

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

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

Jafar Abdelrahim Ayyad, M.D.

**Physician's and Surgeon's
Certificate No. A 166085**

Respondent.

Case No. 800-2020-073292

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 April 10, 2024.

IT IS SO ORDERED March 11, 2024.

MEDICAL BOARD OF CALIFORNIA



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

1 ROB BONTA
Attorney General of California
2 ROBERT MCKIM BELL
Supervising Deputy Attorney General
3 WENDY WIDLUS
Deputy Attorney General
4 State Bar No. 82958
California Department of Justice,
5 300 So. Spring Street, Suite 1702
Los Angeles, California 90013
6 Telephone: (213) 269-6457
Facsimile: (916) 731-2117
7 E-mail: Wendy.Widlus@doj.ca.gov
Attorneys for Complainant

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

12
13 In the Matter of the Accusation Against:

14 JAFAR ABDELRAHIM AYYAD, M.D.

15 1406 North Grand Avenue, Apt. J
Covina, California 91724

16 Physician's and Surgeon's Certificate No. A
17 166085,

18 Respondent.

Case No. 800-2020-073292

OAH No. 2022080104

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

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

22 **PARTIES**

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

27 2. Respondent Jafar Abdelrahim Ayyad, M.D. (Respondent) is represented in this
28

1 proceeding by attorney Peter R. Osinoff of Bonne, Bridges, Mueller, O'Keefe & Nichols, 355
2 South Grand Avenue, Suite 1750, Los Angeles, California, 90071.

3 3. On October 14, 2019, the Board issued Physician's and Surgeon's Certificate No. A
4 166085 to Jafar Abdelrahim Ayyad, M.D. (Respondent). That license was in full force and effect
5 at all times relevant to the charges brought in Accusation No. 800-2020-073292, and will expire
6 on October 31, 2023, unless renewed.

7 JURISDICTION

8 4. Accusation No. 800-2020-073292 was filed before the Board and is currently pending
9 against Respondent. The Accusation and all other statutorily required documents were properly
10 served on Respondent on June 9, 2022. Respondent timely filed a timely Notice of Defense
11 contesting the Accusation.

12 5. A copy of Accusation No. 800-2020-073292 is attached as Exhibit A and is
13 incorporated herein by reference.

14 ADVISEMENT AND WAIVERS

15 6. Respondent has carefully read, fully discussed with counsel, and understands the
16 charges and allegations in Accusation No. 800-2020-073292. Respondent has also carefully read,
17 fully discussed with his counsel, and understands the effects of this Stipulated Settlement and
18 Disciplinary Order.

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

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

27 CULPABILITY

28 9. Respondent admits the truth of each and every charge and allegation in Accusation

1 No. 800-2020-073292.

2 10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to
3 discipline and he agrees to be bound by the Board's imposition of discipline as set forth in the
4 Disciplinary Order below.

5 **CIRCUMSTANCES IN MITIGATION**

6 11. Respondent has never been the subject of any other disciplinary action and has
7 accepted responsibility during these proceedings.

8 **CONTINGENCY**

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

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

22 14. In consideration of the foregoing admissions and stipulations, the parties agree that the
23 Board may, without further notice or formal proceeding, issue and enter the following
24 Disciplinary Order:

25 //

1 **DISCIPLINARY ORDER**

2 **IT IS HEREBY ORDERED THAT** Physician's and Surgeon's Certificate No. A 166085
3 issued to Respondent Jafar Abdelrahim Ayyad, M.D. is hereby publically reprimanded. This
4 public reprimand is based on matters detailed in Accusation No. 800-2020-073292, specifically,
5 that while working as a physician at the Optum Clinic in Glendora on December 3, 2020, having
6 tested positive for COVID, you failed to disclose the positive test and worked that day and the
7 next day, without informing medical staff supervisors, putting patients and co-workers at undue
8 risk. This public reprimand pursuant to Business and Professions Code section 2227, is issued to
9 Respondent with the expectation that such conduct will not be repeated.

