

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

In the Matter of the Accusation Against:

Adam Schwartz, M.D.

Physician's & Surgeon's
Certificate No. A 117612

Respondent.

Case No. 800-2022-088431

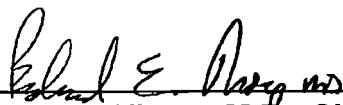
DECISION

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 13, 2025.

IT IS SO ORDERED: July 14, 2025.

MEDICAL BOARD OF CALIFORNIA


Richard E. Thorp, M.D., Chair
Panel B

1 ROB BONTA
2 Attorney General of California
3 ALEXANDRA M. ALVAREZ
4 Supervising Deputy Attorney General
5 KEITH C. SHAW
6 Deputy Attorney General
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Attorneys for Complainant

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

13 In the Matter of the Accusation Against:

Case No. 800-2022-088431

14 ADAM SCHWARTZ, M.D.
4647 Zion Ave
15 San Diego, CA 92120-2507

OAH No. 2024100208

16 Physician's and Surgeon's Certificate No.
A 117612

STIPULATED SETTLEMENT AND DISCIPLINARY ORDER

Respondent.

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

PARTIES

22 1. Reji Varghese (Complainant) is the Executive Director of the Medical Board of
23 California (Board). He brought this action solely in his official capacity and is represented in this
24 matter by Rob Bonta, Attorney General of the State of California, by Keith C. Shaw, Deputy
25 Attorney General.

26 2. Respondent Adam Schwartz, M.D. (Respondent) is represented in this proceeding by
27 attorney Lindsay M. Johnson, Esq., whose address is: 4100 Newport Place, Suite 670, Newport
28 Beach, CA 92660-2463.

3. On or about July 20, 2011, the Board issued Physician's and Surgeon's Certificate No. A 117612 to Respondent Adam Schwartz, M.D. The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2022-088431, and will expire on November 30, 2026, unless renewed.

JURISDICTION

4. Accusation No. 800-2022-088431 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 August 27, 2024. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2022-088431 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. 800-2022-088431. 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. 800-2022-088431, if proven at a hearing, constitute cause for imposing discipline upon his Physician's and Surgeon's Certificate.

10. For the purpose of resolving the Accusation without the expense and uncertainty of further proceedings, Respondent gives up his right to contest that, at a hearing, Complainant could establish a *prima facie* case with respect to the charges and allegations contained in the Accusation.

11. Respondent agrees that if an accusation is ever filed against him before the Medical Board of California, all of the charges and allegations contained in Accusation No. 800-2022-088431 shall be deemed true, correct, and fully admitted by Respondent for purposes of that proceeding or any other licensing proceeding involving Respondent in the State of California.

12. Respondent agrees that his Physician's and Surgeon's Certificate No. A 117612 is subject to discipline and he agrees to be bound by the Board's imposition of discipline as set forth in the Disciplinary Order below.

CONTINGENCY

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

ADDITIONAL PROVISIONS

14. This Stipulated Settlement and Disciplinary Order is intended by the parties herein to be an integrated writing representing the complete, final, and exclusive embodiment of the agreements of the parties in the above-entitled matter.

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15. The parties agree that copies of this Stipulated Settlement and Disciplinary Order, including copies of the signatures of the parties, may be used in lieu of original documents and signatures and, further, that such copies shall have the same force and effect as originals.

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

DISCIPLINARY ORDER

8 **IT IS HEREBY ORDERED** that Physician's and Surgeon's Certificate No. A 117612
9 issued to Respondent Adam Schwartz, M.D., shall be and is hereby publicly reprimanded
10 pursuant to California Business and Professions Code, section 2227, subdivision (a)(4). This
11 public reprimand, which is issued in connection to Respondent's care and treatment of Patient 1,
12 as set forth in Accusation No. 800-2022-088431, is as follows:

13 During Patient 1's Emergency Room visit on or about April 3, 2022, through April 4, 2022,
14 Respondent failed to perform an adequate and/or appropriate physical examination of
15 Patient 1 and failed to diagnose Patient 1's hip fracture.

