

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

**In the Matter of the Accusation** )  
**Against:** )  
 )  
 )  
**Ronald H. Onkin, M.D,** )  
 )  
**Physician's and Surgeon's** )  
**Certificate No. C 27700** )  
 )  
**Respondent** )  
\_\_\_\_\_ )

**Case No. 800-2014-007056**

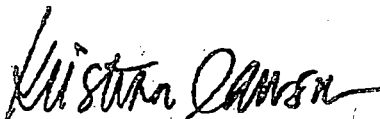
**DECISION**

**The attached Stipulated Settlement 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 November 21, 2018.**

**IT IS SO ORDERED: October 26, 2018.**

**MEDICAL BOARD OF CALIFORNIA**



\_\_\_\_\_  
**Kristina D. Lawson, J.D., Chair  
Panel B**

1 XAVIER BECERRA  
Attorney General of California  
2 E. A. JONES III  
Supervising Deputy Attorney General  
3 CINDY M. LOPEZ  
Deputy Attorney General  
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7 *Attorneys for Complainant*

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

11 In the Matter of the Accusation Against:

12 RONALD H. ONKIN, M.D.  
16055 VENTURA BLVD # 603  
13 ENCINO, CA  
91436-2609

14 Physician's and Surgeon's Certificate No. C  
15 27700

16 Respondent.

Case No. 800-2014-007056

OAH No. 2017090648

**STIPULATED SETTLEMENT AND  
DISCIPLINARY ORDER**

17  
18 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-  
19 entitled proceedings that the following matters are true:

20 PARTIES

21 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board  
22 of California (Board). She brought this action solely in her official capacity and is represented in  
23 this matter by Xavier Becerra, Attorney General of the State of California, by Cindy M. Lopez,  
24 Deputy Attorney General.

25 2. Respondent RONALD H. ONKIN, M.D. (Respondent) is represented in this  
26 proceeding by attorney Raymond J. McMahon, whose address is: 5440 Trabuco Road  
27 Irvine, CA 92620.  
28





1           1.    PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of  
2 the effective date of this Decision, Respondent shall enroll in a professionalism program, that  
3 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1.  
4 Respondent shall participate in and successfully complete that program. Respondent shall  
5 provide any information and documents that the program may deem pertinent. Respondent shall  
6 successfully complete the classroom component of the program not later than six (6) months after  
7 Respondent's initial enrollment, and the longitudinal component of the program not later than the  
8 time specified by the program, but no later than one (1) year after attending the classroom  
9 component. The professionalism program shall be at Respondent's expense and shall be in  
10 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

11           A professionalism program taken after the acts that gave rise to the charges in the  
12 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board  
13 or its designee, be accepted towards the fulfillment of this condition if the program would have  
14 been approved by the Board or its designee had the program been taken after the effective date of  
15 this Decision.

16           Respondent shall submit a certification of successful completion to the Board or its  
17 designee not later than 15 calendar days after successfully completing the program or not later  
18 than 15 calendar days after the effective date of the Decision, whichever is later.

19           2.    PROFESSIONAL BOUNDARIES PROGRAM. Within 60 calendar days from the  
20 effective date of this Decision, Respondent shall enroll in a professional boundaries program  
21 approved in advance by the Board or its designee. Respondent, at the program's discretion, shall  
22 undergo and complete the program's assessment of Respondent's competency, mental health  
23 and/or neuropsychological performance, and at minimum, a 24-hour program of interactive  
24 education and training in the area of boundaries, which takes into account data obtained from the  
25 assessment and from the Decision(s), Accusation(s) and any other information that the Board or  
26 its designee deems relevant. The program shall evaluate Respondent at the end of the training  
27 and the program shall provide any data from the assessment and training as well as the results of  
28 the evaluation to the Board or its designee.

1 Failure to complete the entire program not later than six (6) months after Respondent's  
2 initial enrollment shall constitute a violation of probation unless the Board or its designee agrees  
3 in writing to a later time for completion. Based on Respondent's performance in and evaluations  
4 from the assessment, education, and training, the program shall advise the Board or its designee  
5 of its recommendation(s) for additional education, training, psychotherapy and other measures  
6 necessary to ensure that Respondent can practice medicine safely. Respondent shall comply with  
7 program recommendations. At the completion of the program, Respondent shall submit to a final  
8 evaluation. The program shall provide the results of the evaluation to the Board or its designee.  
9 The professional boundaries program shall be at Respondent's expense and shall be in addition to  
10 the Continuing Medical Education (CME) requirements for renewal of licensure.

