

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

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

Kimberly Uhles Hurvitz, M.D.

**Physician's and Surgeon's Certificate
No. A 72486**

Case No.: 800-2022-093026

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 October 3, 2025.

IT IS SO ORDERED: September 3, 2025.

MEDICAL BOARD OF CALIFORNIA

 **M.D.**

**Veling Tsai, M.D., Vice Chair
Panel A**

1 ROB BONTA
Attorney General of California
2 STEVE DIEHL
Supervising Deputy Attorney General
3 WENDY WIDLUS
Deputy Attorney General
4 State Bar No. 82958
300 So. Spring Street, Suite 1702
5 Los Angeles, CA 90013
Telephone: (213) 269-6457
6 Facsimile: (916) 731-2117
E-mail: Wendy.Widlus@doj.ca.gov
7 *Attorneys for Complainant*

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

13 In the Matter of the Accusation Against:

14 **KIMBERLY UHLES HURVITZ, M.D.**
15 **1026 Sandpiper Ln.**
Santa Barbara, CA 93110-2078

16 **Physician's and Surgeon's Certificate No. A**
72486

17 Respondent.

Case No. 800-2022-093026

OAH No. 2025010981

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

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

22 **PARTIES**

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

27 2. Respondent Kimberly Uhles Hurvitz, M.D. (Respondent) is represented in this
28 proceeding by attorney James Victor Kosnett, whose address is: 11400 W. Olympic Boulevard,

1 Suite 200, Los Angeles, CA 90064.

2 3. On or about July 1, 2000, the Board issued Physician's and Surgeon's Certificate No.
3 A 72486 to Kimberly Uhles Hurvitz, M.D. The Physician's and Surgeon's Certificate was in full
4 force and effect at all times relevant to the charges brought in Accusation No. 800-2022-093026,
5 and will expire on April 30, 2026, unless renewed.

6 **JURISDICTION**

7 4. Accusation No. 800-2022-093026 was filed before the Board, and is currently
8 pending against Respondent. The Accusation and all other statutorily required documents were
9 properly served on Respondent on January 6, 2025. Respondent timely filed her Notice of
10 Defense contesting the Accusation.

11 5. A copy of Accusation No. 800-2022-093026 is attached as exhibit A and incorporated
12 herein by reference.

13 **ADVISEMENT AND WAIVERS**

14 6. Respondent has carefully read, fully discussed with counsel, and understands the
15 charges and allegations in Accusation No. 800-2022-093026. Respondent has also carefully read,
16 fully discussed with her counsel, and understands the effects of this Stipulated Settlement and
17 Disciplinary Order.

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

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

26 **CULPABILITY**

27 9. Respondent understands and agrees that the charges and allegations in Accusation
28 No. 800-2022-093026, if proven at a hearing, constitute cause for imposing discipline upon her

1 Physician's and Surgeon's Certificate.

2 10. Respondent does not contest that, at an administrative hearing, Complainant could
3 establish a prima facie case with respect to the charges and allegations in Accusation No. 800-
4 2022-093026, a true and correct copy of which is attached hereto as Exhibit A, and that she has
5 thereby subjected her Physician's and Surgeon's Certificate, No. A 72486 to disciplinary action.

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

9 **CONTINGENCY**

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

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

23 14. Respondent agrees that if she ever petitions for early termination or modification of
24 probation, or if the Board ever petitions for revocation of probation, all of the charges and
25 allegations contained in Accusation No. 800-2022-093026 shall be deemed true, correct and fully
26 admitted by Respondent for purposes of that proceeding or any other licensing proceeding
27 involving Respondent in the State of California.

28 15. The parties understand and agree that Portable Document Format (PDF) and facsimile

1 copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile
2 signatures thereto, shall have the same force and effect as the originals.

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

6 **DISCIPLINARY ORDER**

7 **IT IS HEREBY ORDERED** that Physician's and Surgeon's Certificate No. A 72486
8 issued to Respondent KIMBERLY UHLES HURVITZ, M.D. is revoked. However, the
9 revocation is stayed and Respondent is placed on probation for four (4) years on the following
10 terms and conditions:

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

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

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

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

1 written evaluation report to the Board or its designee.

