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

In the Matter of the First Amended and Supplemental Accusation Against:	) ) )
JOSEPH SANDOR HARASZTI	) Case No. 11-2007-188043
Physician's and Surgeon's	)
Certificate No. G 37865	)
Respondent.	)
	)

#### **DECISION AND ORDER**

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

This Decision shall become effective at 5:00 p.m. on August 24, 2012.

IT IS SO ORDERED July 25, 2012.

MEDICAL BOARD OF CALIFORNIA

By:

Shelton Duruisseau, Ph.D., Chair

Panel A

	KAMALA D. HARRIS Attorney General of California		
	GLORIA L. CASTRO Supervising Deputy Attorney General EDWARD K. KIM		
	Deputy Attorney General		
	State Bar No. 195729 300 So. Spring Street, Suite 1702	· ·	
	Los Angeles, CA 90013 Telephone: (213) 897-7336		
	Facsimile: (213) 897-9395 Attorneys for Complainant		
	BEFORE THE  MEDICAL BOARD OF CALIFORNIA  DEPARTMENT OF CONSUMER AFFAIRS  STATE OF CALIFORNIA		
	In the Matter of the First Amended and Supplemental Accusation Against:	Case Nos. 11-2007-188043 and 11-2009-199134	
	JOSEPH SANDOR HARASZTI	OAH No. 2011010425	
	2810 East Del Mar Boulevard, Suite 8 Pasadena, California 91107	STIPULATED SETTLEMENT AND	
	Physician's and Surgeon's Certificate No. G 37865	DISCIPLINARY ORDER	
	Respondent.		
	IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-		
	entitled proceedings that the following matters are true:		
	PARTIES		
	1. Linda K. Whitney (Complainant) is the Executive Director of the Medical Board of		
	California (Board). She brought this action solely in her official capacity and is represented in		
	this matter by Kamala D. Harris, Attorney General of the State of California, by Edward K. Kim,		
	Deputy Attorney General.		
	2. Respondent Joseph Sandor Haraszti	(Respondent) is represented in this proceeding by	
	attorney Peter R. Osinoff, Esq., whose address is: 3699 Wilshire Boulevard, 10th Floor, Los		
	Angeles, California 90010-2719.		
	3. On or about August 21, 1978, the M	ledical Board of California issued Physician's and	

Surgeon's Certificate No. G 37865 to Joseph Sandor Haraszti. The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in the First Amended and Supplemental Accusation No. 11-2007-188043 and 11-2009-199134 (First Amended Accusation) and will expire on April 30, 2014, unless renewed.

#### **JURISDICTION**

- 4. The First Amended Accusation was filed before the Medical Board of California, Department of Consumer Affairs, and is currently pending against Respondent. The Accusation and the First Amended Accusation and all other statutorily required documents were properly served on Respondent on November 18, 2010, and, August 23, 2011, respectively. Respondent timely filed his Notice of Defense contesting the First Amended Accusation.
- 5. A copy of the First Amended and Supplemental Accusation No. 11-2007-188043 and 11-2009-199134 is attached as exhibit A and incorporated herein by reference.

#### ADVISEMENT AND WAIVERS

- 6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in First Amended Accusation. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 7. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the First Amended Accusation; the right to be represented by counsel at his own expense; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.
- 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

#### **CULPABILITY**

- 9. Respondent admits the truth of each and every charge and allegation in the Second and Fourth Causes for Discipline as to patient J.H. only, but not paragraph 25, in the First Amended and Supplemental Accusation No. 11-2007-188043 and 11-2009-199134.
- 10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

#### CONTINGENCY

- 11. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or his counsel. By signing the stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.
- 12. The parties understand and agree that facsimile copies of this Stipulated Settlement and Disciplinary Order, including facsimile signatures thereto, shall have the same force and effect as the originals.
- 13. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

# **DISCIPLINARY ORDER**

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G 37865 issued to Respondent Joseph Sandor Haraszti (Respondent) is revoked. However, the revocation is stayed and Respondent is placed on probation for two (2) years on the following terms and

conditions.

