

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

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

Tristan Emily Bickman, M.D.

**Physician's and Surgeon's
Certificate No. A 61840**

Respondent.

Case No.: 800-2020-064589

DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on August 8, 2025.

IT IS SO ORDERED: July 10, 2025.

MEDICAL BOARD OF CALIFORNIA

Michelle A. Bholat, MD

**Michelle Anne Bholat, Chair
Panel A**

1 ROB BONTA
Attorney General of California
2 EDWARD KIM
Supervising Deputy Attorney General
3 CHRISTINA SEIN GOOT
Deputy Attorney General
4 State Bar No. 229094
300 So. Spring Street, Suite 1702
5 Los Angeles, CA 90013
Telephone: (213) 269-6481
6 Facsimile: (916) 731-2117
E-mail: Christina.Goot@doj.ca.gov
7 *Attorneys for Complainant*

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

11 In the Matter of the Accusation Against:

12 **TRISTAN EMILY BICKMAN, M.D.**
13 **1304 15th Street, Suite 100**
Santa Monica, CA 90404-1810

14 **Physician's and Surgeon's**
15 **Certificate No. A 61840,**

16 Respondent.

Case No. 800-2020-064589

OAH No. 2023080939 (consolidated with
OAH Nos. 2024020483 and 2024090696)

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

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 Christina Sein Goot, Deputy
23 Attorney General.

24 2. Respondent Tristan Emily Bickman, M.D. (Respondent) is represented in this
25 proceeding by attorney Derek F. O'Reilly-Jones, whose address is: 355 South Grand Avenue,
26 Suite 1750, Los Angeles, CA 90071-1562.

27 3. On or about March 21, 1997, the Board issued Physician's and Surgeon's Certificate
28 No. A 61840 to Respondent. The Physician's and Surgeon's Certificate was in full force and

1 effect at all times relevant to the charges brought in Accusation No. 800-2020-064589,
2 Accusation No. 800-2021-079355, First Amended Accusation No. 800-2022-086285, and First
3 Amended Accusation No. 800-2022-086840, and will expire on August 31, 2026, unless renewed.

4 **JURISDICTION**

5 4. Each of Accusation Nos. 800-2020-064589 and 800-2021-079355, and First
6 Amended Accusation Nos. 800-2022-086285 and 800-2022-086840, was filed before the Board,
7 and is currently pending against Respondent. Accusation Nos. 800-2020-064589 and 800-2021-
8 079355, and First Amended Accusation Nos. 800-2022-086285 and 800-2022-086840, and all
9 other statutorily required documents were properly served on Respondent on February 3, 2023,
10 February 1, 2024, January 17, 2025, and April 14, 2025, respectively. Respondent timely filed
11 her Notices of Defense contesting the Accusations.

12 5. A copy of each of Accusation Nos. 800-2020-064589 and 800-2021-079355, and
13 First Amended Accusation Nos. 800-2022-086285 and 800-2022-086840 is attached hereto as
14 **Exhibits A, B, C, and D, respectively**, and each is incorporated herein by reference.

15 6. Respondent and Complainant hereby agree that this Stipulated Settlement and
16 Disciplinary Order will be submitted to the Board for approval and adoption as the final
17 resolution of Board Case Nos. 800-2022-090458; 800-2022-089255; 800-2022-090126; 800-
18 2022-092006; and 800-2022-093259, as well as Accusation Nos. 800-2020-064589 and 800-
19 2021-079355 and First Amended Accusation Nos. 800-2022-086285 and 800-2022-086840.

20 **ADVISEMENT AND WAIVERS**

21 7. Respondent has carefully read, fully discussed with counsel, and understands the
22 charges and allegations in each of Accusation No. 800-2020-064589, Accusation No. 800-2021-
23 079355, First Amended Accusation No. 800-2022-086285, and First Amended Accusation No.
24 800-2022-086840. Respondent has also carefully read, fully discussed with her counsel, and
25 understands the effects of this Stipulated Settlement and Disciplinary Order.

26 8. Respondent is fully aware of her legal rights in this matter, including the right to a
27 hearing on the charges and allegations in the Accusations and First Amended Accusations; the
28 right to confront and cross-examine the witnesses against her; the right to present evidence and to

1 testify on her own behalf; the right to the issuance of subpoenas to compel the attendance of
2 witnesses and the production of documents; the right to reconsideration and court review of an
3 adverse decision; and all other rights accorded by the California Administrative Procedure Act
4 and other applicable laws.

5 9. Respondent voluntarily, knowingly, and intelligently waives and gives up each and
6 every right set forth above.

7 **CULPABILITY**

8 10. Respondent understands and agrees that the charges and allegations in Accusation
9 No. 800-2020-064589, Accusation No. 800-2021-079355, First Amended Accusation No. 800-
10 2022-086285, and First Amended Accusation No. 800-2022-086840, if proven at a hearing,
11 constitute cause for imposing discipline upon her Physician's and Surgeon's Certificate.

12 11. Respondent does not contest that, at an administrative hearing, Complainant could
13 establish a *prima facie* case with respect to the charges and allegations contained in each of
14 Accusation No. 800-2020-064589, Accusation No. 800-2021-079355, First Amended Accusation
15 No. 800-2022-086285, and First Amended Accusation No. 800-2022-086840, and that she has
16 thereby subjected her Physician's and Surgeon's Certificate No A 61840 to disciplinary action and
17 hereby gives up her right to contest those charges.

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

21 **RESERVATION**

22 13. The admissions made by Respondent herein are only for the purposes of this
23 proceeding, or any other proceedings in which the Medical Board of California or other
24 professional licensing agency is involved, and shall not be admissible in any other criminal or
25 civil proceeding.

26 **CONTINGENCY**

27 14. This stipulation shall be subject to approval by the Board. Respondent understands
28 and agrees that counsel for Complainant and the staff of the Board may communicate directly

1 with the Board regarding this stipulation and settlement, without notice to or participation by
2 Respondent or her counsel. By signing the stipulation, Respondent understands and agrees that
3 she may not withdraw her agreement or seek to rescind the stipulation prior to the time the Board
4 considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order,
5 the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this
6 paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not
7 be disqualified from further action by having considered this matter.

8 15. This Stipulated Settlement and Disciplinary Order is intended by the parties herein to
9 be an integrated writing representing the complete, final and exclusive embodiment of the
10 agreement of the parties in this above-entitled matter.

11 16. Respondent agrees that if she ever petitions for early termination or modification of
12 probation, or if an accusation and/or petition to revoke probation is filed against her before the
13 Board, all of the charges and allegations contained in each of Accusation No. 800-2020-064589,
14 Accusation No. 800-2021-079355, First Amended Accusation No. 800-2022-086285, and First
15 Amended Accusation No. 800-2022-086840, shall be deemed true, correct and fully admitted by
16 Respondent for purposes of any such proceeding or any other licensing proceeding involving
17 Respondent in the State of California.

