses are available on the Board's website at http://www.mbc.ca.gov/Licensees/Disabled_Status_FAQ.aspx.

Inactive No-Practice License

A physician who wishes to retain his license while not actively engaged in the practice of medicine can apply to place his or her renewed and current California medical license in an inactive status by submitting a completed application to the Board. Once a license is placed on inactive status, one cannot practice medicine.

No CME is required, however there are no fee exemptions or reductions for the inactive status. (However, SB 1478, which takes effect July 1, 2017, will exempt physicians whose license is in inactive status from the

CURES fee requirement.) If and when a physician decides to restore his or her license to a full active status, an application to restore the license must be submitted to the Board along with documentation showing completion of 50 hours of CME.

Answers to frequently asked questions about an inactive, no-practice license are available on the Board's website at http://www.mbc.ca.gov/Licensees/Inactive_License_FAQ.aspx.

Military License

A physician who is engaged in full-time training or active service in the Armed Forces or in the United States Public Health Service may apply to place his or her renewed and current California medical license in a military status. A military license restricts the physician to practicing only on military bases and facilities and caring only for military personnel and their dependents.

A military license requires the following mandatory fees every two years: \$25 to the Steven M. Thompson Physician Corps Loan Repayment Program and a \$12 mandatory fee for the CURES/PDMP for a total cost of \$37. The licensee must complete the required 50 CME hours.

Upon discharge from the military, the physician must notify the Board and an application to restore the license must be submitted to the Board along with payment for a full, active and unrestricted status. The physician may also apply for another license status, if appropriate.

Answers to frequently asked questions about a military license are available on the Board's website at http://www.mbc.ca.gov/Licensees/Military_Information_FAQ.aspx.

Voluntary Service License

A voluntary service license is available to any licensed California physician who is providing services in California free of charge. A physician can apply to place his or her renewed and current California medical license in a voluntary service status by submitting a completed application to the Board. This license allows physicians to volunteer in safety net or free clinics without compensation.

A voluntary service license requires the following mandatory fees every two years: \$25 to the Steven M. Thompson Physician Corps Loan Repayment Program and a \$12 mandatory fee for the CURES/PDMP for a total cost of \$37. CME is required.

Answers to frequently asked questions about a voluntary service license are available on the Board's website at http://www.mbc.ca.gov/Licensees/Voluntary_Service.aspx.

Changing Status

If a license is current, and meets the appropriate licensing requirements, a physician can apply for a status change and will not have to pay anything until the license comes up for renewal. If the license has expired, a payment of all accrued renewal fees, the mandatory \$37 fee, a delinquent fee of \$78, and potentially a penalty fee of \$391.50, must be submitted with the status change application to the Board.

A physician who has a current unsuspended and unrevoked retired, disabled, inactive or military license may use the words "doctor" or "physician" or the initials "M.D." as long as he or she does not hold himself or herself out as a physician entitled to practice medicine in



California. Please be aware that any physician who lets his or her license expire, cancel, or whose license is revoked or suspended, is guilty of a misdemeanor if he or she uses the words "doctor" or "physician" or the initials "M.D." and holds himself or herself out as a physician or surgeon entitled to practice in California. The individual may use "doctor" or "M.D." or the like, so long as he or she is not doing so in a context where they are implying that they may engage in the practice of medicine. Thus, using these terms on stationery or in a phone listing not associated with the practice of medicine, is not a violation. In short, being a graduate of a medical school alone does not entitle the person to identify himself or herself as a doctor, physician, or M.D. unless he or she is in full compliance with the California [*Business and Professions Code section 2054*](#).

Physician and Surgeon License Renewal

A California physician and surgeon license must be renewed every two years. If the physician's license expires but he or she renews within 30 days there is a delinquency fee of \$78. If the license is not renewed within ninety days there is also a penalty fee of \$391.50 in addition to the delinquency fee and renewal fees already owed. An expired license can be renewed within a period of five years after expiration but

License Status (continued on page 28)

all appropriate fees, including the renewal fees, delinquency fee, and penalty fee must be paid.

In addition, the following is required: certification of compliance with the CME requirements (50 hours), disclosure of financial interests in health-related facilities, and a conviction disclosure (the physician must disclose if, since the last renewal, he or she has had any license disciplined by a government agency, or has been convicted or pled guilty to any crime).

If a licensee fails to renew his or her license within five years of expiration, it is automatically cancelled. A physician whose California license expired five or more years ago must apply for a new license and meet all current licensure requirements in effect at the time of application.

License renewal information is available on the Board's website at http://www.mbc.ca.gov/Licensees/License_Renewal/Physicians_and_Surgeons.aspx.

For questions, please email Josephine Fernandez at Josephine.Fernandez@mbc.ca.gov or call (916) 263-2462.

(Editor's note: a variant of the updated article was published in the Fall 2014 issue of the Newsletter.)

Are your address and email updated with the Medical Board of California? If not, please update your information at http://www.mbc.ca.gov/Licensees/Address_of_Record.aspx.

Big Jump in Citations and Fines For Unlicensed Activities in 2016

2016 saw a spike in citations and fines being issued by the Medical Board of California (Board) for unlicensed activities. These citations chiefly involved applicants for a California medical license who were practicing medicine without a license, a violation of ***Business and Professions (B&P) Code section 2052(a)***. The supervising physicians (or medical directors) in such cases were also cited for aiding and abetting the unlicensed practice of medicine, a violation of ***B&P Code sections 2052(b)*** and ***2264***.

Unlicensed activities that triggered citations for applicants (and their supervising physicians) included international medical school students participating in clinical clerkship training in a California hospital or physician's office when the international medical school and the hospital had not met the minimum requirements pursuant to ***B&P Code section 2089.5*** and ***Title 16, Division 13, California Code of Regulations (CCR) sections 1314.1*** and ***1327***. Other issues included the unlicensed individuals performing physical examinations, diagnosing, and treating patients. The Board also saw medical school graduates who worked in a licensed physician's office and exceeded the scope of a medical assistant. In addition, there was an increase in physicians in Accreditation Council for Graduate Medical Education (ACGME) accredited residency programs who exceeded the license exemption period pursuant to ***B&P Code sections 2065*** or ***2066*** and ***CCR section 1321***.

ACGME Program Directors are responsible for ensuring the residents participating in the ACGME residency have not exceeded the license exemption period. Any resident who exceeds the license exemption period is practicing medicine without a license and the ACGME Program Director is aiding and abetting the unlicensed practice of medicine.

It is important to remember all postgraduate training in an ACGME accredited program in the United States and/or all Royal College of Physicians and Surgeons of Canada (RCPSC) accredited training completed in Canada counts towards the 24 months' license exemption period pursuant to ***B&P Code section 2065*** and toward the 36 months' license exemption period pursuant to ***B&P Code section 2066***. United States and Canadian medical school graduates in programs in California must be licensed by the end of the 24 months of ACGME and/or RCPSC accredited training and international medical school graduates in programs in California must be licensed by the end of the 36 months of ACGME and/or RCPSC accredited training.

