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

In the Matter of the Accusation Against: Lalitha Ananth, M.D. Physician's and Surgeon's Certificate No. A 40291 Respondent.	Case No. 800-2022-091186

DECISION

The attached Stipulated Surrender of License 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 9, 2025.

IT IS SO ORDERED October 2, 2025.

MEDICAL BOARD OF CALIFORNIA

Reji Varghese
Executive Director

ROB BONTA
Attorney General of California
ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General
CHRISTINE A. RHEE
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Attorneys for Complainant

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

In the Matter of the Accusation Against: **LALITHA ANANTH, M.D.** **11100 Warner Ave., Ste. 200** **Fountain Valley, CA 92708-7510** **Physician's and Surgeon's Certificate No. A 40291,** Respondent.	Case No. 800-2022-091186 OAH No. 2025030102 **STIPULATED SURRENDER OF LICENSE AND DISCIPLINARY ORDER**

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

PARTIES

1. Reji Varghese (Complainant) is the Executive Director of the Medical Board of California (Board). He brought this action solely in his official capacity and is represented in this matter by Rob Bonta, Attorney General of the State of California, by Christine A. Rhee, Deputy Attorney General.

2. Lalitha Ananth, M.D. (Respondent), is represented in this proceeding by attorney Jacob Rosenberg, Esq., whose address is: 385 E. Colorado Blvd., Suite 200, Pasadena, CA 91101-1988.

3. On or about August 8, 1983, the Board issued Physician's and Surgeon's Certificate No. A 40291 to Respondent. That license was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2022-091186 and will expire on August 31, 2026, unless renewed.

JURISDICTION

4. Accusation No. 800-2022-091186 was filed before the Board and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on December 12, 2024. Respondent timely filed her Notice of Defense contesting the Accusation. A true and correct copy of Accusation No. 800-2022-091186 is attached as Exhibit A and incorporated by reference.

ADVISEMENT AND WAIVERS

5. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2022-091186. Respondent also has carefully read, fully discussed with counsel, and understands the effects of this Stipulated Surrender of License and Disciplinary Order.

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

7. Having had the benefit of counsel, Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

8. Respondent does not contest that, at an administrative hearing, Complainant could establish a prima facie case with respect to the charges and allegations in Accusation No. 800-2022-091186, agrees that cause exists for discipline, and hereby surrenders her Physician's and Surgeon's Certificate No. A 40291 for the Board's formal acceptance.

9. Respondent agrees that if she ever petitions for reinstatement of her Physician's and Surgeon's Certificate No. A 40291, all of the charges and allegations contained in Accusation No. 800-2022-091186 shall be deemed true, correct, and fully admitted by Respondent for purposes of that reinstatement proceeding or any other licensing proceeding involving Respondent in the State of California.

10. Respondent understands that by signing this stipulation, she enables the Board to issue an order accepting the surrender of her Physician's and Surgeon's Certificate without further process.

CONTINGENCY

11. Business and Professions Code section 2224, subdivision (b), provides, in pertinent part, that the Board "shall delegate to its executive director the authority to adopt a ... stipulation for surrender of a license."

12. Respondent understands that, by signing this stipulation, she enables the Executive Director of the Board to issue an order, on behalf of the Board, accepting the surrender of her Physician's and Surgeon's Certificate No. A 40291 without further notice to, or opportunity to be heard by, Respondent.

13. This Stipulated Surrender of License and Disciplinary Order shall be subject to the approval of the Executive Director on behalf of the Board. The parties agree that this Stipulated Surrender of License and Disciplinary Order shall be submitted to the Executive Director for his consideration in the above-entitled matter and, further, that the Executive Director shall have a reasonable period of time in which to consider and act on this Stipulated Surrender of License and Disciplinary Order after receiving it. By signing this stipulation, Respondent fully understands and agrees that she may not withdraw her agreement or seek to rescind this stipulation prior to the time the Executive Director, on behalf of the Board, considers and acts upon it.

