



New tool available for patients to express wishes for end-of-life care

In the past, patients expressed their end-of-life care decisions by filling out a “do not resuscitate” (DNR), handwriting a note, or by telling a loved one. Current California law provides the requirements for the execution of an advance health care directive, an oral designation of a surrogate decision maker, and how an advance health care directive should be implemented by health care providers. The law defines a “request to forgo resuscitative measures” as a written document, signed by an individual, or a legally recognized surrogate health care decision maker, and a physician that directs a health care provider to forgo resuscitative measures for the individual.

During the 2008 legislative session, Assembly Member Lois Wolk authored AB 3000, which becomes law effective January 1, 2009. It provides seriously ill patients, in emergency situations or with a life expectancy of a year or less, with a new tool to communicate precise instructions for their end-of-life health care. When a patient has a completed Physicians Orders for Life Sustaining Treatment (POLST) form, the form must be honored by all health care providers. The POLST form addresses a range of treatment options and enables a patient to clearly express their treatment preferences regarding life-sustaining treatments such as resuscitation, nutrition, and pain management.

Use of the POLST form begins with a conversation between the medical provider and patient about life-sustaining treatment options. Patients’ wishes for the type and intensity of intervention become a set of medical orders printed on brightly colored paper. Completed by a health care provider based on patient preferences and medical indications, and signed by a physician and the patient, the form moves with the patient and must be honored across all health care settings. The health care provider, during the process of completing the POLST form, should inform the patient about the difference between an advance health care directive and the Physician Orders for Life Sustaining Treatment form.

These standardized orders are designed specifically to assist individuals in fragile or frail health or those diagnosed with a terminal illness. Unlike broad advanced health care directives, which are not always readily available to health care personnel, this new form allows for specific, detailed instructions regarding when, where, to what extent, and under what circumstances life-sustaining, resuscitative measures should be employed.

(continued on page 6)

IN THIS ISSUE

President’s Report	2
Getting from A to D: (Accusation to Decision: Administrative Actions)	4
Legislator profile	5
Help your patients quit smoking	7
Evaluating the impact of the HPV vaccine	8
Changes to physician assistant practice and supervision	9
Medical Board recognizes three new international medical education programs	9
Practical Pain Management course	10
Mandated standardized written information	12
News from the FDA	13
Administrative actions	14

**Medical Board’s Fiscal Year 2007–2008
Annual Report inside**

The mission of the Medical Board of California

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

President's Report

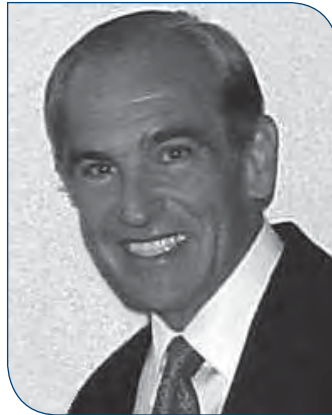
Reflecting on my tenure as president of the Medical Board of California, I am excited about and proud of the many changes that have taken place at the Board during my term, and enthusiastic about following their continued progress. Some of the changes have been controversial—others not. Throughout my presidency, I had the pleasure of representing the Board at several legislative hearings involving Board-related issues which proved to be an interesting experience and process.

In my first president's column, I emphasized "our mission is consumer protection, and I believe a healthy physician workforce will help promote that mission." I continue to be a firm believer and promoter of that mission. The predominant focus during my presidency has been directed towards the transition from the end of diversion to promoting wellness, Board restructuring, membership reduction, access to care, implementation of vertical enforcement, and the continued expansion of telemedicine in California.

The following is a short overview of some changes and accomplishments that occurred under my presidency:

- At the July 2007 quarterly meeting of the Medical Board, the full Board unanimously voted to permit its Diversion Program to sunset, or be abolished, on June 30, 2008. A report released by the Bureau of State Audits in June 2007 identified several ongoing problems with the Board's Diversion Program, including not adequately monitoring drug or alcohol addicted physicians and failing to terminate some physicians who had relapsed. Those same flaws were identified in 2004 and 2005. With no legislation introduced to extend the program, a transition plan was established and approved by the Board in November 2007. The plan identified the different groups of program participants and determined a course of action for each group following sunset of the program.

This decision reflects years of consumers testifying before the Board against confidential programs. It also reflects a culture change at the Board towards wellness



Richard Fantozzi, M.D.
President of the Board

and prevention, entirely based upon public protection. Accordingly, I convened a presidential diversion summit in January 2008 in an endeavor to improve the Board's mission to protect the public, while also attempting to find common ground with others who are interested in a proactive approach to help physicians who need help in the arena of substance abuse.

- In July 2007, Board Member Shelton Duruisseau, Ph.D., and staff person Kevin Schunke presented a detailed and thought-provoking position paper entitled, "Physician Wellness as Constrained by

Burnout." The paper identified, assessed, and addressed physician burnout. Its focus centered on the benefits that might be derived from the implementation of a program to assist with licensees' well-being. In fulfilling the Board's commitment to wellness, we established a Wellness Committee tasked with addressing programs to improve its licensees' well being—one of which must be guiding physicians from the earliest years of training to cultivate methods of personal renewal, emotional self-awareness, connection with social support systems, and a sense of mastery and meaning in their work.

To date, the Wellness Committee has invited experts to speak to the committee regarding best-practice models and mentoring. Several mentoring experts contributed to articles that were published in the Board's newsletter on the benefits of mentoring. In addition, recent legislation, AB 2443, will require the Board to establish a wellness program to address and prevent illness and burnout due to stress, overworking, and professional dissatisfaction by including an evaluation of wellness education. I am particularly excited about the prospect of the Board's Wellness Committee and its Educational Committee creating partnerships with medical schools.

- Recently, the Board underwent a major restructuring and a reduction in its membership from 21 to 15 members. The two-division structure of the Board was eliminated—the Division of Medical Quality and the Division of Licensing—and the full Board took

(Continued on page 3)

President's Report *(continued from page 2)*

responsibility for knowing policy and statutes for both licensing and enforcement programs. Decision-making authority was revised allowing the Board to delegate authority to the executive director to adopt default decisions and stipulations to surrender a license in disciplinary proceedings. An ambition of mine as Board president has been for the current and future committee chairs to be dedicated, invested, and empowered in the Board's work and that the committee chairs share their valuable and specialized knowledge with the full Board. This new structure allows for that. Details of these changes are reflected in recent amendments to Business and Professions Code section 2004.

- The ability for all Californians to have access to quality medical care is important to me as a physician and fellow Californian. The cost of medical care is a growing barrier, especially for the underserved populations. The population of California's medically uninsured is growing. In addition, rationing of care and inadequate reimbursement for managed care has further limited access to critical medical services. While this is not a direct statutory responsibility of the Medical Board, the Board recognizes the need to influence the process, especially at the legislative level. Through the Board's Access to Care Committee and several pieces of legislation we supported, the Board continues its efforts to make health care accessible to all Californians.
- The Board's new vertical enforcement model was developed as a recommendation from the Enforcement Monitor in 2005. In our continuing commitment to improve the timeframes for the enforcement process, the Board and the Attorney General's Office enforcement and prosecution teams have been successful in developing documents including the Vertical Prosecution Manual in 2006 and, more recently, the Vertical Enforcement Guidelines in 2008.
- The continued expansion of telemedicine in California is a priority for me and the Board. It ties in with our commitment and efforts to improve access to care and physician wellness and burnout. The Board continues to work closely with the Health Professions Education Foundation encouraging students and graduates to

participate in the loan repayment program providing them the opportunity to practice direct patient care in medically underserved areas of the state. Further, the Board supported two legislative bills that became law in 2008: AB 329 (Nakanishi) added Business and Professions Code section 2028.5 and allows the Board to establish a pilot program to expand the practice of telemedicine in California. The program will develop methods, using a telemedicine model, to deliver throughout the state health care to persons with chronic diseases and information on the best practices for chronic disease management services. AB 1224 (Hernandez), amended Business and Professions Code sections 2290.5 and 3041 and added optometrists to the list of health care professionals who are allowed to practice via telemedicine. We will continue our efforts to improve health care in California by bringing down the barriers and bridging time and distance.

This has been an ambitious and changing time for the Board. I truly believe that only with the participation of all affected parties—working together for change—will we best achieve our goals.

