

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

In the Matter of the First Amended
Accusation
Against:

Ravindra Moharpal Gautam, M.D.

Physician's & Surgeon's
Certificate No A56418

Respondent

Case No. 800-2016-027138

DECISION

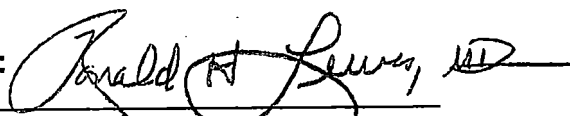
The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on AUG 05 2020

IT IS SO ORDERED JUL 06 2020

MEDICAL BOARD OF CALIFORNIA

By:



Ronald H. Lewis, M.D., Chair
Panel A

1 XAVIER BECERRA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 TAN N. TRAN
Deputy Attorney General
4 State Bar No. 197775
California Department of Justice
5 300 South Spring Street, Suite 1702
Los Angeles, CA 90013
6 Telephone: (213) 269-6535
Facsimile: (916) 731-2117
7 *Attorneys for Complainant*

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

11 In the Matter of the First Amended Accusation
12 Against:

13 **RAVINDRA MOHARPAL GAUTAM,**
14 **M.D.**

14 **930 W. Main Street**
15 **Barstow, CA 92311-2654**

16 **Physician's and Surgeon's Certificate No.**
17 **A 56418,**

18 Respondent.

Case No. 800-2016-027138

OAH No.: 2019100184

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

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

21 PARTIES

22 1. Kimberly Kirchmeyer (Complainant) was the Executive Director of the Medical
23 Board of California. She brought this action solely in her official capacity and is represented in
24 this matter by Xavier Becerra, Attorney General of the State of California, by Tan N. Tran,
25 Deputy Attorney General.

26 2. Respondent Ravindra Moharpal Gautam, M.D. ("Respondent") is represented in this
27 proceeding by attorney Kathleen A. Stosuy, Esq., whose address is: Kramer, DeBoer & Keane,
28 LLP, 74770 Highway 111, Suite 20, Indian Wells, California 92210.

1 CULPABILITY

2 9. Respondent does not contest that at an administrative hearing, complainant could
3 establish a *prima facie* case with respect to the charges and allegations contained in First
4 Amended Accusation No. 800-2016-027138, and that he has thereby subjected his Physician's
5 and Surgeon's Certificate No. A 56418 to disciplinary action.

6 10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to
7 discipline and he agrees to be bound by the Board's imposition of discipline as set forth in the
8 Disciplinary Order below.

9 RESERVATION

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

14 CONTINGENCY

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

25 ///

26 ///

27 ///

28 ///

1 successfully complete any other component of the course within one (1) year of enrollment. The
2 prescribing practices course shall be at Respondent's expense and shall be in addition to the
3 Continuing Medical Education (CME) requirements for renewal of licensure.

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

9 Respondent shall submit a certification of successful completion to the Board or its
10 designee not later than 15 calendar days after successfully completing the course, or not later than
11 15 calendar days after the effective date of the Decision, whichever is later.

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

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

26 Respondent shall submit a certification of successful completion to the Board or its
27 designee not later than 15 calendar days after successfully completing the course, or not later than
28 15 calendar days after the effective date of the Decision, whichever is later.

1 **E. PROFESSIONALISM PROGRAM (ETHICS COURSE).** Within 60
2 calendar days of the effective date of this Decision, Respondent shall enroll in a professionalism
3 program, that meets the requirements of Title 16, California Code of Regulations (CCR) section
4 1358.1. Respondent shall participate in and successfully complete that program. Respondent
5 shall provide any information and documents that the program may deem pertinent. Respondent
6 shall successfully complete the classroom component of the program not later than six (6) months
7 after Respondent's initial enrollment, and the longitudinal component of the program not later
8 than the time specified by the program, but no later than one (1) year after attending the
9 classroom component. The professionalism program shall be at Respondent's expense and shall
10 be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

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

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

19 **F. VIOLATION OF DISCIPLINARY ORDER.** If Respondent fails to fully
20 comply with any term or condition above, in any respect, this failure to comply by Respondent
21 constitutes a violation of this Disciplinary Order, and the Board, after giving Respondent notice
22 and the opportunity to be heard, may pursue disciplinary action against Respondent, pursuant to
23 section 2004 of the Code. If an Accusation, or Petition to Revoke Probation, or an Interim
24 Suspension Order is filed against Respondent, the Board shall have continuing jurisdiction until
25 the matter is final.