14. The parties agree that this Stipulated Surrender of License and Disciplinary Order shall be null and void and not binding upon the parties unless approved and adopted by the Executive Director on behalf of the Board, except for this paragraph, which shall remain in full force and effect. Respondent fully understands and agrees that in deciding whether or not to

approve and adopt this Stipulated Surrender of License and Disciplinary Order, the Executive Director and/or the Board may receive oral and written communications from its staff and/or the Attorney General's Office. Communications pursuant to this paragraph shall not disqualify the Executive Director, the Board, any member thereof, and/or any other person from future participation in this or any other matter affecting or involving Respondent. In the event that the Executive Director on behalf of the Board does not, in his discretion, approve and adopt this Stipulated Surrender of License and Disciplinary Order, with the exception of this paragraph, it shall not become effective, shall be of no evidentiary value whatsoever, and shall not be relied upon or introduced in any disciplinary action by either party hereto. Respondent further agrees that should this Stipulated Surrender of License and Disciplinary Order be rejected for any reason by the Executive Director on behalf of the Board, Respondent will assert no claim that the Executive Director, the Board, or any member thereof, was prejudiced by its/his/her review, discussion and/or consideration of this Stipulated Surrender of License and Disciplinary Order or of any matter or matters related hereto.

ADDITIONAL PROVISIONS

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

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

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

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 40291, issued to Respondent Lalitha Ananth, M.D., is surrendered and accepted by the Board.

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1. The surrender of Respondent's Physician's and Surgeon's Certificate and the acceptance of the surrendered license by the Board shall constitute the imposition of discipline against Respondent. This stipulation constitutes a record of the discipline and shall become a part of Respondent's license history with the Board.

2. Respondent shall lose all rights and privileges as a Physician and Surgeon in California as of the effective date of the Board's Decision and Order.

3. Respondent shall cause to be delivered to the Board her pocket license and, if one was issued, her wall certificate on or before the effective date of the Decision and Order.

4. If Respondent should ever apply or reapply for a new license or certification, or petition for reinstatement of a license, by any other health care licensing agency in the State of California, all of the charges and allegations contained in Accusation No. 800-2022-091186 shall be deemed to be true, correct, and admitted by Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or restrict licensure.

5. Respondent shall pay the agency its costs of investigation and enforcement in the amount of $25,647.19 prior to issuance of a new or reinstated license.

ACCEPTANCE

I have carefully read the above Stipulated Surrender of License and Order and have fully discussed it with my attorney Jacob Rosenberg, Esq. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Surrender of License and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical Board of California.

DATED: Sep 10, 2025

Lalitha Ananth (Sep 10, 2025 20:55:56 PDT)

LALITHA ANANTH, M.D.
Respondent

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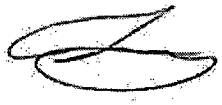
I have read and fully discussed with Respondent Lalitha Ananth, M.D., the terms and conditions and other matters contained in this Stipulated Surrender of License and Disciplinary Order. I approve its form and content.

DATED: September 12, 2025



JACOB ROSENBERG, ESQ.
Attorney for Respondent

ENDORSEMENT

The foregoing Stipulated Surrender of License and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California of the Department of Consumer Affairs.

DATED: _____

Respectfully submitted,

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

CHRISTINE A. RHEE
Deputy Attorney General
Attorneys for Complainant

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85327992

I have read and fully discussed with Respondent Lalitha Ananth, M.D., the terms and conditions and other matters contained in this Stipulated Surrender of License and Disciplinary Order. I approve its form and content.

DATED: _____

JACOB ROSENBERG, ESQ.
Attorney for Respondent

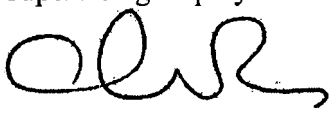
ENDORSEMENT

The foregoing Stipulated Surrender of License and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California of the Department of Consumer Affairs.

DATED: September 12, 2025

Respectfully submitted,

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



CHRISTINE A. RHEE
Deputy Attorney General
Attorneys for Complainant

SD2024803115
85327992

Exhibit A

Accusation No. 800-2022-091186

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Attorneys for Complainant

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

In the Matter of the Accusation Against: **LALITHA ANANTH, M.D.** **11100 Warner Ave, Ste. 200** **Fountain Valley, CA 92708-7510** **Physician's and Surgeon's Certificate No. A 40291,** Respondent.	Case No. 800-2022-091186 **ACCUSATION**

PARTIES

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

2. On or about August 8, 1983, the Medical Board issued Physician's and Surgeon's Certificate No. A 40291 to Lalitha Ananth, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on August 31, 2026, unless renewed.

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JURISDICTION

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

4. Section 2227 of the Code states, in pertinent part:

> (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.
>
> ...

5. Section 2234 of the Code states, in pertinent part:

> 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:
>
> ...
>
> (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.

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(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.

...

