

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

In the Matter of the Accusation  
Against:

Joseph Kent Davidson, M.D.

Physician's & Surgeon's  
Certificate No G86649

Respondent

Case No. 800-2016-026032

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 February 24, 2021.

IT IS SO ORDERED January 25, 2021.

MEDICAL BOARD OF CALIFORNIA

By: 

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

1 XAVIER BECERRA  
Attorney General of California  
2 E. A. JONES III  
Supervising Deputy Attorney General  
3 JONATHAN NGUYEN  
Deputy Attorney General  
4 State Bar No. 263420  
California Department of Justice  
5 300 So. Spring Street, Suite 1702  
Los Angeles, CA 90013  
6 Telephone: (213) 269-6434  
Facsimile: (916) 731-2117  
7 *Attorneys for Complainant*

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

12 In the Matter of the Accusation Against:

13 **JOSEPH KENT DAVIDSON, M.D.**  
14 **P.O. Box 2614**  
**Pasadena, CA 91102**

15 **Physician's and Surgeon's Certificate No.**  
16 **G 86649**

17 Respondent.

Case No. 800-2016-026032

OAH No. 2019110976

18  
19 **STIPULATED SETTLEMENT AND**  
20 **DISCIPLINARY ORDER**

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. William Prasifka (Complainant) is the Executive Director of the Medical Board of  
25 California. He brought this action solely in his official capacity and is represented in this matter  
26 by Xavier Becerra, Attorney General of the State of California, by Jonathan Nguyen, Deputy  
27 Attorney General.

28 2. Respondent Joseph Kent Davidson, M.D. (Respondent) is represented in this  
proceeding by attorneys Carolyn Lindholm and Peter Osinoff, whose address is: BONNE  
BRIDGES et. al., 355 South Grand Avenue, Suite 1750, Los Angeles, CA 90071.

1 3. On or about September 25, 2002, the Medical Board of California issued Physician's  
2 and Surgeon's Certificate No. G 86649 to Respondent. The Physician's and Surgeon's Certificate  
3 was in full force and effect at all times relevant to the charges brought in Accusation No. 800-  
4 2016-026032 and will expire on January 31, 2022, unless renewed.

5 JURISDICTION

6 4. Accusation No. 800-2016-026032 was filed before the Medical Board of California  
7 (Board), Department of Consumer Affairs, and is currently pending against Respondent. The  
8 Accusation and all other statutorily required documents were properly served on Respondent on  
9 August 29, 2019. Respondent timely filed his Notice of Defense contesting the Accusation.

10 5. A copy of Accusation No. 800-2016-026032 is attached as exhibit A and incorporated  
11 herein by reference.

12 ADVISEMENT AND WAIVERS

13 6. Respondent has carefully read, fully discussed with counsel, and understands the  
14 charges and allegations in Accusation No. 800-2016-026032. Respondent has also carefully read,  
15 fully discussed with counsel, and understands the effects of this Stipulated Settlement and  
16 Disciplinary Order.

17 7. Respondent is fully aware of his legal rights in this matter, including the right to a  
18 hearing on the charges and allegations in the Accusation; the right to be represented by counsel at  
19 his own expense; the right to confront and cross-examine the witnesses against him; the right to  
20 present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel  
21 the attendance of witnesses and the production of documents; the right to reconsideration and  
22 court review of an adverse decision; and all other rights accorded by the California  
23 Administrative Procedure Act and other applicable laws.

24 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and  
25 every right set forth above.

26 CULPABILITY

27 9. Respondent does not contest that at an administrative hearing, complainant could  
28 establish a prima facie case with respect to the charges and allegations contained in Accusation

1 No. 800-2016-026032, and that he has thereby subjected his Physician's and Surgeon's Certificate  
2 No. G 86649 to disciplinary action.

3 10. Respondent agrees that his Physician's and Surgeon's Certificate No. G 86649 is  
4 subject to discipline and he agrees to be bound by the Board's imposition of discipline as set forth  
5 in the Disciplinary Order below.

6 RESERVATION

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

11 CONTINGENCY

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

22 13. The parties understand and agree that facsimile copies of this Stipulated Settlement  
23 and Disciplinary Order, including facsimile signatures thereto, shall have the same force and  
24 effect as the originals.

25 14. In consideration of the foregoing admissions and stipulations, the parties agree that  
26 the Board may, without further notice or formal proceeding, issue and enter the following  
27 Disciplinary Order:

28 ///

DISCIPLINARY ORDER

**A. PUBLIC REPRIMAND**

IT IS HEREBY ORDERED that Respondent Joseph Kent Davidson, M.D., Physician's and Surgeon's Certificate No. G 86649, shall be and is hereby Publicly Reprimanded, with terms and conditions below, pursuant to California Business and Professions Code section 2227, subdivision (a)(4). This Public Reprimand is issued in connection with Respondent's violations of the Medical Practice Act for his failure to perform and/or document an adequate physical examination of Patient A on August 24, 2016, as set forth in Accusation No. 800-2016-026032, attached as exhibit A and incorporated herein by reference.