26 ///

27 ///

28 ///

1 ACCEPTANCE

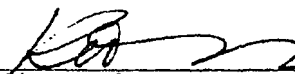
2 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
3 discussed it with my attorney, Kathleen A. Stosuy, Esq. I understand the stipulation and the
4 effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated
5 Settlement and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

7
8 DATED: _____

9 Ravindra Moharpal Gautam, M.D.
Respondent

10 I have read and fully discussed with Respondent the terms and conditions and other matters
11 contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and
12 content.

13 DATED: 2-18-20

14 
Kathleen A. Stosuy
15 Attorney for Respondent

16 ENDORSEMENT

17 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully
18 submitted for consideration by the Medical Board of California of the Department of Consumer
19 Affairs.

20
21 Dated: 2/19/20

Respectfully submitted,

22 XAVIER BECERRA
23 Attorney General of California
24 JUDITH T. ALVARADO
Supervising Deputy Attorney General


25 
26 TAN N. TRAN
27 Deputy Attorney General
28 *Attorneys for Complainant*

Exhibit A

First Amended Accusation No. 800-2016-027138

1 XAVIER BECERRA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 TAN N. TRAN
Deputy Attorney General
4 State Bar No. 197775
California Department of Justice
5 300 So. Spring Street, Suite 1702
Los Angeles, CA 90013
6 Telephone: (213) 269-6535
Facsimile: (213) 897-9395
7 *Attorneys for Complainant*

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

11 In the Matter of the First Amended Accusation
12 Against:

Case No. 800-2016-027138

FIRST AMENDED ACCUSATION

13 **RAVINDRA MOHARPAL GAUTAM,**
14 **M.D.**
930 West Main Street,
Barstow, CA 92311

15 **Physician's and Surgeon's Certificate**
16 **No. A56418,**

17 Respondent.

18
19 Complainant alleges:

20 **PARTIES**

21 1. Christine J. Lally (Complainant) brings this First Amended Accusation solely in her
22 official capacity as the Interim Executive Director of the Medical Board of California,
23 Department of Consumer Affairs (Board).

24 2. On or about November 27, 1996, the Medical Board issued Physician's and Surgeon's
25 Certificate Number A56418 to Ravindra Moharpal Gautam, M.D. (Respondent). The Physician's
26 and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
27 herein and will expire on June 30, 2020, unless renewed.

28 ///

JURISDICTION

1
2 3. This First Amended Accusation is brought before the Medical Board of California
3 (Board), Department of Consumer Affairs, under the authority of the following laws. All section
4 references are to the Business and Professions Code unless otherwise indicated.

5 4. Section 2004 of the Code states:

6 "The board shall have the responsibility for the following:

7 "(a) The enforcement of the disciplinary and criminal provisions of the Medical Practice
8 Act.

9 "(b) The administration and hearing of disciplinary actions.

10 "(c) Carrying out disciplinary actions appropriate to findings made by a panel or an
11 administrative law judge.

12 "(d) Suspending, revoking, or otherwise limiting certificates after the conclusion of
13 disciplinary actions.

14 "(e) Reviewing the quality of medical practice carried out by physician and surgeon
15 certificate holders under the jurisdiction of the board.

16 "(f) Approving undergraduate and graduate medical education programs.

17 "(g) Approving clinical clerkship and special programs and hospitals for the programs in
18 subdivision (f).

19 "(h) Issuing licenses and certificates under the board's jurisdiction.

20 "(i) Administering the board's continuing medical education program."

