

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

Case No. 800-2018-041268

Respondent

1 XAVIER BECERRA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 TAN N. TRAN
Deputy Attorney General
4 State Bar No. 197775
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7 *Attorneys for Complainant*

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

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

Case No. 800-2018-041268

12 **Sami Sorial Soliman, M.D.**

OAH No.: 2019030536

13
14 **Physician's and Surgeon's Certificate**
15 **No. A 53783 ,**

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

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

21 **PARTIES**

22 1. Kimberly Kirchmeyer ("Complainant") is the Executive Director of the Medical
23 Board of California. She brought this action solely in her official capacity and is represented in
24 this matter by Xavier Becerra, Attorney General of the State of California, by Tan N. Tran,
25 Deputy Attorney General.

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2. Respondent Sami Sorial Soliman, M.D. ("Respondent") is represented in this proceeding by attorney Raymond J. McMahon, Esq., whose address is: Doyle Schafer McMahon, LLP, 5440 Trabuco Road, Irvine, California, 92620.

3. On or about December 14, 1994, the Medical Board of California issued Physician's and Surgeon's Certificate No. A 53783 to Sami Sorial Soliman, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2018-041268 and will expire on March 31 2020, unless renewed.

JURISDICTION

4. Accusation No. 800-2018-041268 was filed before the Medical Board of California (Board), Department of Consumer Affairs, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on or about July 5, 2018. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2018-041268 is attached as exhibit A and 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. 800-2018-041268. 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 be represented by counsel at his own expense; 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.

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

CULPABILITY

9. Respondent does not contest that at an administrative hearing, complainant could establish a *prima facie* case with respect to the charges and allegations contained in Accusation No. 800-2018-041268, and that he has thereby subjected his Physician's and Surgeon's Certificate No. A 53783 to disciplinary action.

10. 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.

RESERVATION

11. The admissions made by Respondent herein are only for the purposes of this proceeding, or any other proceedings in which the Medical Board of California or other professional licensing agency is involved, and shall not be admissible in any other criminal or civil proceeding.

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.

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13. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including Portable Document Format (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. A 53783 issued to Sami Sorial Soliman, M.D. (Respondent) is revoked. However, the revocation is stayed and Respondent is placed on probation for three (3) years on the following terms and conditions.

1. **CONTROLLED SUBSTANCES- MAINTAIN RECORDS AND ACCESS TO RECORDS AND INVENTORIES.** Respondent shall maintain a record of all controlled substances ordered, prescribed, dispensed, administered, or possessed by Respondent, and any recommendation or approval which enables a patient or patient's primary caregiver to possess or cultivate marijuana for the personal medical purposes of the patient within the meaning of Health and Safety Code section 11362.5, during probation, showing all the following: 1) the name and address of patient; 2) the date; 3) the character and quantity of controlled substances involved; and 4) the indications and diagnosis for which the controlled substances were furnished.

Respondent shall keep these records in a separate file or ledger, in chronological order. All records and any inventories of controlled substances shall be available for immediate inspection and copying on the premises by the Board or its designee at all times during business hours and shall be retained for the entire term of probation.

2. **PRESCRIBING PRACTICES COURSE.** Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a course in prescribing practices equivalent to the Prescribing Practices Course at the Physician Assessment and Clinical Education Program, University of California, San Diego School of Medicine (Program), approved in advance by the Board or its designee. Respondent shall provide the program with any information and documents that the Program may deem pertinent. Respondent shall participate in and

1 successfully complete the classroom component of the course not later than six (6) months after
2 Respondent's initial enrollment. Respondent shall successfully complete any other component of
3 the course within one (1) year of enrollment. The prescribing practices course shall be at
4 Respondent's expense and shall be in addition to the Continuing Medical Education (CME)
5 requirements for renewal of licensure.

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

11 Respondent shall submit a certification of successful completion to the Board or its
12 designee not later than 15 calendar days after successfully completing the course, or not later than
13 15 calendar days after the effective date of the Decision, whichever is later.

