

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

In the Matter of the Accusation
Against:

Thomas Doyal Watson, M.D.

Physician's and Surgeon's
Certificate No. G 54134

Respondent.

Case No.: 800-2021-082451

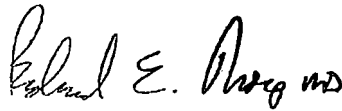
DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on December 14, 2023.

IT IS SO ORDERED: November 14, 2023.

MEDICAL BOARD OF CALIFORNIA



Richard E. Thorp, Chair
Panel B

1 ROB BONTA
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8

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

13 In the Matter of the Accusation Against:

14 **THOMAS DOYAL WATSON, M.D.**
15 **43563 State Highway 299 E**
Fall River Mills, CA 96028-9787

16 **Physician's and Surgeon's Certificate**
17 **No. G 54134**

18 Respondent.

Case No. 800-2021-082451

OAH No. 2023060069

**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. Reji Varghese (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 Kalev Kaseoru, Deputy
26 Attorney General.

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1 CULPABILITY

2 9. Respondent understands and agrees that the charges and allegations in Accusation
3 No. 800-2021-082451, if proven at a hearing, constitute cause for imposing discipline upon his
4 Physician's and Surgeon's Certificate.

5 10. Respondent agrees that, at a hearing, Complainant could establish a prima facie case
6 or factual basis for the charges in the Accusation, and that Respondent hereby gives up his right
7 to contest those charges.

8 11. Respondent does not contest that, at an administrative hearing, Complainant could
9 establish a prima facie case with respect to the charges and allegations in Accusation No. 800-
10 2021-082451, a true and correct copy of which is attached hereto as Exhibit A, and that he has
11 thereby subjected his Physician's and Surgeon's Certificate, No. G 54134 to disciplinary action.

12 12. Respondent agrees that his Physician's and Surgeon's Certificate is subject to
13 discipline and he agrees to be bound by the Board's imposition of discipline as set forth in the
14 Disciplinary Order below.

15 CONTINGENCY

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

26 14. Respondent agrees that if he ever petitions for early termination or modification of
27 probation, or if an accusation and/or petition to revoke probation is filed against him before the
28 Board, all of the charges and allegations contained in Accusation No. 800-2021-082451 shall be

1 deemed true, correct and fully admitted by respondent for purposes of any such proceeding or any
2 other licensing proceeding involving Respondent in the State of California.

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

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

9 **DISCIPLINARY ORDER**

10 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G 54134 issued
11 to Respondent Thomas Doyal Watson, M.D. is revoked. However, the revocation is stayed and
12 Respondent is placed on probation for five (5) years from the effective date of the Decision on the
13 following terms and conditions:

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

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

24 If Respondent has a confirmed positive biological fluid test for any substance (whether or
25 not legally prescribed) and has not reported the use to the Board or its designee, Respondent shall
26 receive a notification from the Board or its designee to immediately cease the practice of
27 medicine. The Respondent shall not resume the practice of medicine until the final decision on an
28 accusation and/or a petition to revoke probation is effective. An accusation and/or petition to

1 revoke probation shall be filed by the Board within 30 days of the notification to cease practice. If
2 the Respondent requests a hearing on the accusation and/or petition to revoke probation, the
3 Board shall provide the Respondent with a hearing within 30 days of the request, unless the
4 Respondent stipulates to a later hearing. If the case is heard by an Administrative Law Judge
5 alone, he or she shall forward a Proposed Decision to the Board within 15 days of submission of
6 the matter. Within 15 days of receipt by the Board of the Administrative Law Judge's proposed
7 decision, the Board shall issue its Decision, unless good cause can be shown for the delay. If the
8 case is heard by the Board, the Board shall issue its decision within 15 days of submission of the
9 case, unless good cause can be shown for the delay. Good cause includes, but is not limited to,
10 non-adoption of the proposed decision, request for consideration, remands and other interlocutory
11 orders issued by the Board. The cessation of practice shall not apply to the reduction of the
12 probationary time period.

13 If the Board does not file an accusation or petition to revoke probation within 30 days of the
14 issuance of the notification to cease practice or does not provide Respondent with a hearing
15 within 30 days of such a request, the notification of cease practice shall be dissolved.

