

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

**In the Matter of the Accusation
Against:**

Steven Le, M.D.

**Physician's and Surgeon's
Certificate No. A 104419**

Case No.: 800-2020-067045

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 March 4, 2022.

IT IS SO ORDERED: February 4, 2022.

MEDICAL BOARD OF CALIFORNIA



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

1 ROB BONTA
Attorney General of California
2 JANE ZACK SIMON
Supervising Deputy Attorney General
3 LYNNE K. DOMBROWSKI
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9 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

13 **STEVEN LE, M.D.**
14 **2500 Merced Street**
San Leandro, CA 94577-4201

15 **Physician's and Surgeon's Certificate**
16 **No. A 104419**

17 Respondent.

Case No. 800-2020-067045

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

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

22 **PARTIES**

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

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2. Respondent Steven Le, M.D. (Respondent) is represented in this proceeding by attorney Gregory Abrams, Esq., whose address is: Abrams Health Law, 6045 Shirley Drive, Oakland, CA 94611-1600; Email: abramshealthlaw@gmail.com.

3. On June 13, 2008, the Board issued Physician's and Surgeon's Certificate No. A 104419 to Steven Le, 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 Accusation No. 800-2020-067045 and will expire on May 31, 2024, unless it is renewed.

JURISDICTION

4. Accusation No. 800-2020-067045 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 August 10, 2021. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2020-067045 is attached as Exhibit A and is 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. 800-2020-067045. Respondent has also carefully read, fully discussed with his counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

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

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

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1 CULPABILITY

2 9. Respondent understands and agrees that the charges and allegations in Accusation
3 No. 800-2020-067045, if proven at a hearing, constitute cause for imposing discipline upon his
4 Physician's and Surgeon's Certificate.

5 10. Respondent does not contest that, at an administrative hearing, Complainant could
6 establish a prima facie case with respect to the charges and allegations in Accusation No. 800-
7 2020-067045, a true and correct copy of which is attached hereto as Exhibit A, and that he has
8 thereby subjected his Physician's and Surgeon's Certificate No. A 104419 to disciplinary action.

9 11. ACKNOWLEDGMENT. Respondent acknowledges the Disciplinary Order below,
10 requiring the disclosure of probation pursuant to Business and Professions Code section 2228.1,
11 serves to protect the public interest.

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

15 CONTINGENCY

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

26 14. Respondent agrees that if he ever petitions for early termination or modification of
27 probation, or if an accusation and/or petition to revoke probation is filed against him before the
28 Board, all of the charges and allegations contained in Accusation No. 800-2020-067045 shall be

1 deemed true, correct and fully admitted by Respondent for purposes of any such proceeding or
2 any other licensing proceeding involving Respondent in the State of California.

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

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

9 **DISCIPLINARY ORDER**

10 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 104419 issued
11 to Respondent Steven Le, M.D. is revoked. However, the revocation is stayed and Respondent is
12 placed on probation for five (5) years on the following terms and conditions:

13 **PATIENT DISCLOSURE.** Before a patient's first visit following the effective date of this
14 order and while the Respondent is on probation, the respondent must provide all patients, or
15 patient's guardian or health care surrogate, with a separate disclosure that includes the
16 respondent's probation status, the length of the probation, the probation end date, all practice
17 restrictions placed on the respondent by the board, the board's telephone number, and an
18 explanation of how the patient can find further information on the respondent's probation on the
19 respondent's profile page on the board's website. Respondent shall obtain from the patient, or the
20 patient's guardian or health care surrogate, a separate, signed copy of that disclosure.

21 Respondent shall not be required to provide a disclosure if any of the following applies: (1)
22 The patient is unconscious or otherwise unable to comprehend the disclosure and sign the copy of
23 the disclosure and a guardian or health care surrogate is unavailable to comprehend the disclosure
24 and sign the copy; (2) The visit occurs in an emergency room or an urgent care facility or the visit
25 is unscheduled, including consultations in inpatient facilities; (3) Respondent is not known to the
26 patient until immediately prior to the start of the visit; (4) Respondent does not have a direct
27 treatment relationship with the patient.