6. Section 2266 of the Code states that the failure of a physician and surgeon to maintain adequate and accurate records relating to the provision of services to their patients constitutes unprofessional conduct.

7. Health and Safety Code section 11165.4 states, in pertinent part:

(a)(1)(A)(i) A health care practitioner authorized to prescribe, order, administer, or furnish a controlled substance shall consult the patient activity report or information from the patient activity report obtained by the CURES[1] database to review a patient's controlled substance history for the past 12 months before prescribing a Schedule II, Schedule III, or Schedule IV controlled substance to the patient for the first time and at least once every six months thereafter if the prescriber renews the prescription and the substance remains part of the treatment of the patient.

(ii) If a health care practitioner authorized to prescribe, order, administer, or furnish a controlled substance is not required, pursuant to an exemption described in subdivision (c), to consult the patient activity report from the CURES database the first time the health care practitioner prescribes, orders, administers, or furnishes a controlled substance to a patient, the health care practitioner shall consult the patient activity report from the CURES database to review the patient's controlled substance history before subsequently prescribing a Schedule II, Schedule III, or Schedule IV controlled substance to the patient and at least once every six months thereafter if the substance remains part of the treatment of the patient.

(iii) A health care practitioner who did not directly access the CURES database to perform the required review of the controlled substance use report shall document in the patient's medical record that they reviewed the CURES database generated report within 24 hours of the controlled substance prescription that was provided to them by another authorized user of the CURES database.

(B) For purposes of this paragraph, "first time" means the initial occurrence in which a health care practitioner, in their role as a health care practitioner, intends to prescribe, order, administer, or furnish a Schedule II, Schedule III, or Schedule IV controlled substance to a patient and has not previously prescribed a controlled substance to the patient.

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[1] The Controlled Substance Utilization Review and Evaluation System (CURES) is a database of Schedule II, III, IV, and V controlled substance prescriptions dispensed in California which serves the public health, regulatory oversight agencies, and law enforcement. Mandatory consultation of the CURES system prior to prescribing a Schedule II, III, or IV controlled substance went into effect on or about October 2, 2018.

(2) A health care practitioner shall review a patient's controlled substance history that has been obtained from the CURES database no earlier than 24 hours, or the previous business day, before the health care practitioner prescribes, orders, administers, or furnishes a Schedule II, Schedule III, or Schedule IV controlled substance to the patient.

...

COST RECOVERY

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

FIRST CAUSE FOR DISCIPLINE
(Gross Negligence)

9. Respondent has subjected her Physician's and Surgeon's Certificate No. A 40291 to disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (b), of the Code, in that Respondent committed gross negligence in the care and treatment of Patients A and B,[2] as more particularly alleged hereafter:

Patient A

10. Respondent, a rheumatologist, treated Patient A since approximately August 2009.[3] From approximately 2009 through November 2017, Respondent treated Patient A for enthesopathy of the right hip region, pes anserinus tendinitis or bursitis,[4] myalgia,[5] myositis,[6] and

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[2] The patients' names have been redacted to protect their privacy. Respondent is aware of their identities.

[3] Conduct occurring more than seven (7) years from the filing date of this Accusation or more than three (3) years from notification to the Board is for informational purposes only and is not alleged as a basis for disciplinary action.

[4] Pes anserinus tendinitis or bursitis is inflammation of the tendons causing anterior knee pain.

[5] Myalgia is muscle pain and tenderness.

[6] Myositis is a disease in which the immune system attacks the muscles, causing chronic inflammation.

anxiety. Respondent treated Patient A's joint pain with Norco,[7] joint aspirations with Kenalog[8] injections, and other medications. From approximately 2009 through November 2017, Respondent also regularly prescribed Xanax[9] to Patient A.

11. In or around November and December 2017, Patient A filled prescriptions written by Respondent for Xanax, averaging a dose of approximately 0.75 mg per day.

12. On or about January 3, 2018, Patient A saw Respondent for an office visit. Patient A complained of low back pain, right hip pain, early morning stiffness, and unchanging joint pain. Respondent's assessment included enthesopathy, generalized anxiety disorder, right hip bursitis, fibromyalgia, and chronic pain syndrome. Respondent documented that she had reviewed Patient A's CURES report and a urine drug screen report, although neither of these documents are in Respondent's records. Respondent also documented in her progress note that Patient A had a pain contract[10] in place. At this visit, Respondent gave Patient A prescriptions for Effexor,[11] Xanax, and Norco.

