

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

In the Matter of the Accusation
Against:

Toufan Razi, M.D.

Physician's & Surgeon's
Certificate No A 82682

Respondent

Case No. 800-2017-034818

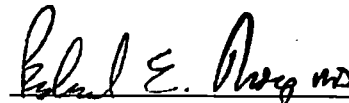
DECISION

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 December 2, 2021.

IT IS SO ORDERED November 2, 2021.

MEDICAL BOARD OF CALIFORNIA



Richard E. Thorp, M.D., Chair
Panel B

1 ROB BONTA
Attorney General of California
2 JANE ZACK SIMON
Supervising Deputy Attorney General
3 CAITLIN ROSS
Deputy Attorney General
4 State Bar No. 271651
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5 San Francisco, CA 94102-7004
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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 **TOUFAN RAZI, M.D.**
14 **P.O. Box 1994**
San Leandro, CA 94577

15 **Physician's and Surgeon's Certificate**
16 **No. A 82682**

Respondent.

Case No. 800-2017-034818

OAH No. 2021060088

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

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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. William Prasifka (Complainant) is the Executive Director of the Medical Board of
23 California (Board). He brought this action solely in his official capacity and is represented in this
24 matter by Rob Bonta, Attorney General of the State of California, by Caitlin Ross, Deputy
25 Attorney General.

26 2. Respondent Toufan Razi, M.D. (Respondent) is represented in this proceeding by
27 attorney Robert W. Hodges, Esq., whose address is: 3480 Buskirk Avenue, Suite 250
28 Pleasant Hill, CA 94523

1 may be used in lieu of original documents and signatures and, further, that such copies shall have
2 the same force and effect as originals.

3 16. In consideration of the foregoing admissions and stipulations, the parties agree that
4 the Board may, without further notice or opportunity to be heard by the Respondent, issue and
5 enter the following Disciplinary Order:

6 **DISCIPLINARY ORDER**

7 **A. PUBLIC REPRIMAND**

8 IT IS HEREBY ORDERED that the Respondent, Toufan Razi, M.D., Physician's and
9 Surgeon's Certificate No. A 82682, shall and hereby is publicly reprimanded pursuant to
10 California Business and Profession Code, section 2227, subdivision (a)(4). This Public
11 Reprimand, which is issued in connection with Respondent's conduct as set forth in Accusation
12 No. 800-2017-034818, is as follows: Pursuant to Business and Professions Code sections 2234
13 and 2234, subdivision (c), you demonstrated unprofessional conduct through your repeated
14 negligent acts in the treatment of Patient 1 and Patient 2 by prescribing high dosages of opioids,
15 especially methadone, where the benefits did not appear to outweigh the risks and without
16 recommending overdose-prevention medication. For Patient 1, you also continued to prescribe
17 high amounts of opiates, including methadone, while another provider was simultaneously
18 prescribing benzodiazepines. Consequently, the Board issues this Public Reprimand.

19 **B. IT IS FURTHER ORDERED**

20 1. **PRESCRIBING PRACTICES COURSE.** Within 60 calendar days of the effective
21 date of this Decision, Respondent shall enroll in a course in prescribing practices approved in
22 advance by the Board or its designee. Respondent shall provide the approved course provider
23 with any information and documents that the approved course provider may deem pertinent.
24 Respondent shall participate in and successfully complete the classroom component of the course
25 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully
26 complete any other component of the course within one (1) year of enrollment. The prescribing
27 practices course shall be at Respondent's expense and shall be in addition to the Continuing
28 Medical Education (CME) requirements for renewal of licensure.

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

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

9 Failure to enroll, participate in, or successfully complete the prescribing practices course
10 within the designated time period shall constitute unprofessional conduct and grounds for further
11 disciplinary action.

