

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

In the Matter of the Accusation Against

Svetlana Anic, M.D.

Physician's and Surgeon's  
Certificate No. A 72349

Case No. 800-2016-028742

Respondent.

DECISION

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

This Decision shall become effective at 5:00 p.m. on February 26, 2021.

IT IS SO ORDERED: January 28, 2021.

MEDICAL BOARD OF CALIFORNIA



Ronald H. Lewis, M.D., Chair  
Panel A

1 XAVIER BECERRA  
Attorney General of California  
2 STEVE DIEHL  
Supervising Deputy Attorney General  
3 State Bar No. 235250  
California Department of Justice  
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8 **BEFORE THE**  
**MEDICAL BOARD OF CALIFORNIA**  
9 **DEPARTMENT OF CONSUMER AFFAIRS**  
10 **STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:  
12 **SVETLANA ANIC, M.D.**  
13 **24511 W. Jayne Ave.**  
14 **Coalinga State Hospital**  
**Coalinga, CA 93210-9503**  
15 **Physician's and Surgeon's Certificate No. A**  
**72349**  
16 Respondent.  
17

Case No. 800-2016-028742  
OAH No. 2020020300  
**STIPULATED SETTLEMENT AND**  
**DISCIPLINARY ORDER**

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

21 **PARTIES**

- 22 1. William Prasifka (Complainant) is the Executive Director of the Medical Board of  
23 California (Board). He brought this action solely in his official capacity and is represented in this  
24 matter by Xavier Becerra, Attorney General of the State of California, by Steve Diehl,  
25 Supervising Deputy Attorney General.  
26 2. Respondent Svetlana Anic, M.D. (Respondent) is represented in this proceeding by  
27 attorney Mark B. Connely, Esq., whose address is: 1319 Marsh Street, Second Floor, San Luis  
28 Obispo, CA 93401.

1 3. On or about July 1, 2000, the Board issued Physician's and Surgeon's Certificate No.  
2 A 72349 to Svetlana Anic, M.D. (Respondent). The Physician's and Surgeon's Certificate was in  
3 full force and effect at all times relevant to the charges brought in Accusation No. 800-2016-  
4 028742, and will expire on December 31, 2021, unless renewed.

5 **JURISDICTION**

6 4. Accusation No. 800-2016-028742 was filed before the Board, and is currently  
7 pending against Respondent. The Accusation and all other statutorily required documents were  
8 properly served on Respondent on December 18, 2019. Respondent timely filed her Notice of  
9 Defense contesting the Accusation.

10 5. A copy of Accusation No. 800-2016-028742 is attached as exhibit A and incorporated  
11 herein by reference.

12 **ADVISEMENT AND WAIVERS**

13 6. Respondent has carefully read, fully discussed with counsel, and understands the  
14 charges and allegations in Accusation No. 800-2016-028742. Respondent has also carefully read,  
15 fully discussed with her counsel, and understands the effects of this Stipulated Settlement and  
16 Disciplinary Order.

17 7. Respondent is fully aware of her legal rights in this matter, including the right to a  
18 hearing on the charges and allegations in the Accusation; the right to confront and cross-examine  
19 the witnesses against her; the right to present evidence and to testify on her own behalf; the right  
20 to the issuance of subpoenas to compel the attendance of witnesses and the production of  
21 documents; the right to reconsideration and court review of an adverse decision; and all other  
22 rights accorded by the California Administrative Procedure Act and other applicable laws.

23 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and  
24 every right set forth above.

25 **CULPABILITY**

26 9. Respondent understands and agrees that the charges and allegations in Accusation  
27 No. 800-2016-028742, if proven at a hearing, constitute cause for imposing discipline upon her  
28 Physician's and Surgeon's Certificate.

1 10. Respondent does not contest that, at an administrative hearing, Complainant could  
2 establish a prima facie case with respect to the charges and allegations in Accusation No. 800-  
3 2016-028742, a true and correct copy of which is attached hereto as Exhibit A, and that she has  
4 thereby subjected her Physician's and Surgeon's Certificate, No. A 72349 to disciplinary action.  
5 Respondent hereby gives up her right to contest those charges.

6 11. Respondent agrees that her Physician's and Surgeon's Certificate is subject to  
7 discipline and she agrees to be bound by the Board's probationary terms as set forth in the  
8 Disciplinary Order below.

