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

In the Matter of the First Amended Accusation
Against:
JAMES MATTHEW CROWLEY RYAN, M.D.
10339 Hitching Post Way
Santee, CA 92071-1657
Physician's and Surgeon's Certificate
No. A 136356,

Respondent.

Case No. 800-2016-022096
FIRST AMENDED ACCUSATION

Complainant alleges:

PARTIES

1. Kimberly Kirchmeyer (complainant) brings this First Amended Accusation solely in her official capacity as the Executive Director of the Medical Board of California (Board).
2. On or about May 23, 2015, the Board issued Physician's and Surgeon's Certificate No. A 136356 to James Matthew Crowley Ryan, M.D. (respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and has expired on January 31, 2017.

JURISDICTION

1
2 3. This First Amended Accusation, which supersedes the Accusation filed on December
3 11, 2018, in the above-entitled matter, is brought before the Board, under the authority of the
4 following laws. All section references are to the Business and Professions Code (Code) unless
5 otherwise indicated.

6 4. Section 118 of the Code states, in pertinent part:

7 ...

8 “(b) The suspension, expiration, or forfeiture by operation of law of a license
9 issued by a board in the department, or its suspension, forfeiture, or cancellation by
10 order of the board or by order of a court of law, or its surrender without the written
11 consent of the board, shall not, during any period in which it may be renewed,
restored, reissued, or reinstated, deprive the board of its authority to institute or
continue a disciplinary proceeding against the licensee upon any ground provided by
law or to enter an order suspending or revoking the license or otherwise taking
disciplinary action against the licensee on any such ground.

12 “...”

13 5. Section 141 of the Code states, in pertinent part:

14 (a) For any licensee holding a license issued by a board under the jurisdiction of
15 the department, a disciplinary action taken by another state, by any agency of the
16 federal government, or by another country for any act substantially related to the
17 practice regulated by the California license, may be a ground for disciplinary action
by the respective state licensing board. A certified copy of the record of the
disciplinary action taken against the licensee by another state, an agency of the
federal government, or another country shall be conclusive evidence of the events
related therein.

18 (b) Nothing in this section shall preclude a board from applying a specific
19 statutory provision in the licensing act administered by that board that provides for
20 discipline based upon a disciplinary action taken against the licensee by another state,
an agency of the federal government, or another country.

21 6. Section 2227 of the Code states, in pertinent part:

22 (a) A licensee whose matter has been heard by an administrative law judge of
23 the Medical Quality Hearing Panel as designated in Section 11371 of the Government
24 Code, or whose default has been entered, and who is found guilty, or who has entered
into a stipulation for disciplinary action with the board, may, in accordance with the
provisions of this chapter:

25 (1) Have his or her license revoked upon order of the board.

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1 7. Section 2228 of the Code states, in pertinent part:

2 The authority of the board or the California Board of Podiatric Medicine to
3 discipline a licensee by placing him or her on probation includes, but is not limited to,
4 the following:

5 ...

6 (c) Restricting or limiting the extent, scope, or type of practice of the licensee,
7 including requiring notice to applicable patients that the licensee is unable to perform
8 the indicated treatment, where appropriate.

9

10 8. Section 2234 of the Code, states, in pertinent part:

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

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

16 (b) Gross negligence.

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

21 ...

22 9. Section 726 of the Code states, in pertinent part:

23 (a) The commission of any act of sexual abuse, misconduct, or relations with a
24 patient, client, or customer constitutes unprofessional conduct and grounds for
25 disciplinary action for any person licensed under this division or under any initiative
26 act referred to in this division.

27

28 10. Section 2242 of the Code states, in pertinent part:

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

....

11. Section 2305 of the Code states, in pertinent part:

The revocation, suspension, or other discipline, restriction, or limitation
imposed by another state upon a license or certificate to practice medicine issued by
that state, or the revocation, suspension, or restriction of the authority to practice
medicine by any agency of the federal government, that would have been grounds for
discipline in California of a licensee under this chapter, shall constitute grounds for
disciplinary action for unprofessional conduct against the licensee in this state.

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1 12. Section 2266 of the Code states:

2 The failure of a physician and surgeon to maintain adequate and accurate
3 records relating to the provision of services to their patients constitutes
4 unprofessional conduct.

5 13. Section 820 of the Code states:

6 Whenever it appears that any person holding a license, certificate or
7 permit under this division or under any initiative act referred to in this division may
8 be unable to practice his or her profession safely because the licentiate's ability to
9 practice is impaired due to mental illness, or physical illness affecting competency,
10 the licensing agency may order the licentiate to be examined by one or more
11 physicians and surgeons or psychologists designated by the agency. The report of
12 the examiners shall be made available to the licentiate and may be received as direct
13 evidence in proceedings conducted pursuant to Section 822.

14 14. Section 821 of the Code states:

15 The licentiate's failure to comply with an order issued under Section 820
16 shall constitute grounds for the suspension or revocation of the licentiate's
17 certificate or license.

18 15. Section 2228.1 of the Code states, in pertinent part:

19 (a) On and after July 1, 2019, except as otherwise provided in subdivision (c),
20 the board shall require a licensee to provide a separate disclosure that includes the
21 licensee's probation status, the length of the probation, the probation end date, all
22 practice restrictions placed on the licensee by the board, the board's telephone
23 number, and an explanation of how the patient can find further information on the
24 licensee's probation on the licensee's profile page on the board's online license
25 information Internet Web site, to a patient or the patient's guardian or health care
26 surrogate before the patient's first visit following the probationary order while the
27 licensee is on probation pursuant to a probationary order made on and after July 1,
28 2019, in any of the following circumstances:

(1) A final adjudication by the board following an administrative hearing or
admitted findings or prima facie showing in a stipulated settlement establishing any
of the following:

(A) The commission of any act of sexual abuse, misconduct, or relations
with a patient or client as defined in Section 726 or 729.

(B) Drug or alcohol abuse directly resulting in harm to patients or the extent
that such use impairs the ability of the licensee to practice safely.

(C) Criminal conviction directly involving harm to patient health.

(D) Inappropriate prescribing resulting in harm to patients and a
probationary period of five years or more.

(2) An accusation or statement of issues alleged that the licensee committed
any of the acts described in subparagraphs (A) to (D), inclusive, of paragraph (1), and
a stipulated settlement based upon a nolo contendere or other similar compromise that
does not include any prima facie showing or admission of guilt or fact but does
include an express acknowledgment that the disclosure requirements of this section
would serve to protect the public interest.

1 (b) A licensee required to provide a disclosure pursuant to subdivision (a) shall
2 obtain from the patient, or the patient's guardian or health care surrogate, a separate,
3 signed copy of that disclosure.

4 (c) A licensee shall not be required to provide a disclosure pursuant to
5 subdivision (a) if any of the following applies:

6 (1) The patient is unconscious or otherwise unable to comprehend the
7 disclosure and sign the copy of the disclosure pursuant to subdivision (b) and a
8 guardian or health care surrogate is unavailable to comprehend the disclosure and
9 sign the copy.

10 (2) The visit occurs in an emergency room or an urgent care facility or the
11 visit is unscheduled, including consultations in inpatient facilities.

12 (3) The licensee who will be treating the patient during the visit is not
13 known to the patient until immediately prior to the start of the visit.

14 (4) The licensee does not have a direct treatment relationship with the patient.

15 (d) On and after July 1, 2019, the board shall provide the following
16 information, with respect to licensees on probation and licensees practicing under
17 probationary licenses, in plain view on the licensee's profile page on the board's
18 online license information Internet Web site.

19 (1) For probation imposed pursuant to a stipulated settlement, the causes
20 alleged in the operative accusation along with a designation identifying those causes
21 by which the licensee has expressly admitted guilt and a statement that acceptance
22 of the settlement is not an admission of guilt.

