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

In the Matter of the Accusation Against: Farzaneh Tabrizi, M.D. Physician's and Surgeon's Certificate No. A 64717 Respondent.	Case No.: 800-2019-057155

DECISION

The attached Stipulated Settlement and Disciplinary 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 August 8, 2024.

IT IS SO ORDERED: July 9, 2024.

MEDICAL BOARD OF CALIFORNIA

Richard E. Thorp, Chair
Panel B

ROB BONTA
Attorney General of California
EDWARD KIM
Supervising Deputy Attorney General
CHRISTINA SEIN GOOT
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BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against: **FARZANEH TABRIZI, M.D.** **16400 Lark Avenue, Suite 100** **Los Gatos, CA 95032** **Physician's and Surgeon's Certificate No. A 64717,** Respondent.	Case No. 800-2019-057155 OAH No. 2023110424 **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 Christina Sein Goot, Deputy Attorney General.

2. Respondent Farzaneh Tabrizi, M.D. (Respondent) is represented in this proceeding by attorney David A. Depolo, whose address is: 201 North Civic Drive, Suite 239, Walnut Creek, CA 94596.

3. On or about March 27, 1998, the Board issued Physician's and Surgeon's Certificate No. A 64717 to Respondent. The Physician's and Surgeon's Certificate was in full force and

effect at all times relevant to the charges brought in Accusation No. 800-2019-057155, and will expire on June 30, 2025, unless renewed.

JURISDICTION

4. Accusation No. 800-2019-057155 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 9, 2022. Respondent timely filed her Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2019-057155 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. 800-2019-057155. 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. 800-2019-057155, if proven at a hearing, constitute cause for imposing discipline upon her Physician's and Surgeon's Certificate. Respondent hereby gives up her right to contest those charges and allegation.

10. Respondent does not contest that, at an administrative hearing, Complainant could

establish a prima facie case with respect to the charges and allegations contained in Accusation No. 800-2019-057155 and that she has thereby subjected her license 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 probationary terms as set forth in the Disciplinary Order below.

CONTINGENCY

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

13. Respondent agrees that if she ever petitions for early termination or modification of probation, or if an accusation and/or petition to revoke probation is filed against her before the Board, all of the charges and allegations contained in Accusation No. 800-2019-057155 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.

14. This Stipulated Settlement and Disciplinary Order is intended by the parties herein to be an integrated writing representing the complete, final and exclusive embodiment of the agreement of the parties in this above-entitled matter.

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. A 64717 issued to Respondent Farzaneh Tabrizi, M.D. is revoked. However, the revocation is stayed and Respondent is placed on probation for three (3) years on the following terms and conditions:

1. EDUCATION COURSE. Within 60 calendar days of the effective date of this 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 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 65 hours of CME of which 40 hours were in satisfaction of this condition.

2. MEDICAL RECORD KEEPING COURSE. Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a course in medical record keeping approved in advance by the Board or its designee. Respondent shall provide the approved course provider with any information and documents that the approved course provider may deem pertinent. Respondent shall participate in and successfully complete the classroom component of the course not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully complete any other component of the course within one (1) year of enrollment. The medical record keeping course shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

A medical record keeping course taken after the acts that gave rise to the charges in the Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the course would have

been approved by the Board or its designee had the course been taken after the effective date of this Decision.

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

3. NOTIFICATION. 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.

4. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE NURSES. During probation, Respondent is prohibited from supervising physician assistants and advanced practice nurses.

5. OBEY ALL LAWS. 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.

6. INVESTIGATION/ENFORCEMENT COST RECOVERY. 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 $17,173.00 (seventeen thousand one hundred seventy-three dollars and zero 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).

7. QUARTERLY DECLARATIONS. 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.

8. GENERAL PROBATION REQUIREMENTS.

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.

9. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. 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.

10. NON-PRACTICE WHILE ON PROBATION. 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.

11. COMPLETION OF PROBATION. 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 shall be fully restored.

12. 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.

13. 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.

14. 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 year.

15. 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. 800-2019-057155 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, David A. Depolo. 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: 4/23/2024

FARZANEH TABRIZI, M.D.
Respondent

I have read and fully discussed with Respondent Farzaneh Tabrizi, 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: 4/23/24

DAVID A. DEPOLO
Attorney for Respondent

[Endorsement on following page]

ENDORSEMENT

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

DATED: 4/23/2024

Respectfully submitted,

ROB BONTA
Attorney General of California
EDWARD KIM
Supervising Deputy Attorney General

CHRISTINA SEIN GOOT
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: **FARZANEH TABRIZI, M.D.** **16400 Lark Ave., Ste. 100** **Los Gatos, CA 95032** **Physician's and Surgeon's Certificate No. A 64717,** Respondent.	Case No. 800-2019-057155 **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 or about March 27, 1998, the Board issued Physician's and Surgeon's Certificate Number A 64717 to Farzaneh Tabrizi, 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 June 30, 2023, unless renewed.

