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

In the Matter of the Accusation Against: Olivia Valentina Garcia, M.D. Physician's & Surgeon's Certificate No. A 84219 Respondent.	Case No. 800-2019-058227

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 March 2, 2023.

IT IS SO ORDERED: January 31, 2023.

MEDICAL BOARD OF CALIFORNIA

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

ROB BONTA
Attorney General of California
STEVE DIEHL
Supervising Deputy Attorney General
JOHN S. GATSCHET
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: **OLIVIA VALENTINA GARCIA, M.D.** The Permanente Medical Group 975 Sereno Dr. Vallejo, CA 94589 Physician's and Surgeon's Certificate No. A 84219 Respondent.	Case No. 800-2019-058227 OAH No. 2022040864 **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 John S. Gatschet, Deputy Attorney General.

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2. Respondent Olivia Valentina Garcia, M.D. ("Respondent") is represented in this proceeding by attorney Ann H. Larson, Esq., whose address is:

Craddick, Candland & Conti
12677 Alcosta Blvd, Suite 375
San Ramon, CA 94583-4202

3. On or about August 6, 2003, the Board issued Physician's and Surgeon's Certificate No. A 84219 to Respondent. That Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2019-058227, and will expire on February 28, 2023, unless renewed.

JURISDICTION

4. Accusation No. 800-2019-058227 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 March 17, 2022. Respondent timely filed her Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2019-058227 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. 800-2019-058227. 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 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.

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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. 800-2019-058227, if proven at a hearing, constitute cause for imposing discipline upon her Physician's and Surgeon's Certificate.

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

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.

RESERVATION

12. The admissions made by Respondent herein are only for the purposes of this proceeding, or any other proceedings in which the Medical Board of California or other professional licensing agency is involved, and shall not be admissible in any other criminal or civil proceeding.

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 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.

14. 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.

15. 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 Physician's and Surgeon's Certificate No. A 84219 issued to Respondent Olivia Valentina Garcia, M.D., shall be and is hereby publically reprimanded pursuant to California Business and Professions Code section 2227, subdivision (a)(4). This Public Reprimand, which is issued in connection with Accusation No. 800-2018-042334, is as follows:

"Between April 1, 2015, and April 28, 2019, while treating Patient 1, you committed repeated negligent acts while prescribing diazepam as more fully described in Accusation No. 800-2018-042334."

B. 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 successfully complete all coursework and provide proof of completion of the Prescribing Practices Course to the Board within one year of the effective date of the Decision and Order. This condition shall be monitored by the Probation Department.

C. PROFESSIONALISM PROGRAM (ETHICS COURSE)

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

A professionalism program 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 program would have been approved by the Board or its designee had the program been taken after the effective date of this Decision.

Respondent shall successfully complete all coursework and provide proof of completion of the Professionalism Program (Ethics Course) to the Board within one year of the effective date of the Decision and Order. This condition shall be monitored by the Probation Department.

D. INVESTIGATION/ENFORCEMENT COST RECOVERY

Respondent is hereby ordered to reimburse the Board its costs of investigation and enforcement, including, but not limited to, expert review, amended accusations, legal reviews,

investigation, as applicable, in the amount of **$11,000.00** (eleven thousand dollars). Costs shall be due and payable to the Medical Board of California.

Payment must be made in full within one year of the effective date of the Order. The filing of bankruptcy by Respondent shall not relieve Respondent of the responsibility to repay investigation and enforcement costs, including expert review costs. This condition shall be monitored by the Probation Department.

E. FAILURE TO COMPLY

If Respondent fails to enroll, participate in, or successfully complete the educational program(s) or course(s), described in conditions B and C, within the designated time period, Respondent shall receive and comply with 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 enrollment or participation in the educational program(s) or course(s) has been completed as required by the express language of the Decision and Order. In addition, failure to successfully complete the education program(s) or course(s) outlined above shall also constitute general unprofessional conduct and is grounds for further immediate disciplinary action.

