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ATTORNEY GENERAL OF NEW JERSEY
Division of Law 5th Floor
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Attorney for the State Board
of Medical Examiners

FILED

MAY 13 2004

**NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS**

By: B. Michelle Albertson
Deputy Attorney General
Tel. (973) 648-4447

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BOARD OF MEDICAL EXAMINERS

IN THE MATTER OF THE SUSPENSION
OR REVOCATION OF THE LICENSE OF

Administrative Action

GRAYDON GOSS, M.D.
License No. MA 66903

CONSENT ORDER

TO PRACTICE MEDICINE AND SURGERY
IN THE STATE OF NEW JERSEY

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:
:
:

This matter was opened to the New Jersey State Board of Medical Examiners upon receipt of information from the California Medical Board; and the New Jersey Medical Board having filed a Provisional Order of Discipline dated February 5, 2002; and the parties having amicably resolved this matter based on the following findings of fact:

CERTIFIED TRUE COPY

1. Respondent, Graydon *Goss*, M.D., License No. MA 66903, is a physician licensed in the State of New Jersey since 1998 and has been a licensee at all times relevant hereto. Respondent's license is currently active.

2. On or about January 20, 2001 the Respondent entered into a Stipulated Settlement and Disciplinary Order ("CaliforniaOrder") with the California Medical Board ("California Board") concerning quality of psychiatric patient related care and medical records violations. By Decision dated February 28, 2001, the California Order was accepted by the Division of Medical Quality. A copy of the California Decision and Order is attached as Exhibit A.

3. Pursuant to the California Order, Respondent's Physician and Surgeon's Certificate was revoked. However, the revocation was stayed and Respondent placed on probation for 10 years on certain terms and conditions, including, but not limited to: (1) successfully completing an ethics course; (2) successfully completing a program in medical record keeping; (3) provide restitution to Division or its designee in the amount of \$15,000.00; (4) upon returning to California to practice medicine, take and pass an oral clinical exam or written exam in a subject designated and administered by the Division or its designee; (5) upon returning to California to practice medicine and on a periodic basis thereafter as required, submit to a psychiatric evaluation

(and psychological testing, if deemed necessary), with Respondent to pay for all costs; (6) upon returning to California to practice medicine, submit a plan of practice in which Respondent's practice shall be monitored by another physician in Respondent's field of practice, who shall provide periodic reports; (7) obey all laws; (8) provide quarterly reports on compliance with the California Order; (9) comply with the Probation Surveillance Program; (10) appear for interviews as requested by the Division; (11) periods of temporary or permanent residence or practice outside California or non-practice within California will not apply to the reduction of the probationary order.; (12) successfully complete probation for full restoration; (13) reimburse the Division in the amount of \$5,000.00 for costs; and (14) pay probation costs associated with probation monitoring each and every year of probation in the amount of \$2,488.00, which may be annually adjusted.

4. Thereafter, on June 4, 2001, the Idaho State Board of Medicine entered an Order for Reciprocal Discipline against Respondent wherein it adopted and incorporated by reference the California Order. A copy of the Order for Reciprocal Discipline is attached as Exhibit B.

As a result of the foregoing, it is agreed that the Board has grounds to take action against Respondent pursuant to

N. J.S.A. 45:1-21(g) since his California and Idaho licenses have been **revoked**.

ACCORDINGLY, IT IS ON **THIS** 12th day of May 2004 **ORDERED AND AGREED** as follows:

1. Respondent's license to practice medicine and surgery in the State of New Jersey shall be, and hereby is, suspended for ten (10) years from February 28, 2001, which is the date of the California Order, said suspension to be stayed in its entirety and served as probation for ten (10) years.

2. Within thirty (30) days of the date of this Consent Order, Respondent shall provide proof that he has successfully completed the required ethics course as required by the California Order;

3. Within thirty (30) days of the date of this Consent Order, Respondent shall provide proof to the Board that he has successfully completed the medical record keeping training as required by the California Order;

4. Within thirty (30) days of the date of this Consent Order, Respondent shall provide proof to the Board that he has made restitution to the California Board or its designee, on behalf of patient F.B., in the amount of \$15,000.00;

5. Within ninety (90) days of the date of this Consent Order, Respondent shall undergo a psychiatric evaluation and

psychological testing by a Board-appointed psychiatrist, who shall furnish an evaluation report to the Board. Respondent shall have ten (10) days from the date of this Consent Order to submit to the Board the names and qualifications of three (3) New Jersey licensed psychiatrists of Respondent's choice for review and approval by the Board. Respondent agrees to abide by all the recommendations of any evaluation of the Board-appointed psychiatrist. Further, Respondent shall pay all costs of the psychiatric evaluation and recommendations;

