

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

In the Matter of the Accusation
Against:

Erik Martin Bezema, M.D.

Physician's and Surgeon's
Certificate No. A 103644

Respondent.

Case No.: 800-2019-061758

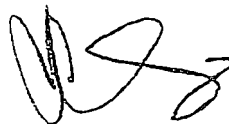
DECISION

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 August 18, 2023.

IT IS SO ORDERED: July 20, 2023.

MEDICAL BOARD OF CALIFORNIA



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

1 ROB BONTA
Attorney General of California
2 JUDITH T. ALVARADO
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3 PEGGIE BRADFORD TARWATER
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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 **ERIK MARTIN BEZEMA, M.D.**
14 **612 Spring Road**
Moorpark, CA 93021-1298
15 **Physician's and Surgeon's Certificate**
16 **No. A 103644,**

17 Respondent.

Case No. 800-2019-061758

OAH No. 2023010783

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

18
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. Reji Varghese (Complainant) is the Interim Executive Director of the Medical Board
23 of California (Board). He brought this action solely in his official capacity and is represented in
24 this matter by Rob Bonta, Attorney General of the State of California, by Peggie Bradford
25 Tarwater, Deputy Attorney General.

26 2. Respondent Erik Martin Bezema, M.D. (Respondent) is represented in this
27 proceeding by attorney Robert Keith Weinberg, whose address is 19200 Von Karman Avenue,
28 Suite 380, Irvine, CA 92612-8508.

1 3. On May 2, 2008, the Board issued Physician's and Surgeon's Certificate No. A
2 103644 to Erik Martin Bezema, M.D. (Respondent). The Physician's and Surgeon's Certificate
3 was in full force and effect at all times relevant to the charges brought in Accusation No. 800-
4 2019-061758, and will expire on October 31, 2023, unless renewed.

5 **JURISDICTION**

6 4. Accusation No. 800-2019-061758 was filed before the Board, and is currently
7 pending against Respondent. The Accusation and all other statutorily required documents were
8 properly served on Respondent on November 10, 2022. Respondent timely filed his Notice of
9 Defense contesting the Accusation.

10 5. A copy of Accusation No. 800-2019-061758 is attached as Exhibit A and
11 incorporated herein by reference.

12 **ADVISEMENT AND WAIVERS**

13 6. Respondent has carefully read, fully discussed with counsel, and understands the
14 charges and allegations in Accusation No. 800-2019-061758. Respondent has also carefully read,
15 fully discussed with his counsel, and understands the effects of this Stipulated Settlement and
16 Disciplinary Order.

17 7. Respondent is fully aware of his legal rights in this matter, including the right to a
18 hearing on the charges and allegations in the Accusation; the right to 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 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and
24 every right set forth above.

25 **CULPABILITY**

26 9. Respondent understands and agrees that the charges and allegations in Accusation
27 No. 800-2019-061758, if proven at a hearing, constitute cause for imposing discipline upon his
28 Physician's and Surgeon's Certificate.

1 **DISCIPLINARY ORDER**

2 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 103644
3 issued to Respondent Erik Martin Bezema, M.D. is revoked. However, the revocation is stayed
4 and Respondent is placed on probation for five (5) years on the following terms and conditions:

5 1. **CONTROLLED SUBSTANCES - ABSTAIN FROM USE.** Respondent
6 shall abstain completely from the personal use or possession of controlled substances as defined
7 in the California Uniform Controlled Substances Act, dangerous drugs as defined by Business
8 and Professions Code section 4022, and any drugs requiring a prescription. This prohibition does
9 not apply to medications lawfully prescribed to Respondent by another practitioner for a bona
10 fide illness or condition.

11 Within 15 calendar days of receiving any lawfully prescribed medications, Respondent
12 shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone
13 number; medication name, strength, and quantity; and issuing pharmacy name, address, and
14 telephone number.

15 2. **ALCOHOL - ABSTAIN FROM USE.** Respondent shall abstain
16 completely from the use of products or beverages containing alcohol.

17 3. **EDUCATION COURSE.** Within 60 calendar days of the effective date of
18 this Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its
19 designee for its prior approval educational program(s) or course(s), which shall not be less than
20 40 hours per year, for each year of probation. The educational program(s) or course(s) shall be
21 aimed at correcting any areas of deficient practice or knowledge and shall be Category I certified.
22 The educational program(s) or course(s) shall be at Respondent's expense and shall be in addition
23 to the Continuing Medical Education (CME) requirements for renewal of licensure. Following
24 the completion of each course, the Board or its designee may administer an examination to test
25 Respondent's knowledge of the course. Respondent shall provide proof of attendance for 65
26 hours of CME of which 40 hours were in satisfaction of this condition.

27 4. **PRESCRIBING PRACTICES COURSE.** Within 60 calendar days of the
28 effective date of this Decision, Respondent shall enroll in a course in prescribing practices

1 approved in advance by the Board or its designee. Respondent shall provide the approved course
2 provider with any information and documents that the approved course provider may deem
3 pertinent. Respondent shall participate in and successfully complete the classroom component of
4 the course not later than six months after Respondent's initial enrollment. Respondent shall
5 successfully complete any other component of the course within one year of enrollment. The
6 prescribing practices course shall be at Respondent's expense and shall be in addition to the CME
7 requirements for renewal of licensure.

