

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

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

**George Ahad, M.D.**

**Physician's and Surgeon's  
Certificate No. A 111064**

**Respondent.**

**Case No.: 800-2021-078592**

**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 August 29, 2024.**

**IT IS SO ORDERED: July 30, 2024.**

**MEDICAL BOARD OF CALIFORNIA**



**Michelle Bholat, M.D., Interim Chair  
Panel A**

1 ROB BONTA  
Attorney General of California  
2 ALEXANDRA M. ALVAREZ  
Supervising Deputy Attorney General  
3 CHRISTINE A. RHEE  
Deputy Attorney General  
4 State Bar No. 295656  
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8 *Attorneys for Complainant*

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

13 In the Matter of the Accusation Against:

14 **GEORGE AHAD, M.D.**  
15 **947 S. Anaheim Blvd., Suite 240**  
**Anaheim, CA 92805-5584**

16 **Physician's and Surgeon's Certificate**  
17 **No. A 111064,**

18 Respondent.

Case No. 800-2021-078592

OAH No. 2023030080

**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 Executive Director of the Medical Board of  
24 California (Board). He brought this action solely in his official capacity and is represented in this  
25 matter by Rob Bonta, Attorney General of the State of California, by Christine A. Rhee, Deputy  
26 Attorney General.

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2. Respondent George Ahad, M.D. (Respondent), is represented in this proceeding by attorneys Dennis Ames, Esq., and Poge Henderson, Esq., whose address is: 2677 North Main Street, Suite 901, Santa Ana, CA 92705-6632.

3. On or about February 10, 2010, the Board issued Physician's and Surgeon's Certificate No. A 111064 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. 800-2021-078592, and will expire on July 31, 2025, unless renewed.

#### **JURISDICTION**

4. Accusation No. 800-2021-078592 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 January 13, 2023. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A true and correct copy of Accusation No. 800-2021-078592 is attached as Exhibit A and incorporated by reference herein.

#### **ADVISEMENT AND WAIVERS**

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2021-078592. Respondent has also carefully read, fully discussed with his counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

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

8. Having had the benefit of counsel, Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

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1 **CULPABILITY**

2 9. Respondent does not contest that, at an administrative hearing, Complainant could  
3 establish a prima facie case with respect to the charges and allegations contained in Accusation  
4 No. 800-2021-078592, and that he has thereby subjected his license to disciplinary action.

5 10. Respondent agrees that if he ever petitions for early termination or modification of  
6 probation, or if the Board ever petitions for revocation of probation, all of the charges and  
7 allegations contained in Accusation No, 800-2021-078592 shall be deemed true, correct, and fully  
8 admitted by Respondent for purposes of that proceeding or any other licensing proceeding  
9 involving Respondent in the State of California.

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

13 **CONTINGENCY**

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

24 **ADDITIONAL PROVISIONS**

25 13. This Stipulated Settlement and Disciplinary Order is intended to be an integrated  
26 writing representing the complete, final, and exclusive embodiment of the agreements of the  
27 parties in the above-listed matter.

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1 complete any other component of the course within one (1) year of enrollment. The medical  
2 record keeping course shall be at Respondent's expense and shall be in addition to the Continuing  
3 Medical Education (CME) requirements for renewal of licensure.

4 A medical record keeping course taken after the acts that gave rise to the charges in the  
5 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board  
6 or its designee, be accepted towards the fulfillment of this condition if the course would have  
7 been approved by the Board or its designee had the course been taken after the effective date of  
8 this Decision.

9 Respondent shall submit a certification of successful completion to the Board or its  
10 designee not later than 15 calendar days after successfully completing the course, or not later than  
11 15 calendar days after the effective date of the Decision, whichever is later.

