

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

In the Matter of the Accusation  
Against:

Mi Ran Park, M.D.

Physician's and Surgeon's  
Certificate No. A 103558

Case No.: 800-2019-053505

Respondent.

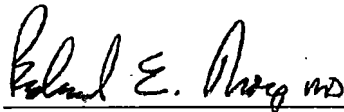
DECISION

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 17, 2021.

IT IS SO ORDERED: November 17, 2021.

MEDICAL BOARD OF CALIFORNIA



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

1 ROB BONTA  
Attorney General of California  
2 JANE ZACK SIMON  
Supervising Deputy Attorney General  
3 LAWRENCE MERCER  
Deputy Attorney General  
4 State Bar No. 111898  
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*Attorneys for Complainant*  
7

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

12 In the Matter of the Accusation Against:  
13 **MI RAN PARK, M.D.**  
14 **5150 Graves Ave. Ste. 11B**  
**San Jose CA 95129-5014**  
15  
16 **Physician's and Surgeon's Certificate No. A**  
**103558**  
17 Respondent.

Case No. 800-2019-053505

**STIPULATED SETTLEMENT AND  
DISCIPLINARY ORDER**

18  
19 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-  
20 entitled proceedings that the following matters are true:

21 **PARTIES**

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

2 9. Respondent understands and agrees that the charges and allegations in Accusation  
3 No. 800-2019-053505, if proven at a hearing, constitute cause for imposing discipline upon her  
4 Physician's and Surgeon's Certificate.

5 10. Respondent agrees that, at a hearing, Complainant could establish a factual basis for  
6 the charges in the Accusation, and that Respondent hereby gives up her right to contest those  
7 charges.

8 11. Respondent agrees that her Physician's and Surgeon's Certificate is subject to  
9 discipline and she agrees to be bound by the Board's probationary terms as set forth in the  
10 Disciplinary Order below.

11 CONTINGENCY

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

22 13. Respondent agrees that if she ever petitions for early termination or modification of  
23 probation, or if an accusation and/or petition to revoke probation is filed against her before the  
24 Board, all of the charges and allegations contained in Accusation No. 800-2019-053505 shall be  
25 deemed true, correct and fully admitted by respondent for purposes of any such proceeding or any  
26 other licensing proceeding involving Respondent in the State of California.

1 **ADDITIONAL PROVISIONS**

2 14. This Stipulated Settlement and Disciplinary Order is intended by the parties herein to  
3 be an integrated writing representing the complete, final, and exclusive embodiment of the  
4 agreements of the parties in the above-entitled matter.

5 15. The parties understand and agree that copies of this Stipulated Settlement and  
6 Disciplinary Order, including copies of the signatures, shall have the same force and effect as the  
7 originals.

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

11 **DISCIPLINARY ORDER**

12 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 103558 issued  
13 to Respondent MI RAN PARK, M.D. is revoked. However, the revocation is stayed and  
14 Respondent is placed on probation for five (5) years on the following terms and conditions:

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

25 2. **MEDICAL RECORD KEEPING COURSE.** Within 60 calendar days of the effective  
26 date of this Decision, Respondent shall enroll in a course in medical record keeping approved in  
27 advance by the Board or its designee. Respondent shall provide the approved course provider  
28 with any information and documents that the approved course provider may deem pertinent.

1 Respondent shall participate in and successfully complete the classroom component of the course  
2 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully  
3 complete any other component of the course within one (1) year of enrollment. The medical  
4 record keeping course shall be at Respondent's expense and shall be in addition to the Continuing  
5 Medical Education (CME) requirements for renewal of licensure.

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

11 Respondent shall submit a certification of successful completion to the Board or its  
12 designee not later than 15 calendar days after successfully completing the course, or not later than  
13 15 calendar days after the effective date of the Decision, whichever is later.

14 3. CLINICAL COMPETENCE ASSESSMENT PROGRAM. Within 60 calendar days  
15 of the effective date of this Decision, Respondent shall enroll in a clinical competence assessment  
16 program approved in advance by the Board or its designee. Respondent shall successfully  
17 complete the program not later than six (6) months after Respondent's initial enrollment unless  
18 the Board or its designee agrees in writing to an extension of that time.

19 The program shall consist of a comprehensive assessment of Respondent's physical and  
20 mental health and the six general domains of clinical competence as defined by the Accreditation  
21 Council on Graduate Medical Education and American Board of Medical Specialties pertaining to  
22 Respondent's current or intended area of practice. The program shall take into account data  
23 obtained from the pre-assessment, self-report forms and interview, and the Decision(s),  
24 Accusation(s), and any other information that the Board or its designee deems relevant. The  
25 program shall require Respondent's on-site participation for a minimum of three (3) and no more  
26 than five (5) days as determined by the program for the assessment and clinical education  
27 evaluation. Respondent shall pay all expenses associated with the clinical competence  
28 assessment program.