I appreciate this rare opportunity to work with the Medical Board and its staff and to serve the consumer and physician communities of California. I want to express special thanks to all the staff of the Medical Board. Many of the executive staff and I have worked closely on several tasks and legislative agendas. This experience is dear to me and it has been my pleasure to work with such dedicated and professional individuals.

Similarly, I want to acknowledge the acquaintances and friendships I have developed with many Board members, legislators and their staffs, University of California medical schools, advocacy groups, and a multitude of government officials within California and across the nation. The thoughtfulness and insight of so many is humbling and reassuring. All of these friendships I will carry through life. To all with whom I have worked and shared thoughts—thank you!

Getting from A to D

Accusation to Decision: Administrative Actions

Laura Sweet, Deputy Chief of Enforcement, Medical Board of California

The blurb reads something like this, “Stipulated Decision. Engaged in a sexual relationship with a patient. Revoked, stayed, placed on 7 years probation with terms and conditions including, but not limited to, completing an ethics course and professional boundaries course.” Or, maybe it reads, “Approved the filling of prescriptions for dangerous drugs via the Internet without performing an appropriate prior examination or maintaining adequate and accurate medical records. Revoked, stayed, placed on 5 years probation with terms and conditions including, but not limited to, taking a prescribing practices course and obtaining a practice monitor.”

I am willing to wager some of you already may have checked out the administrative actions published in this newsletter. I’m also confident in predicting that some of the summaries or the discipline imposed made your forehead furrow.

We often hear, based upon the summaries that are published in the newsletter, that the Medical Board is either too indulgent or too draconian, (generally depending upon whether the holder of the opinion is a complainant or a physician). Complainants’ perceptions are that we don’t impose enough discipline. Some physicians believe we’re over-the-top. Admittedly, sometimes much has happened between the filing of charges and the imposition of discipline that does not get articulated in those paragraphs, so one’s perception that the discipline seems too stern, or too lenient is perfectly understandable.

One thing to note in assessing each case is whether the decision was stipulated or heard before an administrative law judge. In the absence of the notation “Stipulated Decision,” the presumption can be made that the case went to a hearing and was heard before an administrative law judge, or the physician defaulted (failed to respond to charges). A deputy attorney general from the Office of the Attorney General represented the Medical Board of California, and the “respondent,” was represented by a defense attorney, or represented him or herself. Hearings can be as short as one day to as long as several months.

The rules of evidence are similar to, but not as formal as, those in a criminal trial: burden of proof, “clear and convincing to a reasonable certainty,” (about 75-80 percent), versus the criminal standard of proof, “beyond a reasonable doubt,” (98-99 percent), or the civil burden of proof, “preponderance of the evidence,” (51 percent).

Administrative law judges will hear all of the evidence, presented by both sides, and render a proposed decision that includes findings of fact, legal conclusions, and penalty, if warranted. These decisions are often lengthy documents that carefully assess the evidence. They can be found on the Board’s Web site at www.mbc.ca.gov under Enforcement Public Document Search. On the occasion when you see charges that seem egregious and the discipline doesn’t comport with the accusation, I recommend that you actually read the decision. It almost always proves enlightening in explaining how the penalty was determined.

Stipulated decisions are like plea bargains. Just as in the criminal arena, most cases are resolved in this manner because each case going to trial would clog an already overburdened trial calendar.

So how do we arrive at stipulations? A document entitled “Model Disciplinary Guidelines” sets forth the range of penalties depending upon the violation that is proven (via hearing) or admitted to (via stipulation). When an accusation is filed, the deputy attorney general who drafts the document must ethically believe he/she can prove each charge contained therein. In arriving at a stipulation, the first concern on the Board negotiator’s mind is ensuring public protection. Business and Professions Code section 2001.1 reads, “Protection of the public shall be the highest priority for the Medical Board of California in exercising its licensing, regulatory, and disciplinary functions.” The negotiator must also consider Business and Professions Code section 2229 (b), which reads, “In exercising his or her disciplinary authority as an administrative law judge of the Medical Quality Hearing Panel, the division, or the California

(Continued on page 7)

Legislator profile

Senator Dave Cogdill



Dave Cogdill (R-Modesto) was elected to the California State Senate in 2006. He represents the 14th District which is comprised of all or a portion of Fresno, Madera, Mariposa, San Joaquin, Stanislaus, and Tuolumne counties. In February 2008, the Senate Republican Caucus unanimously selected

Senator Cogdill as the Senate Republican Leader.

Senator Cogdill serves as vice chair of the Revenue and Taxation and the Joint Legislative Audit committees. He is a sitting member on the following committees: Public Safety; Budget and Fiscal Review; Budget Subcommittee on Resources; Elections, Reapportionment and Constitutional Amendments; Natural Resources and Water; Joint Legislative Budget; and a Select Committee on Air Quality.

The Senator has shown his commitment to the issues affecting the Central Valley and foothill communities, including economic development, strengthening public safety, keeping taxes low, improving air quality, and expanding water supply and storage opportunities. He has consistently acted to protect businesses and agriculture from over-taxation and over-regulation. As past chair of the California State Legislature Rural

Caucus, Senator Cogdill has collaborated with local leaders on many issues concerning rural residents, such as access to health care and quality education.

Prior to being elected to the Senate, Senator Cogdill represented the 25th District for six years in the State Assembly. During that time, he served as vice chair of the Committee on Rules and sat on the following committees: Budget, Agriculture, and the Joint Legislative Audit committees. He also acted as the Assembly Minority Floor leader and was responsible for coordinating Republican efforts on the Assembly Floor.

Among his legislative accomplishments that affect Medical Board licensees, the Senator authored Assembly Bill 354 which became operative July 1, 2006. Improving access to primary care practitioners and specialty providers in rural and medically underserved areas, this law expanded the scope of eligibility for Medi-Cal reimbursement and benefits for ophthalmology and dermatology provided via store and forward telemedicine applications.

Senator Cogdill has been a resident of Modesto since 1979 where he has built a prosperous real estate appraisal business. A believer in community involvement, he was first elected to public office in 1975 as a member of the Board of Directors of the Bridgeport Fire Protection District in Mono County. He has served on various boards and commissions in both the public and private sectors and served two terms on the Modesto City Council.

Misdemeanor convictions: New reporting and disclosure requirements

Physicians are required per California Business and Professions Code section 802.1 to report to the Board if they have been charged or convicted of a felony. Recent legislation amended this statute to include the requirement that physicians also must report any misdemeanor conviction. As is required for reporting felony convictions, the law specifies that the report be made to the Board in writing within 30 days. Failure to file a report may result in a fine not to exceed \$5,000.

Section 2027 of the Business and Professions Code also was amended to allow the Board to disclose to the public any misdemeanor conviction that results in a disciplinary action or an accusation that is not subsequently withdrawn or dismissed.

A form has been created to facilitate reporting convictions to the Medical Board. The form is on the Board's Web site at www.mbc.ca.gov, under Forms, Mandatory Reporting Forms, and is entitled, "Physician Reporting—Criminal Actions."

End-of-life care *(Continued from cover)*

The hallmarks of a POLST form are: immediately actionable, signed medical orders on a standardized form; orders that address a range of life-sustaining interventions as well as the patient's preferred intensity of treatment for each intervention; a brightly colored, clearly identifiable form; and a form that is recognized, adopted, and honored across treatment settings.

A POLST form complements an advance directive by taking the individual's wishes regarding life-sustaining treatment, such as those set forth in the advance directive, and converting those wishes into a medical order. Significant to health care providers, this law does not require health care providers to use a POLST form, (a DNR and other types of health care directives are still acceptable), but rather, it requires that health care providers honor POLST orders when presented.

NOTE: Per Business and Professions Code section 4782, "A health care provider who honors a request regarding resuscitative measures is not subject to criminal prosecution, civil liability, discipline for unprofessional conduct, administrative sanction, or any other sanction, as a result of his or her reliance on the request, if the health care provider (a) believes in good faith that the action or decision is consistent with this part, and (b) has no knowledge that the action or decision would be inconsistent with a health care decision that the individual signing the request would have made on his or her own behalf under like circumstances."

Medical Board reaches out to public and physicians

Board Web site receives more than 600,000 hits per month (www.mbc.ca.gov)

The Medical Board prides itself on its educational outreach program, aimed at furthering its consumer protection mission by educating both the public and physicians about their rights and obligations. The major components of the program include publishing the Board's quarterly newsletter; working closely with the media in both proactive and reactive ways; maintaining a comprehensive Web site (ranked 7th in the nation for content and usability by "Public Citizen" in 2006, it receives more than 600,000 hits per month); participating in consumer health and wellness and medical school graduate fairs; and addressing physician groups.

