

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

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

Michael L. Friedman, M.D.

**Physician's and Surgeon's
Certificate No. G 15327**

Respondent.

Case No. 800-2021-080534

DECISION

**The attached Stipulated Surrender of License and 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 November 30, 2023.

IT IS SO ORDERED November 28, 2023.

MEDICAL BOARD OF CALIFORNIA

Jenna Jones For

**Reji Varghese
Executive Director**

1 ROB BONTA
Attorney General of California
2 ROBERT MCKIM BELL
Supervising Deputy Attorney General
3 VLADIMIR SHALKEVICH
Deputy Attorney General
4 State Bar No. 173955
300 South Spring Street, Suite 1702
5 Los Angeles, California 90013
Telephone: (213) 269-6538
6 Facsimile: (916) 731-2117
Attorneys for Complainant
7

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:

Case No. 800-2021-080534

13 **MICHAEL L. FRIEDMAN, M.D.**
14 **4201 Torrance Boulevard, Suite 530**
Torrance, CA 90503-4509

OAH No. 2023100119

**STIPULATED SURRENDER OF
LICENSE AND ORDER**

15 **Physician's and Surgeon's Certificate No.**
16 **G 15327**

17 Respondent.
18

19 **IT IS HEREBY STIPULATED AND AGREED BY AND BETWEEN THE PARTIES**
20 **TO THE ABOVE-ENTITLED PROCEEDINGS THAT THE FOLLOWING MATTERS**
21 **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 Vladimir Shalkevich,
26 Deputy Attorney General.

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2. Michael L. Friedman, M.D. (Respondent) is represented in this proceeding by attorney Gary Wittenberg, Baranov & Wittenberg, LLP, 1901 Avenue of the Stars, Suite 1750 Los Angeles, California 90067.

3. On August 27, 1968, the Board issued Physician's and Surgeon's Certificate No. G15327 to Respondent. Respondent's 55-year career included service as a medical doctor in the United States Navy and service as a Chairman of the Obstetrics and Gynecology Department at a prominent hospital. Respondent also served as an expert witness for the Medical Board of California. This is the first time an Accusation has been brought against his license. Respondent's license was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2021-080534 and will expire on November 30, 2024, unless renewed.

JURISDICTION

4. Accusation No. 800-2021-080534 was filed before the Board and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on August 9, 2023. Respondent timely filed his Notice of Defense contesting the Accusation. A copy of Accusation No. 800-2021-080534 is attached as Exhibit A and incorporated by reference.

ADVISEMENT AND WAIVERS

5. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2021-080534. Respondent also has carefully read, fully discussed with counsel, and understands the effects of this Stipulated Surrender of License and Order.

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

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

CULPABILITY

8. Respondent understands that the charges and allegations in Accusation No. 800-2021-080534, if proven at a hearing, constitute cause for imposing discipline upon his Physician's and Surgeon's Certificate.

9. For the purpose of resolving the Accusation without the expense and uncertainty of further proceedings, Respondent agrees that, at a hearing, Complainant could establish a factual basis for the charges in the Accusation and that any of those charges constitute cause for discipline. Respondent hereby gives up his right to contest that cause for discipline exists based on those charges.

10. Respondent understands that by signing this stipulation, he enables the Board to issue an order accepting the surrender of his Physician's and Surgeon's Certificate without further process.

RESERVATION

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

CONTINGENCY

12. Business and Professions Code section 2224, subdivision (b), provides, in pertinent part, that the Medical Board “shall delegate to its executive director the authority to adopt a ... stipulation for surrender of a license.”

13. Respondent understands that, by signing this stipulation, he enables the Executive Director of the Board to issue an order, on behalf of the Board, accepting the surrender of his Physician's and Surgeon's Certificate No. G 15327 without further notice to, or opportunity to be heard by, Respondent.

1 14. This Stipulated Surrender of License and Disciplinary Order shall be subject to the
2 approval of the Executive Director on behalf of the Board. The parties agree that this Stipulated
3 Surrender of License and Disciplinary Order shall be submitted to the Executive Director for his
4 consideration in the above-entitled matter and, further, that the Executive Director shall have a
5 reasonable period of time in which to consider and act on this Stipulated Surrender of License and
6 Disciplinary Order after receiving it. By signing this stipulation, Respondent fully understands
7 and agrees that he may not withdraw his agreement or seek to rescind this stipulation prior to the
8 time the Executive Director, on behalf of the Medical Board, considers and acts upon it.