- 1. <u>EDUCATION COURSE</u>. Within 60 calendar days of the effective date of this Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee for its prior approval educational program(s) or course(s) which shall not be less than 15 additional hours per year, for each year of probation. The educational program(s) or course(s) shall be aimed at correcting any areas of deficient practice or knowledge and shall be Category I certified. The educational program(s) or course(s) shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure. Following the completion of each course, the Board or its designee may administer an examination to test Respondent's knowledge of the course. Respondent shall provide proof of attendance for 40 hours of CME per year, of which 15 hours were in satisfaction of this condition.
- 2. PRESCRIBING PRACTICES COURSE. Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a course in prescribing practices equivalent to the Prescribing Practices Course at the Physician Assessment and Clinical Education Program, University of California, San Diego School of Medicine (Program), approved in advance by the Board or its designee. Respondent shall provide the program with any information and documents that the Program may deem pertinent. Respondent shall participate in and successfully complete the classroom component of the course not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully complete any other component of the course within one (1) year of enrollment. The prescribing practices course shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

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

Respondent shall submit a certification of successful completion to the Board or its

designee not later than 15 calendar days after successfully completing the course, or not later than 15 calendar days after the effective date of the Decision, whichever is later.

3. PROFESSIONALISM PROGRAM (ETHICS) COURSE. Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a professionalism program, that meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.

Respondent shall participate in and successfully complete that program. Respondent shall provide any information and documents that the program may deem pertinent. Respondent shall successfully complete the classroom component of the program not later than six (6) months after Respondent's initial enrollment, and the longitudinal component of the program not later than the time specified by the program, but no later than one (1) year after attending the classroom component. The professionalism program shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

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

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

4. PROFESSIONAL BOUNDARIES PROGRAM. Within 60 calendar days from the effective date of this Decision, Respondent shall enroll in a professional boundaries program equivalent to the Professional Boundaries Program offered by the Physician Assessment and Clinical Education Program at the University of California, San Diego School of Medicine ("Program"). Respondent, at the Program's discretion, shall undergo and complete the Program's assessment of Respondent's competency, mental health and/or neuropsychological performance, and at minimum, a 24 hour program of interactive education and training in the area of boundaries, which takes into account data obtained from the assessment and from the Decision,

2.7

the First Amended Accusation and any other information that the Board or its designee deems relevant. The Program shall evaluate Respondent at the end of the training and the Program shall provide any data from the assessment and training as well as the results of the evaluation to the Board or its designee.

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

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

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

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

5. <u>MONITORING - PRACTICE</u>. Within 30 calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval as a practice monitor, the name and qualifications of one or more licensed physicians and surgeons whose licenses are valid and in good standing, and who are preferably American Board of Medical

Specialties (ABMS) certified. A monitor shall have no prior or current business or personal relationship with Respondent, or other relationship that could reasonably be expected to compromise the ability of the monitor to render fair and unbiased reports to the Board, including but not limited to any form of bartering, shall be in Respondent's field of practice, and must agree to serve as Respondent's monitor. Respondent shall pay all monitoring costs.

The Board or its designee shall provide the approved monitor with copies of the Decision and First Amended Accusation, and a proposed monitoring plan. Within 15 calendar days of receipt of the Decision, First Amended Accusation, and proposed monitoring plan, the monitor shall submit a signed statement that the monitor has read the Decision and First Amended Accusation, fully understands the role of a monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor disagrees with the proposed monitoring plan, the monitor shall submit a revised monitoring plan with the signed statement for approval by the Board or its designee.

Within 60 calendar days of the effective date of this Decision, and continuing throughout probation, Respondent's practice shall be monitored by the approved monitor. Respondent shall make all records available for immediate inspection and copying on the premises by the monitor at all times during business hours and shall retain the records for the entire term of probation.

If Respondent fails to obtain approval of a monitor within 60 calendar days of the effective date of this Decision, Respondent shall receive a notification from the Board or its designee to cease the practice of medicine within three (3) calendar days after being so notified. Respondent shall cease the practice of medicine until a monitor is approved to provide monitoring responsibility.

The monitor shall submit a quarterly written report to the Board or its designee which includes an evaluation of Respondent's performance, indicating whether Respondent's practices are within the standards of practice of medicine, and whether Respondent is practicing medicine safely, billing appropriately or both. It shall be the sole responsibility of Respondent to ensure that the monitor submits the quarterly written reports to the Board or its designee within 10 calendar days after the end of the preceding quarter.

