

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

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

**William H. Bresnick, M.D.**

**Physician's & Surgeon's  
Certificate No. G 78434**

**Respondent.**

**Case No. 800-2017-029203**


**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 April 6, 2022.**

**IT IS SO ORDERED: March 7, 2022.**

**MEDICAL BOARD OF CALIFORNIA**



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

1 ROB BONTA  
Attorney General of California  
2 STEVEN D. MUNI  
Supervising Deputy Attorney General  
3 JANNSEN TAN  
Deputy Attorney General  
4 State Bar No. 237826  
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5 P.O. Box 944255  
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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 First Amended Accusation  
13 Against:

14 **WILLIAM H. BRESNICK, M.D.**  
15 **505 Montgomery St., Ste 1100**  
**San Francisco, CA 94111**

16 **Physician's and Surgeon's Certificate No. G**  
17 **78434**

18 Respondent.

Case No. 800-2017-029203

OAH No. 2020040865

**STIPULATED SETTLEMENT AND**  
**DISCIPLINARY ORDER**

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 Jannsen Tan, Deputy  
26 Attorney General.

1 2. Respondent William H. Bresnick, M.D. (Respondent) was represented in this  
2 proceeding by attorney Marvin Firestone, M.D., J.D. As of date of signing, Respondent now  
3 currently represents himself.

4 3. On or about March 2, 1994, the Board issued Physician's and Surgeon's Certificate  
5 No. G 78434 to William H. Bresnick, M.D. (Respondent). The Physician's and Surgeon's  
6 Certificate was in full force and effect at all times relevant to the charges brought in the First  
7 Amended Accusation No. 800-2017-029203, and will expire on July 31, 2023, unless renewed.

8 **JURISDICTION**

9 4. The First Amended Accusation No. 800-2017-029203 was filed before the Board, and  
10 is currently pending against Respondent. The First Amended Accusation and all other statutorily  
11 required documents were properly served on Respondent on January 7, 2020. Respondent timely  
12 filed his Notice of Defense contesting the First Amended Accusation.

13 5. A copy of the First Amended Accusation No. 800-2017-029203 is attached as exhibit  
14 A and incorporated herein by reference.

15 **ADVISEMENT AND WAIVERS**

16 6. Respondent has carefully read, fully discussed with counsel, and understands the  
17 charges and allegations in the First Amended Accusation No. 800-2017-029203. Respondent has  
18 also carefully read, fully discussed with his counsel, and understands the effects of this Stipulated  
19 Settlement and Disciplinary Order.

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

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

1 CULPABILITY

2 9. Respondent understands and agrees that the charges and allegations in the First  
3 Amended Accusation No. 800-2017-029203, if proven at a hearing, constitute cause for imposing  
4 discipline upon his Physician's and Surgeon's Certificate.

5 10. For the purpose of resolving the First Amended Accusation without the expense and  
6 uncertainty of further proceedings, Respondent agrees that, at a hearing, Complainant could  
7 establish a factual basis or prima facie case for the Third Cause for Discipline in the First  
8 Amended Accusation; and that those charges constitute cause for discipline. Respondent denies  
9 all other Causes for Discipline. Respondent hereby gives up his right to contest the Third Cause  
10 for Discipline based on those charges.

11 11. Respondent agrees that his Physician's and Surgeon's Certificate No. G 78434 is  
12 subject to discipline and he agrees to be bound by the Board's terms as set forth in the  
13 Disciplinary Order below. Respondent further understands and acknowledges that failure to  
14 complete the Board's terms as set forth below may lead to additional charges alleging  
15 unprofessional conduct and the imposition of additional discipline.

16 RESERVATION

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

21 CONTINGENCY

22 13. This stipulation shall be subject to approval by the Medical Board of California.  
23 Respondent understands and agrees that counsel for Complainant and the staff of the Medical  
24 Board of California may communicate directly with the Board regarding this stipulation and  
25 settlement, without notice to or participation by Respondent or his counsel. By signing the  
26 stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek  
27 to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails  
28 to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary

1 Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal  
2 action between the parties, and the Board shall not be disqualified from further action by having  
3 considered this matter.

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

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

10 **DISCIPLINARY ORDER**

11 **A. PUBLIC REPRIMAND**

12 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G 78434 issued  
13 to Respondent William H. Bresnick, M.D. shall be and is hereby publicly reprimanded pursuant  
14 to California Business and Professions Code, section 2227, subdivision (a) (4). This public  
15 reprimand, which is issued in connection Respondent's care and treatment of Patient A, as set  
16 forth in the First Amended Accusation No. 800-2017-029203, is as follows:

17 "You failed to adequately document your attempts to taper Patient A from  
18 benzodiazepines."