9 **CONTINGENCY**

10 12. This stipulation shall be subject to approval by the Medical Board of California.  
11 Respondent understands and agrees that counsel for Complainant and the staff of the Medical  
12 Board of California may communicate directly with the Board regarding this stipulation and  
13 settlement, without notice to or participation by Respondent or her counsel. By signing the  
14 stipulation, Respondent understands and agrees that she may not withdraw her agreement or seek  
15 to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails  
16 to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary  
17 Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal  
18 action between the parties, and the Board shall not be disqualified from further action by having  
19 considered this matter.

20 13. Respondent agrees that if she ever petitions for early termination or modification of  
21 probation, or if an accusation and/or petition to revoke probation is filed against her before the  
22 Board, all of the charges and allegations contained in Accusation No. 800-2016-028742 shall be  
23 deemed true, correct and fully admitted by Respondent for purposes of any such proceeding or  
24 any other licensing proceeding involving Respondent in the State of California.

25 14. The parties understand and agree that Portable Document Format (PDF) and facsimile  
26 copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile  
27 signatures thereto, shall have the same force and effect as the originals.

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

4 **DISCIPLINARY ORDER**

5 IT IS HEREBY ORDERED that Physician’s and Surgeon’s Certificate No. A 72349 issued  
6 to Respondent Svetlana Anic, M.D. is revoked. However, the revocation is stayed and  
7 Respondent is placed on probation for three (3) years on the following terms and conditions:

8 1. PRACTICE RESTRICTION. Respondent shall not order, prescribe, dispense,  
9 administer, furnish, or possess any controlled substance as defined in the California Uniform  
10 Controlled Substances Act, except as approved by another physician and surgeon whose license is  
11 valid and in good standing. Any prescription or order for controlled substances issued by  
12 Respondent may be filled, prior to and pending subsequent review and approval by another  
13 physician and surgeon whose license is valid and in good standing, which shall occur no more  
14 than seven (7) days after the prescription or order is issued. The physician and surgeon  
15 designated as Respondent’s worksite monitor pursuant to Condition 10, below, may review and  
16 approve Respondent’s controlled substances prescribing as described in this paragraph.

17 2. CONTROLLED SUBSTANCES - MAINTAIN RECORDS AND ACCESS TO  
18 RECORDS AND INVENTORIES. Respondent shall maintain a record of all controlled  
19 substances ordered, prescribed, dispensed, administered, or possessed by Respondent, and any  
20 recommendation or approval which enables a patient or patient’s primary caregiver to possess or  
21 cultivate marijuana for the personal medical purposes of the patient within the meaning of Health  
22 and Safety Code section 11362.5, during probation, showing all of the following: 1) the name and  
23 address of the patient; 2) the date; 3) the character and quantity of controlled substances involved;  
24 and 4) the indications and diagnosis for which the controlled substances were furnished.

25 Respondent shall keep these records in a separate file or ledger, in chronological order. All  
26 records and any inventories of controlled substances shall be available for immediate inspection  
27 and copying on the premises by the Board or its designee at all times during business hours and  
28 shall be retained for the entire term of probation.

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

7           Within 15 calendar days of receiving any lawfully prescribed medications, Respondent  
8 shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone  
9 number; medication name, strength, and quantity; and issuing pharmacy name, address, and  
10 telephone number.

11           4.    ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from the  
12 use of products or beverages containing alcohol.

13           5.    PRESCRIBING PRACTICES COURSE. Within 60 calendar days of the effective  
14 date of this Decision, Respondent shall enroll in a course in prescribing practices approved in  
15 advance by the Board or its designee. Respondent shall provide the approved course provider  
16 with any information and documents that the approved course provider may deem pertinent.  
17 Respondent shall participate in and successfully complete the classroom component of the course  
18 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully  
19 complete any other component of the course within one (1) year of enrollment. The prescribing  
20 practices course shall be at Respondent's expense and shall be in addition to the Continuing  
21 Medical Education (CME) requirements for renewal of licensure.

22           A prescribing practices course taken after the acts that gave rise to the charges in the  
23 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board  
24 or its designee, be accepted towards the fulfillment of this condition if the course would have  
25 been approved by the Board or its designee had the course been taken after the effective date of  
26 this Decision.

27           Respondent shall submit a certification of successful completion to the Board or its  
28 designee not later than 15 calendar days after successfully completing the course, or not later than

1 15 calendar days after the effective date of the Decision, whichever is later.