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

18 3. CLINICAL DIAGNOSTIC EVALUATIONS AND REPORTS: Within thirty (30)
19 calendar days of the effective date of this Decision, and on whatever periodic basis thereafter as
20 may be required by the Board or its designee, Respondent shall undergo and complete a clinical
21 diagnostic evaluation, including any and all testing deemed necessary, by a Board-appointed
22 board certified physician and surgeon. The examiner shall consider any information provided by
23 the Board or its designee and any other information he or she deems relevant, and shall furnish a
24 written evaluation report to the Board or its designee.

25 The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon
26 who holds a valid, unrestricted license, has three (3) years' experience in providing evaluations of
27 physicians and surgeons with substance abuse disorders, and is approved by the Board or its
28 designee. The clinical diagnostic evaluation shall be conducted in accordance with acceptable

1 professional standards for conducting substance abuse clinical diagnostic evaluations. The
2 evaluator shall not have a current or former financial, personal, or business relationship with
3 Respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and
4 independent evaluation. The clinical diagnostic evaluation report shall set forth, in the
5 evaluator's opinion, whether Respondent has a substance abuse problem, whether Respondent is a
6 threat to himself or herself or others, and recommendations for substance abuse treatment,
7 practice restrictions, or other recommendations related to Respondent's rehabilitation and ability
8 to practice safely. If the evaluator determines during the evaluation process that Respondent is a
9 threat to himself or herself or others, the evaluator shall notify the Board within twenty-four (24)
10 hours of such a determination.

11 In formulating his or her opinion as to whether Respondent is safe to return to either part-
12 time or full-time practice and what restrictions or recommendations should be imposed, including
13 participation in an inpatient or outpatient treatment program, the evaluator shall consider the
14 following factors: Respondent's license type; Respondent's history; Respondent's documented
15 length of sobriety (i.e., length of time that has elapsed since Respondent's last substance use);
16 Respondent's scope and pattern of substance abuse; Respondent's treatment history, medical
17 history and current medical condition; the nature, duration and severity of Respondent's
18 substance abuse problem or problems; and whether Respondent is a threat to himself or herself or
19 the public.

20 For all clinical diagnostic evaluations, a final written report shall be provided to the Board
21 no later than ten (10) days from the date the evaluator is assigned the matter. If the evaluator
22 requests additional information or time to complete the evaluation and report, an extension may
23 be granted, but shall not exceed thirty (30) days from the date the evaluator was originally
24 assigned the matter.

25 The Board shall review the clinical diagnostic evaluation report within five (5) business
26 days of receipt to determine whether Respondent is safe to return to either part-time or full-time
27 practice and what restrictions or recommendations shall be imposed on Respondent based on the
28 recommendations made by the evaluator. Respondent shall not be returned to practice until he or

1 she has at least thirty (30) days of negative biological fluid tests or biological fluid tests indicating
2 that he or she has not used, consumed, ingested, or administered to himself or herself a prohibited
3 substance, as defined in section 1361.51, subdivision (e), of Title 16 of the California Code of
4 Regulations.

5 Clinical diagnostic evaluations conducted prior to the effective date of this Decision shall
6 not be accepted towards the fulfillment of this requirement. The cost of the clinical diagnostic
7 evaluation, including any and all testing deemed necessary by the examiner, the Board or its
8 designee, shall be borne by the licensee.

9 Respondent shall not engage in the practice of medicine until notified by the Board or its
10 designee that he or she is fit to practice medicine safely. The period of time that Respondent is
11 not practicing medicine shall not be counted toward completion of the term of probation.

12 Respondent shall undergo biological fluid testing as required in this Decision at least two (2)
13 times per week while awaiting the notification from the Board if he or she is fit to practice
14 medicine safely.

15 Respondent shall comply with all restrictions or conditions recommended by the examiner
16 conducting the clinical diagnostic evaluation within fifteen (15) calendar days after being notified
17 by the Board or its designee.

