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 3 California Department of Justice
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7
 8 **BEFORE THE**
DIVISION OF MEDICAL QUALITY
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
 10 **STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

Case No. 06-97-78021

12 EDWARD RIDGILL, M.D.
 13 4130 Eadhill Place
 Whittier, California 90601

OAH No.

**STIPULATED SETTLEMENT AND
 DISCIPLINARY ORDER**

14 Physician's and Surgeon's Certificate No.
 15 G40690

16 Respondent.

17
 18 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the
 19 above-entitled proceedings that the following matters are true:

20 PARTIES

21 1. Complainant Ron Joseph is the Executive Director of the Medical Board
 22 of California who brought this action solely in his official capacity and is represented in this
 23 matter by Bill Lockyer, Attorney General of the State of California, by Cindy M. Lopez, Deputy
 24 Attorney General.

25 2. Respondent Edward Ridgill, M.D. ("Respondent") is represented in this
 26 proceeding by attorney William K. Hayes, whose address is 729 Mission Street, Suite 300, South
 27 Pasadena, Ca 91030.
 28

1 privileges or membership are extended to respondent or where respondent is employed to
2 practice medicine and on the Chief Executive Officer at every insurance carrier where
3 malpractice insurance coverage is extended to respondent.

4 2. PRESCRIBING PRACTICES COURSE Within sixty (60) days of the
5 effective date of this decision, respondent shall enroll in a course in Prescribing Practices
6 approved in advance by the Division or its designee, and shall successfully complete the course
7 during the first year of probation.

8 3. RECORD KEEPING COURSE Within ninety (90) days from the
9 effective date of this decision, respondent shall enroll in a course in Medical Records Keeping
10 approved in advance by the Division or its designee, and shall successfully complete the course
11 during the first year of probation.

12 4. ETHICS COURSE Within sixty (60) days of the effective date of this
13 decision, respondent shall enroll in a course in Ethics approved in advance by the Division or its
14 designee, and shall successfully complete the course during the first year of probation.

15 5. ORAL CLINICAL OR WRITTEN EXAM Respondent shall take and
16 pass an oral clinical exam in a subject to be designated and administered by the Division, or its
17 designee. This examination shall be taken within ninety (90) days after the effective date of this
18 decision. If respondent fails the first examination, respondent shall be allowed to take and pass a
19 second examination, which may consist of a written as well as an oral examination. The waiting
20 period between the first and second examinations shall be at least sixty (60) days. If respondent
21 fails to pass the first and second examination, respondent may take a third and final examination
22 after waiting a period of nine (9) months. Failure to pass the oral clinical examination within
23 eighteen (18) months after the effective date of this decision shall constitute a violation of
24 probation. The respondent shall pay the costs of these examinations within ninety (90) days of
25 the administration of each exam. Failure to pay these costs shall constitute a violation of
26 probation.

27 Respondent shall not practice medicine until respondent has passed the required
28 examination and has been so notified by the Division or its designee in writing. This prohibition

1 shall not bar respondent from practicing in a clinical training program approved by the Division
2 or its designee. Respondent's practice of medicine shall be restricted only to that which is
3 required by the approved training program.

4 6. MONITORING Within thirty (30) days of the effective date of this
5 decision, respondent shall submit to the Division or its designee for its prior approval a plan of
6 practice in which respondent's practice shall be monitored by another physician in respondent's
7 field of practice, who shall provide periodic reports to the Division or its designee.

8 If the monitor resigns or is no longer available, respondent shall, within fifteen
9 (15) days, move to have a new monitor appointed, through nomination by respondent and
10 approval by the Division or its designee.

11 Respondent is prohibited from engaging in solo practice.

12 7. OBEY ALL LAWS Respondent shall obey all federal, state and local
13 laws, all rules governing the practice of medicine in California, and remain in full compliance
14 with any court ordered criminal probation, payments and other orders.

15 8. QUARTERLY REPORTS Respondent shall submit quarterly
16 declarations under penalty of perjury on forms provided by the Division, stating whether there
17 has been compliance with all the conditions of probation.

18 9. PROBATION SURVEILLANCE PROGRAM COMPLIANCE
19 Respondent shall comply with the Division's probation surveillance program. Respondent shall,
20 at all times, keep the Division informed of his business and residence addresses which shall both
21 serve as addresses of record. Changes of such addresses shall be immediately communicated in
22 writing to the Division. Under no circumstances shall a post office box serve as an address of
23 record.

24 Respondent shall also immediately inform the Division, in writing, of any travel
25 to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more
26 than thirty (30) days.