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

28 A prescribing practices course taken after the acts that gave rise to the charges in the First

1 Amended Accusation, but prior to the effective date of the Decision may, in the sole discretion of  
2 the Board or its designee, be accepted towards the fulfillment of this condition if the course would  
3 have been approved by the Board or its designee had the course been taken after the effective date  
4 of this Decision.

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

8 Failure to provide proof of successful completion to the Board or its designee within twelve  
9 (12) months of the effective date of this Decision, unless the Board or its designee agrees in  
10 writing to an extension of that time, shall constitute general unprofessional conduct and may  
11 serve as the grounds for further disciplinary action.

12 **C. 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 and the coursework  
21 requirements as set forth in Condition B of this stipulated settlement.

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

27 Respondent shall submit a certification of successful completion to the Board or its  
28 designee not later than 15 calendar days after successfully completing the course, or not later than

1 15 calendar days after the effective date of the Decision, whichever is later.

2 Failure to provide proof of successful completion to the Board or its designee within  
3 twelve (12) months of the effective date of this Decision, unless the Board or its designee agrees  
4 in writing to an extension of that time, shall constitute general unprofessional conduct and may  
5 serve as the grounds for further disciplinary action.

6 **ACCEPTANCE**

7 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully  
8 discussed it with my attorney, Marvin Firestone, M.D., J.D. I understand the stipulation and the  
9 effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated  
10 Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be  
11 bound by the Decision and Order of the Medical Board of California.

12  
13 DATED: 11/10/21

14 WH Bresnick MD.  
15 WILLIAM H. BRESNICK, M.D.  
16 Respondent

17 **ENDORSEMENT**

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

20 DATED: \_\_\_\_\_

21 Respectfully submitted,

22 ROB BONTA  
23 Attorney General of California  
24 STEVEN D. MUNI  
25 Supervising Deputy Attorney General

26 JANNSEN TAN  
27 Deputy Attorney General  
28 Attorneys for Complainant

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1 15 calendar days after the effective date of the Decision, whichever is later. .mg

2 Failure to provide proof of successful completion to the Board or its designee within  
3 twelve (12) months of the effective date of this Decision, unless the Board or its designee agrees  
4 in writing to an extension of that time, shall constitute general unprofessional conduct and may  
5 serve as the grounds for further disciplinary action.

6 **ACCEPTANCE**

7 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully  
8 discussed it with my attorney, Marvin Firestone, M.D., J.D. I understand the stipulation and the  
9 effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated  
10 Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be  
11 bound by the Decision and Order of the Medical Board of California.

12  
13 DATED: \_\_\_\_\_ .mg

14 WILLIAM H. BRESNICK, M.D.  
15 *Respondent*

16 **ENDORSEMENT**

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

19 DATED: 11/16/2021

Respectfully submitted,

20 ROB BONTA  
21 Attorney General of California  
22 STEVEN D. MUNI  
23 Supervising Deputy Attorney General

24 *Jannsen Tan*

JANNSEN TAN  
Deputy Attorney General  
*Attorneys for Complainant*

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**Exhibit A**

**First Amended Accusation No. 800-2017-029203**

1 ROB BONTA  
Attorney General of California  
2 STEVEN D. MUNI  
Supervising Deputy Attorney General  
3 JANNSEN TAN  
Deputy Attorney General  
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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  
13 In the Matter of the First Amended Accusation  
Against:

Case No. 800-2017-029203

**FIRST AMENDED ACCUSATION**

14 **WILLIAM H. BRESNICK, M.D.**  
15 **505 Montgomery St., Ste. 1100**  
**San Francisco, CA 94111-2585**

16 **Physician's and Surgeon's Certificate**  
17 **No. G 78434,**

18 Respondent.

19  
20 **PARTIES**

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

24 2. On or about March 2, 1994, the Board issued Physician's and Surgeon's Certificate  
25 No. G 78434 to William H. Bresnick, 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 July 31, 2023, unless renewed.

28 ///

1 **JURISDICTION**

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

28 5. Section 2234<sup>1</sup> of the Code, states:

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.

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1. <sup>1</sup> “Business and Professions Code Section 2234 was amended in January 1, 2020. All  
allegations in this Accusation occurred prior to January 1, 2020. The prior version of  
Section 2234 was effective January 1, 2014 to December 31, 2019.”

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

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

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

(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.