If you would like a representative of the Medical Board to address your physician or consumer group, please contact ccohen@mbc.ca.gov. We will make every effort to accommodate you.



California Asthma Research Summit

December 10–11, 2008

San Francisco, UCSF Mission Bay Conference Center

California Breathing—a program within the California Department of Public Health, and the American Asthma Foundation—invites you to attend the California Asthma Research Summit.

Renowned scientists from around the country will present their cutting-edge asthma research on topics including genetics, environmental exposures, nutrition, infection, allergic inflammation, molecular shapers of response, and the psycho-neurological factors affecting asthma.

The Asthma Research Summit will provide an opportunity to hear about the latest in asthma research.

Early-bird registration for the two-day event is \$130 (November 3rd deadline); after this date, higher fees will be in effect.

For detailed information and registration go to: www.asthmaresearchsummit.org or www.californiabreathing.org

Be proactive to help your patients quit smoking

by Tami MacAller, M.P.H., Senior Area Health Promotion Specialist
California Department of Public Health, Diabetes Program

Even when patients aren't ready to quit smoking, they want their health care provider to encourage them to quit. According to a recent survey of smokers, patients whose primary care physicians counseled them about smoking were more satisfied with their care than patients whose physicians didn't offer counseling. In fact, as the number of counseling interventions increased, satisfaction with care increased.¹ To help health care professionals focus on smokers with chronic diseases, the California Tobacco Control Program, California Diabetes Program and the California Smokers' Helpline have jointly developed a free Be Proactive Toolkit. The kit provides tools to help patients with chronic diseases, such as diabetes, quit smoking. Health care professionals also can easily order a variety of free materials at www.caldiabetes.org

for their patients who want to quit. One of the most popular items ordered is the size of a credit card and can easily be passed along to a patient. It is referred to as the "Gold Card" ("Regale Salud" is the Spanish version) and directs patients to the California Smokers' Helpline for free telephone counseling services.

Order these free or low-cost materials to share with your patients at www.nobutts.org.

¹ Conroy MB, Majchrzak NE, Regan S, Silverman CB, Schneider LI, Rigotti NA. The association between patient-reported receipt of tobacco intervention at a primary care visit and smokers' satisfaction with their health care. *Nicotine Tob Res.* 2005;7(suppl 1):S29-S34.

Getting from A to D *(Continued from page 4)*

Board of Podiatric Medicine, shall, wherever possible, take action that is calculated to aid in the rehabilitation of the licensee, or where, due to a lack of continuing education or other reasons, restriction on scope of practice is indicated, to order restrictions as are indicated by the evidence."

The law further provides that where rehabilitation and protection are inconsistent, protection shall be paramount.

You will note many physicians who also are licensed out of state are listed in the administrative actions section of the newsletter. Even if a physician does not practice in California, if he or she is licensed here, and his or her medical license in another state is disciplined, the Board will take action based upon that discipline. Frequently, California's discipline mirrors the discipline imposed by the original state.

Finally, you may wonder why what appears to be an identical fact pattern yields in some cases such disparate discipline. This is when reading the accusation becomes most useful. Often, because the period of time between

the accusation being filed and the hearing being held is prolonged due to courtroom unavailability, cases can begin to erode. As time passes, occasionally the ability to prove charges is attenuated by witnesses disappearing or retracting their cooperation. Sometimes an expert opinion becomes problematic. Mitigation might also come into play. If a physician has been in practice for a long time, with no history of discipline, he or she may be eligible to receive a public letter of reprimand where a similar set of facts for a physician with prior discipline might result in probation.

If you read a disciplinary summary that causes you consternation, take the next step and read the underlying documents online at the Board's Web site. Space limitations don't allow the entire story to be told in the back of this newsletter, but at least you know that substantially more information is literally at your fingertips.

Evaluating the impact of the HPV vaccine in California

Ina Park M.D., M.S. and Heidi Bauer M.D., M.S., M.P.H.
California Department of Public Health - STD Control Branch

The recent introduction of a highly effective vaccine against human papillomavirus (HPV) exposed the need for population-based surveillance of HPV-related diseases. Although it will take decades to measure the impact of the vaccine on cervical cancer incidence, the short term impact can be assessed through surveillance of cervical dysplasia, which occurs with greater frequency and is detectable much earlier than cancer. At this time, these pre-cancerous HPV lesions are not included as part of cancer or infectious disease reporting systems.

To monitor trends in high-grade cervical dysplasia (CIN 2/3 and AIS) and assess the impact of the HPV vaccine, the Centers for Disease Control and Prevention (CDC) has chosen the state of California among five states nationwide (CA, CT, NY, OR, TN) to initiate a novel surveillance project entitled the HPV Vaccine Impact Monitoring Project (HPV-IMPACT). In collaboration with the California Emerging Infections Program, the California Department of Public Health STD

Control Branch is spearheading the pilot phase which is limited to residents of Alameda County. Therefore, only providers of Alameda County residents will be participating in this early phase of surveillance activities.

Case identification will be achieved through reporting by pathology laboratories; however, collection of basic demographic and clinical data will necessitate working with women's healthcare providers. For a subset of cases, histology specimens will be sent to the CDC for identification of specific HPV types. Beyond examining disease trends and HPV types, this multi-faceted effort will involve monitoring vaccine coverage and cervical screening patterns in the population.

The participation of physicians and other women's healthcare providers will play a crucial role in the success of this effort. Occasionally, providers who care for women in Alameda County will receive case report forms from the HPV-IMPACT team requesting information about patients identified with high-grade cervical dysplasia, such as HPV vaccine status, Pap history, and any treatment received. All communications and data collection methods are designed with careful attention to protecting patient confidentiality. To assist future surveillance efforts, providers throughout the state are encouraged to collect HPV vaccine status on their female patients. The collaboration of providers, laboratories, and public health practitioners will help facilitate this groundbreaking effort to monitor the impact of the HPV vaccine among the women of California.

REMINDER: Physician billing for anatomic pathology services

Effective January 1, 2008, Business and Professions Code section 655.7 prohibits a person licensed under this division or under an initiative act referred to in this division to charge, bill, or otherwise solicit payment, directly or indirectly, for anatomic pathology services if those services were not actually rendered by that person or under his or her direct supervision. The law allows a physician to bill for the designated anatomic pathology services if they provide the professional interpretation of the specimen, e.g., a dermatologist can use an outside clinical laboratory for the tissue preparation and still submit a global charge for the procedure if he/she provides the interpretation/diagnosis of the specimen.

For more information please contact HPV IMPACT.



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www.ceip.us/cd_hpv.htm

Changes to physician assistant practice and supervisory requirements

Physician assistants may perform medical services under the supervision of a supervising physician. Medical tasks, which are delegated by a supervising physician, may only be those that are usual and customary to the physician's practice. Additionally, all care provided to a patient by a physician assistant is the ultimate responsibility of the supervising physician who is responsible for the patient.

Assembly Bill 3 (Bass) became effective January 1, 2008, and made changes to physician assistant practice and supervisory requirements. Following is a brief summary of those changes:

- Now a physician may supervise no more than four physician assistants at any one time.
- The minimum requirement for chart countersignature has been decreased from 10 percent to 5 percent. Supervising physicians may choose what percentage works best for their practice and their physician assistants.

- If a physician assistant completes an approved educational course in controlled substances, and if delegated by a supervising physician, a physician assistant may issue a drug order without patient-specific authority. If a physician assistant chooses not to take the educational course, the physician assistant must obtain patient-specific authority from the supervising physician prior to issuing the drug order for a controlled substance.

The physician assistant regulations require a physician to delegate in writing for each supervised physician assistant those medical services which the physician assistant may provide. The document is referred to as a Delegation of Services Agreement. You may obtain a sample copy by visiting the Physician Assistant Committee Web site at www.pac.ca.gov.

All physician assistants and supervising physicians should familiarize themselves with the physician assistant laws and regulations, in particular, the recent changes implemented by AB 3.