9 15. The parties agree that this Stipulated Surrender of License and Disciplinary Order
10 shall be null and void and not binding upon the parties unless approved and adopted by the
11 Executive Director on behalf of the Board, except for this paragraph, which shall remain in full
12 force and effect. Respondent fully understands and agrees that in deciding whether or not to
13 approve and adopt this Stipulated Surrender of License and Disciplinary Order, the Executive
14 Director and/or the Board may receive oral and written communications from its staff and/or the
15 Attorney General's Office. Communications pursuant to this paragraph shall not disqualify the
16 Executive Director, the Board, any member thereof, and/or any other person from future
17 participation in this or any other matter affecting or involving Respondent. In the event that the
18 Executive Director on behalf of the Board does not, in his discretion, approve and adopt this
19 Stipulated Surrender of License and Disciplinary Order, with the exception of this paragraph, it
20 shall not become effective, shall be of no evidentiary value whatsoever, and shall not be relied
21 upon or introduced in any disciplinary action by either party hereto. Respondent further agrees
22 that should this Stipulated Surrender of License and Disciplinary Order be rejected for any reason
23 by the Executive Director on behalf of the Board, Respondent will assert no claim that the
24 Executive Director, the Board, or any member thereof was prejudiced by its/his/her review,
25 discussion and/or consideration of this Stipulated Surrender of License and Disciplinary Order or
26 of any matter or matters related hereto.

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5. If Respondent should ever apply or reapply for a new license or certification, or petition for reinstatement of a license by any other health care licensing agency in the State of California, all of the charges and allegations contained in Accusation No. 800-2021-080534 shall be deemed to be true, correct, and admitted by Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or restrict licensure.

6. Respondent shall pay the agency its costs of investigation and enforcement in the amount of \$25,617.00 prior to issuance of a new or reinstated license.

7. If Respondent should ever apply or reapply for a new license or certification, or petition for reinstatement of a license, by any other health care licensing agency in the State of California, all of the charges and allegations contained in Accusation No. 800-2021-080534 before the Medical Board of California shall be deemed to be true, correct, and admitted by Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or restrict licensure.

ACCEPTANCE

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

DATED: 11-17-23


MICHAEL L. FRIEDMAN, M.D.

Respondent

I have read and fully discussed with Respondent Michael L. Friedman, M.D., the terms and conditions and other matters contained in this Stipulated Surrender of License and Order. I approve its form and content.

DATED: 11/17/23


GARY WITTENBERG

Attorney for Respondent

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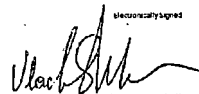
ENDORSEMENT

The foregoing Stipulated Surrender of License and Order is hereby respectfully submitted
for consideration by the Medical Board of California of the Department of Consumer Affairs.

DATED: November 22, 2023

Respectfully submitted,

ROB BONTA
Attorney General of California
ROBERT MCKIM BELL
Supervising Deputy Attorney General

electronically signed

VLADIMIR SHALKEVICH
Deputy Attorney General
Attorneys for Complainant

LA2023601373

Exhibit A

Accusation No. 800-2021-080534

1 ROB BONTA
Attorney General of California
2 ROBERT MCKIM BELL
Supervising Deputy Attorney General
3 VLADIMIR SHALKEVICH
Deputy Attorney General
4 State Bar No. 173955
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13 **MICHAEL L. FRIEDMAN, M.D.**
14 **4201 Torrance Boulevard, Suite 530**
Torrance, California 90503-4509

A C C U S A T I O N

15 **Physician's and Surgeon's Certificate No.**
16 **G 15327,**

Respondent.

17
18 **PARTIES**

19 1. Reji Varghese (Complainant) brings this Accusation solely in his official capacity as
20 the Executive Director of the Medical Board of California (Board).

21 2. On August 27, 1968, the Board issued a Physician and Surgeon's Certificate Number
22 G 15327 to Michael L. Friedman, M.D. (Respondent). That license was in full force and effect at
23 all times relevant to the charges brought herein and will expire on November 30, 2024, unless
24 renewed.

25 //

26 //

27 //

JURISDICTION

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

4. Section 2227 of the Code states:

(a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government 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:

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

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

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

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

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

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

5. Section 2234 of the Code, states:

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

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

(b) Gross negligence.

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

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

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

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

(d) Incompetence.

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

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

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

6. Section 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 licensed vocational nurse in an inpatient facility, and if both of the following conditions exist:

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

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

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

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

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

9 8. Health and Safety Code section 11165.4, subdivision (a) states, in pertinent part:

10 (a) (I) (A) (i) A health care practitioner authorized to prescribe, order, administer,
11 or furnish a controlled substance shall consult the CURES database to review a patient's
12 controlled substance history before prescribing a Schedule II, Schedule III, or Schedule IV
controlled substance to the patient for the first time and at least once every four months
thereafter if the substance remains part of the treatment of the patient.

