

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

In the Matter of the Accusation Against:

Tejal Gaurang Pandya, M.D.

Physician's & Surgeon's  
Certificate No. A 128754

Respondent.

Case No. 800-2019-058547

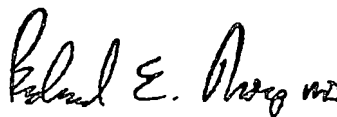
DECISION

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 February 23, 2024.

IT IS SO ORDERED: January 26, 2024.

MEDICAL BOARD OF CALIFORNIA



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

1 ROB BONTA  
Attorney General of California  
2 STEVE DIEHL  
Supervising Deputy Attorney General  
3 MARIANNE A. PANSA  
Deputy Attorney General  
4 State Bar No. 270928  
California Department of Justice  
5 2550 Mariposa Mall, Room 5090  
Fresno, CA 93721  
6 Telephone: (559) 705-2329  
Facsimile: (559) 445-5106  
7 *Attorneys for Complainant*

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

12 In the Matter of the Accusation Against:

13 **TEJAL GAURANG PANDYA, M.D.**  
14 **555 W. Putnam Ave.**  
**Porterville, CA 93257-3286**  
15 **Physician's and Surgeon's Certificate No. A**  
**128754**

16  
17 Respondent.

Case No. 800-2019-058547

OAH No. 2022080208

**STIPULATED SETTLEMENT AND  
DISCIPLINARY ORDER**

18  
19 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-  
20 entitled proceedings that the following matters are true:

21 **PARTIES**

22 1. Reji Varghese (Complainant) is the Executive Director of the Medical Board of  
23 California (Board). He brought this action solely in his official capacity and is represented in this  
24 matter by Rob Bonta, Attorney General of the State of California, by Marianne A. Pansa, Deputy  
25 Attorney General.

26 2. Respondent Tejal Gaurang Pandya, M.D. (Respondent) is represented in this  
27 proceeding by attorney Michael F. Ball, whose address is: 7647 North Fresno Street, Fresno, CA  
28 93720-8912.





1 shall be and is hereby Publicly Reprimanded pursuant to California Business and Professions  
2 Code section 2227, subdivision (a)(4). This Public Reprimand is issued in connection with  
3 Respondent's care and treatment of three patients, as set forth in Accusation No. 800-2019-  
4 058547, and is as follows:

5 Respondent committed negligence in her care and treatment of patient A by performing an  
6 advanced laparoscopic small bowel resection with limited training and ancillary support;

7 Respondent committed negligence in her care and treatment of Patient B by causing a  
8 bladder injury during Patient B's laparotomy and by opting to close a grossly contaminated  
9 wound which necessitated further operative debridement; and

10 Respondent committed negligence in her care and treatment of Patient C by causing a  
11 bladder injury during Patient C's appendectomy.

12 These acts constitute repeated negligent acts within the meaning of Business and  
13 Professions Code section 2234, subdivision (c).

14 2. **INVESTIGATION/ENFORCEMENT COST RECOVERY**. Respondent is  
15 hereby ordered to reimburse the Board its costs of investigation and enforcement, including, but  
16 not limited to, expert review, drafting accusations, legal reviews, investigation(s), and subpoena  
17 enforcement, as applicable, in the amount of \$40,183.00 (forty thousand one hundred eighty-  
18 three dollars and zero cents). Costs shall be payable to the Medical Board of California. Failure  
19 to pay such costs shall be considered a violation of probation.

20 Payment must be made in full within 30 calendar days of the effective date of the Order, or  
21 by a payment plan approved by the Medical Board of California. Any and all requests for a  
22 payment plan shall be submitted in writing by Respondent to the Board. Failure to comply with  
23 the payment plan shall constitute unprofessional conduct and is grounds for further disciplinary  
24 action.

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

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**ACCEPTANCE**

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, Michael F. Ball. 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.

