BEFORE THE BOARD OF MEDICAL EXAMINERS OF THE STATE OF NEVADA

* * * * *

In the Matter of Charges and)) Case No. 11-3	10754- 1
Complaint Against)	
DANIEL A. WILLIAMS, M.D.,) FILED	
) JUL 2 1 2011	1
Respondent.	NEVADA STATE BOAR MEDICAL EXAMINE By:	

COMPLAINT

The Investigative Committee of the Nevada State Board of Medical Examiners (Board), composed of Charles N. Held, M.D., Theodore, B, Berndt, M.D., and Valerie J. Clark, BSN, RHU, LUTCF, at the time of the authorization of filing this formal complaint, by and through Edward O. Cousineau, Deputy Executive Director for the Board and counsel for the Investigative Committee, having a reasonable basis to believe that Daniel A. Williams, M.D., hereinafter referred to as "Respondent," has violated the provisions of NRS Chapter 630, hereby issues its formal Complaint, stating the Investigative Committee's charges and allegations, as follows:

- 1. Respondent was licensed to practice medicine in the state of Nevada on September 9, 2005, Respondent's license to practice medicine is currently in active status, and at all times alleged herein, Respondent was licensed in active status by the Board, pursuant to the provisions of Chapter 630 of the Nevada Revised Statutes.
- 2. In October of 2010, in lieu of formal disciplinary proceedings, Respondent entered into a Stipulated Settlement and Disciplinary Order with the Medical Board of California, which was later adopted by the Medical Board of California, and became effective on April 22, 2011. (See Exhibit 1). The terms of the Stipulated Settlement and Disciplinary Order called for Respondent's license to practice medicine in the state of California to be revoked, with that

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revocation being stayed based upon Respondent's obligation to comply with various terms and conditions during a subsequent three-year probationary term.

- Section 630.301(3) of the Nevada Revised Statutes provides that any disciplinary 3. action, including without limitation, the revocation, suspension, modification or limitation of the license to practice any type of medicine by any other jurisdiction is grounds for disciplinary action.
- The disciplinary action related to Respondent's license to practice medicine in the 4. state of California, constitute violations of the provisions of Nevada Revised Statute 630.301(3).
- Based upon the forgoing, Respondent has violated Nevada Revised Statute 5. 630.301(3) and is subject to discipline by the Board as provided in Nevada Revised Statute 630.352.

WHEREFORE, the Investigative Committee prays:

- 1. That the Board fix a time and place for a formal hearing;
- That the Board give Respondent notice of the charges herein against him, the time 2. and place set for the hearing, and the possible sanctions against him;
- That the Board determine what sanctions it determines to impose for the violation or 3. violations committed by Respondent; and
- That the Board make, issue and serve on Respondent its findings of facts, 4. conclusions of law and order, in writing, that includes the sanctions imposed.

day of July, 2011. DATED this

> INVESTIGATIVE COMMITTEE OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS

By:

Edward O. Cousineau

Attorney for the Investigative Committee of the Nevada State Board of Medical Examiners

OFFICE OF THE GENERAL COUNSEL Nevada State Board of Medical Examiners

VERIFICATION

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STATE OF NEVADA)
COUNTY OF WASHOE	: ss.

Theodore B. Berndt, M.D., having been duly sworn, hereby deposes and states under penalty of perjury that he is the Chairman of the Investigative Committee of the Nevada State Board of Medical Examiners that authorized the Complaint against the Respondent herein; that he has read the foregoing Complaint; and that based upon information discovered in the course of the investigation into a complaint against Respondent, he believes that the allegations and charges in the foregoing Complaint against Respondent are true, accurate, and correct.

Dated this 21 st day of July, 2011.

Theodore B. Berndt, M.D.

OFFICE OF THE GENERAL COUNSEL Nevada State Board of Medical Examiners

CERTIFICATE OF MAILING

I hereby certify that I am employed by Nevada State Board of Medical Examiners and that on 21st day of July 2011, I served a file copy of the COMPLAINT, SETTLEMENT, WAIVER AND CONSENT AGREEMENT, along with FINGERPRINT information via USPS e-certified mail to the following:

Daniel A. William, M.D. Mt. Grant General Hospital First & A Streets Hawthorne, NV 89415

Dated this 21st day of July 2011.

Angelia L. Donohoe

Legal Assistant

EXHIBIT

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

In the Matter of the Accusation Against:)	, 22
DANIEL ATHERTON WILLIAMS, JR. M.D.)) Case No. 02-2007-188040	
Physician's and Surgeon's Certificate No. G37614))	
Respondent.))	

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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 April 22, 2011.

IT IS SO ORDERED March 23, 2011.

MEDICAL BOARD OF CALIFORNIA

y: ____

Hedy Chang Chair

Panel B

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1	EDMUND G. BROWN JR.		
2	Attorney General of California GAIL M. HEPPELL		
3	Supervising Deputy Attorney General JESSICA M, AMGWERD		
4	Deputy Attorney General State Bar No. 155757		
5	1300 I Street, Suite 125 P.O. Box 944255		
6	Sacramento, CA 94244-2550 Telephone: (916) 445-7376		
7	Facsimile: (916) 327-2247 E-mail: Jessica.Amgwerd@doj.ca.gov		
8	Attorneys for Complainant		
9	, morning you company		
10	BEFORE TH MEDICAL BOARD OF C	CALIFORNIA	
11	DEPARTMENT OF CONSU STATE OF CALIF	JMER AFFAIRS	
12		·	
13	In the Matter of the Accusation Against:	Case No. 02-2007-188040	
14	DANIEL ATHERTON WILLIAMS, JR., M.D.	OAH No. 02-2010020576	
15	339 Cedar Drive Greenville, CA 95947	STIPULATED SETTLEMENT AND	
16	Physician's and Surgeon's Certificate No. G 37614	DISCIPLINARY ORDER	
17	Respondent.		
18			
19		'	
20	IT IS HEREBY STIPULATED AND AGREED	by and between the parties to the above-	
21	entitled proceedings that the following matters are true:		
22	PARTIES		
23	1. Linda Whitney (Complainant) is the Execu	tive Director of the Medical Board of	
24	California. This action was filed solely in the official capacity of the Executive Director.		
25	Complainant is represented in this matter by Edmund G. Brown Jr., Attorney General of the State		
26	of California, by Jessica M. Amgwerd, Deputy Attorne	y General.	
27	<i>///</i>		
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- Respondent Daniel Atherton Williams, Jr., M.D. (Respondent) is represented in this
 proceeding by attorney Robert D. McIlroy, whose address is 46 Harrison Street, Quincy,
 California 95971.
- 3. On or about July 24, 1978, the Medical Board of California issued Physician's and Surgeon's License No. G 37614 to Daniel Atherton Williams, Jr., M.D. (Respondent).

