

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

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

Arash Malian Padidar, M.D.

**Physician's and Surgeon's
Certificate No. G 74857**

Case No.: 800-2022-093204

Respondent.

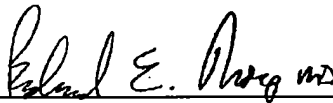
DECISION

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

This Decision shall become effective at 5:00 p.m. on August 27, 2025.

IT IS SO ORDERED: July 28, 2025.

MEDICAL BOARD OF CALIFORNIA



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

1 ROB BONTA
Attorney General of California
2 MACHAELA M. MINGARDI
Supervising Deputy Attorney General
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8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

11 In the Matter of the Accusation Against:

Case No. 800-2022-093204

12 **ARASH MALIAN PADIDAR, M.D.**
13 **105 N. Bascom Avenue, Suite 104**
San Jose, CA 95128-1811

OAH No. 2024120475

14 **Physician's and Surgeon's Certificate**
15 **No. G 74857**

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

16 Respondent.

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

20 **PARTIES**

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

25 2. Respondent Arash Malian Padidar, M.D. (Respondent) is represented in this
26 proceeding by attorney Thomas E. Still, Esq., whose address is: 12901 Saratoga Avenue
27 Saratoga CA 95070-4110.
28

1 3. On or about August 4, 1992, the Board issued Physician's and Surgeon's Certificate
2 No. G 74857 to Arash Malian Padidar, M.D.. The Physician's and Surgeon's Certificate was in
3 full force and effect at all times relevant to the charges brought in Accusation No. 800-2022-
4 093204, and will expire on April 30, 2026, unless renewed.

5 **JURISDICTION**

6 4. Accusation No. 800-2022-093204 was filed before the Board and is currently pending
7 against Respondent. The Accusation and all other statutorily required documents were properly
8 served on Respondent on August 18, 2023. Respondent timely filed his Notice of Defense
9 contesting the Accusation.

10 5. A copy of Accusation No. 800-2022-093204 is attached as Exhibit A and
11 incorporated herein by reference.

12 **ADVISEMENT AND WAIVERS**

13 6. Respondent has carefully read, fully discussed with counsel, and understands the
14 charges and allegations in Accusation No. 800-2022-093204. Respondent has also carefully read,
15 fully discussed with his counsel, and understands the effects of this Stipulated Settlement and
16 Disciplinary Order.

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

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

25 **CULPABILITY**

26 9. Respondent understands and agrees that the charges and allegations in Accusation
27 No. 800-2022-093204, if proven at a hearing, constitute cause for imposing discipline upon his
28 Physician's and Surgeon's Certificate.

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

11. Respondent does not contest that, at an administrative hearing, Complainant could establish a prima facie case with respect to the charges and allegations in Accusation No. 800-2022-093204, a true and correct copy of which is attached hereto as Exhibit A, and that he has thereby subjected his Physician's and Surgeon's Certificate, No. G 74857 to disciplinary action.

12. ACKNOWLEDGMENT. Respondent acknowledges the Disciplinary Order below, requiring the disclosure of probation pursuant to Business and Professions Code section 2228.1, serves to protect the public interest.

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

CONTINGENCY

14. 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.

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

16. Respondent agrees that if he ever petitions for early termination or modification of probation, or if an accusation and/or petition to revoke probation is filed against him before the Board, all of the charges and allegations contained in Accusation No. 800-2022-093204 shall be deemed true, correct and fully admitted by respondent for purposes of any such proceeding or any other licensing proceeding involving Respondent in the State of California.

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

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

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G 74857 issued to Respondent ARASH MALIAN PADIDAR, M.D. is revoked. However, the revocation is stayed and Respondent is placed on probation for five (5) years on the following terms and conditions:

1. PATIENT DISCLOSURE. Before a patient's first visit following the effective date of this order and while the respondent is on probation, the respondent must provide all patients, or patient's guardian or health care surrogate, with a separate disclosure that includes the respondent's probation status, the length of the probation, the probation end date, all practice restrictions placed on the respondent by the board, the board's telephone number, and an explanation of how the patient can find further information on the respondent's probation on the respondent's profile page on the board's website. Respondent shall obtain from the patient, or the patient's guardian or health care surrogate, a separate, signed copy of that disclosure. Respondent shall not be required to provide a disclosure if any of the following applies: (1) The patient is unconscious or otherwise unable to comprehend the disclosure and sign the copy of the disclosure and a guardian or health care surrogate is unavailable to comprehend the disclosure and sign the copy; (2) The visit occurs in an emergency room or an urgent care facility or the visit is

1 unscheduled, including consultations in inpatient facilities; (3) Respondent is not known to the
2 patient until immediately prior to the start of the visit; (4) Respondent does not have a direct
3 treatment relationship with the patient.

