

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

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

Francisco Reyna Mendoza, M.D.,

**Physician's and Surgeon's
Certificate No. G 63191**

Respondent.

Case No.: 800-2022-089635

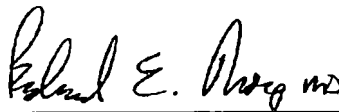
DECISION

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 November 15, 2024.

IT IS SO ORDERED: October 18, 2024.

MEDICAL BOARD OF CALIFORNIA



**Richard E. Thorp, Chair
Panel B**

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
300 South Spring Street, Suite 1702
5 Los Angeles, CA 90013
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Attorneys for Complainant
7

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

11 In the Matter of the Accusation Against:

Case No. 800-2022-089635

12 **FRANCISCO REYNA MENDOZA, M.D.**
13 **124 W. Fesler Street**
Santa Maria, CA 93458-4002

OAH No. 2024070827

14 **Physician's and Surgeon's Certificate**
15 **No. G 63191,**

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

16 Respondent.

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

19 **PARTIES**

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

24 2. Respondent Francisco Reyna Mendoza, M.D. (Respondent) is represented in this
25 proceeding by attorney Scott J. Harris, whose address is: 280 S. Beverly Drive, Suite 209,
26 Beverly Hills, CA 90212.

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3. On or about June 27, 1988, the Board issued Physician's and Surgeon's Certificate No. G 63191 to Francisco Reyna Mendoza, 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. 800-2022-089635, and will expire on September 30, 2025, unless renewed.

JURISDICTION

4. Accusation No. 800-2022-089635 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 June 17, 2024. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2022-089635 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. 800-2022-089635. 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.

CULPABILITY

9. Respondent understands and agrees that the charges and allegations in Accusation No. 800-2022-089635, if proven at a hearing, constitute cause for imposing discipline upon his Physician's and Surgeon's Certificate.

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

11. 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

12. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or 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.

13. 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.

14. 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. 800-2022-089635 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.

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

1 16. 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. G 63191 issued
6 to Respondent FRANCISCO REYNA MENDOZA, M.D. is revoked. However, the revocation is
7 stayed, and Respondent is placed on probation for five (5) years on the following terms and
8 conditions. This Order is to run concurrent to the probationary order in Case No. 800-2022-
9 089027.

10 1. **EDUCATION COURSE.** Within 60 calendar days of the effective date of this
11 Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee
12 for its prior approval educational program(s) or course(s) which shall not be less than 40 hours
13 per year, for each year of probation. The educational program(s) or course(s) shall be aimed at
14 correcting any areas of deficient practice or knowledge and shall be Category I certified. The
15 educational program(s) or course(s) shall be at Respondent's expense and shall be in addition to
16 the Continuing Medical Education (CME) requirements for renewal of licensure. Following the
17 completion of each course, the Board or its designee may administer an examination to test
18 Respondent's knowledge of the course. Respondent shall provide proof of attendance for 65
19 hours of CME of which 40 hours were in satisfaction of this condition.

20 2. **PRESCRIBING PRACTICES COURSE.** Within 60 calendar days of the effective
21 date of this Decision, Respondent shall enroll in a course in prescribing practices approved in
22 advance by the Board or its designee. Respondent shall provide the approved course provider
23 with any information and documents that the approved course provider may deem pertinent.
24 Respondent shall participate in and successfully complete the classroom component of the course
25 not later than 6 months after Respondent's initial enrollment. Respondent shall successfully
26 complete any other component of the course within 1 year of enrollment. The prescribing
27 practices course shall be at Respondent's expense and shall be in addition to the Continuing
28 Medical Education (CME) requirements for renewal of licensure.

1 A prescribing practices course taken after the acts that gave rise to the charges in the
2 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
3 or its designee, be accepted towards the fulfillment of this condition if the course would have
4 been approved by the Board or its designee had the course been taken after the effective date of
5 this Decision.

6 Respondent shall submit a certification of successful completion to the Board or its
7 designee not later than 15 calendar days after successfully completing the course, or not later than
8 15 calendar days after the effective date of the Decision, whichever is later.

9 3. NOTIFICATION. Within 7 days of the effective date of this Decision, the
10 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
11 Chief Executive Officer at every hospital where privileges or membership are extended to
12 Respondent, at any other facility where Respondent engages in the practice of medicine,
13 including all physician and locum tenens registries or other similar agencies, and to the Chief
14 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
15 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15
16 calendar days.

