

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

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

Nathalie Mae Rubin, M.D.

**Physician's and Surgeon's
Certificate No. A 70668**

Case No.: 800-2022-092978

Respondent.

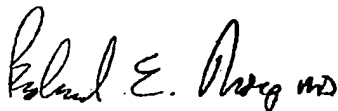
DECISION

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 September 5, 2025.

IT IS SO ORDERED: August 8, 2025.

MEDICAL BOARD OF CALIFORNIA



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

1 ROB BONTA
Attorney General of California
2 TESSA L. HEUNIS
Supervising Deputy Attorney General
3 CATHERINE B. KIM
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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:

12 **NATHALIE MAE RUBIN, M.D.**
13 **558 N. Ventu Park Rd, Suite D**
Thousand Oaks, CA 91320

14 **Physician's and Surgeon's Certificate**
15 **No. A 70668,**

16 Respondent.

Case No. 800-2022-092978

OAH No. 2024120126

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

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 Catherine B. Kim, Deputy
24 Attorney General.

25 2. Respondent Nathalie Mae Rubin, M.D. (Respondent) is represented in this
26 proceeding by attorney Raymond J. McMahon, Esq., whose address is: 5440 Trabuco Road,
27 Irvine, CA 92620.

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1 3. On or about January 14, 2000, the Board issued Physician's and Surgeon's Certificate
2 No. A 70668 to Nathalie Mae Rubin, M.D. (Respondent). The Physician's and Surgeon's
3 Certificate was in full force and effect at all times relevant to the charges brought in Accusation
4 No. 800-2022-092978, and will expire on January 31, 2026, unless renewed.

5 **JURISDICTION**

6 4. Accusation No. 800-2022-092978 was filed before the Board, and is currently
7 pending against Respondent. The Accusation and all other statutorily required documents were
8 properly served on Respondent on June 24, 2024. Respondent timely filed her Notice of Defense
9 contesting the Accusation.

10 5. A true and correct copy of Accusation No. 800-2022-092978 is attached as Exhibit A
11 and incorporated herein by reference.

12 **ADVISEMENT AND WAIVERS**

13 6. Respondent has carefully read, fully discussed with counsel, and fully understands the
14 charges and allegations in Accusation No. 800-2022-092978. Respondent has also carefully read,
15 fully discussed with her counsel, and fully understands the effects of this Stipulated Settlement
16 and Disciplinary Order.

17 7. Respondent is fully aware of her 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 her; the right to present evidence and to testify on her 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. Having the benefit of counsel, Respondent voluntarily, knowingly, and intelligently
24 waives and gives up each and every right set forth above.

25 **CULPABILITY**

26 9. Respondent admits the truth of each and every charge and allegation in Accusation
27 No. 800-2022-092978.

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10. Respondent agrees that her Physician's and Surgeon's Certificate No. A 70668 is subject to discipline and agrees to be bound by the Board's imposition of discipline as set forth in the Disciplinary Order below.

CONTINGENCY

11. 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 her counsel. By signing the stipulation, Respondent understands and agrees that she may not withdraw her 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.

12. 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.

13. Respondent agrees that if she ever petitions for early termination or modification of probation, or if an accusation and/or petition to revoke probation is filed against her before the Board, all of the charges and allegations contained in Accusation No. 800-2022-092978 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.

14. 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.

15. 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:

1 **DISCIPLINARY ORDER**

2 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 70668 issued
3 to Respondent NATHALIE MAE RUBIN, M.D. is revoked. However, the revocation is stayed
4 and Respondent is placed on probation for four (4) years from the effective date of the Decision
5 on the following terms and conditions:

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

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

16 2. **ALCOHOL - ABSTAIN FROM USE.** Respondent shall abstain completely from the
17 use of products or beverages containing alcohol.