11 The program has the authority to determine whether or not Respondent successfully  
12 completed the program.

13 A professional boundaries course taken after the acts that gave rise to the charges in the  
14 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board  
15 or its designee, be accepted towards the fulfillment of this condition if the course would have  
16 been approved by the Board or its designee had the course been taken after the effective date of  
17 this Decision.

18 Respondent shall not treat female patients until he has successfully completed the program  
19 and has been so notified by the Board or its designee in writing.

20 3. PSYCHOTHERAPY. Within 60 calendar days of the effective date of this Decision,  
21 Respondent shall submit to the Board or its designee for prior approval the name and  
22 qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who  
23 has a doctoral degree in psychology and at least five years of postgraduate experience in the  
24 diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall  
25 undergo and continue psychotherapy treatment, including any modifications to the frequency of  
26 psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

27 The psychotherapist shall consider any information provided by the Board or its designee  
28 and any other information the psychotherapist deems relevant and shall furnish a written

1 evaluation report to the Board or its designee. Respondent shall cooperate in providing the  
2 psychotherapist with any information and documents that the psychotherapist may deem  
3 pertinent.

4 Respondent shall have the treating psychotherapist submit quarterly status reports to the  
5 Board or its designee. The Board or its designee may require Respondent to undergo psychiatric  
6 evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of  
7 probation, Respondent is found to be mentally unfit to resume the practice of medicine without  
8 restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the  
9 period of probation shall be extended until the Board determines that Respondent is mentally fit  
10 to resume the practice of medicine without restrictions.

11 Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

12 4. MONITORING - PRACTICE. Within 30 calendar days of the effective date of this  
13 Decision, Respondent shall submit to the Board or its designee for prior approval as a practice  
14 monitor, the name and qualifications of one or more licensed physicians and surgeons whose  
15 licenses are valid and in good standing, and who are preferably American Board of Medical  
16 Specialties (ABMS) certified. A monitor shall have no prior or current business or personal  
17 relationship with Respondent, or other relationship that could reasonably be expected to  
18 compromise the ability of the monitor to render fair and unbiased reports to the Board, including  
19 but not limited to any form of bartering, shall be in Respondent's field of practice, and must agree  
20 to serve as Respondent's monitor. Respondent shall pay all monitoring costs.

21 The Board or its designee shall provide the approved monitor with copies of the Decision(s)  
22 and Accusation(s), and a proposed monitoring plan. Within 15 calendar days of receipt of the  
23 Decision(s), Accusation(s), and proposed monitoring plan, the monitor shall submit a signed  
24 statement that the monitor has read the Decision(s) and Accusation(s), fully understands the role  
25 of a monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor disagrees  
26 with the proposed monitoring plan, the monitor shall submit a revised monitoring plan with the  
27 signed statement for approval by the Board or its designee.

28 Within 60 calendar days of the effective date of this Decision, and continuing throughout

1 probation, Respondent's practice shall be monitored by the approved monitor. Respondent shall  
2 make all records available for immediate inspection and copying on the premises by the monitor  
3 at all times during business hours and shall retain the records for the entire term of probation.

4 If Respondent fails to obtain approval of a monitor within 60 calendar days of the effective  
5 date of this Decision, Respondent shall receive a notification from the Board or its designee to  
6 cease the practice of medicine within three (3) calendar days after being so notified. Respondent  
7 shall cease the practice of medicine until a monitor is approved to provide monitoring  
8 responsibility.

9 The monitor(s) shall submit a quarterly written report to the Board or its designee which  
10 includes an evaluation of Respondent's performance, indicating whether Respondent's practices  
11 are within the standards of practice of medicine, and whether Respondent is practicing medicine  
12 safely, billing appropriately or both. It shall be the sole responsibility of Respondent to ensure  
13 that the monitor submits the quarterly written reports to the Board or its designee within 10  
14 calendar days after the end of the preceding quarter.

15 If the monitor resigns or is no longer available, Respondent shall, within 5 calendar days of  
16 such resignation or unavailability, submit to the Board or its designee, for prior approval, the  
17 name and qualifications of a replacement monitor who will be assuming that responsibility within  
18 15 calendar days. If Respondent fails to obtain approval of a replacement monitor within 60  
19 calendar days of the resignation or unavailability of the monitor, Respondent shall receive a  
20 notification from the Board or its designee to cease the practice of medicine within three (3)  
21 calendar days after being so notified. Respondent shall cease the practice of medicine until a  
22 replacement monitor is approved and assumes monitoring responsibility.