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1 1. CONTROLLED SUBSTANCES - ABSTAIN FROM USE. Respondent shall abstain
2 completely from the personal use or possession of controlled substances as defined in the
3 California Uniform Controlled Substances Act, dangerous drugs as defined by Business and
4 Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not
5 apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide
6 illness or condition.

7 Within 15 calendar days of receiving any lawfully prescribed medications, Respondent
8 shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone
9 number; medication name, strength, and quantity; and issuing pharmacy name, address, and
10 telephone number.

11 2. ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from the
12 use of products or beverages containing alcohol.

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

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

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

4. PSYCHIATRIC/SUBSTANCE ABUSE EVALUATIONS. At the Board's discretion, and on whatever periodic basis that may be required by the Board or its designee, Respondent shall undergo and complete a psychiatric and/or substance abuse evaluation (and associated testing, if deemed necessary) by a Board-appointed evaluator, who shall consider any information provided by the Board or its designee and any other information the evaluator deems relevant, and shall furnish a written evaluation report to the Board or its designee. Respondent shall cooperate fully with any evaluation, and shall pay the cost of all evaluations and testing. Respondent shall comply with all restrictions or conditions recommended by the evaluator within 15 calendar days after being notified by the Board or its designee.

5. SOLO PRACTICE PROHIBITION. Respondent is prohibited from engaging in the solo practice of medicine. Prohibited solo practice includes, but is not limited to, a practice where: 1) Respondent merely shares office space with another physician but is not affiliated for purposes of providing patient care, or 2) Respondent is the sole physician practitioner at that location.

If Respondent fails to establish a practice with another physician or secure employment in an appropriate practice setting within 60 calendar days of the effective date of this Decision, 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. The Respondent shall not resume practice until an appropriate practice setting is established.

If, during the course of the probation, the Respondent's practice setting changes and the Respondent is no longer practicing in a setting in compliance with this Decision, the Respondent shall notify the Board or its designee within five (5) calendar days of the practice setting change. If Respondent fails to establish a practice with another physician or secure employment in an appropriate practice setting within 60 calendar days of the practice setting change, Respondent shall receive a notification from the Board or its designee to cease the practice of medicine within

1 three (3) calendar days after being so notified. The Respondent shall not resume practice until an
2 appropriate practice setting is established.

3 6. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7)
4 days of the effective date of this Decision, Respondent shall provide to the Board the names,
5 physical addresses, mailing addresses, and telephone numbers of any and all employers and
6 supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's
7 worksite monitor, and Respondent's employers and supervisors to communicate regarding
8 Respondent's work status, performance, and monitoring.

9 For purposes of this section, "supervisors" shall include the Chief of Staff and Health or
10 Well Being Committee Chair, or equivalent, if applicable, when the Respondent has medical staff
11 privileges.

12 7. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to
13 biological fluid testing, at Respondent's expense, upon request of the Board or its designee.
14 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair
15 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall
16 make daily contact with the Board or its designee to determine whether biological fluid testing is
17 required. Respondent shall be tested on the date of the notification as directed by the Board or its
18 designee. The Board may order a Respondent to undergo a biological fluid test on any day, at
19 any time, including weekends and holidays. Except when testing on a specific date as ordered by
20 the Board or its designee, the scheduling of biological fluid testing shall be done on a random/
21 basis. The cost of biological fluid testing shall be borne by the Respondent.

22 During the first year of probation, Respondent shall be subject to 52 to 104 random tests.
23 During the second year of probation and for the duration of the probationary term, up to five (5)
24 years, Respondent shall be subject to 36 to 104 random tests per year. Only if there have been no
25 positive biological fluid tests in the previous five (5) consecutive years of probation, may testing
26 be reduced to one (1) time per month. Nothing precludes the Board from increasing the number
27 of random tests to the first-year level of frequency for any reason.

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1 Prior to practicing medicine, Respondent shall contract with a laboratory or service,
2 approved in advance by the Board or its designee, that will conduct random, unannounced,
3 observed, biological fluid testing and meets all of the following standards:

4 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry
5 Association or have completed the training required to serve as a collector for the United
6 States Department of Transportation.

