

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

**In the Matter of the First Amended)
Accusation Against:)
)
BRADLEY JOHN SCHNIEROW, M.D.) Case No. 8002014005529
)
Physician's and Surgeon's)
Certificate No. A 67780)
)
Respondent)
_____)**

DECISION AND ORDER

The attached Stipulated Surrender of License and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on February 23, 2016.

IT IS SO ORDERED February 16, 2016.

MEDICAL BOARD OF CALIFORNIA

By: 
**Kimberly Kirchmeyer
Executive Director**

1 KAMALA D. HARRIS
Attorney General of California
2 THOMAS S. LAZAR
Supervising Deputy Attorney General
3 MARTIN W. HAGAN
Deputy Attorney General
4 State Bar No. 155553
110 West "A" Street, Suite 1100
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8 *Attorneys for Complainant*

9
10 **BEFORE THE**
11 **MEDICAL BOARD OF CALIFORNIA**
12 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

13 In the Matter of the First Amended Accusation
14 Against:

Case No. 8002014005529

15 **BRADLEY JOHN SCHNIEROW, M.D.**
16 **13676 Mira-Montana Drive**
Del Mar, CA 92014

**STIPULATED SURRENDER OF
LICENSE AND DISCIPLINARY ORDER**

17 **Physician's and Surgeon's Certificate No.**
18 **A67780,**

19 Respondent.

20 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
21 entitled proceedings that the following matters are true:

22 **PARTIES**

23 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board
24 of California and is represented in this matter by Kamala D. Harris, Attorney General of the State
25 of California, by Martin W. Hagan, Deputy Attorney General.

26 2. Bradley John Schnierow, M.D. (respondent), is represented in this proceeding by
27 Steven H. Zeigen, Esq., of Rosenberg, Shpall & Zeigen, whose address is Symphony Towers, 750
28 "B" Street, Suite 2110, San Diego, CA 92101.

1 shall not become effective, shall be of no evidentiary value whatsoever, and shall not be relied
2 upon or introduced in any disciplinary action by either party hereto. Respondent further agrees
3 that should this Stipulated Surrender of License and Disciplinary Order be rejected for any reason
4 by the Executive Director on behalf of the Board, respondent will assert no claim that the
5 Executive Director, the Board, or any member thereof, was prejudiced by its/his/her review,
6 discussion and/or consideration of this Stipulated Surrender of License and Disciplinary Order or
7 of any matter or matters related hereto.

8 **ADDITIONAL PROVISIONS**

9 17. This Stipulated Surrender of License and Disciplinary Order is intended by the parties
10 herein to be an integrated writing representing the complete, final and exclusive embodiment of
11 the agreements of the parties in the above-entitled matter.

12 18. The parties agree that copies of this Stipulated Surrender of License and Disciplinary
13 Order, including copies of the signatures of the parties, may be used in lieu of original documents
14 and signatures and, further, that such copies shall have the same force and effect as originals.

15 19. In consideration of the foregoing admissions and stipulations, the parties agree the
16 Executive Director of the Medical Board may, without further notice to or opportunity to be heard
17 by respondent, issue and enter the following Disciplinary Order on behalf of the Board:

18 **DISCIPLINARY ORDER**

19 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A67780, issued
20 to respondent Bradley John Schnierow, M.D., is surrendered and accepted by the Medical Board
21 of California.

22 1. The surrender of respondent's Physician's and Surgeon's Certificate No. A67780 and
23 the acceptance of the surrendered license by the Board shall constitute the imposition of
24 discipline against respondent. This stipulation constitutes a record of the discipline and shall
25 become a part of respondent's license history with the Medical Board of California.

26 2. Respondent shall lose all rights and privileges as a Physician and Surgeon in
27 California as of the effective date of the Board's Decision and Order.

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1 3. Respondent shall cause to be delivered to the Board his pocket license and, if one was
2 issued, his wall certificate on or before the effective date of the Decision and Order.

3 4. If respondent ever files an application for licensure or a petition for reinstatement in
4 the State of California, the Board shall treat it as a petition for reinstatement. Respondent must
5 comply with all the laws, regulations and procedures for reinstatement of a revoked license in
6 effect at the time the petition is filed, and all of the charges and allegations contained in First
7 Amended Accusation No. 8002014005529 shall be deemed to be true, correct and fully admitted
8 by respondent when the Board determines whether to grant or deny the petition.

9 5. Pursuant to the provisions of Business and Professions Code section 2307,
10 subdivision (b)(1), respondent shall be permitted to file a petition for reinstatement of his
11 Physician's and Surgeon's Certificate No. A67780 after a period of two (2) years has elapsed
12 from the effective date of this Decision and Order.

13 6. With respect to the action that has been taken herein pursuant to California Business
14 and Professions Code section 822, any future reinstatement of respondent's Physician's and
15 Surgeon's Certificate No. A67780 shall be governed by the procedures contained in Article 12.5
16 of Chapter 1 of Division 2 of the California Business and Professions Code. (Bus. & Prof. Code,
17 § 823.)

18 7. If respondent should ever apply or reapply for a new license or certification, or
19 petition for reinstatement of a license, by any other health care licensing agency in the State of
20 California, all of the charges and allegations contained in First Amended Accusation No.
21 8002014005529 shall be deemed to be true, correct, and fully admitted by respondent for the
22 purpose of any Statement of Issues or any other proceeding seeking to deny or restrict licensure.

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ACCEPTANCE

I have carefully read the above Stipulated Surrender of License and Disciplinary Order and have fully discussed it with my attorney, Steven H. Zeigen, Esq. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate No. A67780. I enter into this Stipulated Surrender of License and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical Board of California.

DATED: 12/14/15 
BRADLEY JOHN SCHNIEROW, M.D.
Respondent

I have read and fully discussed with respondent Bradley John Schnierow, M.D., the terms and conditions and other matters contained in this Stipulated Surrender of License and Disciplinary Order. I approve its form and content.

DATED: 12/14/15 
STEVEN H. ZEIGEN, ESQ.
Attorney for Respondent

ENDORSEMENT

The foregoing Stipulated Surrender of License and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California of the Department of Consumer Affairs.

Dated: 12/14/2015

Respectfully submitted,
KAMALA D. HARRIS
Attorney General of California
THOMAS S. LAZAR
Supervising Deputy Attorney General

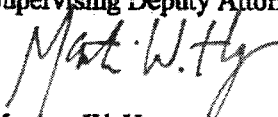

MARTIN W. HAGAN
Deputy Attorney General
Attorneys for Complainant

Exhibit A

First Amended Accusation No. 8002014005529

1 KAMALA D. HARRIS
Attorney General of California
2 THOMAS S. LAZAR
Supervising Deputy Attorney General
3 MARTIN W. HAGAN
Deputy Attorney General
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8 *Attorneys for Complainant*

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO *MARCH 10, 2015*
BY: *J. J. [unclear]* ANALYST

9
10 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
11 **DEPARTMENT OF CONSUMER AFFAIRS**
12 **STATE OF CALIFORNIA**

13 In the Matter of the First Amended Accusation
Against:

Case No. 8002014005529

14 **BRADLEY JOHN SCHNIEROW, M.D.**
15 **9834 Genesee Avenue, Suite 112**
16 **La Jolla, CA 92037**

FIRST AMENDED ACCUSATION

17 **Physician's and Surgeon's Certificate**
No. A67780,

18 Respondent.

19 Complainant alleges:

20 **PARTIES**

21 1. Kimberly Kirchmeyer (Complainant) brings this First Amended Accusation solely in
22 her official capacity as the Executive Director of the Medical Board of California, Department of
23 Consumer Affairs.

