

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

In the Matter of the Petition to Revoke
Probation Against:

JAN ADAMS, M.D.

Physician's and Surgeon's
Certificate No. A 51004

Respondent.

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) **Case No. 8002013001779**
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) **OAH No. 2014031080**
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DECISION

The attached Proposed Decision 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 October 10, 2014.

IT IS SO ORDERED September 10, 2014.

MEDICAL BOARD OF CALIFORNIA

By: 

Barbara Yaroslavy, Chair
Panel A

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

In the Matter of the Petition to Revoke
Probation Against:

JAN ADAMS, M.D.

Physician's and Surgeon's Certificate No.
A 51004,

Respondent.

Case No. 8002013001779

OAH No. 2014031080

PROPOSED DECISION

This matter came on regularly for hearing on August 13, 2014, in Los Angeles, California, before H. Stuart Waxman, Administrative Law Judge, Office of Administrative Hearings, State of California.

Richard D. Marino, Deputy Attorney General, represented Complainant, Kimberly Kirchmeyer (Complainant), Executive Director of the Medical Board of California (Board).

Respondent was present and represented himself.

Oral and documentary evidence was received. The record was closed on the hearing date, and the matter was submitted for decision.

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FACTUAL FINDINGS

1. On July 23, 1992, the Board issued Physician's and Surgeon's Certificate Number A 51004 to Respondent. An Accusation was filed against Respondent on April 10, 2007. That pleading was followed by a First Amended Accusation on April 1, 2009. Respondent surrendered his certificate effective April 8, 2009. He filed a Petition for Reinstatement of Surrendered License on June 5, 2012. The matter came before Administrative Law Judge (ALJ) Daniel Juarez on November 2, 2012. Judge Juarez's proposed decision to grant the petition and place Respondent on probation for three years under various terms and conditions was adopted by the Board effective March 14, 2013. The effective date of the decision was subsequently advanced to May 28, 2013. A Cease Practice Order was issued against Respondent on December 23, 2013. Respondent's certificate expired on June 25, 2014. The Board maintains jurisdiction over this matter pursuant to Business and Professions Code section 118, subdivision (b).

2. The above summary does not tell the whole story. Respondent has had a difficult time maintaining his certificate in good standing. The more detailed story is set forth in Factual Findings 3 through 13 of Judge Juarez's Proposed Decision written in connection with Respondent's petition for license reinstatement. Because that decision is final, those findings are set forth verbatim below and are incorporated as factual findings herein.

3. On April 10, 2007, the Board filed an accusation against Petitioner (*In the Matter of the Accusation Against Jan Adams, M.D.*, case number 17-2006-175650). The complainant in that accusation alleged that Petitioner was convicted of alcohol-related offenses in May 2003 (driving under the influence of alcohol), and December 2006 (driving with a blood alcohol level of .08 percent or greater). Based on these convictions, Petitioner was alleged to have violated Business and Professions Code sections 2239 (the dangerous use of alcohol) and 2234 (unprofessional conduct).

4. Petitioner referred himself to the Board's then-available physician diversion program in December 2006. The evidence did not establish if he ever participated in the program or the length of time he participated, if at all.

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5. In approximately January 2007, Petitioner voluntarily entered the alcohol dependency program at the Hazelden Clinic (Hazelden) in Newberg, Oregon. He was discharged after three days because he did not meet the criteria for alcoholism or alcohol dependency. In the Board's investigation report, dated August 23, 2012, the Board's investigator obtained Petitioner's medical records from Hazelden. Those records contained the following statements: "The evaluation of [Petitioner] was completed on 01/10/07 resulted [sic] in the diagnosis of alcohol abuse. This diagnosis was based on the available reliable information. However, because the patient has had four prior driving under the influence (over a 25 year period) [sic] there is significant concern that a diagnosis of alcohol dependence may exist as is typical for the vast majority of individuals with his driving record. However, despite our efforts, reliable evidence for the additional criteria to meet this diagnosis was not available. This however does not exclude this diagnosis; however, again there is no reliable evidence to support the diagnosis." Hazelden recommended discharging Petitioner, having Petitioner continue with Alcoholics Anonymous (AA) meetings, complete a thorough drug and alcohol history, participate in a diversion program, including urine drug screening, and refrain from prescribing his own medications. Hazelden further recommended that Petitioner attend a residential program if a diagnosis of alcohol dependence was found. The evidence established no diagnosis of alcohol dependence.

6. In his narrative statement attached to his Petition, Petitioner disclosed that he was arrested for driving under the influence of alcohol on June 26, 2008. According to the Board's investigation report, Petitioner was convicted of violating "Vehicle Code section 23151, subdivision (b)," on January 5, 2009, and sentenced to 365 days in jail. The Legislature amended Vehicle Code section 23151 long before January 2009. Given the jail sentence, the ALJ finds that Petitioner was convicted of violating Vehicle Code section 23152, subdivision (b) (driving with a blood alcohol level of .08 percent or greater). The January 2009 conviction was the result of the June 2008 arrest. Petitioner served eight months in jail. Petitioner accepted responsibility for all of his convictions and for this 2009 conviction in particular, describing it as "unprofessional conduct." Petitioner enrolled in a court-ordered 18-month multiple offender program in September 2010, and completed the program on April 7, 2012.

7. There was no evidence that Petitioner failed to complete the terms and conditions of any of his criminal probations or that he is currently on probation for any conviction. Neither party offered court records to establish the particulars of any of Petitioner's convictions.