A. EDUCATION COURSE.

17 Within 60 calendar days of the effective date of this Decision, Respondent shall submit to
18 the Board or its designee for its prior approval educational program(s) or course(s) which shall
19 not be less than 40 hours. The educational program(s) or course(s) shall be aimed at correcting
20 any areas of deficient practice or knowledge, and shall be Category I certified. The educational
21 program(s) or course(s) shall be at Respondent's expense and shall be in addition to the
22 Continuing Medical Education (CME) requirements for renewal of licensure.

23 Respondent shall submit a certification of successful completion to the Board or its
24 designee not later than 15 calendar days after successfully completing each course. Failure to
25 provide proof of successful completion to the Board or its designee within twelve (12) months of
26 the effective date of this Decision, unless the Board or its designee agrees in writing to an
27 extension of that time, shall constitute general unprofessional conduct and may serve as the
28 grounds for further disciplinary action.

1 **B. INVESTIGATION/ENFORCEMENT COST RECOVERY.**

2 Respondent is hereby ordered to reimburse the Board its costs of investigation and
3 enforcement, including, but not limited to, expert review, legal reviews, and investigation and
4 other costs, in the amount of \$26,367.00 (twenty-six thousand three-hundred and sixty-seven
5 dollars). Costs shall be payable to the Medical Board of California. Failure to pay such costs shall
6 be considered unprofessional conduct and may serve as the grounds for further disciplinary
7 action.

8 Payment must be made in full within 30 calendar days of the effective date of the Decision
9 and Order, or by a payment plan approved by the Medical Board of California. Any and all
10 requests for a payment plan shall be submitted in writing by Respondent to the Board. Failure to
11 comply with the payment plan shall be considered unprofessional conduct and may serve as the
12 grounds for further disciplinary action.

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

15 **C. FUTURE ADMISSIONS CLAUSE.**

16 If Respondent should ever apply or reapply for a new license or certification, or petition for
17 reinstatement of a license, by any other health care licensing action agency in the State of
18 California, all of the charges and allegations contained in Accusation No. 800-2022-088431 shall
19 be deemed to be true, correct, and admitted by Respondent for the purpose of any Statement of
20 Issues or any other proceeding seeking to deny or restrict license.

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ACCEPTANCE

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

8 | DATED: 4/23/25

ADAM SCHWARTZ, M.D.
Respondent

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

14 DATED: 04/23/2025

LINDSAY M. JOHNSON, ESQ.
Attorney for Respondent

ENDORSEMENT

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

DATED: 4/24/2025

Respectfully submitted,

ROB BONTA
Attorney General of California
ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General

Keith Shaw

KEITH C. SHAW
Deputy Attorney General
Attorneys for Complainant

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Stip Settlement and Disc Order - MBC-Osteopathic.docx

Exhibit A

Accusation No. 800-2022-088431

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2 Attorney General of California
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Attorneys for Complainant

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

13 In the Matter of the Accusation Against: Case No. 800-2022-088431
14 ADAM SCHWARTZ, M.D. ACCUSATION
15 4647 Zion Ave
San Diego, CA 92120-2507
16 Physician's and Surgeon's Certificate
17 No. A 117612.

Respondent.

PARTIES

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

24 2. On or about July 20, 2011, the Medical Board issued Physician's and Surgeon's
25 Certificate No. A 117612 to Adam Schwartz, 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 November 30, 2024, unless renewed.

28 | //

JURISDICTION

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

4. Section 2004 of the Code states:

The board shall have the responsibility for the following:

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

(b) The administration and hearing of disciplinary actions.

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

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

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

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5. Section 2220 of the Code states:

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

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.

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(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.

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STATUTORY PROVISIONS

7. Section 2234 of the Code states:

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

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

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

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

(2) When the standard of care requires a change in the diagnosis, act, or omission that constitutes the negligent act described in paragraph (1), including, but 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.