13 COST RECOVERY

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

20 DEFINITIONS

21 10. Butalbital is a barbiturate. It has sedative and analgesic properties and is frequently
22 combined with other medicines, such as aspirin, paracetamol and codeine, available under brand
23 name Fioricet. It is often used for treatment of pain and headache. It derives from a barbituric
24 acid and is a DEA Schedule III controlled substance and a dangerous drug pursuant to Business
25 and Professions Code section 4022.

26 11. Alprazolam is a benzodiazepine used predominantly for therapy of anxiety, available
27 under brand name Xanax. It is a dangerous drug pursuant to Business and Professions Code
28

1 section 4022, and a Schedule IV controlled substance pursuant Health and Safety Code section
2 11057, subdivision (d)(1).

3 12. Adderall is a brand name for amphetamine salts, which is a combination medication,
4 generally used to treat attention deficit hyperactivity disorder and narcolepsy. It is a stimulant
5 that contains a combination of amphetamine salts, and is a dangerous drug pursuant to Business
6 and Professions Code section 4022, and a Schedule II controlled substance pursuant to Health and
7 Safety Code section 11055, subdivision (d)(1).

8 FACTUAL ALLEGATIONS

9 13. Respondent is a board-certified obstetrician-gynecologist. He saw Patient 1¹, a
10 female who was then 34 years old, for the first time on September 11, 2019. Respondent believed
11 that she was referred to him by another gynecologist whom Respondent knew for a long time.
12 The referring doctor has subsequently passed away. Respondent's medical assistant documented
13 that Patient 1's weight was 126 pounds, her height was 5 feet 7 inches, her blood pressure was
14 "127" her temperature was "90" and pulse was "107." The medical assistant also documented the
15 reason for the visit as "annual pap smear" and "migraines." In his interview with the Board's
16 investigators, Respondent stated that he did not notice that Patient 1's blood pressure and
17 temperature notes appeared to be incomplete or inaccurate. He stated "I never saw that I don't
18 think. I don't think her temperature was 90. I probably never looked at that because she was
19 perfectly healthy."

20 14. During that first visit on September 11, 2019, Respondent performed a pelvic
21 examination on Patient 1 during which he performed a PAP smear, though he failed to adequately
22 document this. Respondent told Board investigators that he later found out that he did not obtain
23 enough cells, and the Pap smear exam had to be repeated at the next visit. Eventually, the result
24 of the PAP smear was normal.

25 15. With regard to Patient 1's complaints of migraine headaches, Respondent
26 documented illegibly that Patient 1 has taken somatropin or Sumatriptan, Compazine and

27 ¹ The patient's name is anonymized for privacy. Respondent is aware of the patient's
28 name, and this information will also be provided to him in response to a written Request for
Discovery.

1 Topamax, and they did not work. Respondent did not document any details with regard to who
2 prescribed these medications to Patient 1, in what doses or when this occurred. In his interview,
3 Respondent stated: "I don't know who prescribed all those other medications for her – um – that
4 she said that she tried for migraines." Respondent did not perform, order and/or document any
5 type of workup for the patient's migraines during her visit on September 11, 2019. Respondent
6 explained: "I didn't do a workup on the migraines. I mean, if – because I assume – that however
7 I made an assumption, maybe wrong – that the other doctors who prescribed all the medicines
8 that didn't work, the Topamax, and the sumatriptan – all those things that someone had done a
9 workup for that. I mean – uh – I know how to do a workup for that. You know, I would
10 obviously take a better history...I did not do a brain scan. I did not do an MRI or anything like
11 that. And she didn't ask me for any of that She just mentioned the migraines."

12 16. Although Respondent documented his intent to obtain medical records from Patient
13 1's prior gynecologist, Respondent never obtained those. On September 11, 2019, he prescribed
14 90 pills of Fioricet Plain (no Codeine) to Patient 1, for 1 month, with two refills, for a total of 3
15 months.

16 17. Respondent also noted that Patient 1 was taking both, Adderall 40 mg. and Xanax, 2
17 mg., twice a day, as prescribed by Patient 1's psychiatrist. Respondent did not document who
18 that psychiatrist was, or how long or at what doses the patient had been taking these medications.

19 18. Respondent prescribed Adderall and Xanax to Patient 1 during her first visit on
20 September 11, 2019, explaining that the patient "was out of medicines" and that her psychiatrist,
21 who Patient 1 told him prescribed this combination of medicines, was unavailable. Respondent
22 explained in his interview that he could see this combination of medicines being given by a
23 psychiatrist, not a gynecologist, but that discontinuing Adderall and Xanax abruptly could cause
24 withdrawal symptoms.

