

**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

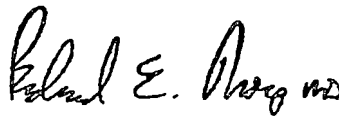
DECISION

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. PANS
Deputy Attorney General
4 State Bar No. 270928
California Department of Justice
5 2550 Mariposa Mall, Room 5090
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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**
16 **128754**

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.

3. On or about February 12, 2014, the Board issued Physician's and Surgeon's Certificate No. A 128754 to Tejal Gaurang Pandya, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2019-058547, and will expire on February 29, 2024, unless renewed.

JURISDICTION

4. Accusation No. 800-2019-058547 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 July 15, 2022. Respondent timely filed her Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2019-058547 is attached as exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2019-058547. Respondent has also carefully read, fully discussed with her counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

7. Respondent is fully aware of her 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 her; the right to present evidence and to testify on her 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.

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

CULPABILITY

9. Respondent understands and agrees that the charges and allegations in Accusation No. 800-2019-058547, if proven at a hearing, constitute cause for imposing discipline upon her Physician's and Surgeon's Certificate.

10. Respondent does not contest that, at an administrative hearing, complainant could establish a prima facie case with respect to the charges and allegations in Accusation No. 800-2019-058547, a true and correct copy of which is attached hereto as Exhibit A, that Respondent hereby gives up her right to contest those charges, and that she has thereby subjected her Physician's and Surgeon's Certificate, No. A 128754 to disciplinary action.

11. Respondent agrees that her Physician's and Surgeon's Certificate is subject to discipline and she agrees to be bound by the Board's imposition of discipline as set forth in the Disciplinary Order below.

CONTINGENCY

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

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

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

DISCIPLINARY ORDER

1. **PUBLIC REPRIMAND.** IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 128754 issued to Respondent TEJAL GAURANG PANDYA, M.D.,

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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1 ACCEPTANCE

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

7
8 DATED: October 5, 2023


9 TEJAL GAURANG PANDYA, M.D.
10 *Respondent*

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

14 DATED: 10/06/2023


15 MICHAEL F. BALL
16 *Attorney for Respondent*

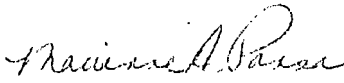
17 ENDORSEMENT

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

20
21 DATED: October 6, 2023

Respectfully submitted,

22 ROB BONTA
23 Attorney General of California
24 STEVE DIEHL
25 Supervising Deputy Attorney General


26 MARIANNE A. PANS
27 Deputy Attorney General
28 *Attorneys for Complainant*

1 ROB BONTA
Attorney General of California
2 STEVE DIEHL
Supervising 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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28 ///

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, in pertinent part:

(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.

...

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

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:

...

(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.

...

COST RECOVERY

6. Section 125.3 of the Code states:

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

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

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

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

(e) If an order for recovery of costs is made and timely payment is not made as 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,¹ 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 anastomosis² 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.³ The tumor was removed and an anastomosis was created. Respondent noted that Patient
20 A tolerated the procedure well.

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22 ///

23
24 ¹ 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 ² An anastomosis is a surgically-made connection between two adjacent parts of the
intestine or other channels of the body.

27 ³ 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 hypotensive⁴ 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,⁵ exploratory laparotomy,⁶ 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.⁷ 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 ⁴ Hypotension is low blood pressure.

24 ⁵ 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 ⁶ 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 ⁷ 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.⁸ 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 cystogram⁹ 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 ⁸ The cecum is the pouch connected to the junction between the small and large intestines.

28 ⁹ 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 gentamicin¹⁰ 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 ¹⁰ 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:

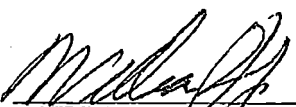
15 1. Revoking or suspending Physician's and Surgeon's Certificate No. A 128754, issued
16 to Respondent Tejal Gaurang Pandya, M.D.;

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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