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FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO APR 24 2019
BY ANALYST

BEFORE THE
PHYSICIAN ASSISTANT BOARD
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against: **USMAAN MOHAMMAD ARSHAD, P.A.** 530 Mondale St. Corona, CA 92879-5888 **Physician Assistant** **License No. PA51682,** Respondent.	Case No. 950-2018-001741 **ACCUSATION**

Complainant alleges:

PARTIES

1. Maureen L. Forsyth (Complainant) brings this Accusation solely in her official capacity as the Executive Officer of the Physician Assistant Board, Department of Consumer Affairs.

2. On or about June 20, 2014, the Physician Assistant Board issued Physician Assistant License Number PA51682 to Usmaan Mohammad Arshad, P.A. (Respondent). The Physician Assistant License was in full force and effect at all times relevant to the charges brought herein and will expire on September 30, 2019, unless renewed.

JURISDICTION

3. This Accusation is brought before the Physician Assistant Board (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 3527 of the Code states, in pertinent part:

"(a) The board may order the denial of an application for, or the issuance subject to terms and conditions of, or the suspension or revocation of, or the imposition of probationary conditions upon a physician assistant license after a hearing as required in Section 3528 for unprofessional conduct which includes, but is not limited to, a violation of this chapter, a violation of the Medical Practice Act, or a violation of the regulations adopted by the board or the Medical Board of California.

"(b) The board may order the denial of an application for, or the suspension or revocation of, or the imposition of probationary conditions upon, an approved program after a hearing as required in Section 3528 for a violation of this chapter or the regulations adopted pursuant thereto.

"(c) The Medical Board of California may order the denial of an application for, or the issuance subject to terms and conditions of, or the suspension or revocation of, or the imposition of probationary conditions upon, an approval to supervise a physician assistant, after a hearing as required in Section 3528, for unprofessional conduct, which includes, but is not limited to, a violation of this chapter, a violation of the Medical Practice Act, or a violation of the regulations adopted by the board or the Medical Board of California.

"...

"(f) The board may order the licensee to pay the costs of monitoring the probationary conditions imposed on the license.

"(g) The expiration, cancellation, forfeiture, or suspension of a physician assistant license by operation of law or by order or decision of the board or a court of law, the placement of a license on a retired status, or the voluntary surrender of a license by a licensee shall not deprive the board of jurisdiction to commence or proceed with any investigation of, or action or disciplinary proceeding against, the licensee or to render a decision suspending or revoking the license."

5. Section 3528 of the Code states:

"Any proceedings involving the denial, suspension or revocation of the application for licensure or the license of a physician assistant, the application for approval or the approval of a supervising physician, or the application for approval or the approval of an approved program under this chapter shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code."

MEDICAL PRACTICE ACT

6. Section 2234 of the Code, states:

"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.

"(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.

"(d) Incompetence.

"(e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon.

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

"(g) The practice of medicine from this state into another state or country without meeting the legal requirements of that state or country for the practice of medicine. Section 2314 shall not apply to this subdivision. This subdivision shall become operative upon the implementation of the proposed registration program described in Section 2052.5.

"(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and participate in an interview by the board. This subdivision shall only apply to a certificate holder who is the subject of an investigation by the board."

7. Section 2238 of the Code states:

"A violation of any federal statute or federal regulation or any of the statutes or regulations of this state regulating dangerous drugs or controlled substances constitutes unprofessional conduct."

8. Section 2239, subdivision (a) of the Code states, in pertinent part:

"(a) The use or prescribing for or administering to himself or herself, of any controlled substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to any other person or to the public, or to the extent that such use impairs the ability of the licensee to practice medicine safely or more than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section, or any combination thereof, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of such unprofessional conduct."

9. 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."

HEALTH AND SAFETY CODE

10. Section 11153, subdivision (a), of the Health and Safety Code states:

"(a) A prescription for a controlled substance shall only be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his or her professional practice. The responsibility for the proper prescribing and dispensing of controlled substances is upon the prescribing practitioner, but a corresponding responsibility rests with the pharmacist who fills the prescription. Except as authorized by this division, the following are not legal prescriptions: (1) an order purporting to be a prescription which is issued not in the usual course of professional treatment or in legitimate and authorized research; or (2) an order for an addict or habitual user of controlled substances, which is issued not in the course of professional treatment or as part of an authorized narcotic treatment program, for the purpose of providing the user with controlled substances, sufficient to keep him or her comfortable by maintaining customary use."