18 4. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to
19 biological fluid testing, at Respondent's expense, upon request of the Board or its designee.
20 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair
21 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall
22 make daily contact with the Board or its designee to determine whether biological fluid testing is
23 required. Respondent shall be tested on the date of the notification as directed by the Board or its
24 designee. The Board may order a Respondent to undergo a biological fluid test on any day, at
25 any time, including weekends and holidays. Except when testing on a specific date as ordered by
26 the Board or its designee, the scheduling of biological fluid testing shall be done on a random
27 basis. The cost of biological fluid testing shall be borne by the Respondent.

28 During the first year of probation, Respondent shall be subject to 52 to 104 random tests.

1 During the second year of probation and for the duration of the probationary term, up to five (5)
2 years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no
3 positive biological fluid tests in the previous five (5) consecutive years of probation, may testing
4 be reduced to one (1) time per month. Nothing precludes the Board from increasing the number
5 of random tests to the first-year level of frequency for any reason.

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

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

12 (b) Its specimen collectors conform to the current United States Department of
13 Transportation Specimen Collection Guidelines.

14 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published
15 by the United States Department of Transportation without regard to the type of test
16 administered.

17 (d) Its specimen collectors observe the collection of testing specimens.

18 (e) Its laboratories are certified and accredited by the United States Department of Health
19 and Human Services.

20 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day
21 of receipt and all specimens collected shall be handled pursuant to chain of custody
22 procedures. The laboratory shall process and analyze the specimens and provide legally
23 defensible test results to the Board within seven (7) business days of receipt of the
24 specimen. The Board will be notified of non-negative results within one (1) business day
25 and will be notified of negative test results within seven (7) business days.

26 (g) Its testing locations possess all the materials, equipment, and technical expertise
27 necessary in order to test Respondent on any day of the week.

28 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens

1 for the detection of alcohol and illegal and controlled substances.

2 (i) It maintains testing sites located throughout California.

3 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line
4 computer database that allows the Respondent to check in daily for testing.

5 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff
6 access to drug test results and compliance reporting information that is available 24 hours a
7 day.

8 (l) It employs or contracts with toxicologists that are licensed physicians and have
9 knowledge of substance abuse disorders and the appropriate medical training to interpret
10 and evaluate laboratory biological fluid test results, medical histories, and any other
11 information relevant to biomedical information.

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

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

16 The contract shall require that the laboratory directly notify the Board or its designee of
17 non-negative results within one (1) business day and negative test results within seven (7)
18 business days of the results becoming available. Respondent shall maintain this laboratory or
19 service contract during the period of probation.

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

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

28 A biological fluid test will not be considered negative if a positive result is obtained while

1 practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited
2 substance use exists, the Board shall lift the cease-practice order within one (1) business day.

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

7 For purposes of this condition, the terms “biological fluid testing” and “testing” mean the
8 acquisition and chemical analysis of a Respondent’s urine, blood, breath, or hair.

9 For purposes of this condition, the term “prohibited substance” means an illegal drug, a
10 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by
11 Respondent and approved by the Board, alcohol, or any other substance the Respondent has been
12 instructed by the Board not to use, consume, ingest, or administer to himself or herself.

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

18 5. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within thirty (30) days
19 of the effective date of this Decision, Respondent shall submit to the Board or its designee, for its
20 prior approval, the name of a substance abuse support group which he or she shall attend for the
21 duration of probation. Respondent shall attend substance abuse support group meetings at least
22 once per week, or as ordered by the Board or its designee. Respondent shall pay all substance
23 abuse support group meeting costs.

24 The facilitator of the substance abuse support group meeting shall have a minimum of three
25 (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed
26 or certified by the state or nationally certified organizations. The facilitator shall not have a
27 current or former financial, personal, or business relationship with Respondent within the last five
28 (5) years. Respondent’s previous participation in a substance abuse group support meeting led by

1 the same facilitator does not constitute a prohibited current or former financial, personal, or
2 business relationship.

3 The facilitator shall provide a signed document to the Board or its designee showing
4 Respondent's name, the group name, the date and location of the meeting, Respondent's
5 attendance, and Respondent's level of participation and progress. The facilitator shall report any
6 unexcused absence by Respondent from any substance abuse support group meeting to the Board,
7 or its designee, within twenty-four (24) hours of the unexcused absence.

