

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

**In the Matter of the Accusation
Against:**

Shankar Ningappa Hittalmani, M.D.

**Physician's and Surgeon's
Certificate No. A 35513**

Respondent.

Case No. 800-2018-042671

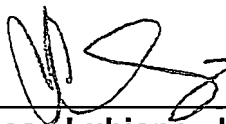
DECISION

**The attached Stipulated Settlement 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 March 20, 2022.

IT IS SO ORDERED February 18, 2022.

MEDICAL BOARD OF CALIFORNIA



**Laurie Rose Lubiano, J.D.
Panel A**

1 ROB BONTA
Attorney General of California
2 E. A. JONES III
Supervising Deputy Attorney General
3 TRINA L. SAUNDERS
Deputy Attorney General
4 State Bar No. 207764
California Department of Justice
5 300 So. Spring Street, Suite 1702
Los Angeles, CA 90013
6 Telephone: (213) 269-6516
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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 SHANKAR NINGAPPA HITTALMANI,
M.D.
14 21055 Nashville Street
Chatsworth, CA 91311

15 Physician's and Surgeon's Certificate No. A
16 35513,

17 Respondent.

Case No. 800-2018-042671

OAH No. 2020120082

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

18
19
20 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
21 entitled proceedings that the following matters are true:

22 **PARTIES**

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

27 2. Respondent Shankar Ningappa Hittalmani, M.D. (Respondent) is represented in this
28 proceeding by attorney Peter R. Osinoff, Esq., whose address is 355 South Grand Avenue, Suite

1 1750, Los Angeles, CA 90071-1562

2 3. On or about July 8, 1980, the Board issued Physician's and Surgeon's Certificate No.
3 A 35513 to Shankar Ningappa Hittalmani, M.D. (Respondent). The Physician's and Surgeon's
4 Certificate was in full force and effect at all times relevant to the charges brought in Accusation
5 No. 800-2018-042671, and will expire on February 28, 2022, unless renewed.

6 **JURISDICTION**

7 4. Accusation No. 800-2018-042671 was filed before the Board, and is currently
8 pending against Respondent. The Accusation and all other statutorily required documents were
9 properly served on Respondent on September 14, 2020. Respondent timely filed his Notice of
10 Defense contesting the Accusation.

11 5. A copy of Accusation No. 800-2018-042671, is attached as exhibit A and
12 incorporated herein by reference.

13 **ADVISEMENT AND WAIVERS**

14 6. Respondent has carefully read, fully discussed with counsel, and understands the
15 charges and allegations in Accusation No. 800-2018-042671. Respondent has also carefully read,
16 fully discussed with his counsel, and understands the effects of this Stipulated Settlement and
17 Disciplinary Order.

18 7. Respondent is fully aware of his legal rights in this matter, including the right to a
19 hearing on the charges and allegations in the Accusation; the right to confront and cross-examine
20 the witnesses against him; the right to present evidence and to testify on his own behalf; the right
21 to the issuance of subpoenas to compel the attendance of witnesses and the production of
22 documents; the right to reconsideration and court review of an adverse decision; and all other
23 rights accorded by the California 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 understands and agrees that the charges and allegations in Accusation
28 No. 800-2018-042671, if proven at a hearing, constitute cause for imposing discipline upon his

1 Physician's and Surgeon's Certificate.

2 10. For the purpose of resolving the Accusation without the expense and uncertainty of
3 further proceedings, Respondent agrees that, at a hearing, Complainant could establish a prima
4 facie case for the charges in the Accusation, and that Respondent hereby gives up his right to
5 contest those charges.

6 11. 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 **CONTINGENCY**

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

20 13. This Stipulated Settlement and Disciplinary Order is intended by the parties herein
21 to be an integrated writing representing the complete, final, and exclusive embodiment of the
22 agreements of the parties in the above-entitled matter.