7 (b) Its specimen collectors conform to the current United States Department of
8 Transportation Specimen Collection Guidelines.

9 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published
10 by the United States Department of Transportation without regard to the type of test
11 administered.

12 (d) Its specimen collectors observe the collection of testing specimens.

13 (e) Its laboratories are certified and accredited by the United States Department of Health
14 and Human Services.

15 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day
16 of receipt and all specimens collected shall be handled pursuant to chain of custody
17 procedures. The laboratory shall process and analyze the specimens and provide legally
18 defensible test results to the Board within seven (7) business days of receipt of the
19 specimen. The Board will be notified of non-negative results within one (1) business day
20 and will be notified of negative test results within seven (7) business days.

21 (g) Its testing locations possess all the materials, equipment, and technical expertise
22 necessary in order to test Respondent on any day of the week.

23 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens
24 for the detection of alcohol and illegal and controlled substances.

25 (i) It maintains testing sites located throughout California.

26 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line
27 computer database that allows the Respondent to check in daily for testing.

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1 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff
2 access to drug test results and compliance reporting information that is available 24 hours a
3 day.

4 (l) It employs or contracts with toxicologists that are licensed physicians and have
5 knowledge of substance abuse disorders and the appropriate medical training to interpret
6 and evaluate laboratory biological fluid test results, medical histories, and any other
7 information relevant to biomedical information.

8 (m) It will not consider a toxicology screen to be negative if a positive result is obtained
9 while practicing, even if the Respondent holds a valid prescription for the substance.

10 Prior to changing testing locations for any reason, including during vacation or other travel,
11 alternative testing locations must be approved by the Board and meet the requirements above.

12 The contract shall require that the laboratory directly notify the Board or its designee of
13 non-negative results within one (1) business day and negative test results within seven (7)
14 business days of the results becoming available. Respondent shall maintain this laboratory or
15 service contract during the period of probation.

16 A certified copy of any laboratory test result may be received in evidence in any
17 proceedings between the Board and Respondent.

18 If a biological fluid test result indicates Respondent has used, consumed, ingested, or
19 administered to himself or herself a prohibited substance, the Board shall order Respondent to
20 cease practice and instruct Respondent to leave any place of work where Respondent is practicing
21 medicine or providing medical services. The Board shall immediately notify all of Respondent's
22 employers, supervisors and work monitors, if any, that Respondent may not practice medicine or
23 provide medical services while the cease-practice order is in effect.

24 A biological fluid test will not be considered negative if a positive result is obtained while
25 practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited
26 substance use exists, the Board shall lift the cease-practice order within one (1) business day.

27 After the issuance of a cease-practice order, the Board shall determine whether the positive
28 biological fluid test is in fact evidence of prohibited substance use by consulting with the

specimen collector and the laboratory, communicating with the licensee, his or her treating physician(s), other health care provider, or group facilitator, as applicable.

For purposes of this condition, the terms “biological fluid testing” and “testing” mean the acquisition and chemical analysis of a Respondent’s urine, blood, breath, or hair.

For purposes of this condition, the term “prohibited substance” means an illegal drug, a lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by Respondent and approved by the Board, alcohol, or any other substance the Respondent has been instructed by the Board not to use, consume, ingest, or administer to himself or herself.

If the Board confirms that a positive biological fluid test is evidence of use of a prohibited substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to any other terms or conditions the Board determines are necessary for public protection or to enhance Respondent’s rehabilitation.

8. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within thirty (30) days of the effective date of this Decision, Respondent shall submit to the Board or its designee, for its prior approval, the name of a substance abuse support group which he shall attend for the duration of probation. Respondent shall attend substance abuse support group meetings at least once per week, or as ordered by the Board or its designee. Respondent shall pay all substance abuse support group meeting costs.

The facilitator of the substance abuse support group meeting shall have a minimum of three (3) years’ experience in the treatment and rehabilitation of substance abuse, and shall be licensed or certified by the state or nationally certified organizations. The facilitator shall not have a current or former financial, personal, or business relationship with Respondent within the last five (5) years. Respondent’s previous participation in a substance abuse group support meeting led by the same facilitator does not constitute a prohibited current or former financial, personal, or business relationship.