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

21 18. In consideration of the foregoing admissions and stipulations, the parties agree that
22 the Board may, without further notice or opportunity to be heard by the Respondent, issue and
23 enter the following Disciplinary Order:

24 **DISCIPLINARY ORDER**

25 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 61840 issued
26 to Respondent Tristan Emily Bickman, M.D. is revoked. However, the revocation is stayed and
27 Respondent is placed on probation for six (6) years on the following terms and conditions:

28 1. EDUCATION COURSE. Within 60 calendar days of the effective date of this

1 Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee
2 for its prior approval educational program(s) or course(s) which shall not be less than 40 hours
3 per year, for each year of probation. The educational program(s) or course(s) shall be aimed at
4 correcting any areas of deficient practice or knowledge and shall be Category I certified. The
5 educational program(s) or course(s) shall be at Respondent's expense and shall be in addition to
6 the Continuing Medical Education (CME) requirements for renewal of licensure. Following the
7 completion of each course, the Board or its designee may administer an examination to test
8 Respondent's knowledge of the course. Respondent shall provide proof of attendance for 65
9 hours of CME of which 40 hours were in satisfaction of this condition.

10 2. MEDICAL RECORD KEEPING COURSE. Within 60 calendar days of the effective
11 date of this Decision, Respondent shall enroll in a course in medical record keeping approved in
12 advance by the Board or its designee. Respondent shall provide the approved course provider
13 with any information and documents that the approved course provider may deem pertinent.
14 Respondent shall participate in and successfully complete the classroom component of the course
15 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully
16 complete any other component of the course within one (1) year of enrollment. The medical
17 record keeping course shall be at Respondent's expense and shall be in addition to the Continuing
18 Medical Education (CME) requirements for renewal of licensure.

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

24 Respondent shall submit a certification of successful completion to the Board or its
25 designee not later than 15 calendar days after successfully completing the course, or not later than
26 15 calendar days after the effective date of the Decision, whichever is later.

27 3. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of
28 the effective date of this Decision, Respondent shall enroll in a professionalism program, that

1 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1.

2 Respondent shall participate in and successfully complete that program. Respondent shall
3 provide any information and documents that the program may deem pertinent. Respondent shall
4 successfully complete the classroom component of the program not later than six (6) months after
5 Respondent's initial enrollment, and the longitudinal component of the program not later than the
6 time specified by the program, but no later than one (1) year after attending the classroom
7 component. The professionalism program shall be at Respondent's expense and shall be in
8 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

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

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

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

27 The Board or its designee shall provide the approved monitor with copies of the Decision(s)
28 and Accusation(s) or First Amended Accusation(s), and a proposed monitoring plan. Within 15

1 calendar days of receipt of the Decision(s), Accusation(s) or First Amended Accusation(s), and
2 proposed monitoring plan, the monitor shall submit a signed statement that the monitor has read
3 the Decision(s) and Accusation(s) or First Amended Accusation(s), fully understands the role of a
4 monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor disagrees
5 with the proposed monitoring plan, the monitor shall submit a revised monitoring plan with the
6 signed statement for approval by the Board or its designee.

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

12 If Respondent fails to obtain approval of a monitor within 60 calendar days of the effective
13 date of this Decision, Respondent shall receive a notification from the Board or its designee to
14 cease the practice of medicine within three (3) calendar days after being so notified. Respondent
15 shall cease the practice of medicine until a monitor is approved to provide monitoring
16 responsibility.

17 The monitor(s) shall submit a quarterly written report to the Board or its designee which
18 includes an evaluation of Respondent's performance, indicating whether Respondent's practices
19 are within the standards of practice of medicine and billing, and whether Respondent is practicing
20 medicine safely, billing appropriately or both. It shall be the sole responsibility of Respondent to
21 ensure that the monitor submits the quarterly written reports to the Board or its designee within
22 10 calendar days after the end of the preceding quarter.

23 If the monitor resigns or is no longer available, Respondent shall, within 5 calendar days of
24 such resignation or unavailability, submit to the Board or its designee, for prior approval, the
25 name and qualifications of a replacement monitor who will be assuming that responsibility within
26 15 calendar days. If Respondent fails to obtain approval of a replacement monitor within 60
27 calendar days of the resignation or unavailability of the monitor, Respondent shall receive a
28 notification from the Board or its designee to cease the practice of medicine within three (3)

1 calendar days after being so notified. Respondent shall cease the practice of medicine until a
2 replacement monitor is approved and assumes monitoring responsibility.

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

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

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

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

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

23 8. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby
24 ordered to reimburse the Board its costs of investigation and enforcement, including, but not
25 limited to, expert review, amended accusations, legal reviews, investigation(s), and subpoena
26 enforcement, as applicable, in the amount of \$175,000.00 (one hundred seventy-five thousand
27 dollars and zero cents). Costs shall be payable to the Medical Board of California. Failure to pay
28 such costs shall be considered a violation of probation.

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

5 The filing of bankruptcy by Respondent shall not relieve Respondent of the responsibility
6 to repay investigation and enforcement costs, including expert review costs (if applicable).

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

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

12 10. GENERAL PROBATION REQUIREMENTS.

13 Compliance with Probation Unit

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

15 Address Changes

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

21 Place of Practice

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

25 License Renewal

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

28 ///

1 Travel or Residence Outside California

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

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

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

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

25 In the event Respondent's period of non-practice while on probation exceeds 18 calendar
26 months, Respondent shall successfully complete the Federation of State Medical Boards's Special
27 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program
28 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model

Disciplinary Orders and Disciplinary Guidelines” prior to resuming the practice of medicine.

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

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

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; and Quarterly Declarations.

13. 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.

14. 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.

15. 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

1 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
2 application shall be treated as a petition for reinstatement of a revoked certificate.

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

8 17. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for
9 a new license or certification, or petition for reinstatement of a license, by any other health care
10 licensing action agency in the State of California, all of the charges and allegations contained in
11 each of Accusation No. 800-2020-064589, Accusation No. 800-2021-079355, First Amended
12 Accusation No. 800-2022-086285, and First Amended Accusation No. 800-2022-086840, shall be
13 deemed to be true, correct, and admitted by Respondent for the purpose of any Statement of
14 Issues or any other proceeding seeking to deny or restrict license.

15
16 ACCEPTANCE

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

22
23 DATED: 5/22/25

24 
TRISTAN EMILY BICKMAN, M.D.
Respondent

25
26 [Signatures continue on following page]
27
28

1 I have read and fully discussed with Respondent Tristan Emily Bickman, M.D. the terms
2 and conditions and other matters contained in the above Stipulated Settlement and Disciplinary
3 Order. I approve its form and content.