1 At the end of the evaluation, the program will submit a report to the Board or its designee  
2 which unequivocally states whether the Respondent has demonstrated the ability to practice  
3 safely and independently. Based on Respondent's performance on the clinical competence  
4 assessment, the program will advise the Board or its designee of its recommendation(s) for the  
5 scope and length of any additional educational or clinical training, evaluation or treatment for any  
6 medical condition or psychological condition, or anything else affecting Respondent's practice of  
7 medicine. Respondent shall comply with the program's recommendations.

8 Determination as to whether Respondent successfully completed the clinical competence  
9 assessment program is solely within the program's jurisdiction.

10 If Respondent fails to enroll, participate in, or successfully complete the clinical  
11 competence assessment program within the designated time period, Respondent shall receive a  
12 notification from the Board or its designee to cease the practice of medicine within three (3)  
13 calendar days after being so notified. The Respondent shall not resume the practice of medicine  
14 until enrollment or participation in the outstanding portions of the clinical competence assessment  
15 program have been completed. If the Respondent did not successfully complete the clinical  
16 competence assessment program, the Respondent shall not resume the practice of medicine until a  
17 final decision has been rendered on the accusation and/or a petition to revoke probation. The  
18 cessation of practice shall not apply to the reduction of the probationary time period.]

19 4. MONITORING -- PRACTICE. Within 30 calendar days of the effective date of this  
20 Decision, Respondent shall submit to the Board or its designee for prior approval as a practice  
21 monitor, the name and qualifications of one or more licensed physicians and surgeons whose  
22 licenses are valid and in good standing, and who are preferably American Board of Medical  
23 Specialties (ABMS) certified. A monitor shall have no prior or current business or personal  
24 relationship with Respondent, or other relationship that could reasonably be expected to  
25 compromise the ability of the monitor to render fair and unbiased reports to the Board, including  
26 but not limited to any form of bartering, shall be in Respondent's field of practice, and must agree  
27 to serve as Respondent's monitor. Respondent shall pay all monitoring costs.

28 The Board or its designee shall provide the approved monitor with copies of the Decision

1 and Accusation, and a proposed monitoring plan. Within 15 calendar days of receipt of the  
2 Decision, Accusation, and proposed monitoring plan, the monitor shall submit a signed statement  
3 that the monitor has read the Decision and Accusation, fully understands the role of a monitor,  
4 and agrees or disagrees with the proposed monitoring plan. If the monitor disagrees with the  
5 proposed monitoring plan, the monitor shall submit a revised monitoring plan with the signed  
6 statement for approval by the Board or its designee.

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

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

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

22 If the monitor resigns or is no longer available, Respondent shall, within 5 calendar days of  
23 such resignation or unavailability, submit to the Board or its designee, for prior approval, the  
24 name and qualifications of a replacement monitor who will be assuming that responsibility within  
25 15 calendar days. If Respondent fails to obtain approval of a replacement monitor within 60  
26 calendar days of the resignation or unavailability of the monitor, Respondent shall receive a  
27 notification from the Board or its designee to cease the practice of medicine within three (3)  
28 calendar days after being so notified. Respondent shall cease the practice of medicine until a



1 replacement monitor is approved and assumes monitoring responsibility.

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

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

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

16 6. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE  
17 NURSES. During probation, Respondent is prohibited from supervising physician assistants and  
18 advanced practice nurses.

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

22 8. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations  
23 under penalty of perjury on forms provided by the Board, stating whether there has been  
24 compliance with all the conditions of probation.

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

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1           9.    GENERAL PROBATION REQUIREMENTS.

2           Compliance with Probation Unit

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

4           Address Changes

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

10          Place of Practice

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

14          License Renewal

15          Respondent shall maintain a current and renewed California physician's and surgeon's  
16 license.

17          Travel or Residence Outside California

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

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

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

27          11.   NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or  
28 its designee in writing within 15 calendar days of any periods of non-practice lasting more than

1 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is  
2 defined as any period of time Respondent is not practicing medicine as defined in Business and  
3 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct  
4 patient care, clinical activity or teaching, or other activity as approved by the Board. If  
5 Respondent resides in California and is considered to be in non-practice, Respondent shall  
6 comply with all terms and conditions of probation. All time spent in an intensive training  
7 program which has been approved by the Board or its designee shall not be considered non-  
8 practice and does not relieve Respondent from complying with all the terms and conditions of  
9 probation. Practicing medicine in another state of the United States or Federal jurisdiction while  
10 on probation with the medical licensing authority of that state or jurisdiction shall not be  
11 considered non-practice. A Board-ordered suspension of practice shall not be considered as a  
12 period of non-practice.