The facilitator shall provide a signed document to the Board or its designee showing Respondent’s name, the group name, the date and location of the meeting, Respondent’s

attendance, and Respondent's level of participation and progress. The facilitator shall report any unexcused absence by Respondent from any substance abuse support group meeting to the Board, or its designee, within twenty-four (24) hours of the unexcused absence.

9. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval as a worksite monitor, the name and qualifications of one or more licensed physician and surgeon, other licensed health care professional if no physician and surgeon is available, or, as approved by the Board or its designee, a person in a position of authority who is capable of monitoring the Respondent at work.

The worksite monitor shall not have a current or former financial, personal, or familial relationship with Respondent, or any other relationship that could reasonably be expected to compromise the ability of the monitor to render impartial and unbiased reports to the Board or its designee. If it is impractical for anyone but Respondent's employer to serve as the worksite monitor, this requirement may be waived by the Board or its designee, however, under no circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

The worksite monitor shall have an active unrestricted license with no disciplinary action within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth by the Board or its designee.

Respondent shall pay all worksite monitoring costs.

The worksite monitor shall have face-to-face contact with Respondent in the work environment on as frequent a basis as determined by the Board or its designee, but not less than once per week; interview other staff in the office regarding Respondent's behavior, if requested by the Board or its designee; and review Respondent's work attendance.

The worksite monitor shall verbally report any suspected substance abuse to the Board and Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected substance abuse does not occur during the Board's normal business hours, the verbal report shall be made to the Board or its designee within one (1) hour of the next business day. A written

1 report that includes the date, time, and location of the suspected abuse; Respondent's actions; and
2 any other information deemed important by the worksite monitor shall be submitted to the Board
3 or its designee within 48 hours of the occurrence.

4 The worksite monitor shall complete and submit a written report monthly or as directed by
5 the Board or its designee which shall include the following: (1) Respondent's name and
6 Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3)
7 the worksite monitor's license number, if applicable; (4) the location or location(s) of the
8 worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the
9 names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance;
10 (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can
11 lead to suspected substance abuse by Respondent. Respondent shall complete any required
12 consent forms and execute agreements with the approved worksite monitor and the Board, or its
13 designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

14 If the worksite monitor resigns or is no longer available, Respondent shall, within five (5)
15 calendar days of such resignation or unavailability, submit to the Board or its designee, for prior
16 approval, the name and qualifications of a replacement monitor who will be assuming that
17 responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a
18 replacement monitor within sixty (60) calendar days of the resignation or unavailability of the
19 monitor, Respondent shall receive a notification from the Board or its designee to cease the
20 practice of medicine within three (3) calendar days after being so notified. Respondent shall
21 cease the practice of medicine until a replacement monitor is approved and assumes monitoring
22 responsibility.

23 10. VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING
24 LICENSEES. Failure to fully comply with any term or condition of probation is a violation of
25 probation.

26 A. If Respondent commits a major violation of probation as defined by section 1361.52,
27 subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take one or
28 more of the following actions:

1 (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical
2 diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of
3 Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice
4 order issued by the Board or its designee shall state that Respondent must test negative for at least
5 a month of continuous biological fluid testing before being allowed to resume practice. For
6 purposes of determining the length of time a Respondent must test negative while undergoing
7 continuous biological fluid testing following issuance of a cease-practice order, a month is
8 defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until
9 notified in writing by the Board or its designee that he or she may do so.

10 (2) Increase the frequency of biological fluid testing.

11 (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or
12 other action as determined by the Board or its designee.

13 B. If Respondent commits a minor violation of probation as defined by section 1361.52,
14 subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take one or
15 more of the following actions:

16 (1) Issue a cease-practice order;

17 (2) Order practice limitations;

18 (3) Order or increase supervision of Respondent;

19 (4) Order increased documentation;

20 (5) Issue a citation and fine, or a warning letter;

21 (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in
22 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of
23 Regulations, at Respondent's expense;

24 (7) Take any other action as determined by the Board or its designee.