13. From approximately January 6, 2018, through November 29, 2018, Respondent saw Patient A at approximately five office visits. During that time, Respondent continued to prescribe enough Norco and Xanax to Patient A, so that Patient A was taking an average of four tablets of 325-10 mg Norco and between 0.75 to 1 mg of Xanax per day. Respondent failed to document any review of the efficacy of these medications in treating Patient A's chronic pain or anxiety.

14. On or about December 5, 2018, Patient A submitted to a urine drug screen which was positive for benzodiazepines, opiates, hydrocodone, hydromorphone, and THC.[12]

15. On or about January 29, 2019, Respondent documented that she discussed the urine drug screen results with Patient A, and that Patient A admitted to using edible marijuana.

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[7] Norco is the brand name for hydrocodone and acetaminophen. Hydrocodone is an opioid and a Schedule II controlled substance pursuant to Health and Safety Code section 11055, subdivision (b).

[8] Kenalog, brand name for triamcinolone, is a steroid used to treat inflammation, including inflammation due to rheumatoid arthritis.

[9] Xanax, brand name for alprazolam, is a benzodiazepine and a Schedule IV controlled substance pursuant to Health and Safety Code section 11057, subdivision (d).

[10] Patient A signed a pain contract with Respondent on or about January 22, 2016.

[11] Effexor, brand name for venlafaxine, is an anti-depressant and nerve pain medication.

[12] Tetrahydrocannabinol (THC) is found in cannabis.

Respondent recommended periodic urine drug tests and advised Patient A that she needed to find a pain management specialist. Respondent also noted that she would no longer manage Patient A's pain management prescriptions. Respondent's treatment plan was to have Patient A continue her medication regimen. At this visit, Patient A submitted to another urine drug test, which was positive for hydrocodone, norhydrocodone, and amitriptyline,[13] which was consistent with her medication regimen. However, the urine drug test was negative for Xanax, which was inconsistent with Patient A's medication regimen.

16. On or about January 29, 2019, despite Respondent's documentation that she would no longer manage Patient A's pain, Patient A filled a prescription written by Respondent for 120 tablets of 325-10 mg Norco.

17. On or about April 16, 2019, Patient A saw Respondent for an office visit. Despite Respondent's previous note that she would no longer manage Patient A's pain management prescriptions, Respondent gave Patient A a prescription for 120 tablets of 325-10 mg Norco. Respondent also gave Patient A a prescription for 60 tablets of 0.5 mg Xanax. Respondent did not document any discussion of Patient A's inconsistent urine drug screen from January 29, 2019.

18. From on or about June 25, 2019, through April 22, 2020, Patient A saw Respondent at approximately three office visits. During this time, Respondent continued to regularly prescribe Norco and Xanax to Patient A. On or about September 10, 2019, Respondent approved Patient A's request for an early refill for Xanax. On or about November 29, 2019, Patient A submitted to a urine drug test which was positive for hydrocodone, norhydrocodone, and amitriptyline, but negative for Xanax, despite Patient A's medication regimen. At an office visit on or about February 4, 2020, Respondent did not address the results of this urine drug test. Although Respondent documented that she ordered another drug test on or about February 4, 2020, Respondent's medical records do not show that Patient A provided a urine sample that day.

19. From on or about May 4, 2020, through April 17, 2021, Respondent continued to treat Patient A and saw Patient A at approximately three telemedicine visits and one office visit. During this time, Respondent continued to prescribe Norco and Xanax to Patient A. Respondent

[13] Amitriptyline is an anti-depressant and nerve pain medication.

did not order any urine drug tests to confirm Patient A's compliance with her medication regimen or any review of the efficacy of Norco and Xanax in treating Patient A's chronic pain or anxiety. Respondent's medical record included a copy of Patient A's CURES report, printed out on or about October 12, 2020.

20. On or about April 20, 2021, Patient A saw Respondent for a telemedicine visit. Patient A reported that she had gone to the emergency room for dermatitis and chest pain and was prescribed Percocet[14] by the attending physician. Nothing in Respondent's records shows that Respondent was aware that Patient A filled prescriptions for tramadol,[15] written by another treatment provider on or about February 4, 2021, and March 11, 2021. While Respondent documented that she would refer Patient A to psychiatry, psychology, and a dermatologist, there is no documentation that those referrals were actually processed. Respondent also documented that a physical examination was done, even though the visit was virtual. She continued to prescribe Norco and Xanax to Patient A.