23 (2) For probation imposed by an adjudicated decision of the board, the
24 causes for probation stated in the final probationary order.

25 (3) For a licensee granted a probationary license, the causes by which the
26 probationary license was imposed.

27 (4) The length of the probation and end date.

28 (5) All practice restrictions placed on the license by the board.

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1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Sexual Abuse, Misconduct, or Relations with a Patient)**

3 16. Respondent has subjected his Physician's and Surgeon's Certificate No. A 136356 to
4 disciplinary action under sections 2227 and 726, as defined by 726, subdivision (a), of the Code,
5 in that he engaged in an act of sexual contact with Patient A, as more particularly alleged
6 hereinafter:

7 **Patient A**¹

8 17. On or about March 2, 2016, Patient A had her first psychiatric appointment with
9 respondent at the Achieve Medical Center which is a medical group made up of multiple
10 physicians. During her appointment, they discussed her diagnosis, medication, and her marital
11 issues. At the end of the visit, respondent asked Patient A if she was the patient of another
12 physician in the group. When she told him that she did not have an assigned physician, he
13 remarked he would be keeping her all to himself. He then gave Patient A his private cell phone
14 number and asked her to come back in one week.

15 18. On or about March 9, 2016, Patient A had a follow up appointment with respondent
16 regarding her medication. During her appointment, Patient A and respondent discussed her
17 marriage problems. Respondent then voluntarily shared with her details about his personal
18 marriage problems and his personal issues in raising his daughter. When Patient A confessed to
19 him about an extramarital affair she had, respondent told her that she should have more affairs.

20 19. Towards the end of the session, respondent told Patient A that she would be snatched
21 up in no time, that she has a beautiful smile, and that she needed to leave her husband. When
22 Patient A was leaving, respondent gave her a tight hug. This visit lasted for about an hour.

23 20. On or about March 10, 2016, Patient A sent respondent a text message to ask if she
24 could take some Ativan.² Respondent asked Patient A to give him a call. When she called, he

25 ¹ The patients referenced in this document are designated as "Patient A," "Patient B," and
26 "Patient C," in order to protect their privacy.

27 ² Ativan is a brand name for Lorazepam, is a Schedule IV controlled substance pursuant to
28 Health and Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to
Business and Professions Code section 4022. It belongs to a group of drugs called
benzodiazepines.

1 instead talked about her leaving her husband and how her husband was the cause of her issues.
2 This phone call lasted about twenty-four (24) minutes.

3 21. Between March 11 and March 14, 2016, respondent and Patient A exchanged text
4 messages. In one text message, dated March 14, 2016, respondent wrote her the following:
5 "Sorry... just saw this... I'll prescribe a bottle of happiness...what flavor would you like? ;)."

6 22. On or about March 16, 2016, Patient A went to her third appointment with
7 respondent. He began the session by telling Patient A that her husband had called the office to
8 complain about him being inappropriate. Respondent then talked about her leaving her husband.
9 Respondent told her what a beautiful person she is and then asked her if he could hold her hand.

10 23. When she replied, "Yes," respondent held her hand, leaned in, told her that she is
11 beautiful, that she has beautiful lips, that she needs to leave her husband, and that he loved how
12 curvy she is.

13 24. At the end of this session, respondent extended his arms out to request a hug. When
14 they hugged, respondent looked down at Patient A and kissed her on the lips. While they kissed,
15 he had his arms around her waist. He told her that he loved her lips and body, that she was
16 beautiful, and that he did not want her to leave. The appointment lasted longer than one hour.

17 25. Later in the evening, Patient A went back to the clinic to see her therapist, M.H.
18 Upon her arrival, she saw respondent who asked if she was there to see him. She told him she
19 was there to see M.H. After her appointment with M.H., respondent came out to the public
20 waiting area and escorted her into his office. While walking towards his office, he said out loud
21 their need to go over her medication. Once they walked in and the door was closed, he told her
22 he had to say that, so that no one would get suspicious. He then grabbed Patient A by her waist
23 and started to kiss her. He told her to keep quiet, so that no one would hear them.

24 26. After they stopped kissing, respondent went to sit behind his desk. He told her that he
25 was behind on his charting. When she asked if he could continue being her doctor and help her
26 with her medication, he stated he will give her whatever she wanted. He then continued kissing
27 her and the appointment lasted for an hour.

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1 27. On or about March 21, 2016, Patient A went to see respondent at the clinic because
2 she was not feeling good. On this visit, respondent hosted Patient A in an office different than the
3 one in which he provided his previous four (4) sessions. This new office was located in the
4 corner, was more secluded, and had a couch in it.

5 28. When she entered the new office, she told him that she had not been feeling well
6 because of leaving her husband and that she was now living with her sister. Patient A had anxiety
7 and wanted to discuss her medication. Respondent instead told her that she did not give him a
8 hug and walked over to her. He then gave her a hug and a kiss. While they kissed, respondent
9 held her by the waist, moved his hands up to her breasts, and rubbed her breasts.

10 29. Thereafter, Patient A sat down on the couch and respondent sat in his chair that was
11 pulled up next to the couch. While sitting next to her, he rubbed her thighs, opened her shirt, and
12 looked down her shirt. He lifted up her shirt and exposed her bra. He again rubbed Patient A's
13 breasts. He then suddenly got up and walked over to the door to lock it. He returned and rubbed
14 her breasts, thighs, and her vagina on the outside of her jeans. He continued to fondle her breasts
15 and vagina for a few minutes. He told her she is beautiful and that he loved touching her.

16 30. When Patient A told respondent that she needed her medications increased and
17 needed something for her anxiety, he told her he would give her Ativan and Xanax,³ but that he
18 could not give both medications on the same date, and that he will put two (2) different dates on
19 these medications. When she said she would pick up the second prescription on a subsequent
20 visit, respondent told her he wanted her to return in two (2) days. Respondent then resumed
21 kissing Patient A, lifted up her blouse, pulled down her bra, and sucked on her breasts and
22 nipples. The session lasted for an hour and a half.

23 31. At the end of the session, they exchanged their emails. On the same night, Patient A
24 emailed respondent a picture of herself dressed in a low-cut bra. In his email back to her,
25 respondent stated, "Looking amazing!" He did not tell her that sending half-naked photographs
26 of herself to her psychiatrist was an inappropriate thing.

27 ³ Xanax is a brand name for alprazolam (a benzodiazepine), a Schedule IV controlled
28 substance pursuant to Health and Safety Code section 11057, subdivision (d), and a dangerous
drug pursuant to Business and Professions Code section 4022.

1 Patient B's thighs with his hands. While rubbing them, he told her, "You're a good person, I
2 want to make you feel better." He was rubbing the inside and outside of her thigh from knee to
3 high-mid thigh.

4 38. When Patient B asked respondent about her medication options for her panic attacks
5 and anxiety, he responded, "**Honey, I'll prescribe whatever you want,**" while holding her hand
6 with one hand and rubbing her arm with the other.

7 39. Prior to the first appointment, Patient B had received three (3) months' supply of
8 Clonazepam⁴ at 6 mg per day (270 pills of 2 mg dosage) on or about February 20, 2018, and 30
9 pills of 10 mg Diazepam⁵ on or about February 29, 2016, from M.W., M.D., respondent's
10 colleague at the clinic. On or about March 9, 2016, respondent, during coverage for his
11 colleague, M.W., M.D. and prior to his first appointment with Patient B, prescribed her
12 Lorazepam⁶ (90 pills of 1 mg dosage). There was no progress note to document the rationale for
13 adding a third benzodiazepine⁷ to her regimen. The same Lorazepam was refilled on April 7,
14 2016, and Zaleplon⁸ (30 pills of 10 mg dosage), a benzodiazepine-like hypnotic, was added to the
15 prescription by respondent with two (2) additional refills. On April 20, 2016, respondent added
16
17

18 ⁴ Clonazepam is a Schedule IV controlled substance pursuant to Health and Safety Code
19 section 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code
section 4022. It is an anti-anxiety medication in the benzodiazepine family.

