

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

In the Matter of the Accusation
Against:

Case No. 800-2021-074896

Clint Troy Pearson, M.D.
140 Meadow Drive
Crescent City, CA 95531

AGREEMENT FOR
SURRENDER OF LICENSE

Physician's and Surgeon's
Certificate No. A 63491

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. Clint Troy Pearson, M.D. ("Respondent") has carefully read and fully understands the effect of this Agreement.
3. Respondent understands that by signing this Agreement he is enabling the Board to issue this order accepting the surrender of license without further process. Respondent 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 Respondent. The Board will not be disqualified from further action in this matter by virtue of its consideration of this Agreement.
4. Respondent acknowledges there is current disciplinary action against his license, that on March 2, 2022, an Accusation was filed against him and on July 24, 2023, a Decision was rendered wherein his license was revoked, with the

1 revocation stayed, and placed on 35 months probation with various standard terms
2 and conditions.

3 5. The current disciplinary action provides in pertinent part, "Following the
4 effective date of this Decision, if Respondent ceases practicing due to retirement,
5 or health reasons, or is otherwise unable to satisfy the terms and conditions of
6 probation, Respondent may request to surrender his license." (Condition #16).

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

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

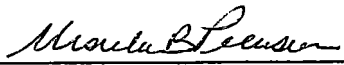
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ACCEPTANCE

I, Clint Troy Pearson, M.D. 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 Physician's and Surgeon's Certificate No. A 63491, 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 Physician and Surgeon in the State of California and that I have delivered to the Board my wallet certificate and wall license.


Clint Troy Pearson, M.D.

10/27/2025
Date


Attorney or Witness

10/27/2025
Date


Reji Varghese
Executive Director
Medical Board of California

NOV 06 2025
Date

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