14 3. MEDICAL RECORD KEEPING COURSE. Within 60 calendar days of the effective
15 date of this Decision, Respondent shall enroll in a course in medical record keeping equivalent to
16 the Medical Record Keeping Course offered by the Physician Assessment and Clinical Education
17 Program, University of California, San Diego School of Medicine (Program), approved in
18 advance by the Board or its designee. Respondent shall provide the program with any
19 information and documents that the Program may deem pertinent. Respondent shall participate in
20 and successfully complete the classroom component of the course not later than six (6) months
21 after Respondent's initial enrollment. Respondent shall successfully complete any other
22 component of the course within one (1) year of enrollment. The medical record keeping course
23 shall be at Respondent's expense and shall be in addition to the Continuing Medical Education
24 (CME) requirements for renewal of licensure.

25 A medical record keeping course taken after the acts that gave rise to the charges in the
26 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
27 or its designee, be accepted towards the fulfillment of this condition if the course would have
28 been approved by the Board or its designee had the course been taken after the effective date of

1 this Decision.

2 Respondent shall submit a certification of successful completion to the Board or its
3 designee not later than 15 calendar days after successfully completing the course, or not later than
4 15 calendar days after the effective date of the Decision, whichever is later.

5 4. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of
6 the effective date of this Decision, Respondent shall enroll in a professionalism program, that
7 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.
8 Respondent shall participate in and successfully complete that program. Respondent shall
9 provide any information and documents that the program may deem pertinent. Respondent shall
10 successfully complete the classroom component of the program not later than six (6) months after
11 Respondent's initial enrollment, and the longitudinal component of the program not later than the
12 time specified by the program, but no later than one (1) year after attending the classroom
13 component. The professionalism program shall be at Respondent's expense and shall be in
14 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

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

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

23 5. MONITORING - PRACTICE. Within 30 calendar days of the effective date of this
24 Decision, Respondent shall submit to the Board or its designee for prior approval as a practice
25 monitor(s), the name and qualifications of one or more licensed physicians and surgeons (i.e.
26 psychiatrist(s)) whose licenses are valid and in good standing, and who are preferably American
27 Board of Medical Specialties (ABMS) certified. A monitor shall have no prior or current
28 business or personal relationship with Respondent, or other relationship that could reasonably be

1 expected to compromise the ability of the monitor to render fair and unbiased reports to the
2 Board, including but not limited to any form of bartering, shall be in Respondent's field of
3 practice, and must agree to serve as Respondent's monitor. Respondent shall pay all monitoring
4 costs.

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

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

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

21 The monitor(s) shall submit a quarterly written report to the Board or its designee which
22 includes an evaluation of Respondent's performance, indicating whether Respondent's practices
23 of prescribing controlled substances are within the standard of care, and whether Respondent
24 prescribes controlled substances safely. It shall be the sole responsibility of Respondent to ensure
25 that the monitor submits the quarterly written reports to the Board or its designee within 10
26 calendar days after the end of the preceding quarter.

27 If the monitor resigns or is no longer available, Respondent shall, within 5 calendar days of
28 such resignation or unavailability, submit to the Board or its designee, for prior approval, the

1 name and qualifications of a replacement monitor who will be assuming that responsibility within
2 15 calendar days. If Respondent fails to obtain approval of a replacement monitor within 60
3 calendar days of the resignation or unavailability of the monitor, Respondent shall receive a
4 notification from the Board or its designee to cease the practice of medicine within three (3)
5 calendar days after being so notified Respondent shall cease the practice of medicine until a
6 replacement monitor is approved and assumes monitoring responsibility.

7 In lieu of a monitor, Respondent may participate in a professional enhancement program
8 equivalent to the one offered by the Physician Assessment and Clinical Education Program at the
9 University of California, San Diego School of Medicine, that includes, at minimum, quarterly
10 chart review, semi-annual practice assessment, and semi-annual review of professional growth
11 and education. Respondent shall participate in the professional enhancement program at
12 Respondent's expense during the term of probation.

