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

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		
5	California Department of Justice 2550 Mariposa Mall, Room 5090	•	
6	Fresno, CA 93721 Telephone: (559) 705-2320		
7	Facsimile: (559) 445-5106 Attorneys for Complainant		
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9	BEFORE THE MEDICAL BOARD OF CALIFORNIA		
10	DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA		
11	STATE OF C.	ALIFORIUA	
12	To the Metter of the Association Assigned	1 c x	
13	In the Matter of the Accusation Against:	Case No. 800-2020-068666	
14	WESLEY EDWARD KINZIE, M.D. 1401 Spanos Court, Suite 101	OAH No. 2023050987	
15	Modesto, CA 95355	STIPULATED SETTLEMENT AND DISCIPLINARY ORDER	
16	Physician's and Surgeon's Certificate No. G 48580		
17	Respondent.		
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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	<u>PARTIES</u>		
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.		
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- 2. Respondent Wesley Edward Kinzie, M.D. (Respondent) is represented in this proceeding by attorney Raymond J. McMahon, Esq., whose address is: 5440 Trabuco Road Irvine, CA 92620.
- 3. On or about August 9, 1982, the Board issued Physician's and Surgeon's Certificate No. G 48580 to Wesley Edward Kinzie, 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. 800-2020-068666, and will expire on May 31, 2024, unless renewed.

JURISDICTION

- 4. Accusation No. 800-2020-068666 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 March 28, 2023. Respondent timely filed his Notice of Defense contesting the Accusation.
- 5. A copy of Accusation No. 800-2020-068666 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. 800-2020-068666. Respondent has also carefully read, fully discussed with his counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 7. 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.
- 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

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CULPABILITY

- 9. Respondent understands and agrees that the charges and allegations in Accusation No. 800-2020-068666, if proven at a hearing, constitute cause for imposing discipline upon his Physician's and Surgeon's Certificate.
- 10. Respondent does not contest that, at an administrative hearing, Complainant could establish a prima facie case or factual basis with respect to the charges and allegations in Accusation No. 800-2020-068666, that he has thereby subjected his Physician's and Surgeon's Certificate, No. G 48580 to disciplinary action, and Respondent hereby gives up his right to contest those charges.
- Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

RESERVATION

The admissions made by Respondent herein are only for the purposes of this 12. 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

This stipulation shall be subject to approval by the Medical Board of California. 13. 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 his counsel. By signing the stipulation, Respondent understands and agrees that he may not withdraw his 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.

- 14. Respondent agrees that if he ever petitions for early termination or modification of probation, or if an accusation and/or petition to revoke probation is filed against him before the Board, all of the charges and allegations contained in Accusation No. 800-2020-068666 shall be deemed true, correct and fully admitted by Respondent for purposes of any such proceeding or any other licensing proceeding involving Respondent in the State of California.
- 15. 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.
- 16. 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

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

- Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee for its prior approval educational program(s) or course(s) which shall not be less than 40 hours per year, for each year of probation. The educational program(s) or course(s) shall be aimed at patient safety training and shall be Category I certified. The educational program(s) or course(s) shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure. Following the completion of each course, the Board or its designee may administer an examination to test Respondent's knowledge of the course. Respondent shall provide proof of attendance for 65 hours of CME of which 40 hours were in satisfaction of this condition.
- 1. <u>NOTIFICATION</u>. Within seven (7) days of the effective date of this Decision, the Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the

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

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

- 2. <u>OBEY ALL LAWS</u>. Respondent shall obey all federal, state and local laws, all rules governing the practice of medicine in California and remain in full compliance with any court ordered criminal probation, payments, and other orders.
- 3. <u>INVESTIGATION/ENFORCEMENT COST RECOVERY</u>. Respondent is hereby ordered to reimburse the Board its costs of investigation and enforcement, including, but not limited to, expert review, amended accusations, legal reviews, investigation(s), and subpoena enforcement, as applicable, in the amount of \$22,607.20 (twenty-two thousand, six hundred seven dollars and twenty cents). Costs shall be payable to the Medical Board of California. Failure to pay such costs shall be considered a violation of probation.