4 2. CONTROLLED SUBSTANCES - SURRENDER OF DEA PERMIT. Respondent is
5 prohibited from practicing medicine until Respondent provides documentary proof to the Board
6 or its designee that Respondent's DEA permit has been surrendered to the Drug Enforcement
7 Administration for cancellation, together with any state prescription forms and all controlled
8 substances order forms. Thereafter, Respondent shall not reapply for a new DEA permit without
9 the prior written consent of the Board or its designee.

10 3. CONTROLLED SUBSTANCES - ABSTAIN FROM USE. Respondent shall abstain
11 completely from the personal use or possession of controlled substances as defined in the
12 California Uniform Controlled Substances Act, dangerous drugs as defined by Business and
13 Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not
14 apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide
15 illness or condition.

16 Within 15 calendar days of receiving any lawfully prescribed medications, Respondent
17 shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone
18 number; medication name, strength, and quantity; and issuing pharmacy name, address, and
19 telephone number.

20 4. ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from the
21 use of products or beverages containing alcohol.

22 5. PSYCHOTHERAPY. Within 60 calendar days of the effective date of this Decision,
23 Respondent shall submit to the Board or its designee for prior approval the name and
24 qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who
25 has a doctoral degree in psychology and at least five years of postgraduate experience in the
26 diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall
27 undergo and continue psychotherapy treatment, including any modifications to the frequency of
28 psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

1 The psychotherapist shall consider any information provided by the Board or its designee
2 and any other information the psychotherapist deems relevant and shall furnish a written
3 evaluation report to the Board or its designee. Respondent shall cooperate in providing the
4 psychotherapist with any information and documents that the psychotherapist may deem
5 pertinent.

6 Respondent shall have the treating psychotherapist submit quarterly status reports to the
7 Board or its designee. The Board or its designee may require Respondent to undergo psychiatric
8 evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of
9 probation, Respondent is found to be mentally unfit to resume the practice of medicine without
10 restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the
11 period of probation shall be extended until the Board determines that Respondent is mentally fit
12 to resume the practice of medicine without restrictions.

13 Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

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

24 The Board or its designee shall provide the approved monitor with copies of the Decision(s)
25 and Accusation(s), and a proposed monitoring plan. Within 15 calendar days of receipt of the
26 Decision(s), Accusation(s), and proposed monitoring plan, the monitor shall submit a signed
27 statement that the monitor has read the Decision(s) and Accusation(s), fully understands the role
28 of a monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor disagrees

1 with the proposed monitoring plan, the monitor shall submit a revised monitoring plan with the
2 signed statement for approval by the Board or its designee.

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

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

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

19 If the monitor resigns or is no longer available, Respondent shall, within 5 calendar days of
20 such resignation or unavailability, submit to the Board or its designee, for prior approval, the
21 name and qualifications of a replacement monitor who will be assuming that responsibility within
22 15 calendar days. If Respondent fails to obtain approval of a replacement monitor within 60
23 calendar days of the resignation or unavailability of the monitor, Respondent shall receive a
24 notification from the Board or its designee to cease the practice of medicine within three (3)
25 calendar days after being so notified. Respondent shall cease the practice of medicine until a
26 replacement monitor is approved and assumes monitoring responsibility.

27 In lieu of a monitor, Respondent may participate in a professional enhancement program
28 approved in advance by the Board or its designee that includes, at minimum, quarterly chart

1 review, semi-annual practice assessment, and semi-annual review of professional growth and
2 education. Respondent shall participate in the professional enhancement program at
3 Respondent's expense during the term of probation.

4 7. SOLO PRACTICE PROHIBITION. Respondent is prohibited from engaging in the
5 solo practice of medicine. Prohibited solo practice includes, but is not limited to, a practice
6 where: 1) Respondent merely shares office space with another physician but is not affiliated for
7 purposes of providing patient care, or 2) Respondent is the sole physician practitioner at that
8 location.

9 If Respondent fails to establish a practice with another physician or secure employment in
10 an appropriate practice setting within 60 calendar days of the effective date of this Decision,
11 Respondent shall receive a notification from the Board or its designee to cease the practice of
12 medicine within three (3) calendar days after being so notified. The Respondent shall not resume
13 practice until an appropriate practice setting is established.