Medical Board grants recognition to three new international medical educational programs

On July 25, 2008, the Medical Board of California granted recognition to three international medical educational programs: the Medical University of Lublin in Lublin, Poland; Poznan University of Medical Sciences in Poznan, Poland; and the Escuela Latinoamericana de Medicina (ELAM) in Havana, Cuba. The two Polish schools offer medical education programs in the English language to noncitizens. ELAM offers its Spanish-language program free of charge to noncitizens who agree to practice medicine in underserved areas after graduation.

With the Board's recognition, graduates of these three schools are now eligible to compete for postgraduate training programs in California and apply for licensure in California. The Board welcomes graduates of these schools to consider California for training and practice.

2009 Medical Board quarterly meeting dates

January 29–30, 2009

Los Angeles

May 7–8, 2009

San Francisco

July 23–24, 2009

Sacramento

October 29–30, 2009

San Diego

Practical Pain Management: From Classroom to Treatment Room

offered by CMM Global

Following five presentations in 2003–2006, the sixth presentation of “Practical Pain Management: From Classroom to Treatment Room” will be offered to California physicians in December 2008. While continuing to offer a broad range of topics in an interesting and interactive format, the program has been updated throughout for the 2008 audience.

Course Description

Designed to satisfy the requirements of AB 487, this pain management course provides 12 continuing medical education credits in practical training for physicians, including a section on end-of-life and palliative care. Pain medicine specialists will present current concepts related to the pathophysiology and treatment of common painful conditions. In addition, topics such as pediatric pain, risk management and documentation for primary care physicians, difficult patient decisions, and more will be discussed.

This program is jointly sponsored by Medical Education Resource (MER) and CMM Global. MER is accredited by the Accreditation Council for Continuing Medical Education to provide continuing education for physicians. MER designates this CME activity for a maximum of 12 hours in category 1 credit towards the American Medical Association’s Physician’s Recognition Award. The program is supported by an unrestricted educational grant from ENDO Pharmaceuticals, Inc.

Program date and location

December 6–7, 2008
Hyatt Regency Huntington Beach
Huntington Beach, CA

Check-in: Friday afternoon (December 5) or
Saturday morning (December 6)

Educational Program: Saturday (full day) and
Sunday (part day)

Tuition Cost: \$125 course registration fee for
first 100 attendees

Additional attendees accepted on a space available basis at
\$350 each

Hotel charges are additional—room block rate \$239

Credit: 12 hours Pain Medicine CME

Registration is available for this two-day continuing
medical education course by Web site, fax or phone.

Erica Boyer, CMM Global
(918) 343-6005 phone
(918) 342-5271 fax
email: erica@cmmglobal.com
www.practicalpainmgmt.com

Web site offers resources for physicians seeking to re-enter practice

article provided by the Federation of State Medical Boards

A newly expanded Web site offers resources for physicians seeking to re-enter the workforce after an extended absence. Located at www.aap.org/reentry, the Web site is part of the Physician Re-entry into the Workforce Project, a national collaborative endeavor to examine the diverse issues encompassed under the rubric of “re-entry”. The Web site was recently enhanced to include resources for individual physicians seeking re-entry information, as well as updates about the ongoing work of the Re-entry Project. Articles available on the site include:

- Organized Medicine Tackles Physician Re-entry Issues
- Re-entry Problems: Returning to Practice After a Break Not Easy
- Re-entry Reading List



MEDICAL BOARD OF CALIFORNIA

Publications Order Form

Please print legibly.

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All publications are available on our Web site: www.mbc.ca.gov

Chris Valine, Outreach Coordinator

Phone: (916) 263-2466

Fax: (916) 263-2479

cvaline@mbc.ca.gov

Mandated standardized written information for patients

Publication	Requirement	Ordering information
A Patient's Guide to Blood Transfusion	H&S Code §1645 (Paul Gann Blood Safety Act) requires physicians to provide a standardized summary of the positive and negative aspects of receiving blood from volunteers whenever there is a reasonable possibility that a blood transfusion may be necessary as a result of a medical/surgical procedure.	Tri-fold pamphlet is available in English and Spanish in bundles of 50 up to 250 copies per order at no charge. Available online: www.mbc.ca.gov/publications . Fax requests to (916) 263-2479.
A Woman's Guide to Breast Cancer Diagnosis & Treatment	H&S Code §109275 requires primary care physicians to provide a summary discussing alternative breast cancer treatments and their risks and benefits to women upon diagnosis of breast cancer, or if the physician chooses, prior to a biopsy.	Booklet is available in English and Spanish in bundles of 25 up to one case (250 per case) per order at no charge. Masters are available in Chinese, Korean, Russian and Thai. Available online: www.mbc.ca.gov/publications . Fax requests to (916) 263-2479.
Gynecologic Cancers... What Women Need to Know	H&S Code §109278 requires medical care providers, primarily responsible for providing patients with an annual gynecological exam, to provide a standardized summary containing a description of the symptoms and appropriate methods of diagnoses for gynecological cancers.	Tri-fold pamphlet is available in English and Spanish in bundles of 50 up to 250 copies per order at no charge. Armenian, Chinese, Cambodian, Farsi, Hmong, Korean, Russian and Vietnamese are available online: www.mbc.ca.gov/publication . Fax requests to (916) 263-2479.
Professional Therapy Never Includes Sex	B&P Code §728 requires physicians specializing in psychiatry to provide written information on the rights and remedies for patients who have been involved sexually with their psychotherapist when the physician becomes aware that the patient had alleged sexual intercourse or sexual contact with a previous psychotherapist during the course of a prior treatment.	Booklet is available online in English and Spanish: www.mbc.ca.gov/publications . To order bundles of 25 at a cost of \$6 (inclusive), checks must be included with the order, made payable to the Medical Board of California and mailed to: Medical Board Publications, 2005 Evergreen Street, Suite 1200, Sacramento, CA 95815.
Things to Consider Before Your Silicone Implant Surgery	B&P Code §2259 (Cosmetic Implant Act of 1992) requires physicians to provide written information to patients considering silicone implant surgery. Physicians may substitute written information authorized for use by the federal Food and Drug Administration prepared by the manufacturer based upon the physician package insert.	Booklet is available online: www.mbc.ca.gov/publications . To order bundles of 25 in English at a cost of \$6 (inclusive), checks must be included with the order, made payable to the Medical Board of California and mailed to: Medical Board Publications, 2005 Evergreen Street, Suite 1200, Sacramento, CA 95815.
What You Need to Know About Prostate Cancer	B&P Code §2248, H&S Code §109280 (Grant H. Kenyon Prostate Cancer Detection Act) requires physicians to provide a standardized summary about the availability of appropriate diagnostic procedures when examining a patient's prostate gland during a physical examination.	Booklet is available in English and Spanish in bundles of 25 up to 1 case (140 per case) per order at no charge. Available online: www.mbc.ca.gov/publications . Fax requests to (916) 263-2479.

(REV. 10/08)



News from the U.S. Food and Drug Administration

2008–2009 Flu Vaccine

FDA has approved this year's seasonal influenza vaccines that include new strains of the virus likely to cause flu in the United States during the 2008-2009 season. The six vaccines and their manufacturers are: CSL Limited, Afluria; GlaxoSmithKline Biologicals, Fluarix; ID Biomedical Corporation of Quebec, FluLaval; MedImmune Vaccines Inc., FluMist; Novartis Vaccines and Diagnostics Limited, Fluvirin; and Sanofi Pasteur Inc., Fluzone. Approval information and specific indications can be found at www.fda.gov/cber/flu/flu2008.htm.

FDA launches Commissioner's Fellowship Program

The FDA is launching a two-year fellowship program to attract physicians and other health professionals, scientists, and engineers to the agency. The program, beginning in October 2008, will provide the participants with advanced training in the scientific analysis involved in the safety and

regulatory decisions unique to the agency's mission. Applicants from the health professions should have a doctoral degree in medicine or another scientific field. The FDA Commissioner's Fellowship Program will include coursework and extensive hands-on experience in FDA regulatory science including regulatory review opportunities. Courses will include FDA law, ethics, biostatistics, clinical trial design, epidemiology, risk assessment, international activities, public policy, etc. A full listing of courses is available at www.fda.gov/commissionersfellowships/default.htm.

Fellows will devote about 70 percent to coursework taught at the agency's new, state-of-the-art campus at White Oak, MD and other facilities by senior FDA staff and university faculty. More information about the FDA Commissioner's Fellowship Program and instructions for applicants are available at www.fda.gov/commissionersfellowships/program.html.