24 2. On or about March 12, 1999, the Medical Board of California issued Physician's and
25 Surgeon's Certificate Number A67780 to Bradley John Schnierow, M.D. (Respondent). The
26 Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the
27 charges and allegations brought herein, expired on May 31, 2014, and has not been renewed.
28

1 psychotherapeutic treatment, to his or her spouse or person in an equivalent
2 domestic relationship.”

3 7. Section 2234 of the Code states:

4 “The board shall take action against any licensee who is charged with
5 unprofessional conduct.^[2] In addition to other provisions of this article,
6 unprofessional conduct includes, but is not limited to, the following:

7 “(a) Violating or attempting to violate, directly or indirectly, assisting in or
8 abetting the violation of, or conspiring to violate any provision of this chapter
9 [Chapter 5, the Medical Practice Act].

10 “... .

11 “(e) The commission of any act involving dishonesty or corruption which is
12 substantially related to the qualifications, functions, or duties of a physician and
13 surgeon.

14 “(f) Any action or conduct which would have warranted the denial of a
15 certificate.

16 “....” (Footnote added.)

17 8. Section 2236 of the Code states:

18 “(a) The conviction of any offense substantially related to the qualifications,
19 functions, or duties of a physician and surgeon constitutes unprofessional conduct
20 within the meaning of this chapter [Chapter 5, the Medical Practice Act]. The
21 record of conviction shall be conclusive evidence only of the fact that the
22 conviction occurred.

23 “(b) The district attorney, city attorney, or other prosecuting agency shall
24 notify the Division^[3] of Medical Quality of the pendency of an action against a

25 ² Unprofessional conduct has been defined as conduct which breaches the rules or ethical
26 code of the medical profession, or conduct which is unbecoming a member in good standing of
27 the medical profession, and which demonstrates an unfitness to practice medicine. (*Shea v.*
Board of Medical Examiners (1978) 81 Cal.App.3d 654.)

1 licensee charging a felony or misdemeanor immediately upon obtaining information
2 that the defendant is a licensee. The notice shall identify the licensee and describe
3 the crimes charged and the facts alleged. The prosecuting agency shall also notify
4 the clerk of the court in which the action is pending that the defendant is a licensee,
5 and the clerk shall record prominently in the file that the defendant holds a license
6 as a physician and surgeon.

7 “(c) The clerk of the court in which a licensee is convicted of a crime shall,
8 within 48 hours after the conviction, transmit a certified copy of the record of
9 conviction to the board. The division may inquire into the circumstances
10 surrounding the commission of a crime in order to fix the degree of discipline or to
11 determine if the conviction is of an offense substantially related to the
12 qualifications, functions, or duties of a physician and surgeon.

13 “(d) A plea or verdict of guilty or a conviction after a plea of nolo contendere
14 is deemed to be a conviction within the meaning of this section and Section 2236.1.
15 The record of conviction shall be conclusive evidence of the fact that the conviction
16 occurred.” (Footnote added.)

17 9. Section 2238 of the Code states:

18 “A violation of any federal statute or federal regulation or any of the statutes
19 or regulations of this state regulating dangerous drugs or controlled substances
20 constitutes unprofessional conduct.”

21 10. Section 2239 of the Code states:

22 “(a) The use or prescribing for or administering to himself or herself, of any
23 controlled substance; or the use of any of the dangerous drugs specified in Section
24 4022, or of alcoholic beverages, to the extent, or in such a manner as to be

25 (...continued)

26 ³ California Business and Professions Code section 2002, as amended and effective
27 January 1, 2008, provides that, unless otherwise expressly provided, the term “board” as used in
28 the State Medical Practice Act (Bus. & Prof. Code, §§ 2000, *et seq.*) means the “Medical Board
of California,” and references to the “Division of Medical Quality” and “Division of Licensing”
in the Act or any other provision of law shall be deemed to refer to the Board.

1 dangerous or injurious to the licensee, or to any other person or to the public, or to
2 the extent that such use impairs the ability of the licensee to practice medicine
3 safely or more than one misdemeanor or any felony involving the use, consumption,
4 or self-administration of any of the substances referred to in this section, or any
5 combination thereof, constitutes unprofessional conduct. The record of the
6 conviction is conclusive evidence of such unprofessional conduct.

7 "..."

8 11. Section 2241 of the Code states:

9 "(a) A physician and surgeon may prescribe, dispense, or administer
10 prescription drugs, including prescription controlled substances, to an addict under
11 his or her treatment for a purpose other than maintenance on, or detoxification
12 from, prescription drugs or controlled substances.

13 "(b) A physician and surgeon may prescribe, dispense, or administer
14 prescription drugs or prescription controlled substances to an addict for purposes of
15 maintenance on, or detoxification from, prescription drugs or controlled substances
16 only as set forth in subdivision (c) or in Sections 11215, 11217, 11217.5, 11218,
17 11219, and 11220 of the Health and Safety Code. Nothing in this subdivision shall
18 authorize a physician and surgeon to prescribe, dispense, or administer dangerous
19 drugs or controlled substances to a person he or she knows or reasonably believes
20 is using or will use the drugs or substances for a nonmedical purpose.

21 "..."

22 12. Section 2242 of the Code states:

23 "(a) Prescribing, dispensing, or furnishing dangerous drugs as defined in
24 Section 4022 without an appropriate prior examination and a medical indication,
25 constitutes unprofessional conduct.

26 "..."

27 ////

28 ////

1 13. Section 2261 of the Code states:

2 "Knowingly making or signing any certificate or other document directly or
3 indirectly related to the practice of medicine or podiatry which falsely represents
4 the existence or nonexistence of a state of facts, constitutes unprofessional
5 conduct."

6 14. Section 2266 of the Code states:

7 "The failure of a physician and surgeon to maintain adequate and accurate
8 records relating to the provision of services to their patients constitutes
9 unprofessional conduct."

10 15. Section 2274 of the Code states:

11 "The use by any licensee of any certificate, of any letter, letters, word, words,
12 term, or terms either as a prefix, affix, or suffix indicating that he or she is entitled
13 to engage in a medical practice for which he or she is not licensed constitutes
14 unprofessional conduct.

15 "..."

16 16. Section 2280 of the Code states:

17 "No licensee shall practice medicine while under the influence of any
18 narcotic drug or alcohol to such extent as to impair his or her ability to conduct the
19 practice of medicine with safety to the public and his or her patients. Violation of
20 this section constitutes unprofessional conduct and is a misdemeanor."