8 6. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar
9 days of the effective date of this Decision, Respondent shall enroll in a professionalism program,
10 that meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1.
11 Respondent shall participate in and successfully complete that program. Respondent shall
12 provide any information and documents that the program may deem pertinent. Respondent shall
13 successfully complete the classroom component of the program not later than six (6) months after
14 Respondent's initial enrollment, and the longitudinal component of the program not later than the
15 time specified by the program, but no later than one (1) year after attending the classroom
16 component. The professionalism program shall be at Respondent's expense and shall be in
17 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

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

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

26 7. PSYCHIATRIC EVALUATION. Within 30 calendar days of the effective date of
27 this Decision, and on whatever periodic basis thereafter may be required by the Board or its
28 designee, Respondent shall undergo and complete a psychiatric evaluation (and psychological

1 testing, if deemed necessary) by a Board-appointed board certified psychiatrist, who shall
2 consider any information provided by the Board or designee and any other information the
3 psychiatrist deems relevant, and shall furnish a written evaluation report to the Board or its
4 designee. Psychiatric evaluations conducted prior to the effective date of the Decision shall not
5 be accepted towards the fulfillment of this requirement. Respondent shall pay the cost of all
6 psychiatric evaluations and psychological testing.

7 Respondent shall comply with all restrictions or conditions recommended by the evaluating
8 psychiatrist within 15 calendar days after being notified by the Board or its designee.

9 8. PSYCHOTHERAPY. Within 60 calendar days of the effective date of this
10 Decision, Respondent shall submit to the Board or its designee for prior approval the name and
11 qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who
12 has a doctoral degree in psychology and at least five years of postgraduate experience in the
13 diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall
14 undergo and continue psychotherapy treatment, including any modifications to the frequency of
15 psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

16 The psychotherapist shall consider any information provided by the Board or its designee
17 and any other information the psychotherapist deems relevant and shall furnish a written
18 evaluation report to the Board or its designee. Respondent shall cooperate in providing the
19 psychotherapist with any information and documents that the psychotherapist may deem
20 pertinent.

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

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

1 9. MEDICAL EVALUATION AND TREATMENT. Within 30 calendar days of the
2 effective date of this Decision, and on a periodic basis thereafter as may be required by the Board
3 or its designee, Respondent shall undergo a medical evaluation by a Board-appointed physician
4 who shall consider any information provided by the Board or designee and any other information
5 the evaluating physician deems relevant and shall furnish a medical report to the Board or its
6 designee. Respondent shall provide the evaluating physician with any information and
7 documentation that the evaluating physician may deem pertinent.

8 Following the evaluation, Respondent shall comply with all restrictions or conditions
9 recommended by the evaluating physician within 15 calendar days after being notified by the
10 Board or its designee. If Respondent is required by the Board or its designee to undergo medical
11 treatment, Respondent shall within 30 calendar days of the requirement notice, submit to the
12 Board or its designee for prior approval the name and qualifications of a California licensed
13 treating physician of Respondent's choice. Upon approval of the treating physician, Respondent
14 shall within 15 calendar days undertake medical treatment and shall continue such treatment until
15 further notice from the Board or its designee.

16 The treating physician shall consider any information provided by the Board or its designee
17 or any other information the treating physician may deem pertinent prior to commencement of
18 treatment. Respondent shall have the treating physician submit quarterly reports to the Board or
19 its designee indicating whether or not the Respondent is capable of practicing medicine safely.
20 Respondent shall provide the Board or its designee with any and all medical records pertaining to
21 treatment that the Board or its designee deems necessary.

22 If, prior to the completion of probation, Respondent is found to be physically incapable of
23 resuming the practice of medicine without restrictions, the Board shall retain continuing
24 jurisdiction over Respondent's license and the period of probation shall be extended until the
25 Board determines that Respondent is physically capable of resuming the practice of medicine
26 without restrictions. Respondent shall pay the cost of the medical evaluation(s) and treatment.

27 10. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within
28 thirty (30) calendar days of the effective date of this Decision, Respondent shall submit to the

1 Board or its designee for prior approval as a worksite monitor, the name and qualifications of one
2 or more licensed physician and surgeon, other licensed health care professional if no physician
3 and surgeon is available, or, as approved by the Board or its designee, a person in a position of
4 authority who is capable of monitoring the Respondent at work.

