

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

**In the Matter of the First Amended)
Petition to Revoke Probation Against:)
)
)
Rehana Aziz, M.D.)
)
Physician's and Surgeon's)
Certificate No. A 54063)
)
Respondent)
_____)**

Case No. 800-2017-034648


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 April 27, 2018.

IT IS SO ORDERED: March 28, 2018.

MEDICAL BOARD OF CALIFORNIA



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

1 XAVIER BECERRA
Attorney General of California
2 MATTHEW M. DAVIS
Supervising Deputy Attorney General
3 STEVE DIEHL
Deputy Attorney General
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California Department of Justice
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7 *Attorneys for Complainant*

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

11 In the Matter of the First Amended Petition to
12 Revoke Probation Against:

13 **REHANA AZIZ, M.D.**
14 9607 N Willey Ct.
Fresno, CA 93720-5414

15 Physician's and Surgeon's Certificate
No. A 54063

16 Respondent.

Case No. 800-2017-034648

OAH No. 2017100556

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

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

20 PARTIES

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

25 2. Respondent Rehana Aziz, M.D. (Respondent) is represented in this proceeding by
26 attorney Adam B. Brown, whose address is: 3848 W. Carson Street, Suite 206, Torrance,
27 California 90503.

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1 CULPABILITY

2 9. Respondent admits the truth of each and every charge and allegation in First
3 Amended Petition to Revoke Probation No. 800-2017-034648.

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

7 CONTINGENCY

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

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

21 13. In consideration of the foregoing admissions and stipulations, the parties agree that
22 the Board may, without further notice or formal proceeding, issue and enter the following
23 Disciplinary Order:

24 DISCIPLINARY ORDER

25 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 54063 issued
26 to Respondent Rehana Aziz, M.D. is revoked. However, the revocation is stayed and Respondent
27 is placed on probation for six (6) years, subject to the same terms and conditions as originally
28 imposed in Case No. 800-2014-008996, as follows:

1 1. CLINICAL DIAGNOSTIC EVALUATIONS AND REPORTS: Within thirty (30)
2 calendar days of the effective date of Decision No. 800-2014-008996, and on whatever periodic
3 basis thereafter as may be required by the Board or its designee, Respondent shall undergo and
4 complete a clinical diagnostic evaluation, including any and all testing deemed necessary, by a
5 Board-appointed board certified physician and surgeon. The examiner shall consider any
6 information provided by the Board or its designee and any other information he or she deems
7 relevant, and shall furnish a written evaluation report to the Board or its designee.

8 The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon
9 who holds a valid, unrestricted license, has three (3) years' experience in providing evaluations of
10 physicians and surgeons with substance abuse disorders, and is approved by the Board or its
11 designee. The clinical diagnostic evaluation shall be conducted in accordance with acceptable
12 professional standards for conducting substance abuse clinical diagnostic evaluations. The
13 evaluator shall not have a current or former financial, personal, or business relationship with
14 Respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and
15 independent evaluation. The clinical diagnostic evaluation report shall set forth, in the
16 evaluator's opinion, whether Respondent has a substance abuse problem, whether Respondent is a
17 threat to himself or herself or others, and recommendations for substance abuse treatment,
18 practice restrictions, or other recommendations related to Respondent's rehabilitation and ability
19 to practice safely. If the evaluator determines during the evaluation process that Respondent is a
20 threat to himself or herself or others, the evaluator shall notify the Board within twenty-four (24)
21 hours of such a determination.

22 In formulating his or her opinion as to whether Respondent is safe to return to either part-
23 time or full-time practice and what restrictions or recommendations should be imposed, including
24 participation in an inpatient or outpatient treatment program, the evaluator shall consider the
25 following factors: Respondent's license type; Respondent's history; Respondent's documented
26 length of sobriety (i.e., length of time that has elapsed since Respondent's last substance use);
27 Respondent's scope and pattern of substance abuse; Respondent's treatment history, medical
28 history and current medical condition; the nature, duration and severity of Respondent's

1 substance abuse problem or problems; and whether Respondent is a threat to himself or herself or
2 the public.

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

8 The Board shall review the clinical diagnostic evaluation report within five (5) business
9 days of receipt to determine whether Respondent is safe to return to either part-time or full-time
10 practice and what restrictions or recommendations shall be imposed on Respondent based on the
11 recommendations made by the evaluator. Respondent shall not be returned to practice until she
12 has at least thirty (30) days of negative biological fluid tests or biological fluid tests indicating
13 that she has not used, consumed, ingested, or administered to himself or herself a prohibited
14 substance, as defined in section 1361.51, subdivision (e), of Title 16 of the California Code of
15 Regulations.

16 Clinical diagnostic evaluations conducted prior to the effective date of Decision No. 800-
17 2014-008996 shall not be accepted towards the fulfillment of this requirement. The cost of the
18 clinical diagnostic evaluation, including any and all testing deemed necessary by the examiner,
19 the Board or its designee, shall be borne by the licensee.

20 Respondent shall not engage in the practice of medicine until notified by the Board or its
21 designee that she is fit to practice medicine safely. The period of time that Respondent is not
22 practicing medicine shall not be counted toward completion of the term of probation. Respondent
23 shall undergo biological fluid testing as required in this Decision at least two (2) times per week
24 while awaiting the notification from the Board if she is fit to practice medicine safely.

25 Respondent shall comply with all restrictions or conditions recommended by the examiner
26 conducting the clinical diagnostic evaluation within fifteen (15) calendar days after being notified
27 by the Board or its designee.

28 2. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to

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

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

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

- 19 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry
20 Association or have completed the training required to serve as a collector for the United
21 States Department of Transportation.
- 22 (b) Its specimen collectors conform to the current United States Department of
23 Transportation Specimen Collection Guidelines
- 24 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published
25 by the United States Department of Transportation without regard to the type of test
26 administered.
- 27 (d) Its specimen collectors observe the collection of testing specimens.
- 28 (e) Its laboratories are certified and accredited by the United States Department of Health

1 and Human Services.

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

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

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

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

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

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

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

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

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

26 The contract shall require that the laboratory directly notify the Board or its designee of
27 non-negative results within one (1) business day and negative test results within seven (7)
28 business days of the results becoming available. Respondent shall maintain this laboratory or

1 service contract during the period of probation.

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

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

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

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

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

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

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

28 3. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7)

1 days of the effective date of this Decision, Respondent shall provide to the Board the names,
2 physical addresses, mailing addresses, and telephone numbers of any and all employers and
3 supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's
4 worksite monitor, and Respondent's employers and supervisors to communicate regarding
5 Respondent's work status, performance, and monitoring.