23 In lieu of a monitor, Respondent may participate in a professional enhancement program  
24 approved in advance by the Board or its designee that includes, at minimum, quarterly chart  
25 review, semi-annual practice assessment, and semi-annual review of professional growth and  
26 education. Respondent shall participate in the professional enhancement program at Respondent's  
27 expense during the term of probation.

28 NOTIFICATION. Within seven (7) days of the effective date of this Decision, the



1 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the  
2 Chief Executive Officer at every hospital where privileges or membership are extended to  
3 Respondent, at any other facility where Respondent engages in the practice of medicine,  
4 including all physician and locum tenens registries or other similar agencies, and to the Chief  
5 Executive Officer at every insurance carrier which extends malpractice insurance coverage to  
6 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15  
7 calendar days.

8 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

9 5. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE  
10 NURSES. During probation, Respondent is prohibited from supervising physician assistants and  
11 advanced practice nurses.

12 6. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules  
13 governing the practice of medicine in California and remain in full compliance with any court  
14 ordered criminal probation, payments, and other orders.

15 7. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations  
16 under penalty of perjury on forms provided by the Board, stating whether there has been  
17 compliance with all the conditions of probation.

18 Respondent shall submit quarterly declarations not later than 10 calendar days after the end  
19 of the preceding quarter.

20 8. GENERAL PROBATION REQUIREMENTS:

21 Compliance with Probation Unit

22 Respondent shall comply with the Board's probation unit.

23 Address Changes

24 Respondent shall, at all times, keep the Board informed of Respondent's business and  
25 residence addresses, email address (if available), and telephone number. Changes of such  
26 addresses shall be immediately communicated in writing to the Board or its designee. Under no  
27 circumstances shall a post office box serve as an address of record, except as allowed by Business  
28 and Professions Code section 2021(b).

1           Place of Practice

2           Respondent shall not engage in the practice of medicine in Respondent's or patient's place  
3 of residence, unless the patient resides in a skilled nursing facility or other similar licensed  
4 facility.

5           License Renewal

6           Respondent shall maintain a current and renewed California physician's and surgeon's  
7 license.

8           Travel or Residence Outside California

9           Respondent shall immediately inform the Board or its designee, in writing, of travel to any  
10 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty  
11 (30) calendar days.

12           In the event Respondent should leave the State of California to reside or to practice  
13 ,Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of  
14 departure and return.

15           9.    INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be  
16 available in person upon request for interviews either at Respondent's place of business or at the  
17 probation unit office, with or without prior notice throughout the term of probation.

18           10. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or  
19 its designee in writing within 15 calendar days of any periods of non-practice lasting more than  
20 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is  
21 defined as any period of time Respondent is not practicing medicine as defined in Business and  
22 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct  
23 patient care, clinical activity or teaching, or other activity as approved by the Board. If  
24 Respondent resides in California and is considered to be in non-practice, Respondent shall  
25 comply with all terms and conditions of probation. All time spent in an intensive training  
26 program which has been approved by the Board or its designee shall not be considered non-  
27 practice and does not relieve Respondent from complying with all the terms and conditions of  
28 probation. Practicing medicine in another state of the United States or Federal jurisdiction while

1 on probation with the medical licensing authority of that state or jurisdiction shall not be  
2 considered non-practice. A Board-ordered suspension of practice shall not be considered as a  
3 period of non-practice.

4 In the event Respondent's period of non-practice while on probation exceeds 18 calendar  
5 months, Respondent shall successfully complete the Federation of State Medical Boards's Special  
6 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program  
7 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model  
8 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

9 Respondent's period of non-practice while on probation shall not exceed two (2) years.

10 Periods of non-practice will not apply to the reduction of the probationary term.

11 Periods of non-practice for a Respondent residing outside of California will relieve  
12 Respondent of the responsibility to comply with the probationary terms and conditions with the  
13 exception of this condition and the following terms and conditions of probation: Obey All Laws;  
14 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or  
15 Controlled Substances; and Biological Fluid Testing..

16 11. COMPLETION OF PROBATION. Respondent shall comply with all financial  
17 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the  
18 completion of probation. Upon successful completion of probation, Respondent's certificate shall  
19 be fully restored.