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

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

16 5. MEDICAL RECORD KEEPING COURSE. Within 60 calendar days of
17 the effective date of this Decision, Respondent shall enroll in a course in medical record keeping
18 approved in advance by the Board or its designee. Respondent shall provide the approved course
19 provider with any information and documents that the approved course provider may deem
20 pertinent. Respondent shall participate in and successfully complete the classroom component of
21 the course not later than six months after Respondent's initial enrollment. Respondent shall
22 successfully complete any other component of the course within one year of enrollment. The
23 medical record keeping course shall be at Respondent's expense and shall be in addition to the
24 CME requirements for renewal of licensure.

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

1 this Decision.

2 Respondent shall submit a certification of successful completion to the Board or its
3 designee not later than 15 calendar days after successfully completing the course, or not later than
4 15 calendar days after the effective date of the Decision, whichever is later.

5 6. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60
6 calendar days of the effective date of this Decision, Respondent shall enroll in a professionalism
7 program, that meets the requirements of Title 16, California Code of Regulations (CCR) section
8 1358.1. Respondent shall participate in and successfully complete that program. Respondent
9 shall provide any information and documents that the program may deem pertinent. Respondent
10 shall successfully complete the classroom component of the program not later than six months
11 after Respondent's initial enrollment, and the longitudinal component of the program not later
12 than the time specified by the program, but no later than one year after attending the classroom
13 component. The professionalism program shall be at Respondent's expense and shall be in
14 addition to the CME requirements for renewal of licensure.

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

20 Respondent shall submit a certification of successful completion to the Board or its
21 designee not later than 15 calendar days after successfully completing the program or not later
22 than 15 calendar days after the effective date of the Decision, whichever is later.

23 7. PSYCHOTHERAPY. Within 60 calendar days of the effective date of this
24 Decision, Respondent shall submit to the Board or its designee for prior approval the name and
25 qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who
26 has a doctoral degree in psychology and at least five years of postgraduate experience in the
27 diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall
28 undergo and continue psychotherapy treatment, including any modifications to the frequency of

1 psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

2 The psychotherapist shall consider any information provided by the Board or its designee
3 and any other information the psychotherapist deems relevant and shall furnish a written
4 evaluation report to the Board or its designee. Respondent shall cooperate in providing the
5 psychotherapist with any information and documents that the psychotherapist may deem
6 pertinent.

7 Respondent shall have the treating psychotherapist submit quarterly status reports to the
8 Board or its designee. The Board or its designee may require Respondent to undergo psychiatric
9 evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of
10 probation, Respondent is found to be mentally unfit to resume the practice of medicine without
11 restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the
12 period of probation shall be extended until the Board determines that Respondent is mentally fit
13 to resume the practice of medicine without restrictions.

14 Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

15 8. CLINICAL DIAGNOSTIC EVALUATIONS AND REPORTS.

16 Respondent has undergone a Clinical Diagnostic Evaluation and will not be required to undergo
17 another complete evaluation at this time. However, at the Board's discretion, and on whatever
18 periodic basis that may be required by the Board or its designee, Respondent shall undergo and
19 complete a psychiatric and/or substance abuse evaluation (and psychological testing, if deemed
20 necessary) by a Board-appointed evaluator, who shall consider any information provided by the
21 Board or its designee and any other information the evaluator deems relevant, and shall furnish a
22 written evaluation report to the Board or its designee. Respondent shall cooperate fully with any
23 evaluation, and shall pay the cost of all psychiatric evaluations and psychological testing.
24 Respondent shall comply with all restrictions or conditions recommended by the evaluator within
25 15 calendar days after being notified by the Board or its designee.

26 9. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within
27 seven days of the effective date of this Decision, Respondent shall provide to the Board the
28 names, physical addresses, mailing addresses, and telephone numbers of any and all employers

1 and supervisors. Respondent shall also provide specific, written consent for the Board,
2 Respondent's worksite monitor, and Respondent's employers and supervisors to communicate
3 regarding Respondent's work status, performance, and monitoring.

4 For purposes of this section, "supervisors" shall include the Chief of Staff and Health or
5 Well Being Committee Chair, or equivalent, if applicable, when Respondent has medical staff
6 privileges.

7 10. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit
8 to biological fluid testing, at Respondent's expense, upon request of the Board or its designee.
9 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair
10 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall
11 make daily contact with the Board or its designee to determine whether biological fluid testing is
12 required. Respondent shall be tested on the date of the notification as directed by the Board or its
13 designee. The Board may order a Respondent to undergo a biological fluid test on any day, at
14 any time, including weekends and holidays. Except when testing on a specific date as ordered by
15 the Board or its designee, the scheduling of biological fluid testing shall be done on a random
16 basis. The cost of biological fluid testing shall be borne by Respondent.

17 During the first year of probation, Respondent shall be subject to 52 to 104 random tests.
18 During the second year of probation and for the duration of the probationary term, up to five
19 years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no
20 positive biological fluid tests in the previous five consecutive years of probation, may testing be
21 reduced to one time per month. Nothing precludes the Board from increasing the number of
22 random tests to the first-year level of frequency for any reason.