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

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

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

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

25 Respondent shall pay all worksite monitoring costs.

26 The worksite monitor shall have face-to-face contact with Respondent in the work
27 environment on as frequent a basis as determined by the Board or its designee, but not less than
28 once per week; interview other staff in the office regarding Respondent's behavior, if requested

1 by the Board or its designee; and review Respondent's work attendance.

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

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

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

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1 5. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within thirty (30) days of
2 the effective date of this Decision, Respondent shall submit to the Board or its designee, for its
3 prior approval, the name of a substance abuse support group which she shall attend for the
4 duration of probation. Respondent shall attend substance abuse support group meetings at least
5 once per week, or as ordered by the Board or its designee. Respondent shall pay all substance
6 abuse support group meeting costs.

7 The facilitator of the substance abuse support group meeting shall have a minimum of three
8 (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed
9 or certified by the state or nationally certified organizations. The facilitator shall not have a
10 current or former financial, personal, or business relationship with Respondent within the last five
11 (5) years. Respondent's previous participation in a substance abuse group support meeting led by
12 the same facilitator does not constitute a prohibited current or former financial, personal, or
13 business relationship.

14 The facilitator shall provide a signed document to the Board or its designee showing
15 Respondent's name, the group name, the date and location of the meeting, Respondent's
16 attendance, and Respondent's level of participation and progress. The facilitator shall report any
17 unexcused absence by Respondent from any substance abuse support group meeting to the Board,
18 or its designee, within twenty-four (24) hours of the unexcused absence.

19 6. CONTROLLED SUBSTANCES - PARTIAL RESTRICTION. Respondent shall not
20 order, prescribe, dispense, administer, furnish, or possess any controlled substances as defined by
21 the California Uniform Controlled Substances Act, except for those drugs listed in Schedules III,
22 IV, and V of the Act.

23 Respondent shall not issue an oral or written recommendation or approval to a patient or a
24 patient's primary caregiver for the possession or cultivation of marijuana for the personal medical
25 purposes of the patient within the meaning of Health and Safety Code section 11362.5. If
26 Respondent forms the medical opinion, after an appropriate prior examination and medical
27 indication, that a patient's medical condition may benefit from the use of marijuana, Respondent
28 shall so inform the patient and shall refer the patient to another physician who, following an

1 appropriate prior examination and medical indication, may independently issue a medically
2 appropriate recommendation or approval for the possession or cultivation of marijuana for the
3 personal medical purposes of the patient within the meaning of Health and Safety Code section
4 11362.5. In addition, Respondent shall inform the patient or the patient's primary caregiver that
5 Respondent is prohibited from issuing a recommendation or approval for the possession or
6 cultivation of marijuana for the personal medical purposes of the patient and that the patient or
7 the patient's primary caregiver may not rely on Respondent's statements to legally possess or
8 cultivate marijuana for the personal medical purposes of the patient. Respondent shall fully
9 document in the patient's chart that the patient or the patient's primary caregiver was so
10 informed. Nothing in this condition prohibits Respondent from providing the patient or the
11 patient's primary caregiver information about the possible medical benefits resulting from the use
12 of marijuana.

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

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

25 8. CONTROLLED SUBSTANCES - ABSTAIN FROM USE. Respondent shall abstain
26 completely from the personal use or possession of controlled substances as defined in the
27 California Uniform Controlled Substances Act, dangerous drugs as defined by Business and
28 Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not

1 apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide
2 illness or condition.

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

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

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

21 9. ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from the
22 use of products or beverages containing alcohol.

23 If Respondent has a confirmed positive biological fluid test for alcohol, Respondent shall
24 receive a notification from the Board or its designee to immediately cease the practice of
25 medicine. The Respondent shall not resume the practice of medicine until final decision on an
26 accusation and/or a petition to revoke probation. An accusation and/or petition to revoke
27 probation shall be filed by the Board within 15 days of the notification to cease practice. If the
28 Respondent requests a hearing on the accusation and/or petition to revoke probation, the Board

1 shall provide the Respondent with a hearing within 30 days of the request, unless the Respondent
2 stipulates to a later hearing. A decision shall be received from the Administrative Law Judge or
3 the Board within 15 days unless good cause can be shown for the delay. The cessation of practice
4 shall not apply to the reduction of the probationary time period.

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

8 10. PRESCRIBING PRACTICES COURSE. Within 60 calendar days of the effective
9 date of this Decision, Respondent shall enroll in a course in prescribing practices equivalent to the
10 Prescribing Practices Course at the Physician Assessment and Clinical Education Program,
11 University of California, San Diego School of Medicine (Program), approved in advance by the
12 Board or its designee. Respondent shall provide the program with any information and documents
13 that the Program may deem pertinent. Respondent shall participate in and successfully complete
14 the classroom component of the course not later than six (6) months after Respondent's initial
15 enrollment. Respondent shall successfully complete any other component of the course within
16 one (1) year of enrollment. The prescribing practices course shall be at Respondent's expense
17 and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of
18 licensure.

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

24 Respondent shall submit a certification of successful completion to the Board or its
25 designee not later than 15 calendar days after successfully completing the course, or not later than
26 15 calendar days after the effective date of the Decision, whichever is later.

27 11. PROFESSIONAL BOUNDARIES PROGRAM. Within 60 calendar days from the
28 effective date of this Decision, Respondent shall enroll in a professional boundaries program

1 equivalent to the Professional Boundaries Program offered by the Physician Assessment and
2 Clinical Education Program at the University of California, San Diego School of Medicine
3 (“Program”). Respondent, at the Program’s discretion, shall undergo and complete the Program’s
4 assessment of Respondent’s competency, mental health and/or neuropsychological performance,
5 and at minimum, a 24 hour program of interactive education and training in the area of
6 boundaries, which takes into account data obtained from the assessment and from the Decision(s),
7 Accusation(s) and any other information that the Board or its designee deems relevant. The
8 Program shall evaluate Respondent at the end of the training and the Program shall provide any
9 data from the assessment and training as well as the results of the evaluation to the Board or its
10 designee.

11 Failure to complete the entire Program not later than six (6) months after Respondent’s
12 initial enrollment shall constitute a violation of probation unless the Board or its designee agrees
13 in writing to a later time for completion. Based on Respondent’s performance in and evaluations
14 from the assessment, education, and training, the Program shall advise the Board or its designee
15 of its recommendation(s) for additional education, training, psychotherapy and other measures
16 necessary to ensure that Respondent can practice medicine safely. Respondent shall comply with
17 Program recommendations. At the completion of the Program, Respondent shall submit to a final
18 evaluation. The Program shall provide the results of the evaluation to the Board or its designee.
19 The professional boundaries program shall be at Respondent’s expense and shall be in addition to
20 the Continuing Medical Education (CME) requirements for renewal of licensure.