4
5 DATED: 05/22/2025

Derek O'Reilly-Jones
DEREK F. O'REILLY-JONES
Attorney for Respondent

7
8 **ENDORSEMENT**

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

11 DATED: _____

Respectfully submitted,

12
13 ROB BONTA
Attorney General of California
14 EDWARD KIM
Supervising Deputy Attorney General

15
16 CHRISTINA SEIN GOOT
Deputy Attorney General
17 *Attorneys for Complainant*

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1 I have read and fully discussed with Respondent Tristan Emily Bickman, M.D. the terms
2 and conditions and other matters contained in the above Stipulated Settlement and Disciplinary
3 Order. I approve its form and content.

4
5 DATED: _____

DEREK F. O'REILLY-JONES
Attorney for Respondent

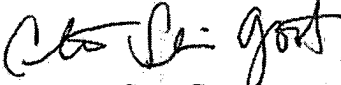
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8 **ENDORSEMENT**

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

11 DATED: 5/23/2025

Respectfully submitted,

12
13 ROB BONTA
Attorney General of California
14 EDWARD KIM
Supervising Deputy Attorney General

15 
16 CHRISTINA SEIN GOOT
17 Deputy Attorney General
18 *Attorneys for Complainant*

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Exhibit A

Accusation No. 800-2020-064589

1 ROB BONTA
Attorney General of California
2 EDWARD KIM
Supervising Deputy Attorney General
3 JONATHAN NGUYEN
Deputy Attorney General
4 State Bar No. 263420
Department of Justice
5 300 So. Spring Street, Suite 1702
Los Angeles, CA 90013
6 Telephone: (213) 269-6434
Facsimile: (916) 731-2117
7 *Attorneys for Complainant*

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

12 In the Matter of the Accusation Against:

Case No. 800-2020-064589

13 **Tristan Emily Bickman, M.D.**
14 **1304 15th St., Suite 100**
15 **Santa Monica, CA 90404-1810**

A C C U S A T I O N

16 **Physician's and Surgeon's**
17 **Certificate No. A 61840,**

Respondent.

18 **PARTIES**

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

22 2. On or about March 21, 1997, the Medical Board issued Physician's and Surgeon's
23 Certificate Number A 61840 to Tristan Emily Bickman, M.D. (Respondent). The Physician's and
24 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
25 herein and will expire on August 31, 2024, unless renewed.

26 **JURISDICTION**

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

1 indicated.

2 4. Section 2004 of the Code states:

3 The board shall have the responsibility for the following:

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

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

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

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

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

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

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

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

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

18 5. Section 2227 of the Code provides that a licensee who is found guilty under the
19 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed
20 one year, placed on probation and required to pay the costs of probation monitoring, or such other
21 action taken in relation to discipline as the Board deems proper.

22 STATUTORY PROVISIONS

23 6. Section 2234 of the Code, states:

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

27 (a) Violating or attempting to violate, directly or indirectly, assisting in or
28 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 7. Section 2266 of the Code states:

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

21 COST RECOVERY

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

28 FIRST CAUSE FOR DISCIPLINE

(Gross Negligence)

9 Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
10 section 2234, subdivision (b), of the Code in that Respondent was grossly negligent in connection
11 with her care and treatment of Patient A.¹ The circumstances are as follows:

¹ The patient is identified by letter in this Accusation to address privacy concerns.

1 10. On or about January 2, 2020, Patient A, a 27-year-old female, presented to
2 Respondent after missing several menstrual periods in a row (a condition known as amenorrhea).
3 Respondent performed a transvaginal ultrasound in her office on Patient A at that visit.
4 Respondent also ordered laboratory tests, which included testing for Anti-Mullerian hormone
5 (AMH). An AMH test is often used to check a woman's ability to produce eggs that can be
6 fertilized for pregnancy. A nurse from Respondent's office later called Patient A and told her that
7 the AMH test results were normal. However, Patient A researched the results of her lab tests
8 herself and believed that the results reported by Respondent's office from her AMH test were not
9 normal. Patient A attempted to call Respondent and speak directly to her several times, however,
10 she was not able to speak to Respondent when she called and was not able to leave a voicemail
11 for Respondent.

12 11. On or about January 14, 2020, Respondent stated in an email to Patient A that her
13 AMH test results were a "little bit under normal."

14 12. On or about August 11, 2021, an investigator and medical consultant interviewed
15 Respondent on behalf of the Board. During the interview, Respondent explained that Patient A's
16 symptoms were due to her consumption of low dose birth control medications. When asked
17 whether her plan included options for changes in Patient A's prescription, Respondent stated that
18 she communicated these options orally to Patient A only. Respondent failed to document this
19 discussion in her medical record for Patient A. Respondent also admitted that she failed to
20 document any discussion that she warned Patient A that the results of any hormone testing may
21 not be reflective of Patient A's actual hormonal levels due to the oral contraceptives taken
22 exogenously.

23 13. On or about January 2, 2020, Respondent committed gross negligence in connection
24 with her initial office visit with Patient A by failing to adequately perform and or document an
25 adequate evaluation and assessment of Patient A. Respondent's office visit documentation
26 consisted of a pre-printed single page, which failed to include adequate medical information
27 about Patient A, including her past surgical history, past medical history, allergies, family history,
28 social history, current medications and vital signs.

14. On or about January 2, 2020, Respondent also committed gross negligence in connection with adequately performing and documenting the Patient A's transvaginal ultrasound. The ultrasound revealed an ovarian cyst. However, Respondent failed to adequately document the ovarian cyst, including its laterality and consistency.

SECOND CAUSE FOR DISCIPLINE

(Repeated Negligent Acts)

15. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under section 2234, subdivision (c) in that Respondent committed repeated negligence acts in connection with her provision of medical services to Patient A. The circumstances are as follows:

16. The facts and allegations of the First Cause for Discipline are incorporated herein by reference as if fully set forth. Each allegation of gross negligence in the First Cause for Discipline also constitutes a negligent act.

17. Respondent also committed negligence when she failed to adequately document her phone interactions with Patient A regarding her lab results. Respondent's medical records for Patient A are devoid of any documentation of any phone calls with her.

18. Respondent also committed negligence when she failed to adequately communicate to Patient A about her abnormal AMH lab results.