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

In lieu of a monitor, Respondent may participate in a professional enhancement program equivalent to the one offered by the Physician Assessment and Clinical Education Program at the University of California, San Diego School of Medicine, that includes, at minimum, quarterly chart review, semi-annual practice assessment, and semi-annual review of professional growth and education. Respondent shall participate in the professional enhancement program at Respondent's expense during the term of probation.

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

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

- 7. <u>SUPERVISION OF PHYSICIAN ASSISTANTS</u>. During probation, Respondent is prohibited from supervising physician assistants.
- 8. <u>OBEY ALL LAWS</u>. Respondent shall obey all federal, state and local laws, all rules governing the practice of medicine in California and remain in full compliance with any court ordered criminal probation, payments, and other orders.

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

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

# 10. GENERAL PROBATION REQUIREMENTS.

# Compliance with Probation Unit

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

## Address Changes

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

#### Place of Practice

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

#### License Renewal

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

# Travel or Residence Outside California

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

In the event Respondent should leave the State of California to reside or to practice

Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of

departure and return.

- 11. <u>INTERVIEW WITH THE BOARD OR ITS DESIGNEE</u>. Respondent shall be available in person upon request for interviews either at Respondent's place of business or at the probation unit office, with or without prior notice throughout the term of probation.
- its designee in writing within 15 calendar days of any periods of non-practice lasting more than 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is defined as any period of time Respondent is not practicing medicine in California as defined in Business and Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct patient care, clinical activity or teaching, or other activity as approved by the Board. All time spent in an intensive training program which has been approved by the Board or its designee shall not be considered non-practice. Practicing medicine in another state of the United States or Federal jurisdiction while on probation with the medical licensing authority of that state or jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall not be considered as a period of non-practice.

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

Respondent's period of non-practice while on probation shall not exceed two (2) years. Periods of non-practice will not apply to the reduction of the probationary term.

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

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

- 14. <u>VIOLATION OF PROBATION</u>. Failure to fully comply with any term or condition of probation is a violation of probation. If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.
- 15. <u>LICENSE SURRENDER</u>. Following the effective date of this Decision, if
  Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
  the terms and conditions of probation, Respondent may request to surrender his or her license.
  The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
  determining whether or not to grant the request, or to take any other action deemed appropriate
  and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
  shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
  designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
  to the terms and conditions of probation. If Respondent re-applies for a medical license, the
  application shall be treated as a petition for reinstatement of a revoked certificate.
- 16. PROBATION MONITORING COSTS. Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Board or its designee no later than January 31 of each calendar year.

24 | ///

2

3 4

5

б 7

8

9

10

11 12

13

14

15

16

17

18

19

20 21

22

23

24

25 26

27

LA2010504904 60783826.doc 28

#### **ACCEPTANCE**

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

> 5/25/2012 Respondent

I have read and fully discussed with Respondent Joseph Sandor Haraszti the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED: S

PETER R. OSINOFF Attorney for Respondent

#### **ENDORSEMENT**

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

Dated:

Respectfully submitted,

KAMALA D. HARRIS Attorney General of California GLORIA L. CASTRO Supervising Deputy Attorney General

EDWARD K. KIM Deputy Attorney General Attorneys for Complainant

1	<u>ACCEPTANCE</u>		
2	I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully		
3	discussed it with my attorney, Peter R. Osinoff. I understand the stipulation and the effect it will		
4	have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and		
5	Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the		
6	Decision and Order of the Medical Board of California.		
7			
8	DATED:		
9	JOSEPH SANDOR HARASZTI Respondent		
10	I have read and fully discussed with Respondent Joseph Sandor Haraszti the terms and		
11	conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order		
12	I approve its form and content.		
13	DATED: PETER R. OSINOFF		
14	Attorney for Respondent		
15			
16	ENDORSEMENT		
17	The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully		
18	submitted for consideration by the Medical Board of California of the Department of Consumer		
19	Affairs.		
20	Dated: 5/29 / 12 Respectfully submitted,		
21	Dated: Respectfully submitted,  KAMALA D. HARRIS		
22	Attorney General of California GLORIA L. CASTRO		
23	Supervising Deputy Attorney General		
24	16/1.0/a -		
25	EDWARD K. KIM		
26	Deputy Attorney General  Attorneys for Complainant		

