

MEDICAL BOARD OF CALIFORNIA

ANNUAL REPORT

2024/25





Executive Office

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Gavin Newsom, Governor, State of California | Business, Consumer Services and Housing Agency | Department of Consumer Affairs

TO: Members of the California State Legislature

Office of the Secretary of the Senate
Office of the Chief Clerk of the Assembly

Office of the Legislative Counsel Reji Varghese, Executive Director

DATE: October 1, 2025

FROM:

RE: Fiscal Year 2024-2025 Annual Report of the Medical Board of California

Pursuant to Business and Professions Code section 2313 and Government Code section 9795, I am pleased to submit the Fiscal Year 2024-2025 Annual Report of the Medical Board of California (Board).

This report contains a summary of the Board's key activities between July 1, 2024, and June 30, 2025, including various statistics related to its budget and the enforcement and licensing programs.

This report discusses various actions taken related, but not limited to, the following:

- Progress toward establishing a physician health and wellness program (AB 408, Berman).
- Update on the Board's budget, including the repayment of loans provided by other Department of Consumer Affairs funds.
- Progress towards paperless license application processes.
- Establishing the new Complainant Liaison Unit.
- Online training available to Expert Reviewers and Medical Consultants.
- Changes to impairment questions on initial license applications.
- Changes to Board leadership.

The Board's annual reports are available for viewing and download online at https://www.mbc.ca.gov/Resources/Publications/Annual-reports.aspx. To request a hard copy of the report, please call the Board's executive office at (916) 263-2389.

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BOARD ROSTER

The Medical Board of California (Board) is comprised of fifteen members: eight physician members and five public members appointed by the Governor, one public member appointed by the Speaker of the Assembly, and one public member appointed by the Senate Rules Committee. The Board has two standing committees, two disciplinary panels, and the Midwifery Advisory Council that assist with the work of the Board.

Kristina D. Lawson, J.D. *President*

Felix C. Yip, M.D. Vice President

Veling Tsai, M.D. Secretary Jacob Arkatov, J.D.

Irving Ayala-Rodriguez, M.D.

Anni Chung

Asif Mahmood, M.D.

Jodi Remke, J.D.

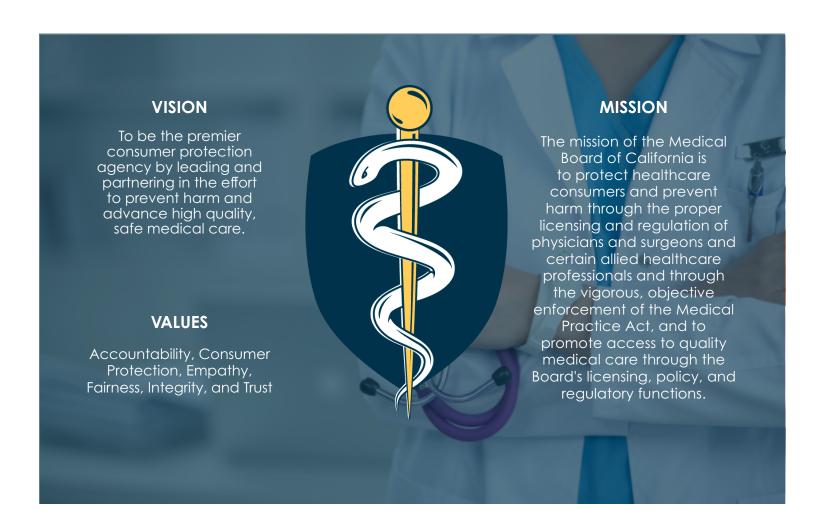
Trinidad Solis, M.D.

Richard E. Thorp, M.D.

Gerald Tolbert, M.D.

Marina Torres, J.D.

Eserick "TJ" Watkins



Gavin Newsom Governor Reji Varghese Executive Director

EXECUTIVE SUMMARY

Progress Toward Establishing a Physician Health and Wellness Program

In October 2024, the Board held an interested parties meeting to hear feedback from stakeholders regarding the Board's proposed legislation to establish a physician health and wellness program to prevent patient harm by treating physicians and other Board licensees and future licensees for health conditions that may impair their ability to practice safely. Following this meeting, the Board approved a legislative proposal at their November 2024 meeting. The proposal is contained within Assembly Bill 408 (Berman, 2025).

Updated License Application Impairment Questions

In July 2024, the Board held an interested parties meeting on the mental and physical health questions on the Board's initial license applications. During that meeting, a task force of Board members and attendees heard from officials from the Federation of State Medical Boards, the North Carolina Medical Board, and the State Medical Board of Ohio.

At this meeting, attendees were able to provide feedback on the Board's current application questions and suggestions for alternative approaches for the Board's consideration.

Then, at their August 2024 meeting, the Board approved an updated introductory statement and revised health questions for its initial license applications. Those changes took effect January 2025.

Board Contributions to Department Diversity, Equity, Inclusion, and Accessibility Efforts

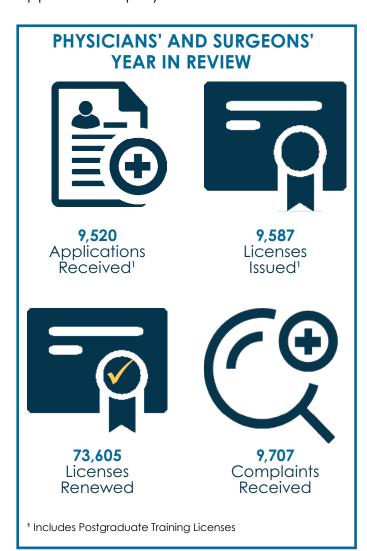
In October 2024, Reji Varghese, Board Executive Director, was elected as the Chair of the Diversity, Equity, Inclusion, and Accessibility Committee of the Department of Consumer Affairs.

Update on the Licensed Physicians from Mexico Pilot Program (LPMPP)

The 3rd Annual Progress Report on the LPMPP was released August 2024 and discussed at the Board's November 2024 meeting.

