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

In the Matter of the Accusation Against:	)	
Leonard M. Rodin, M.D.	)	File No. 800-2015-012993
Physician's and Surgeon's Certificate No. G 17051	)	
Respondent	)	

DECISION

The attached Stipulated Settlement and Discplinary Order 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 February 6, 2019.

IT IS SO ORDERED January 7, 2019.

MEDICAL BOARD OF CALIFORNIA

By: Kristina Lawson

Kristina Lawson, J.D., Chair
Panel B

XAVIER BECERRA
Attorney General of California
ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General
KAROLYN M. WESTFALL
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Attorneys for Complainant

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

In the Matter of the Accusation Against: **LEONARD M. RODIN, M.D.** **3420 Kenyon Street** **San Diego, CA 92110** **Physician's and Surgeon's Certificate No. G 17051** Respondent.	Case No. 800-2015-012993 OAH No. 2018050816 **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 (Board). She brought this action solely in her official capacity and is represented in this matter by Xavier Becerra, Attorney General of the State of California, by Karolyn M. Westfall, Deputy Attorney General.

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2. Respondent Leonard M. Rodin, M.D. (Respondent) is represented in this proceeding by attorney Paul Spackman, Esq., whose address is: 28441 Highridge Road, Suite 201, Rolling Hills Estates, CA 90274.

3. On or about September 4, 1969, the Board issued Physician's and Surgeon's Certificate No. G 17051 to Respondent. The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2015-012993, and will expire on November 30, 2020, unless renewed.

JURISDICTION

4. On March 14, 2018, Accusation No. 800-2015-012993 was filed before the Board, and is currently pending against Respondent. A true and correct copy of Accusation No. 800-2015-012993 and all other statutorily required documents were properly served on Respondent on March 14, 2018. Respondent timely filed his Notice of Defense contesting the Accusation. A true and correct copy of Accusation No. 800-2015-012993 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. 800-2015-012993. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

6. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

7. Having the benefit of counsel, Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

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CULPABILITY

8. Respondent agrees that, at an administrative hearing, complainant could establish a *prima facie* case with respect to the Second Cause of Action contained in Accusation No. 800-800-2015-012993, and that he has thereby subjected his Physician's and Surgeon's Certificate No. G 17051 to disciplinary action. Respondent further agrees to be bound by the Board's imposition of discipline as set forth in the Disciplinary Order below.

9. Respondent agrees that if an accusation is filed against him before the Board, or in any other proceeding before the Board, all of the charges and allegations contained in Accusation No. 800-2015-012993 shall be deemed true, correct, and fully admitted by Respondent for purposes of any such proceeding or any other licensing proceeding involving Respondent in the State of California.

CONTINGENCY

10. This Stipulated Settlement and Disciplinary Order shall be subject to approval of the Board. The parties agree that this Stipulated Settlement and Disciplinary Order shall be submitted to the Board for its consideration in the above-entitled matter and, further, that the Board shall have a reasonable period of time in which to consider and act on this Stipulated Settlement and Disciplinary Order after receiving it. By signing this stipulation, Respondent fully understands and agrees that he may not withdraw his agreement or seek to rescind this stipulation prior to the time the Board considers and acts upon it.

11. The parties agree that this Stipulated Settlement and Disciplinary Order shall be null and void and not binding upon the parties unless approved and adopted by the Board, except for this paragraph, which shall remain in full force and effect. Respondent fully understands and agrees that in deciding whether or not to approve and adopt this Stipulated Settlement and Disciplinary Order, the Board may receive oral and written communications from its staff and/or the Attorney General's Office. Communications pursuant to this paragraph shall not disqualify the Board, any member thereof, and/or any other person from future participation in this or any other matter affecting or involving Respondent. In the event that the Board does not, in its discretion, approve and adopt this Stipulated Settlement and Disciplinary Order, with the

exception of this paragraph, it shall not become effective, shall be of no evidentiary value whatsoever, and shall not be relied upon or introduced in any disciplinary action by either party hereto. Respondent further agrees that should this Stipulated Settlement and Disciplinary Order be rejected for any reason by the Board, Respondent will assert no claim that the Board, or any member thereof, was prejudiced by its/his/her review, discussion and/or consideration of this Stipulated Settlement and Disciplinary Order or of any matter or matters related hereto.