23 Prior to practicing medicine, Respondent shall contract with a laboratory or service,
24 approved in advance by the Board or its designee, that will conduct random, unannounced,
25 observed, biological fluid testing and meets all of the following standards:

- 26 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry
27 Association or have completed the training required to serve as a collector for the United
28 States Department of Transportation.

- 1 (b) Its specimen collectors conform to the current United States Department of
2 Transportation Specimen Collection Guidelines.
- 3 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published
4 by the United States Department of Transportation without regard to the type of test
5 administered.
- 6 (d) Its specimen collectors observe the collection of testing specimens.
- 7 (e) Its laboratories are certified and accredited by the United States Department of Health
8 and Human Services.
- 9 (f) Its testing locations shall submit a specimen to a laboratory within one business day of
10 receipt and all specimens collected shall be handled pursuant to chain of custody
11 procedures. The laboratory shall process and analyze the specimens and provide legally
12 defensible test results to the Board within seven business days of receipt of the specimen.
13 The Board will be notified of non-negative results within one (1) business day and will be
14 notified of negative test results within seven business days.
- 15 (g) Its testing locations possess all the materials, equipment, and technical expertise
16 necessary in order to test Respondent on any day of the week.
- 17 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens
18 for the detection of alcohol and illegal and controlled substances.
- 19 (i) It maintains testing sites located throughout California.
- 20 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line
21 computer database that allows Respondent to check in daily for testing.
- 22 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff
23 access to drug test results and compliance reporting information that is available 24 hours a
24 day.
- 25 (l) It employs or contracts with toxicologists that are licensed physicians and have
26 knowledge of substance abuse disorders and the appropriate medical training to interpret
27 and evaluate laboratory biological fluid test results, medical histories, and any other
28 information relevant to biomedical information.

1 (m) It will not consider a toxicology screen to be negative if a positive result is obtained
2 while practicing, even if Respondent holds a valid prescription for the substance.

3 Prior to changing testing locations for any reason, including during vacation or other travel,
4 alternative testing locations must be approved by the Board and meet the requirements above.

5 The contract shall require that the laboratory directly notify the Board or its designee of
6 non-negative results within one business day and negative test results within seven business days
7 of the results becoming available. Respondent shall maintain this laboratory or service contract
8 during the period of probation.

9 A certified copy of any laboratory test result may be received in evidence in any
10 proceedings between the Board and Respondent.

11 If a biological fluid test result indicates Respondent has used, consumed, ingested, or
12 administered to himself a prohibited substance, the Board shall order Respondent to cease
13 practice and instruct Respondent to leave any place of work where Respondent is practicing
14 medicine or providing medical services. The Board shall immediately notify all of Respondent's
15 employers, supervisors and work monitors, if any, that Respondent may not practice medicine or
16 provide medical services while the cease-practice order is in effect.

17 A biological fluid test will not be considered negative if a positive result is obtained while
18 practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited
19 substance use exists, the Board shall lift the cease-practice order within one business day.

20 After the issuance of a cease-practice order, the Board shall determine whether the positive
21 biological fluid test is in fact evidence of prohibited substance use by consulting with the
22 specimen collector and the laboratory, communicating with the licensee, his treating physician(s),
23 other health care provider, or group facilitator, as applicable.

24 For purposes of this condition, the terms "biological fluid testing" and "testing" mean the
25 acquisition and chemical analysis of a Respondent's urine, blood, breath, or hair.

26 For purposes of this condition, the term "prohibited substance" means an illegal drug, a
27 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by
28 Respondent and approved by the Board, alcohol, or any other substance Respondent has been

1 instructed by the Board not to use, consume, ingest, or administer to himself.

2 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited
3 substance, Respondent has committed a major violation, as defined in section 1361.52,
4 subdivision (a), and the Board shall impose any or all of the consequences set forth in section
5 1361.52, subdivision (b), in addition to any other terms or conditions the Board determines are
6 necessary for public protection or to enhance Respondent's rehabilitation.

7 11. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within 30 days
8 of the effective date of this Decision, Respondent shall submit to the Board or its designee, for its
9 prior approval, the name of a substance abuse support group which he shall attend for the duration
10 of probation. Respondent shall attend substance abuse support group meetings at least once per
11 week, or as ordered by the Board or its designee. Respondent shall pay all substance abuse
12 support group meeting costs.

13 The facilitator of the substance abuse support group meeting shall have a minimum of three
14 years' experience in the treatment and rehabilitation of substance abuse, and shall be licensed or
15 certified by the state or nationally certified organizations. The facilitator shall not have a current
16 or former financial, personal, or business relationship with Respondent within the last five years.
17 Respondent's previous participation in a substance abuse group support meeting led by the same
18 facilitator does not constitute a prohibited current or former financial, personal, or business
19 relationship.

20 The facilitator shall provide a signed document to the Board or its designee showing
21 Respondent's name, the group name, the date and location of the meeting, Respondent's
22 attendance, and Respondent's level of participation and progress. The facilitator shall report any
23 unexcused absence by Respondent from any substance abuse support group meeting to the Board,
24 or its designee, within 24 hours of the unexcused absence.

25 12. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE.
26 Within 30 calendar days of the effective date of this Decision, Respondent shall submit to the
27 Board or its designee for prior approval as a worksite monitor, the name and qualifications of one
28 or more licensed physician and surgeon, other licensed health care professional if no physician

1 and surgeon is available, or, as approved by the Board or its designee, a person in a position of
2 authority who is capable of monitoring Respondent at work.