Comprehensive study of peer review is available

The Board received the "Comprehensive Study of Peer Review in California" on July 31, 2008, as required by Business and Professions Code section 805.2, which provided for a comprehensive study of the physician peer review process conducted by peer review bodies. An equally important component of the study was to evaluate the continuing validity of section 805, and sections 809 to 809.8 and their relevance to the conduct of peer review in California.

The findings and recommendations will be discussed at the Medical Board's November meeting in San Diego. The entire report is available on the Board's Web site at www.mbc.ca.gov/publications/peer_review.html.

California Medical Volunteers program changes name to Disaster Healthcare Volunteers of California

Emergency Medical Services Authority (EMSA) Director Steve Tharratt, M.D. recently announced a new name change for the California Medical Volunteers program, which is the current name for California's Emergency System for the Advanced Registration of Volunteer Health Professionals (ESAR-VHP).

Based on feedback, EMSA determined that Disaster Healthcare Volunteers of California more accurately depicts the program and the medical and health professionals who are part of the program. Visit the EMSA Web site at www.emsa.ca.gov.

Administrative actions: May 1, 2008 — July 31, 2008

Physicians and surgeons

ADRIAN, ADRIAN, M.D. (AFE56237)

Las Vegas, NV

Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, incompetence, dishonest and corrupt acts, failure to maintain adequate and accurate medical records, and aiding and abetting the unlicensed practice of medicine by allowing 2 estheticians to perform cosmetic services requiring a medical license, billing for services performed by unlicensed persons on 5 patients and creating and submitting false documents to insurance carriers. Revoked, stayed, placed on 7 years probation with terms and conditions including, but not limited to, 18 months actual suspension; completing a clinical training program, medical record keeping course, ethics course, and an educational course; obtaining a practice and billing monitor; and no solo practice of medicine. June 30, 2008

Copies of public documents from 2000 to the present are available at www.mbc.ca.gov. Click on "Enforcement Public Documents," or for copies of all public documents call the Medical Board's Central File Room at (916) 263-2525

AGEE, DOUGLAS MOORE, M.D. (A28581)

Riverside, CA

Physician found to be incompetent and lacks the knowledge and clinical ability to competently function as a physician. Revoked, stayed, within 120 days of the effective date, the physician must take and pass a professional competency examination. June 27, 2008

AJIGBOTAFE, CHRISTOPHER I. (A42564)

Bellflower, CA

Stipulated Decision. Felony conviction and committed acts of dishonesty and corruption by failing to file an income tax return. Surrender of license. July 31, 2008

APAYDIN, AYTAC HILMI, M.D. (A46632)

Salinas, CA

Altered a patient's medical records and failed to inform patient of the side effects of Lupron. Public Letter of Reprimand. May 1, 2008

APUSEN, MARILOU MARCOS, M.D. (AFE36928)

Los Angeles, CA

Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts and excessive prescribing

Explanation of disciplinary language and actions

"Effective date of decision"—Example: "May 26, 2008" at the bottom of the summary means the date the disciplinary decision goes into operation.

"Gross negligence"—An extreme deviation from the standard of practice.

"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 on

probationary terms and conditions. This is done when good cause exists for denial of the license application.

"Public Letter of Reprimand"—A lesser form of discipline that can be negotiated for minor violations, usually before the filing of formal charges (Accusations). The licensee is disciplined in the form of a public letter.

"Revoked"—The license is canceled, voided, annulled, rescinded. The right to practice is ended.

"Revoked, stayed, five years probation on terms and conditions, including 60 days suspension"—"Stayed" means the revocation is postponed. Professional

practice may continue so long as the licensee complies with specified probationary terms and conditions, which, in this example, includes 60 days of actual suspension from practice. Violation of probation may result in the revocation that was postponed.

"Stipulated Decision"—A form of plea bargaining. The case is formally negotiated and settled prior to trial.

"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.

in the care and treatment of 5 patients and physician has 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, completing a clinical training program and an ethics course; maintaining a record of all controlled substances ordered, prescribed, dispensed, administered, or possessed and any recommendation or approval for marijuana; completing an educational course; and no solo practice of medicine. May 5, 2008

ASLAN, MUZAFFER, M.D. (A18999)

Los Angeles, CA

Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, incompetence, prescribing controlled substances and dangerous drugs without an appropriate prior examination or medical indication, excessive prescribing, failure to maintain adequate and accurate medical records and unprofessional conduct in the care and treatment of 7 patients and failing to pass a clinical training program. Revoked, stayed, placed on 5 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. May 5, 2008

BAJE, ULYSSES YANEZ (AFE29462)

Covina, CA

Physician lacks the knowledge and clinical ability to competently and safely practice medicine based upon his failure to pass the Quality Improvement in Correctional Medicine assessment. Revoked. July 11, 2008

BERGER, MICHAEL DEAN, M.D. (G21264)

Valley Center, CA

Stipulated Decision. Committed acts of repeated negligence and failed to maintain adequate and accurate medical records in the care and treatment of 1 patient. Revoked, stayed, placed on 7 years probation with terms and conditions including, but not limited to, completing a clinical training program, medical record keeping course, prescribing practices course, and an educational course; maintaining a record of all controlled substances ordered, prescribed, dispensed, administered, or possessed and any recommendation or approval for marijuana; abstaining from the use of controlled

substances; submitting to biological fluid testing; and prohibited from prescribing any drugs to family members, relatives and friends. May 19, 2008

BUI, CAN QUOC (A39900)

San Diego, CA

Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, prescribing controlled substances and dangerous drugs without an appropriate prior examination or medical indication, excessive prescribing, failure to maintain adequate and accurate medical records and violating drug statutes in the care and treatment of 6 patients. Surrender of license. July 1, 2008

CABANSAG, DEAN ALLAN, M.D. (A60858)

Arlington, TX

Stipulated Decision. Disciplined by Texas for non-therapeutic prescribing in the care and treatment of 4 patients as his record keeping was inadequate to support the narcotic therapy required for intractable pain treatment. Revoked, stayed, placed on 4 years probation with terms and conditions including, but not limited to, completing a medical record keeping course, prescribing practices course, and an educational course; maintaining a record of all controlled substances ordered, prescribed, dispensed, administered, or possessed and any recommendation or approval for marijuana; obtaining a practice monitor; and no solo practice of medicine. May 5, 2008

CASTELLANOS, ALEXANDER F., M.D. (G37303)

Templeton, CA

Committed acts of gross negligence and incompetence by prescribing Advil and Septra to a patient with a prior history of deep venous thrombosis and on anticoagulation therapy (Coumadin) without adequately monitoring the patient's International Normalized Ratio (INR). Public Letter of Reprimand. July 9, 2008

CHANG, DAVID, M.D. (A72717)

Irvine, CA

Stipulated Decision. No admissions but charged with gross negligence in failing to place an ear, nose and throat (ENT) surgeon on standby notice to perform a possible "emergency tracheostomy" if the need arose during surgery. Physician has completed a medical training program. Public Reprimand. July 16, 2008

CHAO, STAN HUNG-YA, M.D. (G42304)
Riverside, CA

Disciplined by Florida for failing to properly evaluate a patient's post-operative potassium levels and failed to properly and timely treat the patient's post-operative hyperkalemia. Public Letter of Reprimand. July 16, 2008

CHER, JOHN B., M.D. (A38966)
Santa Monica, CA

Violated the terms and conditions of a Board-ordered probation by committing acts of repeated negligence, failing to maintain adequate and accurate medical records in the care and treatment of 3 patients and prescribing controlled substances without requisite authority to do so, failing to participate in the Diversion Program, failing to obey all laws and pay investigative costs. Revoked, stayed, placed on 5 years probation with terms and conditions, including but not limited to, 120 days actual suspension; may not order, prescribe, dispense, administer, or possess any controlled substance, except those in Schedule V, maintaining a record of all controlled substances ordered, prescribed, dispensed, administered, or possessed and any recommendation or approval for marijuana; abstaining from the use of alcohol and controlled substances; submitting to biological fluid testing; and obtaining a practice monitor. May 30, 2008

CHIU, JOHN CHIH, M.D. (C31784)
Newbury Park, CA

Committed acts of gross negligence in the care and treatment of 1 patient; and repeated negligence in the care and treatment of 2 patients; and failed to maintain adequate and accurate medical records. Revoked, stayed, placed on 3 years probation with terms and conditions including, but not limited to, completing a clinical training course, medical record keeping course, prescribing practices course and an educational course; and no solo practice of medicine. July 21, 2008