27 10. INTERVIEW WITH THE DIVISION, ITS DESIGNEE OR ITS
28 DESIGNATED PHYSICIAN(S) Respondent shall appear in person for interviews with the

1 Division, its designee or its designated physician(s) upon request at various intervals and with
2 reasonable notice.

3 11. TOLLING FOR OUT-OF-STATE PRACTICE, RESIDENCE OR IN-
4 STATE NON-PRACTICE In the event respondent should leave California to reside or to
5 practice outside the State or for any reason should respondent stop practicing medicine in
6 California, respondent shall notify the Division or its designee in writing within ten (10) days of
7 the dates of departure and return or the dates of non-practice within California. Non-practice is
8 defined as any period of time exceeding thirty (30) days in which respondent is not engaging in
9 any activities defined in Sections 2051 and 2052 of the Business and Professions Code. All time
10 spent in an intensive training program approved by the Division or its designee shall be
11 considered as time spent in the practice of medicine. Periods of temporary or permanent
12 residence or practice outside California or of non-practice within California, as defined in this
13 condition, will not apply to the reduction of the probationary period.

14 Any respondent disciplined under Business and Professions Code section 2305
15 (sister-state discipline) may petition for modification of penalty: 1) if the other state's discipline
16 terms are modified, terminated or reduced; and 2) if at least one year has elapsed from the
17 effective date of the California discipline.

18 12. COMPLETION OF PROBATION Upon successful completion of
19 probation, respondent's certificate shall be fully restored.

20 13. VIOLATION OF PROBATION If respondent violates probation in any
21 respect, the Division, after giving respondent notice and the opportunity to be heard, may revoke
22 probation and carry out the disciplinary order that was stayed. If an accusation or petition to
23 revoke probation is filed against respondent during probation, the Division shall have continuing
24 jurisdiction until the matter is final, and the period of probation shall be extended until the matter
25 is final.

26 14. COST RECOVERY The respondent is hereby ordered to reimburse the
27 Division the amount of \$4,000 within ninety (90) days of the effective date of this decision for
28 its investigative and prosecution costs. Failure to reimburse the Division's cost of investigation

1 and prosecution shall constitute a violation of the probation order, unless the Division agrees in
2 writing to payment by an installment plan because of financial hardship. The filing of
3 bankruptcy by the respondent shall not relieve the respondent of his responsibility to reimburse
4 the Division for its investigative and prosecution costs.

5 15. PROBATION COSTS Respondent shall pay the costs associated with
6 probation monitoring each and every year of probation, which are currently set at \$2,304, but
7 may be adjusted on an annual basis. Such costs shall be payable to the Division of Medical
8 Quality and delivered to the designated probation surveillance monitor at the beginning of each
9 calendar year. Failure to pay costs within 30 days of the due date shall constitute a violation of
10 probation.

11 16. LICENSE SURRENDER Following the effective date of this decision, if
12 respondent ceases practicing due to retirement, health reasons or is otherwise unable to satisfy
13 the terms and conditions of probation, respondent may voluntarily tender his certificate to the
14 Board. The Division reserves the right to evaluate the respondent's request and to exercise its
15 discretion whether to grant the request, or to take any other action deemed appropriate and
16 reasonable under the circumstances. Upon formal acceptance of the tendered license, respondent
17 will not longer be subject to the terms and conditions of probation.

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21 ACCEPTANCE

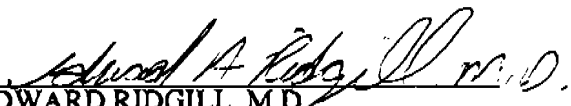
22 I have carefully read the above Stipulated Settlement and Disciplinary Order and
23 have fully discussed the terms and conditions and other matters contained therein with my
24 attorney William K. Hayes, I understand the effect this stipulation will have on my Physician's
25 and Surgeon's Certificate. I enter into this Stipulated Settlement voluntarily, knowingly and
26 intelligently and agree to be bound by the Disciplinary Order and Decision of the Division of
27 Medical Quality, Medical Board of California. I further agree that a facsimile copy of this
28 Stipulated Settlement and Disciplinary Order, including facsimile copies of signatures, may be

1 used with the same force and effect as the originals.

2 DATED: 11/6/00

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EDWARD RIDGILL, M.D.
Respondent

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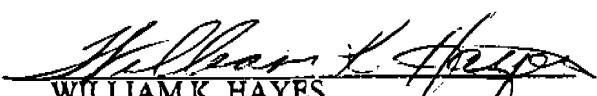
I have read and fully discussed with Respondent Edward Ridgill, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order and approve its form and content.

