

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

In the Matter of the Accusation Against: )  
)  
RODNEY SIDRANSKY, M.D. ) Case No. 8002015011746  
)  
Physician's and Surgeon's )  
Certificate No. A 78625 )  
)  
Respondent. )  
\_\_\_\_\_ )


**DECISION AND ORDER**

The attached Stipulated Settlement and Disciplinary Order is hereby adopted by the Medical Board of California, Department of Consumer Affairs, State of California, as its Decision in this matter.

This Decision shall become effective at 5:00 p.m. on September 16, 2016.

IT IS SO ORDERED August 17, 2016.

MEDICAL BOARD OF CALIFORNIA

By:   
Howard Krauss, M.D., Chair  
Panel B

1 KAMALA D. HARRIS  
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2 MATTHEW M. DAVIS  
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9  
10 **BEFORE THE**  
**MEDICAL BOARD OF CALIFORNIA**  
11 **DEPARTMENT OF CONSUMER AFFAIRS**  
12 **STATE OF CALIFORNIA**

13 In the Matter of the Accusation Against:

Case No. 800-2015-011746

14 **RODNEY SIDRANSKY, M.D**  
15 **185 Corte Maria Avenue**  
16 **Chula Vista, CA 91910-1937**

OAH No. 2016030904

**STIPULATED SETTLEMENT AND  
DISCIPLINARY ORDER**

17 **Physician's and Surgeon's**  
18 **Certificate No. A 78625**

Respondent.

19  
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. She brought this action solely in her official capacity and is represented in this  
25 matter by Kamala D. Harris, Attorney General of the State of California, by Jason J. Ahn, Deputy  
26 Attorney General.

27 2. Respondent Rodney Sidransky, M.D ("Respondent") is represented in this proceeding  
28 by attorney David M. Balfour Esq., whose address is: 2780 Gateway Road Carlsbad, CA 92009.

1           3.     On or about April 10, 2002, the Medical Board of California issued Physician’s and  
2 Surgeon’s Certificate No. A 78625 to Respondent. The Physician’s and Surgeon’s Certificate  
3 was in full force and effect at all times relevant to the charges brought in Accusation No. 800-  
4 2015-011746, and will expire on July 31, 2017, unless renewed.

5   **JURISDICTION**

6           4.     On February 18, 2016, Accusation No. 800-2015-011746 was filed before the  
7 Medical Board of California (Board), Department of Consumer Affairs, and is currently pending  
8 against Respondent. A true and correct copy of Accusation No. 800-2015-011746 and all other  
9 statutorily required documents were properly served on Respondent on February 20, 2016.  
10 Respondent timely filed his Notice of Defense contesting the Accusation. A true and correct  
11 copy of Accusation No. 800-2015-011746 is attached as Exhibit A and incorporated herein by  
12 reference.

13   **ADVISEMENT AND WAIVERS**

14           5.     Respondent has carefully read, fully discussed with counsel, and fully understands the  
15 charges and allegations in Accusation No. 800-2015-011746. Respondent has also carefully read,  
16 fully discussed with counsel, and fully understands the effects of this Stipulated Settlement and  
17 Disciplinary Order.

18           6.     Respondent is fully aware of his legal rights in this matter, including the right to a  
19 hearing on the charges and allegations in the Accusation No. 800-2015-011746; the right to  
20 confront and cross-examine the witnesses against him; the right to present evidence and to testify  
21 on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses  
22 and the production of documents; the right to reconsideration and court review of an adverse  
23 decision; and all other rights accorded by the California Administrative Procedure Act and other  
24 applicable laws, having been advised of same by his attorney of record, David Balfour, Esq.

25           7.     Having the benefit of counsel, the Respondent voluntarily, knowingly, and  
26 intelligently waives and gives up each and every right set forth above.

27     ///

28     ///

1 **CULPABILITY**

2 8. Respondent admits the truth of each and every charge and allegation in Accusation  
3 No. 800-2015-011746.

4 9. Respondent agrees that if he ever petitions for early termination or modification of  
5 probation, or if an accusation and/or petition to revoke probation is filed against him before the  
6 Medical Board of California, all of the charges and allegations contained in Accusation No. 800-  
7 2015-011746 shall be deemed true, correct, and fully admitted by Respondent for purposes of any  
8 such proceeding, or any other licensing proceeding involving Respondent in the State of  
9 California.

10 10. Respondent agrees that his Physician's and Surgeon's Certificate No. A 78625 is  
11 subject to discipline and he is to be bound by the Board's probationary terms as set forth in the  
12 Disciplinary Order below.

13 **CONTINGENCY**

14 11. This Stipulated Settlement and Disciplinary Order shall be subject to approval of the  
15 Board. The parties agree that this Stipulated Settlement and Disciplinary Order shall be  
16 submitted to the Board for its consideration in the above-entitled matter and, further, that the  
17 Board shall have a reasonable period of time in which to consider and act on this Stipulated  
18 Settlement and Disciplinary Order after receiving it. By signing this stipulation, respondent *fully*  
19 *understands* and agrees that he may not withdraw his agreement or seek to rescind this stipulation  
20 prior to the time the Board considers and acts upon it.