20 12. VIOLATION OF PROBATION. Failure to fully comply with any term or condition  
21 of probation is a violation of probation. If Respondent violates probation in any respect, the  
22 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and  
23 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,  
24 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have  
25 continuing jurisdiction until the matter is final, and the period of probation shall be extended until  
26 the matter is final.

27 13. LICENSE SURRENDER. Following the effective date of this Decision, if  
28 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy

1 the terms and conditions of probation, Respondent may request to surrender his or her license.  
 2 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in  
 3 determining whether or not to grant the request, or to take any other action deemed appropriate  
 4 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent  
 5 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its  
 6 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject  
 7 to the terms and conditions of probation. If Respondent re-applies for a medical license, the  
 8 application shall be treated as a petition for reinstatement of a revoked certificate.

9 14. PROBATION MONITORING COSTS. Respondent shall pay the costs associated  
 10 with probation monitoring each and every year of probation, as designated by the Board, which  
 11 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of  
 12 California and delivered to the Board or its designee no later than January 31 of each calendar  
 13 year.

14  
 15 ACCEPTANCE

16 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully  
 17 discussed it with my attorney, Raymond J. McMahon. I understand the stipulation and the effect  
 18 it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement  
 19 and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the  
 20 Decision and Order of the Medical Board of California.

21  
 22 DATED: 4/16/18   
 23 RONALD H. ONKIN, M.D.  
 Respondent

24 I have read and fully discussed with Respondent RONALD H. ONKIN, M.D. the terms and  
 25 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.

26 I approve its form and content.  
 27 DATED: April 16, 2018   
 28 RAYMOND J. MCMAHON  
 Attorney for Respondent

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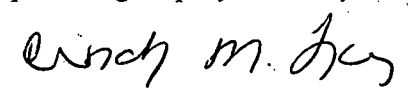
ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

Dated: 7.23.18

Respectfully submitted,

XAVIER BECERRA  
Attorney General of California  
E. A. JONES III  
Supervising Deputy Attorney General



CINDY M. LOPEZ  
Deputy Attorney General  
*Attorneys for Complainant*

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**Exhibit A**

**Accusation No. 800-2014-007056**

1 XAVIER BECERRA  
Attorney General of California  
2 E. A. JONES III  
Supervising Deputy Attorney General  
3 CINDY M. LOPEZ  
Deputy Attorney General  
4 State Bar No. 119988  
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Los Angeles, CA 90013  
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7 *Attorneys for Complainant*

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

11 In the Matter of the Accusation Against:

Case No. 800-2014-007056

12 **RONALD H. ONKIN, M.D.**  
16055 Ventura Boulevard, Suite 603  
13 Encino, CA 91436-2609

**ACCUSATION**

14 Physician's and Surgeon's Certificate No. C 27700,  
15 Respondent.

17 Complainant alleges:

18 **PARTIES**

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

22 2. On or about October 20, 1965, the Medical Board issued Physician's and Surgeon's  
23 Certificate Number C 27700 to Ronald H. Onkin, M.D. (Respondent). The Physician's and  
24 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought  
25 herein and will expire on November 30, 2018, unless renewed.

26 **JURISDICTION**

27 3. This Accusation is brought before the Board, under the authority of the following  
28 laws. All section references are to the Business and Professions Code unless otherwise indicated.

1           4.     Section 2234 of the Code, states:

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

5           “(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the  
6     violation of, or conspiring to violate any provision of this chapter.

7           “(b) Gross negligence.

8           “(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or  
9     omissions. An initial negligent act or omission followed by a separate and distinct departure from  
10    the applicable standard of care shall constitute repeated negligent acts.

11           “(1) An initial negligent diagnosis followed by an act or omission medically  
12    appropriate for that negligent diagnosis of the patient shall constitute a single negligent act.

13           “(2) When the standard of care requires a change in the diagnosis, act, or omission  
14    that constitutes the negligent act described in paragraph (1), including, but not limited to, a  
15    reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs  
16    from the applicable standard of care, each departure constitutes a separate and distinct  
17    breach of the standard of care.

18           “(d) Incompetence.

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

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

22           “(g) The practice of medicine from this state into another state or country without meeting  
23    the legal requirements of that state or country for the practice of medicine. Section 2314 shall not  
24    apply to this subdivision. This subdivision shall become operative upon the implementation of the  
25    proposed registration program described in Section 2052.5.