COVARRUBIAS, GONZALO ANTONIO, M.D. (A32492)
San Juan Capistrano, CA

Committed acts of gross negligence, repeated negligence and incompetence in the care and treatment of 1 patient. Revoked, stayed, placed on 7 years probation with terms and conditions including, but not limited to, completing a clinical training program and an ethics course. June 12, 2008

DAUM, GARRETT CHRISTOPHER, M.D. (G65616)
Castro Valley, CA

Disciplined by the state of Washington for failing to maintain adequate and accurate medical records for 4 patients. Public Letter of Reprimand. May 1, 2008

DERICKS, GERARD HENRY, JR., M.D. (G28626)
Concord, CA

Disciplined by New Mexico for allegations of creating false, fraudulent or deceptive statements in documents relating to the care and treatment of 3 patients. Revoked, stayed, placed on 3 years probation with terms and conditions including, but not limited to, completing a medical record keeping course and an ethics course. June 16, 2008

DHUGGA, GURPREET SINGH, M.D. (A63219)
Fairfield, CA

Stipulated Decision. No admissions but charged with acts of gross negligence and unprofessional conduct for failing to provide care and treatment for 1 patient in accordance with the standards of practice in the medical community. Physician must complete a clinical training program. Public Reprimand. May 30, 2008

EDISON, RICHARD BRUCE (G39624)
Fort Lauderdale, FL

Stipulated Decision. Disciplined by Florida for failing to maintain adequate medical records for a surgical patient. Surrender of license. June 11, 2008

EM, MAKKALEARN, M.D. (AFE63746)
Salem, OR

Stipulated Decision. Disciplined by Florida for performing an endoscopy/colonoscopy procedure on the wrong patient. Public Reprimand. May 5, 2008

ESPINOZA, FELIPE VINICIO, M.D. (A92430)
Weston, WV

Disciplined by Florida for failing to submit certified documentation of completion of a 3-hour, AMA-approved HIV/AIDS CME course. Public Letter of Reprimand. July 22, 2008

FINN, CHARLES AMES, M.D. (G71848)
St. Petersburg, FL

Disciplined by Florida for failing to perform an adequate physical examination of a patient and to adequately and accurately record the patient's physical examination. Public Letter of Reprimand. June 26, 2008

FITZPATRICK, CHRISTIAN JOHN (G47520)
Las Vegas, NM

Stipulated Decision. Disciplined by New Mexico for failing to submit to an evaluation. Surrender of license. June 27, 2008

FLORES, BYRON (A52173)
Burbank, CA

Committed acts of dishonesty and was convicted for aiding and abetting the unlicensed practice of medicine and committed acts of gross negligence, repeated negligence, and failing to maintain adequate and accurate medical records in administering medications and injections to diabetic patients without documenting justification. Revoked. May 2, 2008. Judicial review pending.

FLORES, LOUIS BENJAMIN, M.D. (A32929)
Northridge, CA

Disciplined by Arizona for failing to follow the Arizona Board's guidelines for prescribing controlled substances to a patient and failed to maintain adequate medical records. Public Letter of Reprimand. July 22, 2008

FRANCES, RUPERT ASHTON (AFE39202)
Davie, FL

Stipulated Decision. Convicted of conspiracy to commit Medicare fraud. Surrender of license. June 3, 2008

GEORGESON, GEORGE D. (A40874)
Garden Grove, CA

Committed dishonest or corrupt acts and was disciplined by the General Medical Council of England for submitting a fraudulent letter of recommendation and fraudulent information as part of a college admission application. Revoked. June 23, 2008

GILLIAN, TERRY ALLEN, M.D. (A29523)
Fresno, CA

Committed acts of gross negligence in the care and treatment of 2 patients, and repeated negligence and incompetence in the care and treatment of 4 patients. Revoked, stayed, placed on 7 years probation with terms and conditions including, but not limited to, completing a clinical training program, a charting and medical record keeping course, and an educational course, and obtaining a practice monitor. May 5, 2008

GILMORE, KATHLEEN MATTIC, M.D. (A93876)
Plymouth, MI

Disciplined by Illinois for allowing a prescription to be issued without personally examining the patient first. Public Letter of Reprimand. May 1, 2008

GOODWIN, GLENDA DARLENE, M.D. (A71660)
Elk Grove, CA

Stipulated Decision. Committed acts of gross negligence and incompetence in the care and treatment of 1 patient. Physician has completed a clinical training program and a physician-patient communication course. Public Reprimand. July 8, 2008

HAM, JOHNNIE ALAN, M.D. (A90443)
Grover Beach, CA

Stipulated Decision. Court-martialed and convicted of a felony, failed to report a felony conviction to the Board and violated drug statutes. Revoked, stayed, placed on 10 years probation with terms and conditions including, but not limited to, 60 days actual suspension, completing a prescribing practices course and maintaining a record of all controlled substances ordered, prescribed, dispensed, administered or possessed and any recommendation or approval for marijuana. May 30, 2008

HARRON, RAYMOND A. (G8415)
Bridgeport, WV

Stipulated Decision. Disciplined by Texas for findings relating to his participation in silica/silicosis litigation and alleged falsification of medical records and examinations to support claims for payment. Surrender of license. June 18, 2008

HASHEMIYOON, ROBERT BABAK, M.D. (G86202)
Beverly Hills, CA

Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, incompetence, prescribing over the Internet without an appropriate prior examination or medical indication, excessive prescribing, violating of drug statutes, failing to maintain adequate and accurate medical records, and creating, altering or modifying medical records with fraudulent intent. Physician must complete a medical record keeping course, prescribing practices course, and pay a fine of \$6,500. Public Reprimand. June 30, 2008

HERIC, THOMAS M., M.D. (A22944)
Malibu, CA

Stipulated Decision. Felony conviction for submitting a false statement to Medicare in connection with his application for a provider number. Revoked, stayed, placed on 7 years probation with terms and conditions including, but not limited to, 60 days actual suspension, obtaining a billing monitor and completing an ethics course. June 16, 2008

HINOSTROZA, FELIX MANUEL (A29613)
Pomona, CA

Physician has a condition affecting his ability to practice medicine safely. Revoked. June 13, 2008

HUBERMAN, RICHARD ALLEN, M.D. (G28477)
Newport Coast, CA

Disciplined by North Carolina for performing a medical procedure on the wrong heel of a patient. Public Letter of Reprimand. June 4, 2008

JOHNSON, GILBERT E. (CFE29408)
Idabel, OK

Disciplined by Oklahoma for issuing prescriptions for various controlled substances and non-controlled drugs to several individuals without prior physical examination or establishing a medical need and for writing prescriptions for an employee to fill and return drugs to the physician. Revoked. July 23, 2008

KERR, MARY CAMPBELL, M.D. (A65874)
Beverly Hills, CA

Stipulated Decision. No admissions but charged with gross negligence and repeated negligent acts in the care and treatment of 3 patients. Revoked, stayed, placed on 5 years probation with terms and conditions including, but not limited to, completing an educational course, a medical record keeping course, a clinical training program and an ethics course; and obtaining a practice monitor. July 21, 2008

KERWIN, DAVID SYLVESTER (G7547)
Modesto, CA

Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts and excessive treatment or prescribing in the care and treatment of 7 patients. Surrender of license. May 30, 2008

KHURI, RADWAN R., M.D. (C52066)
Memphis, TN

Disciplined by North Carolina for failing to properly supervise nurse practitioners. Public Letter of Reprimand. July 8, 2008

KOTZEN, RENE MARLON, M.D. (A53047)
Fayetteville, NC

Disciplined by North Carolina for delaying recognition of a post-operative complication and failing to appreciate the full severity of that complication. Public Letter of Reprimand. June 4, 2008

Medical Board's Subscribers' List

Are you interested in the Medical Board's latest actions?

If yes, please join the Medical Board of California's Subscribers' List to obtain e-mail updates of the MBC Newsletter; meeting agendas, notices, and minutes; regulations; license suspensions, restrictions, accusations, revocations, and surrenders for physicians.

If you wish to subscribe to this list, please go to www.mbc.ca.gov/subscribers.htm and follow the instructions for subscribing.

