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

In the Matter of the Accusation Against: Maia Ursula Chakerian, M.D. Physician's & Surgeon's Certificate No. G 60149 Respondent.	Case No. 800-2019-053206

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

ROB BONTA
Attorney General of California
JUDITH T. ALVARADO
Supervising Deputy Attorney General
REBECCA L. SMITH
Deputy Attorney General
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Attorneys for Complainant

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

In the Matter of the Accusation Against: MAIA URSULA CHAKERIAN, M.D. 360 Dardanelli Lane, Suite 2G Los Gatos, CA 95032-1421 Physician's and Surgeon's Certificate No. G 60149, Respondent.	Case No. 800-2019-053206 OAH No. 2023070583 **STIPULATED SETTLEMENT AND DISCIPLINARY ORDER**

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

PARTIES

1. Reji Varghese (Complainant) is the Executive Director of the Medical Board of California (Board). He brought this action solely in his official capacity and is represented in this matter by Rob Bonta, Attorney General of the State of California, by Rebecca L. Smith, Deputy Attorney General.

2. Maia Ursula Chakerian, M.D. (Respondent) is represented in this proceeding by attorney Thomas E. Still, whose address is 12901 Saratoga Avenue, Saratoga, California 95070-4110.

3. On or about May 26, 1987, the Board issued Physician's and Surgeon's Certificate No. G 60149 to Respondent. That license was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2019-053206, and will expire on August 31, 2024, unless renewed.

JURISDICTION

4. Accusation No. 800-2019-053206 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 February 17, 2022. Respondent timely filed her Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2019-053206 is attached as Exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2019-053206. Respondent has also carefully read, fully discussed with her counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

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

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

CULPABILITY

9. Respondent understands and agrees that the charges and allegations in Accusation No. 800-2019-053206, if proven at a hearing, constitute cause for imposing discipline upon her Physician's and Surgeon's Certificate.

10. Respondent does not contest that, at an administrative hearing, Complainant could establish a prima facie case with respect to the charges and allegations in Accusation No. 800-2019-053206, a true and correct copy of which is attached hereto as Exhibit A, and that he has thereby subjected her Physician's and Surgeon's Certificate, No. G 60149 to disciplinary action.

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

RESERVATION

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

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

14. 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.

15. 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

A. PUBLIC REPRIMAND.

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G 60149 issued to Respondent Maia Ursula Chakerian, M.D. is Publicly Reprimanded pursuant to California Business and Professions Code section 2227, subdivision (a)(4). This Public Reprimand, which is issued in connection with Respondent's care and treatment of Patient 1, as set forth in Accusation No. 800-2019-053206, is as follows:

> You committed acts constituting negligence in violation of Business and Professions Code section 2234, subdivision (c), in the placement of a nerve stimulation device in a single patient in 2018, as set forth in Accusation No. 800-2019-053206.

B. EDUCATION COURSE. Within sixty (60) calendar days of the effective date of this Decision, 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 forty (40) hours. The educational program(s) or course(s) shall be aimed at correcting any areas of deficient practice or knowledge 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 forty (40) hours of CME in satisfaction of this condition.

Respondent shall submit a certification of successful completion to the Board or its designee not later than fifteen (15) calendar days after successfully completing the educational program(s) or course(s), or not later than fifteen (15) calendar days after the effective date of the Decision, whichever is later.

If Respondent fails to enroll, participate in, or successfully complete the educational program(s) or course(s) within the designated time period, Respondent shall receive a notification from the Board or its designee to cease the practice of medicine within three (3) calendar days

after being so notified. Respondent shall not resume the practice of medicine until enrollment or participation in the educational program(s) or course(s) has been completed. Failure to successfully complete the educational program(s) or course(s) outlined above shall constitute unprofessional conduct and is grounds for further disciplinary action.

C. **INVESTIGATION/ENFORCEMENT COST RECOVERY.** Respondent is hereby ordered to reimburse the Board its costs of investigation and enforcement, in the amount of $19,159.00 (nineteen thousand one hundred fifty-nine dollars and no cents), payable within sixty (60) calendar days of the effective date of this Decision. Costs shall be payable to the Medical Board of California. Failure to pay such costs shall constitute unprofessional conduct and is grounds for further disciplinary action.

Any and all requests for a payment plan shall be submitted in writing by Respondent to the Board.

The filing of bankruptcy by Respondent shall not relieve her of the responsibility to repay investigation and enforcement costs.