12 2. MEDICAL RECORD KEEPING COURSE. Within 60 calendar days of the effective
13 date of this Decision, Respondent shall enroll in a course in medical record keeping approved in
14 advance by the Board or its designee. Respondent shall provide the approved course provider
15 with any information and documents that the approved course provider may deem pertinent.
16 Respondent shall participate in and successfully complete the classroom component of the course
17 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully
18 complete any other component of the course within one (1) year of enrollment. The medical
19 record keeping course shall be at Respondent's expense and shall be in addition to the Continuing
20 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 Failure to enroll, participate in, or successfully complete the medical records course within
2 the designated time period shall constitute unprofessional conduct and grounds for further
3 disciplinary action.

4 3. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for
5 a new license or certification, or petition for reinstatement of a license, by any other health care
6 licensing action agency in the State of California, all of the charges and allegations contained in
7 Accusation No. 800-2017-034818 shall be deemed to be true, correct, and admitted by
8 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or
9 restrict license.

10 **ACCEPTANCE**

11 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
12 discussed it with my attorney, Robert W. Hodges, Esq. I understand the stipulation and the effect
13 it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement
14 and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the
15 Decision and Order of the Medical Board of California.


16
17 DATED: 9/15/21



TOUFAN RAZI, M.D.
Respondent

19 I have read and fully discussed with Respondent Toufan Razi, M.D. the terms and
20 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
21 I approve its form and content.

22 DATED: 9/21/21



ROBERT W. HODGES, ESQ.
Attorney for Respondent

24 **ENDORSEMENT**

25 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully

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submitted for consideration by the Medical Board of California.

DATED: 9-21-21

Respectfully submitted,
ROB BONTA
Attorney General of California
JANE ZACK SIMON
Supervising Deputy Attorney General

CAITLIN ROSS
Deputy Attorney General
Attorneys for Complainant.

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Exhibit A

1 XAVIER BECERRA
Attorney General of California
2 JANE ZACK SIMON
Supervising Deputy Attorney General
3 CAITLIN ROSS
Deputy Attorney General
4 State Bar No. 271651
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7 Attorneys for Complainant

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

12 In the Matter of the Accusation Against:

Case No. 800-2017-034818

13 **Toufan Razi, M.D.**
14 **P.O. Box 1994**
San Leandro, CA 94577

A C C U S A T I O N

15 **Physician's and Surgeon's Certificate**
16 **No. A 82682,**

17 Respondent.

18
19
20 **PARTIES**

21 1. William Prasifka (Complainant) brings this Accusation solely in his official capacity
22 as the Executive Director of the Medical Board of California, Department of Consumer Affairs
23 (Board).

24 2. On or about April 11, 2003, the Medical Board issued Physician's and Surgeon's
25 Certificate Number A 82682 to Toufan Razi, M.D. (Respondent). The Physician's and Surgeon's
26 Certificate was in full force and effect at all times relevant to the charges brought herein and will
27 expire on March 31, 2021, unless renewed.

1 FIRST CAUSE FOR DISCIPLINE

2 (Unprofessional Conduct and/or Repeated Negligent Acts)

3 (Patient 1)¹

4 7. Respondent Toufan Razi, M.D. is subject to disciplinary action under sections 2234
5 [unprofessional conduct] and/or 2234(c) [repeated negligent acts] in the care of Patient 1. The
6 circumstances are as follows:

7 8. In March 2015, Respondent began treating Patient 1, a woman in her 50s, for pain
8 arising from an alleged work-related injury.

9 9. In June 2015, Respondent prescribed oxycodone² to Patient 1. Oxycodone is an
10 opiate.

11 10. Opiates have the potential for being abused. Tolerance and psychological and
12 physical dependence on opiates may develop upon repeated administration that can alter mental
13 function and produce drug dependence.

