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*Attorneys for Complainant*

**FILED**  
**STATE OF CALIFORNIA**  
**MEDICAL BOARD OF CALIFORNIA**  
**SACRAMENTO** *September 25 2017*  
**BY: K. Voong ANALYST**

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

In the Matter of the Petition to Revoke  
Probation Against:  
  
**REHANA AZIZ, M.D.**  
3475 West Shaw Avenue, Suite 103  
Fresno, CA 93711-3237  
  
Physician's and Surgeon's Certificate  
No. A 54063  
  
Respondent.

Case No. 800-2017-034648  
**PETITION TO REVOKE PROBATION**

Complainant alleges:

**PARTIES**

1. Kimberly Kirchmeyer (Complainant) brings this Petition to Revoke Probation solely in her official capacity as the Executive Director of the Medical Board of California, Department of Consumer Affairs (Board).
2. On or about March 29, 1995, the Medical Board issued Physician's and Surgeon's Certificate Number A 54063 to Rehana Aziz, M.D. (Respondent). The Physician's and Surgeon's Certificate expired on January 31, 2017, and has not been renewed.

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**JURISDICTION**

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2       3.     This Petition to Revoke Probation is brought before the Board, under the authority of  
3 the following laws. All section references are to the Business and Professions Code unless  
4 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 “(d) If a licensee commits a minor violation, the Board will take one or more of the  
2 following actions:

3 “(1) Issue a cease-practice order;

4 “(2) Order practice limitations;

5 “(3) Order or increase supervision of licensee;

6 “(4) Order increased documentation;

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

8 “(6) Order the licensee to undergo a clinical diagnostic evaluation at the expense of the  
9 licensee;

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

11 “(e) Nothing in this section shall be considered a limitation on the Board's authority to  
12 revoke the probation of a licensee who has violated a term or condition of that probation.”

### 13 PROBATION CASE

14 6. In a prior disciplinary action entitled *In the Matter of the Accusation Against Rehana*  
15 *Aziz, M.D.* before the Medical Board of California, in Case Number 800-2014-008996, the Board  
16 issued a decision, effective June 16, 2017, in which Respondent's license to practice medicine  
17 was revoked. However, the revocation was stayed and Respondent's license was placed on  
18 probation for a period of four (4) years with numerous terms and conditions (Probation Order).  
19 That decision is now final, and a copy of the decision is attached as Exhibit A, and is incorporated  
20 by reference herein.

21 7. Term and Condition 2 of the Probation Order states:

22 “2. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to  
23 biological fluid testing, at respondent's expense, upon request of the Board or its designee.  
24 “Biological fluid testing” may include, but is not limited to, urine, blood, breathalyzer, hair  
25 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall  
26 make daily contact with the Board or its designee to determine whether biological fluid testing is  
27 required. Respondent shall be tested on the date of the notification as directed by the Board or its  
28 designee. The Board may order a respondent to undergo a biological fluid test on any day, at any

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 **SECOND CAUSE FOR ACTION**

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

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

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

22 18. On or about July 10, 2017, Respondent submitted a urine sample which again tested  
23 positive for Tramadol.

24 19. On or about July 17, 2017, Respondent submitted a urine sample which again tested  
25 positive for Tramadol.

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1 **THIRD CAUSE FOR ACTION**

2 **(Violation of Probation: Condition #17, Maintain a Current License)**

3 20. Respondent's probation is subject to revocation, pursuant to probation condition  
4 seventeen of the Probation Order, because she failed to maintain a current and renewed California  
5 Physician's and Surgeon's Certificate. Respondent's Physician's and Surgeon's Certificate  
6 expired on January 31, 2017, and has not been renewed.

7 **PRAYER**

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

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

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

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

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

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

20  
21 DATED: September 25, 2017

  
22 KIMBERLY KIRCHMEYER  
23 Executive Director  
24 Medical Board of California  
25 Department of Consumer Affairs  
26 State of California  
27 *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. )

Case No. 800-2014-008996

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

Respondent )  
\_\_\_\_\_ )

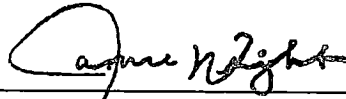
DECISION AND ORDER

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**  
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

13 **REHANA AZIZ, M.D.**  
14 **3475 West Shaw Avenue, Suite 103**  
15 **Fresno, CA 93711-3237**

16 **Physician's and Surgeon's Certificate No. A**  
17 **54063**

18 Respondent.

Case No. 800-2014-008996

OAH No. 2016100817

**STIPULATED SETTLEMENT AND**  
**DISCIPLINARY ORDER**

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

23 PARTIES

24 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board  
25 of California (Board). She brought this action solely in her official capacity and is represented in  
26 this matter by Xavier Becerra, Attorney General of the State of California, by Steve Diehl,  
27 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 30<sup>th</sup> 2017 Rehana Aziz M.D.  
 18  
 19 REHANA AZIZ, M.D.  
 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  
 Attorney for Respondent



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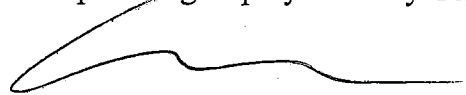
ENDORSEMENT

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

Dated: 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**

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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:  
12 **Rehana Aziz, M.D.**  
13 **3475 W Shaw Ave., Ste 103**  
**FRESNO, CA 93711-3237**  
14 **Physician's and Surgeon's Certificate**  
15 **No. A 54063,**  
16 Respondent.

Case No. 800-2014-008996  
**ACCUSATION**

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.

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**JURISDICTION**

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

4. Section 2004 of the Code states:

“The board shall have the responsibility for the following:

“(a) The enforcement of the disciplinary and criminal provisions of the Medical Practice Act.

“(b) The administration and hearing of disciplinary actions.

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

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

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

“(f) Approving undergraduate and graduate medical education programs.

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

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

“(i) Administering the board's continuing medical education program.”

5. Section 2227 of the Code states:

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

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

“(2) Have his or her right to practice suspended for a period not to exceed one year upon 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, HQIU 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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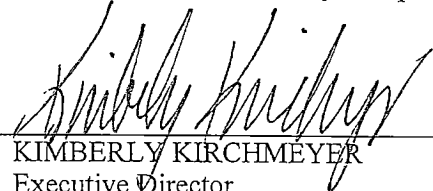
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PRAYER

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

1. Revoking or suspending Physician's and Surgeon's Certificate Number A 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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