

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

In the Matter of the Accusation Against:

Vishal Kashyap Gajendran, M.D.

**Physician's & Surgeon's
Certificate No. A 157176**

Respondent.

Case No. 800-2021-074260

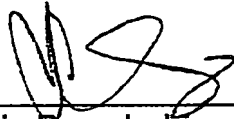
DECISION

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 October 1, 2021.

IT IS SO ORDERED: September 1, 2021.

MEDICAL BOARD OF CALIFORNIA



**Laurie Rose Lubiano, J.D., Chair
Panel A**

1 ROB BONTA
Attorney General of California
2 ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General
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8 *Attorneys for Complainant*

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

12
13 In the Matter of the Accusation Against:

Case No. 800-2021-074260

14 **VISHAL KASHYAP GAJENDRAN, M.D.**
15 **11234 ANDERSON ST WESTERLY C**
LOMA LINDA CA 92354-2804

OAH No. 2021060266

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

16 **Physician's and Surgeon's Certificate**
17 **No. A 157176,**

18 Respondent.

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

22 **PARTIES**

23 1. William Prasifka (Complainant) is the Executive Director of the Medical Board of
24 California (Board). He brought this action solely in his official capacity and is represented in this
25 matter by Rob Bonta, Attorney General of the State of California, by Christine A. Rhee, Deputy
26 Attorney General.

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1 CULPABILITY

2 9. Respondent does not contest that, at an administrative hearing, Complainant could
3 establish a prima facie case with respect to the charges and allegations contained in Accusation
4 No. 800-2021-074260 and agrees that he has thereby subjected his license to disciplinary action.

5 10. Respondent acknowledges the Disciplinary Order below, requiring the disclosure of
6 probation pursuant to Business and Professions Code section 2228.1, serves to protect the public
7 interest.

8 11. Respondent agrees that if he ever petitions for early termination or modification of
9 probation, or if an accusation and/or petition to revoke probation is filed against him before the
10 Board, all of the charges and allegations contained in Accusation No. 800-2021-074260 shall be
11 deemed true, correct and fully admitted by Respondent for purposes of any such proceeding or
12 any other licensing proceeding involving Respondent in the State of California.

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

16 CONTINGENCY

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

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1 prior to the start of the visit; (4) Respondent does not have a direct treatment relationship with the
2 patient.

3 2. ACTUAL SUSPENSION. As part of probation, Respondent is suspended from the
4 practice of medicine for sixty (60) days beginning on the effective date of this Decision.

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

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

17 4. CONTROLLED SUBSTANCES - ABSTAIN FROM USE. Respondent shall abstain
18 completely from the personal use or possession of controlled substances as defined in the
19 California Uniform Controlled Substances Act, dangerous drugs as defined by Business and
20 Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not
21 apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide
22 illness or condition.

23 Within 15 calendar days of receiving any lawfully prescribed medications, Respondent
24 shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone
25 number; medication name, strength, and quantity; and issuing pharmacy name, address, and
26 telephone number.

27 5. ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from the
28 use of products or beverages containing alcohol.

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

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

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

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

1 8. PSYCHOTHERAPY. Within 60 calendar days of the effective date of this Decision,
2 Respondent shall submit to the Board or its designee for prior approval the name and
3 qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who
4 has a doctoral degree in psychology and at least five years of postgraduate experience in the
5 diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall
6 undergo and continue psychotherapy treatment, including any modifications to the frequency of
7 psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

8 The psychotherapist shall consider any information provided by the Board or its designee
9 and any other information the psychotherapist deems relevant and shall furnish a written
10 evaluation report to the Board or its designee. Respondent shall cooperate in providing the
11 psychotherapist with any information and documents that the psychotherapist may deem
12 pertinent.

13 Respondent shall have the treating psychotherapist submit quarterly status reports to the
14 Board or its designee. The Board or its designee may require Respondent to undergo psychiatric
15 evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of
16 probation, Respondent is found to be mentally unfit to resume the practice of medicine without
17 restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the
18 period of probation shall be extended until the Board determines that Respondent is mentally fit
19 to resume the practice of medicine without restrictions.

20 Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

21 9. MEDICAL EVALUATION AND TREATMENT. Within 30 calendar days of the
22 effective date of this Decision, and on a periodic basis thereafter as may be required by the Board
23 or its designee, Respondent shall undergo a medical evaluation by a Board-appointed physician
24 who shall consider any information provided by the Board or designee and any other information
25 the evaluating physician deems relevant and shall furnish a medical report to the Board or its
26 designee. Respondent shall provide the evaluating physician with any information and
27 documentation that the evaluating physician may deem pertinent.

