

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

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

Juan Manuel Lopez Solorza, M.D.

**Physician's and Surgeon's
Certificate No. A 66634**

Case No.: 800-2022-087669

Respondent.

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 16, 2024 .

IT IS SO ORDERED: September 16, 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 STEVE DIEHL
Supervising Deputy Attorney General
3 MATTHEW FLEMING
Deputy Attorney General
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1300 I Street, Suite 125
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7 *Attorneys for Complainant*

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

12 In the Matter of the Accusation Against:

13 **JUAN MANUEL LOPEZ SOLORZA, M.D.**
14 **600 B Street, Bldg A**
Livingston, CA 95334-9593
15 **Physician's and Surgeon's Certificate No. A**
16 **66634**

17 Respondent.

Case No. 800-2022-087669

OAH No. 2024040529

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

18
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 Matthew Fleming, Deputy
26 Attorney General.

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2. Respondent Juan Manuel Lopez Solorza, M.D. (Respondent) is represented in this proceeding by attorney Lindsay M. Johnson, whose address is: 4100 Newport Place, Suite 670 Newport Beach, CA 92660-24632.1.

3. On or about October 2, 1998, the Board issued Physician's and Surgeon's Certificate No. A 66634 to Juan Manuel Lopez Solorza, M.D. (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. 800-2022-087669, and will expire on April 30, 2026, unless renewed.

JURISDICTION

4. Accusation No. 800-2022-087669 was filed before the Board, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on March 1, 2024. Respondent timely filed his Notice of Defense contesting the Accusation.

5 A copy of Accusation No. 800-2022-087669 is attached as exhibit A and incorporated
herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2022-087669. 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. 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 admits the truth of each and every charge and allegation in Accusation
3 No. 800-2022-087669.

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

7 **CONTINGENCY**

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

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

21 13. Respondent agrees that if he ever petitions for early termination or modification of
22 probation, or if an accusation and/or petition to revoke probation is filed against him before the
23 Board, all of the charges and allegations contained in Accusation No. 800-2022-087669 shall be
24 deemed true, correct and fully admitted by respondent for purposes of any such proceeding or any
25 other licensing proceeding involving Respondent in the State of California.

26 14. The parties understand and agree that Portable Document Format (PDF) and facsimile
27 copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile
28 signatures thereto, shall have the same force and effect as the originals.

1 15. In consideration of the foregoing admissions and stipulations, the parties agree that
2 the Board may, without further notice or opportunity to be heard by the Respondent, issue and
3 enter the following Disciplinary Order:

4 **DISCIPLINARY ORDER**

5 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 66634 issued
6 to Respondent, JUAN MANUEL LOPEZ SOLORZA, M.D. is revoked. However, the revocation
7 is stayed and Respondent is placed on probation for three (3) years on the following terms and
8 conditions:

9 1. EDUCATION COURSE. Within 60 calendar days of the effective date of this
10 Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee
11 for its prior approval educational program(s) or course(s) which shall not be less than 40 hours
12 per year, for each year of probation. The educational program(s) or course(s) shall be aimed at
13 correcting any areas of deficient practice or knowledge, and shall be Category I certified. For
14 example, and to the extent they are available, Respondent will engaged in educational programs
15 pertaining to appropriate exemptions from childhood vaccinations and use of the California
16 Department of Public Health's CAIR-ME website. The educational program(s) or course(s) shall
17 be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME)
18 requirements for renewal of licensure. Following the completion of each course, the Board or its
19 designee may administer an examination to test Respondent's knowledge of the course.
20 Respondent shall provide proof of attendance for 65 hours of CME of which 40 hours were in
21 satisfaction of this condition.

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

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

4. 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.

5. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby ordered to reimburse the Board its costs of investigation and enforcement, in the amount of \$28,031. Costs shall be payable to the Medical Board of California. Failure to pay such costs shall be considered a violation of probation.

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

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

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

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

7. GENERAL PROBATION REQUIREMENTS.

Compliance with Probation Unit

Respondent shall comply with the Board's probation unit.