21 The Program has the authority to determine whether or not Respondent successfully
22 completed the Program.

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

28 If Respondent fails to complete the Program within the designated time period, Respondent

1 shall cease the practice of medicine within three (3) calendar days after being notified by the
2 Board or its designee that Respondent failed to complete the Program.

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

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

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

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

22 13. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the
23 Respondent shall provide a true copy of this Decision and First Amended Petition to Revoke
24 Probation to the Chief of Staff or the Chief Executive Officer at every hospital where privileges
25 or membership are extended to Respondent, at any other facility where Respondent engages in the
26 practice of medicine, including all physician and locum tenens registries or other similar agencies,
27 and to the Chief Executive Officer at every insurance carrier which extends malpractice insurance
28 coverage to Respondent. Respondent shall submit proof of compliance to the Board or its

1 designee within 15 calendar days.

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

3 14. SUPERVISION OF PHYSICIAN ASSISTANTS. During probation, Respondent is
4 prohibited from supervising physician assistants.

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

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

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

13 17. GENERAL PROBATION REQUIREMENTS.

14 Compliance with Probation Unit

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

17 Address Changes

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

23 Place of Practice

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

27 License Renewal

28 Respondent shall maintain a current and renewed California physician's and surgeon's

1 license.

2 \

3 Travel or Residence Outside California

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

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

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

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

24 In the event Respondent's period of non-practice while on probation exceeds 18 calendar
25 months, Respondent shall successfully complete a clinical training program that meets the criteria
26 of Condition 18 of the current version of the Board's "Manual of Model Disciplinary Orders and
27 Disciplinary Guidelines" prior to resuming the practice of medicine.
28

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

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

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

6 20. COMPLETION OF PROBATION. Respondent shall comply with all financial
7 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
8 completion of probation. Upon successful completion of probation, Respondent's certificate shall
9 be fully restored.

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

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

27 23. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
28 with probation monitoring each and every year of probation, as designated by the Board, which

1 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
2 California and delivered to the Board or its designee no later than January 31 of each calendar
3 year.

4 ACCEPTANCE

5 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
6 discussed it with my attorney, Adam B. Brown. I understand the stipulation and the effect it will
7 have on my Physician's and Surgeon. I enter into this Stipulated Settlement and Disciplinary
8 Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order
9 of the Medical Board of California.

10 DATED: 01/24/18 Rehana Aziz M.D.
11 REHANA AZIZ, M.D.
12 Respondent

13 I have read and fully discussed with Respondent Rehana Aziz, M.D. the terms and
14 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
15 I approve its form and content.

16 DATED: 1-25-2018 Adam B. Brown
17 Adam B. Brown
18 Attorney for Respondent

19
20 ENDORSEMENT

21 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully
22 submitted for consideration by the Medical Board of California.
23
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25
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Dated: 1/25/18

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
MATTHEW M. DAVIS
Supervising Deputy Attorney General



STEVE DIEHL
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

First Amended Petition to Revoke Probation No. 800-2017-034648

1 XAVIER BECERRA
Attorney General of California
2 MATTHEW M. DAVIS
Supervising Deputy Attorney General
3 STEVE DIEHL
Deputy Attorney General
4 State Bar No. 235250
California Department of Justice
5 2550 Mariposa Mall, Room 5090
Fresno, CA 93721
6 Telephone: (559) 477-1626
Facsimile: (559) 445-5106
7 *Attorneys for Complainant*

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

11 In the Matter of the First Amended Petition to
12 Revoke Probation Against:

13 **REHANA AZIZ, M.D.**
14 9607 N Willey Ct.
Fresno, CA 93720-5414

15 Physician's and Surgeon's Certificate
No. A 54063

16 Respondent.

Case No. 800-2017-034648

**FIRST AMENDED PETITION TO
REVOKE PROBATION**

18 Complainant alleges:

19 **PARTIES**

20 1. Kimberly Kirchmeyer (Complainant) brings this First Amended Petition to Revoke
21 Probation solely in her official capacity as the Executive Director of the Medical Board of
22 California, Department of Consumer Affairs (Board).

23 2. On or about March 29, 1995, the Medical Board issued Physician's and Surgeon's
24 Certificate Number A 54063 to Rehana Aziz, M.D. (Respondent). The Physician's and Surgeon's
25 Certificate will expire on January 31, 2019, unless renewed.

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1 JURISDICTION

2 3. This First Amended Petition to Revoke Probation is brought before the Board, under
3 the authority of the following laws. All section references are to the Business and Professions
4 Code unless otherwise indicated.

5 4. Section 2227 of the Code states:

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

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

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

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

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

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

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

25 5. California Code of Regulations, Title 16, Section 1361.52, states:

26 “(a) A licensee who does any of the following shall be deemed to have committed a major
27 violation of his or her probation:

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

- 1 “(2) Commits multiple minor violations of probation conditions and terms;
2 “(3) Treats a patient or patients while under the influence of a prohibited substance;
3 “(4) Engage in any drug or alcohol related act that is a violation of state or federal law or
4 regulation;
5 “(5) Fails to undergo biological fluid testing when ordered;
6 “(6) Uses, consumes, ingests, or administers to himself or herself a prohibited substance;
7 “(7) Knowingly uses, makes, alters, or possesses any object or product in such a way as to
8 defraud or attempt to defraud a biological fluid test designed to detect the presence of a prohibited
9 substance; or

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

12 “(b) If a licensee commits a major violation, the Board will take one or more of the
13 following actions:

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

18 “(2) Increase the frequency of biological fluid testing.

19 “(3) Refer the licensee for further disciplinary action, such as suspension, revocation, or
20 other action as determined by the Board.

21 “(c) A licensee who does any of the following shall be deemed to have committed a minor
22 violation of his or her probation:

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

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

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

26 “(4) Fails to comply with any term or condition of his or her probation that does not impair
27 public safety.

28

1 time, including weekends and holidays. Except when testing on a specific date as ordered by the
2 Board or its designee, the scheduling of biological fluid testing shall be done on a random basis.
3 The cost of biological fluid testing shall be borne by the respondent.

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

10 “Prior to practicing medicine, respondent shall contract with a laboratory or service,
11 approved in advance by the Board or its designee, that will conduct random, unannounced,
12 observed, biological fluid testing and meets all the following standards:

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

16 “(b) Its specimen collectors conform to the current United States Department of
17 Transportation Specimen Collection Guidelines

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

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

21 “(e) Its laboratories are certified and accredited by the United States Department of Health
22 and Human Services.

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

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

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

5 “(i) It maintains testing sites located throughout California.