2 6. MEDICAL RECORD KEEPING COURSE. Within 60 calendar days of the effective  
3 date of this Decision, Respondent shall enroll in a course in medical record keeping approved in  
4 advance by the Board or its designee. Respondent shall provide the approved course provider  
5 with any information and documents that the approved course provider may deem pertinent.  
6 Respondent shall participate in and successfully complete the classroom component of the course  
7 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully  
8 complete any other component of the course within one (1) year of enrollment. The medical  
9 record keeping course shall be at Respondent's expense and shall be in addition to the Continuing  
10 Medical Education (CME) requirements for renewal of licensure.

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

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

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

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

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

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

16 The psychotherapist shall consider any information provided by the Board or its designee  
17 and any other information the psychotherapist deems relevant and shall furnish a written  
18 evaluation report to the Board or its designee. Respondent shall cooperate in providing the  
19 psychotherapist with any information and documents that the psychotherapist may deem  
20 pertinent.

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

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



1           9.    NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7)  
2 days of the effective date of this Decision, Respondent shall provide to the Board the names,  
3 physical addresses, mailing addresses, and telephone numbers of any and all employers and  
4 supervisors. Respondent shall also provide specific, written consent for the Board, Respondent’s  
5 worksite monitor, and Respondent’s employers and supervisors to communicate regarding  
6 Respondent’s work status, performance, and monitoring.

7           For purposes of this section, “supervisors” shall include the Chief of Staff and Health or  
8 Well Being Committee Chair, or equivalent, if applicable, when the Respondent has medical staff  
9 privileges.

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

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

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

- 1 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry  
2 Association or have completed the training required to serve as a collector for the United  
3 States Department of Transportation.
- 4 (b) Its specimen collectors conform to the current United States Department of  
5 Transportation Specimen Collection Guidelines.
- 6 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published  
7 by the United States Department of Transportation without regard to the type of test  
8 administered.
- 9 (d) Its specimen collectors observe the collection of testing specimens.
- 10 (e) Its laboratories are certified and accredited by the United States Department of Health  
11 and Human Services.
- 12 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day  
13 of receipt and all specimens collected shall be handled pursuant to chain of custody  
14 procedures. The laboratory shall process and analyze the specimens and provide legally  
15 defensible test results to the Board within seven (7) business days of receipt of the  
16 specimen. The Board will be notified of non-negative results within one (1) business day  
17 and will be notified of negative test results within seven (7) business days.
- 18 (g) Its testing locations possess all the materials, equipment, and technical expertise  
19 necessary in order to test Respondent on any day of the week.
- 20 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens  
21 for the detection of alcohol and illegal and controlled substances.
- 22 (i) It maintains testing sites located throughout California.
- 23 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line  
24 computer database that allows the Respondent to check in daily for testing.
- 25 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff  
26 access to drug test results and compliance reporting information that is available 24 hours a  
27 day.
- 28 (l) It employs or contracts with toxicologists that are licensed physicians and have

1 knowledge of substance abuse disorders and the appropriate medical training to interpret  
2 and evaluate laboratory biological fluid test results, medical histories, and any other  
3 information relevant to biomedical information.

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

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

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

12 A certified copy of any laboratory test result may be received in evidence in any  
13 proceedings between the Board and Respondent.

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

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

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

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

1 For purposes of this condition, the term “prohibited substance” means an illegal drug, a  
2 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by  
3 Respondent and approved by the Board, alcohol, or any other substance the Respondent has been  
4 instructed by the Board not to use, consume, ingest, or administer to herself.

5 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited  
6 substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the  
7 Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to  
8 any other terms or conditions the Board determines are necessary for public protection or to  
9 enhance Respondent’s rehabilitation.

10 11. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty  
11 (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or  
12 its designee for prior approval as a worksite monitor, the name and qualifications of one or more  
13 licensed physician and surgeon, other licensed health care professional if no physician and  
14 surgeon is available, or, as approved by the Board or its designee, a person in a position of  
15 authority who is capable of monitoring the Respondent at work.

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

22 The worksite monitor shall have an active unrestricted license with no disciplinary action  
23 within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms  
24 and conditions of Respondent’s disciplinary order and agrees to monitor Respondent as set forth  
25 by the Board or its designee.

26 Respondent shall pay all worksite monitoring costs.

27 The worksite monitor shall have face-to-face contact with Respondent in the work  
28 environment on as frequent a basis as determined by the Board or its designee, but not less than

1 once per week; interview other staff in the office regarding Respondent's behavior, if requested  
2 by the Board or its designee; and review Respondent's work attendance.