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

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

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

1 assigned the matter.

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

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

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

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

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

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

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

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

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

- 23 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry
24 Association or have completed the training required to serve as a collector for the United
25 States Department of Transportation.
26 (b) Its specimen collectors conform to the current United States Department of
27 Transportation Specimen Collection Guidelines.
28 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published

1 by the United States Department of Transportation without regard to the type of test
2 administered.

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

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

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

12 (g) Its testing locations possess all the materials, equipment, and technical expertise
13 necessary in order to test Respondent on any day of the week.

14 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens
15 for the detection of alcohol and illegal and controlled substances.

16 (i) It maintains testing sites located throughout California.

17 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line
18 computer database that allows the Respondent to check in daily for testing.

19 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff
20 access to drug test results and compliance reporting information that is available 24 hours a
21 day.

22 (l) It employs or contracts with toxicologists that are licensed physicians and have
23 knowledge of substance abuse disorders and the appropriate medical training to interpret
24 and evaluate laboratory biological fluid test results, medical histories, and any other
25 information relevant to biomedical information.

26 (m) It will not consider a toxicology screen to be negative if a positive result is obtained
27 while practicing, even if the Respondent holds a valid prescription for the substance.

28 Prior to changing testing locations for any reason, including during vacation or other travel,

1 alternative testing locations must be approved by the Board and meet the requirements above.

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

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

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

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

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

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

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

27 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited
28 substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the

1 Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to
2 any other terms or conditions the Board determines are necessary for public protection or to
3 enhance Respondent's rehabilitation.

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

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

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

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

28 The worksite monitor shall not have a current or former financial, personal, or familial

1 relationship with Respondent, or any other relationship that could reasonably be expected to
2 compromise the ability of the monitor to render impartial and unbiased reports to the Board or its
3 designee. If it is impractical for anyone but Respondent's employer to serve as the worksite
4 monitor, this requirement may be waived by the Board or its designee, however, under no
5 circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

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

10 Respondent shall pay all worksite monitoring costs.

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

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

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

1 lead to suspected substance abuse by Respondent. Respondent shall complete any required
2 consent forms and execute agreements with the approved worksite monitor and the Board, or its
3 designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

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

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

16 A. If Respondent commits a major violation of probation as defined by section
17 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take
18 one or more of the following actions:

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

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

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

3 B. If Respondent commits a minor violation of probation as defined by section
4 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take
5 one or more of the following actions:

6 (1) Issue a cease-practice order;

7 (2) Order practice limitations;

8 (3) Order or increase supervision of Respondent;

9 (4) Order increased documentation;

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

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

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

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

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

1 calendar days.

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

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

6 11. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby
7 ordered to reimburse the Board its costs of investigation and enforcement, in the amount of
8 \$20,515.25 (twenty thousand five hundred fifteen dollars and twenty-five cents). Costs shall be
9 payable to the Medical Board of California. Failure to pay such costs shall be considered a
10 violation of probation.

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

15 The filing of bankruptcy by Respondent shall not relieve Respondent of the responsibility
16 to repay investigation and enforcement costs.

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

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

22 13. GENERAL PROBATION REQUIREMENTS.

23 Compliance with Probation Unit

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

25 Address Changes

26 Respondent shall, at all times, keep the Board informed of Respondent's business and
27 residence addresses, email address (if available), and telephone number. Changes of such
28 addresses shall be immediately communicated in writing to the Board or its designee. Under no

1 circumstances shall a post office box serve as an address of record, except as allowed by Business
2 and Professions Code section 2021, subdivision (b).

3 Place of Practice

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

7 License Renewal

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

10 Travel or Residence Outside California

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

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

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

20 15. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
21 its designee in writing within 15 calendar days of any periods of non-practice lasting more than
22 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
23 defined as any period of time Respondent is not practicing medicine as defined in Business and
24 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
25 patient care, clinical activity or teaching, or other activity as approved by the Board. If
26 Respondent resides in California and is considered to be in non-practice, Respondent shall
27 comply with all terms and conditions of probation. All time spent in an intensive training
28 program which has been approved by the Board or its designee shall not be considered non-

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

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

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

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

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

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

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

1 continuing jurisdiction until the matter is final, and the period of probation shall be extended until
2 the matter is final.

