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

In the Matter of the First Amended Accusation Against: **Michelle Elizabeth Reyes, M.D.** **Physician's & Surgeon's Certificate No. G 78285** **Respondent.**	**Case No. 800-2018-042623**

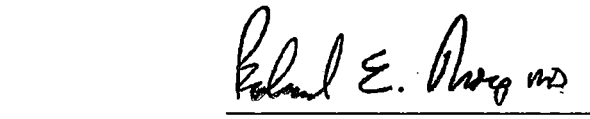
DECISION

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 April 22, 2022.

IT IS SO ORDERED: March 23, 2022.

MEDICAL BOARD OF CALIFORNIA



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

ROB BONTA
Attorney General of California
STEVE DIEHL
Supervising Deputy Attorney General
SARAH J. JACOBS
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BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the First Amended Accusation Against: **MICHELLE ELIZABETH REYES, M.D.** **6355 Topanga Canyon Blvd., Ste. 529** **Woodland Hills, CA 91367-2156** **Physician's and Surgeon's Certificate No. G 78285** Respondent.	Case No. 800-2018-042623 OAH No. 2021060530 **STIPULATED SETTLEMENT AND DISCIPLINARY ORDER**

In the interest of a prompt and speedy settlement of this matter, consistent with the public interest and the responsibility of the Medical Board of California of the Department of Consumer Affairs, the parties hereby agree to the following Stipulated Settlement and Disciplinary Order which will be submitted to the Board for approval and adoption as the final disposition of the First Amended Accusation.

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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 Sarah J. Jacobs, Deputy Attorney General.

2. Respondent Michelle Elizabeth Reyes, M.D. (Respondent) is represented in this proceeding by attorney Derek F. O'Reilly-Jones, Esq., whose address is: 355 South Grand Avenue, Suite 1750, Los Angeles, CA 90071.

3. On or about January 20, 1994, the Board issued Physician's and Surgeon's Certificate No. G 78285 to Michelle Elizabeth Reyes, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in First Amended Accusation No. 800-2018-042623, and will expire on October 31, 2023, unless renewed.

JURISDICTION

4. First Amended Accusation No. 800-2018-042623 was filed before the Board, and is currently pending against Respondent. The First Amended Accusation and all other statutorily required documents were properly served on Respondent on January 14, 2022. Respondent timely filed her Notice of Defense contesting the Accusation.

5. A copy of First Amended Accusation No. 800-2018-042623 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 First Amended Accusation No. 800-2018-042623. Respondent has also carefully read, fully discussed with her counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

7. Respondent is fully aware of her legal rights in this matter, including the right to a hearing on the charges and allegations in the First Amended Accusation; the right to confront and cross-examine the witnesses against her; the right to present evidence and to testify on her 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 does not contest that, at an administrative hearing, complainant could establish a *prima facie* case with respect to the charges and allegations contained in First Amended Accusation No. 800-2018-042623 and that she has thereby subjected her license to disciplinary action.

10. Respondent agrees that if she ever petitions for early termination or modification of a future grant of probation, or if an accusation and/or petition to revoke probation is filed against her before the Board, all of the charges and allegations contained in First Amended Accusation No. 800-2018-042623 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.

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

CONTINGENCY

12. 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 her counsel. By signing the stipulation, Respondent understands and agrees that she may not withdraw her 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.

13. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.

14. 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

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G 78285 issued to Respondent MICHELLE ELIZABETH REYES, M.D. is Publicly Reprimanded:

1. PUBLIC REPRIMAND

Physician's and Surgeon's Certificate No. G 78285 issued to Respondent Michelle Elizabeth Reyes, M.D. shall be and is hereby Publicly Reprimanded pursuant to California Business and Professions Code, section 2227, subdivision (a)(4). This Public Reprimand is issued in connection with the conduct as set forth in the First Amended Accusation No. 800-2018-042623.