21 17. Section 2306 of the Code states:

22 "If a licensee's right to practice medicine is suspended, he or she shall not
23 engage in the practice of medicine during the term of such suspension. Upon the
24 expiration of the term of suspension, the certificate shall be reinstated by the
25 Division of Medical Quality,⁴ unless the licensee during the term of suspension is

26 ⁴ Business and Professions Code section 2002, effective January 1, 2008, provides that,
27 unless otherwise expressly provided, the term "board" as used in the Medical Practice Act (Bus.
28 & Prof. Code, § 2000 et seq.) means the "Medical Board of California," and references to the
"Division of Medical Quality" and "Division of Licensing" in the Act or any other provision of
(continued...)

1 found to have engaged in the practice of medicine in this state. In that event, the
2 division shall revoke the licensee's certificate to engage in the practice of
3 medicine." (Footnote added.)

4 18. Section 11170 of the Health and Safety Code states:

5 "No person shall prescribe, administer, or furnish a controlled substance for
6 himself."

7 19. Section 11173 of the Health and Safety Code states:

8 "(a) No person shall obtain or attempt to obtain controlled substances, or
9 procure or attempt to procure the administration of or prescription for controlled
10 substances, (1) by fraud, deceit, misrepresentation, or subterfuge; or (2) by the
11 concealment of a material fact.

12 "(b) No person shall make a false statement in any prescription, order, report,
13 or record, required by this division.

14 "..."

15 20. Section 822 of the Code states:

16 "If a licensing agency determines that its licentiate's ability to practice his or
17 her profession safely is impaired because the licentiate is mentally ill, or physically
18 ill affecting competency, the licensing agency may take action by any one of the
19 following methods:

20 "(a) Revoking the licentiate's certificate or license.

21 "(b) Suspending the licentiate's right to practice.

22 "(c) Placing the licentiate on probation.

23 "(d) Taking such other action in relation to the licentiate as the licensing
24 agency in its discretion deems proper.

25 "..."

26 ////

27 (...continued)
28 law shall be deemed to refer to the Board.

1 FIRST CAUSE FOR DISCIPLINE

2 (Use of Controlled Substances)

3 21. Respondent has subjected his Physician's and Surgeon's Certificate Number
4 A67780 to disciplinary action under sections 2227 and 2234, as defined by section 2239,
5 subdivision (a), of the Code, in that he has used, prescribed and/or administered to himself
6 controlled substances, as more particularly alleged hereinafter:

7 22. On or about April 12, 2013, the Drug Enforcement Administration (DEA) opened
8 an investigation regarding Respondent. The DEA opened its investigation after being informed
9 that Respondent was a "drug user." The source of information was employed by Respondent and
10 personally observed that Respondent would often be late for appointments and sometimes would
11 not show up at all. The source reported seeing drug paraphernalia in Respondent's office, which
12 included a "meth pipe," and the source's certainty that Respondent was using drugs. The source
13 also indicated Respondent "nodded out on the patients, acts like someone in college, like a frat
14 boy."

15 23. On or about May 8, 2013, the DEA received additional information from another
16 source of information who was a former employee of Respondent's. This source reported seeing
17 Respondent acting strange during the course of her employment and provided details about when
18 the "weirdness started." Among other things, Respondent would not make eye contact when he
19 spoke and would constantly be licking his lips. The source described an incident at the medical
20 office on May 22, 2010, when Respondent was unkempt, could not complete his sentences, and
21 was swaying while he walked. The source had to assist Respondent with walking and ultimately
22 summoned another physician after Respondent passed out in the medical office. As part of this
23 same incident, the source told DEA she called LB, the office manager and Respondent's
24 girlfriend at the time, who came into the office. When LB arrived at the office she claimed
25 Respondent had accidentally taken one of her of Xanax® pills. The source also recounted a
26 conversation she had with LB who told her that she and Respondent used drugs together, such as
27 crystal meth, and that they fought all the time. The source told DEA that she believed Respondent
28 was "doing drugs" and showed DEA pictures, that were forwarded to her by another employee,

1 which depicted what appeared to be lines of cocaine on Respondent's desk. Lastly, the source
2 told DEA that Respondent allowed her to call-in prescriptions for herself and that she had, in fact,
3 called in eleven prescriptions for her own personal use.

4 24. On or about June 11, 2013, the DEA arrived at Respondent's medical office, San
5 Diego Sleep Medicine, located on Genesee Avenue, in La Jolla, California, to interview
6 Respondent. At the time of their arrival, there was a patient waiting in the medical office.
7 Respondent failed to show up for his appointment with the patient. After waiting awhile, the DEA
8 called Respondent's answering service in an attempt to speak with Respondent. Respondent
9 called the DEA later the same day and an appointment was scheduled for Respondent to meet
10 with the DEA at his medical office on June 14, 2013, at 10:00 a.m.

11 25. On or about June 14, 2013, the DEA arrived at Respondent's medical office for the
12 previously scheduled appointment. Respondent called a few minutes before the appointment was
13 scheduled to begin and spoke with a DEA Diversion Investigator on the phone. During this
14 conversation, Respondent told the DEA Diversion Investigator he could not make it to the
15 appointment. While speaking with Respondent, the DEA Diversion Investigator noticed
16 Respondent's speech was slurred. The Diversion Investigator placed the call on speaker phone
17 and the other DEA personnel agreed Respondent was slurring his speech. The DEA Diversion
18 Investigator asked Respondent if they could visit him at his residence to ask him a few questions
19 and he consented.

20 26. On or about June 14, 2013, at approximately 10:40 a.m., a visit was made to
21 Respondent's residence in Del Mar, California. During the initial contact with Respondent, the
22 DEA Diversion Investigator noticed that Respondent's eyes appeared red and glassy. Respondent
23 was advised that DEA would be scheduling an inspection and audit for his medical office.
24 Respondent was asked whether he had a substance abuse problem and he replied "no."

25 27. On or about June 28, 2013, DEA conducted a regulatory inspection at
26 Respondent's medical office and found no regulatory violations.

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1 28. On or about March 28, 2014, the DEA received a phone call from another source
2 of information who reported possible substance abuse, overall strange behavior by Respondent,
3 and possible diversion of controlled substances and dangerous drugs. The source was interviewed
4 on April 1, 2014, and elaborated on her initial report to the DEA. Among other things, the source
5 stated Respondent was having an intimate relationship with LB, his previous office manager. The
6 source described the relationship between LB and Respondent as volatile with both verbal and
7 physical fights. The source recalled an incident around Thanksgiving 2011 when LB and
8 Respondent got into a physical altercation which resulted in the police being summoned to
9 Respondent's home.⁵ When the police arrived, the source saw Respondent remove pills from his
10 pocket and hide them under a couch cushion. The source also told DEA of Respondent's intimate
11 relationship with another woman, LM. The source reported seeing Respondent and LM at the
12 residence when they both seemed "high." The source reported that she believed LM was a
13 prostitute and drug addict. When asked about Respondent's daily routine, the source indicated
14 Respondent would usually sleep during the day, stayed up all night, and "seems high a lot." The
15 source believed Respondent had been evicted from his medical office. The source also reported
16 seeing Xyrem®⁶ bottles in the house in another person's name.