21 12. The parties agree that this Stipulated Settlement and Disciplinary Order shall be null  
22 and void and not binding upon the parties unless approved and adopted by the Board, except for  
23 this paragraph, which shall remain in full force and effect. Respondent fully understands and  
24 agrees that in deciding whether or not to approve and adopt this Stipulated Settlement and  
25 Disciplinary Order, the Board may receive oral and written communications from its staff and/or  
26 the Attorney General's Office. Communications pursuant to this paragraph shall not disqualify  
27 the Board, any member thereof, and/or any other person from future participation in this or any  
28 other matter affecting or involving Respondent. In the event that the Board does not, in its

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

8 **ADDITIONAL PROVISIONS**

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

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

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

18 **DISCIPLINARY ORDER**

19 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 78625 issued  
20 to Respondent Rodney Sidransky, M.D. is revoked. However, the revocation is stayed and  
21 Respondent is placed on probation for seven (7) years on the following terms and conditions:

22 1. **CONTROLLED SUBSTANCES - ABSTAIN FROM USE.** Respondent shall abstain  
23 completely from the personal use or possession of controlled substances as defined in the  
24 California Uniform Controlled Substances Act, dangerous drugs as defined by Business and  
25 Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not  
26 apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide  
27 illness or condition.

28 Within 15 calendar days of receiving any lawfully prescribed medications, Respondent

1 shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone  
2 number; medication name, strength, and quantity; and issuing pharmacy name, address, and  
3 telephone number.

4 If Respondent has a confirmed positive biological fluid test for any substance (whether or  
5 not legally prescribed) and has not reported the use to the Board or its designee, Respondent  
6 shall receive a notification from the Board or its designee to immediately cease the practice of  
7 medicine. The Respondent shall not resume the practice of medicine until final decision on an  
8 accusation and/or a petition to revoke probation. An accusation and/or petition to revoke  
9 probation shall be filed by the Board within 15 days of the notification to cease practice. If the  
10 Respondent requests a hearing on the accusation and/or petition to revoke probation, the Board  
11 shall provide the Respondent with a hearing within 30 days of the request, unless the Respondent  
12 stipulates to a later hearing. A decision shall be received from the Administrative Law Judge or  
13 the Board within 15 days unless good cause can be shown for the delay. The cessation of practice  
14 shall not apply to the reduction of the probationary time period.

15 If the Board does not file an accusation or petition to revoke probation within 15 days of the  
16 issuance of the notification to cease practice or does not provide Respondent with a hearing  
17 within 30 days of a such a request, the notification of cease practice shall be dissolved.

18 2. ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from the  
19 use of products or beverages containing alcohol.

20 If Respondent has a confirmed positive biological fluid test for alcohol, Respondent shall  
21 receive a notification from the Board or its designee to immediately cease the practice of  
22 medicine. The Respondent shall not resume the practice of medicine until final decision on an  
23 accusation and/or a petition to revoke probation. An accusation and/or petition to revoke  
24 probation shall be filed by the Board within 15 days of the notification to cease practice. If the  
25 Respondent requests a hearing on the accusation and/or petition to revoke probation, the Board  
26 shall provide the Respondent with a hearing within 30 days of the request, unless the Respondent  
27 stipulates to a later hearing. A decision shall be received from the Administrative Law Judge or  
28 the Board within 15 days unless good cause can be shown for the delay. The cessation of practice

1 shall not apply to the reduction of the probationary time period.

2 If the Board does not file an accusation or petition to revoke probation within 15 days of the  
3 issuance of the notification to cease practice or does not provide Respondent with a hearing  
4 within 30 days of a such a request, the notification of cease practice shall be dissolved.

5 3. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to  
6 biological fluid testing, at Respondent's expense, upon request of the Board or its designee.  
7 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair  
8 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall  
9 make daily contact with the Board or its designee to determine whether biological fluid testing is  
10 required. Respondent shall be tested on the date of the notification as directed by the Board or its  
11 designee. The Board may order the Respondent to undergo a biological fluid test on any day, at  
12 any time, including weekends and holidays. Except when testing on a specific date as ordered by  
13 the Board or its designee, the scheduling of biological fluid testing shall be done on a random  
14 basis. The cost of biological fluid testing shall be borne by the Respondent.

15 During the first year of probation, Respondent shall be subject to 52 to 104 random tests.  
16 During the second year of probation and for the duration of the probationary term, up to five (5)  
17 years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no  
18 positive biological fluid tests in the previous five (5) consecutive years of probation, may testing  
19 be reduced to one (1) time per month. Nothing precludes the Board from increasing the number  
20 of random tests to the first-year level of frequency for any reason.

21 Prior to practicing medicine, Respondent shall contract with a laboratory or service,  
22 approved in advance by the Board or its designee, that will conduct random, unannounced,  
23 observed, biological fluid testing and meets all the following standards:

24 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry  
25 Association or have completed the training required to serve as a collector for the United States  
26 Department of Transportation.

27 (b) Its specimen collectors conform to the current United States Department of  
28 Transportation Specimen Collection Guidelines.

1 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published  
2 by the United States Department of Transportation without regard to the type of test administered.

3 (d) Its specimen collectors observe the collection of testing specimens.

4 (e) Its laboratories are certified and accredited by the United States Department of Health  
5 and Human Services.

6 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day  
7 of receipt and all specimens collected shall be handled pursuant to chain of custody procedures.  
8 The laboratory shall process and analyze the specimens and provide legally defensible test results  
9 to the Board within seven (7) business days of receipt of the specimen. The Board will be  
10 notified of non-negative results within one (1) business day and will be notified of negative test  
11 results within seven (7) business days.

12 (g) Its testing locations possess all the materials, equipment, and technical expertise  
13 necessary in order to test respondent on any day of the week.

14 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens for  
15 the detection of alcohol and illegal and controlled substances.