KWOLEK, MARILYN SUE, M.D. (C41932)
Danville, CA

Stipulated Decision. No admissions but charged with gross negligence and repeated negligent acts by failing to maintain adequate and accurate medical records and failing to obtain informed consent for the injection of Silikon 1000 in the care and treatment of 1 patient. Physician has completed a medical record keeping course. Public Reprimand. May 2, 2008

MABRY, QUINCE LEE (G52265)
La Mesa, CA

Stipulated Decision. Excessively used alcohol or drugs, committed acts of dishonesty or corruption, and violated state statutes regulating dangerous drugs by issuing prescriptions for a companion and then diverting the drugs for self-use; and has a condition affecting his ability to practice medicine safely. Surrender of license. July 23, 2008

MACKENZIE, KAREN MARIE, M.D. (A85141)
Visalia, CA

Disciplined by North Carolina for providing surgical care to a patient without appropriate attention to several aspects of peri-operative management, failing to adequately document physician/patient discussion of risks and benefits of the operation, failing to seek appropriate consultation to manage patient's co-existent medical problems, and exposing the patient to unnecessary operative risk. Public Letter of Reprimand. May 15, 2008

MCBRIDE, PAMELA J. (G85601)
Alameda, CA

Stipulated Decision. Committed acts of unprofessional conduct by self-prescribing controlled substances and fraudulently obtaining controlled substances and dangerous drugs for self-use. Surrender of license. June 30, 2008

Are health plans or medical groups denying treatments for your patients?

Get an Independent Medical Review through the Department of Managed Health Care

Call 888-466-2219 or visit www.dmhc.ca.gov

MCKEEN, ROBERT V., JR., M.D. (C51274)
San Jose, CA

Disciplined by Utah for failing to be available for post-operative care after performing lap-band surgeries on 2 patients. Public Letter of Reprimand. June 18, 2008

MANZINI, JOSEPH ANTHONY, M.D. (G62860)
Newport Coast, CA

Stipulated Decision. Convicted for introduction of a misbranded drug, Botulinum Toxin type A, into interstate commerce. Physician must complete a prescribing practices course. Public Reprimand. June 9, 2008

MANZO, RICHARD O., M.D. (C21941)
La Habra, CA

Stipulated Decision. Committed gross negligence, acts of repeated negligence, incompetence, and failed to maintain adequate and accurate medical records in the care and treatment of 1 patient. Physician must complete a medical record keeping course and an educational course in patient evaluation. Public Reprimand. July 30, 2008

MEE, STEVEN JAMES, M.D. (A74290)
Long Beach, CA

Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, incompetence, unprofessional conduct, furnishing dangerous drugs without an appropriate prior examination, and failure to maintain adequate and accurate medical records in the care and treatment of 2 patients; sexual relations with a patient; excessive use of drugs or alcohol; and acts of dishonesty and corruption. Revoked, stayed, placed on 7 years probation with terms and conditions including, but not limited to, abstaining from the use of controlled substances; submitting to biological fluid testing; providing community service; and completing a prescribing practices course, medical record keeping course, educational course, ethics course, and a professional boundaries program. June 23, 2008. Judicial review pending.

METROS, KEVIN LEE, M.D. (G71444)
Escondido, CA

Failed to maintain adequate and accurate medical records in the care and treatment of 2 patients. Public Reprimand. May 16, 2008. Judicial review pending.

MODI, JASVANT N., M.D. (A39818)

Los Angeles, CA

Stipulated Decision. No admissions but charged with gross negligence and repeated negligent acts in the care and treatment of 3 patients, repeated negligent acts in the care and treatment of 5 additional patients, and failure to maintain adequate and accurate medical records on all 8 patients. Revoked, stayed, placed on 4 years probation with terms and conditions including, but not limited to, completing an ethics course, medical recording keeping course, educational course, ethics course, and a clinical training program; obtaining a practice monitor; and no solo practice of medicine. July 28, 2008

MOUSSABECK, OMAR (G58953)

Los Alamitos, CA

Convicted of a felony for willfully and unlawfully inflicting cruel and inhuman corporal punishment and injury resulting in a traumatic condition on a child, and a misdemeanor for willfully and unlawfully injuring and causing unjustifiable physical pain and suffering on a child. Revoked. May 1, 2008

ODEA, JOHN PATRICK, M.D. (A32629)

Los Angeles, CA

Stipulated Decision. No admissions but charged with repeated negligent acts, incompetence, and failure to maintain adequate and accurate medical records in the care and treatment of 3 patients. Physician must complete a clinical training program and a medical record keeping course. Public Letter of Reprimand. June 12, 2008

REMINDER: Mandated gynecological cancer information for your patients

We are concerned that many physicians are unaware of Health and Safety Code §109278, which requires medical care providers who are responsible for providing patients with an annual gynecological examination to provide information about gynecological cancers. The Medical Board has a free brochure available to meet this legal requirement. Please fax your request to (916) 263-2479. (See page 12 for this and other mandated information physicians must distribute.)

OSEI-TUTU, ERNEST PAUL, M.D. (G85302)

Brooklyn, NY

Disciplined by Massachusetts for treating 15 individuals after his license had lapsed and was revoked by operation of law. Public Letter of Reprimand. June 25, 2008

PATEL, JYOTINKUMAR K., M.D. (A43752)

Laguna Niguel, CA

Stipulated Decision. Committed acts of gross negligence, repeated negligence, and failed to maintain adequate and accurate medical records in the care and treatment of a patient. Physician must complete a clinical training program and medical record keeping course. Public Reprimand. June 5, 2008

PHAN, ANDY, M.D. (A75547)

Visalia, CA 93292

Stipulated Decision. Disciplined by Virginia for being convicted by the United States Air Force. Public Reprimand. July 7, 2008

PHEN, LOVSHO, M.D. (A43266)

Portola, CA

Stipulated Decision. Disciplined by Ohio for misdemeanor counts of attempted illegal processing of drug documents. Revoked, stayed, placed on 3 years probation with terms and conditions, including but not limited to, completing an ethics course, a prescribing practices course, and a medical record keeping course. July 7, 2008

PRINTZ, LOUISE ANN (G39032)

Napa, CA

Stipulated Decision. Physician has a condition affecting her ability to practice medicine safely. Surrender of license. May 28, 2008

ROHART, PAUL O., M.D. (C50212)

Palm Harbor, FL

Disciplined by Florida for failing to take note of, inform the patient of, or consult with a neurosurgeon regarding a finding of a compression fracture in the patient's L5 vertebrae. Public Letter of Reprimand. July 28, 2008

ROSE, DANIEL M., M.D. (A44506)
North Hollywood, CA

Stipulated Decision. Committed acts of gross negligence, repeated negligence, incompetence, failure to maintain adequate and accurate medical records, excessive prescribing, prescribing or treating an addict, and prescribing without an appropriate prior examination during the care and treatment of 4 patients. Revoked, stayed, placed on 3 years probation with terms and conditions including, but not limited to, completing a prescribing practices course, a medical record keeping course, a clinical training program, and an educational course, maintaining a record of controlled substances; and may not order, prescribe, dispense, administer, or possess any controlled substances except for those on Schedules IV and V. June 23, 2008

SALLEROLI, CHRISTIAN, MARK, M.D. (AFE55029)
West Hollywood, CA

Stipulated Decision. Physician failed to successfully complete the Diversion Program and has 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, 1 year actual suspension, cannot prescribe, dispense, administer, or possess any controlled substances, must surrender DEA permit, abstaining from the use of drugs and alcohol, submitting to biological fluid testing, completing an ethics course, and no solo practice of medicine. June 13, 2008

SANNAR, ELISE MICHELLE (A96357)
Denver, CO

Stipulated Decision. Disciplined by Colorado for beginning and maintaining an inappropriate relationship with a patient. Surrender of license. July 24, 2008

SCHLUSSELBERG, MARTIN EMANUEL, M.D. (C41554)
Corona, CA

Stipulated Decision. Committed acts of gross negligence by giving some patients under his care one-half the regular dosage of the flu vaccine and failure to notify these patients of his decision to lower the dosage, and failure to document which patients received the lower dosage of the vaccine. Physician must complete a medical record keeping course and an ethics course. Public Reprimand. May 2, 2008