The unlicensed applicant for a California medical license – even if he or she has practiced medicine for years in another state – cannot do any hands-on activities with patients such as physical exams, even under the watchful eye of a supervising physician. He or she is restricted to the type of activities performed by medical assistants, who are also unlicensed. Furthermore, as

Unlicensed (continued on page 46)

Administrative Actions: August 1, 2016 – October 31, 2016

Physicians and Surgeons

AFRASIABI, ARDAVAN, M.D. (C 52848), Chico, CA

Convicted of two or more misdemeanor offenses for driving with a blood alcohol level in excess of .08 percent. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, abstaining from the use of alcohol and controlled substances, submitting to biological fluid testing, attending substance abuse support group meetings, and obtaining a worksite monitor. August 5, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=52848>

ANANEH-FIREMPONG, OWUSU (G 42397), Beverly Hills, CA

Convicted for conspiring to distribute and possess with intent to distribute five kilograms or more of cocaine, conspiring to launder money, and health care fraud. Revoked. September 2, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=42397>

ANTKOWIAK, GREGORY THOMAS, M.D. (A 78990), San Diego, CA

Committed acts of gross negligence in the care and treatment of two patients and repeated negligence and failing to maintain adequate and accurate records in the care and treatment of four patients. Revoked, stayed, placed on 4 years' probation with terms and conditions including, but not limited to, completing an educational course, a prescribing practices course, a medical record keeping course, and a clinical training program; obtaining a practice monitor; and prohibited from engaging in the solo practice of medicine. August 5, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=78990>

ARNOLD, CLYDE T., JR. (A 22479), Los Angeles, CA

No admissions but charged with gross negligence, repeated negligent acts, incompetence, dishonesty, prescribing to addicts, prescribing without performing an appropriate prior examination, failing to maintain adequate and accurate medical records, excessive prescribing, violation of statutes regulating drugs, and unprofessional conduct in the care and treatment of multiple patients. Surrender of license. September 23, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=22479>

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, 5 years' probation with 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.

BANDA, CESAR ANTONIO (A 54130), Fair Oaks, CA

Committed acts of gross negligence, repeated negligence, prescribing without an appropriate prior examination, dishonesty, false representations, and failing to maintain adequate and accurate medical in the care and treatment of multiple patients. Revoked. October 27, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=54130>

BODEPUDI, ARUDRA, M.D. (A 73676), Stockton, CA

No admissions but charged with repeated negligent acts in the care of three patients, failing to maintain adequate and accurate medical records of two patients, and failing to comply with the terms and conditions of probation. Revoked, stayed, placed on 35 months' probation with terms and conditions including, but not limited to, completing an education course and an ethics course and obtaining a billing monitor. August 25, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=73676>

BORUP, JERRELL LAWRENCE (A 35641), Oceanside, CA

No admissions but charged with aiding and abetting the unlicensed practice of medicine, gross negligence, and repeated negligent acts for failing to properly supervise a physician assistant in the care and treatment of four patients; false and/or misleading advertising; dishonesty; and failing to maintain adequate and accurate medical records. Surrender of license. September 14, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=35641>

BOSS, DONALD JEFFREY, M.D. (G 83220),

Rolling Hills Estates, CA

Convicted of a misdemeanor offense for driving with a blood alcohol level of .08 percent or higher. Public Reprimand. October 26, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=83220>

BRANDSTATER, CHERRY LYNN, M.D. (G 33366), Redlands, CA

No admissions but charged with gross negligence in the care and treatment of three patients, repeated negligent acts in the care and treatment of four patients, excessive prescribing in the care and treatment of a patient, and failing to maintain adequate and accurate medical records of four patients. Revoked, stayed, placed on 3 years' probation with terms and conditions including, but not limited to, completing an education course, a prescribing

practices course, and a medical record keeping course; obtaining a practice monitor; maintaining a record of all controlled substances ordered, prescribed, dispensed, administered, or possessed and any recommendation or approval for marijuana; and prohibited from engaging in the solo practice of medicine. September 28, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=33366>

BRUSETT, KENT ALAN, M.D. (G 86006), Redding, CA

No admissions but charged with gross negligence, incompetence, and repeated negligent acts in the care and treatment of a patient and failing to comply with the terms and conditions of probation. Revoked, stayed, placed on 2 additional years of probation, with terms and conditions including, but not limited to, completing an education course and obtaining a practice monitor. September 9, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=86006>

BUCHNER, WILLIAM HOWARD, JR., M.D. (A 109750), San Diego, CA

Convicted of driving with a blood alcohol level of .08 percent or more. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, abstaining from the use of alcohol, submitting to biological fluid testing, completing an ethics course and anger management course, and obtaining a worksite monitor. August 5, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=109750>

BYRNE, BRIAN ANTHONY, M.D. (A 39837), Temecula, CA

Committed acts of gross negligence and unprofessional conduct in the care and treatment of a patient by rupturing a patient's membranes and placing an intrauterine pressure catheter in the patient without obtaining the patient's consent. Physician must complete a clinician patient communication course. Public Reprimand. August 5, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=39837>

CABLE, BRIAN MARCEL, M.D. (G 80508), Redwood Valley, CA

Convicted of six misdemeanor violations related to illegal prescribing and committed acts of gross negligence, repeated negligence, dishonesty, prescribing without an appropriate prior examination, false representations,

failing to maintain adequate and accurate medical records, and violating statutes regulating drugs by issuing fraudulent prescriptions for narcotics and diverting the drugs for his own use. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, completing a clinical diagnostic evaluation, abstaining from the use of alcohol and controlled substances, submitting to biological fluid testing, attending substance abuse support group meetings, prohibited from the solo practice of medicine, obtaining a worksite monitor, completing a prescribing practices course and an ethics course, and maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana. August 19, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=80508>

CAPLAN, MICHAEL DAVID, M.D. (A 29412), Ukiah, CA

No admissions but charged with unprofessional conduct, gross negligence, repeated negligent acts, incompetence, dishonesty, false representations, and failing to maintain adequate and accurate medical records in the care and treatment of four patients; failing to supervise a physician assistant; and failing to report a misdemeanor conviction to the Board. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, completing an education course, a prescribing practices course, a medical record keeping course and an ethics course and obtaining a practice monitor. August 17, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=29412>

CHEN, I-HSIUNG (A 34574), Hemet, CA

Physician has a condition affecting his ability to practice medicine safely. Surrender of license. September 14, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=34574>

COTROPIA, JOSEPH PAUL (G 43173), Heath, TX

Disciplined by Texas for delegating medical acts to nursing staff, including prescribing controlled substances and other dangerous drugs, and failing to properly supervise his advanced practice nurses. Surrender of license. September 14, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=43173>

DASSAH, HARRY (A 38503), Vacaville, CA

No admissions but charged with having a condition affecting his ability to practice medicine safely. Surrender of license. September 14, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=38503>

DAVE, HIREN MAHENDRA, M.D. (A 110429), Irvine, CA

Convicted of driving under the influence and driving with a blood alcohol content of .08 percent or higher. Public Reprimand. September 2, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=110429>

DAVID, JAIME CRISTOBAL (A 95834), Palmdale, CA

Committed acts of repeated negligence and failed to maintain adequate and accurate medical records in the care and treatment of a patient. Used dangerous drugs to an extent or in a manner injurious to himself or others, self-prescribed a controlled substance, and has a condition affecting his ability to practice medicine safely. Revoked. September 23, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=95834>

DINH, TOMMY, M.D. (A 62294), Riverside, CA

No admissions but charged with gross negligence, repeated negligent acts, incompetence and failing to maintain adequate and accurate records in the care and treatment of a patient. Revoked, stayed, placed on 2 years' probation with terms and conditions including, but not limited to, completing a clinical training program and prohibited from engaging in the solo practice of medicine. September 29, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=62294>

DOSSEY, BRIAN LANE (A 71858), Grants Pass, OR

Committed unprofessional conduct by being disciplined by Oregon. Surrender of license. September 14, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=71858>

EILAT, PAZ P., M.D. (A 61038), Torrance, CA

Committed acts of gross negligence, aiding and abetting the unlicensed practice of medicine, and violating the laws relating to the corporate practice of medicine by allowing an unlicensed person to engage in the practice of medicine at a clinic he owned and allowing the unlicensed person

to issue marijuana recommendation forms in his name. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, completing an education course and an ethics course, obtaining a practice and billing monitor, and prohibited from owning a medical marijuana clinic and recommending marijuana.

