

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

In the Matter of the Accusation Against:

Adebambo O. Ojuri, M.D.

Physician's & Surgeon's
Certificate No. A 46336

Respondent.

Case No. 800-2018-050851

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 June 16, 2023.

IT IS SO ORDERED: May 18, 2023.

MEDICAL BOARD OF CALIFORNIA



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

1 ROB BONTA
Attorney General of California
2 EDWARD KIM
Supervising Deputy Attorney General
3 CHRISTINA SEIN GOOT
Deputy Attorney General
4 State Bar No. 229094
300 So. Spring Street, Suite 1702
5 Los Angeles, CA 90013
Telephone: (213) 269-6481
6 Facsimile: (916) 731-2117
Attorneys for Complainant
7

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

11 In the Matter of the Accusation Against:

12 **ADEBAMBO O. OJURI, M.D.**
13 **8110 Airport Blvd**
Los Angeles CA 90045

14 **Physician's and Surgeon's**
15 **Certificate No. A 46336,**

16 Respondent.

Case No. 800-2018-050851

OAH No. 2022060314

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

17 In the interest of a prompt and speedy settlement of this matter, consistent with the public
18 interest and the responsibility of the Medical Board of California of the Department of Consumer
19 Affairs, the parties hereby agree to the following Stipulated Settlement and Disciplinary Order
20 which will be submitted to the Board for approval and adoption as the final disposition of the
21 Accusation.

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 Christina Sein Goot, Deputy
26 Attorney General.

27 2. Respondent Adebambo O. Ojuri, M.D. (Respondent) is represented in this proceeding
28 by attorney Carolyn W. Lindholm, whose address is: 355 South Grand Avenue, Suite 1750

1 Los Angeles, California 90071.

2 3. On or about July 31, 1989, the Board issued Physician's and Surgeon's Certificate No.
3 A 46336 to Adebambo O. Ojuri, M.D. The Physician's and Surgeon's Certificate was in full force
4 and effect at all times relevant to the charges brought in Accusation No. 800-2018-050851, and
5 will expire on January 31, 2023, unless renewed.

6 **JURISDICTION**

7 4. Accusation No. 800-2018-050851 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 December 14, 2021. Respondent timely filed his Notice of
10 Defense contesting the Accusation. A copy of Accusation No. 800-2018-050851 is attached as
11 exhibit A and incorporated herein by reference.

12 **ADVISEMENT AND WAIVERS**

13 5. Respondent has carefully read, fully discussed with counsel, and understands the
14 charges and allegations in Accusation No. 800-2018-050851. Respondent has also carefully read,
15 fully discussed with his counsel, and understands the effects of this Stipulated Settlement and
16 Disciplinary Order.

17 6. 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 confront and cross-examine
19 the witnesses against him; the right to present evidence and to testify on his own behalf; the right
20 to the issuance of subpoenas to compel the attendance of witnesses and the production of
21 documents; the right to reconsideration and court review of an adverse decision; and all other
22 rights accorded by the California Administrative Procedure Act and other applicable laws.

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

25 **CULPABILITY**

26 8. Respondent understands and agrees that the charges and allegations in Accusation
27 No. 800-2018-050851, if proven at a hearing, constitute cause for imposing discipline upon his
28 Physician's and Surgeon's Certificate. Respondent hereby gives up his right to contest those

1 charges and allegation.

2 9. Respondent does not contest that, at an administrative hearing, Complainant could
3 establish a prima facie case with respect to the charges and allegations contained in Accusation
4 No. 800-2018-050851 and that he has thereby subjected his license to disciplinary action.

5 10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to
6 discipline and he agrees to be bound by the Board's probationary terms as set forth in the
7 Disciplinary Order below.