LA2010504904 60783826.doc

# Exhibit A

First Amended and Supplemental Accusation Case Nos. 11-2007-188043 and 11-2009-199134

1 2 3 4 5 6	KAMALA D. HARRIS Attorney General of California GLORIA L. CASTRO Supervising Deputy Attorney General EDWARD K. KIM Deputy Attorney General State Bar No. 195729 300 So. Spring Street, Suite 1702 Los Angeles, CA 90013 Telephone: (213) 897-7336 Facsimile: (213) 897-9395 Attorneys for Complainant	FILED STATE OF CALIFORNIA MEDICAL BOARD OF CALIFORNIA SACRAMENTO MALYST BY: Tracellal Analyst	
8 9 10	BEFORE THE MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA		
11 12 13 14 15	In the Matter of the First Amended and Supplemental Accusation Against:  JOSEPH SANDOR HARASZTI 2810 East Del Mar Blvd., Suite 8 Pasadena, California 91107  Physician's and Surgeon's Certificate No. G 37865	Case Nos. 11-2007-188043 and 11-2009-199134  OAH No. 2011010425  FIRST AMENDED AND SUPPLEMENTAL ACCUSATION	
16 17	Respondent.		
18	Complainant alleges:		
19	PAF	RTIES	
20	Linda K. Whitney (Complainant) brings this First Amended and Supplemental		
21	Accusation (Accusation) solely in her official capacity as the Executive Director of the Medical		
22	Board of California, Department of Consumer Affairs.		
23	2. On August 21, 1978, the Board issued Physician's and Surgeon's Certificate Number		
24	G37865 to Joseph Sandor Haraszti, 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 April 30, 2012, unless renewed.		
27	JURISDICTION  3. This Accusation is brought before the Medical Board of California (Board).		
40	3. This Accusation is brought before the Medical Board of California (Board),		

Department of Consumer Affairs, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.

- 4. Section 2227 of the Code provides that a licensee who is found guilty under the Medical Practice Act may have his or her license revoked, suspended for a period not to exceed one year, placed on probation and required to pay the costs of probation monitoring, or such other action taken in relation to discipline as the Division<sup>1</sup> deems proper.
  - 5. Section 2234 of the Code states:

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

- "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate any provision of this chapter [Chapter 5, the Medical Practice Act].
  - "(b) Gross negligence.
- "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or omissions. An initial negligent act or omission followed by a separate and distinct departure from the applicable standard of care shall constitute repeated negligent acts.
- "(1) An initial negligent diagnosis followed by an act or omission medically appropriate for that negligent diagnosis of the patient shall constitute a single negligent act.
- "(2) When the standard of care requires a change in the diagnosis, act, or omission that constitutes the negligent act described in paragraph (1), including, but not limited to, a reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the applicable standard of care, each departure constitutes a separate and distinct breach of the standard of care.
  - "(d) Incompetence.
  - "(e) The commission of any act involving dishonesty or corruption which is substantially

<sup>&</sup>lt;sup>1</sup> Pursuant to Business and Professions Code section 2002, "Division of Medical Quality" or "Division" shall be deemed to refer to the Medical Board of California.

 related to the qualifications, functions, or duties of a physician and surgeon.

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

#### FIRST CAUSE FOR DISCIPLINE

## (Repeated Negligent Acts; Patient L.G.)

6. Respondent is subject to disciplinary action under Section 2234, subdivision (c), of the Code in that he was repeatedly negligent in the care and treatment of patient L.G. <sup>2</sup> The circumstances are as follows:

#### Patient L.G.

- 7. On or about November 27, 2006, Patient L.G. was admitted to Aurora Las Encinas Hospital (ALEH), a psychiatric and addiction treatment hospital, for alcohol and drug detoxification. The patient had been drinking approximately 750 to 1125 milliliters of liquor and taking between 80 to 120 mg. (mg) of OxyContin<sup>3</sup> per day prior to his admission to ALEH. Patient L.G. was also taking Zoloft (50 mg.) and Wellbutrin (300 mg.) each day, both antidepressants.
- 8. Patient L.G. was admitted to the dual diagnosis unit of ALEH with diagnoses of Major Depression, Alcohol Dependence, and Opiate Abuse. Respondent ordered that he be monitored every 15 minutes. In addition, Respondent ordered that Librium<sup>4</sup> be administered at 25 mg. per hour as needed for the first 48 hours and at 25 mg. every four hours as needed during the second 48 hours. He also ordered that Patient L.G.'s blood pressure and pulse readings be taken and documented prior to all Librium doses.
- 9. Respondent's orders regarding detoxification included: (1) 200 mg. of Neurontin<sup>5</sup> four times per day for five days; (2) 50 mg. of Seroquel<sup>6</sup> every six hours as needed for agitation;

<sup>3</sup> OxyContin is the brand name for oxycodone hydrochloride, an opioid (narcotic) analgesic.

