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

In the Matter of the Case Against:  
**Neelesh Ajit Tipnis, M.D.**  
**University of Mississippi Medical Center**  
**2500 N. State St., S-049**  
**Jackson, MS 39216**  
  
**Physician's and Surgeon's**  
**Certificate No. A 71473**  
  
**Respondent.**

**Case No. 800-2020-064064**

**STIPULATION FOR  
SURRENDER OF LICENSE**

**TO ALL PARTIES:**

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

1. Complainant, William Prasifka, is the Executive Director of the Medical Board of California, Department of Consumer Affairs ("Board").
2. Neelesh Ajit Tipnis, M.D. ("Respondent") has carefully read and fully understands the effect of this Stipulation.
3. Respondent agrees that based on the action taken by the Mississippi State Board of Medical Licensure, (Exhibit A) cause exists to discipline his California Physician's and Surgeon's certificate pursuant to Business and Professions Code sections 141(a) and 2305.
4. Respondent understands that, if proven at hearing, the charges and allegations under investigation would constitute cause for imposing discipline upon Respondent's license issued by the Board.

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1           5.       Respondent is aware of each of his rights, including the right to a hearing, the  
2 right to confront and cross-examine witnesses who would testify against Respondent, the right to  
3 testify and present evidence on his own behalf, as well as to the issuance of subpoenas to compel  
4 the attendance of witnesses and the production of documents, the right to contest any charges and  
5 allegations, and other rights which are accorded Respondent pursuant to the California  
6 Administrative Procedure Act (Gov. Code, §11500 et seq.) and other applicable laws, including  
7 the right to seek reconsideration, review by the superior court, and appellate review.  
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9           6.       In order to avoid the expense and uncertainty of a hearing, Respondent freely and  
10 voluntarily waives each and every one of these rights set forth above. Respondent hereby agrees  
11 to surrender Physician's and Surgeon's Certificate No. A 71473.

12           7.       Respondent understands that by signing this Stipulation he is enabling the Board  
13 to accept the surrender of his license without further process, as provided by section 11415.60(b)  
14 of the Government Code.

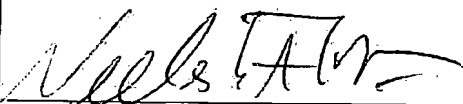
15           8.       Upon acceptance of the Stipulation by the Board, Respondent understands that he  
16 will no longer be permitted to practice as a Physician and Surgeon in California, and also agrees  
17 to surrender and cause to be delivered to the Board both his license and wallet certificate before  
18 the effective date of the Decision.

19           9.       Respondent hereby represents that he does not intend to seek relicensure or  
20 reinstatement as a Physician and Surgeon. Respondent fully understands and agrees, however,  
21 that if Respondent ever files an application for relicensure or reinstatement in the State of  
22 California, the Board shall treat it as a Petition for Reinstatement, and the Respondent must  
23 comply with all the laws, regulations and procedures for reinstatement of a revoked license in  
24 effect at the time the Petition is filed. Case Report No. 800-2020-064064, including all  
25 referenced attachments and other exhibits, and any additional attachments, and other exhibits,  
26 that may be generated subsequent to the filing of the surrender of license, shall be admissible as  
27 direct evidence, and any time based defenses, such as laches or any applicable statute of  
28 limitations, shall be waived when the Board determines whether to grant or deny the Petition.

1 10. Respondent understands that this document may be disclosed to the public, and/or  
2 the National Practitioner Data Bank and/or the Federation of State Medical Boards.  
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4 ACCEPTANCE

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6 I, Neelesh Ajit Tipnis, M.D., have carefully read the above Stipulation and enter into it  
7 freely and voluntarily, with the full knowledge of its force and effect, do hereby surrender  
8 Physician's and Surgeon's Certificate No. A 71473, to the Medical Board of California. By  
9 signing this Stipulation for Surrender of License, I recognize that upon its formal acceptance by  
10 the Board, I will lose all rights and privileges to practice as a Physician and Surgeon in the State  
11 of California, and I also will cause to be delivered to the Board both my license and wallet  
12 certificate before the effective date of the Decision.  
13

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15 Neelesh Ajit Tipnis, M.D.  
16 Respondent

7/14/2020

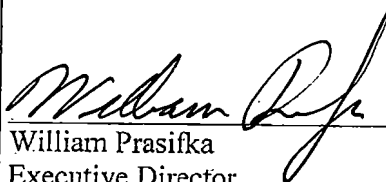
Date

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19 Attorney or Witness

7/14/2020

Date

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22 William Prasifka  
23 Executive Director  
24 Medical Board of California

JUL 17 2020

Date

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## **EXHIBIT A**

**BEFORE THE MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE**  
**IN THE MATTER OF THE PHYSICIAN'S LICENSE**  
**OF**  
**NEELESH AJIT TIPNIS, M.D.**

**SURRENDER OF MEDICAL LICENSE**

**WHEREAS, NEELESH AJIT TIPNIS, M.D.**, hereinafter referred to as "Licensee," is the current holder of Mississippi Medical License No. 22991 issued on August 5, 2013, to practice medicine in the State of Mississippi;

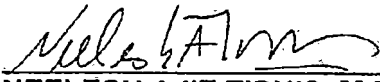
**WHEREAS**, Licensee wishes to voluntarily relinquish his right to practice medicine in the State of Mississippi due to allegations that Licensee violated a provision of the Medical Practice Act or the rules and regulations of the Board, that being acts of unprofessional conduct, specifically sexual misconduct;

**WHEREAS**, such conduct, if established in a due process hearing before the Board, is in violation of the Mississippi Medical Practice Act, specifically Miss. Code Ann., Section 73-25-29(8)(d) and Section 73-25-83(a), as amended for which the Mississippi State Board of Medical Licensure may revoke said license, or take any other action the Board may deem proper under the circumstances;

**NOW THEREFORE**, Licensee hereby voluntarily surrenders his medical license (No. 22991) to practice medicine in the State of Mississippi and understands said Surrender shall be effective immediately upon execution. Licensee understands this is an unconditional surrender and is reportable to

the National Practitioner Data Bank, and other entities such as the Federation of State Medical Boards and is a public record of the State of Mississippi.

**EXECUTED AND EFFECTIVE, this the 23<sup>rd</sup> day of January, 2020.**

  
\_\_\_\_\_  
**NEELESH AJIT TIPNIS, M.D.**