JURISDICTION

4. Accusation No. 02-2007-188040 was filed before the Medical Board of California, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on January 7, 2009. Respondent timely filed his Notice of Defense contesting the Accusation. A copy of Accusation No. 02-2007-188040 is attached as Exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

- 5. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 02-2007-188040. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 6. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the 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.
- 7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

8. Respondent admits that he violated Business and Professions Code sections 2236(a), 2238, 2266, and 2234(c) as alleged in the Accusation, paragraphs 58, 60 through 64, and 67.

9. Respondent agrees that his Physician's and Surgeon's is subject to discipline and he agrees to be bound by the Medical Board of California's imposition of discipline as set forth in the Disciplinary Order below.

RESERVATION

10. The admissions made by Respondent herein are only for the purposes of this proceeding, or any other proceedings in which the Medical Board or other professional licensing agency is involved, and shall not be admissible in any other criminal or civil proceeding.

CONTINGENCY

- 11. 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.
- 12. In consideration of the foregoing admissions and stipulations, the parties agree that the Medical Board of California 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 No. G 37614 issued to Respondent Daniel Atherton Williams, Jr., M.D. (Respondent) is revoked. However, the revocation is stayed and Respondent is placed on probation for three (3) years on the following terms and conditions.

1. <u>ETHICS COURSE</u> Within 60 calendar days of the effective date of this Decision, respondent shall enroll in a course in ethics, at respondent's expense, approved in advance by the Division or its designee. Failure to successfully complete the course during the first year of probation is a violation of probation.

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

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Respondent shall submit a certification of successful completion to the Division 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.

NOTIFICATION Prior to engaging in the practice of medicine, the respondent shall provide a true copy of the Decision and 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 Division or its designee within 15 calendar days.

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

- SUPERVISION OF PHYSICIAN ASSISTANTS During probation, respondent is 3. prohibited from supervising physician assistants.
- OBEY ALL LAWS Respondent shall obey all federal, state and local laws, all rules 4. governing the practice of medicine in California, and remain in full compliance with any court ordered criminal probation, payments and other orders.
- **QUARTERLY DECLARATIONS** Respondent shall submit quarterly declarations 5. under penalty of perjury on forms provided by the Division, 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.
- PROBATION UNIT COMPLIANCE Respondent shall comply with the Division's 6. probation unit. Respondent shall, at all times, keep the Division informed of respondent's business and residence addresses. Changes of such addresses shall be immediately communicated in writing to the Division 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).

Respondent shall not engage in the practice of medicine in respondent's place of residence. Respondent shall maintain a current and renewed California physician's and surgeon's license.

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

- 7. <u>INTERVIEW WITH THE DIVISION, OR ITS DESIGNEE</u> Respondent shall be available in person for interviews either at respondent's place of business or at the probation unit office, with the Division or its designee, upon request at various intervals, and either with or without prior notice throughout the term of probation.
- 8. RESIDING OR PRACTICING OUT-OF-STATE In the event respondent should leave the State of California to reside or to practice, respondent shall notify the Division or its designee in writing 30 calendar days prior to the dates of departure and return. Non-practice is defined as any period of time exceeding 30 calendar days in which respondent is not engaging in any activities defined in Sections 2051 and 2052 of the Business and Professions Code.

All time spent in an intensive training program outside the State of California which has been approved by the Division or its designee shall be considered as time spent in the practice of medicine within the State. A Board-ordered suspension of practice shall not be considered as a period of non-practice. Periods of temporary or permanent residence or practice outside California will not apply to the reduction of the probationary term. Periods of temporary or permanent residence or practice outside California 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; Probation Unit Compliance; and Cost Recovery.

Respondent's license shall be automatically cancelled if respondent's periods of temporary or permanent residence or practice outside California total two years. However, respondent's license shall not be cancelled as long as respondent is residing and practicing medicine in another state of the United States and is on active probation with the medical licensing authority of that state, in which case the two year period shall begin on the date probation is completed or terminated in that state.

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9. FAILURE TO PRACTICE MEDICINE - CALIFORNIA RESIDENT

In the event respondent resides in the State of California and for any reason respondent stops practicing medicine in California, respondent shall notify the Division or its designee in writing within 30 calendar days prior to the dates of non-practice and return to practice. Any period of non-practice within California, as defined in this condition, will not apply to the reduction of the probationary term and does not relieve respondent of the responsibility to comply with the terms and conditions of probation. Non-practice is defined as any period of time exceeding 30 calendar days in which respondent is not engaging in any activities defined in sections 2051 and 2052 of the Business and Professions Code.

All time spent in an intensive training program which has been approved by the Division or its designee shall be considered time spent in the practice of medicine. For purposes of this condition, non-practice due to a Board-ordered suspension or in compliance with any other condition of probation, shall not be considered a period of non-practice.

Respondent's license shall be automatically cancelled if respondent resides in California and for a total of two years, fails to engage in California in any of the activities described in Business and Professions Code sections 2051 and 2052.