Address Changes

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

Place of Practice

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

License Renewal

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

Travel or Residence Outside California

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

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

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

9. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or its designee in writing within 15 calendar days of any periods of non-practice lasting more than 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is defined as any period of time Respondent is not practicing medicine as defined in Business and Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct patient care, clinical activity or teaching, or other activity as approved by the Board. If

1 Respondent resides in California and is considered to be in non-practice, Respondent shall
2 comply with all terms and conditions of probation. All time spent in an intensive training
3 program which has been approved by the Board or its designee shall not be considered non-
4 practice and does not relieve Respondent from complying with all the terms and conditions of
5 probation. Practicing medicine in another state of the United States or Federal jurisdiction while
6 on probation with the medical licensing authority of that state or jurisdiction shall not be
7 considered non-practice. A Board-ordered suspension of practice shall not be considered as a
8 period of non-practice.

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

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

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

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

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

26 11. VIOLATION OF PROBATION. Failure to fully comply with any term or
27 condition of probation is a violation of probation. If Respondent violates probation in any
28 respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke

1 probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to
2 Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation,
3 the Board shall have continuing jurisdiction until the matter is final, and the period of probation
4 shall be extended until the matter is final.

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

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

20 14. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply
21 for a new license or certification, or petition for reinstatement of a license, by any other health
22 care licensing action agency in the State of California, all of the charges and allegations contained
23 in Accusation No. 800-2022-087669 shall be deemed to be true, correct, and admitted by
24 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or
25 restrict license.

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1 ACCEPTANCE

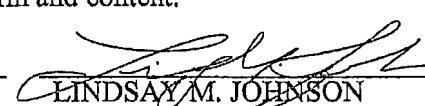
2 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
3 discussed it with my attorney, Lindsay M. Johnson. I understand the stipulation and the effect it
4 will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and
5 Disciplinary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

7
8 DATED: 7/18/2024


9 JUAN MANUEL LOPEZ SOLORZA, M.D.
Respondent

10 I have read and fully discussed with Respondent Juan Manuel Lopez Solorza, M.D. the
11 terms and conditions and other matters contained in the above Stipulated Settlement and
12 Disciplinary Order. I approve its form and content.

13 DATED: 07/19/2024


14 LINDSAY M. JOHNSON
Attorney for Respondent

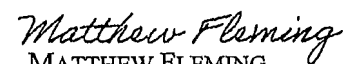
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16 ENDORSEMENT

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

19
20 DATED: June 28, 2024

Respectfully submitted,

21 ROB BONTA
Attorney General of California
22 STEVE DIEHL
Supervising Deputy Attorney General

23
24 
MATTHEW FLEMING
25 Deputy Attorney General
Attorneys for Complainant

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EXHIBIT A

Accusation Case No. 800-2022-087669

1 ROB BONTA
Attorney General of California
2 STEVE DIEHL
Supervising Deputy Attorney General
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Deputy Attorney General
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7 *Attorneys for Complainant*

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

12 In the Matter of the Accusation Against:

Case No. 800-2022-087669

13 **Juan Manuel Lopez Solorza, M.D.**
14 **600 B Street**
Livingston, CA 95334

A C C U S A T I O N

15 **Physician's and Surgeon's Certificate**
16 **No. A 66634,**

17 **Respondent.**

18
19 **PARTIES**

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

23 2. On or about October 2, 1998, the Medical Board issued Physician's and Surgeon's
24 Certificate Number A 66634 to Juan Manuel Lopez Solorza, M.D. (Respondent). The
25 Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the
26 charges brought herein and will expire on April 30, 2024, 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 2227 of the Code states:

(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.

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

STATUTORY PROVISIONS

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

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

9 (d) Incompetence.

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

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

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

17 6. Section 2266 of the Code states: The failure of a physician and surgeon to maintain
18 adequate and accurate records relating to the provision of services to their patients constitutes
19 unprofessional conduct.

20 7. Health and Safety Code section 120325 states:

21 In enacting this chapter, but excluding Section 120380, and in enacting
22 Sections 120400, 120405, 120410, and 120415, it is the intent of the Legislature to
23 provide:

24 (a) A means for the eventual achievement of total immunization of appropriate
25 age groups against the following childhood diseases:

- 26 (1) Diphtheria.
- 27 (2) Hepatitis B.
- 28 (3) Haemophilus influenzae type b.
- (4) Measles.
- (5) Mumps.
- (6) Pertussis (whooping cough).
- (7) Poliomyelitis.
- (8) Rubella.
- (9) Tetanus.
- (10) Varicella (chickenpox).

