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

In the Matter of the Accusation Against:	) ) )
Jasna Mrdjen, M.D.	) Case No. 03-2011-216361
Physician's and Surgeon's	)
Certificate No. A 31833	)
	)
Respondent	)
	_)

## **DECISION**

The attached Stipulated Surrender of License and 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 December 4, 2012

IT IS SO ORDERED November 27, 2012.

MEDICAL BOARD OF CALIFORNIA

By: \_\_\_\_\_\_

Linda K. Whitney

**Executive Director** 

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10	STATE OF C	CALIFORNIA	
11	In the Matter of the Accusation Against:	Case No. 03-2011-216361	
12	JASNA MRDJEN, M.D.		
13 14	3414 Stacey Court Mountain View, CA 94040	STIPULATED SURRENDER OF LICENSE AND ORDER	
15	Physician's and Surgeon's Certificate No. A 31833	LICENSE AND ORDER	
16	Respondent.		
17	IT IS HEREBY STIPULATED AND AGI	REED by and between the parties to the above-	
18	entitled proceedings that the following matters a	re true:	
19	PAR	CTIES	
20	1. Linda K. Whitney (Complainant) is	the Executive Director of the Medical Board of	
21	California. She brought this action solely in her official capacity and is represented in this matter		
22	by Kamala D. Harris, Attorney General of the State of California, by Kerry Weisel, Deputy		
23	Attorney General.		
24	2. Respondent Jasna Mrdjen, M.D. (Re	espondent) is represented in this proceeding by	
25	attorney Thomas E. Still of the Hinshaw Law Firm, 12901 Saratoga Avenue, Saratoga, CA		
26	95070.		
27		Board of California issued Physician's and	
28	Surgeon's Certificate No. A 31833 to Jasna Mrdjen. The physician's and surgeon's certificate w		
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STIPULATED SETTLEMENT (03-2011-216361)

in full force and effect at all times relevant to the charges brought herein and will expire on January 31, 2014, unless renewed.

# **JURISDICTION**

An Accusation in Case No. 03-2011-216361 was filed before the Medical Board of 4. California (Board), Department of Consumer Affairs, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on October 9, 2012. A copy of the Accusation in Case No. 03-2011-216361 is attached as exhibit A and incorporated in this stipulation by reference.

## ADVISEMENT AND WAIVERS

- Respondent has carefully read and understands the charges and allegations in the 5. Accusation in Case No. 03-2011-216361. Respondent has also carefully read and fully discussed with counsel and understands the effects of this Stipulated Surrender of License and Order.
- Respondent is fully aware of her legal rights in this matter, including the right to a 6. hearing on the charges and allegations in the Accusation; the right to be represented by counsel at her own expense; the right to confront and cross-examine the witnesses against her; the right to present evidence and to testify on her 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.
- Respondent voluntarily, knowingly, and intelligently waives and gives up each and 7. every right set forth above.

## **CULPABILITY**

For purposes of the settlement of the action pending against her in Case No. 03-2011-8. 216361 and any potential or future charges and allegations in relation to the matters currently under investigation in Case No. 03-2011-221483 and Case No. 03-2011-222830, Respondent does not contest that, at an administrative hearing, Complainant could establish a prima facie case with respect to the charges and allegations contained in the Accusation in Case No. 03-2011216361. To avoid the expense and uncertainty of further proceedings, Respondent hereby gives up her right to contest those charges.

9. Respondent understands that by signing this stipulation she is enabling the Board to issue an order accepting the surrender of her physician's and surgeon's certificate without further process.

#### RESERVATION

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

#### CONTINGENCY

- 11. Pursuant to section 2224(b) of the Business and Professions Code, 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. By signing the stipulation, Respondent understands and agrees that she may not withdraw her 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 Surrender of License and 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.
- 12. The parties understand and agree that facsimile copies of this Stipulated Surrender of License and Order, including facsimile signatures, shall have the same force and effect as the originals.
- 13. 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 Order:

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## **ORDER**

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 31833 issued to Respondent Jasna Mrdjen, M.D. is surrendered and accepted by the Medical Board of California.

- Respondent shall lose all rights and privileges as a physician and surgeon in 14. California as of the effective date of the Board's Decision and Order.
- Respondent shall cause to be delivered to the Board her pocket license and, if one was issued, her wall certificate on or before the effective date of the Decision and Order.
- 16. If Respondent ever files an application for licensure or a petition for reinstatement in the State of California, the Board shall treat it as a petition for reinstatement and Respondent must comply with all the laws, regulations, and procedures for reinstatement of a revoked license in effect at the time the petition is filed. All of the charges and allegations contained in the Accusation in Case No. 03-2011-216361 shall be deemed to be true, correct and admitted by Respondent when the Board determines whether to grant or deny the petition. Information gathered in connection with the investigation resulting in this Accusation and in connection with currently pending investigations in Case No. 03-2012-221483 and Case No. 03-2012- 222830 may be considered by the Board in determining whether, and on what terms, to grant a petition for reinstatement and Respondent hereby waives any time-based defense, including, but not limited to, the equitable defense of laches, she might otherwise have.