17 29. The DEA obtained a copy of Respondent's Controlled Substances Utilization and
18 Evaluation System (CURES) report, which provided information about Respondent's prescribing
19 history for LM for the period of May 15, 2013 to May 15, 2014. The CURES report indicated
20 Respondent wrote forty-eight (48) prescriptions for LM between May 15, 2013, and May 15,
21 2014. Most of the prescriptions were for APAP hydrocodone bitartrate,⁷ alprazolam (Xanax®)⁸

22 ⁵ The DEA checked arrest records for LB which confirmed that the police responded to a
23 domestic dispute on November 27, 2011.

24 ⁶ Xyrem® (sodium oxybate) is the trade name for the FDA approved medication which is
25 classified as a Schedule III controlled substance. It is a central nervous system (CNS) depressant.
26 The active ingredient of Xyrem is sodium oxybate which is a form of gamma hydroxybutyrate
(GHB). Because of the risks of central nervous system depression and the high potential for
abuse and misuse, Xyrem® is only available through a restricted distribution program called the
"Xyrem Success Program."

27 ⁷ APAP/Hydrocodone Bitartrate (Lorcet®, Lortab®, Vicodin®, Vicoprofen®,
28 Tussionex® and Norco®) is a hydrocodone combination of hydrocodone bitartrate and
(continued...)

1 and carisoprodol (Soma®),⁹ a powerful combination of controlled substances and dangerous
2 drugs known as “Houston cocktail,” “trio” and/or the “holy trinity.”¹⁰ Some of the other
3 prescriptions were for oxycodone hydrochloride¹¹ and an amphetamine salt combination.¹² The
4 CURES report also indicated LM obtained 120 tablets of Alprazolam (Xanax®) on February 19,
5 2014; and 30 tablets of Alprazolam (Xanax®) five days later using Respondent’s prescriptions.

6 (...continued)

7 acetaminophen which is a Schedule III controlled substance pursuant to Health and Safety Code
8 section 11056, subdivision (e), and a dangerous drug pursuant to Business and Professions Code
9 section 4022. When properly prescribed and indicated, it is used for the treatment of moderate to
10 severe pain.

11 ⁸ Alprazolam (Xanax®) is a Schedule IV controlled substance pursuant to Health and
12 Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and
13 Professions Code section 4022. When properly prescribed and indicated, it is used for the
14 treatment of anxiety and panic attacks.

15 ⁹ Carisoprodol (Soma®) is a Schedule IV controlled substance pursuant to Health and
16 Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and
17 Professions Code section 4022. When properly prescribed and indicated, it is used for the
18 treatment of acute and painful musculoskeletal conditions.

19 ¹⁰ “Taking these three drugs in combination is typically not medically justified. When
20 taken together these medications may give users a feeling of euphoria similar to heroin. As a
21 result, this prescription drug combination, which may be referred to as ‘Houston Cocktail,’ ‘Holy
22 Trinity,’ or ‘Trio,’ is subject to abuse and has resulted in deaths.” (M. Forrester, Ingestions of
23 Hydrocodone, Carisprodol, and Alprazolam in Combination Reported to Texas Poison Centers,
24 Journal of Addictive Diseases, 30:110-115, 2011.)

25 ¹¹ Oxycodone hydrochloride (Oxycodone®, Oxycontin®, Roxicodone®) is a Schedule II
26 controlled substance pursuant to Health and Safety Code section 11055, subdivision (b), and a
27 dangerous drug pursuant to Business and Professions Code section 4022. When properly
28 prescribed and indicated, it is used for the treatment of moderate to severe pain. Oxycodone has
been identified as a drug of abuse by the DEA. According to the DEA, “Oxycodone is abused
orally or intravenously. The tablets are crushed and sniffed or dissolved in water and injected.
Others heat a tablet that has been placed on a piece of foil and inhale the vapors...Euphoria and
feelings of relaxation are the most common effects of oxycodone on the brain, which explains its
high potential for abuse.” (Drugs of Abuse – A DEA Resource Guide (2011), at p. 41.)

¹² Amphetamine salt combination (Adderall®) is a combination of amphetamine and
amphetamine salts in a 3:1 ratio. Amphetamine is a Schedule II controlled substance pursuant to
Health and Safety Code section 11055, subdivision (d), and a dangerous drug pursuant to
Business and Professions Code section 4022. When appropriately prescribed and indicated, it is
used for the treatment of attention deficit hyperactivity disorder (ADHD) and Narcolepsy.
Amphetamines have been identified as a drug of abuse by the DEA. According to the DEA,
“Amphetamines are generally taken orally or injected. However, the addition of ‘ice,’ the slang
name of crystalized methamphetamine hydrochloride, has promoted smoking as another mode of
administration. Just as ‘crack’ is smokable cocaine, ‘ice’ is smokable methamphetamine. The
effects of amphetamines and methamphetamine are similar to cocaine, but their onset is slower
and their duration is longer.” (Drugs of Abuse – A DEA Resource Guide (2011), at p. 44.)

1 30. The DEA conducted a law enforcement inquiry of LM as part of its investigation.
2 The inquiry indicated LM was arrested in 2002 for possession of cocaine, amphetamine and
3 methamphetamine and drug paraphernalia, among other offenses; and was also arrested in 2012
4 by the San Diego County Sheriff's Department for possession and sale of a controlled substance.

5 31. On or about March 31, 2014, the DEA arrived at Respondent's medical office
6 building to interview others in an attempt to obtain additional information on Respondent. The
7 DEA was advised Respondent was evicted from his medical office in approximately March 2014.
8 The DEA followed up with the property manager for the office building where Respondent had
9 rented office space, to determine why Respondent was evicted from his medical office. The
10 property manager reported there were problems with Respondent and his medical office which
11 started about three years ago. According to the property manager, patients would show up for
12 appointments with Respondent and he would not show up. The property manager indicated
13 Respondent "had changed," his behavior was "irrational," he was not paying his rent as a tenant,
14 and he looked disheveled. According to the property manager, Respondent was sleeping at his
15 medical office and "strange people were coming to the sleep center" who "looked like druggies"
16 and she believed Respondent was "on something." The property manager told DEA that
17 Respondent resigned from the hospital staff at Scripps Memorial Hospital in approximately
18 March 2013 and was no longer authorized to practice medicine on Scripps' property. However,
19 according to the property manager, Respondent would "sneak in" to the Scripps' property in an
20 attempt to see patients in the lobby. The property manager advised DEA that on October 29,
21 2013, Scripps' security had to stop Respondent from entering the property. The property manager
22 reported a default judgment was filed by Scripps on or about January 2, 2014, and a Writ of
23 Possession was filed on March 27, 2014, which commenced a formal eviction of Respondent and
24 lock-out. A review of DEA records indicates Respondent changed his DEA registered location
25 via the DEA website to his personal residence address in January 2014.