8 **CONTINGENCY**

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

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

22 13. The parties understand and agree that Portable Document Format (PDF) and facsimile
23 copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile
24 signatures thereto, shall have the same force and 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 opportunity to be heard by the Respondent, issue and
27 enter the following Disciplinary Order:

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1 **DISCIPLINARY ORDER**

2 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 46336 issued
3 to Respondent Adebambo O. Ojuri, M.D., is publicly reprimanded pursuant to California
4 Business and Professions Code section 2227, subdivision (a)(4), and it is further ordered that
5 Respondent comply with the following attendant terms and conditions:

6 1. **PUBLIC REPRIMAND**

7 The Public Reprimand issued in connection with Accusation No. 800-2018-050851, against
8 Respondent Adebambo O. Ojuri, M.D. is as follows:

9 On October 18, 2018, Respondent Adebambo O. Ojuri, M.D. performed an endoscopy on
10 Patient 1, but failed to adequately document a physical examination on Patient 1 prior to the
11 surgery. Performing and documenting a physical examination of a self-referred patient
12 prior to an endoscopy procedure is good practice and comports with the standard of care.

13 2. **CLINICAL COMPETENCE ASSESSMENT PROGRAM**

14 Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a
15 clinical competence assessment program approved in advance by the Board or its designee.
16 Respondent shall successfully complete the program not later than six (6) months after
17 Respondent's initial enrollment unless the Board or its designee agrees in writing to an extension
18 of that time.

19 The program shall consist of a comprehensive assessment of Respondent's physical and
20 mental health and the six general domains of clinical competence as defined by the Accreditation
21 Council on Graduate Medical Education and American Board of Medical Specialties pertaining to
22 Respondent's current or intended area of practice. The program shall take into account data
23 obtained from the pre-assessment, self-report forms and interview, and the Decision(s),
24 Accusation(s), and any other information that the Board or its designee deems relevant. The
25 program shall require Respondent's on-site participation for a minimum of three (3) and no more
26 than five (5) days as determined by the program for the assessment and clinical education
27 evaluation. Respondent shall pay all expenses associated with the clinical competence
28 assessment program.

1 At the end of the evaluation, the program will submit a report to the Board or its designee
2 which unequivocally states whether the Respondent has demonstrated the ability to practice
3 safely and independently. Based on Respondent's performance on the clinical competence
4 assessment, the program will advise the Board or its designee of its recommendation(s) for the
5 scope and length of any additional educational or clinical training, evaluation or treatment for any
6 medical condition or psychological condition, or anything else affecting Respondent's practice of
7 medicine. Respondent shall comply with the program's recommendations.

8 Determination as to whether Respondent successfully completed the clinical competence
9 assessment program is solely within the program's jurisdiction.

10 If Respondent fails to enroll, participate in, or successfully complete the clinical
11 competence assessment program within the designated time period, Respondent shall receive a
12 notification from the Board or its designee to cease the practice of medicine within three (3)
13 calendar days after being so notified. The Respondent shall not resume the practice of medicine
14 until enrollment or participation in the outstanding portions of the clinical competence assessment
15 program have been completed. If the Respondent does not successfully complete the clinical
16 competence assessment program, the Respondent shall not resume the practice of medicine until a
17 final decision has been rendered on the accusation. Any violation of this condition or failure to
18 complete the program and/or comply with the program recommendations shall be considered
19 unprofessional conduct and grounds for further disciplinary action.

20 3. **EDUCATION COURSES**

21 Within 60 calendar days of the effective date of this Decision, Respondent shall submit to
22 the Board or its designee for its prior approval educational program(s) or course(s), which shall
23 not be less than 20 hours. The educational program(s) or course(s) shall be aimed at correcting
24 any areas of deficient practice or knowledge and shall be Category I certified. The 20 hours of
25 educational program(s) or course(s) taken pursuant to this condition shall be at Respondent's
26 expense and shall be in addition to the Continuing Medical Education (CME) requirements for
27 renewal of licensure. Following the completion of each course, the Board or its designee may
28 administer an examination to test Respondent's knowledge of the course.