11. Section 11157 of the Health and Safety Code states:

"No person shall issue a prescription that is false or fictitious in any respect."

12. Section 11170 of the Health and Safety Code states:

"No person shall prescribe, administer, or furnish a controlled substance for himself."

13. Section 11171 of the Health and Safety Code states:

"No person shall prescribe, administer, or furnish a controlled substance except under the conditions and in the manner provided by this division."

14. Section 11173 of the Health and Safety Code states:

"(a) No person shall obtain or attempt to obtain controlled substances, or procure or attempt to procure the administration of or prescription for controlled

substances, (1) by fraud, deceit, misrepresentation , or subterfuge; or (2) by the concealment of a material fact.

"(b) No person shall make a false statement in any prescription, order, report, or record, required by this division.

"(c) No person shall, for the purpose of obtaining controlled substances, falsely assume the title of, or represent himself to be, a manufacturer, wholesaler, pharmacist, physician, dentist, veterinarian, registered nurse, physician's assistant, or other authorized person.

"(d) No person shall affix any false or forged label to a package or receptacle containing controlled substances."

15. Section 11174 of the Health and Safety Code states:

"No person shall, in connection with the prescribing, furnishing, administering, or dispensing of a controlled substance, give a false name or false address."

16. Section 11175 of the Health and Safety Code states:

"No person shall obtain or possess a prescription that does not comply with this division, nor shall any person obtain a controlled substance by means of a prescription which does not comply with this division or possess a controlled substance obtained by such a prescription."

17. Section 11180 of the Health and Safety Code states:

"No person shall obtain or possess a controlled substance obtained by a prescription that does not comply with this division."

FEDERAL LAW

18. Section 1306.04 of Title 21 of the Code of Federal Regulations sets forth the requirements for a valid prescription. It provides that for a "prescription for a controlled substance to be effective [it] must be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his professional practice. The responsibility for the proper prescribing and dispensing of controlled substances is upon the prescribing practitioner, but a corresponding responsibility rests with the pharmacist who fills the prescription."

COST RECOVERY

19. Section 125.3 of the Code states, in pertinent part, that the Board may request the administrative law judge to direct a licentiate found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case.

DEFINITIONS

20. The following terms shall have the following definitions herein:

A. Adderall® is a brand name of a combination of two stimulant drugs, amphetamine and dextroamphetamine, and is defined in Health and Safety Code section 11055, subdivision (d)(1), as a Schedule II controlled substance. It is generally used to treat attention deficit hyperactivity disorder (ADHD), but also has a high potential for abuse. It is a dangerous drug as defined in Business and Professions Code section 4022.

B. Benzodiazepines are a class of drugs that produce central nervous system (CNS) depression. They are used therapeutically to produce sedation, induce sleep, relieve anxiety and muscle spasms, and to prevent seizures. They are most commonly used to treat insomnia and anxiety. There is the potential for dependence on and abuse of benzodiazepines particularly by individuals with a history of multi-substance abuse. Benzodiazepines can be taken in overdoses and can cause dangerous deep unconsciousness. When combined with other central nervous system depressants such as alcoholic drinks and opioids, the potential for toxicity and fatal overdose increases. Benzodiazepines are commonly misused and taken in combination with other drugs of abuse. Alprazolam (Xanax®), lorazepam (Ativan®), clonazepam (Klonopin®), diazepam (Valium®), and temazepam (Restoril™) are among the most prescribed, as well as the most frequently encountered benzodiazepines on the illicit market.

C. Clonazepam is a benzodiazepine-based sedative. It is generally used to control seizures and panic disorder. It is also sold under the brand name Klonopin®. It is a Schedule IV controlled substance pursuant to Health and Safety Code section 11057, subdivision (d)(7), and a dangerous drug as defined in Business and Professions Code section 4022.

D. CURES is the California Utilization, Review and Evaluation System for the

electronic monitoring of the prescribing and dispensing of Schedule II, III and IV controlled substances to patients in California pursuant to Health and Safety Code section 11165. The CURES database captures data from Schedule II, III and IV controlled substance prescriptions filled as submitted by pharmacies, hospitals, and dispensing physicians.

