

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

In the Matter of the Accusation  
Against:

Wesley Edward Kinzie, M.D.

Physician's and Surgeon's  
Certificate No. G 48580

Respondent.

Case No.: 800-2020-068666

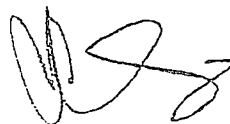
DECISION

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 March 14, 2024.

IT IS SO ORDERED: February 13, 2024.

MEDICAL BOARD OF CALIFORNIA



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

1 ROB BONTA  
Attorney General of California  
2 STEVE DIEHL  
Supervising Deputy Attorney General  
3 LYNETTE D. HECKER  
Deputy Attorney General  
4 State Bar No. 182198  
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 **WESLEY EDWARD KINZIE, M.D.**  
14 **1401 Spanos Court, Suite 101**  
15 **Modesto, CA 95355**

16 **Physician's and Surgeon's Certificate No. G**  
**48580**

17 Respondent.

Case No. 800-2020-068666

OAH No. 2023050987

**STIPULATED SETTLEMENT AND**  
**DISCIPLINARY ORDER**

18  
19 In the interest of a prompt and speedy settlement of this matter, consistent with the public  
20 interest and the responsibility of the Medical Board of California of the Department of Consumer  
21 Affairs, the parties hereby agree to the following Stipulated Settlement and Disciplinary Order  
22 which will be submitted to the Board for approval and adoption as the final disposition of the  
23 Accusation.

24 **PARTIES**

25 1. Reji Varghese (Complainant) is the Executive Director of the Medical Board of  
26 California (Board). He brought this action solely in his official capacity and is represented in this  
27 matter by Rob Bonta, Attorney General of the State of California, by Lynette D. Hecker, Deputy  
28 Attorney General.



**CULPABILITY**

1  
2       9.     Respondent understands and agrees that the charges and allegations in Accusation  
3 No. 800-2020-068666, if proven at a hearing, constitute cause for imposing discipline upon his  
4 Physician's and Surgeon's Certificate.

5       10.    Respondent does not contest that, at an administrative hearing, Complainant could  
6 establish a *prima facie* case or factual basis with respect to the charges and allegations in  
7 Accusation No. 800-2020-068666, that he has thereby subjected his Physician's and Surgeon's  
8 Certificate, No. G 48580 to disciplinary action, and Respondent hereby gives up his right to  
9 contest those charges.

10       11.    Respondent agrees that his Physician's and Surgeon's Certificate is subject to  
11 discipline and he agrees to be bound by the Board's probationary terms as set forth in the  
12 Disciplinary Order below.

**RESERVATION**

13  
14       12.    The admissions made by Respondent herein are only for the purposes of this  
15 proceeding, or any other proceedings in which the Medical Board of California or other  
16 professional licensing agency is involved, and shall not be admissible in any other criminal or  
17 civil proceeding.

**CONTINGENCY**

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

1 14. Respondent agrees that if he ever petitions for early termination or modification of  
2 probation, or if an accusation and/or petition to revoke probation is filed against him before the  
3 Board, all of the charges and allegations contained in Accusation No. 800-2020-068666 shall be  
4 deemed true, correct and fully admitted by Respondent for purposes of any such proceeding or  
5 any other licensing proceeding involving Respondent in the State of California.

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

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

12 **DISCIPLINARY ORDER**

13 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G 48580 issued  
14 to Respondent, WESLEY EDWARD KINZIE, M.D., is revoked. However, the revocation is  
15 stayed and Respondent is placed on probation for thirty-five (35) months on the following terms  
16 and conditions:

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

27 1. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the  
28 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the

1 Chief Executive Officer at every hospital where privileges or membership are extended to  
2 Respondent, at any other facility where Respondent engages in the practice of medicine,  
3 including all physician and *locum tenens* registries or other similar agencies, and to the Chief  
4 Executive Officer at every insurance carrier which extends malpractice insurance coverage to  
5 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15  
6 calendar days.

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

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

11 3. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby  
12 ordered to reimburse the Board its costs of investigation and enforcement, including, but not  
13 limited to, expert review, amended accusations, legal reviews, investigation(s), and subpoena  
14 enforcement, as applicable, in the amount of \$22,607.20 (twenty-two thousand, six hundred seven  
15 dollars and twenty cents). Costs shall be payable to the Medical Board of California. Failure to  
16 pay such costs shall be considered a violation of probation.

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

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

23 4. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations  
24 under penalty of perjury on forms provided by the Board, stating whether there has been  
25 compliance with all the conditions of probation.

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

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1           5.    GENERAL PROBATION REQUIREMENTS.