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

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

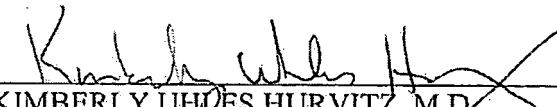
18 20. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for
19 a new license or certification, or petition for reinstatement of a license, by any other health care
20 licensing action agency in the State of California, all of the charges and allegations contained in
21 Accusation No. 800-2022-093026 shall be deemed to be true, correct, and admitted by
22 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or
23 restrict license.

24 ///

1 ACCEPTANCE

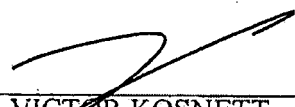
2 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
3 discussed it with my attorney, James Victor Kosnett. I understand the stipulation and the effect it
4 will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and
5 Disciplinary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

7
8 DATED: 5/18/2025

 M.D.
KIMBERLY UHLES HURVITZ, M.D.
Respondent

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

13
14 DATED: 5-19-25


JAMES VICTOR KOSNETT
Attorney for Respondent

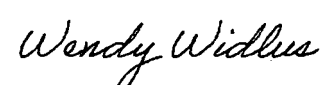
17 ENDORSEMENT

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

20 DATED: May 19, 2025

21 Respectfully submitted,

22 ROB BONTA
Attorney General of California
23 STEVE DIEHL
Supervising Deputy Attorney General

24 
25 WENDY WIDLUS
26 Deputy Attorney General
27 Attorneys for Complainant

28 LA2025600048
67643730.docx

Exhibit A

Accusation No. 800-2022-093026

1 ROB BONTA
Attorney General of California
2 EDWARD KIM
Supervising Deputy Attorney General
3 State Bar No. 195729
300 So. Spring Street, Suite 1702
4 Los Angeles, CA 90013
Telephone: (213) 269-6000
5 Facsimile: (916) 731-2117
Attorneys for Complainant
6

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

12 In the Matter of the Accusation Against:

Case No. 800-2022-093026

13 **Kimberly Uhles Hurvitz, M.D.**
1026 Sandpiper Ln.
Santa Barbara, CA 93110-2078

A C C U S A T I O N

14 **Physician's and Surgeon's Certificate**
No. A 72486,

15 Respondent.
16

17 **PARTIES**

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

21 2. On or about July 1, 2000, the Board issued Physician's and Surgeon's Certificate
22 Number A 72486 to Kimberly Uhles Hurvitz, M.D. (Respondent). The Physician's and
23 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
24 herein and will expire on April 30, 2026, unless renewed.

25 **JURISDICTION**

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

1 4. Section 2004 of the Code states:

2 The board shall have the responsibility for the following:

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

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

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

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

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

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

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

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

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

17 5. Section 2220 of the Code states:

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

24 (a) Investigating complaints from the public, from other licensees, from health
25 care facilities, or from the board that a physician and surgeon may be guilty of
26 unprofessional conduct. The board shall investigate the circumstances underlying a
27 report received pursuant to Section 805 or 805.01 within 30 days to determine if an
28 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
 physician and surgeon or his or her professional liability insurer to pay an amount in
 damages in excess of a cumulative total of thirty thousand dollars (\$30,000) with
 respect to any claim that injury or damage was proximately caused by the physician's
 and surgeon's error, negligence, or omission.

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

6. Section 2227 of the Code states:

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

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

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

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

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

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

• • •

STATUTORY PROVISIONS

7. Section 2234 of the Code states:

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

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

(b) Gross negligence.

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

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

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

(d) Incompetence.

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

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

5 (g) The failure by a certificate holder, in the absence of good cause, to attend
6 and participate in an interview by the board no later than 30 calendar days after being
7 notified by the board. This subdivision shall only apply to a certificate holder who is
8 the subject of an investigation by the board.

