

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

In the Matter of the Accusation
Against:

Joseph Kent Davidson, M.D.

Physician's & Surgeon's
Certificate No G86649

Respondent

Case No. 800-2016-026032

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 February 24, 2021.

IT IS SO ORDERED January 25, 2021.

MEDICAL BOARD OF CALIFORNIA

By: 

Ronald H. Lewis, M.D., Chair
Panel A

1 XAVIER BECERRA
Attorney General of California
2 E. A. JONES III
Supervising Deputy Attorney General
3 JONATHAN NGUYEN
Deputy Attorney General
4 State Bar No. 263420
California Department of Justice
5 300 So. Spring Street, Suite 1702
Los Angeles, CA 90013
6 Telephone: (213) 269-6434
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 **JOSEPH KENT DAVIDSON, M.D.**
14 **P.O. Box 2614**
Pasadena, CA 91102

15 **Physician's and Surgeon's Certificate No.**
16 **G 86649**

17 Respondent.

Case No. 800-2016-026032

OAH No. 2019110976

18
19 **STIPULATED SETTLEMENT AND**
20 **DISCIPLINARY ORDER**

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

23 PARTIES

24 1. William Prasifka (Complainant) is the Executive Director of the Medical Board of
25 California. He brought this action solely in his official capacity and is represented in this matter
26 by Xavier Becerra, Attorney General of the State of California, by Jonathan Nguyen, Deputy
27 Attorney General.

28 2. Respondent Joseph Kent Davidson, M.D. (Respondent) is represented in this
proceeding by attorneys Carolyn Lindholm and Peter Osinoff, whose address is: BONNE
BRIDGES et. al., 355 South Grand Avenue, Suite 1750, Los Angeles, CA 90071.

1 No. 800-2016-026032, and that he has thereby subjected his Physician's and Surgeon's Certificate
2 No. G 86649 to disciplinary action.

3 10. Respondent agrees that his Physician's and Surgeon's Certificate No. G 86649 is
4 subject to discipline and he agrees to be bound by the Board's imposition of discipline as set forth
5 in the Disciplinary Order below.

6 RESERVATION

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

11 CONTINGENCY

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

22 13. The parties understand and agree that facsimile copies of this Stipulated Settlement
23 and Disciplinary Order, including facsimile signatures thereto, shall have the same force and
24 effect as the originals.

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

28 ///

1 Continuing Medical Education (CME) requirements for renewal of licensure.

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

7 Respondent shall submit a certification of successful completion to the Board or its
8 designee not later than 15 calendar days after successfully completing the course, or not later than
9 15 calendar days after the effective date of the Decision, whichever is later. Respondent must
10 complete this condition within one year of the effective date of this Decision.

11 Failure to attend and complete the medical record keeping course shall constitute general
12 unprofessional conduct and shall be grounds for further disciplinary action.

13 **D. PROFESSIONALISM PROGRAM (ETHICS COURSE).** Within sixty (60)
14 calendar days of the effective date of this Decision, Respondent shall enroll in a professionalism
15 program, that meets the requirements of Title 16, California Code of Regulations section 1358.
16 Respondent shall participate in and successfully complete that program. Respondent shall
17 provide any information and documents that the program may deem pertinent. Respondent shall
18 successfully complete the classroom component of the program not later than six (6) months after
19 Respondent's initial enrollment, and the longitudinal component of the program not later than the
20 time specified by the program, but no later than one (1) year after attending the classroom
21 component. The professionalism program shall be at Respondent's expense and shall be in
22 addition to the CME requirements for renewal of licensure.


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

28 Respondent shall submit a certification of successful completion to the Board or its

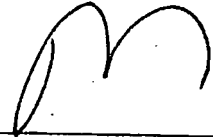
1 designee not later than 15 calendar days after successfully completing the program or not later
2 than 15 calendar days after the effective date of the Decision, whichever is later.

3 ACCEPTANCE

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

9
10 DATED: 31 Oct 2020 
11 Joseph Kent Davidson, M.D.
12 Respondent

13 I have read and fully discussed with Respondent the terms and conditions and other matters
14 contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and
15 content.