**B. EDUCATION COURSE.**

Within sixty (60) calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for its prior approval educational program(s) or course(s) which shall not be less than 40 hours. The educational program(s) or course(s) shall be aimed at correcting any areas of deficient practice or knowledge and shall be Category I certified. The educational program(s) or course(s) shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure. Following the completion of each course, the Board or its designee may administer an examination to test Respondent's knowledge of the course. Respondent shall provide proof of attendance for sixty-five (65) hours of CME of which forty (40) hours were in satisfaction of this condition within one year of the effective date of this Decision.

**C. MEDICAL RECORD KEEPING COURSE.**

Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a course in medical record keeping approved in advance by the Board or its designee. Respondent shall provide the approved course provider with any information and documents that the approved course provider may deem pertinent. Respondent shall participate in and successfully complete the classroom component of the course not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully complete any other component of the course within one (1) year of enrollment. The medical record keeping course shall be at Respondent's expense and shall be in addition to the

1 Continuing Medical Education (CME) requirements for renewal of licensure.

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

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

11 Failure to attend and complete the medical record keeping course shall constitute general  
12 unprofessional conduct and shall be grounds for further disciplinary action.

13 **D. PROFESSIONALISM PROGRAM (ETHICS COURSE).** Within sixty (60)  
14 calendar days of the effective date of this Decision, Respondent shall enroll in a professionalism  
15 program, that meets the requirements of Title 16, California Code of Regulations section 1358.  
16 Respondent shall participate in and successfully complete that program. Respondent shall  
17 provide any information and documents that the program may deem pertinent. Respondent shall  
18 successfully complete the classroom component of the program not later than six (6) months after  
19 Respondent's initial enrollment, and the longitudinal component of the program not later than the  
20 time specified by the program, but no later than one (1) year after attending the classroom  
21 component. The professionalism program shall be at Respondent's expense and shall be in  
22 addition to the CME requirements for renewal of licensure.


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

28 Respondent shall submit a certification of successful completion to the Board or its

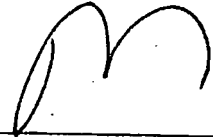
1 designee not later than 15 calendar days after successfully completing the program or not later  
2 than 15 calendar days after the effective date of the Decision, whichever is later.

3 ACCEPTANCE

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

9  
10 DATED: 31 Oct 2020   
11 Joseph Kent Davidson, M.D.  
12 Respondent

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

16 DATED: 11/1/2020   
17 Peter Osinoff  
18 Attorney for Respondent

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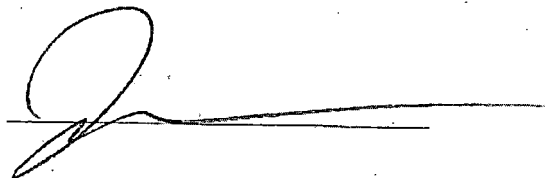
ENDORSEMENT

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

Dated: 11/2/2020

Respectfully submitted,

XAVIER BECERRA  
Attorney General of California  
E. A. JONES III  
Supervising Deputy Attorney General



JONATHAN NGUYEN  
Deputy Attorney General  
*Attorneys for Complainant*

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**Exhibit A**

**Accusation No. 800-2016-026032**

1 XAVIER BECERRA  
Attorney General of California  
2 E. A. JONES III  
Supervising Deputy Attorney General  
3 State Bar No. 71375  
California Department of Justice  
4 300 So. Spring Street, Suite 1702  
Los Angeles, CA 90013  
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6 *Attorneys for Complainant*

FILED  
STATE OF CALIFORNIA  
MEDICAL BOARD OF CALIFORNIA  
SACRAMENTO Aug 29 20 19  
BY                      ANALYST

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

11 In the Matter of the Accusation Against:

Case No. 800-2016-026032

12 **Joseph Kent Davidson, M.D.**  
13 **P.O. Box 2614**  
**Pasadena, CA 91102**

**A C C U S A T I O N**

14 **Physician's and Surgeon's**  
15 **Certificate No. G 86649,**

16 Respondent.

17 **PARTIES**

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

21 2. On or about September 25, 2002, the Medical Board issued Physician's and Surgeon's  
22 Certificate Number G 86649 to Joseph Kent Davidson, M.D. (Respondent). The Physician's and  
23 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought  
24 herein and will expire on January 31, 2020, unless renewed.

