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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 **AUBREY ANCIL KING, M.D.**
15 **154 A W Foothill Blvd., #315**
Upland, CA 91786-3847

16 **Physician's and Surgeon's Certificate**
17 **No. G 56023,**

18 Respondent.

Case No. 800-2021-080713

DEFAULT DECISION
AND DISCIPLINARY ORDER

[Gov. Code, §11520]

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21 **FINDINGS OF FACT**

22 1. On or about June 20, 2024, Complainant Reji Varghese, in his official capacity as the
23 Executive Director of the Medical Board of California, Department of Consumer Affairs, filed
24 Accusation No. 800-2021-080713 against Aubrey Ancil King, M.D. (Respondent), before the
25 Medical Board of California (Board). True and correct copies of Accusation No. 800-2021-
26 080713, Statement to Respondent, Notice of Defense, Request for Discovery, and Government
27 Code sections 11507.5, 11507.6, and 11507.7 were sent to Respondent's address of record with

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1 the Board, which was and is: 154 A W Foothill Blvd., #315, Upland, CA 91786-3847. (Exhibit
2 1.¹)

3 2. On or about September 16, 1985, the Board issued Physician's and Surgeon's
4 Certificate No. G 56023 to Respondent. Physician's and Surgeon's Certificate No. G 56023 will
5 expire on September 30, 2025, unless renewed. (Certificate of Licensure, Exhibit 2.)

6 3. On or about June 20, 2024, Merlene Francis, an employee of the Board, served by
7 Certified and First-Class Mail a copy of Accusation No. 800-2021-080713, Statement to
8 Respondent, Notice of Defense, Request for Discovery, and Government Code sections 11507.5,
9 11507.6, and 11507.7 to Respondent's address of record with the Board, which was and is: 154 A
10 W Foothill Blvd., #315, Upland, CA 91786-3847. (Exhibit 1.)

11 4. On or about June 27, 2024, the Board received a certified mail receipt confirming that
12 the Accusation and related documents had been delivered to Respondent's address of record on
13 June 24, 2024. (Declaration of Deputy Attorney General Christine A. Rhee in Support of Default
14 Decision and Disciplinary Order, Exhibit 3, ¶ 6.)

15 5. On or about July 8, 2024, Atur Gilou, an employee of the Attorney General's Office,
16 served by Certified Mail, First-Class Mail, and email a Courtesy Notice of Default and related
17 documents on Respondent via his mailing and email addresses of record with the Board. (Exhibit
18 3, ¶ 7; Courtesy Notice of Default, Accusation No. 800-2021-080713, Statement to Respondent,
19 Notice of Defense, Request for Discovery, and Government Code sections 11507.5, 11507.6, and
20 11507.7, and Declaration of Service dated July 8, 2024, Exhibit 4.)

21 6. To date, Respondent has not filed a Notice of Defense. (Exhibit 3, ¶ 9.)

22 7. Service of the Accusation was effective as a matter of law under the provisions of
23 Government Code section 11505, subdivision (c).

24 8. Government Code section 11506 states, in pertinent part:

25 ...

26 (c) The respondent shall be entitled to a hearing on the merits if the respondent
27 files a notice of defense, and the notice shall be deemed a specific denial of all parts

28 ¹ The exhibits referred to herein, which are true and correct copies of the originals, are
contained in the separate accompanying "Default Decision Evidence Packet."

1 of the accusation not expressly admitted. Failure to file a notice of defense shall
2 constitute a waiver of respondent's right to a hearing, but the agency in its discretion
3 may nevertheless grant a hearing.

3 ...

4 9. Respondent failed to file a Notice of Defense within 15 days after service upon him
5 of the Accusation, and therefore waived his right to a hearing on the merits of Accusation No.
6 800-2021-080713.

7 10. Government Code section 11520 states, in pertinent part:

8 (a) If the respondent either fails to file a notice of defense or to appear at the
9 hearing, the agency may take action based upon the respondent's express admissions
10 or upon other evidence and affidavits may be used as evidence without any notice to
11 respondent.

11 ...