September 28, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=61038>

FAKHOURY, RAMON FAWZI, M.D. (A 98772), Norco, CA

No admissions but charged with sexual misconduct, gross negligence, repeated negligent acts, failing to maintain adequate and accurate medical records, and unprofessional conduct in the care and treatment of four patients. Revoked, stayed, placed on 35 months' probation with terms and conditions including, but not limited to, completing a medical record keeping course, an ethics course, a professional boundaries program and a clinician-patient communication course, and obtaining a third party chaperone while consulting, examining or treating female patients. September 15, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=98772>

FERRY, JAMES A., M.D. (G 72157), Walnut Creek, CA

No admissions but charged with gross negligence, incompetence, repeated negligent acts, excessive prescribing, prescribing without an appropriate prior examination and failing to maintain adequate and accurate medical records in the care and treatment of two patients. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, completing an education course, a prescribing practices course, a medical record keeping course, an ethics course, and a professional boundaries program; prohibited from engaging in the solo practice of medicine; prohibited from managing chronic pain with controlled substances; and maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana.

October 28, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=72157>

FORRESTER, JOSEPH DEREK, M.D. (A 122002), Stanford, CA

No admissions but charged with being disciplined by Colorado based on a conviction of driving under the influence of alcohol and used alcohol to the extent it is dangerous to himself. Revoked, stayed, placed on 4 years'

probation with terms and conditions including, but not limited to, abstaining from the use of controlled substances and alcohol, submitting to biological fluid testing, attending substance abuse support group meetings, and obtaining a worksite monitor. September 23, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=122002>

FORSTER, WOLFRAM RICHARD (C 50765), La Jolla, CA

No admissions but charged with gross negligence, repeated negligent acts, incompetence, dishonesty, failing to maintain accurate and adequate medical records, excessive prescribing, and unprofessional conduct in the care and treatment of seven patients, and having a condition affecting his ability to practice medicine safely. Surrender of license. October 27, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=50765>

GABOIAN, KARINE, M.D. (A 80337), Glendale, CA

No admissions but charged with gross negligence, repeated negligent acts, dishonesty, incompetence, and failing to maintain adequate and accurate medical records in the care and treatment of multiple patients. Revoked, stayed, placed on 3 years' probation with terms and conditions including, but not limited to, 30 days' suspension; completing a clinical training program, an education course, a medical record keeping course, and an ethics course; obtaining a practice and billing monitor; and prohibited from consulting with and/or signing any immigration and/or naturalization forms used by any branch of the federal or any state government on behalf of any patient. October 21, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=80337>

GAROFALO, JOANNE SAVIO, M.D. (A 28842), Santa Barbara, CA

No admissions but charged with gross negligence in the care and treatment of one patient; and repeated negligent acts, failing to maintain adequate and accurate medical records, prescribing without an appropriate prior examination, and violating the statutes regulating drugs in the care and treatment of five patients. Revoked, stayed, placed on 3 years' probation with terms and conditions including, but not limited to, completing a medical record keeping course and a prescribing practices course; maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana; and obtaining

a practice monitor. August 19, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=28842>

GHATNEKAR, JAI VINAYAK (C 42883), Joshua Tree, CA

No admissions but charged with gross negligence and repeated negligent acts in the care and treatment of a patient. Surrender of license. September 6, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=42883>

GILL, JAMES HENRY (A 91982), San Ramon, CA

No admissions but charged with having a condition affecting his ability to practice medicine safely and diverting controlled substances for self-use. Surrender of license. August 18, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=91982>

GLOVER, JAMES ROGER (A 23886), Santa Rosa, CA

No admissions but charged with gross negligence, repeated negligent acts and failing to maintain adequate and accurate medical records in the care and treatment of a patient. Surrender of license. September 22, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=23886>

GO, ELEUTERIO ARCANGEL, M.D. (A 68296), Modesto, CA

Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233 for failing to maintain accurate and adequate medical records and repeated acts of negligence in the care and treatment of a patient by failing to document the prescribing of a controlled substance, failing to have knowledge of the CURES database, and failing to consult the CURES database. August 25, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=68296>

GOLDSTEIN, ARKADY BORISOVICH (A 47751), Encino, CA

Violated the terms of his Board-ordered probation by failing to successfully complete a clinical training program. Surrender of license. August 22, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=47751>

HAGGERTY, SHERYL ANN, M.D. (A 98050), Palmdale, CA

No admissions but charged with self-prescribing controlled substances, prescribing without an appropriate prior examination, being disciplined by the U.S. Air Force,

dishonesty, and gross negligence. Revoked, stayed, placed on 3 years' probation with terms and conditions including, but not limited to, abstaining from the use of controlled substances and alcohol; submitting to biological fluid testing; completing a prescribing practices course, a medical record keeping course and an ethics course; prohibited from engaging in the solo practice of medicine during the first year of probation; and must obtain a practice and billing monitor prior to any solo practice. October 27, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=98050>

HARLAN, BRENT SMAIL (A 108569), Navarre, FL

No admissions but charged with using alcohol to the extent it is dangerous to himself or the public, unprofessional conduct, practicing while under the influence of alcohol, conviction for driving while intoxicated and disciplined by the U.S. Air Force for driving under the influence of alcohol. Surrender of license. September 28, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=108569>

HARMS, MONICA M., M.D. (A 94064), Laguna Hills, CA

No admissions but charged with being convicted twice for driving while having a blood alcohol level of .08 percent or higher. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, abstaining from the use of alcohol and controlled substances, submitting to biological fluid testing, attending substance abuse support group meetings, and obtaining a worksite monitor. October 7, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=94064>

HARRELL, JEFFREY LYNN, M.D. (A 144982), Carson, CA

Failed to disclose all postgraduate training programs, that he had unusual circumstances during his postgraduate training, and that he has a criminal record history regarding alcohol-related convictions on his application for licensure. Probationary license issued, placed on 5 years' probation with terms and conditions including, but not limited to, abstaining from the use of alcohol and controlled substances, submitting to biological fluid testing, obtaining a practice monitor, and completing an ethics course. September 6, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=144982>

HEDVAT, YAHYA (A 86664), Woodland Hills, CA

Committed acts of gross negligence, repeated negligence, and failing to maintain adequate and accurate medical records in the care and treatment of two patients; convicted of unlawfully prescribing a controlled substance and sale/offer to sell/transportation of a controlled substance. Revoked. August 25, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=86664>

Hlava, Nicole Beth (A 87960), Palo Alto, CA

No admissions but charged with violating the terms of her Board-ordered probation by failing to abstain from the use of controlled substances by testing positive for hydromorphone. Surrender of license. August 11, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=87960>

HOSTETTER, ROBERT CLYDE, M.D. (G 33650), Shawnee, KS

No admissions, but charged with gross negligence, repeated negligent acts, incompetence, and failing to maintain adequate and accurate medical records in the care and treatment of multiple patients. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, completing an education course and a medical record keeping course, prohibited from practicing medicine until he has successfully completed a clinical training program, obtaining a practice monitor, and prohibited from engaging in the solo practice of medicine. October 28, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=33650>

HSU, CARMEN PHILOMENA, M.D. (G 83166), Santa Cruz, CA

No admissions but charged with unprofessional conduct and being convicted for driving with a blood alcohol level of .08 or higher and a previous conviction for driving under the influence of alcohol. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, abstaining from the use of controlled substances and alcohol, completing an ethics course, submitting to biological fluid testing, attending substance abuse support group meetings, and obtaining a worksite monitor. August 18, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=83166>

Huerta-Ibarra, Jose Felix, M.D. (A 94115), Watsonville, CA

Committed acts of gross negligence, repeated negligence, incompetence, and prescribing without an appropriate prior examination in the care and treatment of two patients; failed to maintain adequate and accurate medical records in the care and treatment of one patient; and violated the terms of his Board-ordered probation by failing to obey all laws, to pay costs associated with a clinical training program, and to pay the costs associated with probation monitoring. Revoked, stayed, placed on 3 additional years of probation with terms and conditions including, but not limited to, completing an education course, a prescribing practices course, and a medical record keeping course, and obtaining a practice monitor, in addition to the terms and conditions of the prior probation order. September 21, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=94115>