12 3. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of  
13 the effective date of this Decision, Respondent shall enroll in a professionalism program, that  
14 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1.  
15 Respondent shall participate in and successfully complete that program. Respondent shall  
16 provide any information and documents that the program may deem pertinent. Respondent shall  
17 successfully complete the classroom component of the program not later than six (6) months after  
18 Respondent's initial enrollment, and the longitudinal component of the program not later than the  
19 time specified by the program, but no later than one (1) year after attending the classroom  
20 component. The professionalism program shall be at Respondent's expense and shall be in  
21 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

22 A professionalism program taken after the acts that gave rise to the charges in the  
23 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board  
24 or its designee, be accepted towards the fulfillment of this condition if the program would have  
25 been approved by the Board or its designee had the program been taken after the effective date of  
26 this Decision.

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

4. MONITORING - PRACTICE. Within 30 calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval as a practice monitor, the name and qualifications of one or more licensed physicians and surgeons whose licenses are valid and in good standing, and who are preferably American Board of Medical Specialties (ABMS) certified. A monitor shall have no prior or current business or personal relationship with Respondent, or other relationship that could reasonably be expected to compromise the ability of the monitor to render fair and unbiased reports to the Board, including but not limited to any form of bartering, shall be in Respondent's field of practice, and must agree to serve as Respondent's monitor. Respondent shall pay all monitoring costs.

The Board or its designee shall provide the approved monitor with copies of the Decision(s) and Accusation(s), and a proposed monitoring plan. Within 15 calendar days of receipt of the Decision(s), Accusation(s), and proposed monitoring plan, the monitor shall submit a signed statement that the monitor has read the Decision(s) and Accusation(s), fully understands the role of a monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor disagrees with the proposed monitoring plan, the monitor shall submit a revised monitoring plan with the signed statement for approval by the Board or its designee.

Within 60 calendar days of the effective date of this Decision, and continuing throughout probation, Respondent's practice shall be monitored by the approved monitor. Respondent shall make all records available for immediate inspection and copying on the premises by the monitor at all times during business hours and shall retain the records for the entire term of probation.

If Respondent fails to obtain approval of a monitor within 60 calendar days of the effective date of this Decision, 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 cease the practice of medicine until a monitor is approved to provide monitoring responsibility.

1 The monitor(s) shall submit a quarterly written report to the Board or its designee which  
2 includes an evaluation of Respondent's performance, indicating whether Respondent's practices  
3 are within the standards of practice of medicine, and whether Respondent is practicing medicine  
4 safely. It shall be the sole responsibility of Respondent to ensure that the monitor submits the  
5 quarterly written reports to the Board or its designee within 10 calendar days after the end of the  
6 preceding quarter.

7 If the monitor resigns or is no longer available, Respondent shall, within 5 calendar days of  
8 such resignation or unavailability, submit to the Board or its designee, for prior approval, the  
9 name and qualifications of a replacement monitor who will be assuming that responsibility within  
10 15 calendar days. If Respondent fails to obtain approval of a replacement monitor within 60  
11 calendar days of the resignation or unavailability of the monitor, Respondent shall receive a  
12 notification from the Board or its designee to cease the practice of medicine within three (3)  
13 calendar days after being so notified. Respondent shall cease the practice of medicine until a  
14 replacement monitor is approved and assumes monitoring responsibility.

15 In lieu of a monitor, Respondent may participate in a professional enhancement program  
16 approved in advance by the Board or its designee that includes, at minimum, quarterly chart  
17 review, semi-annual practice assessment, and semi-annual review of professional growth and  
18 education. Respondent shall participate in the professional enhancement program at Respondent's  
19 expense during the term of probation.

20 Respondent shall maintain a practice monitor for a period of one (1) year from the effective  
21 date of the Decision and Order, or until Respondent submits to the Board or its designee written  
22 proof of completion of the Medical Record Keeping Course, Education Course for the first year  
23 of probation, and the Professionalism Program (Ethics Course), whichever occurs first.

24 5. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the  
25 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the  
26 Chief Executive Officer at every hospital where privileges or membership are extended to  
27 Respondent, at any other facility where Respondent engages in the practice of medicine,  
28 including all physician and locum tenens registries or other similar agencies, and to the Chief



1 Executive Officer at every insurance carrier which extends malpractice insurance coverage to  
2 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15  
3 calendar days.

