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

11 In the Matter of the Accusation Against:

Case No. 800-2014-007056

12 **RONALD H. ONKIN, M.D.**
16055 Ventura Boulevard, Suite 603
13 Encino, CA 91436-2609

A C C U S A T I O N

14 Physician's and Surgeon's Certificate No. C 27700,
15 Respondent.

16
17 Complainant alleges:

18 **PARTIES**

19 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
20 capacity as the Executive Director of the Medical Board of California, Department of Consumer
21 Affairs (Board).

22 2. On or about October 20, 1965, the Medical Board issued Physician's and Surgeon's
23 Certificate Number C 27700 to Ronald H. Onkin, M.D. (Respondent). The Physician's and
24 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
25 herein and will expire on November 30, 2018, unless renewed.

26 **JURISDICTION**

27 3. This Accusation is brought before the Board, under the authority of the following
28 laws. All section references are to the Business and Professions Code unless otherwise indicated.

1 4. Section 2234 of the Code, states:

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

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

7 “(b) Gross negligence.

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

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

13 “(2) When the standard of care requires a change in the diagnosis, act, or omission
14 that constitutes the negligent act described in paragraph (1), including, but not limited to, a
15 reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs
16 from the applicable standard of care, each departure constitutes a separate and distinct
17 breach of the standard of care.

18 “(d) Incompetence.

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

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

22 “(g) The practice of medicine from this state into another state or country without meeting
23 the legal requirements of that state or country for the practice of medicine. Section 2314 shall not
24 apply to this subdivision. This subdivision shall become operative upon the implementation of the
25 proposed registration program described in Section 2052.5.

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

1 5. Section 726 of the Code, states;

2 (a) The commission of any act of sexual abuse, misconduct, or relations with a patient,
3 client, or customer constitutes unprofessional conduct and grounds for disciplinary action for any
4 person licensed under this division or under any initiative act referred to in this division.

5 (b) This section shall not apply to consensual sexual contact between a licensee and his or
6 her spouse or person in an equivalent domestic relationship when that licensee provides medical
7 treatment, other than psychotherapeutic treatment, to his or her spouse or person in an equivalent
8 domestic relationship.

9 **FIRST CAUSE FOR DISCIPLINE**

10 **(Repeated Negligent Acts)**

11 6. Respondent is subject to disciplinary action under section 2234, subdivision (c), in
12 that he was repeatedly negligent when he treated a female patient. The circumstances are as
13 follows:

14 Patient K.H.:

15 A. Patient K.H. is a therapist and saw Respondent from November 2013 thru July 2014.
16 She was seeing him mostly for medications and for Bipolar Disorder. The first session was about
17 45 minutes, then the rest were approximately 20 minutes long.

18 B. During the first few visits she felt comfortable with Respondent, but things began to
19 change around the third or fourth visit.

20 C. K.H. describes Respondent as disheveled and his office was very disorganized. She
21 said he avoided eye contact with her and he actually fell asleep during one of their sessions.

22 D. Early on, Respondent prescribed a medication with a horrible aftertaste. K.H. read
23 reviews from other patients who complained the medication "tastes like ass." When K.H.
24 complained to Respondent and said it "tastes like ass," he asked her how she knows, and who's
25 ass had she been licking"? During a few sessions Respondent asked if she masturbated.

26 E. Respondent changed the medication to Lamictal and it appeared to work well for the
27 patient. She continued to see Respondent, although he wanted to see her every two weeks, she
28 said she only needed to see him once a month.

1 F. On about the fifth visit, Respondent attempted to give the patient a side hug. She was
2 facing the door and when he tried to hug her, she said "no."

3 G. During their 10th session, as she was leaving, Respondent reached out and grabbed
4 her breasts and juggled them up and down. The patient was shocked and pushed him away
5 shouting "inappropriate!" Patient K.H. immediately called her long time psychologist, Dr. G.
6 and then she filed her complaint with the Medical Board.