#### **ACCEPTANCE**

I have carefully read the above Stipulated Surrender of License and Order and have fully discussed it with my attorney, Thomas E. Still. I understand the stipulation and the effect it will have on my physician's and surgeon's certificate. I enter into this Stipulated Surrender of License and Order voluntarily, knowingly, and intelligently and agree to be bound by the Decision and Order of the Medical Board of California.

11-13-2012

JASNA MRDJEN, M.D.

Respondent

1	I have read and fully discussed with Respondent Jasna Mrdjen, M.D. the terms and	
2	conditions and other matters contained in the above Stipulated Surrender of License and Order. I	
3	approve its form and content.	
4	DATED: 11-13-2012 17 17 18	
5	THOMAS E. STILL Attorney for Respondent	
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12	ENDORSEMENT	
13	The foregoing Stipulated Surrender of License and Order is hereby respectfully submitted	
14	for consideration by the Medical Board of California of the Department of Consumer Affairs.	
15	Dated: Nevember 15, 2012 Respectfully Submitted,	
16	KAMALA D. HARRIS	
17	Attorney General of California JOSE R. GUERRERO	
18	Supervising Deputy Attorney General	
19	18 NR	
20	Kerry Weisel Deputy Attorney General Attorneys for Complainant	
21	Attorneys for Complainant	
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23 24	Exhibit A
<ul><li>23</li><li>24</li><li>25</li></ul>	Exhibit A Accusation, Case No. 03-2011-216361
<ul><li>23</li><li>24</li><li>25</li><li>26</li></ul>	
<ul><li>23</li><li>24</li><li>25</li></ul>	

Decision, Case No. 03-2011-216361

FILED STATE OF CALIFORNIA MEDICAL BOARD OF CALIFORNIA 1 KAMALA D. HARRIS SACRAMENTO Deta Attorney General of California 2 JOSE R. GUERRERO Supervising Deputy Attorney General 3 KERRY WEISEL Deputy Attorney General 4 State Bar No. 127522 455 Golden Gate Avenue, Suite 11000 5 San Francisco, CA 94102-7004 Telephone: (415) 703-5590 6 Facsimile: (415) 703-5480 7 Attorneys for Complainant 8 BEFORE THE 9 MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS 10 STATE OF CALIFORNIA 11 In the Matter of the Accusation Against: Case No. 03-2011-216361 12 JASNA MRDJEN, M.D. 13 3414 Stacey Court Mountain View, CA 94040 ACCUSATION 14 Physician's and Surgeon's Certificate No. A 31833 15 Respondent. 16 17 Complainant alleges: 18 PARTIES 19 1. Linda K. Whitney ("Complainant") brings this Accusation solely in her official 20 capacity as the Executive Director of the Medical Board of California. 21 2. On December 5, 1977, the Medical Board of California issued Physician's and 22 Surgeon's Certificate No. A 31833 to Jasna Mrdjen. The physician's and surgeon's certificate was 23 in full force and effect at all times relevant to the charges brought herein and will expire on 24 January 31, 2014, unless renewed. 25 **JURISDICTION** 26 3. This Accusation is brought before the Medical Board of California, under the 27 authority of the following laws. All section references are to the Business and Professions Code 28 unless otherwise indicated. 1

- 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, suspended for a period not to exceed one year, placed on probation and required to pay the costs of probation monitoring, or such other action taken in relation to discipline as the Board deems proper.
- 5. Section 2234 of the Code provides in pertinent part that 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:
  - 6. "(a) Violating . . . any provision of this chapter.
    - "(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.
      - ...,
- 7. Section 725 of the Code provides, in part, that repeated acts of clearly excessive prescribing or administering of drugs or treatment as determined by the standard of the community of licensees is unprofessional conduct for a physician and surgeon.
- 8. Section 2266 of the Code provides that "[t]he failure of a physician and surgeon to maintain adequate and accurate records relating to the provision of services to their patients

constitutes unprofessional conduct."