20 ⁵ Diazepam is a Schedule IV controlled substance pursuant to Health and Safety Code
21 section 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code
section 4022.

22 ⁶ Lorazepam is a Schedule IV controlled substance pursuant to Health and Safety Code
23 section 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code
section 4022.

24 ⁷ Benzodiazepine is a Schedule IV controlled substance pursuant to Health and Safety
25 Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions
Code section 4022.

26 ⁸ Zaleplon is a Schedule IV controlled substance pursuant to Health and Safety Code
27 section 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code
section 4022.
28

1 Alprazolam⁹ (28 pills of 1 mg dosage), and one (1) week later on April 27, 2016, he additionally
2 prescribed Patient B Alprazolam (60 pills of 2 mg dosage).

3 40. During the second appointment on April 28, 2016, respondent randomly talked about
4 himself and his exercise routine. He showed Patient B pictures of himself without a shirt on. He
5 told her she did not need to work out because she had a perfect body.

6 41. At the end of the session, respondent told her to give him a hug. She briefly hugged
7 him and pulled away, but he pulled her back in and rubbed her back. She made several attempts
8 to push him away, but he continued to pull her in towards him. Patient B felt frozen with fear.
9 Respondent's hug lasted for about a minute and a half. Patient B's session lasted for an hour even
10 though it was scheduled for only fifteen (15) minutes.

11 42. On the next day, Patient B told her husband and her friend about what happened.

12 43. Three (3) days later, on or about May 2, 2016, Patient B went to the Chula Vista
13 Police Department (CVPD) to make a report of respondent's behavior during her appointment.
14 Soon thereafter, respondent was placed on an administrative leave at his clinic.

15 44. On or about May 8, 2016, respondent left a handwritten birthday note for his wife on
16 a piece of paper in which he stated, in summary: (1) that he wanted to tell her something that
17 cannot be discussed electronically, (2) that he provides psychiatric services to the secret agents of
18 the CIA, (3) that he was being mistreated by the psychiatry community, (4) that he was trying to
19 pull strings with the Medical Board, (5) that Patient C is "the highest rated assassin" of the
20 government, (6) that respondent is "the best psych" that the U.S. government has and "the only
21 one [available] to fix their agents," (7) that he was required to legally change his last name
22 because his connections to the medical profession have to be severed, and (8) that he will have
23 another identity which he cannot disclose to her. Finally, he added in his note to his wife that she
24 should not discuss what he wrote to her in any text or email.

25 45. Afterwards, respondent moved out of California to Arizona to live and work.

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27 ⁹ Alprazolam is a benzodiazepine, a Schedule IV controlled substance pursuant to Health
28 and Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code section 4022.

1 **Patient C**

2 46. In the spring of 2016, Patient C had an appointment with a female psychiatrist at
3 respondent's clinic. When Patient C arrived for her appointment, she was instead seen by
4 respondent. Respondent gave her a prescription for Prazosin,¹⁰ Zoloft,¹¹ and Xanax. Respondent
5 and Patient C exchanged phone numbers. About one month after their appointment, respondent
6 and Patient C started a dating relationship that lasted for about six (6) months. During their
7 relationship, respondent helped Patient C purchase a motorcycle by co-signing her loan for the
8 motorcycle. He also paid around \$1,200 for her motorcycle parts.

9 47. Between February 2016 and January 2017, respondent wrote nine (9) prescriptions,
10 for Patient C, for controlled substances including Adderall,¹² Alprazolam,¹³ and Vyvanse,¹⁴ which
11 included a period of time after the end of Patient C and respondent's dating relationship:

12

Date	Controlled Substance	Amount
2/27/2016	Alprazolam .5 mg	15 pills
3/11/2016	Adderall 20 mg	60 pills
4/1/2016	Vyvanse 40 mg	23 pills
4/1/2016	Vyvanse 40 mg	7 pills
4/18/2016	Adderall 20 mg	60 pills

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19 ¹⁰ Prazosin is a sympatholytic medication that is used to treat high blood pressure, anxiety,
20 and posttraumatic stress disorder (PTSD).

21 ¹¹ Zoloft is a brand name for sertraline (an antidepressant of the selective serotonin
22 reuptake inhibitor class), which is used to treat depression, obsessive-compulsive disorder, panic
disorder, anxiety disorders, PTSD, and premenstrual dysphoric disorder.

23 ¹² Adderall is a brand name for dextroamphetamine and amphetamine, a Schedule II
24 controlled substance pursuant to Health and Safety Code section 11055, subdivision (d), and a
dangerous drug pursuant to Business and Professions Code section 4022. It is an amphetamine
salts used for attention-deficit hyperactivity disorder and narcolepsy.

25 ¹³ Alprazolam is a benzodiazepine, a Schedule IV controlled substance pursuant to Health
26 and Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and
Professions Code section 4022.

27 ¹⁴ Vyvanse is a brand name for lisdexamfetamine, a Schedule II controlled substance
28 pursuant to Health and Safety Code section 11055, subdivision (d), and a dangerous drug
pursuant to Business and Professions Code section 4022.

4/29/2016	Adderall 20 mg	60 pills
4/30/2016	Alprazolam 1 mg	30 pills
1/30/2017	Alprazolam 1 mg	30 pills
1/30/2017	Adderall ER 20 mg	60 pills

48. There were no progress notes by respondent to justify these prescriptions. During her sworn statement at a deposition on a later date, Patient C stated she had no knowledge of how any of these medications were prescribed to her.

49. During the period of above prescriptions, respondent's wife found in his room a receipt for Vyvanse, prescribed for Patient C by respondent.

50. The Controlled Substance Utilization Review and Evaluation Systems (CURES) report for respondent from November 9, 2014 to November 9, 2017, shows respondent received prescriptions for Amphetamine Salt Combo including for Adderall.¹⁵

51. Respondent did not maintain any medical records of Patient C.

Gross Negligence

52. Respondent committed gross negligence in his care and treatment of Patient A, which included, but was not limited to, the following:

- (1) Committing sexual misconduct by engaging in sexual contact with Patient A;
- (2) Engaging in telephonic, email, and/or text message correspondence with sexual overtones with Patient A; and
- (3) Advising Patient A to have extramarital affairs while engaging in (1) and (2).

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¹⁵ Adderall is a brand name for dextroamphetamine and amphetamine, a Schedule II controlled substance pursuant to Health and Safety Code section 11055, subdivision (d), and a dangerous drug pursuant to Business and Professions Code section 4022. It is an amphetamine salts used for attention-deficit hyperactivity disorder and narcolepsy.

1 53. Respondent committed gross negligence in his care and treatment of Patient B, which
2 included, but was not limited to, the following:

- 3 (1) Violating Patient B's boundaries by ignoring her express request that he not
4 touch her because of her history as a victim of sexual assault, and rubbing her
5 hands, her back, and her inner upper thighs close to her groin area;
- 6 (2) Engaging in other unprofessional behaviors by showing Patient B photos of
7 himself without a shirt on for no medical reason and stating, "Honey, I'll
8 prescribe whatever you want," while holding her hand and rubbing her arm;
- 9 (3) Excessively prescribing multiple high-dose benzodiazepines to Patient B
10 without a scientific rationale; and
- 11 (4) Failing to document with progress notes his patient care and prescription of
12 controlled substances for Patient B, or alternatively, taking from the clinic and
13 destroying Patient B's medical records.

14 54. Respondent committed gross negligence in his care and treatment of Patient C, which
15 included, but was not limited to, the following:

- 16 (1) Prescribing controlled substances to Patient C without any diagnostic rationale
17 or by leaving progress notes to justify the prescriptions on multiple occasions;
18 and
- 19 (2) Diverting for self-use, the controlled substances he prescribed for Patient C.