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

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

10 “(l) It employs or contracts with toxicologists that are licensed physicians and have
11 knowledge of substance abuse disorders and the appropriate medical training to interpret and
12 evaluate laboratory biological fluid test results, medical histories, and any other information
13 relevant to biomedical information.

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

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

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

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

25 “If a biological fluid test result indicates respondent has used, consumed, ingested, or
26 administered to himself or herself a prohibited substance, the Board shall order respondent to
27 cease practice and instruct respondent to leave any place of work where respondent is practicing
28 medicine or providing medical services. The Board shall immediately notify all of respondent’s

1 employers, supervisors and work monitors, if any, that respondent may not practice medicine or
2 provide medical services while the cease-practice order is in effect.

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

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

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

12 "For purposes of this condition, the term 'prohibited substance' means an illegal drug, a
13 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by
14 respondent and approved by the Board, alcohol, or any other substance the respondent has been
15 instructed by the Board not to use, consume, ingest, or administer to himself or herself.

16 "If the Board confirms that a positive biological fluid test is evidence of use of a prohibited
17 substance, respondent has committed a major violation, as defined in section 1361.52(a), and the
18 Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to
19 any other terms or conditions the Board determines are necessary for public protection or to
20 enhance respondent's rehabilitation."

21 8. Term and Condition 8 of the Probation Order states:

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

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

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

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

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

18 9. Term and Condition 17 of the Probation Order states, in pertinent part, that
19 "Respondent shall maintain a current and renewed California physician's and surgeon's license."

20 **FIRST CAUSE FOR ACTION**

21 **(Violation of Probation: Condition #2, Biological Fluid Testing)**

22 10. Respondent's probation is subject to revocation, pursuant to probation condition two
23 of the Probation Order, because she failed to check in daily with the Board or its designee, and
24 she failed to provide a biological fluid sample when selected. The circumstances are as follows:

25 11. The Board has designated FirstSource Solutions to administer biological fluid testing
26 for probationers. On or about May 18, 2017, an analyst employed by the Board sent a letter to
27 Respondent informing her of the requirement that she enroll in biological fluid testing with
28 FirstSource no later than the effective date of her disciplinary order, June 16, 2017. On or about

1 June 15, 2017, Respondent met with a Board probation inspector who discussed Respondent's
2 probation conditions with Respondent, and advised her to immediately enroll in biological fluid
3 testing with FirstSource Solutions. Respondent signed an Acknowledgment of Decision
4 indicating that she understood her probation conditions, including the biological fluid testing
5 requirement.

6 12. On or about June 24, 2017, Respondent failed to contact FirstSource to determine
7 whether biological fluid testing was required that day.

8 13. From June 29, 2017, through July 4, 2017, Respondent failed to contact FirstSource.
9 On or about June 30, 2017, and July 1, 2, and 3, 2017, Respondent was selected by FirstSource to
10 provide a biological fluid sample, and failed to do so.

11 14. On or about July 9, 2017, Respondent again failed to contact FirstSource.

12 15. On or about July 23, 2017, Respondent again failed to contact FirstSource.

13 16. On or about August 26, 2017; September 2, 2017; and November 3, 2017,
14 Respondent was selected by FirstSource to provide a biological fluid sample and failed to do so.

15 **SECOND CAUSE FOR ACTION**

16 **(Violation of Probation: Condition #8, Controlled Substances—Abstain from Use)**

17 17. Respondent's probation is subject to revocation, pursuant to probation condition eight
18 of the Probation Order, because she failed to abstain from the use of controlled substances. The
19 circumstances are set forth in paragraph 11, above, which is incorporated by reference here as if
20 fully set forth. Additional circumstances are as follows:

21 18. On or about June 23, 2017, Respondent submitted a urine sample which tested
22 positive for Tramadol, an opiate medication and Schedule IV controlled substance that was not
23 prescribed to Respondent.

24 19. On or about July 10, 2017, Respondent submitted a urine sample which again tested
25 positive for Tramadol.

26 20. On or about July 17, 2017, Respondent submitted a urine sample which again tested
27 positive for Tramadol.

28 \\\

1 PRAYER

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

4 1. Revoking the probation that was granted by the Medical Board of California in Case
5 No. 800-2014-008996 and imposing the disciplinary order that was stayed, thereby revoking
6 Physician's and Surgeon's Certificate No. A 54063 issued to Rehana Aziz, M.D.;


7 2. Revoking or suspending Physician's and Surgeon Number A 54063, issued to Rehana
8 Aziz, M.D.;

9 3. Revoking, suspending or denying approval of Rehana Aziz, M.D.'s authority to
10 supervise physician assistants and advanced practice nurses;

11 4. Ordering Rehana Aziz, M.D., if placed on probation, to pay the Board the costs of
12 probation monitoring; and

13 5. Taking such other and further action as deemed necessary and proper.

14
15 DATED: January 23, 2018


16 KIMBERLY KIRCHMEYER
17 Executive Director
18 Medical Board of California
19 Department of Consumer Affairs
20 State of California
21 Complainant

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EXHIBIT A

Decision and Order

Medical Board of California Case No. 800-2014-008996

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

In the Matter of the Accusation Against:)
)
)
REHANA AZIZ, M.D.)
)
Physician's and Surgeon's)
Certificate No. A 54063)
)
Respondent)
_____)

Case No. 800-2014-008996

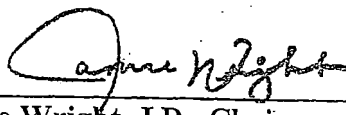
DECISION AND ORDER

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 June 16, 2017.

IT IS SO ORDERED: May 17, 2017.

MEDICAL BOARD OF CALIFORNIA



Jamie Wright, J.D., Chair
Panel A

1 XAVIER BECERRA
Attorney General of California
2 MATTHEW M. DAVIS
Supervising Deputy Attorney General
3 STEVE DIEHL
Deputy Attorney General
4 State Bar No. 235250
California Department of Justice
5 2550 Mariposa Mall, Room 5090
Fresno, CA 93721
6 Telephone: (559) 477-1626
Facsimile: (559) 445-5106
7 *Attorneys for Complainant*

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

11 In the Matter of the Accusation Against:

12 **REHANA AZIZ, M.D.**
13 **3475 West Shaw Avenue, Suite 103**
Fresno, CA 93711-3237

14 **Physician's and Surgeon's Certificate No. A**
15 **54063**

16 Respondent.

Case No. 800-2014-008996

OAH No. 2016100817

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

17
18 In the interest of a prompt and speedy settlement of this matter, consistent with the public
19 interest and the responsibility of the Medical Board the parties hereby agree to the following
20 Stipulated Settlement and Disciplinary Order which will be submitted to the Board for approval
21 and adoption as the final disposition of the Accusation.