IEZZA, GIOIA, M.D. (A 66738), San Francisco, CA

Prescribed medicine to a patient without an appropriate prior examination and outside of her training and scope of practice, and failed to maintain adequate and accurate medical records. Physician must complete a prescribing practices course and a medical record keeping course. Public Reprimand. September 23, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=66738>

ISAACS, LARRY MITCHELL (G 86613), Goshen, NY

Failed to maintain adequate and accurate medical records in the care and treatment of a patient. Surrender of license. August 8, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=86613>

JAFFERY, SYED ARIF ALI (A 93064), Egg Harbor Township, NJ

Disciplined by New Jersey for being charged with criminal sexual contact with three female patients, sexual assault, and harassment of 22 additional patients/former employees. Revoked. August 19, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=93064>

JEEREDDI, SUDATHI (A 32264), Pomona, CA

Physician has a condition affecting her ability to practice medicine safely. Surrender of license. August 18, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=32264>

JOHNSON, KENNETH WAYNE (G 83706), Los Angeles, CA
Convicted of felony charges for conspiring to commit healthcare fraud, conspiring to possess at least five identification documents and authentication features with the intent to use them unlawfully, aggravated identify theft, and conspiring to engage in the misbranding of prescription drugs. Revoked. September 9, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=83706>

JOHNSON, MEGAN JO, M.D. (G 61655), Chico, CA
No admissions but charged with gross negligence in the care and treatment of a patient and repeated negligent acts in the care and treatment of two patients. Revoked, stayed, placed on 3 years' probation with terms and conditions including, but not limited to, completing a prescribing practices course and a medical record keeping course; maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed; and obtaining a practice monitor. October 7, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=61655>

KACHMARYK, MARTHA MARIA (G 129378), Westchester, IL
Disciplined by Illinois based on a finding that her actions constitute an immediate danger to the public. Revoked. August 12, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=129378>

KAMEN, CHARLES EDWARD, M.D. (A 129006), Loma Linda, CA
Convicted of driving under the influence of alcohol, used alcohol in a manner or to such an extent as to be injurious to himself or the public, committed unprofessional conduct based on the conviction, and has a condition affecting his ability to practice medicine safely. Revoked, stayed, placed on 3 years' probation with terms and conditions including, but not limited to, completing a clinical diagnostic evaluation prior to resuming the practice of medicine, abstaining from the use of alcohol and controlled substances, submitting to biological fluid testing, completing an ethics course, attending substance abuse support group meetings, and obtaining a worksite monitor. August 19, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=129006>

KAZANCHIAN, ARMEN, M.D. (A 53993), Glendale, CA
No admissions but charged with gross negligence, repeated negligent acts, unprofessional conduct, and incompetence in the care and treatment of multiple patients. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, completing an education course, a prescribing practices course, a medical record keeping course, a clinical training program, and an ethics course; obtaining a practice monitor; and maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana. September 23, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=53993>

KHANLOU, HOMAYOON, M.D. (A 66631), Los Angeles, CA
Committed acts of gross negligence, repeated negligence, creating false medical records, and failed to maintain adequate and accurate medical records in the care and treatment of a patient; unprofessional conduct for harassing his co-worker and ignoring civil harassment restraining orders issued against him; and convicted of driving with a blood alcohol level of .08 percent or higher. Revoked, stayed, placed on 7 years' probation with terms and conditions including, but not limited to, abstaining from the use of controlled substances and alcohol; obtaining a practice monitor; maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana; prohibited from prescribing controlled substances and dangerous drugs to family members, domestic partners, or any other individual with whom he has a non-familial personal (friends), dating or romantic relationship; completing a prescribing practices course and an ethics course; completing a clinical diagnostic evaluation prior to resuming the practice of medicine; submitting to biological fluid testing; attending substance abuse support group meetings; and obtaining a worksite monitor. September 16, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=66631>

KHOO, LARRY TEIK-MAN, M.D. (A 62896), Los Angeles, CA
No admissions but charged with gross negligence, repeated negligent acts, and failing to maintain adequate and accurate medical records by performing surgery on a patient without resolving a blood pressure issue on one patient and without obtaining informed consent or

documenting the consent in the treatment of a second patient. Physician must complete a medical record keeping course and an education course. Public Reprimand.

August 17, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=62896>

KIA, ALI, M.D. (C 145549), Las Vegas, NV

Failed to disclose required information in response to the criminal record history and medical education questions on his application for licensure. Probationary license issued, placed on 3 years' probation with terms and conditions including, but not limited to, completing an ethics course. October 10, 2016.

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=145549>

KIM, DAVID SOUNG, M.D. (G 61312), Los Angeles, CA

No admissions but charged with repeated acts of negligence, and failing to maintain adequate and accurate medical records in the care and treatment of two patients and gross negligence in the treatment of a patient. Revoked, stayed, placed on 35 months' probation with terms and conditions including, but not limited to, completing an education course, a medical record keeping course, an ethics course, and a professional boundaries program, and having a third party chaperone for female patients. September 21, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=61312>

KOENIG, PETER PAUL, M.D. (A 23943), Encino, CA

No admissions but charged with sexual misconduct, gross negligence, repeated negligent acts, and unprofessional conduct in the care and treatment of a patient, and convicted of trespassing. Revoked, stayed, placed on 4 years' probation with terms and conditions including, but not limited to, completing an ethics course and a professional boundaries program, and having a third party chaperone for female patients. August 12, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=23943>

KOSLOW, ALAN RUSSELL (G 72333), Windsor Heights, IA

Disciplined by Iowa for professional incompetence, maintaining notes that were unintelligible, and engaging in a pattern of disruptive behavior. Revoked. August 12, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=72333>

KOUPAIE, JAFAR, M.D. (C 51581), Canton, MA

Disciplined by Massachusetts based on a criminal conviction for making a criminal threat. Physician must complete an ethics course. Public Reprimand.

August 12, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=51581>

L'ARCHEVEQUE, DEE MARIA, M.D. (G 78038), Murrieta, CA

No admissions but charged with gross negligence, repeated negligent acts, and failing to maintain adequate and accurate medical records in the care and treatment of a patient. Revoked, stayed, placed on 4 years' probation with terms and conditions including, but not limited to, completing an education course, a prescribing practices course, a medical record keeping course, and a clinical training program, and prohibited from practicing, performing and/or treating patients in the area of weight loss management. September 23, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=78038>

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

Violated the terms of his Board-ordered probation by failing to successfully complete the biological fluid testing. Revoked, stayed, placed on 7 years' probation with terms and conditions including, but not limited to, abstaining from the use of alcohol, submitting to biological fluid testing, attending an addictive behavior support group, and obtaining a worksite monitor. September 30, 2016

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

LEONG, STEVE RICHARD (A 53808), Arcadia, CA

No admissions but charged with sexual abuse or misconduct with multiple patients, sexual exploitation, conviction for false imprisonment and sexual exploitation of four patients, dishonesty, unprofessional conduct, and failure to report a criminal conviction. Surrender of license. October 1, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=53808>

LI, KUN LINDA, M.D. (A 72250), Chicago, IL

Disciplined by Illinois for having a condition affecting her ability to practice medicine safely. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, prohibited from practicing medicine until she successfully completes an evaluation, obtaining a

practice monitor, and prohibited from engaging in the solo practice of medicine. August 5, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=72250>

LOPEZ, FRANK EPHRAIM, M.D. (G 76384), Clovis, CA

No admissions but charged with gross negligence, repeated negligent acts, and failing to maintain adequate and accurate medical records in the care and treatment of a patient. Physician must complete a medical record keeping course and a clinical training program. Public Reprimand. August 12, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=76384>

LOPEZ, PAUL M., M.D. (A 37210), Colton, CA

Based upon the findings of a clinical training program and the time the physician has not engaged in the practice of medicine, a probationary license was issued, placed on 2 years' probation with terms and conditions including, but not limited to, completing an education course and obtaining a practice monitor. September 16, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=37210>

