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

In the Matter of the Accusation Against:  

DAVID C. WRIGHT, M.D.  

Case No. 03-2013-231596

Physician's and Surgeon's  
Certificate No. G 88577

Respondent.

DECISION AND ORDER

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

This Decision shall become effective at 5:00 p.m. on February 20, 2015.

IT IS SO ORDERED January 21, 2015.

MEDICAL BOARD OF CALIFORNIA

By:  
Dev Gnanadev, M.D., Chair
Panel B
BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

DAVID C. WRIGHT, M.D.
141 Pacific Avenue
Pacific Grove, CA 93950

Physician's and Surgeon's Certificate No. G88577
Respondent.

Case No. 03-2013-231596

STIPULATED SETTLEMENT AND DISCIPLINARY ORDER

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

PARTIES

1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board of California. She brought this action solely in her official capacity and is represented in this matter by Kamala D. Harris, Attorney General of the State of California, by Lawrence Mercer, Deputy Attorney General.

2. David C. Wright, M.D. (Respondent) is represented in this matter by his attorneys Kathleen Duggan and Ropers, Majeski, Kohn & Bentley, 515 So. Flower Street, Suite 1000, Los Angeles, CA 90071-2213.

STIPULATED SETTLEMENT AND DISCIPLINARY ORDER (MBC No. 03-2013-231596)
3. On October 28, 2009, the Medical Board of California issued Physician's and Surgeon's Certificate Number G88577 to David C. Wright, M.D. (Respondent). Said certificate is renewed and current, with an expiration date of March 31, 2015.

JURISDICTION

4. On March 29, 2014, complainant Kimberly Kirchmeyer, in her official capacity as the Executive Director of the Board, filed Accusation no. 03-2013-231596 (Accusation) against Respondent. The Accusation was duly served on Respondent and Respondent timely filed a Notice of Defense. A true and correct copy of the Accusation is attached hereto as Exhibit A and incorporated by reference as if fully set forth herein.

ADVISEMENT AND WAIVERS

5. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 03-2013-231596.

6. Respondent has carefully read and fully understands the contents, force and effect of this Stipulated Settlement and Disciplinary Order, and has fully reviewed and discussed same with his attorney of record.

7. Respondent is fully aware of his legal rights in this matter including his right to a hearing on the charges and allegations contained in Accusation No. 03-2013-231596, his right to present witnesses and evidence and to testify on his own behalf, his right to confront and cross-examine all witnesses testifying against him, his right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents, his right to reconsideration and court review of an adverse decision, and all other rights accorded him pursuant to the California Administrative Procedure Act, the California Code of Civil Procedure, and all other applicable laws, having been fully advised of same by his attorney of record. Respondent, having the benefit of counsel hereby knowingly, intelligently, freely and voluntarily waives and gives up each and every one of the rights set forth and/or referenced above.
CULPABILITY

8. Respondent agrees that, at an administrative hearing, complainant could establish a 
    prima facie case with respect to the charges and allegations contained in Accusation No. 03-2013-
    231596 , and that he has thereby subjected his Physician’s and Surgeon’s Certificate to 
disciplinary action. Respondent further agrees to be bound by the Board’s imposition of 
discipline as set forth in the Disciplinary Order below.

CONTINGENCY

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

10. The parties understand and agree that facsimile and electronic format copies of this 
    Stipulated Settlement and Disciplinary Order, including facsimile and electronic format 
signatures thereto, shall have the same force and effect as the originals.

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

DISCIPLINARY ORDER

A. PUBLIC REPRIMAND

    IT IS HEREBY ORDERED: that Physician’s and Surgeon’s Certificate No. G88577 
    issued to Respondent David C. Wright, M.D., shall be and is hereby Publicly Reprimanded 
pursuant to California Business and Professions Code section 2227, subdivision (a)(4). This
Public Reprimand, which is issued in connection with Respondent’s actions as set forth in Accusation No. 03-2013-231596, is as follows:

Between January 28, 2013, and March 11, 2013, you administered daily antibiotic infusion therapy to Patient K.B. for a presumed tick-borne infection caused by the pathogen Borrelia persica without an adequate objective basis, a confirmed diagnosis or a documented discussion of treatment risks and alternatives. This treatment caused significant side effects and contributed to the patient’s subsequent diagnosis with a C. Difficile infection.