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1 Following the evaluation, Respondent shall comply with all restrictions or conditions
2 recommended by the evaluating physician within 15 calendar days after being notified by the
3 Board or its designee. If Respondent is required by the Board or its designee to undergo medical
4 treatment, Respondent shall within 30 calendar days of the requirement notice, submit to the
5 Board or its designee for prior approval the name and qualifications of a California licensed
6 treating physician of Respondent's choice. Upon approval of the treating physician, Respondent
7 shall within 15 calendar days undertake medical treatment and shall continue such treatment until
8 further notice from the Board or its designee.

9 The treating physician shall consider any information provided by the Board or its designee
10 or any other information the treating physician may deem pertinent prior to commencement of
11 treatment. Respondent shall have the treating physician submit quarterly reports to the Board or
12 its designee indicating whether or not the Respondent is capable of practicing medicine safely.
13 Respondent shall provide the Board or its designee with any and all medical records pertaining to
14 treatment that the Board or its designee deems necessary.

15 If, prior to the completion of probation, Respondent is found to be physically incapable of
16 resuming the practice of medicine without restrictions, the Board shall retain continuing
17 jurisdiction over Respondent's license and the period of probation shall be extended until the
18 Board determines that Respondent is physically capable of resuming the practice of medicine
19 without restrictions. Respondent shall pay the cost of the medical evaluation(s) and treatment.

20 Respondent shall not engage in the practice of medicine until notified in writing by the
21 Board or its designee of its determination that Respondent is medically fit to practice safely.

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

1 but not limited to any form of bartering, shall be in Respondent's field of practice, and must agree
2 to serve as Respondent's monitor. Respondent shall pay all monitoring costs.

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

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

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

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

25 If the monitor resigns or is no longer available, Respondent shall, within 5 calendar days of
26 such resignation or unavailability, submit to the Board or its designee, for prior approval, the
27 name and qualifications of a replacement monitor who will be assuming that responsibility within
28 15 calendar days. If Respondent fails to obtain approval of a replacement monitor within 60

1 calendar days of the resignation or unavailability of the monitor, Respondent shall receive a
2 notification from the Board or its designee to cease the practice of medicine within three (3)
3 calendar days after being so notified. Respondent shall cease the practice of medicine until a
4 replacement monitor is approved and assumes monitoring responsibility.

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

10 11. PROHIBITED PRACTICE. During probation, when Respondent resumes practice,
11 Respondent is prohibited from direct patient care or access to medications for two (2) months,
12 and will only resume direct patient care and access to medications with the approval of Loma
13 Linda University Medical Center's Well Being Committee and Respondent's addiction
14 psychiatrist. Respondent is also required to continue to receive monthly Vivitrol injections for a
15 total period of two (2) years.

16 12. CLINICAL DIAGNOSTIC EVALUATIONS AND REPORTS: Within thirty (30)
17 calendar days of the effective date of this Decision, and on whatever periodic basis thereafter as
18 may be required by the Board or its designee, Respondent shall undergo and complete a clinical
19 diagnostic evaluation, including any and all testing deemed necessary, by a Board-appointed
20 board certified physician and surgeon. The examiner shall consider any information provided by
21 the Board or its designee and any other information he or she deems relevant, and shall furnish a
22 written evaluation report to the Board or its designee.

23 The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon
24 who holds a valid, unrestricted license, has three (3) years' experience in providing evaluations of
25 physicians and surgeons with substance abuse disorders, and is approved by the Board or its
26 designee. The clinical diagnostic evaluation shall be conducted in accordance with acceptable
27 professional standards for conducting substance abuse clinical diagnostic evaluations. The
28 evaluator shall not have a current or former financial, personal, or business relationship with

1 Respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and
2 independent evaluation. The clinical diagnostic evaluation report shall set forth, in the
3 evaluator's opinion, whether Respondent has a substance abuse problem, whether Respondent is a
4 threat to himself or others, and recommendations for substance abuse treatment, practice
5 restrictions, or other recommendations related to Respondent's rehabilitation and ability to
6 practice safely. If the evaluator determines during the evaluation process that Respondent is a
7 threat to himself or others, the evaluator shall notify the Board within twenty-four (24) hours of
8 such a determination.

