

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

In the Matter of the Accusation)
Against:)
)
)
Nicholas Andrew Rogers, M.D.)
)
Physician's and Surgeon's)
Certificate No. A 112189)
)
Respondent)
_____)

Case No. 800-2017-039785

DECISION

The attached Stipulated Settlement 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 April 15, 2020.

IT IS SO ORDERED March 16, 2020.

MEDICAL BOARD OF CALIFORNIA



By: _____
Kristina D. Lawson, J.D., Chair
Panel B

1 XAVIER BECERRA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 REBECCA L. SMITH
Deputy Attorney General
4 State Bar No. 179733
California Department of Justice
5 300 South Spring Street, Suite 1702
Los Angeles, California 90013
6 Telephone: (213) 269-6475
Facsimile: (916) 731-2117
7 *Attorneys for Complainant*

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

12 In the Matter of the Accusation Against:

13 NICHOLAS ANDREW ROGERS, M.D.
14 1245 Wilshire Boulevard, Suite 916
Los Angeles, California 90017

15 Physician's and Surgeon's Certificate
16 No. A 112189,

17 Respondent.

Case No. 800-2017-039785

OAH No. 2019030880

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

18
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. Christine J. Lally ("Complainant") is the Interim Executive Director of the Medical
23 Board of California ("Board"). She brought this action solely in her official capacity and is
24 represented in this matter by Xavier Becerra, Attorney General of the State of California, by
25 Rebecca L. Smith, Deputy Attorney General.

26 2. Respondent Nicholas Andrew Rogers, M.D. ("Respondent") is represented in this
27 proceeding by attorneys Peter Osinoff and Derek O'Reilly-Jones, whose address is 355 South
28 Grand Avenue, Suite 1750, Los Angeles, California 90071.

1 On December 21, 2017, you committed acts constituting aiding and abetting
2 the unlicensed practice of medicine in violation of Business and Professions
3 Code sections 2264, and 2234, subdivision (a), as defined by section 2052,
4 subdivision (b), in your care and treatment of patient 1, by allowing C.M. to
5 triage Patient 1 and perform a vaginal swab outside of your presence. In
6 addition, you committed repeated negligent acts in violation of Business and
7 Professions Code section 2234, subdivision (c), by also failing to properly
8 manage your prescription pad. Further, you failed to maintain adequate and
9 accurate medical records relating to the care and treatment provided to
10 Patient 1 in violation of Business and Professions Code section 2266.

11 **B. EDUCATION COURSE.** Within sixty (60) calendar days of the effective date of
12 this Decision, Respondent shall submit to the Board or its designee for its prior approval
13 educational program(s) or course(s) which shall not be less than twenty (20) hours. The
14 educational program(s) or course(s) shall be aimed at correcting any areas of deficient practice or
15 knowledge and shall be Category I certified. The educational program(s) or course(s) shall be at
16 Respondent's expense and shall be in addition to the Continuing Medical Education ("CME")
17 requirements for renewal of licensure. Following the completion of each course, the Board or its
18 designee may administer an examination to test Respondent's knowledge of the course.
19 Respondent shall provide proof of attendance for twenty (20) hours of CME in satisfaction of this
20 condition.

21 Respondent shall submit a certification of successful completion to the Board or its
22 designee not later than fifteen (15) calendar days after successfully completing the educational
23 program(s) or course(s), or not later than fifteen (15) calendar days after the effective date of the
24 Decision, whichever is later.

25 If Respondent fails to enroll, participate in, or successfully complete the educational
26 program(s) or course(s) within the designated time period, Respondent shall receive a notification
27 from the Board or its designee to cease the practice of medicine within three (3) calendar days
28 after being so notified. Respondent shall not resume the practice of medicine until enrollment or

1 participation in the educational program(s) or course(s) has been completed. Failure to
2 successfully complete the educational program(s) or course(s) outlined above shall constitute
3 unprofessional conduct and is grounds for further disciplinary action.

4 **C. MEDICAL RECORD KEEPING COURSE.** Within sixty (60) calendar days of the
5 effective date of this Decision, Respondent shall enroll in a course in medical record keeping
6 approved in advance by the Board or its designee. Respondent shall provide the approved course
7 provider with any information and documents that the approved course provider may deem
8 pertinent. Respondent shall participate in and successfully complete the classroom component of
9 the course not later than six (6) months after Respondent's initial enrollment. Respondent shall
10 successfully complete any other component of the course within one (1) year of enrollment. The
11 medical record keeping course shall be at Respondent's expense and shall be in addition to the
12 Continuing Medical Education ("CME") requirements for renewal of licensure.