12 11. Business and Professions Code section 125.3 states, in pertinent part:

13 (a) Except as otherwise provided by law, in any order issued in resolution of a
14 disciplinary proceeding before any board within the department or before the
15 osteopathic Medical Board, upon request of the entity bringing the proceeding, the
16 administrative law judge may direct a licensee found to have committed a violation or
17 violations of the licensing act to pay a sum not to exceed the reasonable costs of the
18 investigation and enforcement of the case.

17 ...

18 12. Pursuant to its authority under Government Code section 11520, the Board finds
19 Respondent is in default. The Board will take action without further hearing and, based on
20 Respondent's express admissions by way of default and the evidence before it, contained in
21 Exhibits 1 through 7, finds that the charges and allegations in Accusation No. 800-2021-080713,
22 and each of them, separately and severally, are true and correct.

23 13. Business and Professions Code section 2227 provides that a licensee who was found
24 guilty under the Medical Practice Act may have his or her license revoked, suspended for a period
25 not to exceed one year, be placed on probation and required to pay the costs of probation
26 monitoring, be publicly reprimanded, or such other action taken in relation to discipline as the
27 Board deems proper.

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1 14. Business and Professions Code section 2234 states, in pertinent part:

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

5 ...

6 (b) Gross negligence.

7 (c) Repeated negligent acts.

8 ...

9 15. Business and Professions Code section 2266 states that the failure of a physician and
10 surgeon to maintain adequate and accurate records relating to the provision of services to patients
11 for at least seven years constitutes unprofessional conduct.

12 16. Business and Professions Code section 125.3 provides, in pertinent part, that the
13 Board may request the administrative law judge to direct a licensee found to have committed a
14 violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the
15 investigation and enforcement of the case, with failure of the licensee to comply subjecting the
16 license to not being renewed or reinstated.

17 17. Respondent has subjected his Physician's and Surgeon's Certificate No. G 56023 to
18 disciplinary action by reason of the following:

- 19 a. Respondent treated Patient A, a seven-year-old female, from December 2020 to
20 May 2021. (Declaration of Daniel Brockett, M.D., in Support of Default Decision
21 and Disciplinary Order, Exhibit 5, ¶ 9.) Prior to her treatment with Respondent,
22 Patient A had been diagnosed with Attention Deficit Hyperactivity Disorder
23 (ADHD). (Exhibit 5, ¶ 7.) Respondent's treatment plan was to prescribe
24 melatonin, escitalopram (brand name Lexapro, an anti-depressant), buspirone
25 (brand name BuSpar, an anxiolytic used to treat anxiety), and guanfacine.
26 (Exhibit 5, ¶ 9.) As treatment progressed, Respondent diagnosed Patient A with
27 anxiety disorder and schizophrenia and prescribed additional medications
28 including dexamethylphenidate (brand name Focalin), risperidone (brand name
Risperdal, an antipsychotic), and mirtazapine (brand name Remeron, an anti-

1 depressant). (Exhibit 5, ¶ 9.) Respondent failed to document his rationale for
2 adding mirtazapine and increasing Patient A's risperidone dosage for Patient A.
3 (Exhibit 5, ¶ 9.)

4 b. It is not within the standard of care to diagnose a seven-year-old child with
5 schizophrenia. Respondent committed gross negligence by prematurely and/or
6 inaccurately diagnosing Patient A, a seven-year old child, with schizophrenia and
7 excessively prescribing psychotropic medications to her. (Exhibit 5, ¶ 10.)

8 c. Respondent treated Patient B, a forty-nine-year-old female, from June 2018 to
9 October 2019. (Exhibit 5, ¶ 5.) Respondent prescribed alprazolam, a controlled
10 substance and a benzodiazepine, and zolpidem tartrate, a controlled substance and
11 a sedative, to Patient B during that time. (Exhibit 5, ¶ 5.) While receiving
12 treatment from Respondent, Patient B filled prescriptions for opioids and
13 benzodiazepines from other treatment providers. (Exhibit 5, ¶ 5.) There was no
14 evidence that Respondent ever requested Patient B's CURES report, in violation
15 of Health and Safety Code section 11165.4. (Exhibit 5, ¶ 5.)