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

11 The worksite monitor shall have an active unrestricted license with no disciplinary action
12 within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms
13 and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth
14 by the Board or its designee.

15 Respondent shall pay all worksite monitoring costs.

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

20 The worksite monitor shall verbally report any suspected substance abuse to the Board and
21 Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected
22 substance abuse does not occur during the Board's normal business hours, the verbal report shall
23 be made to the Board or its designee within one (1) hour of the next business day. A written
24 report that includes the date, time, and location of the suspected abuse; Respondent's actions; and
25 any other information deemed important by the worksite monitor shall be submitted to the Board
26 or its designee within 48 hours of the occurrence.

27 The worksite monitor shall complete and submit a written report monthly or as directed by
28 the Board or its designee which shall include the following: (1) Respondent's name and

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

9 If the worksite monitor resigns or is no longer available, Respondent shall, within five (5)
10 calendar days of such resignation or unavailability, submit to the Board or its designee, for prior
11 approval, the name and qualifications of a replacement monitor who will be assuming that
12 responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a
13 replacement monitor within sixty (60) calendar days of the resignation or unavailability of the
14 monitor, Respondent shall receive a notification from the Board or its designee to cease the
15 practice of medicine within three (3) calendar days after being so notified. Respondent shall
16 cease the practice of medicine until a replacement monitor is approved and assumes monitoring
17 responsibility.

18 11. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven
19 (7) days of the effective date of this Decision, Respondent shall provide to the Board the names,
20 physical addresses, mailing addresses, and telephone numbers of any and all employers and
21 supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's
22 worksite monitor, and Respondent's employers and supervisors to communicate regarding
23 Respondent's work status, performance, and monitoring.

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

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1 12. VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING
2 LICENSEES Failure to fully comply with any term or condition of probation is a violation of
3 probation.

4 A. If Respondent commits a major violation of probation as defined by section
5 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take
6 one or more of the following actions:

7 (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical
8 diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of
9 Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice
10 order issued by the Board or its designee shall state that Respondent must test negative for at least
11 a month of continuous biological fluid testing before being allowed to resume practice. For
12 purposes of determining the length of time a Respondent must test negative while undergoing
13 continuous biological fluid testing following issuance of a cease-practice order, a month is
14 defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until
15 notified in writing by the Board or its designee that he or she may do so.

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

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

19 B. If Respondent commits a minor violation of probation as defined by section
20 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take
21 one or more of the following actions:

22 (1) Issue a cease-practice order;

23 (2) Order practice limitations;

24 (3) Order or increase supervision of Respondent;

25 (4) Order increased documentation;

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

27 (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in
28 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of

1 Regulations, at Respondent's expense;

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

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

10 13. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the
11 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
12 Chief Executive Officer at every hospital where privileges or membership are extended to
13 Respondent, at any other facility where Respondent engages in the practice of medicine,
14 including all physician and locum tenens registries or other similar agencies, and to the Chief
15 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
16 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15
17 calendar days.

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

19 14. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE
20 NURSES. During probation, Respondent is prohibited from supervising physician assistants and
21 advanced practice nurses.

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

25 16. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby
26 ordered to reimburse the Board its costs of investigation and enforcement, including, but not
27 limited to, expert review, amended accusations, legal reviews, investigation(s), and subpoena
28 enforcement, as applicable, in the amount of \$21,684.00 (twenty-one thousand six hundred

1 eighty-four dollars and no cents). Costs shall be payable to the Medical Board of California.
2 Failure to pay such costs shall be considered a violation of probation.

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

7 The filing of bankruptcy by respondent shall not relieve respondent of the responsibility to
8 repay investigation and enforcement costs, including expert review costs (if applicable).

9 17. QUARTERLY DECLARATIONS. Respondent shall submit quarterly
10 declarations under penalty of perjury on forms provided by the Board, stating whether there has
11 been compliance with all the conditions of probation.

12 Respondent shall submit quarterly declarations not later than 10 calendar days after the end
13 of the preceding quarter.

14 18. GENERAL PROBATION REQUIREMENTS.