3 The worksite monitor shall not have a current or former financial, personal, or familial
4 relationship with Respondent, or any other relationship that could reasonably be expected to
5 compromise the ability of the monitor to render impartial and unbiased reports to the Board or its
6 designee. If it is impractical for anyone but Respondent's employer to serve as the worksite
7 monitor, this requirement may be waived by the Board or its designee, however, under no
8 circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

9 The worksite monitor shall have an active unrestricted license with no disciplinary action
10 within the last five years, and shall sign an affirmation that he or she has reviewed the terms and
11 conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth by
12 the Board or its designee.

13 Respondent shall pay all worksite monitoring costs.

14 The worksite monitor shall have face-to-face contact with Respondent in the work
15 environment on as frequent a basis as determined by the Board or its designee, but not less than
16 once per week; interview other staff in the office regarding Respondent's behavior, if requested
17 by the Board or its designee; and review Respondent's work attendance.

18 The worksite monitor shall verbally report any suspected substance abuse to the Board and
19 Respondent's employer or supervisor within one business day of occurrence. If the suspected
20 substance abuse does not occur during the Board's normal business hours, the verbal report shall
21 be made to the Board or its designee within one hour of the next business day. A written report
22 that includes the date, time, and location of the suspected abuse; Respondent's actions; and any
23 other information deemed important by the worksite monitor shall be submitted to the Board or
24 its designee within 48 hours of the occurrence.

25 The worksite monitor shall complete and submit a written report monthly or as directed by
26 the Board or its designee which shall include the following: (1) Respondent's name and
27 Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3)
28 the worksite monitor's license number, if applicable; (4) the location or location(s) of the

1 worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the
2 names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance;
3 (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can
4 lead to suspected substance abuse by Respondent. Respondent shall complete any required
5 consent forms and execute agreements with the approved worksite monitor and the Board, or its
6 designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

7 If the worksite monitor resigns or is no longer available, Respondent shall, within five
8 calendar days of such resignation or unavailability, submit to the Board or its designee, for prior
9 approval, the name and qualifications of a replacement monitor who will be assuming that
10 responsibility within 15 calendar days. If Respondent fails to obtain approval of a replacement
11 monitor within 60 calendar days of the resignation or unavailability of the monitor, Respondent
12 shall receive a notification from the Board or its designee to cease the practice of medicine within
13 three calendar days after being so notified. Respondent shall cease the practice of medicine until
14 a replacement monitor is approved and assumes monitoring responsibility.

15 13. VIOLATION OF PROBATION CONDITION FOR SUBSTANCE
16 ABUSING LICENSEES. Failure to fully comply with any term or condition of probation is a
17 violation of probation.

18 A. If Respondent commits a major violation of probation as defined by section
19 1361.52, subdivision (a), of Title 16 of the CCR, the Board shall take one or more of the
20 following actions:

21 (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical
22 diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of
23 Title 16 of the CCR, at Respondent's expense. The cease-practice order issued by the Board or
24 its designee shall state that Respondent must test negative for at least a month of continuous
25 biological fluid testing before being allowed to resume practice. For purposes of determining the
26 length of time a Respondent must test negative while undergoing continuous biological fluid
27 testing following issuance of a cease-practice order, a month is defined as 30 thirty calendar days.
28 Respondent may not resume the practice of medicine until notified in writing by the Board or its

1 designee that he may do so.

2 (2) Increase the frequency of biological fluid testing.

3 (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or
4 other action as determined by the Board or its designee.

5 B. If Respondent commits a minor violation of probation as defined by section
6 1361.52, subdivision (c), of Title 16 of the CCR, the Board shall take one or more of the
7 following actions:

8 (1) Issue a cease-practice order;

9 (2) Order practice limitations;

10 (3) Order or increase supervision of Respondent;

11 (4) Order increased documentation;

12 (5) Issue a citation and fine, or a warning letter;

13 (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in
14 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the CCR at Respondent's
15 expense;

16 (7) Take any other action as determined by the Board or its designee.

17 C. Nothing in this Decision shall be considered a limitation on the Board's authority
18 to revoke Respondent's probation if he has violated any term or condition of probation. If
19 Respondent violates probation in any respect, the Board, after giving Respondent notice and the
20 opportunity to be heard, may revoke probation and carry out the disciplinary order that was
21 stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed
22 against Respondent during probation, the Board shall have continuing jurisdiction until the matter
23 is final, and the period of probation shall be extended until the matter is final.

24 14: NOTIFICATION. Within seven days of the effective date of this Decision,
25 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
26 Chief Executive Officer at every hospital where privileges or membership are extended to
27 Respondent, at any other facility where Respondent engages in the practice of medicine,
28 including all physician and locum tenens registries or other similar agencies, and to the Chief

1 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
2 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15
3 calendar days.

4 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

5 15. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED
6 PRACTICE NURSES. During probation, Respondent is prohibited from supervising physician
7 assistants and advanced practice nurses.

8 16. OBEY ALL LAWS. Respondent shall obey all federal, state and local
9 laws, all rules governing the practice of medicine in California and remain in full compliance
10 with any court ordered criminal probation, payments, and other orders.