- 10. <u>COMPLETION OF PROBATION</u> Respondent shall comply with all financial obligations (e.g., 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.
- 11. <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 Division, 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, Petition to Revoke Probation, or an Interim Suspension Order is filed against respondent during probation, the Division shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

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- 12. <u>LICENSE SURRENDER</u> Following the effective date of this Decision, if respondent ceases practicing due to retirement, health reasons or is otherwise unable to satisfy the terms and conditions of probation, respondent may request the voluntary surrender of respondent's license. The Division reserves the right to evaluate respondent's request and to exercise its discretion 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 Division or its designee and respondent shall no longer practice medicine. Respondent will no longer be subject to the terms and conditions of probation and the surrender of respondent's license shall be deemed disciplinary action. If respondent reapplies for a medical license, the application shall be treated as a petition for reinstatement of a revoked certificate.
- 13. PROBATION MONITORING COSTS Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Division, which may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Division or its designee no later than January 31 of each calendar year. Failure to pay costs within 30 calendar days of the due date is a violation of probation.
- 14. CONTROLLED SUBSTANCES-ABSTAIN FROM USE Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the California Uniform Controlled Substances Act, dangerous drugs as defined by business and Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not apply to medications lawfully prescribed to respondent by another practitioner for a bona fide illness or condition.

Within 15 calendar days of receiving any lawful prescription medications, respondent shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone number, medication name and strength; and issuing pharmacy name, address, and telephone number.

ACCEPTANCE 1 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully 2 discussed it with my attorney, Robert D. McElroy. I understand the stipulation and the effect it 3 will have on my Physician's and Surgeon's. I enter into this Stipulated Settlement and 4 Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the 5 Decision and Order of the Medical Board of California. 6 7 8 Respondent 9 10 I have read and fully discussed with Respondent Daniel Atherton Williams, Jr., M.D. the 11 terms and conditions and other matters contained in the above Stipulated Settlement and 12 Disciplinary Order. I approve its form and content 13 14 15 ROBERT D. McILROY Counsel For Respondent 16 17 ENDORSEMENT 18 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully 19 submitted for consideration by the Medical Board of California. 20 21 DATED: October 15,2010 EDMUND G! BROWN JR. Attorney General of California 22 GAIL M. HEPPELL Supervising Deputy Attorney General 23 24 25 Jessica M. Amgwerd Deputy Attorney General Attorneys for Complainant 26 27 SA2008307149 28 10477021.doc 8

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STIPULATED SETTLEMENT (02-2007-188040)

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- 1	of the State of California		
2	GAIL M. HEPPELL Supervising Deputy Attorney General		
. 3			
4	California Department of Justice 1300 I Street, Suite 125		
5	P.O. Box 944255	FILED STATE OF CALIFORNIA	
. 6	I I CICDIIOIIC. 1710/ TTD-75/0	EDICAL BOARD OF CALIFORNIA	
7	1 desimile. (710) 321-2241	ACHAMENTO ANUARY 7, 20 09 Y: TY LAKE ANALYST	
8	Attorneys for Complainant		
9	BEFORE TI		
10	MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA		
11			
12	In the Matter of the ACCUSATION Against:	Case No. 02-2007-188040	
13	DANIEL ATHERTON WILLIAMS, JR., M.D. 339 Cedar Drive	ACCUSATION	
14	Greenville, CA 95947		
15	P.O. Box 709 Greenville, CA 95947-0709	·	
16	Physician and Surgeon's Certificate No. G 37614		
17	Respondent.		
18	- respondent.		
19	Complainant alleges:		
20	. I.		
21	<u>PARTIES</u>		
22	1. Barbara Johnston (Complainant)	brings this Accusation solely in her	
23	official capacity as the Executive Director of the Medical Board of California, Department of		
24	Consumer Affairs.		
25	2. On or about July 24, 1978, the N	fedical Board of California issued	
26	Physician's and Surgeon's Certificate Number G 37614	to Daniel Atherton Williams, Jr., M.D.	
27	(Respondent). The Physician's and Surgeon's Certifica	te was in full force and effect at all times	
28	relevant to the charges brought herein and will expire o	n July 31, 2010, unless renewed.	

9. Business and Professions Code section 2234 states:

§ 2234. Unprofessional conduct

The Division of Medical Quality¹ 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.
- (e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon.

^{1.} California Business and Professions Code section 2002, as amended and effective January 1, 2008, provides that, unless otherwise expressly provided, the term "board" as used in the State Medical Practices Act means the "Medical Board of California", and references to the "Division of Medical Quality" in the Act or any other provision of law shall be deemed to refer to the Board.