E. Focalin XR® is a brand name for dexmethylphenidate is a potent central nervous system (CNS) stimulant used in the treatment of attention deficit hyperactivity disorder (ADHD) and narcolepsy. It is a Schedule II controlled substance pursuant to Health and Safety Code section 11055, subdivision (d)(1), and a dangerous drug as defined in Business and Professions Code section 4022.

F. Librium® is brand name for chlordiazepoxide which is a sedative and hypnotic medication of the benzodiazepine class; it is used to treat anxiety, insomnia and withdrawal symptoms from alcohol and/or drug abuse. It is a dangerous drug as defined in Business and Professions code section 4022, and a schedule IV controlled substance and narcotic as defined by Health and Safety Code section 11057, subdivision (d)(5). Chlordiazepoxide is a drug that is very frequently involved in drug intoxication, including overdose. Chlordiazepoxide overdose is considered a medical emergency and, in general, requires the immediate attention of medical personnel.

G. Naltrexone is a medication primarily used to manage alcohol dependence and opioid dependence. It is sold under the brand names, Revia® and Vivitrol®. It is a dangerous drug as defined in Business and Professions code section 4022.

H. Tramadol is a synthetic pain medication used to treat moderate to moderately severe pain. The extended-release or long-acting tablets are used for chronic ongoing pain. Tramadol is sold under various brand names, including, Ultram®. It is a Schedule IV controlled substance pursuant to federal Controlled Substances Act, and a dangerous drug pursuant to Business and Professions Code section 4022.

I. Xanax® is a brand name for alprazolam which is a benzodiazepine drug used to treat anxiety disorders, panic disorders, and anxiety caused by depression. It is a dangerous drug as defined in Business and Professions code section 4022, and a schedule IV controlled substance

and narcotic as defined by Health and Safety Code section 11057, subdivision (d). It has a central nervous system depressant effect and patients should be cautioned about the simultaneous ingestions of alcohol and other CNS depressant drugs during treatment with alprazolam. Addiction prone individuals (such as drug addicts or alcoholics) should be under careful surveillance when receiving alprazolam because of the predisposition of such patients to habituation and dependence.

J. Vyvanse® is a brand name for lisdexamfetamine. It is a stimulant used as part of a treatment program to control symptoms of attention deficit hyperactivity disorder (ADHD; more difficulty focusing, controlling actions, and remaining still or quiet than other people who are the same age) in adults and children. It is a psychostimulant prodrug of the phenethylamine and amphetamine chemical classes. It is a Schedule II controlled substance pursuant to Health and Safety Code section 11055, subdivision (d)(1), and a dangerous drug as defined in Business and Professions Code section 4022.

FIRST CAUSE FOR DISCIPLINE

(Gross Negligence)

21. Respondent has subjected his Physician Assistant License to disciplinary action under Code sections 3527, 2227 and 2234, subdivision (b) in that he has committed gross negligence, as more particularly alleged hereinafter:

22. Respondent prescribed several dangerous drugs and controlled substances to a family member, Patient A,[1] from the same household on multiple occasions over an extended period of time, including, without limitation, Adderall®, Focalin XR®, Tramadol®, Librium®, Xanax® and clonazepam. In addition, he prescribed Adderall and clonazepam to another member of his extended family, in name only (INO) Patient B, but in fact, those drugs were diverted for use by a different family member, Patient A (the prescriptions were made in another name in order to circumvent controls by pharmacies).

23. Respondent prescribed the following drugs to Patient A on or about the following

[1] Letters are used to designate patients for privacy reasons.

dates in the following amounts:

Date	Drug Name	No.	Strength	Pharmacy
12/5/2015	Lorazepam	90	1 MG	Walgreens #05348
2/19/2016	Clonazepam	30	.5 MG	Rite Aid #5709
4/18/2016	Vyvanse	30	30 MG	Walgreens #05348
4/19/2016	Alprazolam	90	1 MG	CVS #10310
5/17/2016	Vyvanese	30	30 MG	Waterman Pharmacy
5/20/2016	Clonazepam	30	.5 MG	Walgreens #05348
6/14/2016	Vyvanse	30	30 MG	Walgreens #05348
6/25/2016	Alprazolam	90	1 MG	Walgreens #05348
6/27/2016	Dexmethylphenidate HCL	30	10 MG	Waterman Pharmacy
7/24/2016	Vyvanse	30	30 MG	Walgreens #05348
7/29/2016	Clonazepam	90	.5 MG	Walgreens #05348
8/8/2016	Amphetamine Salt Combo	30	10 MG	CVS #8894
8/14/2016	Tramadol HCL	90	50 MG	Walgreens #05348
9/3/2016	Dexmethylphenidate HCL	30	10 MG	Walgreens #05528
9/20/2016	Clonazepam	90	.5 MG	Walgreens #05348
9/30/2016	Amphetamine Salt Combo	30	10 MG	CVS #8894
11/9/2016	Amphetamine Salt Combo	30	30 MG	CVS #10310
11/9/2016	Clonazepam	90	.5 MG	CVS #10310
12/10/2016	Amphetamine Salt Combo	30	30 MG	CVS #10310
12/22/2016	Clonazepam	90	.5 MG	Walgreens #05348
1/8/2017	Amphetamine Salt Combo	30	30 MG	Walgreens #05348
1/28/2017	Clonazepam	30	1 MG	CVS #10310
2/4/2017	Clonazepam	90	.5 MG	Walgreens #05348
2/8/2017	Amphetamine Salt Combo	30	30 MG	Walgreens #05348
3/8/2017	Dextroamph Sacc ASP Dextroam S	30	30 MG	Rite Aid #6561
4/7/2017	Amphetamine Salt Combo	30	30 MG	Walgreens #05348
4/24/2017	Chlordiazepoxide HCL	90	25 MG	Rite Aid #6561
5/10/2017	Amphetamine Salt Combo	30	30 MG	Rite Aid #6561
6/11/2017	Amphetamine Salt Combo	30	30 MG	Walgreens #05348
7/11/2017	Amphetamine Salt Combo	30	30 MG	Walgreens #05348
8/3/2017	Chlordiazepoxide HCL	90	25 MG	Walgreens #05348
8/3/2017	Alprazolam	90	.5 MG	Walgreens #05348
8/11/2017	Amphetamine Salt Combo	30	30 MG	Walgreens #05348
11/18/2017	Clonazepam	90	.50	Walgreens #05348
11/23/2017	Amphetamine Salt Combo	30	30 MG	CVS #10310
12/31/2017	Clonazepam	90	.5 MG	CVS #10310
12/31/2017	Amphetamine Salt Combo	30	30 MG	CVS #9649
1/30/2018	Dextroamph Sacc ASP Dextroam	30	30 MG	Rite Aid 5703

Date	Drug Name	No.	Strength	Pharmacy
	S			
4/5/2018	Amphetamine Salt Combo	30	30 MG	Walgreens #05348

24. Respondent prescribed the following drugs to Patient B on or about the following dates in the following amounts:

Date	Drug Name	No.	Strength	Pharmacy
10/15/2016	Amphetamine Salt Combo	30	20 MG	Walgreens #07262
9/14/2017	Amphetamine Salt Combo	30	30 MG	CVS #10310
12/14/2017	Amphetamine Salt Combo	30	30 MG	Rite Aid #6561
1/14/2018	Amphetamine Salt Combo	30	30 MG	CVS #10310
1/17/2018	Clonazepam	90	.5 MG	Walgreens #05348
2/15/2018	Amphetamine Salt Combo	30	30 MG	CVS #10310
3/16/2018	Amphetamine Salt Combo	30	30 MG	Walgreens #05348

25. Medical records for Patient A in or around the period from March 2015 through in or around March 2016, indicated that Patient A had been diagnosed with Bipolar 2 disorder, Attention Deficit Hyperactivity Disorder (ADHD), combined type, Anxiety Disorder, and Binge Eating Disorder, a very complex set of diagnoses that imply a consultation with a psychiatrist. During this period, Respondent wrote multiple prescriptions for controlled substances to Patient A, including stimulants and benzodiazepines, as well as for antidepressants and other medications, for at least the period from in or around December 2015 through in or around January 2018.

