ROB BONTA
Attorney General of California
MATTHEW M. DAVIS
Supervising Deputy Attorney General
JASON J. AHN
Deputy Attorney General
State Bar No. 253172
600 West Broadway, Suite 1800
San Diego, CA 92101
P.O. Box 85266
San Diego, CA 92186-5266
Telephone: (619) 738-9433
Facsimile: (619) 645-2061

Attorneys for Complainant

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

In the Matter of the Accusation Against:	Case No. 800-2019-058499
JONATHAN LAM YUEN WATT, M.D. **PO Box 12078** **SAN BERNARDINO CA 92423-2078** **Physician's and Surgeon's Certificate No. A 107815,** Respondent.	**A C C U S A T I O N**

PARTIES

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

2. On or about May 15, 2009, the Board issued Physician's and Surgeon's Certificate No. A 107815 to Jonathan Lam Yuen Watt, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on April 30, 2023, unless renewed.

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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 726 of the Code states:

"(a) The commission of any act of sexual abuse, misconduct, or relations with a patient, client, or customer constitutes unprofessional conduct and grounds for disciplinary action for any person licensed under this division, under any initiative act referred to in this division.

"..."

5. Section 729 of the Code states:

"(a) Any physician and surgeon, psychotherapist, alcohol and drug abuse counselor or any person holding himself or herself out to be a physician and surgeon, psychotherapist, or alcohol and drug abuse counselor, who engages in an act of sexual intercourse, sodomy, oral copulation, or sexual contact with a patient or client . . . is guilty of sexual exploitation by a physician and surgeon, psychotherapist, or alcohol and drug abuse counselor. . ."

"For purposes of subdivision (a), in no instance shall consent of the patient or client be a defense. However, physicians and surgeons shall not be guilty of sexual exploitation for touching any intimate part of a patient or client unless the touching is outside the scope of medical examination and treatment, or the touching is done for sexual gratification.

"(c) For purposes of this section:

". . ."

"(3) "Sexual contact" means sexual intercourse or the touching of an intimate part of a patient for the purpose of sexual arousal, gratification, or abuse.

"(4) "Intimate part" and "touching" have the same meanings as defined in Section 243.4 of the Penal Code."

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6. Section 2234 of the Code, states in part:

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

"..."

"(b) Gross negligence.

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

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

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

"..."

7. Section 2228.1 of the Code states:

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

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

(A) The commission of any act of sexual abuse, misconduct, or relations with a patient or client as defined in Section 726 or 729.

"...

(2) An accusation or statement of issues alleged that the licensee committed any of the acts described in subparagraphs (A) to (D), inclusive, of paragraph (1), and a

stipulated settlement based upon a nolo contendre or other similar compromise that does not include any prima facie showing or admission of guilt or fact but does include an express acknowledgment that the disclosure requirements of this section would serve to protect the public interest.

(b) A licensee required to provide a disclosure pursuant to subdivision (a) shall obtain from the patient, or the patient's guardian or health care surrogate, a separate, signed copy of that disclosure.

(c) A licensee shall not be required to provide a disclosure pursuant to subdivision (a) if any of the following applies:

(1) The patient is unconscious or otherwise unable to comprehend the disclosure and sign the copy of the disclosure pursuant to subdivision (b) and a guardian or health care surrogate is unavailable to comprehend the disclosure and sign the copy.

(2) The visit occurs in an emergency room or an urgent care facility or the visit is unscheduled, including consultations in inpatient facilities.

(3) The licensee who will be treating the patient during the visit is not known to the patient until immediately prior to the start of the visit.

(4) The licensee does not have a direct treatment relationship with the patient.

"..."

8. Section 2266 of the Code states:

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

9. Unprofessional conduct under Business and Professions Code section 2234 is conduct which breaches the rules or ethical code of the medical profession, or conduct which is unbecoming a member in good standing of the medical profession, and which demonstrates an unfitness to practice medicine. (*Shea v. Board of Medical Examiners* (1978) 81 Cal.App.3d 564, 575.)

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FIRST CAUSE FOR DISCIPLINE

(Gross Negligence)

10. Respondent has subjected his Physician's and Surgeon's Certificate No. A 107815 to disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (b), of the Code, in that he committed gross negligence in his care and treatment of Patient A[1] and Patient B, as more particularly alleged hereinafter:

Patient A

11. On or about May 24, 2017, Patient A first presented to Respondent's office complaining of lack of motivation and unhappiness. At that time, Patient A was a twenty-seven (27) year-old female. At the end of this visit, Respondent hugged Patient A, while whispering into Patient A's ear, "We are not supposed to touch our patients." A follow-up appointment was scheduled in thirty (30) days.

12. After Patient A's visit on or about May 24, 2017 and before the next visit on or about June 26, 2017, Respondent repeatedly contacted Patient A via telephone and/or social media, expressing his desire to see Patient A again prior to the next scheduled appointment. Respondent repeatedly requested permission to visit Patient A at her residence. Patient A at first refused, but eventually agreed to allow Respondent to visit Patient A at Patient A's residence.

