

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

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

**DUSTIN ZIEROLD, M.D.**

**Physician's and Surgeon's  
Certificate No. A 85833**

**Case No.: 800-2019-056632**

**Respondent.**

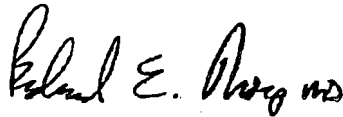
**DECISION**

**The attached Stipulated Settlement 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 July 14, 2023.**

**IT IS SO ORDERED: June 14, 2023.**

**MEDICAL BOARD OF CALIFORNIA**



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

1 ROB BONTA  
Attorney General of California  
2 STEVE DIEHL  
Supervising Deputy Attorney General  
3 RYAN J. YATES  
Deputy Attorney General  
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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:

13 **DUSTIN ZIEROLD, M.D.**  
14 **2 Medical Plaza Drive, Suite 275**  
**Roseville, CA 95661-3043**

15 **Physician's and Surgeon's Certificate No. A**  
16 **85833**

17 Respondent.

Case No. 800-2019-056632

OAH No. 2022070340

**STIPULATED SETTLEMENT AND**  
**DISCIPLINARY ORDER**

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

21 **PARTIES**

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

26 2. Respondent Dustin Zierold, M.D. (Respondent) is representing himself in this  
27 proceeding and has chosen not to exercise his right to be represented by counsel.  
28

3. On or about January 30, 2004, the Board issued Physician's and Surgeon's Certificate No. A 85833 to Dustin Zierold, M.D. The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2019-056632, and will expire on March 31, 2023, unless renewed.

## JURISDICTION

4. Accusation No. 800-2019-056632 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 May 5, 2022. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2019-056632 is attached as exhibit A and incorporated herein by reference.

## ADVISEMENT AND WAIVERS

6. Respondent has carefully read, and understands the charges and allegations in Accusation No. 800-2019-056632. Respondent has also carefully read, 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 be represented by counsel at his own expense; 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.

## CULPABILITY

9. Respondent understands and agrees that the charges and allegations in Accusation No. 800-2019-056632, if proven at a hearing, constitute cause for imposing discipline upon his Physician's and Surgeon's Certificate.

10. Respondent does not contest that, at an administrative hearing, complainant could establish a prima facie case with respect to the charges and allegations in Accusation No. 800-2019-056632, a true and correct copy of which is attached hereto as Exhibit A, and that he has thereby subjected his Physician's and Surgeon's Certificate, No. A 85833 to disciplinary action.

11. Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's probationary terms 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. By signing the stipulation, Respondent understands and agrees that he may not withdraw his 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. Respondent agrees that if he ever petitions for early termination or modification of probation, or if an accusation and/or petition to revoke probation is filed against him before the Board, all of the charges and allegations contained in Accusation No. 800-2019-056632 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.

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**

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 85833 issued to Respondent Dustin Zierold, M.D. is revoked. However, the revocation is stayed and Respondent is placed on probation for three (3) years on the following terms and conditions:

1. EDUCATION COURSE. Within 60 calendar days of the effective date of this Decision, and on an annual basis thereafter, 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 per year, for each year of probation. The educational program(s) or course(s) shall 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.

2. 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**

1 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board  
2 or its designee, be accepted towards the fulfillment of this condition if the program would have  
3 been approved by the Board or its designee had the program been taken after the effective date of  
4 this Decision.

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

8 3. PSYCHIATRIC EVALUATION. Within 30 calendar days of the effective date of  
9 this Decision, and on whatever periodic basis thereafter may be required by the Board or its  
10 designee, Respondent shall undergo and complete a psychiatric evaluation (and psychological  
11 testing, if deemed necessary) by a Board-appointed board certified psychiatrist, who shall  
12 consider any information provided by the Board or designee and any other information the  
13 psychiatrist deems relevant, and shall furnish a written evaluation report to the Board or its  
14 designee. Psychiatric evaluations conducted prior to the effective date of the Decision shall not  
15 be accepted towards the fulfillment of this requirement. Respondent shall pay the cost of all  
16 psychiatric evaluations and psychological testing.

17 Respondent shall comply with all restrictions or conditions recommended by the evaluating  
18 psychiatrist within 15 calendar days after being notified by the Board or its designee.

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

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

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

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

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

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

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

1 replacement monitor is approved and assumes monitoring responsibility.

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

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

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

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

19 7. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby  
20 ordered to reimburse the Board its costs of investigation and enforcement, including, but not  
21 limited to, expert review, amended accusations, legal reviews, investigation(s), and subpoena  
22 enforcement, as applicable, in the amount of \$8,386.25 (eight thousand three hundred and eighty-  
23 six dollars and twenty-five cents). Costs shall be payable to the Medical Board of California.  
24 Failure to pay such costs shall be considered a violation of probation.

25 Payment must be made in full within 30 calendar days of the effective date of the Order, or  
26 by a payment plan approved by the Medical Board of California. Any and all requests for a  
27 payment plan shall be submitted in writing by respondent to the Board. Failure to comply with  
28 the payment plan shall be considered a violation of probation.