18 3. **PROFESSIONALISM PROGRAM (ETHICS COURSE).** Within 60 calendar days of
19 the effective date of this Decision, Respondent shall enroll in a professionalism program, that
20 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1.
21 Respondent shall participate in and successfully complete that program. Respondent shall
22 provide any information and documents that the program may deem pertinent. Respondent shall
23 successfully complete the classroom component of the program not later than six (6) months after
24 Respondent's initial enrollment, and the longitudinal component of the program not later than the
25 time specified by the program, but no later than one (1) year after attending the classroom
26 component. The professionalism program shall be at Respondent's expense and shall be in
27 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

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

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

9 4. PSYCHIATRIC EVALUATION. Within 30 calendar days of the effective date of
10 this Decision, and on whatever periodic basis thereafter may be required by the Board or its
11 designee, Respondent shall undergo and complete a psychiatric evaluation (and psychological
12 testing, if deemed necessary) by a Board-appointed board certified psychiatrist, who shall
13 consider any information provided by the Board or designee and any other information the
14 psychiatrist deems relevant, and shall furnish a written evaluation report to the Board or its
15 designee. Psychiatric evaluations conducted prior to the effective date of the Decision shall not
16 be accepted towards the fulfillment of this requirement. Respondent shall pay the cost of all
17 psychiatric evaluations and psychological testing.

18 Respondent shall comply with all restrictions or conditions recommended by the evaluating
19 psychiatrist within 15 calendar days after being notified by the Board or its designee.

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

27 The psychotherapist shall consider any information provided by the Board or its designee
28 and any other information the psychotherapist deems relevant and shall furnish a written

1 evaluation report to the Board or its designee. Respondent shall cooperate in providing the
2 psychotherapist with any information and documents that the psychotherapist may deem
3 pertinent.

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

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

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

19 The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon
20 who holds a valid, unrestricted license, has three (3) years' experience in providing evaluations of
21 physicians and surgeons with substance abuse disorders, and is approved by the Board or its
22 designee. The clinical diagnostic evaluation shall be conducted in accordance with acceptable
23 professional standards for conducting substance abuse clinical diagnostic evaluations. The
24 evaluator shall not have a current or former financial, personal, or business relationship with
25 Respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and
26 independent evaluation. The clinical diagnostic evaluation report shall set forth, in the
27 evaluator's opinion, whether Respondent has a substance abuse problem, whether Respondent is a
28 threat to himself or herself or others, and recommendations for substance abuse treatment,

1 practice restrictions, or other recommendations related to Respondent's rehabilitation and ability
2 to practice safely. If the evaluator determines during the evaluation process that Respondent is a
3 threat to himself or herself or others, the evaluator shall notify the Board within twenty-four (24)
4 hours of such a determination.

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

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

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

27 Clinical diagnostic evaluations conducted prior to the issue date of this Decision shall not
28 be accepted towards the fulfillment of this requirement. The cost of the clinical diagnostic

1 evaluation, including any and all testing deemed necessary by the examiner, the Board or its
2 designee, shall be borne by the licensee.

3 Respondent shall not engage in the practice of medicine until notified by the Board or its
4 designee that he or she is fit to practice medicine safely. The period of time that Respondent is
5 not practicing medicine shall not be counted toward completion of the term of probation.

6 Respondent shall undergo biological fluid testing as required in this Decision at least two (2)
7 times per week while awaiting the notification from the Board if he or she is fit to practice
8 medicine safely.

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

12 7. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7)
13 days of the effective date of this Decision, Respondent shall provide to the Board the names,
14 physical addresses, mailing addresses, and telephone numbers of any and all employers and
15 supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's
16 worksite monitor, and Respondent's employers and supervisors to communicate regarding
17 Respondent's work status, performance, and monitoring.

18 For purposes of this section, "supervisors" shall include the Chief of Staff and Health or
19 Well Being Committee Chair, or equivalent, if applicable, when the Respondent has medical staff
20 privileges.

21 8. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to
22 biological fluid testing, at Respondent's expense, upon request of the Board or its designee.
23 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair
24 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall
25 make daily contact with the Board or its designee to determine whether biological fluid testing is
26 required. Respondent shall be tested on the date of the notification as directed by the Board or its
27 designee. The Board may order a Respondent to undergo a biological fluid test on any day, at
28 any time, including weekends and holidays. Except when testing on a specific date as ordered by

1 the Board or its designee, the scheduling of biological fluid testing shall be done on a random
2 basis. The cost of biological fluid testing shall be borne by the Respondent.

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

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

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

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

17 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published
18 by the United States Department of Transportation without regard to the type of test
19 administered.