16 DATED: 11/1/2020 
17 Peter Osinoff
18 Attorney for Respondent

19 ///
20 ///
21 ///
22 ///
23 ///
24 ///
25 ///
26 ///
27 ///
28 ///

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

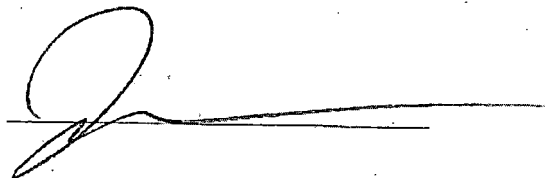
ENDORSEMENT

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

Dated: 11/2/2020

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
E. A. JONES III
Supervising Deputy Attorney General



JONATHAN NGUYEN
Deputy Attorney General
Attorneys for Complainant

LA2019503556
63688680.docx

Exhibit A

Accusation No. 800-2016-026032

1 XAVIER BECERRA
Attorney General of California
2 E. A. JONES III
Supervising Deputy Attorney General
3 State Bar No. 71375
California Department of Justice
4 300 So. Spring Street, Suite 1702
Los Angeles, CA 90013
5 Telephone: (213) 269-6000
Facsimile: (916) 731-2117
6 *Attorneys for Complainant*

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO Aug 29 20 19
BY ANALYST

7
8
9 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
10 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

11 In the Matter of the Accusation Against:

Case No. 800-2016-026032

12 **Joseph Kent Davidson, M.D.**
13 **P.O. Box 2614**
Pasadena, CA 91102

A C C U S A T I O N

14 **Physician's and Surgeon's**
15 **Certificate No. G 86649,**

16 Respondent.

17 **PARTIES**

18 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
19 capacity as the Executive Director of the Medical Board of California, Department of Consumer
20 Affairs (Board).

21 2. On or about September 25, 2002, the Medical Board issued Physician's and Surgeon's
22 Certificate Number G 86649 to Joseph Kent Davidson, M.D. (Respondent). The Physician's and
23 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
24 herein and will expire on January 31, 2020, unless renewed.

25 **JURISDICTION**

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

1 where there have been any judgments, settlements, or arbitration awards requiring the
2 physician and surgeon or his or her professional liability insurer to pay an amount in
3 damages in excess of a cumulative total of thirty thousand dollars (\$30,000) with
4 respect to any claim that injury or damage was proximately caused by the physician's
5 and surgeon's error, negligence, or omission.

6 (c) Investigating the nature and causes of injuries from cases which shall be
7 reported of a high number of judgments, settlements, or arbitration awards against a
8 physician and surgeon.

9 7. Section 2234 of the Code, states:

10 The board shall take action against any licensee who is charged with
11 unprofessional conduct. In addition to other provisions of this article, unprofessional
12 conduct includes, but is not limited to, the following:

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

15 (b) Gross negligence.

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

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

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

28 (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.

8. Section 2266 of the Code states: "The failure of a physician and surgeon to maintain

1 adequate and accurate records relating to the provision of services to their patients constitutes
2 unprofessional conduct.”

3 **FACTUAL ALLEGATIONS**

4 **Patient A**

5 9. On or about August 24, 2016, Respondent, a surgeon, saw Patient A,¹ an 72-year-old
6 man, after being referred by another doctor for evaluation of fluctuating droopy eyelids, recurring
7 and worsening following a previous eyebrow surgery performed on or about February 20, 2015.
8 The patient’s past ocular history included dry eyes. The record of the exam itself is limited to an
9 external examination and confrontation of visual fields. There was no documentation of visual
10 acuity. The patient stated that he could see better with his eyelids lifted manually. The patient’s
11 past medical history is positive for hypertension, diabetes type 2, and anxiety. In his complaint
12 form filed by the patient, the patient included, “heart issues.”

