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FILED  
STATE OF CALIFORNIA  
MEDICAL BOARD OF CALIFORNIA  
SACRAMENTO NOV. 18 20 19  
BY A. GEROLA ANALYST

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

11 In the Matter of the First Amended Accusation  
12 Against:

13 **Prakashchandra Patel, M.D.**  
14 **395 N. San Jacinto St., Ste. B**  
15 **Hemet, CA 92543**

16 **Physician's and Surgeon's Certificate**  
17 **No. A32995 ,**

18 Respondent.

Case No. 800-2016-020370

OAH No.: 2019051126

**FIRST AMENDED ACCUSATION**

19 Complainant alleges:

20 **PARTIES**

21 1. Christine J. Lally (Complainant) brings this First Amended Accusation solely in her  
22 official capacity as the Interim Executive Director of the Medical Board of California,  
23 Department of Consumer Affairs (Board).

24 2. On or about October 11, 1978, the Medical Board issued Physician's and Surgeon's  
25 Certificate Number A32995 to Prakashchandra Patel, M.D. (Respondent). The Physician's and  
26 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought  
27 herein and will expire on July 31, 2020, unless renewed.

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**JURISDICTION**

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2           3.     This First Amended Accusation is brought before the Medical Board of California  
3 (Board), Department of Consumer Affairs, under the authority of the following laws. All section  
4 references are to the Business and Professions Code unless otherwise indicated.

5           4.     Section 2004 of the Code states:

6           "The board shall have the responsibility for the following:

7           "(a) The enforcement of the disciplinary and criminal provisions of the Medical Practice  
8 Act.

9           "(b) The administration and hearing of disciplinary actions.

10          "(c) Carrying out disciplinary actions appropriate to findings made by a panel or an  
11 administrative law judge.

12          "(d) Suspending, revoking, or otherwise limiting certificates after the conclusion of  
13 disciplinary actions.

14          "(e) Reviewing the quality of medical practice carried out by physician and surgeon  
15 certificate holders under the jurisdiction of the board.

16          "(f) Approving undergraduate and graduate medical education programs.

17          "(g) Approving clinical clerkship and special programs and hospitals for the programs in  
18 subdivision (f).

19          "(h) Issuing licenses and certificates under the board's jurisdiction.

20          "(i) Administering the board's continuing medical education program."

21          5.     Section 2227 of the Code provides that a licensee who is found guilty under the  
22 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed  
23 one year, placed on probation and required to pay the costs of probation monitoring, or such other  
24 action taken in relation to discipline as the board deems proper.

25          6.     Section 2234 of the Code, states:

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

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

3           "(b) Gross negligence.

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

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

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

14           "(d) Incompetence.

15           "(e) The commission of any act involving dishonesty or corruption that is substantially  
16 related to the qualifications, functions, or duties of a physician and surgeon.

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

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

22           "(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and  
23 participate in an interview by the board. This subdivision shall only apply to a certificate holder  
24 who is the subject of an investigation by the board."

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1 **CAUSE FOR DISCIPLINE**

2 **(Repeated Negligent Acts- 3 Patients)**

3 7. Respondent is subject to disciplinary action under section 2234, subdivision (c), of  
4 the Code for the commission of acts or omissions constituting repeated negligent acts in the care  
5 and treatment of Patient 1, Patient 2, and Patient 3.<sup>1</sup> The circumstances are as follows:

6 **Patient 1**

7 8. Patient 1 is a female who treated with respondent since about October 2012 to August  
8 2015.<sup>2</sup> The patient had a history of depression/bipolar disorder, a history of two suicide attempts,  
9 and was admitted to psychiatric treatment on at least two occasions (January 2008 and May  
10 2015). Patient 1 was on disability and had been treated with multiple benzodiazepines and  
11 antidepressants in the past. Patient 1 had also been treated with lithium in 2013, which is a mood  
12 stabilizer used to treat major depressive disorder. Records show that in April 2014, Patient 1's  
13 creatinine level had increased, and that Respondent had discontinued Patient 1's lithium on or  
14 about June 2014.

15 9. Respondent's failure to replace Patient 1's lithium with another mood stabilizer, as  
16 well as Respondent's failure to follow up on Patient 1's prior treatment constitute simple  
17 departures from the standard of care.<sup>3</sup>

18 **Patient 2**

19 10. Patient 2 is a 48-year old female who treated with Respondent since about March  
20 2012 to May 2014.<sup>4</sup> Patient 2 was diagnosed with opioid dependence, bipolar disorder, and  
21 various phobias. Patient 2 had an extensive history of substance abuse with respect to herself,  
22 and with respect to her family members. She had been under treatment for opioid dependence in  
23 the past and was on Suboxone, which is an opioid medication used to treat narcotic addiction.

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26 <sup>1</sup> The patients are identified by number to protect their privacy.

27 <sup>2</sup> These are approximate dates, based on the records which were available for review.

28 <sup>3</sup> Apparently, Patient 1 had lab work done by other treating professionals, but Respondent did not obtain, review, or order same because per Respondent, it's "almost impossible" to get lab work or medical records from other doctors.

<sup>4</sup> These are approximate dates, based on the records which were available for review.

1 11. Respondent's failure to check urine drug screens in Patient 2 (who was on Suboxone  
2 and had an extensive history of substance abuse) constitutes a simple departure from the standard  
3 of care.

4 **Patient 3**

5 12. Patient 3 is a 52-year old female who treated with respondent since about October  
6 2013 to September 2017.<sup>5</sup> Patient 3 was diagnosed with Attention-Deficit Hyperactivity  
7 Disorder (ADHD), hypertension, depression/anxiety, and insomnia. According to the Controlled  
8 Substance Utilization Review and Evaluation System (CURES), Respondent prescribed Patient 3  
9 Adderall approximately 19 times from November 2013 through December 2015. Patient 3 was  
10 also receiving zolpidem (a.k.a. Ambien (a sleep aid)) on a monthly basis from November 2013  
11 through December 2015.

12 13. Respondent's failure to take blood pressure measurements on Patient 3, who had  
13 hypertension, constitutes a simple departure from the standard of care.

14 **PRAYER**

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

- 17 1. Revoking or suspending Physician's and Surgeon's Certificate Number A32995,  
18 issued to Prakashchandra Patel, M.D.;
- 19 2. Revoking, suspending or denying approval of Prakashchandra Patel, M.D.'s authority  
20 to supervise physician assistants and advanced practice nurses;
- 21 3. Ordering Prakashchandra Patel, M.D., if placed on probation, to pay the Board the  
22 costs of probation monitoring; and

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27 <sup>5</sup> These are approximate dates, based on the records which were available for review.  
28 Also, per the records, during her visit with Respondent on August 2017, Patient 3 reported  
hearing music for the last few months, which possibly could represent an amphetamine-induced  
psychosis.

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

DATED: November 18, 2019

  
CHRISTINE J. LALLY  
Interim Executive Director  
Medical Board of California  
Department of Consumer Affairs  
State of California  
*Complainant*