16 (i) It maintains testing sites located throughout California.

17 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line  
18 computer database that allows the respondent to check in daily for testing.

19 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff  
20 access to drug test results and compliance reporting information that is available 24 hours a day.

21 (l) It employs or contracts with toxicologists who are licensed physicians and have  
22 knowledge of substance abuse disorders and the appropriate medical training to interpret and  
23 evaluate laboratory biological fluid test results, medical histories, and any other information  
24 relevant to biomedical information.

25 (m) It will not consider a toxicology screen to be negative if a positive result is obtained  
26 while practicing, even if the respondent holds a valid prescription for the substance.

27 Prior to changing testing locations for any reason, including during vacation or other travel,  
28 alternative testing locations must be approved by the Board and meet the requirements above.



1 The contract shall require that the laboratory directly notify the Board or its designee of  
2 non-negative results within one (1) business day and negative test results within seven (7)  
3 business days of the results becoming available. Respondent shall maintain this laboratory or  
4 service contract during the period of probation.

5 A certified copy of any laboratory test result may be received in evidence in any  
6 proceedings between the Board and respondent.

7 If a biological fluid test result indicates Respondent has used, consumed, ingested, or  
8 administered to himself or herself a prohibited substance, the Board shall order Respondent to  
9 cease practice and instruct Respondent to leave any place of work where Respondent is practicing  
10 medicine or providing medical services. The Board shall immediately notify all of Respondent's  
11 employers, supervisors and work monitors, if any, that Respondent may not practice medicine or  
12 provide medical services while the cease-practice order is in effect.

13 A biological fluid test will not be considered negative if a positive result is obtained while  
14 practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited  
15 substance use exists, the Board shall lift the cease-practice order within one (1) business day.

16 After the issuance of a cease-practice order, the Board shall determine whether the positive  
17 biological fluid test is in fact evidence of prohibited substance use by consulting with the  
18 specimen collector and the laboratory, communicating with the Respondent, his treating  
19 physician(s), other health care provider, or group facilitator, as applicable.

20 For purposes of this condition, the terms "biological fluid testing" and "testing" mean the  
21 acquisition and chemical analysis of Respondent's urine, blood, breath, or hair.

22 For purposes of this condition, the term "prohibited substance" means an illegal drug, a  
23 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by  
24 Respondent and approved by the Board, alcohol, or any other substance the Respondent has been  
25 instructed by the Board not to use, consume, ingest, or administer to himself.

26 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited  
27 substance, Respondent has committed a major violation, as defined in Title 16, California Code of  
28 Regulations (CCR) section 1361.52(a), and the Board shall impose any or all of the consequences

1 set forth in CCR section 1361.52(b), in addition to any other terms or conditions the Board  
2 determines are necessary for public protection or to enhance Respondent's rehabilitation.

3 4. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of  
4 the effective date of this Decision, Respondent shall enroll in a professionalism program, that  
5 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.  
6 Respondent shall participate in and successfully complete that program. Respondent shall  
7 provide any information and documents that the program may deem pertinent. Respondent shall  
8 successfully complete the classroom component of the program not later than six (6) months after  
9 Respondent's initial enrollment, and the longitudinal component of the program not later than the  
10 time specified by the program, but no later than one (1) year after attending the classroom  
11 component. The professionalism program shall be at Respondent's expense and shall be in  
12 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

13 A professionalism program 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 program would have  
16 been approved by the Board or its designee had the program been taken after the effective date of  
17 this Decision.

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

21 5. CLINICAL DIAGNOSTIC EVALUATIONS AND REPORTS.

22 The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon  
23 who holds a valid, unrestricted license; has three (3) years of experience in providing evaluations  
24 of physicians and surgeons with substance abuse disorders; and is approved by the Board.

25 The clinical diagnostic evaluation shall be conducted in accordance with acceptable  
26 professional standards for conducting substance abuse clinical diagnostic evaluations.

27 The evaluator shall not have a current or former financial, personal, or business  
28 relationship with the Respondent within the last five (5) years. The evaluator shall provide an

1 objective, unbiased, and independent evaluation.

2 The clinical diagnostic evaluation report shall set forth, in the evaluator's opinion,  
3 whether the Respondent has a substance abuse problem; whether the Respondent is a threat to  
4 himself or others; and recommendations for substance abuse treatment, practice restrictions, or  
5 other recommendations related to the Respondent's rehabilitation and ability to practice safely. If  
6 the evaluator determines during the evaluation process that the Respondent is a threat to himself  
7 or others, the evaluator shall notify the Board within 24 hours of such a determination.

8 In formulating his or her opinion as to whether the Respondent is safe to return to either  
9 part-time or full-time practice and what restrictions or recommendations should be imposed,  
10 including participation in an inpatient or outpatient treatment program, the evaluator shall  
11 consider the following factors:

- 12 a. License type;
- 13 b. Respondent's history;
- 14 c. Documented length of sobriety/time that has elapsed since substance use;
- 15 d. Scope and pattern of substance abuse;
- 16 e. Treatment history;
- 17 f. Medical history;
- 18 g. Current medical condition;
- 19 h. Nature, duration, and severity of substance abuse problem; and
- 20 i. Whether the Respondent is a threat to himself or the public.

21 The cost of an evaluation shall be borne by the Respondent.

22 For all evaluations, a final written report shall be provided to the Board no later than ten  
23 (10) days from the date the evaluator is assigned the matter. If the evaluator requests additional  
24 information or time to complete the evaluation and report, an extension may be granted, but shall  
25 not exceed 30 days from the date the evaluator was originally assigned the matter.

