

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

**In the Matter of the Accusation** )  
**Against:** )  
 )  
 )  
**Hang Nguyen Claus, M.D.** )  
 )  
**Physician's and Surgeon's** )  
**Certificate No. A 119725** )  
 )  
**Respondent** )  
\_\_\_\_\_ )

**Case No. 800-2016-026280**

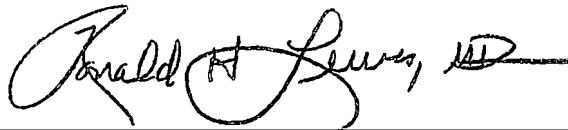
**DECISION**

**The attached Stipulated Settlement and Disciplinary 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 March 12, 2020.**

**IT IS SO ORDERED: February 11, 2020.**

**MEDICAL BOARD OF CALIFORNIA**



\_\_\_\_\_  
**Ronald H. Lewis, M.D., Chair  
Panel A**

1 XAVIER BECERRA  
Attorney General of California  
2 STEVEN D. MUNI  
Supervising Deputy Attorney General  
3 MEGAN R. O'CARROLL  
Deputy Attorney General  
4 State Bar No. 215479  
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5 P.O. Box 944255  
Sacramento, CA 94244-2550  
6 Telephone: (916) 210-7543  
Facsimile: (916) 327-2247  
7 *Attorneys for Complainant*

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11 **BEFORE THE**  
**MEDICAL BOARD OF CALIFORNIA**  
12 **DEPARTMENT OF CONSUMER AFFAIRS**  
13 **STATE OF CALIFORNIA**

14 In the Matter of the Accusation Against:  
15 **HANG NGUYEN CLAUS, M.D.**  
16 **1 Quality Drive**  
**Vacaville, CA 95688**  
17 **Physician's and Surgeon's Certificate No. A**  
**119725**

18 Respondent.  
19

Case No. 800-2016-026280

OAH No. 2019011130

**STIPULATED SETTLEMENT AND  
DISCIPLINARY ORDER**

20  
21 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-  
22 entitled proceedings that the following matters are true:

23 **PARTIES**

24 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board  
25 of California (Board). She brought this action solely in her official capacity and is represented in  
26 this matter by Xavier Becerra, Attorney General of the State of California, by Megan R.  
27 O'Carroll, Deputy Attorney General.

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1 **CULPABILITY**

2 9. Respondent understands and agrees that the charges and allegations in Accusation  
3 No. 800-2016-026280, if proven at a hearing, constitute cause for imposing discipline upon her  
4 Physician's and Surgeon's Certificate.

5 10. For the purpose of resolving the Accusation without the expense and uncertainty of  
6 further proceedings, Respondent agrees that, at a hearing, Complainant could establish a factual  
7 basis for the charges in the Accusation, and that Respondent hereby gives up her right to contest  
8 those charges.

9 11. Respondent agrees that if she ever petitions for early termination or modification of  
10 probation, or if an accusation and/or petition to revoke probation is filed against her, before the  
11 Medical Board of California, all of the charges and allegations contained in Accusation No. 800-  
12 2016-026280 shall be deemed true, correct and fully admitted by Respondent for purposes of that  
13 proceeding or any other licensing proceeding involving Respondent in the State of California.

14 12. Respondent agrees that her Physician's and Surgeon's Certificate is subject to  
15 discipline and she agrees to be bound by the Board's probationary terms as set forth in the  
16 Disciplinary Order below.

17 **CONTINGENCY**

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

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1 record keeping course shall be at Respondent's expense and shall be in addition to the Continuing  
2 Medical Education (CME) requirements for renewal of licensure.

3 A medical record keeping course taken after the acts that gave rise to the charges in the  
4 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board  
5 or its designee, be accepted towards the fulfillment of this condition if the course would have  
6 been approved by the Board or its designee had the course been taken after the effective date of  
7 this Decision.

8 Respondent shall submit a certification of successful completion to the Board or its  
9 designee not later than 15 calendar days after successfully completing the course, or not later than  
10 15 calendar days after the effective date of the Decision, whichever is later.

11 3. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the  
12 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the  
13 Chief Executive Officer at every hospital where privileges or membership are extended to  
14 Respondent, at any other facility where Respondent engages in the practice of medicine,  
15 including all physician and locum tenens registries or other similar agencies, and to the Chief  
16 Executive Officer at every insurance carrier which extends malpractice insurance coverage to  
17 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15  
18 calendar days.