Changes to Board Leadership

Sharlene Smith was appointed Chief of Enforcement and Kenneth Watson was appointed Deputy Chief of Enforcement.



BUDGET SUMMARY

Physicians' renewal fees are the primary source of revenue for the Board, as illustrated on the revenues and reimbursements chart on page 7. The budget distribution chart reflects the expenditures in each of the Board's programs.

Fiscal Year (FY) 2024-25 marked the third complete year during which the Board possessed the authority to order cost recovery for case investigation and prosecution, following the reinstatement of that authority on January 1, 2022. The Board is also reimbursed for probation monitoring costs. Based on FY 2024-25 expenditures, the Enforcement Program accounts for approximately 77 percent of the Board's overall expenditures; including legal services and probation monitoring costs. The Licensing Program accounts for approximately 11 percent of the Board's overall expenditures, while Executive and Administrative Services account for seven percent, and the Information Systems Branch the remaining five percent.

The Board received an \$8 million dollar loan in FY 2022-23 with a repayment obligation in FY 2024-25 and a \$6 million dollar loan at the conclusion of FY 2023-24 with a repayment obligation in FY 2025-26. Both loans came from other DCA funds. The Board repaid all outstanding loan obligations in FY 2024-25, eliminating the FY 2025-26 interest expense. The Board's improved financial position is due to increases in revenues, unscheduled reimbursements, and lower-than-anticipated expenditures.

The Board complied with the vacancy elimination and expenditures reduction initiatives highlighted in the 2024 Budget Act. As a result, both the Board's budget and positions will be reduced in FY 2025-26. The Board works diligently to appropriately control its expenditures, monitor fees, and build financial reserves to support its operations, consumers, and licensees.

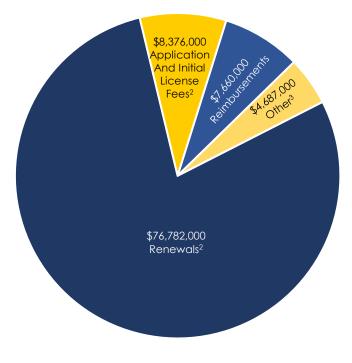


Budget Charts and Tables

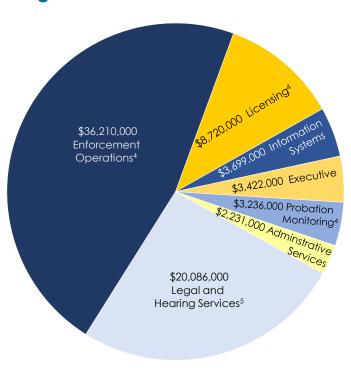
The numbers shown in the associated charts and tables below are preliminary and do not reflect all revenues and expenses for FY 2024-25. For the most recent data see the Executive Management Report included in the Board's <u>quarterly board meeting</u> documents.

Revenues and Reimbursements¹

Revenues and Reimbursements ¹	Dollars	Percent
Renewals ²	76,782,000	79
Application and Initial License Fees ²	8,376,000	8
Reimbursements	7,660,000	8
Other ³	4,687,000	5
Total	97,505,000	100



Budget Distribution¹



Budget Distribution	Dollars	Percent
Enforcement Operations ⁴	36,210,000	47
Legal & Hearing Services ⁵	20,086,000	26
Licensing ⁴	8,720,000	11
Information Systems	3,699,000	5
Executive	3,422,000	4
Probation Monitoring ⁴	3,236,000	4
Administrative Services	2,231,000	3
Total	77,604,000	100

¹ Period 12 is not yet closed. Data as of August 25, 2025.

² Physicians and Surgeons.

³ Regulatory Fees, Delinquency/Penalty/Reinstatement Fees, Interest on Fund, and Miscellaneous.

⁴ Excludes Attorney General Services, Office of Administrative Hearings, and Court Reporter Services.

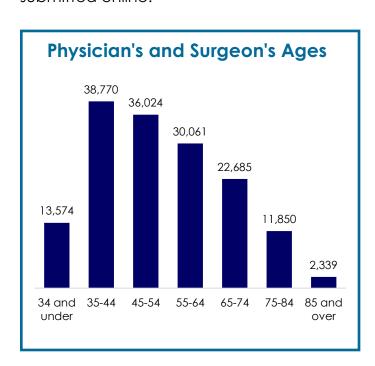
⁵ Includes Attorney General Services, Office of Administrative Hearings, and Court Reporter Services.

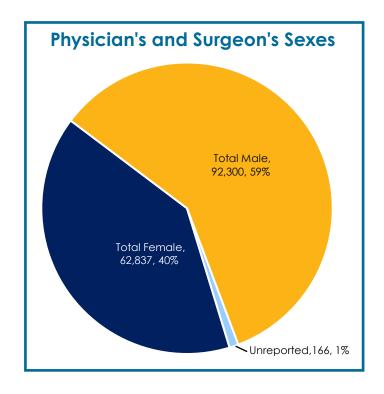
LICENSING SUMMARY

The Board's Licensing Program protects consumers by setting requirements for licensure consistent with statutory and regulatory law, including education, experience, and demonstrated competence, and issues licenses to individuals meeting those requirements. The Licensing Program also provides license verification services, issues fictitious name permits, and approves accreditation agencies for the accreditation of outpatient surgery settings. In FY 2024-25, the Program issued 6,640 Physician's and Surgeon's (P&S) Licenses and 2,947 Postgraduate Training Licenses.

Progress Transitioning to Paperless Licensing Processes

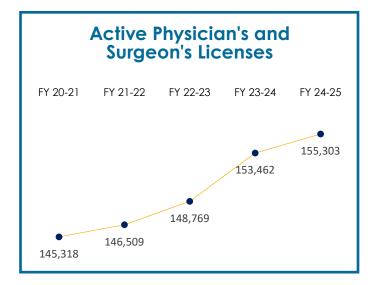
Enhancements to the <u>Direct Online</u>
<u>Certification Submission</u> portal were deployed in January 2025 to allow postgraduate training program users to upload Form ILR, Initial License Renewal Verification of ACGME/RCPSC/CFPC/CODA Postgraduate Training. In March 2025, the Board stopped providing paper license renewal applications for all P&S licenses that expire on or after June 30, 2025. Renewal applications must be submitted online.