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

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

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

11 8. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby  
12 ordered to reimburse the Board its costs of investigation and enforcement, including, but not  
13 limited to, expert review, legal reviews, and investigation(s), as applicable, in the amount of  
14 \$20,916.94 (twenty thousand, nine hundred and sixteen dollars and ninety-four cents). Costs  
15 shall be payable to the Medical Board of California. Failure to pay such costs shall be considered  
16 a violation of probation.

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

21 The filing of bankruptcy by Respondent shall not relieve Respondent of the responsibility  
22 to repay investigation and enforcement costs, including expert review costs.

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

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

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1       10. GENERAL PROBATION REQUIREMENTS.

2       Compliance with Probation Unit

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

4       Address Changes

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

10      Place of Practice

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

14      License Renewal

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

17      Travel or Residence Outside California

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

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

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

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

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

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

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

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

20 Periods of non-practice for a Respondent residing outside of California will relieve  
21 Respondent of the responsibility to comply with the probationary terms and conditions with the  
22 exception of this condition and the following terms and conditions of probation: Obey All Laws;  
23 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or  
24 Controlled Substances; and Biological Fluid Testing..

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

1 Board and timely satisfied. Upon successful completion of probation, Respondent's certificate  
2 shall be fully restored.

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

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

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

25 17. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for  
26 a new license or certification, or petition for reinstatement of a license, by any other health care  
27 licensing action agency in the State of California, all of the charges and allegations contained in  
28 Accusation No. 800-2021-078592 shall be deemed to be true, correct, and admitted by

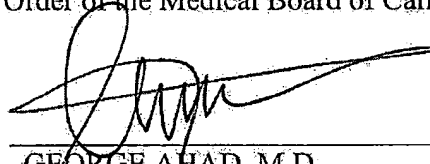
1 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or  
2 restrict license.

3 ACCEPTANCE

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

9  
10 DATED:

5/24/2024

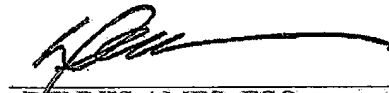


GEORGE AHAD, M.D.  
Respondent

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

15  
16 DATED:

6/4/24



DENNIS AMES, ESQ.  
POGEY HENDERSON, ESQ.  
Attorneys for Respondent

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**ENDORSEMENT**

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

DATED: June 7, 2024

Respectfully submitted,

ROB BONTA  
Attorney General of California  
ALEXANDRA M. ALVAREZ  
Supervising Deputy Attorney General



CHRISTINE A. RHEE  
Deputy Attorney General  
*Attorneys for Complainant*

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14 **GEORGE AHAD, M.D.**  
15 **947 S. Anaheim Blvd., Suite 240**  
**Anaheim, CA 92805-5584**

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

16 **Physician's and Surgeon's Certificate**  
17 **No. A 111064,**

Respondent.

18  
19  
20 **PARTIES**

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

24 2. On or about February 10, 2010, the Medical Board issued Physician's and Surgeon's  
25 Certificate No. A 111064 to George Ahad, M.D. (Respondent). The Physician's and Surgeon's  
26 Certificate was in full force and effect at all times relevant to the charges brought herein and will  
27 expire on July 31, 2023, unless renewed.

28 ///

## JURISDICTION

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

4. Section 2227 of the Code states, in pertinent part:

(a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provisions of this chapter:

(1) Have his or her license revoked upon order of the board.

(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.

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

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

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

...

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

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

...

(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



1 licensee's conduct departs from the applicable standard of care, each departure  
2 constitutes a separate and distinct breach of the standard of care.

3 ...

4 6. Section 2266 of the Code states that the failure of a physician and surgeon to maintain  
5 adequate and accurate records relating to the provision of services to their patients constitutes  
6 unprofessional conduct.

