

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

In the Matter of the Accusation)
Against:)
)
)
Hisham H. Soliman, M.D.)
)
Physician's and Surgeon's)
Certificate No. A 75977)
)
Respondent)
_____)

Case No. 800-2016-023446

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 May 8, 2020.

IT IS SO ORDERED: April 8, 2020.

MEDICAL BOARD OF CALIFORNIA



**Kristina D. Lawson, J.D., Chair
Panel B**

1 XAVIER BECERRA
Attorney General of California
2 ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General
3 AARON L. LENT
Deputy Attorney General
4 State Bar No. 256857
1300 I Street, Suite 125
5 P.O. Box 944255
Sacramento, CA 94244-2550
6 Telephone: (916) 210-7545
7 Facsimile: (916) 327-2247

8 *Attorneys for Complainant*

9
10 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
11 **DEPARTMENT OF CONSUMER AFFAIRS**
12 **STATE OF CALIFORNIA**

13 In the Matter of the Accusation Against:

14 **HISHAM H. SOLIMAN, M.D.**
15 **P.O. Box 6180**
Folsom , CA 95763

16 **Physician's and Surgeon's Certificate**
17 **No. A 75977**

18 Respondent.

Case No. 800-2016-023446

OAH No. 2019070247

19
20 **STIPULATED SETTLEMENT AND**
21 **DISCIPLINARY ORDER**

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

24 **PARTIES**

25 1. Christine J. Lally (Complainant) is the Deputy Director of the Medical Board of
26 California (Board). This action was brought by then Complainant Kimberly Kirchmeyer solely in her
27 official capacity.¹ Complainant is represented in this matter by Xavier Becerra, Attorney General of
28 the State of California, by Aaron L. Lent, Deputy Attorney General.

¹ Ms. Kirchmeyer became the Director of the Department of Consumer Affairs on October 28, 2019.

1 CULPABILITY

2 9. Respondent understands and agrees that the charges and allegations in Accusation
3 No. 800-2016-023446, if proven at a hearing, constitute cause for imposing discipline upon his
4 Physician's and Surgeon's Certificate.

5 10. Respondent does not contest that, at an administrative hearing, Complainant could
6 establish a *prima facie* case with respect to the charges and allegations contained in Accusation
7 No. 800-2016-023446 and that he has thereby subjected his license to disciplinary action.

8 11. Respondent agrees that if he ever petitions for early termination or modification of
9 probation, or if the Board ever petitions for revocation of probation, all of the charges and
10 allegations contained in Accusation No. 800-2016-023446 shall be deemed true, correct and fully
11 admitted by respondent for purposes of that proceeding or any other licensing proceeding
12 involving respondent in the State of California.

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

16 RESERVATION

17 13. The admissions made by Respondent herein are only for the purposes of this
18 proceeding, or any other proceedings in which the Medical Board of California or other
19 professional licensing agency is involved, and shall not be admissible in any other criminal or
20 civil proceeding.

21 CONTINGENCY

22 14. This stipulation shall be subject to approval by the Medical Board of California.
23 Respondent understands and agrees that counsel for Complainant and the staff of the Medical
24 Board of California may communicate directly with the Board regarding this stipulation and
25 settlement, without notice to or participation by Respondent or his counsel. By signing the
26 stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek
27 to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails
28 to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary

1 Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal
2 action between the parties, and the Board shall not be disqualified from further action by having
3 considered this matter.

4 15. The parties understand and agree that Portable Document Format (PDF) and facsimile
5 copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile
6 signatures thereto, shall have the same force and effect as the originals.

7 16. In consideration of the foregoing admissions and stipulations, the parties agree that
8 the Board may, without further notice or formal proceeding, issue and enter the following
9 Disciplinary Order:

10 **DISCIPLINARY ORDER**

11 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 75977 issued
12 to Respondent Hisham H. Soliman, M.D. is revoked. However, the revocation is stayed and
13 Respondent is placed on probation for three (3) years from the effective date of the Decision on
14 the following terms and conditions.

15 1. STANDARD STAY ORDER. However, revocation stayed and Respondent is placed
16 on probation for three years upon the following terms and conditions.