New Postgraduate Training Program Resource

The Board launched a <u>webpage</u> that supports postgraduate training programs throughout the licensing application process. This resource provides programs with clear guidance, including key deadlines, required supporting documents, and practical tools to help ensure the accurate and timely submission of forms.



Volunteer Physician Registry Update

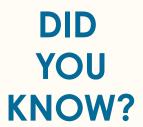
In December 2024, a new Volunteer Physician Registry (VPR) web application was launched, and all existing volunteer profiles were migrated from the prior system. VPR is intended to be used by clinics or other entities seeking volunteer physicians. Physicians in the registry have provided information about areas where they would be willing to volunteer and have provided details regarding their area of practice and foreign language proficiency.

New Initial Renewal Pathway Implemented

Effective January 2025, licensees can renew their P&S License for the first time by providing the Board evidence that they are currently enrolled in a California Board-approved postgraduate training program at the time their license expires. This applies to licensees who are currently enrolled in a Board-approved postgraduate training program but have not yet met the 36-month postgraduate training requirement. They are required to provide proof of completion of 36 months of postgraduate training by their second renewal.

Research Psychoanalyst Program Transferred to Board of Psychology

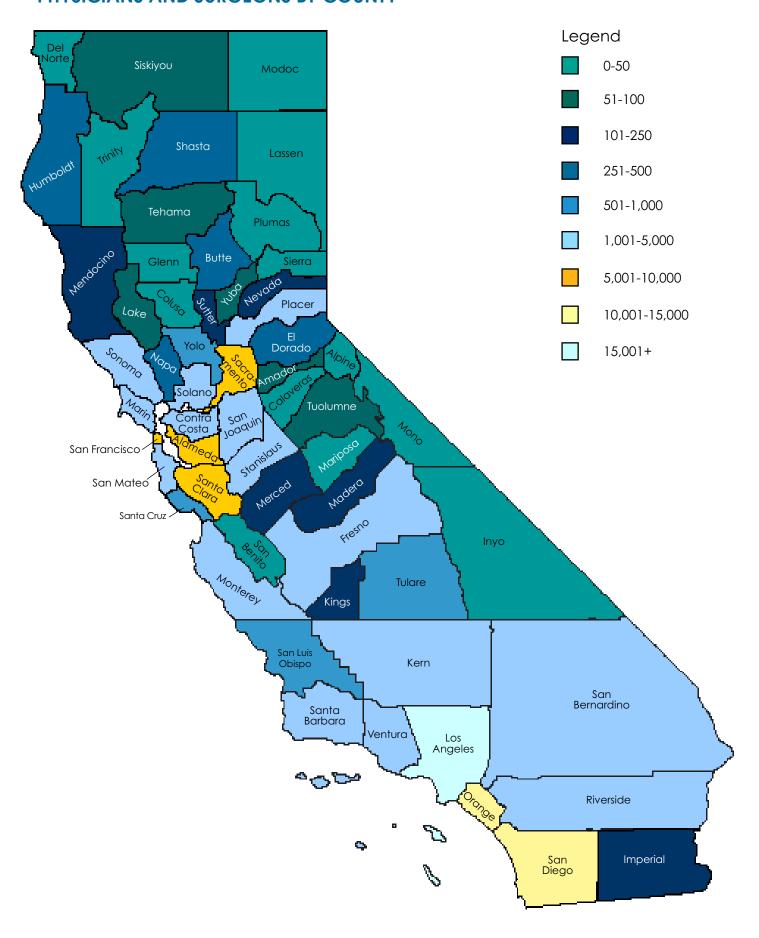
Effective January 2025, the Board transferred the Research Psychoanalyst Program to the Board of Psychology, as required by <u>SB 815</u> (Roth, Chapter 294, Statutes of 2023).



The initial application and renewal fee includes a mandatory \$25 fee for the <u>Steven M. Thompson Physician Corps Loan Repayment Program</u> — a statewide scholarship and loan repayment program for a wide range of health-professions, students, and recent graduates.

Visit the <u>California Department</u> of <u>Healthcare Access and</u> Information website for details.

PHYSICIANS AND SURGEONS BY COUNTY



PHYSICIANS AND SURGEONS BY COUNTY¹

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Cooliny	
Alameda	5,752
Alpine	2
Amador	60
Butte	424
Calaveras	48
Colusa	11
Contra Costa	3,791
Del Norte	30
El Dorado	356
Fresno	2,438
Glenn	9
Humboldt	280
Imperial	131
Inyo	47
Kern	1,212
Kings	119
Lake	70
Lassen	17
Los Angeles	33,672
Madera	261
Marin	1,567
Mariposa	12
Mendocino	153
Merced	217
Modoc	10
Mono	50
Monterey	1,019
Napa	478
Nevada	284
Orange	11,695
Placer	1,608
Plumas	26

County

Coomy	
Riverside	4,121
Sacramento	6,167
San Benito	47
San Bernardino	4,799
San Diego	12,837
San Francisco	8,038
San Joaquin	1,339
San Luis Obispo	844
San Mateo	3,380
Santa Barbara	1,301
Santa Clara	9,895
Santa Cruz	735
Shasta	381
Sierra	0
Siskiyou	65
Solano	1,024
Sonoma	1,522
Stanislaus	1,046
Sutter	164
Tehama	52
Trinity	6
Tulare	603
Tuolumne	104
Ventura	2,045
Yolo	501
Yuba	60
Total In State Address	126,925
Total Out-of-State Address	28,378
Total	155,303

¹Data is for physicians with a renewed and current license excluding those in an inactive, retired, or disabled license status. The breakdown of the excluded license statuses is: California - 3,428: Out-of-State - 4,580; Total - 8,008.