11 17. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is
12 hereby ordered to reimburse the Board its costs of investigation and enforcement, in the amount
13 of \$14,796. Costs shall be payable to the Medical Board of California. Failure to pay such costs
14 shall be considered a violation of probation.

15 Payment must be made in full within 30 calendar days of the effective date of the Order, or
16 by a payment plan approved by the Medical Board of California. Any and all requests for a
17 payment plan shall be submitted in writing by Respondent to the Board. Failure to comply with
18 the payment plan shall be considered a violation of probation.

19 The filing of bankruptcy by Respondent shall not relieve Respondent of the responsibility
20 to repay investigation and enforcement costs.

21 18. QUARTERLY DECLARATIONS. Respondent shall submit quarterly
22 declarations under penalty of perjury on forms provided by the Board, stating whether there has
23 been compliance with all the conditions of probation. Respondent shall submit quarterly
24 declarations not later than 10 calendar days after the end of the preceding quarter.

25 19. GENERAL PROBATION REQUIREMENTS.

26 Compliance with Probation Unit

27 Respondent shall comply with the Board's probation unit.

28 Address Changes

1 Respondent shall, at all times, keep the Board informed of Respondent's business and
2 residence addresses, email address (if available), and telephone number. Changes of such
3 addresses shall be immediately communicated in writing to the Board or its designee. Under no
4 circumstances shall a post office box serve as an address of record, except as allowed by Business
5 and Professions Code section 2021, subdivision (b).

6 Place of Practice

7 Respondent shall not engage in the practice of medicine in Respondent's or patient's place
8 of residence, unless the patient resides in a skilled nursing facility or other similar licensed
9 facility.

10 License Renewal

11 Respondent shall maintain a current and renewed California physician's and surgeon's
12 license.

13 Travel or Residence Outside California

14 Respondent shall immediately inform the Board or its designee, in writing, of travel to any
15 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than 30
16 calendar days.

17 In the event Respondent should leave the State of California to reside or to practice
18 Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of
19 departure and return.

20 20. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent
21 shall be available in person upon request for interviews either at Respondent's place of business
22 or at the probation unit office, with or without prior notice throughout the term of probation.

23 21. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the
24 Board or its designee in writing within 15 calendar days of any periods of non-practice lasting
25 more than 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-
26 practice is defined as any period of time Respondent is not practicing medicine as defined in
27 Business and Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month
28 in direct patient care, clinical activity or teaching, or other activity as approved by the Board. If

1 Respondent resides in California and is considered to be in non-practice, Respondent shall
2 comply with all terms and conditions of probation. All time spent in an intensive training
3 program which has been approved by the Board or its designee shall not be considered non-
4 practice and does not relieve Respondent from complying with all the terms and conditions of
5 probation. Practicing medicine in another state of the United States or Federal jurisdiction while
6 on probation with the medical licensing authority of that state or jurisdiction shall not be
7 considered non-practice. A Board-ordered suspension of practice shall not be considered as a
8 period of non-practice.

9 In the event Respondent's period of non-practice while on probation exceeds 18 calendar
10 months, Respondent shall successfully complete the Federation of State Medical Boards' Special
11 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program
12 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model
13 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

14 Respondent's period of non-practice while on probation shall not exceed two years.

15 Periods of non-practice will not apply to the reduction of the probationary term.

16 Periods of non-practice for a Respondent residing outside of California will relieve
17 Respondent of the responsibility to comply with the probationary terms and conditions with the
18 exception of this condition and the following terms and conditions of probation: Obey All Laws;
19 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or
20 Controlled Substances; and Biological Fluid Testing.

21 22. COMPLETION OF PROBATION. Respondent shall comply with all
22 financial obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to
23 the completion of probation. This term does not include cost recovery, which is due within 30
24 calendar days of the effective date of the Order, or by a payment plan approved by the Medical
25 Board and timely satisfied. Upon successful completion of probation, Respondent's certificate
26 shall be fully restored.

27 23. VIOLATION OF PROBATION. Failure to fully comply with any term or
28 condition of probation is a violation of probation. If Respondent violates probation in any

1 respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke
2 probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to
3 Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation,
4 the Board shall have continuing jurisdiction until the matter is final, and the period of probation
5 shall be extended until the matter is final.

6 24. LICENSE SURRENDER. Following the effective date of this Decision, if
7 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
8 the terms and conditions of probation, Respondent may request to surrender his or her license.
9 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
10 determining whether or not to grant the request, or to take any other action deemed appropriate
11 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
12 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
13 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
14 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
15 application shall be treated as a petition for reinstatement of a revoked certificate.

16 25. PROBATION MONITORING COSTS. Respondent shall pay the costs
17 associated with probation monitoring each and every year of probation, as designated by the
18 Board, which may be adjusted on an annual basis. Such costs shall be payable to the Medical
19 Board of California and delivered to the Board or its designee no later than January 31 of each
20 calendar year.

21 26. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or
22 reapply for a new license or certification, or petition for reinstatement of a license, by any other
23 health care licensing action agency in the State of California, all of the charges and allegations
24 contained in Accusation No. 800-2019-061758 shall be deemed to be true, correct, and admitted
25 by Respondent for the purpose of any Statement of Issues or any other proceeding seeking to
26 deny or restrict license.