6. Within ten (10) days of the date of this Consent Order, Respondent shall submit to the Board the names and qualifications of three (3) New Jersey licensed psychiatrists of Respondent's choice for review and approval by the Board. The Board-approved psychiatrist shall monitor Respondent's practice, at his own expense, and shall provide quarterly reports to the Board during the entire term of probation at Respondent's expense. If the monitor resigns or is no longer available, Respondent shall within fifteen (15) days thereof, move to have a new monitor appointed by the Board, through nomination by Respondent and approval by the Board;

7. Respondent shall comply with the requirements of this Consent Order during the period of probation. Respondent shall, at all times, keep the Board informed of his business and residence

addresses which shall both serve as addresses of records. Changes to such addresses shall be immediately communicated in writing to the Board. Under no circumstances shall a post office box serve as an address of record;

8. In the event Respondent should leave New Jersey to reside or to practice outside the State or for any reason should Respondent stop practicing medicine in New Jersey, then Respondent shall notify the Board in writing within ten (10) days of the dates of departure and return or the dates of non-practice within New Jersey. Non-practice is defined as any period of time exceeding 30 days in which Respondent is not engaging in the practice of medicine. A Board-ordered suspension of practice shall not be considered as a period of non-practice. Periods of temporary or permanent residence or practice outside New Jersey or of non-practice within New Jersey, as defined in this condition, will not apply to the reduction of the probationary period;

9. In the event, at the sole discretion of the Board, Respondent violates any of the provisions of the Consent Order in any respect, then the Board, after giving Respondent notice and the opportunity to be heard, may terminate the probation and activate the disciplinary order that was stayed thereby actively suspending Respondent's license;

10. Following the **effective** date of this **Consent Order**, if Respondent ceases to **practice due to retirement**, health reasons or **is otherwise** unable to **satisfy** the **terms and conditions** of this **Consent Order**, then Respondent may **voluntarily** tender his license to the Board. **The Board reserves** the right to evaluate the Respondent's **request** and to **exercise** its **discretion** whether to grant the request, or to take any other action **deemed appropriate and reasonable** under the **circumstances**. Upon formal acceptance of the tendered license, Respondent will no longer be subject to the **terms and conditions** of probation;

11. Prior to termination **of the** probation period, Respondent shall be required to **appear** before the Board (or a committee thereof) to **demonstrate** fitness to **practice** without **restrictions**.

NEW JERSEY STATE BOARD OF
MEDICAL EXAMINERS

By:



DAVID M. WALLACE, M.D.
Board President

I **hereby** consent to the terms and entry of this consent Order.



GRAYDON GOSS, M.D.



JOSEPH GORRELL, ESQUIRE
Attorney for Graydon Goss, M.D.

BEFORE THE
DIVISION OF MEDICAL QUALITY
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation
Against:

GRAYDON GOSS, M.D.
Certificate No. G-38487

No: 05-1999-94168

Respondent

DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted by the Division of Medical Quality as its Decision in the above-entitled matter.

This Decision shall become effective at 5:00 p.m. on ~~March 30, 2001~~.

IT IS SO ORDERED February 28, 2001.

MEDICAL BOARD OF CALIFORNIA

I do hereby certify that
this document is true
and correct copy of the
original on file in this
office.

Cliff Hamilton 10/04/01
SIGNED DATE

Asst Custodian of Records
TITLE

By:

Ira Lubell

IRA LUBELL, M.D.
President
Division of Medical Quality

EXHIBIT A

1 **BILL LOCKYER**, Attorney General
of the State of California
2 **RICHARD D. MARINO**, State Bar No. 90471
Deputy Attorney General
3 California Department of Justice
300 South Spring Street, Suite 1702
4 Los Angeles, California 90013
Telephone: (213) 897-8644
5 Facsimile: (213) 897-1071

6 Attorneys for Complainant

7
8 **BEFORE THE**
DIVISION OF MEDICAL QUALITY
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

11 In the Matter of *the* Accusation Against:

12 **GRAYDON GOSS, M.D.**
13 3903 Buckingham Circle
Middletown, NJ 07748
14 Physician and Surgeon's Certificate No. G38487
15 Respondent.