16 d. Respondent inaccurate documented in his records that he prescribed guanfacine to
17 Patient B in progress notes dated September 28, 2020, November 25, 2020, and
18 January 14, 2021. Based on Respondent's treatment records prior to September
19 28, 2020, it appears that Respondent erroneously documented that he had
20 prescribed guanfacine to Patient B instead of gabapentin, which was part of
21 Patient B's established medication regimen. (Declaration of Investigator Kathryn
22 Ochi-Norman in Support of Default Decision and Disciplinary Order, Exhibit 6, ¶
23 4.)

24 e. Respondent committed repeated negligent acts by prematurely and/or inaccurately
25 diagnosing Patient A with schizophrenia, excessively prescribing psychotropic
26 medications to Patient A, failing to maintain adequate and accurate records for
27 Patient A, and failing to properly monitor Patient B's treatment with controlled
28 substances. (Exhibit 5, ¶¶ 6, 10.)

1 f. Respondent failed to maintain adequate and accurate records for Patients A and B.
2 (Exhibit 5, ¶ 10; Exhibit 6, ¶ 4.)

3 18. Pursuant to its authority under Government Code section 11520, the Board finds that
4 Respondent is in default. The Board will take action without further hearing and, based on
5 Respondent's express admissions by way of default and the evidence before it, contained in
6 Exhibits 1 through 7, finds that the allegations in Accusation No. 800-2021-080713 are true.

7 **DETERMINATION OF ISSUES**

8 1. Based on the foregoing findings of fact, Respondent Aubrey Ancil King, M.D., has
9 subjected his Physician's and Surgeon's Certificate No. G 56023 to disciplinary action.

10 2. The Board has jurisdiction to adjudicate this matter by default.

11 3. Pursuant to Business and Professions Code section 125.3, the Board is authorized to
12 order Respondent to pay the Board the reasonable costs of investigation and enforcement of the
13 case prayed for in the Accusation, totaling \$16,277.50. (Certification of Prosecution Costs:
14 Declaration of Deputy Attorney General Christine A. Rhee, Exhibit 7, ¶ 7.)

15 4. Pursuant to its authority under Government Code section 11520, and based on the
16 evidence before it, and the Findings of Fact contained in paragraphs 1 through 18, above, the
17 Board hereby finds that the charges and allegations contained in Accusation No. 800-2021-
18 080713, and each of them, separately and severally, are true and correct.

19 5. Pursuant to its authority under Government Code section 11520, and by reason of the
20 Findings of Fact contained in paragraphs 1 through 18, above, and Determination of Issues 1, 2,
21 3, and 4, above, the Board hereby finds that Respondent Aubrey Ancil King, M.D., has subjected
22 his Physician's and Surgeon's Certificate No. G 56023 to disciplinary action under California
23 Business and Professions Code section 2220, 2227, 2234, and 2266, in that he has committed
24 gross negligence and repeated negligent acts in the care and treatment of two patients, in violation
25 of Business and Professions Code section 2234, subdivisions (b) and (c), and failed to maintain
26 adequate and accurate records for the two patients, in violation of Business and Professions Code
27 section 2266.

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1 6. Respondent is liable to the Board the costs of investigation and enforcement in the
2 amount of sixteen thousand, two hundred and seventy-seven dollars and fifty cents (\$16,277.50).
3 (Exhibit 7, ¶ 7.)

4 **DISCIPLINARY ORDER**

5 IT IS SO ORDERED that Physician's and Surgeon's Certificate No. G 56023, heretofore
6 issued to Respondent Aubrey Ancil King, M.D., is revoked.

7 Respondent Aubrey Ancil King, M.D., is ordered to pay the Board the costs of the
8 investigation and enforcement of this case in the amount of \$16,277.50. Respondent's
9 Physician's and Surgeon's Certificate may not be renewed or reinstated unless all costs ordered
10 under Business and Professions Code section 125.3 have been paid.

11 If Respondent ever files an application for re-licensure or reinstatement in the State of
12 California, the Board shall treat it as a petition for reinstatement of a revoked license.
13 Respondent must comply with all the laws, regulations, and procedures for reinstatement of a
14 revoked license in effect at the time the petition is filed.