1		10. Business and Professions Code section 2236(a), states in pertinent part, the
2	following:	
3		§ 2236. Conviction of offense related to qualifications, functions, or duties of physician or surgeon; unprofessional
4		conduct; notice of pendency of action; record of conviction
5		(a) The conviction of any offense substantially related to the qualifications, functions, or duties of a physician and surgeon
6		constitutes unprofessional conduct within the meaning of this chapter. The record of conviction shall be conclusive evidence only of the fact that the conviction occurred.
7		only of the fact that the conviction occurred.
8		11. Business and Professions Code section 2238, states as follows:
9		§ 2238. Violation of federal or state statute or regulation
10		regulating dangerous drugs or controlled substances; unprofessional conduct
11		A violation of any federal statute or federal regulation or any of the statutes or regulations of this state regulating dangerous drugs or
12		controlled substances constitutes unprofessional conduct.
13		12. Business and Professions Code section 2242(a), states in pertinent part, the
14	following:	
15		§ 2242. Prescribing, dispensing, or furnishing dangerous drugs without prior examination and medical indication;
16		unprofessional conduct; exception
17		(a) Prescribing, dispensing, or furnishing dangerous drugs as defined in section 4022 without an appropriate prior examination
18		and medical indication therefor, constitutes unprofessional conduct.
19		
20		13. Business and Professions Code section 2266(a), states as follows:
21		§ 2266. Record maintenance; services to patients
22		The failure of a physician and surgeon to maintain adequate and accurate records relating to the provision of services to their
23		patients constitutes unprofessional conduct.
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1	14. Business and Professions Code section 4040, states as follows:
2	§ 4040. Prescription; electronic transmission prescription
3	(a) "Prescription" means an oral, written, or electronic transmission order that is both of the following:
4	(1) Civran individually for the manner of
5	(1) Given individually for the person or persons for whom ordered that includes all of the following:
6	
7	((D) Either rubber stamped, typed, or printed by hand or typeset, the name, address, and telephone
8	number of the prescriber, his or her license classification, and his or her federal registry
9	number, if a controlled substance is prescribed.
10	(b) Notwithstanding subdivision (a), a written order of the
11	prescriber for a dangerous drug, except for any Schedule II controlled substance, that contains at least [emphasis added].
12	15. Business and Professions Code section 4060, states as follows:
13	§ 4060. Controlled substances; possession
14	No person shall possess any controlled substance, except that
15	furnished to a person upon the prescription of a physician, dentist, podiatrist, or veterinarian, This section shall not apply to the
16	possession if any controlled substance by a manufacturer, wholesaler, pharmacy, physician, podiatrist, when in stock
17	containers correctly labeled with the name and address of the supplier or producer.
18	•••
19	16. Business and Professions Code section 4170 states as follows:
20	§ 4170. Conditions; enforcement of chapter; prescriber
21	(a) No prescriber shall dispense drugs or dangerous devices to
22	patients in his or her office or place of practice unless all of the following conditions are met:
23	(1) The dangerous drugs or dangerous devices are
24	dispensed to the prescriber's own patient, and the drugs or dangerous devices are not furnished by a
25	nurse or physician attendant.
26	(2) The dangerous drugs or dangerous devices are necessary in the treatment of the conditions for
27	which the prescriber is attending the patient.
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. 1		(4) The prescriber fulfills all of the labeling
2		requirements imposed upon pharmacists by Section 4076, all of the record keeping requirements of this
3		chapter, and all of the packaging requirements of good pharmaceutical practice, including the use of childproof containers.
4		emaproof containers.
5		•••
6		(6) The prescriber, prior to dispensing, offers to give a written prescription to the patient that the patient
7		may elect to have filled by the prescriber or by any other pharmacy.
8		17. Business and Professions Code section 4172, states as follows:
9		§ 4172. Storage of drugs; secure area
10		A prescriber who dispenses drugs pursuant to section 4170 shall
11		store all drugs to be dispensed in an area that is secure. The Medical Board of California shall, by regulation, defines the term
12		"secure" for purposes of this section.
13		18. Title 16 of the California Code of Regulations section 1356.3, states as
14	follows:	\$ 1256 2 Grant Grant Charles
15		§ 1356.3. Secure Area –Storage of Drugs in Physician's Offices.
16		For purposes of section 4172 of the code, the phrase "area which is
17		secure" means a locked storage area within a physician's office. The area shall be secure at all times. The keys to the locked
18		storage area shall be available only to staff authorized by the physician to have access thereto.
19		
20		19. Health and Safety Code section 11157 states as follows:
21		§ 11157. False or fictitious prescription
22		No person shall issue a prescription that is false or fictitious in any respect.
23		20. Health and Safety Code section 11164 states in pertinent part, the
24	following:	
25		§ 11164. Execution and contents of prescriptions for schedule II, III, IV, and V controlled substances; oral or electronically
26		transmitted prescriptions; record
27		Except as provided in section 11167, no person shall prescribe a controlled substance, nor shall any person fill, compound, or
_ ∥		dispense a prescription for a controlled substance, unless it

complies with the requirements of this section. 1 2 (a) Each prescription for a controlled substance classified in Schedule II, III, IV, and V, except as authorized by subdivision (b) 3 shall be made on a controlled substance prescription form as specified in Section 11162.1 and shall meet the following 4 requirements: 5 (1) The prescription shall be signed and dated by the prescriber in ink and shall contain the prescriber's address and telephone number; the name of the 6 ultimate user or research subject, or contact information as determined by the Secretary of the 7 United States Department of Health and Human 8 Services; . . 9 21. Health and Safety Code section 11170, states that "No person shall prescribe, administer, or furnish a controlled substance for himself." 10 Health and Safety Code section 11173(a), states as follows: 22. 11 12 § 11173. Fraud, deceit, misrepresentation 13 (a) No person shall obtain or attempt to obtain controlled substances, or procure or attempt to procure the administration of or prescription for controlled substances, (1) by fraud, deceit, 14 misrepresentation, or subterfuge; or (2) by concealment of a material fact. 15 (b) No person shall make a false statement in any prescription, 16 order, report, or record, required by this division. 17 23. Health and Safety Code section 11174, states as follows: 18 19 § 11175. False name or address No person shall, in connection with the prescribing, furnishing, 20 administering, or dispensing of a controlled substance, give a false name or false address. 21 22 24. Health and Safety Code section 11175, states as follows: § 11175. Possession of noncomplying prescriptions; unlawfully 23 obtaining controlled substances 24 No person shall obtain or possess a prescription that does not comply with this division, nor shall any person obtain a controlled 25 substance by means of a prescription which does not comply with 26 this division or possess a controlled substance obtained by such a prescription.

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25. The Controlled Substance Act (21 U.S.C. § 801 et. seq.) and federal regulation (21 C.F.R. §1300 et. seq.) regulate controlled substances in the United States. 21 U.S.C. section 844 states in pertinent part, the following:

§ 844. Penalties for simple possession (a) Unlawful acts; penalties

It shall be unlawful for any person knowingly or intentionally to possess a controlled substance unless such substance was obtained directly, or pursuant to a valid prescription or order, from a practitioner, while acting in the course of his professional practice, or except as otherwise authorized by this subchapter or subchapter II of this chapter . . .

III.

