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FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
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BY: Anna Logan ANALYST

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

13 In the Matter of the Accusation Against:

Case No. 800-2017-031932

14 **KHRISTINE ELAINE EROSHEVICH, M.D.**
15 **269 South Beverly Drive #861**
16 **Beverly Hills, CA 90212**

A C C U S A T I O N

17 **Physician's and Surgeon's Certificate**
18 **No. C 37980,**

Respondent.

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20 **PARTIES**

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

24 2. On or about May 8, 1978, the Medical Board issued Physician's and Surgeon's
25 Certificate Number C 37980 to Khristine Elaine Eroshevich, M.D. (Respondent). This
26 Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the
27 charges brought herein and will expire on November 30, 2021, unless renewed.

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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 unless otherwise indicated.

4 4. Section 2227 of the Code states:

5 “(a) A licensee whose matter has been heard by an administrative law judge of the Medical
6 Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default
7 has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary
8 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 year upon
11 order of the board.

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

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

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

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

24 5. Section 2234 of the Code, states:

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

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1 11. During the course of her care and treatment of the Patient, the Patient became
2 embroiled in a dispute with her neighbors that ultimately resulted in the filing of at least one civil
3 lawsuit between the Patient and her neighbors in Los Angeles Superior Court.

4 12. During the course of those legal proceedings, Respondent signed and submitted
5 numerous Declarations, under penalty of perjury, at the request of the Patient and in her support.

6 13. In the Declarations, Respondent represents that she is the “doctor” of the Patient.

7 14. In a February 14, 2017, Declaration filed with the Los Angeles Superior Court in one
8 of the civil lawsuits between the Patient and her neighbors, Respondent attested to the following:

- 9 • “I was the doctor for [the Patient] during the harassment of [the Patient] by [her
10 neighbors] back in 2007.”
- 11 • “Back in 2007, Ms. H. would go onto Ms. B.’s property and spray [the Patient] down
12 with the hose. Ms. H. finds any opportunity to damage [the Patient] emotionally and
13 physically.”
- 14 • “I would tend to believe that Ms. B. is not a credible person and that most of those
15 statements appear to be made up.”
- 16 • “Ms. B. and Ms. S. are in a same sex relationship. The reason they are so hostile
17 towards [the Patient] [sic] because they both tried to engage her in some unwanted
18 activities.”
- 19 • “[The neighbors] listed severely bullied and terrorized [the Patient]...”
- 20 • “[The Patient] is disabled and suffers from adult selective mutism.”
- 21 • “I treated [the Patient] for several anxiety disorders that were caused by [her
22 neighbors]. They have and continue to gang up on her and have not stopped. Ms. H.
23 is generating future medical bills which can be legally collected by [the Patient].”
- 24 • “Today, those anxiety disorders have resurfaced due to harassment especially by Ms.
25 H. and she will be financially responsible for treatments since she was the cause of
26 them.”

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- 1 • “[The Patient] will need to be treated again and the cost of those treatments will be
2 estimated at around \$68,000.00 (18 months of outpatient treatment, three sessions
3 times a week).” (Emphasis in original.)
- 4 • “Ms. B. intentionally walks her dog in front of [the Patient’s] house and makes
5 remarks. Again, she is ego driven to do this because she has been able to get away
6 with this type of allowable behavior in the past.”
- 7 • “If you allow them to once again emotionally rape [the Patient] she will need
8 treatment and be set back when she worked so hard on being in a good place
9 emotionally and mentally.”
- 10 • “I will be referring [the Patient] to a lawyer that specializes in hates [sic] crimes and
11 harassing disabled people and make sure this does not happen to her again. The
12 responsibility [sic] parties will be [her neighbors] since they are the main cuprite’s
13 [sic] behind all of this...”

14 15. Attached to the Declaration were bills from Respondent for services rendered to the
15 Patient totaling \$5,000.00.

16 16. In another Declaration, also dated February 14, 2017, Respondent attests to the
17 following:

- 18 • “In my opinion, the [Letter] appears to [sic] from a female person who has a history of
19 drug usage.”
- 20 • “Ms. W. created events and stories that never took place about [the Patient]...”
- 21 • “In my opinion, Ms. W. is suffering paranoia from her drug usage.”
- 22 • “[T]he defendant’s email states that [the Patient] was yelling at her and cursing at her.
23 I will testify that this is not [the Patient’s] behavior at all.”
- 24 • “In my opinion, Ms. W. is not credible.”

25 17. On or about March 15, 2017, Respondent sent a letter in connection with a civil
26 lawsuit between the Patient and her neighbors to counsel in the action. In the letter, Respondent
27 states that she is the Patient’s doctor with power of attorney to speak on her behalf. The letter
28 contains legal opinions and states that Respondent “will protect [the Patient’s] rights as a disabled

1 person.”