D. **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. 800-2019-053206 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 restrict license.

ACCEPTANCE

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

DATED: Dec. 12, 2023

MAIA URSULA CHAKERIAN, M.D.
Respondent

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

DATED: 12/12/2023

Thomas E. Still
Attorney for Respondent

ENDORSEMENT

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

DATED: 12/12/2023

Respectfully submitted,

ROB BONTA
Attorney General of California
JUDITH T. ALVARADO
Supervising Deputy Attorney General

REBECCA L. SMITH
Deputy Attorney General
Attorneys for Complainant

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

In the Matter of the Accusation Against: **MAIA URSULA CHAKERIAN, M.D.** **360 Dardanelli Lane, Suite 2G** **Los Gatos, CA 95032-1421** **Physician's and Surgeon's Certificate No. G 60149,** Respondent.	Case No. 800-2019-053206 **ACCUSATION**

PARTIES

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

2. On May 26, 1987, the Board issued Physician's and Surgeon's Certificate Number G 60149 to Maia Ursula Chakerian, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on August 31, 2022, unless renewed.

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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 unless otherwise indicated.

4. Section 2227 of the Code provides that a licensee who is found guilty under the Medical Practice Act may have his or her license revoked, suspended for a period not to exceed one year, placed on probation and required to pay the costs of probation monitoring, or such other action taken in relation to discipline as the Board deems proper.

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

"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."

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COST RECOVERY

6. Business and Professions Code section 125.3 states that:

(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 licentiate that is a corporation or a partnership, the order may be made against the licensed corporate entity or licensed partnership.

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

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

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

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

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

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

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

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

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

FIRST CAUSE FOR DISCIPLINE

(Unprofessional Conduct/ Repeated Negligent Acts/ Incompetence)

7. Respondent is subject to disciplinary action under sections 2234 and/or 2234(c) and/or 2234(d) in that Respondent engaged in unprofessional conduct and/or committed repeated acts of negligence and/or incompetence in her care and treatment of Patient 1.[1] The circumstances are as follows:

8. Respondent, a pain management physician with a solo practice in Los Gatos, CA, is board-certified in anesthesiology with special qualifications in pain management.

9. Respondent first saw Patient 1 on August 6, 2018, after Patient 1 had been referred to Respondent by a primary care physician. Patient 1 is a complex pain patient in her forties who had been previously treated by pain management physicians at an academic medical center. Patient 1 had chronic headaches, facial pain, and neck pain. Patient 1 was diagnosed with occipital neuralgia, a disorder of the occipital nerve, which is located in the back of the neck and scalp. A variety of medications and nerve blocks had been previously prescribed to Patient 1 for her pain, but those treatments were not controlling her pain adequately. The pain management physicians at the academic medical center recommended peripheral nerve stimulation treatment for occipital neuralgia to Patient 1.[2] Before Patient 1 could proceed with getting the treatment at the academic medical center, her health insurance changed and the academic medical center

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[1] The patient is referred to as Patient 1 to protect privacy.

[2] Peripheral nerve stimulation treatment for pain involves targeting the nerve(s) that transmit pain signals to the brain. Peripheral nerve stimulation typically requires inserting a tiny implant—a thin wire or small group of electrodes—into the body to deliver electrical impulses, similar to a pacemaker, to a particular nerve or nerves. The treatment works by changing the way a patient's brain perceives pain because the electrical pulses interrupt the pain signals sent from the nerve to the brain. Peripheral nerve stimulation devices vary and are produced my multiple medical device companies, but each device has three basic components: a power source; a wire or lead to deliver the pulses to the peripheral nerve to be treated; and a remote control-type device allowing a patient to adjust the pulse settings. Peripheral nerve stimulation devices are typically implanted by anesthesiologists, physiatrists, neurologists, or neurosurgeons. The procedure is usually an outpatient procedure taking less than one hour.

became out-of-network. Respondent was an in-network pain management physician under Patient 1's new insurance plan. Respondent had done occipital nerve stimulation treatment on a handful patients before, using devices which required the pulse generator implant sites to be on a patient's back or buttocks. Respondent sought a better solution for her patients whereby the pulse generator would be closer to the occipital nerve.