<sup>5</sup>Neurontin (gabapentin) is an anticonvulsant.
<sup>6</sup> Seroquel (quetiapine) is used to treat the symptoms of schizophrenia and bipolar disorder.

<sup>&</sup>lt;sup>2</sup> In this Accusation, patients will be referred to by their initials. The full name of each patient will be disclosed to Respondent upon request for discovery.

<sup>&</sup>lt;sup>4</sup> Librium (chlordiazepoxide) is used to relieve anxiety and to control agitation caused by alcohol withdrawal.

(3) 50 mg. of Trazadone each night as needed for insomnia; (4) 0.1 mg. of Clonidine<sup>7</sup> every six hours as needed; and (5) Robaxin<sup>8</sup>, Bentyl<sup>9</sup>, and Motrin four times each day. Respondent also prescribed two mg. of Subutex <sup>10</sup> to be administered three times on the first day. Patient L.G. was initially maintained on his pre-admission dosages of 300 mg. of Wellbutrin and 50 mg. of Zoloft per day.

- 10. The day after admission, Patient L.G. was given six doses of Librium. His blood pressure and pulse were documented for only three of such doses. At approximately 2:35 P.M., and again at 9:00 PM, Patient L.G.'s pulse was elevated. Respondent saw the patient that evening and noted that he was experiencing fairly severe alcohol withdrawal. Respondent also noted that the patient appeared to have fallen behind with the alcohol detoxification regimen and consequently ordered doses of Librium (50 mg.) and Ativan<sup>11</sup> (1.5 mg.) to be administered immediately. He also noted the patient was having significant symptoms of opioid withdrawal despite the two mg. of Subutex previously given three times that day. Respondent consequently ordered that two additional mg. of Subutex be immediately administered and increased the number of doses to be given each day from three to four. Respondent made no mention of the patient's tachycardia<sup>12</sup> or vital signs in the progress note. He ordered that Patient L.G.'s blood pressure and pulse be checked during each shift for the next 48 hours.
- 11. On November 29, 2006, Patient L.G. was given Librium at 1:00 A.M. and two mg. of Subutex at 9:00 A.M. and 2:00 P.M. There was no documentation of any vital signs having been taken or monitoring at 15-minute intervals having been done until the patient was found breathing but unresponsive at 4:50 P.M. Patient L.G. was then transported to the ER at San Gabriel Valley Medical Center (SGVMC) where he was given Flumazenil and two separate intravenous

<sup>&</sup>lt;sup>7</sup> Clonidine is used alone or in combination with other medications to treat high blood pressure. It is also used to used to relieve alcohol withdrawal and as an aid in opiate detoxification.

Robaxin is a muscle relaxant.
Bentyl is a muscle relaxant.

Subutex (buprenorphine) is used to treat opioid dependence.

Ativan (lorazepam) is a benzodiazepine used to treat anxiety disorders or anxiety associated with depression.

<sup>&</sup>lt;sup>2</sup> The term tachycardia refers to a rapid heartbeat of over 100 beats per minute.

infusions of Narcan to counteract the effects of the benzodiazepines and opioids. At 5:35 P.M., Patient L.G. was awake, alert, oriented and visiting with his girlfriend. Before leaving the emergency room, he was medicated with Ativan for anxiety at 11:45 P.M.