22 PARTIES

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

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1 2. Respondent Rehana Aziz, M.D. (Respondent) is represented in this proceeding by
2 attorney Adam B. Brown, whose address is: Law Offices of Brown & Brown, 3848 W. Carson
3 Street, Suite 206, Torrance, California 90503.

4 3. On or about March 29, 1995, the Board issued Physician's and Surgeon's Certificate
5 No. A 54063 to Rehana Aziz, M.D. (Respondent). The Physician's and Surgeon's Certificate was
6 in full force and effect at all times relevant to the charges brought in Accusation No. 800-2014-
7 008996, and expired on January 31, 2017.

8 JURISDICTION

9 4. Accusation No. 800-2014-008996 was filed before the Board, and is currently
10 pending against Respondent. The Accusation and all other statutorily required documents were
11 properly served on Respondent on July 12, 2016. Respondent timely filed her Notice of Defense
12 contesting the Accusation.

13 5. A copy of Accusation No. 800-2014-008996 is attached as exhibit A and incorporated
14 herein by reference.

15 ADVISEMENT AND WAIVERS

16 6. Respondent has carefully read, fully discussed with counsel, and understands the
17 charges and allegations in Accusation No. 800-2014-008996. Respondent has also carefully read,
18 fully discussed with counsel, and understands the effects of this Stipulated Settlement and
19 Disciplinary Order.

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

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

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1 CULPABILITY

2 9. Respondent understands and agrees that the charges and allegations in Accusation
3 No. 800-2014-008996, if proven at a hearing, constitute cause for imposing discipline upon her
4 Physician's and Surgeon's Certificate.

5 10. For the purpose of resolving the Accusation without the expense and uncertainty of
6 further proceedings, Respondent agrees that, at a hearing, Complainant could establish a factual
7 basis for the charges in the Accusation, and that Respondent hereby gives up her right to contest
8 those charges. Respondent agrees that if she ever petitions for early termination or modification
9 of probation, or if the Board ever petitions for revocation of probation, all of the charges and
10 allegations contained in Accusation No. 800-2014-008996 shall be deemed true, correct and fully
11 admitted by respondent for purposes of that proceeding or any other licensing proceeding
12 involving respondent in the State of California.

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

16 CONTINGENCY

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

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

4 14. In consideration of the foregoing admissions and stipulations, the parties agree that
5 the Board may, without further notice or formal proceeding, issue and enter the following
6 Disciplinary Order:

7 **DISCIPLINARY ORDER**

8 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 54063 issued
9 to Respondent Rehana Aziz, M.D. is revoked. However, the revocation is stayed and Respondent
10 is placed on probation for four (4) years on the following terms and conditions.

11 1. **CLINICAL DIAGNOSTIC EVALUATIONS AND REPORTS:** Within thirty (30)
12 calendar days of the effective date of this Decision, and on whatever periodic basis thereafter as
13 may be required by the Board or its designee, respondent shall undergo and complete a clinical
14 diagnostic evaluation, including any and all testing deemed necessary, by a Board-appointed
15 board certified physician and surgeon. The examiner shall consider any information provided by
16 the Board or its designee and any other information he or she deems relevant, and shall furnish a
17 written evaluation report to the Board or its designee.

18 The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon
19 who holds a valid, unrestricted license, has three (3) years' experience in providing evaluations of
20 physicians and surgeons with substance abuse disorders, and is approved by the Board or its
21 designee. The clinical diagnostic evaluation shall be conducted in accordance with acceptable
22 professional standards for conducting substance abuse clinical diagnostic evaluations. The
23 evaluator shall not have a current or former financial, personal, or business relationship with
24 respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and
25 independent evaluation. The clinical diagnostic evaluation report shall set forth, in the
26 evaluator's opinion, whether respondent has a substance abuse problem, whether respondent is a
27 threat to himself or herself or others, and recommendations for substance abuse treatment,
28 practice restrictions, or other recommendations related to respondent's rehabilitation and ability.

1 to practice safely. If the evaluator determines during the evaluation process that respondent is a
2 threat to himself or herself or others, the evaluator shall notify the Board within twenty-four (24)
3 hours of such a determination.

4 In formulating his or her opinion as to whether respondent is safe to return to either part-
5 time or full-time practice and what restrictions or recommendations should be imposed, including
6 participation in an inpatient or outpatient treatment program, the evaluator shall consider the
7 following factors: respondent's license type; respondent's history; respondent's documented
8 length of sobriety (i.e., length of time that has elapsed since respondent's last substance use);
9 respondent's scope and pattern of substance abuse; respondent's treatment history, medical
10 history and current medical condition; the nature, duration and severity of respondent's substance
11 abuse problem or problems; and whether respondent is a threat to himself or herself or the public.

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

17 The Board shall review the clinical diagnostic evaluation report within five (5) business
18 days of receipt to determine whether respondent is safe to return to either part-time or full-time
19 practice and what restrictions or recommendations shall be imposed on respondent based on the
20 recommendations made by the evaluator. Respondent shall not be returned to practice until she
21 has at least thirty (30) days of negative biological fluid tests or biological fluid tests indicating
22 that she has not used, consumed, ingested, or administered to himself or herself a prohibited
23 substance, as defined in section 1361.51, subdivision (e), of Title 16 of the California Code of
24 Regulations.

25 Clinical diagnostic evaluations conducted prior to the effective date of this Decision shall
26 not be accepted towards the fulfillment of this requirement. The cost of the clinical diagnostic
27 evaluation, including any and all testing deemed necessary by the examiner, the Board or its
28 designee, shall be borne by the licensee.

1 Respondent shall not engage in the practice of medicine until notified by the Board or its
2 designee that she is fit to practice medicine safely. The period of time that respondent is not
3 practicing medicine shall not be counted toward completion of the term of probation. Respondent
4 shall undergo biological fluid testing as required in this Decision at least two (2) times per week
5 while awaiting the notification from the Board if she is fit to practice medicine safely.

6 Respondent shall comply with all restrictions or conditions recommended by the examiner
7 conducting the clinical diagnostic evaluation within fifteen (15) calendar days after being notified
8 by the Board or its designee.

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

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

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

28 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry

1 Association or have completed the training required to serve as a collector for the United
2 States Department of Transportation.

3 (b) Its specimen collectors conform to the current United States Department of
4 Transportation Specimen Collection Guidelines

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

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

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

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

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

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

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

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

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

27 (l) It employs or contracts with toxicologists that are licensed physicians and have
28 knowledge of substance abuse disorders and the appropriate medical training to interpret

1 and evaluate laboratory biological fluid test results, medical histories, and any other
2 information relevant to biomedical information.