20 (d) Its specimen collectors observe the collection of testing specimens.

21 (e) Its laboratories are certified and accredited by the United States Department of Health
22 and Human Services.

23 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day
24 of receipt and all specimens collected shall be handled pursuant to chain of custody
25 procedures. The laboratory shall process and analyze the specimens and provide legally
26 defensible test results to the Board within seven (7) business days of receipt of the
27 specimen. The Board will be notified of non-negative results within one (1) business day
28 and will be notified of negative test results within seven (7) business days.

- 1 (g) Its testing locations possess all the materials, equipment, and technical expertise
2 necessary in order to test Respondent on any day of the week.
- 3 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens
4 for the detection of alcohol and illegal and controlled substances.
- 5 (i) It maintains testing sites located throughout California.
- 6 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line
7 computer database that allows the Respondent to check in daily for testing.
- 8 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff
9 access to drug test results and compliance reporting information that is available 24 hours a
10 day.
- 11 (l) It employs or contracts with toxicologists that are licensed physicians and have
12 knowledge of substance abuse disorders and the appropriate medical training to interpret
13 and evaluate laboratory biological fluid test results, medical histories, and any other
14 information relevant to biomedical information.
- 15 (m) It will not consider a toxicology screen to be negative if a positive result is obtained
16 while practicing, even if the Respondent holds a valid prescription for the substance.

17 Prior to changing testing locations for any reason, including during vacation or other travel,
18 alternative testing locations must be approved by the Board and meet the requirements above.

19 The contract shall require that the laboratory directly notify the Board or its designee of
20 non-negative results within one (1) business day and negative test results within seven (7)
21 business days of the results becoming available. Respondent shall maintain this laboratory or
22 service contract during the period of probation.

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

25 If a biological fluid test result indicates Respondent has used, consumed, ingested, or
26 administered to himself or herself a prohibited substance, the Board shall order Respondent to
27 cease practice and instruct Respondent to leave any place of work where Respondent is practicing
28 medicine or providing medical services. The Board shall immediately notify all of Respondent's

1 employers, supervisors and work monitors, if any, that Respondent may not practice medicine or
2 provide medical services while the cease-practice order is in effect.

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

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

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

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

16 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited
17 substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the
18 Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to
19 any other terms or conditions the Board determines are necessary for public protection or to
20 enhance Respondent's rehabilitation.

21 9. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within thirty (30) days of
22 the effective date of this Decision, Respondent shall submit to the Board or its designee, for its
23 prior approval, the name of a substance abuse support group which he or she shall attend for the
24 duration of probation. Respondent shall attend substance abuse support group meetings at least
25 once per week, or as ordered by the Board or its designee. Respondent shall pay all substance
26 abuse support group meeting costs.

27 The facilitator of the substance abuse support group meeting shall have a minimum of three
28 (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed

1 or certified by the state or nationally certified organizations. The facilitator shall not have a
2 current or former financial, personal, or business relationship with Respondent within the last five
3 (5) years. Respondent's previous participation in a substance abuse group support meeting led by
4 the same facilitator does not constitute a prohibited current or former financial, personal, or
5 business relationship.

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

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

17 The worksite monitor shall not have a current or former financial, personal, or familial
18 relationship with Respondent, or any other relationship that could reasonably be expected to
19 compromise the ability of the monitor to render impartial and unbiased reports to the Board or its
20 designee. If it is impractical for anyone but Respondent's employer to serve as the worksite
21 monitor, this requirement may be waived by the Board or its designee, however, under no
22 circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

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

27 Respondent shall pay all worksite monitoring costs.

28 The worksite monitor shall have face-to-face contact with Respondent in the work

1 environment on as frequent a basis as determined by the Board or its designee, but not less than
2 once per week; interview other staff in the office regarding Respondent's behavior, if requested
3 by the Board or its designee; and review Respondent's work attendance.

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

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

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

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1 cease the practice of medicine until a replacement monitor is approved and assumes monitoring
2 responsibility.