26 32. On or about April 22, 2014, the DEA obtained surveillance video from a Wal-Mart
27 store located at 3382 Murphy Canyon Road, San Diego, CA 92123. The video from April 22,
28 2014, showed Respondent and LM entering the Wal-Mart store holding hands. Thereafter, LM

1 dropped off a prescription at the Wal-Mart pharmacy while Respondent roamed the aisles of the
2 store and waited for her. The Wal-Mart pharmacist ultimately refused to fill the prescription. The
3 pharmacist told DEA that on April 22, 2014, LM presented a prescription for Norco®, Xanax®
4 and carisprodol (Soma®) that was issued to her by Respondent on April 20, 2014, which was
5 Easter Sunday. The pharmacist refused to fill the prescription because it was issued on Easter
6 Sunday which was suspicious. Moreover, when the pharmacist called the phone number on the
7 prescription, the phone number was disconnected. The next day, April 23, 2014, Respondent
8 called the pharmacy and insisted the prescription be filled. Respondent was asked whether he
9 was open for business on Easter Sunday and he replied "no." Respondent then stated he had seen
10 LM on Saturday and had made a mistake with the date. Respondent was advised the prescription
11 would not be filled and the original prescription was retained.

12 33. On or about April 23, 2014, Respondent issued a new prescription to LM for
13 hydrocodone 325/10 mg (#75); alprazolam (Xanax®) 2 mg (#120); and carisprodol (Soma®)
14 350 mg (#120) which LM filled at a Rite Aid Pharmacy. LM also filled a prescription issued by
15 Respondent for Oxycodone 30 mg (#120) on May 2, 2014.

16 34. On or about May 14, 2014, the property manager, who was previously
17 interviewed, called the DEA to report the San Diego Sheriff's Department had posted a notice
18 advising Respondent he had five (5) days to remove his possessions from his medical office.

19 35. On or about May 22, 2014, the DEA met the property manager at Respondent's
20 former medical office. The deputy sheriffs were present to serve an Eviction Restoration Notice
21 on Respondent. Since Respondent was there past the time he was given to remove his
22 possessions, he was ordered to leave the premises and the locks to the front door were changed by
23 Scripps' personnel. Later in the day, the property manager called DEA to report she saw drug
24 paraphernalia in the medical office. The property manager sent the DEA pictures of what
25 appeared to be glass "crack pipes" that were found in Respondent's medical office.

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1 EXECUTION OF SEARCH WARRANT AT RESPONDENT'S RESIDENCE

2 36. On or about May 28, 2014, at 8:15 a.m., DEA personnel, accompanied by Medical
3 Board investigators, executed a search warrant at Respondent's home in Del Mar, California. In
4 conducting a search of Respondent's home, the DEA located and confiscated various drugs and
5 controlled substances, drug paraphernalia, pill bottles, numerous cell phones and computers,
6 evidence of improper prescribing and diversion of controlled substances and dangerous drugs,
7 and other items of concern. The evidence of illicit drug use and diversion of controlled substances
8 included, but was not limited to, six or seven bottles of Xyrem®, a zip-lock bag of marijuana,¹³
9 one "bong" smoking device made out of a pill bottle with marijuana residue; 15 glass pipes with
10 methamphetamine¹⁴ residue and a myriad of other pills, substances and injectables. The
11 confiscated pills, substances and injectables were sent to the DEA laboratory for chemical testing
12 and tested positive for, among other things, MDMA,¹⁵ oxycodone, alprazolam (Xanax®) and
13 ketamine hydrochloride.¹⁶

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15 ¹³ Marijuana is a Schedule I controlled substance pursuant to Health and Safety Code
16 section 11054, subdivision (d).

17 ¹⁴ Methamphetamine is a Schedule II controlled substance pursuant to Health and Safety
18 Code section 11055, subdivision (d). According to the DEA, "Methamphetamine (Meth) is a
19 highly addictive drug with potent central nervous system stimulant properties. Those who smoke
or inject it report a brief, intense sensation, or rush...Long term meth use results in many
damaging effects, including addiction." (Drugs of Abuse – A DEA Resource Guide (2011), at pp.
48-49.)

20 ¹⁵ 3,4-Methylenedioxymethamphetamine (MDMA), also known as Ecstasy, is a Schedule
21 I controlled substance pursuant to Health and Safety Code section 11054, subdivision (d).
According to the DEA, MDMA acts as both a stimulant and psychedelic and is a "party drug"
22 that is popular to "promote euphoria, feelings of closeness, empathy, sexuality, and to reduce
inhibitions." Abuse of Ecstasy can cause psychological and physical damage. (Drugs of Abuse
– A DEA Resource Guide (2011), at pp. 60-61.)

23 ¹⁶ Ketamine is a Schedule III controlled substance pursuant to Health and Safety Code
24 section 11056, subdivision (g), and a dangerous drug pursuant to Business and Professions Code
25 section 4022. According to the DEA, "Ketamine is a dissociative anesthetic that has some
hallucinogenic effects." "Ketamine, along with other 'club drugs,' has become popular among
26 young teens and young adults at dance clubs and 'raves.'" "Powdered ketamine is cut into lines
known as bumps and snorted, or it is smoked typically in marijuana or tobacco cigarettes. Liquid
27 ketamine is injected or mixed into drinks. Ketamine is found by itself or often in combination
with MDMA, amphetamine, methamphetamine, or cocaine." Abuse of ketamine can cause
28 psychological and physical damage. (Drugs of Abuse – A DEA Resource Guide (2011), at p. 63.)

1 37. During the execution of the search warrant, Respondent agreed to speak to the
2 DEA. In summary, Respondent told DEA, among other things, that he was no longer seeing
3 patients at his medical office and that he had seen patients at his home in Del Mar. He admitted
4 to using Xyrem® that his patients returned to him. Respondent also admitted to using controlled
5 substances and dangerous drugs such as oxycodone, amphetamines, marijuana, alprazolam
6 (Xanax®) and methamphetamine. He also indicated that he had written prescriptions of Xanax®,
7 oxycodone, carisprodol (Soma®) and amphetamines for LM with her diverting some of the pills,
8 such as oxycodone and Xanax®, to Respondent for his own use. Respondent indicated LM also
9 had a drug problem and that he smoked methamphetamine with her. Respondent also stated he
10 smoked marijuana that LM obtained from a medical marijuana dispensary. Respondent stated he
11 kept patient files on his Gateway desktop computer. When asked if he was properly maintaining
12 his patient files, Respondent stated, "not as good as I should have been."¹⁷ Respondent also
13 admitted he had allowed one of his former employees to call-in a prescription for herself for
14 Norco and Vicodin. (See ¶ 23, *infra*.)

15 38. During the execution of the search warrant, Respondent agreed to provide a
16 voluntary urine sample. The sample tested positive for amphetamine, methamphetamine,
17 oxycodone, oxymorphone and a marijuana metabolite.¹⁸

18 39. Respondent voluntarily surrendered his DEA Certificate Registration No.
19 BS4733956 "for cause" to the DEA on May 28, 2014.

20 **EXECUTION OF SEARCH WARRANT AT RESPONDENT'S MEDICAL OFFICE**

21 40. On or about May 28, 2014, DEA personnel executed a search warrant at
22 Respondent's former medical office. During the search of the former medical office, DEA
23 located and confiscated, among other things, two (2) glass cylinder pipes with methamphetamine
24 residue.