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

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

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

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

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

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

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

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

28 For purposes of this condition, the term "prohibited substance" means an illegal drug, a

1 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by
2 respondent and approved by the Board, alcohol, or any other substance the respondent has been
3 instructed by the Board not to use, consume, ingest, or administer to himself or herself.

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

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

15 For purposes of this section, "supervisors" shall include the Chief of Staff and Health or
16 Well Being Committee Chair, or equivalent, if applicable, when the respondent has medical staff
17 privileges.

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

24 The worksite monitor shall not have a current or former financial, personal, or familial
25 relationship with respondent, or any other relationship that could reasonably be expected to
26 compromise the ability of the monitor to render impartial and unbiased reports to the Board or its
27 designee. If it is impractical for anyone but respondent's employer to serve as the worksite
28 monitor, this requirement may be waived by the Board or its designee, however, under no

1 circumstances shall respondent's worksite monitor be an employee or supervisee of the licensee.

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

6 Respondent shall pay all worksite monitoring costs.

7 The worksite monitor shall have face-to-face contact with respondent in the work
8 environment on as frequent a basis as determined by the Board or its designee, but not less than
9 once per week; interview other staff in the office regarding respondent's behavior, if requested by
10 the Board or its designee; and review respondent's work attendance.

11 The worksite monitor shall verbally report any suspected substance abuse to the Board and
12 respondent's employer or supervisor within one (1) business day of occurrence. If the suspected
13 substance abuse does not occur during the Board's normal business hours, the verbal report shall
14 be made to the Board or its designee within one (1) hour of the next business day. A written
15 report that includes the date, time, and location of the suspected abuse; respondent's actions; and
16 any other information deemed important by the worksite monitor shall be submitted to the Board
17 or its designee within 48 hours of the occurrence.

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

28 If the worksite monitor resigns or is no longer available, respondent shall, within five (5)

1 calendar days of such resignation or unavailability, submit to the Board or its designee, for prior
2 approval, the name and qualifications of a replacement monitor who will be assuming that
3 responsibility within fifteen (15) calendar days. If respondent fails to obtain approval of a
4 replacement monitor within sixty (60) calendar days of the resignation or unavailability of the
5 monitor, respondent shall receive a notification from the Board or its designee to cease the
6 practice of medicine within three (3) calendar days after being so notified. Respondent shall
7 cease the practice of medicine until a replacement monitor is approved and assumes monitoring
8 responsibility.

9 5. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within thirty (30) days of
10 the effective date of this Decision, respondent shall submit to the Board or its designee, for its
11 prior approval, the name of a substance abuse support group which she shall attend for the
12 duration of probation. Respondent shall attend substance abuse support group meetings at least
13 once per week, or as ordered by the Board or its designee. Respondent shall pay all substance
14 abuse support group meeting costs.

15 The facilitator of the substance abuse support group meeting shall have a minimum of three
16 (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed
17 or certified by the state or nationally certified organizations. The facilitator shall not have a
18 current or former financial, personal, or business relationship with respondent within the last five
19 (5) years. Respondent's previous participation in a substance abuse group support meeting led by
20 the same facilitator does not constitute a prohibited current or former financial, personal, or
21 business relationship.

22 The facilitator shall provide a signed document to the Board or its designee showing
23 respondent's name, the group name, the date and location of the meeting, respondent's
24 attendance, and respondent's level of participation and progress. The facilitator shall report any
25 unexcused absence by respondent from any substance abuse support group meeting to the Board,
26 or its designee, within twenty-four (24) hours of the unexcused absence.

27 6. CONTROLLED SUBSTANCES - PARTIAL RESTRICTION. Respondent shall not
28 order, prescribe, dispense, administer, furnish, or possess any controlled substances as defined by

1 the California Uniform Controlled Substances Act, except for those drugs listed in Schedules III,
2 IV, and V of the Act.

3 Respondent shall not issue an oral or written recommendation or approval to a patient or a
4 patient's primary caregiver for the possession or cultivation of marijuana for the personal medical
5 purposes of the patient within the meaning of Health and Safety Code section 11362.5. If
6 Respondent forms the medical opinion, after an appropriate prior examination and medical
7 indication, that a patient's medical condition may benefit from the use of marijuana, Respondent
8 shall so inform the patient and shall refer the patient to another physician who, following an
9 appropriate prior examination and medical indication, may independently issue a medically
10 appropriate recommendation or approval for the possession or cultivation of marijuana for the
11 personal medical purposes of the patient within the meaning of Health and Safety Code section
12 11362.5. In addition, Respondent shall inform the patient or the patient's primary caregiver that
13 Respondent is prohibited from issuing a recommendation or approval for the possession or
14 cultivation of marijuana for the personal medical purposes of the patient and that the patient or
15 the patient's primary caregiver may not rely on Respondent's statements to legally possess or
16 cultivate marijuana for the personal medical purposes of the patient. Respondent shall fully
17 document in the patient's chart that the patient or the patient's primary caregiver was so
18 informed. Nothing in this condition prohibits Respondent from providing the patient or the
19 patient's primary caregiver information about the possible medical benefits resulting from the use
20 of marijuana.

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

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

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

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

15 If Respondent has a confirmed positive biological fluid test for any substance (whether or
16 not legally prescribed) and has not reported the use to the Board or its designee, Respondent
17 shall receive a notification from the Board or its designee to immediately cease the practice of
18 medicine. The Respondent shall not resume the practice of medicine until final decision on an
19 accusation and/or a petition to revoke probation. An accusation and/or petition to revoke
20 probation shall be filed by the Board within 15 days of the notification to cease practice. If the
21 Respondent requests a hearing on the accusation and/or petition to revoke probation, the Board
22 shall provide the Respondent with a hearing within 30 days of the request, unless the Respondent
23 stipulates to a later hearing. A decision shall be received from the Administrative Law Judge or
24 the Board within 15 days unless good cause can be shown for the delay. The cessation of practice
25 shall not apply to the reduction of the probationary time period.

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

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

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

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

16 10. PRESCRIBING PRACTICES COURSE. Within 60 calendar days of the effective
17 date of this Decision, Respondent shall enroll in a course in prescribing practices equivalent to the
18 Prescribing Practices Course at the Physician Assessment and Clinical Education Program,
19 University of California, San Diego School of Medicine (Program), approved in advance by the
20 Board or its designee. Respondent shall provide the program with any information and documents
21 that the Program may deem pertinent. Respondent shall participate in and successfully complete
22 the classroom component of the course not later than six (6) months after Respondent's initial
23 enrollment. Respondent shall successfully complete any other component of the course within
24 one (1) year of enrollment. The prescribing practices course shall be at Respondent's expense
25 and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of
26 licensure.