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

18 Respondent's period of non-practice while on probation shall not exceed two (2) years.

19 Periods of non-practice will not apply to the reduction of the probationary term.

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

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

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

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

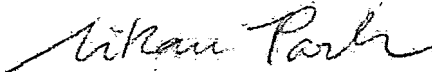
18           15. PROBATION MONITORING COSTS. Respondent shall pay the costs associated  
19 with probation monitoring each and every year of probation, as designated by the Board, which  
20 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of  
21 California and delivered to the Board or its designee no later than January 31 of each calendar  
22 year.

23           16. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for  
24 a new license or certification, or petition for reinstatement of a license, by any other health care  
25 licensing action agency in the State of California, all of the charges and allegations contained in  
26 Accusation No. 800-2019-053505 shall be deemed to be true, correct, and admitted by  
27 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or  
28 restrict license.

1 ACCEPTANCE

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

7  
8 DATED: 9/30/2021



9 MI RAN PARK, M.D.  
10 *Respondent*

11  
12 I have read and fully discussed with Respondent Mi Ran Park, M.D. the terms and  
13 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.  
14 I approve its form and content.

15 HINSHAW, MARSH, STILL & HINSHAW

16  
17 DATED: 9-30-21



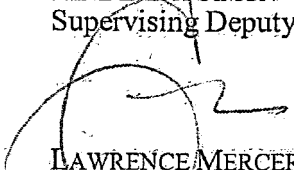
18 BRADFORD J. HINSHAW  
19 *Attorney for Respondent*

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**ENDORSEMENT**

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

DATED: Oct 1, 2021

Respectfully submitted,  
ROB BONTA  
Attorney General of California  
JANE ZACK SIMON  
Supervising Deputy Attorney General  
  
LAWRENCE MERCER  
Deputy Attorney General  
*Attorneys for Complainant*

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# Exhibit A

1 XAVIER BECERRA  
Attorney General of California  
2 JANE ZACK SIMON  
Supervising Deputy Attorney General  
3 LAWRENCE MERCER  
Deputy Attorney General  
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7 *Attorneys for Complainant*

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13 **Mi Ran Park, M.D.**  
14 **5150 Graves Ave. Ste. 11B**  
**San Jose, CA 95129-5014**

**A C C U S A T I O N**

15 **Physician's and Surgeon's Certificate No. A**  
16 **103558,**

17 Respondent.

18  
19 **PARTIES**

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

23 2. On or about April 23, 2008, the Medical Board issued Physician's and Surgeon's  
24 Certificate Number A 103558 to Mi Ran Park, M.D. (Respondent). The Physician's and  
25 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought  
26 herein and will expire on November 30, 2021, unless renewed.

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28 ///



1 **JURISDICTION**

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

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

9 5. Section 2234 of the Code, in pertinent parts, states:

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

13 ... (b) Gross negligence.

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

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

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

24 -6. Section 2266 of the Code states: The failure of a physician and surgeon to maintain  
25 adequate and accurate records relating to the provision of services to their patients constitutes  
26 unprofessional conduct.

27 **FIRST CAUSE FOR DISCIPLINE**

28 **(Gross Negligence, Repeated Negligent Acts)**

7. Respondent Mi Ran Park, M.D. is subject to disciplinary action under section 2234  
and/or 2234(b) and/or 2234(c) in that Respondent engaged in unprofessional conduct and/or gross

1 negligence and/or repeated acts of negligence in her care and treatment of Patient 1.<sup>1</sup> The  
2 circumstances are as follows:

3 8. At all relevant times, Respondent was a physician with a specialization in Family  
4 Medicine in the County of Santa Clara, California.

5 9. - On September 11, 2014, Patient 1, a 63-year-old woman with a history significant for  
6 Stage IIIB uterine and cervical cancer treated with surgery, radiation and chemotherapy,  
7 presented with complaints of severe vaginal atrophy and dyspareunia. Patient 1 stated that she had  
8 been given several vaginal dilators by her treating OB/GYN, but her efforts at dilation at home  
9 were too painful. Patient 1 requested Respondent's assistance with vaginal dilation for relief from  
10 her dyspareunia.

11 10. Although Respondent had no experience performing vaginal dilation, she agreed to  
12 provide treatment to Patient 1. She did not obtain Patient 1's prior medical records relating to her  
13 cancer treatment nor did she consult with Patient 1's treating OB/GYN. Respondent did elicit a  
14 history of cervical cancer, but she did not perform a Pap smear or document an evaluation of the  
15 vaginal tissue. In an interview with the Board's investigator and medical consultant, Respondent  
16 stated that she did perform a pelvic examination; however, she did not document such an  
17 examination in her records. At the first visit, she provided anesthesia via a topical compound of  
18 bupivacaine (20 percent), lidocaine (6 percent), tetracaine (2 percent) and a ketorolac injection.  
19 Using the vaginal dilators that Patient 1 brought with her, Respondent attempted vaginal dilation  
20 over approximately 40 minutes, after which she provided the topical compound and instructions  
21 on home use of the anesthetic and dilators to Patient 1.