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26 ¹⁷ The DEA did not locate any patient files at Respondent's residence or at his former
27 medical office.

28 ¹⁸ A metabolite is any chemical produced through metabolism or a metabolic reaction.

1 EXECUTION OF SEARCH WARRANT AT LM'S RESIDENCE

2 41. On or about May 28, 2014, at 8:20 a.m., DEA personnel executed a search warrant
3 at LM's residence in San Diego, California. In conducting a search of LM's residence, DEA
4 located and confiscated evidence of improper diversion, and use of, controlled substances and
5 dangerous drugs. The evidence of diversion of controlled substances and dangerous included, but
6 was not limited to, various pills that were visually identified as controlled substances, numerous
7 empty pill bottles for controlled substances that were prescribed by Respondent, blank
8 prescription forms for Respondent, and pre-filled prescriptions for LM. The pills were identified
9 as hydrocodone with acetaminophen 10/325, carisprodol (Soma®), alprazolam (Xanax®) and
10 amphetamine salts (Adderall®).¹⁹ The DEA also found a glass pipe with residue. LM stated the
11 glass pipe was used to smoke a waxy form of hashish.

12 42. During the execution of the search warrant, LM agreed to speak with the DEA. In
13 summary, LM stated, among other things, that she had been in a sexual relationship with
14 Respondent since August 2012. A friend referred her to Respondent in July 2012. At her initial
15 medical appointment with Respondent, he performed a cursory physical examination and
16 diagnosed her with Restless Leg Syndrome and hyper-insomnia. Respondent did not perform any
17 additional tests, such as a sleep study or other diagnostic tests. LM stated she advised Respondent
18 at the initial visit that she had been addicted to crack cocaine in the past. Despite her addiction
19 history, Respondent prescribed her various controlled substances at her initial visit and never
20 discussed anything with her pertaining to addiction and the controlled substances he prescribed.
21 Shortly after the initial office visit in July 2012, Respondent asked her if she wanted to "go out or
22 something." LM accepted the invitation and they began a dating relationship. During the course
23 of her interview, LM further stated Respondent wrote her prescriptions at his medical office and
24 at her house. After the first office visit in July 2012, LM did not recall filling out any additional

25 ¹⁹ Amphetamines are a Schedule II controlled substance pursuant to Health and Safety
26 Code section 11055, subdivision (d), and a dangerous drug pursuant to Business and Professions
27 Code section 4022. According to the DEA, amphetamines, such as Adderall®, are considered a
28 drug of abuse. "The effects of amphetamines and methamphetamine are similar to cocaine, but
their onset is slower and their duration is longer." (Drugs of Abuse – A DEA Resource Guide
(2011), at p. 44.)

1 paperwork and did not see Respondent maintain a patient file for her nor did he ever do any
2 additional physical examinations. In regard to illicit drug use, LM stated she witnessed
3 Respondent smoking methamphetamine on at least twenty (20) occasions and marijuana about
4 two to three times a week. LM also stated she had gone with Respondent to obtain
5 methamphetamine from a person named "Steve" (last name unknown) on two occasions. LM
6 stated Respondent was writing prescriptions for "Steve" who ended up going to jail.²⁰

7 **CRIMINAL CHARGES FILED AGAINST RESPONDENT**

8 43. On or about July 11, 2014, a Felony Complaint was filed against Respondent and LM
9 in the matter of *The People of the State of California v. [LM] and Bradley John Schnierow*, San
10 Diego Superior Court Case No. CD257145. Count One charged Respondent with Unlawful
11 Controlled Substance Prescription (oxycodone, hydrocodone, amphetamine and/or alprazolam) in
12 violation of Health and Safety Code section 11153, subdivision (a), a felony. Count Three
13 charged Respondent with Burglary in violation of Penal Code section 459, subdivision (a), a
14 felony.²¹ Count Four charged Respondent with Obtaining Prescription by Fraud/Deceit in
15 violation of Health and Safety Code section 11173, subdivision (a), a felony; Count Nine charged
16 Respondent with Possession of a Controlled Substance (methamphetamine, MDMA and/or
17 amphetamine) in violation of Health and Safety Code section 11377, subdivision (a), a felony;
18 Count Ten charged Respondent with Possession of a Controlled Substance (oxycodone) in
19 violation of Health and Safety Code section 11350, subdivision (a), a felony; Count Eleven
20 charged Respondent with Possession of a Controlled Substance (gamma hydroxybutric acid) in
21 violation of Health and Safety Code section 11350, subdivision (b), a felony; Count Twelve
22 charged Respondent with Possession of a Controlled Substance (ketamine) in violation of Health
23 and Safety Code section 11377, subdivision (b)(2), a misdemeanor; and Count Thirteen charged

24 ²⁰ The DEA cross-referenced Respondent's CURES report which indicated Respondent
25 issued prescriptions for controlled substances to Steve R. An inquiry of law enforcement
26 databases indicated Steve R. was arrested in September 2013 for violations related to the
possession and/or sale of controlled substances and was sentenced to eight months in the county
jail. The booking photo of Steve R. matched the description provided by LM.

27 ²¹ This charge related to Respondent entering Wal-Mart on April 22, 2014, to obtain an
28 illegal prescription for controlled substances as described in Count Four of the felony complaint.

1 Respondent with Possession of a Controlled Substance (alprazolam) in violation of Health and
2 Safety Code section 11375, subdivision (b)(2), a misdemeanor.

3 44. On or about July 11, 2014, arrest warrants were issued for Respondent and LM. LM
4 was arrested on July 14, 2014. Respondent surrendered on July 16, 2014, and was released after
5 posting bail.

6 **RESPONDENT'S VISITS TO THE EMERGENCY ROOM**

7 45. On or about July 12, 2014, Respondent filled a prescription for Hydrocodone 325/5
8 mg (#30) and Oxycodone 15 mg (#20) prescribed by Dr. SD. The DEA conducted a follow up
9 interview with Dr. SD in regard to these two prescriptions. During this interview, Dr. SD
10 informed DEA that Respondent had presented to the Emergency Room (ER) on July 12, 2014, for
11 a cornea abrasion. Dr. SD reported Respondent was wearing scrubs and a Scripps identification
12 badge which identified him as a physician.²² Dr. SD described Respondent's behavior as "odd."
13 Respondent told Dr. SD he had taken a friend's oxycodone for his pain and was requesting his
14 own prescription. Dr. SD, who was unaware of Respondent's sordid history, prescribed
15 hydrocodone and erythromycin and told Respondent to return to the ER if his condition
16 worsened. On July 13, 2014, Respondent returned to the ER at Scripps where he was, once again,
17 wearing scrubs and a Scripps identification badge that identified him as a physician, and received
18 a prescription of oxycodone 15 mg (#20) from Dr. SD.

