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FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO JUNE 4 2019
BY SARA PASON ANALYST

10 **BEFORE THE**
11 **MEDICAL BOARD OF CALIFORNIA**
12 **DEPARTMENT OF CONSUMER AFFAIRS**
13 **STATE OF CALIFORNIA**

14 In the Matter of the Accusation Against:

Case No. 800-2016-023446

15 **Hisham H. Soliman, M.D.**
16 **P.O. Box 6180**
17 **Folsom , CA 95763**

A C C U S A T I O N

18 **Physician's and Surgeon's Certificate**
19 **No. A 75977,**

Respondent.

20 Complainant alleges:

21 **PARTIES**

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

25 2. On or about July 25, 2001, the Medical Board issued Physician's and Surgeon's
26 Certificate No. A 75977 to Hisham H. Soliman, M.D. (Respondent). The Physician's and
27 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
28 herein and will expire on November 30, 2020, unless renewed.

JURISDICTION

3. 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.

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

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

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

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

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4. 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:

“... ”

“(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.

“... ”

5. Section 2266 of the Code states:

“The failure of a physician and surgeon to maintain adequate and accurate records relating to the provision of services to their patients constitutes unprofessional conduct.”

6. Unprofessional conduct under Business and Professions Code section 2234 is conduct which breaches the rules or ethical code of the medical profession, or conduct which is unbecoming a member in good standing of the medical profession, and which demonstrates an unfitness to practice medicine. (*Shea v. Board of Medical Examiners* (1978) 81 Cal.App.3d 564, 575.)

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1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Repeated Negligent Acts)**

3 7. Respondent has subjected his Physician's and Surgeon's Certificate No. A 75977 to
4 disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (c), of
5 the Code, in that he committed repeated negligent acts in his care and treatment of Patients A¹, B,
6 and C, as more particularly alleged herein:

7 **Patient A**

8 8. On or about August 21, 2015, Patient A presented to Respondent. Prior to and/or
9 during Patient A's visit, Patient A's mother attempted to provide Respondent with information
10 related to Patient A's prior psychiatric history, including, but not limited to, involuntary
11 hospitalization(s), medication history, and any diagnosis of psychosis, etc. (collateral
12 information). Respondent failed to review and/or consider collateral information from Patient
13 A's mother. Respondent failed to review and/or failed to document having reviewed Patient A's
14 prior psychiatric records.

15 9. Regarding Respondent's documentation of Patient A's August 21, 2015 visit,
16 Respondent made a presumptive diagnosis of Obsessive Compulsive Disorder, but this
17 conclusion is not supported by Respondent's documentation of this visit. Moreover,
18 Respondent's notes, among other things, described symptoms of mood disorders such as lack of
19 energy, depressed mood, sad demeanor, anxiety, social withdrawal, and insomnia, without
20 sufficient details to determine whether Patient A meets the diagnostic criteria for a major
21 depressive episode.

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28 ¹ References to Patients A, B, and C are used to protect patient privacy.

1 **Patient B**

2 10. On or about September 13, 2017, Patient B presented to Respondent after his
3 psychiatrist had retired. Patient B reported a history of anxiety and requested a refill of a
4 prescription for Lorazepam,² the medication he has been taking while under the care of his former
5 psychiatrist. Respondent refused to refill Patient B's prescription for Lorazepam. Respondent
6 stated that Patient B should seek another medical provider. Respondent failed to discuss and/or
7 failed to document having discussed with Patient B, options other than Lorazepam, including, but
8 not limited to, Clonazepam³ with a slow taper.

9 **Patient C**

10 11. On or about November 15, 2017, Patient C presented to Respondent. Respondent
11 diagnosed Patient C with schizophrenia and prescribed Risperidone,⁴ at a dose of 2 mg, twice a
12 day. The manufacturer's recommendation for the starting dose of Risperidone for psychosis in
13 adults is between 1 to 2 mg per day, with a target dose of 4 to 8 mg daily, and a maximum dose of
14 16 mg daily. Respondent failed to adequately explain and/or failed to document having
15 adequately explained possible side effects of Risperidone. The medical records Respondent
16 created for this encounter was inadequate and/or inaccurate, including, but not limited to, the
17 contradiction between the "History" section and the "Exam" section of the records.

18 12. On or about November 15, 2017, after Patient C consumed one dose of Risperidone,
19 2 mg, Patient C began experiencing tremors, "black vision, lots of burping, and a racing heart."