27 A prescribing practices course taken after the acts that gave rise to the charges in the
28 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board

1 or its designee, be accepted towards the fulfillment of this condition if the course would have
2 been approved by the Board or its designee had the course been taken after the effective date of
3 this Decision.

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

7 11. PROFESSIONAL BOUNDARIES PROGRAM. Within 60 calendar days from the
8 effective date of this Decision, Respondent shall enroll in a professional boundaries program
9 equivalent to the Professional Boundaries Program offered by the Physician Assessment and
10 Clinical Education Program at the University of California, San Diego School of Medicine
11 ("Program"). Respondent, at the Program's discretion, shall undergo and complete the Program's
12 assessment of Respondent's competency, mental health and/or neuropsychological performance,
13 and at minimum, a 24 hour program of interactive education and training in the area of
14 boundaries, which takes into account data obtained from the assessment and from the Decision(s),
15 Accusation(s) and any other information that the Board or its designee deems relevant. The
16 Program shall evaluate Respondent at the end of the training and the Program shall provide any
17 data from the assessment and training as well as the results of the evaluation to the Board or its
18 designee.

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

1 The Program has the authority to determine whether or not Respondent successfully
2 completed the Program.

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

8 If Respondent fails to complete the Program within the designated time period, Respondent
9 shall cease the practice of medicine within three (3) calendar days after being notified by the
10 Board or its designee that Respondent failed to complete the Program.

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

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

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

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

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

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

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

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

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

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

21 17. GENERAL PROBATION REQUIREMENTS.

22 Compliance with Probation Unit

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

25 Address Changes

26 Respondent shall, at all times, keep the Board informed of Respondent's business and
27 residence addresses, email address (if available), and telephone number. Changes of such
28 addresses shall be immediately communicated in writing to the Board or its designee. Under no

1 circumstances shall a post office box serve as an address of record, except as allowed by Business
2 and Professions Code section 2021(b).

3 Place of Practice

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

7 License Renewal

8 Respondent shall maintain a current and renewed California physician's and surgeon's
9 license.

10 Travel or Residence Outside California

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

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

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

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

1 jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall
2 not be considered as a period of non-practice.

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

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

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

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

12 20. COMPLETION OF PROBATION. Respondent shall comply with all financial
13 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
14 completion of probation. Upon successful completion of probation, Respondent's certificate shall
15 be fully restored.

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

23 22. LICENSE SURRENDER. Following the effective date of this Decision, if
24 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
25 the terms and conditions of probation, Respondent may request to surrender her license. The
26 Board reserves the right to evaluate Respondent's request and to exercise its discretion in
27 determining whether or not to grant the request, or to take any other action deemed appropriate
28 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent

1 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
 2 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
 3 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
 4 application shall be treated as a petition for reinstatement of a revoked certificate.

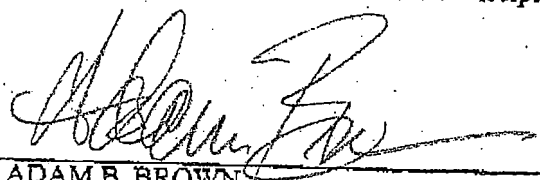
5 23. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
 6 with probation monitoring each and every year of probation, as designated by the Board, which
 7 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
 8 California and delivered to the Board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

10 ACCEPTANCE

11 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
 12 discussed it with my attorney, Adam B. Brown. I understand the stipulation and the effect it will
 13 have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and
 14 Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the
 15 Decision and Order of the Medical Board of California.

16
 17 DATED: March 30th 2017 Rehana Aziz M.D.
 18 REHANA AZIZ, M.D.
 19 Respondent

20 I have read and fully discussed with Respondent Rehana Aziz, M.D. the terms and
 21 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
 22 I approve its form and content.

23
 24 DATED: 3/30/17 
 25 ADAM B. BROWN
 26 Attorney for Respondent

27
 28

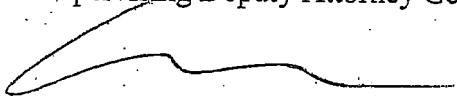
ENDORSEMENT

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

Dated: 3/30/17

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
MATTHEW M. DAVIS
Supervising Deputy Attorney General



STEVE DIEHL
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 800-2014-008996

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO July 12 2014
BY D. Richards ANALYST

1 KAMALA D. HARRIS
Attorney General of California
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Acting Supervising Deputy Attorney General
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6 Telephone: (559) 477-1626
Facsimile: (559) 445-5106
7 *Attorneys for Complainant*

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

11 In the Matter of the Accusation Against:

Case No. 800-2014-008996

12 **Rehana Aziz, M.D.**
13 **3475 W Shaw Ave., Ste 103**
FRESNO, CA 93711-3237

A C C U S A T I O N

14 **Physician's and Surgeon's Certificate**
15 **No. A 54063,**

16 Respondent.

17
18 Complainant alleges:

19 **PARTIES**

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

23 2. On or about March 29, 1995, the Medical Board issued Physician's and Surgeon's
24 Certificate Number A 54063 to Rehana Aziz, M.D. (Respondent). The Physician's and Surgeon's
25 Certificate was in full force and effect at all times relevant to the charges brought herein and will
26 expire on January 31, 2017, unless renewed.

27 \\\

28 \\\

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 2004 of the Code states:

5 "The board shall have the responsibility for the following:

6 "(a) The enforcement of the disciplinary and criminal provisions of the Medical Practice
7 Act.

8 "(b) The administration and hearing of disciplinary actions.

9 "(c) Carrying out disciplinary actions appropriate to findings made by a panel or an
10 administrative law judge.

11 "(d) Suspending, revoking, or otherwise limiting certificates after the conclusion of
12 disciplinary actions.

13 "(e) Reviewing the quality of medical practice carried out by physician and surgeon
14 certificate holders under the jurisdiction of the board.

15 "(f) Approving undergraduate and graduate medical education programs.

16 "(g) Approving clinical clerkship and special programs and hospitals for the programs in
17 subdivision (f).

18 "(h) Issuing licenses and certificates under the board's jurisdiction.

19 "(i) Administering the board's continuing medical education program."

20 5. Section 2227 of the Code states:

21 "(a) A licensee whose matter has been heard by an administrative law judge of the Medical
22 Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default
23 has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary
24 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.