27 ///

28 ///

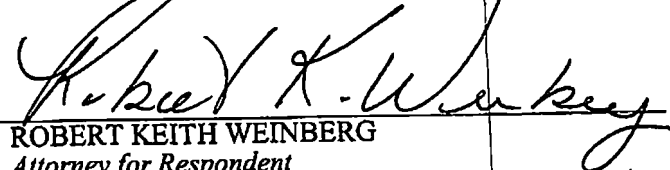
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ACCEPTANCE

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, Robert Keith Weinberg. 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: 5/30/23 
ERIK MARTIN BEZEMA, M.D.
Respondent

I have read and fully discussed with Respondent Erik Martin Bezema, 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: 5/30/23 
ROBERT KEITH WEINBERG
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
JUDITH T. ALVARADO
Supervising Deputy Attorney General

PEGGIE BRADFORD TARWATER
Deputy Attorney General
Attorneys for Complainant

LA2021601539

1 ACCEPTANCE

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

7
8 DATED: _____
9 ERIK MARTIN BEZEMA, M.D.
Respondent

10 I have read and fully discussed with Respondent Erik Martin Bezema, M.D. the terms and
11 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
12 I approve its form and content.

13 DATED: _____
14 ROBERT KEITH WEINBERG
Attorney for Respondent

15
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: May 30, 2023

Respectfully submitted,

20
21 ROB BONTA
Attorney General of California
22 JUDITH T. ALVARADO
Supervising Deputy Attorney General

23 Peggie Bradford Digitally signed by Peggie
Bradford Tarwater
24 Tarwater Date: 2023.05.30 12:08:40
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25 PEGGIE BRADFORD TARWATER
Deputy Attorney General
Attorneys for Complainant

26
27 LA2021601539

Exhibit A

Accusation No. 800-2019-061758

1 ROB BONTA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 PEGGIE BRADFORD TARWATER
Deputy Attorney General
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300 South Spring Street, Suite 1702
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E-mail: Peggie.Tarwater@doj.ca.gov
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 **ERIK MARTIN BEZEMA, M.D.**
14 **612 Spring Road**
Moorpark, CA 93021-1298
15 **Physician's and Surgeon's Certificate**
16 **No. A 103644,**
17 Respondent.

Case No. 800-2019-061758

A C C U S A T I O N

18
19 **PARTIES**

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

23 2. On May 2, 2008, the Medical Board issued Physician's and Surgeon's Certificate
24 Number A 103644 to Erik Martin Bezema, M.D. (Respondent). The Physician's and Surgeon's
25 Certificate was in full force and effect at all times relevant to the charges brought herein and will
26 expire on October 31, 2023, unless renewed.

27 ///
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 provides that a licensee who is found guilty under the
6 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed
7 one year, placed on probation and required to pay the costs of probation monitoring, or such other
8 action taken in relation to discipline as the Board deems proper.

9 5. Section 2228 of the Code states:

10 The authority of the board or the California Board of Podiatric Medicine to
11 discipline a licensee by placing him or her on probation includes, but is not limited to,
the following:

12 (a) Requiring the licensee to obtain additional professional training and to pass
13 an examination upon the completion of the training. The examination may be written
14 or oral, or both, and may be a practical or clinical examination, or both, at the option
of the board or the administrative law judge.

15 (b) Requiring the licensee to submit to a complete diagnostic examination by
16 one or more physicians and surgeons appointed by the board. If an examination is
17 ordered, the board shall receive and consider any other report of a complete
diagnostic examination given by one or more physicians and surgeons of the
licensee's choice.

18 (c) Restricting or limiting the extent, scope, or type of practice of the licensee,
19 including requiring notice to applicable patients that the licensee is unable to perform
the indicated treatment, where appropriate.

20 (d) Providing the option of alternative community service in cases other than
violations relating to quality of care.

21 STATUTORY PROVISIONS

22 6. Section 2234 of the Code, states:

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

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

27 ///

28 ///

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

4

5 7. Section 2238 of the Code states:

6 A violation of any federal statute or federal regulation or any of the statutes or
7 regulations of this state regulating dangerous drugs or controlled substances
8 constitutes unprofessional conduct.

9 8. Section 2239 of the Code states:

10 (a) The use or prescribing for or administering to himself or herself, of any
11 controlled substance; or the use of any of the dangerous drugs specified in Section
12 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous
13 or injurious to the licensee, or to any other person or to the public, or to the extent that
14 such use impairs the ability of the licensee to practice medicine safely or more than
15 one misdemeanor or any felony involving the use, consumption, or
16 self-administration of any of the substances referred to in this section, or any
17 combination thereof, constitutes unprofessional conduct. The record of the
18 conviction is conclusive evidence of such unprofessional conduct.

19 (b) A plea or verdict of guilty or a conviction following a plea of nolo
20 contendere is deemed to be a conviction within the meaning of this section. The
21 Medical Board may order discipline of the licensee in accordance with Section 2227
22 or the Medical Board may order the denial of the license when the time for appeal has
23 elapsed or the judgment of conviction has been affirmed on appeal or when an order
24 granting probation is made suspending imposition of sentence, irrespective of a
25 subsequent order under the provisions of Section 1203.4 of the Penal Code allowing
26 such person to withdraw his or her plea of guilty and to enter a plea of not guilty, or
27 setting aside the verdict of guilty, or dismissing the accusation, complaint,
28 information, or indictment.