14 If, during the course of the probation, the Respondent's practice setting changes and the
15 Respondent is no longer practicing in a setting in compliance with this Decision, the Respondent
16 shall notify the Board or its designee within five (5) calendar days of the practice setting change.
17 If Respondent fails to establish a practice with another physician or secure employment in an
18 appropriate practice setting within 60 calendar days of the practice setting change, Respondent
19 shall receive a notification from the Board or its designee to cease the practice of medicine within
20 three (3) calendar days after being so notified. The Respondent shall not resume practice until an
21 appropriate practice setting is established.

22 8. CLINICAL DIAGNOSTIC EVALUATIONS AND REPORTS: Within thirty (30)
23 calendar days of the effective date of this Decision, and on whatever periodic basis thereafter as
24 may be required by the Board or its designee, Respondent shall undergo and complete a clinical
25 diagnostic evaluation, including any and all testing deemed necessary, by a Board-appointed
26 board certified physician and surgeon. The examiner shall consider any information provided by
27 the Board or its designee and any other information he or she deems relevant, and shall furnish a
28 written evaluation report to the Board or its designee.

1 The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon
2 who holds a valid, unrestricted license, has three (3) years' experience in providing evaluations of
3 physicians and surgeons with substance abuse disorders, and is approved by the Board or its
4 designee. The clinical diagnostic evaluation shall be conducted in accordance with acceptable
5 professional standards for conducting substance abuse clinical diagnostic evaluations. The
6 evaluator shall not have a current or former financial, personal, or business relationship with
7 Respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and
8 independent evaluation. The clinical diagnostic evaluation report shall set forth, in the
9 evaluator's opinion, whether Respondent has a substance abuse problem, whether Respondent is a
10 threat to himself or herself or others, and recommendations for substance abuse treatment,
11 practice restrictions, or other recommendations related to Respondent's rehabilitation and ability
12 to practice safely. If the evaluator determines during the evaluation process that Respondent is a
13 threat to himself or herself or others, the evaluator shall notify the Board within twenty-four (24)
14 hours of such a determination.

15 In formulating his or her opinion as to whether Respondent is safe to return to either part-
16 time or full-time practice and what restrictions or recommendations should be imposed, including
17 participation in an inpatient or outpatient treatment program, the evaluator shall consider the
18 following factors: Respondent's license type; Respondent's history; Respondent's documented
19 length of sobriety (i.e., length of time that has elapsed since Respondent's last substance use);
20 Respondent's scope and pattern of substance abuse; Respondent's treatment history, medical
21 history and current medical condition; the nature, duration and severity of Respondent's
22 substance abuse problem or problems; and whether Respondent is a threat to himself or herself or
23 the public.

24 For all clinical diagnostic evaluations, a final written report shall be provided to the Board
25 no later than ten (10) days from the date the evaluator is assigned the matter. If the evaluator
26 requests additional information or time to complete the evaluation and report, an extension may
27 be granted, but shall not exceed thirty (30) days from the date the evaluator was originally
28 assigned the matter.

1 The Board shall review the clinical diagnostic evaluation report within five (5) business
2 days of receipt to determine whether Respondent is safe to return to either part-time or full-time
3 practice and what restrictions or recommendations shall be imposed on Respondent based on the
4 recommendations made by the evaluator. Respondent shall not be returned to practice until he or
5 she has at least thirty (30) days of negative biological fluid tests or biological fluid tests indicating
6 that he or she has not used, consumed, ingested, or administered to himself or herself a prohibited
7 substance, as defined in section 1361.51, subdivision (e), of Title 16 of the California Code of
8 Regulations.

9 Clinical diagnostic evaluations conducted prior to the effective date of this Decision shall
10 not be accepted towards the fulfillment of this requirement. The cost of the clinical diagnostic
11 evaluation, including any and all testing deemed necessary by the examiner, the Board or its
12 designee, shall be borne by the licensee.

13 Respondent shall not engage in the practice of medicine until notified by the Board or its
14 designee that he or she is fit to practice medicine safely. The period of time that Respondent is
15 not practicing medicine shall not be counted toward completion of the term of probation.
16 Respondent shall undergo biological fluid testing as required in this Decision at least two (2)
17 times per week while awaiting the notification from the Board if he or she is fit to practice
18 medicine safely.

19 Respondent shall comply with all restrictions or conditions recommended by the examiner
20 conducting the clinical diagnostic evaluation within fifteen (15) calendar days after being notified
21 by the Board or its designee.

22 9. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7)
23 days of the effective date of this Decision, Respondent shall provide to the Board the names,
24 physical addresses, mailing addresses, and telephone numbers of any and all employers and
25 supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's
26 worksite monitor, and Respondent's employers and supervisors to communicate regarding
27 Respondent's work status, performance, and monitoring.

