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

In the Matter of the Application of:

**Shirzad Shir, PTL  
8965 E Wright School Loop  
Tucson, AZ 85715-4603**

**Postgraduate Training  
License No. PTL 11487**

**Case No. 800-2023-097102**

**AGREEMENT FOR  
SURRENDER OF LICENSE**

Respondent.

**TO ALL PARTIES:**

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

1. Complainant, Reji Varghese, is the Executive Director of the Medical Board of California, Department of Consumer Affairs ("Board").
2. Shirzad Shir, PTL ("Licensee") has carefully read and fully understands the effect of this Agreement.
3. Licensee understands that by signing this Agreement he is enabling the Board to issue this order accepting the surrender of license without further process. Licensee understands and agrees that Board staff and counsel for complainant may communicate directly with the Board regarding this Agreement, without notice to or participation by Licensee. The Board will not be disqualified from further action in this matter by virtue of its consideration of this Agreement.
4. Licensee acknowledges that on May 27, 2022, an Application was submitted by him and on June 6, 2023, a Decision was rendered wherein he was issued a postgraduate training license for the lifetime of the license with various standard terms and conditions.

1       5. The current disciplinary action provides in pertinent part, "Following the  
2 effective date of this Decision, if Applicant ceases practicing due to retirement or  
3 health reasons or is otherwise unable to satisfy the terms and conditions of  
4 probation, Applicant may request to surrender his license." (Condition #21.).

5       6. Upon acceptance of the Agreement by the Board, Licensee  
6 understands he will no longer be permitted to practice as a postgraduate training  
7 licensee in California, and also agrees to surrender his wallet certificate, wall  
8 license and any D.E.A. Certificate(s) for an address in California.

9       7. Licensee fully understands and agrees that if Licensee ever files an  
10 application for relicensure or reinstatement in the State of California, the Board  
11 shall treat it as a Petition for Reinstatement of a revoked license in effect at the  
12 time the Petition is filed. In addition, any Medical Board Investigation Report(s),  
13 including all referenced documents and other exhibits, upon which the Board is  
14 predicated, and any such Investigation Report(s), attachments, and other exhibits,  
15 that may be generated subsequent to the filing of this Agreement for Surrender of  
16 License, shall be admissible as direct evidence, and any time-based defenses,  
17 such as laches or any applicable statute of limitations, shall be waived when the  
18 Board determines whether to grant or deny the Petition.

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**ACCEPTANCE**

I, Shirzad Shir, PTL have carefully read the above Agreement and enter into it freely and voluntarily, with the optional advice of counsel, and with full knowledge of its force and effect, do hereby surrender Postgraduate Training Certificate No. PTL 11487, to the Medical Board of California for its acceptance. By signing this Agreement for Surrender of License, I recognize that upon its formal acceptance by the Board, I will lose all rights and privileges to practice as a Postgraduate Training Licensee in the State of California and that I have delivered to the Board my wallet certificate and wall license.

  
Shirzad Shir, PTL

8/25/25

Date

  
Ahmad A. Shir  
Attorney or Witness

8/25/25

Date

  
Reji Varghese  
Executive Director  
Medical Board of California

SEP 09 2025

Date

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