1 The filing of bankruptcy by respondent shall not relieve respondent of the responsibility to  
2 repay investigation and enforcement costs, including expert review costs (if applicable).

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

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

8 9. GENERAL PROBATION REQUIREMENTS.

9 Compliance with Probation Unit

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

11 Address Changes

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

17 Place of Practice

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

21 License Renewal

22 Respondent shall maintain a current and renewed California physician's and surgeon's  
23 license.

24 Travel or Residence Outside California

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

28 In the event Respondent should leave the State of California to reside or to practice

Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of departure and return.

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

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

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

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

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

Periods of non-practice for a Respondent residing outside of California will relieve Respondent of the responsibility to comply with the probationary terms and conditions with the

1 exception of this condition and the following terms and conditions of probation: Obey All Laws;  
2 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or  
3 Controlled Substances; and Biological Fluid Testing..

4 12. COMPLETION OF PROBATION. Respondent shall comply with all financial  
5 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the  
6 completion of probation. This term does not include cost recovery, which is due within 30  
7 calendar days of the effective date of the Order, or by a payment plan approved by the Medical  
8 Board and timely satisfied. Upon successful completion of probation, Respondent's certificate  
9 shall be fully restored.

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

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

27 15. PROBATION MONITORING COSTS. Respondent shall pay the costs associated  
28 with probation monitoring each and every year of probation, as designated by the Board, which

1 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of  
2 California and delivered to the Board or its designee no later than January 31 of each calendar  
3 year.

4 16. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for a  
5 new license or certification, or petition for reinstatement of a license, by any other health care  
6 licensing action agency in the State of California, all of the charges and allegations contained in  
7 Accusation No. 800-2019-056632 shall be deemed to be true, correct, and admitted by  
8 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or  
9 restrict license.

10  
11 ACCEPTANCE

12 I have carefully read the Stipulated Settlement and Disciplinary Order. I understand the  
13 stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into  
14 this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and  
15 agree to be bound by the Decision and Order of the Medical Board of California.

16  
17 DATED: 12/21/22

  
18 DUSTIN ZIEROLD, M.D.  
Respondent

19  
20 ENDORSEMENT

21 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully  
22 submitted for consideration by the Medical Board of California.  
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DATED: 3/15/23

Respectfully submitted,

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

*Ryan Yates*

RYAN J. YATES  
Deputy Attorney General  
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9 **BEFORE THE**  
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11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

Case No. 800-2019-056632

13 **DUSTIN ZIEROLD, M.D.**  
14 **2 Medical Plaza Drive, Suite 275**  
**Roseville, CA 95661-3043**

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

15 **Physician's and Surgeon's Certificate**  
16 **No. A 85833,**

17 Respondent.

18  
19 **PARTIES**

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

23 2. On or about January 30, 2004, the Board issued Physician's and Surgeon's Certificate  
24 No. A 85833 to Dustin Zierold, M.D. (Respondent). The Physician's and Surgeon's Certificate  
25 was in full force and effect at all times relevant to the charges brought herein and will expire on  
26 March 31, 2023, unless renewed.

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28 ///

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

5. 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.

“...

1 **COST RECOVERY**

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

8 **FACTUAL ALLEGATIONS**

9 7. Respondent is a physician and surgeon who is board-certified in general surgery and  
10 surgical critical care by the American Board of Surgery. At all times relevant to this action,  
11 Respondent worked at Sutter Roseville Medical Center (SRMC) and Roseville Trauma Medical  
12 Group. In the SRMC Emergency Room (ER), there are four trauma rooms (Trauma Rooms 1, 2,  
13 3, and 4) all housed in one moderate sized room and separated by a curtain, which is only  
14 partially effective for visual separation but not at all for sound isolation. Loud voices or activity in  
15 one trauma room can be heard in all other trauma rooms.

16 8. On or about May 25, 2019, Respondent was working at the SRMC ER when a 24-  
17 year-old male patient was brought to the SRMC ER by the Roseville Police Department for  
18 medical clearance prior to being transferred to the local jail. This patient (referred to herein as  
19 Patient A)<sup>1</sup> suffered puncture wounds to his posterior right thigh and abrasions to his right hand.  
20 The patient was brought into the SRMC ER in an ambulatory bed with a full spit mask on, hands  
21 handcuffed behind his back, and a full restriction of his lower extremity movement with the use<sup>1</sup>  
22 of a WRAP restraining device. The patient was very agitated and combative and shouting foul  
23 language, profanities, and racial slurs at staff and others in the SRMC ER. The patient was taken  
24 to Trauma Room 3 where he was evaluated by an ER physician, Dr. D.W., who believed that  
25 Patient A was stable with no life-threatening problems; however, he believed Patient A had  
26 suffered multiple superficial dog bites. Dr. D.W. believed that the patient's main issue was an

27 \_\_\_\_\_  
28 <sup>1</sup> The patient's identity is omitted to protect privacy. It will be provided to Respondent in  
discovery.