3 The worksite monitor shall verbally report any suspected substance abuse to the Board and  
4 Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected  
5 substance abuse does not occur during the Board's normal business hours, the verbal report shall  
6 be made to the Board or its designee within one (1) hour of the next business day. A written  
7 report that includes the date, time, and location of the suspected abuse; Respondent's actions; and  
8 any other information deemed important by the worksite monitor shall be submitted to the Board  
9 or its designee within 48 hours of the occurrence.

10 The worksite monitor shall complete and submit a written report monthly or as directed by  
11 the Board or its designee which shall include the following: (1) Respondent's name and  
12 Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3)  
13 the worksite monitor's license number, if applicable; (4) the location or location(s) of the  
14 worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the  
15 names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance;  
16 (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can  
17 lead to suspected substance abuse by Respondent. Respondent shall complete any required  
18 consent forms and execute agreements with the approved worksite monitor and the Board, or its  
19 designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

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

1           12.    VIOLETION OF PROBATION CONDITION FOR SUBSTANCE ABUSING

2    LICENSEES. Failure to fully comply with any term or condition of probation is a violation of  
3 probation.

4           A.       If Respondent commits a major violation of probation as defined by section  
5 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take  
6 one or more of the following actions:

7           (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical  
8 diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of  
9 Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice  
10 order issued by the Board or its designee shall state that Respondent must test negative for at least  
11 a month of continuous biological fluid testing before being allowed to resume practice. For  
12 purposes of determining the length of time a Respondent must test negative while undergoing  
13 continuous biological fluid testing following issuance of a cease-practice order, a month is  
14 defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until  
15 notified in writing by the Board or its designee that he or she may do so.

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

17           (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or  
18 other action as determined by the Board or its designee.

19           B.       If Respondent commits a minor violation of probation as defined by section  
20 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take  
21 one or more of the following actions:

22           (1) Issue a cease-practice order;

23           (2) Order practice limitations;

24           (3) Order or increase supervision of Respondent;

25           (4) Order increased documentation;

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

27           (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in  
28 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of

1 Regulations, at Respondent's expense;

2 (7) Take any other action as determined by the Board or its designee.

3 C. Nothing in this Decision shall be considered a limitation on the Board's authority  
4 to revoke Respondent's probation if he or she has violated any term or condition of probation. If  
5 Respondent violates probation in any respect, the Board, after giving Respondent notice and the  
6 opportunity to be heard, may revoke probation and carry out the disciplinary order that was  
7 stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed  
8 against Respondent during probation, the Board shall have continuing jurisdiction until the matter  
9 is final, and the period of probation shall be extended until the matter is final.

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

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

19 14. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE  
20 NURSES. During probation, Respondent is prohibited from supervising physician assistants and  
21 advanced practice nurses.

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

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

28 Respondent shall submit quarterly declarations not later than 10 calendar days after the end

1 of the preceding quarter.

2 17. GENERAL PROBATION REQUIREMENTS.

3 Compliance with Probation Unit

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

5 Address Changes

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

11 Place of Practice

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

15 License Renewal

16 Respondent shall maintain a current and renewed California physician's and surgeon's  
17 license.

18 Travel or Residence Outside California

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

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

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

28 \\\



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

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

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

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

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

27           20. COMPLETION OF PROBATION. Respondent shall comply with all financial  
28 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the

1 completion of probation. Upon successful completion of probation, Respondent's certificate shall  
2 be fully restored.

3 21. LICENSE SURRENDER. Following the effective date of this Decision, if  
4 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy  
5 the terms and conditions of probation, Respondent may request to surrender her license. The  
6 Board reserves the right to evaluate Respondent's request and to exercise its discretion in  
7 determining whether or not to grant the request, or to take any other action deemed appropriate  
8 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent  
9 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its  
10 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject  
11 to the terms and conditions of probation. If Respondent re-applies for a medical license, the  
12 application shall be treated as a petition for reinstatement of a revoked certificate.

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

18 23. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for  
19 a new license or certification, or petition for reinstatement of a license, by any other health care  
20 licensing action agency in the State of California, all of the charges and allegations contained in  
21 Accusation No. 800-2016-028742 shall be deemed to be true, correct, and admitted by  
22 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or  
23 restrict license.