20 **THIRD CAUSE FOR DISCIPLINE**

21 **(Repeated Negligent Acts)**

22 55. Respondent has further subjected his Physician's and Surgeon's Certificate No.
23 A 136356 to disciplinary action under sections 2227 and 2234, as defined by section 2234,
24 subdivision (c), of the Code, in that he was repeatedly negligent in his care and treatment of
25 Patient A, Patient B, and Patient C, as more particularly alleged in paragraphs 17 through 54,
26 above, and which are hereby incorporated by reference and realleged as if fully set forth herein.

27 56. In addition to the above, respondent committed negligent acts in his care and
28 treatment of Patient C, which included, but was not limited to, the following:

1 (1) Dating Patient C, a former patient, a month after the alleged end of physician-
2 patient relationship.

3 **FOURTH CAUSE FOR DISCIPLINE**

4 **(Prescribing Without Proper Examination)**

5 57. Respondent has further subjected his Physician's and Surgeon's Certificate No.
6 A 136356 to disciplinary action under sections 2227 and 2234, as defined by section 2242, of the
7 Code, in that he prescribed, dispensed, or furnished dangerous drugs as defined in section 4022
8 without an appropriate prior examination and a medical indication, in his care and treatment of
9 Patient B and Patient C, as more particularly alleged in paragraphs 36 through 51 and paragraphs
10 53 and 54, above, which are hereby incorporated by reference and realleged as if set forth herein.

11 **FIFTH CAUSE FOR DISCIPLINE**

12 **(Failure to Maintain Adequate and Accurate Medical Record)**

13 58. Respondent has further subjected his Physician's and Surgeon's Certificate No.
14 A 136356 to disciplinary action under sections 2227 and 2234, as defined by section 2266, of the
15 Code, in that he failed to maintain adequate and accurate records regarding his care and treatment
16 of Patient B and Patient C, as more particularly alleged in paragraphs 36 through 51 and
17 paragraphs 53 and 54, above, which are hereby incorporated by reference and realleged as if fully
18 set forth herein.

19 **SIXTH CAUSE FOR DISCIPLINE**

20 **(Discipline, Restriction, or Limitation Imposed by Another State)**

21 59. Respondent has further subjected his Physician's and Surgeon's Certificate No.
22 A 136356 to disciplinary action under sections 2227 and 2234, as defined by sections 141, 2305,
23 820 and 821, of the Code, in that Respondent has been disciplined by another state for conduct
24 that would have been grounds for discipline in California, as more particularly alleged herein.

25 60. On or about October 24, 2016, the Arizona Medical Board issued License No. 53075
26 to respondent for the practice of allopathic medicine.

27 61. The Arizona Medical Board initiated case number MD-19-0084A against respondent
28 after receiving information indicating that the Medical Board of California had issued Accusation

1 No. 800-2016-022096 alleging, among other things, inappropriate sexual misconduct with three
2 patients.

3 62. During an investigational interview with Arizona Medical Board staff on February
4 15, 2019, respondent denied all allegations documented in the Accusation. Respondent reported
5 to Arizona Medical Board staff that during the time period covered in the Accusation, he was
6 experiencing delirium that affected his ability to recall specific events.

7 63. The Arizona Medical Board Executive Director issued an Interim Order to require
8 respondent to complete a psychosexual evaluation with a Board-approved provider to evaluate
9 respondent's competency to practice medicine. Respondent failed to schedule the evaluation
10 within fourteen (14) days as required by the Interim Order.

11 64. Based on respondent's failure to comply with the Interim Order, respondent was
12 offered an Interim Consent Agreement for Practice Restriction ("Practice Restriction").
13 Respondent refused to enter into the Practice Restriction and informed Arizona Medical Board
14 staff that he did not intend to comply with the Interim Order.

15 65. As a result of respondent's failure to comply with the Arizona Medical Board's
16 Interim Order and his subsequent failure to agree to a practice restriction, the Arizona Medical
17 Board suspended respondent's license based on his unprofessional conduct in violation of A.R.S.
18 section 32-1401(27)(s) ["Violating a formal order, probation, consent agreement or stipulation
19 issued or entered into by the board or it's executive director...] and the Arizona Medical Board's
20 Interim Findings of Fact and Conclusions of Law that "the public health, safety or welfare
21 imperatively requires emergency action." (A.R.S. § 32-1451 (D)). (See true and correct copy of
22 Arizona Medical Board's Interim Findings of Fact, Conclusions of Law and Order for Summary
23 Suspension of License, attached hereto as Attachment A, and incorporated by reference as is fully
24 set forth herein.)

25 66. On or about March 28, 2019, the Arizona Medical Board issued a Complaint and
26 Notice of Hearing setting respondent's Arizona Medical Board matter for hearing at 9:00 a.m. on
27 May 2, 2019. Respondent did not appear for the hearing nor did any representative appear on his
28 behalf and the matter convened in his absence at approximately 9:15 a.m., at which time staff for

1 the Arizona Medical Board presented its case against respondent. According to the Findings of
2 Fact, Conclusions of Law and Order (License Revocation) issued after the hearing, which were
3 adopted by the Arizona Medical Board on July 12, 2019, the following was alleged:

4 “Through the [Arizona Medical Board] Complaint, the Board alleges that
5 Dr. Ryan committed unprofessional conduct by failing to comply with a Board Order.
6 More specifically, the Board received information showing that Dr. Ryan may not be
7 safe to practice and it issued an Interim Order requiring him to undergo a
8 psychosexual evaluation. After Dr. Ryan made clear that he would not comply with
9 the Order, the Board offered him the opportunity to resolve the matter through a
10 consent agreement. Dr. Ryan was unwilling to do so, and the Board determined that
11 an emergency existed and summarily suspended his license.” (See Arizona Medical
12 Board’s Findings of Fact, Conclusions of Law and Order, Findings of Fact No. 6, at
13 pp. 1-2.)

14 67. According to the Findings of Fact, Conclusions of Law and Order (License
15 Revocation) issued after the hearing, which was adopted by the Arizona Medical Board on July
16 12, 2019, a true and correct copy of which is attached hereto as Attachment B, and incorporated
17 by reference as if fully set forth herein, the following conclusions of law were made, in pertinent
18 part:

19 “Dr. Coffey [the Arizona Medical Board’s expert] provided credible
20 testimony showing that the Board’s decision to require Dr. Ryan to undergo the
21 psychosexual evaluation was appropriate considering California’s allegations against
22 him and the information the Board staff learned during its investigations interview.
23 She also provided credible testimony that multiple factors show that Dr. Ryan may
24 not be safe to practice.

25 “The Board offered Dr. Ryan the opportunity to surrender his license or
26 to enter into practice restriction agreement in lieu of undergoing the psychosexual
27 evaluation. Because Dr. Ryan may be unsafe to practice, it was appropriate for the
28 Board [to] summarily suspend his license when he failed to avail himself of these
options. See ARIZ. REV. STAT. § 32-1451(D).

“The Board presented clear and convincing evidence showing that it was
justified in ordering Dr. Ryan to undergo the psychosexual evaluation. Because Dr.
Ryan has failed to comply with the Interim Order requiring that evaluation, he has
committed unprofessional conduct under ARIZ. REV. STAT. section 32-1401(27)(s).

“Because Dr. Ryan has committed an act of unprofessional conduct, the
Board has authority to discipline his license. ARIZ. REV. STAT. § 32-1451(M).


“Considering Dr. Ryan’s failure to appear at this hearing, his failure to
appear at the March 7, 2019, Board meeting, that the Board has previously afforded
him the opportunity to surrender his license, and that there is credible evidence
showing that he may not be safe to practice, revocation is appropriate in this case.”
(See Arizona Medical Board’s Findings of Fact, Conclusions of Law and Order
(License Revocation), Conclusions of Law Nos. 7-11, at pp. 5-6.)