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8. According to the Board's investigation report, the DMV took action against Petitioner's driver license as described on the following dates and for the reasons contained in the respective parenthetical: restricted, January 9, 2007 ("[d]runk driving or drugs"), suspended, March 21, 2008 ("[i]nsurance [c]ert canceled"); suspended, September 29, 2009 ("[e]xcessive blood alcohol"), and revoked, January 5, 2009 ("[d]runk driving or drugs").

9. Petitioner surrendered his medical license, effective April 8, 2009.

10. Petitioner's driver license was reinstated and is currently valid. Presently, there are no restrictions on Petitioner's driver license.

11. At hearing, petitioner asserted that he has abstained from alcohol since 2008. He attends AA meetings, which he described as "most helpful." When asked on cross-examination whether he was an alcoholic, Petitioner asserted he was not, emphasizing the findings at Hazelden. Nonetheless, Petitioner affirmatively dealt with his drinking and driving problem, realizing that it was best to abstain from consuming alcohol. He appears to have adequately addressed this problem.

12. On a date undetermined by the evidence, the Board's investigator checked a website for Petitioner and found that Petitioner identified himself on the website as "doctor." The Board discussed this finding with Petitioner at his July 11, 2012 interview. Petitioner informed the Board that he did not have the ability to take down the website and did not feel that the website gave the impression that he was a licensed physician. Petitioner did not plan to change the website and felt that he should be allowed to sign his name, "Jan Adams M.D." The Board discussed the Legislature's mandate in Business and Professions Code section 2278, and according to the Board investigator, Petitioner "explained why he disagrees with the law." Aside from the investigation report, neither party addressed this issue at hearing.

13. On July 13, 2012, the Board investigator checked Petitioner's website and "noted that access was no longer available." The evidence did not establish what was meant by "access."

3. In his Proposed Decision, Judge Juarez ordered that Respondent's license be reinstated, immediately revoked, the revocation stayed, and that Respondent be placed on probation for three years under various terms and conditions. On February 12, 2013, the Board adopted the Proposed Decision with an effective date of March 14, 2013. As indicated above, the effective date was subsequently advanced to May 28, 2013.

4. Among the terms and conditions of Respondent's probation were the following:¹

Condition No. 2:

Petitioner shall immediately submit to biological fluid testing at Petitioner's expense, upon request of the Board or its designee. . . . Prior to practicing medicine, Petitioner shall contract with a laboratory or service approved in advance by the Board or its designee that will conduct random, unannounced, observed, biological fluid testing. The contract shall require results of the tests to be transmitted by the laboratory or service directly to the Board or its designee within four hours of the results becoming available. Petitioner shall maintain this laboratory or service contract during the period of probation.

Condition No. 3:

Within 60 calendar days of the effective date of this Decision, Petitioner shall enroll in a professionalism program that meets the requirements of Title 16, California Code of Regulations, section 1358. Petitioner shall participate in and successfully complete that program. . . . Petitioner shall successfully complete the classroom component of the program not later than six months after Petitioner's initial enrollment, and the longitudinal component of the program not later than the time specified by the program, but no later than one year after attending the classroom component. The professionalism program shall be at Petitioner's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

Petitioner 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.

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¹ Some of the conditions contain multiple paragraphs with language not specifically germane to the issues in this case. Therefore, only the relevant portions of the conditions are quoted in this finding.

Condition No. 4:

Within 60 calendar days of the effective date of this Decision, Petitioner shall submit to the Board or its designee for prior approval a community service plan in which Petitioner shall, within the first two years of probation, provide 144 hours of free medical services to a community or non-profit organization.

Condition No. 8:

Petitioner shall submit quarterly declarations under penalty of perjury on forms provided by the Board, stating whether there has been compliance with all of the conditions of probation.

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

5. On July 2, 2013, Respondent signed an Acknowledgment of Decision averring that he had received a copy of the Decision, that his probation inspector had explained all of the terms and conditions of probation to him, and that his probation inspector had addressed any questions Respondent had concerning those terms and conditions. The Acknowledgment of Decision indicates May 28, 2013 as the effective date of probation.

6. On July 3, 2013, Respondent's probation inspector wrote to Respondent advising him of upcoming deadlines Respondent would have to meet to remain in compliance with the terms and conditions of his probation.

7. Respondent failed to comply with Condition No. 2. He failed to submit to biological fluid testing when required to do so on August 27, November 15, November 20, December 5, and December 10, 2013.² In addition, Respondent allowed his contract with the laboratory to lapse on three occasions since the effective date of the Decision. These occurred when there were insufficient funds in Respondent's debit account to enable the laboratory to deduct payment for its services.

8. Respondent missed his November 15, 2013 testing because he had sustained a serious burn to his left foot that precluded him from traveling to the testing site. He did not provide reasons for missing the other four tests.

² These are the dates alleged in the Petition to Revoke Probation. Respondent missed other tests as a result of the suspension of his contract account with the laboratory. He also failed to call the laboratory or go online on numerous occasions to ascertain whether he was required to report for testing. However, the failures to call in and the additional missed tests are not alleged as grounds for license revocation, and therefore, they are viewed only as factors in aggravation. To his credit, when Respondent did appear for biological fluid testing, all of his results were negative.

9. On December 23, 2013, The Board issued a Cease Practice Order against Respondent. The Order was based on Respondent's failure to comply with Condition No. 2 of his probationary order. Since that time, Respondent permitted his physician's and surgeon's certificate to expire.³

10. Respondent failed to comply with Condition No. 3 by failing to enroll in the professionalism (ethics) course within 60 days of the effective date of the Decision (May 28, 2013). Respondent attributes his failure to do so to insufficient funds to pay in full and in advance for the program, as the program requires. He also took issue with the price of the program and questioned whether he could learn anything about ethics from someone who so grossly over-charged for his services.