25 **JURISDICTION**

26 3. This Accusation is brought before the Board, under the authority of the following  
27 laws. All section references are to the Business and Professions Code (Code) unless otherwise  
28 indicated.

1 **STATUTORY PROVISIONS**

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

6 5. Section 2004 of the Code states:

7 The board shall have the responsibility for the following:

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

10 (b) The administration and hearing of disciplinary actions.

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

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

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

15 (f) Approving undergraduate and graduate medical education programs.

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

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

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

20 6. Section 2220 of the Code states:

21 Except as otherwise provided by law, the board may take action against all  
22 persons guilty of violating this chapter. The board shall enforce and administer this  
23 article as to physician and surgeon certificate holders, including those who hold  
certificates that do not permit them to practice medicine, such as, but not limited to,  
retired, inactive, or disabled status certificate holders, and the board shall have all the  
powers granted in this chapter for these purposes including, but not limited to:

24 (a) Investigating complaints from the public, from other licensees, from health  
25 care facilities, or from the board that a physician and surgeon may be guilty of  
unprofessional conduct. The board shall investigate the circumstances underlying a  
26 report received pursuant to Section 805 or 805.01 within 30 days to determine if an  
interim suspension order or temporary restraining order should be issued. The board  
27 shall otherwise provide timely disposition of the reports received pursuant to Section  
805 and Section 805.01.

28 (b) Investigating the circumstances of practice of any physician and surgeon

1 where there have been any judgments, settlements, or arbitration awards requiring the  
2 physician and surgeon or his or her professional liability insurer to pay an amount in  
3 damages in excess of a cumulative total of thirty thousand dollars (\$30,000) with  
4 respect to any claim that injury or damage was proximately caused by the physician's  
5 and surgeon's error, negligence, or omission.

6 (c) Investigating the nature and causes of injuries from cases which shall be  
7 reported of a high number of judgments, settlements, or arbitration awards against a  
8 physician and surgeon.

9 7. Section 2234 of the Code, states:

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

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

15 (b) Gross negligence.

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

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

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

28 (d) Incompetence.

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

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

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

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

8. Section 2266 of the Code states: "The failure of a physician and surgeon to maintain

1 adequate and accurate records relating to the provision of services to their patients constitutes  
2 unprofessional conduct.”

3 **FACTUAL ALLEGATIONS**

4 **Patient A**

5 9. On or about August 24, 2016, Respondent, a surgeon, saw Patient A,<sup>1</sup> an 72-year-old  
6 man, after being referred by another doctor for evaluation of fluctuating droopy eyelids, recurring  
7 and worsening following a previous eyebrow surgery performed on or about February 20, 2015.  
8 The patient’s past ocular history included dry eyes. The record of the exam itself is limited to an  
9 external examination and confrontation of visual fields. There was no documentation of visual  
10 acuity. The patient stated that he could see better with his eyelids lifted manually. The patient’s  
11 past medical history is positive for hypertension, diabetes type 2, and anxiety. In his complaint  
12 form filed by the patient, the patient included, “heart issues.”

13 10. However, several elements were missing from the records for this type of  
14 examination, including documentation of the patient’s visual acuity, slit lamp exam (to search for  
15 dry eyes since this was one of the concerns raised by the physician), external exam with  
16 measurements of eyelid fissure, marginal reflex distance (MRD), and levator muscle function.  
17 Eyelid fissure, MRD, and levator function are essential parts of an oculoplastic evaluation in this  
18 circumstance. Thus, Respondent’s medical records for Patient A failed to include all of the  
19 essential elements for an oculoplastic exam here.

20 11. External photographs contained only left eye 45 degree angles and frontal views.  
21 However, Respondent should have obtained photographs of the patient’s full face front view and  
22 both right and left eye 45 degree photos. The record further states “No surgery by JKD on this  
23 patient . . . patient cancelled surgery at last minute today, so discount no longer valid . . . .”

24 12. Respondent also failed to adequately diagnose, document (measurements of lid  
25 fissure, MRD, levator function, position of the brows, visual fields, external photos), and/or  
26 formulate a surgical plan and discuss the options with the patient. Regarding Respondent’s plan  
27 (including anticipated billing), Respondent’s plan should have included an attempt to initially bill

28 <sup>1</sup> Patient names are anonymized based on privacy concerns.