2. EDUCATION COURSE. Within sixty (60) calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for its prior approval educational program(s) or course(s), which shall not be less than 40 hours. The educational program(s) or course(s) shall be completed by Respondent within one (1) year of the effective date of this Decision, be aimed at correcting any areas of deficient practice or knowledge, and shall be Category I certified. The educational program(s) or course(s) shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure. Following the completion of each course, the Board or its designee may administer an examination to test Respondent's knowledge of the course. Respondent shall provide proof of attendance for 65 hours of CME of which 40 hours were in satisfaction of this condition. If Respondent fails to enroll, participate in, or successfully complete the education courses within

the designated time period, Respondent shall receive a notification from the Board or its designee to cease the practice of medicine within three (3) calendar days after being so notified. Respondent shall not resume the practice of medicine until she has completed the required courses. Failure to enroll, participate in, or successfully complete the courses within the designated time period shall constitute unprofessional conduct and grounds for further disciplinary action.

3. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent shall reimburse the Board its full costs of investigation and enforcement in the year of 2022, including, but not limited to, expert review, amended accusations, legal reviews, joint investigations, and subpoena enforcement, as applicable, in the amount of $9,371.25 (nine thousand three hundred seventy one dollars and twenty-five cents). Costs shall be payable to the Medical Board of California within one (1) year from the effective date of this Decision.

Any and all requests for a payment plan shall be submitted in writing by Respondent to the Board.

The filing of bankruptcy by Respondent shall not relieve Respondent of the responsibility to repay investigation and enforcement costs.

4. 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 First Amended Accusation No. 800-2018-042623 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, Derek F. O'Reilly-Jones, 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: 01. 24. 2022

MICHELLE ELIZABETH REYES, M.D.
Respondent

I have read and fully discussed with Respondent Michelle Elizabeth Reyes, 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: 01/24/2022

DEREK F. O'REILLY-JONES, ESQ.
Attorney for Respondent

ENDORSEMENT

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

DATED: Jan. 25, 2022

Respectfully submitted,

ROB BONTA
Attorney General of California
STEVE DIEHL
Supervising Deputy Attorney General

SARAH J. JACOBS
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

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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 First Amended Accusation Against: **MICHELLE ELIZABETH REYES, M.D.** **6355 Topanga Canyon Blvd., Ste. 529** **Woodland Hills, CA 91367-2156** **Physician's and Surgeon's Certificate No. G 78285,** Respondent.	Case No. 800-2018-042623 **FIRST AMENDED ACCUSATION**

PARTIES

1. William Prasifka (Complainant) brings this First Amended 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 January 20, 1994, the Board issued Physician's and Surgeon's Certificate Number G 78285 to Michelle Elizabeth Reyes, 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 October 31, 2023, unless renewed.

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JURISDICTION

3. This First Amended Accusation, which supersedes the Accusation filed on March 17, 2021, 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 2004 of the Code states:

The board shall have the responsibility for the following:

(a) The enforcement of the disciplinary and criminal provisions of the Medical Practice Act.

(b) The administration and hearing of disciplinary actions.

(c) Carrying out disciplinary actions appropriate to findings made by a panel or an administrative law judge.

(d) Suspending, revoking, or otherwise limiting certificates after the conclusion of disciplinary actions.

(e) Reviewing the quality of medical practice carried out by physician and surgeon certificate holders under the jurisdiction of the board.

(f) Approving undergraduate and graduate medical education programs.

(g) Approving clinical clerkship and special programs and hospitals for the programs in subdivision (f).

(h) Issuing licenses and certificates under the board's jurisdiction.

(i) Administering the board's continuing medical education program.

5. Section 2227 of the Code states:

(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.

(b) Any matter heard pursuant to subdivision (a), except for warning letters, medical review or advisory conferences, professional competency examinations, continuing education activities, and cost reimbursement associated therewith that are agreed to with the board and successfully completed by the licensee, or other matters made confidential or privileged by existing law, is deemed public, and shall be made available to the public by the board pursuant to Section 803.1.