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

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

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

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

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

13 6. Section 2239 of the Code states:

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

22 “(b) A plea or verdict of guilty or a conviction following a plea of nolo contendere is
23 deemed to be a conviction within the meaning of this section. The Medical Board may order
24 discipline of the licensee in accordance with Section 2227 or the Medical Board may order the
25 denial of the license when the time for appeal has elapsed or the judgment of conviction has been
26 affirmed on appeal or when an order granting probation is made suspending imposition of
27 sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal
28 Code allowing such person to withdraw his or her plea of guilty and to enter a plea of not guilty,

1 or setting aside the verdict of guilty, or dismissing the accusation, complaint, information, or
2 indictment."

3 7. Section 822 of the Code states:

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

7 "(a) Revoking the licentiate's certificate or license.

8 "(b) Suspending the licentiate's right to practice.

9 "(c) Placing the licentiate on probation.

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

12 "The licensing section shall not reinstate a revoked or suspended certificate or license until
13 it has received competent evidence of the absence or control of the condition which caused its
14 action and until it is satisfied that with due regard for the public health and safety the person's
15 right to practice his or her profession may be safely reinstated."

16 **FIRST CAUSE FOR DISCIPLINE**

17 **(Impairment)**

18 8. Respondent Rehana Aziz, M.D. is subject to disciplinary action under section 822 in
19 that her ability to practice medicine safely is impaired due to mental illness and/or physical illness
20 affecting competency. The circumstances are as follows:

21 9. On or about April 17, 2015, investigators with the Department of Consumer Affairs,
22 Health Quality Investigation Unit (HQIU), visited Respondent's office, located at 1557 W. Shaw
23 Ave., Fresno, California. The investigators noted numerous medical and pharmacy records for
24 patients, in plain view on top of a large built-in island/table located in the waiting area. During an
25 interview with the investigators, Respondent admitted to having slept in her office the night
26 before, and further stated that she sleeps in her office "occasionally" if she gets too tired from
27 working on paperwork late at night. Respondent was initially slow to respond to questions and
28 spoke in a slow manner, although her speech accelerated as the interview progressed. Respondent

1 attributed her slowness or fogginess to having a cold. Respondent told the investigators that she
2 sometimes takes ADHD medications, such as Adderall, as a medication to wake her up or make
3 her more alert. Respondent also told the investigators that she had not seen her primary care
4 physician in recent times. Respondent admitted to leaving patient paperwork in the front area of
5 the office to work on it there, but claimed that the office was not open at the time that the
6 investigators arrived. During the course of this interview, a patient arrived at the office and
7 waited in the waiting area.

8 10. During the investigative visit on or about April 17, 2015, investigators inspected a
9 room in the southeast corner of the office, which Respondent said was not for patients, but was a
10 room she used for painting and to sleep in. The investigators noted bedding on the floor, and two
11 prescription pill bottles in plain view. A bottle on the floor was labeled "ibuprofen" in
12 handwriting, and another bottle was sitting on top of two plastic milk cartons. The bottle on the
13 milk cartons contained Prozac. Respondent opened her desk drawer at the request of the
14 investigators, and numerous pill bottles were found inside. One pill bottle had the patient name
15 obliterated from the prescription label, and contained one pill imprinted with "M Amphet Salts",
16 later identified as Adderall. In Respondent's purse, an investigator found a weekly pill container,
17 which contained three lorazepam pills in the container for "Tuesday," numerous Prozac pills in
18 the container for "Wednesday," a vitamin pill on "Thursday," and cholesterol medication on
19 "Friday." In Respondent's desk, an investigator located several pill bottles containing medication,
20 some of which had the patient name section of the pharmacy label removed. Respondent stated
21 that most of the prescription bottles were from patients who turned them in to her. Some of the
22 bottles contained medication prescribed by Respondent to her son and mother.

23 11. Respondent submitted a urine sample on or about April 17, 2015, which tested
24 positive for amphetamine, which is consistent with Respondent having taken Adderall.

25 12. On or about May 25, 2016, HQUI investigators again interviewed Respondent at her
26 office during normal business hours. During the interview, Respondent stated that she had taken
27 lorazepam earlier the same day, and that she had last taken Adderall approximately two weeks
28 prior. She described how various patients, some of whom were employees, provided her with

1 these medications. She stated that she did not attempt to obtain these medications through a valid
2 prescription, because she knew no physician would prescribe them to her. She submitted a urine
3 sample, which tested positive for amphetamine and lorazepam.

4 13. On or about March 31, 2016, Respondent underwent an evaluation with a Board-
5 appointed psychiatrist. In her interview with the psychiatrist, Respondent admitted to feeling
6 depressed and anxious since her divorce in 2013. She reported insomnia, decreased energy,
7 decreased concentration, and weight gain in 2013. She reported that she believed her anxiety and
8 depression have improved over time, but that she still feels very tired by the end of the day. She
9 admitted that she had not sought treatment for these conditions, other than briefly receiving a
10 prescription for Celexa (an antidepressant) from her primary care physician in 2013. She reported
11 taking Adderall to help with her concentration, which she received "from a friend." In a report
12 received by the Board on April 6, 2016, the evaluator opined that Respondent currently suffers
13 from symptoms of anxiety and depression. Respondent has failed to seek proper treatment for
14 these conditions from a psychiatrist or other skilled mental health professional, and has instead
15 attempted to treat herself. As a result, the evaluator opined that Respondent's condition "could
16 very easily interfere with her ability to safely practice medicine," and that the public is in danger if
17 Respondent is permitted to continue to practice medicine without treatment.

18 SECOND CAUSE FOR DISCIPLINE

19 (Administering A Controlled Substance to Self)

20 14. Respondent Rehana Aziz, M.D. is subject to disciplinary action under section 2239 in
21 that she administered a controlled substance, to wit, Adderall (brand name for amphetamine salts,
22 a Schedule II controlled substance pursuant to Health and Safety Code section 11055, subdivision
23 (d)(1)), to herself; and/or that she used a dangerous drug specified in Section 4022, to wit,
24 Adderall, to the extent, or in such a manner as to be dangerous or injurious to herself, or to any
25 other person or to the public, or to the extent that such use impaired her ability to practice
26 medicine safely. The circumstances are set forth in paragraphs 9 through 13, above, which are
27 incorporated here by reference as if fully set forth.

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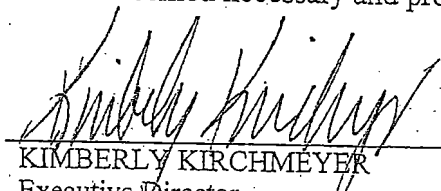
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PRAAYER

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 54063, issued to Rehana Aziz, M.D.;
2. Revoking, suspending or denying approval of Rehana Aziz, M.D.'s authority to supervise physician assistants, pursuant to section 3527 of the Code;
3. Ordering Rehana Aziz, 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: July 12, 2016


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

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