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

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

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

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

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5. <u>GENERAL PROBATION REQUIREMENTS.</u>

Compliance with Probation Unit

Respondent shall comply with the Board's probation unit.

Address Changes

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

Place of Practice

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

License Renewal

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

Travel or Residence Outside California

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

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

- 6. <u>INTERVIEW WITH THE BOARD OR ITS DESIGNEE</u>. Respondent shall be available in person upon request for interviews either at Respondent's place of business or at the probation unit office, with or without prior notice throughout the term of probation.
- 7. <u>NON-PRACTICE WHILE ON PROBATION</u>. Respondent shall notify the Board or its designee in writing within 15 calendar days of any periods of non-practice lasting more than

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

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

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

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

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

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

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shall be fully restored.

- 9. VIOLATION OF PROBATION. Failure to fully comply with any term or condition of probation is a violation of probation. If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.
- 10. LICENSE SURRENDER. Following the effective date of this Decision, if Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy the terms and conditions of probation, Respondent may request to surrender his or her license. The Board reserves the right to evaluate Respondent's request and to exercise its discretion in determining whether or not to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its designee and Respondent shall no longer practice medicine. Respondent will no longer be subject to the terms and conditions of probation. If Respondent re-applies for a medical license, the application shall be treated as a petition for reinstatement of a revoked certificate.
- PROBATION MONITORING COSTS. Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Board or its designee no later than January 31 of each calendar vear.
- 12. FUTURE ADMISSIONS CLAUSE. 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 action agency in the State of California, all of the charges and allegations contained in Accusation No. 800-2020-068666 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

1	restrict license.		
2	<u>ACCEPTANCE</u>		
3	I have carefully read the above Stipulated Settlement and Disciplinary Order and have full		
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 10	DATED: 12/6/23 Wesley Educad Frague W.D. WESLEY EDWARD KINZIE, M.D. July 10, 10, 10, 10, 10, 10, 10, 10, 10, 10,		
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.		
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15	DATED: December 6, 2023		
16	RAYMOND J. MCMAHON, ESQ. Attorney for Respondent		
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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 FR2022302554 95536608.docx

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1 2 3 4 5 6 7 8 9	ROB BONTA Attorney General of California STEVE DIEHL Supervising Deputy Attorney General LYNETTE D. HECKER Deputy Attorney General State Bar No. 182198 California Department of Justice 2550 Mariposa Mall, Room 5090 Fresno, CA 93721 Telephone: (559) 705-2320 Facsimile: (559) 445-5106 Attorneys for Complainant BEFOR MEDICAL BOARD	OF CALIFORNIA		
10	DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA			
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12	In the Matter of the Accusation Against:	Case No. 800-2020-068666		
13 14	Wesley Edward Kinzie, M.D. 1401 Spanos Court, Suite 101 Modesto, CA 95355	ACCUSATION		
15 16	Physician's and Surgeon's Certificate No. G 48580,			
17	Respondent.			
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19	PAR	TIES		
20	1. Reji Varghese (Complainant) brings this Accusation solely in his official capacity as			
21	the Interim Executive Director of the Medical Bo	ard 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 K	Linzie, 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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	(WESLEY EDWARD KINZIE, M.D.) ACCUSATION NO. 800-2020-068666			

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.

STATUTORY PROVISIONS

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.

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COST RECOVERY

6. Section 125.3 of the Code provides, in pertinent part, that the Board may request the administrative law judge to 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, with failure of the licensee to comply subjecting the license to not being renewed or reinstated. If a case settles, recovery of investigation and enforcement costs may be included in a stipulated settlement.