2 18. In a November 15, 2017, Declaration submitted to the Los Angeles Superior Court,
3 Respondent attested to the following:

- 4 • “I am currently caring for [the Patient] and I have included her medical bills.”
- 5 • “[The Patient] is NOT safe living next door to J.S.”

6 19. Attached to the Declaration was a bill from Respondent to the Patient for “Room and
7 Board” for the time period between July through December 2017. The amount charged totaled
8 \$7,900.00. The bill was initialed by Respondent. According to Respondent, those charges were
9 for occasions when the Patient stayed in Respondent’s home.

10 20. In a January 11, 2018, Declaration submitted to the Los Angeles Superior Court,
11 Respondent attested to the following:

- 12 • “J.S. is a clear and present danger to [the Patient] and I fear for [the Patient’s] safety
13 and well-being.”
- 14 • “Because [the Patient] has offered these facts in her sessions I feel it is important to
15 break patient-doctor confidentiality with [the Patient’s] permission so the Court has
16 some factual basis of the problems [the Patient] has been facing.”
- 17 • “[The Patient] is not safe in her home and therefore I am providing a safe
18 environment for her to recover from her major surgery along with emergency
19 counseling.”
- 20 • “J.S. started threatening [the Patient] back in March 2017 and it did not stop before
21 and after [the Patient’s] surgery. It continues today.”
- 22 • “J.S. has falsely file [sic] police reports against [the Patient].”
- 23 • “[The Patient] never trespassed on J.S.’s property as J.S. claims.”
- 24 • “J.S. is trying to illegally obtain title to [the Patient’s property] with aggression and
25 false allegations. The garage (in question) was legally built, permitted and there is a
26 Certificate of Occupancy dated 2000.”
- 27 • “J.S. has been reported for elder abuse for sending her friends to [the Patient’s]
28 mother’s residence to harm [the Patient’s] mother.”

- 1 • “J.S. has also sexually harassed [the Patient] by constantly questioning her if her
2 breasts were real.”
- 3 • “J.S. has intentionally placed Nest audio cameras by [the Patient’s] window to record
4 her sexual activities.”
- 5 • “J.S. has been illegally recording [the Patient] and then making false allegations with
6 those illegal recordings just to try and ruin her life because [the Patient] rejected her
7 sexual flirts.”
- 8 • “I have enclosed [the Patient’s] medical expenses that J.S. is liable for 2017.”
- 9 • “I have enclosed [the Patient’s] living expenses that J.S. is liable for 2017.”
- 10 • “I have been involved with [the Patient’s] medical condition from the first diagnosis,
11 surgery and now recovery.”

12 21. Respondent admits that information contained in these Declarations and to which she
13 attested to under penalty of perjury was not within her personal knowledge. Instead, the factual
14 accounts in her Declarations pertaining to the Patient’s interactions with her neighbors are based
15 entirely on accounts from the Patient. Respondent further admits that the Patient wrote the
16 Declarations and that she signed them, even though she did not know if the information contained
17 therein was true, because she thought it would help the Patient in her court cases.

18 22. Respondent admits that she and the Patient not only had a doctor-patient relationship
19 but also a friendship during the time that she treated the Patient. In that capacity, Respondent
20 admits that she and the Patient traveled to New York together to visit Respondent’s family, dined
21 together on more than one occasion, went shopping together and traveled to Palm Springs,
22 California together. Respondent also admits that in addition to having the Patient stay with her,
23 she also stayed with the Patient when the Patient was recovering from surgery.

24 23. Although it is not documented, Respondent purports to have terminated her doctor-
25 patient relationship with the Patient sometime in 2018.

26 24. Respondent has no medical records for the Patient.

27 25. The standard of care in the medical community requires that physicians, particularly
28 psychiatrists, practice ethically and maintain strict boundaries with their patients. Psychiatrists

1 shall be ever vigilant about the impact that his or her conduct has upon the boundaries of the
2 doctor-patient relationship, and thus upon the well-being of the patient. These requirements are
3 important because of the private, highly personal, and sometimes intensely emotional nature of
4 the relationship between a psychiatrist and his or her patient. The inherent inequality in the
5 doctor-patient relationship may lead to exploitation of the patient.

6 26. Respondent committed an extreme departure from the standard of care when she
7 allowed her relationship with the Patient to cross the boundaries of the doctor-patient relationship.
8 Specifically, Respondent departed from the standard of care when she allowed the Patient to
9 reside with her and when she traveled with the Patient, among other acts.

10 27. The standard of care in the medical community requires that a physician shall uphold
11 the standards of professionalism and be honest in all professional interactions. If a physician is
12 fearful that a patient will worsen unless he or she commits unprofessional conduct, then the
13 physician should consult with other professionals and/or refer the patient to a higher level of care,
14 such as day treatment or hospitalization. Presenting a Patient's falsehoods as statements of fact
15 and/or medical recommendation falls below the standard of care.