24  
25 ACCEPTANCE

26 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully  
27 discussed it with my attorney, Mark B. Connely, Esq. I understand the stipulation and the effect  
28 it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement

1 and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the  
2 Decision and Order of the Medical Board of California.

3  
4 DATED: \_\_\_\_\_  
5 SVETLANA LABAT ANIC, M.D.  
6 *Respondent*

7 I have read and fully discussed with Respondent Svetlana Labat Anic, M.D. the terms and  
8 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.  
9 I approve its form and content.

10 DATED: \_\_\_\_\_  
11 MARK B. CONNELLY, ESQ.  
12 *Attorney for Respondent*

13 **ENDORSEMENT**

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

16 DATED: \_\_\_\_\_  
17 Respectfully submitted,  
18 XAVIER BECERRA  
19 *Attorney General of California*

20 STEVE DIEHL  
21 *Supervising Deputy Attorney General*  
22 *Attorneys for Complainant*

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28

1 and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the  
2 Decision and Order of the Medical Board of California.

3  
4 DATED: 10/30/2020   
5 SVETLANA LABAT ANIC, M.D.  
Respondent ✓

6 I have read and fully discussed with Respondent Svetlana Labat Anic, M.D. the terms and  
7 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.  
8 I approve its form and content.


9 DATED: 10/30/2020   
10 MARK B. CONNELLY, ESQ.  
Attorney for Respondent

11  
12  
13 **ENDORSEMENT**

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

16 DATED: 11/3/2020

17 Respectfully submitted,  
18 XAVIER BECERRA  
Attorney General of California

19  
20   
21 STEVE DIEHL  
Supervising Deputy Attorney General  
Attorneys for Complainant

22  
23  
24  
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**Exhibit A**

**Accusation No. 800-2016-028742**

1 XAVIER BECERRA  
Attorney General of California  
2 STEVE DIEHL  
Supervising Deputy Attorney General  
3 State Bar No. 235250  
California Department of Justice  
4 2550 Mariposa Mall, Room 5090  
Fresno, CA 93721  
5 Telephone: (559) 705-2313  
Facsimile: (559) 445-5106  
6 *Attorneys for Complainant*

7  
8 **BEFORE THE**  
9 **MEDICAL BOARD OF CALIFORNIA**  
10 **DEPARTMENT OF CONSUMER AFFAIRS**  
11 **STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

Case No. 800-2016-028742

12 **SVETLANA ANIC, M.D.**  
13 475 W. Pleasant St.  
Coalinga, CA 93210-2424

**ACCUSATION**

14 **Physician's and Surgeon's Certificate**  
15 **No. A 72349,**

16 Respondent.

17  
18  
19 **PARTIES**

20 1. Christine J. Lally (Complainant) brings this Accusation solely in her official capacity  
21 as the Interim Executive Director of the Medical Board of California, Department of Consumer  
22 Affairs (Board).

23 2. On or about July 1, 2000, the Medical Board issued Physician's and Surgeon's  
24 Certificate Number A 72349 to Svetlana Anic, M.D. (Respondent). The Physician's and  
25 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought  
26 herein and will expire on December 31, 2021, unless renewed.

27 \\\

1 **JURISDICTION**

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

5 4. Section 2227 of the Code states:

6 (a) A licensee whose matter has been heard by an administrative law judge of  
7 the Medical Quality Hearing Panel as designated in Section 11371 of the Government  
8 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:

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

10 (2) Have his or her right to practice suspended for a period not to exceed one  
11 year upon order of the board.

12 (3) Be placed on probation and be required to pay the costs of probation  
monitoring upon order of the board.

13 (4) Be publicly reprimanded by the board. The public reprimand may include a  
14 requirement that the licensee complete relevant educational courses approved by the  
board.

15 (5) Have any other action taken in relation to discipline as part of an order of  
16 probation, as the board or an administrative law judge may deem proper.

17 (b) Any matter heard pursuant to subdivision (a), except for warning letters, medical  
18 review or advisory conferences, professional competency examinations, continuing  
19 education activities, and cost reimbursement associated therewith that are agreed to with the  
20 board and successfully completed by the licensee, or other matters made confidential or  
privileged by existing law, is deemed public, and shall be made available to the public by  
the board pursuant to Section 803.1.

21 **STATUTORY PROVISIONS**

22 5. Section 2234 of the Code, states:

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

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

26 (b) Gross negligence.

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

1 repeated negligent acts.

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

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

10 (d) Incompetence.