17 2. EDUCATION COURSE. Within 60 calendar days of the effective date of this
18 Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee
19 for its prior approval educational program(s) or course(s) which shall not be less than 40 hours
20 per year, for each year of probation. The educational program(s) or course(s) shall be aimed at
21 correcting any areas of deficient practice or knowledge and shall be Category I certified.
22 Specifically, Respondent shall be required to complete 5 hours out of the 40 hours of CME in
23 areas concerning interpersonal relationships with patients and their family members within the
24 first year. The educational program(s) or course(s) shall be at Respondent's expense and shall be
25 in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.
26 Following the completion of each course, the Board or its designee may administer an
27 examination to test Respondent's knowledge of the course. Respondent shall provide proof of
28 attendance for 65 hours of CME of which 40 hours were in satisfaction of this condition.

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

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

15 Respondent shall submit a certification of successful completion to the Board or its
16 designee not later than 15 calendar days after successfully completing the course, or not later than
17 15 calendar days after the effective date of the Decision, whichever is later.

18 4. MONITORING - PRACTICE. Within 30 calendar days of the effective date of this
19 Decision, Respondent shall submit to the Board or its designee for prior approval as a practice
20 monitor(s), the name and qualifications of one or more licensed physicians and surgeons whose
21 licenses are valid and in good standing, and who are preferably American Board of Medical
22 Specialties (ABMS) certified. A monitor shall have no prior or current business or personal
23 relationship with Respondent, or other relationship that could reasonably be expected to
24 compromise the ability of the monitor to render fair and unbiased reports to the Board, including
25 but not limited to any form of bartering, shall be in Respondent's field of practice, and must agree
26 to serve as Respondent's monitor. Respondent shall pay all monitoring costs.

27 The Board or its designee shall provide the approved monitor with copies of the Decision(s)
28 and Accusation(s), and a proposed monitoring plan. Within 15 calendar days of receipt of the

1 Decision(s), Accusation(s), and proposed monitoring plan, the monitor shall submit a signed
2 statement that the monitor has read the Decision(s) and Accusation(s), fully understands the role
3 of a monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor disagrees
4 with the proposed monitoring plan, the monitor shall submit a revised monitoring plan with the
5 signed statement for approval by the Board or its designee.

6 Within 60 calendar days of the effective date of this Decision, and continuing throughout
7 probation, Respondent's practice monitor(s) shall be monitored by the approved monitor.
8 Respondent shall make all records available for immediate inspection and copying on the
9 premises by the monitor at all times during business hours and shall retain the records for the
10 entire term of probation.

11 If Respondent fails to obtain approval of a monitor within 60 calendar days of the effective
12 date of this Decision, Respondent shall receive a notification from the Board or its designee to
13 cease the practice of medicine within three (3) calendar days after being so notified. Respondent
14 shall cease the practice of medicine until a monitor is approved to provide monitoring
15 responsibility.

16 The monitor(s) shall submit a quarterly written report to the Board or its designee which
17 includes an evaluation of Respondent's performance, indicating whether Respondent's practices
18 are within the standards of practice of practice monitor(s), and whether Respondent is practicing
19 medicine safely, billing appropriately or both. It shall be the sole responsibility of Respondent to
20 ensure that the monitor submits the quarterly written reports to the Board or its designee within
21 10 calendar days after the end of the preceding quarter.

22 If the monitor resigns or is no longer available, Respondent shall, within 5 calendar days of
23 such resignation or unavailability, submit to the Board or its designee, for prior approval, the
24 name and qualifications of a replacement monitor who will be assuming that responsibility within
25 15 calendar days. If Respondent fails to obtain approval of a replacement monitor within 60
26 calendar days of the resignation or unavailability of the monitor, Respondent shall receive a
27 notification from the Board or its designee to cease the practice of medicine within three (3)
28 calendar days after being so notified. Respondent shall cease the practice of medicine until a

1 replacement monitor is approved and assumes monitoring responsibility.

2 In lieu of a monitor, Respondent may participate in a professional enhancement program
3 approved in advance by the Board or its designee that includes, at minimum, quarterly chart
4 review, semi-annual practice assessment, and semi-annual review of professional growth and
5 education. Respondent shall participate in the professional enhancement program at Respondent's
6 expense during the term of probation.

7 5. PRESCRIBING PRACTICES COURSE.

8 Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a
9 course in prescribing practices approved in advance by the Board or its designee. Respondent
10 shall provide the approved course provider with any information and documents that the approved
11 course provider may deem pertinent. Respondent shall participate in and successfully complete
12 the classroom component of the course not later than six (6) months after Respondent's initial
13 enrollment. Respondent shall successfully complete any other component of the course within
14 one (1) year of enrollment. The prescribing practices course shall be at Respondent's expense
15 and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of
16 licensure.

