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

In the Matter of the Accusation Against: Toufan Razi, M.D. Physician's & Surgeon's Certificate No A 82682 Respondent	Case No. 800-2017-034818

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 December 2, 2021.

IT IS SO ORDERED November 2, 2021.

MEDICAL BOARD OF CALIFORNIA

Richard E. Thorp, M.D., Chair
Panel B

ROB BONTA
Attorney General of California
JANE ZACK SIMON
Supervising Deputy Attorney General
CAITLIN ROSS
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Attorneys for Complainant

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

In the Matter of the Accusation Against: **TOUFAN RAZI, M.D.** **P.O. Box 1994** **San Leandro, CA 94577** **Physician's and Surgeon's Certificate No. A 82682** Respondent.	Case No. 800-2017-034818 OAH No. 2021060088 **STIPULATED SETTLEMENT AND DISCIPLINARY ORDER**

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

PARTIES

1. William Prasifka (Complainant) is the Executive Director of the Medical Board of California (Board). He brought this action solely in his official capacity and is represented in this matter by Rob Bonta, Attorney General of the State of California, by Caitlin Ross, Deputy Attorney General.

2. Respondent Toufan Razi, M.D. (Respondent) is represented in this proceeding by attorney Robert W. Hodges, Esq., whose address is: 3480 Buskirk Avenue, Suite 250 Pleasant Hill, CA 94523

3. On or about April 11, 2003, the Board issued Physician's and Surgeon's Certificate No. A 82682 to Toufan Razi, M.D. The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2017-034818, and will expire on March 31, 2023, unless renewed.

JURISDICTION

4. Accusation No. 800-2017-034818 was filed before the Board, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on July 16, 2020. Respondent filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2017-034818 is attached as Exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2017-034818. Respondent has also carefully read, fully discussed with his counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

7. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

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

CULPABILITY

9. Respondent understands and agrees that the charges and allegations in Accusation No. 800-2017-034818, if proven at a hearing, constitute cause for imposing discipline upon his Physician's and Surgeon's Certificate.

10. Respondent agrees that, at a hearing, Complainant could establish a prima facie case or factual basis for the charges in the Accusation, and that Respondent hereby gives up his right to contest those charges.

11. Respondent does not contest that, at an administrative hearing, Complainant could establish a prima facie case with respect to the charges and allegations in Accusation No. 800-2017-034818, a true and correct copy of which is attached hereto as Exhibit A, and that he has thereby subjected his Physician's and Surgeon's Certificate, No. A 82682 to disciplinary action.

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

CONTINGENCY

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

14. Respondent agrees that if an accusation is filed against him before the Board, all of the charges and allegations contained in Accusation No. 800-2017-034818 shall be deemed true, correct and fully admitted by Respondent for purposes of any such proceeding or any other licensing proceeding involving Respondent in the State of California.

15. The parties agree that copies, including Portable Document Format (PDF) and facsimile copies, of this Stipulated Settlement and Disciplinary Order, including copies of the signatures (including Portable Document Format (PDF) and facsimile copies of the signatures),

may be used in lieu of original documents and signatures and, further, that such copies shall have the same force and effect as originals.

16. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or opportunity to be heard by the Respondent, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

A. PUBLIC REPRIMAND

IT IS HEREBY ORDERED that the Respondent, Toufan Razi, M.D., Physician's and Surgeon's Certificate No. A 82682, shall and hereby is publicly reprimanded pursuant to California Business and Profession Code, section 2227, subdivision (a)(4). This Public Reprimand, which is issued in connection with Respondent's conduct as set forth in Accusation No. 800-2017-034818, is as follows: Pursuant to Business and Professions Code sections 2234 and 2234, subdivision (c), you demonstrated unprofessional conduct through your repeated negligent acts in the treatment of Patient 1 and Patient 2 by prescribing high dosages of opioids, especially methadone, where the benefits did not appear to outweigh the risks and without recommending overdose-prevention medication. For Patient 1, you also continued to prescribe high amounts of opiates, including methadone, while another provider was simultaneously prescribing benzodiazepines. Consequently, the Board issues this Public Reprimand.

B. IT IS FURTHER ORDERED

1. PRESCRIBING PRACTICES COURSE. Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a course in prescribing practices approved in advance by the Board or its designee. Respondent shall provide the approved course provider with any information and documents that the approved course provider may deem pertinent. Respondent shall participate in and successfully complete the classroom component of the course not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully complete any other component of the course within one (1) year of enrollment. The prescribing practices course shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

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

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

Failure to enroll, participate in, or successfully complete the prescribing practices course within the designated time period shall constitute unprofessional conduct and grounds for further disciplinary action.

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

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

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

Failure to enroll, participate in, or successfully complete the medical records course within the designated time period shall constitute unprofessional conduct and grounds for further disciplinary action.

3. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for a new license or certification, or petition for reinstatement of a license, by any other health care licensing action agency in the State of California, all of the charges and allegations contained in Accusation No. 800-2017-034818 shall be deemed to be true, correct, and admitted by Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or restrict license.

ACCEPTANCE

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

DATED: 9/15/21

TOUFAN RAZI, M.D.
Respondent

I have read and fully discussed with Respondent Toufan Razi, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED: 9/21/21

ROBERT W. HODGES, ESQ.
Attorney for Respondent

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully

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RWH

submitted for consideration by the Medical Board of California.

DATED: 9-21-21

Respectfully submitted,

ROB BONTA
Attorney General of California
JANE ZACK SIMON
Supervising Deputy Attorney General

CAITLIN ROSS
Deputy Attorney General
Attorneys for Complainant

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RWH

Exhibit A

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Supervising Deputy Attorney General
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Attorneys for Complainant

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

In the Matter of the Accusation Against: **Toufan Razi, M.D.** **P.O. Box 1994** **San Leandro, CA 94577** **Physician's and Surgeon's Certificate No. A 82682,** Respondent.	Case No. 800-2017-034818 **ACCUSATION**

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 April 11, 2003, the Medical Board issued Physician's and Surgeon's Certificate Number A 82682 to Toufan Razi, 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 March 31, 2021, unless renewed.

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

5. Section 2234 of the Code, states, in relevant 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:
>
> . . .
>
> (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.
>
> . . .

RESPONDENT'S PRACTICE

6. At all times relevant to this matter, Respondent was licensed and practicing medicine in California. His practice involved pain management.

FIRST CAUSE FOR DISCIPLINE

(Unprofessional Conduct and/or Repeated Negligent Acts)

(Patient 1)[1]

7. Respondent Toufan Razi, M.D. is subject to disciplinary action under sections 2234 [unprofessional conduct] and/or 2234(c) [repeated negligent acts] in the care of Patient 1. The circumstances are as follows:

8. In March 2015, Respondent began treating Patient 1, a woman in her 50s, for pain arising from an alleged work-related injury.

9. In June 2015, Respondent prescribed oxycodone[2] to Patient 1. Oxycodone is an opiate.

10. Opiates have the potential for being abused. Tolerance and psychological and physical dependence on opiates may develop upon repeated administration that can alter mental function and produce drug dependence.

11. Respondent continued to prescribe oxycodone, and twice increased the dosage. In November 2015, when the oxycodone/acetaminophen dose was four 10-325 mg tablets a day, Respondent additionally prescribed a fentanyl patch.[3] Fentanyl is a powerful opiate that, like oxycodone, can alter mental function, produce drug dependence, and has the potential for abuse. Use of multiple opiates compounds these risks and increases the chance of overdose. The CURES records[4] show that on November 18, 2015, Patient 1 filled both a prescription for a 30-day supply of 120 tablets of 10-325 oxycodone/acetaminophen and a 30-day supply of ten 25 mcg/hour fentanyl patches.

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[1] Patient names are withheld for privacy concerns and are available to Respondent.

[2] Oxycodone with acetaminophen (trade name Percocet) is indicated for certain types of pain. The 10/325 reflects that each pill contains 10 mg of oxycodone and 325 mg of acetaminophen. Oxycodone is a narcotic. It is a dangerous drug as defined in section 4022 and a Schedule II controlled substance as defined in section 11055 of the Health and Safety Code.

[3] The fentanyl patch is a transdermal system containing fentanyl, an opioid used to treat certain types of pain. It is a dangerous drug as defined in section 4022 and a Schedule II controlled substance as defined in section 11055 of the Health and Safety Code.

[4] The Controlled Substance Utilization Review and Evaluation System (CURES) is a database of Schedule II, III and IV controlled substance prescription dispensed in California serving the public health, regulatory oversight agencies, and law enforcement.

12. On November 25, 2015, Respondent's medical records for Patient 1 reflected a benzodiazepine (clonazepam)[5] prescription from a different provider. Like opiates, benzodiazepines can alter mental function, produce drug dependence, and have the potential for abuse. Combining benzodiazepines with opiates can significantly increase the risk of overdose, including by opioid-induced respiratory depression. The benzodiazepine prescription remained in Patient 1's medical records until April 2017, and again in January 2018. Respondent knew about the benzodiazepine prescription, but continued prescribing opiates to Patient 1.

13. Respondent also started prescribing methadone[6] to Patient 1. In January 2016, Respondent prescribed a 30-day supply of 5 mg of methadone, four times a day. Methadone is a particularly risky opiate, given its instability that makes it potentially more dangerous than other opiates. In this same month, CURES shows that Patient 1 also filled prescriptions for 30-day supplies of oxycodone (120 tablets) and the fentanyl patch (10 patches). The benzodiazepine prescription also continued in this month.