14 11. Respondent continued to prescribe oxycodone, and twice increased the dosage. In
15 November 2015, when the oxycodone/acetaminophen dose was four 10-325 mg tablets a day,
16 Respondent additionally prescribed a fentanyl patch.³ Fentanyl is a powerful opiate that, like
17 oxycodone, can alter mental function, produce drug dependence, and has the potential for abuse.
18 Use of multiple opiates compounds these risks and increases the chance of overdose. The
19 CURES records⁴ show that on November 18, 2015, Patient 1 filled both a prescription for a 30-
20 day supply of 120 tablets of 10-325 oxycodone/acetaminophen and a 30-day supply of ten 25
21 mcg/hour fentanyl patches.

22 _____
23 ¹ Patient names are withheld for privacy concerns and are available to Respondent.

24 ² Oxycodone with acetaminophen (trade name Percocet) is indicated for certain types of
25 pain. The 10/325 reflects that each pill contains 10 mg of oxycodone and 325 mg of
26 acetaminophen. Oxycodone is a narcotic. It is a dangerous drug as defined in section 4022 and a
27 Schedule II controlled substance as defined in section 11055 of the Health and Safety Code.

28 ³ The fentanyl patch is a transdermal system containing fentanyl, an opioid used to treat
certain types of pain. It is a dangerous drug as defined in section 4022 and a Schedule II
controlled substance as defined in section 11055 of the Health and Safety Code.

⁴ The Controlled Substance Utilization Review and Evaluation System (CURES) is a
database of Schedule II, III and IV controlled substance prescription dispensed in California
serving the public health, regulatory oversight agencies, and law enforcement.

1 12. On November 25, 2015, Respondent's medical records for Patient 1 reflected a
2 benzodiazepine (clonazepam)⁵ prescription from a different provider. Like opiates,
3 benzodiazepines can alter mental function, produce drug dependence, and have the potential for
4 abuse. Combining benzodiazepines with opiates can significantly increase the risk of overdose,
5 including by opioid-induced respiratory depression. The benzodiazepine prescription remained in
6 Patient 1's medical records until April 2017, and again in January 2018. Respondent knew about
7 the benzodiazepine prescription, but continued prescribing opiates to Patient 1.

8 13. Respondent also started prescribing methadone⁶ to Patient 1. In January 2016,
9 Respondent prescribed a 30-day supply of 5 mg of methadone, four times a day. Methadone is a
10 particularly risky opiate, given its instability that makes it potentially more dangerous than other
11 opiates. In this same month, CURES shows that Patient 1 also filled prescriptions for 30-day
12 supplies of oxycodone (120 tablets) and the fentanyl patch (10 patches). The benzodiazepine
13 prescription also continued in this month.

14 14. The next month, Respondent did not prescribe fentanyl, but did double the methadone
15 prescription to 10 mg, four times a day. He then continued to frequently prescribe methadone to
16 Patient 1 in 30-day supplies. The benzodiazepine prescription from the other provider continued
17 to be frequently prescribed.

18 15. Respondent continued prescribing various opiates to Patient 1, adding and
19 discontinuing various opiates, and lowering the amounts for various opiates.

20 16. Respondent is guilty of unprofessional conduct and subject to disciplinary action
21 under sections 2234 [unprofessional conduct] and/or 2234(c) [repeated negligent acts] based on,
22 but not limited to, the following conduct:

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25 ⁵ Clonazepam, also known by the trade name Klonopin, is a benzodiazepine used for the
26 management of certain types of anxiety disorders for the short-term relief of symptoms. It is a
27 dangerous drug as defined in section 4022 and a Schedule IV controlled substance as defined in
28 Health and Safety Code section 11057. It is a central nervous system depressant.

⁶ Methadone is an opioid medication and is used for certain types of pain and as part of
drug addiction detoxification and maintenance programs. It is a dangerous drug as defined in
Business and Professions Code section 4022 and a Schedule II controlled substance and narcotic
as defined in section 11055 of the Health and Safety Code.

1 A. Respondent prescribed high dosages of opioids, especially methadone, where the
2 records reflected that the benefits did not appear to outweigh the risks.