6. Section 2241 of the Code states:

(a) A physician and surgeon may prescribe, dispense, or administer prescription  
drugs, including prescription controlled substances, to an addict under his or her  
treatment for a purpose other than maintenance on, or detoxification from,  
prescription drugs or controlled substances.

(b) A physician and surgeon may prescribe, dispense, or administer prescription  
drugs or prescription controlled substances to an addict for purposes of maintenance  
on, or detoxification from, prescription drugs or controlled substances only as set  
forth in subdivision (c) or in Sections 11215, 11217, 11217.5, 11218, 11219, and  
11220 of the Health and Safety Code. Nothing in this subdivision shall authorize a  
physician and surgeon to prescribe, dispense, or administer dangerous drugs or  
controlled substances to a person he or she knows or reasonably believes is using or  
will use the drugs or substances for a nonmedical purpose.

(c) Notwithstanding subdivision (a), prescription drugs or controlled substances  
may also be administered or applied by a physician and surgeon, or by a registered  
nurse acting under his or her instruction and supervision, under the following  
circumstances:

(1) Emergency treatment of a patient whose addiction is complicated by the

1 presence of incurable disease, acute accident, illness, or injury, or the infirmities  
attendant upon age.

2 (2) Treatment of addicts in state-licensed institutions where the patient is kept  
under restraint and control, or in city or county jails or state prisons.

3 (3) Treatment of addicts as provided for by Section 11217.5 of the Health and  
4 Safety Code.

5 (d)(1) For purposes of this section and Section 2241.5, addict means a person  
6 whose actions are characterized by craving in combination with one or more of the  
following:

7 (A) Impaired control over drug use.

8 (B) Compulsive use.

9 (C) Continued use despite harm.

10 (2) Notwithstanding paragraph (1), a person whose drug-seeking behavior is  
11 primarily due to the inadequate control of pain is not an addict within the meaning of  
this section or Section 2241.5.

12 7. Section 2266 of the Code states: The failure of a physician and surgeon to maintain  
13 adequate and accurate records relating to the provision of services to their patients constitutes  
14 unprofessional conduct.

15 8. Section 4021 of the Code states:

16 'Controlled substance' means any substance listed in Chapter 2 (commencing  
17 with Section 11053) of Division 10 of the Health and Safety Code.

18 **DEFINITIONS**

19 9. Alprazolam – Generic name for Xanax. Alprazolam is a short-acting benzodiazepine  
20 used to treat anxiety, and is a Schedule IV controlled substance pursuant to Code of Federal  
21 Regulations Title 21 section 1308.14. Alprazolam is a dangerous drug pursuant to California  
22 Business and Professions Code section 4022 and is a Schedule IV controlled substance pursuant  
23 to California Health and Safety Code section 11057(d).

24 10. Clonazepam – Generic name for Klonopin. Clonazepam is an anti-anxiety  
25 medication in the benzodiazepine family used to prevent seizures, panic disorder, and akathisia.  
26 Clonazepam is a Schedule IV controlled substance pursuant to Code of Federal Regulations Title  
27 21 section 1308.14(c). It is a Schedule IV controlled substance pursuant to Health and Safety  
28

1 Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions  
2 Code section 4022.

3 11. Lorazepam – Generic name for Ativan. Lorazepam is a member of the  
4 benzodiazepine family and is a fast-acting anti-anxiety medication used for the short-term  
5 management of severe anxiety. Lorazepam is a Schedule IV controlled substance pursuant to  
6 Code of Federal Regulations Title 21 section 1308.14(c) and Health and Safety Code section  
7 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code section  
8 4022.

9 12. Zolpidem tartrate – Generic name for Ambien. Zolpidem tartrate is a sedative and  
10 hypnotic used for short term treatment of insomnia. Zolpidem tartrate is a Schedule IV controlled  
11 substance pursuant to Code of Federal Regulations Title 21 section 1308.14(c). It is a Schedule  
12 IV controlled substance pursuant to Health and Safety Code section 11057, subdivision (d), and a  
13 dangerous drug pursuant to Business and Professions Code section 4022.

14 **FACTUAL ALLEGATIONS**

15 **FIRST CAUSE FOR DISCIPLINE**  
16 **(Gross Negligence)**

17 13. Respondent's license is subject to disciplinary action under section 2234, subdivision  
18 (b), and section 2241 of the Code, in that he committed gross negligence during the care and  
19 treatment of Patient A<sup>2</sup>. The circumstances are as follows:

20 14. Respondent is a physician and surgeon, board certified in psychiatry, who at all times  
21 relevant to the charges brought herein worked in a solo-practice clinic under the business name of  
22 William H. Bresnick, M.D., in San Francisco, California.