Licenses

	FY 23-24	FY 24-25
Physician Applications Received		
Physician Applications Received	7,453	6,487
Physician Licenses Issued		
FLEX/USMLE ¹	7,835	4,828
NBME ¹	233	196
Reciprocity with Other States (BPC §2135)	1,738	1,616
Total	9,806	6,640
Physician Licenses Renewed		
Renewal Licenses Issued - Fee	66,245	67,769
Renewal Licenses Issued - Fee Exempt ²	6,440	5,836
Total	72,685	73,605
Physician Licenses In Effect ³		
In-State Address	125,619	126,925
Out-of-State Address	27,843	28,378
Total	153,4624	155,303⁵
Physician License Administrative Activit	ły	
Licenses Issued with Public Letters of Reprimand	13	14
Probationary Licenses Issued	10	11
Licenses Denied (No Hearing Requested)	3	0
Statements of Issues to Deny License Filed	5	4
Statements of Issues Granted (License Denied)	1	0
Statements of Issues Denied (License Granted)	1	1
Statements of Issues Withdrawn	2	3
Postgraduate Training Licenses (PTL)		
PTL Applications Received	3,026	3,033
Issued	3,167	2,947
In Effect	5,513	4,905

¹ FLEX: Federation Licensing Exam. USMLE: United States Medical Licensing Exam. NBME: National Board Medical Examiners.

Permits and Special Programs

	FY 23-24	FY 24-25
Fictitious Name Permits		
Issued	1,7361	2,0592
Renewed	5,280	5,352
In Effect	13,319	13,935
Special Faculty Permits		
Issued	2	1
Renewed	10	11
In Effect	26	24
Special Programs		
Application Received	60	60
Licenses Issued	57	57
Licenses Renewed	66	66
In Effect	138	137

¹ Includes 23 Fictitious Name Permits issued on behalf of the Board of Podiatric Medicine.

Verification and Reporting

	FY 23-24	FY 24-25
License Status Verifications		
Telephone Verifications	1,095	2,758
Non-Verification Telephone Calls	42,5421	36,0872
Authorized License Verification System (LVS) Internet Users	834	828
Web License Look-Up ³	3,520,030	2,805,682
Certification Letters and Letters of Good Standing Verifications	9,773	8,573
Reporting Activities		
Disciplinary Reports Mailed to Health Facilities Upon Written Request Pursuant to BPC §805.5	1,540	1,809
Adverse Actions Reported to the National Practitioner Data Bank (NPDB)	6014	527 ⁵
BPC §805 / §805.01 Reports of Health Facility Discipline Received	92/1	127/16

¹ Excludes the 11,145 listed under Consumer Inquiries on page 14.

 $^{^{\}rm 2}$ Includes physicians with disabled, retired, military, or voluntary services license status.

³ Excludes physicians with inactive, retired, or disabled license status.

⁴ Total physician licenses in effect including inactive, retired, or disabled license status -153,624.

⁵ Total physician licenses in effect including inactive, retired, or disabled license status -163,311.

²Includes 31 Fictitious Name Permits issued on behalf of the Board of Podiatric Medicine.

² Excludes the 11,500 listed under Consumer Inquiries on page 14.

 $^{^{\}rm 3}$ Statistics from the Board's BreEZe Online License Verification webpage.

⁴ Includes 593 MD's, 1 Polysomnographic Technologist, 1 Polysomnographic Trainee, and 6 Licensed Midwifes.

⁵ Includes 518 MD's, 3 Postgraduate Training Licenses, 1 Polysomnographic Technologist, 2 Polysomnographic Trainees, 1 Polysomnographic Technician, and 2 Licensed Midwives.

ENFORCEMENT SUMMARY

The Board's Enforcement Program is responsible for reviewing thousands of complaints the Board receives each FY and managing them through the investigatory and disciplinary processes. During FY 2024-25, the Board received 9,707 complaints, compared to 9,715 complaints received in FY 2023-24.

Complainant Liaison Unit Established

As required by BPC section 2220.1, the Board established the Complainant Liaison Unit (CLU), which commenced operations in January 2025. The CLU offers complainants, patients, or patient representatives the opportunity to be interviewed in quality-of-care cases. This process helps ensure that the Board obtains any additional information or evidence not previously submitted. From the onset of its operations through the end of the fiscal year, CLU offered 765 interviews and conducted 459.

Citation and Fine Regulations Approved

The Board's proposed rulemaking to update the Board's cite and fine provisions was approved by the Office of Administrative Law and took effect on October 1, 2024. This rulemaking clarified the Board's authority to issue citations for various violations of the law and how maximum fine amounts are determined.

Online Training Available for Expert Reviewers and Medical Consultants

In December 2024, the Board launched an online, self-paced training for the Expert Reviewer and Medical Consultant programs. This new training format allows participants to complete the modules from any location and at their own pace, significantly enhancing accessibility. This enhancement is expected to boost recruitment and retention for both programs.



THE BOARD NEEDS YOUR EXPERTISE

Actively practicing physicians from all specialties and licensed midwives are welcome to apply and participate in the Expert Reviewer program.

Physicians must be board certified, have no current complaints, no prior discipline, and must be willing and available to testify in court. Further they must live in and practice full-time in California. The Board prefers they have a minimum of three years' experience practicing in their specialty after obtaining board certification.

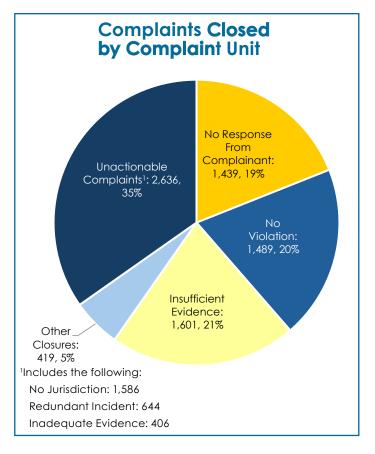
Licensed midwives must have an active midwifery practice for the past two years, have no current complaints, no prior discipline, and must be willing and available to testify in court.