14. The next month, Respondent did not prescribe fentanyl, but did double the methadone prescription to 10 mg, four times a day. He then continued to frequently prescribe methadone to Patient 1 in 30-day supplies. The benzodiazepine prescription from the other provider continued to be frequently prescribed.

15. Respondent continued prescribing various opiates to Patient 1, adding and discontinuing various opiates, and lowering the amounts for various opiates.

16. Respondent is guilty of unprofessional conduct and subject to disciplinary action under sections 2234 [unprofessional conduct] and/or 2234(c) [repeated negligent acts] based on, but not limited to, the following conduct:

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[5] Clonazepam, also known by the trade name Klonopin, is a benzodiazepine used for the management of certain types of anxiety disorders for the short-term relief of symptoms. It is a dangerous drug as defined in section 4022 and a Schedule IV controlled substance as defined in Health and Safety Code section 11057. It is a central nervous system depressant.

[6] Methadone is an opioid medication and is used for certain types of pain and as part of drug addiction detoxification and maintenance programs. It is a dangerous drug as defined in Business and Professions Code section 4022 and a Schedule II controlled substance and narcotic as defined in section 11055 of the Health and Safety Code.

A. Respondent prescribed high dosages of opioids, especially methadone, where the records reflected that the benefits did not appear to outweigh the risks.

B. Respondent prescribed high dosages of opiates, especially methadone, but did not recommend naloxone, a medication used to block the effect of opioids and prevent overdose.

C. Respondent continued prescribing high mounts of opiates, including methadone, while another provider was simultaneously prescribing benzodiazepines.

SECOND CAUSE FOR DISCIPLINE

(Unprofessional Conduct and/or Repeated Negligent Acts)

(Patient 2)

17. Paragraphs 1-16 are incorporated as set forth herein.

18. Respondent Toufan Razi, M.D. is subject to disciplinary action under sections 2234 [unprofessional conduct] and/or 2234(c) [repeated negligent acts] in the care of Patient 2. The circumstances are as follows:

19. After three visits in 2010 and a visit in 2012, the medical records reflect that Respondent treated Patient 2 as a new patient in October 2015. Respondent treated Patient 2 for a chief complaint of severe headaches. At the time, Patient 2 was a male in his 30s.

20. In order to treat Patient 2's complaint of severe headaches, Respondent prescribed the opiate methadone. As explained above, opiates have the potential for being abused. Tolerance and psychological and physical dependence on opiates may develop upon repeated administration that can alter mental function and produce drug dependence. And methadone is a particularly risky opiate, given its volatility that makes it potentially more dangerous than other opiates.

21. In October 2015, Respondent initially prescribed 10 mg of methadone per day. Respondent steadily increased the quantity, and by March 2017, Respondent prescribed 90 mg of methadone to Patient 2, with an option for Patient 2 to take an extra 10 mg as needed for pain. This constituted prescribing 300 tablets of methadone as a 30-day supply.

22. Respondent continued prescribing 90 mg of methadone per day, plus an extra 10 mg if necessary, as 30-day supplies, for a few more months. The CURES report for Patient 2 shows that 10 times between March 11, 2017 and September 1, 2017, Patient 2 filled prescriptions from

Respondent (or his supervised physician assistant) for either 30-day supplies of 300 tablets of 10 mg methadone, or 15-or 16-day supplies of 150 tablets of 10 mg methadone. This period both followed and preceded additional periods of Respondent prescribing methadone to Patient 2. Respondent did eventually attempt to wean Patient 2 off the methadone.

23. Respondent is guilty of unprofessional conduct and subject to disciplinary action under sections 2234 [unprofessional conduct] and/or 2234(c) [repeated negligent acts] based on, but not limited to, the following conduct:

A. Respondent prescribed high dosages of opioids, especially methadone, where the records reflected that the benefits did not appear to outweigh the risks.

B. Respondent prescribed high dosages of opiates, especially methadone, but did not recommend naloxone, a medication used to block the effect of opioids and prevent overdose.

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:

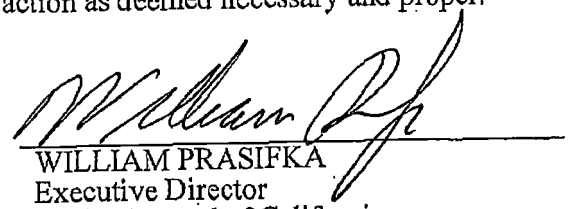
1. Revoking or suspending Physician's and Surgeon's Certificate Number A 82682, issued to Toufan Razi, M.D.;

2. Revoking, suspending or denying approval of Toufan Razi, M.D.'s authority to supervise physician assistants and advanced practice nurses;

3. Ordering Toufan Razi, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and

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

DATED: JUL 16 2020



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

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