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. A 136356, issued to respondent James Matthew Crowley Ryan, M.D.;
2. Revoking, suspending or denying approval of respondent James Matthew Crowley Ryan, M.D.'s authority to supervise physician assistants, pursuant to section 3527 of the Code, and advanced practice nurses;
3. Ordering respondent James Matthew Crowley Ryan, M.D., if placed on probation, to disclose the disciplinary order to patients pursuant to section 2228.1 of the Code;
4. Ordering respondent James Matthew Crowley Ryan, M.D., if placed on probation, to pay the Medical Board of California the costs of probation monitoring; and
5. Taking such other and further action as deemed necessary and proper.

DATED: September 5, 2019


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

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ATTACHMENT A



Arizona Medical Board

1740 W Adams St. Suite 4000 Phoenix, AZ 85007 • website: www.azmd.gov
Phone (480) 551-2700 • Toll Free (877) 255-2212 • Fax (480) 551-2702

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Public Member

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Physician Member

Pamela E. Jones
Public Member

Lois E. Krahn, M.D.
Physician Member

Executive Director

Patricia E. McSorley

I, Michelle Robles, of the Arizona Medical Board, hereby certify that I am the official custodian of the records of the agency; and that the attached documents are true and complete copies of the documents requested regarding:

Physician Name: James M. C. Ryan, M.D.

License Number: 53075

Attached are the following document(s):

Document Name:
Physician Profile

Interim Findings of Fact, Conclusion of Law and Order for Summary Suspension of License

Dated: March 8th, 2019

Document #6 of Pages:

Dated this 30th, April, 2019

ARIZONA MEDICAL BOARD

Michelle Robles
Custodian of Records

MD PROFILE PAGE



Arizona Medical Board

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General Information

James Matthew Crowley Ryan MD
Redemption Psychiatry
2730 S Val Vista Dr #146
Gilbert AZ 85295
Phone: (480) 471-8560

License Number: 53075
License Status: Emergency Suspension
Licensed Date: 10/24/2016
License Renewed: 01/24/2018
Due to Renew By: 01/18/2020
If not Renewed, License Expires: 05/18/2020

Education and Training

Medical School: UNIV OF CA
LA JOLLA, CA

Graduation Date: 06/02/2013

Residency: 07/01/2013 - 06/30/2015 (Psychiatry)
UCSD ACGME Approved
La Jolla, CA

Area of Interest: Psychiatry

The Board does not verify current specialties. For more information please see the American Board of Medical Specialties website at <http://www.abms.org> to determine if the physician has earned a specialty certification from this private agency.

Board Action

03/08/2019 Summary Suspension

A person may obtain additional public records related to any licensee, including dismissed complaints and non-disciplinary actions and orders, by making a written request to the Board. The Arizona Medical Board presents this information as a service to the public. The Board relies upon information provided by licensees to be true and correct, as required by statute. It is an act of unprofessional conduct for a licensee to provide erroneous information to the Board. The Board makes no warranty or guarantee concerning the accuracy or reliability of the content of this website or the content of any other website to which it may link. Assessing accuracy and reliability of the information obtained from this website is solely the responsibility of the user. The Board is not liable for errors or for any damages resulting from the use of the information contained herein.

Please note that some Board Actions may not appear until a few weeks after they are taken, due to appeals, effective dates and other administrative processes.

Board actions taken against physicians in the past 24 months are also available in a chronological list.

Credentials Verification professionals, please click [here](#) for information on use of this website.

1 BEFORE THE ARIZONA MEDICAL BOARD

2 In the Matter of

3 **JAMES M. C. RYAN, M.D.**

4 Holder of License No. 53075
5 For the Practice of Allopathic Medicine
6 In the State of Arizona.

Case No. MD-19-0084A___

**INTERIM FINDINGS OF FACT,
CONCLUSIONS OF LAW AND ORDER
FOR SUMMARY SUSPENSION OF
LICENSE**

7 **INTRODUCTION**

8 The above-captioned matter came for discussion before the Arizona Medical Board
9 ("Board") at its March 7, 2019 meeting, where it had been placed on the agenda to
10 consider possible summary action against James M. C. Ryan, M.D. ("Respondent").
11 Having considered the information in the matter and being fully advised, the Board enters
12 the following Interim Findings of Fact, Conclusions of Law and Order for Summary
13 Suspension of License, pending a formal hearing or other Board action. A.R.S. § 32-
14 1451(D).

15 **INTERIM FINDINGS OF FACT**

16 1. The Board is the duly constituted authority for the regulation and control of
17 the practice of allopathic medicine in the State of Arizona.

18 2. Respondent is the holder of license number 53075 for the practice of
19 allopathic medicine in the State of Arizona.

20 3. The Board initiated case number MD-19-0084A after receiving information
21 indicating that the Medical Board of California issued an Accusation against Respondent's
22 California medical license in case 800-2016-022096. The Accusation contained
23 allegations that Respondent engaged in inappropriate sexual conduct with three patients
24 (Patient A, B and C).

25 4. During an investigational interview with Board staff on February 15, 2019,
Respondent denied all allegations documented in the Accusation. Respondent reported

1 to Board staff that during the time period covered by the Accusation, he was experiencing
2 delirium that affected his ability to recall specific events.

3 5. The Executive Director issued an Interim Order to require Respondent to
4 complete an evaluation with a Board-approved provider ("Interim Order"). Respondent
5 failed to schedule the evaluation within 14 days as required by the Interim Order.
6 Respondent stated that he could not afford to have the evaluation completed.

7 6. Based on Respondent's failure to complete the Interim Order, Respondent
8 was offered an Interim Consent Agreement for Practice Restriction ("Practice
9 Restriction").

10 7. Respondent refused to enter into the Practice Restriction, and informed
11 Board staff that he did not intend to comply with the Interim Order.

12 8. During the Board's consideration of the above captioned matter on March 7,
13 2019, Board staff presented the foregoing to the Board. Based on the evidence
14 presented, the Board voted unanimously to summarily suspend Respondent's license.

15 **INTERIM CONCLUSIONS OF LAW**

16 1. The Board possesses jurisdiction over the subject matter hereof and over
17 Respondent.

18 2. The conduct and circumstances described above constitute unprofessional conduct
19 pursuant to A.R.S. § 32-1401(27)(s) ("Violating a formal order, probation, consent
20 agreement or stipulation issued or entered into by the board or its executive director under
21 this chapter.").

22 3. Based on the foregoing Interim Findings of Fact and Conclusions of Law, the public
23 health, safety or welfare imperatively requires emergency action. A.R.S. § 32-1451(D).
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ORDER

Based on the foregoing Interim Findings of Fact and Conclusions of Law, set forth above,

IT IS HEREBY ORDERED THAT:

1. Respondent's license to practice allopathic medicine in the State of Arizona, License No. 53075, is summarily suspended. Respondent is prohibited from practicing medicine in the State of Arizona and is prohibited from prescribing any form of treatment including prescription medications or injections of any kind.

2. The Interim Findings of Fact and Conclusions of Law constitute written notice to Respondent of the charges of unprofessional conduct made by the Board against Respondent. Respondent is entitled to a formal hearing to defend these charges as expeditiously as possible after the issuance of this Order.

3. The Board's Executive Director is instructed to refer this matter to the Office of Administrative Hearings for scheduling of an administrative hearing to be commenced within sixty days from the date of the issuance of this Order, unless stipulated and agreed otherwise by Respondent. A.R.S. § 32-1451(D).

DATED AND EFFECTIVE this 8th day of March, 2019.