23 15. On or about October 16, 2015, Respondent first saw Patient A for a clinic visit.  
24 Patient A was, at the time, a 39-year-old female with symptoms of anxiety and depression.  
25 Respondent's initial diagnoses included: Major Depressive Disorder; recurrent, moderate-severe,  
26 Generalized Anxiety Disorder; Panic Disorder; Probable Post-Traumatic Stress Disorder/sexual  
27 abuse history; R/O ETOH Overuse/self-medication type; Severe Family/ Psychosocial Stressors.

28 <sup>2</sup> Patient names and information have been removed to protect patient confidentiality.

1 Respondent ordered routine lab tests for thyroid and liver function and started Patient A on a trial  
2 of Lexapro 5-10 mg and a trial of Klonopin 0.5 mg, with the goal of decreasing the symptoms of  
3 anxiety, panic, and self-medication with alcohol after work. A Beck Depression Inventory yielded  
4 a score of 35. Respondent ordered a comprehensive full-screen battery of blood tests, including a  
5 complete blood count with differentials, comprehensive metabolic panel, several different liver  
6 function tests, and a thyroid test. Respondent documented that he educated Patient A on alcohol  
7 use, body health, mental health, and the need for exercise.

8 16. The comprehensive blood tests were taken on or about October 22, 2015, and were  
9 normal with no indication of alcohol overuse. The report was shared with Patient A at her next  
10 appointment.

11 17. On or about November 13, 2015, Respondent noted that Patient A had suffered from  
12 generalized anxiety and panic since childhood and that she had experienced probable sexual  
13 abuse and depression. Respondent also noted that Patient A had a high tolerance to psychiatric  
14 medications and alcohol. Respondent prescribed Ativan 0.5 mg PRN "pro re nata (taken as  
15 needed)" for 30 days for anxiety/severe anxiety, and Ambien 0.5 mg, PRN for insomnia.

16 18. On or about January 8, 2016, Respondent noted that Patient A requested a  
17 prescription for Xanax, which she had taken before. Respondent prescribed Xanax 0.5 mg, PRN,  
18 for severe anxiety and panic. Respondent failed to perform and/or document performing a  
19 thorough and comprehensive assessment of Patient A's current and past issues with alcohol and  
20 drugs. Respondent documented "SH/H", under which he documented ETOH and marijuana use.  
21 Respondent documented "FH" for family history with positives noted. Respondent failed to  
22 diagnose and adequately investigate a history of alcohol abuse and to include this information in  
23 prescribing and treatment planning.

24 19. During the period of January 8, 2016 to August 23, 2016, Respondent continued to  
25 prescribe alprazolam, PRN for severe anxiety and panic only; and zolpidem tartrate, PRN, for  
26 insomnia only.

27 20. On or about February 8, 2016, Respondent noted that Patient A had four glasses of  
28 wine on February 5, 2016, where she fell and bumped her head.

1           21. On or about February 10, 2016, Respondent documented that Patient A's boyfriend  
2 reported concerns about increased tolerance for psychiatric medications and alcohol. Respondent  
3 discontinued Klonopin. Respondent continued to prescribe alprazolam, PRN, along with Ambien,  
4 PRN despite the ongoing consumption of alcohol and despite having cautioned the patient not to  
5 consume alcohol for one month as a goal.

6           22. On or about July 25, 2016, Respondent documented that Patient A continued to suffer  
7 from major depressive disorder, recurrent severe; panic; generalized anxiety, severe. Respondent  
8 documented his findings as increasing depression, anxiety with panic, overwhelmed lability,  
9 crying, hopelessness, helplessness, guilt, insomnia, and nervousness. Patient A was placed on  
10 disability status with the comment "unable to work now."

11           23. On or about August 4, 2016, Respondent wrote Patient A's employer stating that  
12 Patient A continued to be highly symptomatic, impaired, and disabled, and that she was not able  
13 to work for the next thirty days. Respondent recommended intensified treatments along with rest  
14 and recuperation.

15           24. On or about August 18, 2016, Respondent documented that Patient A was "unable to  
16 work at all, and for next weeks at least." Respondent documented that Patient A was "unable to  
17 mentally focus, concentrate, low energy, fatigue, and overwhelmed easily." Respondent  
18 prescribed Klonopin 0.5 mg., PRN to Patient A.

19           25. During the period of August 23, 2016 to January 15, 2017, Respondent prescribed  
20 alprazolam, PRN; Klonopin, PRN; and zolpidem tartrate, PRN to Patient A.