15 Pursuant to Government Code section 11520, subdivision (c), Respondent may serve a
16 written motion requesting that the Decision be vacated and stating the grounds relied on within
17 seven (7) days after service of the Decision on Respondent. The Board in its discretion may
18 vacate the Decision and grant a hearing on a showing of good cause, as defined in the statute.

19 This Decision shall become effective at 5:00 p.m. on SEP 19 2024.

20 It is so ORDERED AUG 20 2024

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22
23 JEANNE JONES FOR
24 REJI VARGHESE
25 EXECUTIVE DIRECTOR
26 MEDICAL BOARD OF CALIFORNIA,
27 DEPARTMENT OF CONSUMER AFFAIRS

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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:

Case No. 800-2021-080713

14 **AUBREY ANCIL KING, M.D.**
15 **154 A W Foothill Blvd. #315**
Upland, CA 91786-3847

A C C U S A T I O N

16 **Physician's and Surgeon's Certificate**
17 **No. G 56023,**

Respondent.

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20 **PARTIES**

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

24 2. On or about September 16, 1985, the Medical Board issued Physician's and
25 Surgeon's Certificate No. G 56023 to Aubrey Ancil King, M.D. (Respondent). The Physician's
26 and Surgeon's Certificate will expire on September 30, 2025, unless renewed.

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JURISDICTION

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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:

...

(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

1 not limited to, a reevaluation of the diagnosis or a change in treatment, and the
2 licensee's conduct departs from the applicable standard of care, each departure
3 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 7. Section 1165.4 of the Health and Safety Code states, in pertinent part:

8 (a)(1)(A)(i) A health care practitioner authorized to prescribe, order, administer,
9 or furnish a controlled substance shall consult the patient activity report or information
10 from the patient activity report obtained from the CURES database to review a
11 patient's controlled substance history for the past 12 months before prescribing a
12 Schedule II, Schedule III, or Schedule IV controlled substance to the patient for the
13 first time and at least once every six months thereafter if the prescriber renews the
14 prescription and the substance remains part of the treatment of the patient.

12 (ii) If a health care practitioner authorized to prescribe, order, administer, or
13 furnish a controlled substance is not required, pursuant to an exemption described in
14 subdivision (c), to consult the patient activity report from the CURES database the
15 first time the health care practitioner prescribes, orders, administers, or furnishes a
16 controlled substance to a patient, the health care practitioner shall conduct the patient
17 activity report from the CURES database to review the patient's controlled substance
18 history before subsequently prescribing a Schedule II, Schedule III, or Schedule IV
19 controlled substance to the patient and at least once every six months thereafter if the
20 prescriber renews the prescription and the substance remains part of the treatment of
21 the patient.

18 ...

19 COST RECOVERY

20 8. Section 125.3 of the Code states:

21 (a) Except as otherwise provided by law, in any order issued in resolution of a
22 disciplinary proceeding before any board within the department or before the
23 Osteopathic Medical Board, upon request of the entity bringing the proceeding, the
24 administrative law judge may direct a licensee found to have committed a violation or
25 violations of the licensing act to pay a sum not to exceed the reasonable costs of the
26 investigation and enforcement of the case.

25 (b) In the case of a disciplined licensee that is a corporation or a partnership, the
26 order may be made against the licensed corporate entity or licensed partnership.

26 (c) A certified copy of the actual costs, or a good faith estimate of costs where
27 actual costs are not available, signed by the entity bringing the proceeding or its
28 designated representative shall be prima facie evidence of reasonable costs of
investigation and prosecution of the case. The costs shall include the amount of

1 investigative and enforcement costs up to the date of the hearing, including, but not
2 limited to, charges imposed by the Attorney General.

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

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

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

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

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

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

27 (i) Nothing in this section shall preclude a board from including the recovery of
28 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.

FACTUAL ALLEGATIONS

Patient A¹

9. On or about December 12, 2020, Patient A, a seven-year-old female, presented to
Respondent, a psychiatrist, to establish care. According to her mother, Patient A had been
diagnosed with autism and Attention Deficit Hyperactivity Disorder (ADHD) and prescribed

///

¹ The patients' names have been omitted to protect their privacy. Respondent is aware of
the patients' identities.