9 In formulating his or her opinion as to whether Respondent is safe to return to either part-
10 time or full-time practice and what restrictions or recommendations should be imposed, including
11 participation in an inpatient or outpatient treatment program, the evaluator shall consider the
12 following factors: Respondent's license type; Respondent's history; Respondent's documented
13 length of sobriety (i.e., length of time that has elapsed since Respondent's last substance use);
14 Respondent's scope and pattern of substance abuse; Respondent's psychiatric treatment history;
15 Respondent's treatment history, medical history and current medical condition; the nature,
16 duration and severity of Respondent's substance abuse problem or problems; and whether
17 Respondent is a threat to himself or herself or the public.

18 For all clinical diagnostic evaluations, a final written report shall be provided to the Board
19 no later than ten (10) days from the date the evaluator is assigned the matter. If the evaluator
20 requests additional information or time to complete the evaluation and report, an extension may
21 be granted, but shall not exceed thirty (30) days from the date the evaluator was originally
22 assigned the matter.

23 The Board shall review the clinical diagnostic evaluation report within five (5) business
24 days of receipt to determine whether Respondent is safe to return to either part-time or full-time
25 practice and what restrictions or recommendations shall be imposed on Respondent based on the
26 recommendations made by the evaluator. Respondent shall not be returned to practice until he
27 has at least thirty (30) days of negative biological fluid tests or biological fluid tests indicating

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1 that he has not used, consumed, ingested, or administered to himself a prohibited substance, as
2 defined in section 1361.51, subdivision (e), of Title 16 of the California Code of Regulations.

3 Clinical diagnostic evaluations conducted prior to the effective date of this Decision shall
4 not be accepted towards the fulfillment of this requirement. The cost of the clinical diagnostic
5 evaluation, including any and all testing deemed necessary by the examiner, the Board or its
6 designee, shall be borne by the licensee.

7 Respondent shall not engage in the practice of medicine until notified by the Board or its
8 designee that he is fit to practice medicine safely. The period of time that Respondent is not
9 practicing medicine shall not be counted toward completion of the term of probation. Respondent
10 shall undergo biological fluid testing as required in this Decision at least two (2) times per week
11 while awaiting the notification from the Board if he is fit to practice medicine safely.

12 Respondent shall comply with all restrictions or conditions recommended by the examiner
13 conducting the clinical diagnostic evaluation within fifteen (15) calendar days after being notified
14 by the Board or its designee.

15 13. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7)
16 days of the effective date of this Decision, Respondent shall provide to the Board the names,
17 physical addresses, mailing addresses, and telephone numbers of any and all employers and
18 supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's
19 worksite monitor, and Respondent's employers and supervisors to communicate regarding
20 Respondent's work status, performance, and monitoring.

21 For purposes of this section, "supervisors" shall include the Chief of Staff and Health or
22 Well Being Committee Chair, or equivalent, if applicable, when the Respondent has medical staff
23 privileges.

24 14. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to
25 biological fluid testing, at Respondent's expense, upon request of the Board or its designee.
26 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair
27 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall
28 make daily contact with the Board or its designee to determine whether biological fluid testing is

1 required. Respondent shall be tested on the date of the notification as directed by the Board or its
2 designee. The Board may order a Respondent to undergo a biological fluid test on any day, at
3 any time, including weekends and holidays. Except when testing on a specific date as ordered by
4 the Board or its designee, the scheduling of biological fluid testing shall be done on a random
5 basis. The cost of biological fluid testing shall be borne by the Respondent.

6 During the first year of probation, Respondent shall be subject to 52 to 104 random tests.
7 During the second year of probation and for the duration of the probationary term, up to five (5)
8 years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no
9 positive biological fluid tests in the previous five (5) consecutive years of probation, may testing
10 be reduced to one (1) time per month. Nothing precludes the Board from increasing the number
11 of random tests to the first-year level of frequency for any reason.

12 Prior to practicing medicine, Respondent shall contract with a laboratory or service,
13 approved in advance by the Board or its designee, that will conduct random, unannounced,
14 observed, biological fluid testing and meets all of the following standards:

15 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry
16 Association or have completed the training required to serve as a collector for the United
17 States Department of Transportation.

18 (b) Its specimen collectors conform to the current United States Department of
19 Transportation Specimen Collection Guidelines.

20 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published
21 by the United States Department of Transportation without regard to the type of test
22 administered.

23 (d) Its specimen collectors observe the collection of testing specimens.

