

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

In the Matter of the Decision and Order
Against:

Steven Ivan Popkow, M.D.
12099 W. Washington Blvd., Ste. 400
Los Angeles, CA 90066-5882

Physician's and Surgeon's
Certificate No. G62006

Case No. 800-2016-023561

AGREEMENT FOR
SURRENDER OF LICENSE

Respondent.

TO ALL PARTIES:

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

1. Complainant, Christine J. Lally, is the Interim Executive Director of the
Medical Board of California, Department of Consumer Affairs ("Board").

2. Steven Ivan Popkow, M.D. ("Respondent") has carefully read and fully
understands the effect of this Agreement.

3. Respondent understands that by signing this Agreement he is enabling the
Board to issue this order accepting the surrender of license without further process.

Respondent understands and agrees that Board staff and counsel for complainant may
communicate directly with the Board regarding this Agreement, without notice to or
participation by Respondent. The Board will not be disqualified from further action in this
matter by virtue of its consideration of this Agreement.

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1 4. Respondent acknowledges there is current disciplinary action against his
2 license, that on December 29, 2017, an Accusation was filed against him and on September
3 5, 2019, a Decision was rendered wherein his license was revoked, with the revocation
4 stayed, and placed on 5 years' probation with various standard terms and conditions.

5 5. The current disciplinary action provides in pertinent part, "Following the
6 effective date of this Decision, if Respondent ceases practicing due to retirement, health
7 reasons, or is otherwise unable to satisfy the terms and conditions of probation, Respondent
8 may request voluntary surrender of Respondent's license." (Condition #10).

9 6. Upon acceptance of the Agreement by the Board, Respondent understands he
10 will no longer be permitted to practice as a physician and surgeon in California, and also
11 agrees to surrender his wallet certificate, wall license and any D.E.A. Certificate(s) for an
12 address in California.

13 7. Respondent fully understands and agrees that if Respondent ever files an
14 application for relicensure or reinstatement in the State of California, the Board shall treat
15 it as a Petition for Reinstatement of a revoked license in effect at the time the Petition is
16 filed. In addition, any Medical Board Investigation Report(s), including all referenced
17 documents and other exhibits, upon which the Board is predicated, and any such
18 Investigation Report(s), attachments, and other exhibits, that may be generated subsequent
19 to the filing of this Agreement for Surrender of License, shall be admissible as direct
20 evidence, and any time-based defenses, such as laches or any applicable statute of
21 limitations, shall be waived when the Board determines whether to grant or deny the
22 Petition.

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ACCEPTANCE

I, Steven Ivan Popkow, M.D. have carefully read the above Agreement and enter into it freely and voluntarily, with the optional advice of counsel, and with full knowledge of its force and effect, do hereby surrender Physician's and Surgeon's Certificate No. G62006, to the Medical Board of California for its acceptance. By signing this Agreement for Surrender of License, I recognize that upon its formal acceptance by the Board, I will lose all rights and privileges to practice as a Physician and Surgeon in the State of California and that I have delivered to the Board my wallet certificate and wall license.



Steven Ivan Popkow, M.D.

Please see attached CA acknowledgement

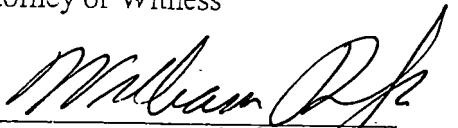
6-8-2020

Date

06/08/2020

Attorney or Witness

Date


Christine J. Lally William Prasifka

~~Interim~~ Executive Director
Medical Board of California

JUL 03 2020

Date

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ALL-PURPOSE ACKNOWLEDGMENT

Title of Document: Agreement

Date of Document: 06/08/2020

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Los Angeles

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) ss.

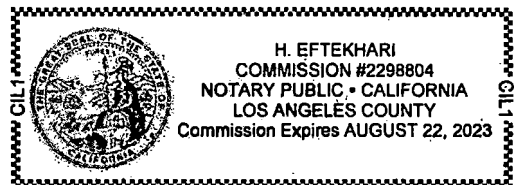
On 06/08/2020 before me, H. Eftekhari - Notary Public, Notary Public,
personally appeared Steven Dapkins

who proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature H. Eftekhari



FOR NOTARY STAMP