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

18 Respondent shall submit a certification of successful completion to the Board or its
19 designee not later than fifteen (15) calendar days after successfully completing the course, or not
20 later than fifteen (15) calendar days after the effective date of the Decision, whichever is later.

21 If Respondent fails to enroll, participate in, or successfully complete the medical record
22 keeping course within the designated time period, Respondent shall receive a notification from
23 the Board or its designee to cease the practice of medicine within three (3) calendar days after
24 being so notified. Respondent shall not resume the practice of medicine until enrollment or
25 participation in the medical record keeping course has been completed. Failure to successfully
26 complete the medical record keeping course outlined above shall constitute unprofessional
27 conduct and is grounds for further disciplinary action.

28 ///

Exhibit A

Accusation No. 800-2017-039785

1 XAVIER BECERRA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 REBECCA L. SMITH
Deputy Attorney General
4 State Bar No. 179733
California Department of Justice
5 300 South Spring Street, Suite 1702
Los Angeles, California 90013
6 Telephone: (213) 269-6475
Facsimile: (213) 897-9395
7 *Attorneys for Complainant*

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

13 In the Matter of the Accusation Against:

Case No. 800-2017-039785

14 Nicholas Andrew Rogers, M.D.
1245 Wilshire Boulevard, Suite 916
15 Los Angeles, California 90017

A C C U S A T I O N

16 Physician's and Surgeon's Certificate
No. A 112189,

17 Respondent.
18

19
20 Complainant alleges:

21 **PARTIES**

22 1. Kimberly Kirchmeyer ("Complainant") brings this Accusation solely in her official
23 capacity as the Executive Director of the Medical Board of California, Department of Consumer
24 Affairs ("Board").

25 2. On or about April 30, 2010, the Medical Board issued Physician's and Surgeon's
26 Certificate Number A 112189 to Nicholas Andrew Rogers, M.D. ("Respondent"). That license
27 was in full force and effect at all times relevant to the charges brought herein and will expire on
28 September 30, 2019, unless renewed.

JURISDICTION

1
2 3. This Accusation is brought before the Board under the authority of the following
3 laws. All section references are to the Business and Professions Code (“Code”) unless otherwise
4 indicated.

5 4. Section 2227 of the Code states:

6 “(a) A licensee whose matter has been heard by an administrative law judge of the Medical
7 Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default
8 has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary
9 action with the board, may, in accordance with the provisions of this chapter:

10 “(1) Have his or her license revoked upon order of the board.

11 “(2) Have his or her right to practice suspended for a period not to exceed one year upon
12 order of the board.

13 “(3) Be placed on probation and be required to pay the costs of probation monitoring upon
14 order of the board.

15 “(4) Be publicly reprimanded by the board. The public reprimand may include a
16 requirement that the licensee complete relevant educational courses approved by the board.

17 “(5) Have any other action taken in relation to discipline as part of an order of probation, as
18 the board or an administrative law judge may deem proper.

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

25 5. Section 2234 of the Code, states:

26 “The board shall take action against any licensee who is charged with unprofessional
27 conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not
28 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 “... ”

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 for
8 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 “... ”

15 6. Section 2051 of the Code states:

16 “The physician’s and surgeon’s certificate authorizes the holder to use drugs or devices in
17 or upon human beings and to sever or penetrate the tissue of human beings and to use any and all
18 other methods in the treatment of diseases, injuries, deformities, and other physical and mental
19 conditions.”

20 7. Section 2052 of the Code states:

21 “(a) Notwithstanding Section 146, any person who practices or attempts to practice, or who
22 advertises or holds himself or herself out as practicing, any system or mode of treating the sick or
23 afflicted in this state, or who diagnoses, treats, operates for, or prescribes for any ailment,
24 blemish, deformity, disease, disfigurement, disorder, injury, or other physical or mental condition
25 of any person, without having at the time of so doing a valid, unrevoked, or unsuspended
26 certificate as provided in this chapter, or without being authorized to perform the act pursuant to a
27 certificate obtained in accordance with some other provision of law, is guilty of a public offense,
28 punishable by a fine not exceeding ten thousand dollars (\$10,000), by imprisonment pursuant to

1 subdivision (h) of Section 1170 of the Penal Code, by imprisonment in a county jail not
2 exceeding one year, or by both the fine and either imprisonment.

3 “(b) Any person who conspires with or aids or abets another to commit any act described in
4 subdivision (a) is guilty of a public offense, subject to the punishment described in that
5 subdivision.

