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

In the Matter of the Accusation
Against:

Robert William Sears, M.D.
Physician's and Surgeon's
Certificate No. A 60936

Case No. 800-2015-012268

Respondent

DECISION

The attached Stipulation 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 July 27, 2018.

IT IS SO ORDERED: June 27, 2018.

MEDICAL BOARD OF CALIFORNIA

Kristina D. Lawson, J.D., Chair
Panel B
BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against: ROBERT WILLIAM SEARS, M.D.
26933 Camino de Estrella
Capistrano Beach, California 92624
Physician's and Surgeon's Certificate A60936,
Respondent.

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

PARTIES

1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board of California (Board). She brought this action solely in her official capacity and is represented in this matter by Xavier Becerra, Attorney General of the State of California, by Trina L. Saunders, Deputy Attorney General.

2. Respondent Robert William Sears, M.D. (Respondent) is represented in this proceeding by attorney Raymond J. McMahon, whose address is, 5440 Trabuco Road Irvine, California 92620.
3. On September 25, 1996, the Board issued Physician's and Surgeon's Certificate No. A60936 to Respondent. That license was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2015-012268, and will expire on March 31, 2020, unless renewed.

JURISDICTION

4. Accusation No. 800-2015-012268 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 September 2, 2016. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2015-012268 is attached as Exhibit A and is incorporated herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2015-012268. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

7. Respondent is fully aware of his 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 him; the right to present evidence and to testify on his 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.

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

CULPABILITY

9. Respondent understands and agrees that the charges and allegations in Accusation No. 800-2015-012268, if proven at a hearing, constitute cause for imposing discipline upon his Physician's and Surgeon's Certificate.
10. For the purpose of resolving the Accusation without the expense and uncertainty of further proceedings, Respondent agrees that, at a hearing, Complainant could establish a factual basis for the charges in the Accusation, and that Respondent hereby gives up his right to contest those charges.

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

CONTINGENCY

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

13. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.

14. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED THAT Physician's and Surgeon's Certificate No. A60936 issued to Respondent Robert William Sears, M.D. is revoked. The revocation is stayed and Respondent is placed on probation for thirty-five (35) months on the following terms and
conditions.

1. **EDUCATION COURSE.** Within 60 calendar days of the effective date of this Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee for its prior approval educational program(s) or course(s) which shall not be less than 40 hours per year, for each year of probation. The educational program(s) or course(s) shall be aimed at correcting any areas of deficient practice or knowledge and shall be Category I certified. The educational program(s) or course(s) shall be at Respondent’s expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure. Following the completion of each course, the Board or its designee may administer an examination to test Respondent’s knowledge of the course. Respondent shall provide proof of attendance for 65 hours of CME of which 40 hours were in satisfaction of this condition.

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

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

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

3. **MONITORING - PRACTICE.** Within 30 calendar days of the effective date of this
Decision, Respondent shall submit to the Board or its designee for prior approval as a practice
monitor(s), the name and qualifications of one or more licensed physicians and surgeons whose
licenses are valid and in good standing, and who are preferably American Board of Medical
Specialties (ABMS) certified. A monitor shall have no prior or current business or personal
relationship with Respondent, or other relationship that could reasonably be expected to
compromise the ability of the monitor to render fair and unbiased reports to the Board, including
but not limited to any form of bartering, shall be in Respondent’s field of practice, and must agree
to serve as Respondent’s monitor. Respondent shall pay all monitoring costs.

The Board or its designee shall provide the approved monitor with copies of the Decision(s)
and Accusation(s), and a proposed monitoring plan. Within 15 calendar days of receipt of the
Decision(s), Accusation(s), and proposed monitoring plan, the monitor shall submit a signed
statement that the monitor has read the Decision(s) and Accusation(s), fully understands the role
of a monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor disagrees
with the proposed monitoring plan, the monitor shall submit a revised monitoring plan with the
signed statement for approval by the Board or its designee.

Within 60 calendar days of the effective date of this Decision, and continuing throughout
probation, Respondent’s practice shall be monitored by the approved monitor. Respondent shall
make all records available for immediate inspection and copying on the premises by the monitor
at all times during business hours and shall retain the records for the entire term of probation.