1 Respondent shall submit a certification of successful completion to the Board or its
2 designee not later than 15 calendar days after successfully completing the educational program(s)
3 or course(s). Respondent shall participate in and successfully complete the educational
4 program(s) or course(s) hereunder within one (1) year of the effective date of this Order.

5 Respondent's failure to enroll, participate in, or successfully complete the courses within
6 the designated time period, unless the Board or its designee agrees in writing to an extension of
7 that time, shall constitute general unprofessional conduct and may serve as grounds for further
8 disciplinary action.

9 **4. MEDICAL RECORD KEEPING COURSE**

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

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

24 Respondent shall submit a certification of successful completion to the Board or its
25 designee not later than 15 calendar days after successfully completing the course, or not later than
26 15 calendar days after the effective date of the Decision, whichever is later.

27 Respondent's failure to enroll, participate in, or successfully complete the medical record
28 keeping course within the designated time period, unless the Board or its designee agrees in

1 writing to an extension of that time, shall constitute general unprofessional conduct and may
2 serve as grounds for further disciplinary action.

3 **5. INVESTIGATION/ENFORCEMENT COST RECOVERY**

4 Respondent is hereby ordered to reimburse the Board its costs of investigation and
5 enforcement in the year of 2022, including, but not limited to, expert review, amended
6 accusations, legal reviews, investigation(s), and subpoena enforcement, as applicable, in the
7 amount of \$9,163.75 (nine thousand one hundred sixty three dollars and seventy-five cents).
8 Costs shall be payable to the Medical Board of California within one (1) year from the effective
9 date of this Decision.

10 Any and all requests for a payment plan shall be submitted in writing by Respondent to the
11 Board. The filing of bankruptcy by Respondent shall not relieve Respondent of the
12 responsibility to repay investigation and enforcement costs.

13 **6. FAILURE TO COMPLY**

14 Failure to comply with any of the terms of this Disciplinary Order shall constitute general
15 unprofessional conduct and may serve as grounds for further disciplinary action. In such
16 circumstances, the Complainant may reinstate Accusation No. 800-2018-050851 or file a
17 supplemental accusation alleging any failure to comply with any provision of this order by
18 Respondent as unprofessional conduct.

19 **7. FUTURE ADMISSIONS CLAUSE**

20 If Respondent should ever apply or reapply for a new license or certification, or petition for
21 reinstatement of a license, by any other health care licensing action agency in the State of
22 California, all of the charges and allegations contained in Accusation No. 800-2018-050851 shall
23 be deemed to be true, correct, and admitted by Respondent for the purpose of any Statement of
24 Issues or any other proceeding seeking to deny or restrict license.

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ACCEPTANCE

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

DATED: Oct 19/2022 
ADEBAMBO O. OJURI, M.D.
Respondent

I have read and fully discussed with Respondent Adebambo O. Ojuri, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED: 10/19/22 
CAROLYN W. LINDHOLM
Attorney for Respondent

ENDORSEMENT

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

DATED: _____ Respectfully submitted,

ROB BONTA
Attorney General of California
EDWARD KIM
Supervising Deputy Attorney General

CHRISTINA SEIN GOOT
Deputy Attorney General
Attorneys for Complainant

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DATED: _____
ADEBAMBO O. OJURI, M.D.
Respondent


I have read and fully discussed with Respondent Adebambo O. Ojuri, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED: _____
CAROLYN W. LINDHOLM
Attorney for Respondent

ENDORSEMENT

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

DATED: 10/20/22

Respectfully submitted,
ROB BONTA
Attorney General of California
EDWARD KIM
Supervising Deputy Attorney General

CHRISTINA SEIN GOOT
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 800-2018-050851

1 ROB BONTA
Attorney General of California
2 EDWARD K. KIM
Supervising Deputy Attorney General
3 CHRISTINA SEIN GOOT
Deputy Attorney General
4 State Bar No. 229094
300 So. Spring Street, Suite 1702
5 Los Angeles, CA 90013
Telephone: (213) 269-6481
6 Facsimile: (916) 731-2117
Attorneys for Complainant
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8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

Case No. 800-2018-050851

13 **ADEBAMBO O. OJURI, M.D.**
14 **8110 Airport Blvd.**
Los Angeles, CA 90045

ACCUSATION

15 **Physician's and Surgeon's Certificate**
16 **No. A 46336,**

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 31, 1989, the Board issued Physician's and Surgeon's Certificate
25 No. A 46336 to Adebambo O. Ojuri, 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 January 31, 2023, unless renewed.