15 Compliance with Probation Unit

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

17 Address Changes

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

23 Place of Practice

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

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1 License Renewal

2 Respondent shall maintain a current and renewed California physician's and surgeon's
3 license.

4 Travel or Residence Outside California

5 Respondent shall immediately inform the Board or its designee, in writing, of travel to any
6 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty
7 (30) calendar days.

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

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

14 20. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board
15 or its designee in writing within 15 calendar days of any periods of non-practice lasting more than
16 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
17 defined as any period of time Respondent is not practicing medicine as defined in Business and
18 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
19 patient care, clinical activity or teaching, or other activity as approved by the Board. If
20 Respondent resides in California and is considered to be in non-practice, Respondent shall
21 comply with all terms and conditions of probation. All time spent in an intensive training
22 program which has been approved by the Board or its designee shall not be considered non-
23 practice and does not relieve Respondent from complying with all the terms and conditions of
24 probation. Practicing medicine in another state of the United States or Federal jurisdiction while
25 on probation with the medical licensing authority of that state or jurisdiction shall not be
26 considered non-practice. A Board-ordered suspension of practice shall not be considered as a
27 period of non-practice.

28 In the event Respondent's period of non-practice while on probation exceeds 18 calendar

1 months, Respondent shall successfully complete the Federation of State Medical Boards's Special
2 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program
3 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model
4 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

5 Respondent's period of non-practice while on probation shall not exceed two (2) years.

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

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

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

18 22. VIOLATION OF PROBATION. Failure to fully comply with any term or
19 condition of probation is a violation of probation. If Respondent violates probation in any
20 respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke
21 probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to
22 Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation,
23 the Board shall have continuing jurisdiction until the matter is final, and the period of probation
24 shall be extended until the matter is final.

25 23. LICENSE SURRENDER. Following the effective date of this Decision, if
26 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
27 the terms and conditions of probation, Respondent may request to surrender his or her license.
28 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in

1 determining whether or not to grant the request, or to take any other action deemed appropriate
2 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
3 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
4 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
5 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
6 application shall be treated as a petition for reinstatement of a revoked certificate.

7 24. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
8 with probation monitoring each and every year of probation, as designated by the Board, which
9 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
10 California and delivered to the Board or its designee no later than January 31 of each calendar
11 year.

12 25. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply
13 for a new license or certification, or petition for reinstatement of a license, by any other health
14 care licensing action agency in the State of California, all of the charges and allegations contained
15 in Accusation No. 800-2021-082451 shall be deemed to be true, correct, and admitted by
16 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or
17 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, Mehran Tahoori, Esq.. 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: 8/22/2023

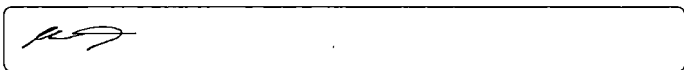


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THOMAS DOYAL WATSON, M.D.
Respondent

I have read and fully discussed with Respondent Thomas Doyal Watson, 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: 8/22/2023



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MEHRAN TAHOORI, ESQ.
Attorney for Respondent

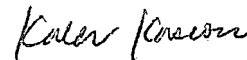
ENDORSEMENT

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

DATED: August 23, 2023

Respectfully submitted,

ROB BONTA
Attorney General of California
ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General



KALEV KASEORU
Deputy Attorney General
Attorneys for Complainant

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EXHIBIT A
ACCUSATION NO. 800-2021-082451

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Supervising Deputy Attorney General
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Attorneys for Complainant
8

9
10 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
11 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA
12

13 In the Matter of the Accusation Against:
14 **Thomas Doyal Watson, M.D.**
43563 State Highway 299 E
15 Fall River Mills, CA 96028-9787
16 **Physician's and Surgeon's Certificate**
No. G 54134,
17
18 Respondent.