ARIZONA MEDICAL BOARD

By Patricia E. McSorley
Patricia E. McSorley
Executive Director

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EXECUTED COPY of the foregoing mailed
this 8th day of March, 2019 to:

James Ryan, M.D.
Address of Record

ORIGINAL of the foregoing filed
this 8th day of March, 2019 with:

Arizona Medical Board
1740 West Adams, Suite 4000
Phoenix, Arizona 85007

Michelle Peters
Board staff

ATTACHMENT B



Arizona Medical Board

1740 W Adams St. Suite 4000 Phoenix, AZ 85007 • website: www.azmd.gov
Phone (480) 551-2700 • Toll Free (877) 255-2212 • Fax (480) 551-2702

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Vice-Chair
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Edward G. Paul, M.D.
Secretary
Physician Member

Jodi Bain, Esq.
Public Member

Bruce A. Bethancourt, M.D.
Physician Member

David C. Beyer, M.D.
Physician Member

Teresa Connolly, D.N.P.
Public Member

Laura Dorrell, M.S.N., RN.
Public Member

Gary R. Figge, M.D.
Physician Member

Pamela E. Jones
Public Member

Lois E. Krahn, M.D.
Physician Member

Executive Director

Patricia E. McSorley

I, Michelle Robles, of the Arizona Medical Board, hereby certify that I am the official custodian of the records of the agency; and that the attached documents are true and complete copies of the documents requested regarding:

Physician Name: James M. C. Ryan, M.D.

License Number: 53075

Attached are the following document(s):

Document Name:
Physician Profile

Findings of Fact, Conclusions of Law and Order (License Revocation)
Dated: July 12th, 2019

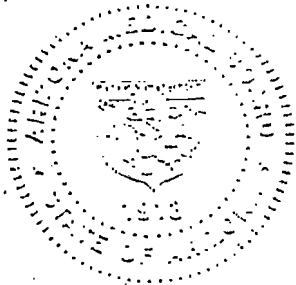
Complaint and Notice of Hearing
Dated: March 28th, 2019

Document #15 of Pages:

Dated this August 29th, 2019

ARIZONA MEDICAL BOARD

Michelle Robles
Custodian of Records





Arizona Medical Board

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General Information

James Matthew Crowley Ryan MD
Redemption Psychiatry
2730 S Val Vista Dr #146
Gilbert AZ 85295
Phone: (480) 471-8560

License Number: 53075
License Status: Revoked
Licensed Date: 10/24/2016
License Renewed:
Due to Renew By:

Education and Training

Medical School:	UNIV OF CA LA JOLLA, CA
Graduation Date:	06/02/2013
Residency:	07/01/2013 - 06/30/2015 (Psychiatry) UCSD ACGME Approved La Jolla, CA
Area of Interest	Psychiatry

The Board does not verify current specialties. For more information please see the American Board of Medical Specialties website at <http://www.abms.org> to determine if the physician has earned a specialty certification from this private agency.

Board Action

08/16/2019

Revocation

A person may obtain additional public records related to any licensee, including dismissed complaints and non-disciplinary actions and orders, by making a written request to the Board. The Arizona Medical Board presents

this information as a service to the public. The Board relies upon information provided by licensees to be true and correct, as required by statute. It is an act of unprofessional conduct for a licensee to provide erroneous information to the Board. The Board makes no warranty or guarantee concerning the accuracy or reliability of the content of this website or the content of any other website to which it may link. Assessing accuracy and reliability of the information obtained from this website is solely the responsibility of the user. The Board is not liable for errors or for any damages resulting from the use of the information contained herein.

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BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of

JAMES RYAN, M.D.,

Holder of License No. 53075
For the Practice of Allopathic Medicine
In the State of Arizona.

Case No.19A-53075-MDX

**FINDINGS OF FACT,
CONCLUSIONS OF LAW AND ORDER
(License Revocation)**

On July 11, 2019, this matter came before the Arizona Medical Board ("Board") for consideration of Administrative Law Judge ("ALJ") Thomas Shedden's proposed Findings of Fact, Conclusions of Law and Recommended Order. James Ryan, M.D., ("Respondent") was not present; Assistant Attorney General Anne Froedge represented the State. Assistant Attorney General Elizabeth A. Campbell was available to provide independent legal advice to the Board.

The Board, having considered the ALJ's Decision and the entire record in this matter, hereby issues the following Findings of Fact, Conclusions of Law and Order.

FINDINGS OF FACT

PROCEDURE

1. The Arizona Medical Board ("Board") is the duly constituted authority for licensing and regulating the practice of allopathic medicine in the State of Arizona.
2. On March 28, 2019 the Board issued a Complaint and Notice of Hearing setting this matter for hearing at 9:00 a.m. May 2, 2019.
3. No representative appeared for James Ryan, M.D at the scheduled hearing-time, and the matter was convened in his absence at about 9:15 a.m.
4. The Board presented the testimony investigator Bob Kessler and practice consultant Kathleen Coffey, M.D.
5. Dr. Ryan holds License No. 53075 for the practice of allopathic medicine in the State of Arizona. Dr. Ryan's license was suspended at the time of the hearing.
6. Through the Complaint, the Board alleges that Dr. Ryan committed unprofessional conduct by failing to comply with a Board Order. More specifically, the Board received information showing that Dr. Ryan might not be safe to practice and it issued an Interim

1 Order requiring him to undergo a psychosexual evaluation. After Dr. Ryan made clear that
2 he would not comply with the Order, the Board offered him the opportunity to resolve the
3 matter through a consent agreement. Dr. Ryan was unwilling to do so, and the Board
4 determined that an emergency existed and summarily suspended his license.

5 7. Dr. Ryan was licensed in California until that license expired on January 31, 2017.

6 8. During the Board's investigation of this matter, Dr. Ryan explained that he would
7 have surrendered his California license but that was not possible because California has an
8 open investigation.

9 9. The Board received from the California medical board an Accusation, which is
10 equivalent to a Board-complaint in Arizona.

11 10. In the Accusation, the California board alleges that Dr. Ryan had inappropriate
12 physical contact with two patients and that he was prescribing for a patient that he began
13 dating and possibly diverting from that patient.

14 11. As of the hearing date in this matter, California had scheduled a hearing to be
15 conducted in October 2019 at which the merits of its allegations would be addressed.

16 12. The Board began an investigation of Dr. Ryan to verify whether he was safe to
17 practice, but that investigation did not consider whether California's allegations are true.

18 13. On February 15, 2019, the Board conducted an Investigational Interview of Dr. Ryan
19 that was attended by Mr. Kessler, Dr. Coffey, and Raquel Rivera, who is Mr. Kessler's
20 supervisor.

21 14. On many occasions during that interview, Dr. Ryan stated that he had been delirious
22 (from overwork) during the times at issue in California's Accusation and that he could not
23 recollect many of the events forming the bases of California's allegations.

24 15. Dr. Ryan also told the interviewers that California's allegations were perpetrated by
25 his ex-wife and that the patients who made the allegations against him were sent to him by
her powerful family as part of a contentious divorce. Dr. Coffey testified that Dr. Ryan
presented no evidence to substantiate this claim.

Order requiring him to undergo a psychosexual evaluation.

1 17. A psychosexual evaluation is a comprehensive evaluation that typically lasts three
2 days and includes a history and physical examination; a psychological evaluation, including
3 psychological testing; a psychiatric evaluation; a sexual history; a review of the use of
4 addictive chemicals; a neuropsychological evaluation; and polygraph testing.

5 18. Dr. Coffey explained that psychosexual evaluations are ordered when there are
6 allegations of inappropriate touching or boundary issues. The evaluation determines
7 whether there may be recidivism for either nonsexual or sexual behaviors, and what
8 treatments might be used to render a physician safe to practice.

9 19. Dr. Coffey had concerns as to Dr. Ryan's ability to practice safely because he had
10 been charged with inappropriate touching of two patients, with engaging in an inappropriate
11 dating relationship with a third patient, and with prescribing without keeping proper records
12 and continuing to prescribe while in a dating relationship with a patient. In addition, during
13 the interview he was using "distancing" statements such as "I don't recall" or "that doesn't
14 sound like me," he would segue to his divorce, he often had to be redirected, he made the
15 admission that he had practiced while delirious, and he acknowledged having issues with
16 concentration because he was not taking medication for his ADHD.