24 (e) Its laboratories are certified and accredited by the United States Department of Health
25 and Human Services.

26 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day
27 of receipt and all specimens collected shall be handled pursuant to chain of custody
28 procedures. The laboratory shall process and analyze the specimens and provide legally

1 defensible test results to the Board within seven (7) business days of receipt of the
2 specimen. The Board will be notified of non-negative results within one (1) business day
3 and will be notified of negative test results within seven (7) business days.

4 (g) Its testing locations possess all the materials, equipment, and technical expertise
5 necessary in order to test Respondent on any day of the week.

6 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens
7 for the detection of alcohol and illegal and controlled substances.

8 (i) It maintains testing sites located throughout California.

9 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line
10 computer database that allows the Respondent to check in daily for testing.

11 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff
12 access to drug test results and compliance reporting information that is available 24 hours a
13 day.

14 (l) It employs or contracts with toxicologists that are licensed physicians and have
15 knowledge of substance abuse disorders and the appropriate medical training to interpret
16 and evaluate laboratory biological fluid test results, medical histories, and any other
17 information relevant to biomedical information.

18 (m) It will not consider a toxicology screen to be negative if a positive result is obtained
19 while practicing, even if the Respondent holds a valid prescription for the substance.

20 Prior to changing testing locations for any reason, including during vacation or other travel,
21 alternative testing locations must be approved by the Board and meet the requirements above.

22 The contract shall require that the laboratory directly notify the Board or its designee of
23 non-negative results within one (1) business day and negative test results within seven (7)
24 business days of the results becoming available. Respondent shall maintain this laboratory or
25 service contract during the period of probation.

26 A certified copy of any laboratory test result may be received in evidence in any
27 proceedings between the Board and Respondent.

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1 If a biological fluid test result indicates Respondent has used, consumed, ingested, or
2 administered to himself a prohibited substance, the Board shall order Respondent to cease
3 practice and instruct Respondent to leave any place of work where Respondent is practicing
4 medicine or providing medical services. The Board shall immediately notify all of Respondent's
5 employers, supervisors and work monitors, if any, that Respondent may not practice medicine or
6 provide medical services while the cease-practice order is in effect.

7 A biological fluid test will not be considered negative if a positive result is obtained while
8 practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited
9 substance use exists, the Board shall lift the cease-practice order within one (1) business day.

10 After the issuance of a cease-practice order, the Board shall determine whether the positive
11 biological fluid test is in fact evidence of prohibited substance use by consulting with the
12 specimen collector and the laboratory, communicating with the licensee, his or her treating
13 physician(s), other health care provider, or group facilitator, as applicable.

14 For purposes of this condition, the terms "biological fluid testing" and "testing" mean the
15 acquisition and chemical analysis of a Respondent's urine, blood, breath, or hair.

16 For purposes of this condition, the term "prohibited substance" means an illegal drug, a
17 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by
18 Respondent and approved by the Board, alcohol, or any other substance the Respondent has been
19 instructed by the Board not to use, consume, ingest, or administer to himself or herself.

20 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited
21 substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the
22 Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to
23 any other terms or conditions the Board determines are necessary for public protection or to
24 enhance Respondent's rehabilitation.

25 15. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within thirty (30) days of
26 the effective date of this Decision, Respondent shall submit to the Board or its designee, for its
27 prior approval, the name of a substance abuse support group which he shall attend for the duration
28 of probation. Respondent shall attend substance abuse support group meetings at least once per

1 week, or as ordered by the Board or its designee. Respondent shall pay all substance abuse
2 support group meeting costs.

3 The facilitator of the substance abuse support group meeting shall have a minimum of three
4 (3) years' experience in the treatment and rehabilitation of substance abuse, and shall be licensed
5 or certified by the state or nationally certified organizations. The facilitator shall not have a
6 current or former financial, personal, or business relationship with Respondent within the last five
7 (5) years. Respondent's previous participation in a substance abuse group support meeting led by
8 the same facilitator does not constitute a prohibited current or former financial, personal, or
9 business relationship.

10 The facilitator shall provide a signed document to the Board or its designee showing
11 Respondent's name, the group name, the date and location of the meeting, Respondent's
12 attendance, and Respondent's level of participation and progress. The facilitator shall report any
13 unexcused absence by Respondent from any substance abuse support group meeting to the Board,
14 or its designee, within twenty-four (24) hours of the unexcused absence.