2           Compliance with Probation Unit

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

4           Address Changes

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

10          Place of Practice

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

14          License Renewal

15          Respondent shall maintain a current and renewed California physician's and surgeon's  
16 license.

17          Travel or Residence Outside California

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

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

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

27          7.    NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or  
28 its designee in writing within 15 calendar days of any periods of non-practice lasting more than

1 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is  
2 defined as any period of time Respondent is not practicing medicine as defined in Business and  
3 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct  
4 patient care, clinical activity or teaching, or other activity as approved by the Board. If  
5 Respondent resides in California and is considered to be in non-practice, Respondent shall  
6 comply with all terms and conditions of probation. All time spent in an intensive training  
7 program which has been approved by the Board or its designee shall not be considered non-  
8 practice and does not relieve Respondent from complying with all the terms and conditions of  
9 probation. Practicing medicine in another state of the United States or Federal jurisdiction while  
10 on probation with the medical licensing authority of that state or jurisdiction shall not be  
11 considered non-practice. A Board-ordered suspension of practice shall not be considered as a  
12 period of non-practice.

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

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

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

20 Periods of non-practice for a Respondent residing outside of California will relieve  
21 Respondent of the responsibility to comply with the probationary terms and conditions with the  
22 exception of this condition and the following terms and conditions of probation: Obey All Laws;  
23 General Probation Requirements; and Quarterly Declarations.

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



1 shall be fully restored.

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

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

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

24 12. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for  
25 a new license or certification, or petition for reinstatement of a license, by any other health care  
26 licensing action agency in the State of California, all of the charges and allegations contained in  
27 Accusation No. 800-2020-068666 shall be deemed to be true, correct, and admitted by  
28 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or

1 restrict license.

2 ACCEPTANCE

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

8  
9 DATED: 12/6/23 Wesley Edward Kinzie M.D.  
10 WESLEY EDWARD KINZIE, M.D.  
Respondent

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

14  
15 DATED: December 6, 2023 [Signature]  
16 RAYMOND J. MCMAHON, ESQ.  
Attorney for Respondent

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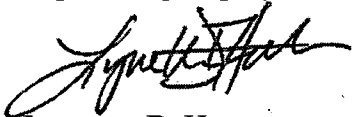
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**ENDORSEMENT**

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

DATED: 12/07/2023

Respectfully submitted,  
ROB BONTA  
Attorney General of California  
STEVE DIEHL  
Supervising Deputy Attorney General



LYNETTE D. HECKER  
Deputy Attorney General  
*Attorneys for Complainant*

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1 ROB BONTA  
Attorney General of California  
2 STEVE DIEHL  
Supervising Deputy Attorney General  
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Deputy Attorney General  
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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:

Case No. 800-2020-068666

14 **Wesley Edward Kinzie, M.D.**  
15 **1401 Spanos Court, Suite 101**  
16 **Modesto, CA 95355**

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

17 **Physician's and Surgeon's Certificate**  
18 **No. G 48580,**

Respondent.

19 **PARTIES**

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

23 2. On or about August 9, 1982, the Medical Board issued Physician's and Surgeon's  
24 Certificate Number G 48580 to Wesley Edward Kinzie, M.D. (Respondent). The Physician's and  
25 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought  
26 herein and will expire on May 31, 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:

6 (a) A licensee whose matter has been heard by an administrative law judge of the  
7 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  
13 one 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  
17 include a requirement that the licensee complete relevant educational courses  
18 approved by the board.

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

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

27 **STATUTORY PROVISIONS**

28 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:

(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.

....

1 **COST RECOVERY**

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

8 **FACTUAL ALLEGATIONS**

9 7. Patient A<sup>1</sup> was a 72-year-old male with a history of anxiety, intervertebral disc  
10 degeneration, lumbago, shoulder pain, and osteoarthritis of both knees, but who had had right  
11 knee pain for several months as of the time he began seeing Respondent on or about March 27,  
12 2018. Patient A's left knee was not symptomatic at that time.

13 8. At their first visit, Respondent provided an injection into Patient A's right knee and  
14 recommended an MRI if it did not improve after the injection. On or about April 17, 2018,  
15 Respondent saw Patient A again and ordered an MRI as his exam and pain had not improved.

16 9. On or about May 17, 2018, Respondent saw Patient A and reviewed the MRI results,  
17 which showed arthritis and degenerative meniscal tearing in his right knee. Respondent provided  
18 another injection into Patient A's right knee, with a plan to consider arthroscopic surgery on  
19 Patient A's right knee if it did not improve.

20 10. On or about June 5, 2018, Respondent saw Patient A to follow up on the right knee  
21 pain, at which time the patient's pain was much improved. Respondent documented  
22 improvement and a plan to repeat injections every six months.