25 19. In prescribing controlled substances to Patient 1 for the first time as alleged herein,
26 Respondent did not consult California's Prescription Drug Monitoring Program known as
27 Controlled Substance Utilization Review and Evaluation System (CURES), which allows
28 physicians to view information about Schedule II through V controlled substances dispensed to

1 patients in California. Consulting CURES before prescribing controlled substances to patients is
2 the standard of care and a legal requirement of Health and Safety Code section 11165.4.
3 Therefore, other than what Patient 1 told him, Respondent was not aware when and in what
4 amount Patient 1 was previously prescribed Fioricet, Xanax and Adderall by other providers.
5 Respondent did not obtain and/or document an adequate history of Patient 1.

6 20. Patient 1 returned to see Respondent on January 10, 2020. Once again, Respondent
7 prescribed Fioricet without any additional workup of her migraine complaints and without
8 checking CURES. Respondent believed that Patient 1's psychiatrist had died, and Respondent
9 agreed to continue refilling the medications prescribed by her psychiatrist until she could find a
10 new psychiatrist. Respondent, therefore, also refilled Patient 1's Adderall and Xanax, again
11 without any work up and without checking the CURES database.

12 21. Patient 1 returned to see Respondent on February 19, 2020, complaining of specific
13 female problems. This was the last documented visit Respondent had with Patient 1. Respondent
14 examined her and performed another PAP smear. Respondent noted that Patient 1 previously
15 tried antibiotics, though he obtained and documented no details about that. Respondent
16 prescribed Diflucan, an antifungal medication, to Patient 1. On this date Respondent also
17 provided Patient 1 with a prescription for Adderall without checking the CURES database.

18 22. In his interview with the Board investigators, Respondent denied that he wrote any
19 further prescriptions to Patient 1 after her visit on February 19, 2020, but when confronted with
20 Patient 1's numerous subsequent telephone prescription orders and refills, he stated that he may
21 have called in prescriptions for Fioricet once or twice. Respondent's documentation of the three
22 office visits by Patient 1 were disorganized and barely legible. Respondent's notes were difficult
23 for him to read during his interview with the Board's investigators. Respondent's chart for Patient
24 1 did not contain documentation of any telephone prescriptions, even though he acknowledged he
25 may have provided those for Patient 1 once or twice. Respondent also stated in his interview:
26 "the pharmacy may have call me for a refill which is possible. I don't keep a record of that, if
27 they call me."
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1 23. Patient 1's CURES database report shows that after her visit with Respondent on
2 February 19, 2020, she continued to be dispensed controlled substances prescribed by
3 Respondent, as follows:

- 4 a. On March 13, 2020, Patient 1 was dispensed 90 pills of Fioricet at a CVS
5 Pharmacy in Lomita, California.
- 6 b. On March 21, 2020, Patient 1 was dispensed 90 pills of Xanax at a CVS Pharmacy
7 in Lomita, California.
- 8 c. On April 16, 2020, Patient 1 was dispensed 90 pills of Fioricet at a CVS Pharmacy
9 in Lomita, California.
- 10 d. On May 2, 2020, Patient 1 was dispensed 90 pills of Fioricet at a CVS Pharmacy
11 in Lomita, California.
- 12 e. On May 19, 2020, Patient 1 was dispensed 90 pills of Fioricet at a CVS Pharmacy
13 in Lomita, California.
- 14 f. On May 24, 2020, Patient 1 was dispensed 90 pills of Xanax at a CVS Pharmacy
15 in Lomita, California.
- 16 g. On June 8, 2020, Patient 1 was dispensed 60 pills of Fioricet at a CVS Pharmacy
17 in Lomita, California.
- 18 h. On June 23, 2020, Patient 1 was dispensed 90 pills of Xanax at a CVS Pharmacy
19 in Lomita, California.
- 20 i. On June 28, 2020, Patient 1 was dispensed 60 pills of Fioricet at a CVS Pharmacy
21 in Lomita, California.
- 22 j. On July 8, 2020, Patient 1 was dispensed 60 pills of Fioricet at a CVS Pharmacy in
23 Lomita, California.
- 24 k. On July 30, 2020, Patient 1 was dispensed 120 pills of Fioricet at a CVS Pharmacy
25 in Lomita, California.
- 26 l. On August 27, 2020, Patient 1 was dispensed 120 pills of Fioricet at a CVS
27 Pharmacy in Lomita, California.