If Respondent fails to obtain approval of a monitor within 60 calendar days of the effective
date of this Decision, Respondent shall receive a notification from the Board or its designee to
cease the practice of medicine within three (3) calendar days after being so notified. Respondent
shall cease the practice of medicine until a monitor is approved to provide monitoring
responsibility.

The monitor(s) shall submit a quarterly written report to the Board or its designee which
includes an evaluation of Respondent’s performance, indicating whether Respondent’s practices
are within the standards of practice of medicine and whether Respondent is practicing medicine safely, billing appropriately or both. It shall be the sole responsibility of Respondent to ensure that the monitor submits the quarterly written reports to the Board or its designee within 10 calendar days after the end of the preceding quarter.

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

In lieu of a monitor, Respondent may participate in a professional enhancement program approved in advance by the Board or its designee that includes, at minimum, quarterly chart review, semi-annual practice assessment, and semi-annual review of professional growth and education. Respondent shall participate in the professional enhancement program at Respondent’s expense during the term of probation.

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

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

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

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

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

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

8. **COMPLIANCE WITH PROBATION UNIT.** Respondent shall comply with the Board’s probation unit.

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

10. **PLACE OF PRACTICE.** Respondent shall not engage in the practice of medicine in Respondent’s or patient’s place of residence, unless the patient resides in a skilled nursing facility or other similar licensed facility.

11. **LICENSE RENEWAL.** Respondent shall maintain a current and renewed California physician’s and surgeon’s license.

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

   In the event Respondent should leave the State of California to reside or to practice, Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of departure and return.
13. **INTERVIEW WITH THE BOARD OR ITS DESIGNEE.** Respondent shall be available in person upon request for interviews either at Respondent’s place of business or at the probation unit office, with or without prior notice throughout the term of probation.

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

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

Respondent’s period of non-practice while on probation shall not exceed two (2) years. Periods of non-practice will not apply to the reduction of the probationary term. Periods of non-practice for a Respondent residing outside of California will relieve Respondent of the responsibility to comply with the probationary terms and conditions with the exception of this condition and the following terms and conditions of probation: Obey All Laws; General Probation Requirements; Quarterly Declarations.
15. **COMPLETION OF PROBATION.** Respondent shall comply with all financial obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the completion of probation. Upon successful completion of probation, Respondent’s certificate shall be fully restored.

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

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

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

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

DATED: May 1, 2018

ROBERT WILLIAM SEARS, M.D.
Respondent

I have read and fully discussed with Respondent ROBERT WILLIAM SEARS, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED: May 1, 2018

RAYMOND J. MCMAHON
Attorney for Respondent

ENDORSEMENT

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

Dated: May 2, 2018

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
ROBERT MCKIM BELL
Supervising Deputy Attorney General

TRINA L. SAUNDERS
Deputy Attorney General
Attorneys for Complainant
Exhibit A
BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

ROBERT SEARS, M.D.
26933 Camino de Estrella
Capistrano Beach, California 92624
Physician's and Surgeon's Certificate
No. A60936,

Respondent.

Complainant alleges:

PARTIES
1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
capacity as the Executive Director of the Medical Board of California (Board).

2. On or about September 25, 1996, the Medical Board issued Physician’s and Surgeon’s
Certificate Number A60936 to Robert Sears, M.D. (Respondent). That license was in full force
and effect at all times relevant to the charges brought herein and will expire on March 31, 2018,
unless renewed.

JURISDICTION
3. This Accusation is brought 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:

"(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.

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

5. 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.

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

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

“(g) The practice of medicine from this state into another state or country without meeting the legal requirements of that state or country for the practice of medicine. Section 2314 shall not apply to this subdivision. This subdivision shall become operative upon the implementation of the proposed registration program described in Section 2052.5.

“(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and participate in an interview by the board. This subdivision shall only apply to a certificate holder who is the subject of an investigation by the board.”

6. Section 2266 of the Code states:

“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.”

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FIRST CAUSE FOR DISCIPLINE

(Gross Negligence)

7. Respondent Robert Sears, M.D. is subject to disciplinary action under section 2234(b) in that he was grossly negligent in his care and treatment of patient J.G., a minor, who he saw for six office visits between April 2014 and May 2015. The circumstances are as follows:

8. On April 3, 2014, two-year-old J.G. presented to Respondent for the first time. He was seen by Respondent for what the medical records describe as a “2 year.” The visit of this date includes a summary of the patient’s history with a brief description of J.G.’s prior vaccination reaction, as described by the patient’s mother. Her description included, “shut down stools and urine” for 24 hours with 2 month vaccines and limp “like a ragdoll” lasting 24 hours and not himself for up to a week after 3 month vaccines.