ADDITIONAL PROVISIONS

12. This Stipulated Settlement and Disciplinary Order is intended by the parties herein to be an integrated writing representing the complete, final and exclusive embodiment of the agreements of the parties in the above-entitled matter.

13. The parties agree that copies of this Stipulated Settlement and Disciplinary Order, including copies of the signatures of the parties, may be used in lieu of original documents and signatures and, further, that such copies shall have the same force and effect as originals.

14. In consideration of the foregoing admissions and stipulations, the parties agree the Board may, without further notice to or opportunity to be heard by Respondent, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Respondent Leonard M. Rodin, M.D.'s, Physician's and Surgeon's Certificate No. G 17051, 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 Accusation No. 800-2015-012993, is as follows:

> On April 17, 2014, you assessed and provided treatment to a patient for medical alcohol detoxification. Although you reviewed the patient's intake evaluation performed by a psychologist, and history of recent psychiatric and medical care in the electronic medical record, your chart notes for this visit were inadequate, in violation of Business and Professions Code section 2266, in that they do not include a review of systems, or sufficiently detailed information regarding the patient's prior alcohol or substance abuse history, prior detoxification treatment, prior psychiatric treatment, or

prior substance abuse treatment. Your chart notes also fail to document any discussion with the patient regarding inpatient versus outpatient detoxification treatment, a detailed suicide risk assessment, or instructions to discontinue use of Xanax during the detoxification period, as more fully described in Accusation No. 800-2015-012993.

1. EDUCATION COURSE. Within 60 calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for its prior approval educational program(s) or course(s) which shall not be less than 20 hours. The educational program(s) or course(s) shall be in the area of chemical dependency including alcohol detoxification, and shall be Category I certified. The educational program(s) or course(s) shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure. Following the completion of each course, the Board or its designee may administer an examination to test Respondent's knowledge of the course. Respondent shall provide proof of attendance for 45 hours of CME of which 20 hours were in satisfaction of this condition.

Any failure to fully comply with this term and condition of the Disciplinary Order shall constitute unprofessional conduct and will subject Respondent's Physician's and Surgeon's Certificate to further disciplinary action.

2. MEDICAL RECORD KEEPING COURSE. Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a course in medical record keeping approved in advance by the Board or its designee. Respondent shall provide the approved course provider with any information and documents that the approved course provider may deem pertinent. Respondent shall participate in and successfully complete the classroom component of the course not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully complete any other component of the course within one (1) year of enrollment. The medical record keeping course shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

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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 the fulfillment of this condition if the course would have been approved by the Board or its designee had the course been taken after the effective date of this Decision.

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

Any failure to fully comply with this term and condition of the Disciplinary Order shall constitute unprofessional conduct and will subject Respondent's Physician's and Surgeon's Certificate to further disciplinary action.

ACCEPTANCE

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

DATED: 10/29/18

LEONARD M. RODIN, M.D.
Respondent

I have read and fully discussed with Respondent Leonard M. Rodin, 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: _____

PAUL SPACKMAN, ESQ.
Attorney for Respondent

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

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

Any failure to fully comply with this term and condition of the Disciplinary Order shall constitute unprofessional conduct and will subject Respondent's Physician's and Surgeon's Certificate to further disciplinary action.

ACCEPTANCE

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

DATED: _____ _____
LEONARD M. RODIN, M.D.
Respondent

I have read and fully discussed with Respondent Leonard M. Rodin, 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: 10/29/2018 Paul Spackman
PAUL SPACKMAN, ESQ.
Attorney for Respondent

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ENDORSEMENT

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

Dated: 10/30/18

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General

KAROLYN M. WESTFALL
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 800-2015-012993

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Attorneys for Complainant

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STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
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BY D. Richards ANALYST

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

In the Matter of the Accusation Against: **LEONARD M. RODIN, M.D.** **3420 Kenyon Street** **San Diego, CA 92110** **Physician's and Surgeon's Certificate No. G17051,** Respondent.	Case No. 800-2015-012993 **ACCUSATION**

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 (Board).