26 Whenever the Board orders the Respondent to undergo a clinical diagnostic evaluation,  
27 the Board shall order the Respondent to cease practice pending the results of the clinical  
28 diagnostic evaluation and review by the Board.

1 While awaiting the results of the clinical diagnostic evaluation, the Respondent shall  
2 undergo random biological fluid testing at least two (2) times per week.

3 The Board shall review the clinical diagnostic evaluation report within five (5) business  
4 days of receipt to determine whether the Respondent is safe to return to either part-time or full-  
5 time practice and what restrictions or recommendations shall be imposed on the Respondent  
6 based on the recommendations made by the evaluator. Respondent shall not be return to practice  
7 until he has at least 30 days of negative biological fluid tests or biological fluid tests indicating  
8 that Respondent has not used, consumed, ingested, or administered to himself a prohibited  
9 substance, as defined in section 1361.51(e).

10 Before determining whether to authorize the return to practice after the issuance of a  
11 cease-practice order or after the imposition of practice restrictions following a clinical diagnostic  
12 evaluation, the Board in conjunction with the evaluator shall ensure that the Respondent meets the  
13 following criteria:

14 (a) A demonstration of sustained compliance with his current treatment or recovery  
15 program, as applicable;

16 (b) A demonstration of the capability to practice medicine safely as evidenced by current  
17 worksite monitor reports, evaluations conducted by licensed health care practitioners, and any  
18 other information relating to the Respondent's substance abuse and recovery therefrom; and

19 (c) Negative biological fluid tests or biological fluid tests indicating that the Respondent  
20 has not used, consumed, ingested, or administered to himself a prohibited substance, as defined in  
21 section 1361.51(e), for at least six (6) months; two (2) positive worksite monitor reports; and  
22 complete compliance with other terms and conditions of probation.

23 6. PSYCHOTHERAPY. Within 60 calendar days of the effective date of this Decision,  
24 the Respondent shall submit to the Board or its designee for prior approval the name and  
25 qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who  
26 has a doctoral degree in psychology and at least five years of postgraduate experience in the  
27 diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall  
28 undergo and continue psychotherapy treatment, including any modifications to the frequency of

1 psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

2 The psychotherapist shall consider any information provided by the Board or its designee  
3 and any other information the psychotherapist deems relevant and shall furnish a written  
4 evaluation report to the Board or its designee. Respondent shall cooperate in providing the  
5 psychotherapist any information and documents that the psychotherapist may deem pertinent.

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

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

14 7. WORKSITE MONITOR. The Respondent shall, within 30 calendar days of the  
15 effective date of this Decision, submit to the Board or its designee for prior approval the name of  
16 a worksite monitor.

17 (A) The worksite monitor shall meet the following criteria to be approved by the Board:

18 1. The worksite monitor shall not have a current or former financial, personal, or  
19 familial relationship with the Respondent, or other relationship that could reasonably be  
20 expected to compromise the ability of the monitor to render impartial and unbiased reports  
21 to the Board. If it is impractical for anyone but the Respondent's employer to serve as the  
22 worksite monitor, this requirement may be waived by the Board; however, under no  
23 circumstances shall the Respondent's worksite monitor be an employee or supervisee of  
24 the Respondent.

25 2. The worksite monitor's scope of practice shall include the scope of practice of  
26 the Respondent being monitored, be another licensed health care professional if no  
27 monitor with like scope of practice is available, or, as approved by the Board, be a person  
28 in a position of authority who is capable of monitoring the Respondent at work.

1           3. If a licensed professional, the worksite monitor shall have an active unrestricted  
2 license with no disciplinary action within the last five (5) years.

3           4. The worksite monitor shall sign an affirmation that he or she has reviewed the  
4 terms and conditions of the Respondent's disciplinary order and agrees to monitor the  
5 Respondent as set forth by the Board.

6           (B) The worksite monitor shall adhere to the following required methods of monitoring  
7 the Respondent:

8           1. Have face-to-face contact with the Respondent in the work environment on as  
9 frequent a basis as determined by the Board, but not less than once per week.

10           2. Interview other staff in the office regarding the Respondent's behavior,  
11 if requested by the Board.

12           3. Review the Respondent's work attendance.

13           (C) Reporting by the worksite monitor to the Board shall comply with the following:

14           1. The worksite monitor shall verbally report any suspected substance abuse to the  
15 Board and the Respondent's employer or supervisor as defined in subsection (c)(2) within  
16 one (1) business day of occurrence. If the suspected substance abuse does not occur  
17 during the Board's normal business hours, the verbal report shall be made to the Board  
18 within one (1) hour of the next business day. A written report that includes the date, time,  
19 and location of the suspected abuse; the Respondent's actions; and any other information  
20 deemed important by the worksite monitor shall be submitted to the Board within 48  
21 hours of the occurrence.

22           2. The worksite monitor shall complete and submit a written report  
23 monthly or as directed by the Board. The report shall include the following:

24           a. The Respondent's name and license number;

25           b. The worksite monitor's name and signature;

26           c. The worksite monitor's license number, if applicable;

27           d. The worksite location(s);

28           e. The dates the Respondent had face-to-face contact with the monitor;

- f. The names of worksite staff interviewed, if applicable;
- g. An attendance report;
- h. Any change in behavior and/or personal habits; and
- i. Any indicators that can lead to suspected substance abuse.