THIRD CAUSE FOR DISCIPLINE

(Inadequate Medical Record Keeping)

19. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under section 2266 of the Code in that Respondent failed to maintain adequate records relating to the provision of medical service to Patient A. The circumstances are as follows:

20. The facts and allegations of the First and Second Causes for Discipline, inclusive, are incorporated herein by reference as if fully set forth. Respondent failed to document Patient A's past surgical history, past medical history, allergies, family history, social history, current medications and vital signs during her office visit. Respondent also failed to document the laterality and consistency of Patient A's ovarian cyst. Respondent also failed to document any communication to Patient A after the lab results were received or even when the lab results were

1 received. Respondent also failed to document her emails exchanged with Patient A regarding
2 Patient A's AMH lab results. Respondent's handwriting on Patient A's medical chart is also
3 illegible.

4 **FOURTH CAUSE FOR DISCIPLINE**

5 **(General Unprofessional Conduct)**

6 21. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
7 section 2234 of the Code in that Respondent committed unprofessional conduct, generally. The
8 circumstances are as follows:

9 22. The allegations of the First, Second, and Third Causes for Discipline, inclusive, are
10 incorporated herein by reference as if fully set forth.

11 **DISCIPLINARY CONSIDERATIONS**

12 23. To determine the degree of discipline, if any, to be imposed on Respondent Tristan
13 Emily Bickman, M.D., Complainant alleges that on or about August 27, 2020, in a prior
14 disciplinary action titled, *In the Matter of the Accusation Against Tristan Emily Bickman, M.D.*,
15 before the Medical Board of California, in Case Number 800-2017-037828, Respondent's license
16 was publicly reprimanded for Repeated Negligent Acts and Failing to Maintain Adequate
17 Records. That decision is now final and is incorporated by reference as if fully set forth herein.

18 **PRAYER**

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

21 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 61840,
22 issued to Tristan Emily Bickman, M.D.;

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


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

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

DATED: **FEB 03 2023**


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

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Exhibit B

Accusation No. 800-2021-079355

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Attorney General of California
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Supervising Deputy Attorney General
3 CHRISTINA SEIN GOOT
Deputy Attorney General
4 State Bar No. 229094
300 So. Spring Street, Suite 1702
5 Los Angeles, CA 90013
Telephone: (213) 269-6434
6 Facsimile: (916) 731-2117
Attorneys for Complainant
7

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

12 In the Matter of the Accusation Against:

Case No. 800-2021-079355

13 **TRISTAN EMILY BICKMAN, M.D.**
1304 15th St. Suite 100
Santa Monica, CA 90404-1810

ACCUSATION

14 **Physician's and Surgeon's**
Certificate No. A 61840,

Respondent.

15
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 March 21, 1997, the Board issued Physician's and Surgeon's Certificate
22 Number A 61840 to Tristan Emily Bickman, M.D. (Respondent). The Physician's and Surgeon's
23 Certificate was in full force and effect at all times relevant to the charges brought herein and will
24 expire on August 31, 2024, 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 2227 of the Code provides that a licensee who is found guilty under the
16 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed
17 one year, placed on probation and required to pay the costs of probation monitoring, or such other
18 action taken in relation to discipline as the Board deems proper.

19 **STATUTORY PROVISIONS**

20 6. Section 2234 of the Code states:

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

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

25 (b) Gross negligence.

26 (c) Repeated negligent acts. To be repeated, there must be two or more
27 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.

28 (1) An initial negligent diagnosis followed by an act or omission medically

appropriate for that negligent diagnosis of the patient shall constitute a single negligent act.

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

(d) Incompetence.

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

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

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

7. Section 2266 of the Code states:

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

8. Section 2261 of the Code states:

Knowingly making or signing any certificate or other document directly or indirectly related to the practice of medicine or podiatry which falsely represents the existence or nonexistence of a state of facts, constitutes unprofessional conduct.

9. Section 810 of the Code states, in pertinent part:

(a) It shall constitute unprofessional conduct and grounds for disciplinary action, including suspension or revocation of a license or certificate, for a health care professional to do any of the following in connection with their professional activities:

(1) Knowingly present or cause to be presented any false or fraudulent claim for the payment of a loss under a contract of insurance.

(2) Knowingly prepare, make, or subscribe any writing, with intent to present or use the same, or to allow it to be presented or used in support of any false or fraudulent claim.

....

COST RECOVERY

10. Section 125.3 of the Code provides, in pertinent part, that the Board may request the administrative law judge to direct a licensee found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and

1 enforcement of the case, with failure of the licensee to comply subjecting the license to not being
2 renewed or reinstated. If a case settles, recovery of investigation and enforcement costs may be
3 included in a stipulated settlement.

4 **FIRST CAUSE FOR DISCIPLINE**

5 **(Gross Negligence)**

6 11. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
7 section 2234, subdivision (b), of the Code in that she was grossly negligent in connection with her
8 care and treatment of Patient B.¹ The circumstances are as follows:

9 12. On or about May 10, 2021, Patient B, a 21-year-old female, first presented to
10 Respondent for a gynecologic exam with no specific complaints and reported a history of regular
11 menstrual cycles. Respondent performed a physical examination on Patient B and noted no
12 significant abnormal findings, including no pelvic or vaginal abnormalities. Respondent,
13 however, failed to document an exam of Patient B's lymph nodes, skin, lungs, heart, and
14 extremities, which would be included as part of a comprehensive physical exam. There is no
15 evidence in Respondent's records for Patient B that contraceptive issues were discussed with
16 Patient B, who reported having a sexual partner. Respondent also performed a pap-smear during
17 this visit. Quest Diagnostics (Quest) evaluated the pap-smear specimen and the result was
18 negative for human papillomavirus (HPV), and the cytology showed no evidence of
19 abnormalities.

20 13. Respondent's billing sheet indicates that she used CPT code² 99385, which is the
21 code used for a comprehensive initial new patient exam, to bill Patient B's health insurer for the
22 encounter. Respondent also billed Patient B's health insurer for CPT codes 86403, 87070, 87071,
23 87077, 87081, 87102, and 87109. These are procedural codes used to bill for obtaining
24 specimens for bacterial, fungal, and mycoplasma cultures to be sent to a laboratory. These
25 cultures are not routinely performed during a gynecologic exam. Respondent failed to document

26 ¹ The patient is identified by letter in this Accusation to address privacy concerns.

27 ² Current Procedural Terminology (CPT) refers to a set of medical codes used by
28 physicians and health professionals to describe the procedures and services they perform. CPT
codes are used to report procedures and services to federal and private payers for reimbursement
of rendered healthcare.

1 any justification for obtaining these seven cultures, such as abnormal physical findings.
2 Furthermore, Quest records reveal that Respondent never ordered testing of such cultures and did
3 not send a swab for testing of such cultures. Thus, Quest did not perform these culture tests, and
4 correspondingly, Respondent did not receive any results of such testing. Respondent billed
5 Patient B's health insurer \$1,800 to perform a sampling of the vagina for these culture tests.