#### 9. DRUGS

- 10. Carisoprodol. Carisoprodol, also known by the trade name Soma, is a muscle-relaxant and sedative. It is a dangerous drug as defined in section 4022. Since the effects of carisoprodol and alcohol or carisoprodol and other central nervous system depressants or psychotropic drugs may be additive, appropriate caution should be exercised with patients who take more than one of these agents simultaneously.
- 11. Clonazepam. Clonazepam, also known by the trade name Klonopin, is an anticonvulsant of the benzodiazepine class of drugs. It is a dangerous drug as defined in section 4022 and a schedule IV controlled substance as defined by section 11057 of the Health and Safety Code: It produces central nervous system depression and should be used with caution with other central nervous system depressant drugs. Like other benzodiazapines, it can produce psychological and physical dependence. Withdrawal symptoms similar to those noted with barbiturates and alcohol have been noted upon abrupt discontinuance of Klonopin.
- 12. Cyclobenzaprine. Cyclobenzaprine HCl, also known by the trade name Flexeril, is a muscle-relaxant. It is a dangerous drug as defined in section 4022. Flexeril may enhance the effects of alcohol, barbiturates, and other CNS depressants. Cyclobenzaprine is closely related to tricyclic antidepressants such as amitriptyline and imipramine and may, like the tricyclic antidepressants, produce arrhythmias, sinus tachycardia, and prolongation of the conduction time leading to myocardial infarction and stroke.
- 13. Diazepam. Diazepam, also known by the trade name Valium, is a benzodiazepine. It is a psychotropic drug for the management of anxiety disorders or for the short-term relief of the symptoms of anxiety. It is a dangerous drug as defined in section 4022 and a Schedule IV controlled substance as defined by section 11057 of the Health and Safety Code. Diazepam can produce psychological and physical dependence and it should be prescribed with caution particularly to addiction-prone individuals (such as drug addicts and alcoholics) because of the predisposition of such patients to habituation and dependence. Since diazepam has a central nervous system depressant effect, patients should be advised against the simultaneous ingestion of

alcohol and other CNS-depressant drugs during diazepam therapy.

- 14. Hydrocodone. Hydrocodone bitartrate w/APAP, also known by trade names such as Norco, Vicodin, or Lortab, is a combination of acetaminophen and hydrocodone, a semisynthetic narcotic analgesic. Hydrocodone is a dangerous drug as defined in section 4022 and a Schedule III controlled substance and narcotic as defined by section 11056, subdivision (e) of the Health and Safety Code. Repeated administration of hydrocodone over a course of several weeks may result in psychic and physical dependence. Patients using other central nervous system (CNS) depressants concomitantly with hydrocodone may exhibit an additive CNS depression. When combined therapy is contemplated, the dose of one or both agents should be reduced. The maximum 24 hour dosage of acetaminophen should not exceed 4000 mg. At high levels, acetaminophen can cause liver toxicity and even death.
- 15. Norco. See description of Norco under hydrocodone with APAP, above. Norco 10/325 reflects that each pill contains 10 mg of hydrocodone bitartrate and 325 mg of acetaminophen.
- derived from the opium alkaloid, thebaine. It is a pure agonist opioid whose principal therapeutic action is analgesia. Other therapeutic effects of oxycodone include anxiolysis, euphoria, and feelings of relaxation. Oxycodone is a dangerous drug as defined in section 4022 and a schedule II controlled substance and narcotic as defined by section 11055, subdivision (b)(1) of the Health and Safety Code. Oxycodone can produce drug dependence of the morphine type and, therefore, has the potential for being abused. Oxycodone should be used with caution and started in a reduced dosage in patients who are concurrently receiving other central nervous system depressants including sedatives or hypnotics, general anesthetics, phenothiazines, other tranquilizers, and alcohol. Interactive effects resulting in a respiratory depression, hypotension, profound sedation, or coma may result if these drugs are taken in combination with the usual doses of oxycodone.

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#### **FACTS**

17. At all times relevant to this matter, Dr. Mrdjen was licensed and practicing medicine in California.

# PATIENT P-1<sup>1</sup>

- 18. Dr. Mrdjen first saw Patient P-1, a 28 year old man, on April 11, 2011. The medical records did not include a physical examination and the described history is difficult to interpret. Dr. Mrdjen gave a diagnosis of acute back strain, wrist strain, status post old poorly healed fracture of the wrist, and right hand weakness. The only treatment plan was to take Norco 10/324 every four to six hours as needed. The record did not include the number of tablets prescribed.
- 19. There is no evidence in the medical records that Dr. Mrdjen discussed the risks and benefits of the use of controlled substances and other treatment modalities with P-1.
  - 20. P-1 saw Dr. Mrdjen approximately once a month for the next five months.
- 21. P-1's medical records for May 23, 2011 note that P-1 experienced nausea with Norco—hydrocodone with acetarninophen—so the medication was discontinued. Dr. Mrdjen nonetheless prescribed 180 tablets of hydrocodone for P-1 on six separate occasions over the following five months without any explanation for its continued use.
- 22. Dr. Mrdjen prescribed 90 tablets of clonazepam for P-1 on at least four occasions without indicating in his chart that the medication was being prescribed and without rationale. Neither did she explain why she had P-1 using two short acting opioids simultaneously, oxycodone and hydrocodone, two muscle relaxants simultaneously, Flexeril and carisoprodol, and two benzodiazepines simultaneously, clonazepam and diazepam. Frequently, medications prescribed by Dr. Mrdjen for P-1 were not documented in the chart notes. The only medication listed for August 9, 2011 was oxycodone yet she also prescribed cyclobenzaprine, carisoprodol, clonazepam, diazepam, and hydrocodone as well. When Dr. Mrdjen did document a medication and the amount prescribed, it was often inconsistent with the amount actually prescribed. While