19 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

20 4. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE  
21 NURSES. During probation, Respondent is not prohibited from supervising physician assistants  
22 and advanced practice nurses during any period in which she is employed by the Permanente  
23 Medical Group, and while practicing medicine within the scope of that employment. Respondent  
24 is otherwise prohibited from supervising physician assistants and advanced practice nurses.

25 5. OBEDIENT TO ALL LAWS. Respondent shall obey all federal, state and local laws, all rules  
26 governing the practice of medicine in California and remain in full compliance with any court  
27 ordered criminal probation, payments, and other orders.

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1           6.    QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations  
2 under penalty of perjury on forms provided by the Board, stating whether there has been  
3 compliance with all the conditions of probation.

4           Respondent shall submit quarterly declarations not later than 10 calendar days after the end  
5 of the preceding quarter.

6           7.    GENERAL PROBATION REQUIREMENTS.

7           Compliance with Probation Unit

8           Respondent shall comply with the Board's probation unit.

9           Address Changes

10          Respondent shall, at all times, keep the Board informed of Respondent's business and  
11 residence addresses, email address (if available), and telephone number. Changes of such  
12 addresses shall be immediately communicated in writing to the Board or its designee. Under no  
13 circumstances shall a post office box serve as an address of record, except as allowed by Business  
14 and Professions Code section 2021(b).

15          Place of Practice

16          Respondent shall not engage in the practice of medicine in Respondent's or patient's place  
17 of residence, unless the patient resides in a skilled nursing facility or other similar licensed  
18 facility.

19          License Renewal

20          Respondent shall maintain a current and renewed California physician's and surgeon's  
21 license.

22          Travel or Residence Outside California

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

26          In the event Respondent should leave the State of California to reside or to practice  
27 ,Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of  
28 departure and return.

1           8.    INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be  
2 available in person upon request for interviews either at Respondent's place of business or at the  
3 probation unit office, with or without prior notice throughout the term of probation.

4           9.    NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or  
5 its designee in writing within 15 calendar days of any periods of non-practice lasting more than  
6 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is  
7 defined as any period of time Respondent is not practicing medicine as defined in Business and  
8 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct  
9 patient care, clinical activity or teaching, or other activity as approved by the Board. If  
10 Respondent resides in California and is considered to be in non-practice, Respondent shall  
11 comply with all terms and conditions of probation. All time spent in an intensive training  
12 program which has been approved by the Board or its designee shall not be considered non-  
13 practice and does not relieve Respondent from complying with all the terms and conditions of  
14 probation. Practicing medicine in another state of the United States or Federal jurisdiction while  
15 on probation with the medical licensing authority of that state or jurisdiction shall not be  
16 considered non-practice. A Board-ordered suspension of practice shall not be considered as a  
17 period of non-practice.

18           In the event Respondent's period of non-practice while on probation exceeds 18 calendar  
19 months, Respondent shall successfully complete the Federation of State Medical Boards's Special  
20 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program  
21 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model  
22 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

23           Respondent's period of non-practice while on probation shall not exceed two (2) years.

24           Periods of non-practice will not apply to the reduction of the probationary term.

25           Periods of non-practice for a Respondent residing outside of California will relieve  
26 Respondent of the responsibility to comply with the probationary terms and conditions with the  
27 exception of this condition and the following terms and conditions of probation: Obey All Laws;  
28 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or



1 Controlled Substances; and Biological Fluid Testing.

2 10. COMPLETION OF PROBATION. Respondent shall comply with all financial  
3 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the  
4 completion of probation. Upon successful completion of probation, Respondent's certificate shall  
5 be fully restored.

6 11. VIOLATION OF PROBATION. Failure to fully comply with any term or condition  
7 of probation is a violation of probation. If Respondent violates probation in any respect, the  
8 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and  
9 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,  
10 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have  
11 continuing jurisdiction until the matter is final, and the period of probation shall be extended until  
12 the matter is final.

13 12. LICENSE SURRENDER. Following the effective date of this Decision, if  
14 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy  
15 the terms and conditions of probation, Respondent may request to surrender his or her license.  
16 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in  
17 determining whether or not to grant the request, or to take any other action deemed appropriate  
18 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent  
19 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its  
20 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject  
21 to the terms and conditions of probation. If Respondent re-applies for a medical license, the  
22 application shall be treated as a petition for reinstatement of a revoked certificate.