DANGEROUS DRUGS AT ISSUE

- 26. "Lortab", a brand name for Hydrocodone, is an opiate and a Schedule III controlled substance as designated by Health and Safety Code section 11056, subdivision (e)(4), and a dangerous drug as designated in Health and Safety Code section 4022.
- 27. "Lorcet", a brand name for Hydrocodone, is an opiate and a Schedule III controlled substance as designated by Health and Safety Code section 11056, subdivision (e)(4), and a dangerous drug as designated in Health and Safety Code section 4022.
- 28. "Norco", a brand name for Hydrocodone, is an opiate and a Schedule III controlled substance as designated by Health and Safety Code section 11056, subdivision (e)(4), and a dangerous drug as designated in Health and Safety Code section 4022.
- 29. "Vicodin", a brand name for Hydrocodone, is an opiate and a Schedule III controlled substance as designated by Health and Safety Code section 11056, subdivision (e)(4), and a dangerous drug as designated in Health and Safety Code section 4022.
- 30. "Marinol" is a brand name for Dronabinol, a Schedule III controlled substance as defined by Health and Safety Code section 11056(h), and is a dangerous drug as designated in Health and Safety Code section 4022.

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BRAND NAME	GENERIC NAME	DANGEROUS DRUG PER B&P C 4022	CONTROLLED SUBSTANCE PER H&S CODE	INDICATIONS FOR USE
Lortab	Hydrocodone/APAP 7.5 or 10mg/500mg	Yes	Yes-C3 HSC 11056 (e) (4)	Pain
Lorcet 10mg	Hydrocodone/APAP 10mg/650mg	Yes	Yes-C3 HSC 11056 (e) (4)	Pain
Norco	Hydrocodone/APAP 10mg/325mg	Yes	Yes-C3 HSC 11056 (e) (4)	Pain
Vicodin Vicodin ES	Hydrocodone/APAP 5/500 or 7.5/750mg	Yes	Yes-C3 HSC 11056 (e) (4)	Pain
Marinol	Dronabinol 2.5 mg, 5 mg, 10 mg	Yes	Yes-C3 HSC 11056(h)	Appetite Stimulant

31. The Physician Desk Reference entry for "Vicodin ES" from the 59 Edition 2005, at page 528, states, in pertinent part, the following:

DOSAGE AND ADMINISTRATION

Dosage should be adjusted according to the severity of the pain and the response of the patient. However, it should be kept in mind that tolerance to Hydrocodone can develop with continued use and that the incidence of untoward effects is dose related.

The usual adult dosage is one tablet every four to six hours as needed for the pain. The total daily dosage should not exceed 5 tablets.

IV.

GENERAL BACKGROUND

A. Respondent's California Controlled Substance & Dangerous Drug Prescriptions Had False Addresses And/Or An Expired DEA Registration.

32. Circa 1992, Respondent began working at Greenville Medical Clinic, which was associated with Indian Valley Health Care Clinic. Both Greenville Medical Clinic and Indian Valley Health Care Clinic were located at 187 Hot Springs Rd., Greenville, California. On December 31, 2006, the Greenville Medical Clinic closed. When Respondent worked at 187 Hot Springs, he obtained a DEA Registration (No. AW8379871) for issuing controlled substances at that address. According to Respondent, he worked for Greenville

Medical Clinic/Indian Valley Health Care Clinic until circa May 11, 2006.

33. After Respondent quit working at the Greenville Medical Clinic, he continued to see his California patients at his home located at 339 Cedar Dr., Greenville, California 95947, but did not notify the DEA of his changed address. Instead, from June 2006 up until circa February 2008, he continued to use the 187 Hot Springs address and the Greenville Medical Clinic prescription forms. He also continued to use the DEA Registration (No. AW8379871) for the 187 Hot Springs address, even after the DEA Registration No. AW8379871 expired on December 31, 2007.

- 34. The local California pharmacist at Village Drug (located at 225 Main St., Greenville, California 95947), aware that Greenville Medical Clinic had closed, refused to accept Respondent's prescriptions written on the old Greenville Medical Clinic prescription pads. By February 2008, Respondent changed his prescription pad to reflect his 339 Cedar Dr. address, but used the expired DEA Registration (No. AW8379871) issued for the 187 Hot Springs Rd. address.
- 35. According to Respondent, in December 2005, he began working at St. Mary's Urgent Care at Galena, located at 18653 Wedge Parkway, Reno, Nevada until **May of 2007**. In June and July 2007, Respondent prescribed controlled substances to his California patient D.H., ² using the St. Mary's prescription forms, even though patient D.H. was never seen in Nevada, and Respondent no longer worked at St. Mary's.
- 36. Circa May 2006, Respondent began working part-time at Mt. Grant General Hospital, located at 1st and A Streets, in Hawthorne, Nevada 89415, three days a week (Monday, Tuesday & Wednesday). On the other days, Respondent saw patients in California, at his home located at 339 Cedar Dr., Greenville, California. On February 23, 2006 Respondent obtained a DEA Registration (No. BW9639331) issued for his practice located at 200 S. A Street, Hawthorne, Nevada, but did not obtain a DEA registration for his 339 Cedar Dr. address, even

^{2.} The patients' names are abbreviated herein in order to protect patient confidentiality. The patients' full name and medical records will be provided upon receipt of a properly executed and served Request for Discovery.

though he prescribed, and on occasion, dispensed controlled substances there.

37. Respondent treated patient C.B. at Respondent's 339 Cedar Dr. residence, in Greenville California. On May 22, 2008, C.B. brought a prescription to the Quincy Drug Store Pharmacy, located in Quincy, California. C.B.'s prescription, for a controlled substance, was written by Respondent on a prescription pad with the Mt. Grant Hospital logo and letterhead. C.B. told the pharmacist, Mr. Kibble, that he saw Respondent in California, not Nevada. Mr. Kibble refused to fill the prescription. Respondent called Mr. Kibble within minutes and attempted to phone in a Schedule III controlled substance, known as Marinol (Dronabinol) for patient C.B. Mr. Kibble refused to accept the prescription and told Respondent he was unable to validate a legitimate practice site/address.