10

DATED: 11/6/00

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WILLIAM K. HAYES
Attorney for Respondent

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ENDORSEMENT

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

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DATED: 11.29.00


21

BILL LOCKYER, Attorney General
of the State of California

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CINDY M. LOPEZ
Deputy Attorney General

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Attorneys for Complainant

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(14)

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO
BY *[Signature]* 15 2000

1 BILL LOCKYER, Attorney General
of the State of California
2 CINDY M. LOPEZ (State Bar No. 119988)
Deputy Attorney General
3 California Department of Justice
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4 Los Angeles, California 90013-1233
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5 Attorneys for Complainant

7 **BEFORE THE**
8 **DIVISION OF MEDICAL QUALITY**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

11 In the Matter of the Accusation) Case No. 06-97-78021
Against:)
12)
13 **EDWARD A. RIDGILL, M.D.**) **FIRST AMENDED**
3737 East Century Boulevard #105) **ACCUSATION**
Lynwood, California 90262)
14)
Physician and Surgeon's Certificate)
15 No. G40690,)
16 Respondent.)

18 The Complainant alleges:

19 **PARTIES**

- 20 1. Ron Joseph ("Complainant") brings this First
21 Amended accusation solely in his official capacity as the
22 Executive Director of the Medical Board of California
23 (hereinafter the "Board"). This first amended accusation is in
24 addition to and is numbered consecutively to the accusation filed
25 on April 7, 1999.
- 26 2. On or about August 24, 1979, Physician and
27 Surgeon's Certificate No. G40690 was issued by the Board to

1 Edward A. Ridgill, M.D. (hereinafter "respondent"). At all times
2 relevant to the charges brought herein, this license has been in
3 full force and effect. Unless renewed, it will expire on
4 September 30, 2000.

5 JURISDICTION

6 3. This first amended accusation is brought before
7 the Division of Medical Quality of the Medical Board of
8 California, Department of Consumer Affairs (hereinafter the
9 "Division"), under the authority of the following sections of the
10 Business and Professions Code (hereinafter "Code"):

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

17 B. Section 2234 of the Code provides that
18 unprofessional conduct includes, but is not limited to, the
19 following:

20 (a) Violating or attempting to violate, directly or
21 indirectly, or assisting in or abetting the violation
22 of, or conspiring to violate, any provision of this
23 chapter.

24 (b) Gross negligence.

25 (c) Repeated negligent acts.

26 (d) Incompetence.

27 (e) The commission of any act involving dishonesty or

1 corruption which is substantially related to the
2 qualifications, functions, or duties of a physician and
3 surgeon.

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

6 C. Section 2266 of the Code provides that the
7 failure of a physician to maintain adequate records relating
8 to the provision of services to their patients constitutes
9 unprofessional conduct.

10 D. Section 725 of the Code provides that repeated
11 acts of clearly excessive prescribing or administering of
12 drugs or treatment as determined by the standard of the
13 community of licensees is unprofessional conduct for a
14 physician and surgeon.

15 E. Section 2266 of the Code provides that failure
16 of a physician to maintain adequate and accurate records
17 relating to the provision of services to their patients
18 constitutes unprofessional conduct.

19 F. Section 2261 of the Code provides that
20 knowingly making or signing any certificate or other
21 document directly or indirectly related to the practice of
22 medicine which falsely represents the existence or
23 nonexistence of a state of facts constitutes unprofessional
24 conduct.

25 G. Section 2262 of the Code provides that
26 altering or modifying the medical record of any person, with
27 fraudulent intent, or creating any false medical record,

1 with fraudulent intent, constitutes unprofessional conduct.

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3 **COST RECOVERY**

4 H. Section 125.3 of the Code provides, in part,
5 that the Division may request the administrative law judge
6 to direct any licentiate found to have committed a violation
7 or violations of the licensing act, to pay the Division a
8 sum not to exceed the reasonable costs of the investigation
9 and enforcement of the case.

10 **WELFARE & INSTITUTIONS CODE PROVISION**

11 I. Section 14124.12 of the Welfare and
12 Institutions Code provides, in pertinent part, that:

13 (a) Upon receipt of written notice from the Medical
14 Board of California. . .that a licensee's license has been
15 placed on probation as a result of a disciplinary action,
16 the department may not reimburse any Medi-Cal claim for the
17 type of surgical service or invasive procedure that gave
18 rise to the probation. . .that was performed by the licensee
19 on or after the effective date of probation and until the
20 termination of all probationary terms and conditions or
21 until the probationary period has ended, whichever occurs
22 first. This section shall apply except in any case in which
23 [the Board] determines that compelling circumstances warrant
24 the continued reimbursement during the probationary period
25 of any Medi-Cal claim. . . In such a case, the department
26 shall continue to reimburse the licensee for all procedures,
27 except for those invasive or surgical procedures for which

1 the licensee was placed on probation.