13 6. PROHIBITED PRACTICE. During probation, Respondent is prohibited from
14 practicing medicine or treating patients in an office setting. Respondent shall only treat patients
15 in a hospital setting, during probation. After the effective date of this Decision, all patients being
16 treated by Respondent shall be notified that Respondent is prohibited from practicing medicine or
17 treating patients in an office setting. Any new patients seeking care in an office setting must be
18 provided this notification at the time of their initial appointment.

19 Respondent shall maintain a log of all patients to whom the required oral notification was
20 made. The log shall contain the: 1) patient's name, address and phone number; patient's medical
21 record number, if available; 3) the full name of the person making the notification; 4) the date the
22 notification was made; and 5) a description of the notification given. Respondent shall keep this
23 log in a separate file or ledger, in chronological order, shall make the log available for immediate
24 inspection and copying on the premises at all times during business hours by the Board or its
25 designee, and shall retain the log for the entire term of probation.

26 STANDARD CONDITIONS

27 7. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the
28 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the

1 Chief Executive Officer at every hospital where privileges or membership are extended to
2 Respondent, at any other facility where Respondent engages in the practice of medicine,
3 including all physician and locum tenens registries or other similar agencies, and to the Chief
4 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
5 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15
6 calendar days.

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

8 8. SUPERVISION OF PHYSICIAN ASSISTANTS. During probation, Respondent is
9 prohibited from supervising physician assistants.

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

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

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

18 11. GENERAL PROBATION REQUIREMENTS.

19 Compliance with Probation Unit

20 Respondent shall comply with the Board's probation unit and all terms and conditions of
21 this Decision.

22 Address Changes

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

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1 Place of Practice

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

5 License Renewal

6 Respondent shall maintain a current and renewed California physician's and surgeon's
7 license.

8 Travel or Residence Outside California

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

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

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

18 13. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
19 its designee in writing within 15 calendar days of any periods of non-practice lasting more than
20 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
21 defined as any period of time Respondent is not practicing medicine in California as defined in
22 Business and Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month
23 in direct patient care, clinical activity or teaching, or other activity as approved by the Board. All
24 time spent in an intensive training program which has been approved by the Board or its designee
25 shall not be considered non-practice. Practicing medicine in another state of the United States or
26 Federal jurisdiction while on probation with the medical licensing authority of that state or
27 jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall
28 not be considered as a period of non-practice.

1 In the event Respondent's period of non-practice while on probation exceeds 18 calendar
2 months, Respondent shall successfully complete a clinical training program that meets the criteria
3 of Condition 18 of the current version of the Board's "Manual of Model Disciplinary Orders and
4 Disciplinary Guidelines" prior to resuming the practice of medicine.

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

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

7 Periods of non-practice will relieve Respondent of the responsibility to comply with the
8 probationary terms and conditions with the exception of this condition and the following terms
9 and conditions of probation: Obey All Laws; and General Probation Requirements.

10 14. COMPLETION OF PROBATION. Respondent shall comply with all financial
11 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
12 completion of probation. Upon successful completion of probation, Respondent's certificate shall
13 be fully restored.

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

21 16. LICENSE SURRENDER. Following the effective date of this Decision, if
22 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
23 the terms and conditions of probation, Respondent may request to surrender his or her license.
24 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
25 determining whether or not to grant the request, or to take any other action deemed appropriate
26 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
27 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
28 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject

1 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
2 application shall be treated as a petition for reinstatement of a revoked certificate.

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

8
9 ACCEPTANCE

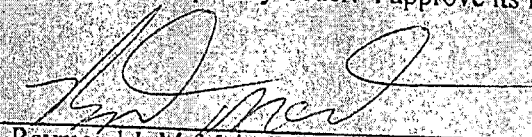
10 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
11 discussed it with my attorney, Raymond J. McMahon, Esq. I understand the stipulation and the
12 effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated
13 Settlement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

15
16 DATED: 8-8-19

17 
18 Sami Sorial Soliman, M.D.
19 Respondent

20
21 I have read and fully discussed with Respondent the terms and conditions and other matters
22 contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and
23 content.