11. Respondent failed to comply with Condition No. 4 by failing to provide the Board with a community service plan. Respondent attributes that failure to his inability to afford malpractice insurance. However, Respondent's probation inspector testified that other physicians had found volunteer positions at free clinics without the necessity of malpractice insurance.

12. Respondent failed to comply with Condition No. 8. His submission of his quarterly reports for the third quarter of 2013, the fourth quarter of 2013, and the first quarter of 2014 were late.⁴ Respondent blamed his probation inspector for the reports' tardiness, claiming that his probation inspector failed to call him ahead of time as promised and failed to provide him with the reporting forms. That testimony was not convincing. The responsibility of probation compliance lies with the probationer, not with his/her probation inspector. The failure of a probation inspector to follow through on an offer of assistance does not relieve the probationer of his/her compliance obligation.

13. Respondent has never requested an extension of time to fulfill the requirements of any of his probationary terms or conditions due to lack of funds or any other reason. He has never requested a removal or modification of any of the probationary terms and conditions.

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³ As referenced above, Respondent's certificate expired on June 25, 2014. Although he is required to maintain an active license as a term of probation (Condition No. 9), his failure to do so is not alleged in the Petition to Revoke Probation, and it is viewed solely as a factor in aggravation.

⁴ Respondent has not yet submitted his quarterly report for the second quarter of 2014. However, that fact is not alleged in the Petition to Revoke Probation, and it is viewed solely as a factor in aggravation.

14. In his testimony, and when cross-examining Complainant's witnesses, Respondent upbraided several Board personnel claiming they lied, delayed, engaged in, ignored, and covered up wrongdoing, falsified documents, abused their discretion, violated his and the public's trust, and had bullied him, punished him, retaliated against him, and attempted to frame him. He accused them of misconduct ranging from simple negligence to criminal activity. He believes the instant action is a "whistle-blower" case that resulted after he complained to the Board that the individual in charge of the Board's biological fluid testing unit had insulted him by suggesting he had intentionally burned his foot as a strategy to avoid a biological fluid test. The individuals involved in his asserted mistreatment ranged from one who worked in the former diversion program, to Respondent's present probation inspector, and from those involved in ministerial acts to the Director of Enforcement and the former Executive Director of the Board. He believes all of the individuals involved developed a jaded and inaccurate view of him after he was demonized on television following the post-operative death of one of his patients who was the mother of a celebrity. He also believes some of those involved have acted out of jealousy of his Harvard, Michigan and UCLA education, his surgical skills, and his celebrity as a medical consultant on television shows. Respondent asked the Administrative Law Judge to impose a variety of sanctions against the individuals who have harmed him, including but not limited to job termination, a public reprimand, a lifelong ban from public service employment, criminal prosecution, and criminal sanctions including incarceration.

15. Respondent went into extensive detail concerning the wrongdoing that had been perpetuated against him and the individuals who were responsible for it. His claims are presented in summary fashion in this Decision because the Administrative Law Judge is without jurisdiction to impose the kinds of sanctions against those individuals that Respondent requested. The Board has brought this action solely against Respondent, and jurisdiction exists only as to him. Therefore, although Respondent may or may not have legitimate claims against the Board and/or its employees/designees, no finding can be or is made with respect to their culpability.

16. Respondent wants his medical license. However, he testified that, although he deserves to keep his license, he is not certain he wants to continue dealing with the Board. He asks only that the Board "leave [him] alone." (Respondent's testimony.)

LEGAL CONCLUSIONS

1. Cause exists to revoke Respondent's probation and impose the license revocation previously stayed as set forth in Findings 1 through 13.

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2. California Code of Regulations, title 16, section 1358, states in pertinent part:

Each physician and surgeon who has been placed on probation by the division shall be subject to the division's Probation Surveillance Compliance Program and shall be required to fully cooperate with representatives of the division and its investigative personnel.

3. Once Respondent sought reinstatement of his surrendered license, and the Board adopted Judge Juarez's Proposed Decision, Respondent was obligated to comply in all ways with the terms and conditions of probation. Each probation term/condition was mandatory, and compliance was required throughout the three-year course of probation. Respondent failed to comply with four of his probationary terms, and he committed repeated violations of two of them by failing to submit to biological fluid testing four times and by failing to timely submit quarterly reports three times. The several violations referred to above that were not pled as charging allegations in this Petition to Revoke Probation are troubling in that they constitute serious factors in aggravation.

4. Respondent attributes some of his probation violations to a lack of funds. These are unquestionably difficult economic times, and a physician on probation can face a difficult time finding work. However, the expenses Respondent incurred in connection with his probation are no different from those faced by a great many probationers who manage to procure the funds necessary to remain in compliance. Finding sufficient funds was one of the obligations Respondent undertook and accepted when his license was reinstated. Moreover, Respondent never made any attempt to request from the Board an extension of time to comply with a probationary condition, a removal or modification of a probationary condition, or other provision to reduce the economic strain placed on him by the probationary order.

5. Respondent has hard feelings toward the Board, and he blames the Board and some of its employees/designees for much of the trouble he has experienced. He may or may not be right. However, interpersonal problems with those individuals, justified or not, do not excuse a failure to comply with the terms and conditions of probation.

6. Although Respondent wants only for the Board to leave him alone, the simple truth is that, if Respondent wants to practice medicine as a medical doctor in the State of California, he must necessarily interact with the Board. The Board cannot leave him alone and still comply with the legislative mandate for public protection. (Bus. & Prof. Code, § 2001.1.)