23 13. PROBATION MONITORING COSTS. Respondent shall pay the costs associated  
24 with probation monitoring each and every year of probation, as designated by the Board, which  
25 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of  
26 California and delivered to the Board or its designee no later than January 31 of each calendar  
27 year.

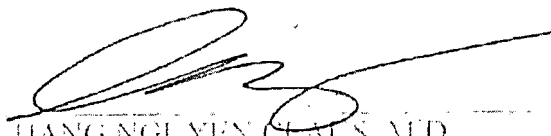
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ACCEPTANCE

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney Thomas F. Still 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

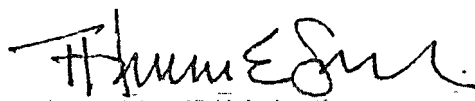
7/27/19

  
HANG NGUYEN CLAUS, MD  
Respondent

I have read and fully discussed with Respondent Hang Nguyen Claus, MD the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED

7/28/19

  
THOMAS F. STILL, ESQ.  
Attorney for Respondent

ENDORSEMENT

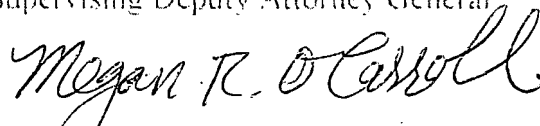
The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

DATED

7-30-2019

Respectfully submitted,

XAVIER BECERRA  
Attorney General of California  
STEVEN D. MUNI  
Supervising Deputy Attorney General

  
MEGAN R. O'CARROLL  
Deputy Attorney General  
Attorneys for Complainant

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**Exhibit A**

**Accusation No. 800-2016-026280**



1 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought  
2 herein and will expire on November 30, 2019, unless renewed.

3 **JURISDICTION**

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

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

10 5. Section 2234 of the Code, states:

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

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

16 "(b) Gross negligence.

17 "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or  
18 omissions. An initial negligent act or omission followed by a separate and distinct departure from  
19 the applicable standard of care shall constitute repeated negligent acts.

20 "(1) An initial negligent diagnosis followed by an act or omission medically appropriate for  
21 that negligent diagnosis of the patient shall constitute a single negligent act.

22 "(2) When the standard of care requires a change in the diagnosis, act, or omission that  
23 constitutes the negligent act described in paragraph (1), including, but not limited to, a  
24 reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the  
25 applicable standard of care, each departure constitutes a separate and distinct breach of the  
26 standard of care.

27 "(d) Incompetence.

28 "(e) The commission of any act involving dishonesty or corruption which is substantially

1 related to the qualifications, functions, or duties of a physician and surgeon.

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

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

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

10 6. Section 2266 of the Code states: “The failure of a physician and surgeon to maintain  
11 adequate and accurate records relating to the provision of services to their patients constitutes  
12 unprofessional conduct.”

### 13 **FIRST CAUSE FOR DISCIPLINE**

#### 14 **(Gross negligence)**

15 7. Respondent is subject to disciplinary action under section 2234, subdivision (b), of  
16 the Business and Professions Code (Code), in that she was grossly negligent in her care and  
17 treatment of an obstetrical patient. The circumstances are as follows:

18 8. Respondent is a physician and surgeon, board certified in Obstetrics and Gynecology,  
19 who at all times alleged practiced medicine at Kaiser Permanente in Vacaville, California. On or  
20 about March 22, 2014, at approximately 2:45 a.m., Confidential Patient (C.P.) presented to the  
21 Kaiser Vacaville Labor and Delivery with spontaneous rupture of membranes. CP was a 30-year  
22 old woman, Gravida 1, Para 0, at 40 weeks of gestation. She had received regular prenatal care  
23 throughout her pregnancy since six weeks of gestation, without complication.

24 9. Upon C.P.’s arrival at the Labor and Delivery Unit, Respondent examined her and  
25 confirmed that the membranes had ruptured. Respondent performed a sterile vaginal examination  
26 and recorded that C.P. was 1.5 centimeters dilated, 75% effaced, and had a vertex of minus two  
27 station. C.P. was experiencing contractions every five-to-six minutes. The fetal heart tracings  
28 showed a category 2 tracing with a baseline of 160 beats per minute. Respondent assessed the

1 tracing as having moderate variability and periodic variable decelerations.