17 A prescribing practices course taken after the acts that gave rise to the charges in the
18 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
19 or its designee, be accepted towards the fulfillment of this condition if the course would have
20 been approved by the Board or its designee had the course been taken after the effective date of
21 this Decision.

22 6. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the
23 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
24 Chief Executive Officer at every hospital where privileges or membership are extended to
25 Respondent, at any other facility where Respondent engages in the practice of medicine,
26 including all physician and locum tenens registries or other similar agencies, and to the Chief
27 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
28 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15

1 calendar days.

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

3 7. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE
4 NURSES. During probation, Respondent shall be allowed to supervise nine (9) Nurse
5 practitioners that currently work in his practice, identified as Nurse Practitioner L.T., Nurse
6 Practitioner C.T., Nurse Practitioner J.B., Nurse Practitioner Y.H., Nurse Practitioner A.L., Nurse
7 Practitioner J.K., Nurse Practitioner P.V., Nurse Practitioner E.W., and Nurse Practitioner S.R.,
8 but shall be prohibited from hiring and supervising additional physician assistant and advanced
9 practice nurses.

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

13 9. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations
14 under penalty of perjury on forms provided by the Board, stating whether there has been
15 compliance with all the conditions of probation.

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

18 10. GENERAL PROBATION REQUIREMENTS.

19 Compliance with Probation Unit

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

21 Address Changes

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

27 Place of Practice

28 Respondent shall not engage in the practice of medicine in Respondent's or patient's place

1 of residence, unless the patient resides in a skilled nursing facility or other similar licensed
2 facility.

3 License Renewal

4 Respondent shall maintain a current and renewed California physician's and surgeon's
5 license.

6 Travel or Residence Outside California

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

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

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

16 12. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
17 its designee in writing within 15 calendar days of any periods of non-practice lasting more than
18 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
19 defined as any period of time Respondent is not practicing medicine as defined in Business and
20 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
21 patient care, clinical activity or teaching, or other activity as approved by the Board. If
22 Respondent resides in California and is considered to be in non-practice, Respondent shall
23 comply with all terms and conditions of probation. All time spent in an intensive training
24 program which has been approved by the Board or its designee shall not be considered non-
25 practice and does not relieve Respondent from complying with all the terms and conditions of
26 probation. Practicing medicine in another state of the United States or Federal jurisdiction while
27 on probation with the medical licensing authority of that state or jurisdiction shall not be
28 considered non-practice. A Board-ordered suspension of practice shall not be considered as a

1 period of non-practice.

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

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

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

9 Periods of non-practice for a Respondent residing outside of California will relieve
10 Respondent of the responsibility to comply with the probationary terms and conditions with the
11 exception of this condition and the following terms and conditions of probation: Obey All Laws;
12 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or
13 Controlled Substances; and Biological Fluid Testing..

14 13. COMPLETION OF PROBATION. Respondent shall comply with all financial
15 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
16 completion of probation. Upon successful completion of probation, Respondent's certificate shall
17 be fully restored.

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

25 15. LICENSE SURRENDER. Following the effective date of this Decision, if
26 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
27 the terms and conditions of probation, Respondent may request to surrender his or her license.
28 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in

1 determining whether or not to grant the request, or to take any other action deemed appropriate
2 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
3 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
4 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
5 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
6 application shall be treated as a petition for reinstatement of a revoked certificate.

7 16. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
8 with probation monitoring each and every year of probation, as designated by the Board, which
9 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
10 California and delivered to the Board or its designee no later than January 31 of each calendar
11 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, Lawrence S. Giardina, 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: 2/28/2020 
HISHAM H. SOLIMAN, M.D.
Respondent

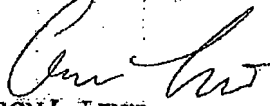
I have read and fully discussed with Respondent Hisham H. Soliman, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED: 2/28/2020 
LAWRENCE S. GIARDINA, 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: 3/2/2020

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

AARON L. LENT
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 800-2016-023446

1 XAVIER BECERRA
Attorney General of California
2 STEVEN D. MUNI
Supervising Deputy Attorney General
3 JASON J. AHN
Deputy Attorney General
4 State Bar No. 253172
600 West Broadway, Suite 1800
5 San Diego, CA 92101
P.O. Box 85266
6 San Diego, CA 92186-5266
Telephone: (619) 738-9433
7 Facsimile: (619) 645-2061

8 *Attorneys for Complainant*

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO June 4 20 19
BY Sara Pasien ANALYST

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

13 In the Matter of the Accusation Against:

Case No. 800-2016-023446

14 Hisham H. Soliman, M.D.
15 P.O. Box 6180
Folsom, CA 95763

ACCUSATION

16 Physician's and Surgeon's Certificate
17 No. A 75977,

18 Respondent.

19
20 Complainant alleges:

21 PARTIES

22 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
23 capacity as the Executive Director of the Medical Board of California, Department of Consumer
24 Affairs (Board).