If Respondent fails to reimburse the Board as described in condition D, within the designated time period, Respondent shall receive and comply with 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 the full payment of the investigative and enforcement costs have been paid to the Board. In addition, failure to successfully to reimburse the Board as outlined above shall also constitute general unprofessional conduct and is grounds for further immediate disciplinary action.

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ACCEPTANCE

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, Ann H. Larson, 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: 10/19/22

OLIVIA VALENTINA GARCIA, M.D.
Respondent

I have read and fully discussed with Respondent Olivia Valentina Garcia, 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: 10/19/22

ANN H. LARSON, 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: 10-20-22

Respectfully submitted,

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

JOHN S. GATSCHET
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 800-2019-058227

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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:	Case No. 800-2019-058227
OLIVIA VALENTINA GARCIA, M.D. **The Permanente Medical Group** **975 Sereno Drive** **Vallejo, CA 94589** **Physician's and Surgeon's Certificate No. A 84219,** Respondent.	**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 August 6, 2003, the Board issued Physician's and Surgeon's Certificate Number A 84219 to Olivia Valentina Garcia, M.D. ("Respondent"). That Certificate was in full

force and effect at all times relevant to the charges brought herein and will expire on February 28, 2023, 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 states in pertinent part:

> (a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provisions of this chapter:
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> (1) Have his or her license revoked upon order of the board.
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> (2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.
>
> (3) Be placed on probation and be required to pay the costs of probation monitoring upon order of the board.
>
> (4) Be publicly reprimanded by the board. The public reprimand may include a requirement that the licensee complete relevant educational courses approved by the board.
>
> (5) Have any other action taken in relation to discipline as part of an order of probation, as the board or an administrative law judge may deem proper.
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> (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.

5. Section 2234 of the Code, states in pertinent 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.

...

COST RECOVERY

6. Section 125.3 of the Code states, in pertinent part:

(a) Except as otherwise provided by law, in any order issued in resolution of a disciplinary proceeding before any board within the department or before the Osteopathic Medical Board, upon request of the entity bringing the proceeding, the administrative law judge may 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.

(b) In the case of a disciplined licensee that is a corporation or a partnership, the order may be made against the licensed corporate entity or licensed partnership.

(c) A certified copy of the actual costs, or a good faith estimate of costs where actual costs are not available, signed by the entity bringing the proceeding or its designated representative shall be prima facie evidence of reasonable costs of investigation and prosecution of the case. The costs shall include the amount of investigative and enforcement costs up to the date of the hearing, including, but not limited to, charges imposed by the Attorney General.

(d) The administrative law judge shall make a proposed finding of the amount of reasonable costs of investigation and prosecution of the case when requested pursuant to subdivision (a). The finding of the administrative law judge with regard to costs shall not be reviewable by the board to increase the cost award. The board may reduce or eliminate the cost award, or remand to the administrative law judge if the proposed decision fails to make a finding on costs requested pursuant to subdivision (a).

(e) If an order for recovery of costs is made and timely payment is not made as directed in the board's decision, the board may enforce the order for repayment in any appropriate court. This right of enforcement shall be in addition to any other rights the board may have as to any licensee to pay costs.

(f) In any action for recovery of costs, proof of the board's decision shall be conclusive proof of the validity of the order of payment and the terms for payment.

(g) (1) Except as provided in paragraph (2), the board shall not renew or reinstate the license of any licensee who has failed to pay all of the costs ordered under this section.

(2) Notwithstanding paragraph (1), the board may, in its discretion, conditionally renew or reinstate for a maximum of one year the license of any licensee who demonstrates financial hardship and who enters into a formal agreement

with the board to reimburse the board within that one-year period for the unpaid costs.

(h) All costs recovered under this section shall be considered a reimbursement for costs incurred and shall be deposited in the fund of the board recovering the costs to be available upon appropriation by the Legislature.

(i) Nothing in this section shall preclude a board from including the recovery of the costs of investigation and enforcement of a case in any stipulated settlement.

(j) This section does not apply to any board if a specific statutory provision in that board's licensing act provides for recovery of costs in an administrative disciplinary proceeding.