B. MEDICAL RECORD KEEPING COURSE

Within 60 days of the effective date of this Decision, Respondent shall enroll in a course in medical record keeping equivalent to the Medical Record Keeping Course offered by the Physician Assessment and Clinical Education Program, University of California, San Diego School of Medicine (Program), approved in advance by the Board or its designee. Respondent shall provide the program with any information and documents that the Program may deem pertinent. Respondent shall participate in and successfully complete the classroom component of the course not later than six (6) months after Respondent’s initial enrollment. The medical record keeping course shall be at respondent’s expense and shall be in addition to Continuing Medical Education (CME) requirements for renewal of licensure.

A medical record keeping 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 Board or its designee, be accepted towards fulfillment of this condition of the course would have been approved by the Board or its designee had the course been taken after the effective date of this Decision.

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

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ACCEPTANCE

I, DAVID C. WRIGHT, M.D., have carefully read this Stipulated Settlement and Disciplinary Order and, having the benefit of counsel, enter into it freely, voluntarily, intelligently and with full knowledge of its force and effect on my Physician's and Surgeon's Certificate No. G88577. I fully understand that, after signing this stipulation, I may not withdraw from it, that it shall be submitted to the Medical Board of California for its consideration, and that the Board shall have a reasonable period of time to consider and act on this stipulation after receiving it. By entering into this stipulation, I fully understand that, upon formal acceptance by the Board, I shall be publically reprimanded by the Board and shall be required to comply with all of the terms and conditions of the Disciplinary Order set forth above. I, also, fully understand that any failure to comply with the terms and conditions of the Disciplinary Order set forth above shall constitute unprofessional conduct and that my Physician's and Surgeon's Certificate No. G88577 will be subject to further disciplinary action.

Dated: 10/23/14

DAVID C. WRIGHT, M.D.
Respondent

I have read and fully discussed with Respondent DAVID C. WRIGHT, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

Dated:

ROPERS, MAJESKI, KOHN & BENTLEY

KATHLEEN DUGGAN
Attorneys for Respondent
ENDORSEMENT

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

Dated: December 29, 2014

KAMALA D. HARRIS
Attorney General of California
JANE ZACK SIMON
Supervising Deputy Attorney General

LAWRENCE MERCER
Deputy Attorney General
Attorneys for Complainant
BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

DAVID C. WRIGHT, M.D.
141 Pacific Avenue
Pacific Grove, CA 93950

Physician’s and Surgeon’s Certificate No. G88577
Respondent.

Complainant alleges:

PARTIES

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

2. On October 28, 2009, the Medical Board of California issued Physician’s and Surgeon's Certificate Number G88577 to David C. Wright, M.D. (Respondent). Said certificate is renewed and current, with an expiration date of March 31, 2015.
JURISDICTION

3. This Accusation is brought before the Medical Board of California\(^1\) (Board), Department of Consumer Affairs, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.

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

5. Section 2234 of the Code provides that the Medical Board shall take action against any licensee who is charged with unprofessional conduct. Unprofessional conduct includes, but is not limited to:

   (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. . . ."

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\(^1\) The term “Board” means the Medical Board of California. “Division of Medical Quality” shall also be deemed to refer to the Board.
6. Section 2266 of the Code provides:

“The failure of a physician and surgeon to maintain adequate and accurate records relating to the provision of services to their patients constitutes unprofessional conduct.”

FIRST CAUSE FOR DISCIPLINARY ACTION

(Gross Negligence/Repeated Negligent Acts/Inadequate Records)

7. Respondent’s license is subject to discipline and respondent is guilty of unprofessional conduct in violation of Business and Professions Code § 2234(b) and/or (c) and/or § 2266 in that respondent was grossly negligent and/or committed repeated negligent acts in his care and treatment of Patient K.B.² and failed to keep adequate and accurate records, including but not limited to the following:

A. At all relevant times, respondent was a physician specializing in Infectious Diseases with offices in Monterey, California.

B. Patient K.B., a 32 year old female, came under respondent’s care and treatment on or about January 28, 2013. In her initial communications with respondent, K.B. gave a history of multiple symptoms following a several year period during which she lived in Israel. K.B. also reported frequent contact with head lice and one occasion when she pulled “a black bug the size of a tick” from her hair. She also reported that the person with whom she lived in Israel had been diagnosed with tick-borne relapsing fever. K.B. had learned of respondent from a patient blog on tick-borne infections called “The Tick That Bit Me” and she contacted respondent for the name of a physician in her area who might evaluate and treat her symptoms. Respondent recommended that K.B. come to his clinic in California for treatment which she did, in part because of her reliance on the information contained in the patient blog. Respondent did not disclose to K.B. that the author of the blog was a member of respondent’s family.