25 2. On or about July 25, 2001, the Medical Board issued Physician's and Surgeon's
26 Certificate No. A 75977 to Hisham H. Soliman, M.D. (Respondent). The Physician's and
27 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
28 herein and will expire on November 30, 2020, unless renewed.

JURISDICTION

3. 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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1 4. Section 2234 of the Code, states:

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

5 "...

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

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

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

16 "..."

17 5. Section 2266 of the Code states:

18 "The failure of a physician and surgeon to maintain adequate and accurate records relating
19 to the provision of services to their patients constitutes unprofessional conduct."

20 6. Unprofessional conduct under Business and Professions Code section 2234 is conduct
21 which breaches the rules or ethical code of the medical profession, or conduct which is
22 unbecoming a member in good standing of the medical profession, and which demonstrates an
23 unfitness to practice medicine. (*Shea v. Board of Medical Examiners* (1978) 81 Cal.App.3d 564,
24 575.)

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1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Repeated Negligent Acts)**

3 7. Respondent has subjected his Physician's and Surgeon's Certificate No. A 75977 to
4 disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (c), of
5 the Code, in that he committed repeated negligent acts in his care and treatment of Patients A¹, B,
6 and C, as more particularly alleged herein:

7 **Patient A**

8 8. On or about August 21, 2015, Patient A presented to Respondent. Prior to and/or
9 during Patient A's visit, Patient A's mother attempted to provide Respondent with information
10 related to Patient A's prior psychiatric history, including, but not limited to, involuntary
11 hospitalization(s), medication history, and any diagnosis of psychosis, etc. (collateral
12 information). Respondent failed to review and/or consider collateral information from Patient
13 A's mother. Respondent failed to review and/or failed to document having reviewed Patient A's
14 prior psychiatric records.

15 9. Regarding Respondent's documentation of Patient A's August 21, 2015 visit,
16 Respondent made a presumptive diagnosis of Obsessive Compulsive Disorder, but this
17 conclusion is not supported by Respondent's documentation of this visit. Moreover,
18 Respondent's notes, among other things, described symptoms of mood disorders such as lack of
19 energy, depressed mood, sad demeanor, anxiety, social withdrawal, and insomnia, without
20 sufficient details to determine whether Patient A meets the diagnostic criteria for a major
21 depressive episode.

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28 ¹ References to Patients A, B, and C are used to protect patient privacy.

1 **Patient B**

2 10. On or about September 13, 2017, Patient B presented to Respondent after his
3 psychiatrist had retired. Patient B reported a history of anxiety and requested a refill of a
4 prescription for Lorazepam,² the medication he has been taking while under the care of his former
5 psychiatrist. Respondent refused to refill Patient B's prescription for Lorazepam. Respondent
6 stated that Patient B should seek another medical provider. Respondent failed to discuss and/or
7 failed to document having discussed with Patient B, options other than Lorazepam, including, but
8 not limited to, Clonazepam³ with a slow taper.

9 **Patient C**

10 11. On or about November 15, 2017, Patient C presented to Respondent. Respondent
11 diagnosed Patient C with schizophrenia and prescribed Risperidone,⁴ at a dose of 2 mg, twice a
12 day. The manufacturer's recommendation for the starting dose of Risperidone for psychosis in
13 adults is between 1 to 2 mg per day, with a target dose of 4 to 8 mg daily, and a maximum dose of
14 16 mg daily. Respondent failed to adequately explain and/or failed to document having
15 adequately explained possible side effects of Risperidone. The medical records Respondent
16 created for this encounter was inadequate and/or inaccurate, including, but not limited to, the
17 contradiction between the "History" section and the "Exam" section of the records.

18 12. On or about November 15, 2017, after Patient C consumed one dose of Risperidone,
19 2 mg, Patient C began experiencing tremors, "black vision, lots of burping, and a racing heart."