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7. At the administrative hearing, Respondent did not offer any assurance that, if he is permitted to keep his medical license, things will change in connection with his compliance with the probationary terms and conditions, or how they will change. He was neither remorseful nor repentant.⁵ Given his numerous probation violations, the lack of a reason to change the probationary terms, the absence of a plan to improve compliance, and his continued defiance toward the Board, extending Respondent's probation would serve no purpose. The license will be revoked. Respondent will be eligible to apply for reinstatement in two to three years (Bus. & Prof. Code, § 2307, subdivision (b)(1)).

ORDER

1. The probation of Respondent, Jan Adams, M.D., is revoked.
2. Physician's and Surgeon's Certificate No. A 51004, issued to Respondent, Jan Adams, M.D., is revoked.
3. Pursuant to Business and Professions Code section 3527, the approval of Respondent, Jan Adams, M.D.'s authority to supervise physician assistants is revoked.

Dated: August 19, 2014


H. STUART WAXMAN
Administrative Law Judge
Office of Administrative Hearings

⁵ Although a respondent is not required to demonstrate artificial acts of contrition (*Calaway v. State Bar* (1986) 41 Cal.3d 743, 747-748; *Hall v. Committee of Bar Examiners* (1979) 25 Cal.3d 730, 744-745), Respondent did not deny many of the probation violations alleged against him. Therefore, any acts of contrition would not have been artificial.

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FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO JAN 24 2014
BY: FILED ANALYST

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

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

Case No. 8002013001779

13 **JAN ADAMS, M.D.**
17150 Euclid Street, Suite 216
Fountain Valley, CA 92708

PETITION TO REVOKE PROBATION

14 **Physician's and Surgeon's Certificate No.**
15 **A51004**

16 Respondent.

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18 Complainant alleges:

19 **PARTIES**

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

23 2. On or about July 23, 1992, the Medical Board of California issued Physician's and
24 Surgeon's Certificate Number A51004 to Jan Adams, M.D. (Respondent). Unless renewed, the
25 license will expire on June 25, 2014.

26 3. In a disciplinary action entitled *In the Matter of the Petition for Penalty Relief*
27 *Regarding Jan Adams, M.D.*, Case No. 27-2012-223957, the Medical Board of California, issued
28 a decision, effective March 14, 2013, in which Respondent's Physician's and Surgeon's

1 Certificate was reinstated. At the same time, Respondent's Physician's and Surgeon's Certificate
2 was revoked, with the revocation being stayed and Respondent's Physician's and Surgeon's
3 Certificate being placed on probation for a period of three (3) years with certain terms and
4 conditions. A copy of that decision is attached as Exhibit A and is incorporated by reference.

5 4. On December 23, 2013, a Cease Practice Order was issued against Petitioner. A true
6 and accurate copy of the Cease Practice Order is attached as Exhibit B.

7 **JURISDICTION**

8 6. This Petition to Revoke Probation is brought before the Medical Board of California
9 (Board), Department of Consumer Affairs, under the authority of the following laws. All section
10 references are to the Business and Professions Code unless otherwise indicated.

11 7. Section 2220 of the Code, in pertinent part, provides:

12 "Except as otherwise provided by law, the board may take action against all persons
13 guilty of violating this chapter. The board shall enforce and administer this article as to
14 physician and surgeon certificate holders, including those who hold certificates that do not
15 permit them to practice medicine , such as, but no limited to, retired, inactive or disabled
16 status certificate holders, and the board shall have all the powers granted in this chapter for
17 those purposes"

18 8. Section 2227 of the Code provides:

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

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

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

27 "(3) Be placed on probation and be required to pay the costs of probation monitoring
28 upon order of the board.

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

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

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

11 **FIRST CAUSE TO REVOKE PROBATION**

12 **(Biological Fluid Testing)**

13 9. At all times after the effective date of Respondent's probation, Condition 2 stated:
14 "Petitioner shall immediately submit to biological fluid testing, at Petitioner's expense,
15 upon the request of the Board or its designee."

16 8. Respondent's probation is subject to revocation because he failed to comply with
17 Probation Condition 2, referenced above. The facts and circumstances regarding this violation
18 are as follows:

19 A. On or about August 27, November 15, November 29, December 5, and
20 December 10, 2013, Respondent failed to submit to random biological fluid testing as
21 required.

22 **SECOND CAUSE TO REVOKE PROBATION**

23 **(Quarterly Declarations)**

24 10. At all times after the effective date of Respondent's probation, Condition 8 stated:
25 "Petitioner shall submit quarterly declarations under penalty of perjury on forms provided
26 by the Board, stating whether there has been compliance with all the conditions of
27 probation.

28 "Respondent shall submit quarterly declarations not later than 10 calendar days after the

1 end of the preceding quarter.”

2 11. Respondent’s probation is subject to revocation because he failed to comply with
3 Probation Condition 8, referenced above. The facts and circumstances regarding this violation
4 are as follows:

5 A. As of January 3, 2014, Respondent has not filed a quarterly declaration for
6 the second quarter of 2013.

7 B. Respondent filed a quarterly declaration for the third quarter of 2013 on or
8 about October 30, 2013, 20 days past the timely filing date.

9 **THIRD CAUSE TO REVOKE PROBATION**

10 **(Community Service—Free Services)**

11 12. At all times after the effective date of Respondent’s probation, Condition 4, in
12 pertinent part, stated:

13 “Within 60 calendar days of the effective date of this decision, Petitioner shall submit to the
14 Board or its designee for prior approval a community service plan in which Petitioner shall,
15 within the first two years of probation, provide 144 hours of free medical services to a
16 community or non-profit organization.”