LOUGH, JOHN BRANDON, M.D. (A 144363), Fremont, CA

Convicted of driving under the influence of alcohol. Probationary license issued, placed on 3 years' probation with terms and conditions including, but not limited to, submitting to biological fluid testing and abstaining from the use of alcohol and controlled substances. August 9, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=144363>

LUNDEBERG, PATRICIA MARIE, M.D. (G 56317), San Diego, CA

No admissions but charged with gross negligence in the care and treatment of a patient, and repeated negligent acts, violation of statutes regulating drugs, and failing to maintain adequate and accurate records in the care and treatment of another patient. Physician must complete a prescribing practices course and a medical record keeping course. Public Reprimand. September 23, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=56317>

MANGAR, STEVEN KEITH (A 65476), Salinas, CA

No admissions but charged with gross negligence, repeated negligent acts, incompetence, and failing to maintain adequate and accurate medical records in the

care and treatment of multiple patients, and violating his Board-ordered probation by failing to obey all laws. Surrender of license. September 20, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=65476>

MARKMAN, ROBERT STEVEN (G 27953), Northridge, CA

Convicted of willfully resisting, delaying, or obstructing a police officer in the discharge of his duties. Revoked. August 26, 2016 (Judicial review pending)

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=27953>

MATTERN, JILL MARIE (A 78277), Ukiah, CA

No admissions but charged with being disciplined by New Jersey for criminal charges for writing numerous prescriptions for controlled substances in the names of people who were not her patients and filling them for her own use. Surrender of license. September 19, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=78277>

MBAGWU, NNEAMAKA, M.D. (A 53749), Bakersfield, CA

Committed acts of gross negligence and incompetence in the care and treatment of a patient. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, completing an education course, a medical record keeping course, an ethics course, and a clinical training program; obtaining a practice monitor; and prohibited from engaging in the solo practice of medicine. August 5, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=53749>

MCDONNEL, JAMES KIEFFER (G 63465), Bakersfield, CA

Violated the terms of his Board-ordered probation by failing to undergo and complete a clinical diagnostic evaluation, to provide notice of employer or supervisor information to the Board, to submit to biological fluid testing, to provide a true copy of his decision to facilities where he engages in the practice of medicine, and to appear for an interview(s) with the Board's designee. Revoked. September 23, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=63465>

MEHRA, NEAL, M.D. (A 95686), Carmichael, CA

Used alcohol in a manner, or to such an extent, as to be injurious to himself, another person, and/or the public,

and unprofessional conduct. Revoked, stayed, placed on 4 years' probation with terms and conditions including, but not limited to, abstaining from the use of controlled substances and alcohol, completing an ethics course, submitting to biological fluid testing, attending substance abuse support group meetings, and obtaining a worksite monitor. September 16, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=95686>

MEHTANI, JANAK KUMAR, M.D. (A 32632), Sacramento, CA

No admissions but charged with gross negligence, repeated negligent acts, prescribing without an appropriate prior examination or medical indication, failing to maintain adequate and accurate medical records, and unprofessional conduct in the care and treatment of three patients. Revoked, stayed, placed on 3 years' probation with terms and conditions including, but not limited to, completing an education course, a prescribing practices course, and a medical record keeping course; maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana; and obtaining a practice monitor. September 16, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=32632>

MILLER, BOBBY RAY, JR., M.D. (C 50884), Crownpoint, NM

Committed acts of gross negligence, repeated negligence, and failing to maintain adequate and accurate medical records in the care of a patient. Revoked, stayed, placed on 4 years' probation with terms and conditions including, but not limited to, completing a clinical training program, an education course, and a medical record keeping course, and obtaining a practice monitor. August 12, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=50884>

MORWESSEL, ROSEMARIE MARTHA, M.D. (G 77168), Mobile, AL

Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233 for being disciplined by Alabama for failing to submit the required number of CME credits necessary for renewal of her license. September 9, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=77168>

MUELLER, GREGORY PAUL, M.D. (A 49185), Beverly Hills, CA

Used dangerous drugs or alcohol in a manner, or to such an extent, as to be injurious to himself, another person, and/or the public. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, abstaining from the use of controlled substances and alcohol, submitting to biological fluid testing, attending substance abuse support group meetings, completing an ethics course, and obtaining a worksite monitor.

October 14, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=49185>

MURPHY, FREDERICK MATTSON (G 62243), Turlock, CA

No admissions but charged with having a condition affecting his ability to practice medicine safely. Surrender of license. August 31, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=62243>

NGUYEN, HIEP THIEU, M.D. (G 78654), Portola Valley, CA

Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233 for being disciplined by Massachusetts for submitting abstracts for publication, but immediately withdrawing the abstracts when he became aware of errors his researchers had made in the documents. August 11, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=78654>

OGAI, JOHN, M.D. (G 75024), Irvine, CA

No admissions but charged with aiding and abetting the unlicensed practice of medicine and unprofessional conduct. Physician must complete an education course. Public Reprimand. September 21, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=75024>

PARHAM, FRED WALTON (G 43938), Vacaville, CA

Violated the terms of his Board-ordered probation by not practicing medicine for a period that exceeds two years and failing to enroll in a clinical training program. Revoked. August 5, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=43938>

PATEL, DEVIN NITIN, M.D. (A 144629), Los Angeles, CA
Disclosed on his application for licensure that he has a criminal record history and has participated in a recovery program. Probationary license issued, placed on 3 years' probation with terms and conditions including, but not limited to, abstaining from the use of controlled substances and alcohol, submitting to biological fluid testing, and completing an anger management course. August 19, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=144629>

PATT, STEPHEN MARK, M.D. (G 47632), Santa Monica, CA
No admissions but charged with gross negligence, repeated negligent acts, prescribing without an appropriate prior examination or medical indication, excessive prescribing, and failing to maintain adequate and accurate medical records in the care and treatment of several patients, prescribing to an addict, and unprofessional conduct for divulging private patient information. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, prohibited from prescribing any Schedule II, III, IV or V opioids for 3 years; maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana; completing an education course, a prescribing practices course, a medical record keeping course, and an ethics course; and obtaining a practice monitor. August 11, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=47632>

PERO, JAMES EDWARD, M.D. (G 70281), Thousand Oaks, CA
Violated the terms of his Board-ordered probation by failing to abstain from the use of alcohol. Placed on 5 additional years of probation with terms and conditions including, but not limited to, completing a clinical diagnostic evaluation prior to resuming the practice of medicine, submitting to biological fluid testing, attending substance abuse support group meetings, and obtaining a worksite monitor September 28, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=70281>

RAO, RAJEEV KALMANJE, M.D. (A 79290), Los Angeles, CA
Public Letter of Reprimand issued pursuant to Business and Professions Code section 2233 for failing to document informed consent prior to a surgical procedure and failing to obtain a Fictitious Name Permit. October 19, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=79290>

RASKIN, GORDON SAM, M.D. (A 45357), Berkeley, CA
No admissions but charged with unprofessional conduct, gross negligence, repeated negligent acts, incompetence, excessive prescribing, prescribing without an appropriate prior examination or medical indication, and failing to maintain adequate and accurate medical records in the care and treatment of two patients, and prescribing to an addict. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, prohibited from ordering, prescribing, dispensing, administering, furnishing, or possessing any Schedule II or III controlled substance with the exception of methadone (at Berkeley Addiction Treatment Services), medical marijuana recommendations, and Suboxone/Buprenorphine (in his private practice), for the first 4 years of probation; maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana; completing a prescribing practices course, a medical record keeping course and an education course; obtaining a practice monitor; and prohibited from practicing, performing, or treating patients for pain management, acute, and chronic pain. September 16, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=45357>