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

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

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

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

24 6. Unprofessional conduct under section 2234 of the Code is conduct which breaches  
25 the rules or ethical code of the medical profession, or conduct which is unbecoming a member in  
26 good standing of the medical profession, and which demonstrates an unfitness to practice  
27 medicine. (*Shea v. Bd. of Medical Examiners* (1978) 81 Cal.App.3d 564, 575.)

28 7. 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 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.



1 8. Section 2266 of the Code states: “The failure of a physician and surgeon to maintain  
2 adequate and accurate records relating to the provision of services to their patients constitutes  
3 unprofessional conduct.”

4 **DEFINITIONS**

5 9. Clonazepam is an anti-anxiety medication in the benzodiazepine family used to  
6 prevent seizures, panic disorder, and akathisia. Clonazepam is a Schedule IV controlled  
7 substance pursuant to Code of Federal Regulations Title 21 section 1308.14(c). It is a Schedule  
8 IV controlled substance pursuant to Health and Safety Code section 11057, subdivision (d), and a  
9 dangerous drug pursuant to Business and Professions Code section 4022.

10 10. Lorazepam is a member of the benzodiazepine family and is a fast-acting anti-anxiety  
11 medication used for the short-term management of severe anxiety. Lorazepam is a Schedule IV  
12 controlled substance pursuant to Code of Federal Regulations Title 21 section 1308.14(c) and  
13 Health and Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to  
14 Business and Professions Code section 4022.

15 11. Phentermine is a stimulant derived from amphetamine, used to suppress appetite and  
16 treat obesity. Phentermine is a Schedule IV controlled substance pursuant to Code of Federal  
17 Regulations Title 21 section 1308.14(c). It is a Schedule IV controlled substance pursuant to  
18 Health and Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to  
19 Business and Professions Code section 4022.

20 12. Triazolam is a sedative in the benzodiazepine family used to treat insomnia.  
21 Triazolam is a Schedule IV controlled substance pursuant to Code of Federal Regulations Title 21  
22 section 1308.14(c). It 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  
24 section 4022.

25 13. Zolpidem tartrate is a sedative and hypnotic used for short term treatment of  
26 insomnia. Zolpidem tartrate is a Schedule IV controlled substance pursuant to Code of Federal  
27 Regulations Title 21 section 1308.14(c). It is a Schedule IV controlled substance pursuant to  
28

1 Health and Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to  
2 Business and Professions Code section 4022.

3 **FACTUAL ALLEGATIONS**

4 14. On or about November 23, 2016, Respondent called in a prescription to a pharmacy  
5 in Blue Jay, California. The prescription was for antibiotics and for Valium (diazepam), a  
6 Schedule IV controlled substance. Respondent called the prescription in for a fictitious patient  
7 named "Joanne Kenter." Respondent was not, in fact, treating any person by that name, and  
8 intended to obtain the medications for her own use. The pharmacist who received the call noted  
9 that "Joanne Kenter" had a recent prior prescription for Valium, and that the new prescription  
10 appeared to be an early refill. Later that day, Respondent appeared at the pharmacy to pick up the  
11 prescription. The pharmacist noted that Respondent's voice matched the voice of the doctor who  
12 had called in the prescription, and refused to fill the prescription. Respondent became irate, and  
13 an altercation ensued.

14 15. The same day, at approximately 6:25 p.m., San Bernardino County Sheriff's deputies  
15 were dispatched regarding the altercation at the pharmacy. The pharmacist reported that the  
16 individual involved was last seen walking away on State Highway 189. Respondent was  
17 contacted by a Sheriff's deputy while walking southbound on State Highway 189, away from the  
18 pharmacy. Respondent refused the deputy's commands to stop and come to him, and instead  
19 turned her back, told the deputy to "go away," and continued to walk. Respondent refused to put  
20 down her phone when the deputy commanded her to do so. When the deputy asked if she knew  
21 why he was there, Respondent replied, "I don't care." When the deputy attempted to restrain  
22 Respondent, she pulled away. The deputy struggled to handcuff Respondent, as she repeatedly  
23 pulled her wrists away from him and kicked him. The deputy took Respondent to the ground, and  
24 ultimately placed handcuffs on her. Respondent was placed in the backseat of a patrol car, where  
25 she proceeded to kick the rear passenger window. After being warned to stop, Respondent kicked  
26 the window a second time, and was placed in ankle restraints for approximately five minutes.  
27 Respondent demonstrated an inability to maintain her balance, both before and after being placed  
28 in the patrol car, and her upper body swayed in all directions. Respondent had slurred speech,

1 dilated pupils, and droopy eyelids. A blood sample was taken from Respondent at approximately  
2 5:50 a.m. the following morning. The blood sample later tested positive for opiates and  
3 benzodiazepines.