28 For purposes of this section, "supervisors" shall include the Chief of Staff and Health or

1 Well Being Committee Chair, or equivalent, if applicable, when the Respondent has medical staff
2 privileges.

3 10. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to
4 biological fluid testing, at Respondent's expense, upon request of the Board or its designee.
5 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair
6 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall
7 make daily contact with the Board or its designee to determine whether biological fluid testing is
8 required. Respondent shall be tested on the date of the notification as directed by the Board or its
9 designee. The Board may order a Respondent to undergo a biological fluid test on any day, at
10 any time, including weekends and holidays. Except when testing on a specific date as ordered by
11 the Board or its designee, the scheduling of biological fluid testing shall be done on a random
12 basis. The cost of biological fluid testing shall be borne by the Respondent.

13 During the first year of probation, Respondent shall be subject to 52 to 104 random tests.
14 During the second year of probation and for the duration of the probationary term, up to five (5)
15 years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no
16 positive biological fluid tests in the previous five (5) consecutive years of probation, may testing
17 be reduced to one (1) time per month. Nothing precludes the Board from increasing the number
18 of random tests to the first-year level of frequency for any reason.

19 Prior to practicing medicine, Respondent shall contract with a laboratory or service,
20 approved in advance by the Board or its designee, that will conduct random, unannounced,
21 observed, biological fluid testing and meets all of the following standards:

22 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry
23 Association or have completed the training required to serve as a collector for the United
24 States Department of Transportation.

25 (b) Its specimen collectors conform to the current United States Department of
26 Transportation Specimen Collection Guidelines.

27 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published
28 by the United States Department of Transportation without regard to the type of test

- 1 administered.
- 2 (d) Its specimen collectors observe the collection of testing specimens.
- 3 (e) Its laboratories are certified and accredited by the United States Department of Health and
4 Human Services.
- 5 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day of
6 receipt and all specimens collected shall be handled pursuant to chain of custody procedures.
7 The laboratory shall process and analyze the specimens and provide legally defensible test
8 results to the Board within seven (7) business days of receipt of the specimen. The Board will
9 be notified of non-negative results within one (1) business day and will be notified of negative
10 test results within seven (7) business days.
- 11 (g) Its testing locations possess all the materials, equipment, and technical expertise necessary
12 in order to test Respondent on any day of the week.
- 13 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens for the
14 detection of alcohol and illegal and controlled substances.
- 15 (i) It maintains testing sites located throughout California.
- 16 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line
17 computer database that allows the Respondent to check in daily for testing.
- 18 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff
19 access to drug test results and compliance reporting information that is available 24 hours a day.
- 20 (l) It employs or contracts with toxicologists that are licensed physicians and have knowledge
21 of substance abuse disorders and the appropriate medical training to interpret and evaluate
22 laboratory biological fluid test results, medical histories, and any other information relevant to
23 biomedical information.
- 24 (m) It will not consider a toxicology screen to be negative if a positive result is obtained while
25 practicing, even if the Respondent holds a valid prescription for the substance.
- 26 Prior to changing testing locations for any reason, including during vacation or other travel,
27 alternative testing locations must be approved by the Board and meet the requirements above.
- 28 The contract shall require that the laboratory directly notify the Board or its designee of

1 non-negative results within one (1) business day and negative test results within seven (7)
2 business days of the results becoming available. Respondent shall maintain this laboratory or
3 service contract during the period of probation.

4 A certified copy of any laboratory test result may be received in evidence in any
5 proceedings between the Board and Respondent.

6 If a biological fluid test result indicates Respondent has used, consumed, ingested, or
7 administered to himself or herself a prohibited substance, the Board shall order Respondent to cease
8 practice and instruct Respondent to leave any place of work where Respondent is practicing medicine
9 or providing medical services. The Board shall immediately notify all of Respondent's employers,
10 supervisors and work monitors, if any, that Respondent may not practice medicine or provide medical
11 services while the cease-practice order is in effect.

12 A biological fluid test will not be considered negative if a positive result is obtained while
13 practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited
14 substance use exists, the Board shall lift the cease-practice order within one (1) business day.

15 After the issuance of a cease-practice order, the Board shall determine whether the positive
16 biological fluid test is in fact evidence of prohibited substance use by consulting with the
17 specimen collector and the laboratory, communicating with the licensee, his or her treating
18 physician(s), other health care provider, or group facilitator, as applicable.

19 For purposes of this condition, the terms "biological fluid testing" and "testing" mean the
20 acquisition and chemical analysis of a Respondent's urine, blood, breath, or hair.

21 For purposes of this condition, the term "prohibited substance" means an illegal drug, a
22 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by
23 Respondent and approved by the Board, alcohol, or any other substance the Respondent has been
24 instructed by the Board not to use, consume, ingest, or administer to himself or herself.