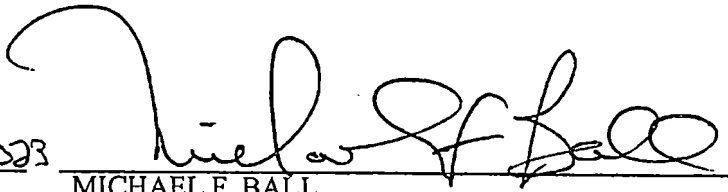
DATED: October 5, 2023



TEJAL GAURANG PANDYA, M.D.  
*Respondent*

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

DATED: 10/06/2023



MICHAEL F. BALL  
*Attorney for Respondent*

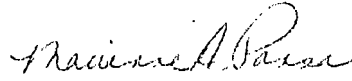
**ENDORSEMENT**

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

DATED: October 6, 2023

Respectfully submitted,

ROB BONTA  
Attorney General of California  
STEVE DIEHL  
Supervising Deputy Attorney General



MARIANNE A. PANSA  
Deputy Attorney General  
*Attorneys for Complainant*

1 ROB BONTA  
Attorney General of California  
2 STEVE DIEHL  
Supervising Deputy Attorney General  
3 MARIANNE A. PANSA  
Deputy Attorney General  
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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. 800-2019-058547

13 **TEJAL GAURANG PANDYA, M.D.**  
14 **555 W. Putnam Ave.**  
**Porterville, CA 93257-3286**

**A C C U S A T I O N**

15 **Physician's and Surgeon's Certificate**  
16 **No. A 128754,**

17 **Respondent.**

18  
19 **PARTIES**

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

23 2. On or about February 12, 2014, the Medical Board issued Physician's and Surgeon's  
24 Certificate No. A 128754 to Tejal Gaurang Pandya, M.D. (Respondent). Physician's and  
25 Surgeon's Certificate No. A 128754 was in full force and effect at all times relevant to the  
26 charges brought herein and will expire on February 29, 2024, unless renewed.

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1 JURISDICTION

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

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

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

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

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

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

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

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

21 ...

22 5. Section 2234 of the Code, states, in pertinent part:

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  
25 conduct includes, but is not limited to, the following:

26 ...

27 (c) Repeated negligent acts. To be repeated, there must be two or more  
28 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



1 licensee's conduct departs from the applicable standard of care, each departure  
2 constitutes a separate and distinct breach of the standard of care.

3 ...

4 COST RECOVERY

5 6. Section 125.3 of the Code states:

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

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

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

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

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

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

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

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

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

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

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

7 **CAUSE FOR DISCIPLINE**  
8 **(Repeated Negligent Acts)**

9 7. Respondent has subjected her Physician's and Surgeon's Certificate No. A 128754 to  
10 disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (c), of  
11 the Code, in that she committed repeated negligent acts in the care and treatment of Patient A,  
12 Patient B, and Patient C,<sup>1</sup> as more particularly alleged hereafter:

13 **Patient A**

14 8. On or about October 29, 2018, Respondent performed a laparoscopic small bowel  
15 resection with primary anastomosis<sup>2</sup> on Patient A. Patient A, a 63-year-old female, had a mass in  
16 the small bowel that was suspicious for malignant melanoma. Patient A had previously been  
17 referred to Respondent, and Respondent recommended surgical excision. During the surgery,  
18 Respondent noted that the tumor was at the proximal small bowel just after the ligament of  
19 Treitz.<sup>3</sup> The tumor was removed and an anastomosis was created. Respondent noted that Patient  
20 A tolerated the procedure well.

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23  
24 <sup>1</sup> To protect the privacy of the patients, the patients' names have not been included in this  
25 pleading. Respondent is aware of the patients' identities.

26 <sup>2</sup> An anastomosis is a surgically-made connection between two adjacent parts of the  
intestine or other channels of the body.

27 <sup>3</sup> The ligament of Treitz is a thin band of tissue that connects and supports the end of the  
28 duodenum and beginning of the jejunum in the small intestine.

1           9. Patient A's post-operative recovery was uneventful until on or about November 4,  
2 2018. On or about that day, Patient A was hypotensive<sup>4</sup> and had a distended abdomen. She was  
3 in hypoxemic respiratory failure and required intubation. A CT scan showed free fluid in Patient  
4 A's abdomen.