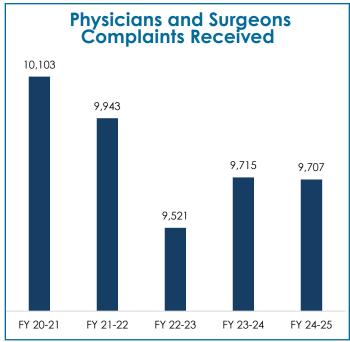
For information and how to apply, please visit our <u>Expert Reviewer webpage</u>.

Physician's and Surgeon's Enforcement Summary

	FY 23-24	FY 24-25
Complaints ¹		
Complaints Received	9,715	9,707
Complaints Closed by Complaint Unit	8,950	8,789
Closed ¹	7,813	7,5842
Referred to Cite and Fine	131	193
Referred to Investigations	1,006	1,012
Investigations		
Opened	1,023	1,013
CIO	287	278
HQIU	736	735
Closed	1,024	1,156
CIO	282	262
HQIU	742	894
Investigation Referrals		
Referred to the AG	406	445
MBC	107	143
HQIU	299	302
Cases Referred for Criminal Action	19	27
Probation Violation Reports Referred	30	29
to the AG	30	27
Consumer Inquiries		
Consumer Telephone Inquiries	11,145	11,500
Consumer Jurisdictional Inquiries	6,130	6,325

 $^{^1}$ FY 23-24 - 2,484 complaints closed were received in a prior fiscal year. FY 24-25 - 2,755 complaints closed were received in a prior fiscal year.





CURES ANNUAL FEE RECENTLY INCREASED FROM \$9 TO \$15

The fee is on licensees that are authorized to prescribe, order, administer, or furnish Schedule II, Schedule IV, or Schedule V controlled substances.

² Represented as total closures in the "Complaints Closed by Complaint Unit" pie chart.

Complaints Received by Complaint Type and Source

	Public	Business and Professions Code ¹	Licensee/ Professional Group ²	Government Agency ³	Miscellaneous/ Anonymous	Total Type Complaints Received
Fraud	108	0	6	20	27	161
Health and Safety ⁴	97	0	9	46	59	211
Non-Jurisdictional⁵	1,057	8	13	19	230	1,327
Gross Negligence/Incompetence ⁶	3,485	543	28	261	271	4,588
Personal Conduct ⁷	38	51	10	177	38	314
Unprofessional Conduct®	1,323	125	41	822	339	2,650
Unlicensed/Unregistered	157	0	2	106	191	456
Total Source Complaints Received	6,265	727	109	1,451	1,155	9,707

¹ Includes complaints received pursuant to BPC §§800 and 2240(a), and includes complaints initiated based upon reports submitted to the Board by hospitals, insurance companies and others, as required by law, regarding instances of health facility discipline, malpractice judgments/settlements, or other reportable activities.

Physician and Midwife Consultants Needed



These consultants review complaints to determine whether a formal investigation is needed.

Participating physicians and licensed midwives are reimbursed \$75 per hour for record review and report preparation. Training is online and self-paced.

Contact the Medical Consultant Program for more information. Application and eligibility information is available on our <u>website</u>.

² Includes the following complaint sources: other Licensee, Professional Society or Association.

³ Includes the following complaint sources: Internal, Law Enforcement Agency, other California State Agency, other State Agency, other boards within the Department of Consumer Affairs, and Federal or other Government Agency.

⁴Includes excessive prescribing, sale of dangerous drugs, etc.

⁵ Includes complaints not under the authority of the Board and are referred to other agencies such as the Department of Health Care Services, Department of Managed Health Care, etc.

⁶ Includes complaints related to the quality of care provided by licensees.

⁷ Includes licensee self-abuse of drugs/alcohol, conviction of a crime, etc.

⁸ Includes sexual misconduct with patients, failure to release medical records, violation of BPC §805 reporting, etc.

Administrative Actions

	FY 23-24	FY 24-25
Administrative Actions		
Accusation	249	239
Petition to Revoke Probation/Accusation	27	24
and Petition to Revoke	2/	24
Amended Accusation/Petition to Revoke	49	43
Completed Investigations Referred to the		
AG and Awaiting the Filing of Accusation	81	141
as of June 30, 2025		
Cases Over 6 Months Old that Resulted in the Filing of Accusation	251	236
Administrative Outcomes		
License Revoked	15	24
License Surrendered (in Lieu of Accusation	10	
or with Accusation Pending)	66	60
License Placed on Probation with	0	_
Suspension	2	5
License Placed on Probation	130	111
Probationary License Issued	10	11
Public Reprimand	97	97
Other Actions (e.g., Exam Required,	1	1
Educational Course, etc.)	'	ı
Accusation Withdrawn	14	6
Accusation Dismissed	7	10
Probation Violation Outcomes		
License Revoked	8	14
License Surrendered	36	28
Additional Suspension and Probation	0	1
Additional Probation	7	11
Public Reprimand	0	1
Other Actions (e.g., Exam Required,	2	0
Educational Course, etc.)	2	0
Petition Withdrawn	3	0
Petition Dismissed	0	0
Referral and Compliance Actions		
Citation and Administrative Fines Issued	135	180

DID YOU KNOW?

The <u>Guidelines</u>
<u>for Prescribing</u>
<u>Controlled</u>
<u>Substances for Pain</u>
were updated in
2023.

Petition Activity

	FY 23-24	FY 24-25
Petitions for Reinstatement of License		
Filed	13	11
Granted	2	4
Denied	7	1
Petitions for Penalty Relief ¹		
Granted	19	10
Denied	1	10
Petitions to Compel Exam		
Filed	35	40
Granted	39	36
Denied	0	0

¹Penalty Relief includes: Petitions for Modification of Penalty and Petitions for Termination of Probation.