2
3 CAUSES FOR DISCIPLINE

4 I

5 (Conviction of a Crime)

6 4. Respondent is subject to disciplinary action under
7 sections 2234 and 2236 of the Code in that he has been convicted
8 of a crime which is substantially related to the qualifications,
9 functions, or duties of a physician and surgeon. The
10 circumstances are as follows:

11 A. On or about July 21, 1998, following trial by
12 jury, respondent was found guilty of and convicted of seven
13 counts of an indictment charging him with violations of 18
14 U.S.C. §§1341 (mail fraud) in case number CR98-037 of the
15 United States District Court, Central District of
16 California, entitled United States of America v. Edward
17 Allen Ridgill.

18 B. The facts underlying this conviction are as
19 follows: beginning no later than June 1995, and continuing
20 through at least July 1997, respondent devised a scheme to
21 defraud the Employment Development Department ("EDD") in
22 which he would falsely certify that various individuals were
23 disabled, and that he had medically examined them prior to
24 reaching such determination, when in fact respondent knew
25 full well those individuals were not disabled. Those
26 individuals would thereafter be mailed disability payment
27 checks by EDD. As a result of respondent's actions, EDD was

1 defrauded in the amount of approximately \$35,000.

2 C. Respondent was sentenced to eighteen (18)
3 months in prison, and was ordered to pay both restitution to
4 EDD and a fine.

5 II

6 (Dishonest or Corrupt Act)

7 5. Respondent is subject to disciplinary action under
8 section 2234, subdivision (e) of the Code in that he has
9 committed dishonest or corrupt acts which are substantially
10 related to the qualifications, functions, or duties of a
11 physician and surgeon. The circumstances are as follows:

12 D. Paragraph 4, subparagraphs (A)-(C), are
13 incorporated by reference as if set forth in full at this
14 point.

15 III

16 (Excessive Prescribing)

17 6. Respondent Edward A. Ridgill, M.D., is subject to
18 disciplinary action under section 725 of the Business and
19 Professions Code in that he excessively prescribed controlled
20 substances and other dangerous drugs to patient J.C. The
21 circumstances are as follows:

22 A. J.C. injured himself while working at a tow
23 truck company. These injuries occurred in June and
24 September, 1995. Respondent diagnosed thoracolumbar strain
25 (muscle strain in upper part of the spine), cervical strain,
26 and radiculopathy (basically, a pinched nerve).

27 B. On September 28, 1995, an orthopedist

1 evaluated the patient and diagnosed lumbar strain, but did
2 not diagnose radiculopathy.

3 C. In a report dated April 20, 1996, a second
4 orthopedic specialist evaluated the patient and found no
5 evidence of radiculopathy.

6 D. In a report dated April 30, 1996, another
7 physician examined the patient and diagnosed him with lumbar
8 syndrome without radiculopathy.

9 E. In a report of August 5, 1996, respondent
10 describes the results of a Magnetic Resonance Imaging
11 examination. This examination is critical in diagnosing
12 radiculopathy. However, there is no reference to an MRI
13 in any of the orthopedic reports written by the other
14 doctors, nor is there an MRI report contained in the
15 patient's medical records.

16 F. The patient's medical records contain 67 sign
17 in sheets which were allegedly signed by the patient on the
18 dates that he visited respondent's office. The signature
19 pages indicate that the patient signed in on a total of 182
20 days, and covered the period of September 7, 1995 until
21 March 7, 1996. However, a handwriting expert analyzed these
22 signatures and determined that they were created in large
23 batches and not on separate occasions.

24 G. On or around the period of January 4, 1996
25 through June 10, 1996, respondent prescribed the following
26 narcotics in the following amounts to patient J.C.:

27

<u>Date</u>	<u>Medication</u>	<u>Quantity</u>
1/4/96	Hydrocodone ES	100
1/4/96	Carisoprodol	100
1/10/96	Carisoprodol	100
1/11/96	Hydrocodone+APAP ES	100
1/23/96	Hydrocodone ES	100
1/23/96	Carisoprodol	100
2/08/96	Hydrocodone+APAP ES	100
2/08/96	Carisoprodol	100
2/21/96	Hydrocodone ES	100
2/21/96	Carisoprodol	100
3/8/96	Hydrocodone+APAP ES	100
3/8/96	Carisoprodol	100
3/15/96	Hydrocodone ES	100
3/15/96	Carisoprodol	100
4/2/96	Hydrocodone+APAP ES	100
4/2/96	Carisoprodol	100
5/1/96	Hydrocodone+APAP ES	100
5/1/96	Carisoprodol	100
5/15/96	Hydrocodone+APAP ES	100
5/15/96	Carisoprodol	100
6/10/96	Hydrocodone+APAP ES	100
6/10/96	Carisoprodol	100

24 H. According to the Physician's Desk Reference,
25 the average adult daily dosage of Vicodin (Hydrocodone)
26 should not exceed 5 tablets per day.