15 16. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty
16 (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or
17 its designee for prior approval as a worksite monitor, the name and qualifications of one or more
18 licensed physician and surgeon, other licensed health care professional if no physician and
19 surgeon is available, or, as approved by the Board or its designee, a person in a position of
20 authority who is capable of monitoring the Respondent at work.

21 The worksite monitor shall not have a current or former financial, personal, or familial
22 relationship with Respondent, or any other relationship that could reasonably be expected to
23 compromise the ability of the monitor to render impartial and unbiased reports to the Board or its
24 designee. If it is impractical for anyone but Respondent's employer to serve as the worksite
25 monitor, this requirement may be waived by the Board or its designee, however, under no
26 circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

27 The worksite monitor shall have an active unrestricted license with no disciplinary action
28 within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms

1 and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth
2 by the Board or its designee.

3 Respondent shall pay all worksite monitoring costs.

4 The worksite monitor shall have face-to-face contact with Respondent in the work
5 environment on as frequent a basis as determined by the Board or its designee, but not less than
6 once per week; interview other staff in the office regarding Respondent's behavior, if requested
7 by the Board or its designee; and review Respondent's work attendance.

8 The worksite monitor shall verbally report any suspected substance abuse to the Board and
9 Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected
10 substance abuse does not occur during the Board's normal business hours, the verbal report shall
11 be made to the Board or its designee within one (1) hour of the next business day. A written
12 report that includes the date, time, and location of the suspected abuse; Respondent's actions; and
13 any other information deemed important by the worksite monitor shall be submitted to the Board
14 or its designee within 48 hours of the occurrence.

15 The worksite monitor shall complete and submit a written report monthly or as directed by
16 the Board or its designee which shall include the following: (1) Respondent's name and
17 Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3)
18 the worksite monitor's license number, if applicable; (4) the location or location(s) of the
19 worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the
20 names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance;
21 (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can
22 lead to suspected substance abuse by Respondent. Respondent shall complete any required
23 consent forms and execute agreements with the approved worksite monitor and the Board, or its
24 designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

25 If the worksite monitor resigns or is no longer available, Respondent shall, within five (5)
26 calendar days of such resignation or unavailability, submit to the Board or its designee, for prior
27 approval, the name and qualifications of a replacement monitor who will be assuming that
28 responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a

1 replacement monitor within sixty (60) calendar days of the resignation or unavailability of the
2 monitor, Respondent shall receive a notification from the Board or its designee to cease the
3 practice of medicine within three (3) calendar days after being so notified. Respondent shall
4 cease the practice of medicine until a replacement monitor is approved and assumes monitoring
5 responsibility.

6 17. VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING
7 LICENSEES. Failure to fully comply with any term or condition of probation is a violation of
8 probation.

9 A. If Respondent commits a major violation of probation as defined by section
10 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take
11 one or more of the following actions:

12 (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical
13 diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of
14 Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice
15 order issued by the Board or its designee shall state that Respondent must test negative for at least
16 a month of continuous biological fluid testing before being allowed to resume practice. For
17 purposes of determining the length of time a Respondent must test negative while undergoing
18 continuous biological fluid testing following issuance of a cease-practice order, a month is
19 defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until
20 notified in writing by the Board or its designee that he may do so.

21 (2) Increase the frequency of biological fluid testing.

22 (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or
23 other action as determined by the Board or its designee.

24 B. If Respondent commits a minor violation of probation as defined by section
25 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take
26 one or more of the following actions:

27 (1) Issue a cease-practice order;

28 (2) Order practice limitations;

- 1 (3) Order or increase supervision of Respondent;
2 (4) Order increased documentation;
3 (5) Issue a citation and fine, or a warning letter;
4 (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in
5 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of
6 Regulations, at Respondent's expense;
7 (7) Take any other action as determined by the Board or its designee.

8 C. Nothing in this Decision shall be considered a limitation on the Board's authority
9 to revoke Respondent's probation if he has violated any term or condition of probation. If
10 Respondent violates probation in any respect, the Board, after giving Respondent notice and the
11 opportunity to be heard, may revoke probation and carry out the disciplinary order that was
12 stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed
13 against Respondent during probation, the Board shall have continuing jurisdiction until the matter
14 is final, and the period of probation shall be extended until the matter is final.

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

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

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

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

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

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

9 22. GENERAL PROBATION REQUIREMENTS.