STATUTORY PROVISIONS

6. Section 2234 of the Code, states:

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:

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

(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.

(d) Incompetence.

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

(f) Any action or conduct that would have warranted the denial of a certificate.

(g) The failure by a certificate holder, in the absence of good cause, to attend and participate in an interview by the board. This subdivision shall only apply to a certificate holder who is the subject of an investigation by the board.

7. 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.

COST RECOVERY

8. Section 125.3 of the Code provides, in pertinent part, that the Board may request the administrative law judge to direct a licensee found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case, with failure of the licensee to comply subjecting the license to not being renewed or reinstated. If a case settles, recovery of investigation and enforcement costs may be included in a stipulated settlement.

FACTUAL ALLEGATIONS

9. Respondent was trained as an ophthalmologist. She currently practices cosmetic surgery and age management medicine in Woodland Hills.

10. Patient 1,[1] a 60-year-old female, began treating with Respondent on or about June 14, 2013, for various cosmetic treatments to her face. These treatments included Botox injections, Juverderm Voluma filler, Xeomin injections (similar to Botox), Vobella inections (hyaluronic acid injected to augment the lips) and laser treatments, such as CO2 fraxel treatments.

11. On or about February 13, 2017, Patient 1 underwent a CO2RE Intima procedure for vaginal rejuvenation, using the Syneron Candela CO2 laser platform. The Syneron Candela CO2RE Intima laser is an ablative fractional CO2 laser technology. The principle by which lasers rejuvenate tissue is that they create controlled injuries. The wound healing process stimulates cell growth, new collagen formation and blood flow. Ablative lasers remove the top layer of the skin and fractionated lasers treat only portions of the treatment area in a pixelated fashion. By creating a small column of injury to the treated tissue, surrounded by untreated tissue, fractionation distributes the effects of the laser and a more rapid healing process occurs through the surrounding untreated areas. However, this causes the need for a number of treatments to reach the desired results.[2] The Syneron Candela CO2 laser platform system has different hand-pieces for internal vaginal and external vulvar use. There are also different

[1] The patient is identified herein by number to protect her privacy.

[2] A series of three monthly treatments are performed for optimal results, followed by less frequent maintenance treatments.

operating modes for resurfacing. It is not FDA-approved for vaginal rejuvenation; these treatments are performed off-label.

12. Patient 1 was seen by Respondent on or about February 17, 2017, for insertion of Biote pellets[3] into her hip. At that visit, Respondent examined Patient 1's vaginal area. Respondent noted that the area had no external swelling, there was no discharge, but fibrinous exudate was noted on the labia minora, along with minimal edema. Patient 1 reported that she went to Burke Williams Spa and soaked in the Jacuzzi; she was instructed not to do this and was provided with a spray bottle containing diluted witch hazel to cleanse the area. Patient 1 was also instructed to apply Aquaphor to her vulva to protect the area when she urinates.

13. On or about February 18, 2017, Patient 1 presented to West Hills Hospital and Medical Center emergency department with complaints of vaginal pain and burning. She advised that she also had dysuria[4] and reported that she had undergone a vaginal rejuvenation procedure. On examination, Patient 1 had small red lesions in her vagina with white mucous membrane and clear brown discharge. A telephone consult with a burn nurse specialist was conducted. The nurse advised application of gentamycin (antibiotic) ointment to a tampon to treat the injured area. Laboratory tests and other examinations were conducted and a diagnosis of urinary tract infection was rendered. Patient 1 was given intravenous pain medication and intravenous antibiotics in the emergency department. She was discharged home with oral antibiotics and Pyridium, a medication to relieve the symptoms of the urinary tract infection. She was advised to follow up with her gynecologist.