1 methylphenidate.² Patient A's mother did not want her daughter to take medication. Patient A
2 was doing poorly with Zoom distance learning, was hyperactive and aggressive at home, was
3 eating too much, and was pulling her nails and skin. Respondent diagnosed Patient A with
4 ADHD – unspecified type, and separation disorder of childhood. His plan was to start the
5 following medications: melatonin,³ escitalopram⁴, buspirone,⁵ and guanfacine,⁶ with a note to
6 consider adding a stimulant at a follow up visit. Patient A was to return to the clinic in six weeks.

7 10. On or about January 16, 2021, Patient A saw Respondent in a follow up visit. Patient
8 A's mother reported that Patient A was more aggressive and had difficulty managing her temper.
9 According to the progress note for this visit, Patient A had not been taking any medications.
10 Respondent's diagnoses remained the same as the initial visit. His treatment plan included the
11 same recommended medications as the initial visit, with the buspirone dose being lowered by 5
12 milligrams (mg).

13 11. On or about March 25, 2021, Patient A's mother called Respondent's office and
14 reported that Patient A was out of control and causing overwhelming stress to the family. The
15 mother also reported that Child Protective Services had come to the family home and that Patient
16 A continued to behave aggressively, with frequent tantrums. In the progress note, it is noted that
17 Patient A's estranged father had paranoid schizophrenia. In the current medications section of the
18 progress note, it is inexplicably documented that Patient A was not currently taking medications
19 while also listing escitalopram. Respondent's diagnoses at this visit were for ADHD, separation
20 anxiety disorder, and "other schizophrenia." Respondent's treatment plan was to continue

21 ///

22 ///

23 ///

24 ² Methylphenidate, brand name Ritalin, is a stimulant and a Schedule IV controlled
25 substance pursuant to Health and Safety Code section 11047, subdivision (d).

26 ³ Melatonin is an over-the-counter supplement and hormone used to aid in sleep.

27 ⁴ Escitalopram, brand name Lexapro, is a selective serotonin reuptake inhibitor (SSRI)
28 anti-depressant used to treat depression and Generalized Anxiety Disorder.

⁵ Buspirone, brand name BuSpar, is an anxiolytic used to treat anxiety.

⁶ Guanfacine, brand name Intuniv ER, is a blood pressure medication which may be used
to treat ADHD.

1 escitalopram and buspirone, discontinue guanfacine, and add dexamethylphenidate,⁷ hydroxyzine,⁸
2 and risperidone.⁹

3 12. On or about April 5, 2021, Patient A's mother appeared by herself to speak with
4 Respondent. Despite the documentation that Patient A's mother appeared alone for this
5 appointment, Patient A's vital signs, including height, weight, blood pressure, and pulse are
6 documented for this April 5, 2021, visit. Patient A's current medications were documented as
7 both "not currently taking medications" and buspirone, dexamethylphenidate, hydroxyzine,
8 escitalopram, and risperidone. Patient A's mother reported that her daughter continued to
9 struggle with panic attacks and separation anxiety. Respondent's assessment remained
10 unchanged. His treatment plan was to continue Patient A's medication regimen, with the
11 exception of dexamethylphenidate, which was discontinued.

12 13. On or about April 19, 2021, Patient A saw Respondent in a follow up visit. Patient
13 A's mother had called on or about April 15, 2021, and stated that her daughter had been hearing
14 voices during school, and those voices were telling her to cut her fingers off. Patient A's current
15 medications were documented as both "not currently taking medications" and busiprone,
16 hydroxyzine, escitalopram, and risperidone. The physical exam section of this progress note was
17 the same documentation as the previous four progress notes, including the notation that there
18 were "no threats to harm." Respondent's assessment remained unchanged. His treatment plan
19 was to continue hydroxyzine, escitalopram, risperidone, and buspirone.

20 14. On or about May 17, 2021, Patient A saw Respondent in a follow up visit. According
21 to the progress note for this visit, Patient A had no concerns and Patient A was doing well with
22 "home hospitalization." Respondent's assessment remained unchanged. For the treatment plan,
23 however, Respondent added mirtazapine¹⁰ and increased Patient A's risperidone dosage.
24 Respondent did not document why he changed Patient A's medication regimen.