(11) Any other disease deemed appropriate by the department, taking into
consideration the recommendations of the Advisory Committee on Immunization
Practices of the United States Department of Health and Human Services, the
American Academy of Pediatrics, and the American Academy of Family Physicians.

1 (b) That the persons required to be immunized be allowed to obtain
2 immunizations from whatever medical source they so desire, subject only to the
3 condition that the immunization be performed in accordance with the regulations of
4 the department and that a record of the immunization is made in accordance with the
5 regulations.

6 (c) Exemptions from immunization for medical reasons.

7 (d) For the keeping of adequate records of immunization so that health
8 departments, schools, and other institutions, parents or guardians, and the persons
9 immunized will be able to ascertain that a child is fully or only partially immunized,
10 and so that appropriate public agencies will be able to ascertain the immunization
11 needs of groups of children in schools or other institutions.

12 (e) Incentives to public health authorities to design innovative and creative
13 programs that will promote and achieve full and timely immunization of children.

14 8. Health and Safety Code section 120370 provides, in pertinent part:

15 (a)(1) Prior to January 1, 2021, if the parent or guardian files with the
16 governing authority a written statement by a licensed physician and surgeon to the
17 effect that the physical condition of the child is such, or medical circumstances
18 relating to the child are such, that immunization is not considered safe, indicating the
19 specific nature and probable duration of the medical condition or circumstances,
20 including, but not limited to, family medical history, for which the physician and
21 surgeon does not recommend immunization, that child shall be exempt from the
22 requirements of this chapter, except for Section 120380, and exempt from Sections
23 120400, 120405, 120410, and 120415 to the extent indicated by the physician and
24 surgeon's statement.

25 (2) Commencing January 1, 2020, a child who has a medical exemption issued
26 before January 1, 2020, shall be allowed continued enrollment to any public or
27 private elementary or secondary school, child care center, day nursery, nursery
28 school, family day care home, or developmental center within the state until the
child enrolls in the next grade span.

For purposes of this subdivision, "grade span" means each of the following:

(A) Birth to preschool, inclusive.

(B) Kindergarten and grades 1 to 6, inclusive, including transitional
kindergarten.

(C) Grades 7 to 12, inclusive.

(3) Except as provided in this subdivision, on and after July 1, 2021, the
governing authority shall not unconditionally admit or readmit to any of those
institutions specified in this subdivision, or admit or advance any pupil to 7th grade

1 level, unless the pupil has been immunized pursuant to Section 120335 or the parent
2 or guardian files a medical exemption form that complies with Section 120372.

3 9. Health and Safety Code section 120372 states:

4 (a) (1) By January 1, 2021, the department shall develop and make available
5 for use by licensed physicians and surgeons an electronic, standardized, statewide
6 medical exemption certification form that shall be transmitted directly to the
7 department's California Immunization Registry (CAIR) established pursuant to
8 Section 120440. Pursuant to Section 120375, the form shall be printed, signed, and
9 submitted directly to the school or institution at which the child will attend,
10 submitted directly to the governing authority of the school or institution, or
11 submitted to that governing authority through the CAIR where applicable.
12 Notwithstanding Section 120370, commencing January 1, 2021, the standardized
13 form shall be the only documentation of a medical exemption that the governing
14 authority may accept.

15 (2) At a minimum, the form shall require all of the following information:

16 (A) The name, California medical license number, business address, and
17 telephone number of the physician and surgeon who issued the medical exemption,
18 and of the primary care physician of the child, if different from the physician and
19 surgeon who issued the medical exemption.

20 (B) The name of the child for whom the exemption is sought, the name and
21 address of the child's parent or guardian, and the name and address of the child's
22 school or other institution.

23 (C) A statement certifying that the physician and surgeon has conducted a
24 physical examination and evaluation of the child consistent with the relevant
25 standard of care and complied with all applicable requirements of this section.