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21 _____
22 ² Ativan® (lorazepam), a benzodiazepine, is a centrally acting hypnotic-sedative that is a
23 Schedule IV controlled substance pursuant to Health and Safety Code section 11057, subdivision
24 (d), and a dangerous drug pursuant to Business and Professions Code section 4022. When
25 properly prescribed and indicated, it is used for the management of anxiety disorders or for the
26 short term relief of anxiety or anxiety associated with depressive symptoms. Concomitant use of
27 Ativan® with opioids "may result in profound sedation, respiratory depression, coma, and death."
28 The Drug Enforcement Administration (DEA) has identified benzodiazepines, such as Ativan®,
as a drug of abuse. (Drugs of Abuse, DEA Resource Guide (2011 Edition), at p. 53.)

³ Clonazepam is an anti-anxiety medication, a benzodiazepine, which can be used to treat anxiety.

⁴ Risperidone is an antipsychotic, which can be used to treat schizophrenia, bipolar disorder, and irritability caused by autism.

1 13. On or about November 18, 2017, due to the side effects Patient C was experiencing
2 from taking Risperidone, Patient C and/or Patient C's family attempted to make an appointment
3 for Patient C to be seen by Respondent. However, Respondent's staff informed Patient C and/or
4 Patient C's family that the earliest available appointment was November 29, 2017.

5 14. On or about November 28, 2017, Respondent's staff contacted Patient C and/or
6 Patient C's family indicating that the November 29, 2017 appointment for Patient C has now been
7 rescheduled to December 6, 2017.

8 15. On or about December 6, 2017, after Patient C had refused to go to his appointment
9 with Respondent, Patient C's wife appeared on his behalf, with a release of medical information
10 signed by Patient C. When Patient C's wife requested to see Respondent, she was refused by
11 Respondent's staff, who among other things, threatened to call the police if Patient C's wife did
12 not leave the premises. Respondent himself had refused to see and/or discuss Patient C's care
13 with Patient C's wife, even though she had a release of medical information signed by Patient C.
14 Respondent failed to timely and/or adequately conduct a clinical assessment of any side effects
15 Patient C was experiencing from consuming Risperidone.

16 16. Respondent committed repeated negligent acts in his care and treatment of Patients A,
17 B, and C, which included, but was not limited to, the following:

18 (a) Paragraphs 7 through 15, above, are hereby incorporated by reference and
19 realleged as if fully set forth herein;

20 (b) Respondent failed to review and/or failed to document having reviewed Patient
21 A's prior psychiatric records and/or failed to consider collateral information from Patient
22 A's mother;

23 (c) Respondent did not adequately document his August 21, 2015 encounter with
24 Patient A;

25 (d) Respondent failed to discuss and/or failed to document having discussed with
26 Patient B options other than Lorazepam for the treatment of his anxiety;

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1 (e) Respondent refused any contact with Patient C's wife even though she
2 presented with a signed release of medical information from Patient C;

3 (f) Respondent prescribed Risperidone at a dose higher than the manufacturer's
4 recommendation and/or without adequate explanation of possible side effects;

5 (g) Respondent failed to timely and/or adequately conduct a clinical assessment of
6 any side effects Patient C was experiencing from consuming Risperidone; and

7 (h) Respondent's documentation of his November 15, 2017 encounter with Patient
8 C was inadequate and/or inaccurate.

9 **SECOND CAUSE FOR DISCIPLINE**

10 **(Failure to Maintain Adequate and Accurate Records)**

11 17. Respondent has further subjected his Physician's and Surgeon's Certificate No.
12 A 75977 to disciplinary action under sections 2227 and 2234, as defined by section 2266, of the
13 Code, in that Respondent failed to maintain adequate and accurate records regarding his care and
14 treatment of Patients A, B, and C, as more particularly alleged in paragraphs 7 through 16, above,
15 which are hereby incorporated by reference and realleged as if fully set forth herein.

16 **THIRD CAUSE FOR DISCIPLINE**

17 **(General Unprofessional Conduct)**

18 18. Respondent has further subjected his Physician's and Surgeon's Certificate
19 No. A 75977 to disciplinary action under sections 2227 and 2234 of the Code, in that he has
20 engaged in conduct which breaches the rules or ethical code of the medical profession, or conduct
21 which is unbecoming to a member in good standing of the medical profession, and which
22 demonstrates an unfitness to practice medicine, as more particularly alleged in paragraphs 7
23 through 17, above, which are hereby incorporated by reference as if fully set forth herein.

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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. A 75977, issued to Hisham H. Soliman, M.D.;
2. Revoking, suspending or denying approval of Hisham H. Soliman, M.D.'s authority to supervise physician assistants and advanced practice nurses;
3. Ordering Hisham H. Soliman, 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:
June 4, 2019


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

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