19 **SUBSEQUENT SEARCH OF RESPONDENT'S CAR AND RESIDENCE**

20 46. On or about September 16, 2014, DEA and Medical Board personnel conducted a
21 search²³ of Respondent's car and residence. In conducting the search of Respondent's car and
22 residence, the DEA located and confiscated additional evidence of illicit drug use and diversion
23 of controlled substances and dangerous drugs. The evidence of illicit drug use located in
24 Respondent's vehicle was a small container with what was visually identified as hashish oil. The

25 ²² Respondent was wearing scrubs and a Scripps identification badge identifying him as a
26 physician despite being evicted from his medical office that he leased from Scripps and despite
his medical license being suspended by the Board on June 20, 2014.

27 ²³ Respondent waived his Fourth Amendment rights at his initial court appearance in the
28 criminal matter which allowed DEA to conduct a search without first obtaining a search warrant.

1 evidence of illicit drug use, possible diversion of controlled substances and other items located
2 and confiscated in Respondent's residence included, but was not limited to, a glass pipe with what
3 was visually identified as hashish residue; five small containers with what was visually identified
4 as a hashish oil substance or residue; a small baggie with miscellaneous pills, some of which were
5 later visually identified as alprazolam (Xanax®); a small baggie with yellow powder that was
6 chemically tested and confirmed to be hydrocodone; a metallic lid and small container with what
7 was visually identified as marijuana; one prescription in Respondent's name from Dr. IR dated
8 August 12, 2012, for Vicodin (#15); and approximately 93 hypodermic needles.

9 47. During the execution of the search warrant, Respondent provided a urine sample.
10 The urine sample tested positive for marijuana metabolite, o-desmethyltramadol,²⁴ tramadol
11 (Ultram®),²⁵ meprobamate (carisprodol metabolite) and alpha hydroxyalprazolam.²⁶

12 **AMENDED CRIMINAL COMPLAINT FILED AGAINST RESPONDENT**

13 48. On or about September 22, 2014, an amended Felony Complaint was filed against
14 Respondent and LM in the matter of *The People of the State of California v. [LM] and Bradley*
15 *John Schnierow*, San Diego Superior Court Case No. CD257145. The amended Felony
16 Complaint added two additional criminal charges²⁷ against Respondent, to wit, Count Twenty
17 Possession of a Controlled Substance (hydrocodone) in violation of Health and Safety Code
18 section 11350, subdivision (a), a felony; and Count Twenty One Possession of a Controlled
19 Substance (alprazolam) in violation of Health and Safety Code section 11357, subdivision (b)(2),
20 a misdemeanor.

21 ²⁴ O-Desmethyltramadol is an opioid analgesic and is the main active metabolite of
22 tramadol.

23 ²⁵ Tramadol (Ultram®) was classified as a Schedule IV controlled substance effective
24 August 18, 2014. It is used to treat moderate to moderately severe pain in adults. According to
25 the DEA, tramadol is subject to diversion and abuse by "narcotic addicts, chronic pain patients,
26 and health professionals." (DEA drug fact sheet for tramadol (July 2014).)

25 ²⁶ Alpha hydroxyalprazolam is an active metabolite of alprazolam (Xanax®) which is a
26 Schedule IV controlled substance pursuant to Health and Safety Code section 11057, subdivision
27 (d), and a dangerous drug pursuant to Business and Professions Code section 4022.

27 ²⁷ The additional criminal counts concerned DEA's discovery of hydrocodone and
28 alprazolam (Xanax®) during the search of Respondent's residence on September 16, 2014.

1 Code section 11375(b)(2), a misdemeanor; Count Twelve charged Respondent with Obtaining a
2 Narcotic by a Forged Prescription on April 22, 2014, in violation of Health and Safety Code
3 section 11368, a felony; Count Thirteen charged Respondent with Possession of a Controlled
4 Substance (methamphetamine, MDMA and/or amphetamine) on May 28, 2014, in violation of
5 Health and Safety Code section 11377(a), a misdemeanor; Count Fourteen charged Respondent
6 with Possession of a Controlled Substance (oxycodone) on May 28, 2014, in violation of Health
7 and Safety Code section 11350(a), a misdemeanor; and Count Fifteen charged Respondent with
8 Possession of a Controlled Substance (gamma hydroxybutyric acid - GHB) on May 28, 2014, in
9 violation of Health and Safety Code section 11350(a), a misdemeanor.

10 **GUILTY PLEA IN CRIMINAL CASE**

11 51. On or about January 27, 2015, Respondent was convicted upon his guilty plea to
12 Count Twelve which charged Respondent with Obtaining a Narcotic by a Forged Prescription on
13 April 22, 2014, in violation of Health and Safety Code section 11368, a felony; and Count
14 Thirteen which charged Respondent with Possession of a Controlled Substance
15 (methamphetamine, MDMA and/or amphetamine) on May 28, 2014, in violation of Health and
16 Safety Code section 11377(a), a misdemeanor. As part of a plea bargain, the remaining criminal
17 counts were dismissed and Respondent was referred to the Proposition 36 / Penal Code section
18 1210 drug treatment program also referred to as the "Drug Court" program.²⁸

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21 ²⁸ Under this program, the defendant is placed on probation and then referred to a
22 Regional Recovery Center to determine if the defendant will be enrolled in a residential or non-
23 residential treatment program. The treatment typically includes, but is not limited to, group
24 therapy, individual therapy, case management, drug testing and other ancillary services as may be
25 required. Periodic court hearings are held to obtain status reports concerning the progress of the
26 defendant. Negative reports will be generated and forwarded to the Probation Department for any
27 defendant who, among other things, stops attending the program; has a positive, missed or
28 adulterated drug test; is delinquent in required fees; violates program rules; or is a safety threat to
the program. Under the Penal Code, "[a]t any time after completion of drug treatment and the
terms of probation, the court shall conduct a hearing, and if the court finds that the defendant
successfully completed drug treatment and substantially complied with the conditions of
probation, including refraining from the use of drugs after the completion of treatment, the
conviction on which the probation was based shall be set aside and the court shall dismiss the
indictment, complaint, or information against the defendant." (Pen. Code § 1210.1 (e)(1).)

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SECOND CAUSE FOR DISCIPLINE

(Use of Dangerous Drugs in a Manner, or to an Extent, as to be Dangerous to Himself, to Another Person, or to the Public)

52. Respondent has further subjected his Physician's and Surgeon's Certificate Number A67780 to disciplinary action under sections 2227 and 2234, as defined by section 2239, subdivision (a), of the Code, in that he has used dangerous drugs to the extent, or in such a manner as to be dangerous or injurious to himself, another person, or the public, as more particularly alleged in paragraphs 21 through 51, above, which are hereby incorporated by reference and realleged as if fully set forth herein.

THIRD CAUSE FOR DISCIPLINE

(Use of Dangerous Drugs to the Extent that Such Use Impairs the Ability to Practice Medicine Safely)

53. Respondent has further subjected his Physician's and Surgeon's Certificate Number A67780 to disciplinary action under sections 2227 and 2234, as defined by section 2239, subdivision (a), of the Code, in that he has used dangerous drugs to the extent that such use impairs his ability to practice medicine safely, as more particularly alleged in paragraphs 21 through 51, above, which are hereby incorporated by reference and realleged as if fully set forth herein.