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

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

15 8. Unprofessional conduct under Code section 2234 is conduct which breaches the rules
16 or ethical code of the medical profession, or conduct which is unbecoming a member in good
17 standing of the medical profession, and which demonstrates an unfitness to practice medicine.
18 (*Shea v. Board of Medical Examiners* (1978) 81 Cal.App.3d 564, 575.)

19 9. Section 2236 of the Code states:

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

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

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

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

10. Section 2236.1 of the Code states, in pertinent part:

...

(b) Upon receipt of the certified copy of the record of conviction, if after a hearing it is determined therefrom that the felony of which the licensee was convicted was substantially related to the qualifications, functions, or duties of a physician and surgeon, the Medical Board shall suspend the license until the time for appeal has elapsed, if no appeal has been taken, or until the judgment of conviction has been affirmed on appeal or has otherwise become final, and until further order of the division. The issue of substantial relationship shall be heard by and administrative law judge from the Medical Quality Hearing Panel sitting alone or with a panel of the division, in the discretion of the division.

(c) Notwithstanding subdivision (b), a conviction of any crime referred to in Section 2237, or a conviction of Section 187, 261, 288, or former Section 262, of the Penal Code, shall be conclusively presumed to be substantially related to the qualifications, functions, or duties of a physician and surgeon and no hearing shall be held on this issue. Upon its own motion or for good cause shown, the board may decline to impose or may set aside the suspension when it appears to be in the interest of justice to do so, with due regard to maintaining the integrity of and confidence in the medical profession.

(d) (1) Discipline may be ordered in accordance with Section 2227, or the Medical Board may order the denial of the license when the time for appeal has elapsed, the judgment of conviction has been affirmed on appeal, or an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under Section 1203.4 of the Penal Code allowing the person to withdraw the plea of guilty and to enter a plea of not guilty, setting aside the verdict of guilty, or dismissing the accusation, complaint, information, or indictment.

(2) The issue of penalty shall be heard by an administrative law judge from the Medical Quality Hearing Panel sitting alone or with a panel of the board, in the discretion of the board. The hearing shall not be had until the judgment of conviction has become final or, irrespective of a subsequent order under Section 1203.4 of the Penal Code, an order granting probation has been made suspending the imposition of sentence; except that a licensee may, at the licensee's option, elect to have the issue of penalty decided before those time periods have elapsed. Where the licensee so elects, the issue of penalty shall be heard in the manner described in this section at the hearing to determine whether the conviction was substantially related to the qualifications, functions, or duties of a physician and surgeon. If the conviction of a licensee who has made this election is overturned on appeal, any discipline ordered pursuant to this section shall automatically cease. Nothing in this subdivision shall prohibit the division from pursuing disciplinary action based on any cause other than the overturned conviction.

(e) The record of the proceedings resulting in the conviction, including a transcript of the testimony therein, may be received in evidence.

(f) The other provisions of this article setting forth a procedure for the suspension or revocation of a physician and surgeon's certificate shall not apply to proceedings conducted pursuant to this section.

11. Section 2239 of the Code states:

(a) The use or prescribing for or administering to himself or herself, of any controlled substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous

1 or injurious to the licensee, or to any other person or to the public, or to the extent that
2 such use impairs the ability of the licensee to practice medicine safely or more than
3 one misdemeanor or any felony involving the use, consumption, or self-
administration of any of the substances referred to in this section, or any combination
thereof, constitutes unprofessional conduct. The record of the conviction is conclusive
evidence of such unprofessional conduct.

4 (b) A plea or verdict of guilty or a conviction following a plea of nolo
5 contendere is deemed to be a conviction within the meaning of this section. The
6 Division of Medical Quality may order discipline of the licensee in accordance with
7 Section 2227 or the Division of Licensing may order the denial of the license when
8 the time for appeal has elapsed or the judgment of conviction has been affirmed on
9 appeal or when an order granting probation is made suspending imposition of
sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of
the Penal Code allowing such person to withdraw his or her plea of guilty and to enter
a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation,
complaint, information, or indictment.