16 28. Respondent committed an extreme departure from the standard of care when she
17 submitted and signed declarations under the penalty of perjury, which contained inappropriate
18 legal opinions and purported factual information and professional opinions about various people
19 (the Patient's neighbors) who she had never professionally examined.

20 **FIRST CAUSE FOR DISCIPLINE**

21 **(Gross Negligence)**

22 29. Respondent Khristine Elaine Eroshevich, M.D. is subject to disciplinary action under
23 Code section 2234, subdivision (b), in that she committed gross negligence in her care and
24 treatment of the Patient. The circumstances are as follows:

25 30. Complainant refers to and, by this reference, incorporates herein Paragraphs 7
26 through 28, above, as though fully set forth.

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1 **SECOND CAUSE FOR DISCIPLINE**

2 **(Repeated Negligent Acts)**

3 31. Respondent Khristine Elaine Eroshevich, M.D. is subject to disciplinary action under
4 Code section 2234, subdivision (c), in that she committed repeated negligent acts in her care and
5 treatment of the Patient. The circumstances are as follows:

6 32. Complainant refers to and, by this reference, incorporates herein Paragraphs 7
7 through 28, above, as though fully set forth.

8 **THIRD CAUSE FOR DISCIPLINE**

9 **(Inadequate Record Keeping)**

10 33. Respondent Khristine Elaine Eroshevich, M.D. is subject to disciplinary action under
11 section 2234, subdivision (a), and 2266 in that she failed to maintain adequate records for the
12 Patient. The circumstances are as follows:

13 34. Complainant refers to and, by this reference, incorporates herein Paragraphs 7
14 through 28, above, as though fully set forth.

15 35. Respondent treated the Patient from 2007 until 2018.

16 36. On or about December 7, 2018, an investigator for Complainant, sent Respondent a
17 subpoena duces tecum for the medical records of the Patient between the dates of January 1,
18 2014, through the "present."

19 37. On or about February 24, 2019, the investigator for Complainant received a
20 Certification of No Records from Respondent for the Patient, indicating that Respondent has no
21 records for the Patient for the requested time period.

22 **DISCIPLINARY CONSIDERATIONS**

23 38. To determine the degree of discipline, if any, to be imposed on Respondent Khristine
24 Elaine Eroshevich, M.D., Complainant alleges that on or about March 2, 2012, in a prior
25 disciplinary action titled *In the Matter of the Second Amended Accusation Against: Khristine*
26 *Eroshevich, M.D.* before the Medical Board of California, in Case Number 17-2009-197998,
27 Respondent's license was revoked for dishonest acts and the conviction of a crime. Specifically,
28 Respondent admitted to making false statements in a psychiatric report and billing statement

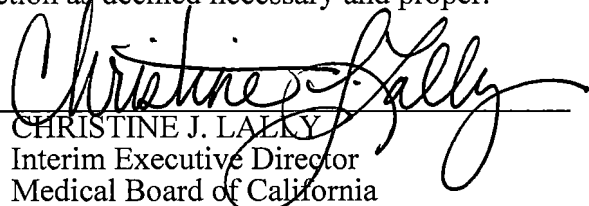
1 regarding a workers compensation claimant. Further, on or about October 28, 2010, Respondent
2 was convicted by a jury in the case of *People of the State of California v. Khristine Eroshevich, et*
3 *al.*, Los Angeles Superior Court Case No. BA353907 of violating Health & Safety Code section
4 11173, subdivision (a) - unlawfully prescribing a controlled substance, an opiate, namely
5 hydrocodone (Vicodin) by fraud, deceit or misrepresentation or concealment of a material fact, a
6 misdemeanor. Respondent was sentenced to one year of summary probation and ordered to pay
7 certain fine and fees totaling \$170.00. The revocation of Respondent's license, however, was
8 stayed and Respondent was placed on five (5) years of probation, effective March 30, 2012, with
9 the requirements that her license be suspended for ninety (90) days, that she complete additional
10 education courses, a prescribing practices course, the professionalism program (Ethics course), a
11 psychiatric and medical evaluation, have her practice and billing monitored and other standard
12 terms and conditions. That decision is now final and is incorporated by reference as if fully set
13 forth herein.

14 **PRAYER**

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

- 17 1. Revoking or suspending Physician's and Surgeon's Certificate Number C 37980,
18 issued to Khristine Elaine Eroshevich, M.D.;
- 19 2. Revoking, suspending or denying approval of Khristine Elaine Eroshevich, M.D.'s
20 authority to supervise physician assistants and advanced practice nurses;
- 21 3. Ordering Khristine Elaine Eroshevich, M.D., if placed on probation, to pay the Board
22 the costs of probation monitoring; and
- 23 4. Taking such other and further action as deemed necessary and proper.

24 DATED: FEB 26 2020

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