Case No. 800-2021-082451

A C C U S A T I O N

19
20 **PARTIES**

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

24 2. On or about December 17, 1984, the Medical Board issued Physician's and Surgeon's
25 Certificate Number G 54134 to Thomas Doyal Watson, M.D. (Respondent). The Physician's and
26 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
27 herein and will expire on November 30, 2024, unless renewed. On or about March 6, 2023, an Ex
28 Parte Interim Suspension Order Petition was filed and granted in part, suspension stayed, with

1 terms and conditions limiting Respondent's Physician's and Surgeon's Certificate. On or about
2 March 15, 2023, Respondent entered into a Stipulated Interim Suspension Order which adopted
3 all of the previous conditions from the Ex Parte Interim Suspension Order. The Stipulated Interim
4 Suspension Order remains in effect until modified by the Board.

5 **JURISDICTION**

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

9 4. Section 2227 of the Code states, in pertinent part:

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

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

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

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

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

22 5. 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 (b) Gross negligence.

28 (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

1 separate and distinct departure from the applicable standard of care shall constitute
2 repeated negligent acts.

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

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

11 (d) Incompetence.

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

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

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

19 6. Unprofessional conduct under Business and Professions Code section 2234 is conduct
20 which breaches the rules or ethical code of the medical profession, or conduct which is
21 unbecoming a member in good standing of the medical profession, and which demonstrates an
22 unfitness to practice medicine. *Shea v. Bd. of Medical Examiners* (1978) 81 Cal.App.3d 564,
23 575.

24 7. Section 2239 of the Code states, in pertinent part:

25 (a) The use or prescribing for or administering to himself or herself, of any
26 controlled substance; or the use of any of the dangerous drugs specified in Section
27 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous
28 or injurious to the licensee, or to any other person or to the public, or to the extent
that such use impairs the ability of the licensee to practice medicine safely or more
than one misdemeanor or any felony involving the use, consumption, or self-
administration of any of the substances referred to in this section, or any combination
thereof, constitutes unprofessional conduct. The record of the conviction is
conclusive evidence of such unprofessional conduct.

(b) A plea or verdict of guilty or a conviction following a plea of nolo
contendere is deemed to be a conviction within the meaning of this section. The
Medical Board may order discipline of the licensee in accordance with Section 2227
or the Medical Board may order the denial of the license when the time for appeal
has elapsed or the judgment of conviction has been affirmed on appeal or when an
order granting probation is made suspending imposition of sentence, irrespective of a
subsequent order under the provisions of Section 1203.4 of the Penal Code allowing

1 such person to withdraw his or her plea of guilty and to enter a plea of not guilty, or
2 ~~setting aside the verdict of guilty, or dismissing the accusation, complaint,~~
information, or indictment.

3 **STATUTORY PROVISIONS**

4 8. Section 820 of the Code states:

5 Whenever it appears that any person holding a license, certificate or permit
6 under this division or under any initiative act referred to in this division may be
unable to practice his or her profession safely because the licentiate's ability to
7 practice is impaired due to mental illness, or physical illness affecting competency,
the licensing agency may order the licentiate to be examined by one or more
8 physicians and surgeons or psychologists designated by the agency. The report of the
examiners shall be made available to the licentiate and may be received as direct
9 evidence in proceedings conducted pursuant to Section 822.

10 9. Section 822 of the Code states:

11 If a licensing agency determines that its licentiate's ability to practice his or her
12 profession safely is impaired because the licentiate is mentally ill, or physically ill
affecting competency, the licensing agency may take action by any one of the
13 following methods:

14 (a) Revoking the licentiate's certificate or license.

15 (b) Suspending the licentiate's right to practice.

16 (c) Placing the licentiate on probation.

17 (d) Taking such other action in relation to the licentiate as the licensing agency
in its discretion deems proper.

18 The licensing section shall not reinstate a revoked or suspended certificate or
19 license until it has received competent evidence of the absence or control of the
condition which caused its action and until it is satisfied that with due regard for the
20 public health and safety the person's right to practice his or her profession may be
safely reinstated.

21 **COST RECOVERY**

22 10. Section 125.3 of the Code provides, in pertinent part, that the Board may request the
23 administrative law judge to direct a licensee found to have committed a violation or violations of
24 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and
25 enforcement of the case, with failure of the licensee to comply subjecting the license to not being
26 renewed or reinstated. If a case settles, recovery of investigation and enforcement costs may be
27 included in a stipulated settlement.