10 REGULATORY PROVISIONS

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

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

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

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

23 COST RECOVERY

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

1 included in a stipulated settlement.

2 **FACTUAL ALLEGATIONS**

3 **April 23, 2018 Arrest**

4 14. On or about July 31, 2018, in a criminal proceeding entitled, *People of the State of*
5 *California v. Kimberly Uhles Hurvitz*, Santa Barbara Superior Court Case No. 18CR07324,
6 Respondent was charged with driving under the influence of an alcoholic beverage on or about
7 April 23, 2018, in violation of Vehicle Code Section 23152(a), a misdemeanor (Count One), with
8 a special allegation that she also violated Vehicle Code Section 23577 by refusing a peace
9 officer's request to submit to and failed to complete chemical tests pursuant to Vehicle Code
10 Section 23612.

11 15. On or about February 25, 2019, in a criminal proceeding entitled, *People of the State*
12 *of California v. Kimberly Uhles Hurvitz*, Santa Barbara Superior Court Case No. 18CR07324,
13 Respondent was convicted upon her nolo contendere plea to Count Two (which was added to the
14 criminal complaint) for a violation of Vehicle Code Section 23103.5. The remaining count was
15 dismissed. The Superior Court sentenced Respondent to probation for three years, with terms and
16 conditions, including, among other things, serving one day in jail, and being required to pay a fine
17 of \$889.00.

18 **October 26, 2022 Arrest**

19 16. On or about October 26, 2022, at approximately 12:49 p.m., officers with the Santa
20 Barbara Police Department (SBPD) were dispatched to the scene of a suspected driving under the
21 influence traffic incident at the 2300 block of Bath Street involving Respondent, who had just
22 been in an accident. A witness (Witness) reported that Respondent was passed out in her vehicle,
23 a white Porsche SUV. Upon arrival a police officer observed that Respondent's vehicle was
24 parked in a private parking lot and her car was idling. On closer inspection, Respondent was in
25 the driver's seat of her SUV unmoving, and holding a metal cup containing a clear, carbonated
26 liquid in her right hand. The officer opened the driver's door, turned off the vehicle, roused
27 Respondent, and could sense that Respondent had a moderate smell of an alcoholic beverage
28 emanating from her person. In addition, her eyes were bloodshot and watery, and her speech was

1 slow and somewhat slurred. While speaking with the officer, Respondent took one sip of a liquid
2 in a metal cup, before placing the cup down. She told the officer that the cup contained water.
3 Based on all the circumstances up to that point, the officer believed that Respondent could be
4 impaired and proceeded with an investigation for suspected driving under the influence (DUI).
5 The following is a summary of that investigation:

6 A. The officer interviewed Witness who was a security guard working at the
7 location where Respondent was parked. Witness witnessed Respondent driving the white Porsche
8 SUV in the rear parking lot of where Respondent was parked and stated that Respondent had
9 gotten into a "fender-bender" with another vehicle in the lot. Respondent then asked someone
10 standing by if they could park her car for her. An unidentified subject declined. Respondent then
11 re-entered her vehicle, drove it to the adjacent lane of the parking lot, and parked her vehicle.
12 This occurred at approximately 10:30 a.m. Witness told the officer Respondent's vehicle was
13 currently parked in the same spot that he had witnessed her park it in. However, Witness had not
14 kept a visual on the vehicle the entire time that it had been parked there.

15 B. At approximately 1:00 p.m., the officer asked Respondent a series of DUI
16 investigation questions, to which Respondent answered as follows: she repeatedly complained of
17 being tired, jet lagged, and actively suffering from a migraine, as well as experiencing double
18 vision, she explained that she had returned home from a trip to Spain on Sunday, October 23,
19 2022, and was still suffering from jet lag, she stated that she had only slept for approximately two
20 hours earlier this morning, and she initially told the officer that she had not consumed any alcohol
21 since last night, at approximately 10:00 p.m., when she drank two glasses of wine. The officer
22 then administered the field sobriety tests on the parking lot asphalt, which was dry, level, and
23 clear of obvious debris. The area was illuminated by bright daylight. The officer asked
24 Respondent to stand with her feet together and her arms at her side for the first of the three tests.
25 Respondent told the officer that she was unable to stand with her feet together, due to a physical
26 impairment. The officer then administered the Horizontal Gaze Nystagmus evaluation and
27 observed five out of six possible clues. While the officer was explaining the Walk and Turn
28 evaluation to Respondent, she told the officer that she was unable to place both of her feet on a