28 ///

1 JURISDICTION

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
negligent act.

2 (2) When the standard of care requires a change in the diagnosis, act, or
3 omission that constitutes the negligent act described in paragraph (1), including, but
4 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.

5 (d) Incompetence.

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

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

9 (g) The failure by a certificate holder, in the absence of good cause, to attend
10 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.

11 6. Section 2266 of the Code states:

12 The failure of a physician and surgeon to maintain adequate and accurate
13 records relating to the provision of services to their patients constitutes unprofessional
conduct.

14 COST RECOVERY

15 7. Business and Professions Code section 125.3 states that:

16 (a) Except as otherwise provided by law, in any order issued in resolution of a
17 disciplinary proceeding before any board within the department or before the
Osteopathic Medical Board upon request of the entity bringing the proceeding, the
18 administrative law judge may direct a licensee found to have committed a violation or
violations of the licensing act to pay a sum not to exceed the reasonable costs of the
19 investigation and enforcement of the case.

20 (b) In the case of a disciplined licentiate that is a corporation or a partnership,
the order may be made against the licensed corporate entity or licensed partnership.

21 (c) A certified copy of the actual costs, or a good faith estimate of costs where
22 actual costs are not available, signed by the entity bringing the proceeding or its
designated representative shall be prima facie evidence of reasonable costs of
23 investigation and prosecution of the case. The costs shall include the amount of
investigative and enforcement costs up to the date of the hearing, including, but not
24 limited to, charges imposed by the Attorney General.

25 (d) The administrative law judge shall make a proposed finding of the amount
of reasonable costs of investigation and prosecution of the case when requested
26 pursuant to subdivision (a). The finding of the administrative law judge with regard
to costs shall not be reviewable by the board to increase the cost award. The board
27 may reduce or eliminate the cost award, or remand to the administrative law judge if
the proposed decision fails to make a finding on costs requested pursuant to
28 subdivision (a).

1 (e) If an order for recovery of costs is made and timely payment is not made as
2 directed in the board's decision, the board may enforce the order for repayment in any
3 appropriate court. This right of enforcement shall be in addition to any other rights
4 the board may have as to any licensee to pay costs.

5 (f) In any action for recovery of costs, proof of the board's decision shall be
6 conclusive proof of the validity of the order of payment and the terms for payment.

7 (g)(1) Except as provided in paragraph (2), the board shall not renew or
8 reinstate the license of any licensee who has failed to pay all of the costs ordered
9 under this section.

10 (2) Notwithstanding paragraph (1), the board may, in its discretion,
11 conditionally renew or reinstate for a maximum of one year the license of any
12 licensee who demonstrates financial hardship and who enters into a formal agreement
13 with the board to reimburse the board within that one-year period for the unpaid
14 costs.

15 (h) All costs recovered under this section shall be considered a reimbursement
16 for costs incurred and shall be deposited in the fund of the board recovering the costs
17 to be available upon appropriation by the Legislature.

18 (i) Nothing in this section shall preclude a board from including the recovery of
19 the costs of investigation and enforcement of a case in any stipulated settlement.

20 (j) This section does not apply to any board if a specific statutory provision in
21 that board's licensing act provides for recovery of costs in an administrative
22 disciplinary proceeding.