DEFINITIONS

7. Diazepam – Generic name for Valium. Diazepam is a long-acting member of the benzodiazepine family used for the treatment of anxiety and panic attacks. Diazepam can cause drowsiness, dizziness, tiredness, blurred vision, and unsteadiness. Diazepam is a Schedule IV controlled substance pursuant to Code of Federal Regulations Title 21 section 1308.14 subdivision (c) and Health and Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code section 4022.

FACTUAL ALLEGATIONS

8. In 2012[1], Respondent began providing primary care to Patient 1[2] at U.C. Davis Health System (U.C. Davis). At that time, Patient 1 was an approximately 45-year-old female patient. While Patient 1 was on a number of controlled substances including an opioid and muscle relaxer at the time Respondent took over her care, Patient 1 was not on a benzodiazepine. Patient 1's past medical history included diagnoses of depression, hypertension, tachycardia, GERD, obesity, and chronic back pain. In 2013, Patient 1 underwent successful bariatric surgery and experienced weight loss. In November 2013, Respondent prescribed diazepam to Patient 1 to treat back pain with radicular symptoms including achy legs. At a September 15, 2014, neurosurgery visit, another medical provider noted Respondent was prescribing 60 tablets of 5 mg diazepam to

[1] All allegations alleged before April 1, 2015, are for reference only to explain Respondent's conduct after April 1, 2015, and do not serve as an independent basis for discipline.

[2] In order to protect patient confidentiality, the patient will be identified by an alphanumeric. All witnesses will be fully identified in discovery.

Patient 1 per month. On November 4, 2014, Respondent started Patient 1 on 60 tablets of 10 mg diazepam per month. In January 2015, Patient 1's medical charts included a documented history of falls. Respondent left U.C. Davis and began employment with Kaiser. Patient 1 changed her insurance provider to Kaiser and ultimately sought out Respondent to reestablish care.

9. On April 14, 2015, Respondent saw Patient 1 to establish primary care at Kaiser Permanente ("Kaiser"). Respondent documented that Patient 1 had experienced 30 falls since January 2015. Respondent noted that Patient 1 was receiving 60 tablets of 10 mg diazepam per month and taking up to three tablets a day. Under assessment and plan, Respondent documented that Patient 1 had tremors that were being treated by neurology. Respondent documented that Patient 1 was a tobacco smoker who was working to quit, and had a prior history of gastric bypass. Respondent documented that Patient 1 would need surgery in the future to treat cervical radiculopathy. Respondent did not document Patient 1's diazepam prescription in the assessment and plan, nor did Respondent document providing Patient 1 with a full and informed consent related to the prescription of benzodiazepines.

10. Between May 5, 2015, and April 28, 2019, on a monthly basis, Respondent prescribed 60 tablets of 10 mg diazepam to Patient 1. In total, during that period, Respondent prescribed approximately two thousand five hundred and twenty tablets of 10 mg diazepam to Patient 1. On May 21, 2015, a nurse noted that Patient 1 used a walker when she feels unsteady on her feet. On June 29, 2015, a Kaiser speech therapist noted that Patient 1 had mild cognitive impairment affecting memory, attention, and visuospatial/executive skills consistent with recurrent concussion and stress. On September 27, 2015, Patient 1 reported she had a fall, hit her head and had concussion symptoms for two days. On October 15, 2015, Patient 1 reported she was getting something out of a dishwasher and hit her head. October 27, 2015, Respondent documented Patient 1 was taking medical cannabis, which in combination with diazepam can moderately increase side effects such as dizziness, drowsiness, confusion, and difficulty concentrating. On June 5, 2016, Respondent documented that Patient reported hitting her head 5 times while traveling in Las Vegas. On April 6, 2018, another physician documented in Patient

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1's chart that Patient 1 reported she had a fall five days earlier and noted that Patient 1 exhibited mental confusion, trouble talking and headache.

