

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

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

Narender Nath Bhatia, M.D.

**Physician's and Surgeon's
Certificate No. A 33956**

Respondent.

Case No.: 800-2022-085065

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 October 4, 2024.

IT IS SO ORDERED: September 5, 2024.

MEDICAL BOARD OF CALIFORNIA

Michelle A. Bholat, MD

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

1 ROB BONTA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 MARSHA E. BARR-FERNANDEZ
Deputy Attorney General
4 State Bar No. 200896
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5 Los Angeles, CA 90013
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Attorneys for Complainant
7

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

12 In the Matter of the Accusation Against:

13 **NARENDER NATH BHATIA, M.D.**
201 Covina Ave., Suite 10
14 Long Beach, CA 90803-1843

15 **Physician's and Surgeon's Certificate**
No. A 33956,
16

17 Respondent.

Case No. 800-2022-085065

OAH No. 2023110072

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

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

20 **PARTIES**

21 1. Reji Varghese (Complainant) is the Executive Director of the Medical Board of
22 California (Board). He brought this action solely in his official capacity and is represented in this
23 matter by Rob Bonta, Attorney General of the State of California, by Marsha E. Barr-Fernandez,
24 Deputy Attorney General.

25 2. Respondent Narender Nath Bhatia, M.D. (Respondent) is represented in this
26 proceeding by attorney Derek F. O'Reilly-Jones, whose address is: Bonne Bridges Mueller
27 O'Keefe & Nicholas, 355 South Grand Avenue, Suite 1750, Los Angeles, CA 90071-1562.

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1 3. On or about June 18, 1979, the Board issued Physician's and Surgeon's Certificate
2 No. A 33956 to Narender Nath Bhatia, M.D. (Respondent). The Physician's and Surgeon's
3 Certificate was in full force and effect at all times relevant to the charges brought in Accusation
4 No. 800-2022-085065, and will expire on February 28, 2025, unless renewed.

5 **JURISDICTION**

6 4. Accusation No. 800-2022-085065 was filed before the Board, and is currently
7 pending against Respondent. The Accusation and all other statutorily required documents were
8 properly served on Respondent on September 19, 2023. Respondent filed his Notice of
9 Defense contesting the Accusation.

10 5. A copy of Accusation No. 800-2022-085065 is attached as Exhibit A and
11 incorporated herein by reference.

12 **ADVISEMENT AND WAIVERS**

13 6. Respondent has carefully read, fully discussed with counsel, and understands the
14 charges and allegations in Accusation No. 800-2022-085065. Respondent has also carefully read,
15 fully discussed with his counsel, and understands the effects of this Stipulated Settlement and
16 Disciplinary Order.

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

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

25 **CULPABILITY**

26 9. Respondent understands and agrees that the charges and allegations in Accusation
27 No. 800-2022-085065, if proven at a hearing, constitute cause for imposing discipline upon his
28 Physician's and Surgeon's Certificate.

10. Respondent agrees that, at a hearing, Complainant could establish a prima facie case or factual basis for the charges in the Accusation, and that Respondent hereby gives up his right to contest those charges.

11. Respondent does not contest that, at an administrative hearing, Complainant could establish a prima facie case with respect to the charges and allegations in Accusation No. 800-2022-085065, a true and correct copy of which is attached hereto as Exhibit A, and that he has thereby subjected his Physician's and Surgeon's Certificate, No. A 33956 to disciplinary action.

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

CONTINGENCY

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

14. 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.

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15. Respondent agrees that if he ever petitions for early termination or modification of probation, or if an accusation and/or petition to revoke probation is filed against him before the Board, all of the charges and allegations contained in Accusation No. 800-2022-085065 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.

16. 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.

17. 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 33956 issued to Respondent Narender Nath Bhatia, 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 sixty (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 forty (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 sixty-five (65) hours of CME of which forty (40) hours were in satisfaction of this condition.

2. MEDICAL RECORD KEEPING COURSE. Within sixty (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

1 provider with any information and documents that the approved course provider may deem
2 pertinent. Respondent shall participate in and successfully complete the classroom component of
3 the course not later than six (6) months after Respondent's initial enrollment. Respondent shall
4 successfully complete any other component of the course within one (1) year of enrollment. The
5 medical record keeping course shall be at Respondent's expense and shall be in addition to the
6 Continuing Medical Education (CME) requirements for renewal of licensure.