License Restrictions/Suspensions and Temporary Restraining Orders

	FY 23-24	FY 24-25
Imposed while Administrative Action Pending		
Interim Suspension Order (ISO)	13	30¹
Temporary Restraining Order (TRO)	0	0
Other Suspension Orders	31	262

¹ Pursuant to BPC §2220.05(c), ISOs and TROs were granted in the following priority categories: 0 - gross negligence/incompetence resulting in death or serious bodily injury; 0 - drug or alcohol abuse involving death or serious bodily injury; 1 - excessive prescribing; 0 - excessive recommending of medical cannabis; 1 - sexual misconduct with a patient; 1 - practicing under the influence of drugs/alcohol; and 0 - excessive prescribing to a minor.

² Includes 6 - Automatic Suspension Orders per BPC §2236; 1 - license restrictions per Penal Code §23; 2 - license restrictions pursuant to court order; 5 - out-of-state suspension orders per BPC §2310; 0 - stipulated agreements to suspend or restrict the practice of medicine; and 12 - cease practice orders issued for violation of probation condition or violation of interim suspension order.

	Sought	Granted ¹		
Sought and Granted by Case Type	FY 2	24-25		
Gross Negligence/Incompetence	8	8		
Inappropriate Prescribing	6	3		
Unlicensed Activity	ctivity 0			
Sexual Misconduct	4	3		
Mental/Physical Illness	18	15		
Self-Abuse of Drugs/Alcohol	11	13		
Fraud	4	3		
Criminal Charges/Conviction	11	6		
Unprofessional Conduct	3	5		
Total	65	56		

¹ Some orders granted were sought in prior FY.

Malpractice Settlement Reports Received per BPC §801.01 by Specialty Practice

	Reports ¹	Physicians ²
Specialty/Sub-Specialty		
Anesthesiology	15	8,308
Cardiology	9	4,385
Colon and Rectal	2	272
Dermatology	6	2,517
Diagnostic Radiology	7	4,744
Emergency Medicine	26	6,378
Endocrinology	1	1,198
Gastroenterology	7	2,100
General/Family Practice	43	12,743
Geriatric Medicine	1	792
Gynecologic Oncology	4	165
Gynecology	12	6,829
Hematology	2	1,542
Hospice and Palliative Care	1	902
Infectious Disease	4	1,201
Internal Medicine	23	26,569
Interventional Cardiology	1	598
Interventional Radiology	2	441
Medical Oncology	5	1,732
Neonatal/Perinatal	1	924
Nephrology	1	1,494
Neurological Surgery	14	761
Neurology	10	3,187
Obstetrics	45	6,829
Ophthalmology	10	3,213
Orthopedic Surgery	28	3,788
Otolaryngology	6	2,006
Pain Medicine	5	928
Pathology	7	5,054
Pediatrics	7	13,581
Physical Medicine & Rehabilitation	3	1,607
Plastic Surgery	15	1,398
Psychiatry	3	10,760
Pulmonary Disease	3	1,991
Radiation Oncology	1	676
Radiology	34	1,534
Rheumatology	1	847
Surgery	40	5,025
Thoracic Surgery	3	666
	13	1 400
Urology	13	1,423

¹ The procedure was performed in the practice specialty/sub-specialty; however, the physician may or may not have been certified in the specialty/sub-specialty area.

Reports Received per BPC §§805 and 805.01 and Report Outcomes

	805	805.01
Total Reports Received		
Total Reports Received	127	16
Peer Review Body Type		
Health Care Facility/Clinic	96	14
Surgical Center	0	1
Health Care Services Plan	13	0
Professional Society	2	0
Medical Group/Employer	16	1
Outcomes of Reports Received		
Pending Disposition	85	4
Accusations Filed	1	0
Cases Closed	41	12

Reports Received Based Upon Legal Requirements for Physicians and Surgeons

	FY 23-24	FY 24-25
Medical Malpractice		
Insurers ¹	322	276
Attorneys/Self-Reported/Employers ¹	196	170
Courts ²	0	0
Total	518	446
Other Required Reporting		
Coroners' Reports ³	1	2
Criminal Charges and Convictions ⁴	37	45
Health Facility Discipline Reports	91	127
Medical Cause or Reason ⁵	1	16
Health Facility Reports ⁶	ı	16
Health Facility Report Sexual Abuse/ Misconduct Allegation ⁷	56	62
Outpatient Surgery Settings Reports Patient Death ⁸	7	12
Total	193	264
Stem Cell Therapy Complaints and Action	on Taken	
Complaints Received	3	1
Disciplinary Actions Taken	3	0
Administrative Actions Taken	0	0

 1 Per BPC §801.01.
 5 Per BPC §805.

 2 Per BPC §803.
 6 Per BPC §805.01.

 3 Per BPC §802.5.
 7 Per BPC §805.8.

 4 Per BPC §§802.1 and 803.5.
 8 Per BPC §2240(a).

 $^{^{\}rm 2}$ California physicians certified in specialty according to the 2023-2024 American Board of Medical Specialties Certification Statistics Report.

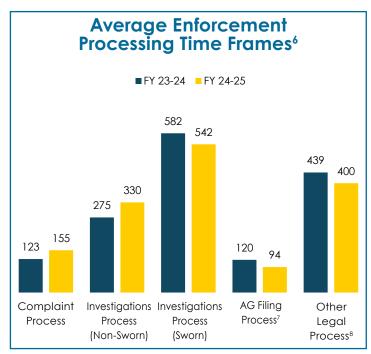
Administrative and Probation Violation Outcomes by Case Type¹

			Probation with		Probationary License	Public		Total
	Revocation	Surrender	Suspension	Probation	Issued	Reprimand	Other	Actions
Gross Negligence/Incompetence	10	34	2	56	-	34	-	136
Inappropriate Prescribing	-	15	-	19	-	6	1	41
Unlicensed Activity	1	-	-	-	-	3	-	4
Sexual Misconduct	1	9	1	5	-	5	-	21
Mental/Physical Illness	6	6	-	5	-	2	-	19
Self-Abuse of Drugs/Alcohol	2	10	1	21	-	7	-	41
Fraud	4	3	1	3	-	-	-	11
Conviction of a Crime	2	3	1	4	-	2	-	12
Unprofessional Conduct	12	8	-	9	11	39	-	79
Total Administrative Actions	38	88	6	122	11	98	1	364

¹ Pursuant to BPC §2220.05(c), disciplinary actions were taken in the following priority categories: 12 - gross negligence/incompetence resulting in death or serious bodily injury; 0 - practicing under the influence resulting in death or serious bodily injury; 32 - excessive prescribing; 0 - excessive recommending of medical cannabis; 9 - sexual misconduct with a patient; 6 - practicing under the influence of drugs/alcohol; and 0 - excessive prescribing to a minor.