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

25 6. Section 2234 of the Code, states:

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

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

3 (b) Gross negligence.

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

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

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

14 (d) Incompetence.

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

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

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

21 7. Section 2238 of the Code provides the following:

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

25 8. Section 2239, subdivision (a), of the Code provides the following:

26 "The use or prescribing for or administering to himself or herself, of any controlled
27 substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic
28 beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to

1 any other person or to the public, or to the extent that such use impairs the ability of the licensee
2 to practice medicine safely or more than one misdemeanor or any felony involving the use,
3 consumption, or self-administration of any of the substances referred to in this section, or any
4 combination thereof, constitutes unprofessional conduct. The record of the conviction is
5 conclusive evidence of such unprofessional conduct.”

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

9 **FIRST CAUSE FOR DISCIPLINE**

10 **(Repeated Negligent Acts- 3 Patients)**

11 10. Respondent is subject to disciplinary action under section 2234, subdivision (c), of
12 the Code in that he committed repeated negligent acts in his care of Patient 1, Patient 2, and
13 Patient 3.¹ The circumstances are as follows:

14 **Patient 1**

15 11. Patient 1 (or “patient”) is a seventy-one year-old male who treated with Respondent
16 from about November 2015 through November 2017.² Patient 1 had a medical history which
17 included anemia, hyperlipidemia, chronic kidney disease, hypertension, obstructive airway
18 disease, prior stroke, gastroesophageal reflux disease, abdominal aortic aneurysm, peripheral
19 vascular disease, and low back pain. Patient 1 was receiving primarily Norco and Methadone
20 (both opioids/painkillers), as well as blood pressure medications.

21 12. Respondent documented that a history and physical examination were performed on
22 Patient 1, but there was no documentation that drug testing was being performed regularly on
23 Patient 1, and Respondent was uncertain whether or not he was utilizing the CURES³ database at

24 _____
25 ¹ The patients herein are identified by numbers to protect their privacy.

26 ² These are approximate dates based on the records available for review. Patient 1 may
27 have treated with Respondent before or after these dates.

28 ³ CURES allows healthcare prescribers, pharmacists, law enforcement, and regulatory
boards to access patients’ and providers’ controlled substance prescription histories. CURES is
intended to assist in the reduction of prescription drug abuse in California. As of July 1, 2016, all
physicians in California were required to register with CURES.

1 that time, as there are no CURES reports in the chart nor is there documentation that reports were
2 run. Also, the documentation regarding Patient 1's blood pressure appeared "cut and pasted."
3 These acts and omissions, as described above, constitute simple departures from the standard of
4 care.

5 Patient 2

6 13. Patient 2 is a sixty-ninety year-old female who treated with Respondent from about
7 2011 to November 2017.⁴ The patient had chronic diagnoses of hypothyroidism, hyperlipidemia,
8 major depression, anxiety, chronic kidney disease, peripheral vascular disease, chronic
9 obstructive pulmonary disease (COPD), liver cirrhosis, low back pain, and bradycardia. Records
10 indicate that during this time period, Respondent prescribed to Patient 2 primarily the pain
11 medications Norco and Methadone.

12 14. Chart notes for the period between November 2015 to November 2017 showed that
13 Patient 2 reported pain levels ranging from 0/10 to 8/10. However, the pain medications,
14 quantities, and directions were never adjusted. A history and physical examination were
15 documented, but a medical indication for treatment with opioids was not clearly stated. As in
16 Patient 1 mentioned above, there was no documentation that drug testing was being performed
17 regularly on Patient 2, and Respondent was uncertain whether or not he was utilizing the CURES
18 database at that time, as there are no CURES reports in the chart nor is there documentation that
19 reports were run. Also, the documentation regarding Patient 2's blood pressure appeared "cut and
20 pasted." These acts or omissions, as described above, constitute simple departures from the
21 standard of care.