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

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

15 3. PROHIBITED PRACTICE. During probation, Respondent is prohibited from
16 performing any pregnancy termination procedures at greater than thirteen (13) weeks' gestation,
17 by any method, including but not limited to, via labor induction, medication abortion, and/or
18 intact or non-intact dilatation and evacuation or extraction. After the effective date of this
19 Decision, all patients being treated by the Respondent shall be notified that the Respondent is
20 prohibited from performing any pregnancy termination procedures at greater than thirteen (13)
21 weeks' gestation, including but not limited to, via labor induction, medication abortion, and/or
22 intact or non-intact dilatation and evacuation or extraction. Any new patients must be provided
23 this notification at the time of their initial appointment.

24 Within sixty (60) calendar days of the effective date of this decision, Respondent is to
25 provide to the Board proof of relinquishment of his privileges to perform pregnancy termination
26 procedures at greater than thirteen (13) weeks' gestation at any hospital and/or clinic where he
27 holds such privileges.

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Respondent shall maintain a log of all patients to whom the required oral notification was made. The log shall contain the: 1) patient's name, address and phone number; 2) patient's medical record number, if available; 3) the full name of the person making the notification; 4) the date the notification was made; and 5) a description of the notification given. Respondent shall keep this log in a separate file or ledger, in chronological order, shall make the log available for immediate inspection and copying on the premises at all times during business hours by the Board or its designee, and shall retain the log for the entire term of probation.

4. 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.

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, in the amount of \$14,603.40 (fourteen thousand six hundred three dollars and forty 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 thirty (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.

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

3 7. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations
4 under penalty of perjury on forms provided by the Board, stating whether there has been
5 compliance with all the conditions of probation.

6 Respondent shall submit quarterly declarations not later than ten (10) calendar days after
7 the end of the preceding quarter.

8 8. GENERAL PROBATION REQUIREMENTS.

9 Compliance with Probation Unit

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

11 Address Changes

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

17 Place of Practice

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

21 License Renewal

22 Respondent shall maintain a current and renewed California physician's and surgeon's
23 license.

24 Travel or Residence Outside California

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

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1 In the event Respondent should leave the State of California to reside or to practice
2 Respondent shall notify the Board or its designee in writing thirty (30) calendar days prior to the
3 dates of departure and return.

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

7 10. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
8 its designee in writing within fifteen (15) calendar days of any periods of non-practice lasting
9 more than thirty (30) calendar days and within fifteen (15) calendar days of Respondent's return
10 to practice. Non-practice is defined as any period of time Respondent is not practicing medicine
11 as defined in Business and Professions Code sections 2051 and 2052 for at least forty (40) hours
12 in a calendar month in direct patient care, clinical activity or teaching, or other activity as
13 approved by the Board. If Respondent resides in California and is considered to be in non-
14 practice, Respondent shall comply with all terms and conditions of probation. All time spent in
15 an intensive training program which has been approved by the Board or its designee shall not be
16 considered non-practice and does not relieve Respondent from complying with all the terms and
17 conditions of probation. Practicing medicine in another state of the United States or Federal
18 jurisdiction while on probation with the medical licensing authority of that state or jurisdiction
19 shall not be considered non-practice. A Board-ordered suspension of practice shall not be
20 considered as a period of non-practice.

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

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

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

2 Periods of non-practice for a Respondent residing outside of California will relieve
3 Respondent of the responsibility to comply with the probationary terms and conditions with the
4 exception of this condition and the following terms and conditions of probation: Obey All Laws;
5 General Probation Requirements; and Quarterly Declarations.

6 11. COMPLETION OF PROBATION. Respondent shall comply with all financial
7 obligations (e.g., restitution, probation costs) not later than one hundred twenty (120) calendar
8 days prior to the completion of probation. This term does not include cost recovery, which is due
9 within thirty (30) calendar days of the effective date of the Order, or by a payment plan approved
10 by the Medical Board and timely satisfied. Upon successful completion of probation,
11 Respondent's certificate shall be fully restored.

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

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


1 14. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
2 with probation monitoring each and every year of probation, as designated by the Board, which
3 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
4 California and delivered to the Board or its designee no later than January 31 of each calendar
5 year.