RENWICK, KENNETH KEENEY, JR., M.D. (G 50654), Tuolumne, CA

No admissions but charged with gross negligence, repeated negligent acts, prescribing without an appropriate prior examination or medical indication, and failing to maintain adequate and accurate medical records in the care and treatment of multiple patients, and having a condition affecting his ability to practice medicine safely. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, prohibited from ordering, prescribing, dispensing, administering, furnishing, or possessing any controlled except for those drugs listed in Schedules III and IV; maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana; completing a clinical training program; obtaining a practice monitor; and prohibited from engaging in the solo practice of medicine. September 22, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=50654>

RINGWALD, BARBARA A. (A 37449), Sacramento, CA

No admissions but charged with gross negligence, repeated negligent acts, and failing to maintain adequate and accurate medical records in the care and treatment of two patients. Surrender of license. September 14, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=37449>

ROBERTS, MICHAEL ALLAN, M.D. (G 78949), Santa Monica, CA

No admissions but charged with being convicted of unlawful and willful infliction of corporal injury resulting in a traumatic condition upon a spouse and commission of an assault upon a person with a deadly weapon or instrument. Revoked, stayed, placed on 3 years' probation with terms and conditions including, but not limited to, completing 60 hours of community service and an ethics course. October 12, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=78949>

ROSENFELD, IRWIN IRA (G 34731), Laguna Hills, CA

No admissions but charged with gross negligence, repeated negligent acts, excessive prescribing, prescribing to an addict, prescribing without an appropriate prior examination and medical indication, violating statutes regulating drugs, unprofessional conduct and failing to maintain adequate and accurate medical records in the care and treatment of several patients, and violating the terms of his Board-ordered probation by failing to obey all laws. Surrender of license. September 19, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=34731>

SACHDEV, NAINA, M.D. (G 88925), Beverly Hills, CA

Disciplined by Oregon for several prescribing violations including prescribing without conducting a history, examination or evaluation, or maintaining medical records, and failing to follow-up on the efficacy of the treatment, and violated the terms of her Oregon Interim Suspension Order. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, 180 days' suspension, completing a prescribing practices course, a medical record keeping course, an education course, an ethics course and a clinical training program, and obtaining a practice and billing monitor. September 9, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=88925>

SAW, ENG CHUAN (G 18874), Castro Valley, CA

No admissions but charged with being disciplined by Washington for using poor judgment in the surgical resection of a large retroperitoneal sarcoma and misstatements in the patient's medical record. Surrender of license. October 4, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=18874>

SCHMALHORST, WILLIAM R. (C28822), Bakersfield, CA

Committed acts of unprofessional conduct, gross negligence, and repeated negligence in the care and treatment of a patient. Revoked. August 4, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=28822>

SCHWARTZ, ARTHUR ALAN (G 24396), Santa Cruz, CA

No admissions but charged with repeated negligent acts in the care and treatment of three patients. Surrender of license. September 16, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=24396>

SEGAL, PERRY ROY, M.D. (C 39242), Los Gatos, CA

No admissions but charged with unprofessional conduct, gross negligence, repeated negligent acts, incompetence, prescribing without an appropriate prior examination, and failing to maintain adequate and accurate medical records in the care and treatment of a patient. Revoked, stayed, placed on 3 years' probation with terms and conditions including, but not limited to, prohibited from prescribing for chronic pain management and prescribing opiates; maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana; and completing an education course, a prescribing practices course, a medical record keeping course and an ethics course. August 19, 2016
<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=39242>

SHAH, ANUP JANAK, M.D. (A 135157), Loma Linda, CA

Committed unprofessional conduct and violated the terms of his Board-ordered probation by failing to submit to biological fluid testing, failing to abstain from controlled substances, and failing to abstain from alcohol. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, 30 days' suspension, prohibited from ordering, prescribing, dispensing, administering, furnishing, or possessing any

controlled substance, surrender of DEA permit, abstaining from the use of controlled substances and alcohol, submitting to biological fluid testing, completing an ethics course, completing a clinical diagnostic evaluation prior to resuming the practice of medicine, prohibited from engaging in the solo practice of medicine, attending substance abuse support group meetings, and obtaining a worksite monitor. August 26, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=135157>

SHAHAM, ELSAGAV SAGI, M.D. (G 50824), Los Angeles, CA
Committed acts of gross negligence, creating a false medical record, failed to maintain adequate and accurate medical records, and prescribed without an appropriate prior examination or medical indication in his care and treatment of two undercover agents Physician must complete a medical record keeping course and an ethics course. Public Reprimand. September 23, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=50824>

SHAHINIAN, HRAYR KARNIG (A 60898), Los Angeles, CA
Committed acts of gross negligence, repeated negligence, dishonesty, false representations, altered or modified a medical record with fraudulent intent, failed to maintain adequate and accurate medical records, and false and misleading advertising in the treatment and care of a patient. Revoked. September 9, 2016 (Judicial review pending)

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=60898>

SHAMIE, MOHAMMAD ALI, M.D. (A 39228), Pasadena, CA
No admissions but charged with gross negligence, repeated negligent acts, incompetence, dishonesty, failing to maintain adequate and accurate medical records, violating statutes regulating drugs, excessive prescribing, prescribing to addicts, and unprofessional conduct in the care and treatment of five patients. Revoked, stayed, placed on 3 years' probation with terms and conditions including, but not limited to, prohibited from ordering, prescribing, dispensing, administering, furnishing, or possessing any Schedule II controlled substance and from recommending marijuana, maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana, completing an education course, a

prescribing practices course, and a medical record keeping course. September 16, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=39228>

SHIGYO, KRISTINA NORI, M.D. (A 144512), Torrance, CA
Disclosed on her application for licensure that she has a criminal record history, has participated in a recovery program, and has been diagnosed with an addictive disorder. Probationary license issued, placed on 5 years' probation with terms and conditions including, but not limited to, submitting to biological fluid testing and abstaining from the use of controlled substances and alcohol. August 16, 2016.

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=144512>

SIDRANSKY, RODNEY, M.D. (A 78625), Chula Vista, CA
Used alcohol, controlled substances, or drugs to the extent or in such a manner as to be dangerous to himself or the public, self-prescribed controlled substances, and has a condition affecting his ability to practice medicine safely. Revoked, stayed, placed on 7 years' probation with terms and conditions including, but not limited to, abstaining from the use of controlled substances and alcohol, submitting to biological fluid testing, completing an ethics course and a clinical diagnostic evaluation, obtaining a worksite monitor, attending substance abuse support group meetings, and prohibited from engaging in the solo practice of medicine. September 16, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=78625>

SMITH, ROBERT S. (A 18081), San Diego, CA
No admissions but charged with gross negligence, repeated negligent acts, prescribing without an appropriate prior examination and medical indication, violating statutes regulating drugs, and failing to maintain adequate and accurate medical records in the care and treatment of a patient. Surrender of license. October 5, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=18081>

SPIVEY, DAVID LEE (A 39233), Winston Salem, NC
No admissions, but charged with being disciplined by North Carolina based on admission of a history of substance abuse. Surrender of license. September 16, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=39233>

SREENIVASAN, PURNIMA RAVI (A 82039), Walnut Creek, CA
Violated the terms of her Board-ordered probation by failing to obtain a practice monitor, failing to submit quarterly reports, failing to disclose the names of the facilities where she practiced medicine, refusing to take phone calls from her probation monitor, and continuing to practice medicine while a cease practice order was in effect. Revoked. September 12, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=82039>

STREAMS, MICHAEL LOUIS (C 34005), Culver City, CA
Convicted of felony violations of aiding the unlawful prescription of a controlled substance and sale of a controlled substance, committed dishonesty, violated the statute regulating drugs, created false medical records, and aided and abetted the unlicensed practice of medicine. Surrender of license. September 13, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=34005>

TAYEFEH, FARZIN, M.D. (A 73083), Hollywood, CA
No admissions but charged with repeated negligent acts, prescribing without an appropriate prior examination and medical indication, and failing to maintain adequate and accurate medical records in the care and treatment of a patient. Physician must complete a prescribing practices course, a medical record keeping course, and a professional boundaries program. Public Reprimand. August 31, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=73083>