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

6 A. If Respondent commits a major violation of probation as defined by section
7 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take
8 one or more of the following actions:

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

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

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

21 B. If Respondent commits a minor violation of probation as defined by section
22 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take
23 one or more of the following actions:

24 (1) Issue a cease-practice order;

25 (2) Order practice limitations;

26 (3) Order or increase supervision of Respondent;

27 (4) Order increased documentation;

28 (5) Issue a citation and fine, or a warning letter;

1 (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in
2 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of
3 Regulations, at Respondent's expense;

4 (7) Take any other action as determined by the Board or its designee.

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

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

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

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

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

27 15. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby
28 ordered to reimburse the Board its costs of investigation and enforcement, in the amount of

1 \$18,843.52 (eighteen thousand eight hundred forty-three dollars and fifty-two cents). Costs shall
2 be payable to the Medical Board of California. Failure to pay such costs shall be considered a
3 violation of probation.

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

8 The filing of bankruptcy by respondent shall not relieve respondent of the responsibility to
9 repay investigation and enforcement costs.

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

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

15 17. GENERAL PROBATION REQUIREMENTS.

16 Compliance with Probation Unit

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

18 Address Changes

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

24 Place of Practice

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

28 ///

1 License Renewal

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

4 Travel or Residence Outside California

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

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

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

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

28 ///

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

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

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

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

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

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

26 22. LICENSE SURRENDER. Following the effective date of this Decision, if
27 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
28 the terms and conditions of probation, Respondent may request to surrender his or her license.


1 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
2 determining whether or not to grant the request, or to take any other action deemed appropriate
3 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
4 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
5 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
6 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
7 application shall be treated as a petition for reinstatement of a revoked certificate.

8 23. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
9 with probation monitoring each and every year of probation, as designated by the Board, which
10 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
11 California and delivered to the Board or its designee no later than January 31 of each calendar
12 year.

13 24. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for
14 a new license or certification, or petition for reinstatement of a license, by any other health care
15 licensing action agency in the State of California, all of the charges and allegations contained in
16 Accusation No. 800-2022-092978 shall be deemed to be true, correct, and admitted by
17 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or
18 restrict license.


19 ACCEPTANCE

20 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
21 discussed it with my attorney, Raymond J. McMahon, Esq. I fully understand the stipulation and
22 the effect it will have on my Physician's and Surgeon's Certificate No. A 70668. Having the
23 benefit of counsel, I enter into this Stipulated Settlement and Disciplinary Order voluntarily,
24 knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical
25 Board of California.

26
27 DATED: 05-30-2025 
28 NATHALIE MAE RUBIN, M.D.
Respondent

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

4
5 DATED: May 30, 2025


6 RAYMOND J. MCMAHON, ESQ.
7 Attorney for Respondent

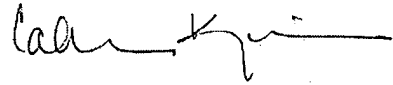
8 **ENDORSEMENT**

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

11 DATED: May 30, 2025

12 Respectfully submitted,

13 ROB BONTA
14 Attorney General of California
15 TESSA L. HEUNIS
16 Supervising Deputy Attorney General


17 CATHERINE B. KIM
18 Deputy Attorney General
19 Attorneys for Complainant

20 LA2024601754
21 67660118

Exhibit A

Accusation No. 800-2022-092978

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3 CATHERINE B. KIM
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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 Accusation Against:

Case No. 800-2022-092978

12 **NATHALIE MAE RUBIN, M.D.**
13 **558 N. Ventu Park Rd, Suite D**
Thousand Oaks, CA 91320

A C C U S A T I O N

14 **Physician's and Surgeon's Certificate**
15 **No. A 70668,**

16 Respondent.

17 **PARTIES**

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

22 2. On or about January 14, 2000, the Board issued Physician's and Surgeon's Certificate
23 Number A 70668 to Nathalie Mae Rubin, M.D. (Respondent). The Physician's and Surgeon's
24 Certificate was in full force and effect at all times relevant to the charges brought herein and will
25 expire on January 31, 2026, unless renewed.

26 ///

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 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.

(f) Approving undergraduate and graduate medical education programs.

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

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

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

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 including, but not limited to:

(a) Investigating complaints from the public, from other licensees, from health care facilities, or from the board that a physician and surgeon may be guilty of unprofessional conduct. The board shall investigate the circumstances underlying a report received pursuant to Section 805 or 805.01 within 30 days to determine if an interim suspension order or temporary restraining order should be issued. The board shall otherwise provide timely disposition of the reports received pursuant to Section 805 and Section 805.01.