13 10. However, several elements were missing from the records for this type of
14 examination, including documentation of the patient’s visual acuity, slit lamp exam (to search for
15 dry eyes since this was one of the concerns raised by the physician), external exam with
16 measurements of eyelid fissure, marginal reflex distance (MRD), and levator muscle function.
17 Eyelid fissure, MRD, and levator function are essential parts of an oculoplastic evaluation in this
18 circumstance. Thus, Respondent’s medical records for Patient A failed to include all of the
19 essential elements for an oculoplastic exam here.

20 11. External photographs contained only left eye 45 degree angles and frontal views.
21 However, Respondent should have obtained photographs of the patient’s full face front view and
22 both right and left eye 45 degree photos. The record further states “No surgery by JKD on this
23 patient . . . patient cancelled surgery at last minute today, so discount no longer valid”

24 12. Respondent also failed to adequately diagnose, document (measurements of lid
25 fissure, MRD, levator function, position of the brows, visual fields, external photos), and/or
26 formulate a surgical plan and discuss the options with the patient. Regarding Respondent’s plan
27 (including anticipated billing), Respondent’s plan should have included an attempt to initially bill

28 ¹ Patient names are anonymized based on privacy concerns.

1 Medicare and/or insurance companies for surgical procedures with documentation of medical
2 necessity, before billing the patient directly. His preoperative discussions with the patient should
3 have also included the patient's acknowledgement of the so-called Advanced Beneficiary Notice
4 of Noncoverage (ABN, form CMS-R-131).² Physicians are required to provide ABNs in
5 connection with services that Medicare may not cover. The ABN should acknowledge that
6 coverage is uncertain and stipulate that the patient promises to pay the bill if Medicare does not.
7 This information allows a patient to make a more informed choice as to whether to undergo the
8 procedure and pay for the service.

9 13. The medical records also describe "droopy lids OU," unspecified ptosis right/left eye,
10 and brow ptosis as interchangeable terms. Due to Respondent's inadequate evaluation and record
11 keeping (namely, the absences of the patient's lid fissure measurements, MRD, and levator
12 function measurements), it is difficult for a subsequent reviewer to evaluate and determine which
13 procedure would be more appropriate. Respondent's Plan stated, "No surgery by JKD on this
14 patient," and later in the same paragraph, recommended direct brow lift both eyes with a cash
15 price of \$3,900. When the patient was reluctant due to cost, he recommended a direct brow lift³
16 on the right eye only for \$1,500 and to bill Medicare for a browpexy⁴ on the left eye. However,
17 there was no discussion of an ABN form from Medicare. The medical records fail to explain why
18 the direct brow lift (CPT code 67900, CPT Plus, 2011 ed.) would not be first billed to Medicare.
19 That CPT code is a functional and reconstructive surgery code recognized by Medicare as
20 medically necessary if the condition interferes with vision. Indeed, the patient had the same
21 procedure performed on February 20, 2015, at USC (scars visible on the photograph) using the
22 same billing code.

23 ///

24 _____
25 ² This form serves to document that the patient is aware that Medicare usually covers the
surgery, but in the event the claim is denied, the patient would be responsible for the payments.

26 ³ Direct brow lift is a procedure in which an ellipse of skin above the brow is removed and
27 the brow is anchored above the orbital rim. The skin is then closed giving further lift to the brow
and upper eyelid complex.

28 ⁴ Browpexy is a procedure similar to the direct brow lift, but no skin is removed.

1 follows:


2 23. The allegations of the First and Second Causes for Discipline, inclusive, are
3 incorporated herein by reference as if fully set forth.

4 PRAYER

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

- 7 1. Revoking or suspending Physician's and Surgeon's Certificate Number G 86649,
8 issued to Joseph Kent Davidson, M.D.;
- 9 2. Revoking, suspending or denying approval of Joseph Kent Davidson, M.D.'s
10 authority to supervise physician assistants and advanced practice nurses;
- 11 3. Ordering Joseph Kent Davidson, M.D., if placed on probation, to pay the Board the
12 costs of probation monitoring; and
- 13 4. Taking such other and further action as deemed necessary and proper.

14
15 DATED: August 29, 2019


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

16
17
18
19 LA2019503556
20 53691725.docx