6 14. Respondent committed gross negligence when she failed to document a justification
7 for obtaining multiple specialized cultures as part of a routine gynecologic exam.

8 15. Respondent committed gross negligence when she billed Patient B's health insurer
9 \$1,800 for performing a single swab of the vagina for seven pathogen cultures that were never
10 indicated, ordered, sent to a lab, or for which results were received.

11 **SECOND CAUSE FOR DISCIPLINE**

12 **(Repeated Negligent Acts)**

13 16. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
14 section 2234, subdivision (c), of the Code in that she committed repeated negligent acts in
15 connection with her provision of medical services to Patient B. The circumstances are as follows:

16 17. The facts and allegations of the First Cause for Discipline are incorporated herein by
17 reference as if fully set forth. Each allegation of gross negligence in the First Cause for
18 Discipline also constitutes a negligent act.

19 18. Respondent also committed negligence when she failed to document a discussion of
20 contraceptive management with Patient B.

21 19. Respondent also committed negligence when she billed Patient B's health insurer for
22 a comprehensive initial new patient exam (CPT code 99385), but failed to adequately perform
23 and/or document a comprehensive exam.

24 **THIRD CAUSE FOR DISCIPLINE**

25 **(Inadequate Medical Record Keeping)**

26 20. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
27 section 2266 of the Code in that she failed to maintain adequate records relating to the provision
28 of medical service to Patient B. The circumstances are as follows:

1 21. The facts and allegations of the First and Second Causes for Discipline, inclusive, are
2 incorporated herein by reference as if fully set forth.

3 **FOURTH CAUSE FOR DISCIPLINE**

4 **(Dishonesty, Misrepresentations, and Insurance Fraud)**

5 22. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
6 sections 2234, subdivision (e), 2261, and 810, of the Code in that she committed dishonesty,
7 made misrepresentations, and knowingly presented or caused to be presented a false or fraudulent
8 claim to Patient B's health insurer. The circumstances are as follows:

9 23. The facts and allegations of the First and Second Causes for Discipline, inclusive, are
10 incorporated herein by reference as if fully set forth.

11 **FIFTH CAUSE FOR DISCIPLINE**

12 **(General Unprofessional Conduct)**

13 24. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
14 section 2234 of the Code in that Respondent committed unprofessional conduct, generally. The
15 circumstances are as follows:

16 25. The allegations of the First, Second, Third, and Fourth Causes for Discipline,
17 inclusive, are incorporated herein by reference as if fully set forth.

18 **DISCIPLINARY CONSIDERATIONS**

19 26. To determine the degree of discipline, if any, to be imposed on Respondent Tristan
20 Emily Bickman, M.D., Complainant alleges that on or about August 27, 2020, in a prior
21 disciplinary action titled, *In the Matter of the Accusation Against Tristan Emily Bickman, M.D.*,
22 before the Medical Board of California, in Case Number 800-2017-037828, Respondent's license
23 was publicly reprimanded for Repeated Negligent Acts and Failing to Maintain Adequate
24 Records. That decision is now final and is incorporated by reference as if fully set forth herein.

25 **PRAYER**

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

- 28 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 61840,

1 issued to Respondent Tristan Emily Bickman, M.D.;

2 2. Revoking, suspending or denying approval of Respondent Tristan Emily Bickman,
3 M.D.'s authority to supervise physician assistants and advanced practice nurses;

4 3. Ordering Respondent Tristan Emily Bickman, M.D., to pay the Board the costs of the
5 investigation and enforcement of this case, and if placed on probation, the costs of probation
6 monitoring; and

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

8
9 DATED: _____

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

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Exhibit C

First Amended Accusation No. 800-2022-086285

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2 EDWARD KIM
Supervising Deputy Attorney General
3 CHRISTINA SEIN GOOT
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5 Los Angeles, CA 90013
Telephone: (213) 269-6481
6 Facsimile: (916) 731-2117
Attorneys for Complainant

7
8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the First Amended Accusation
13 Against:

Case No. 800-2022-086285

FIRST AMENDED ACCUSATION

14 **Tristan Emily Bickman, M.D.**
15 **1304 15th Street, Suite 100**
16 **Santa Monica, CA 90404-1810**

17 **Physician's and Surgeon's**
18 **Certificate No. A 61840,**

19 Respondent.

20 **PARTIES**

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

24 2. On or about March 21, 1997, the Board issued Physician's and Surgeon's Certificate
25 Number A 61840 to Tristan Emily Bickman, M.D. (Respondent). The Physician's and Surgeon's
26 Certificate was in full force and effect at all times relevant to the charges brought herein and will
27 expire on August 31, 2026, unless renewed.

28 **JURISDICTION**

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

1 unless otherwise indicated.

2 4. Section 2004 of the Code states:

3 The board shall have the responsibility for the following:

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

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

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

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

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

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

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

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

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

18 5. Section 2227 of the Code provides that a licensee who is found guilty under the
19 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed
20 one year, placed on probation and required to pay the costs of probation monitoring, or such other
21 action taken in relation to discipline as the Board deems proper.

22 STATUTORY PROVISIONS

23 6. Section 2234 of the Code states:

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

27 (a) Violating or attempting to violate, directly or indirectly, assisting in or
28 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
negligent act.

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

6 (d) Incompetence.

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

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

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

12 7. Section 2266 of the Code states:

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

15 8. Section 2261 of the Code states:

16 Knowingly making or signing any certificate or other document directly or
17 indirectly related to the practice of medicine or podiatry which falsely represents the
existence or nonexistence of a state of facts, constitutes unprofessional conduct.

18 9. Section 810 of the Code states, in pertinent part:

19 (a) It shall constitute unprofessional conduct and grounds for disciplinary
20 action, including suspension or revocation of a license or certificate, for a health care
21 professional to do any of the following in connection with their professional
activities:

22 (1) Knowingly present or cause to be presented any false or fraudulent claim
for the payment of a loss under a contract of insurance.

23 (2) Knowingly prepare, make, or subscribe any writing, with intent to
24 present or use the same, or to allow it to be presented or used in support of any false
or fraudulent claim.

25

26 10. Unprofessional conduct is conduct which breaches rules or ethical codes of a
27 profession or conduct which is unbecoming a member in good standing of a profession. (*Shea v.*
28 *Board of Medical Examiners* (1978) 81 Cal.App.3rd 564, 575.).

1 **COST RECOVERY**

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

8 **FIRST CAUSE FOR DISCIPLINE**

9 **(Gross Negligence)**

10 12. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
11 section 2234, subdivision (b), of the Code in that she was grossly negligent in connection with her
12 care and treatment of Patients C, D, E, and F.¹ The circumstances are as follows:

13 **Patient C**

14 13. Respondent treated Patient C, a 36-year-old female, during patient encounters on or
15 about each of the following dates: January 10, 2018; August 1, 2018; September 24, 2018; May
16 14, 2019; March 11, 2020; and November 16, 2020.