4 16. Respondent prescribed the following medications to herself, using the false names  
5 "Joanne Kenter," "Joanna Kenter," or "Joanne Kanter:":

| Date     | Medication        | Strength | Quantity   |
|----------|-------------------|----------|------------|
| 4/16/15  | Clonazepam        | 1 mg     | 30 tablets |
| 5/13/15  | Phentermine       | 37.5 mg  | 60 tablets |
| 5/13/15  | Clonazepam        | 1 mg     | 90 tablets |
| 6/23/15  | Zolpidem tartrate | 10 mg    | 30 tablets |
| 6/23/15  | Triazolam         | 0.25 mg  | 5 tablets  |
| 7/16/15  | Lorazepam         | 1 mg     | 30 tablets |
| 7/20/15  | Clonazepam        | 1 mg     | 30 tablets |
| 9/5/15   | Clonazepam        | 0.5 mg   | 30 tablets |
| 10/26/15 | Lorazepam         | 1 mg     | 15 tablets |
| 10/28/15 | Lorazepam         | 1 mg     | 60 tablets |
| 11/11/15 | Zolpidem tartrate | 10 mg    | 10 tablets |
| 11/30/15 | Zolpidem tartrate | 10 mg    | 10 tablets |
| 12/7/15  | Zolpidem tartrate | 10 mg    | 60 tablets |
| 1/18/16  | Zolpidem tartrate | 10 mg    | 30 tablets |
| 2/5/16   | Zolpidem tartrate | 10 mg    | 60 tablets |
| 3/8/16   | Zolpidem tartrate | 10 mg    | 60 tablets |
| 3/15/16  | Clonazepam        | 0.5 mg   | 60 tablets |
| 6/1/16   | Zolpidem tartrate | 10 mg    | 60 tablets |
| 11/21/16 | Clonazepam        | 1 mg     | 20 tablets |

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28

1 17. Respondent prescribed the following medications to another possibly fictitious  
2 patient, Patient A. In an investigative interview, Respondent stated that Patient A is a real person;  
3 however, Patient A lives in Belgrade, Serbia, and Respondent kept no medical records for Patient  
4 A apart from whatever records were maintained by Patient's A's physician in Belgrade.  
5 Respondent explained that she prescribed to Patient A because Patient A was a former patient in  
6 Respondent's private practice prior to 2012, and she was asked to prescribe to Patient A while  
7 Patient A was visiting the United States.

| Date     | Medication        | Strength | Quantity    |
|----------|-------------------|----------|-------------|
| 3/22/15  | Clonazepam        | 1 mg     | 30 tablets  |
| 4/16/15  | Clonazepam        | 1 mg     | 2 tablets   |
| 7/30/15  | Amphetamines      | 20 mg    | 240 tablets |
| 12/7/15  | Zolpidem tartrate | 10 mg    | 60 tablets  |
| 12/14/15 | Amphetamines      | 20 mg    | 21 tablets  |
| 1/7/16   | Zolpidem tartrate | 10 mg    | 10 tablets  |

15  
16 **FIRST CAUSE FOR DISCIPLINE**

17 **(Gross Negligence)**

18 18. Respondent Svetlana Anic, M.D. is subject to disciplinary action under section 2234,  
19 subdivision (b), in that she engaged in acts amounting to gross negligence. The circumstances are  
20 set forth in paragraphs 14 through 17, above, which are incorporated by reference as if fully set  
21 forth. Additional circumstances are as follows:

22 19. The standard of care is to write prescriptions that accurately state the person for  
23 whom the medication is intended. Writing a prescription in the name of a false or fictitious  
24 person potentially makes it impossible to determine if the actual patient is receiving an excessive  
25 amount of controlled substances. Respondent's acts of writing prescriptions for controlled  
26 substances for her own use, using a false or fictitious name, constitutes gross negligence.

27 \\\n

1       20. The standard of care allows a physician to prescribe controlled substances to herself  
2 only in emergency settings, or isolated settings where there is no other qualified physician  
3 available, and only for short-term, minor problems. Respondent treated herself using controlled  
4 substances over a nineteen month period, while she resided in areas of California where other  
5 physicians were available who could have prescribed to her, had she presented herself as a  
6 patient. By prescribing controlled substances to herself over an extended period of time, under  
7 circumstances where other treating physicians were available, Respondent committed acts  
8 amounting to gross negligence.