1 acute psychosis of unclear etiology, but believed it could also be related to an unknown substance  
2 abuse. Dr. D.W.'s plan was to clean the dog bites with soap and water, give the patient a broad-  
3 spectrum antibiotic, and discharge the patient into the custody of the Roseville Police  
4 Department. Dr. D.W. left the Trauma Room shortly after assessing Patient A.

5 9. At just about the same time that Patient A arrived in SRMC EC Trauma Room 3,  
6 another patient was brought into Trauma Room 1 as a full trauma alert with life-threatening  
7 injuries from a mangled lower extremity injury from a chainsaw accident. Respondent was  
8 assigned to treat Patient B. Respondent believed that the patient needed a very quick assessment  
9 to determine if the leg could be saved (rather than amputated). This required, among other things,  
10 an assessment of the blood flow in the distal arteries of the extremity using a vascular Doppler  
11 device.

12 10. As Respondent initially assessed Patient B, Patient A was being very loud and  
13 verbally abusive to those around him. In order to assess the lower extremity blood flow,  
14 Respondent needed to loosen the tourniquet so that blood flow could be restored and assessed  
15 with the Doppler. Releasing the tourniquet, however, also resulted in significant bleeding.  
16 Respondent could not hear any signals from the Doppler as Patient A had created a ruckus in the  
17 trauma rooms. Respondent reapplied the tourniquet to the bleeding extremity so that he could find  
18 a way to quiet down and control Patient A.

19 11. Respondent attempted to reach Patient A's physician, but Dr. D.W. was no longer in  
20 the immediate area. Respondent requested that the anesthesiologist intubate Patient A. And he  
21 asked Roseville Police Department Officers—who were standing near Patient A—to quiet him  
22 down. When these attempts failed, Respondent entered Trauma Room 3 and approached Patient  
23 A from the side of his bed. At this point, Patient A had on a spit mask, his hands were cuffed  
24 behind his back, and his lower body was in a WRAP restraint. The WRAP did not allow his legs  
25 to bend at the knees, meaning he could not walk or run. He could, however, sit partially up in bed,  
26 which was the position he was in as Respondent approached him. Respondent shouted at Patient  
27 A to "shut up" several times while using profanities. Patient A did not comply with Respondent's  
28 demands, and he lurched forward again. Respondent then grabbed Patient A's head with both

1 hands and placed direct pressure with his thumbs at both of Patient A's supraorbital notches,  
2 pushing him down to the bed. This unexpected maneuver seemed to quiet Patient A temporarily.  
3 According to Patient A's primary nurse, Respondent brought his face close to Patient A's face  
4 and shouted at Patient A to "shut up"—again using many profanities. Patient A continued to be  
5 verbally abusive and disruptive but also mentioned that he was in the military. Respondent, who  
6 had served in the Air Force with tours in both Iraq and Afghanistan, responded that he was also in  
7 the military and asked if Patient A wanted to see his tags, which Respondent then showed to  
8 Patient A. This seemed to temporarily change Patient A's disposition as he thanked Respondent  
9 for his service. At some point, Patient A continued his loud and disruptive behavior, and he was  
10 ultimately moved to a more isolated holding area where he could no longer disrupt the other  
11 trauma rooms.

12 12. When Respondent returned to Patient B in Trauma Room 1, he was able to use a  
13 vascular Doppler to hear and to confirm that both the critical arteries to the distal aspect of Patient  
14 B's traumatized leg were intact. According to Respondent, he was able to perform surgery  
15 without amputating Patient B's leg.

#### 16 **FIRST CAUSE FOR DISCIPLINE**

##### 17 **(Gross Negligence)**

18 13. Respondent's license is subject to disciplinary action under section 2234, subdivision  
19 (b), of the Code, in that he committed gross negligence during his interactions with Patient A, as  
20 more particularly alleged in paragraphs 7 through 12 above, which are hereby incorporated by  
21 reference and realleged as if fully set forth herein. Additional circumstances are as follows:

22 14. Respondent committed grossly negligent acts, including but not limited to:

23 A. Using unacceptable and profane language during his verbal interaction with  
24 Patient A; and

25 B. Using an unacceptable and inappropriate physical maneuver during his physical  
26 interaction with Patient A.

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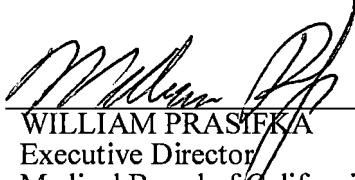
1 criminal matter, alleging that Respondent was convicted of criminal charges substantially related  
2 to the qualifications, functions, or duties of a physician and surgeon. That Decision is now final  
3 and is incorporated by reference as if fully set forth herein.

4 **PRAYER**

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

- 7 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 85833,  
8 issued to Respondent Dustin Zierold, M.D.;
- 9 2. Revoking, suspending or denying approval of Respondent Dustin Zierold, M.D.'s  
10 authority to supervise physician assistants and advanced practice nurses;
- 11 3. Ordering Respondent Dustin Zierold, M.D., to pay the Board the costs of the  
12 investigation and enforcement of this case, and if placed on probation, the costs of probation  
13 monitoring; and
- 14 4. Taking such other and further action as deemed necessary and proper.

15  
16 DATED: **MAY 05 2022**

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

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