25 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited
26 substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the
27 Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to
28 any other terms or conditions the Board determines are necessary for public protection or to

1 enhance Respondent's rehabilitation.

2 11. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within thirty (30) days of
3 the effective date of this Decision, Respondent shall submit to the Board or its designee, for its
4 prior approval, the name of a substance abuse support group which he or she shall attend for the
5 duration of probation. Respondent shall attend substance abuse support group meetings at least
6 once per week, or as ordered by the Board or its designee. Respondent shall pay all substance
7 abuse support group meeting costs.

8 The facilitator of the substance abuse support group meeting shall have a minimum of three
9 (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed
10 or certified by the state or nationally certified organizations. The facilitator shall not have a
11 current or former financial, personal, or business relationship with Respondent within the last five
12 (5) years. Respondent's previous participation in a substance abuse group support meeting led by
13 the same facilitator does not constitute a prohibited current or former financial, personal, or
14 business relationship.

15 The facilitator shall provide a signed document to the Board or its designee showing
16 Respondent's name, the group name, the date and location of the meeting, Respondent's
17 attendance, and Respondent's level of participation and progress. The facilitator shall report any
18 unexcused absence by Respondent from any substance abuse support group meeting to the Board,
19 or its designee, within twenty-four (24) hours of the unexcused absence.

20 12. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty
21 (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or
22 its designee for prior approval as a worksite monitor, the name and qualifications of one or more
23 licensed physician and surgeon, other licensed health care professional if no physician and
24 surgeon is available, or, as approved by the Board or its designee, a person in a position of
25 authority who is capable of monitoring the Respondent at work.

26 The worksite monitor shall not have a current or former financial, personal, or familial
27 relationship with Respondent, or any other relationship that could reasonably be expected to
28 compromise the ability of the monitor to render impartial and unbiased reports to the Board or its

1 designee. If it is impractical for anyone but Respondent's employer to serve as the worksite monitor,
2 this requirement may be waived by the Board or its designee, however, under no circumstances shall
3 Respondent's worksite monitor be an employee or supervisee of the licensee.

4 The worksite monitor shall have an active unrestricted license with no disciplinary action
5 within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms and
6 conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth by the
7 Board or its designee.

8 Respondent shall pay all worksite monitoring costs.

9 The worksite monitor shall have face-to-face contact with Respondent in the work environment
10 on as frequent a basis as determined by the Board or its designee, but not less than once per week;
11 interview other staff in the office regarding Respondent's behavior, if requested by the Board or its
12 designee; and review Respondent's work attendance.

13 The worksite monitor shall verbally report any suspected substance abuse to the Board and
14 Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected
15 substance abuse does not occur during the Board's normal business hours, the verbal report shall be
16 made to the Board or its designee within one (1) hour of the next business day. A written report that
17 includes the date, time, and location of the suspected abuse; Respondent's actions; and any other
18 information deemed important by the worksite monitor shall be submitted to the Board or its designee
19 within 48 hours of the occurrence.

20 The worksite monitor shall complete and submit a written report monthly or as directed by
21 the Board or its designee which shall include the following: (1) Respondent's name and
22 Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3)
23 the worksite monitor's license number, if applicable; (4) the location or location(s) of the
24 worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the
25 names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance;
26 (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can
27 lead to suspected substance abuse by Respondent. Respondent shall complete any required
28 consent forms and execute agreements with the approved worksite monitor and the Board, or its

1 designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

2 If the worksite monitor resigns or is no longer available, Respondent shall, within five (5)
3 calendar days of such resignation or unavailability, submit to the Board or its designee, for prior
4 approval, the name and qualifications of a replacement monitor who will be assuming that
5 responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a
6 replacement monitor within sixty (60) calendar days of the resignation or unavailability of the
7 monitor, Respondent shall receive a notification from the Board or its designee to cease the
8 practice of medicine within three (3) calendar days after being so notified. Respondent shall
9 cease the practice of medicine until a replacement monitor is approved and assumes monitoring
10 responsibility.

11 13. VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING
12 LICENSEES . Failure to fully comply with any term or condition of probation is a violation of
13 probation.

14 A. If Respondent commits a major violation of probation as defined by section
15 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take
16 one or more of the following actions:

17 (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical
18 diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of
19 Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice
20 order issued by the Board or its designee shall state that Respondent must test negative for at least
21 a month of continuous biological fluid testing before being allowed to resume practice. For
22 purposes of determining the length of time a Respondent must test negative while undergoing
23 continuous biological fluid testing following issuance of a cease-practice order, a month is
24 defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until
25 notified in writing by the Board or its designee that he or she may do so.