14. On or about February 20, 2017, Respondent returned to West Hills Hospital and Medical Center emergency department with complaints of increased pain and worsening dysuria. On examination, her entire introtial[5] region and anterior vaginal mucosa had eroded. The skin and mucosa were consistent with a burn ("colored tan patches"). There was no sign of infection. Laboratory and other tests were conducted. The case was discussed with Patient 1's gynecologist. A diagnosis of burn to the vagina was rendered. The plan was to handle the matter

[3] Biote pellets are bioidentical hormone replacement therapy.
[4] Dysuria is painful or difficult urination.
[5] The introitus is the opening of the vagina.

on an outpatient basis. The patient was given topical gentamycin, topical lidocaine and Dermoplast spray for pain management. She was instructed to continue oral antibiotics and pain medication.

15. On or about February 21, 2017, Patient 1 was seen emergently by her gynecologist, Dr. I.T. He noted red and white patches on the labia majora, which were "quite swollen," bilaterally. From the supra-clitoral region to the posterior fourchette, redness was noted. When the labia were spread, the patient expressed extreme pain; more red and white blotches were seen with swelling. A phimosis[6] between the labia majora and the urethra made the urethra almost unidentifiable. Attempts at urinary catheterization were unsuccessful and caused extreme pain to Patient 1. Dr. I.T., therefore chose to have the patient directly admitted to West Hills Hospital and Medical Center, with a urology consult to follow.

16. On or about February 22, 2017, Patient 1 was seen by Dr. B.E. from the Grossman Burn Center of West Hills in consultation. Dr. B.E. attempted an examination of Patient 1's genitals, but could not conduct a thorough examination due to extreme pain to the patient. The plan was to evaluate the patient the next day in the operating room under general anesthesia.

17. Dr. B.E. took Patient 1 to surgery on February 23, 2017, under general anesthesia. He examined her genitals and noted deep burns to her genital area secondary to laser vaginal rejuvenation. He performed a debridement along the labia majoria and labia minora and applied a xenograft[7] on the open tissue with Dermabond. Following her surgery, she was placed on the burn ward of the Grossman Burn Center of West Hills Hospital and Medical Center for further care.

18. Patient 1 was discharged from West Hills Hospital and Medical Center on or about February 27, 2017. During her hospitalization, Patient 1 was on antibiotics for continued treatment of the urinary tract infection, pain medication and other medication and therapies.

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[6] In females, a phimosis is a condition where the labia minora cover the opening of the vagina.

[7] A xenograft is an allograft of animal tissue to promote healing.

FIRST CAUSE FOR DISCIPLINE

(Gross Negligence)

19. Respondent Michelle Elizabeth Reyes, M.D. is subject to disciplinary action under section 2234, subdivision (b), of the Code in that she was grossly negligent in her care and treatment of Patient 1. The circumstances are as follows:

20. The allegations of paragraphs 9 through 18 are incorporated herein as if fully set forth.

Improper Use of the Syneron Candela CO2RE Intima Laser

21. When using the Syneron Candela CO2RE Intima laser the standard of care requires that protocols for internal and external vaginal treatments be followed. There are also different hand-pieces for internal and external vaginal use. The device has different operating modes. Deep mode is the sole mode used for internal vaginal treatment. For external treatment, the ablation mode selected depends on the condition being treated.

22. The medical records for Patient 1 indicate that for the internal vaginal treatment, Respondent used CO2RE Deep mode, using 50mJ[8] of energy of 5% fractional density. Five centimeters of tissue was treated with twelve pulses per rotation and one pass was performed. This laser setting was appropriate for internal vaginal use.

23. When treating the introitus and vestibule, Respondent used CO2RE Light mode with 50mJ of energy and 50% fractional density. The labia minora was treated with sixteen pulses; the labia majora was treated with zero pulses. Respondent noted this was a "light treatment-patient with minimal labial laxity, unshaven." Respondent did not state an indication for the external treatment, did not state her goat for the treatment and did not indicate her rationale for the settings. It is unclear if she used the correct hand-piece.