26 (D) Whether the physician and surgeon who issued the medical exemption is
27 the child's primary care physician. If the issuing physician and surgeon is not the
28 child's primary care physician, the issuing physician and surgeon shall also provide
an explanation as to why the issuing physician and not the primary care physician is
filling out the medical exemption form.

(E) How long the physician and surgeon has been treating the child.

(F) A description of the medical basis for which the exemption for each
individual immunization is sought. Each specific immunization shall be listed
separately and space on the form shall be provided to allow for the inclusion of
descriptive information for each immunization for which the exemption is sought.

(G) Whether the medical exemption is permanent or temporary, including the
date upon which a temporary medical exemption will expire. A temporary

1 exemption shall not exceed one year. All medical exemptions shall not extend
2 beyond the grade span, as defined in Section 120370.

3 (H) An authorization for the department to contact the issuing physician and
4 surgeon for purposes of this section and for the release of records related to the
5 medical exemption to the department, the Medical Board of California, and the
6 Osteopathic Medical Board of California.

7 (I) A certification by the issuing physician and surgeon that the statements and
8 information contained in the form are true, accurate, and complete.

9 (3) An issuing physician and surgeon shall not charge for either of the
10 following:

11 (A) Filling out a medical exemption form pursuant to this section.

12 (B) A physical examination related to the renewal of a temporary medical
13 exemption.

14 (b) Commencing January 1, 2021, if a parent or guardian requests a licensed
15 physician and surgeon to submit a medical exemption for the parent's or guardian's
16 child, the physician and surgeon shall inform the parent or guardian of the
17 requirements of this section. If the parent or guardian consents, the physician and
18 surgeon shall examine the child and submit a completed medical exemption
19 certification form to the department. A medical exemption certification form may be
20 submitted to the department at any time.

21 (c) By January 1, 2021, the department shall create a standardized system to
22 monitor immunization levels in schools and institutions as specified in Sections
23 120375 and 120440, and to monitor patterns of unusually high exemption form
24 submissions by a particular physician and surgeon.

25 (d) (1) The department, at a minimum, shall annually review immunization
26 reports from all schools and institutions in order to identify medical exemption forms
27 submitted to the department and under this section that will be subject to paragraph
28 (2).

(2) A clinically trained immunization department staff member, who is either a
physician and surgeon or a registered nurse, shall review all medical exemptions
from any of the following:

(A) Schools or institutions subject to Section 120375 with an overall
immunization rate of less than 95 percent.

(B) Physicians and surgeons who have submitted five or more medical
exemptions in a calendar year beginning January 1, 2020.

1 (C) Schools or institutions subject to Section 120375 that do not provide
2 reports of vaccination rates to the department.

3 (3) (A) The department shall identify those medical exemption forms that do
4 not meet applicable CDC, ACIP, or AAP criteria for appropriate medical
5 exemptions. The department may contact the primary care physician and surgeon or
6 issuing physician and surgeon to request additional information to support the
7 medical exemption.

8 (B) Notwithstanding subparagraph (A), the department, based on the medical
9 discretion of the clinically trained immunization staff member, may accept a medical
10 exemption that is based on other contraindications or precautions, including
11 consideration of family medical history, if the issuing physician and surgeon
12 provides written documentation to support the medical exemption that is consistent
13 with the relevant standard of care.

14 (C) A medical exemption that the reviewing immunization department staff
15 member determines to be inappropriate or otherwise invalid under subparagraphs
16 (A) and (B) shall also be reviewed by the State Public Health Officer or a physician
17 and surgeon from the department's immunization program designated by the State
18 Public Health Officer. Pursuant to this review, the State Public Health Officer or
19 physician and surgeon designee may revoke the medical exemption.

20 (4) Medical exemptions issued prior to January 1, 2020, shall not be revoked
21 unless the exemption was issued by a physician or surgeon that has been subject to
22 disciplinary action by the Medical Board of California or the Osteopathic Medical
23 Board of California.

24 (5) The department shall notify the parent or guardian, issuing physician and
25 surgeon, the school or institution, and the local public health officer with jurisdiction
26 over the school or institution of a denial or revocation under this subdivision.