13. After Patient A's visit on or about May 24, 2017 and before the next visit on or about June 26, 2017, Respondent went to Patient A's residence and they had a sexual intercourse.

14. On or about June 26, 2017, Patient A returned to Respondent's office for a follow-up psychiatric care and/or treatment. During this visit, Patient A confronted Respondent by stating that Patient A believed Respondent had used her [for sex] and as a result, Patient A felt worthless. Respondent apologized to Patient A, broke down emotionally, and stated he did not want to hurt Patient A. Respondent then prompted Patient A to hug Respondent. Patient A obliged and they began kissing each other. The kissing eventually led to Patient A performing fellatio on Respondent, in his office, during this visit. Then, Patient A left.

[1] References to "Patient A" and "Patient B" are used to protect patient privacy.

15. Respondent committed gross negligence in his care and treatment of Patient A, which included, but was not limited to, the following:

(a) Respondent inappropriately engaged in sexual activities with Patient A.

Patient B

16. On or about April 26, 2017, Patient B first presented to Respondent's, complaining of anxiety and depression. At that time, Patient B was a forty-two (42) year-old female. During this visit, Respondent hugged Patient B, told her she should feel "loved," and said she is "beautiful."

17. On or about May 15, 2017, Patient B returned to Respondent for a follow-up visit. At this visit, Respondent greeted Patient B with a hug. During this visit, Respondent sat down next to Patient B, stating that he wanted to try some "relaxation techniques." Respondent began rubbing Patient B's shoulders with his hands and started to breathe heavily on her ear. Respondent stated, "I want you to have an orgasm." Respondent started to rub Patient B's breasts. At this point, Patient B froze and did not know what to do. Respondent stood up from the couch, removed Patient B's pants and underwear, and performed cunnilingus on Patient B. Patient B remained frozen. Respondent stopped, removed his pants, exposed his penis to Patient B, and attempted to move Patient B's head towards Respondent's penis for Patient B to perform fellatio on Respondent. Patient B resisted and Respondent pulled up his pants. In a stern voice, Respondent told Patient B not to tell anyone regarding what happened.

18. Respondent committed gross negligence in his care and treatment of Patient B, which included, but was not limited to, the following:

(a) Respondent inappropriately engaged in sexual activity with Patient B.

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SECOND CAUSE FOR DISCIPLINE

(Repeated Negligent Acts)

19. Respondent has further subjected his Physician's and Surgeon's Certificate No. A 107815 to disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (c), of the Code, in that he committed repeated negligent acts in his care and treatment of Patient A and Patient B, as more particularly alleged herein:

(a) Paragraphs 10 through 18, above, are hereby incorporated by reference and realleged as if fully set forth herein;

(b) Respondent inappropriately engaged in sexual activities with Patient A; and

(c) Respondent inappropriately engaged in sexual activity with Patient B.

THIRD CAUSE FOR DISCIPLINE

(Sexual Misconduct)

20. Respondent has subjected his Physician's and Surgeon's Certificate No. A 107815 to disciplinary action under section 726, of the Code, in that he engaged in sexual misconduct with Patient A and Patient B, as more particularly alleged hereinafter:

21. Paragraphs 10 through 18, above, is hereby incorporated by reference and realleged as if fully set forth herein.

FOURTH CAUSE FOR DISCIPLINE

(Sexual Exploitation of Patients)

22. Respondent has subjected his Physician's and Surgeon's Certificate No. A 107815 to disciplinary action under section 729, of the Code, in that he sexually exploited Patients A and B, as more particularly alleged hereinafter:

23. Paragraphs 10 through 18, above, is hereby incorporated by reference and realleged as if fully set forth herein.

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FIFTH CAUSE FOR DISCIPLINE

(General Unprofessional Conduct)

24. Respondent has further subjected his Physician's and Surgeon's Certificate No. A 107815 to disciplinary action under sections 2227 and 2234 of the Code, in that he has engaged in conduct which breaches the rules or ethical code of the medical profession, or conduct which is unbecoming to a member in good standing of the medical profession, and which demonstrates an unfitness to practice medicine, as more particularly alleged in paragraphs 10 through 23, above, which are hereby incorporated by reference as if fully set forth herein.

PRAYER

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

1. Revoking or suspending Physician's and Surgeon's Certificate No. A 107815, issued to Respondent Jonathan Lam Yuen Watt, M.D.;

2. Revoking, suspending or denying approval of Respondent Jonathan Lam Yuen Watt, M.D.'s authority to supervise physician assistants and advanced practice nurses;

3. Ordering Respondent Jonathan Lam Yuen Watt, M.D., if placed on probation, to pay the Board the costs of probation monitoring;

4. Ordering Respondent Jonathan Lam Yuen Watt, M.D., if placed on probation, to notify his patients pursuant to Business and Professions Code section 2228.1; and

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

DATED: OCT 20 2021

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

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