25 C. Nothing in this Decision shall be considered a limitation on the Board's authority to
26 revoke Respondent's probation if he has violated any term or condition of probation. If
27 Respondent violates probation in any respect, the Board, after giving Respondent notice and the
28 opportunity to be heard, may revoke probation and carry out the disciplinary order that was

1 stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed
2 against Respondent during probation, the Board shall have continuing jurisdiction until the matter
3 is final, and the period of probation shall be extended until the matter is final.

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

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

16 13. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations
17 under penalty of perjury on forms provided by the Board, stating whether there has been
18 compliance with all the conditions of probation. Respondent shall submit quarterly declarations
19 not later than 10 calendar days after the end of the preceding quarter.

20 14. GENERAL PROBATION REQUIREMENTS.

21 Compliance with Probation Unit

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

23 Address Changes

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

1 Place of Practice

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

5 License Renewal

6 Respondent shall maintain a current and renewed California physician's and surgeon's
7 license.

8 Travel or Residence Outside California

9 Respondent shall immediately inform the Board or its designee, in writing, of travel to any
10 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty
11 (30) calendar days. In the event Respondent should leave the State of California to reside or to
12 practice Respondent shall notify the Board or its designee in writing 30 calendar days prior to the
13 dates of departure and return.

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

17 16. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
18 its designee in writing within 15 calendar days of any periods of non-practice lasting more than
19 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
20 defined as any period of time Respondent is not practicing medicine as defined in Business and
21 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
22 patient care, clinical activity or teaching, or other activity as approved by the Board. If
23 Respondent resides in California and is considered to be in non-practice, Respondent shall
24 comply with all terms and conditions of probation. All time spent in an intensive training
25 program which has been approved by the Board or its designee shall not be considered non-
26 practice and does not relieve Respondent from complying with all the terms and conditions of
27 probation. Practicing medicine in another state of the United States or Federal jurisdiction while
28 on probation with the medical licensing authority of that state or jurisdiction shall not be

1 considered non-practice. A Board-ordered suspension of practice shall not be considered as a
2 period of non-practice.

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

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

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

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

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

19 18. VIOLATION OF PROBATION. Failure to fully comply with any term or condition
20 of probation is a violation of probation. If Respondent violates probation in any respect, the
21 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and
22 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,
23 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have
24 continuing jurisdiction until the matter is final, and the period of probation shall be extended until
25 the matter is final.

26 19. LICENSE SURRENDER. Following the effective date of this Decision, if
27 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
28 the terms and conditions of probation, Respondent may request to surrender his or her license.

1 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
2 determining whether or not to grant the request, or to take any other action deemed appropriate
3 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
4 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
5 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
6 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
7 application shall be treated as a petition for reinstatement of a revoked certificate.

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

13 21. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for
14 a new license or certification, or petition for reinstatement of a license, by any other health care
15 licensing action agency in the State of California, all of the charges and allegations contained in
16 Accusation No. 800-2020-067045 shall be deemed to be true, correct, and admitted by
17 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or
18 restrict license.

19
20 ACCEPTANCE


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

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27 DATED: 1/13/22


28 STEVEN LE, M.D.
Respondent

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I have read and fully discussed with Respondent Steven Le, 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: January 14, 2022 
GREGORY ABRAMS, ESQ.
Attorney for Respondent

1 ENDORSEMENT

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

4
5 DATED: 01/19/2022

Respectfully submitted,

6 ROB BONTA
7 Attorney General of California
8 JANE ZACK SIMON
9 Supervising Deputy Attorney General

10 *Lynne K. Dombrowski*
11 LYNNE K. DOMBROWSKI
12 Deputy Attorney General
13 *Attorneys for Complainant*

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Exhibit A

1 ROB BONTA
Attorney General of California
2 JANE ZACK SIMON
Supervising Deputy Attorney General
3 LYNNE K. DOMBROWSKI
Deputy Attorney General
4 State Bar No. 128080
455 Golden Gate Avenue, Suite 11000
5 San Francisco, CA 94102-7004
Telephone: (415) 510-3439
6 Facsimile: (415) 703-5480
E-mail: Lynne.Dombrowski@doj.ca.gov
7 *Attorneys for Complainant*