- 12. Patient L.G. returned to ALEH in the early morning of November 30, 2006 with orders that his vital signs be checked every four hours and the dose of Subutex be decreased to one milligram per day. A daily assessment taken at 10:48 A.M. stated, "patient appeared sedated from med, falling asleep . . . ." At 1:00 P.M., Patient L.G. received one milligram of Subutex and 25 mg. of Librium. There was no documentation of his vital signs, symptoms, or presentation at this time. In addition, there was no documentation of monitoring having been done at 15 minute intervals or vital signs having been taken during the remainder of the day shift. At 2:33 P.M., Respondent dictated a note reporting that, "while the patient is somewhat groggy today, he is overall doing much better. He is fully alert, oriented, and is aware of what happened." Despite there being no recent documentation of any vital signs in the patient's chart, and the last vital signs documented showing the patient as tachycardic, Respondent reported that the patient's vital signs "are well within normal limits." Respondent continued to reduce the dose of Subutex, discontinued the Librium, and ordered 15 mg. of Serax 13 to be administered every four hours as needed for withdrawal.
- 13. Patient L.G. was given the final dose of Subutex at 5:00 P.M. on November 30, 2006. At 6:00 P.M., he received fifteen mg. of Serax. At 9:00 P.M., Patient L.G. was noted to be "still shaking from detox" and was given Restoril<sup>14</sup> but not a benzodiazepine for withdrawal. At 10:45 P.M., the patient received fifteen mg. of Serax and his vital signs were documented showing hypertension and tachycardia.
- 14. The following morning at 6:00 A.M. on December 1, 2006, it was reported that, "the patient slept through the night without incident. Monitored every 15 minutes for safety."

  Approximately three hours later, Patient L.G. was found dead by his therapist.

Restoril (temazepam) is a benzodiazepine used to treat insomnia symptoms.

<sup>&</sup>lt;sup>13</sup> Serax (oxazepam) is used to relieve anxiety. It also is used to control agitation caused by alcohol withdrawal.

- 15. Respondent was negligent in his care and treatment of patient L.G. as follows:
  - a. By failing to employ an appropriate alcohol detoxification protocol; and
- b. By failing to order appropriate medications and doses after patient L.G. returned from the ER at SGVMC.
- 16. At 3:00 P.M. on or about November 30, 2006, Respondent called L.G.'s father's office and left a message with L.G.'s father's secretary that disclosed confidential medical information about L.G., including the results of a toxicology report and whether or not there were findings for opiates. Furthermore, Respondent requested a retainer for \$5,000 from L.G.'s father and indicated that Respondent would meet with L.G.'s father on or about, Sunday, December 3, 2006.
  - 17. Respondent was negligent in his care and treatment of patient L.G. as follows:
    - a. By failing to employ an appropriate opiate detoxification protocol; and
    - b. By failing to employ an appropriate detoxification protocol.
  - 18. Respondent was negligent in his overall care and treatment of patient L.G.
- 19. The acts and/or omissions set forth in paragraphs 7 through 18, inclusive, above constitute departures from the standard of care.

#### SECOND CAUSE FOR DISCIPLINE

# (Repeated Negligent Acts; Patients J.H. and R.G.)

20. Respondent is subject to disciplinary action under Section 2234, subdivision (c), of the Code in that he was repeatedly negligent in the care and treatment of patients J.H., and R.G. The circumstances are as follows:

#### Patient J.H.

- 21. J.H., a 32 year-old man, was hospitalized at Aurora Psychiatric Hospital (Aurora) in Pasadena, California, on or around July of 2006. At that time, he was diagnosed with bipolar disorder and polysubstance dependence. Respondent prescribed several medications to J.H., including antipsychotic medications and mood stabilizers.
  - 22. Following J.H.'s release from this hospitalization in 2006, Respondent continued to

22.

 treat J.H. and prescribe him various medications, including Depakote<sup>15</sup> and Abilify.<sup>16</sup>
Respondent had an outpatient visit with J.H. on or about December 8, 2006. Respondent's medical chart for J.H. included illegible handwriting and information that was not relevant to J.H.