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22 ² Ativan® (lorazepam), a benzodiazepine, is a centrally acting hypnotic-sedative that is a
23 Schedule IV controlled substance pursuant to Health and Safety Code section 11057, subdivision
24 (d), and a dangerous drug pursuant to Business and Professions Code section 4022. When
25 properly prescribed and indicated, it is used for the management of anxiety disorders or for the
26 short term relief of anxiety or anxiety associated with depressive symptoms. Concomitant use of
27 Ativan® with opioids "may result in profound sedation, respiratory depression, coma, and death."
28 The Drug Enforcement Administration (DEA) has identified benzodiazepines, such as Ativan®,
as a drug of abuse. (Drugs of Abuse, DEA Resource Guide (2011 Edition), at p. 53.)

³ Clonazepam is an anti-anxiety medication, a benzodiazepine, which can be used to treat anxiety.

⁴ Risperidone is an antipsychotic, which can be used to treat schizophrenia, bipolar disorder, and irritability caused by autism.

1 13. On or about November 18, 2017, due to the side effects Patient C was experiencing
2 from taking Risperidone, Patient C and/or Patient C's family attempted to make an appointment
3 for Patient C to be seen by Respondent. However, Respondent's staff informed Patient C and/or
4 Patient C's family that the earliest available appointment was November 29, 2017.

5 14. On or about November 28, 2017, Respondent's staff contacted Patient C and/or
6 Patient C's family indicating that the November 29, 2017 appointment for Patient C has now been
7 rescheduled to December 6, 2017.

8 15. On or about December 6, 2017, after Patient C had refused to go to his appointment
9 with Respondent, Patient C's wife appeared on his behalf, with a release of medical information
10 signed by Patient C. When Patient C's wife requested to see Respondent, she was refused by
11 Respondent's staff, who among other things, threatened to call the police if Patient C's wife did
12 not leave the premises. Respondent himself had refused to see and/or discuss Patient C's care
13 with Patient C's wife, even though she had a release of medical information signed by Patient C.
14 Respondent failed to timely and/or adequately conduct a clinical assessment of any side effects
15 Patient C was experiencing from consuming Risperidone.

16 16. Respondent committed repeated negligent acts in his care and treatment of Patients A,
17 B, and C, which included, but was not limited to, the following:

18 (a) Paragraphs 7 through 15, above, are hereby incorporated by reference and
19 realleged as if fully set forth herein;

20 (b) Respondent failed to review and/or failed to document having reviewed Patient
21 A's prior psychiatric records and/or failed to consider collateral information from Patient
22 A's mother;

23 (c) Respondent did not adequately document his August 21, 2015 encounter with
24 Patient A;

25 (d) Respondent failed to discuss and/or failed to document having discussed with
26 Patient B options other than Lorazepam for the treatment of his anxiety;

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1 (e) Respondent refused any contact with Patient C's wife even though she
2 presented with a signed release of medical information from Patient C;

3 (f) Respondent prescribed Risperidone at a dose higher than the manufacturer's
4 recommendation and/or without adequate explanation of possible side effects;

5 (g) Respondent failed to timely and/or adequately conduct a clinical assessment of
6 any side effects Patient C was experiencing from consuming Risperidone; and

7 (h) Respondent's documentation of his November 15, 2017 encounter with Patient
8 C was inadequate and/or inaccurate.

9 **SECOND CAUSE FOR DISCIPLINE**

10 **(Failure to Maintain Adequate and Accurate Records)**

11 17. Respondent has further subjected his Physician's and Surgeon's Certificate No.
12 A 75977 to disciplinary action under sections 2227 and 2234, as defined by section 2266, of the
13 Code, in that Respondent failed to maintain adequate and accurate records regarding his care and
14 treatment of Patients A, B, and C, as more particularly alleged in paragraphs 7 through 16, above,
15 which are hereby incorporated by reference and realleged as if fully set forth herein.

16 **THIRD CAUSE FOR DISCIPLINE**

17 **(General Unprofessional Conduct)**

18 18. Respondent has further subjected his Physician's and Surgeon's Certificate
19 No. A 75977 to disciplinary action under sections 2227 and 2234 of the Code, in that he has
20 engaged in conduct which breaches the rules or ethical code of the medical profession, or conduct
21 which is unbecoming to a member in good standing of the medical profession, and which
22 demonstrates an unfitness to practice medicine, as more particularly alleged in paragraphs 7
23 through 17, above, which are hereby incorporated by reference as if fully set forth herein.

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PRAYER

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

1. Revoking or suspending Physician's and Surgeon's Certificate No. A 75977, issued to Hisham H. Soliman, M.D.;
2. Revoking, suspending or denying approval of Hisham H. Soliman, M.D.'s authority to supervise physician assistants and advanced practice nurses;
3. Ordering Hisham H. Soliman, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and
4. Taking such other and further action as deemed necessary and proper.

DATED:
June 4, 2019


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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