26 (2) Increase the frequency of biological fluid testing.

27 (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or
28 other action as determined by the Board or its designee.

1 B. If Respondent commits a minor violation of probation as defined by section
2 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take
3 one or more of the following actions:

- 4 (1) Issue a cease-practice order;
- 5 (2) Order practice limitations;
- 6 (3) Order or increase supervision of Respondent;
- 7 (4) Order increased documentation;
- 8 (5) Issue a citation and fine, or a warning letter;
- 9 (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in
10 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of
11 Regulations, at Respondent's expense;
- 12 (7) Take any other action as determined by the Board or its designee.

13 C. Nothing in this Decision shall be considered a limitation on the Board's authority
14 to revoke Respondent's probation if he or she has violated any term or condition of probation. If
15 Respondent violates probation in any respect, the Board, after giving Respondent notice and the
16 opportunity to be heard, may revoke probation and carry out the disciplinary order that was
17 stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed
18 against Respondent during probation, the Board shall have continuing jurisdiction until the matter
19 is final, and the period of probation shall be extended until the matter is final.

20 14. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the
21 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
22 Chief Executive Officer at every hospital where privileges or membership are extended to
23 Respondent, at any other facility where Respondent engages in the practice of medicine,
24 including all physician and locum tenens registries or other similar agencies, and to the Chief
25 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
26 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15
27 calendar days.

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

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

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

7 17. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby
8 ordered to reimburse the Board its costs of investigation and enforcement, in the amount of
9 \$52,715.00 (fifty-two thousand and seven-hundred and fifteen dollars). Costs shall be payable to
10 the Medical Board of California. Failure to pay such costs shall be considered a violation of
11 probation.

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

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

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

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

23 19. GENERAL PROBATION REQUIREMENTS.

24 Compliance with Probation Unit

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

26 Address Changes

27 Respondent shall, at all times, keep the Board informed of Respondent's business and
28 residence addresses, email address (if available), and telephone number. Changes of such

addresses shall be immediately communicated in writing to the Board or its designee. Under no circumstances shall a post office box serve as an address of record, except as allowed by Business and Professions Code section 2021, subdivision (b).

Place of Practice

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

License Renewal

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

Travel or Residence Outside California

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

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

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

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

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

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

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

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

14 Periods of non-practice for a Respondent residing outside of California will relieve
15 Respondent of the responsibility to comply with the probationary terms and conditions with the
16 exception of this condition and the following terms and conditions of probation: Obey All Laws;
17 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or
18 Controlled Substances; and Biological Fluid Testing.

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

25 23. VIOLATION OF PROBATION. Failure to fully comply with any term or condition
26 of probation is a violation of probation. If Respondent violates probation in any respect, the
27 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and
28 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,

1 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have
2 continuing jurisdiction until the matter is final, and the period of probation shall be extended until
3 the matter is final.

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

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

19 26. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for
20 a new license or certification, or petition for reinstatement of a license, by any other health care
21 licensing action agency in the State of California, all of the charges and allegations contained in
22 Accusation No. 800-2022-093204 shall be deemed to be true, correct, and admitted by
23 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or
24 restrict license.

25 ACCEPTANCE

26 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
27 discussed it with my attorney, Thomas E. Still, Esq.. I understand the stipulation and the effect it
28 will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and


1 Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the
2 Decision and Order of the Medical Board of California.

3
4 DATED: 5/16/25


ARASH MALIAN PADIDAR, M.D.
Respondent

6 I have read and fully discussed with Respondent Arash Malian Padidar, M.D. the terms and
7 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
8 I approve its form and content.

9
10 DATED: 5.16.2025


THOMAS E. STILL, ESQ.
Attorney for Respondent

12
13 **ENDORSEMENT**

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

16
17 DATED: July 11, 2025

Respectfully submitted,

18 ROB BONTA
Attorney General of California
19 MACHAELA M. MINGARDI
Supervising Deputy Attorney General

20 *Caitlin Ross*

21 CAITLIN ROSS
22 Deputy Attorney General
Attorneys for Complainant

23
24 SF2023401090 / 44622532
25
26
27
28

Exhibit A

Accusation No. 800-2022-093204

1 ROB BONTA
Attorney General of California
2 GREG W. CHAMBERS
Supervising Deputy Attorney General
3 THOMAS OSTLY
Deputy Attorney General
4 State Bar No. 209234
455 Golden Gate Avenue, Suite 11000
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Telephone: (415) 510-3871
6 Facsimile: (415) 703-5480
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. 800-2022-093204

13 **ARASH MALIAN PADIDAR, M.D.**
105 N. Bascom Ave. Ste. 104
14 San Jose, CA 95128-1811

A C C U S A T I O N

15 **Physician's and Surgeon's Certificate**
16 **No. G 74857,**

Respondent.