SEIGLE, RICHARD, DUBOE (G45936)
Indio, CA

Committed acts of gross negligence, excessively prescribed medications and failed to conduct an appropriate prior examination in the care and treatment of 3 patients; was incompetent in the care and treatment of 4 patients; failed to keep adequate and accurate medical records and committed acts of repeated negligence in the care and treatment of 5 patients; committed sexual misconduct and dishonest acts in the care and treatment of 1 patient; prescribed dangerous drugs to an addict in the care and treatment of 2 patients. Revoked. May 30, 2008

SHAMLOO, JAMSHEED JAMES, M.D. (A55193)
Tarzana, CA

Stipulated Decision. No admissions but charged with gross negligence, unprofessional conduct and failure to keep adequate and accurate medical records in the care and treatment of 2 patients; incompetence and repeated negligent acts in the care and treatment of 1 patient. Revoked, stayed, placed on 2 years probation with terms and conditions including, but not limited to, completing a clinical training program. June 6, 2008

SHAW, HOLLIS EARL, M.D. (C41457)
Tempe, AZ

Disciplined by Arizona for failing to fully evaluate a patient's anemia, failing to include pertinent information as part of patient's diagnoses and failing to consider other possible diagnoses in the care and treatment of a patient. Public Letter of Reprimand. July 10, 2008

SHIU, GERTRUDE, M.D. (A60012)
Sacramento, CA

Stipulated Decision. Unlawfully prescribed and procured controlled substances for self-use. Revoked, stayed, placed on 5 years probation with terms and conditions including, but not limited to, abstaining from alcohol and controlled substances, submitting to biological fluid testing and no solo practice of medicine. May 30, 2008

SIROIS, CINDY NGUYEN, M.D. (A71013)
Minnetonka, MN

Stipulated Decision. Disciplined by Alaska for failing to disclose investigation history on an application for licensure. Public Reprimand. June 16, 2008

STADLER, EDWARD ALAN, M.D. (G23122)
Mission Viejo, CA

Stipulated Decision. Committed acts of repeated negligence for failing to provide appropriate treatment, surgical referral, and follow-up care in the care and treatment of 1 patient. Physician completed a medical record keeping course. Public Reprimand. June 6, 2008

STILES, WENDY LAURA, M.D. (A93192)
Scottsdale, AZ

Stipulated Decision. Disciplined by Alaska for failing to provide accurate or complete information on her application for licensure. Public Reprimand. May 12, 2008

TABAK, BRIAN, M.D. (G37068)
Los Angeles, CA

Forged a prescription in another physician's name for self-use, and attempted to obtain a controlled substance by fraud or deceit. Public Letter of Reprimand. May 28, 2008

TAYLOR, URSULA ELISABET, M.D. (A55572)
Los Angeles, CA

Stipulated Decision. No admissions but charged with gross negligence, repeated negligent acts, incompetence, and violation of drug statutes in the care and treatment of multiple patients, and aiding and abetting the unlicensed practice of medicine. Physician must complete a prescribing practices course and a medical record keeping course. Public Letter of Reprimand. July 3, 2008

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the Medical Board's Web site**

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Click on "Licensees" tab and "Check My Profile"

Signed address changes may be submitted to the Board by fax at (916) 263-2944, or by regular mail to:

Medical Board of California
Licensing Program
2005 Evergreen Street, Suite 1200
Sacramento, CA 95815

TRACHTENBERG, NEIL, M.D. (A32136)
Phoenix, AZ

Disciplined by Arizona for performing a procedure on a patient without consent. Public Letter of Reprimand. June 16, 2008

TRAN, THANH NGOC (A40326)
Huntington Beach, CA

Stipulated Decision. Physician has a condition affecting his ability to practice medicine safely. Surrender of license. May 28, 2008

WANG, TAISHINE, M.D. (A42340)
South Gate, CA

Stipulated Decision. Committed acts of gross negligence for failing to evaluate and treat 5 patients. Revoked, stayed, placed on 4 years probation with terms and conditions including, but not limited to, completing a clinical training program, a medical record keeping course, and obtaining a practice monitor. June 23, 2008

WINSCOTT, MARY MICHELLE, M.D. (A81979)
Tucson, AZ

Stipulated Decision. Committed acts of repeated negligence and failed to maintain adequate and accurate medical records. Physician must complete a medical record keeping course and a prescribing practices course. Public Reprimand. July 25, 2008

YANG, JUNG-I, M.D. (A43882)
Irvine, CA

Stipulated Decision. Committed acts of gross negligence, repeated negligence, incompetence, excessive prescribing, and failure to maintain adequate and accurate medical records in the care and treatment of 1 patient. Physician must complete a clinical training program, a prescribing practices course, and a medical record keeping course. Public Reprimand. May 15, 2008

Physician Assistants

ANENE, ALEXANDER C., P.A. (PA15910)

Cerritos, CA

Stipulated Decision. Criminal conviction for assisting a physician in committing Medi-Cal fraud by over-billing for services and performing services which were not medically warranted. Revoked, stayed, placed on 5 years probation with terms and conditions including, but not limited to, 30 days actual suspension, abstaining from the use of drugs, and completing an ethics course. July 3, 2008

DUNCAN, MARK ALLEN, P.A. (PA13002)

Temecula, CA

Stipulated Decision. Convicted of a misdemeanor for battery and a misdemeanor for inflicting a corporal injury on a spouse. Revoked, stayed, placed on 3 years probation with terms and conditions. July 7, 2008

MARSHALL, AUGUSTIN ENOCH (PA17793)

Tuscon, AZ

Disciplined by New York for engaging in conduct that evidenced moral unfitness in the practice of medicine by engaging in unwanted and unsolicited physical contact with a co-worker and a physician assistant student. Revoked. July 21, 2008

MENDOZA, ELVIRA CHU, P.A. (PA17736)

Fair Oaks Ranch, CA

Stipulated Decision. Committed gross negligence by prescribing an exceedingly high dose of medication in the care and treatment of 1 patient. Revoked, stayed, placed on 5 years probation with terms and conditions, including but not limited to, completion of a clinical training program. July 28, 2008

OWER, KRISTINE, M. (PA15583)

Glendora, CA

Stipulated Decision. No admissions, but charged with failure to comply with conditions of a Board-ordered probation, aiding and abetting the unlicensed practice of medicine, making false statements, alteration of medical records, insurance fraud, failure to maintain adequate and accurate medical records, dishonest acts, and the illegal corporate practice of medicine. Surrender of license. May 9, 2008

Doctors of Podiatric Medicine

CARRASCO, PETE JR., D.P.M (E3608)

Rancho Cucamonga, CA

Stipulated Decision. No admissions but charged with gross negligence in the care and treatment of 1 patient, repeated negligent acts, incompetence, excessive treatment, failure to maintain adequate and accurate medical records, alteration of medical records, and dishonesty in the care and treatment of 6 patients. Revoked, stayed, placed on 7 years probation with terms and conditions including, but not limited to, 30 days actual suspension, completing a clinical training program, a medical record keeping course, and an ethics course, and obtaining a practice and billing monitor. July 2, 2008

HERNANDEZ, VIRGIL, D.P.M. (E3884)

Santa Ana, CA

Stipulated Decision. 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 1 patient. Revoked, stayed, placed on 4 years probation with terms and conditions including, but not limited to, completing a clinical training program, and an ethics course and obtaining a practice and billing monitor. July 9, 2008

STRUGATSKY, IGOR D. (E4369)

La Jolla, CA

Felony conviction for devising and engaging in a scheme to obtain false payments for services. Revoked. May 5, 2008

TRUONG, VINNCENTE, H.G., D.P.M. (E4177)

San Jose, CA

Felony conviction for grand theft of personal property and money. Revoked, stayed, placed on 10 years probation with terms and conditions including, but not limited to, actual suspension until completion of a written examination or clinical training program; completing an ethics course; and obtaining a practice and billing monitor. July 28, 2008

Department of Consumer Affairs
Medical Board of California
2005 Evergreen Street, Suite 1200
Sacramento, CA 95815

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Business and Professions Code
section 2021(b) & (c) require
physicians to inform the Medical
Board in writing of any name or
address change

See: www.mbc.ca.gov/Address_Record.htm



Medical Board of California Meetings—2009

January 29–30, 2009: Los Angeles

May 7–8, 2009: San Francisco

July 23–24, 2009: Sacramento

October 29–30, 2009: San Diego

All meetings are open to the public.

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MEDICAL BOARD OF CALIFORNIA NEWSLETTER—NOVEMBER 2008

Candis Cohen, Editor (916) 263-2389

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