5           10. On or about the same day, Respondent took Patient A back into surgery. Respondent  
6 performed a bilateral tube thoracostomy,<sup>5</sup> exploratory laparotomy,<sup>6</sup> partial small bowel resection  
7 with proximal jejunal anastomosis, and a temporary abdominal closure. During the surgery,  
8 Respondent noted that both chest tubes had serous drainage. Upon entry for the laparotomy,  
9 Respondent saw murky fluid which she later determined was bilious fluid. Respondent found an  
10 anastomotic leak and opted to take down the original anastomosis and redo it.

11           11. On or about November 5, 2018, Respondent took Patient A back into surgery for a  
12 relook laparotomy. Respondent found that the revised anastomosis was leaking bilious fluid.  
13 Respondent resected the revised anastomosis and created fistulas via jejunostomy.<sup>7</sup> After placing  
14 drains and a nasogastric (NG) tube, Respondent closed the abdomen and packed the wound.

15           12. From on or about November 6, 2018 through November 27, 2018, Respondent  
16 continued to monitor Patient A's treatment in the hospital. Patient A's course was complicated  
17 by bleeding which required transfusion, drainage from the wound, atrial fibrillation, and  
18 respiratory failure. On or about November 27, 2018, Patient A was transferred to another facility  
19 for a higher level of care.

20           13. Respondent committed negligence in her care and treatment of Patient A by  
21 performing an advanced laparoscopic small bowel resection with limited training and ancillary  
22 support.

23           <sup>4</sup> Hypotension is low blood pressure.

24           <sup>5</sup> A thoracostomy is a procedure in which plastic tubes are inserted into the pleural space  
25 between the chest wall and lungs to remove excess fluid or air.

26           <sup>6</sup> A laparotomy refers to a surgical incision into the abdominal cavity. This operation is  
27 performed to examine the abdominal organs and aid diagnosis of any medical problems.

28           <sup>7</sup> Jejunostomy is a surgical procedure in which a tube is placed in the lumen of the  
proximal jejunum, primarily to administer nutrition.

1 Patient B

2 14. On or about March 5, 2018, Patient B, a 68-year-old female, presented to Respondent  
3 in the hospital with three days of abdominal pain. The pain had increased over time and focalized  
4 in the right lower quadrant of Patient B's abdomen. A CT scan showed inflamed acute  
5 appendicitis with edema posterior to the cecum.<sup>8</sup> Respondent assessed Patient B with acute  
6 appendicitis which necessitated emergency surgery. Respondent discussed proposed surgery with  
7 Patient B, a laparoscopic, possibly open, appendectomy. Patient B consented to the procedure.

8 15. On or about the same day, Respondent performed the appendectomy on Patient B.  
9 Initial inspection showed that stool was leaking in the right lower quadrant and pelvis. The  
10 appendectomy was converted to an open procedure because Respondent determined that it was  
11 possible that a larger resection might be necessary.

12 16. After converting to an open procedure, Respondent saw that the appendix had  
13 perforated. The appendix and part of the cecal wall were resected. The right lower quadrant and  
14 pelvis were irrigated with warm saline. Respondent found a defect in the anterior bladder wall  
15 showing that the bladder was adherent to the underside of the fascia in the lower abdomen. After  
16 consulting with a urologist, Respondent closed the bladder in layers with a Foley catheter in  
17 place. Respondent tested the repair to ensure it was water tight. Respondent then closed the  
18 lower abdominal peritoneum, fascia, and skin. Respondent documented that Patient B tolerated  
19 the procedure well.

20 17. Following the procedure, on or about March 8, 2018, a urologist told Patient B to  
21 follow-up in two weeks for a cystogram<sup>9</sup> and eventual removal of the catheter. On or about  
22 March 10, 2018, Patient B was discharged from the hospital.