24 DATED: August 8, 2019

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26 Raymond J. McMahon, Esq.
27 Attorney for Respondent

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ENDORSEMENT

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

Dated:

8/9/19

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
JUDITH T. ALVARADO
Supervising Deputy Attorney General



TAN N. TRAN
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 800-2018-041268

1 XAVIER BECERRA
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7 *Attorneys for Complainant*

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO July 8 20 18
BY M. M. Pacioni ANALYST

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

In the Matter of the Accusation Against:

Case No. 800-2018-041268

Sami Sorial Soliman, M.D.
1514 Crestview Road
Redlands, CA 92374

ACCUSATION

Physician's and Surgeon Certificate
No. A 53783,

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, Department of Consumer Affairs (Board).

2. On or about December 14, 1994, the Medical Board issued Physician's and Surgeon Certificate Number A 53783 to Sami Sorial Soliman, M.D. (Respondent). The Physician's and Surgeon Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on March 31, 2020, unless renewed.

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JURISDICTION

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

4. Section 2004 of the Code states:

"The board shall have the responsibility for the following:

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

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

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

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

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

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

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

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

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

5. Section 2227 of the Code provides that a licensee who is found guilty under the Medical Practice Act may have his or her license revoked, suspended for a period not to exceed one year, placed on probation and required to pay the costs of probation monitoring, or such other action taken in relation to discipline as the board deems proper.

6. 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:

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

3 "(b) Gross negligence.

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

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

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

14 "(d) Incompetence.

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

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

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

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

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1 7. Section 2241 of the Code states:

2 "(a) A physician and surgeon may prescribe, dispense, or administer prescription drugs,
3 including prescription controlled substances, to an addict under his or her treatment for a purpose
4 other than maintenance on, or detoxification from, prescription drugs or controlled substances.

5 "(b) A physician and surgeon may prescribe, dispense, or administer prescription drugs or
6 prescription controlled substances to an addict for purposes of maintenance on, or detoxification
7 from, prescription drugs or controlled substances only as set forth in subdivision (c) or in Sections
8 11215, 11217, 11217.5, 11218, 11219, and 11220 of the Health and Safety Code. Nothing in this
9 subdivision shall authorize a physician and surgeon to prescribe, dispense, or administer
10 dangerous drugs or controlled substances to a person he or she knows or reasonably believes is
11 using or will use the drugs or substances for a nonmedical purpose.

12 "(c) Notwithstanding subdivision (a), prescription drugs or controlled substances may also
13 be administered or applied by a physician and surgeon, or by a registered nurse acting under his
14 or her instruction and supervision, under the following circumstances:

15 "(1) Emergency treatment of a patient whose addiction is complicated by the presence of
16 incurable disease, acute accident, illness, or injury, or the infirmities attendant upon age.

17 "(2) Treatment of addicts in state-licensed institutions where the patient is kept under
18 restraint and control, or in city or county jails or state prisons.

19 "(3) Treatment of addicts as provided for by Section 11217.5 of the Health and Safety
20 Code.

21 "(d)(1) For purposes of this section and Section 2241.5, "addict" means a person whose
22 actions are characterized by craving in combination with one or more of the following:

23 "(A) Impaired control over drug use.

24 "(B) Compulsive use.

25 "(C) Continued use despite harm.

26 "(2) Notwithstanding paragraph (1), a person whose drug-seeking behavior is primarily due
27 to the inadequate control of pain is not an addict within the meaning of this section or Section
28 2241.5."

1 8. Section 2242 of the Code states:

2 "(a) Prescribing, dispensing, or furnishing dangerous drugs as defined in Section 4022
3 without an appropriate prior examination and a medical indication, constitutes unprofessional
4 conduct.