17
18
19 **PARTIES**

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

23 2. On or about August 4, 1992, the Medical Board issued Physician's and Surgeon's
24 Certificate Number G 74857 to Arash Malian Padidar, M.D. (Respondent). The Physician's and
25 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
26 herein and will expire on April 30, 2024, unless renewed.

27 ///

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 2227 of the Business and Professions Code authorizes the Board to take action against a licensee by revoking, suspending for a period not to exceed one year, placing the license on probation and requiring payment of costs of probation monitoring, or taking such other action taken as the Board deems proper.

5. Section 2228.1 of the Code states.

(a) On and after July 1, 2019, except as otherwise provided in subdivision (c), the board and the Podiatric Medical Board of California shall require a licensee to provide a separate disclosure that includes the licensee's probation status, the length of the probation, the probation end date, all practice restrictions placed on the licensee by the board, the board's telephone number, and an explanation of how the patient can find further information on the licensee's probation on the licensee's profile page on the board's online license information internet web site, to a patient or the patient's guardian or health care surrogate before the patient's first visit following the probationary order while the licensee is on probation pursuant to a probationary order made on and after July 1, 2019, in any of the following circumstances:

(1) A final adjudication by the board following an administrative hearing or admitted findings or prima facie showing in a stipulated settlement establishing any of the following:

(A) The commission of any act of sexual abuse, misconduct, or relations with a patient or client as defined in Section 726 or 729.

(B) Drug or alcohol abuse directly resulting in harm to patients or the extent that such use impairs the ability of the licensee to practice safely.

(C) Criminal conviction directly involving harm to patient health.

(D) Inappropriate prescribing resulting in harm to patients and a probationary

1 period of five years or more.

2 (2) An accusation or statement of issues alleged that the licensee committed any
3 of the acts described in subparagraphs (A) to (D), inclusive, of paragraph (1), and a
4 stipulated settlement based upon a nolo contendere or other similar compromise that
5 does not include any prima facie showing or admission of guilt or fact but does
6 include an express acknowledgment that the disclosure requirements of this section
7 would serve to protect the public interest.

8 (b) A licensee required to provide a disclosure pursuant to subdivision (a) shall
9 obtain from the patient, or the patient's guardian or health care surrogate, a separate,
10 signed copy of that disclosure.

11 (c) A licensee shall not be required to provide a disclosure pursuant to
12 subdivision (a) if any of the following applies:

13 (1) The patient is unconscious or otherwise unable to comprehend the
14 disclosure and sign the copy of the disclosure pursuant to subdivision (b) and a
15 guardian or health care surrogate is unavailable to comprehend the disclosure and
16 sign the copy.

17 (2) The visit occurs in an emergency room or an urgent care facility or the visit
18 is unscheduled, including consultations in inpatient facilities.

19 (3) The licensee who will be treating the patient during the visit is not known to
20 the patient until immediately prior to the start of the visit.

21 (4) The licensee does not have a direct treatment relationship with the patient.

22 (d) On and after July 1, 2019, the board shall provide the following
23 information, with respect to licensees on probation and licensees practicing under
24 probationary licenses, in plain view on the licensee's profile page on the board's
25 online license information internet web site.

26 (1) For probation imposed pursuant to a stipulated settlement, the causes
27 alleged in the operative accusation along with a designation identifying those causes
28 by which the licensee has expressly admitted guilt and a statement that acceptance of

1 the settlement is not an admission of guilt.

2 (2) For probation imposed by an adjudicated decision of the board, the causes
3 for probation stated in the final probationary order.

4 (3) For a licensee granted a probationary license, the causes by which the
5 probationary license was imposed.

6 (4) The length of the probation and end date.

7 (5) All practice restrictions placed on the license by the board.

8 (e) Section 2314 shall not apply to this section.

9 6. Section 820 of the Code provides that whenever it appears that a licensee may be
10 unable to practice his or her profession safely as a result of mental illness or physical illness
11 affecting competency, the licensing agency may order an examination of licensee.

12 7. Section 822 of the Code provides that, if a licensing agency determines that a
13 licensee's ability to practice his or her profession safely is impaired because of mental or physical
14 illness affecting competency, the licensing agency may take action by revoking the licensee's
15 certificate or license, suspending the licensee's right to practice, placing the licensee on probation,
16 or taking such other action in relation to the licensee as the licensing agency in its discretion
17 deems proper.