3. At all times relevant to the allegations in the causes for discipline herein, Respondent owned an office practice providing general internal medicine and urgent care.

JURISDICTION

4. 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.

5. 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.

6. Section 2228 of the Code states:

> The authority of the board or the California Board of Podiatric Medicine to discipline a licensee by placing him or her on probation includes, but is not limited to, the following:
>
> (a) Requiring the licensee to obtain additional professional training and to pass an examination upon the completion of the training. The examination may be written or oral, or both, and may be a practical or clinical examination, or both, at the option of the board or the administrative law judge.
>
> (b) Requiring the licensee to submit to a complete diagnostic examination by one or more physicians and surgeons appointed by the board. If an examination is ordered, the board shall receive and consider any other report of a complete diagnostic examination given by one or more physicians and surgeons of the licensee's choice.
>
> (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.

7. 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.

(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 . . . ."

8. 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.

COST RECOVERY

9. 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.

FIRST CAUSE FOR DISCIPLINE

(Unprofessional Conduct: Gross Negligence and/or Repeated Negligent Acts: Patient A[1])

10. Respondent Farzaneh Tabrizi, M.D. is subject to disciplinary action for unprofessional conduct through gross negligence and/or repeated negligent acts, under section 2234, subdivision (b) and/or subdivision (c) of the Business and Professions Code, as described herein.

11. On or about August 4, 2018, Patient A, a male born in 1965, was seen by another physician at Respondent's clinic. Patient A presented with complaints of three days of fever,

[1] To protect the patients' privacy rights, they will be referred to by letters. Their full names will be provided to Respondent in discovery.

urgency urinating, and abdominal pain. Patient A was diagnosed with prostatitis, was given an antibiotic injection (ceftriaxone) and was prescribed Bactrim DS, an antibiotic. Blood tests and a PSA test were ordered and a urine culture was taken.

12. On or about August 14, 2018, Patient A returned to the clinic for a follow-up visit and was seen by Respondent. Patient A complained of waves of fever, weakness, dizziness, and headache. Respondent's documented physical examination was brief and unremarkable. Respondent failed to perform and document an adequate follow-up examination and work-up of the patient's persistent fever, negative urine culture, and elevated CRP, despite the patient being on antibiotics for ten days. Respondent diagnosed the patient with viral syndrome, fatigue, and with elevated CRP (C-reactive protein) and low testosterone. Respondent noted "comprehensive testing" ordered.

13. On or about August 30, 2018, Respondent saw Patient A for a follow-up visit. Respondent's documented physical exam was unremarkable, e.g. with boxes checked for a normal respiratory effort and for lungs clear to auscultation, a negative urinalysis, and a normal bladder scan. The vital signs taken did not include a respiratory rate. Respondent diagnosed Patient A with low testosterone and gave the patient a testosterone IM injection. Respondent noted that she instructed Patient A to return the next day for a brain CT scan.

14. Three days later, on or about September 2, 2018, Patient A returned to Respondent's clinic and was seen by another physician. Patient A presented with a fever of unknown origin and was in acute distress with shortness of breath. Patient A was referred immediately to a hospital emergency department, where he was admitted to the Intensive Care Unit for a pneumothorax, right pleural effusion, and was hospitalized for a total of about twelve days.

15. For both of Patient A's visits with Respondent in August 2018, Respondent's medical records were incomplete and inadequate, lacking documentation of appropriate physical examinations and containing inconsistent findings.

16. Respondent's overall conduct, acts and/or omissions, with regard to Patient A as set forth in paragraphs 10 through 15 herein, constitutes unprofessional conduct through gross negligence and/or repeated negligent acts, pursuant to Business and Professions Code section

2234, subdivision (b) and/or subdivision (c), and is therefore subject to disciplinary action. More specifically, Respondent is guilty of unprofessional conduct as follows:

a. Respondent failed to perform and document an adequate history and physical examination of Patient A. Respondent failed to document findings to support a medical indication for her diagnoses. For example, Respondent did not perform a respiratory examination and did not measure and document Patient A's respiratory rate. Also, although the patient complained of dizziness, weakness, and headaches, Respondent did not perform and document an adequate and complete neurological examination.

b. Respondent failed to order and/or perform adequate testing of Patient A which required, at a minimum, a chest x-ray, a complete blood count, and blood cultures, in addition to laboratory analysis and close follow-up of the patient.

c. Respondent gave a testosterone injection to Patient A for fatigue without a documented medical indication and while the patient was experiencing intermittent fevers and elevated CRP, which, alone, constitutes an extreme departure from the standard of care.