22 11. Patient 1 returned on September 30, 2014. At that time, in addition to dilation,  
23 Respondent attempted scar removal to address the patient's vaginal stenosis. Utilizing a uterine or  
24 endocervical curette and a suture removal kit, she removed scar tissue from the vagina in a  
25 scraping procedure. Respondent did not obtain and/or did not document informed consent to this  
26 procedure. In a subsequent interview, Respondent stated that she had never performed this  
27 procedure before. Despite the patient's history of cancer, Respondent did not obtain and/or did

28 <sup>1</sup> The patient's name is redacted to protect privacy.

1 not document pathology studies of the tissue that she removed. Even if the procedure had been  
2 properly performed with appropriate surgical instruments, it would have been contraindicated by  
3 the patient's history of gynecologic cancer and cancer treatment.

4 12. Between September 30, 2014 and April 13, 2015, Respondent performed serial  
5 vaginal dilation and tissue removal procedures, each lasting 1 ½ to 3 hours. She used a suture  
6 removal kit and a curette to scrape the inside walls of the vagina and pick or cut out tissue. If  
7 Respondent had contacted Patient 1's treating OB/GYN, she would have been aware that Patient  
8 1's OB/GYN had counseled the patient against seeking any surgical procedures to dilate her  
9 stenosed vagina.

10 13. On April 13, 2015, Patient returned to Respondent for a further scraping procedure.  
11 Respondent used instruments intended for endometrial biopsy to scrape the vaginal walls. The  
12 procedure was performed with difficulty and what she described as mild bloody oozing. The  
13 procedure took three hours, after which Respondent packed the area with gauze. The patient was  
14 discharged with doxycycline (an antibiotic), 100 mg, BID.

15 14. At a subsequent interview, Respondent advised that the patient called her office the  
16 following morning to say she had leaked urine in the night and had gone to the local emergency  
17 room. Respondent stated that she had not completed her progress note when she received this  
18 information and, recognizing that there had been an intraoperative complication, she took a  
19 photograph of the instruments she used in the procedure and prepared an extensive note  
20 explaining her treatment at that time.

21 15. Patient 1 was subsequently diagnosed with a ureterovaginal fistula, which was caused  
22 by Respondent's procedure, and she required extensive medical and surgical care to recover.

23 16. Respondent is guilty of unprofessional conduct and her certificate is subject to  
24 discipline pursuant to Business and Professions Code sections 2234 and/or 2234(b) and/or  
25 2234(c) in that Respondent was grossly negligent or committed repeated acts of negligence in her  
26 treatment of Patient 1, including but not limited to the following.

1 A. Respondent failed to perform an adequate initial evaluation in that she failed to obtain  
2 prior medical records and failed to perform and/or document a careful pelvic examination and  
3 evaluation of the pelvic tissue;

4 B. Respondent failed to communicate with the patient's primary care physician prior to  
5 formulating and initiating a treatment plan;

6 C. Respondent failed to obtain and/or document informed consent, including discussion  
7 of the nature of the planned procedure, the attendant risks and benefits and alternative treatments;

8 D. Respondent undertook to recommend and initiate a surgical treatment for which she  
9 had neither the training nor experience to perform;

10 E. Respondent performed procedures involving tissue removal, but did not have the  
11 tissue pathologically evaluated.

12 **SECOND CAUSE FOR DISCIPLINE**

13 **(Inadequate and Inaccurate Records)**

14 17. Respondent is subject to discipline pursuant to Section 2234 and/or 2234(b) and/or  
15 2234(c) and 2266 for failure to maintain adequate and accurate records.

16 18. Respondent's records are handwritten and largely illegible. The records frequently  
17 utilize notations and shorthand that would not be readily understandable to other physicians. The  
18 records also lack essential information including, but not limited to, history of the patient's cancer  
19 treatment and gynecologic care, findings on physical examination, problem lists, medication lists,  
20 informed consent, laboratory tests, Pap tests and pathology reports.

21 **PRAYER**

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

24 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 103558,  
25 issued to Mi Ran Park, M.D.;

26 2. Revoking, suspending or denying approval of Mi Ran Park, M.D.'s authority to  
27 supervise physician assistants and advanced practice nurses;

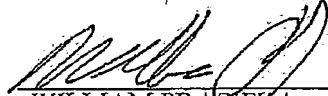
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3. Ordering Mi Ran Park, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and

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

DATED: JAN 19 2021

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

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