10. After a thorough initial pain evaluation of Patient 1 on August 6, 2018 and review of her previous pain management medical records, Respondent diagnosed Patient 1 with occipital neuralgia and, on August 22, 2018, ordered a psychological evaluation of Patient 1 for the purpose of pre-operative evaluation. Patient 1 was evaluated by a licensed clinical psychologist on September 19-20, 2018, and determined to have "fair" psychological suitability for implanted device nerve stimulation treatment. On November 26, 2018, Respondent did a fifteen-minute percutaneous trial occipital nerve stimulation on Patient 1 in her office, and Patient 1 experienced relief from her pain. Also on November 26, 2018, Respondent approved a pre-operative order for peripheral nerve stimulator placement surgery at a nearby surgery center as treatment for Patient 1's occipital neuralgia. The device to be used was one that Respondent had not implanted in any patient before.

11. Patient 1's insurance company initially denied approval for the peripheral nerve stimulator placement procedure. After a series of appeals in which she was assisted by Respondent and her office staff, Patient 1 received authorization from her insurance company on February 6, 2019. Respondent saw Patient 1 in her office on February 7, 2019 for a pre-operative visit.

12. On February 11, 2019, Respondent saw Patient 1 at a local surgery center for implantation of the peripheral nerve stimulation device. Patient 1 was placed in prone position (on stomach) on an operating table and given intravenous sedation by a monitoring nurse. A representative from the medical device company that manufactured the device that Respondent for was then implanting for the first time in a patient was also in the operating room with Respondent and Patient 1. Respondent began to prepare to inject local anesthetic into the back of Patient 1's scalp in accordance with her planned implantation site and approach to reach the occipital nerve

with the wire lead of the stimulation device. However, the representative from the medical device company stated that Respondent needed to implant in the back of Patient 1's neck instead, since the wire lead of the device was not long enough to reach from a scalp implantation site to Patient 1's left shoulder, where the device transmitter would need to be located. Despite the implantation site for Patient 1 being different than what Respondent had expected until that time, Respondent went forward with the implantation procedure for Patient 1. Respondent made an incision at a site low in the back of Patient 1's neck, and Respondent implanted the device into Patient 1 with front and back fluoroscopy views only.[3] Respondent did not properly use palpation techniques and/or lateral view fluoroscopy during the procedure on Patient 1 to verify the position of the implant in relation to Patient 1's skull. Patient 1 felt immense pain when Respondent inserted the device into her but stated that she could not communicate that pain to Respondent due to sedation during the procedure. Patient 1 was observed to have severe retching during the implantation.

13. In the recovery room, Patient 1 was noted to have severe vomiting and drowsiness. Patient 1 subsequently developed signs of stroke and was transferred by ambulance from the recovery room at the surgery center to a local hospital. Upon her own arrival at the hospital shortly thereafter, Respondent learned that the lead wire of the peripheral nerve simulation device she had implanted earlier that day into Patient 1 had improperly gone into Patient 1's brain. Patient 1 was taken into surgery, and a neurosurgeon removed the lead wire from Patient 1's brain. Patient 1 subsequently experienced a prolonged hospitalization and persistent neurological problems.

14. Respondent improperly placed the lead of a peripheral nerve stimulation device inside Patient 1's skull and in her brain when it should have remained under the skin above Patient 1's skull. Accordingly, Respondent is guilty of unprofessional conduct, and Respondent's certificate is subjected to discipline pursuant to Sections 2234 and/or 2234(c) and/ or 2234 (d) of the Code based on repeated negligent acts and/or incompetence, including but not limited to the following:

[3] Fluoroscopy is medical imaging showing continuous x-ray views on a monitor.

A. Respondent's failure to locate and follow the lead wire introducer needle by palpation throughout the course of doing the implantation and placement procedure on Patient 1, in order to prevent improper intracranial placement of the lead wire;

B. Respondent's failure to use lateral fluoroscopic views when doing the implantation and placement procedure on Patient 1, in order to prevent improper intracranial placement of the lead wire;

C. Respondent's failure to better mitigate for her inexperience with using the particular peripheral nerve stimulation device used on Patient 1 by more careful pre-planning and/or training, in order to prevent improper intracranial placement of the lead wire.

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 60149, issued to Maia Ursula Chakerian, M.D.;

2. Revoking, suspending or denying approval of Maia Ursula Chakerian, M.D.'s authority to supervise physician assistants and advanced practice nurses;

3. Ordering Maia Ursula Chakerian, 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: FEB 17 2022

WILLIAM PRASIFKA
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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