7 H. During the subject interview, Respondent explained that his initial diagnosis of K.H.
8 was major depression but then he changed it to Bipolar II Disorder. He also claimed that he
9 thought she suffers from Borderline Personality Disorder, however, there is nothing in his notes
10 about that. He claimed that she made this complaint because of her borderline personality
11 disorder.

12 Departures from the Standard of Care:

13 I. There is nothing in the records about the borderline personality disorder or how
14 Respondent even made that assessment, other than her crying about a breakup.

15 J. This is a departure from the standard of care for maintaining accurate and complete
16 psychiatric records. There is no indication he spoke with the patient's therapist, or administered
17 psychological testing. Respondent departed from the standard of care when he failed to provide
18 an appropriate psychiatric evaluation regarding her psychiatric disorder.

19 K. Respondent departed from the standard of care when he failed to outline a treatment
20 plan for the patient's alleged borderline personality disorder.

21 **SECOND CAUSE FOR DISCIPLINE**

22 **(Gross Negligence)**

23 7. Respondent is subject to disciplinary action under section 2234, subdivision (b), in
24 that he was grossly negligent in his treatment of two patients. The circumstances are as follows:

25 Patient J.R.:

26 A. Patient J.R. saw Respondent for depression and alcohol abuse. At the same time she
27 continued to see her regular therapist.

28 B. J.R. had a long history with substance abuse but she wanted to get sober. She wanted

1 to try a few drugs but Respondent prescribed Antabuse. It worked well for her and she has been
2 sober ever since. He also prescribed Brintellix to treat her depression.

3 C. One day at the end of a session, J.R. initiated a hug, and they concluded many of their
4 sessions with a hug. In July 2015, she was seeing Respondent every two weeks, but in November
5 2015 it was just once a month.

6 D. Respondent started asking her about sexual side effects even though she told
7 Respondent she and her husband were not having sex. Respondent asked if she masturbated and
8 what she used. He asked if her husband could maintain an erection.

9 E. He told her she "has everything in the right place," and "if I was single I would really
10 like to go out with you."

11 F. By 2016, Respondent was sliding his hands up and down her back, and on the second
12 to last visit slid his hands to her butt and on the last visit actually squeezed her butt. Her last visit
13 was in June 2016.

14 G. During the subject interview, he stated that the patient suffered from depression,
15 alcoholism and borderline personality disorder. He denied touching her butt and claimed she
16 initiated the hug at the last session. He never told her of his assessment of borderline personality
17 disorder.

18 H. Respondent was grossly negligent for inappropriate sexual touching of patient J.R.

19 Patient K.H.:

20 I. The facts and circumstances alleged in paragraph 6 D, F and G, above are
21 incorporated here as if fully set forth.

22 J. Respondent was grossly negligent for touching her breasts, hugging her and asking
23 sexually charged questions.

24 **THIRD CAUSE FOR DISCIPLINE**

25 (Sexual Misconduct)

26 8. Respondent is subject to disciplinary action under section 726 in that he committed
27 acts of sexual misconduct with two patients. The circumstances are as follows:

28 Complainant incorporates by reference the allegations in Paragraph 6, A through F, and

1 paragraph 7, A through J.

2 **PRAYER**

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

5 1. Revoking or suspending Physician's and Surgeon's Certificate Number C 27700,
6 issued to Ronald H. Onkin, M.D.;

7 2. Revoking, suspending or denying approval of Ronald H. Onkin, M.D.'s authority to
8 supervise physician assistants, pursuant to section 3527 of the Code and advanced practice
9 nurses;

10 3. Ordering Ronald H. Onkin, M.D., if placed on probation, to pay the Board the costs
11 of probation monitoring; and

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

13
14 DATED: June 29, 2017



15 KIMBERLY KIRCHMEYER
16 Executive Director
17 Medical Board of California
18 Department of Consumer Affairs
19 State of California
20 *Complainant*

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