10 Compliance with Probation Unit

11 Respondent shall comply with the Board's probation unit.

12 Address Changes

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

18 Place of Practice

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

22 License Renewal

23 Respondent shall maintain a current and renewed California physician's and surgeon's
24 license.

25 Travel or Residence Outside California

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

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

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

7 24. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
8 its designee in writing within 15 calendar days of any periods of non-practice lasting more than
9 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
10 defined as any period of time Respondent is not practicing medicine as defined in Business and
11 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
12 patient care, clinical activity or teaching, or other activity as approved by the Board. If
13 Respondent resides in California and is considered to be in non-practice, Respondent shall
14 comply with all terms and conditions of probation. All time spent in an intensive training
15 program which has been approved by the Board or its designee shall not be considered non-
16 practice and does not relieve Respondent from complying with all the terms and conditions of
17 probation. Practicing medicine in another state of the United States or Federal jurisdiction while
18 on probation with the medical licensing authority of that state or jurisdiction shall not be
19 considered non-practice. A Board-ordered suspension of practice shall not be considered as a
20 period of non-practice.

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

26 Respondent's period of non-practice while on probation shall not exceed two (2) years.
27 Periods of non-practice will not apply to the reduction of the probationary term.

28 ///

1 Periods of non-practice for a Respondent residing outside of California will relieve
2 Respondent of the responsibility to comply with the probationary terms and conditions with the
3 exception of this condition and the following terms and conditions of probation: Obey All Laws;
4 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or
5 Controlled Substances; and Biological Fluid Testing..

6 25. COMPLETION OF PROBATION. Respondent shall comply with all financial
7 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
8 completion of probation. Upon successful completion of probation, Respondent's certificate shall
9 be fully restored.

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

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

27 28. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
28 with probation monitoring each and every year of probation, as designated by the Board, which

1 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
2 California and delivered to the Board or its designee no later than January 31 of each calendar
3 year.

4 29. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for
5 a new license or certification, or petition for reinstatement of a license, by any other health care
6 licensing action agency in the State of California, all of the charges and allegations contained in
7 Accusation No. 800-2021-074260 shall be deemed to be true, correct, and admitted by
8 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or
9 restrict license.

10 ACCEPTANCE

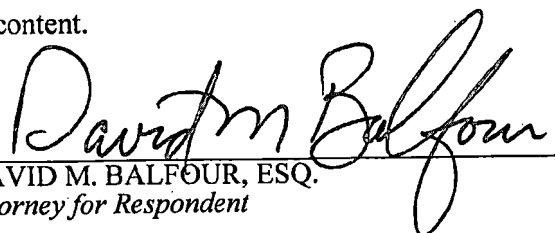
11 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
12 discussed it with my attorney, David M. Balfour, Esq. I understand the stipulation and the effect
13 it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement
14 and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

16
17 DATED: 7/22/21


18 VISHAL KASHYAP GAJENDRAN, M.D.
Respondent

19 I have read and fully discussed with Respondent Vishal Kashyap Gajendran, M.D., the
20 terms and conditions and other matters contained in the above Stipulated Settlement and
21 Disciplinary Order. I approve its form and content.

22
23 DATED: 7/22/2021


24 DAVID M. BALFOUR, ESQ.
Attorney for Respondent

25
26 ///

27 ///

28 ///

ENDORSEMENT

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

DATED: July 23, 2021

Respectfully submitted,

ROB BONTA
Attorney General of California
ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General



CHRISTINE A. RHEE
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 800-2021-074260

1 ROB BONTA
Attorney General of California
2 ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General
3 CHRISTINE A. RHEE
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8 *Attorneys for Complainant*

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

12
13 In the Matter of the Accusation Against:

Case No. 800-2021-074260

14 **VISHAL KASHYAP GAJENDRAN, M.D.**
11234 Anderson Street Westerly C
15 Loma Linda, CA 92354-2804

A C C U S A T I O N

16 **Physician's and Surgeon's Certificate**
17 **No. A 157176,**

18 Respondent.

19
20 **PARTIES**

21 1. William Prasifka (Complainant) brings this Accusation solely in his official capacity
22 as the Executive Director of the Medical Board of California, Department of Consumer Affairs
23 (Board).

24 2. On or about July 18, 2018, the Medical Board issued Physician's and Surgeon's
25 Certificate No. A 157176 to Vishal Kashyap Gajendran, M.D. (Respondent). Physician's and
26 Surgeon's Certificate No. A 157176 was in full force and effect at all times relevant to the charges
27 brought herein and will expire on July 31, 2022, unless renewed.