26. On or about May 7, 2018, an investigator of the Department of Consumer Affairs ("Investigator") interviewed Respondent. During the interview, Respondent admitted to prescribing to Patient A and to INO Patient B. He also admitted to prescribing Adderall to Patient A because of Patient A's previous diagnosis of bulimia. Respondent expressed no clinical basis for prescribing stimulants to Patient A other than Patient A's alleged demands or requests that he refill Patient A's medication, including for early refills without a good reason. Further he admitted that when Patient A ran out of a prescription early, e.g., Adderall, he would prescribe the medication to INO Patient B in order for Patient A to get more medication. According to Respondent, INO Patient B was aware that this was occurring and had no objections to it. He also admitted to prescribing Naltrexone in Patient A's name but that he diverted this drug for self-

use. He further admitted that this conduct was unethical, a violation of his oath, and not consistent with the standard of care. Respondent also admitted to frequently picking up the controlled substances prescribed for Patient A himself. Respondent said he also prescribed Librium (a benzodiazeplne frequently used to reduce the symptoms of alcohol withdrawal) and naltrexone, an opioid antagonist, in Patient A's name, but they were actually for his personal use. INO Patient B stated that Respondent never evaluated INO Patient B and that the prescriptions written by Respondent for INO Patient B were not actually for INO Patient B's use.

27. Some of the prescriptions written contemporaneously by Respondent to Patient A or INO Patient B were in the same class of medications and closely related compounds and represented a potentially dangerous mix of similar stimulants. From in or around April 2016 through in or around September 2016, he prescribed three different stimulants: Vyvanse®, Focalin XR®, and Adderall®; prescriptions which were filled over the time of this case at four different pharmacies (Rite Aid, Walgreens, CVS and Waterman). While these three stimulants were being prescribed contemporaneously, Respondent also prescribed multiple types of benzodiazepines including clonazepam and alprazolam. At other times, Respondent also prescribed other benzodiazepines (Librium®, lorazepam) and other controlled substances (one instance of Tramadol®, 50 mg #90 on or about August 13, 2016). He also prescribed other psychoactive medications at various times to Patient A, including, without limitation, clonidine, trazodone, naltrexone and citalopram.

28. The majority of the medical records for Patient A of Respondent were notes for prescription refills only and lacked any documentation of an actual in-person patient visit. There are no descriptions of patient symptoms, history of present illness, past history, review of systems, physical exam or any basis documented for an assessment or plan other than a need for a prescription refill.

29. Almost all of the notes for Patient A signed by Respondent were entitled, prescription refill only, and did not indicate an in-person visit by any patient. However, Patient A did have a documented formal visit with Respondent on or about July 29, 2016.

30. Patient A was referred to psychiatry in or around December 2017. There is a Health

Care Coordination form, dated February 13, 2018 from Inland Psychiatric Medical Group to Dr. R. regarding Patient A, indicating that psychiatric consultation and management was begun by Inland Psychiatric at that time.

31. Patient A delivered a baby in or around September of 2017, indicating that she was pregnant for most of 2017; this was likely known to the patient by February or March of 2017. Respondent continued to prescribe Adderall throughout the pregnancy, including as late as August 10, 2017. Adderall is generally to be avoided in pregnancy in most circumstances, and patients taking Adderall during pregnancy are to be enrolled in the National Registry for Psychostimulants.

32. Patient A's baby was delivered with apnea of unknown cause and had to be placed in the neonatal intensive care unit; it is not known whether this was caused by maternal use of stimulants and/or neonatal stimulant withdrawal.

33. Respondent committed gross negligence when he prescribing multiple stimulants contemporaneously to Patient A, as further alleged herein.

34. Respondent committed gross negligence when he used INO Patient B's name to procure controlled substances for Patient A's personal use, as further alleged herein.

35. Respondent committed gross negligence when he prescribed controlled substances to Patients A and B, without obtaining and/or performing any history, exam, or visit (and, when he prescribed controlled substances, including Adderall, to INO Patient B), as further alleged herein.

36. Respondent committed gross negligence when he treated Patient A with multiple controlled substances for a complicated psychiatric condition, as further alleged herein.

37. Respondent committed gross negligence when he prescribed Adderall throughout Patient A's pregnancy without specialty input, as further alleged herein.