27 (6) If a medical exemption is revoked pursuant to this subdivision, the child
28 shall continue in attendance. However, within 30 calendar days of the revocation, the
child shall commence the immunization schedule required for conditional
admittance under Chapter 4 (commencing with Section 6000) of Division 1 of Title
17 of the California Code of Regulations in order to remain in attendance, unless an
appeal is filed pursuant to Section 120372.05 within that 30-day time period, in
which case the child shall continue in attendance and shall not be required to
otherwise comply with immunization requirements unless and until the revocation is
upheld on appeal.

(7) (A) If the department determines that a physician's and surgeon's practice
is contributing to a public health risk in one or more communities, the department
shall report the physician and surgeon to the Medical Board of California or the
Osteopathic Medical Board of California, as appropriate. The department shall not
accept a medical exemption form from the physician and surgeon until the physician
and surgeon demonstrates to the department that the public health risk no longer

exists, but in no event shall the physician and surgeon be barred from submitting these forms for less than two years.

(B) If there is a pending accusation against a physician and surgeon with the Medical Board of California or the Osteopathic Medical Board of California relating to immunization standards of care, the department shall not accept a medical exemption form from the physician and surgeon unless and until the accusation is resolved in favor of the physician and surgeon.

(C) If a physician and surgeon licensed with the Medical Board of California or the Osteopathic Medical Board of California is on probation for action relating to immunization standards of care, the department and governing authority shall not accept a medical exemption form from the physician and surgeon unless and until the probation has been terminated.

(8) The department shall notify the Medical Board of California or the Osteopathic Medical Board of California, as appropriate, of any physician and surgeon who has five or more medical exemption forms in a calendar year that are revoked pursuant to this subdivision.

(9) Notwithstanding any other provision of this section, a clinically trained immunization program staff member who is a physician and surgeon or a registered nurse may review any exemption in the CAIR or other state database as necessary to protect public health.

(e) The department, the Medical Board of California, and the Osteopathic Medical Board of California shall enter into a memorandum of understanding or similar agreement to ensure compliance with the requirements of this section.

(f) In administering this section, the department and the independent expert review panel created pursuant to Section 120372.05 shall comply with all applicable state and federal privacy and confidentiality laws. The department may disclose information submitted in the medical exemption form in accordance with Section 120440, and may disclose information submitted pursuant to this chapter to the independent expert review panel for the purpose of evaluating appeals.

(g) The department shall establish the process and guidelines for review of medical exemptions pursuant to this section. The department shall communicate the process to providers and post this information on the department's website.

(h) If the department or the California Health and Human Services Agency determines that contracts are required to implement or administer this section, the department may award these contracts on a single-source or sole-source basis. The contracts are not subject to Part 2 (commencing with Section 10100) of Division 2 of the Public Contract Code, Article 4 (commencing with Section 19130) of Chapter 5 of Part 2 of Division 5 of Title 2 of the Government Code, or Sections 4800 to 5180, inclusive, of the State Administrative Manual as they relate to approval of

1 information technology projects or approval of increases in the duration or costs of
2 information technology projects.

3 (i) Notwithstanding the rulemaking provisions of the Administrative Procedure
4 Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2
5 of the Government Code), the department may implement and administer this
6 section through provider bulletins, or similar instructions, without taking regulatory
7 action.

8 (j) For purposes of administering this section, the department and the
9 California Health and Human Services Agency appeals process shall be exempt from
10 the rulemaking and administrative adjudication provisions in the Administrative
11 Procedure Act (Chapter 3.5 (commencing with Section 11340), Chapter 4
12 (commencing with Section 11370), Chapter 4.5 (commencing with 11400), and
13 Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the
14 Government Code).

15 COST RECOVERY

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

22 FACTUAL ALLEGATIONS

23 11. California law generally requires immunizations for children attending schools and
24 licensed day care facilities. At a child's initial enrollment, and at certain milestones thereafter,
25 school or day care personnel must obtain confirmation that the child has received specified
26 immunizations or that there is a valid medical exemption from the vaccine requirement. The
27 mandatory immunization statutes list 10 diseases or disease-causing organisms against which a
28 child must receive immunization: diphtheria, Haemophilus influenzae type b, measles, mumps,
pertussis, poliomyelitis, rubella, tetanus, hepatitis B, and chickenpox.