23 (k) Notwithstanding the provisions of this section, the Medical Board of
24 California shall not request nor obtain from a physician and surgeon, investigation
25 and prosecution costs for a disciplinary proceeding against the licensee. The board
26 shall ensure that this subdivision is revenue neutral with regard to it and that any loss
27 of revenue or increase in costs resulting from this subdivision is offset by an increase
28 in the amount of the initial license fee and the biennial renewal fee, as provided in
subdivision (e) of Section 2435.

FIRST CAUSE FOR DISCIPLINE

(Gross Negligence)

8. Respondent is subject to disciplinary action under section 2234, subdivision (b), of
the Code in that Respondent committed gross negligence in his care and treatment of Patient 1.¹

The circumstances are as follows:

9. At all times relevant to the allegations herein, Respondent was practicing as a
gastroenterologist.

10. On October 4, 2018, Patient 1, a 29-year-old female, first presented to Respondent
with a chief complaint of gastritis and abdominal pain. The only history recorded by Respondent

¹ The patient is referred to by number to protect her privacy.

1 included dyspepsia, abdominal pain, nausea, vomiting, nonsteroidal medication (Advil), and
2 hematemesis. Respondent did not note any past medical history, social history, or family history.
3 There was no evidence of a physical examination. No vital signs were recorded and no laboratory
4 studies were ordered. At the initial visit, Respondent scheduled an endoscopy.

5 11. On October 18, 2018, Respondent performed an endoscopy on Patient 1. The
6 findings were erythema in the distal esophagus, moderate gastritis in the body and antrum of the
7 stomach, and a sessile polyp in the body of the stomach. The plan was to start a proton pump
8 inhibitor following the results of pathology. The pathology report showed a normal esophagus
9 and mild reactive gastropathy in the antrum and the body. An ultrasound performed on October
10 24, 2018 showed no abnormalities.

11 12. During an interview with Board investigators, Respondent admitted that it was
12 possible a self-referred patient could have been seen, but not examined by Respondent.

13 13. The standard of care when evaluating a patient is to obtain a history, perform a
14 physical examination, develop a differential diagnosis, and order appropriate studies.

15 14. Patients who are referred by a primary care physician often have been evaluated with
16 a history, physical, and laboratory data, and are only referred for a specific procedure. This is
17 referred to as "direct access" endoscopy or colonoscopy. Under those circumstances, a more
18 cursory history and physical may be performed prior to the procedure. A physical examination
19 must be performed on all patients, however, prior to endoscopy or colonoscopy at an Ambulatory
20 Surgical Center. When a patient such as Patient 1 is self-referred, the gastroenterologist will act
21 more as a primary care physician, performing a more complete history and physical examination,
22 and ordering appropriate laboratory and imaging studies.

23 15. Respondent's failure to perform a physical examination on Patient 1 represents an
24 extreme departure from the standard of care.

25 **SECOND CAUSE FOR DISCIPLINE**

26 **(Failure to Maintain Adequate and Accurate Records)**

27 16. Respondent is subject to disciplinary action under section 2266 of the Code in that he
28 failed to maintain adequate and accurate records concerning the care and treatment of Patient 1.

1 The circumstances are as follows:

2 17. The allegations of the First Cause for Discipline are incorporated by reference as if
3 fully set forth herein.

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:

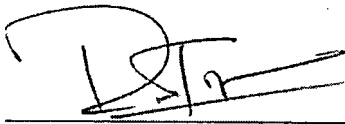
7 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 46336,
8 issued to Respondent Adebambo O. Ojuri, M.D.;

9 2. Revoking, suspending or denying approval of Respondent Adebambo O. Ojuri,
10 M.D.'s authority to supervise physician assistants and advanced practice nurses;

11 3. Ordering Respondent Adebambo O. Ojuri, M.D., to pay the Board the costs of the
12 investigation and enforcement of this case, and if placed on probation, the costs of probation
13 monitoring; and

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

15
16 DATED: DEC 14 2021

17 
18 For: WILLIAM PRASIFKA **Reji Varghese**
19 Executive Director **Deputy Director**
20 Medical Board of California
21 Department of Consumer Affairs
22 State of California
23 *Complainant*

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