1 single line in the prescribed manner. Respondent explained that she had a "wide gait," and would
2 not be able to perform the evaluation. Respondent also advised the officer that she would be
3 unable to stand on one leg. Based on her self-proclaimed physical impairments, the officer
4 determined that it would be unsafe for Respondent to attempt the Walk and Turn or One Leg
5 Stand evaluations. Respondent also declined to provide a voluntary breath sample. Based on the
6 totality of the circumstances, including Respondent's observed objective signs and symptoms of
7 alcohol impairment, the officer determined that Respondent was too impaired by alcohol to safely
8 operate a motor vehicle and placed Respondent under arrest for violating Vehicle Code section
9 23152, subdivision (a).

10 C. The officer then transported Respondent to the hospital for her blood draw. At
11 the hospital, the officer asked Respondent to step out of the vehicle. However, she objected and
12 refused to walk inside while wearing handcuffs because she was a "medical professional." The
13 officer then asked Respondent if she was refusing to walk inside, and she replied, "yes." The
14 officer then transported her to the SBPD station to obtain a forced blood draw warrant for
15 Respondent's blood. Respondent later told the officer that she had never refused to enter the
16 hospital. Upon arrival at the station, the officer interviewed Respondent regarding the clear,
17 carbonated liquid that she had been drinking from the cup in her vehicle, and she eventually
18 admitted to the officer that it was a lime-flavored "Whiteclaw" brand alcoholic beverage. This
19 type of beverage has the appearance of regular water. The officer then told Respondent that she
20 was observed taking a sip from the cup when she was first contacted. The officer asked
21 Respondent if she had consumed any other alcohol, between the time she parked her vehicle to
22 the time the officer contacted her, aside from that one sip. Respondent assured the officer that she
23 had not. A warrant was obtained for Respondent's blood. Respondent complied with the warrant
24 and provided blood. The officer then transported Respondent to jail where she was booked for
25 violating Vehicle Code section 23152, subdivision (a). While en route to the jail, Respondent
26 told the officer that she had asked for someone else to move her car after the collision because, "I
27 knew I shouldn't drive." She told the officer that she had been trying to do the right thing by
28 having someone else move her vehicle, but when the two people she asked refused, she had to

1 move it herself.

2 D. Another officer conducted the traffic collision investigation and interviewed
3 Respondent who stated that she fell asleep in her vehicle believing that she was already parked in
4 a space. She felt the car reverse and heard a "boom!" into another unoccupied vehicle.
5 Respondent stated that she was traveling no more than "one MPH" at the time of the accident.

6 17. On or about December 8, 2022, the results of the test of Respondent's blood from a
7 sample collected on or about October 26, 2022, revealed that Respondent's blood alcohol content
8 (BAC) at the time of collection was 0.221%.

9 18. On or about December 21, 2022, Respondent was charged in Santa Barbara Superior
10 Court in the matter of *The People of the State of California v. Kimberly Uhles Hurvitz*, Superior
11 Court Case No. 22CR08856 with the following violations: driving under the influence of an
12 alcoholic beverage, in violation of Vehicle Code Section 23152(a), a misdemeanor (Count One),
13 driving with a BAC of .08% or greater, in violation of Vehicle Code Section 23152(b), a
14 misdemeanor, with an enhancement for having a BAC .015% or greater pursuant to Vehicle Code
15 section 23578. Respondent was also noted to have a prior wet reckless violation of Vehicle Code
16 section 23103.5-1 on or about February 25, 2019.