28 ///

JURISDICTION

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

4. Section 822 of the Code states, in pertinent part:

If a licensing agency determines that its licentiate's ability to practice his or her profession safely is impaired because the licentiate is mentally ill, or physically ill affecting competency, the licensing agency may take action by any one of the following methods:

- (a) Revoking the licentiate's certificate or license.
- (b) Suspending the licentiate's right to practice.
- (c) Placing the licentiate on probation.
- (d) Taking such other action in relation to the licentiate as the licensing agency in its discretion deems proper.

...

5. Section 2227 of the Code states, in pertinent part:

(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.

...

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1 6. Section 2228.1 of the Code states, in pertinent part:

2 On and after July 1, 2019, except as otherwise provided in subdivision (c), the
3 board shall require a licensee to provide a separate disclosure that includes the
4 licensee's probation status, the length of probation, the probation end date, all
5 practice restrictions placed on the licensee by the board, the board's telephone
6 number, and an explanation of how the patient can find further information on the
7 licensee's probation on the licensee's profile page on the board's online license
8 information Internet Web site, to a patient or the patient's guardian or health care
9 surrogate before the patient's first visit following the probationary order while the
10 licensee is on probation pursuant to a probationary order made on and after July 1,
11 2019, in any of the following circumstances:

12 (1) A final adjudication by the board following an administrative hearing or
13 admitted findings or prima facie showing in a stipulated settlement establishing any
14 of the following:

15 ...

16 (B) Drug or alcohol abuse directly resulting in harm to patients or the extent
17 that such use impairs the ability of the licensee to practice safely.

18 ...

19 7. Section 2234 of the Code, states, in pertinent part:

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

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

25 ...

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

29 ...

30 8. Section 2238 of the Code states:

31 A violation of any federal statute or federal regulation or any of the statutes or
32 regulations of this state regulating dangerous drugs or controlled substances
33 constitutes unprofessional conduct.

34 9. Section 2239 of the Code states, in pertinent part:

35 (a) The use or prescribing for or administering to himself or herself, of any
36 controlled substance; or the use of any of the dangerous drugs specified in Section
37 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous

1 or injurious to the licensee, or to any other person or to the public, or to the extent that
2 such use impairs the ability of the licensee to practice medicine safely or more than
3 one misdemeanor or any felony involving the use, consumption, or
4 self-administration of any of the substances referred to in this section, or any
5 combination thereof, constitutes unprofessional conduct.

6 ...

7 FACTUAL ALLEGATIONS

8 10. In or around December 2020, Respondent was a fourth-year resident specializing in
9 anesthesiology at Loma Linda University Health.

10 11. On or about December 19, 2020, in the early evening, Respondent's girlfriend found
11 Respondent in his home, unresponsive and unconscious. Respondent's girlfriend called a
12 physician in Respondent's residency program. Respondent's girlfriend told the resident that
13 Respondent had taken too much Fentanyl¹ and was not breathing. The resident told Respondent's
14 girlfriend to call 911.

15 12. Not long after, Respondent's girlfriend called the resident back and said that
16 Respondent had started breathing again. The resident spoke to Respondent. He told Respondent
17 that Respondent needed to report the incident to J.G., M.D., the program director for Loma
18 Linda's anesthesiology residency program. After hanging up with Respondent, the resident
19 called and reported the incident to J.G., M.D.

20 13. After receiving the call from the resident and reporting the incident to Loma Linda's
21 administration, J.G., M.D., called Respondent. Over the phone, Respondent admitted to J.G.,
22 M.D., that he had taken narcotics. J.G., M.D., told Respondent that he had to go to the hospital's
23 emergency department. J.G., M.D., went to Respondent's home and escorted him to the hospital.

24 14. As a result of the incident on or about December 19, 2020, Loma Linda University
25 Health suspended Respondent's staff privileges and subsequently reported the incident to the
26 Board.

27 15. On or about April 8, 2021, at the Medical Board's request, Respondent submitted to
28 an evaluation by M.K., M.D., a Board-certified psychiatrist. Respondent admitted that on or

¹ Fentanyl is an opioid and a Schedule II controlled substance pursuant to Health and
Safety Code section 11055, subdivision (c).