24. Light mode, 50mJ energy with 50% fractional density is not the correct modality for external vulvar treatment if the goal is tightening or to perform light treatment. Light mode does not mean "light treatment." Fifty percent is the maximal fractional density on Light mode (range

[8] mJ is the abbreviation for millijoules; one thousandth of a joule. A joule is the energy dissipated as heat when an electric current of one ampere passes through a resistance of one ohm for one second.

30% to 50%). The energy used was 50mJ (range 30mJ to 60mJ). Thus, Respondent's use of the CO2RE Light mode with 50mJ of energy and 50% fractional density did not constitute light treatment, caused a thermal burn to Patient 1's genitals, and was an extreme departure from the standard of care.

25. When Respondent was interviewed by representatives of the Board she stated that her treatment of Patient 1 was "very light treatment with 5% coverage done on the outer area." Respondent did not demonstrate that she understood the principle of using this laser on the external vulvar region. Respondent's use of the CO2RE Light mode with 50mJ of energy and 50% fractional density on Patient 1's vulvar region was an extreme departure from the standard of care and incompetence.

Lack of Informed Consent

26. The standard of care requires that informed consent be obtained from patients prior to any medical procedure. This is done to ensure that the patient understands the procedure to be performed and the potential risks, benefits and alternatives of the procedure.

27. A consent form for the CO2RE Intima procedure is contained in Patient 1's medical records. However, Patient 1 did not sign or initial any portion of the consent form.

28. The failure of Respondent to obtain Patient 1's written informed consent for the Syneron Candela CO2RE Intima procedure is an extreme departure from the standard of care.

SECOND CAUSE FOR DISCIPLINE

(Repeated Negligent Acts)

29. Respondent is subject to disciplinary action under section 2234, subdivision (c), of the Code. The circumstances are as follows:

30. The allegations of the First Cause for Discipline are incorporated herein as if fully set forth.

31. The standard of care requires that patients be provided with aftercare instructions either before or immediately after a laser procedure. Documentation is placed in the patient's chart indicating that aftercare instructions were provided to the patient.

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32. The medical records indicate that Respondent discussed aftercare with Patient 1 on or about February 17, 2017, four days following the Syneron Candela CO2RE Intima procedure. By that time, Patient 1 had gone to a day spa and soaked in a Jacuzzi. Controlled zones of thermal injury created by a laser can become uncontrolled and deeper or larger if exposed to extreme heat. Soaking in very hot water will also increase inflammation and swelling.

33. Respondent's failure to provide Patient 1 with timely aftercare instructions following the Syneron Candela CO2RE Intima procedure is a negligent act.

THIRD CAUSE FOR DISCIPLINE

(Incompetence)

34. Respondent is subject to disciplinary action under section 2234, subdivision (d), of the Code. The circumstances are as follows:

35. The allegations of paragraphs 9 through 18 are incorporated herein as if fully set forth.

36. The allegations of the First Cause for Discipline, paragraphs 21 through 25, are incorporated herein as if fully set forth.

FOURTH CAUSE FOR DISCIPLINE

(Failure to Maintain Adequate and Accurate Medical Records)

37. Respondent is subject to disciplinary action under section 2266 of the Code. The circumstances are as follows:

38. The allegations of the First and Second Causes for Discipline are incorporated herein as if fully set forth.

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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 G 78285, issued to Respondent Michelle Elizabeth Reyes, M.D.;

2. Revoking, suspending or denying approval of Respondent Michelle Elizabeth Reyes, M.D.'s authority to supervise physician assistants and advanced practice nurses;

3. Ordering Respondent Michelle Elizabeth Reyes, M.D., if placed on probation, to pay the Board the costs of probation monitoring;

4. Ordering Respondent Michelle Elizabeth Reyes, M.D., to pay the Medical Board of California the reasonable costs of the enforcement of this case, pursuant to Business and Professions Code section 125.3; and

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

DATED: JAN 14 2022

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