11. On April 10, 2018, Respondent documented that Patient 1 had experienced a recent fall on April 6, 2018, and was experiencing dizziness and feeling unbalanced. On May 29, 2018, Respondent documented that Patient 1 had fallen off her bicycle. On June 29, 2018, a different Kaiser physician documented that Patient 1 had a few recent falls and a history of post concussive syndrome, which could have caused cognitive changes. On August 7, 2018, Respondent documented that Patient 1 reported hitting her head again and that she was having speech issues. On October 22, 2018, Respondent documented that Patient 1 continued to occasionally hit her head, which contributed to her post concussive symptoms.

12. Between May 5, 2015, and April 28, 2019, there is no documentation in Patient 1's medical records that Respondent made an effort to wean Patient 1 off benzodiazepines. Between May 5, 2015, and April 28, 2019, there is no documentation in Patient 1's medical records that clearly supported Respondent's on-going prescribing of diazepam to Patient 1. Between May 5, 2015, and April 28, 2019, there is no documentation that Respondent required Patient 1 to provide urine drug screening as part of her on-going benzodiazepine therapy. Between May 5, 2015, and April 28, 2019, there is no documentation that Respondent provided Patient 1 with a full and fair informed consent including the possible risks and benefits of long-term benzodiazepine therapy. A review of the records before May 5, 2015, also failed to show that Respondent provided informed consent to Patient 1 regarding the possible risks and benefits of long-term benzodiazepine therapy. Between May 5, 2015, and April 28, 2019, Respondent failed to enter into a controlled substances contract with Patient 1 detailing the risks, benefits, and expectations of benzodiazepine therapy. Finally, between May 5, 2015, and April 28, 2019, there is no documentation that Respondent reviewed a controlled substances database[3] to ensure that Patient 1 was not taking any other contraindicated medications in addition to diazepam.

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[3] CURES, Controlled Substance Utilization Review and Evaluation System, is a database that tracks the dispensing of all Schedule II, III, IV, and V prescriptions in California that is kept by the Department of Justice. Medical practitioners have access to review the database.

CAUSE FOR DISCIPLINE

(Repeated Negligent Acts)

13. Respondent's license is subject to disciplinary action under section 2234, subdivision (c) in that Respondent engaged in repeated negligent acts during the care and treatment of Patient 1. The circumstances are as follows:

14. Complainant realleges paragraphs 8 through 12, and those paragraphs are incorporated by reference as if fully set forth herein.

15. Respondent committed the following negligent acts during the care and treatment of Patient 1:

a.) Between April 1, 2015, and April 28, 2019, Respondent continued to prescribe a long-term benzodiazepine to Patient 1 on a monthly basis without attempting a tapering plan despite Patient 1's lengthy history of falls;

b.) Between April 1, 2015, and April 28, 2019, Respondent continued to prescribe a long-term benzodiazepine to Patient 1 on a monthly basis without requiring urine drug screening and/or documenting urine drug screening;

c.) Between April 1, 2015, and April 28, 2019, Respondent continued to prescribe a long-term benzodiazepine to Patient 1 on a monthly basis without providing and/or documenting providing informed consent regarding the risks and benefits of long-term benzodiazepine use.

d.) Between April 1, 2015, and April 28, 2019, Respondent continued to prescribe a long-term benzodiazepine to Patient 1 on a monthly basis without having and/or documenting having a written agreement between Respondent and Patient 1 outlining the joint responsibilities of the physician and patient while Patient 1 was on a long-term benzodiazepine prescription; and,

e.) Between April 1, 2015, and April 28, 2019, Respondent continued to prescribe a long-term benzodiazepine to Patient 1 on a monthly basis without also performing and/or documenting the performance of a review of Patient 1's prescription history in a controlled substance prescription database.

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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 A 84219, issued to Respondent Olivia Valentina Garcia, M.D.;

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

3. Ordering Respondent Olivia Valentina Garcia, M.D., to pay the Board the costs of the investigation and enforcement of this case pursuant to Bus. & Prof. Code § 125.3, and if placed on probation, the costs of probation monitoring; and

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

DATED: MAR 17 2022

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

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