17 14. In a chart note dated September 24, 2018, Respondent documented that Patient C had
18 been treated for surveillance of an ovarian cyst and possible skin tag, and that the patient wanted
19 to test for sexually transmitted diseases (STD). According to billing records, Respondent billed
20 Patient C's health insurer approximately \$3,400 for this encounter, using CPT code² 99213 and
21 15 other CPT codes corresponding to various laboratory tests involving screening, cultures or
22 detection tests. Respondent received payment from Patient C's health insurer for a portion of
23 these charges, including for some of the CPT codes corresponding to laboratory tests.
24 Respondent failed to document any clinical justification for obtaining these tests or cultures (other

25
26 ¹ The patients are identified by letters in this First Amended Accusation to address privacy concerns.

27 ² Current Procedural Terminology (CPT) refers to a set of medical codes used by
28 physicians and health professionals to describe the procedures and services they perform. CPT codes are used to report procedures and services to federal and private payers for reimbursement of rendered healthcare.

1 than the patient "wants" STD testing), particularly when Patient C underwent STD testing eight
2 months prior, on or about January 10, 2018. Furthermore, there is no evidence that Respondent
3 ordered testing of any cultures or sent a swab for testing of such cultures.

4 15. Respondent committed gross negligence when she billed Patient C's health insurer
5 for laboratory services for which no justification was documented or indicated, and that were
6 never ordered, sent to a lab, or for which results were received.

7 **Patient D**

8 16. On or about December 22, 2021, Respondent saw Patient D, a 27-year-old female, for
9 an "annual exam." This was the only time Respondent saw Patient D. Patient D reported a
10 history of intermenstrual spotting the previous month. Respondent performed a physical
11 examination of Patient D, however, she failed to record Patient D's weight, heart rate, and
12 temperature. Respondent's note for this visit is largely illegible. On or about July 24, 2023,
13 Board representatives interviewed Respondent regarding her treatment of Patient D, during which
14 she could not decipher her own writing on portions of the chart. During the December 22, 2021
15 visit, Respondent performed a transvaginal ultrasound. However, Respondent failed to document
16 a clinical indication for the ultrasound and her documentation of the ultrasound is incomplete.
17 The components of a transvaginal ultrasound include examination and documentation of the
18 uterus and both ovaries. Respondent failed to document her findings regarding Patient D's uterus
19 and right ovary from the ultrasound examination.

20 17. Although Patient D treated with Respondent on only one occasion, Respondent's
21 billing ledger reveals billing activity for two dates of service, namely, December 22, 2021 and
22 December 27, 2021. There are no medical records that correspond to a December 27, 2021 date
23 of service. According to billing records, Respondent billed Patient D's health insurer
24 approximately \$1,800 for the nonexistent December 27, 2021 patient encounter, using seven
25 different CPT codes corresponding to various laboratory tests involving screening, cultures or
26 detection tests. Respondent received payment from Patient D's health insurer for a portion of
27 these charges. There is no evidence that, with respect to Patient D, Respondent ordered testing of
28 any cultures or sent a swab for testing of such cultures.

1 18. Respondent committed gross negligence when she billed Patient D's health insurer
2 for laboratory services for which no justification was documented or indicated, and that were
3 never ordered, sent to a lab, or for which results were received.

4 **Patient E**

5 19. Patient E, a 35-year-old female, treated with Respondent from on or about August 22,
6 2017 until November 16, 2021, for gynecological services.

7 20. On or about August 1, 2019, Respondent saw Patient E for an "annual exam."
8 According to billing records, Respondent billed Patient E's health insurer approximately \$2,350
9 for this encounter using the CPT code for an ultrasound examination and ten different CPT codes
10 corresponding to various laboratory tests involving screening, cultures or detection tests.
11 Respondent received payment from Patient E's health insurer for a portion of these charges.
12 There is no evidence that, with respect to Patient E, Respondent performed an ultrasound
13 examination, ordered testing of any cultures, or sent a swab for testing of such cultures.

14 21. According to billing records, Respondent billed Patient E's health insurer for a date of
15 service of August 15, 2019. However, there are no medical records that correspond to an August
16 15, 2019 date of service. Respondent received payment from Patient E's health insurer for the
17 nonexistent August 15, 2019 patient encounter.

18 22. On or about September 1, 2020, Respondent saw Patient E for an "annual exam."
19 According to billing records, Respondent billed Patient E's health insurer approximately \$1,600
20 for this encounter using seven different CPT codes corresponding to various laboratory tests
21 involving screening, cultures or detection tests. Respondent received payment from Patient E's
22 health insurer for a portion of these charges. There is no evidence that, with respect to Patient E,
23 Respondent ordered testing of any cultures, or sent a swab for testing of such cultures.

24 23. Following Patient E's last visit with Respondent on or about November 16, 2021,
25 Patient E wrote an email to Respondent with concerns about her treatment. In the subsequent
26 months, Patient E followed up regarding her inquiry with Respondent multiple times via email
27 and never received a response from Respondent.

28 24. Respondent committed gross negligence on each occasion when she billed Patient E's

1 health insurer for care or laboratory services for which no justification was documented or
2 indicated, and that were never ordered, sent to a lab, or for which results were received.

3 25. Respondent committed gross negligence when she failed to adequately document
4 with respect to Patient E, her patient encounter on or about August 1, 2019, the clinical indication
5 for the ultrasound examination, characteristics of the ovaries, and measurement of the
6 endometrial stripe.

7 **Patient F**

8 26. On or about February 3, 2021, Patient F, a 31-year-old female who had been trying to
9 conceive, initiated care with Respondent for gynecological services, with no specific complaints.
10 Approximately five days later, on or about February 8, 2021, Patient F returned to Respondent's
11 office and underwent an ultrasound examination, which revealed right and left ovarian cysts.
12 Respondent's note for this visit is largely illegible and Respondent's documentation of the
13 ultrasound lacks adequate detail, including measurements (e.g., millimeters vs. centimeters) and
14 comments about the sonolucency³ and Patient F's uterus. According to Respondent's chart note
15 dated February 8, 2021, Respondent ordered an Anti-Mullerian Hormone (AMH) test and a
16 "hormone panel" for Patient F, however, Respondent failed to document which hormones of
17 Patient F were going to be checked. Respondent's chart notes for the visit with Patient F on or
18 about February 8, 2021 also failed to include the results of an AMH test or a hormone panel.