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

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

21 5. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby
22 ordered to reimburse the Board its costs of investigation and enforcement, in the amount of
23 \$18,000.00 (eighteen thousand dollars and zero cents). Costs shall be payable to the Medical
24 Board of California. Failure to pay such costs shall be considered a violation of probation.

25 Payment must be made in full within 30 calendar days of the effective date of the Order, or
26 by a payment plan approved by the Medical Board of California. Any and all requests for a
27 payment plan shall be submitted in writing by Respondent to the Board. Failure to comply with
28 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, including expert review costs (if applicable).

3 6. 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 10 calendar days after the end
7 of the preceding quarter.

8 7. 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 30 calendar days prior to the dates of
3 departure and return.

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

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

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

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

28 Periods of non-practice for a Respondent residing outside of California will relieve

Respondent of the responsibility to comply with the probationary terms and conditions with the exception of this condition and the following terms and conditions of probation: Obey All Laws; General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or Controlled Substances; and Biological Fluid Testing.

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

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

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

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14. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for a new license or certification, or petition for reinstatement of a license, by any other health care licensing action agency in the State of California, all of the charges and allegations contained in Accusation No. 800-2022-089635 shall be deemed to be true, correct, and admitted by Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or restrict license.

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

9/23/24

FRANCISCO REYNA MENDOZA, M.D.
Respondent

I have read and fully discussed with Respondent Francisco Reyna Mendoza, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

9/23/2024

SCOTT J. HARRIS
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: 9/23/2024

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

LA2024601834

Exhibit A

Accusation No. 800-2022-089635

1 ROB BONTA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 MARSHA E. BARR-FERNANDEZ
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8 **BEFORE THE**
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10 **STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

Case No. 800-2022-089635

12 **Francisco Reyna Mendoza, M.D.**
13 **124 W. Fesler Street**
Santa Maria, CA 93458-4002

A C C U S A T I O N

14 **Physician's and Surgeon's Certificate**
15 **No. G 63191,**

Respondent.

16
17 **PARTIES**

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

21 2. On or about June 27, 1988, the Board issued Physician's and Surgeon's Certificate
22 Number G 63191 to Francisco Reyna Mendoza, M.D. (Respondent). The Physician's and
23 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
24 herein and will expire on September 30, 2025, unless renewed.

25 **JURISDICTION**

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

1 4. Section 2004 of the Code states:

2 The board shall have the responsibility for the following:

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

5 (b) The administration and hearing of disciplinary actions.

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

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

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

10 (f) Approving undergraduate and graduate medical education programs.

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

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

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

15 5. Section 2220 of the Code states:

16 Except as otherwise provided by law, the board may take action against all
17 persons guilty of violating this chapter. The board shall enforce and administer this
18 article as to physician and surgeon certificate holders, including those who hold
19 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:

20 (a) Investigating complaints from the public, from other licensees, from health
21 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.

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

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

6. 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.

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.

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

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

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

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

(b) Gross negligence.

(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.

(d) Incompetence.

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

(h) Any action of the licensee, or another person acting on behalf of the licensee, intended to cause their patient or their patient's authorized representative to rescind consent to release the patient's medical records to the board or the Department of Consumer Affairs, Health Quality Investigation Unit.

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1 9. Health and Safety Code § 11165.4 states:

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

9 ***

10 (iii) A health care practitioner who did not directly access the CURES database
11 to perform the required review of the controlled substance use report shall document
12 in the patient's medical record that they reviewed the CURES database generated
13 report within 24 hours of the controlled substance prescription that was provided to
14 them by another authorized user of the CURES database.

15 (B) For purposes of this paragraph, "first time" means the initial occurrence in
16 which a health care practitioner, in their role as a health care practitioner, intends to
17 prescribe, order, administer, or furnish a Schedule II, Schedule III, or Schedule IV
18 controlled substance to a patient and has not previously prescribed a controlled
19 substance to the patient.

20 (2) A health care practitioner shall review a patient's controlled substance
21 history that has been obtained from the CURES database no earlier than 24 hours, or
22 the previous business day, before the health care practitioner prescribes, orders,
23 administers, or furnishes a Schedule II, Schedule III, or Schedule IV controlled
24 substance to the patient.

25 ***

26 (d)(1) A health care practitioner who fails to consult the CURES database, as
27 described in subdivision (a), shall be referred to the appropriate state professional
28 licensing board solely for administrative sanctions, as deemed appropriate by that
29 board.

30 ***

31 COST RECOVERY

32 10. Section 125.3 of the Code states:

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

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

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

5 (d) The administrative law judge shall make a proposed finding of the amount
6 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
7 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
8 the proposed decision fails to make a finding on costs requested pursuant to
subdivision (a).