17 13. Respondent’s probation is subject to revocation because he failed to comply with
18 Probation Condition , referenced above. The facts and circumstances regarding this violation are
19 as follows:

20 A. As of January 3, 2014, Respondent had not submitted to the Board or its
21 designee for prior approval a community service plan in which Petitioner shall, within the
22 first two years of probation, provide 144 hours of free medical services to a community or
23 non-profit organization.

24 **FOURTH CAUSE TO REVOKE PROBATION**

25 **(Professionalism Program (Ethics Course))**

26 14. At all times after the effective date of Respondent’s probation, Condition 3, in
27 pertinent part, stated:

1 shall enroll in a professionalism program that meets the requirements of Title 16, California
2 Code of Regulations, section 1358.

3 15. Respondent's probation is subject to revocation because he failed to comply with
4 Probation Condition 3, referenced above. The facts and circumstances regarding this violation
5 are as follows:

6 A. As of January 3, 2014, Petitioner had not enrolled in a professionalism
7 program that meets the requirement of Title 16, California Code of Regulations, section
8 1358.

9 B. As of January 3, 2014, Petitioner had not completed the Professionalism
10 Program.

11 **FIFTH CAUSE TO REVOKE PROBATION**

12 **(Failure to Maintain Biological Fluid Testing Service Contract)**

13 16. At all times after the effective date of Respondent's probation, Condition 2, in
14 pertinent part, stated:

15 "Petitioner shall maintain this laboratory or service contract during the
16 period of probation."

17 17. Respondent's probation is subject to revocation because he failed to comply with
18 Probation Condition 2, referenced above. The facts and circumstances regarding this violation
19 are as follows:

20 A. Petitioner entered into a contract with FirstLab for the purpose of
21 conducting Petitioner's random biological fluid testing.

22 B. On three occasions, the most recent being November 25, 2013, Petitioner's
23 FirstLab account was suspended for non-payment.

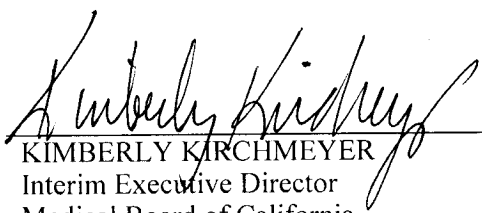
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PRAYER

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

1. Revoking the probation that was granted by the Medical Board of California in Case No. 27-2012-223957 and imposing the disciplinary order that was stayed thereby revoking Physician's Surgeon's Certificate No. A51004 issued to Jan Adams, M.D.;
2. Revoking or suspending Physician's Surgeon's Certificate No. A51004, issued to Jan Adams, M.D.;
3. Revoking, suspending or denying approval of Jan Adams, M.D.'s authority to supervise physician assistants, pursuant to section 3527 of the Code;
4. Ordering Jan Adams, M.D., if placed on probation, to pay the Medical Board of California the costs of probation monitoring; and,
5. Taking such other and further action as deemed necessary and proper.

DATED: January 7, 2014


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

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Exhibit A

Decision and Order

Medical Board of California Case No. 27-2012-223957

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

In the Matter of the Petition for Penalty Relief)
Regarding:)

JAN ADAMS)

) Case No. 27-2012-223957

) OAH No. 2012090229

) MEDICAL BOARD OF CALIFORNIA

Petitioner.)

) I do hereby certify that this document is a true
) and correct copy of the original on file in this
) office.

Signature

Title

Date

DECISION

The attached Proposed Decision is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on March 14, 2013.

IT IS SO ORDERED February 12, 2013.

MEDICAL BOARD OF CALIFORNIA

By: _____

Barbara Yaroslavy, Chair
Panel A

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

In the Matter of the Petition
for Penalty Relief regarding:

OAH Case No. 2012090229

JAN ADAMS,

Physician and Surgeon Certificate No.
A 51004,

Petitioner.

PROPOSED DECISION

Daniel Juárez, Administrative Law Judge (A.L.J), Office of Administrative Hearings, heard this matter on November 2, 2012, in Los Angeles, California.

Jan Adams (Petitioner) represented himself.

Richard D. Marino, Deputy Attorney General, represented the Attorney General of the State of California, pursuant to Government Code section 11522.

The parties submitted the matter for decision on November 2, 2012.

STATEMENT OF THE CASE

Petitioner seeks reinstatement of his medical license following its surrender in 2009; he argues that he is sufficiently rehabilitated to warrant reinstatement.

FACTUAL FINDINGS

1. Petitioner filed the Petition on or about April 11, 2012.
2. The Board issued physician and surgeon certificate number A 51004 to Petitioner on July 23, 1992. Petitioner surrendered his medical license, effective April 8, 2009.

3. On April 10, 2007, the Board filed an accusation against Petitioner (*In the Matter of the Accusation Against Jan Adams, M.D.*, case number 17-2006-175650). The complainant in that accusation alleged that Petitioner was convicted of alcohol-related offenses in May 2003 (driving under the influence of alcohol), and December 2006 (driving with a blood alcohol level of .08 percent or greater). Based on these convictions, Petitioner was alleged to have violated Business and Professions Code sections 2239 (the dangerous use of alcohol) and 2234 (unprofessional conduct).

4. Petitioner referred himself to the Board's then-available physician diversion program in December 2006. The evidence did not establish if he ever participated in the program or the length of time he participated, if at all.