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COST RECOVERY

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

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DEFINITIONS

2 9. Unprofessional conduct under California Business and Professions Code section 2234
3 is conduct which breaches the rules or ethical code of the medical profession, or conduct which is
4 unbecoming a member in good standing of the medical profession, and which demonstrates an
5 unfitness to practice medicine. (*Shea v. Board of Medical Examiners* (1978) 81 Cal. App.3d 564,
6 575.)

FACTUAL ALLEGATIONS

8 10. Patient 1¹, an 83-year-old man, presented to the emergency room (“ER”) on or about
9 April 3, 2022 (“the ER visit”).

10 11. During the ER visit, Patient 1 was triaged by a nurse. In her note, the nurse
11 documented the following chief complaint:

12 LEG PROBLEM (Pt was weed whacking this morning when he tripped and struck
13 left hip on ground, denies LOC or head injury, denies blood thinners. Pt c/o left leg
pain. Pt states chronic left leg pain due to diabetes.)

12. Roughly an hour and a half later, a second nurse documented the following:

Pt states that while working on his weed eater in the driveway, he fell onto his left knee and was not able to get up. ... Pt fell around 1300 and crawled to the side of his house where he was on the ground until his wife came home at 1700 at which time EMS was activated and pt was brought to the ED. C/o pain to left leg from thigh radiating down to foot. Pt states that R/T pain he is not able to bear weight. Two small abrasions noted to bilateral knees. A&OX4 with no acute distress seen.

19 13. Respondent saw Patient 1 in the ER shortly after the patient's arrival. In his chart for
20 the ER visit, Respondent recorded the triage nurse history and included the verbatim phrase
21 "tripped and struck left hip on the ground." In his History of Present Illness section, Respondent
22 documented that Patient 1 struck his knee on concrete. Respondent neither mentioned nor refuted
23 the additional triage note history that Patient 1 had struck his hip. Respondent indicated, further,
24 that Patient 1 was reporting pain in the left knee with chronic baseline leg pain as well.

25 14. In his physical exam during the ER visit, Respondent documented generalized
26 tenderness, a lateral knee abrasion, but the chart contains no evidence of any hip exam. There is
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¹ Patient identity is known to all parties but not disclosed to protect their privacy.

1 no mention of the specific aspects of a hip exam such as range of motion, palpation, pelvic
2 stability, examination of the thigh, or assessment for local hip tenderness.

3 15. Diagnostically, the only imaging obtained at the ER visit was a knee series which was
4 read as negative for acute fracture. No imaging of Patient 1's hip was performed at that visit.

5 16. While in the ER, Patient 1 reportedly was unable to stand. A nurse documented at
6 20:16 that the pain in Patient 1's left thigh was too severe:

7 [Patient 1] is weak and had some difficulty getting from a lying position on the
8 gurney to sitting. He needed max assist from this RN to be able to sit at bedside.
9 When he attempted to stand, [Patient 1] nearly fell forward. This RN used max assist
to get him back into the gurney. [Patient 1] is too weak to stand at this time and
reports the pain to his left thigh to be too severe. [Respondent] notified.

10 17. Morphine was administered at 21:06, yet the pain continued such that more pain
11 medication was requested.

12 18. In a note timed 21:37 on April 3, a nurse notes that she again notified Respondent of
13 Patient 1's condition.

14 [Patient 1] requested that stronger pain medication be given before attempting to
15 ambulate. Morphine 4 mg IM given however with max assist, [Patient 1] was still
16 unable to ambulate. It was again difficult to get him to sit at the side of the bed.
Spouse also at bedside and agrees that [Patient 1] is obviously more weak than his
usual baseline. [Respondent] notified.

17 19. There is no documentation of a repeat physical exam of Patient 1 or any specific
18 evaluation of Patient 1's left thigh by Respondent.