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FACTUAL ALLEGATIONS

1
2 11. On or about October 10, 2021, Respondent was detained at the Redding Airport for
3 suspicion of being intoxicated in public. Respondent had been denied passage through a TSA
4 security checkpoint because he was deemed not safe to fly by security personnel. Security
5 personnel called law enforcement to the scene because they believed Respondent was intoxicated
6 and he was reported to be lying on a restroom floor at the airport. After arriving on scene,
7 Redding police officers made contact with Respondent in one of the airport's bathroom stalls
8 where they reported that Respondent was unable to maintain his own balance and had to be
9 assisted to exit the airport. The responding officer noted a very strong odor of alcohol emanating
10 from Respondent, and noted that Respondent's eyes were red and watery, and that his speech was
11 so heavily slurred that officers could not understand him.

12 12. Respondent was handcuffed and transported to the Shasta County Jail. No charges
13 were ultimately filed against Respondent for this incident.

14 13. On or about October 13, 2021, the Medical Board of California received an online
15 complaint against Respondent alleging that Respondent had been sent home from his hospital
16 employment due to being intoxicated on the job, that he regularly arrived to work intoxicated, had
17 a history of being intoxicated in public, three prior DUI convictions, and detailed the October 10,
18 2021 incident and arrest.

19 14. On or about July 12, 2022, Respondent was interviewed by the Board as part of the
20 investigation of the complaint and Respondent admitted to being intoxicated and detained at the
21 Redding airport on October 10, 2021.

22 15. During the same interview Respondent provided a different narrative regarding his
23 2016 DUI arrest and conviction. In the July 12, 2022 interview he stated that he fell asleep while
24 driving his vehicle and then drove through a fence on the side of the freeway. He then stated that
25 he began drinking alcohol that he had in the vehicle while waiting for his wife to come and pick
26 him up. CHP responded to the scene and arrested him for DUI. Respondent stated that he pled no
27 contest to the charges because he could not prove that he began drinking alcohol after the
28

1 accident rather than prior. Respondent claimed that he did not drink alcohol prior to the crash, and
2 that the crash was caused by falling asleep at the wheel due to working 48 hours consecutively.

3 16. In August of 2016, Respondent had sent a letter to the Board regarding the crash
4 wherein he stated that a hawk struck his vehicle's windshield, and that this had been the
5 proximate cause of the crash. In the letter he did not claim that falling asleep at the wheel was the
6 cause of the crash. He also admitted that he had consumed alcohol prior to driving. When asked
7 about the discrepancies in his narrative Respondent confirmed his signature on the 2016 letter, but
8 claimed to not recall the contents nor explanations.

9 17. During the July 12, 2022, interview Respondent admitted to having previously
10 participated in counseling for alcohol abuse and diversion programs, having participated
11 intermittently in AA meetings, and completing out-patient rehab in 2016 after his DUI arrest.
12 Respondent admitted to being an alcoholic. Respondent admitted to continued consumption of
13 alcoholic beverages.

14 18. On August 11, 2022, Respondent agreed to voluntary mental and physical
15 examination(s) by a Board selected physician.

16 19. On or about December 8, 2022, Respondent was interviewed by Dr. O on behalf of
17 the Board. Dr. O diagnosed Respondent with the following mental disorders which rendered him
18 unsafe to practice medicine:

- 19 a) Alcohol use disorder (binge drinker);
20 b) Narcissistic and antisocial personality traits;
21 c) Transient visual hallucinations of flashing lights secondary to severe sleep
22 deprivation;

23 20. Dr. O concluded that Respondent was unable to safely practice medicine and that his
24 continued practice of medicine posed a present danger or threat to the public health, welfare and
25 safety. Dr. O concluded that Respondent was safe to perform administrative duties, but should
26 have no involvement in direct patient care.

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PRAYER

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 Number G 54134, issued to Thomas Doyal Watson, M.D.;

2. Revoking, suspending or denying approval of Thomas Doyal Watson, M.D.'s authority to supervise physician assistants and advanced practice nurses;

3. Ordering Thomas Doyal Watson, M.D., to pay the Board the costs of the investigation and enforcement of this case, and if placed on probation, the costs of probation monitoring; and

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

DATED: APR 05 2023

JENNA JONES FOR
REJI VARGHESE
Interim Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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