C. At her first office visit on January 28, 2013, respondent advised K.B. that based upon her history and symptoms, he believed that she suffered from a chronic tick-borne infection caused by pathogen Borrelia persica, which is endemic to Israel and the Middle East. He

² The patient’s name is abbreviated to protect privacy interests.
recommended that she undergo six weeks of daily IV antibiotic treatment with ceftriaxone. The
record of that encounter is significant for the absence of a documented discussion regarding
possible alternative diagnoses, the possible risks of the proposed course of IV antibiotic treatment
or alternatives to that treatment.

D. Multiple laboratory tests for different tick-related Borrelia and Bartonella strains were
ordered by respondent, but the results of all of them were negative. While serologic tests for
Borrelia persica are not commercially available in the United States, respondent did not order an
examination of blood smear samples to detect the organisms and thereby support his diagnosis of
Borrelia persica. In fact, that diagnosis was not supported by objective findings and the proposed
treatment with six weeks of daily IV ceftriaxone was neither the generally accepted modality for
treatment of tick-borne relapsing fever caused by Borrelia persica, nor the recommended
treatment duration.

E. K.B. began the recommended daily antibiotic treatment, which respondent
administered via a peripheral IV that he placed himself. When K.B. and her mother commented
that respondent did not wear gloves or appear to wash his hands when administering the infusion
therapy, respondent advised them that it wasn’t necessary. Although K.B. experienced various
problems related to the treatment, these problems are frequently omitted from respondent’s
records due to the fact that the electronic chart notes were copied from visit to visit. As a result of
this template-use of prior chart notes, respondent’s records are in many instances neither adequate
nor accurate records of what actually transpired at each visit.

F. K.B. had significant side effects as a consequence of the ceftriaxone therapy and,
after K.B. developed a rash while receiving ceftriaxone, respondent changed her medication to
ertapenem on February 23, 2014. Respondent’s review of systems, however, states “negative for
rashes.”

G. As her treatment progressed, K.B. experienced increasing abdominal pain, although
this is not noted in respondent’s chart until March 2, 2013 -- after K.B. had presented to a local
hospital emergency room. On March 5, 2013, K.B. underwent a laparoscopic cholecystectomy
for gallstones, described to her as biliary sludge, and which may have resulted from her
ceftriaxone therapy.

H. K.B. completed respondent’s prescribed six week course of daily infusion therapy on
March 11, 2013. Although respondent’s chart notes stated that K.B.’s nausea and vomiting had
resolved as of March 6, in fact K.B. became increasingly ill with fever and vomiting. She went
first to a local emergency room and then to a hospital in the San Francisco Bay Area, where she
was diagnosed with Clostridium difficile colitis (a possible consequence of the ceftriaxone
therapy) and required a prolonged hospitalization for treatment of that bacterial infection.

8. Respondent is guilty of unprofessional conduct and subject to disciplinary action
under section 2234, and/or 2234(b) and/or 2234(c) and/or 2266 of the Code in that respondent
was grossly negligent and/or committed repeated negligent acts and/or failed to maintain
adequate and accurate medical records, including but not limited to the following:

A. Respondent failed to maintain appropriate records, instead copying them from visit to
visit resulting in each chart note being an inaccurate record of what transpired at each of the
patient’s visits;

B. Respondent diagnosed a presumptive chronic Borrelia persica infection without an
adequate objective basis;

C. Respondent recommended and administered an atypical treatment for presumptive
Borrelia persica infection without an adequate basis in the medical literature;

D. Respondent failed to discuss and/or failed to document the risks and alternatives to
the proposed treatment;

E. Respondent failed to follow standard guidelines for hand hygiene in the placement of
peripheral intravenous catheters;

F. Respondent utilized a patient blog as an endorsement without disclosing that the
blog’s author was a family member.

PRAYER

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

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1. Revoking or suspending physician and surgeon certificate number G88577 issued to David C. Wright, M.D.;

2. Prohibiting David C. Wright, M.D., from supervising physician assistants pursuant to section 3257 of the Code;

3. Ordering David C. Wright, M.D., if placed on probation, to pay the costs of probation monitoring;

4. Taking such other and further action as may be deemed proper and appropriate.

March 19, 2014

DATED: ____________________________

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