19 20. In Respondent's electronic note dated April 4 at 01:35, under "Medical Decision
20 Making" Respondent documented:

21 The patient is an 83-year-old male who presents after a mechanical fall at home.
22 There is no evidence of fracture. The patient is hemodynamically stable at this time. It
23 should be noted that during the [patient's] emergency department stay his wife
presented to the emergency department. It became clear that the patient has been
24 having trouble with walking and strength over a period of many months or even a few
years. She states that he has not wanted to seek formal assistance/workup.

25 It was attempted to ambulate the patient. He is not able to ambulate. I performed
further evaluation. Once again the patient has no point tenderness. He appears to be
26 significantly deconditioned. I had a discussion with the patient and his wife regarding
further management. They are open to a skilled nursing facility.

27 Per case manager, the patient needs to stay in the emergency department overnight
28 and have an ambulation trial in the morning. He is to only take oral analgesics.
Percocet has been ordered. Skilled nursing facility orders are in a separate note.

1 21. As documented, Patient 1 failed an ambulation trial. Respondent's plan included that
2 Patient 1 stay overnight, perform a repeat ambulation trial, and transfer to a Skilled Nursing
3 Facility ("SNF").

4 22. Patient 1 failed the second ambulation trial and, per Respondent's initial plan, was
5 transferred to a SNF on or about April 4, 2022, for further care and management.

6 23. In the SNF, Patient 1 remained bedbound and unable to ambulate due to ongoing
7 issues with his left lower extremity. X-rays were eventually obtained of Patient 1's left hip, which
8 demonstrated a fracture.

9 24. Patient 1 was readmitted to hospital on or about April 7, 2022. The note by the ER
10 physician who cared for Patient 1 on his readmission documents:

11 [Patient 1] states since he has left the emergency department [on April 4] he has had
12 no further falls. ...

13 Tenderness to palpation over the left hip, leg appears shortened and externally
14 rotated, unable to range hip secondary to pain, dorsalis pedis 2+, sensation intact
distally dorsal, plantar, 1st dorsal webspace.

15 **FIRST CAUSE FOR DISCIPLINE**

16 **(Repeated Negligent Acts)**

17 25. Respondent is subject to disciplinary action under sections 2227 and 2234, as defined
18 by section 2234, subdivision (c), of the Code, in that he committed repeated negligent acts in his
19 care and treatment of Patient 1, as more particularly alleged in paragraphs 10 through 24, above,
20 which are hereby realleged and incorporated by this reference as if fully set forth herein, and
21 which include but are not limited to the following:

22 26. Respondent failed to perform an adequate and/or appropriate physical examination of
23 Patient 1 at or during his ER visit.

24 27. Respondent failed to diagnose Patient 1's hip fracture at or during his ER visit.

25 **SECOND CAUSE FOR DISCIPLINE**

26 **(General Unprofessional Conduct)**

27 28. Respondent is further subject to disciplinary action under 2234 of the Code in that he
28 has engaged in conduct which breaches the rules or ethical code of the medical profession, or

1 conduct that is unbecoming to a member in good standing of the medical profession, and which
2 demonstrates an unfitness to practice medicine, as more particularly alleged in paragraphs 10
3 through 27, above, which are hereby realleged and incorporated by this reference as if fully set
4 forth herein.

5 **PRAYER**

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

- 8 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 117612,
9 issued to Respondent Adam Schwartz, M.D.;
- 10 2. Revoking, suspending or denying approval of Respondent Adam Schwartz, M.D.'s
11 authority to supervise physician assistants and advanced practice nurses;
- 12 3. Ordering Respondent Adam Schwartz, M.D., to pay the Board the costs of the
13 investigation and enforcement of this case, and if placed on probation, the costs of probation
14 monitoring; and
- 15 4. Taking such other and further action as deemed necessary and proper.

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17 DATED: AUG 27 2024

Jenna Jones for
18 REJI VARGHESE
19 Executive Director
20 Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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