19 27. On or about November 8, 2021, Respondent saw Patient F for an initial prenatal visit.
20 An ultrasound examination of Patient F revealed a gestational sac and yolk sac, but no fetus.
21 Respondent ordered a quantitative beta human chorionic gonadotropin (hCG) test that same day,
22 which was repeated on or about November 10, 2021. A decreasing hCG level confirmed that
23 Patient F had a non-viable pregnancy. Respondent's medical records in connection with this visit
24 on or about November 8, 2021 failed to include an image of the ultrasound taken on the same
25 date. Respondent's note for this visit also failed to document a discussion of the management
26 options for the treatment of Patient F's non-viable first trimester pregnancy, including the option

27
28 ³ Sonolucency is a term used to describe tissue or structures that allow sound waves to
pass through with little reflection. On an ultrasound, sonolucent areas appear dark gray or black.

1 of medical management.

2 28. Respondent committed gross negligence when she failed to adequately document the
3 elements of the ultrasound taken on or about February 8, 2021.

4 29. Respondent committed gross negligence when she failed to inform Patient F of the
5 option of medical management of the non-viable first trimester pregnancy.

6 30. According to billing records, for the service date of February 8, 2021, Respondent
7 billed Patient F's health insurer for various laboratory tests involving hormones. There is no
8 evidence that, with respect to Patient F, Respondent ordered testing of these hormones and there
9 is no documentation of any results from such testing. Respondent committed gross negligence
10 when she billed Patient F's health insurer for laboratory services that were never ordered, or the
11 results of which were never sent to a lab, or for which results were received.

12 **SECOND CAUSE FOR DISCIPLINE**

13 **(Repeated Negligent Acts)**

14 31. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
15 section 2234, subdivision (c), of the Code in that she committed repeated negligent acts in
16 connection with her provision of medical services to Patients C, D, E, and F. The circumstances
17 are as follows:

18 32. The facts and allegations of the First Cause for Discipline are incorporated herein by
19 reference as if fully set forth. Each allegation of gross negligence in the First Cause for
20 Discipline also constitutes a negligent act.

21 **Patient D**

22 33. Respondent also committed negligence when she failed to adequately document
23 Patient D's uterus and right ovary after performing an ultrasound examination.

24 34. The general illegibility of Respondent's medical records for Patient D also constitutes
25 negligence.

26 **Patient F**

27 35. Respondent also committed negligence when she failed to document which hormones
28 were being checked when she allegedly ordered a hormone panel for Patient F on or about

1 February 8, 2021.

2 36. Respondent also committed negligence when she failed to retain an image of the
3 ultrasound performed on or about November 8, 2021, in Patient F's chart.

4 **THIRD CAUSE FOR DISCIPLINE**

5 **(Inadequate and Inaccurate Medical Record Keeping)**

6 37. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
7 section 2266 of the Code in that she failed to maintain adequate and accurate records relating to
8 the provision of medical services to Patients C, D, E, and F. The circumstances are as follows:

9 38. The facts and allegations of the First and Second Causes for Discipline, inclusive, are
10 incorporated herein by reference as if fully set forth.

11 **FOURTH CAUSE FOR DISCIPLINE**

12 **(Dishonesty, Misrepresentations, and Insurance Fraud)**

13 39. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
14 sections 2234, subdivision (e), 2261, and 810, of the Code in that she committed dishonesty,
15 made misrepresentations, and/or knowingly presented or caused to be presented false or
16 fraudulent claims to Patients C, D, E, and F's health insurers. The circumstances are as follows:

17 40. The facts and allegations of the First and Second Causes for Discipline, inclusive, are
18 incorporated herein by reference as if fully set forth.

19 **FIFTH CAUSE FOR DISCIPLINE**

20 **(General Unprofessional Conduct)**

21 41. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
22 section 2234 of the Code in that Respondent committed general unprofessional conduct, which
23 breaches the rules or ethical code of the medical profession or conduct which is unbecoming to a
24 member in good standing of the medical profession, and which demonstrates an unfitness to
25 practice medicine. The circumstances are as follows:

26 42. The allegations of the First, Second, Third, and Fourth Causes for Discipline,
27 inclusive, are incorporated herein by reference as if fully set forth.

28 ///

1 **DISCIPLINARY CONSIDERATIONS**

2 43. To determine the degree of discipline, if any, to be imposed on Respondent Tristan
3 Emily Bickman, M.D., Complainant alleges that on or about August 27, 2020, in a prior
4 disciplinary action titled, *In the Matter of the First Amended Accusation Against Tristan Emily*
5 *Bickman, M.D.*, before the Medical Board of California, in Case Number 800-2017-037828,
6 Respondent's license was publicly reprimanded for Repeated Negligent Acts and Failing to
7 Maintain Adequate Records. That decision is now final and is incorporated by reference as if
8 fully set forth herein.

9 **PRAYER**

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

- 12 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 61840,
13 issued to Respondent Tristan Emily Bickman, M.D.;
- 14 2. Revoking, suspending or denying approval of Respondent Tristan Emily Bickman,
15 M.D.'s authority to supervise physician assistants and advanced practice nurses;
- 16 3. Ordering Respondent Tristan Emily Bickman, M.D., to pay the Board the costs of the
17 investigation and enforcement of this case, and if placed on probation, the costs of probation
18 monitoring; and
- 19 4. Taking such other and further action as deemed necessary and proper.
- 20

21 DATED: JAN 17 2025

22 JENNA JONES FOR
23 REJI VARGHESE
24 Executive Director
25 Medical Board of California
26 Department of Consumer Affairs
27 State of California
28 Complainant

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Exhibit D

First Amended Accusation No. 800-2022-086840

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7 *Attorneys for Complainant*

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

11 In the Matter of the First Amended Accusation
Against:

Case No. 800-2022-086840

FIRST AMENDED ACCUSATION

12 **Tristan Emily Bickman, M.D.**
13 **1304 15th Street, Suite 100**
Santa Monica, CA 90404-1810

14 **Physician's and Surgeon's Certificate**
15 **No. A 61840,**

Respondent.

16
17 **PARTIES**

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

21 2. On or about March 21, 1997, the Board issued Physician's and Surgeon's Certificate
22 Number A 61840 to Tristan Emily Bickman, M.D. (Respondent). The Physician's and Surgeon's
23 Certificate was in full force and effect at all times relevant to the charges brought herein and will
24 expire on August 31, 2026, unless renewed.

25 **JURISDICTION**

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

appropriate for that negligent diagnosis of the patient shall constitute a single negligent act.

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

....

7. Section 2266 of the Code states:

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

COST RECOVERY

8. Section 125.3 of the Code states:

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

(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.

(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 designated representative shall be prima facie evidence of reasonable costs of investigation and prosecution of the case. The costs shall include the amount of investigative and enforcement costs up to the date of the hearing, including, but not limited to, charges imposed by the Attorney General.