1 about December 19, 2020, he had self-injected 1 mg of Fentanyl. Respondent also admitted that
2 he had used Fentanyl in escalating doses approximately six times, and that he had also taken
3 Precedex² approximately four times, propofol³ approximately two or three times between August
4 and November 2020, and ketamine⁴ approximately two times. Respondent told M.K., M.D., that
5 he had stolen the Fentanyl, Precedex, and ketamine from the hospital.

6 16. M.K., M.D., assessed Respondent with severe opioid and sedative use disorders, both
7 in early remission. Following the December 2020 incident, and at Loma Linda's request,
8 Respondent completed an inpatient treatment program for substance abuse. At the time of his
9 evaluation with M.K., M.D., Respondent had been participating in an outpatient treatment
10 program.

11 17. After reviewing documents from the Board's investigation which included statements
12 from witnesses and Respondent's treatment records at a rehabilitation facility, M.K., M.D., opined
13 that Respondent has mental illnesses or conditions which affect his ability to practice medicine
14 safely. He also determined that allowing Respondent to continue to practice, especially as an
15 anesthesiologist with easy access to opioids and sedatives, would endanger the public health,
16 welfare, or safety.

17 **FIRST CAUSE FOR ACTION**
18 **(Mental Illness Affecting Competency)**

19 18. Respondent Physician's and Surgeon's Certificate No. A 157176 is subject to action
20 under section 822 of the Code, in that Respondent has a mental illness affecting competency, as
21 more particularly alleged in paragraphs 10 through 17, above, which are hereby incorporated by
22 reference and re-alleged as if fully set forth herein.

23 ///

24 ///

25 ///

26 _____
27 ² Precedex, brand name for dexmedetomidine, is a sedative.

28 ³ Propofol is an anesthetic often used before or during surgery.

⁴ Ketamine, often used as an anesthetic, is a Schedule III controlled substance pursuant to
Health and Safety Code section 11056, subdivision (g).

1 **FIRST CAUSE FOR DISCIPLINE**
2 **(Use or Administering to Himself of Any Controlled Substance)**

3 19. Respondent has subjected his Physician's and Surgeon's Certificate No. 157176 to
4 disciplinary action under sections 2227, 2234, and 2239, of the Code, in that Respondent
5 administered a controlled substance to himself, as more particularly alleged in paragraphs 10
6 through 17, above, which are hereby incorporated by reference and re-alleged as if fully set forth
7 herein.

8 **SECOND CAUSE FOR DISCIPLINE**
9 **(Use of Dangerous Drugs to an Extent, or in a Manner,
10 as to be Dangerous to Himself, or to Others, or to the Public)**

11 20. Respondent has further subjected his Physician's and Surgeon's Certificate No.
12 157176 to disciplinary action under sections 2227, 2234, and 2239, subdivision (a), of the Code,
13 in that Respondent used dangerous drugs to an extent or in a manner as to be dangerous to
14 himself, as more particularly alleged in paragraphs 10 through 17, above, which are hereby
15 incorporated by reference and re-alleged as if fully set forth herein.

16 **THIRD CAUSE FOR DISCIPLINE**
17 **(Violation of State Statutes Regulating Controlled Substances)**

18 21. Respondent has further subjected his Physician's and Surgeon's Certificate No.
19 157176 to disciplinary action under sections 2227, 2234, and 2238, of the Code, in that
20 Respondent violated state statutes regulating controlled substances, as more particularly alleged
21 in paragraphs 10 through 17, above, which are hereby incorporated by reference and re-alleged as
22 if fully set forth herein.

23 **FOURTH CAUSE FOR DISCIPLINE**
24 **(Dishonesty or Corruption)**

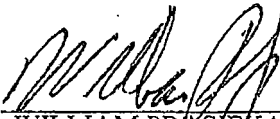
25 22. Respondent has further subjected his Physician's and Surgeon's Certificate No. A
26 157176 to disciplinary action under sections 2227 and 2234, as defined by section 2234,
27 subdivision (e), of the Code, in that he committed dishonest or corrupt acts, as more particularly
28 alleged in paragraphs 10 through 17, above, which are hereby incorporated by reference and re-
alleged as if fully set forth herein.

1 3. Ordering Respondent Vishal Kashyap Gajendran, M.D., if placed on probation, to pay
2 the Board the costs of probation monitoring;

3 4. Ordering Respondent Vishal Kashyap Gajendran, M.D., if placed on probation, to
4 disclose the disciplinary order to patients pursuant to Section 2228.1 of the Code; and

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

6
7 DATED: **MAY 19 2021**



WILLIAM PRASIFKA
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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