THYAGARAJ, SUJAN (A 136601), Roswell, NM
Disciplined by New Mexico for sexually assaulting a patient and being charged with criminal sexual penetration. Revoked. September 23, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=136601>

TOMCIK, MICHAEL JOSEPH, M.D. (C 37353), San Ramon, CA
No admissions but charged with gross negligence, dishonesty, unprofessional conduct, creating false medical records, and failing to maintain adequate and accurate medical records in the care and treatment of a patient. Physician must complete of a medical record keeping course and an ethics course. Public Reprimand. October 28, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=C&licenseNumber=37353>

TSAI, OLIVER CHENG-TUNG, M.D. (A 49033), West Covina, CA
No admissions, but charged with excessive prescribing, prescribing without an appropriate prior examination and medical indication, prescribing to addicts, violating statutes regulating drugs, gross negligence, repeated negligent acts, incompetence, failure to maintain adequate and accurate medical records, and unprofessional conduct in the care and treatment of numerous patients and conviction of a crime for the unlawful issuance of prescriptions for Vicodin. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana, prohibited from ordering, prescribing, dispensing, administering, furnishing, or possessing any Schedule II controlled substance until he successfully completed the prescribing practices course, completing a medical record keeping course, a prescribing practices course, an ethics course, and a clinical training program, and obtaining a practice monitor. October 28, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=49033>

TUCKER, AMANDA D. (A 43678), Wailuku, HI
Disciplined by Colorado for failing to complete an evaluation to determine if she had a condition affecting her ability to practice medicine safely. Revoked. September 23, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=43678>

VAN, THU-HOA VICTORIA, M.D. (G 81299), Garden Grove, CA
Convicted of dispensing Promethazine with Codeine outside the scope of professional practice and disciplined by Mississippi. License issued, revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, completing a clinical training program prior to practicing medicine, obtaining a practice monitor, prohibited from engaging in the solo practice of medicine, completing an education course, a prescribing practices course, a medical record keeping course and an ethics course. September 23, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=81299>

WILKINS, TIMOTHY WILLIAM (A 102151), Redding, CA
No admissions but charged with being convicted of four felony counts of unlawful sexual intercourse with a minor, a misdemeanor count of providing lewd material to a minor and two misdemeanor counts of contributing to the

delinquency of a minor, sexual exploitation, and sexual misconduct with a minor patient. Surrender of license. September 6, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=102151>

WILSON, ROBERT LEE (A 23286), Los Angeles, CA

No admissions, but charged with having a condition affecting his ability to practice medicine safely. Surrender of license. October 26, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=A&licenseNumber=23286>

YOUNG, JOHN ABBOT (G 38706), Carlsbad, CA

Committed unprofessional conduct by refusing to comply with a Board decision by failing to complete a clinical training program and a medical record keeping course. Revoked. September 22, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=G&licenseNumber=38706>

Licensed Midwife

HELE, DETRAH ELLEN (LM 194), Fresno, CA

No admissions but charged with unprofessional conduct, gross negligence, failing to refer a client to a physician and surgeon, failing to transfer a client to a physician and a hospital, failing to obtain informed consent and make specific disclosures, and failing to maintain signed disclosures in the client's medical record. Surrender of license. October 24, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=LM&licenseNumber=194>

Physician Assistants

BREWSTER, SHAWN BYRON, P.A. (PA 15677), Rancho Santa Margarita, CA

No admissions but charged with providing medical services without authorization, prescribing/administrating controlled substances without advance approval by a supervising physician, gross negligence, repeated negligent acts, prescribing without an appropriate prior examination or medical indication, excessive prescribing, and failing to maintain adequate and accurate medical records in the care and treatment of a patient. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, prohibited for two years from administering, issuing a drug order, handing to a patient,

or possessing any controlled substance in Schedules II and III without first obtaining prior oral or written approval from a supervising physician; maintaining a record of all controlled substances administered, transmitted orally or in writing, or handed to a patient; abstaining from the use of controlled substances; submitting to biological fluid testing; participating in the Board's Diversion Program; completing an ethics course and a prescribing practices course; and on-site supervision requirement for 50 percent of practice. September 9, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=15677>

HARJU, TIM M., P.A. (PA 15600), Huntington Beach, CA

No admissions but charged with providing medical services without authorization, prescribing/ administrating controlled substances without advance approval by a supervising physician, gross negligence, repeated negligent acts, prescribing without an appropriate prior examination or medical indication, excessive prescribing and failing to maintain adequate and accurate medical records in the care and treatment of a patient. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, prohibited from administering, issuing a drug order, or handing to a patient or possessing any controlled substance in Schedules II and III without first obtaining prior oral or written approval from a supervising physician, maintaining a record of all controlled substances administered, transmitted orally or in writing, or handed to a patient; abstaining from the use of controlled substances, submitting to biological fluid testing, participating in the Board's Diversion Program, completing an ethics course and a prescribing practices course, and on-site supervision requirement for 50 percent of practice. September 9, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=15600>

KOTEY, ERASMUS DZANI (PA 11297), Montebello, CA

Convicted of a felony count of health care fraud and a felony count of conspiracy to commit health care fraud. Revoked. September 9, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=11297>

MAR, HUGO Q., P.A. (PA 13256), Watsonville, CA

No admissions but charged with being convicted of unlawful prescribing of Norco. Revoked, stayed, placed on 5 years' probation including, but not limited to, maintaining a record of all controlled substances

administered, transmitted orally or in writing, or handed to a patient; completing a medical record keeping course, a prescribing practices course and an ethics course, maintaining patient medical records, and on-site supervision requirement for 35 percent of practice. September 9, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=13256>

MARTEL DARIN NEIL, P.A. (PA 15967), Carlsbad, CA

No admissions but convicted of prescribing or administering a controlled substance to himself. Revoked, stayed, placed on 7 years' probation with terms and conditions including, but not limited to, 30 days' suspension, prohibited from administering, issuing a drug order, or handing to a patient or possessing any controlled substance, abstaining from the use of controlled substances and alcohol, submitting to biological fluid testing, completing the Board's Diversion Program, completing an ethics course, maintaining patient medical records, and on-site supervision required at all times. September 9, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=15967>

PLONG, AUSTIN VANNATH, P.A. (PA 15560), Long Beach, CA

Violated the terms of his Board-ordered probation by failing to successfully complete the clinical training program, failing to properly maintain patient records, and failure to renew his license. Revoked, stayed, placed on 4 years' probation with terms and conditions including, but not limited to, suspension until he successfully passes the clinical training program, completing an education course, a clinical training program, maintaining patient medical records, and on-site supervision requirement for 50 percent of practice. October 19, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=15560>

ROBINSON, KEVIN, P.A. (PA 12720), Paramount, CA

Committed acts of gross negligence and incompetence in the care and treatment of a patient. Revoked. September 22, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=12720>

STRAUSS, LAURA (PA 50951), Menlo Park, CA

Committed acts of unprofessional conduct, gross negligence, repeated negligence, incompetence, failing

to maintain adequate and accurate medical records, dishonesty, and false representations in the care and treatment of three patients. Surrender of license.