5 "(b) No licensee shall be found to have committed unprofessional conduct within the
6 meaning of this section if, at the time the drugs were prescribed, dispensed, or furnished, any of
7 the following applies:

8 "(1) The licensee was a designated physician and surgeon or podiatrist serving in the
9 absence of the patient's physician and surgeon or podiatrist, as the case may be, and if the drugs
10 were prescribed, dispensed, or furnished only as necessary to maintain the patient until the return
11 of his or her practitioner, but in any case no longer than 72 hours.

12 "(2) The licensee transmitted the order for the drugs to a registered nurse or to a licensed
13 vocational nurse in an inpatient facility, and if both of the following conditions exist:

14 "(A) The practitioner had consulted with the registered nurse or licensed vocational nurse
15 who had reviewed the patient's records.

16 "(B) The practitioner was designated as the practitioner to serve in the absence of the
17 patient's physician and surgeon or podiatrist, as the case may be.

18 "(3) The licensee was a designated practitioner serving in the absence of the patient's
19 physician and surgeon or podiatrist, as the case may be, and was in possession of or had utilized
20 the patient's records and ordered the renewal of a medically indicated prescription for an amount
21 not exceeding the original prescription in strength or amount or for more than one refill.

22 "(4) The licensee was acting in accordance with Section 120582 of the Health and Safety
23 Code."

24 9. Section 2266 of the Code states: AThe failure of a physician and surgeon to maintain
25 adequate and accurate records relating to the provision of services to their patients constitutes
26 unprofessional conduct.

27 ///

28 ///

10. Section 725 of the Code states:

"(a) Repeated acts of clearly excessive prescribing, furnishing, dispensing, or administering of drugs or treatment, repeated acts of clearly excessive use of diagnostic procedures, or repeated acts of clearly excessive use of diagnostic or treatment facilities as determined by the standard of the community of licensees is unprofessional conduct for a physician and surgeon, dentist, podiatrist, psychologist, physical therapist, chiropractor, optometrist, speech-language pathologist, or audiologist.

"(b) Any person who engages in repeated acts of clearly excessive prescribing or administering of drugs or treatment is guilty of a misdemeanor and shall be punished by a fine of not less than one hundred dollars (\$100) nor more than six hundred dollars (\$600), or by imprisonment for a term of not less than 60 days nor more than 180 days, or by both that fine and imprisonment.

"(c) A practitioner who has a medical basis for prescribing, furnishing, dispensing, or administering dangerous drugs or prescription controlled substances shall not be subject to disciplinary action or prosecution under this section.

"(d) No physician and surgeon shall be subject to disciplinary action pursuant to this section for treating intractable pain in compliance with Section 2241.5."

FIRST CAUSE FOR DISCIPLINE

(Gross Negligence)

11. Respondent is subject to disciplinary action under section 2234, subdivision (b), of the Code for the commission of acts or omissions involving gross negligence in the care and treatment of Patient 1 (Respondent's family member).¹ The circumstances are as follows:

Patient 1

12. Patient 1 is a 59-year-old male who treated with Respondent from about April 2015 to the present.² Patient 1 had various maladies including a history of chronic depression and

¹ The patient is identified by number to protect his privacy.

² These are approximate dates. Before April 2015, Patient 1 was receiving primary medical care from Respondent's wife. Also, Patient 1 had been receiving prescriptions for controlled substances from his ex-wife since at least 2011.

1 chronic pain.³ Per the records, from approximately April 2015 to March 2018, Respondent
2 prescribed various controlled substances to Patient 1, including a dangerous opiate (Oxycodone in
3 the form of Percocet, and a sedative/benzodiazepine (Lorazepam (Ativan)).⁴

4 13. Respondent exhibited a lack of knowledge in failing to adequately monitor Patient 1's
5 medication use/compliance by not registering in the CURES database.⁵ Respondent also
6 demonstrated a continued lack of knowledge by stating that he was only required to document
7 prescriptions for Schedule II controlled substances, whereas no documentation is necessary for
8 Schedule III, IV, or V medications.