17 20. Dr. Coffey's opinion was that a psychosexual evaluation of Dr. Ryan was warranted
18 because there were multiple allegations regarding inappropriate touching or boundary
19 issues occurring on multiple occasions, the patients were mental health patients which
20 raises dependency/co-dependency issues, he has been licensed as a physician for a
21 relatively short time, and because of Dr. Ryan's distancing statements and
22 acknowledgement that he had been practicing when delusional.

23 21. As part of its investigation, California's board had Dr. Ryan undergo a physical and a
24 psychiatric examination. Dr. Coffey testified to the effect that California's examination did
25 not include the same level of scrutiny as a psychosexual evaluation and was not sufficient
to meet the Board's requirements in Dr. Ryan's case. She also testified that although Alan
Abrams, M.D. concluded in November 2017 that Dr. Ryan was safe, Dr. Abrams's report
shows that more investigation would be required to determine whether Dr. Ryan had
engaged in the alleged inappropriate sexual behavior, which she considered to be
inconsistent with a finding that he was safe.

1 22. The Board issued its Interim Order on February 15, 2019. The Order required Dr.
2 Ryan to schedule the psychosexual evaluation within fourteen days of that date and to
3 undergo the evaluation within sixty days.

4 23. After the Board presented the Interim Order to Dr. Ryan, he exchanged emails and
5 had other communications with the Board staff in which he vacillated between agreeing to
6 undergo the evaluation and declining to do so. The Board extended the deadline by which
7 the evaluation had to be conducted, but Dr. Ryan ultimately told the Board that he would
8 not undergo the evaluation and explained that he planned to stop practicing medicine.

9 24. The Board informed Dr. Ryan that if he chose not to undergo the evaluation he could
10 surrender his license or have a practice restriction placed on the license (forbidding him to
11 practice until he was found to be safe to practice). Dr. Ryan was unwilling to consent to
12 either of these options.

13 25. Because Dr. Ryan was unwilling to undergo the psychosexual evaluation or to
14 resolve the matter through a consent agreement, at a public meeting on March 7, 2019, the
15 Board determined that the public health, safety and welfare required that his license be
16 summarily suspended, which it did. Although Dr. Ryan was provided notice of that Board
17 meeting, he failed to appear.

18 **CONCLUSIONS OF LAW**

19 1. The Board has jurisdiction over Respondent and the subject matter in this case. See
20 ARIZ. REV. STAT. § 32-1401 *et seq.*

21 2. The Board must prove its allegations by clear and convincing evidence. ARIZ. REV.
22 STAT. § 32-1451.04.

23 3. Clear and convincing evidence is "[e]vidence indicating that the thing to be proved is
24 highly probable or reasonably certain." BLACK'S LAW DICTIONARY 674 (10th ed. 2014).

25 4. ARIZ. REV. STAT. section 32-1451(C) provides that

The board or, if delegated by the board, the executive
director shall require, at the doctor's expense, any combination of
mental, physical or oral or written medical competency examinations
and conduct necessary investigations, including investigational
interviews between representatives of the board and the doctor to

1 fully inform itself with respect to any information filed with the board
2 under subsection A of this section. These examinations may include
3 biological fluid testing and other examinations known to detect the
4 presence of alcohol or other drugs. The board or, if delegated by the
5 board, the executive director may require the doctor, at the doctor's
6 expense, to undergo assessment by a board approved rehabilitative,
7 retraining or assessment program. This subsection does not
8 establish a cause of action against any person, facility or program
9 that conducts an assessment, examination or investigation in good
10 faith pursuant to this subsection.

10 5. Orders for professionals to undergo evaluations such as Dr. Ryan was ordered to
11 undergo are not considered to be disciplinary in nature, but rather are investigatory only.
12 Such an order is permissible because the professional cannot be disciplined without a
13 hearing, at which time he must be accorded due process. See *Wassef v. Ariz. Bd. of Dental*
14 *Exam'rs*, 242 Ariz. 90, 93 (App. 2017)(citations from other jurisdictions omitted). Due
15 process generally requires notice and an opportunity to be heard in a meaningful manner
16 and at a meaningful time. *Id.*

16 6. The hearing provided Dr. Ryan with the opportunity to present evidence, including
17 evidence to rebut the Board's allegations, and to cross-examine the Board's witnesses.
18 Consequently, Dr. Ryan has received due process in this matter.

18 7. Dr. Coffey provided credible testimony showing that the Board's decision to require
19 Dr. Ryan to undergo the psychosexual evaluation was appropriate considering California's
20 allegations against him and the information the Board staff learned during its investigational
21 interview. She also provided credible testimony that multiple factors show that Dr. Ryan
22 may not be safe to practice.

22 8. The Board offered Dr. Ryan the opportunity to surrender his license or to enter into a
23 practice-restriction agreement in lieu of undergoing the psychosexual evaluation. Because
24 Dr. Ryan may be unsafe to practice, it was appropriate for the Board summarily suspend
25

1 his license when he failed to avail himself of these options. See ARIZ. REV. STAT. § 32-
2 1451(D).

3 9. The Board presented clear and convincing evidence showing that it was justified in
4 ordering Dr. Ryan to undergo the psychosexual evaluation. Because Dr. Ryan has failed to
5 comply with the Interim Order requiring that evaluation, he has committed unprofessional
6 conduct under ARIZ. REV. STAT. section 32-1401(27)(s).

7 10. Because Dr. Ryan has committed an act of unprofessional conduct, the Board has
8 authority to discipline his license. ARIZ. REV. STAT. § 32-1451(M).

9 11. Considering Dr. Ryan's failure to appear at this hearing, his failure to appear at the
10 March 7, 2019 Board meeting, that the Board had previously afforded him the opportunity
11 to surrender his license, and that there is credible evidence showing that he may not be
12 safe to practice, revocation is appropriate in this case.

13 **ORDER**

14 Based on the foregoing, it is **ORDERED** revoking James Ryan, MD's License No.
15 53075 for the practice of allopathic medicine in the State of Arizona.

16 **RIGHT TO PETITION FOR REHEARING OR REVIEW**

17 Respondent is hereby notified that he has the right to petition for a rehearing or
18 review. The petition for rehearing or review must be filed with the Board's Executive
19 Director within thirty (30) days after service of this Order. A.R.S. § 41-1092.09(B). The
20 petition for rehearing or review must set forth legally sufficient reasons for granting a
21 rehearing or review. A.A.C. R4-16-103. Service of this order is effective five (5) days
22 after date of mailing. A.R.S. § 41-1092.09(C). If a petition for rehearing or review is not
23 filed, the Board's Order becomes effective thirty-five (35) days after it is mailed to
24 Respondent.

25 Respondent is further notified that the filing of a motion for rehearing or review is
required to preserve any rights of appeal to the Superior Court.