23 11. On or about November 13, 2018, Patient A returned to Respondent for right-knee  
24 pain and popping that bothered him when walking. Respondent requested pre-operative clearance  
25 from Patient A's primary care provider and initiated requests for necessary authorizations to  
26 perform surgery on the patient's right knee.

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28 <sup>1</sup> The patient's name is redacted to protect the patient's privacy.

1           12. On or about December 21, 2018, Patient A presented to the hospital for Respondent  
2 to perform arthroscopic surgery on his right knee.

3           13. Patient A was taken to the preoperative preparation room and seen by a nurse. A  
4 mark was made on Patient A's right knee (the correct knee) to indicate the body part to be  
5 operated on by the surgeon.

6           14. Respondent entered the room and confirmed that he would be performing surgery on  
7 Patient A's right knee and marked it with his initials. Patient A was then taken to the operating  
8 room.

9           15. Respondent scrubbed his hands, entered the operating room, and put on his gown and  
10 gloves. The nursing staff had already scrubbed the patient and started the draping process on  
11 Patient A's left knee -- which was incorrect. The surgical team, of which Respondent was a part,  
12 performed a surgical pause, or timeout, but no one recognized that it was Patient A's incorrect  
13 (left) knee that had been prepared and draped for the surgery.

14           16. Everyone on the surgical team read off the Operating Room Safety Board, "Right  
15 knee to be done." Respondent was holding Patient A's left (incorrect) leg when this was done.

16           17. Respondent noticed that the surgical tower was set up on the wrong side of the  
17 patient, and staff paused and moved the tower for a left-side surgery.

18           18. Post-surgery, Patient A realized that his left knee was bandaged and informed nurses  
19 that the surgery had been performed on the wrong knee. The marks made before surgery were  
20 still visible on Patient A's right knee.

21           19. Patient A spoke to a hospital supervisor and to Respondent, both of whom stated that  
22 the right-knee procedure would be performed free of charge once Patient A had recovered from  
23 the errant surgery on his left knee.

24           20. Following the errant surgery, Patient A experienced significant pain and  
25 complications with his left knee. Patient A had right knee pain prior to the surgery on or about  
26 December 21, 2018, but did not previously have left knee symptoms. After the surgery, Patient A  
27 saw a different orthopedic surgeon for the new symptoms with his left knee. An MRI of Patient

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1 A's left knee revealed an issue that required a total knee arthroscopy, which ultimately took place  
2 on or about December 11, 2019.

3 21. Patient A has no plans to reattempt the surgery on his right knee.

4 **FIRST CAUSE FOR DISCIPLINE**

5 **(Gross Negligence)**

6 22. Respondent has subjected his Physician's and Surgeon's Certificate No. G 48580 to  
7 disciplinary action under 2227, as defined by section 2234, subdivision (b), of the Code in that he  
8 committed act(s) constituting gross negligence. Specifically, Respondent did not appropriately  
9 verify the correct surgical site just prior to making an incision in Patient A and performed surgery  
10 on the patient's incorrect (left) knee. The circumstances are set forth in Paragraphs 7 through 21,  
11 and are incorporated herein by reference as if fully set forth. Additional circumstance are as  
12 follows:

13 23. The standard of care requires a timeout, which is the surgical team's short pause just  
14 before the incision to confirm that the correct procedure is about to be performed on the correct  
15 body part of the correct patient. The standard of care also dictates that a physician is duty-bound  
16 both to perform this surgical timeout just prior to making an incision and to confirm the  
17 appropriate side or body part with that indicated on the patient's surgical consent.

18 24. Respondent saw the patient just prior to surgery in the preoperative area. Respondent  
19 correctly initialed the patient's correct (right) knee. A surgical pause or timeout was performed  
20 just prior to the skin incision; however, none of the surgical team nor Respondent realized the  
21 patient's wrong (left) knee was prepped. Respondent assisted in placing the final drapes and even  
22 noticed that the arthroscopic tower was on the wrong side of the room and still did not notice that  
23 he was about to do surgery on the patient's incorrect (left) knee. Respondent failed to verify that  
24 he was about to operate on the patient's correct (right) knee and thereafter performed surgery on  
25 the patient's incorrect (left) knee which constitutes gross negligence.

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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 48580, issued to Respondent, Wesley Edward Kinzie, M.D.;
2. Revoking, suspending or denying approval of Respondent, Wesley Edward Kinzie, M.D.'s authority to supervise physician assistants and advanced practice nurses;
3. Ordering Respondent, Wesley Edward Kinzie, 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: MAR 2 8 2023

  
\_\_\_\_\_  
REJI VARGHESE  
Interim Executive Director  
Medical Board of California  
Department of Consumer Affairs  
State of California  
*Complainant*

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