6 15. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for
7 a new license or certification, or petition for reinstatement of a license, by any other health care
8 licensing action agency in the State of California, all of the charges and allegations contained in
9 Accusation No. 800-2022-085065 shall be deemed to be true, correct, and admitted by
10 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or
11 restrict license.

12 ACCEPTANCE

13 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
14 discussed it with my attorney, Derek F. O'Reilly-Jones. I understand the stipulation and the effect
15 it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement
16 and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the
17 Decision and Order of the Medical Board of California.

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19 DATED: 7.7.2024


NARENDER NATH BHATIA, M.D.
Respondent

21 I have read and fully discussed with Respondent Narender Nath Bhatia, M.D. the terms and
22 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
23 I approve its form and content.

24 DATED: 07.05.2024


DEREK F. O'REILLY-JONES
Attorney 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: July 5, 2024

Respectfully submitted,

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


MARSHA E. BARR-FERNANDEZ
Deputy Attorney General
Attorneys for Complainant

LA2023602852

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

12 In the Matter of the Accusation Against:

Case No. 800-2022-085065

13 **Narender Nath Bhatia, M.D.**
14 **3650 Atlantic Ave**
15 **Long Beach, CA 90807-3418**

A C C U S A T I O N

16 **Physician's and Surgeon's Certificate**
17 **No. A 33956,**

Respondent.

18 **PARTIES**

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

22 2. On or about June 18, 1979, the Board issued Physician's and Surgeon's Certificate
23 Number A 33956 to Narender Nath Bhatia, M.D. (Respondent). The Physician's and Surgeon's
24 Certificate was in full force and effect at all times relevant to the charges brought herein and will
25 expire on February 28, 2025, unless renewed.

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JURISDICTION

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

4. Section 2004 of the Code states:

The board shall have the responsibility for the following:

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

(b) The administration and hearing of disciplinary actions.

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

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

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

(f) Approving undergraduate and graduate medical education programs.

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

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

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

5. Section 2220 of the Code states:

Except as otherwise provided by law, the board may take action against all persons guilty of violating this chapter. The board shall enforce and administer this article as to physician and surgeon certificate holders, including those who hold certificates that do not permit them to practice medicine, such as, but not limited to, retired, inactive, or disabled status certificate holders, and the board shall have all the powers granted in this chapter for these purposes including, but not limited to:

(a) Investigating complaints from the public, from other licensees, from health care facilities, or from the board that a physician and surgeon may be guilty of unprofessional conduct. The board shall investigate the circumstances underlying a report received pursuant to Section 805 or 805.01 within 30 days to determine if an interim suspension order or temporary restraining order should be issued. The board shall otherwise provide timely disposition of the reports received pursuant to Section 805 and Section 805.01.

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1 (b) Investigating the circumstances of practice of any physician and surgeon
2 where there have been any judgments, settlements, or arbitration awards requiring the
3 physician and surgeon or his or her professional liability insurer to pay an amount in
4 damages in excess of a cumulative total of thirty thousand dollars (\$30,000) with
5 respect to any claim that injury or damage was proximately caused by the physician's
6 and surgeon's error, negligence, or omission.

7 (c) Investigating the nature and causes of injuries from cases which shall be
8 reported of a high number of judgments, settlements, or arbitration awards against a
9 physician and surgeon.

6 6. Section 2227 of the Code states:

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

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

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

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

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

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

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

28 7. 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.

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1 (b) Requiring the licensee to submit to a complete diagnostic examination by
2 one or more physicians and surgeons appointed by the board. If an examination is
3 ordered, the board shall receive and consider any other report of a complete
4 diagnostic examination given by one or more physicians and surgeons of the
5 licensee's choice.

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

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

11 STATUTORY PROVISIONS

12 8. Section 2021 of the Code states:

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

17 (b) Each licensee shall report to the board each and every change of address,
18 including an email address, within 30 days after each change, giving both the old and
19 new address. If an address reported to the board at the time of application for
20 licensure or subsequently is a post office box, the applicant shall also provide the
21 board with a street address. If another address is the licensee's address of record, he
22 or she may request that the second address not be disclosed to the public.

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

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

9. Section 2234 of the Code states:

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

(a) Violating or attempting to violate, directly or indirectly, assisting in or
abetting the violation of, or conspiring to violate any provision of this chapter.