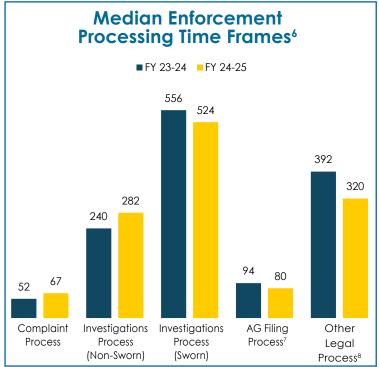
Enforcement Program Caseload

	Statewide	Per Investigator/ Inspector
Health Quality Investigat	tion Unit (Departı	ment of Consumer
Affairs) ¹		
Active Investigations	917	102
AG Cases Assigned ³	295	3
Probation Unit⁴		
Monitoring Cases⁵	511	32



'Includes physicians and surgeons, licensed midwives, and polysomnographic program.

²Average is determined by using the total number of authorized positions, including vacant positions.



³Cases are at various stages of AG processing and may require supplemental investigative work, such as subpoena services, interviewing new victims or witnesses, testifying at hearings, etc.

Includes physicians and surgeons, licensed midwives, and polysomnographic program probationers.

⁵51 additional monitoring cases were inactive because the probationer was out of state as of June 30, 2025. 'Average and median time (calendar days) in processing complaints during the fiscal year, for all cases, from date of original receipt of the complaint, for each stage of discipline, through completion of judicial review.

⁷ Days from case transmittal to initial pleading filed.

⁸ Days from filing to final case disposition.

Substance-Abusing Licensees

	FY 2	3-24	FY 24-25		
Probationers					
Probationers Whose Conduct was Related to a Substance-Abuse Problem	14	41	131		
Substances Involved ¹					
Alcohol	10	00	9	4	
Ambien		1		1	
Amphetamine	2	2	:	2	
Benzodiazepine		1		1	
Cannabis	4	4		4	
Cocaine	2	2		1	
Demerol		1		1	
Fentanyl		1	:	2	
Fiorcet		1		1	
Hydrocodone	()		1	
Methamphetamines	4	4	;	3	
Opiates		1	1		
Propofol	2	2	1		
Psilocybin	()	1		
Multiple Controlled Substances	4	.9	40		
Probation Completion					
Probation Successfully Completed ²	1	6	1	9	
Failed to Complete Probation	9	9	5		
Substances Involved ¹	Y	N	Y	N	
Alcohol	10	7	16	4	
Ambien	0	0 0		0	
Cannabis	0	1	0	0	
Cocaine	0	1	0	0	
Demerol	0	0	1	0	
Psilocybin	1	0	0	0	
Methamphetamines	3	0	0	1	
Multiple Controlled Substances	5	3	2	1	
Relapses	FY 2	3-24	FY 2	4-25	
Probationers who Relapsed	(3		5	
Substances Involved ¹					
Alcohol	2	2		2	
Amphetamine		1	0		
Methamphetamines	()		1	
Phenobarbital	()	1		
			1		

	FY 23-24	FY 24-25
Cease Practice Orders		
Probationers Issued a Cease Practice Order	5	6
Substances Involved/Reason for Order ¹		
Alcohol	2	1
Amphetamine	1	0
Fentanyl	0	1
Methamphetamines	0	1
Phenobarbital	0	1
Tramadol	0	1
Failed to Appear for a Biological Fluid Test (BFT)	1	1
Failed to Cooperate with BFT	1	0
Failed to Successfully Complete a Clinical Competence Assessment Program	1	0
Suspensions		
Probationers Issued a Suspension	0	0
Substance Involved		
N/A	N/A	N/A
Petitions to Revoke		
Petitions to Revoke	4	6
Substances Involved/Reason for Action ¹		
Alcohol	2	0
Methamphetamines	0	1
Tramadol	0	1
Failed to Appear for a BFT	1	0
Multiple Probation Violations	1	3
Non-Practice Over 2 Years	1	1
Failed to Obey Rules Governing the Practice of Medicine	0	1

¹Some probationers had more than one substance involved.

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 $^{^{\}rm 2}$ Those who successfully completed probation or a petition for termination of probation was granted.

Substance-Abusing Licensees Major Violations by Substance¹

	- - - - - - - - - -	AICO IO	, i.e.	Ampredame		Cannabis			4000	Memampheramine				Ildinado	Multiple Controlled	Substances	Total Major	Violations
	FY 23-24	FY 24-25	FY 23-24	FY 24-25	FY 23-24	FY 24-25	FY 23-24	FY 24-25	FY 23-24	FY 24-25	FY 23-24	FY 24-25	FY 23-24	FY 24-25	FY 23-24	FY 24-25	FY 23-24	FY 24-25
Failed to Undergo a Required Clinical Diagnostic Evaluation	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	0
Committed Multiple Minor Violations of Probation Conditions and Terms	2	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	3	0
Treated a Patient(s) while Under the Influence of a Prohibited Substance	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0	0
Engaged in Any Drug or Alcohol Related Act that is a Violation of State or Federal Law or Regulation	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0	0
Failed to Undergo Biological Fluid Testing (BFT) when Ordered	9	5	-	-	1	-	1	-	-	-	-	-	-	-	4	1	15	6
Used, Consumed, Ingested, or Administered to Himself or Herself a Prohibited Substance ²	2	3	1	-	-	1	-	-	-	1	-	1	-	1	-	-	3	7
Knowingly Used, Made, Altered, or Possessed any Object or Product in Such a Way as to Defraud or Attempt to Defraud a BFT Designed to Detect the Presence of a Prohibited Substance	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0	0
Failed to Comply with any Term or Condition of Probation that Impairs Public Safety ²	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0	0
Substances Involved	14	8	1	0	1	1	2	0	0	1	0	1	0	1	4	1	22	13

¹ Per 16 CCR §1361.52(a)(1-8).