1 DATED this 12th day of July 2019.

2 THE ARIZONA MEDICAL BOARD

3
4 By Patricia E. McSorley
5 Patricia E. McSorley
6 Executive Director

7 ORIGINAL of the foregoing filed this
8 12th day of July, 2019 with:

9 Arizona Medical Board
10 1740 W. Adams, Suite 4000
11 Phoenix, Arizona 85007

12 COPY of the foregoing filed this
13 12th day of July, 2019 with:

14 Greg Hanchett, Director
15 Office of Administrative Hearings
16 1740 W. Adams
17 Phoenix, AZ 85007

18 Executed copy of the foregoing
19 mailed by U.S. Mail this
20 12th day of July, 2019 to:

21 James Ryan, M.D.
22 Address of Record

23 Anne Froedge
24 Assistant Attorney General
25 Office of the Attorney General
SGD/LES
2005 N. Central Avenue
Phoenix, AZ 85004

Michelle Robus
#7980411

1 Mark Brnovich
2 Attorney General
(Firm State Bar No. 14000)

3 Anne Froedge
4 Assistant Attorney General
5 State Bar No. 011354
6 Licensing and Enforcement Section
7 1275 W. Washington
8 Phoenix, Arizona 85007-2997
Telephone: (602) 542-7984
Fax: (602) 364-3202

9 Attorneys for the Arizona Medical Board

10 **BEFORE THE ARIZONA MEDICAL BOARD**
11 **IN THE OFFICE OF ADMINISTRATIVE HEARINGS**

13 In the Matter of

14 **JAMES RYAN, M.D.**

15 Holder of License No. 53075
16 For the Practice of Allopathic Medicine
17 In the State of Arizona.

Case No. 19A-53075-MDX

**COMPLAINT AND
NOTICE OF HEARING**

(Assigned to Administrative Law Judge
Thomas Shedden)

18
19 **JURISDICTION**

20 This Complaint and Notice of Hearing are prepared, and these proceedings are
21 instituted, under A.R.S. § 32-1451 and 41-1092, et seq.

22 **PARTIES**

23 1. The Board is the duly constituted authority for the regulation and control of
24 the practice of allopathic medicine in the State of Arizona.

25 2. Respondent is the holder of license number 53075 for the practice of
26 allopathic medicine in the State of Arizona.

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FACTUAL ALLEGATIONS

1. The Board initiated case number MD-19-0084A after receiving information indicating that the Medical Board of California issued an Accusation against Respondent's California medical license in case 800-2016-022096. The Accusation contained allegations that Respondent engaged in inappropriate sexual conduct with three patients (Patient A, B and C).

2. During an investigational interview with Board staff on February 15, 2019, Respondent denied all allegations documented in the Accusation. Respondent reported to Board staff that during the time period covered by the Accusation, he was experiencing delirium that affected his ability to recall specific events.

3. The Executive Director issued an Interim Order to require Respondent to complete an evaluation with a Board-approved provider ("Interim Order"). Respondent failed to schedule the evaluation within 14 days as required by the Interim Order. Respondent stated that he could not afford to have the evaluation completed.

4. Based on Respondent's failure to complete the Interim Order, Respondent was offered an Interim Consent Agreement for Practice Restriction ("Practice Restriction").

5. Respondent refused to enter into the Practice Restriction and informed Board staff that he did not intend to comply with the Interim Order.

6. During the Board's consideration of the above captioned matter on March 7, 2019, Board staff presented the foregoing to the Board. Based on the evidence presented, the Board voted unanimously to summarily suspend Respondent's license.

ALLEGATIONS OF UNPROFESSIONAL CONDUCT

1. The Board possesses jurisdiction over the subject matter hereof and over Respondent.

1 2. The conduct and circumstances described above constitute unprofessional
2 conduct pursuant to A.R.S. § 32-1401(27)(s) ("Violating a formal order, probation,
3 consent agreement or stipulation issued or entered into by the board or its executive
4 director under this chapter.").

5 3. Based on the foregoing Interim Findings of Fact and Conclusions of Law
6 the public health, safety or welfare imperatively required emergency action. A.R.S. §
7 32-1451(D).
8

9 **NOTICE OF HEARING**

10 **YOU ARE HEREBY NOTIFIED** that a Formal Hearing on the Complaint
11 concerning License No. 53075 will be held before **Administrative Law Judge**
12 **Thomas Shedden on May 2, 2019, commencing at 9:00 a.m. at the Office of**
13 **Administrative Hearings located at 1740 W. Adams Street, Phoenix, Arizona and**
14 continuing on successive days until concluded concerning the matters set forth in this
15 Complaint and Notice of Hearing, at which time and place, evidence, testimony and
16 argument in support of the charge set forth in the Complaint will be presented. A
17 transcript of the hearing, together with a written report of the findings, conclusions and
18 recommended decision of the Administrative Law Judge, will be submitted to the
19 Board for its consideration and determination of this matter. If the Board finds that
20 your conduct constitutes unprofessional conduct or that you are mentally or physically
21 unable to safely practice medicine, you shall be subject to censure, probation,
22 suspension or revocation of your license, or any combination thereof, for such time,
23 including permanently, and under such conditions as the Board deems appropriate
24 and just, as provided in A.R.S. § 32-1451.

25 Within twenty (20) days of service of this Complaint and Notice of Hearing upon
26 you, you are requested to file with the Board and the State's attorney a written Answer
27 to the Complaint. Your Answer should contain specific admission or denials of the
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1 allegations of the Complaint, and may contain concise factual allegations, which you
2 contend constitute a ground or grounds for defense.

3 Pursuant to A.R.S. § 32-3206, you have the right to request a copy of the
4 following information from the Board:

- 5 1. Any review conducted by an expert or consultant providing an
6 evaluation of or opinion on the allegations.
- 7 2. Any records on the patient obtained by the board from other health
8 care providers.
- 9 3. The results of any evaluations or tests of the health professional
10 conducted at the board's direction.
- 11 4. Any other factual information that the board will use in making its
12 determination.

13 Please be advised that if you obtain the above-referenced information from the
14 board, you may not release it to any other person or entity or use it in any proceeding
15 or action except the administrative proceeding or appeals related to the administrative
16 proceeding. Violation of this restriction constitutes an act of unprofessional conduct
17 under A.R.S. § 32-3206(B).

18 Pursuant to A.R.S. § 41-1092.06, you have the right to request an informal
19 settlement conference by filing a written request with the Board no later than twenty
20 (20) days before the scheduled hearing. The conference will be held within fifteen (15)
21 days after receipt of your request. Please note that you waive any right to object to the
22 participation of the Board's representative in the final administrative decision of the
23 matter if it is not settled at the conference.

24 In accordance with Title II of the Americans with Disabilities Act (ADA), the
25 Board does not discriminate on the basis of disability in admission to and participation
26 in hearings. Should you, or anyone you call as a witness need special
27 accommodations, please contact the Board office at (480) 551-2734 at least five
28 working days before the hearing.

1 The Office of Administrative Hearings requires that the following notice be
2 included in the Notice of Hearing:

3 Pursuant to Arizona Revised Statutes 41-1092.01, your
4 hearing will be conducted through the Office of Administrative
5 Hearings, an independent agency. Information regarding
6 procedures, practice pointers, or the online filing of motions is
7 available through the Office of Administrative Hearings
8 website at www.azoah.com.

9 DATED this 28th day of March, 2019.

10 ARIZONA MEDICAL BOARD

11 (SEAL)

12 By: Patricia E. McSorley
13 Patricia E. McSorley
14 Executive Director

15 ORIGINAL of the foregoing filed
16 this 28th day of March, 2019 with:

17 ARIZONA MEDICAL BOARD
18 1740 W. Adams
19 Phoenix, Arizona 85007

20 EXECUTED COPY of the foregoing mailed by U.S. mail, e-mail
and U.S. Certified Mail this 28th day of March, 2019 to:

21 James Ryan, M.D.
22 (Address of Record)
23 Respondent

24 EXECUTED COPY of the foregoing
Emailed this 28th day of March, 2019 to:

25 Greg Hanchett, Director
26 Office of Administrative Hearings
27 1740 W. Adams
28 Phoenix, Arizona 85007
oahnoticesofhearing@azoah.com

1 **COPIES** of the foregoing Mailed/Emailed
2 this 28th day of March, 2019 to:

3 Anne Froedge
4 Assistant Attorney General
5 SGD/LES
6 1275 W. Washington
7 Phoenix, Arizona 85007-2997

7 Courtesy copy to:

8 OTTMAR & ASSOC.
9 Court Reporters

9 Michelle Robles
10 Arizona Medical Board Staff
11 # 7752775

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