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

12 In the Matter of the Accusation Against:

Case No. 800-2020-067045

13 **STEVEN LE, M.D.**
2500 Merced Street
14 San Leandro, CA 94577-4201

ACCUSATION

15 **Physician's and Surgeon's Certificate**
No. A 104419,

16 Respondent.
17

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 June 13, 2008, the Medical Board issued Physician's and Surgeon's
24 Certificate Number A 104419 to Steven Le, M.D. (Respondent). The Physician's and Surgeon's
25 Certificate was in full force and effect at all times relevant to the charges brought herein and will
26 expire on May 31, 2022, unless renewed.

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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 820 of the Code states:

Whenever it appears that any person holding a license, certificate or permit under this division or under any initiative act referred to in this division may be unable to practice his or her profession safely because the licentiate's ability to practice is impaired due to mental illness, or physical illness affecting competency, the licensing agency may order the licentiate to be examined by one or more physicians and surgeons or psychologists designated by the agency. The report of the examiners shall be made available to the licentiate and may be received as direct evidence in proceedings conducted pursuant to Section 822.

5. Section 822 of the Code states:

If a licensing agency determines that its licentiate's ability to practice his or her profession safely is impaired because the licentiate is mentally ill, or physically ill affecting competency, the licensing agency may take action by any one of the following methods:

(a) Revoking the licentiate's certificate or license.

(b) Suspending the licentiate's right to practice.

(c) Placing the licentiate on probation.

(d) Taking such other action in relation to the licentiate as the licensing agency in its discretion deems proper.

The licensing section shall not reinstate a revoked or suspended certificate or license until it has received competent evidence of the absence or control of the condition which caused its action and until it is satisfied that with due regard for the public health and safety the person's right to practice his or her profession may be safely reinstated.

6. 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.

1 (3) Be placed on probation and be required to pay the costs of probation
2 monitoring upon order of the board.

3 (4) Be publicly reprimanded by the board. The public reprimand may include a
4 requirement that the licensee complete relevant educational courses approved by the
5 board.

6 (5) Have any other action taken in relation to discipline as part of an order of
7 probation, as the board or an administrative law judge may deem proper.

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

14 7. Section 2234 of the Code, states:

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

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

20 (b) Gross negligence.

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

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

28 (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.

8. Section 2239 of the Code states:

(a) The use or prescribing for or administering to himself or herself, of any controlled substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to any other person or to the public, or to the extent that such use impairs the ability of the licensee to practice medicine safely or more than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section, or any combination thereof, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of such unprofessional conduct.

(b) A plea or verdict of guilty or a conviction following a plea of nolo contendere is deemed to be a conviction within the meaning of this section. The Medical Board may order discipline of the licensee in accordance with Section 2227 or the Medical Board may order the denial of the license when the time for appeal has elapsed or the judgment of conviction has been affirmed on appeal or when an order granting probation is made suspending imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code allowing such person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, complaint, information, or indictment.

FIRST CAUSE FOR DISCIPLINE

(Section 822: Mental or Physical Impairment)

9. Respondent Steven Le M.D. is subject to disciplinary action under Section 822 of the Code in that Respondent is unable to practice medicine safely, without certain restrictions and monitoring, due to a mental or physical condition, as described more fully herein.

10. On or about April 20, 2020, the Medical Board received a Health Facility/Peer Review Reporting Form, required by Section 805 of the California Business and Professions Code ("805 Report"), from The Permanente Medical Group, Inc. ("TPMG/Kaiser"). The 805 Report stated that Respondent had restrictions imposed on his employment on April 14, 2020 that were based on a medical disciplinary cause or reason. He took a leave of absence from employment with TPMG/Kaiser on that same date.