10 Respondent is further ordered to comply with the following:

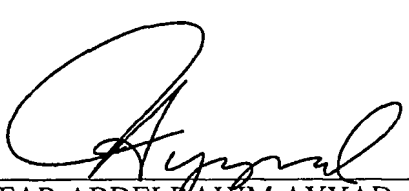
11 1. **COST RECOVERY.** Respondent is hereby ordered to reimburse the Board the
12 amount of \$ 11,740 within 365 days from the effective date of this decision for its investigative
13 and prosecution costs. The filing of bankruptcy by the respondent shall not relieve the
14 Respondent of his responsibility to reimburse the Board for its investigative and prosecution
15 costs.

16 2. **VIOLATION OF THIS AGREEMENT.** Failure to fully comply with any term or
17 condition of this Order is unprofessional conduct. If Respondent violates this agreement in any
18 respect, the Board may file an Accusation against Respondent.

19 **ACCEPTANCE**

20 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
21 discussed it with my attorney, I understand the stipulation and the effect it will have on my
22 Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and Disciplinary
23 Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order
24 of the Medical Board of California.


25
26 DATED: 03/05/2024

27 
JAFAR ABDELRAHIM AYYAD, M.D.
Respondent

28 //

1 I have read and fully discussed with Respondent Jafar Abdelrahim Ayyad, M.D. the terms
2 and conditions and other matters contained in the above Stipulated Settlement and Disciplinary
3 Order. I approve its form and content.

4 DATED: 3/6/2024


PETER R. OSINOFF
Attorney for Respondent

6
7 **ENDORSEMENT**

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

10 DATED: _____

Respectfully submitted,

11
12 ROB BONTA
Attorney General of California
13 ROBERT MCKIM BELL
Supervising Deputy Attorney General

14
15 WENDY WIDLUS
Deputy Attorney General
16 Attorneys for Complainant

17
18 LA2022600026
19 Stipulated Settlement and Disciplinary Order.docx

1 I have read and fully discussed with Respondent Jafar Abdelrahim Ayyad, M.D. the terms
2 and conditions and other matters contained in the above Stipulated Settlement and Disciplinary
3 Order. I approve its form and content.

4 DATED: _____

PETER R. OSINOFF
Attorney for Respondent

6
7 **ENDORSEMENT**

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

10 DATED: March 7, 2024

Respectfully submitted,

11
12 ROB BONTA
Attorney General of California
13 ROBERT MCKIM BELL
Supervising Deputy Attorney General

14 *Wendy Widlus*

15 WENDY WIDLUS
16 Deputy Attorney General
Attorneys for Complainant

17
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10 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
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11 **STATE OF CALIFORNIA**
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13 In the Matter of the Accusation Against:

Case No. 800-2020-073292

14 JAFAR ABDELRAHIM AYYAD, M.D.

A C C U S A T I O N

15 1406 North Grand Avenue, Apt. J
Covina, California 91724-1060

16 Physician's and Surgeon's Certificate
17 A 166085,

18 Respondent.
19

20
21 **PARTIES**

22 1. William Prasifka (Complainant) brings this Accusation solely in his official capacity
23 as the Executive Director of the Medical Board of California (Board).

24 2. On October 14, 2019, the Board issued Physician's and Surgeon's Certificate Number
25 A 166085 to Jafar Abdelrahim Ayyad, M.D. (Respondent). That license was in full force and
26 effect at all times relevant to the charges brought herein and will expire on October 31, 2023,
27 unless renewed.
28

JURISDICTION

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

4. Section 2001.1 of the Code states:

Protection of the public shall be the highest priority for the Medical Board of California in exercising its licensing, regulatory, and disciplinary functions. Whenever the protection of the public is inconsistent with other interests sought to be promoted, the protection of the public shall be paramount.