38. Although Respondent quit working for Greenville Medical Clinic/Indian Valley Health Care Clinic on May 11, 2006, as a regular part of his practice, he continued to see hundreds of patients in California at his home and prescribed them controlled substances, using the DEA Registration from Nevada (No. BW9639331) and the expired DEA Registration (No. AW8379871) with the 187 Hot Springs address.

B. <u>Excessive And/Or Improper Vicodin Prescribing.</u>

- 39. When treating patients at his California residence (339 Cedar Dr.), Respondent uses his dining room or makes an occasional house call. Respondent's California practice is generally for patients with chronic problems (e.g., high blood pressure and high cholesterol), and patients seeking medical marijuana recommendations. At the 339 Cedar Dr. address there is no exam table, thermometer, scale, or formal record keeping system. The patients pay cash, or not, depending on whether they have funds. He keeps blood pressure medication (non-controlled prescription) in an unlocked box, and his house is kept unlocked. The medication is neither labeled nor inventoried. He does not have patients fill out medical history forms.
- 40. Respondent's CURES report from January 1, 2005 through June 4, 2008, revealed a substantial number of high volume Hydrocodone prescriptions, mainly involving

Hydrocodone/acetaminophen (Vicodin ES or Norco). The high dose of Vicodin, include, *interalia*, prescriptions for patients J.D., B.D., A.L., and M.M.

- 41. Respondent treated patient J.D., a male, who was injured in an industrial accident in September 2002. From September 11, 2006, through February 25, 2008, Respondent prescribed 7,200 tablets of Vicodin ES, which averages out to 423 tablets per month over a 17 month period to J.D. Although J.D. reported taking 8 Vicodin ES tablets a day, on the average he was receiving 14 tablets per day. Respondent medically cleared J.D. for a Class I DMV license on January 27, 2006 and omitted J.D.'s chronic narcotic use on the medical clearance form.
- 42. Vicodin ES contains 750 milligrams of acetaminophen in each tablet. Guidelines for safe prescribing unequivocally state that prescriptions should not exceed 4,000 milligrams of acetaminophen per day. Respondent prescribed more than twice the upper limit of daily acetaminophen to J.D., and failed to monitor J.D.'s liver enzymes regularly. Occasional blood tests did not show the hepatotoxicity from such dosing.
- 43. Respondent's medical records on J.D. do not suggest any alternative form of oral analgesic was offered to this patient. J.D. was receiving epidural steroid injections from his pain management specialist, Dr. Sprecht, however, Dr. Sprecht did not address the Vicodin ES use in his notes. Respondent's notes on J.D. were minimal; they provide no vital or exams and some notes have no dates. In fact, from April 5, 2006 through April 6, 2008, Respondent did not put any notes in J.D.'s patient records.
- 44. Respondent treated patient B.D., a female, who was married to J.D. From September 11, 2006, through February 25, 2008, Respondent prescribed 6,800 tablets of Vicodin ES, over a 17 month period to B.D.
- 45. Respondent treated patient A.L., a male. Respondent prescribed A.L. 240 Vicodin 5/500 per month. From August 2, 2006 through April 25, 2008, Respondent did not keep any medical records on A.L. Although his high blood pressure was noted, it was never addressed or treated, nor did Respondent record A.L.'s weight, lab work, or monitor A.L.'s liver

enzymes.

46. Respondent treated patient M.M., a female, who had chronic pain due to scoliosis and multiple back procedures. Respondent prescribed M.M. Vicodin as early as January 3, 2006, however, Respondent's first clinic note in her chart was on and/or dated February 8, 2008. There is no complete physical exam of M.M. in the chart. Respondent makes mention of a breast mass on an undated note just before M.M.'s visit on February 8, 2008. There is no follow up exam or recommendation indicated after a negative breast ultrasound on M.M. was performed. The patient reported the mass had resolved.

C. <u>Criminal Conviction For Self Prescribing Using Patient L.C.'s Name.</u>

- 47. L.C. and Respondent have dated since circa 2004. In early October 2007, Respondent phoned Village Drug for a Vicodin prescription for himself, and was informed by the pharmacist that self-prescribing was illegal. Thereafter, on October 9, 2007, Respondent again phoned Village Drug this time seeking a prescription for 90 tablets of Vicodin 5/500 for his girlfriend/patient L.C. After phoning in the prescription, Respondent picked up the Vicodin prescription himself (ostensibly on behalf of L.C.), which was billed to L.C.'s insurance, and Respondent paid the \$10 co-pay. During a vacation with Respondent, L.C. discovered Respondent had a prescription bottle of Vicodin with her name on it and confronted Respondent. Respondent told her it was for his hip pain.
- 48. Respondent's chart notes on L.C. indicate he treated her on October 9, 2007. The chart note from L.C.'s visit at his office that day reflects her complaint of abdominal and low back pain. The exam states she had lower abdominal tenderness, but no urinalysis was performed nor were investigations or follow up ordered.
- 49. Due to Respondent phoning in a prescription for himself using L.C.'s name, on April 23, 2008, the Quincy District Attorney's Office filed a criminal complaint, in the County of Plumas, entitled, *People v. Williams*, Case No. 08-35204 against Respondent, alleging the following causes of action: (1) Health and Safety Code section 11173(a) [procuring a controlled substance through fraud, deceit, misrepresentation]; (2) Health and Safety Code

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section 11153(a) [unlawfully prescribing a controlled substance without a legitimate medical purpose]; and (3) Health and Safety Code section 11154(a) [unlawfully prescribing, administering, dispensing, or furnishing a controlled substance].

On September 5, 2008, in People v. Williams (Case No. 08-35204), 50. Respondent pled nolo contendere to a misdemeanor violation under Business and Professions Code section 4060, and the other three counts were dropped.

Inadequate Record Keeping On Medical Marijuana (Prop. 215) D. Recommendations.