1 Medicare and/or insurance companies for surgical procedures with documentation of medical  
2 necessity, before billing the patient directly. His preoperative discussions with the patient should  
3 have also included the patient's acknowledgement of the so-called Advanced Beneficiary Notice  
4 of Noncoverage (ABN, form CMS-R-131).<sup>2</sup> Physicians are required to provide ABNs in  
5 connection with services that Medicare may not cover. The ABN should acknowledge that  
6 coverage is uncertain and stipulate that the patient promises to pay the bill if Medicare does not.  
7 This information allows a patient to make a more informed choice as to whether to undergo the  
8 procedure and pay for the service.

9 13. The medical records also describe "droopy lids OU," unspecified ptosis right/left eye,  
10 and brow ptosis as interchangeable terms. Due to Respondent's inadequate evaluation and record  
11 keeping (namely, the absences of the patient's lid fissure measurements, MRD, and levator  
12 function measurements), it is difficult for a subsequent reviewer to evaluate and determine which  
13 procedure would be more appropriate. Respondent's Plan stated, "No surgery by JKD on this  
14 patient," and later in the same paragraph, recommended direct brow lift both eyes with a cash  
15 price of \$3,900. When the patient was reluctant due to cost, he recommended a direct brow lift<sup>3</sup>  
16 on the right eye only for \$1,500 and to bill Medicare for a browpexy<sup>4</sup> on the left eye. However,  
17 there was no discussion of an ABN form from Medicare. The medical records fail to explain why  
18 the direct brow lift (CPT code 67900, CPT Plus, 2011 ed.) would not be first billed to Medicare.  
19 That CPT code is a functional and reconstructive surgery code recognized by Medicare as  
20 medically necessary if the condition interferes with vision. Indeed, the patient had the same  
21 procedure performed on February 20, 2015, at USC (scars visible on the photograph) using the  
22 same billing code.

23 ///

24 \_\_\_\_\_  
25 <sup>2</sup> This form serves to document that the patient is aware that Medicare usually covers the  
surgery, but in the event the claim is denied, the patient would be responsible for the payments.

26 <sup>3</sup> Direct brow lift is a procedure in which an ellipse of skin above the brow is removed and  
27 the brow is anchored above the orbital rim. The skin is then closed giving further lift to the brow  
and upper eyelid complex.

28 <sup>4</sup> Browpexy is a procedure similar to the direct brow lift, but no skin is removed.

1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Repeated Negligent Acts)**

3 14. Respondent Joseph Kent Davidson, M.D. is subject to disciplinary action under Code  
4 section 2234, subdivision (c), in that Respondent committed repeated negligent acts. The  
5 circumstances are as follows:

6 15. The facts and circumstances are as set forth in paragraphs 9 through 13 inclusive  
7 above, are incorporated by reference herein as if fully set forth.

8 16. Respondent's acts and/or omissions as set forth in this First Cause for Discipline,  
9 whether proven individually, jointly, or in any combination thereof, constitute repeated negligent  
10 acts.

11 17. Respondent was negligent when he failed to perform and/or document an adequate  
12 physical examination of the patient.

13 18. Respondent was negligent when he failed to adequately inform and/or provide to  
14 Patient A, an Advanced Beneficiary Notice of Non-coverage, and/or, failed to adequately inform  
15 and/or provide to Patient A, the option of billing Medicare before billing him, and/or, attempted  
16 to directly bill the patient for services covered by Medicare (CPT code 67900 - brow lift)

17 **SECOND CAUSE FOR DISCIPLINE**

18 **(Failure to Maintain Adequate Medical Records)**

19 19. Respondent is subject to disciplinary action under Code section 2266 in that  
20 Respondent failed to maintain adequate and accurate records related to the provision of medical  
21 services to a patient. The circumstances are as follows:

22 20. The allegations of the First Cause for Discipline are incorporated herein by reference  
23 as if fully set forth.

24 21. Respondent failed to adequately document his medical care for Patient A.

25 **THIRD CAUSE FOR DISCIPLINE**

26 **(General Unprofessional Conduct)**

27 22. Respondent is subject to disciplinary action under Code section 2234, in that his  
28 actions and/or omissions represent unprofessional conduct, generally. The circumstances are as

1 follows:


2 23. The allegations of the First and Second Causes for Discipline, inclusive, are  
3 incorporated herein by reference as if fully set forth.

4 PRAYER

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

- 7 1. Revoking or suspending Physician's and Surgeon's Certificate Number G 86649,  
8 issued to Joseph Kent Davidson, M.D.;
- 9 2. Revoking, suspending or denying approval of Joseph Kent Davidson, M.D.'s  
10 authority to supervise physician assistants and advanced practice nurses;
- 11 3. Ordering Joseph Kent Davidson, M.D., if placed on probation, to pay the Board the  
12 costs of probation monitoring; and
- 13 4. Taking such other and further action as deemed necessary and proper.

14  
15 DATED: August 29, 2019

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

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