(b) Investigating the circumstances of practice of any physician and surgeon where there have been any judgments, settlements, or arbitration awards requiring the

1 physician and surgeon or his or her professional liability insurer to pay an amount in
2 damages in excess of a cumulative total of thirty thousand dollars (\$30,000) with
3 respect to any claim that injury or damage was proximately caused by the physician's
4 and surgeon's error, negligence, or omission.

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

8 6. Section 2227 of the Code states:

9 (a) A licensee whose matter has been heard by an administrative law judge of
10 the Medical Quality Hearing Panel as designated in Section 11371 of the Government
11 Code, or whose default has been entered, and who is found guilty, or who has entered
12 into a stipulation for disciplinary action with the board, may, in accordance with the
13 provisions of this chapter:

14 (1) Have his or her license revoked upon order of the board.

15 (2) Have his or her right to practice suspended for a period not to exceed one
16 year upon order of the board.

17 (3) Be placed on probation and be required to pay the costs of probation
18 monitoring upon order of the board.

19 (4) Be publicly reprimanded by the board. The public reprimand may include a
20 requirement that the licensee complete relevant educational courses approved by the
21 board.

22 (5) Have any other action taken in relation to discipline as part of an order of
23 probation, as the board or an administrative law judge may deem proper.

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

29 STATUTORY PROVISIONS

30 7. Section 2234 of the Code, states:

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

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

36 (b) Gross negligence.

37 (c) Repeated negligent acts. To be repeated, there must be two or more
38 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 no later than 30 calendar days after being
16 notified by the board. This subdivision shall only apply to a certificate holder who is
17 the subject of an investigation by the board.

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

22 (i) Dissuading, intimidating, or tampering with a patient, witness, or any person
23 in an attempt to prevent them from reporting or testifying about a licensee.

24 8. Section 2236 of the Code states:

25 (a) The conviction of any offense substantially related to the qualifications,
26 functions, or duties of a physician and surgeon constitutes unprofessional conduct
27 within the meaning of this chapter [Chapter 5, the Medical Practice Act]. The record
28 of conviction shall be conclusive evidence only of the fact that the conviction
29 occurred.

30 (b) The district attorney, city attorney, or other prosecuting agency shall notify
31 the Medical Board of the pendency of an action against a licensee charging a felony
32 or misdemeanor immediately upon obtaining information that the defendant is a
33 licensee. The notice shall identify the licensee and describe the crimes charged and
34 the facts alleged. The prosecuting agency shall also notify the clerk of the court in
35 which the action is pending that the defendant is a licensee, and the clerk shall record
36 prominently in the file that the defendant holds a license as a physician and surgeon.

37 (c) The clerk of the court in which a licensee is convicted of a crime shall,
38 within 48 hours after the conviction, transmit a certified copy of the record of
39 conviction to the board. The division may inquire into the circumstances surrounding
40 the commission of a crime in order to fix the degree of discipline or to determine if
41 the conviction is of an offense substantially related to the qualifications, functions, or
42 duties of a physician and surgeon.

43 ///

1 (d) A plea or verdict of guilty or a conviction after a plea of nolo contendere is
2 deemed to be a conviction within the meaning of this section and Section 2236.1.
3 The record of conviction shall be conclusive evidence of the fact that the conviction
4 occurred.

5
6 9. Section 2239 of the Code states:

7 (a) The use or prescribing for or administering to himself or herself, of any
8 controlled substance; or the use of any of the dangerous drugs specified in Section
9 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous
10 or injurious to the licensee, or to any other person or to the public, or to the extent that
11 such use impairs the ability of the licensee to practice medicine safely or more than
12 one misdemeanor or any felony involving the use, consumption, or
13 self-administration of any of the substances referred to in this section, or any
14 combination thereof, constitutes unprofessional conduct. The record of the
15 conviction is conclusive evidence of such unprofessional conduct.