2 10. At approximately 3:30 a.m., C.P. was admitted to the hospital. Respondent ordered  
3 intrauterine resuscitative measures including maternal position changes, IV fluids, and oxygen.  
4 Between 4:00 a.m. and 5:30 a.m., nursing notes charted the presence of minimal variability and  
5 late decelerations. At approximately 5:30 a.m. Respondent reviewed C.P.'s clinical condition. At  
6 approximately 6:00 a.m., Respondent noted C.P. to have no significant cervical change.  
7 Internal monitors were placed, and an amnioinfusion was initiated. There was fetal tachycardia at  
8 170 bpm. At this time, Respondent continued to interpret moderate variability and did not note  
9 the late decelerations.

10 11. At approximately 6:05 a.m., Respondent spoke with C.P. and assessed her to be  
11 appropriate for expectant management. At approximately 7:00 a.m., Respondent recommended  
12 Cesarean section to the patient. At approximately 7:05 a.m. Respondent ordered the Cesarean  
13 section. Respondent did not call for the procedure to be an emergent one, or communicate to the  
14 rest of the staff that the procedure should be handled as an emergency.

15 12. C.P. was brought to the OR at 7:37 a.m., and the incision was made at 7:54 a.m. by  
16 Dr. T.L. Delivery was at 7:56 a.m., of a viable male infant with APGARS of 1/5/7 weighing  
17 2,820 grams. The baby was transferred to another hospital as was C.P. Respondent never saw or  
18 spoke to C.P. again.

19 13. Respondent was grossly negligent in her care and treatment of C.P. for her acts  
20 including, but not limited to, the following:

21 (a) She failed to properly monitor a patient she admitted to L&D with a non-reassuring  
22 fetal heart tracing by failing to frequently review and document the tracings and failing to monitor  
23 the results of the resuscitative measures she ordered;

24 (b) She misinterpreted C.P.'s fetal heart tracings by failing to recognize and act on minimal  
25 variability, recurrent variable decelerations, intermittent late decelerations, and tachycardia; and

26 (c) When she finally called for a Cesarean section at 7:00 a.m. or 7:05 a.m., she did not  
27 order it to be an emergency procedure and ensure delivery within 30 minutes, despite the fact that  
28 C.P. had had a Category 2 tracing with concerning signs for more than three hours;

1 **SECOND CAUSE FOR DISCIPLINE**

2 **(Repeated Negligent Acts)**

3 14. Respondent Hang Nguyen Claus, M.D. is subject to disciplinary action under section  
4 2234, subdivision (c), of the Code, in that she was repeatedly negligent in the care and treatment  
5 C.P. The circumstances are as follows:

6 15. Paragraphs 7 through 13, above, are incorporated by reference and repeated as if fully  
7 set forth.

8 16. Respondent was repeatedly negligent in her care and treatment of C.P. for her acts  
9 including, but not limited to, the following:

10 (a) She failed to properly monitor a patient she admitted to L&D with a non-reassuring  
11 fetal heart tracing by failing to frequently review and document the tracings and failing to monitor  
12 the results of the resuscitative measures she ordered;

13 (b) She misinterpreted C.P.'s fetal heart tracings by failing to recognize and act on minimal  
14 variability, recurrent variable decelerations, intermittent late decelerations, and tachycardia;

15 (c) When she finally called for a Cesarean section at 7:00 a.m. or 7:05 a.m., she did not  
16 order it to be an emergency procedure and ensure delivery within 30 minutes, despite the fact that  
17 C.P. had had a Category 2 tracing with concerning signs for more than three hours;

18 (d) Failing to effectively communicate with other members of the obstetrical team  
19 throughout C.P.'s hospital stay; and

20 (e) Failing to document relevant aspects of C.P.'s care throughout her hospital stay.

21 **THIRD CAUSE FOR DISCIPLINE**

22 **(Inadequate Recordkeeping)**

23 17. Respondent is subject to disciplinary action under section 2266 of the Code by failing  
24 to maintain adequate and accurate records relating to the provision of medical care to C.P.

25 18. Paragraphs 7 through 14, above are incorporated by reference and repeated as if fully  
26 set forth.

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28 ///




**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 Number A 119725, issued to Hang Nguyen Claus, M.D.;
2. Revoking, suspending or denying approval of Hang Nguyen Claus, M.D.'s authority to supervise physician assistants and advanced practice nurses;
3. Ordering Hang Nguyen Claus, 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: November 29, 2018

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

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