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

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

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

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

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

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

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

24 DRUG LIST

25 11. Ativan® (lorazepam), a benzodiazepine, is a centrally acting hypnotic-sedative that is
26 a Schedule IV controlled substance pursuant to Health and Safety Code section 11057,
27 subdivision (d), and a dangerous drug pursuant to Business and Professions Code section 4022.
28 When properly prescribed and indicated, it is used for the management of anxiety disorders or for

1 the short term relief of anxiety or anxiety associated with depressive symptoms. Concomitant use
2 of Ativan® with opioids “may result in profound sedation, respiratory depression, coma, and
3 death.” The Drug Enforcement Administration (DEA) has identified benzodiazepines, such as
4 Ativan®, as a drug of abuse. (Drugs of Abuse, DEA Resource Guide (2022 Edition), at p. 35, 70-
5 73.)

6 12. Zolpidem Tartrate (Ambien®), a centrally acting hypnotic-sedative, is a Schedule IV
7 controlled substance pursuant to Health and Safety Code section 11057, subdivision (d), and a
8 dangerous drug pursuant to Business and Professions Code section 4022. When properly
9 prescribed and indicated, it is used for the short-term treatment of insomnia characterized by
10 difficulties with sleep initiation. The Drug Enforcement Administration (DEA) has identified
11 sedative hypnotics, such as Ambien®, as a drug of abuse. (Drugs of Abuse, DEA Resource
12 Guide (2022 Edition), at p. 36, 70.)

13 **FIRST CAUSE FOR DISCIPLINE**

14 **(Gross Negligence)**

15 13. Respondent Francisco Reyna Mendoza, M.D. is subject to disciplinary action under
16 section 2234, subdivision (b) of the Code in that Respondent was grossly negligent in his care and
17 treatment of two patients. The circumstances are as follows:

18 **Patient 1.**

19 14. In or about September 2019, Patient 1¹ was a then 82-year-old female with a history
20 of osteopenia and neck injury, and complaint of symptoms of depression, including irritability
21 and insomnia. Between on or about September 12, 2019 and July 5, 2022, Respondent prescribed
22 lorazepam for insomnia to Patient 1. Respondent did not discuss with Patient 1 the potential risks
23 or side effects of benzodiazepines, including but not limited to, respiratory depression, motor
24 impairment, cognitive impairment, dependence, misuse, addiction, overdose, and death.

25 15. Respondent did not perform compliance monitoring with respect to Patient 1.
26 Respondent did not consult the CURES database to review Patient 1’s controlled substance
27 history for the preceding 12 months before prescribing the Schedule IV substances to Patient 1 for

28 ¹ Patients will be identified by number to protect their privacy.

1 the first time. Respondent did not review Patient 1's controlled substance history at least once
2 every six months thereafter when renewing the prescriptions and having the substances remain
3 part of the treatment of Patient 1. Respondent did not perform periodic toxicological screens or
4 periodic random pill counts with respect to Patient 1. Respondent's failure to perform
5 compliance monitoring with respect to Patient 1 was an extreme departure from the standard of
6 care.

7 16. The standard of care for a primary care provider in California, when considering the
8 long-term use of controlled substances in a patient, is to discuss the risks and benefits of the
9 treatment plan with the patient. Respondent's failure to discuss with Patient 1 the potential risks
10 or side effects of benzodiazepines, including but not limited to, respiratory depression, motor
11 impairment, cognitive impairment, dependence, misuse, overdose, and death, was an extreme
12 departure from the standard of care.

13 **Patient 2.**

14 17. In or about July 2020, Patient 2 was a then 87-year-old female with a history of
15 dementia, diabetes, hypertension, and hypercholesterinemia. Between on or about July 23, 2020
16 and May 16, 2022, Respondent prescribed lorazepam for anxiety and insomnia and zolpidem
17 tartrate² for insomnia to Patient 2.

18 18. The standard of care for a primary care provider in the state of California, when
19 prescribing chronic controlled substances, is to ensure appropriate compliance monitoring. By
20 failing to consult the CURES database and review Patient 2's controlled substance history,
21 Respondent did not undertake compliance monitoring. Compliance monitoring is designed to
22 protect the patient from overuse, misuse, and abuse. Additionally, it protects the community from
23 diversion. Compliance monitoring should include periodic toxicological screens for illicit drug
24 use, as well as to determine if the patient is using their prescription medications as directed. Also,
25 periodic random pill counts and review of the CURES system are recommended.