FACTUAL ALLEGATIONS

- 7. Patient A¹ was a 72-year-old male with a history of anxiety, intervertebral disc degeneration, lumbago, shoulder pain, and osteoarthritis of both knees, but who had had right knee pain for several months as of the time he began seeing Respondent on or about March 27, 2018. Patient A's left knee was not symptomatic at that time.
- 8. At their first visit, Respondent provided an injection into Patient A's right knee and recommended an MRI if it did not improve after the injection. On or about April 17, 2018, Respondent saw Patient A again and ordered an MRI as his exam and pain had not improved.
- 9. On or about May 17, 2018, Respondent saw Patient A and reviewed the MRI results, which showed arthritis and degenerative meniscal tearing in his right knee. Respondent provided another injection into Patient A's right knee, with a plan to consider arthroscopic surgery on Patient A's right knee if it did not improve.
- 10. On or about June 5, 2018, Respondent saw Patient A to follow up on the right knee pain, at which time the patient's pain was much improved. Respondent documented improvement and a plan to repeat injections every six months.
- 11. On or about November 13, 2018, Patient A returned to Respondent for right-knee pain and popping that bothered him when walking. Respondent requested pre-operative clearance from Patient A's primary care provider and initiated requests for necessary authorizations to perform surgery on the patient's right knee.

¹ The patient's name is redacted to protect the patient's privacy.

- 12. On or about December 21, 2018, Patient A presented to the hospital for Respondent to perform arthroscopic surgery on his right knee.
- 13. Patient A was taken to the preoperative preparation room and seen by a nurse. A mark was made on Patient A's right knee (the correct knee) to indicate the body part to be operated on by the surgeon.
- 14. Respondent entered the room and confirmed that he would be performing surgery on Patient A's right knee and marked it with his initials. Patient A was then taken to the operating room.
- 15. Respondent scrubbed his hands, entered the operating room, and put on his gown and gloves. The nursing staff had already scrubbed the patient and started the draping process on Patient A's left knee which was incorrect. The surgical team, of which Respondent was a part, performed a surgical pause, or timeout, but no one recognized that it was Patient A's incorrect (left) knee that had been prepared and draped for the surgery.
- 16. Everyone on the surgical team read off the Operating Room Safety Board, "Right knee to be done." Respondent was holding Patient A's left (incorrect) leg when this was done.
- 17. Respondent noticed that the surgical tower was set up on the wrong side of the patient, and staff paused and moved the tower for a left-side surgery.
- 18. Post-surgery, Patient A realized that his left knee was bandaged and informed nurses that the surgery had been performed on the wrong knee. The marks made before surgery were still visible on Patient A's right knee.
- 19. Patient A spoke to a hospital supervisor and to Respondent, both of whom stated that the right-knee procedure would be performed free of charge once Patient A had recovered from the errant surgery on his left knee.
- 20. Following the errant surgery, Patient A experienced significant pain and complications with his left knee. Patient A had right knee pain prior to the surgery on or about December 21, 2018, but did not previously have left knee symptoms. After the surgery, Patient A saw a different orthopedic surgeon for the new symptoms with his left knee. An MRI of Patient

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

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

FIRST CAUSE FOR DISCIPLINE

(Gross Negligence)

- 22. Respondent has subjected his Physician's and Surgeon's Certificate No. G 48580 to disciplinary action under 2227, as defined by section 2234, subdivision (b), of the Code in that he committed act(s) constituting gross negligence. Specifically, Respondent did not appropriately verify the correct surgical site just prior to making an incision in Patient A and performed surgery on the patient's incorrect (left) knee. The circumstances are set forth in Paragraphs 7 through 21, and are incorporated herein by reference as if fully set forth. Additional circumstance are as follows:
- 23. The standard of care requires a timeout, which is the surgical team's short pause just before the incision to confirm that the correct procedure is about to be performed on the correct body part of the correct patient. The standard of care also dictates that a physician is duty-bound both to perform this surgical timeout just prior to making an incision and to confirm the appropriate side or body part with that indicated on the patient's surgical consent.
- 24. Respondent saw the patient just prior to surgery in the preoperative area. Respondent correctly initialed the patient's correct (right) knee. A surgical pause or timeout was performed just prior to the skin incision; however, none of the surgical team nor Respondent realized the patient's wrong (left) knee was prepped. Respondent assisted in placing the final drapes and even noticed that the arthroscopic tower was on the wrong side of the room and still did not notice that he was about to do surgery on the patient's incorrect (left) knee. Respondent failed to verify that he was about to operate on the patient's correct (right) knee and thereafter performed surgery on the patient's incorrect (left) knee which constitutes gross negligence.