<sup>&</sup>lt;sup>1</sup> The patient is designated in this document as Patient P-1 to protect his family's privacy. Respondent knows the name of the patient and can confirm his identity through discovery.

the records for August 9th reflect that Dr. Mrdjen prescribed oxycodone to be taken every six hours, the actual prescription was for twice that many tablets. Dr. Mrdjen did not maintain a complete set of copies of the prescriptions she wrote for P-1. When Dr. Mrdjen increased the amount of oxycodone she prescribed monthly for P-1 from 180 tablets to 240 tablets, she did not document the increase or the reason for the increase in P-1's chart.

- 23. P-1's records reflect that his back pain resolved after his second visit on May 23, 2011. There was no explanation for the continued use of two high dose opioids after the lumbar strain resolved. Dr. Mrdjen's records for the most part did not detail P-1's response to the treatment provided.
- 24. P-1 saw Dr. Mrdjen on September 1, 2011. He failed to show up for his appointment on October 25, 2011 yet he picked up three prescriptions for hydrocodone in September, one in October, and one in November for a total of 900 tablets. He also picked up two prescriptions for oxycodone in September and one in December for a total of 660 tablets.
- 25. On November 11, 2011, P-1 entered the Betty Ford Center treatment program. He was released on January 2, 2012.
- 26. On January 3, 2012, the day after his release from the Betty Ford program, P-1 visited Dr. Mrdjen for the last time. He had failed to show up for his last scheduled appointment in October and hadn't seen Dr. Mrdjen for four months. On January 3rd, he filled prescriptions from Dr. Mrdjen for oxycodone, hydrocodone, diazepam, clonazepam, carisoprodol, and cyclobenzaprine. There was no discussion in the record of why Dr. Mrdjen was prescribing these medications. Dr. Mrdjen noted in her chart notes that P-1 was using medications sparingly. Although she said he was using only 40 mg of oxycodone a day, she prescribed 240 tablets of 30 mg oxycodone for him, an average of 240 mg of oxycodone a day. She included no rationale in her chart notes for prescribing six times the amount of oxycodone she said P-1 was taking.

### FIRST CAUSE FOR DISCIPLINE

(Gross Negligence; Excessive Prescribing)

27. Respondent's license is subject to disciplinary action for unprofessional conduct in violation of section 2234, subdivisions (a) (violating provisions of this chapter) and (b) (gross

negligence), and section 725 (excessive prescribing) in that she prescribed large quantities of opioid medications and increased the amounts of the medications prescribed without documenting a rationale; prescribed opioid medications without requiring Patient P-1 to keep regular appointments; prescribed two short-acting opioids simultaneously, two benzodiazepines simultaneously, and two muscle relaxants simultaneously without documenting a rationale.

#### SECOND CAUSE FOR DISCIPLINE

(Gross Negligence; Inadequate Documentation)

28. Respondent's license is subject to disciplinary action for unprofessional conduct in violation of section 2234, subdivisions (a) (violating provisions of this chapter) and (b) (gross negligence), and section 2266 (inadequate documentation) in that she failed to document having discussed with Patient P-1 the risks and benefits of and alternatives to treatment with high doses of opioid medication and obtaining informed consent from him.

## THIRD CAUSE FOR DISCIPLINE

(Repeated Negligent Acts; Inadequate Documentation)

29. Respondent's license is subject to disciplinary action for unprofessional conduct in violation of section 2234, subdivisions (a) (violating provisions of this chapter) and (c) (repeated negligent acts), and section 2266 (inadequate documentation) in that she engaged in the conduct alleged in the First and Second Causes for Discipline and she failed to document periodic review of Patient P-1's response to treatment; failed to document a physical examination for Patient P-1's initial evaluation; consistently failed to document a treatment plan; consistently failed to accurately document the medications she prescribed for Patient P-1; failed to maintain copies of Patient P-1's prescriptions with his medical records; and consistently failed to explain the rationale behind her treatment of Patient P-1.

#### PRAYER

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

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