25 _____
26 ⁷ Dexamethylphenidate, brand name Focalin, is a central nervous system stimulant used to
treat ADHD.

27 ⁸ Hydroxyzine is an antihistamine used to treat anxiety.

28 ⁹ Risperidone, brand name Risperdal, is an atypical antipsychotic drug used to treat
schizophrenia and bipolar disorder.

¹⁰ Mirtazapine, brand name Remeron, is an anti-depressant.

1 Patient B

2 15. On or about June 12, 2018, Patient B, a forty-nine-year-old woman, saw Respondent
3 for an initial evaluation. Prior to this date, Patient B had a history of Post-Traumatic Stress
4 Disorder (PTSD), depression, anxiety, and schizophrenia. Respondent assessed Patient B with
5 PTSD and major depressive disorder. According to his progress note for this date, Respondent's
6 treatment plan included the following medications: venlafaxine,¹¹ prazosin,¹² paliperidone,¹³
7 zolpidem tartrate,¹⁴ and gabapentin.¹⁵

8 16. On or about July 9, 2018, Patient B's caregiver, A.C., submitted a handwritten note to
9 Respondent's office. A.C. requested that Respondent provide Patient B with a prescription for
10 alprazolam,¹⁶ which Patient B had taken previously.

11 17. On or about July 24, 2018, Respondent saw Patient B in a follow up visit.
12 Respondent noted that Patient B had an increased appetite and a decreased number of panic
13 attacks. Respondent added alprazolam to Patient B's medication regimen and lowered her
14 venlafaxine dose. Respondent continued to prescribe alprazolam and zolpidem tartrate to Patient
15 B through February 2021 without conducting proper monitoring and assessment.

16 18. Patient B's medical records indicated that a CURES¹⁷ report was generated on or
17 about September 18, 2018, in the name of I.O., M.D. According to that CURES report, at the
18 time Respondent was treating Patient B, Patient B was filling prescriptions for hydrocodone
19 bitartrate acetaminophen¹⁸ from another treatment provider. There are no other indications in the
20 medical records that Respondent reviewed Patient B's CURES report.

21 ¹¹ Venlafaxine, brand name Effexor, is an anti-depressant and nerve pain medication.

22 ¹² Prazosin, brand name Minipress, is an antihypertensive drug.

23 ¹³ Paliperidone, brand name Invega, is an antipsychotic drug used to treat schizophrenia
and schizoaffective disorder.

24 ¹⁴ Zolpidem tartrate, brand name Ambien, is a sedative and a Schedule IV controlled
substance pursuant to Health and Safety Code section 11057, subdivision (d).

25 ¹⁵ Gabapentin, brand name Neurontin, is an anticonvulsant and nerve pain medication.

26 ¹⁶ Alprazolam, brand name Xanax, is a benzodiazepine used to treat anxiety. Alprazolam
is a Schedule IV controlled substance pursuant to Health and Safety Code section 11057,
subdivision (d).

27 ¹⁷ The Controlled Substance Utilization Review and Evaluation System (CURES) is a
database of Schedule II, III, IV, and V controlled substance prescriptions dispensed in California
serving the public health, regulatory oversight agencies, and law enforcement.

28 ¹⁸ Hydrocodone bitartrate acetaminophen's brand name is Norco. Hydrocodone is an

1 19. On or about September 23, 2019, Patient B submitted a list of her current medications
2 to Respondent's office. These medications included, but were not limited to, the following:
3 hydrocodone bitartrate acetaminophen, zolpidem tartrate, duloxetine,¹⁹ venlafaxine, gabapentin,
4 alprazolam, and cyproheptadine.²⁰

5 20. On or about October 3, 2019, another treatment provider for Patient B sent a letter to
6 Respondent's office and requested documentation justifying Patient B's continued
7 benzodiazepine treatment, given the dangerousness of prescribing opiates and benzodiazepines
8 concurrently. The records indicate that a note was given to Patient B for this request, although a
9 copy was not saved in Patient B's chart.