21. From approximately June 21, 2021, through October 21, 2021, Respondent saw Patient A in approximately four telemedicine visits. In these four virtual visits, Respondent documented that Patient A's vital signs, including blood pressure, were measured, and that physical examinations, including inspections of the head/neck, ear/nose/throat, heart, and abdomen, were completed. During that period of time, Respondent continued to prescribe Norco and Xanax to Patient A.

22. Respondent committed gross negligence in the care and treatment of Patient A, which includes, but is not limited to, the following: (1) failing to adequately manage Patient A's chronic opioid and benzodiazepine prescriptions over a period of seven years; (2) failing to adequately manage Patient A's generalized anxiety disorder and fibromyalgia; and (3) failing to adequately and accurately document the medications she prescribed to Patient A, the rationales for

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[14] Percocet is the brand name for oxycodone and acetaminophen. Oxycodone is an opioid and a Schedule II controlled substance pursuant to Health and Safety Code section 11055, subdivision (b).

[15] Tramadol, brand name Ultram, is an opioid and a Schedule IV substance pursuant to the Controlled Substances Act.

prescribing those medications, and for inaccurately documenting the completion of physical examinations during telehealth visits.

Patient B

23. On or about March 9, 2020, Patient B presented to Respondent for an initial telehealth visit. Patient B complained of pain in his right shoulder, both elbows, both wrists, his hip, his ankles, his hands, and his fingers. Patient B reported that he had been diagnosed with rheumatoid arthritis approximately ten years prior and had been previously treated with methotrexate, folic acid, and prednisone. Patient B had also tried ibuprofen, tramadol, and Aleve without improvement. His current medications included, but were not limited to, clonidine, methotrexate, and prednisone. In the medical records, Respondent documented that she conducted a physical examination even though the visit was virtual. Respondent's assessment included rheumatoid arthritis, bursitis of the right shoulder, right knee, diabetes, hypertension, and chronic kidney disease. Respondent's treatment plan was for Patient B to continue taking folic acid, prednisone, methotrexate, and tramadol. Respondent ordered lab testing and x-rays of Patient B's spine, shoulders, hands, wrists, and feet.

24. On or about March 10, 2020, Patient B filled the prescription written by Respondent for 180 tablets of 50 mg tramadol.

25. On or about April 22, 2020, Patient B saw Respondent in a follow-up telemedicine visit. Patient B reported that he had been taking his medications as prescribed, but that he had not completed all the ordered lab testing. Again, Respondent documented that she did a physical examination and reviewed vital signs even though the visit was conducted over the phone. Respondent's treatment plan was to continue Patient B's medication regimen, including Lyrica.[16] At no point did Respondent ever review Patient B's CURES report.

26. Respondent committed gross negligence in the care and treatment of Patient B which includes, but is not limited to, failing to take a complete medical history and physical exam and failing to take a comprehensive history regarding Patient B's pain.

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[16] Lyrica, brand name for pregabalin, is a nerve pain medication.

SECOND CAUSE FOR DISCIPLINE
(Repeated Negligent Acts)

27. Respondent has further subjected her Physician's and Surgeon's Certificate No. A 40291 to disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (c), of the Code, in that Respondent committed repeated negligent acts in the care and treatment of Patients A and B, as more particularly alleged in paragraphs 10 through 26, above, which are hereby incorporated by reference and re-alleged as if fully set forth herein.

THIRD CAUSE FOR DISCIPLINE
(Inadequate or Inaccurate Medical Record Keeping)

28. Respondent has further subjected her Physician's and Surgeon's Certificate No. A 40291 to disciplinary action under sections 2227 and 2223, as defined by section 2266, of the Code, in that Respondent failed to maintain adequate and accurate medical records for Patients A and B, as more particularly alleged in paragraphs 10 through 27, above, which are hereby incorporated by reference and re-alleged as if fully set forth herein.

PRAYER

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

1. Revoking or suspending Physician's and Surgeon's Certificate No. A 40291, issued to Respondent Lalitha Ananth, M.D.;

2. Revoking, suspending or denying approval of Respondent Lalitha Ananth, M.D.'s authority to supervise physician assistants and advanced practice nurses;

3. Ordering Respondent Lalitha Ananth, M.D., to pay the Board the costs of the investigation and enforcement of this case, and if placed on probation, the costs of probation monitoring; and

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

DATED: DEC 12 2024

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

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