(D) The Respondent shall complete any required consent forms and execute agreements with the approved worksite monitor(s) and the Board authorizing the Board and worksite monitor to exchange information.

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

(F) Worksite monitoring costs shall be borne by the Respondent.

8. SOLO PRACTICE PROHIBITION. Respondent is prohibited from engaging in the solo practice of medicine. Prohibited solo practice includes, but is not limited to, a practice where: 1) Respondent merely shares office space with another physician but is not affiliated for purposes of providing patient care, or 2) Respondent is the sole physician practitioner at that location.

If Respondent fails to establish a practice with another physician or secure employment in an appropriate practice setting within 60 calendar days of the effective date of this Decision, Respondent shall receive a notification from the Board or its designee to cease the practice of medicine within three (3) calendar days after being so notified. The Respondent shall not resume practice until an appropriate practice setting is established.

If, during the course of the probation, the Respondent's practice setting changes and the Respondent is no longer practicing in a setting in compliance with this Decision, the Respondent

1 shall notify the Board or its designee within 5 calendar days of the practice setting change. If  
2 Respondent fails to establish a practice with another physician or secure employment in an  
3 appropriate practice setting within 60 calendar days of the practice setting change, Respondent  
4 shall receive a notification from the Board or its designee to cease the practice of medicine within  
5 three (3) calendar days after being so notified. The Respondent shall not resume practice until an  
6 appropriate practice setting is established.

7 9. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. The following provisions  
8 shall apply:

9 (A) When determining the frequency of group support meetings to be attended, the Board  
10 or the evaluator shall give consideration to the following:

- 11 1. The Respondent's history;
- 12 2. The documented length of sobriety/time that has elapsed since substance use;
- 13 3. The recommendation of the clinical evaluator;
- 14 4. The scope and pattern of use;
- 15 5. The Respondent's treatment history; and
- 16 6. The nature, duration, and severity of substance abuse.

17 (B) The facilitator of a group support meeting shall conform to the following  
18 requirements:

- 19 1. He or she shall have a minimum of three (3) years' experience in the treatment  
20 and rehabilitation of substance abuse, and shall be licensed or certified by the state or nationally  
21 certified organizations.
- 22 2. He or she shall not have a current or former financial, personal, or business relationship  
23 with the Respondent within the last five (5) years. The Respondent's previous participation in a  
24 group support meeting led by the same facilitator does not constitute a current or former financial,  
25 personal, or business relationship.
- 26 3. He or she shall provide to the Board a signed document showing the Respondent's  
27 name, the group name, the date and location of the meeting, the Respondent's attendance, and the  
28 Respondent's level of participation and progress.



1 4. He or she shall report the Respondent's unexcused absence to the Board within 24  
2 hours.

3 (C) Any costs associated with attending and reporting on group support meetings shall be  
4 borne by the Respondent.

5 10. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the  
6 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the  
7 Chief Executive Officer at every hospital where privileges or membership are extended to  
8 Respondent, at any other facility where Respondent engages in the practice of medicine,  
9 including all physician and locum tenens registries or other similar agencies, and to the Chief  
10 Executive Officer at every insurance carrier which extends malpractice insurance coverage to  
11 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15  
12 calendar days.

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

14 11. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. If the Respondent  
15 whose license is on probation has an employer or supervisor, the Respondent shall provide to the  
16 Board the names, physical addresses, mailing addresses, and telephone numbers of all employers  
17 and supervisors and shall give specific, written consent for the Board, the worksite monitor, and  
18 his or her employers and supervisors to communicate regarding the Respondent's work status,  
19 performance, and monitoring. For purposes of this section, "supervisors" shall include the Chief  
20 of Staff and the Health or Well Being Committee Chair, or equivalent, if applicable, when the  
21 Respondent has medical staff privileges.

22 12. SUPERVISION OF PHYSICIAN ASSISTANTS. During probation, Respondent is  
23 prohibited from supervising physician assistants.

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

27 14. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations  
28 under penalty of perjury on forms provided by the Board, stating whether there has been

1 compliance with all the conditions of probation.

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

4 15. GENERAL PROBATION REQUIREMENTS.

5 Compliance with Probation Unit

6 Respondent shall comply with the Board's probation unit and all terms and conditions of  
7 this Decision.

8 Address Changes

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

14 Place of Practice

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

18 License Renewal

19 Respondent shall maintain a current and renewed California physician's and surgeon's  
20 license.

21 Travel or Residence Outside California

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

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

28 16. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be

1 available in person upon request for interviews either at Respondent's place of business or at the  
2 probation unit office, with or without prior notice throughout the term of probation.

3 17. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or  
4 its designee in writing within 15 calendar days of any periods of non-practice lasting more than  
5 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is  
6 defined as any period of time Respondent is not practicing medicine in California as defined in  
7 Business and Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month  
8 in direct patient care, clinical activity or teaching, or other activity as approved by the Board. All  
9 time spent in an intensive training program which has been approved by the Board or its designee  
10 shall not be considered non-practice. Practicing medicine in another state of the United States or  
11 Federal jurisdiction while on probation with the medical licensing authority of that state or  
12 jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall  
13 not be considered as a period of non-practice.

14 In the event Respondent's period of non-practice while on probation exceeds 18 calendar  
15 months, Respondent shall successfully complete a clinical training program that meets the criteria  
16 of Condition 18 of the current version of the Board's "Manual of Model Disciplinary Orders and  
17 Disciplinary Guidelines" prior to resuming the practice of medicine.