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

26 15. In consideration of the foregoing admissions and stipulations, the parties agree that
27 the Board may, without further notice or opportunity to be heard by the Respondent, issue and
28 enter the following Disciplinary Order:

1 **DISCIPLINARY ORDER**

2 **PUBLIC REPRIMAND**

3 **IT IS HEREBY ORDERED** that Physician's and Surgeon's Certificate No. A 35513
4 issued to Respondent Shankar Ningappa Hittalmani, M.D. is publicly reprimanded pursuant to
5 California Business and Professions Code section 2227, subdivision (a)(4). This Public
6 Reprimand, which is issued in connection with Respondent's care and treatment of one patient, as
7 set forth in Accusation No. 800-2018-042671, states as follows:

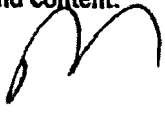
8 In 2015, you were negligent, in that you failed to take steps to appropriately test for and
9 exclude pulmonary embolism from the differential diagnosis of a patient who presented to urgent
10 care with tachycardia and hypoxia. You also negligent in that you failed to admit this patient to a
11 hospital to rule out a cardiac cause of the patient's abnormal vital signs and concerning history.

12 **ACCEPTANCE**

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

18
19 DATED: 6-11-2021 Shankar N. Hittalmani M.D.
20 SHANKAR NINGAPPA HITTALMANI, M.D.
Respondent

21 I have read and fully discussed with Respondent Shankar Ningappa Hittalmani, M.D. the
22 terms and conditions and other matters contained in the above Stipulated Settlement and
23 Disciplinary Order. I approve its form and content.

24
25 DATED: 6/11/2021 
26 PETER R. OSINOFF, ESQ.
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.

DATED: June 14, 2021

Respectfully submitted,

ROB BONTA
Attorney General of California
E. A. JONES III
Supervising Deputy Attorney General



TRINA L. SAUNDERS
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 800-2018-042671

1 XAVIER BECERRA
Attorney General of California
2 E. A. JONES III
Supervising Deputy Attorney General
3 TRINA L. SAUNDERS
Deputy Attorney General
4 State Bar No. 207764
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5 300 So. Spring Street, Suite 1702
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6 Telephone: (213) 269-6516
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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. 800-2018-042671

13 Shankar Ningappa Hittalmani, M.D.
14 21055 Nashville Street
Chatsworth, CA 91311-1447

A C C U S A T I O N

15 Physician's and Surgeon's Certificate
16 No. A 35513,

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 July 8, 1980, the Medical Board issued Physician's and Surgeon's
25 Certificate Number A 35513 to Shankar Ningappa Hittalmani, M.D. (Respondent). The
26 Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the
27 charges brought herein and will expire on February 28, 2022, unless renewed.

28 ///

JURISDICTION

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

5 4. Section 2227 of the Code states:

6 (a) A licensee whose matter has been heard by an administrative law judge of
7 the Medical Quality Hearing Panel as designated in Section 11371 of the Government
8 Code, or whose default has been entered, and who is found guilty, or who has entered
9 into a stipulation for disciplinary action with the board, may, in accordance with the
10 provisions of this chapter:

11 (1) Have his or her license revoked upon order of the board.

12 (2) Have his or her right to practice suspended for a period not to exceed one
13 year upon order of the board.

14 (3) Be placed on probation and be required to pay the costs of probation
15 monitoring upon order of the board.

16 (4) Be publicly reprimanded by the board. The public reprimand may include a
17 requirement that the licensee complete relevant educational courses approved by the
18 board.

19 (5) Have any other action taken in relation to discipline as part of an order of
20 probation, as the board or an administrative law judge may deem proper.

21 (b) Any matter heard pursuant to subdivision (a), except for warning letters,
22 medical review or advisory conferences, professional competency examinations,
23 continuing education activities, and cost reimbursement associated therewith that are
24 agreed to with the board and successfully completed by the licensee, or other matters
25 made confidential or privileged by existing law, is deemed public, and shall be made
26 available to the public by the board pursuant to Section 803.1.

27 5. Section 2234 of the Code, states:

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

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

 (b) Gross negligence.

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

 (1) An initial negligent diagnosis followed by an act or omission medically

1 appropriate for that negligent diagnosis of the patient shall constitute a single
2 negligent act.

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

8 (d) Incompetence.