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

(e) If an order for recovery of costs is made and timely payment is not made as 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 the board may have as to any licensee to pay costs.

(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.

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

under this section.

(2) Notwithstanding paragraph (1), the board may, in its discretion, 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 with the board to reimburse the board within that one-year period for the unpaid costs.

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

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

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

FIRST CAUSE FOR DISCIPLINE

(Gross Negligence)

9. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under section 2234, subdivision (b), of the Code, in that she committed gross negligence in connection with her provision of medical services to Patients 1 and 2.¹ The circumstances are as follows:

Patient 1

10. On or about March 11, 2022, Respondent saw Patient 1, a 24-year-old female, for the first (and last) time, for an initial well woman exam with no specific complaints.² Patient 1 reported taking birth control pills and spironolactone (50 mg daily). Respondent failed to document who prescribed these medications to Patient 1, the condition the medications were intended to treat, and the length of time Patient 1 had been taking these medications.

11. During the March 11, 2022 visit, Respondent performed a pap smear test and a transvaginal ultrasound, and Patient 1's blood was drawn. Respondent failed to document a clinical indication for the ultrasound and her documentation of the ultrasound findings are illegible. Respondent's medical records in connection with this visit also failed to include an image of the ultrasound taken on the same date. Respondent also failed to document why thyroid function tests and multiple female hormone assays were ordered.

¹ The patients are referred to by numbers in this First Amended Accusation to address privacy concerns.

² Patient 1 did not return to Respondent after the initial visit.

1 12. Laboratory results based on the samples taken from Patient 1 during her March 11,
2 2022 patient encounter revealed findings out of the normal range (including, for example, with
3 respect to the presence of ureaplasma parvum bacteria and Group B Streptococcus in the vagina).
4 There is no evidence that Respondent communicated the laboratory findings to Patient 1.

5 13. Respondent committed gross negligence when she failed to communicate or discuss
6 the laboratory findings with Patient 1.

7 **Patient 2**

8 14. On or about February 25, 2022, Respondent saw Patient 2, a 35-year-old female, for
9 an annual exam and consultation regarding an Intrauterine Device (IUD) replacement.
10 Respondent noted that Patient 2 had an IUD inserted in February 2017 (by another physician).
11 Patient 2 reported taking spironolactone and valcyclovir. Respondent failed to document who
12 prescribed these medications to Patient 2, the condition the medications were intended to treat,
13 and the length of time Patient 2 had been taking these medications.

14 15. During the February 25, 2022 visit, Respondent performed a pap smear test and a
15 transvaginal ultrasound, and Patient 2's blood was drawn for tests that Respondent indicated were
16 required before the IUD insertion. Respondent's medical records in connection with this visit
17 failed to include an image of the ultrasound taken on the same date. Respondent failed to
18 document which laboratory tests were ordered, and Respondent's medical records for Patient 2
19 did not contain a copy of the laboratory test results.

20 16. Respondent ordered an IUD for Patient 2 that was paid for by Patient 2's health
21 insurance company, however, Patient 2 chose not to return to Respondent for insertion of the
22 IUD. Respondent failed to document the disposition of the IUD that was intended to be used on
23 Patient 2 (e.g., returned to pharmacy or insurance company).

24 17. Respondent committed gross negligence when she failed to maintain adequate and
25 accurate medical records in connection with her care for Patient 2, including without limitation,
26 when she: (a) failed to include a copy of the results of the laboratory tests ordered for Patient 2,
27 i.e., the findings; and (b) failed to document the disposition of the IUD designated for Patient 2.

28 ///

1 **SECOND CAUSE FOR DISCIPLINE**

2 **(Repeated Negligent Acts)**

3 18. Respondent Tristan Emily Bickman, M.D. is subject to disciplinary action under
4 section 2234, subdivision (c), of the Code, in that she committed repeated negligent acts in
5 connection with her provision of medical services to Patients 1 and 2. The circumstances are as
6 follows:

7 19. The facts and allegations of the First Cause for Discipline are incorporated herein by
8 reference as if fully set forth. Each allegation of gross negligence in the First Cause for
9 Discipline also constitutes a negligent act. In addition, Respondent committed the following
10 negligence:

11 **Patient 1**

12 20. Respondent's treatment of Patient 1 includes the following acts and/or omissions
13 which constitute repeated negligent acts:

- 14 a. Respondent failed to adequately document the clinical indications for the
15 prescription for spironolactone issued to Patient 1;
16 b. Respondent failed to adequately document a clinical indication for her order of a
17 transvaginal ultrasound;
18 c. Respondent failed to include an image of the ultrasound taken on or about March
19 11, 2022; and
20 d. Respondent failed to adequately document the transvaginal ultrasound findings
21 taken on or about March 11, 2022, including, without limitation, when she wrote
22 illegible notes into the chart.

23 **Patient 2**

24 21. Respondent's treatment of Patient 2 includes the following acts and/or omissions
25 which constitute repeated negligent acts:

- 26 a. Respondent failed to adequately document the clinical indications for the
27 prescription for spironolactone issued to Patient 2;
28 b. Respondent failed to include an image of the ultrasound taken on or about

1 February 25, 2022; and

2 c. Respondent failed to document which laboratory tests were ordered for Patient 2.

3 **THIRD CAUSE FOR DISCIPLINE**

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

5 22. Respondent is subject to disciplinary action under section 2266 of the Code, in that
6 she failed to maintain adequate and accurate records concerning the care and treatment of
7 Patients 1 and 2. The circumstances are as follows:

8 23. The allegations of the First and Second Causes for Discipline are incorporated by
9 reference herein as if set forth in full.

10 **DISCIPLINARY CONSIDERATIONS**

11 24. To determine the degree of discipline, if any, to be imposed on Respondent Tristan
12 Emily Bickman, M.D., Complainant alleges that on or about August 27, 2020, in a prior
13 disciplinary action titled, *In the Matter of the First Amended First Amended Accusation Against*
14 *Tristan Emily Bickman, M.D.*, before the Medical Board of California, in Case Number 800-
15 2017-037828, Respondent's license was publicly reprimanded for Repeated Negligent Acts and
16 Failing to Maintain Adequate Records. That decision is now final and is incorporated by
17 reference as if fully set forth herein.

18 **PRAYER**

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

21 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 61840,
22 issued to Respondent Tristan Emily Bickman, M.D.;

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

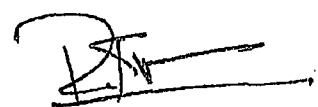
25 3. Ordering Respondent Tristan Emily Bickman, M.D., to pay the Board the costs of the
26 investigation and enforcement of this case, and if placed on probation, the costs of probation
27 monitoring; and

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

DATED: APR 14 2025



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

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