5. Section 2004 of the Code states:

The board shall have the responsibility for the following:

(a) The enforcement of the disciplinary and criminal provisions of the Medical Practice Act.

(b) The administration and hearing of disciplinary actions.

(c) Carrying out disciplinary actions appropriate to findings made by a panel or an administrative law judge.

(d) Suspending, revoking, or otherwise limiting certificates after the conclusion of disciplinary actions.

(e) Reviewing the quality of medical practice carried out by physician and surgeon certificate holders under the jurisdiction of the board.

(f) Approving undergraduate and graduate medical education programs.

(g) Approving clinical clerkship and special programs and hospitals for the programs in subdivision (f).

(h) Issuing licenses and certificates under the board's jurisdiction.

(i) Administering the board's continuing medical education program.

6. 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

1 year upon order of the board.

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

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

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

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

15 7. Section 2228 of the Code states:

16 The authority of the board or the California Board of Podiatric Medicine to
17 discipline a licensee by placing him or her on probation includes, but is not limited to,
18 the following:

19 (a) Requiring the licensee to obtain additional professional training and to pass
20 an examination upon the completion of the training. The examination may be written
21 or oral, or both, and may be a practical or clinical examination, or both, at the option
22 of the board or the administrative law judge.

23 (b) Requiring the licensee to submit to a complete diagnostic examination by
24 one or more physicians and surgeons appointed by the board. If an examination is
25 ordered, the board shall receive and consider any other report of a complete
26 diagnostic examination given by one or more physicians and surgeons of the
27 licensee's choice.

28 (c) Restricting or limiting the extent, scope, or type of practice of the licensee,
including requiring notice to applicable patients that the licensee is unable to perform
the indicated treatment, where appropriate.

(d) Providing the option of alternative community service in cases other than
violations relating to quality of care.

STATUTORY PROVISIONS

8. Section 2234 of the Code states:

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

(a) Violating or attempting to violate, directly or indirectly, assisting in or

abetting the violation of, or conspiring to violate any provision of this chapter.

(b) Gross negligence.

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

(1) An initial negligent diagnosis followed by an act or omission medically appropriate for that negligent diagnosis of the patient shall constitute a single negligent act.

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

(d) Incompetence.

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

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

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

9. Section 2261 of the Code states:

Knowingly making or signing any certificate or other document directly or indirectly related to the practice of medicine or podiatry which falsely represents the existence or nonexistence of a state of facts, constitutes unprofessional conduct.

10. Section 2266 of the Code states:

The failure of a physician and surgeon to maintain adequate and accurate records relating to the provision of services to their patients constitutes unprofessional conduct.

11. Section 2021 of the Code states:

(a) If the board publishes a directory pursuant to Section 112, it may require persons licensed pursuant to this chapter [Chapter 5, the Medical Practice Act] to furnish any information as it may deem necessary to enable it to compile the directory.

(b) Each licensee shall report to the board each and every change of address, including an email address, within 30 days after each change, giving both the old and new address. If an address reported to the board at the time of application for licensure or subsequently is a post office box, the applicant shall also provide the

board with a street address. If another address is the licensee's address of record, he or she may request that the second address not be disclosed to the public.

(c) Each licensee shall report to the board each and every change of name within 30 days after each change, giving both the old and new names.

(d) Each applicant and licensee shall have an electronic mail address and shall report to the board that electronic mail address no later than July 1, 2022. The electronic mail address shall be considered confidential and not subject to public disclosure.

COST RECOVERY

12. 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

1 with the board to reimburse the board within that one year for the unpaid costs.