3 B. Respondent prescribed high dosages of opiates, especially methadone, but did not
4 recommend naloxone, a medication used to block the effect of opioids and prevent overdose.

5 C. Respondent continued prescribing high amounts of opiates, including methadone,
6 while another provider was simultaneously prescribing benzodiazepines.

7 **SECOND CAUSE FOR DISCIPLINE**

8 **(Unprofessional Conduct and/or Repeated Negligent Acts)**

9 **(Patient 2)**

10 17. Paragraphs 1-16 are incorporated as set forth herein.

11 18. Respondent Toufan Razi, M.D. is subject to disciplinary action under sections 2234
12 [unprofessional conduct] and/or 2234(c) [repeated negligent acts] in the care of Patient 2. The
13 circumstances are as follows:

14 19. After three visits in 2010 and a visit in 2012, the medical records reflect that
15 Respondent treated Patient 2 as a new patient in October 2015. Respondent treated Patient 2 for a
16 chief complaint of severe headaches. At the time, Patient 2 was a male in his 30s.

17 20. In order to treat Patient 2's complaint of severe headaches, Respondent prescribed the
18 opiate methadone. As explained above, opiates have the potential for being abused. Tolerance
19 and psychological and physical dependence on opiates may develop upon repeated administration
20 that can alter mental function and produce drug dependence. And methadone is a particularly
21 risky opiate, given its volatility that makes it potentially more dangerous than other opiates.

22 21. In October 2015, Respondent initially prescribed 10 mg of methadone per day.
23 Respondent steadily increased the quantity, and by March 2017, Respondent prescribed 90 mg of
24 methadone to Patient 2, with an option for Patient 2 to take an extra 10 mg as needed for pain.
25 This constituted prescribing 300 tablets of methadone as a 30-day supply.

26 22. Respondent continued prescribing 90 mg of methadone per day, plus an extra 10 mg
27 if necessary, as 30-day supplies, for a few more months. The CURES report for Patient 2 shows
28 that 10 times between March 11, 2017 and September 1, 2017, Patient 2 filled prescriptions from

1 Respondent (or his supervised physician assistant) for either 30-day supplies of 300 tablets of 10
2 mg methadone, or 15-or 16-day supplies of 150 tablets of 10 mg methadone. This period both
3 followed and preceded additional periods of Respondent prescribing methadone to Patient 2.
4 Respondent did eventually attempt to wean Patient 2 off the methadone.

5 23. Respondent is guilty of unprofessional conduct and subject to disciplinary action
6 under sections 2234 [unprofessional conduct] and/or 2234(c) [repeated negligent acts] based on,
7 but not limited to, the following conduct:

8 A. Respondent prescribed high dosages of opioids, especially methadone, where the
9 records reflected that the benefits did not appear to outweigh the risks.

10 B. Respondent prescribed high dosages of opiates, especially methadone, but did not
11 recommend naloxone, a medication used to block the effect of opioids and prevent overdose.

12 **PRAYER**

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

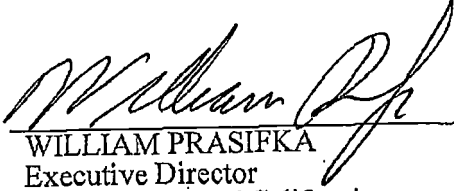
15 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 82682,
16 issued to Toufan Razi, M.D.;

17 2. Revoking, suspending or denying approval of Toufan Razi, M.D.'s authority to
18 supervise physician assistants and advanced practice nurses;

19 3. Ordering Toufan Razi, M.D., if placed on probation, to pay the Board the costs of
20 probation monitoring; and

21 4. Taking such other and further action as deemed necessary and proper.

22
23 DATED: JUL 16 2020

24 
25 WILLIAM PRASIFKA
26 Executive Director
27 Medical Board of California
28 Department of Consumer Affairs
State of California
Complainant

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