9. Section 2242 of the Code states:

(a) Prescribing, dispensing, or furnishing dangerous drugs as defined in Section
4022 without an appropriate prior examination and a medical indication, constitutes
unprofessional conduct. An appropriate prior examination does not require a
synchronous interaction between the patient and the licensee and can be achieved
through the use of telehealth, including, but not limited to, a self-screening tool or a
questionnaire, provided that the licensee complies with the appropriate standard of
care.

(b) No licensee shall be found to have committed unprofessional conduct within
the meaning of this section if, at the time the drugs were prescribed, dispensed, or
furnished, any of the following applies:

(1) The licensee was a designated physician and surgeon or podiatrist serving in
the absence of the patient's physician and surgeon or podiatrist, as the case may be,
and if the drugs were prescribed, dispensed, or furnished only as necessary to
maintain the patient until the return of the patient's practitioner, but in any case no
longer than 72 hours.

(2) The licensee transmitted the order for the drugs to a registered nurse or to a

1 licensed vocational nurse in an inpatient facility, and if both of the following
2 conditions exist:

3 (A) The practitioner had consulted with the registered nurse or licensed
4 vocational nurse who had reviewed the patient's records.

5 (B) The practitioner was designated as the practitioner to serve in the absence
6 of the patient's physician and surgeon or podiatrist, as the case may be.

7 (3) The licensee was a designated practitioner serving in the absence of the
8 patient's physician and surgeon or podiatrist, as the case may be, and was in
9 possession of or had utilized the patient's records and ordered the renewal of a
10 medically indicated prescription for an amount not exceeding the original prescription
11 in strength or amount or for more than one refill.

12 (4) The licensee was acting in accordance with Section 120582 of the Health
13 and Safety Code.

14 10. Section 2261 of the Code states:

15 Knowingly making or signing any certificate or other document directly or
16 indirectly related to the practice of medicine or podiatry which falsely represents the
17 existence or nonexistence of a state of facts, constitutes unprofessional conduct.

18 11. Section 4324 of the Business and Professions Code states:

19 (a) Every person who signs the name of another, or of a fictitious person, or falsely
20 makes, alters, forges, utters, publishes, passes, or attempts to pass, as genuine, any
21 prescription for any drugs is guilty of forgery and upon conviction thereof shall be punished
22 by imprisonment pursuant to subdivision (h) of Section 1170 of the Penal Code, or by
23 imprisonment in a county jail for not more than one year.

24 (b) Every person who has in his or her possession any drugs secured by a
25 forged prescription shall be punished by imprisonment pursuant to subdivision (h) of
26 Section 1170 of the Penal Code, or by imprisonment in the county jail for not more
27 than one year.

28 12. Section 11170 of the Health and Safety Code states:

No person shall prescribe, administer, or furnish a controlled substance to himself.

13. Section 11173 of the Health and Safety Code states:

(a) No person shall obtain or attempt to obtain controlled substances, or procure
or attempt to procure the administration of or prescription for controlled substances,
(1) by fraud, deceit, misrepresentation, or subterfuge; or (2) by the concealment of a
material fact.

(b) No person shall make a false statement in any prescription, order, report, or
record, required by this division.

(c) No person shall, for the purpose of obtaining controlled substances, falsely
assume the title of, or represent himself to be, a manufacturer, wholesaler,
pharmacist, physician, dentist, veterinarian, registered nurse, physician's assistant, or

1 other authorized person.

2

3 **COST RECOVERY**

4 14. Section 125.3 of the Code provides, in pertinent part, that the Board may request the
5 administrative law judge to direct a licensee found to have committed a violation or violations of
6 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and
7 enforcement of the case, with failure of the licensee to comply subjecting the license to not being
8 renewed or reinstated. If a case settles, recovery of investigation and enforcement costs may be
9 included in a stipulated settlement.

10 **DEFINITIONS**

11 15. Tylenol #3 is a combination of acetaminophen with codeine. It is a Schedule III
12 controlled substance.

13 16. Phentermine is a stimulant used to decrease appetite. It is a Schedule IV controlled
14 substance.

15 17. Promethazine with codeine is an opioid cough medicine. It is a Schedule V
16 controlled substance.

17 18. Lorazepam (with a brand name of Ativan) is a benzodiazepine that may be used to
18 treat conditions including convulsions, anxiety, and insomnia. It is a Schedule IV controlled
19 substance.

20 19. Clonazepam is a benzodiazepine that may be used to treat conditions including
21 seizures and panic disorders. It is a Schedule IV controlled substance.

22 **FACTUAL ALLEGATIONS**

23 20. Respondent practices family medicine. From approximately 2014 to 2019,
24 Respondent was employed by Moorpark Family Medical Center (MFMC).