### 7 COST RECOVERY

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

### 14 FIRST CAUSE FOR DISCIPLINE 15 (Repeated Negligent Acts)

16 8. Respondent has subjected his Physician's and Surgeon's Certificate No. A 111064 to  
17 disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (c), of  
18 the Code, in that he committed repeated negligent acts in his care and treatment of Patient A,<sup>1</sup> as  
19 more particularly alleged hereafter:

20 9. On or about September 10, 2020, Patient A established care with Respondent, an  
21 obstetrician. At this initial visit, Patient A submitted to a physical examination. Fundal height<sup>2</sup>  
22 was 36 centimeters (cm). Patient A reported that her last menstrual period was February 1, 2020  
23 and her estimated due date was November 7, 2020.

24 10. On or about September 15, 2020, Patient A submitted to an ultrasound. The fetal  
25 gestational age parameters were consistent with 36 weeks and 0 days, while Patient A's  
26 abdominal circumference was consistent with 34 weeks and 4 days. Based on this ultrasound,  
27 Respondent changed Patient A's due date to October 13, 2020.

28 <sup>1</sup> Patient A's name has been omitted to protect her privacy.

<sup>2</sup> Fundal height is the distance between the top of the patient's uterus and pubic bone.

1 11. On or about September 17, 2020, September 24, 2020, and October 1, 2020, Patient A  
2 returned to Respondent's office for routine visits. At a visit on or about October 5, 2020,  
3 Respondent assessed that the baby had fetal macrosomia<sup>3</sup> despite no empirical evidence  
4 supporting that diagnosis.

5 12. On or about October 6, 2020, Patient A underwent a growth ultrasound which  
6 estimated the fetal weight as 7 pounds, 2 ounces. Despite this normal progress, on or about the  
7 same day, Respondent scheduled Patient A for an induction because of the baby's macrosomia.  
8 The scheduled induction date was October 12, 2020.

9 13. On or about October 8, 2020, Patient A underwent a non-stress test and amniotic fluid  
10 index. Again, Respondent's documented assessment included macrosomia.

11 14. On or about October 12, 2020, at approximately 8:00 a.m., Patient A was admitted to  
12 the hospital for an induction. She was given Cytotec<sup>4</sup> and penicillin during her two-day hospital  
13 stay. According to nursing records, on or about October 12, 2020, at approximately 1:18 p.m.,  
14 Patient A was 1 cm dilated, 60% effaced, fetal station -2. During Patient A's two-day hospital  
15 stay, Respondent never saw or examined Patient A, and gave nursing orders by phone.

16 15. On or about October 12, 2020, at approximately 8:16 p.m., Patient A was still 1 cm  
17 dilated, 60% effaced, fetal station -2. On or about October 13, 2020, at approximately 4:20 a.m.,  
18 Patient A was 1-2 cm dilated, 70% effaced, fetal station -2.

19 16. On or about October 13, 2020 at approximately 8:15 a.m., via phone, Respondent  
20 ordered a cervical balloon be placed. According to the nursing notes, Respondent stated that it  
21 was "unlikely that [the] patient's latex allergy will present in cervix."

22 17. On or about October 13, 2020, at approximately 10:50 a.m., Patient A was still 1-2  
23 cm dilated, 70% effaced, fetal station -2. At approximately 11:03 a.m., a nurse placed a cervical  
24 ripening balloon in Patient A's cervix.

25 ///

26 \_\_\_\_\_  
27 <sup>3</sup> Macrosomia refers to fetal growth beyond a specific threshold, regardless of gestational  
28 age.

<sup>4</sup> Cytotec, brand name for misoprostol, is used to induce labor.