23 18. On or about March 13, 2018, Patient B returned to the hospital and saw Respondent.  
24 Patient B reported increasing pain, redness, and weeping at the surgical incision site. Respondent  
25 inspected the wound and noted that the skin was edematous and tender to the touch. Respondent  
26 removed the staples in the lower half of the wound and evacuated purulent, devitalized, fatty

27 <sup>8</sup> The cecum is the pouch connected to the junction between the small and large intestines.

28 <sup>9</sup> A cystogram is a procedure used to visualize the bladder.

1 material and serous fluid. She then irrigated the wound and packed it with moist clean gauze.

2 Respondent admitted Patient B to the hospital for wound care and intravenous antibiotics.

3 19. On or about the same day, a CT scan of Patient B's abdomen showed a pericecal  
4 abscess measuring approximately 7 x 7 x 9 centimeters. On or about March 14, 2018, at  
5 Respondent's order, abdominal fluid in Patient B's right lower quadrant was surgically drained by  
6 S.W., M.D.

7 20. On or about March 16, 2018, Respondent operated on Patient B to incise, drain, and  
8 debride the surgical wound. Respondent documented that Patient B tolerated the procedure well.

9 21. On or about March 19, 2018, another physician examined and treated Patient B's  
10 wound under anesthesia. The wound was irrigated with gentamicin<sup>10</sup> solution and a few loose  
11 stitches were removed. The wound was stitched closed and irrigated again with gentamicin  
12 solution. The physician placed a drain in the subcutis tissue and documented that Patient B  
13 tolerated the procedure well.

14 22. On or about March 20, 2018, Patient B underwent a cystogram, which showed that  
15 the bladder was intact.

16 23. On or about March 22, 2018, Patient B was discharged.

17 24. Respondent committed negligence in her care and treatment of Patient B by causing a  
18 bladder injury during Patient B's laparotomy and by opting to close a grossly contaminated  
19 wound which necessitated further operative debridement.

20 Patient C

21 25. On or about June 21, 2018, Patient C, a six-year-old female, presented to the  
22 Emergency Department with abdominal pain and vomiting for two days. She was diagnosed with  
23 acute appendicitis and admitted to the hospital for surgery. Respondent saw Patient C on or about  
24 the same day and obtained consent from Patient C's parents to proceed with surgery.

25 26. On or about June 21, 2018, Respondent performed the appendectomy on Patient C.  
26 Respondent initially used a laparoscopic approach but converted to an open approach when she  
27 became concerned that the cecum may be perforated. Respondent made a midline laparotomy

28 <sup>10</sup> Gentamicin is an antibiotic.

1 incision. She saw that the appendix was inflamed and gangrenous and that feculent fluid was  
2 emanating from the portion of the appendix that perforated. Respondent removed the appendix  
3 and washed out the abdomen using warm saline solution.

4 27. During closure, Respondent noted that the bladder had a superficial abrasion to the  
5 muscle at the dome which might have occurred at the time of entry. Respondent repaired the  
6 bladder injury and the abdomen was closed.

7 28. Post-operatively, Patient C remained tachycardic. Because nursing staff felt that they  
8 were not competent to care for Patient C, Patient C was ultimately transferred to a pediatric  
9 hospital on or about June 22, 2018.

10 29. Respondent committed negligence in her care and treatment of Patient C by causing a  
11 bladder injury during Patient C's appendectomy.

12 **PRAYER**

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

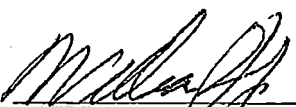
15 1. Revoking or suspending Physician's and Surgeon's Certificate No. A 128754, issued  
16 to Respondent Tejal Gaurang Pandya, M.D.;

17 2. Revoking, suspending or denying approval of Respondent Tejal Gaurang Pandya,  
18 M.D.'s authority to supervise physician assistants and advanced practice nurses;

19 3. Ordering Respondent Tejal Gaurang Pandya, M.D., to pay the Board the costs of the  
20 investigation and enforcement of this case, and if placed on probation, the costs of probation  
21 monitoring; and

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

23  
24 DATED:     JUL 15 2022    

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

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