- 1 m. On October 7, 2020, Patient 1 was dispensed 120 pills of Fioricet at a CVS
2 Pharmacy in Lomita, California.
- 3 n. On November 1, 2020, Patient 1 was dispensed 120 pills of Fioricet at a CVS
4 Pharmacy in Lomita, California.
- 5 o. On November 26, 2020, Patient 1 was dispensed 120 pills of Fioricet at a CVS
6 Pharmacy in Lomita, California.
- 7 p. On December 19, 2020, Patient 1 was dispensed 120 pills of Fioricet at a CVS
8 Pharmacy in Lomita, California.
- 9 q. On January 20, 2021, Patient 1 was dispensed 120 pills of Fioricet at a CVS
10 Pharmacy in Lomita, California.
- 11 r. On February 15, 2021, Patient 1 was dispensed 120 pills of Fioricet at a CVS
12 Pharmacy in Lomita, California.
- 13 s. On March 5, 2021, Patient 1 was dispensed 120 pills of Fioricet at a CVS
14 Pharmacy in Lomita, California.
- 15 t. On March 30, 2021, Patient 1 was dispensed 120 pills of Fioricet at a CVS
16 Pharmacy in Lomita, California.
- 17 u. On April 26, 2021, Patient 1 was dispensed 120 pills of Fioricet at a CVS
18 Pharmacy in Lomita, California.
- 19 24. On May 14, 2021, Patient 1 was found unresponsive in the bathroom of her home by
20 a young family member. Paramedics were called. Patient 1 was pronounced dead at the scene.
21 Following a formal autopsy, which included a forensic toxicology examination, the Los Angeles
22 County Coroner determined that Patient 1's death was an accident and caused by the combined
23 effects of Xanax and Fioricet.

24 **FIRST CAUSE FOR DISCIPLINE**

25 **(Gross Negligence)**

- 26 25. Respondent Michael L. Friedman, M.D., is subject to disciplinary action under Code
27 section 2234, subdivision (b) in that he was grossly negligent in prescribing controlled substances
28 to Patient 1. The circumstances are as follows:

26. The allegations of Paragraphs 13 through 24 are incorporated herein by reference.

27. Each of the following acts or omissions constitutes an extreme departure from the standard of care:

a. Repeatedly prescribing controlled substances to Patient 1 without checking the CURES database was an extreme departure from the standard of care.

b. Prescribing controlled substances to Patient 1 without a prior good faith examination was an extreme departure from the standard of care.

c. Prescribing controlled substances without surveilling Patient 1 in person or by remote visit was an extreme departure from the standard of care.

d. Respondent's record keeping with regard to the care and treatment he rendered to Patient 1 was an extreme departure from the standard of care.

SECOND CAUSE FOR DISCIPLINE

(Repeated Negligent Acts)

28. Respondent Michael L. Friedman, M.D., is subject to disciplinary action under Code section 2234, subdivision (c) in that he was repeatedly negligent in the care and treatment of Patient 1. The circumstances are as follows:

29. The allegations of the First Cause for Discipline are incorporated herein by reference.

THIRD CAUSE FOR DISCIPLINE

(Prescribing Without an Appropriate Prior Examination)

30. Respondent Michael L. Friedman, M.D., is subject to disciplinary action under Code section 2242, because he did not conduct an appropriate examination prior to prescribing controlled substances or dangerous drugs to Patient 1. The circumstances are as follows:

31. The allegations of the First Cause for Discipline are incorporated herein by reference.

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1 **FOURTH CAUSE FOR DISCIPLINE**

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

3 32. Respondent Michael L. Friedman, M.D., is subject to disciplinary action under Code
4 section 2266 in that he failed to keep adequate and accurate records of his care and treatment of
5 Patient 1. The circumstances are as follows:

6 33. The allegations of the First Cause for Discipline are incorporated herein by reference.

7 **PRAYER**

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

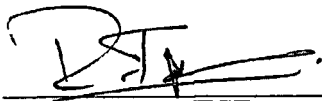
10 1. Revoking or suspending Physician's and Surgeon's Certificate G 15327, issued to
11 Michael L. Friedman, M.D.;

12 2. Revoking, suspending or denying approval of his authority to supervise physician
13 assistants and advanced practice nurses;

14 3. Ordering him to pay the Board the costs of the investigation and enforcement of this
15 case, and if placed on probation, the costs of probation monitoring; and

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

17
18 DATED: AUG 09 2023

19 
20 REJI VARGHESE
21 Executive Director
22 Medical Board of California
23 Department of Consumer Affairs
24 State of California

25 *Complainant*

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