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

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

20 Periods of non-practice will relieve Respondent of the responsibility to comply with the  
21 probationary terms and conditions with the exception of this condition and the following terms  
22 and conditions of probation: Obey All Laws; and General Probation Requirements.

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

27 19. VIOLATION OF PROBATION. Failure to fully comply with any term or condition  
28 of probation is a violation of probation. If Respondent violates probation in any respect, the

1 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and  
2 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,  
3 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have  
4 continuing jurisdiction until the matter is final, and the period of probation shall be extended until  
5 the matter is final.

6 (a) If the Respondent does any of the following, he shall be deemed to have committed a  
7 major violation of his probation:

8 (1) Fails to undergo a required clinical diagnostic evaluation;

9 (2) Commits multiple minor violations of probation conditions and terms;

10 (3) Treats a patient or patients while under the influence of a prohibited substance;

11 (4) Engage in any drug or alcohol related act that is a violation of state or federal law or  
12 regulation;

13 (5) Fails to undergo biological fluid testing when ordered;

14 (6) Uses, consumes, ingests, or administers to himself a prohibited substance;

15 (7) Knowingly uses, makes, alters, or possesses any object or product in such a way as to  
16 defraud or attempt to defraud a biological fluid test designed to detect the presence of a prohibited  
17 substance; or

18 (8) Fails to comply with any term or condition of his or her probation that impairs public  
19 safety.

20 (b) If the Respondent commits a major violation, the Board will take one or more of the  
21 following actions:

22 (1) Issue an immediate cease-practice order and order the Respondent to undergo a  
23 clinical diagnostic evaluation at the expense of the Respondent. Any order issued by the Board  
24 pursuant to this subsection shall state that the Respondent must test negative for at least a month  
25 of continuous biological fluid testing before being allowed to resume practice.

26 (2) Increase the frequency of biological fluid testing.

27 (3) Refer the Respondent for further disciplinary action, such as suspension, revocation, or  
28 other action as determined by the Board.

1 (c) If the Respondent does any of the following, he shall be deemed to have committed a  
2 minor violation of his probation:

3 (1) Fails to submit required documentation to the Board in a timely manner;

4 (2) Has an unexcused absence at a required meeting;

5 (3) Fails to contact a worksite monitor as required; or

6 (4) Fails to comply with any term or condition of his probation that does not impair public  
7 safety.

8 (d) If the Respondent commits a minor violation, the Board will take one or more of the  
9 following actions:

10 (1) Issue a cease-practice order;

11 (2) Order practice limitations;

12 (3) Order or increase supervision of the Respondent;

13 (4) Order increased documentation;

14 (5) Issue a citation and fine, or a warning letter;

15 (6) Order the Respondent to undergo a clinical diagnostic evaluation at the expense of the  
16 Respondent;

17 (7) Take any other action as determined by the Board.

18 (e) Nothing in this section shall be considered a limitation on the Board's authority to  
19 revoke the probation of the Respondent who has violated a term or condition of that probation.

20 20. LICENSE SURRENDER. Following the effective date of this Decision, if  
21 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy  
22 the terms and conditions of probation, Respondent may request to surrender his or her license.  
23 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in  
24 determining whether or not to grant the request, or to take any other action deemed appropriate  
25 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent  
26 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its  
27 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject  
28 to the terms and conditions of probation. If Respondent re-applies for a medical license, the

1 application shall be treated as a petition for reinstatement of a revoked certificate.

2 21. PROBATION MONITORING COSTS. Respondent shall pay the costs associated  
3 with probation monitoring each and every year of probation, as designated by the Board, which  
4 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of  
5 California and delivered to the Board or its designee no later than January 31 of each calendar  
6 year.

7 ACCEPTANCE


8 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully  
9 discussed it with my attorney, David M. Balfour Esq. I fully understand the stipulation and the  
10 effect it will have on my Physician's and Surgeon's Certificate No. A 78625. I enter into this  
11 Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree  
12 to be bound by the Decision and Order of the Medical Board of California.

13  
14 DATED: 6/16/2016

  
15 RODNEY SIDRANSKY, M.D.  
16 Respondent

17 I have read and fully discussed with Respondent Rodney Sidransky, M.D the terms and  
18 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.  
19 I approve its form and content.

20  
21 DATED: 6/16/2016

  
22 DAVID M. BALFOUR ESQ.  
23 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: June 17, 2016

Respectfully submitted,

KAMALA D. HARRIS  
Attorney General of California  
MATTHEW M. DAVIS  
Supervising Deputy Attorney General



JASON J. AHN  
Deputy Attorney General  
*Attorneys for Complainant*

**Exhibit A**

**Accusation No. 800-2015-011746**



FILED  
STATE OF CALIFORNIA  
MEDICAL BOARD OF CALIFORNIA  
SACRAMENTO February 18, 20 16  
BY R. Fridaus ANALYST

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2 ALEXANDRA M. ALVAREZ  
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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 Accusation Against:

Case No. 800-2015-011746

14 **Rodney Sidransky, M.D.**  
15 **185 Corte Maria Avenue**  
**Chula Vista, CA 91910-1937**

**ACCUSATION**

16 **Physician's and Surgeon's Certificate**  
17 **No. A78625,**

18 Respondent.

19 Complainant alleges:

20 **PARTIES**

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

24 2. On or about April 10, 2002, the Medical Board of California issued Physician's and  
25 Surgeon's Certificate No. A78625 to Rodney Sidransky, M.D. (respondent). The Physician's and  
26 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought  
27 herein and will expire on July 31, 2017, unless renewed.