16 (b) A plea or verdict of guilty or a conviction following a plea of nolo
17 contendere is deemed to be a conviction within the meaning of this section. The
18 Medical Board may order discipline of the licensee in accordance with Section 2227
19 or the Medical Board may order the denial of the license when the time for appeal has
20 elapsed or the judgment of conviction has been affirmed on appeal or when an order
21 granting probation is made suspending imposition of sentence, irrespective of a
22 subsequent order under the provisions of Section 1203.4 of the Penal Code allowing
23 such person to withdraw his or her plea of guilty and to enter a plea of not guilty, or
24 setting aside the verdict of guilty, or dismissing the accusation, complaint,
25 information, or indictment.

26 10. Section 490 of the Code states:

27 (a) In addition to any other action that a board is permitted to take against a
28 licensee, a board may suspend or revoke a license on the ground that the licensee has
been convicted of a crime, if the crime is substantially related to the qualifications,
functions, or duties of the business or profession for which the license was issued.

(b) Notwithstanding any other provision of law, a board may exercise any
authority to discipline a licensee for conviction of a crime that is independent of the
authority granted under subdivision (a) only if the crime is substantially related to the
qualifications, functions, or duties of the business or profession for which the
licensee's license was issued.

(c) A conviction within the meaning of this section means a plea or verdict of
guilty or a conviction following a plea of nolo contendere. Any action that a board is
permitted to take following the establishment of a conviction may be taken when the
time for appeal has elapsed, or the judgment of conviction has been affirmed on
appeal, or when an order granting probation is made suspending the imposition of
sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of
the Penal Code.

(d) The Legislature hereby finds and declares that the application of this section
has been made unclear by the holding in *Petropoulos v. Department of Real Estate*
(2006) 142 Cal.App.4th 554, and that the holding in that case has placed a significant
number of statutes and regulations in question, resulting in potential harm to the
consumers of California from licensees who have been convicted of crimes.
Therefore, the Legislature finds and declares that this section establishes an

1 independent basis for a board to impose discipline upon a licensee, and that the
2 amendments to this section made by Chapter 33 of the Statutes of 2008 do not
3 constitute a change to, but rather are declaratory of, existing law.

4 REGULATORY PROVISIONS

5 11. California Code of Regulations, title 16, section 1360, states:

6 (a) For the purposes of denial, suspension or revocation of a license pursuant to
7 Section 141 or Division 1.5 (commencing with Section 475) of the code, a crime,
8 professional misconduct, or act shall be considered to be substantially related to the
9 qualifications, functions or duties of a person holding a license if to a substantial
10 degree it evidences present or potential unfitness of a person holding a license to
11 perform the functions authorized by the license in a manner consistent with the public
12 health, safety or welfare. Such crimes, professional misconduct, or acts shall include
13 but not be limited to the following: Violating or attempting to violate, directly or
14 indirectly, or assisting in or abetting the violation of, or conspiring to violate any
15 provision of state or federal law governing the applicant's or licensee's professional
16 practice.

17 (b) In making the substantial relationship determination required under
18 subdivision (a) for a crime, the board shall consider the following criteria:

- 19 (1) The nature and gravity of the crime;
- 20 (2) The number of years elapsed since the date of the crime; and
- 21 (3) The nature and duties of the profession.

22 COST RECOVERY

23 12. Section 125.3 of the Code states:

24 (a) Except as otherwise provided by law, in any order issued in resolution of a
25 disciplinary proceeding before any board within the department or before the
26 Osteopathic Medical Board, upon request of the entity bringing the proceeding, the
27 administrative law judge may direct a licensee found to have committed a violation or
28 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

1 may reduce or eliminate the cost award, or remand to the administrative law judge if
2 the proposed decision fails to make a finding on costs requested pursuant to
3 subdivision (a).

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

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

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

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

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

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

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

26 **FACTUAL ALLEGATIONS**

27 13. On or about October 22, 2022, at approximately 9:56 p.m., Ventura County Sheriff's
28 Office (hereinafter "VCSO") was dispatched to the scene of a three-car traffic collision on
Moorpark Road north of Calle Contento in the City of Thousand Oaks. The investigating officers
determined that the collision occurred when Respondent, traveling northbound on Moorpark
Road, crossed into southbound traffic and collided head-on with a vehicle (V1) traveling
southbound on Moorpark Road, which then struck another vehicle (V2) that had stopped on
northbound Moorpark Road. The driver of V1 had to be extracted from his vehicle and was
transported by ambulance for treatment due to injuries sustained in the accident. Respondent was
cited as the cause for the collision in violation of California Vehicle Code Section 23153(a) –
driving under the influence (DUI) causing bodily injuries, and Section 22107 – unsafe turning
movement.