12. In 2015, the California Legislature amended Health and Safety Code section 120325
to eliminate personal beliefs as a basis for exemption from required immunizations for school-
aged children. As a consequence, school-aged children not subject to any other exception were

1 required to have immunizations for 10 vaccine-preventable childhood illnesses as a condition of
2 public school attendance.

3 13. Medical exemptions for vaccinations fall into two categories referred to as
4 "precautions" and "contraindications." A precaution is a condition in a recipient that might
5 increase the risk for a serious adverse reaction, might cause diagnostic confusion, or might
6 compromise the ability of the vaccine to produce immunity. A "contraindication" increases the
7 risk for a serious adverse reaction. There are specific contraindications and precautions that apply
8 to individual vaccines. Some precautions are common to all vaccines, such as delaying
9 vaccination due to a moderate or severe illness in the child; such a precaution would be
10 temporary. The presence of a contraindication means that a vaccine should not be administered.

11 14. Immunization exemptions in California are provided by a licensed physician in a
12 written statement that includes 1) that the patient has a physical condition or medical
13 circumstance such that the required immunization is not indicated, 2) which vaccines are
14 exempted, 3) whether the exemption is permanent or temporary, and 4) the expiration date for the
15 exemption, if temporary.

16 15. As of January 1, 2021 all new medical exemptions for school and child care entry
17 must be issued through CAIR-ME, a website maintained by the California Department of Public
18 Health.¹ CAIR-ME is a secure site for physicians to issue and manage standardized medical
19 exemptions for children in school or child care. Parents use the same site to request medical
20 exemptions from vaccination for their children. Schools and child care facilities can monitor and
21 get updates for medical exemptions issued for children in attendance.

22 16. Patients A, B, C, D, and E² are all minors and related by birth to one another. During
23 the time period pertinent to this Accusation, Patients A, B, C, D, and E were under the medical
24 care of Respondent.

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27 ¹ <https://cair.cdph.ca.gov/exemptions/home>

28 ² Patient names are omitted here to protect their privacy.

1 Patient A

2 17. Patient A is a female minor child, born in 2006, and related by birth to the other
3 patients in this Accusation. Patient A has a diagnosis for cerebral palsy. Patient A was seen by
4 Respondent in 2021 and 2022 for well child care and cerebral palsy.

5 18. On or about October 1, 2021, Respondent saw Patient A for examination. Respondent
6 noted that Patient A's cerebral palsy was "thought to be from 1st set of shots" and that "Pt mother
7 continues to be anti-vax." That same day, Respondent filled out a medical exemption form for
8 Patient A for Polio, DTaP, MMR, HIB, Hepatitis B, Varicella, and Tdap. Respondent listed the
9 exemption permanent for all vaccines. Comments on the medical exemption form state "at 2
10 months had first set of shots. Features concerning at 2 months after shots consistent with acquired
11 cerebral palsy/neurologic delay. Mom has not given any shots throughout." The exemption was
12 not made using the CAIR-ME website.

13 19. On or about December 9, 2021, Respondent issued a permanent medical exemption
14 from the Tdap vaccine for Patient A using the CAIR-ME website. Respondent cited
15 encephalopathy as the medical basis for the exemption.

16 20. On or about February 28, 2022, Respondent wrote a letter to the administrators of
17 Patient A's school explaining that she has "static encephalopathy due to possible immunizations."
18 Respondent explained in the letter that Patient A's mother has decided not to vaccinate any of the
19 children and that Respondent supports the mother in that decision.

20 21. On or about March 15, 2022, Respondent conducted an appointment with Patient A
21 for a "medical except [sic] form." The appointment was conducted via telephone and without
22 video.

23 22. On or about April 7, 2022, Respondent issued a second permanent medical exemption
24 from Tdap for Patient A using the CAIR-ME website. Respondent again cited encephalopathy as
25 the medical basis for the exemption.