5. In approximately January 2007, Petitioner voluntarily entered the alcohol dependency program at the Hazelden Clinic (Hazelden) in Newberg, Oregon. He was discharged after three days because he did not meet the criteria for alcoholism or alcohol dependency. In the Board's investigation report, dated August 23, 2012, the Board's investigator obtained Petitioner's medical records from Hazelden. Those records contained the following statements: "The evaluation of [Petitioner] was completed on 01/10/07 resulted [*sic*] in the diagnosis of alcohol abuse. This diagnosis was based on the available reliable information. However, because the patient has had four prior driving under the influence (over a 25 year period) [*sic*] there is significant concern that a diagnosis of alcohol dependence may exist as is typical for the vast majority of individuals with his driving record. However, despite our efforts, reliable evidence for the additional criteria to meet this diagnosis was not available. This however does not exclude this diagnosis; however, again there is no reliable evidence to support the diagnosis." Hazelden recommended discharging Petitioner, having Petitioner continue with Alcoholics Anonymous (AA) meetings, complete a thorough drug and alcohol history, participate in a diversion program, including urine drug screening, and refrain from prescribing his own medications. Hazelden further recommended that Petitioner attend a residential program if a diagnosis of alcohol dependence was found. The evidence established no diagnosis of alcohol dependence.

6. In his narrative statement attached to his Petition, Petitioner disclosed that he was arrested for driving under the influence of alcohol on June 26, 2008. According to the Board's investigation report, Petitioner was convicted of violating "Vehicle Code section 23151, subdivision (b)," on January 5, 2009, and sentenced to 365 days in jail. The Legislature amended Vehicle Code section 23151 long before January 2009. Given the jail sentence, the ALJ finds that Petitioner was convicted of violating Vehicle Code section 23152, subdivision (b) (driving with a blood alcohol level of .08 percent or greater). The January 2009 conviction was the result of the June 2008 arrest. Petitioner served eight months in jail. Petitioner accepted responsibility for all of his convictions and for this 2009 conviction in particular, describing it as "unprofessional conduct." Petitioner enrolled in a court-ordered 18-month multiple offender program in September 2010, and completed the program on April 7, 2012.

7. There was no evidence that Petitioner failed to complete the terms and conditions of any of his criminal probations or that he is currently on probation for any conviction. Neither party offered court records to establish the particulars of any of Petitioner's convictions.

8. According to the Board's investigation report, the DMV took action against Petitioner's driver license as described on the following dates and for the reasons contained in the respective parenthetical: restricted, January 9, 2007 ("[d]runk driving or drugs"); suspended, March 21, 2008 ("[i]nsurance [c]ert canceled"); suspended, September 29, 2009 ("[e]xcessive blood alcohol"), and revoked, January 5, 2009 ("[d]runk driving or drugs").

9. Petitioner surrendered his medical license, effective April 8, 2009.

10. Petitioner's driver license was reinstated and is currently valid. Presently, there are no restrictions on Petitioner's driver license.

11. At hearing, Petitioner asserted that he has abstained from alcohol since 2008. He attends AA meetings, which he described as "most helpful." When asked on cross-examination whether he was an alcoholic, Petitioner asserted he was not, emphasizing the findings at Hazelden. Nonetheless, Petitioner affirmatively dealt with his drinking and driving problem, realizing that it was best to abstain from consuming alcohol. He appears to have adequately addressed this problem.

12. On a date undetermined by the evidence, the Board's investigator checked a website for Petitioner and found that Petitioner identified himself on the website as, "doctor." The Board discussed this finding with Petitioner at his July 11, 2012 interview. Petitioner informed the Board that he did not have the ability to take down the website and did not feel that the website gave the impression that he was a licensed physician. Petitioner did not plan to change the website and felt that he should be allowed to sign his name "Jan Adams M.D." The Board discussed the Legislature's mandate in Business and Professions Code section 2278, and according to the Board investigator, Petitioner "explained why he disagrees with the law." Aside from the investigation report, neither party addressed this issue at hearing.

13. On July 13, 2012, the Board investigator checked Petitioner's website and "noted that access was no longer available." The evidence did not establish what was meant by "access."

14. Petitioner has developed software programs relating to emergency care systems and California's in-home supportive services program. These software programs were developed by Petitioner's for-profit business firm called, "No Longer Mute Publishing"; Petitioner is its founder and chief executive officer. Petitioner's documentary submissions at hearing (Exhibits G & H) contain undated descriptions of these two software programs. These descriptions identify Petitioner as, "Jan R. Adams MD," and include a

letter from "USAID," dated July 26, 2011, addressed to Petitioner as, "Dr. Jan Rudalgo."¹ Aside from the investigation report, neither party addressed this issue at hearing.

15. Petitioner has been self-employed since surrendering his license. Since October 2009, he has written three books: "The Other Side of the Fire" (second edition, published in June 2012), "Republican Is Not a Four-Letter Word" (submitted for publication), and "Breakfast for My Mother" (submitted for publication).

16. Petitioner completed 12 continuing medical education credits through the University of California, San Francisco Department of Surgery's "Grand Rounds" course, held from January to June 2011, and 11 additional credits from July 2011 through April 2012.

17. Petitioner has kept current with professional literature. He maintains his physical fitness, enrolling in health and fitness classes offered by the Peralta Community College District.

18. At hearing, when describing his earlier dealings with the Board, he identified an individual named Bernard Karmatz and referred to him as a "knucklehead." Petitioner further asserted that Karmatz "harassed" him. The evidence did not establish Karmatz's capacity, but it is noted that in the Board's investigation report, Karmatz is referred to as having received documentation from Petitioner related to the instant Petition on behalf of the Board. It is reasonable to find that Karmatz had or has a position within the Board.