1 14. The investigating officer who interviewed Respondent at the scene observed signs of
2 alcohol impairment including red watery eyes, an odor of an alcoholic beverage from her breath,
3 and slow speech. The officer observed Respondent sway side to side as she exited the vehicle
4 and Respondent nearly fell over when she attempted to stand causing the officer to catch her to
5 prevent her from falling. Respondent admitted to having consumed two glasses of vodka.

6 15. Because of her near fall, the officer felt it unsafe to conduct portions of the field
7 sobriety tests and offered Respondent to voluntarily submit to preliminary alcohol screening.
8 Respondent agreed and provided two breath samples with blood alcohol concentration (BAC)
9 results of .21 and .20 percent.

10 16. Respondent was placed under arrest for violation of Vehicle Code sections 23153(a)
11 [driving under the influence causing bodily injury] and 23153(b) [driving with BAC greater than
12 .08 percent causing bodily injury]. Respondent then submitted to evidentiary breath tests which
13 resulted in BAC of .19 percent and .20 percent.

14 17. On or about November 3, 2022, a criminal complaint was filed, charging Respondent
15 with two felony counts for violations of Vehicle Code Sections 23153(a)(Count 1) and
16 23153(b)(Count 2).

17 18. On or about July 21, 2023, in the case entitled *The People of the State of California v.*
18 *Nathalie Rubin*, case number 2022027186, in the Superior Court of California, County of
19 Ventura, Respondent was convicted upon pleading guilty to Count 2, which was reduced to a
20 misdemeanor pursuant to Penal Code section 17(b). Respondent was placed on 3 years' informal
21 probation with terms and conditions, including: 180 days in Ventura County jail with credit for
22 time served; 90 days community service; first time offender DUI program for 90 days; attend
23 treatment program designated by the probation officer; abstain from alcohol use; license
24 suspended for one year; payment of restitutions, fines and fees, and obey all laws, among other
25 terms and conditions.

26 ///

27 ///

28 ///

1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Conviction of a Substantially Related Crime)**

3 19. Respondent Nathalie Mae Rubin, M.D. is subject to disciplinary action under sections
4 490 and 2236, subdivision (a) of the Code, and California Code of Regulations, title 16, section
5 1360, in that Respondent has been convicted of a crime substantially related to the qualifications,
6 functions or duties of a physician and surgeon, as more particularly alleged in paragraphs 13
7 through 18, which are incorporated herein by reference as if fully set forth.

8 **SECOND CAUSE FOR DISCIPLINE**

9 **(Dangerous Use of Alcohol)**

10 20. Respondent Nathalie Mae Rubin, M.D. is subject to disciplinary action under section
11 2239 of the Code, in that Respondent consumed alcoholic beverages to the extent, or in such a
12 manner, as to be dangerous and injurious to herself or to the public, as more particularly alleged
13 in paragraphs 13 through 18, which are incorporated herein by reference as if fully set forth.

14 **THIRD CAUSE FOR DISCIPLINE**

15 **(Unprofessional Conduct)**

16 21. Respondent is subject to disciplinary action under section 2234 of the Code, in that
17 Respondent has engaged in unprofessional conduct. The circumstances are as follows:

18 22. The allegations of the First and Second Causes for Discipline are incorporated herein
19 by reference as if fully set forth.

20 **PRAYER**

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

23 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 70668,
24 issued to Respondent, Nathalie Mae Rubin, M.D.;

25 2. Revoking, suspending or denying approval of Respondent Nathalie Mae Rubin,
26 M.D.'s authority to supervise physician assistants and advanced practice nurses;


27 ///

28 ///

1 3. Ordering Respondent Nathalie Mae Rubin, M.D., to pay the Board the costs of the
2 investigation and enforcement of this case, and if placed on probation, the costs of probation
3 monitoring; and

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

6 DATED: JUN 24 2024


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

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