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

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

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

10 DEFINITIONS

11 13. COVID-19 - is a mild to severe respiratory illness caused by a coronavirus which is
12 transmitted chiefly by contact with infectious material (such as respiratory droplets) or with
13 objects or surfaces contaminated by the causative virus, and is characterized especially by fever,
14 cough, and shortness of breath and may progress to pneumonia and respiratory failure. While
15 fever, cough, and shortness of breath are common symptoms of COVID-19, other symptoms may
16 include fatigue, chills, body aches, headache, loss of taste or smell, sore throat, runny nose,
17 nausea, vomiting, or diarrhea. COVID-19 was first identified in Wuhan, China in December
18 2019.

19 14. PCR Test - The polymerase chain reaction test is used to test for COVID-19. PCR
20 testing has been used since the pandemic began and is considered to be the "gold standard" by the
21 Centers for Disease Control and Prevention. The PCR test is a highly accurate way to diagnose
22 certain infectious diseases and genetic changes. The test works by finding the DNA or RNA of a
23 pathogen (disease-causing organism) or abnormal cells in a sample. Most viruses and other
24 pathogens contain DNA or RNA. Unlike many other tests, PCR tests can find evidence of
25 disease in the earliest stages of infection. Other tests may miss early signs of disease because
26 there are not enough viruses, bacteria, or other pathogens in the sample, or the body has not had
27 sufficient time to develop an antibody response. PCR tests can detect disease when there is only
28 a very small amount of pathogens in the body.

15. COVID Rapid Antigen Test - Rapid COVID-19 antigen tests are designed for the
rapid diagnoses of active infection primarily by detecting the nucleocapsid protein antigen of the

1 virus that causes COVID-19 from nasal swabs or similar clinical specimens. After collection of
2 the specimen a point-of-care antigen test takes approximately 15-30 minutes to finalize a result.
3 Antigen tests are generally less sensitive than PCR tests and, because of the lower sensitivity,
4 false negative antigen test results are possible.

5 FACTUAL ALLEGATIONS

6 16. On December 5, 2020, the Board received an anonymous complaint regarding
7 Respondent which alleged that he was currently practicing and seeing patients while he
8 knowingly had a positive COVID-19 test. Subsequent investigation determined Respondent
9 worked at Optum Urgent Care Clinic (hereinafter Optum) in Glendora, California.

10 17. Optum's COVID-19 Protocols specified that all staff were screened on a daily basis
11 by using both temperature checks and screening questioning. Optum directed employees who felt
12 ill not to come to work or to leave work if they became ill while at work. If an employee tested
13 positive for COVID-19, the employee was instructed to remain at home and follow Los Angeles
14 County COVID-19 Guidelines. Optum's employee health department would contact any affected
15 employees. Employees were removed from the work schedule and paid during their absence. If
16 the employee recovered and completed the quarantine period, they were permitted to return to
17 work. Nonetheless, it was possible for Optum's employees to avoid screening if the employee
18 did not wish to be tested.

19 18. The investigation disclosed that Respondent was dishonest about his possible
20 infection status when he answered his Optum screening questions in November and December
21 2020. On November 23, 2020, Respondent developed nasal congestion and sneezing, which he
22 attributed to chronic allergies. On November 26, 2020, Respondent did a COVID-19 rapid
23 antigen test without registering as a patient. Because he did not register as a patient, there was no
24 documentation of this test. During the investigation, Respondent insisted this test was negative.
25 Following this, Respondent went on a family vacation. On November 28 and 29, 2020, during
26 his family vacation, Respondent became aware that he was suffering from chills. Respondent
27 attributed the chills to being near an open door. Respondent also experienced mild loss of smell
28 and a lesser loss of taste that he ascribed to allergies.

1 19. Respondent returned to work on December 2, 2020. On December 3, 2020,
2 Respondent was still experiencing typical COVID-19 symptoms and again took a COVID-19
3 rapid antigen test without registering as a patient. This time the undocumented test was positive
4 for COVID-19. Respondent discussed his symptoms with a clinic manager but omitted any
5 mention of his positive test because he felt the test was a false positive. After that Respondent
6 worked his full shift on December 3, 2020, and on December 4, 2020. Although Respondent was
7 masked during these shifts, he interacted with patients and other Optum employees.