9. Respondent wrote a letter dated April 13, 2014, excusing patient J.G. from all future vaccinations. The letter indicates that the patient’s kidneys and intestines shut down after prior vaccination and that at three months the patient suffered what appears to be a severe encephalitis reaction for 24 hours, starting approximately ten minutes after his vaccines, with lethargy, limpness, and poor responsiveness. The letter stated that, “Due to the severity of this second reaction, I recommend no more routine childhood vaccines for the duration of his childhood.”

10. The letter dated April 13, 2014, was not maintained in patient J.G.’s medical chart in Respondent’s office.

11. On May 14, 2014, patient J.G. had a consult visit with Respondent for constipation. A pertinent history was obtained, the abdominal exam was normal and a detailed treatment plan was devised.

12. On June 23, 2014, patient J.G. presented to Respondent with a chief complaint of headache with a history of patient being “hit on head with hammer” by Dad two weeks prior to the visit. A mention is made of a split lip prior to hammer incident without any additional history. A physical examination indicates, “no residual marks now.” No additional physical exam, including neurological testing, was performed and no assessment with plans was recorded.
“Allegations cannot be substantiated - case closed” outcome is maintained in the patient chart.

a history of not eating, fever, and cough for three weeks, with lethargy, and a diagnosis of croup
recorded per the nurse. His records indicate that the patient’s previous diagnoses were treated
with Xopenex and steroids. His OM (otitis media) was treated with Omniced, all “improved now”
with “flu today suddenly.” A diagnosis of flu was made and Tamiflu was prescribed.

15. On March 11, 2015, patient J.G. again presented to Respondent. The only history
recorded on that date included abdominal pain with a physical exam. Diagnoses made at that time
included constipation resolved and mild OM. The plan included miralax, magnesium, aloe,
garlic, and testing with urine culture.

with upper respiratory illness/viral. Serous otitis media was diagnosed and garlic prescribed.

17. The standard of care requires that a physician evaluating a patient for a possible
reaction to vaccines obtain a detailed history of the vaccines previously received as well as the
reaction/reactions that occurred. Based on that information the physician should provide an
evidence-based recommendation for future immunizations.

18. Respondent was grossly negligent and departed from the standard of care in that he
did not obtain the basic information necessary for decision making, prior to determining to
exclude the possibility of future vaccines, leaving both patient J.G., the patient’s mother, and his
future contacts at risk for preventable and communicable diseases.

SECOND CAUSE FOR DISCIPLINE
(Repealed Negligent Acts)

19. Respondent Robert Sears, M.D. is subject to disciplinary action under section 2234
(c) in that he was repeatedly negligent in his care and treatment of patient J.G. The circumstances
are as follows:

20. Paragraphs 7 through 18 are incorporated by reference as though fully set forth.

21. Respondent departed from the standard of care by:
(a) Failing to obtain the basic information necessary to make a decision related to the withholding of future vaccines; and

(b) Failing to conduct neurological testing as part of the physical examination of patient J.G. on June 23, 2014, when he presented to Respondent with complaints of headache, following head trauma.

THIRD CAUSE FOR DISCIPLINE

(Failure to Maintain Adequate and Accurate Records)

22. Respondent Robert Sears, M.D. is subject to disciplinary action under section 2266 in that he failed to maintain adequate and accurate records related to the care and treatment of patient J.G.

23. Specifically, Respondent did not maintain a copy of the letter he prepared exempting patient J.G. from future vaccinations and he failed to document an adequate physical examination of the patient on his visit of April 23, 2014, and merely wrote, “no residual marks.”

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 Number A60936, issued to Robert Sears, M.D.;

2. Revoking, suspending or denying approval of his authority to supervise physician assistants, pursuant to section 3527 of the Code;

3. If placed on probation, ordering him to pay the Board the costs of probation monitoring; and

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

DATED: September 2, 2016

KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

(ROBERT SEARS, M.D.) ACCUSATION NO. 800-2015-012268