26 23. Cerebral palsy and static encephalopathy are not contraindications to receiving a
27 Tdap vaccine. During a recorded interview, Respondent indicated he was aware that cerebral
28 palsy is not a contraindication to the Tdap vaccine.

1 24. At the time Respondent issued the both the first and second exemption for Patient A
2 using the CAIR-ME website, he attested that he had “conducted a physical examination of the
3 child consistent with the relevant standard of care.”

4 25. Respondent’s explanation and rationale for requesting a permanent exemption for
5 Patient A was not consistent with, and was in direct opposition to, the recommendations of
6 guiding authority such as the Centers for Disease Control and Prevention (CDC), American
7 Academy of Pediatrics (AAP), and the Advisory Committee on Immunization Practices (ACIP).

8 Patient B

9 26. Patient B is a male minor child, born in 2007, and related by birth to the other
10 patients in this Accusation.

11 27. Respondent conducted a telehealth visit with Patient B on or about March 29, 2022.
12 The purpose of the visit was a request for medical exemption for vaccines. On or about April 7,
13 2022, Respondent issued a permanent medical exemption for Patient B from DTaP, HepB, Hib,
14 IPV, MMR, Tdap, and VAR/VZV, using the CAIR-ME website. Respondent listed the medical
15 basis for the exemption as “Other: sibling w/ CP and autism diagnosis.” During a recorded
16 interview, Respondent indicated that he did not believe Patient B’s exemption was medically
17 justified. At the time Respondent issued the exemption, he attested that he had “conducted a
18 physical examination of the child consistent with the relevant standard of care.”

19 Patient C

20 28. Patient C is a male minor child born in 2009, and related by birth to the other patients
21 in this Accusation. Respondent saw Patient C for a well child examination and vaccine counseling
22 on or about February 17, 2022, and March 18, 2022, respectively. The assessment and plan notes
23 for the March 18 visit indicate “do the CHDP CAIR-exempt [sic]” and “Unclear if will be CHDP
24 covered. Will try. Told may not be my choose [sic].”

25 29. On or about April 7, 2022, Respondent issued a permanent vaccine exemption for
26 Patient C from DTaP, HepB, Hib, IPV, MMR, Tdap, and VAR/VZV, using the CAIR-ME
27 website. Respondent listed the medical basis for the exemption as “Other: sibling w/ CP and
28 autism after 6 months shots give [sic].” At the time Respondent issued the exemption, he attested

1 that he had "conducted a physical examination of the child consistent with the relevant standard
2 of care."

3 Patient D

4 30. Patient D is a male minor child, born in 2012, and related by birth to the other
5 patients in this Accusation. Patient D was under the medical care of Respondent in 2022 for a
6 well child examination and a request for medical exemption from vaccinations.

7 31. On or about April 7, 2022, Respondent issued a medical exemption for Patient D
8 from DTaP, HepB, Hib, IPV, MMR, Tdap, and VAR/VZV using the CAIR-ME website.
9 Respondent listed the medical basis for exemption as "Other: Sibling w/CP and Autism after 6
10 month [sic] of getting shots." At the time Respondent issued the exemption, he attested that he
11 had "conducted a physical examination of the child consistent with the relevant standard of care."

12 Patient E

13 32. Patient E is a female minor child born in 2015 and related by birth to the other
14 patients in this accusation. Patient E was under the medical care of Respondent in 2021 and 2022
15 for various issues, including concerns about vaccinations.

16 33. On or about March 15, 2022, Respondent issued a permanent medical exemption for
17 Patient E from DTaP, HepB, Hib, IPV, MMR, Tdap, and VAR/VZV using the CAIR-ME
18 website. Respondent's medical records for Patient E do not include a copy of the exemption.
19 During a recorded interview, Respondent indicated that he did not believe Patient E's exemption
20 was medically justified.

21 34. Respondent's explanation of family history and described history of an unverified
22 vaccine reaction in the patients' sister was an inadequate and improper rationale for providing
23 Patients B, C, D, and E with a permanent exemption from all vaccinations, current and future.
24 Respondent's medical exemptions were based on a medical history that reveals no
25 contraindication or precaution with regards to vaccination. The exemptions were not consistent
26 with, and were in direct opposition to, the recommendations of guiding authority such as the
27 CDC, the AAP, and the ACIP.