September 7, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=50951>

VIDA, KEVIN ANTHONY (PA 20984), La Quinta, CA

Committed acts of prescribing or administering a controlled substance to himself, violating statutes regulating drugs, dishonesty, false representations, creation false medical records with fraudulent intent, failing to report an arrest, unprofessional conduct, and convicted for forgery of a prescription for a narcotic and prescription forgery with the intent to defraud. Surrender of license. August 2, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=20984>

WONG, JANE PO, P.A. (PA 19420), Simi Valley, CA

Falsified a physician assistant license renewal identification card as genuine, committed dishonesty, false representations and unprofessional conduct by creating a fraudulent ID card and submitting it to her employer. Revoked, stayed, placed on 3 years' probation with terms and conditions including, but not limited to, 60 days' suspension and completing 40 hours of community service and an ethics course. October 28, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=PA&licenseNumber=19420>

Podiatrists

AHMADI, MATT MAHMOUD, DPM (E 4539), Mission Viejo, CA

No admissions but charged with gross negligence and repeated negligent acts and dishonesty in the care and treatment of a patient; incompetence and failing to maintain adequate and accurate records in the care and treatment of two patients; and violating the terms of his Board-ordered probation by failing to obey all laws. Revoked, stayed, placed on 5 years' probation with terms and conditions including, but not limited to, completing an education course. September 16, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=E&licenseNumber=4539>

CERVANTES, HECTOR, DPM (E 3795), San Jose, CA

No admissions but charged with gross negligence, repeated negligent acts and incompetence in the care and treatment of two patients. Revoked, stayed, placed on 3 years' probation with terms and conditions including, but not limited to, completing a clinical training program.

August 11, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=E&licenseNumber=3795>

SERKIN, ARNOLD LEE (E 1387), Torrance, CA

Convicted of sexual battery by fraud and required to register as a sex offender. Revoked.

September 30, 2016

<http://www2.mbc.ca.gov/BreezePDL/default.aspx?licenseType=E&licenseNumber=1387>

Attention

**CURES 1.0 will be decommissioned
on March 5, 2017.**

Users must register for CURES 2.0 (live since January 2016) to continue using the CURES database. For assistance, please contact the CURES help desk at (916) 227-3843 or email cures@doj.ca.gov.

FDA Warns Physicians about Unsafe Drugs

The U.S. Food and Drug Administration (FDA) has issued a warning to physicians that buying drugs from unlicensed sources is risky business.

"If you purchase drugs from illegal, unlicensed sources (foreign or domestic) you are putting your patients at risk of consuming drugs that may be unapproved, counterfeit, contaminated, ineffective or dangerous. You are also breaking the law," the FDA said.

Physicians are cautioned that purchasing drugs from illegal sources may put them at risk of a criminal investigation by the FDA's Office of Criminal Investigations and prosecution by the U.S. Department of Justice (DOJ).

Since 2012, the FDA has notified nearly 3,500 physicians that their drug purchasing practices may be illegal. The DOJ has successfully prosecuted more than 95 corporations and individuals, including physicians, for criminal charges relating to selling unapproved drug products, or receiving and administering unapproved drug products to patients. These criminal convictions have resulted in jail time and fines of millions of dollars, according to the FDA.

To help prevent unsafe or ineffective drugs from reaching patients, physicians are encouraged to verify that their wholesale drug distributor or other source is properly licensed at <https://www.fda.gov/Drugs/DrugSafety/DrugIntegrityandSupplyChainSecurity/ucm281446.htm>. Physicians are also encouraged to perform due diligence to ensure that the drugs purchased are FDA-approved.

Any suspicious activity should be reported to the FDA's Office of Criminal Investigations at <https://www.fda.gov/ICECI/CriminalInvestigations/default.htm>.



***Vaping ... prediabetes ...
understanding the science behind
the obesity epidemic and how to
make meaningful changes ... why
sugary drinks are a problem ...
check out the Medical Board of
California's newly updated Chronic
Disease Prevention Resources.***

***[http://www.mbc.ca.gov/Licensees/
Physicians_and_Surgeons/Chronic_
Disease.aspx](http://www.mbc.ca.gov/Licensees/Physicians_and_Surgeons/Chronic_Disease.aspx)***



Unlicensed (continued from page 28)

with medical assistants, the supervising physician must document that the person is trained and competent to perform each of the tasks allowed by law.

The Board typically learns that an applicant is performing illegal activities during the application process, when the applicant lists typical daily duties performed on the job. The supervising physician may also be asked for a detailed list of activities the applicant performs. In some cases, neither the applicant nor the supervising physician understood that the activities in question involved the unlicensed practice of medicine or aiding and abetting the unlicensed practice of medicine.

In 2016, the Board issued 17 citations for unlicensed practice of medicine or aiding and abetting the unlicensed practice of medicine. The number of citations issued in the previous five calendar years was: 2015 – 3, 2014 – 9, 2013 – 3, 2012 – 3, 2011 – 3.

The usual citation for unlicensed activity results in a \$2,500 fine. The maximum fine which can be levied is \$5,000. Once a person has been issued a citation, he or she can pay it or request an informal conference to discuss the matter with the Board's designated chief or manager. The cited person may bring an attorney to the conference, if desired. More than half of those receiving citations request such a conference, according to staff. If the citation is upheld, it stays on a person's record for three years, then it is purged.

There is also an appeal process, wherein the cited person may request a hearing before an administrative law judge, whose suggested resolution of the issue will then be considered by the Board.

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2013 – 3, 2012 – 3, 2011 – 3.***

Significantly, until a citation is resolved, an applicant will not be issued a Postgraduate Training Authorization Letter or a license.

The Board is hopeful that by educating individuals about this issue, further instances of unlicensed practice and aiding and abetting unlicensed practice will be avoided.

Medical Consultants Needed

Interested in moving away from direct patient contact? Prefer **not** to buy malpractice insurance, deal with overhead costs, and be on-call? Want your health benefits paid, work flexible hours, either part or full time, and have your weekends free?



Then join our team of professionals! The California Department of Social Services is seeking a few good psychiatrists and physicians who are interested in working with outside treating sources and other State professionals that evaluate medical evidence to determine its adequacy for making disability decisions as defined by Social Security Regulations. On-the-job training is provided.

Interested applicants must have a current CA MD/DO License.

Salary: Full-time salary ranges can start at \$9,152.00 - \$13,547.00 per month depending on experience and credentials.

Job Locations: Covina, Fresno, Los Angeles, Oakland, Roseville, Sacramento, San Diego, Stockton, and Rancho Bernardo.

How to Apply:

Submit both the Standard State Application (STD.678) - <http://jobs.ca.gov/pdf/std678.pdf>

and

Supplemental Application -

http://www.dss.cahwnet.gov/cdssweb/entres/pdf/DSS_MC_SUP_APP.pdf to:

FILE BY MAIL:

California Department of Social Services
Personnel Bureau, Exam Unit
PO Box 944243
Sacramento, CA 94244-2430

FILE IN PERSON:

California Department of Social Services
Personnel Bureau, Exam Unit
744 P Street, OB 8, 15th Floor
Sacramento, CA 95814

If you are interested or have questions, please contact Ruby Chin at (916) 285-7593 or Ruby.Chin@ssa.gov.

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Medical Board of California
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MBC Meetings — 2017

April 27-28, 2017: Los Angeles Area

July 27-28, 2017: San Francisco Area

October 26-27, 2017: San Diego Area

Business and Professions Code § 2021(b) and (c) require physicians to inform the Medical Board in writing of any name or address change. Go to:
http://www.mbc.ca.gov/Licensees/Address_of_Record.aspx.

(All meetings of the Medical Board of California are open to the public. To the extent possible, meetings will be webcast and offered via teleconference. To watch the meetings streamed live and/or to find the telephone number to phone in a question, visit the Board's website at <http://www.mbc.ca.gov>).

Contact Us:

Medical Board of California

For questions or assistance with the following: (800) 633-2322 or (916) 263-2382

*Consumer Complaints/Information
Applications
Health Facility Discipline Reports
Fictitious Name Permits
License Renewals
BreEZe Assistance*

For questions or assistance with the following:

<i>Continuing Education</i>	(916) 263-2645
<i>Expert Reviewer Program</i>	(818) 551-2129
<i>Publications/Outreach</i>	(916) 263-2466

Affiliated Healing Arts Professions

<i>Midwives - all inquiries</i>	(916) 263-2393
<i>Physician Assistants</i>	(916) 561-8780

Department of Consumer Affairs

<i>Healing Arts Board and Bureau Complaints</i>	(800) 952-5210
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Medical Board of California, Executive Director — Kimberly Kirchmeyer

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Contact us by email: webmaster@mbc.ca.gov