2. On or about September 4, 1969, the Medical Board issued Physician's and Surgeon's Certificate No. G17051 to Leonard M. Rodin, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on November 30, 2018, unless renewed.

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JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 2227 of the Code states:

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

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

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

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

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

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

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

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5. Section 2234 of the Code, states, in pertinent part:

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

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

"(b) Gross negligence.

"..."

6. Section 2266 of the Code states:

"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 DISCIPLINE

(Gross Negligence)

7. Respondent has subjected his Physician's and Surgeon's Certificate No. G17051 to disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (b), of the Code, in that Respondent committed gross negligence in his care and treatment of Patient A,[1] as more particularly alleged hereinafter:

8. On or about January 12, 2012, Patient A, a then forty-year-old male and new member to Kaiser Permanente (Kaiser), contacted the Kaiser call center to request a psychiatry referral. During this discussion, Patient A informed the call-taker that his last suicide attempt was approximately one year prior.

9. On or about January 19, 2012, Patient A presented to the Kaiser Psychiatry Department for treatment for depression and anxiety, and was seen by M.G., MFT (M.G.). During this appointment, Patient A reported suffering from depression for more than twenty years, anxiety for three to four years, and a history of alcohol abuse with two years of sobriety.

[1] To protect the privacy of the patient involved, the patient's name has not been included in this pleading. Respondent is aware of the identity of the patient referred to herein.

Patient A further reported a familial history of bipolar disorder and alcoholism. Patient A further reported a prior suicide attempt two years earlier when he had been drinking all day and took a whole bottle of Seroquel.[2] Patient A further reported current feelings of helplessness, a sense of hopelessness, stress at work, and acute distress over his pending divorce. M.G. documented Patient A's mood as "anxious and depressed."

10. On or about March 1, 2012, Patient A presented to the Kaiser Psychiatry Department and was seen by Y.C., M.D. (Dr. Y.C.). During that appointment, Patient A reported a history of depression, anxiety, panic attacks, and binge drinking to the point of passing out. Patient A further reported a familial history of bipolar disorder and alcoholism. Patient A reported two prior suicide attempts by medication overdose when he was intoxicated from alcohol, both of which resulted in hospitalizations, but claimed to be sober since December 2011. He reported current feelings of depression and occasional hopelessness, but denied current suicidal ideation. At that time, Patient A reported taking Xanax,[3] Seroquel, and Prozac.[4] Dr. Y.C. diagnosed the patient with, among other things, Major Depression, Recurrent, Moderate. Dr. Y.C. recommended Patient A obtain basic lab work[5], and prescribed him 30 tabs of Prozac 40 mg, recommended he continue taking Seroquel and decrease his Xanax use.

11. On or about April 5, 2012, Dr. Y.C. refilled Patient A's Seroquel 100 mg prescription for 30 tabs.

12. On or about April 9, 2012, Dr. Y.C. refilled Patient A's Xanax .5 mg prescription for 30 tabs.

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[2] Seroquel, brand name for Quetiapine, is a dangerous drug pursuant to Business and Professions Code section 4022. It is an antipsychotic medication used to treat schizophrenia, bipolar disorder, and depression.

[3] Xanax, brand name for Alprazolam, is a Schedule IV controlled substance pursuant to Health and Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code section 4022. It is a sedative in the benzodiazepine class of drugs, used to treat anxiety and panic disorder.

[4] Prozac, brand name for Fluoxetine, is a dangerous drug pursuant to Business and Professions Code section 4022. It is a selective serotonin reuptake inhibitor used to treat depression and panic disorder.

[5] The order for labs was subsequently cancelled after the patient failed to present.

13. On or about April 16, 2012, Patient A contacted Kaiser by phone to request help with his drinking. During this discussion, Patient A informed the call-taker that he had been consuming twelve to eighteen beers per day, and a prior history of convulsions, blackouts, and delirium tremens (DT).[6]

14. On or about April 17, 2012, Patient A presented to Kaiser and was seen by R.A., Psy.D. (Dr. R.A.). During this approximate forty-five-minute alcohol abuse initial intake visit, Patient A reported he was living alone, drinking six to eight beers per day, and having withdrawal symptoms that included shakiness, difficulty speaking, sweats, and anxiety. Patient A further reported a familial history of alcoholism, and a prior suicide attempt two years earlier by taking a bottle of Seroquel when he was drunk. Patient A denied current suicidal ideation. Dr. R.A. recommended the patient maintain sobriety for two weeks before being referred to a residential recovery treatment program, but to attend groups and meetings in the interim, and referred him to see Respondent for medical alcohol detoxification.