19. In his closing argument, Petitioner described himself as "better than 99 percent of all doctors."

20. Noel S. Tenenbaum, M.D., wrote a letter dated April 15, 2012, in support of Petitioner. According to her letterhead, Tenenbaum is a plastic and reconstructive surgeon in Palm Harbor, Florida. She has known Petitioner for over 20 years. She is aware of Petitioner's rehabilitative efforts; she feels confident that Petitioner will not reoffend, and supports his immediate reinstatement.

21. Raad Jeiroudi, M.D., wrote a letter dated April 27, 2012, in support of Petitioner. Jeiroudi is a Board-licensed physician from Fountain Valley, California. He has known Petitioner since July 2004. Jeiroudi described many of the rehabilitative efforts set forth herein and asserted that Petitioner has shown "tremendous growth."

¹ Petitioner's full name is Jan Rudalgo Adams.

LEGAL CONCLUSIONS

1. Business and Professions Code section 2307 provides that a person whose certificate is surrendered for unprofessional conduct may petition for reinstatement after three years.

2. California Code of Regulations, title 16, section 1360.2, provides that when considering a petition, the Board must evaluate a petitioner's evidence of rehabilitation by considering the following criteria.

(a) The nature and severity of the act(s) . . . under consideration as grounds for denial.

(b) Evidence of any act(s) . . . committed subsequent to the act(s) . . . under consideration as grounds for denial which also could be considered as grounds for denial under Section 480.

(c) The time that has elapsed since commission of the act(s) . . . referred to in subsections (a) or (b).

[¶] . . . [¶]

(e) Evidence, if any, of rehabilitation submitted by the applicant.

3. The standard of proof in this matter is clear and convincing evidence to a reasonable certainty. (*Hippard v. State Bar* (1989) 49 Cal.3d 1084, 1092; *Housman v. Board of Medical Examiners* (1948) 84 Cal.App.2d 308, 315.) Petitioner bears the burden of proof. (*Ibid.*)

4. Petitioner has taken steps to address his drinking and driving problem. He took voluntary, affirmative steps by entering the then-available diversion program in 2006, and referring himself to Hazelden. (Cal. Code Regs., tit. 16, § 1360.2, subd. (e).) He has, and continues, to participate in AA meetings. (*Ibid.*) There was no evidence that he has consumed alcohol and driven since his last conviction in 2009. (Cal. Code Regs., tit. 16, § 1360.2, subd. (b).) He has abstained from alcohol for four years; and it has been over three years since his last conviction; thus, a moderate amount of time has passed since his last instance of criminal conduct. (Cal. Code Regs., tit. 16, § 1360.2, subd. (c).) Therefore, while his convictions are serious and concerning (Cal. Code Regs., tit. 16, § 1360.2, subd. (a)), Petitioner has taken appropriate steps to address these problems. (Cal. Code Regs., tit. 16, § 1360.2, subd. (e).) On the issue of his drinking and driving, Petitioner established sufficient rehabilitation to warrant a probationary license with terms and conditions that allow the Board to oversee his abstinence and on-going rehabilitation.

5. Of separate concern, however, is Petitioner's use of the doctor title, as uncovered by the Board's investigation. It cannot be concluded from the evidence that Petitioner ever ceased using the title while his license was surrendered. The evidence in the record would suggest the contrary. An ethics course focused on a physician's professional responsibility to abide by the Legislature's mandates, as part of a probation's terms and conditions, would educate Petitioner on, among other things, the public's perception of the doctor title, in contrast to his having attained a medical doctorate degree.

6. Additionally, Petitioner's continuing rehabilitation will be served by engaging in community service to emphasize the greater purpose of his license and the need to respect it and the Board's laws and regulations.

7. Cause exists to grant Petitioner's Petition for Penalty Relief, pursuant to Business and Professions Code section 2307, as set forth in Factual Findings 1-21, and Legal Conclusions 1-6.

ORDER

The Petition of Jan Adams for is granted. Physician and Surgeon Certificate number A 51004 is fully reinstated and immediately revoked. However, the revocation is stayed and Petitioner Jam Adams is placed on probation for three years upon the following terms and conditions.

1. Alcohol - Abstain From Use

Petitioner shall abstain completely from the use of products or beverages containing alcohol.

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

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

2. Biological Fluid Testing

Petitioner shall immediately submit to biological fluid testing, at Petitioner's expense, upon request of the Board or its designee. "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair follicle testing, or similar drug screening approved by the Board or its designee. Prior to practicing medicine, Petitioner shall contract with a laboratory or service approved in advance by the Board or its designee that will conduct random, unannounced, observed, biological fluid testing. The contract shall require results of the tests to be transmitted by the laboratory or service directly to the Board or its designee within four hours of the results becoming available. Petitioner shall maintain this laboratory or service contract during the period of probation.

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

If Petitioner fails to cooperate in a random biological fluid testing program within the specified time frame, Petitioner shall receive a notification from the Board or its designee to immediately cease the practice of medicine. Petitioner shall not resume the practice of medicine until final decision on an accusation and/or a petition to revoke probation. An accusation and/or petition to revoke probation shall be filed by the Board within 15 days of the notification to cease practice. If Petitioner requests a hearing on the accusation and/or petition to revoke probation, the Board shall provide Petitioner with a hearing within 30 days of the request, unless Petitioner stipulates to a later hearing. A decision shall be received from the Administrative Law Judge or the Board within 15 days unless good cause can be shown for the delay. The cessation of practice shall not apply to the reduction of the probationary time period.

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

3. Professionalism Program (Ethics Course)

Within 60 calendar days of the effective date of this Decision, Petitioner shall enroll in a professionalism program that meets the requirements of Title 16, California Code of Regulations, section 1358. Petitioner shall participate in and successfully complete that program. Petitioner shall provide any information and documents that the program may deem pertinent. Petitioner shall successfully complete the classroom component of the program not later than six months after Petitioner's initial enrollment, and the longitudinal component of the program not later than the time specified by the program, but no later than one year after attending the classroom component. The professionalism program shall be at Petitioner'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 discussed in the Decision (using the doctor title after surrendering the medical license), 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.