9 14. Taken all together, the compliance monitoring and medical-record keeping of the
10 treatment provided by Respondent to Patient 1, as outlined above, represent a lack of knowledge
11 by the Respondent and constitutes an extreme departure from the standard of care.

12 **SECOND CAUSE FOR DISCIPLINE**

13 **(Repeated Negligent Acts)**

14 15. Respondent is subject to disciplinary action under section 2234, subdivision (c), of
15 the Code in that he committed repeated negligent acts in his care of Patient 1, above. The
16 circumstances are as follows:

17 16. The facts and circumstances in paragraphs 12 through 14, above, are incorporated by
18 reference as if set forth in full herein.

19 17. Respondent also committed repeated negligent acts in his care of Patient 1 above.
20 The circumstances are as follows:

21 ///

22 ³ In March 2018, Patient 1 had also been diagnosed by another physician with Severe
23 Opioid Use Disorder, Severe Benzodiazepine Use Disorder, and Depression.

24 ⁴ Per CURES, Respondent was prescribing 240 pills of Percocet per month to Patient 1 for
25 approximately 3 years (2015-2018). Interestingly, Respondent discontinued prescribing Percocet
26 and Ativan to Patient 1, and replaced Percocet with Tramadol, shortly after Patient 1 had been
27 diagnosed with a drug use disorder in March 2018.

28 ⁵ CURES allows healthcare prescribers, pharmacists, law enforcement, and regulatory
boards to access patients' and providers' controlled substance prescription histories. CURES is
intended to assist in the reduction of prescription drug abuse in California. Respondent stated to
Board representatives on May 10, 2018, that he had no intention of registering for CURES
because only pharmacists have to be registered. As of July 1, 2016, all physicians in California
were required to register with CURES.

1 18. Respondent departed from the standard of care by failing to appropriately risk stratify
2 Patient 1 for opioid therapy, failing to adequately formulate and document a treatment plan for
3 Patient 1, failing to obtain informed consent for Patient 1, and failing to have Patient 1 enter into
4 a pain management agreement. These acts and omissions in the treatment of Patient 1 constitute
5 simple departures from the standard of care.

6 **THIRD CAUSE FOR DISCIPLINE**

7 **(Excessive Prescribing)**

8 19. By reason of the facts and allegations set forth in the First and Second Causes for
9 Discipline above, Respondent is subject to disciplinary action under section 725 of the Code, in
10 that Respondent excessively prescribed dangerous drugs to Patient 1.

11 **FOURTH CAUSE FOR DISCIPLINE**

12 **(Inadequate Records)**

13 20. By reason of the facts and allegations set forth in the First and Second Causes for
14 Discipline above, Respondent is subject to disciplinary action under section 2266 of the Code, in
15 that Respondent failed to maintain adequate and accurate records of his care and treatment of
16 Patient 1.

17 **FIFTH CAUSE FOR DISCIPLINE**

18 **(Incompetence)**

19 21. By reason of the facts and allegations set forth in the First and Second Causes for
20 Discipline above, namely paragraphs 12-14 above, Respondent is subject to disciplinary action
21 under 2234, subdivision (d), of the Code, in that he exhibited a lack of knowledge in his treatment
22 of Patient 1.

23 **SIXTH CAUSE FOR DISCIPLINE**

24 **(Prescribing to an Addict)**

25 22. By reason of the facts and allegations set forth in the First and Second Causes for
26 Discipline above, namely paragraphs 12-14 above, Respondent is subject to disciplinary action
27 under section 2241 of the Code in that Respondent prescribed controlled substances to Patient 1,
28 who had signs of addiction.

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 Certificate Number A 53783, issued to Sami Sorial Soliman, M.D.;
2. Revoking, suspending or denying approval of Sami Sorial Soliman, M.D.'s authority to supervise physician assistants and advanced practice nurses;
3. Ordering Sami Sorial Soliman, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and
4. Taking such other and further action as deemed necessary and proper.

DATED: July 5, 2018


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

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