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1           3.     On or about February 1, 2016, an Interim Order of Suspension was issued against  
2 respondent's Physician's and Surgeon's Certificate No. A78625 which immediately prohibited  
3 him from practicing medicine in the State of California. Respondent's Physician's and Surgeon's  
4 Certificate No. A78625 remains suspended, as of the date of the filing of this Accusation.

5   JURISDICTION

6           4.     This Accusation is brought before the Medical Board of California (Board),  
7 Department of Consumer Affairs, under the authority of the following laws. All section  
8 references are to the Business and Professions Code (Code) unless otherwise indicated.

9           5.     Section 2227 of the Code provides that a licensee who is found guilty under the  
10 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed  
11 one year, placed on probation and required to pay the costs of probation monitoring, be publicly  
12 reprimanded, or have such other action taken in relation to discipline as the board deems proper.

13           6.     Section 2234 of the Code states, in pertinent part:

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

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

19                     “...”

20           7.     Section 2238 of the Code states:

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

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8. Section 2239 of the Code states, in pertinent part:

“(a) The use or prescribing for or administering to himself or herself, of any controlled substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to any other person or to the public, or to the extent that such use impairs the ability of the licensee to practice medicine safely or more than one misdemeanor or any felony involving the use, consumption or self-administration of any of the controlled substances referred to in this section, or any combination thereof, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of such unprofessional conduct.

“...”

9. Section 11170 of the Health and Safety Code states:

“No person shall prescribe, administer, or furnish a controlled substance for himself.”

10. Section 822 of the Code states:

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

“(a) Revoking the licentiate’s certificate or license.

“(b) Suspending the licentiate’s right to practice.

“(c) Placing the licentiate on probation.

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

“...”

///

///

1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Excessive Use of Alcohol or Drugs)**

3 11. Respondent has subjected his Physician's and Surgeon's Certificate No. A78625 to  
4 disciplinary action under sections 2227 and 2234, as defined by 2239, subdivision (a), of the  
5 Code, in that he used controlled substances or dangerous drugs to the extent, or in such a manner  
6 as to be dangerous or injurious to himself, or to any other person or to the public.

7 (a) Respondent has a long history of alcoholism and substance abuse. He started  
8 drinking alcohol at the age of thirteen or fourteen. For the next forty-four (44) years, he went  
9 through periods of alleged sobriety, followed by "controlled drinking," and then a "downward  
10 spiral" to a bottle of vodka per day, a seizure, vomiting blood, and two trips to the emergency  
11 room. Respondent's self-reported substance use includes opiates/analgesics for twenty-two years,  
12 sedatives, hypnotics or tranquilizers for five years, cocaine for three years, and cannabis  
13 (marijuana) for three years. On or about March 4, 2013, and again on or about April 3, 2013,  
14 respondent prescribed to himself, Carisoprodol,<sup>1</sup> a schedule IV controlled substance.

15 (b) On or about March 18, 2014, respondent was admitted to the hospital emergency  
16 room, after having a seizure while in bed and then falling off and striking his head. The attending  
17 physician at the emergency room, M.C., M.D., noted in his chart note that respondent "drinks a  
18 heavy amount of alcohol per day, perhaps one bottle of vodka" and noted, among other things,  
19 that respondent had a seizure with some alcohol withdrawal, abrasion to the right eyebrow, and  
20 suffered from alcoholism. Dr. M.C. instructed respondent, among other things, to stop drinking  
21 alcohol in excess and recommended that he follow up with a local Alcoholics Anonymous  
22 support group to address his alcoholism.

23 (c) On or about February 3, 2015, respondent was admitted to the hospital emergency  
24 room (ER) with complaints of nausea, vomiting blood (due to alcohol gastritis<sup>2</sup>), anemia, and  
25 alcohol dependence. He was administered the alcohol withdrawal protocols.

26 <sup>1</sup> Carisoprodol is a schedule IV controlled substance pursuant to Title 21 of the Code of Federal  
27 Regulations, section 812, and a dangerous drug pursuant to Business and Professions Code section 4022.

28 <sup>2</sup> Gastritis is an inflammation, irritation, or erosion of the lining of the stomach.

1 (d) A.V., M.D., a primary care physician, treated respondent after he was admitted from  
2 the ER on or about February 3, 2015 until his discharge on or about February 8, 2015. During  
3 this treatment, respondent's blood work showed levels of benzodiazepine<sup>3</sup> and THC (marijuana<sup>4</sup>).  
4 During his hospital stay, respondent reported drinking six (6) glasses of vodka per day and daily  
5 use of oxycodone.<sup>5</sup> Respondent reported that he stopped drinking alcohol two days prior to being  
6 admitted to ER due to vomiting blood and alcoholic gastritis. During the hospital stay,  
7 respondent's wife was present and reported respondent had a history of stumbling and falling at  
8 home while intoxicated. Dr. A.V. observed that respondent had facial lacerations and scratches.

9 (e) Between on or about February 5, 2015 until on or about March 3, 2015, respondent  
10 was admitted to A.C.R., a twenty-eight day, residential treatment program for alcoholism and  
11 substance abuse. During admission, respondent's belongings were searched, and  
12 multiple controlled substances were found, including Xanax,<sup>6</sup> Suboxone,<sup>7</sup> Klonopin,<sup>8</sup> and  
13 Oxycodone.<sup>9</sup>

14 <sup>3</sup> Benzodiazepine is a Schedule IV controlled substance pursuant to Health and Safety Code section  
15 11057, subdivision (d), and Title 21 of the Code of Federal Regulations, section 812, and a dangerous drug  
pursuant to Business and Professions Code section 4022.