11. During the Board's investigation of the information reported in the 805 Report, the Board learned that, on March 9, 2020, TPMG/Kaiser hospital staff suspected that Respondent was under the influence while at work. Respondent was immediately taken off clinical duty because of concerns of possible impairment. At that time, Respondent admitted to drinking alcohol before midnight and to taking Restoril at 1 a.m. and trazodone at 3 a.m. to help him sleep. He denied

1 any other substance use. Respondent consented to complete a breathalyzer and a urine toxicology
2 screen. Respondent submitted a urine sample on-site. The urine toxicology test results,
3 according to a report dated March 16, 2020, were positive for cocaine. On March 16, 2020,
4 Respondent was placed on administrative leave.

5 12. On or about April 11, 2020, Respondent entered into an agreement with
6 TPMG/Kaiser that was entitled a "Substance Abuse Monitoring and Return to Work Agreement"
7 which required rehabilitation treatment and five years of a monitoring, testing, and treatment
8 program as requirements for Respondent's return to work at TPMG/Kaiser.

9 13. On or about April 17, 2020, Respondent was admitted to an in-patient rehabilitation
10 treatment center, the Center for Professional Recovery (CPR), in Malibu, California. On or about
11 May 16, 2020, Respondent was discharged from CPR and he was deemed to have successfully
12 completed treatment. His diagnosis was Moderate Cocaine Use Disorder.

13 14. On or about July 31, 2020, Respondent signed a Voluntary Agreement for Mental
14 Evaluation by a Board-approved physician.

15 15. On or about February 23, 2021, Respondent was interviewed by an investigator for
16 the Board and a Board District Medical Consultant physician. Respondent was represented by an
17 attorney during the interview. During the interview, Respondent provided the following
18 information:

19 (a) He has not consumed alcohol since March 7, 2020; and,

20 (b) On or about June 24, 2020, he was approved by TPMG and Kaiser Hospital to return to
21 work. His initial return to work was on a 50-percent work schedule. Since October 2020, he has
22 worked an 80-percent schedule with continuing restrictions. His agreement with TPMG/Kaiser
23 includes five years of a monitoring program through random urine testing with 48 to 52 tests
24 annually, support group meetings, worksite physician monitor, and participation in the Kaiser
25 Wellness Program.

26 16. On or about March 23, 2021, Respondent met with a Board-designated physician,
27 who is board certified by the American Board of Psychiatry and Neurology, for a voluntary
28

1 mental evaluation. The physician examiner completed a written report dated March 27, 2021 that
2 set forth findings and conclusions regarding Respondent's mental condition and status.

3 17. In the evaluation report dated March 27, 2021, the physician examiner confirmed
4 Respondent's past history of cocaine use and diagnosed Respondent with a Cocaine Use
5 Disorder, Mild to Moderate, in Sustained Remission. The physician examiner concluded that
6 oversight, treatment, and monitoring are necessary in order for Respondent to practice medicine
7 safely. The physician examiner found that the ongoing treatment and monitoring that Respondent
8 is currently undergoing through his employer TPMG/Kaiser, or a similar treatment and
9 monitoring program, are necessary in order to ensure that Respondent can practice medicine
10 safely because of the possible risks of relapse to cocaine use.

11 **SECOND CAUSE FOR DISCIPLINE**

12 **(Unprofessional Conduct: Gross Negligence and/or Self-Use of Controlled Substance in a
13 Dangerous Manner and/or to Extent of Impairment to Practice Medicine Safely)**

14 18. Respondent Steven Le, M.D. is subject to disciplinary action, under Sections 2234
15 and 2239 of the Code, for unprofessional conduct through gross negligence and/or through use of
16 a controlled substance to the extent or in such a manner as to be dangerous or injurious to the
17 licensee, or to any other person or to the public, or to the extent that such use impairs the ability
18 of the licensee to practice medicine safely.

19 19. Paragraphs 9 through 17 are incorporated by reference as if fully set forth.

20 **PRAYER**

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

23 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 104419,
24 issued to Steven Le, M.D.;

25 2. Revoking, suspending or denying approval of Steven Le, M.D.'s authority to
26 supervise physician assistants and advanced practice nurses;


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28 ///

1 3. Ordering Steven Le, M.D., if placed on probation, to pay the Board the costs of
2 probation monitoring; and

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

4
5 DATED: **AUG 10 2021**



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

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