6 “(c) The remedy provided in this section shall not preclude any other remedy provided by
7 law.”

8 8. Section 2264 of the Code states:

9 “The employing, directly or indirectly, the aiding, or the abetting of any unlicensed person
10 or any suspended, revoked, or unlicensed practitioner to engage in the practice of medicine or any
11 other mode of treating the sick or afflicted which requires a license to practice constitutes
12 unprofessional conduct.”

13 9. Section 2266 of the Code states:

14 “The failure of a physician and surgeon to maintain adequate and accurate records relating
15 to the provision of services to their patients constitutes unprofessional conduct.”

16 **FACTUAL ALLEGATIONS**

17 10. Respondent, an obstetrician and gynecologist, was not present in his medical office
18 on December 21, 2017 when Patient 1 presented for an initial gynecology consultation.¹
19 Respondent’s medical assistant, C.M., informed the patient that Respondent was not available to
20 perform an examination. Patient 1 reports that C.M. asked if she would like to reschedule the
21 examination with Respondent or proceed with C.M. performing the examination. C.M. reports
22 that she informed Patient 1 that the examination would need to be rescheduled and that in
23 response, Patient 1 complained to C.M. of a vaginal issue and requested a vaginal swab and birth
24 control prescription.²

25 ///

26 _____
27 ¹ For privacy purposes, the patient in this Accusation is referred to as Patient 1.

28 ² Patient 1 claims that C.M. told her that she was a physician assistant. CM claims that she told Patient 1 that she was Respondent’s assistant, a medical assistant.

1 11. C.M. consulted with Respondent by telephone and then performed a vaginal swab.
2 C.M. reports that after collecting the specimen, she instructed Patient 1 to return to the office to
3 see Respondent for the results and a full examination. Patient 1 requested and was given a
4 prescription for birth control pills. The prescription was written on Respondent's prescription
5 pad. Patient 1 reports that C.M. wrote the prescription, signed it and handed it to her. C.M.
6 reports that Respondent's prescription pad was maintained at the front desk and the prescription
7 was written by the front desk medical assistant, E.C. The front desk medical assistant E.C.
8 reports that she did not provide Patient 1 with the prescription. E.C. claims that she did not have
9 access to Respondent's prescription pads, that she never wrote prescriptions on Respondent's
10 prescription pads and that she never signed Respondent's signature on his prescription pads.
11 Respondent reports that he kept his prescription pad in his office unlocked but not pre-signed and
12 that it is not his signature on Patient 1's birth control prescription.

13 12. Patient 1's medical records from Respondent's office reflect that she presented on
14 December 21, 2017 for an initial gynecological consultation. She was 32-year-old, with no
15 reported pregnancies or births. Her birth control medication was Estarylla.³ She denied any
16 complaints or medical problems. She denied any tobacco, alcohol or drug use. She had no
17 known allergies and was not taking medications. Her height, weight, body mass index, vital signs
18 and last menstrual period were documented. With respect to laboratory studies, the record
19 reflects that a vaginal swab for infection was performed. The following orders were listed:
20 Leukorrhœa panel, candida vaginitis panel, bacterial vaginosis panel. With respect to the narrative
21 portion of the record, it was noted that the patient was in for consultation, given the option to
22 return for a full consultation with Respondent or get a vaginal swab and return for pap smear by
23 Respondent. Patient requested the vaginal swab since she was there and did not want to return
24 another day. It was further noted that the vaginal swab was performed by C.M., Respondent's
25 medical assistant, that the patient signed an agreement for the vaginal swab and that the
26 consultation would not be billed to her insurance. The patient was instructed to return in one

27
28 ³ There is no reference in the medical record as to how long Patient 1 was taking Estarylla or who prescribed it to her.

1 week for results and appointment with Respondent. The record was electronically signed by
2 Respondent on January 30, 2018. A handwritten notation on the record reflects "vaginal swab
3 was cancel [sic] due to patient complaint."

4 13. On January 9, 2018, Respondent prepared the following "To whom it may concern"
5 correspondence which is maintained as part of Patient 1's medical records:

6 "[Patient 1] presented to the office on 12/21/2017 requesting [a] well woman
7 exam. At the time I was out of the office and unavailable to immediately return to
8 the office. The patient was counseled by my medical assistant that a well woman
9 exam was not possible at the time due to my unavailability. The patient still
10 requested an exam since she had taken the time to come to the office and after
11 consulting with me over the phone, the medical assistant offered her a vaginal
12 swab and follow up visit for the well woman exam. A vaginal swab was collected
13 by the medical assistant [C.M.], and sent to the lab. After consulting with me over
14 the phone, a prescription was written for the patient. At no time did the patient
15 have an encounter with a [physician assistant], I do not have physician assistants
16 working at my practice. The visit will be billed according to the level of care and
17 not as a well woman visit."