38. Respondent committed gross negligence when he prescribed controlled substances to another person to be used by himself, as further alleged herein.

39. Respondent committed gross negligence in carrying out all of the activities described herein, without patient-specific approval or, in lieu of patient-specific approval an agreed upon practice protocol covering these types of cases signed by his supervising physician.

SECOND CAUSE FOR DISCIPLINE

(Repeated Negligent Acts)

40. Respondent has further subjected his Physician Assistant License to disciplinary action under Code sections 3527, 2227 and 2234, subdivision (c), in that he has committed repeated negligent acts, as more particularly alleged hereinafter:

41. The allegations of the First Cause for Discipline are incorporated herein by reference as if fully set forth and each of the allegations of gross negligence is also an allegation of negligence.

42. Respondent committed negligence when he prescribed stimulant medications to Patient A who had an eating disorder negligence, as further alleged herein.

43. Respondent committed negligence by not documenting any patient symptoms, functional status, and response to prescribed medications while refilling for many months multiple controlled substances to Patient A, as further alleged herein.

44. Respondent committed negligence when he continued to prescribe combinations of stimulants and benzodiazepines to a complicated psychiatric patient, Patient A, without adequate supervision by a physician or ongoing specialty physician input, as further alleged herein.

THIRD CAUSE FOR DISCIPLINE

(Failure to Maintain Adequate and/or Accurate Record Keeping)

45. Respondent is subject to disciplinary action under section 2266 of the Code in that Respondent failed to maintain adequate and/or accurate record keeping, as more particularly alleged hereinafter:

46. The allegations of the First and Second Causes for Discipline are incorporated herein by reference as if fully set forth.

FOURTH CAUSE FOR DISCIPLINE

(Violation of a Drug Laws)

47. Respondent has further subjected his Physician Assistant License to disciplinary action under sections 3527, 2227, 2234, 2238 of the Code and sections 11153, subdivision (a), 11157, 11170, 11171, 11173, 11174, 11175, 11180 of the Health and Safety Code and section

1306.04 of Title 21 of the Code of Federal Regulations, in that he has violated federal and state drug laws. The circumstances are as follows:

48. The allegations of the First, Second and Third Causes for Discipline are incorporated herein by reference as if fully set forth.

FIFTH CAUSE FOR DISCIPLINE

(Self Prescribing of Controlled Substance)

49. Respondent is subject to disciplinary action under section 2239 of the Code and sections 11170 of the Health and Safety Code in that Respondent prescribed controlled substances to himself. The circumstances are as follows:

50. The allegations of the First, Second, Third and Fourth Causes for Discipline are incorporated herein by reference as if fully set forth.

SIXTH CAUSE FOR DISCIPLINE

(General Unprofessional Conduct)

51. Respondent is subject to disciplinary action under sections 3527 and 2234 of the Code, generally, in that he committed unprofessional conduct. The circumstances are as follows:

52. The allegations of the First, Second, Third, Fourth and Fifth Causes for Discipline are incorporated herein by reference as if fully set forth.

DISCIPLINARY CONSIDERATIONS

53. In a disciplinary action entitled, *In the Matter of the Accusation Against Usmaan Mohammad Arshad, M.D.*, Case No. 950-2016-001011, the Board issued a Decision, effective March 1, 2019, placing Respondent's Physician Assistant License on probation for ten (10) years with terms and conditions, effective March 1, 2019, in connection with, inter alia, allegations of having suffered a conviction of a crime substantially related to the qualifications, functions or duties of a physician assistant (namely driving under the influence of alcohol); use of alcohol to an extent dangerous or injurious to himself, others, or the public; and the self use of drugs. The Decision is final and incorporated herein by reference.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,

and that following the hearing, the Physician Assistant Board issue a decision:

1. Revoking or suspending Physician Assistant License Number PA51682, issued to respondent Usmaan Mohammad Arshad, P.A.;

2. Ordering respondent Usmaan Mohammad Arshad, P.A. to pay the Physician Assistant Board the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3; and,

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

DATED: April 24, 2019

MAUREEN L. FORSYTH
Executive Officer
Physician Assistant Board
Department of Consumer Affairs
State of California
Complainant

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