15. On or about April 17, 2012, after meeting with Dr. R.A., Patient A was seen by Respondent. During this visit, Patient A admitted to drinking ten to twelve beers per day, and that his last use of alcohol was approximately eighteen hours earlier. Patient A reported two prior suicide attempts by medication overdose when he had been drinking, but denied any current suicidal ideation. Respondent did not use the Clinical Institute Withdrawal Assessment for Alcohol (CIWA), but noted Patient A to be in "mild withdrawal," with symptoms of internal agitation and shakes. Respondent made no attempt to speak with Patient A's treating psychiatrist, primary care physician, or any collateral informants. Respondent diagnosed the patient with Alcohol Dependence; Major Depression, Recurrent, Moderate; and Panic Disorder with Agoraphobia. Respondent recommended the patient undergo self-detoxification for which he prescribed forty Librium[7] 25 mg tablets, with instructions to take the medication every six hours

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[6] Delirium tremens (DT) is a central nervous system symptom of alcohol withdrawal that is seen in chronic alcoholism. Symptoms include uncontrollable trembling, hallucinations, severe anxiety, sweating, and sudden feelings of terror.

[7] Librium, brand name for Chlordiazepoxide, is a Schedule IV controlled substance pursuant to Health and Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and

(continued...)

for two days, and then to taper the dose each day until complete. Respondent further recommended the patient attend therapy groups at Kaiser and in the community, to have regular follow-up with a therapist at Kaiser, and to return or go to the emergency department if his symptoms worsen despite medication.

16. Respondent spent approximately thirty (30) minutes with Patient A on or about April 17, 2012, and made no effort to contact the patient at any time after that initial visit. The chart notes for this visit do not include a review of systems, or detailed information regarding the patient's prior alcohol or substance abuse history, prior detoxification treatment, prior psychiatric treatment, or prior substance abuse treatment. The patient chart contains no lab results, but the chart note for this visit indicates, "Labs ordered – not back yet," and, "labs were reviewed." The chart notes fail to include any discussion with the patient regarding inpatient versus outpatient detoxification treatment, a detailed suicide risk assessment, or instructions to discontinue use of Xanax during the detoxification period.

17. On or about April 24, 2012, Patient A's wife spoke with Dr. R.A. by phone and expressed concern that Patient A "may not make it if someone doesn't put him somewhere safe."

18. On or about April 24, 2012, Patient A was found dead in his hotel room. The manner of death was determined to be an intentional overdose of alcohol, Quetiapine, Chlordiazepoxide, and Alprazolam.

19. Respondent committed gross negligence in his care and treatment of Patient A, which included, but was not limited to, failing to adequately manage the patient's alcohol detoxification and subsequent follow-up care.

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(...continued)
Professions Code section 4022. It is a sedative in the benzodiazepine class of drugs, used to treat alcohol withdrawal symptoms.

SECOND CAUSE FOR DISCIPLINE

(Failure to Maintain Adequate and Accurate Records)

20. Respondent has further subjected his Physician's and Surgeon's Certificate No. G17051 to disciplinary action under sections 2227 and 2234, as defined by section 2266, of the Code, in that Respondent failed to maintain adequate and accurate records regarding his care and treatment of Patient A, as more particularly alleged in paragraphs 7 through 19, above, which are hereby incorporated by reference and realleged as if fully set forth herein.

PRAYER

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

1. Revoking or suspending Physician's and Surgeon's Certificate No. G17051, issued to Respondent, Leonard M. Rodin, M.D.;

2. Revoking, suspending or denying approval of Respondent, Leonard M. Rodin, M.D.'s authority to supervise physician assistants and advanced practice nurses;

3. Ordering Respondent, Leonard M. Rodin, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and

4. Taking such other and further action as deemed necessary and proper.

DATED: March 14, 2018

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

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