17 19. On or about January 29, 2024, Respondent was convicted upon her nolo contendere
18 plea to Count One (driving under the influence of an alcoholic beverage), a violation of Vehicle
19 Code section 23152(a). On or about February 5, 2024, the Superior Court sentenced Respondent
20 to probation for three years, with terms and conditions, including, among other things, serving
21 four days in jail, and being required to: (1) pay a fine of \$1,690.00, (2) enroll in and complete an
22 18 month multiple offender DUI program, (3) use an ignition interlock device, and complete 140
23 days with a SCRAM (defined below) device (which she had already completed).

24 **February 16, 2023 Arrest**

25 20. On or about February 16, 2023, a pre-trial warrant was issued following several
26 positive alcohol consumptions (Respondent failed her alcohol breath tests on or about February 8,
27 2023, February 10, 2023, and February 15, 2023) via a Secure Continuous Remote Alcohol
28 Monitoring (SCRAM) device that Respondent wore on her ankle which monitored her level of

1 alcohol and Respondent reported to probation where she was arrested and transported to Santa
2 Barbara County Jail.

3 **September 13, 2024 Subject Interview**

4 21. On or about September 13, 2024, Respondent was interviewed by a Department of
5 Consumer Affairs investigator (Subject Interview). During the Subject Interview, Respondent
6 admitted that on the day of her arrest on October 26, 2022, she had been drinking alcohol (White
7 Claw) in her car before passing out and waking up when a police officer approached her, and that
8 she consumed multiple cans of White Claw (four or five cans). Respondent also admitted that
9 during the time period (approximately February 8, 2023 through February 10, 2023) prior to her
10 arrest on February 16, 2023, she had consumed alcoholic beverages (White Claw).

11 **FIRST CAUSE FOR DISCIPLINE**

12 **(Conviction of Substantially Related Crimes)**

13 22. Respondent Kimberly Uhles Hurvitz, M.D. is subject to disciplinary action under
14 section 2236 of the Code, in that she has been convicted of crimes substantially related to the
15 qualifications, functions, or duties of a physician and surgeon, as more particularly alleged herein.
16 The facts and circumstances are set forth in paragraphs 14 through 21, inclusive, which are
17 incorporated by reference as if fully set forth herein.

18 **SECOND CAUSE FOR DISCIPLINE**

19 **(Dangerous Use of Alcohol)**

20 23. Respondent Kimberly Uhles Hurvitz, M.D. is subject to disciplinary action under
21 section 2239¹, of the Code, in that she used or prescribed, or administered to herself, drugs or
22 alcoholic beverages to the extent, or in such a manner, as to be dangerous or injurious to her, to
23 another person, or to the public, as more particularly alleged hereinafter:

24 24. The allegations of the First Cause for Discipline are incorporated herein by reference
25 as if fully set forth:

26 ¹ There is a nexus between a physician's use of alcoholic beverages and his or her fitness
27 to practice medicine, established by the Legislature in section 2239, "in all cases where a licensed
28 physician used alcoholic beverages to the extent or in such a manner as to pose a danger to
himself or others." (*Watson v. Superior Court (Medical Board)* (2009) 176 Cal.App.4th 1407,
1411.)

1 **THIRD CAUSE FOR DISCIPLINE**

2 **(General Unprofessional Conduct)**

3 25. Respondent Kimberly Uhles Hurvitz, M.D. is subject to disciplinary action under
4 section 2234 of the Code, in that she has engaged in conduct which breaches the rules or ethical
5 code of the medical profession, or conduct which is unbecoming to a member in good standing of
6 the medical profession, and which demonstrates an unfitness to practice medicine, as more
7 particularly alleged in the First Cause for Discipline above, which is hereby incorporated by
8 reference and realleged as if fully set forth herein.

9 **PRAYER**

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

12 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 72486,
13 issued to Respondent Kimberly Uhles Hurvitz, M.D.;

14 2. Revoking, suspending or denying approval of Respondent Kimberly Uhles Hurvitz,
15 M.D.'s authority to supervise physician assistants and advanced practice nurses;

16 3. Ordering Respondent Kimberly Uhles Hurvitz, M.D., to pay the Board the costs of
17 the investigation and enforcement of this case, and if placed on probation, the costs of probation
18 monitoring; and

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

20
21 DATED: JAN 06 2025

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

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