8 20. On December 6, 2020, the day after the anonymous complaint was filed with the
9 Board, Optum required Respondent to undergo an additional COVID-19 test. That test result was
10 also positive, and Optum placed him in quarantine.

11 21. On March 15, 2021, the investigator contacted Respondent, who stated he was no
12 longer living at his address of record. Although Respondent provided a new address to the
13 investigator, he failed to update his address with the Board.

14 22. On June 24, 2021, while represented by an attorney, Respondent participated in a
15 digitally recorded subject interview with the investigator and discussed the allegations which
16 were made to the Board in the anonymous complaint.

17 23. During the interview, Respondent stated he was board-certified in family medicine.
18 Respondent was hired to work full-time at Optum in September 2020 in the urgent care center on
19 a 12-hour shift basis. In his role at Optum, Respondent was often designated as the doctor of the
20 day and treated patients, assisted mid-level employees, and performed administrative duties.

21 24. When Respondent was hired, he completed a remote employee orientation where
22 company policies were discussed. Respondent stated he had not taken time off in the past, but as
23 of the date of the subject interview, he was now familiar with the process for taking time off.

24 25. Respondent stated the Optum urgent care center was exceedingly busy during
25 November and December 2020, and he saw about 20 to 30 patients daily. 75%-80% of the
26 patients he saw during that period came to Optum with COVID-19-related complaints.

27 26. Respondent stated he was very familiar with the COVID-19 virus. Respondent
28 delineated the various symptoms exhibited by patients suffering from COVID-19, the range of

1 severity of illness suffered by patients, the methods of transmission of COVID-19, and the
2 COVID-19 quarantine protocols.

3 27. Respondent believed that it was approximately November 22, 2020, when he began to
4 experience typical COVID-19 symptoms which included chills, loss of smell, some loss of taste,
5 and congestion. Respondent stated that because he suffers from chronic allergies when he began
6 to experience those COVID-19 symptoms he believed his allergies were "flaring up."

7 28. On November 26, 2020, Respondent went into Optum and had a medical assistant
8 administer a COVID-19 rapid antigen test which came back negative. Respondent stated he did
9 not document this "off the record" visit nor did he notify supervising staff because, although he
10 knew this was not the common protocol, it was commonly done.

11 29. After the November 26, 2020, negative COVID-19 rapid test Respondent went on a
12 family trip where he continued to experience symptoms of COVID-19 which he attributed to
13 allergic reactions related to the location of his trip. Respondent stated he did this despite the fact
14 that his sister also began to experience COVID-19 symptoms.

15 30. Respondent returned from his family vacation and took a second COVID-19 rapid
16 antigen test which came back positive. Respondent stated he did not believe the test was
17 accurate, nor did he take a PCR test, nor did he document the positive COVID-19 rapid antigen
18 test result. Instead, Respondent simply told his supervisor about his physical symptoms and he
19 was permitted to work his shift. Respondent stated he withheld the positive test information from
20 his supervisor because he did not want to get the medical assistant in trouble for testing him off
21 the record.

22 31. Respondent worked 12 hour shifts on December 3, 4, and 5, 2020, before Optum
23 management contacted him about the possibility of being infected with COVID-19. Respondent
24 saw an average of 40-50 patients during those shifts and interacted with staff members.
25 Employee health told Respondent to quarantine and not return to work. Optum management
26 reprimanded him for his failure to inform them of his positive tests and his violation of Optum
27 protocols.

28 32. Throughout his subject interview, Respondent repeatedly stated he did not believe he

1 was really positive for the COVID-19 virus despite his numerous symptoms and positive
2 COVID-19 tests. Instead, Respondent continued to attribute his November 23, 2020, symptoms
3 to allergies rather than to COVID-19 and incorrectly asserted he had completed a 10-day
4 quarantine period by the time he returned to work. Respondent explained that this behavior
5 showed a lapse in judgment due to issues in his personal life and his desire not to burden his
6 colleagues with an overwhelming patient surge.