- Respondent makes medical marijuana recommendations for some of his 51. California patients. The record keeping for these patients, (including patients E.H., R.R., H.M., D.H., and I.W.) however, is incomplete. For example, Respondent does not provide complete history and physical examination, nor are there scheduled follow up appointments. These patients' temperature and weight are not taken, nor do they fill out patient history forms. Additionally, there are no outside records detailing diagnostic work-ups, other medication prescribed, or ongoing collaboration with the patients' primary care physicians. The medical records consist of informed consents and lists of the patients' symptoms.
- 52. Respondent admitted he takes a medical history to see if the medical problems justify using medical marijuana, takes the patient's blood pressure, and writes a recommendation, which he refers to as a "script". In treating the patients seeking a medical marijuana recommendation, Respondent does not ask the patient for their medial records, unless there are "comorbid conditions", nor does he speak with the patient's primary treating physician.
- Respondent treated patient E.H. for anorexia and provided her a medical 53. marijuana recommendation. His only record on her is a copy of his Prop 215 medical marijuana recommendation, and a note dated September 7, 2007.
- Respondent provided patient R.R. with a medical marijuana 54. recommendation. His only record on R.R. was a note dated October 28, 2007, with the following information written on it: (1) R.R.'s name; (2) the date of October 28, 2007; (3) the date of

R.R.'s birth; and (4) "Prop 215".

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- Respondent provided patient H.M. with a medical marijuana 55. recommendation. His only record on her was one page with the following information written on it: (1) her name; (2) her date of birth; (3) her blood pressure; and (4) "Asthma," "HTN", "DM," and "arthritis".
- 56. Respondent provided patient D.H., one of his regular California patients seen on a monthly basis, with a medical marijuana recommendation. Respondent's records on D.H. does not show a physical exam. The records reference neck and back pain, medication prescriptions and blood pressure, and a patient request for an antidepressant. The records contain several copies of ostensible prescriptions and/or medical notes concerning prescriptions with the Mt. Grant General Hospital heading (dated July 2, 2007), and one with the St. Mary's header (dated March 2, 2007).
- Respondent provided patient I.W. with a medical marijuana 57. recommendation. Respondent's only records on I.W. consists of the following three pages: (1) a medical marijuana recommendation, dated June 5, 2008; (2) an informed medical consent and verification on medical marijuana dated July 5, 2007; and (3) a handwritten note dated June 5, 2008, stating the following:
 - "here for 215" renewal;
 - "suffers from hepatitis, C, anorexia, and insomnia. He is stable";
 - the blood pressure and pulse:
 - "exam negative"; and
 - "I renewed his prescription".

STATUTORY VIOLATIONS

FIRST CAUSE FOR DISCIPLINE

(Criminal Conviction)
[Bus. & Prof. Code, § 2236 (a)]

58. Complainant realleges paragraphs 47 through 50 above, as if fully set forth at this point. Respondent is subject to disciplinary action under Business and Professions Code section 2236 for his criminal conviction on September 5, 2008, for a violation under Business and Professions Code section 4060 [illegal possession of a controlled substance], in the case entitled, *People v. Williams*, Case No. 08-35204.

SECOND CAUSE FOR DISCIPLINE

(Dishonesty/Corruption)
[Bus. & Prof. Code, § 2234 (e)]

- 59. Complainant realleges paragraphs 4 through 6, 32 through 38, and 47 through 50 above, as if fully set forth at this point. Respondent is subject to disciplinary action under Business and Professions Code section 2234 (e) for dishonest and corrupt acts. The dishonesty and corruption includes the following conduct:
 - a. self-prescribing Vicodin under his girlfriend's L.C.'s name on October 9, 2007;
 - b. using L.C.'s insurance to cover Vicodin he fraudulently obtained in L.C.'s name for his own use;
 - c. continuing to use prescription pads with 187 Hot Springs address after he quit working at Greenville Medical Clinic and after it closed;
 - d. using the St. Mary's Urgent Care (Nevada) prescription forms to prescribe controlled substances for his California patients;
 - e. continuing to use the expired DEA Registration (No. AW8379871) on his prescription pads; and
 - f. on May 22, 2008, writing a prescription for his California patient, C.B., using the Mt. Grant Hospital logo and letterhead.

2	(Violation of Federal & State Laws Re: Dangerous Drugs & Controlled Substances)	
3	#	[Bus. & Prof. Code, § 2238]
		60. Complainant realleges paragraphs 32 through 57, above, as if fully set
4	forth at this point. Respondent is subject to disciplinary action for unprofessional conduct under	
5	Business and Professions Code section 2238 for violating the following federal and state statutes	
6	and regulations pertaining to dangerous drugs and controlled substances:	
7 8	a.	Business and Professions Code section 2242 [prescribing dangerous drugs without a good faith prior examination of patients];
9	b.	Business and Professions Code section 4040(a)(D)/Health & Safety Code § 11164(a)(1) [using incorrect addresses on California prescriptions for controlled substances];
11	c.	Business and Professions Code section 4170(a)(4) [failing to fulfill the labeling requirements for his dangerous drugs kept at his 339 Cedar Dr. address];
12 13	c.	Business and Professions Code section 4172/title 16 of the CCR § 1356.3 [failing to store dangerous drugs kept at his 339 Cedar Dr. address in an area that is secure];
14 15	đ.	Business and Professions Code section 4060 [illegally possessing controlled substances fraudulently issued in the name of L.C.];
16	e.	Health and Safety Code section 11157 [issuing false/fictitious prescriptions by using listing an expired DEA license and/or false address of practice];
17 18	f.	Health and Safety Code section 11170 [prescribing a controlled substance (Vicodin) for himself in the name of L.C.];
19	g.	Health and Safety Code section 11173 [obtaining a controlled substance (Vicodin) by fraud, deceit, misrepresentation, and subterfuge, by falsely representing and prescribing it in L.C.'s name];
20	h.	Health and Safety Code section 11174 [using a false address in connection with prescribing controlled substances];
22 23	i.	Health and Safety Code section 11175 [obtaining and possessing a controlled substance (Vicodin) in violation of Division 10, Chapter 4 of the Health & Safety Code]; and
24	j.	21 U.S.C. section 844(a) [unlawfully possessing Vicodin without a valid order].
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FOURTH CAUSE FOR DISCIPLINE