SECOND CAUSE FOR DISCIPLINE

(Unprofessional Conduct: Repeated Negligent Acts: Patient B)

17. Respondent Farzaneh Tabrizi, M.D. is subject to disciplinary action for unprofessional conduct through repeated negligent acts under section 2234, subdivision (c) of the Business and Professions Code, as described herein.

18. On or about Friday, March 2, 2018, Respondent saw Patient B, a female born in 1998, who complained of being sick for the past four days ("since Monday") with headache and dizziness, and with numbness in her face since "yesterday." With no boxes checked on the progress note form, there was no physical examination documented and no abnormal findings were noted in the review of systems on the visit form. The patient's vital signs were stable. Laboratory results showed a negative strep test. An electrocardiogram was noted as normal and

the patient was referred for an MRI. Respondent diagnosed the patient with "syncope"[2] and with "sinusitis" and started her on an antibiotic, azithromycin Z-pack.

19. On or about March 2, 2018, Respondent filed a report with the Department of Motor Vehicles reporting that Patient B reported multiple episodes of lapse of consciousness in the last three months, with the most recent episode occurring on March 1, 2018. Respondent's progress note, however, does not document any details about the patient's report of a recent history of loss of consciousness, or other findings, to support the "syncope" diagnosis.

20. On or about March 5, 2018, Patient B saw Respondent for a follow-up visit on the laboratory results, which included a complete blood count, chemistry panel, iron level, Vitamin D level, cholesterol, Vitamin B12, random cortisol level, and a fasting insulin level. It was noted that the physical examination was unremarkable. Respondent continued to document a diagnosis of syncope and referred Patient B to a cardiologist. Respondent also diagnosed Patient B with an iron deficiency and a Vitamin D deficiency for which she ordered an IM injection and prescribed one pill weekly. Respondent's progress note for this visit does not document any details or findings to support the "syncope" diagnosis.

21. On or about March 8, 2018, Patient B returned to see Respondent for a follow-up on the MRI results. It was noted simply that the patient reported "feeling better." The MRI of the brain was negative. Respondent noted a diagnosis of "recurrent syncope" and that the patient needed a Holter monitor and was being referred for evaluation to another physician. Respondent also diagnosed the patient with sinusitis, to be treated with amoxicillin. Respondent's progress note for the visit does not document any details or findings to support the "recurrent syncope" diagnosis.

22. Respondent's overall conduct, acts and/or omissions with regard to Patient B, as set forth in paragraphs 17 through 21 herein, constitutes unprofessional conduct through repeated negligent acts pursuant to Business and Professions Code Section 2234, subdivision (c), and is

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[2] "Syncope" is the medical term for fainting or passing out. It involves an abrupt, transient loss of consciousness and a concomitant loss of postural tone with a rapid, spontaneous recovery.

therefore subject to disciplinary action. More specifically, Respondent is guilty of unprofessional conduct as follows:

a. Respondent diagnosed Patient B with syncope without documenting findings to support the diagnosis and/or the work-up. There was no adequate and appropriate history and physical exam, including a neurological exam, documented for any of the office visits. Respondent also failed to the patient's history of loss of consciousness.

THIRD CAUSE FOR DISCIPLINE

(Unprofessional Conduct: Failure to Maintain Adequate and Accurate Records for Patient A and/or Patient B)

23. Respondent is subject to disciplinary action for unprofessional conduct under section 2266 for failure to maintain adequate and accurate records relating to the provision of medical services to Patient A and/or Patient B, jointly and severally.

24. Paragraphs 10 through 22 are incorporated herein by reference, as if fully set forth.

FOURTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct: Repeated Negligent Acts: Patient A and Patient B)

25. As an alternative cause for discipline, Complainant alleges that Respondent is subject to disciplinary action for unprofessional conduct under section 2234(c) for repeated negligent acts relating to acts and omissions regarding both Patient A and Patient B, jointly.

26. Paragraphs 10 through 22 are incorporated herein by reference, as if fully set forth.

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 A 64717, issued to Respondent Farzaneh Tabrizi, M.D.;

2. Revoking, suspending or denying approval of Respondent Farzaneh Tabrizi, M.D.'s authority to supervise physician assistants and advanced practice nurses;

3. Ordering Respondent Farzaneh Tabrizi, 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 0 9 2022

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

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