Petitioner 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. Community Service -- Free Services

Within 60 calendar days of the effective date of this Decision, Petitioner shall submit to the Board or its designee for prior approval a community service plan in which Petitioner shall, within the first two years of probation, provide 144 hours of free medical services to a community or non-profit organization.

Prior to engaging in any community service, Petitioner shall provide a true copy of the Decision to the chief of staff, director, office manager, program manager, officer, or the chief executive officer at every community or non-profit organization where Petitioner provides community service and shall submit proof of compliance to the Board or its designee within 15 calendar days. This condition shall also apply to any change(s) in community service.

Community service performed prior to the effective date of the Decision shall not be accepted in fulfillment of this condition.

5. Notification

Within seven days of the effective date of this Decision, Petitioner shall provide a true copy of this Decision and Accusation to the Chief of Staff or the Chief Executive Officer at every hospital where privileges or membership are extended to Petitioner, at any other facility where Petitioner 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 Petitioner. Petitioner 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.

6. Supervision of Physician Assistants

During probation, Petitioner is prohibited from supervising physician assistants.

7. Obey All Laws

Petitioner 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.

8. Quarterly Declarations

Petitioner shall submit quarterly declarations under penalty of perjury on forms provided by the Board, stating whether there has been compliance with all of the conditions of probation.

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

9. General Probation Requirements

Compliance with Probation Unit

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

Address Changes

Petitioner shall, at all times, keep the Board informed of Petitioner'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, subdivision (b).

Place of Practice

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

License Renewal

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

Travel or Residence Outside California

Petitioner 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 30 calendar days.

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

10. Interview with the Board or its Designee

Petitioner shall be available in person upon request for interviews either at Petitioner's place of business or at the probation unit office, with or without prior notice throughout the term of probation.

11. Non-practice While on Probation

Petitioner shall notify the Board or 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 Petitioner's return to practice. Non-practice is defined as any period of time Petitioner 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 that 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 Petitioner's period of non-practice while on probation exceeds 18 calendar months, Petitioner 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.

Petitioner's period of non-practice while on probation shall not exceed two years.

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

Periods of non-practice will relieve Petitioner 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."

12. Completion of Probation

Petitioner 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, Petitioner's certificate shall be fully restored.

13. Violation of Probation

Failure to fully comply with any term or condition of probation is a violation of probation. If Petitioner violates probation in any respect, the Board, after giving Petitioner 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 Petitioner 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.

14. License Surrender

Following the effective date of this Decision, if Petitioner ceases practicing due to retirement or health reasons or is otherwise unable to satisfy the terms and conditions of probation, Petitioner may request to surrender his license. The Board reserves the right to evaluate Petitioner'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, Petitioner shall within 15 calendar days deliver Petitioner's wallet and wall certificate to the Board or its designee and Petitioner shall no longer practice medicine. Petitioner will no longer be subject to the terms and conditions of probation. If Petitioner re-applies for a medical license, the application shall be treated as a petition for reinstatement of a revoked certificate.

15. Probation Monitoring Costs

Petitioner 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.

Dated: November 29, 2012



DANIEL JUAREZ
Administrative Law Judge
Office of Administrative Hearings

Exhibit B

Cease Practice Order

Medical Board of California Case No. 27-2012-223957

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

In the Matter of the Petition for Penalty:	)	
Relief of:	)	
	)	
JAN ADAMS, M.D.	)	Case No. 27-2012-223957
	)	
Physician's and Surgeon's	)	
Certificate No. A 51004	)	
	)	
Petitioner.	)	
_____	)	

CEASE PRACTICE ORDER

In the Medical Board of California ("Board") Case No. 27-2012-223957, the Board issued a Decision and Order adopting a Stipulated Settlement and Disciplinary Order, which became effective March 14, 2013. In the Board's order, Physician's and Surgeon's Certification No. A 51004, issued to JAN ADAMS, M.D. was ordered, reinstated and immediately revoked, revocation stayed and Respondent was placed on probation for three years with terms and conditions.

Disciplinary Order #2. "Biological Fluid Testing," requires Petitioner to immediately submit to biological fluid testing, at Petitioner's own expense, upon request of the Board or its designee. "Biological Fluid Testing" may include, but is not limited to, urine, blood, Breathalyzer, hair follicle testing, or similar drug screening approved by the Board or its designee. Prior to practicing medicine, Petitioner shall contract with a laboratory or service approved in advance by the Board or its designee that will conduct random, unannounced, observed, biological fluid testing. The contract shall require results of the tests to be transmitted by the laboratory or serve directly to the Board or its designee within four hours of the results becoming available. Petitioner shall maintain this laboratory or service during the period of probation. A certified copy of any laboratory test result may be received in any proceedings between the Board and Petitioner.

The Petitioner has failed to cooperate in a random biological fluid testing program within the specified time frame, as mandated in the above Decision and Order. Thus, petitioner, JAN ADAMS, M.D., shall receive a notification from the Board or its designee to immediately cease the practice of medicine. The Petitioner shall not resume the practice of medicine until a final decision on an accusation and/or a petition to revoke probation. An accusation and/or a petition to revoke probation shall be filed within 15 days of the notification to cease practice.

IT IS SO ORDERED December 23, 2013 at 5:00 p.m.

By: 
A. RENEE THREADGILL
Chief of Enforcement