(b) Gross negligence.

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

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

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

6 (d) Incompetence.

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

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

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

14 10. Section 2266 of the Code states:

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

17 COST RECOVERY

18 11. Section 125.3 of the Code states:

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

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

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

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

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

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

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

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

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

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

23 FACTUAL ALLEGATIONS

24 12. In or about January 2018, due to advanced maternal age, Patient A,¹ a then 35-year-
25 old pregnant female, underwent routine prenatal screening tests at the request of Dr. A.M., Patient
26 A's treating obstetrician. When the results of the tests became available, Dr. A.M. contacted
27 Patient A to tell her that the testing revealed that her fetus had trisomy 18, a lethal chromosomal
28 abnormality. Almost all trisomy 18 pregnancies end in miscarriage or stillbirth. The vast
majority of trisomy 18 infants who make it to term die within five to fifteen days.

13. Shortly after, Patient A presented to Dr. A.M.'s office where Dr. A.M. provided
additional information regarding trisomy 18, including that it was highly likely to result in either
stillbirth or in the early death of the infant. Dr. A.M. recommended Patient A undergo additional
testing to confirm the diagnosis of trisomy 18 before making any decisions regarding how to
proceed.

¹ The patient in this case will be referred to by letter to protect her privacy.

1 14. At the recommendation of Dr. A.M., Patient A presented to a high-risk pregnancy
2 clinic where diagnostic testing, including an ultrasound and chorionic villous sampling (CVS),²
3 was performed. In addition, a genetic counselor counseled Patient A regarding the diagnosis and
4 expected outcome. The additional testing confirmed the diagnosis of trisomy 18, including but
5 not limited to, developmental anomalies consistent with trisomy 18 as seen on ultrasound. Patient
6 A was told the chances of the fetus surviving the pregnancy and/or through delivery were slim,
7 and that even if the fetus survived through delivery, the infant would likely be very ill and would
8 not survive for very long. Patient A was told her options were to continue with the pregnancy for
9 as long as the fetus survived, or she could interrupt the pregnancy by undergoing a D&E (dilation
10 and evacuation).

11 15. On or about February 1, 2018, Patient A opted to undergo a D&E procedure. Dr.
12 A.M. did not have privileges to perform that procedure, resulting in Dr. A.M. referring Patient A
13 to Respondent to have it done. Patient A had never met nor spoken to Respondent, but she
14 understood Respondent was an obstetrician and gynecologist with privileges to perform a D&E at
15 MemorialCare Long Beach Medical Center (LBMC).

16 16. On or about February 2, 2018, Patient A was scheduled to undergo the D&E by
17 Respondent at LBMC on February 5, 2018.

18 17. On or about February 5, 2018 at approximately 9:10 a.m., Patient A presented to
19 LBMC to undergo the D&E. Patient A still had not met or spoken to Respondent as of the time
20 of arrival.

21 18. In the history and physical authored by Respondent, Respondent documented that
22 "the risks, benefits, alternatives, and possible complications have been discussed in detail with the
23 patient. Pre-admission, admission, and post admission procedures and expectations were
24 discussed in detail...I spent 30 minutes in direct contact and coordinating the care of this
25 patient..."

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27 ² Chorionic villus sampling (CVS) checks cells from the placenta (which are identical to
28 cells from the fetus) to see if they have a chromosomal abnormality. CVS is a diagnostic test
rather than a screening test.

1 19. During an interview, Patient A stated she met Respondent for the first time in the pre-
2 operative holding area. Patient A described having a single, brief exchange with Respondent,
3 which she estimated to have taken no more than five-to-ten minutes at most. The exchange
4 consisted of Respondent asking Patient A if she knew why she was at the hospital, and her
5 replying that she was there for a D&E. Patient A stated that Respondent did not discuss with her
6 the risks, benefits, alternatives, possible complications, or post-operative follow-up.

7 20. The procedure began at approximately 1:06 p.m. In the procedure note, Respondent
8 described dilating the cervix, sounding the uterus (measuring the uterine cavity), and making
9 multiple passes of a large curette (a surgical instrument designed for scraping or debriding
10 biological tissue or debris in a biopsy, excision, or cleaning procedure) "until no further tissue
11 was obtained." Respondent did not describe using forceps or an ultrasound at any point in the
12 procedure. Respondent also did not inventory the tissue removed to ensure completeness of
13 removal. As per protocol, the tissue went to pathology for examination. The procedure ended at
14 approximately 1:22 p.m. Patient A was discharged home at approximately 3:10 p.m., with a
15 prescription for oral doxycycline (an antibiotic) and ibuprofen (for pain).