25 21. On approximately November 2, 2019, S.R., a nurse practitioner employed by MFMC
26 and Respondent's co-worker, received a text message from Respondent requesting a favor.
27 Respondent requested that S.R. provide an electronic prescription for pain medication to a New
28 York pharmacy as he had sustained an injury to his wrist while in New York. Respondent

1 provided information to S.R. for the prescription. Included in the information was a last filled
2 date of September 13, 2019. S.R. was concerned because she had not previously written this
3 prescription for Respondent. She consulted the Controlled Substance Utilization Review and
4 Evaluation System (CURES) for the previous year and learned that Respondent had been
5 receiving regular prescriptions for acetaminophen with codeine and phentermine using her
6 prescriber information. S.R. had neither prescribed the controlled substances nor authorized the
7 prescriptions for the controlled substances.

8 22. Respondent procured controlled substances using S.R.'s prescriber information
9 without her authorization. Between approximately April 2018 and November 2019, Respondent
10 procured phentermine, 37.5 mg., via approximately five telephone prescriptions using S.R.'s
11 prescriber information without her authorization. Between approximately July 2018 and
12 November 2019, Respondent procured Tylenol #3 via approximately six telephone prescriptions
13 using S.R.'s prescriber information without her authorization.

14 23. Respondent obtained Tylenol #3 and/or phentermine for his own use without an
15 examination conducted by S.R.

16 24. C.S., a nurse practitioner, was employed by MFMC. She was no longer employed by
17 MFMC in November 2019. C.S. treated Respondent as a patient. She rarely prescribed
18 medications to him and when she did so, it was for a cough syrup or an antibiotic. Between
19 approximately June 2017 and February 2018, Respondent procured phentermine, 37.5 mg., via
20 approximately three telephone prescriptions using C.S.'s prescriber information without her
21 authorization. Between approximately February 2017 and May 2018, Respondent procured
22 Tylenol #3 via approximately five telephone prescriptions using C.S.'s prescriber information
23 without her authorization.

24 25. Respondent obtained Tylenol #3 and/or phentermine for his own use without an
25 examination conducted by C.S.

26 26. J.I., M.D., the Medical Director of MFMC, rarely prescribed medications to
27 individuals with whom he worked. Respondent was not a patient of Dr. J.I. During the time of
28 Respondent's employment at MFMC, Dr. J.I. never prescribed a controlled substance to

1 Respondent. He never provided authorization for Respondent to procure a controlled substance.
2 In 2016, Respondent procured promethazine with codeine via approximately four telephone
3 prescriptions using Dr. J.I.'s prescriber information without his authorization.

4 27. Respondent obtained promethazine with codeine for his own use without an
5 examination conducted by Dr. J.I.

6 28. Between approximately February 2018 and October 2019, Respondent prescribed
7 controlled substances to S.R. without performing an examination, such as lorazepam,
8 clonazepam, and phentermine.

9 **FIRST CAUSE FOR DISCIPLINE**

10 **(Self-Prescribing of Controlled Substances)**

11 29. By reason of the facts set forth in paragraphs 20 through 27 above, Respondent is
12 subject to disciplinary action under Code section 2239, and/or Health and Safety Code section
13 11170 in that he prescribed and/or furnished controlled substances to himself.

14 **SECOND CAUSE FOR DISCIPLINE**

15 **(Falsification of Prescriptions)**

16 30. By reason of the facts set forth in paragraphs 20 through 27 and in the First Cause for
17 Discipline above, Respondent is subject to disciplinary action under Code section 2261, 4324,
18 and/or Health and Safety Code section 11173 in that he procured prescriptions for controlled
19 substances and procured controlled substances through the use of the prescriber information of
20 S.R., C.S., and/or Dr. J.I. without obtaining valid prescriptions and without authorization for the
21 prescriptions.

22 **THIRD CAUSE FOR DISCIPLINE**

23 **(Prescribing without Examination)**

24 31. By reason of the facts set forth in paragraphs 20 through 28 and in the First and
25 Second Causes for Discipline above, Respondent is subject to disciplinary action under Code
26 section 2242 in that he procured dangerous drugs as defined in Code section 4022 for his own use
27 and/or for S.R. without an appropriate prior examination and a medical indication.

28 ///

1 **FOURTH CAUSE FOR DISCIPLINE**

2 **(Violation of Laws Regulating Controlled Substances)**

3 32. By reason of the facts set forth in paragraphs 20 through 28 and in the First, Second,
4 and Third Causes for Discipline above, Respondent is subject to disciplinary action under Code
5 section 2238 in that he violated drug laws regulating controlled substances.

6 **FIFTH CAUSE FOR DISCIPLINE**

7 **(Acts of Dishonesty or Corruption)**


8 33. By reason of the facts set forth in paragraphs 20 through 28 and in the First, Second,
9 Third, and Fourth Causes for Discipline above, Respondent is subject to disciplinary action under
10 Code section 2234, subdivision (e) in that he committed acts of dishonesty or corruption.

11 **PRAYER**

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

- 14 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 103644,
15 issued to Respondent Erik Martin Bezema, M.D.;
- 16 2. Revoking, suspending or denying approval of Respondent Erik Martin Bezema,
17 M.D.'s authority to supervise physician assistants and advanced practice nurses;
- 18 3. Ordering Respondent Erik Martin Bezema, M.D., to pay the Board the costs of the
19 investigation and enforcement of this case, and if placed on probation, the costs of probation
20 monitoring;
- 21 5. Taking such other and further action as deemed necessary and proper.

22
23 DATED: NOV 10 2022


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

LA2021601539