FOURTH CAUSE FOR DISCIPLINE

(Furnishing Dangerous Drugs Without Conducting an Appropriate Prior Examination and Medical Indication)

54. Respondent has further subjected his Physician's and Surgeon's Certificate Number A67780 to disciplinary action under sections 2227 and 2234, as defined by section 2242, of the Code, in that Respondent prescribed dangerous drugs to LM without an appropriate prior examination and medical indication, as more particularly alleged in paragraphs 21 through 51, above, which are hereby incorporated by reference and realleged as if fully set forth herein.

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1 **FIFTH CAUSE FOR DISCIPLINE**

2 **(Furnishing Drugs To Addict)**

3 55. Respondent has further subjected his Physician's and Surgeon's Certificate Number
4 A67780 to disciplinary action under sections 2227 and 2234, as defined by section 2241 of the
5 Code, in that Respondent prescribed controlled substances and dangerous drugs to LM whom he
6 knew or reasonably should have known was an addict and/or was using or would be using the
7 controlled substances and dangerous drugs for a nonmedical purpose, as more particularly alleged
8 in paragraphs 21 through 51, above, which are hereby incorporated by reference and realleged as
9 if fully set forth herein.

10 **SIXTH CAUSE FOR DISCIPLINE**

11 **(Violation of Statutes Regulating Dangerous Drugs and Controlled Substances)**

12 56. Respondent has further subjected his Physician's and Surgeon's Certificate Number
13 A67780 to disciplinary action under sections 2227 and 2234, as defined by section 2238 of the
14 Code, in that Respondent has violated various statutes regulating dangerous drugs and controlled
15 substances, including, but not limited to, sections 2239, 2241, 2242, 2280 of the Code; and Health
16 and Safety Code section 11153, subdivision (a) [Unlawful Controlled Substance Prescriptions];
17 Health and Safety Code section 11170 [Prescribing Controlled Substances for Self Use]; Health
18 and Safety Code section 11173, subdivision (a) [Obtaining Prescription by Fraud/Deceit]; Health
19 and Safety Code section 11377, subdivision (a) [Possession of Controlled Substance:
20 Methamphetamine, MDMA and/or Amphetamine]; Health and Safety Code section 11350,
21 subdivision (a) [Possession of Controlled Substance: Oxycodone]; Health and Safety Code
22 section 11350, subdivision (b) [Possession of Controlled Substance: Gamma Hydroxybutric Acid
23 (GHB)]; Health and Safety Code section 11377, subdivision (b)(2) [Possession of Controlled
24 Substance: Ketamine]; Health and Safety Code section 11375, subdivision (b)(2) [Possession of
25 Controlled Substance: Alprazolam], Health and Safety Code section 11350, subdivision (a)
26 [Possession of Controlled Substance: Hydrocodone]; and Health and Safety Code section 11368
27 [Obtaining a Narcotic by a Forged Prescription] as more particularly alleged in paragraphs 21
28 through 55, above, and paragraph 61, below, which are hereby incorporated by reference and

1 realleged as if fully set forth herein.

2 **SEVENTH CAUSE FOR DISCIPLINE**

3 **(Conviction of an Offense Substantially Related to the Qualifications, Functions or Duties of**
4 **a Physician and Surgeon)**

5 57. Respondent has further subjected his Physician's and Surgeon's Certificate Number
6 A67780 to disciplinary action under sections 2227 and 2234, as defined by section 2236, of the
7 Code, in that he has been convicted of an offense substantially related to the qualifications,
8 functions, or duties of a physician, as more particularly alleged in paragraphs 21 through 51,
9 above, which are hereby incorporated by reference and realleged as if fully set forth herein.

10 **EIGHTH CAUSE FOR DISCIPLINE**

11 **(Dishonesty or Corruption)**

12 58. Respondent has further subjected his Physician's and Surgeon's Certificate Number
13 A67780 to disciplinary action under sections 2227 and 2234, as defined by section 2234,
14 subdivision (e), of the Code, in that he has engaged in an act or acts of dishonesty or corruption
15 substantially related to the qualifications, functions, or duties of a physician, as more particularly
16 alleged in paragraphs 21 through 51, above, which are hereby incorporated by reference and
17 realleged as if fully set forth herein.

18 **NINTH CAUSE FOR DISCIPLINE**

19 **(Failure to Maintain Adequate and Accurate Medical Records)**

20 59. Respondent has further subjected his Physician's and Surgeon's Certificate Number
21 A67780 to disciplinary action under sections 2227 and 2234, as defined by section 2266, of the
22 Code, in that Respondent failed to maintain adequate and accurate records regarding his care and
23 treatment of LM, as more fully particularly alleged in paragraphs 21 through 51, above, which are
24 incorporated by reference and realleged as if fully set forth herein.

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1 after his medical license was suspended, as more fully particularly alleged in paragraph 45,
2 above, which is incorporated by reference and realleged as if fully set forth herein.

3 **FOURTEENTH CAUSE FOR DISCIPLINE**

4 **(General Unprofessional Conduct)**

5 64. Respondent has further subjected his Physician's and Surgeon's Certificate Number
6 A67780 to disciplinary action under sections 2227 and 2234, as defined by section 2234, of the
7 Code, in that Respondent engaged in conduct which breaches the rules or ethical code of the
8 medical profession, or conduct which is unbecoming to a member in good standing of the medical
9 profession, and which demonstrates an unfitness to practice medicine, as more particularly
10 alleged in paragraphs 21 through 51, above, which are hereby incorporated by reference and
11 realleged as if fully set forth herein.

12 **FIFTEENTH CAUSE FOR DISCIPLINE**

13 **(Practicing Medicine While Suspended)**

14 65. Respondent has further subjected his Physician's and Surgeon's Certificate Number
15 A67780 to disciplinary action under sections 2227 and 2234, as defined by section 2306, of the
16 Code, in that, while his medical license was suspended, respondent engaged in the practice of
17 medicine by representing himself, and/or holding himself out, as a physician, as more particularly
18 alleged in paragraph 45, above, which is hereby incorporated by reference and realleged as if
19 fully set forth herein.

20 **SECTION 822 CAUSE FOR ACTION**

21 **(Mental Illness or Physical Illness Affecting Competency)**

22 66. Respondent's Physician's and Surgeon's Certificate Number A67780 is subject to
23 action under section 822 of the Code in that he suffers from a mental illness, and/or physical
24 illness affecting competency, in that he abuses controlled substances and dangerous drugs, as
25 more particularly alleged in paragraphs 21 through 51, which are hereby incorporated by
26 reference and realleged as if fully set forth herein.

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PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:


1. Revoking or suspending Physician's and Surgeon's Certificate Number A67780, issued to Respondent Bradley John Schnierow, M.D.;

2. Revoking, suspending or denying approval of Respondent Bradley John Schnierow, M.D.'s authority to supervise physician assistants, pursuant to section 3527 of the Code;

3. Ordering Respondent Bradley John Schnierow, M.D. to pay the Medical Board of California, if placed on probation, the costs of probation monitoring; and

4. Taking such other and further action as deemed necessary and proper.

DATED: March 10, 2015


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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