26           “(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and  
27    participate in an interview by the board. This subdivision shall only apply to a certificate holder  
28    who is the subject of an investigation by the board.”





1 F. On about the fifth visit, Respondent attempted to give the patient a side hug. She was  
2 facing the door and when he tried to hug her, she said "no."

3 G. During their 10th session, as she was leaving, Respondent reached out and grabbed  
4 her breasts and juggled them up and down. The patient was shocked and pushed him away  
5 shouting "inappropriate!" Patient K.H. immediately called her long time psychologist, Dr. G.  
6 and then she filed her complaint with the Medical Board.

7 H. During the subject interview, Respondent explained that his initial diagnosis of K.H.  
8 was major depression but then he changed it to Bipolar II Disorder. He also claimed that he  
9 thought she suffers from Borderline Personality Disorder, however, there is nothing in his notes  
10 about that. He claimed that she made this complaint because of her borderline personality  
11 disorder.

12 Departures from the Standard of Care:

13 I. There is nothing in the records about the borderline personality disorder or how  
14 Respondent even made that assessment, other than her crying about a breakup.

15 J. This is a departure from the standard of care for maintaining accurate and complete  
16 psychiatric records. There is no indication he spoke with the patient's therapist, or administered  
17 psychological testing. Respondent departed from the standard of care when he failed to provide  
18 an appropriate psychiatric evaluation regarding her psychiatric disorder.

19 K. Respondent departed from the standard of care when he failed to outline a treatment  
20 plan for the patient's alleged borderline personality disorder.

21 **SECOND CAUSE FOR DISCIPLINE**

22 **(Gross Negligence)**

23 7. Respondent is subject to disciplinary action under section 2234, subdivision (b), in  
24 that he was grossly negligent in his treatment of two patients. The circumstances are as follows:

25 Patient J.R.:

26 A. Patient J.R. saw Respondent for depression and alcohol abuse. At the same time she  
27 continued to see her regular therapist.

28 B. J.R. had a long history with substance abuse but she wanted to get sober. She wanted

1 to try a few drugs but Respondent prescribed Antabuse. It worked well for her and she has been  
2 sober ever since. He also prescribed Brintellix to treat her depression.

3 C. One day at the end of a session, J.R. initiated a hug, and they concluded many of their  
4 sessions with a hug. In July 2015, she was seeing Respondent every two weeks, but in November  
5 2015 it was just once a month.

6 D. Respondent started asking her about sexual side effects even though she told  
7 Respondent she and her husband were not having sex. Respondent asked if she masturbated and  
8 what she used. He asked if her husband could maintain an erection.

9 E. He told her she "has everything in the right place," and "if I was single I would really  
10 like to go out with you."

11 F. By 2016, Respondent was sliding his hands up and down her back, and on the second  
12 to last visit slid his hands to her butt and on the last visit actually squeezed her butt. Her last visit  
13 was in June 2016.

14 G. During the subject interview, he stated that the patient suffered from depression,  
15 alcoholism and borderline personality disorder. He denied touching her butt and claimed she  
16 initiated the hug at the last session. He never told her of his assessment of borderline personality  
17 disorder.

18 H. Respondent was grossly negligent for inappropriate sexual touching of patient J.R.

19 Patient K.H.:

20 I. The facts and circumstances alleged in paragraph 6 D, F and G, above are  
21 incorporated here as if fully set forth.

22 J. Respondent was grossly negligent for touching her breasts, hugging her and asking  
23 sexually charged questions.

24 **THIRD CAUSE FOR DISCIPLINE**

25 (Sexual Misconduct)

26 8. Respondent is subject to disciplinary action under section 726 in that he committed  
27 acts of sexual misconduct with two patients. The circumstances are as follows:

28 Complainant incorporates by reference the allegations in Paragraph 6, A through F, and

1 paragraph 7, A through J.

2 **PRAYER**

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


5 1. Revoking or suspending Physician's and Surgeon's Certificate Number C 27700,  
6 issued to Ronald H. Onkin, M.D.;

7 2. Revoking, suspending or denying approval of Ronald H. Onkin, M.D.'s authority to  
8 supervise physician assistants, pursuant to section 3527 of the Code and advanced practice  
9 nurses;

10 3. Ordering Ronald H. Onkin, M.D., if placed on probation, to pay the Board the costs  
11 of probation monitoring; and

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

13  
14 DATED: June 29, 2017

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

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