16 <sup>4</sup> Marijuana is a mind altering (psychoactive) drug, a Schedule I controlled substance pursuant to  
17 Health and Safety Code section 11054, subdivision (d)(13), and Title 21 of the Code of Federal  
18 Regulations, section 812, and a dangerous drug pursuant to Business and Professions Code section 4022.  
However, respondent has a medical marijuana recommendation card.

19 <sup>5</sup> Oxycodone is a Schedule II controlled substance pursuant to Health and Safety Code section  
20 11055, subdivision (b), and Title 21 of the Code of Federal Regulations, section 812, and a dangerous drug  
pursuant to Business and Professions Code section 4022.

21 <sup>6</sup> Xanax is a brand name for Alprazolam, a schedule IV controlled substance pursuant to Health and  
22 Safety Code section 11057, subdivision (d), and Title 21 of the Code of Federal Regulations, section 812,  
and a dangerous drug pursuant to Business and Professions Code section 4022.

23 <sup>7</sup> Suboxone is a brand name for buprenorphine and naloxone and is a Schedule III controlled  
24 substance pursuant to Health and Safety Code section 11056, subdivision (e), and Title 21 of the Code of  
Federal Regulations, section 812, and a dangerous drug pursuant to Business and Professions Code section  
4022.

25 <sup>8</sup> Klonopin, also known as Clonazepam, is a Schedule IV controlled substance pursuant to Health  
26 and Safety Code section 11057, subdivision (d), and Title 21 of the Code of Federal Regulations, section  
812, and a dangerous drug pursuant to Business and Professions Code section 4022.

27 <sup>9</sup> Oxycodone is a Schedule II controlled substance pursuant to Health and Safety Code section  
28 11055, subdivision (b), and Title 21 of the Code of Federal Regulations, section 812, and a dangerous drug  
(continued...)

1 (f) On or about June 2, 2015, investigators from California Department of Consumer  
2 Affairs, Division of Investigations, made an unannounced visit at respondent's house. During this  
3 visit, respondent's wife, Y.S., partially opened the door. There was an odor of marijuana  
4 emanating from within the house. Y.S. stated that respondent was not home and when  
5 investigators asked where respondent was, Y.S. stated he was at an Alcoholics Anonymous (AA)  
6 retreat in Ensenada, Mexico, "for two more days." Y.S. told the investigators that respondent has  
7 not practiced medicine since his release from the hospital in January 2015 and that he has been  
8 "clean and sober" ever since. Later on the same day, investigators called respondent's phone  
9 number and he answered the phone. During this conversation respondent's speech was deliberate  
10 and slurred, leading the investigators to believe that respondent was under the influence of alcohol  
11 or a narcotic. Respondent denied being out of the country, as his wife previously claimed earlier  
12 in the day. Respondent later admitted that his wife had lied about his whereabouts.

13 (g) On or about September 15, 2015, two urine samples were taken from respondent for  
14 drug testing. Both tests were positive for presence of Alprazolam<sup>10</sup> and THC (marijuana).

15 **SECOND CAUSE FOR DISCIPLINE**

16 **(Self-Prescription of Controlled Substances)**

17 12. Respondent has further subjected his Physician's and Surgeon's Certificate No.  
18 A78625 to disciplinary action under sections 2227, 2234, and 2238, as defined by 2239,  
19 subdivision (a), of the Code, and under Health and Safety Code section 11170 in that he  
20 prescribed a controlled substance to himself on two separate occasions, as more particularly  
21 alleged in paragraph 11 above, which is hereby incorporated by reference and realleged as if fully  
22 set forth herein.

23 ///

24 (...continued)  
25 pursuant to Business and Professions Code section 4022.

26 <sup>10</sup> Alprazolam is a schedule IV controlled substance pursuant to Health and Safety Code section  
27 11057, subdivision (d), and Title 21 of the Code of Federal Regulations, section 812, and a dangerous drug  
pursuant to Business and Professions Code section 4022.

28

**SECTION 822 CAUSE FOR ACTION**

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

13. Respondent's Physician's and Surgeon's Certificate No. A78625 is subject to action under section 822 of the Code in that he suffers from a mental and/or physical illness affecting competency as more particularly alleged in paragraphs 11 and 12 above, which are hereby incorporated by reference and realleged as if fully set forth herein.

14. On or about September 15, 2015, respondent appeared before a Department of Consumer Affairs, Health Quality Investigation Unit (HQIU) investigator, for a subject interview. At the end of the interview, respondent voluntarily agreed to submit to a mental and/or physical evaluation pursuant to section 820 of the Code. Dr. S.O. evaluated respondent. On or about November 2, 2015, Dr. S.O. issued his expert report and found that respondent suffers from mental illnesses that impact his ability to engage in the practice of medicine.

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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 No. A78625, issued to respondent Rodney Sidransky, M.D.;
2. Revoking, suspending or denying approval of respondent Rodney Sidransky, M.D.'s authority to supervise physician assistants, pursuant to section 3527 of the Code;
3. Taking action as authorized by section 822 of the Code, as the Board, in its discretion, deems proper and necessary;
4. Ordering respondent Rodney Sidransky, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and
5. Taking such other and further action as deemed necessary and proper.

DATED: February 18, 2016

  
KIMBERLY KIRCHMEYER  
Executive Director  
Medical Board of California  
State of California  
*Complainant*