22 Patient 3

23 15. Patient 3 is a ninety-one year-old male who treated with Respondent from about
24 February 2015 to November 2017.⁵ The patient had a history significant for hypertension,
25

26 ⁴ Again, these are approximate dates. The earliest chart note available for review for
Patient 2 begin on November 17, 2015, but it appears that Patient 2 begins seeing Respondent
beginning around 2011.

27 ⁵ Again, these are approximate dates. Patient 3 could have treated with Respondent before
28 and after these dates.

1 chronic renal failure, depression, diabetes, chronic low back pain secondary to Degenerative Joint
2 Disease of the spine and central canal stenosis, dyslipidemia, cataracts, and glaucoma. Records
3 indicate that during this time period, Respondent prescribed to Patient 3 primarily the pain
4 medications Norco, Soma, and occasional prescriptions for Dilaudid.

5 16. A history and physical examination were documented, and Respondent appeared to
6 be prescribing opioids to Patient 3 for his chronic back pain. As with the patients described
7 above, Respondent was uncertain whether or not he was utilizing the CURES database at that
8 time, as there are no CURES reports in the chart nor is there documentation that reports were run.
9 These acts or omissions, as described above, constitute simple departures from the standard of
10 care.

11 **SECOND CAUSE FOR DISCIPLINE**

12 **(Self-Prescribing Controlled Substances)**

13 17. Respondent is subject to disciplinary action under Code sections 2234, subdivision
14 (a), 2238, as well as 2239, subdivision (a) in that Respondent prescribed controlled substances to
15 himself. The circumstances are as follows:

16 18. Between December 2013 and October 2016, Respondent prescribed to himself
17 controlled substances, including the following: benzodiazepines (including, Alprazolam/Xanax
18 (used for anxiety)) and the sleep aid Zolpidem/Ambien.

19 19. Respondent's acts and/or omissions as set forth in paragraph 18, above,
20 constitutes self-prescribing, and, therefore, unprofessional conduct within the meaning of section
21 2239 of the Code. Respondent's self-prescribing of controlled substances also constitutes simple
22 departures from the standard of care. Therefore, cause for discipline exists.

23 **THIRD CAUSE FOR DISCIPLINE**

24 **(Inadequate Records)**

25 20. By reason of the facts and allegations set forth in the First and Second Causes for
26 Discipline above, Respondent is subject to disciplinary action under section 2266 of the Code, in
27 that Respondent failed to maintain adequate and accurate records of his care and treatment of
28 Patients 1, 2, and 3, as well as records of his self-prescribing of controlled substances.

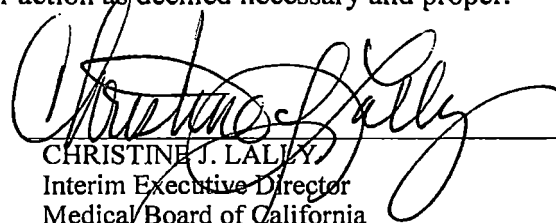
1 Respondent's records pertaining to Patients 1, 2, and 3 are also inadequate because they appear to
2 be "cut and pasted" from previous notes, and also fail to attach electronic signatures to the
3 progress notes, which makes it difficult to know for certain which provider saw the patient at a
4 given visit.

5 **PRAYER**

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

- 8 1. Revoking or suspending Physician's and Surgeon's Certificate Number A56418,
9 issued to Ravindra Moharpal Gautam, M.D.;
- 10 2. Revoking, suspending or denying approval of Ravindra Moharpal Gautam, M.D.'s
11 authority to supervise physician assistants, pursuant to section 3527 of the Code, or advanced
12 practice nurses;
- 13 3. Ordering Ravindra Moharpal Gautam, M.D., if placed on probation, to pay the Board
14 the costs of probation monitoring; and
- 15 4. Taking such other and further action as deemed necessary and proper.

16
17 DATED: **MAR 18 2020**


18 CHRISTINE J. LALLY
19 Interim Executive Director
20 Medical Board of California
21 Department of Consumer Affairs
22 State of California
23 Complainant

24
25
26
27
28
54131039.docx