18 **STANDARD OF CARE**

19 14. The standard of care for physicians supervising medical assistants requires
20 that the supervising physician be present for any and all clinical examinations as well as
21 performing tests that involve penetration of tissue for obtaining bodily specimens (i.e.,
22 vaginal swabs).

23 15. The standard of care requires that physicians keep prescription pads in a safe
24 and secure place, which limits access to the pads as well as reduces the potential for theft
25 and tampering.

26 16. The standard of care requires that physicians maintain accurate and adequate medical
27 records setting forth the identity of the individual providing care and treatment as well as ordering
28 diagnostic and laboratory testing.

1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Aiding and Abetting Unlicensed Practice of Medicine)**

3 17. By reason of the facts set forth above in paragraphs 10 through 16, Respondent is
4 subject to disciplinary action pursuant to sections 2264, and 2234, subdivision (a), as defined by
5 section 2052, subdivision (b), of the Code, in that he aided and abetted the unlicensed practice of
6 medicine, as more particularly alleged hereinafter:

7 a. On December 21, 2017, Respondent allowed C.M. to triage Patient 1 and
8 perform a vaginal swab outside of his presence.

9 18. Respondent's acts and/or omissions set forth in paragraphs 10 through 17 above,
10 whether proven individually, jointly, or in any combination thereof, constitute aiding or abetting
11 of any unlicensed person to engage in the practice of medicine in violation of sections 2264, and
12 2234, subdivision (a), as defined by section 2052, subdivision (b), of the Code. Therefore, cause
13 for discipline exists.

14 **SECOND CAUSE FOR DISCIPLINE**

15 **(Repeated Negligent Acts)**

16 19. By reason of the facts set forth above in paragraphs 10 through 17, Respondent is
17 subject to disciplinary action pursuant to section 2234, subdivision (c), of the Code, in that he
18 committed repeated negligent acts in the care and treatment of Patient 1, as more particularly
19 alleged hereinafter:

20 a. On December 21, 2017, Respondent allowed C.M. to triage Patient 1 and
21 perform a vaginal swab outside of his presence.

22 b. Respondent failed to properly manage his prescription pad. On December 21,
23 2017, Respondent permitted the issuance of a birth control prescription to Patient 1. The patient
24 received a birth control prescription on Respondent's prescription pad at the time of that visit.
25 Respondent confirms that it is not his signature on the prescription issued to Patient 1.

26 ///

27 ///

28 ///

1 20. Respondent's acts and/or omissions set forth in paragraphs 10 through 19, above,
2 whether proven individually, jointly, or in any combination thereof, constitute repeated negligent
3 acts in violation of section 2234, subdivision (c) of the Code. Therefore, cause for discipline
4 exists.

5 **THIRD CAUSE FOR DISCIPLINE**

6 **(Failure to Maintain Adequate and Accurate Medical Records)**

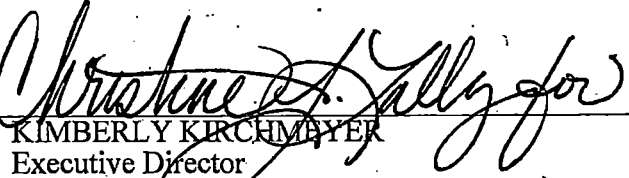
7 21. Respondent is subject to disciplinary action under section 2266 of the Code for failing
8 to maintain adequate and accurate records relating to the care and treatment provided to Patient 1.
9 Complainant refers to and, by this reference, incorporates herein, paragraphs 10 through 15 and
10 19, above, as though fully set forth herein.

11 **PRAYER**

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

- 14 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 112189,
15 issued to Nicholas Andrew Rogers, M.D.;
- 16 2. Revoking, suspending or denying approval of Nicholas Andrew Rogers, M.D.'s
17 authority to supervise physician assistants and advanced practice nurses;
- 18 3. Ordering Nicholas Andrew Rogers, M.D., if placed on probation, to pay the Board the
19 costs of probation monitoring; and
- 20 4. Taking such other and further action as deemed necessary and proper.

21
22 DATED: February 25, 2019


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

23
24
25
26 LA2019500252
27 53241397.docx
28