21           26. On or about October 21, 2016, Respondent documented that Patient A needed her  
22 leave extended for another thirty days.

23           27. On or about November 30, 2016, Respondent documented that Patient A did not have  
24 her car any longer. Respondent noted that Patient A crashed her car and hit a tree. Patient A was  
25 arrested and had a blood alcohol level of 0.22mg/dl. Department of Motor Vehicles (DMV)  
26 issued Patient A a temporary driver license on September 29, 2016, pending the outcome of her  
27 DMV administrative hearing.

28 ///



1           28. On or about December 1, 2016, Respondent wrote Patient A stating that he was sad to  
2 hear about Patient A's increased binge drinking and November 2016 DUI arrest. Respondent  
3 noted that Patient A was drinking at home. Respondent warned against alcohol use and  
4 forwarded a copy of "AA & Smart Recovery," a free non-religious, non-12 step self-help  
5 approach to recovery from substance and behavioral addictions to Patient A. Respondent  
6 continued to prescribe alprazolam, PRN; Klonopin, PRN; and zolpidem tartrate, PRN.  
7 Respondent documented that Patient A was ingesting 1-2 drinks with food in social situations in  
8 the evening, 1-2 times per week; and that she had no prior DUIs or arrest history. Respondent  
9 mailed a letter, dated December 1, 2016, following up on "AA & Smart Recovery."

10           29. On or about June 28, 2017, Patient A left Respondent's practice due to confusion over  
11 her appointment time. Respondent documented that Patient A would sometimes show up at the  
12 wrong time for appointments and sometimes was a no-show.

13           30. Respondent committed gross negligence in his care and treatment of Patient A, which  
14 included, but was not limited to the following:

15           A. Respondent failed to set limits and boundaries with Patient A and failed to recognize  
16 benzodiazepine dependence. Respondent prescribed benzodiazepines to Patient A who had a  
17 history of instability and impulsivity. Respondent failed to gradually taper benzodiazepines.  
18 Respondent failed to diagnose and appropriately treat Patient A's underlying alcohol and  
19 chemical dependency issues. Respondent continued to prescribe long-term benzodiazepines for  
20 two years, despite ongoing clinical evidence of deterioration, including but not limited to Patient  
21 A's automobile accident and alcohol use disorder.

22   **SECOND CAUSE FOR DISCIPLINE**  
23   **(Repeated Negligent Acts)**

24           31. Respondent's license is subject to disciplinary action under section 2234, subdivision  
25 (c), of the Code, in that he committed repeated negligent acts during the care and treatment of  
26 Patient A, as more particularly alleged hereinafter. Paragraphs 14 through 30, above, are hereby  
27 incorporated by reference and realleged as if fully set forth herein.

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**THIRD CAUSE FOR DISCIPLINE**  
**(Failure to Maintain Adequate and Accurate Records)**

32. Respondent's license is subject to disciplinary action under section 2266 of the Code, in that he failed to maintain adequate and accurate medical records relating to his care and treatment of Patient A as more particularly alleged hereinafter. Paragraphs 14 through 30, above, are hereby incorporated by reference and realleged as if fully set forth herein.

**FOURTH CAUSE FOR DISCIPLINE**  
**(General Unprofessional Conduct)**

34. Respondent's license is further subject to disciplinary action under sections 2227 and 2234, as defined by section 2234, of the Code, in that he has engaged in conduct which breaches the rules or ethical code of the medical profession, or conduct which is unbecoming of a member in good standing of the medical profession, and which demonstrates an unfitness to practice medicine, as more particularly alleged in paragraphs 14 through 30, above, which are hereby realleged and incorporated by reference as if fully set forth herein.

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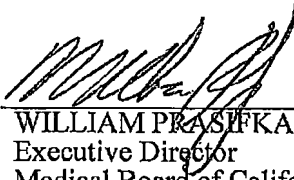
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PRAAYER

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

1. Revoking or suspending Physician's and Surgeon's Certificate No. G 78434, issued to Respondent William H. Bresnick, M.D.;
2. Revoking, suspending or denying approval of Respondent William H. Bresnick, M.D.'s authority to supervise physician assistants and advanced practice nurses;
3. Ordering Respondent William H. Bresnick, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and
4. Taking such other and further action as deemed necessary and proper.

DATED: OCT 07 2021

  
\_\_\_\_\_  
WILLIAM PRASTFKA  
Executive Director  
Medical Board of California  
Department of Consumer Affairs  
State of California  
*Complainant*

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