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

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

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

16 CAUSE FOR DISCIPLINE

17 (Repeated Negligent Acts)

18 6. Respondent is subject to disciplinary action under section 2234, subdivision (c),
19 repeated negligent acts, in that he failed to include pulmonary embolism in his differential
20 diagnosis, despite the patient exhibiting signs of same. He also failed to transfer the patient to the
21 emergency room for the performance of necessary testing that was unable to be performed at the
22 urgent care center where he saw the patient. The circumstances are as follows:

23 7. On November 28, 2015, at approximately 5:44 p.m., a 61-year-old patient presented
24 to Lancaster Medical Offices Urgent Care of Kaiser Foundation Hospital for evaluation. He had
25 a history of four days of shortness of breath made worse with exertion, a near fainting episode,
26 and exertional chest pain of four hours duration. At approximately 5:59 p.m., a nurse noted that
27 the patient had a low oxygen saturation of 89%. The nurse placed the patient on 2 liters of nasal
28 cannula oxygen and his saturations improved. He reported feeling better at 6:49 p.m.

8. Respondent evaluated the patient. Respondent documented that the patient
complained of a dry non-productive cough for one week, but denied any chest pain, in
contradiction to the nursing documentation. Respondent confirmed that the patient complained of
shortness of breath and dizziness. His past medical history was significant for diabetes,

1 hypertension, coronary artery disease, and a prior myocardial infarction. The patient did not have
2 a history of asthma or chronic obstructive pulmonary disease and he quit smoking in 2004. The
3 patient had an elevated heart rate of 109 and an oxygen saturation of 95%. Despite their
4 recording in the record, Respondent was not aware of the patient's initial abnormal vital signs.

5 9. Respondent conducted a physical examination and ordered an appropriate workup,
6 including EKG, chest x-ray, and laboratory values. The patient's physical exam was
7 unremarkable. The EKG demonstrated left axis deviation, a right bundle branch block, and
8 nonspecific ST changes. His chest x-ray was unremarkable. His laboratory values were
9 unremarkable, and negative for troponin.

10 10. The patient was not treated with aspirin or nitroglycerin. These medications were not
11 available at the urgent care.

12 11. Respondent assessed that the patient likely had bronchitis, and his plan was for the
13 patient to follow up with his primary care physician. The patient was discharged at
14 approximately 8:23 p.m., on November 28, 2015.

15 12. On the evening of November 29, 2015, the patient had a cardiopulmonary arrest at
16 home. Paramedics were called. Resuscitative efforts were unsuccessful. The patient was
17 pronounced dead.

18 13. At the insistence of the patient's wife, an autopsy was performed on December 8,
19 2015. The cause of death was determined to be a large pulmonary embolism.

20 14. When the patient presented to the urgent care, the presence of tachycardia and
21 hypoxia suggested the possibility of other serious disease, such as pneumonia or pulmonary
22 embolism. Respondent did not consider the diagnosis of pulmonary embolism. Respondent
23 departed from the standard of care in his failure to consider the diagnosis of pulmonary embolism
24 and his subsequent failure to take steps to appropriately test for and exclude pulmonary embolism
25 from his differential diagnosis.

26 15. In the face of the patient's concerning history and abnormal vital sign findings, and
27 his meeting the criteria for hospital admission to rule out a cardiac cause of his symptoms,
28 Respondent did not admit the patient. Instead, he determined that the patient likely had

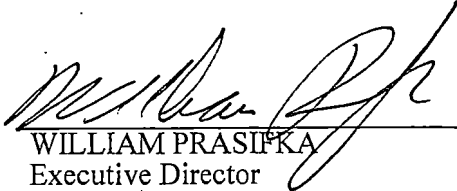
1 bronchitis, and simply advised him to follow up with his primary care physician. This constitutes
2 a departure from the standard of care.

3 **PRAYER**

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

- 6 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 35513,
7 issued to Shankar Ningappa Hittalmani, M.D.;
- 8 2. Revoking, suspending or denying approval of Shankar Ningappa Hittalmani, M.D.'s
9 authority to supervise physician assistants and advanced practice nurses;
- 10 3. Ordering Shankar Ningappa Hittalmani, M.D., if placed on probation, to pay the
11 Board the costs of probation monitoring; and
- 12 4. Taking such other and further action as deemed necessary and proper.

13
14 DATED: SEP 14, 2020


15 WILLIAM PRASIFKA
16 Executive Director
17 Medical Board of California
18 Department of Consumer Affairs
19 State of California
20 Complainant

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22 Updated Accusation - wSDAG edits and client edits.docx
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