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28 ² The prescription for zolpidem tartrate was issued on one occasion during this period, to
wit, May 17, 2021.

1 19. Respondent did not perform compliance monitoring with respect to Patient 2.
2 Respondent did not consult the CURES database to review Patient 2's controlled substance
3 history for the preceding 12 months before prescribing the Schedule IV substances to Patient 2 for
4 the first time. Respondent did not review Patient 2's controlled substance history at least once
5 every six months thereafter when renewing the prescriptions and having the substances remain
6 part of the treatment of Patient 2. Respondent did not perform periodic toxicological screens or
7 periodic random pill counts with respect to Patient 2. Respondent's failure to perform
8 compliance monitoring with respect to Patient 2 was an extreme departure from the standard of
9 care

10 **SECOND CAUSE FOR DISCIPLINE**

11 **(Repeated Negligent Acts)**

12 20. Respondent Francisco Reyna Mendoza, M.D. is subject to disciplinary action under
13 section 2234, subdivision (c) of the Code in that Respondent committed repeated negligent acts in
14 his care and treatment of two patients. The circumstances are as follows:

15 21. The facts and allegations set forth in the First Cause for Discipline are incorporated
16 herein by reference as if fully set forth.

17 22. Each of the alleged acts of gross negligence set forth in the First Cause for Discipline,
18 above, are also negligent acts.

19 **Patient 1.**

20 23. The standard of care for a provider in the state of California, when considering
21 medication therapy for insomnia in a geriatric patient, is to first evaluate a patient's need for
22 medication and if medication is appropriate to then select a medication with the best benefit-to-
23 harm ratio.

24 24. Respondent prescribed a benzodiazepine (lorazepam) to Patient 1 as a first choice
25 medication for insomnia. Lorazepam for insomnia was prescribed by Respondent continuously
26 from at least September 12, 2019 to July 5, 2022, which is outside of recommended guidelines
27 and constitutes a simple departure from the standard of care.

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1 Patient 2.

2 25. The standard of care for a provider in the state of California when considering
3 medication therapy for secondary effects of dementia, such as insomnia, sundowning,³ agitation,
4 and anxiety, in a geriatric patient, is to first evaluate a patient's need for medication and if
5 medication is appropriate to then select a medication with the best benefit-to-harm ratio.

6 26. Respondent prescribed a benzodiazepine as a first choice medication for insomnia in
7 Patient 2, a geriatric patient with dementia. Additionally, Respondent prescribed benzodiazepines
8 for other secondary effects of dementia such as anxiety, agitation, and sundowning effects.
9 Benzodiazepines can have reciprocal effects making these secondary concerns unpredictably
10 worse. Lorazepam for insomnia was prescribed by Respondent continuously to Patient 2 from at
11 least July 23, 2020 to May 16, 2022, which is outside of recommended guidelines and constitutes
12 a simple departure from the standard of care.

13 DISCIPLINARY CONSIDERATIONS

14 27. To determine the degree of discipline, if any, to be imposed on Respondent Francisco
15 Reyna Mendoza, M.D., Complainant alleges that on or about May 18, 2023, in a prior criminal
16 proceeding titled *The People of the State of California v. Francisco R. Mendoza* in Ventura
17 Superior Court, Case Number 2022013416, Respondent was convicted for violating Vehicle Code
18 section 23152, subdivision (b) (driving while having a 0.08% or higher blood alcohol), a
19 misdemeanor, and was discharged on conditional revocable release and placed on summary
20 probation for thirty-six (36) months, with terms and conditions, including completing a 90-day
21 Driving Under the Influence Program. The record of the criminal proceeding is incorporated as if
22 fully set forth herein.

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27 ³ "Sundowning" refers to a state of confusion that occurs in the late afternoon and lasts
28 into the night. Sundowning can cause various behaviors, such as confusion, anxiety, aggression
or ignoring directions. Sundowning also can lead to pacing or wandering.

1 PRAYER

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


4 1. Revoking or suspending Physician's and Surgeon's Certificate Number G 63191,
5 issued to Respondent Francisco Reyna Mendoza, M.D.;

6 2. Revoking, suspending or denying approval of Respondent Francisco Reyna Mendoza,
7 M.D.'s authority to supervise physician assistants and advanced practice nurses;

8 3. Ordering Respondent Francisco Reyna Mendoza, M.D., to pay the Board the costs of
9 the investigation and enforcement of this case, and if placed on probation, the costs of probation
10 monitoring; and

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

12
13 DATED: JUN 17 2024

 for

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

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