² The categorized substance is the substance the individual used, consumed, ingested, or administered to themselves, not the substance involved in the original discipline.

ALLIED HEALTHCARE PROFESSIONALS

Allied healthcare professionals under the Board's authority include licensed midwives (LM), and the polysomnographic program, consisting of polysomnographic trainees, technicians, and technologists. Polysomnographic registrants work under the supervision of a licensed physician and surgeon and engage in the diagnosis, treatment, and management of patients with sleep and wake disorders. In addition, the Board approves accreditation agencies for the accreditation of outpatient surgery settings. In January 2025, as required by SB 815 (Roth, Chapter 294, Statutes of 2023) the Board transferred the licensing and regulatory authority of research psychoanalysts to the Board of Psychology.

Issued

	1330EU	Content	
Licenses and Registrations			
Licensed Midwives	34	494	
Research Psychoanalyst ¹	7	0	
Polysomnographic Trainee	77	164	
Polysomnographic Technician	20	166	
Polysomnographic Technologist	14	615	
Accreditation Agencies for	0	4	
Outpatient Surgery Settings	0	4	
	FY 23-24	FY 24-25	
Complaints			
Complaints Received	49	43	
Complaints Closed by Complaint Unit	50	40	
Investigations			
Cases Opened	16	14	
Cases Closed	12	11	
Cases Referred to the Attorney General (AG)	3	4	
Cases Referred for Criminal Action	1	1	
Probation Violation Reports Referred to the AG	0	1	
Reports Received Based Upon Legal Requir	ements		
Midwife Hospital Transfer Forms ²	219	208	
Outpatient Adverse Event Reports ³	36	17	
Referral and Compliance Actions			
Citation and Administrative Fines Issued	2	0	
License Restrictions/Suspensions Imposed V Action Pending	While Admin	istrative	
Interim Suspension Order	0	0	
Other Suspension Orders	1	1	
Administrative Actions			
Accusation	3	3	
Petition to Revoke Probation	0	0	

¹Research Psychoanalyst data as of December 31, 2024.

	FY 23-24	FY 24-25
Administrative Actions Continued		
Amended Accusation/Petition to Revoke	2	0
Statement of Issues to Deny Application	1	1
Completed Investigations Referred to the		
AG and Awaiting the Filing of Accusation as of June 30, 2025.	0	0
Administrative Outcomes		
License Revoked	1	2
License Surrendered (in Lieu of Accusation or with Accusation Pending)	3	1
License Placed on Probation with Suspension	0	0
License Placed on Probation	2	0
Probationary License Issued	0	0
Public Reprimand	0	0
Other Actions (e.g., Exam Required, Educational Course, etc.)	0	0
Statements of Issues Denied (License Granted)	0	1
Statements of Issues Granted (License Denied)	0	0
Accusation/Statements of Issues Withdrawn	0	0
Accusation Dismissed	0	0
Probation Violation Outcomes		
License Revoked or License Surrendered	2	1
Additional Suspension or Probation	0	0
Petition Withdrawn or Dismissed	0	0
Petitions for Reinstatement of License		
Filed	0	1
Granted/Denied	0/0	0/0
Petitions for Penalty Relief ¹		
Granted/Denied	0/1	0/0
Petitions to Compel Exam		
Filed	0	2
Granted/Denied	0/0	2/0

¹ Penalty Relief includes Petitions for Modification of Penalty and Petitions for Termination of Probation.

² Per BPC §2510.

³ Per BPC §2216.3.

Licensed Midwife Report

LMs are licensed by the Board to practice midwifery and attend cases of normal pregnancy and childbirth. LMs may provide prenatal, intrapartum, and postpartum care, including family-planning care, for the mother, and immediate care (first six weeks) for the newborn.

	2023	2024
Licensed Midwife Annual Report Summary ¹		
Clients Served as Primary Caregiver at the Onset of Care	7,444	6,504
Planned Out-of-Hospital Births at the Onset of Labor	4,958	4,423
Planned Out-of-Hospital Births Completed in an Out-of-Hospital Setting ²	4,174	3,744
Sets of Twin Births	4	6
Sets of Multiple Births (Other Than Twin Births)	0	0
Breech Births	89	34
VBAC (Vaginal Birth After Cesarean Section)	230	185
Complications		
Resulting in the Mortality of the Mother Prior to Transfer	1	0
Resulting in the Mortality of the Mother After Transfer	0	0
Resulting in the Mortality of the Infant Prior to Transfer	1	0
Resulting in the Mortality of the Infant After Transfer	3	2
Resulting in Fetal Demise Prior to the Mother Being Transferred	12	13
Resulting in Fetal Demise After the Mother was Transferred	8	10

	2023	2024
Antepartum Transfers		
Primary Care Transferred to Another Health Care Practitioner (Elective)	322	268
Urgent or Emergency Transport of Expectant Mother	107	120
Intrapartum Transfers		
Elective Hospital Transfer	647	574
Urgent or Emergency Transfer of an Infant or Mother	140	110
Postpartum Transfers		
Elective Hospital Transfer of Mother	29	15
Elective Hospital Transfer of Infant	20	21
Urgent or Emergency Transfer of Mother	45	39
Urgent or Emergency Transfer of Infant	36	49

¹ Conclusions should not be drawn from this summary as data does not specify whether the death is intrapartum or neonatal; whether the affected perinate had congenital anomalies incompatible with life; or whether the perinate was born in or out of a hospital. Births are attended by the licensed midwife as the primary caregiver.

MEDICAL BOARD OF CALIFORNIA

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Affiliated Healing Arts Professions

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Physician Assistants (916) 561-8780

²Clients delivering multiples is counted as one birth.