10 21. For progress notes documenting appointments on or about September 28, 2020,
11 November 25, 2020, and January 14, 2021, Respondent documented that Patient B's medication
12 regimen included guanfacine to be taken at a dosage of 600 mg, three times daily. It appears that
13 Respondent erroneously documented that Patient B was being prescribed guanfacine rather than
14 gabapentin.

15 **FIRST CAUSE FOR DISCIPLINE**
16 **(Gross Negligence)**

17 22. Respondent has subjected his Physician's and Surgeon's Certificate No. G 56023 to
18 disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (b), of
19 the Code, in that he committed gross negligence in the care and treatment of Patient A, as more
20 particularly alleged as follows:

21 23. Paragraphs 9 through 14, above, are hereby incorporated by reference and re-alleged
22 as if fully set forth herein.

23 24. Respondent committed gross negligence in the care and treatment of Patient A which
24 includes, but is not limited to, prematurely and/or inaccurately diagnosing Patient A, a seven-

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27 opiate and a Schedule II controlled substance pursuant to Health and Safety Code section 11055,
subdivision (b).

28 ¹⁹ Duloxetine, brand name Cymbalta, is an anti-depressant and nerve pain medication.

²⁰ Cyproheptadine, brand name Periactin, is an antihistamine drug.

1 year-old child, with schizophrenia and excessively prescribing multiple psychotropic medications
2 to Patient A.

3 **SECOND CAUSE FOR DISCIPLINE**
4 **(Repeated Negligent Acts)**

5 25. Respondent has further subjected his Physician's and Surgeon's Certificate
6 No. G 56023 to disciplinary action under sections 2227 and 2234, as defined by section 2234,
7 subdivision (c), of the Code, in that he committed repeated negligent acts in the care and
8 treatment of Patient A and Patient B, as more particularly alleged as follows:

9 **Patient A**

10 26. Paragraphs 9 through 14 and 24, above, are hereby incorporated by reference and re-
11 alleged as if fully set forth herein.

12 **Patient B**

13 27. Paragraphs 15 through 21, above, are hereby incorporated by reference and re-alleged
14 as if fully set forth herein.

15 28. Respondent committed negligence in the care and treatment of Patient B, which
16 includes, but is not limited to, failing to properly monitor Patient B's treatment with controlled
17 substances.

18 **THIRD CAUSE FOR DISCIPLINE**
19 **(Failure to Maintain Adequate and Accurate Records)**

20 29. Respondent has further subjected his Physician's and Surgeon's Certificate
21 No. G 56023 to disciplinary action under sections 2227 and 2234, as defined by section 2266, of
22 the Code, in that he failed to maintain adequate and accurate records for Patients A and B, as
23 more particularly alleged in paragraphs 9 through 28, above, which are hereby incorporated by
24 reference and re-alleged as if fully set forth herein.

25 **DISCIPLINARY CONSIDERATIONS**

26 30. To determine the degree of discipline, if any, to be imposed on Respondent,
27 Complainant alleges that on or about September 15, 2023, in a prior disciplinary action titled, "In
28 the Matter of the Accusation Against: Aubrey Ancil King, M.D.," in Board Case No. 800-2019-


1 062209, Respondent's license was revoked, with said revocation stayed, and four years of
2 probation imposed with various terms and conditions of probation. That decision is now final and
3 is incorporated by reference as if fully set forth herein.

4 **PRAYER**

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

- 7 1. Revoking or suspending Physician's and Surgeon's Certificate No. G 56023, issued
8 to Respondent Aubrey Ancil King, M.D.;
- 9 2. Revoking, suspending or denying approval of Respondent Aubrey Ancil King,
10 M.D.'s authority to supervise physician assistants and advanced practice nurses;
- 11 3. Ordering Respondent Aubrey Ancil King, M.D., to pay the Board the costs of the
12 investigation and enforcement of this case, and if placed on probation, the costs of probation
13 monitoring; and
- 14 4. Taking such other and further action as deemed necessary and proper.

15
16 DATED: JUN 20 2024

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16 _____
17 REJI VARGHESE
18 Executive Director
19 Medical Board of California
20 Department of Consumer Affairs
21 State of California
22 Complainant

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