27 I. The Physician's Desk Reference indicates that

1 failed, then he should have prescribed narcotics.

2 C. Respondent prescribed excessive dosages of
3 narcotics.

4 D. Respondent diagnosed the patient with
5 radiculopathy without the aid of an MRI report or respondent
6 misrepresented the existence of the report.

7 V

8 (Repeated Negligent Acts)

9 8. Respondent Edward A. Ridgill, M.D., is subject to
10 disciplinary action under section 2234, subdivision (c) of the
11 Business and Professions Code in that respondent committed
12 repeated negligent acts in the care, treatment and management of
13 patient J.C. The following acts and omissions of respondent
14 individually and collectively constitute departures from the
15 standard of care:

16 A. Complainant refers to and by this reference,
17 incorporate herein the factual allegations set forth in
18 paragraph 6, subparagraphs A through F, above as though
19 fully set forth.

20 B. Respondent should have prescribed non-
21 steroidal anti-inflammatory agents initially, and if that
22 failed, then he should have prescribed narcotics.

23 C. Respondent prescribed excessive dosages of
24 narcotics.

25 D. Respondent diagnosed the patient with
26 radiculopathy without the aid of an MRI report or respondent
27 misrepresented the existence of the report.

1 ("MRI") examination. This examination is critical in
2 diagnosing radiculopathy. However there is no mention of an
3 MRI by any other physician who examined patient J.C., nor do
4 respondent's medical records of patient J.C. contain an MRI
5 report.

6 VIII

7 (False Documents)

8 11. Respondent Edward A. Ridgill, M.D., is subject to
9 disciplinary action under section 2261 of the Business and
10 Professions Code in that he knowingly made or signed documents
11 related to the practice of medicine which falsely represented the
12 existence of a state of facts. The circumstances are as follows:

13 A. In a report dated August 5, 1996, respondent
14 describes the results of a Magnetic Resonance Imaging
15 ("MRI") examination. This examination is critical in
16 diagnosing radiculopathy. However there is no mention of an
17 MRI by any other physician who examined patient J.C., nor do
18 respondent's medical records of patient J.C. contain an MRI
19 report.

20 B. Patient J.C.'s medical records contain 67
21 sign-in sheets which were allegedly signed by the patient on
22 the dates that he visited respondent's office. The
23 signature pages indicate that the patient signed in on a
24 total of 182 days, and covered the period of September 7,
25 1995 until March 7, 1996. However, a handwriting expert
26 analyzed these signatures and determined that they were
27 created in large batches and not on separate occasions.

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IX

(Altering, Modifying or Creating False Medical Record with
Fraudulent Intent)

12. Respondent Edward A. Ridgill, M.D., is subject to disciplinary action under section 2262 of the Business and Professions Code in that he created false medical records. The circumstances are as follows:

A. In a report dated August 5, 1996, respondent describes the results of a Magnetic Resonance Imaging ("MRI") examination. This examination is critical in diagnosing radiculopathy. However there is no mention of an MRI by any other physician who examined patient J.C., nor do respondent's medical records of patient J.C. contain an MRI report.

B. Patient J.C.'s medical records contain 67 sign-in sheets which were allegedly signed by the patient on the dates that he visited respondent's office. The signature pages indicate that the patient signed in on a total of 182 days, and covered the period of September 7, 1995 until March 7, 1996. However, a handwriting expert analyzed these signatures and determined that they were created in large batches and not on separate occasions.

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PRAYER

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


1. Revoking or suspending Physician and Surgeon's Certificate Number G40690, heretofore issued to respondent Edward A. Ridgill, M.D.;

2. Revoking, suspending or denying approval of respondent's authority to supervise physician's assistants, pursuant to section 3527 of the Code;

3. Ordering respondent to pay the Division the reasonable costs of the investigation and enforcement of this case and, if placed on probation, the costs of probation monitoring;

4. Taking such other and further action as the Division deems necessary and proper.

DATED: August 15, 2000



Ron Joseph
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California

Complainant