9       21. The standard of care is to document the care provided to every patient's treatment,  
10 including a diagnosis, medications prescribed, benefits and side effects of medications, and  
11 follow-up visits to assess the effects of medication. Respondent kept no medical records  
12 whatsoever regarding the medications she prescribed to herself or to Patient A. Respondent's  
13 failure to maintain any records of treatment for herself or for Patient A constitutes gross  
14 negligence.

15       22. The standard of care is to document the reason for prescribing controlled substances  
16 at a higher than recommended dose. The maximum recommended dose for zolpidem tartrate is  
17 10 mg per day. Respondent prescribed zolpidem tartrate to herself consistent with a rate of 10 mg  
18 per day on or about December 7, 2015. However, her subsequent self-prescriptions for zolpidem  
19 tartrate during January, February, and March, 2016, were consistent with a rate of 20 mg per day,  
20 double the maximum recommended amount. Respondent's excessive self-prescription of a  
21 controlled substance without any documented justification whatsoever constitutes gross  
22 negligence.

### 23                                   **SECOND CAUSE FOR DISCIPLINE**

#### 24                                   **(Repeated Negligent Acts)**

25       23. Respondent Svetlana Anic, M.D. is subject to disciplinary action under section 2234,  
26 subdivision (c), in that she engaged in repeated acts of negligence. The circumstances are set  
27 forth in paragraphs 14 through 22, above, which are incorporated here by reference as if fully set  
28 forth.

1 **THIRD CAUSE FOR DISCIPLINE**

2 **(Dishonest and Corrupt Acts)**

3 24. Respondent Svetlana Anic, M.D. is subject to disciplinary action under section 2234,  
4 subdivision (e), in that she engaged in dishonest and corrupt acts that were substantially related to  
5 the qualifications, functions, or duties of a physician and surgeon. The circumstances are set  
6 forth in paragraphs 14 through 17, above, which are incorporated by reference as if fully set forth.

7 **FOURTH CAUSE FOR DISCIPLINE**

8 **(Prescribing to Self or Use in a Dangerous Manner)**

9 25. Respondent Svetlana Anic, M.D. is subject to disciplinary action under section 2239,  
10 subdivision (e), in that she prescribed or administered to herself a controlled substance, or used a  
11 dangerous drug in such a manner as to be dangerous or injurious to herself or another person or to  
12 the public. The circumstances are set forth in paragraphs 14 through 17, above, which are  
13 incorporated by reference as if fully set forth.

14 **FIFTH CAUSE FOR DISCIPLINE**

15 **(General Unprofessional Conduct)**

16 26. Respondent Svetlana Anic, M.D. is subject to disciplinary action under section 2234  
17 in that she engaged in unprofessional conduct. The circumstances are set forth in paragraphs 14  
18 through 17, above, which are incorporated by reference as if fully set forth.

19 **SIXTH CAUSE FOR DISCIPLINE**

20 **(Dishonest and Corrupt Acts)**

21 27. Respondent Svetlana Anic, M.D. is subject to disciplinary action under section 2266,  
22 in that she failed to maintain adequate and accurate records relating to the provision of services to  
23 herself or to Patient A. The circumstances are set forth in paragraphs 14 through 17, and 21  
24 through 22, above, which are incorporated by reference as if fully set forth.

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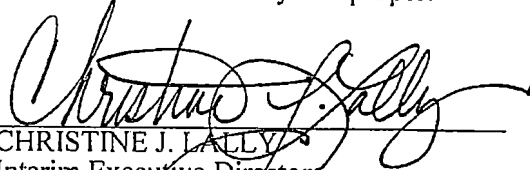
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**PRAYER**

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

1. Revoking or suspending Physician's and Surgeon's Certificate Number A 72349, issued to Svetlana Anic, M.D.;
2. Revoking, suspending or denying approval of Svetlana Anic, M.D.'s authority to supervise physician assistants and advanced practice nurses;
3. Ordering Svetlana Anic, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and
4. Taking such other and further action as deemed necessary and proper.

DATED: December 18, 2019

  
CHRISTINE J. LALLY  
Interim Executive Director  
Medical Board of California  
Department of Consumer Affairs  
State of California  
*Complainant*

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