(Record Maintenance)
[Bus. & Prof. Code § 2266]

- 61. Complainant realleges paragraphs 51 through 57 above, as if fully set forth at this point. Respondent is subject to disciplinary action under Business and Professions Code section 2266 for unprofessional conduct in failing to maintain adequate and accurate records relating to his medical treatment for his medical marijuana recommendation patients (patients E.H., R.R., H.M., D.H., and I.W.)
- 62. Complainant realleges paragraphs 41 through 43 above, as if fully set forth at this point. Respondent is subject to disciplinary action under Business and Professions Code section 2266 for unprofessional conduct in failing to maintain adequate and accurate records relating to patient <u>J.D.</u> More specifically, Respondent failed to adequately document J.D.'s complete vitals, his history and physical exam, the treatment plans, nor were there reports and regular follow ups, and lab work in J.D.'s chart.
- 63. Complainant realleges paragraph 45 above, as if fully set forth at this point. Respondent is subject to disciplinary action under Business and Professions Code section 2266 for unprofessional conduct in failing to maintain adequate and accurate records relating to patient A.L. (e.g., failing to document complete vitals, history and physical exam, treatment plans, reports and regular follow ups, lab work). Further, from August 2, 2006 through April 25, 2008, Respondent failed to make any entries in A.L.'s chart. Likewise, A.L.'s high blood pressure was noted, but never addressed or treated.
- 64. Complainant realleges paragraph 46 above, as if fully set forth at this point. Respondent is subject to disciplinary action under Business and Professions Code section 2266 for unprofessional conduct in failing to maintain adequate and accurate records relating to patient M.M. (e.g., failing to document complete vitals, history and physical exam, treatment plans, reports and regular follow ups, lab work). Additionally, although Respondent prescribed M.M. Vicodin on January 3, 2006, his first clinic note on her is dated February 8, 2008. After a negative breast ultrasound was performed on M.M., there was no follow up exam or

recommendation given.

FIFTH CAUSE FOR DISCIPLINE

(Gross Negligence)
[Bus. & Prof. Code, § 2234 (b)]

- 65. Complainant realleges paragraphs 41 through 43 above, as if fully set forth at this point. Respondent is subject to disciplinary action under Business and Professions Code section 2234 in that his care and treatment of patient <u>J.D.</u> represented an extreme departure from the standard of care. More specifically, as to patient J.D., Respondent's gross negligence is based upon the following conduct:
 - a. excessively prescribing Vicodin to J.D.:
 - b. clearing J.D. for a Class I DMV driver's license on January 27, 2006, while prescribing J.D. 14 Hydrocodone/acetaminophen tablets per day; and
 - c. failing to counsel and/or document J.D. about the addictive and potentially dangerous drugs prescribed; and
 - d. failing to provide a thorough physical examination and/or keep records on his care and treatment of J.D.

SIXTH CAUSE FOR DISCIPLINE

(Gross Negligence) [Bus. & Prof. Code, § 2234 (b)]

- 66. Complainant realleges paragraphs 51 through 57 above, as if fully set forth at this point. Respondent is subject to disciplinary action under Business and Professions Code section 2234 in that his care and treatment of his medical marijuana recommendation patients, (patients <u>E.H.</u>, <u>R.R.</u>, <u>H.M.</u>, <u>D.H.</u>, and <u>I.W.</u> A.L., and M.M.) represented an extreme departure from the standard of care. Respondent's gross negligence of these patients is based upon the following conduct:
 - not providing sufficient documentation showing sound history taking, examination, or medical decision making; and
 - b. failing to collaborate and/or document collaboration with the patients' primary care physician.

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SEVENTH CAUSE FOR DISCIPLINE

(Repeated Acts Of Negligence) [Bus. & Prof. Code, § 2234 (c)]

- 67. Complainant realleges paragraphs 32 through 66 above, as if fully set forth at this point. Respondent is subject to disciplinary action under Business and Professions Code section 2234 (c) of the Code in that he committed repeated acts of negligence in his care and treatment of patients J.D., B.D., A.L., M.M. K.S., D.H., E.H., H.M., R.R., I.W., and C.B. More specifically, Respondent's repeated acts of negligence include the following:
 - a. Failing to maintain adequate and accurate records of his medical treatment to his medical marijuana recommendation patients (i.e., patients E.H., R.R., H.M., D.H., and I.W.);
 - b. Failing to provide sufficient information (e.g., little or no physical examination, investigations, treatment plan, or alternative analgesics employed) in the charts of his chronic opioid patients (i.e., patients J.D., B.D., A.L., and M.M.);
 - c. Over prescribing Vicodin to patient J.D.;
 - d. Over prescribing Vicodin to patient B.D.;
 - e. Over prescribing Vicodin to patient A.L.; and
 - h. Failing to have complete histories and physical examinations, scheduled follow up appointments, outside records detailing diagnostic work-ups, other medications prescribed, notification of the patients' primary care physicians in his Prop, 215 Medical Marijuana recommendation patients charts (i.e., patients K.S., D.H., E.H., H.M., R.R., and I.W.)

VI.

PRAYER

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

- Revoking or suspending Physician and Surgeon's Certificate No. G 37614 issued to Daniel Atherton Williams, Jr., M.D.;
- 2. Revoking, suspending or denying approval of Daniel Atherton Williams, Jr., M.D.'s authority to supervise physician's assistants, pursuant to section 3527 of the Code;
- 3. Ordering Daniel Atherton Williams, Jr., M.D. to pay, the costs of probation monitoring, if placed on probation;

Taking such other and further action as deemed necessary and proper. 4. DATED: January 7, 2009 Medical Board of California Department of Consumer Affairs State of California Complainant Williams Jr Acc.wpd