16 21. The pathologist at LBMC, Dr. L.S., examined the evacuated tissue and authored a
17 report that became available at approximately 11:53 a.m. on February 6, 2018. The pathology
18 report described tissue consistent with an incomplete removal of products of conception.
19 Respondent did not review the pathology report until approximately May 16, 2018.

20 22. On or about February 7, 2018, Patient A called Respondent because she was starting
21 to not feel well (she was feeling achy, fatigued, and warm). When Patient A spoke to
22 Respondent's staff, she explained that she had undergone the D&E procedure earlier that week
23 and was not feeling well. Respondent's staff told Patient A to call the doctor who ordered the
24 D&E because Patient A was not Respondent's patient. Respondent's office did not document the
25 call.

26 23. On or about February 8, 2018, Patient A woke up in the middle of the night with
27 cramping and heavy vaginal bleeding, prompting her to go to the emergency room at UCI
28 Medical Center.

24. Patient A arrived at UCI Medical Center at approximately 4:30 a.m. on February 8, 2018, with a chief complaint of abdominal pain. A transvaginal pelvic ultrasound performed at UCI showed significant retained products of conception. The physicians determined that Patient A was suffering from a serious uterine infection due to the retained products of conception and had to undergo a second D&E that evening. An obstetrician affiliated with UCI Medical Center, Dr. R.P., performed the D&E under ultrasound guidance and successfully removed all of the retained tissue. Patient A was discharged home in stable condition on February 10, 2018.

FIRST CAUSE FOR DISCIPLINE

(Gross Negligence)

25. Respondent Narender Nath Bhatia, M.D. is subject to disciplinary action under section 2234, subdivision (b), of the Code in that Respondent was grossly negligent in his care and treatment of Patient A. The circumstances are as follows:

26. The facts and allegations set forth in paragraphs 12 through 24 are incorporated herein by reference as if fully set forth.

27. The standard of care when performing D&E is to perform the procedure safely and ensure the uterus is completely evacuated to avoid postoperative complications such as infection, sepsis, bleeding, and to minimize intraoperative complications such as uterine perforation. The use of cervical ripening agents, appropriate forceps, ultrasound guidance throughout the procedure, and the inventory and examination of all tissue removed before the patient leaves the procedure room are all part of the standard of care in performing D&Es.

28. Respondent's failure to use appropriate tools, including but not limited to, ultrasound guidance, during Patient A's procedure and failure to inventory the extracted tissue to ensure completeness of removal of the products of conception was an extreme departure from the standard of care.

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36. On or about February 28, 2023, a Board investigator mailed a certified letter to Respondent. On or about March 13, 2023, the certified letter was returned to the Board with a yellow sticker on the envelope stating, "Return to Sender; Not Deliverable as Addressed; Unable to Forward."

37. On or about March 14, 2023, the Board investigator emailed Respondent a copy of the certified letter that had been returned as undeliverable. In that email, the Board investigator asked Respondent to update his address of record with BreZE.

38. On or about May 4, 2023, the Board investigator checked Respondent's licensing information in BreEZe. Respondent had not updated his address of record with the Board.

39. On or about May 11, 2023, the Board investigator interviewed Respondent. During the interview, the Board investigator confirmed with Respondent that the address of record on file with the Board was not his current address of record. The Board investigator once again asked Respondent to update the address of record.

40. As of the filing of the instant Accusation, Respondent still has not updated his address of record with the Board despite numerous requests.

PRA YER

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 33956,
issued to Narender Nath Bhatia, M.D.;

2. Revoking, suspending or denying approval of Narender Nath Bhatia, M.D.'s authority to supervise physician assistants and advanced practice nurses;

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III

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1 3. Ordering Narender Nath Bhatia, M.D., to pay the Board the costs of the investigation
2 and enforcement of this case, and if placed on probation, the costs of probation monitoring; and

3 4. Taking such other and further action as deemed necessary and proper.
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5 DATED: SEP 19 2023

JENNA JONES For

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

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