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1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Repeated Negligent Acts)**

3 35. Respondent Juan Manuel Lopez Solorza, M.D.'s license is subject to disciplinary
4 action under section 2234, subdivision (c), of the Code, in that Respondent committed repeated
5 negligent acts in his care and treatment of Patient A, Patient B, Patient C, Patient D, and Patient
6 E, as more particularly alleged in paragraphs 17 through 34, above, which are hereby realleged
7 and incorporated by reference as if fully set forth herein. Specifically, Respondent acted
8 negligently in utilizing the CAIR-ME website to seek permanent medical exemptions from
9 vaccination for Patients A, B, C, D, and E, for unsupported reasons with the understanding that
10 the exemptions were not medically justified.

11 **SECOND CAUSE FOR DISCIPLINE**

12 **(Incompetence)**

13 36. Respondent Juan Manuel Lopez Solorza, M.D.'s license is subject to disciplinary
14 action under section 2234, subdivision (d), of the Code, in that Respondent demonstrated
15 incompetence in his care and treatment of Patient A, Patient B, Patient C, Patient D, and Patient
16 E, which includes, but is not limited to, granting permanent vaccine exemptions without a clinical
17 basis or justification, as more particularly alleged in paragraphs 17 through 34 above, which are
18 hereby realleged and incorporated by reference as if fully set forth herein. Additional
19 circumstances are as follows:

20 37. The standard of care for primary care providers and specialists in California is to
21 follow national standards for pediatric vaccination practices and immunization recommendations
22 from the CDC issued through the Advisory Committee on Immunization Practices in concert with
23 certain other professional medical organizations. Parental concern and anti-vaccine convictions
24 are insufficient to provide an adequate medical basis for issuing a vaccine exemption.

25 38. Respondent demonstrated a lack of knowledge of the appropriateness of utilizing
26 CAIR-ME for providing a medical exemption for Tdap vaccine for unsupported reasons and with
27 the understanding that cerebral palsy is not a contraindication for this vaccine with respect to
28 Patient A.

1 39. Respondent demonstrated a lack of knowledge of the appropriateness of utilizing
2 CAIR-ME for providing a medical exemption for unsupported reasons for Patients B, C, D, and
3 E.

4 **THIRD CAUSE FOR DISCIPLINE**

5 **(Failure to Maintain Adequate and Accurate Records)**

6 40. Respondent Juan Manuel Lopez Solorza, M.D.'s license is subject to disciplinary
7 action under section 2266 of the Code, in that Respondent failed to maintain adequate and
8 accurate medical records relating to the care and treatment of Patients A, B, C, D, and E, as more
9 particularly alleged in paragraphs 17 through 34 above, which are hereby realleged and
10 incorporated by reference as if fully set forth herein.

11 41. In addition to other deficiencies, Respondent specifically failed to adequately
12 maintain a copy of Patient E's medical exemption in her medical record.

13 **FOURTH CAUSE FOR DISCIPLINE**

14 **(Dishonesty or Corruption)**

15 42. Respondent, Juan Manuel Lopez Solorza, M.D., is subject to disciplinary action under
16 section 2234, subdivision (e), of the Code, in that he engaged in an act involving dishonesty or
17 corruption when he attested that he had performed a physical examination of Patients A, B, C,
18 and D consistent with the standard of care. At the time of his attestation, Respondent was aware
19 that cerebral palsy in a patient or in a sibling of a patient was not a contraindication so as to
20 justify a medical exemption to vaccination.

21 **PRAYER**

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

24 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 66634,
25 issued to Respondent, Juan Manuel Lopez Solorza, M.D.;


26 2. Revoking, suspending or denying approval of Respondent Juan Manuel Lopez
27 Solorza, M.D.'s authority to supervise physician assistants and advanced practice nurses;

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1 3. Ordering Respondent Juan Manuel Lopez Solorza, M.D., to pay the Board the costs
2 of the investigation and enforcement of this case, and if placed on probation, the costs of
3 probation monitoring; and

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

5
6 DATED: **MAR 01 2024**



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

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