7 33. The standard of care regarding the management of COVID-19 as defined by the
8 Centers for Disease Control and Prevention, the Los Angeles County Health Department, and
9 medical literature required all providers to consider that patients with symptoms of possible
10 COVID-19 were infected until proven otherwise.

11 34. The standard of care regarding the management of COVID-19 as defined by the
12 Centers for Disease Control and Prevention, the Los Angeles County Health Department and
13 medical literature required all providers to quarantine these suspected cases until proven not to
14 have COVID-19 or for ten days.

15 35. The standard of care in November and December 2020, regarding the interpretation
16 and management of COVID-19 test results required all providers to assume that any positive test
17 in the presence of suggestive COVID symptoms reflected active COVID infection, and any
18 questionable results be repeated with a COVID PCR test.

19 36. The standard of care regarding appropriate communication to staff and colleagues
20 always mandates providers to inform staff and colleagues of any possible conditions that could
21 place them and/or a patient at risk.

22 37. The standard of care regarding documentation of care requires that significant care
23 and test results must be entered into a medical record.

24 **FIRST CAUSE FOR DISCIPLINE**

25 (Gross Negligence)

26 38. Respondent Jafar Abdelrahim Ayyad, M.D. is subject to disciplinary action under
27 section 2234, subdivision (b), of the Code in that he committed acts or omissions involving gross
28 negligence. The circumstances are as follows:

1 39. The facts and circumstances set forth in paragraphs 13 through 37 are incorporated by
2 reference as if set forth in full herein.

3 **SECOND CAUSE FOR DISCIPLINE**

4 (Repeated Negligent Acts)

5 40. Respondent Jafar Abdelrahim Ayyad, M.D. is subject to disciplinary action under
6 section 2234, subdivision (c), of the Code in that Respondent committed repeated negligent acts.
7 The circumstances are as follows:

8 41. The facts and circumstances set forth in paragraphs 13 through 37 are incorporated by
9 reference as if set forth in full herein.

10 **THIRD CAUSE FOR DISCIPLINE**

11 (Inadequate Record Keeping)

12 42. Respondent Jafar Abdelrahim Ayyad, M.D. is subject to disciplinary action under
13 section 2266 of the Code in that he failed to keep adequate and accurate medical records. The
14 circumstances are as follows:

15 43. The facts and circumstances set forth in paragraphs 13 through 37 are incorporated by
16 reference as if set forth in full herein.

17 **FOURTH CAUSE FOR DISCIPLINE**

18 (Unprofessional Conduct)

19 44. Respondent Jafar Abdelrahim Ayyad, M.D. is subject to disciplinary action under
20 section 2234 of the Code in that he committed unprofessional conduct.

21 45. The facts and circumstances set forth in paragraphs 13 through 37 are incorporated by
22 reference as if set forth in full herein.

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1 PRAYER

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

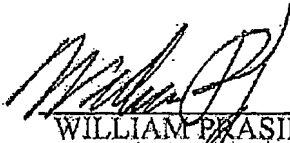
4 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 166085,
5 issued to Jafar Abdelrahim Ayyad, M.D.;

6 2. Revoking, suspending or denying approval of Jafar Abdelrahim Ayyad, M.D.'s
7 authority to supervise physician assistants and advanced practice nurses;

8 3. Ordering Jafar Abdelrahim Ayyad, M.D. to pay the Board the costs of the
9 investigation and enforcement of this case, and if placed on probation, the costs of probation
10 monitoring; and

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

12
13 DATED: JUN 09 2022


14 WILLIAM PRASIFKA
15 Executive Director
16 Medical Board of California
17 Department of Consumer Affairs
18 State of California

19 *Complainant*

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