1        18. On or about October 13, 2020, at approximately 1:50 p.m., nursing notes document  
2 that Respondent was updated on Patient A's status. At approximately 2:38 p.m., nursing notes  
3 documented that Respondent was aware that Patient A was refusing Pitocin.<sup>5</sup>

4        19. On or about October 13, 2020, at approximately 8:00 p.m., nursing notes document  
5 that Patient A wanted to go home and schedule a cesarean section (C-section) on Monday,  
6 October 19, 2020. Respondent scheduled the C-section for Monday, October 19, 2020, at 7:30  
7 a.m. On October 13, 2020, at approximately 8:10 p.m., the cervical balloon was removed, and  
8 Patient A was discharged at approximately 8:50 p.m.

9        20. On or about October 19, 2020, Patient A returned to Respondent's office.  
10 Respondents' records indicate that Patient A declined induction or a C-section, but that she  
11 agreed to a C-section the following Monday, October 26, 2020.

12        21. On or about October 21, 2020, at approximately 11:17 a.m., Patient A presented to  
13 the hospital because of decreased fetal movement. An ultrasound taken that day estimated the  
14 fetal weight to be 3,328 grams.

15        22. On or about October 22, 2020, at approximately 12:45 p.m., Patient A was admitted  
16 to the hospital for a C-section. Patient A's preoperative diagnosis was documented as failure to  
17 progress. At approximately 4:05 p.m., Respondent called the hospital and requested the C-section  
18 be scheduled at approximately 10:00 p.m. Patient A's baby was delivered via C-section at  
19 approximately 9:57 p.m.

20        23. Respondent committed repeated negligent acts in his care and treatment of Patient A  
21 which includes, but is not limited to, the following:

22            a. Respondent inaccurately documented that the reason for Patient A's induction  
23 was for fetal macrosomia, even though there was no evidence to support that;

24            b. Respondent failed to perform a bedside physician evaluation on Patient A  
25 during her October 12-13, 2020 hospital admission;

26            c. Respondent ordered the use of a latex cervical balloon during Patient A's labor,  
27 even though he was aware that Patient A was allergic to latex; and

28        <sup>5</sup> Pitocin, brand name for oxytocin, is used to induce labor.

1 d. Respondent failed to adequately document history and physical exams at  
2 Patient A's hospital admissions and his medical decision making process and inaccurately  
3 documented that the reason for cesarean section was for failure to progress, rather than maternal  
4 request.

5 **SECOND CAUSE FOR DISCIPLINE**  
6 **(Failure to Maintain Adequate and Accurate Records)**

7 24. Respondent has further subjected his Physician's and Surgeon's Certificate No.  
8 A 111064 to disciplinary action under sections 2227 and 2234, as defined by section 2266, of the  
9 Code, in that he failed to maintain adequate and accurate records for Patient A, as more  
10 particularly alleged in paragraphs 9 through 23, above, which are hereby incorporated by  
11 reference and re-alleged as if fully set forth herein.

12 **DISCIPLINARY CONSIDERATIONS**

13 25. To determine the degree of discipline, if any, to be imposed on Respondent,  
14 Complainant alleges that on or about March 24, 2021, in a prior disciplinary action before the  
15 Medical Board of California, in Case Number 800-2017-031906, Respondent's license was  
16 publicly reprimanded for repeated negligent acts in the care and treatment of two patients. That  
17 Decision is now final and is incorporated by reference as if fully set forth herein.

18 **PRAYER**

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

21 1. Revoking or suspending Physician's and Surgeon's Certificate No. A 111064, issued  
22 to Respondent George Ahad, M.D.;

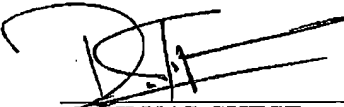
23 2. Revoking, suspending or denying approval of Respondent George Ahad, M.D.'s  
24 authority to supervise physician assistants and advanced practice nurses;

25 3. Ordering Respondent George Ahad, M.D., to pay the Board the costs of the  
26 investigation and enforcement of this case, and if placed on probation, the costs of probation  
27 monitoring; and

28 ///

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

DATED: **JAN 13 2023**



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REJI VARGHESE  
Deputy Director  
Medical Board of California  
Department of Consumer Affairs  
State of California  
*Complainant*

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