18 COST RECOVERY

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

25 DEFINITIONS

26 9. Buprenorphine is a medication approved by the Food and Drug Administration
27 (FDA) to treat Opioid Use Disorder. Buprenorphine is a dangerous drug as defined in Business
28 and Professions Code section 4022, and is a schedule III narcotic analgesic.

10. Cocaine is a schedule II controlled substance pursuant to Health and Safety Code Section 11055(b)(2)(6) and dangerous drug pursuant to Business and Professions Code section 4022.

11. Norco, the trade name for hydrocodone w/APAP (hydrocodone with acetaminophen), is semisynthetic narcotic analgesic, a dangerous drug as defined in Business and Professions Code section 4022 of the Business and Professions Code, and a schedule II controlled substance and narcotic as defined by section 11055, subdivision (e) of the Health and Safety Code.

12. CURES “is California’s prescription drug monitoring program. By statute, every prescription of a Schedule II, III, or IV controlled substance must be logged in CURES, along with the patient’s name, address, telephone number, gender, date of birth, drug name, quantity, number of refills, and information about the prescribing physician and pharmacy. [Citation.]” (*Lewis v. Superior Court* (2017) 3 Cal.5th 561, 565 (*Lewis*)). The Board is authorized to access the CURES database (*id.* at p. 567), which is maintained by the California Department of Justice (*id.* at p. 566).

FACTS

13. On October 7, 2020, the United States Drug Enforcement Administration (DEA) executed a state search warrant at Respondent's residence and at his clinic. Cocaine was found at his home, and Respondent acknowledged using cocaine to stay awake, and then Norco afterwards.

14. When interviewed by the Medical Board on March 28, 2023, Respondent noted that codeine tolerance came about due to knee pain. When discussing his prescribing practice to patients, including family members, Respondent stated, in part:

"I wrote prescriptions for them which may have been appropriate at that time. However, as you know, we are here because I became dependent on codeine product and I then asked some of these folks who were family members, some were friends, would they help me, and you know, fill prescriptions for me on my behalf. And so, it was wrong of me, I did a stupid thing and a non-responsible thing, definitely, and I'm ashamed of it. But that's the explanation for why there is so many Norcos in the CURES that you see."

15. When discussing prescribing to Respondent's biological father, it was noted there were 25 prescriptions for Norco, amounting to 100 pills each prescription, written to the father under

1 another physician's name although that physician stated he had not written the prescriptions, and
2 would not write a prescription for 100 pills. Respondent stated he would take responsibility for
3 those prescriptions, but that it could have been done by a nurse to avoid prescriptions under the
4 same name. Respondent said his father had real pain issues and so the majority of the medication
5 probably went to his father rather than to him.

6 16. On May 7, 2023, Respondent underwent an evaluation by a Board appointed
7 psychiatrist. During the course of the examination, Respondent noted that after the raid at his
8 home by the DEA, Respondent sought treatment that included monitoring, counseling, education,
9 and medication support (buprenorphine), and he claims to have been in recovery since October
10 2020. Respondent also informed the Board appointed psychiatrist that at the time of the DEA
11 raid Respondent was using cocaine more regularly to see if he could substitute it for the opioids,
12 but did not like it.

13 17. In a report dated May 15, 2023, the Board appointed psychiatrist opined that
14 Respondent "clearly meets criteria for opioid use disorder." The Board appointed psychiatrist
15 further noted, "He does clearly meet criteria for an Opioid Use Disorder, Severe, which is
16 currently in Sustained Remission."

17 CAUSE FOR DISCIPLINE

18 (Impairment Affecting Competency)

19 18. The allegations of paragraphs 13 - 17 above are incorporated by reference as if set out
20 in full.

21 18. Respondent Arash Malian Padidar, M.D. is subject to disciplinary action under
22 Business and Professions Code sections 822, 2227, and 2228.1, in that due to a mental illness
23 (opioid use disorder), his ability to practice medicine safely is impaired.

24 PRAYER

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

27 1. Revoking or suspending Physician's and Surgeon's Certificate Number G 74857,
28 issued to Arash Malian Padidar, M.D.;

1 2. Revoking, suspending or denying approval of Arash Malian Padidar, M.D.'s authority
2 to supervise physician assistants and advanced practice nurses;

3 3. Ordering Arash Malian Padidar, M.D., to pay the Board the costs of the investigation
4 and enforcement of this case, and if placed on probation, the costs of probation monitoring;

5 4. Ordering Respondent Arash Malian Padidar, M.D., if placed on probation, to provide
6 patient notification in accordance with Business and Professions Code section 2228.1; and

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

8
9 DATED: **AUG 18 2023**

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