- 23. In or around June of 2008, approximately two years after J.H. was released from Aurora, Respondent decided to go into business together with J.H., in connection with a wellness and spa center referred to as On Higher Ground Rejuvenation / Wellness and Spa Center (OHG). OHG's documentation indicated that Respondent was the CEO, and J.H. was the President, of OHG. Respondent continued to treat J.H. by prescribing medications to him during the time they operated of OHG. Respondent failed to maintain appropriate boundaries with J.H. by having a dual relationship in business and medicine with J.H.
- 24. In and around February 2008 and thereafter, Respondent was negligent when he engaged in a business relationship with J.H. in connection with OHG.
- 25. Respondent was negligent when he abruptly terminated his relationship with J.H. Patient R.G.
- 26. R.G. checked into OHG on or about September 28, 2008, after paying approximately \$37,100. On or about September 29, 2008, R.G. met for the first time with Respondent in her bedroom at OHG at approximately 1:00 a.m. At that time, Respondent requested a retainer for \$5,000 from R.G. for his professional services. As a result, R.G. wrote a check to Respondent in the amount of \$5,000.
- 27. During her stay at OHG, R.G. received a medical/physical examination by another doctor and it was discovered that she had a urinary tract infection.
- 28. During R.G.'s stay at OHG, Respondent revealed private confidential information about J.H. in conversations with R.G.
  - 29. On more than one occasion, R.G. provided additional money to OHG. Although

Depakote is a trade name for a prescription drug (generic name valproic acid) that is an anticonvulsant mood stabilizer that can be used to treat bipolar disorder.

Abilify is a trade name for a prescription drug (generic name aripiprazole) that is an atypical antipsychotic and antidepressant that can be used in the treatment of schizophrenia, bipolar disorder, and clinical depression.

Respondent wrote reimbursement checks to R.G., he became upset when R.G. attempted to cash those reimbursement checks. Respondent abruptly terminated his doctor-patient relationship with R.G., and told her she would need to get another psychiatrist, in or around December 2008.

- 30. Respondent committed negligence in connection with R.G. by failing to maintain appropriate boundaries and engaging in exploitative conduct with R.G. during his first meeting with her, which occurred at approximately 1:00 a.m. and during which he requested a \$5,000 retainer from R.G.
- 31. On or September 29, 2008, and thereafter, Respondent was negligent when he revealed confidential information about J.H. to R.G.
  - 32. Respondent was negligent when he abruptly terminated his relationship with R.G.
- 33. The acts and/or omissions set forth in paragraphs 21 through 32, inclusive, above constitute departures from the standard of care.

#### THIRD CAUSE FOR DISCIPLINE

# (Gross Negligence)

34. Respondent is subject to disciplinary action under Section 2234, subdivision (b), of the Code in that he was grossly negligent in the care and treatment of Patient L.G. The circumstances are as follows:

#### Patient L.G.

- 35. The acts and/or omissions set forth in paragraphs 7 through 18, inclusive, are incorporated herein by reference as if fully set forth.
  - 36. Respondent was grossly negligent in his overall care and treatment of patient L.G.

#### FOURTH CAUSE FOR DISCIPLINE

# (Failure to Maintain Adequate/Accurate Medical Records)

- 37. Respondent is subject to disciplinary action under section 2266 of the Code in that Respondent failed to keep adequate and accurate records related to the provision of medical services to a patient. The circumstances are as follows:
- 38. The allegations of the First, Second and Third Causes for Discipline are incorporated herein by reference as if fully set forth.

#### FIFTH CAUSE FOR DISCIPLINE

#### (Violation of Professional Confidence)

- 39. Respondent is subject to disciplinary action under section 2263 of the Code in that Respondent violated professional confidence. The circumstances are as follows:
- 40. The allegations of the First, Second, Third and Fourth Causes for Discipline are incorporated herein by reference as if fully set forth.

#### SIXTH CAUSE FOR DISCIPLINE

#### (General Unprofessional Conduct)

- 41. Respondent is subject to disciplinary action under section 2234 of the Code in that he committed general unprofessional conduct. The circumstances are as follows:
- 42. The allegations of the First, Second, Third, Fourth and Fifth Causes for Discipline are incorporated herein by reference as if fully set forth.

#### **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 G 37865, issued to Joseph Sandor Haraszti, M.D.;
- 2. Revoking, suspending or denying approval of Joseph Sandor Haraszti, M.D.'s authority to supervise physician assistants, pursuant to section 3527 of the Code;
- 3. Ordering Joseph Sandor Haraszti, M.D. to pay the Medical Board of California, if placed on probation, the costs of probation monitoring; and
  - 4. Taking such other and further action as deemed necessary and proper.

DATED: August 23, 2011.

LINDA K. WHITNEY
Executive Director
Medical Board of California
Department of Consumer Affairs

State of California

Complainant

LA2010504904 50956539.doc

27