Case No. 05-1999-94168

OAH No. L-2000-040186

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

16
17
18 In the interest of a prompt and speedy settlement of this matter, consistent with
19 the public interest and the responsibility of the Division of Medical Quality, Medical Board of
20 California of the Department of Consumer Affairs, ("Division"), the parties hereby agree to the
21 following Stipulated Settlement and Disciplinary Order which will be submitted to the Division
22 for its approval and adoption as the final disposition of the Accusation

23 PARTIES

24 1. Complainant Ron Joseph is the Executive Director of the Medical Board
25 of California. He brought this action solely in his official capacity and is represented in this
26 matter by Bill Lockyer, Attorney General of the State of California, by Richard D. Marino,
27 Deputy Attorney General.

28 2. Respondent Graydon Goss, M.D. ("Respondent") is represented in this

1 Accusation, if proven at a hearing, constitute cause for imposing discipline upon his Physician
2 and Surgeon's Certificate.

3 9. For the purposing of resolving Accusation So. 05-1999-94168 without the
4 xpense and uncertainty of further proceedings, Respondent agrees that, at a hearing,
5 Complainant could establish a factual basis for the charges alleged in paragraphs 1 through 5;
6 paragraph 7, except that portion of subparagraph C that incorporates, by reference, paragraph 6,
7 ubparagraphs O subdivisions (4), (8), (9), (10), (11), (12) and (13), Q and X, and subdivisions
8 2) and (3) of subparagraph D; paragraph 10; and, paragraph 11, except that portion of
9 ubparagraph B that incorporates, by reference, paragraph 6, subparagraphs O, subdivisions (4),
10 8), (9), (10), (11), (12) and (13), Q and X, in the Accusation, and that Respondent hereby gives
11 up his right to contest those charges.

12 10. Respondent agrees that his Physician and Surgeon's Certificate is subject
13 to discipline and he agrees to be bound by the Division's imposition of discipline as set forth in
14 the Order below.

15 RESERVATION

16 11. The admissions made by Respondent herein are only for the purposes of
17 his proceeding, or any other proceedings in which the Division of Medical Quality, Medical
18 Board of California or other professional licensing agency is involved, and shall not be
19 admissible in any other criminal or civil proceeding.

20 CONTINGENCY

21 12. This stipulation shall be subject to the approval of the Division.
22 Respondent understands and agrees that Medical Board of California's staff and counsel for
23 Complainant may communicate directly with the Division regarding this stipulation and
24 settlement, without notice to or participation by Respondent or his counsel. If the Division fails
25 to adopt this stipulation as its Order, except for this paragraph the Stipulated Settlement and
26 Disciplinary Order shall be of no force or effect, it shall be inadmissible in any legal action
27 between the parties, and the Division shall not be disqualified from further action by having
28 considered this matter.

1 13. The parties agree that facsimile copies of this Stipulated Settlement and
2 Disciplinary Order, including facsimile signatures thereto, shall have the same force and effect as
3 the original Stipulated Settlement and Disciplinary Order and signatures.

4 14. In consideration of the foregoing admissions and stipulations, the parties
5 agree that the Division shall, without further notice or formal proceeding, issue and enter the
6 following Disciplinary Order:

7 **DISCIPLINARY ORDER**

8 **IT IS HEREBY ORDERED** that Physician and Surgeon's Certificate Number
9 (338487 issued to Respondent Graydon Goss, M.D. is revoked. However, the revocation is
10 stayed and Respondent is placed on probation for ten (10) years on the following terms and
11 conditions.

12 Within 15 days after the effective date of this decision the respondent shall
13 provide the Division, or its designee, proof of service that respondent has served a true copy of
14 this decision on the Chief of Staff or the Chief Executive Officer at every hospital where
15 privileges or membership are extended to respondent or at any other facility where respondent
16 engages in the practice of medicine and on the Chief Executive Officer at every insurance carrier
17 where malpractice insurance coverage is extended to respondent.

18 1. **ETHICS COURSE** Within sixty (60) days of the effective date of this
19 decision, respondent shall enroll in a course in Ethics approved in advance by the Division or its
20 designee, and shall successfully complete the course within 12 months of the effective date of
21 this decision and order..

22 2. **MEDICAL RECORD KEEPING TRAINING** Within ninety (90) days of
23 the effective date of this decision, respondent shall submit to the Division or its designee for
24 prior approval, a training or educational program in medical record keeping. This training or
25 program shall be similar to that offered by the University of California - San Diego School of
26 Medicine. Respondent shall successfully complete the training or educational program in
27 medical record keeping within 12 months of the effective date of this decision and order.

28 3. **RESTITUTION** Respondent shall make restitution to the Division or its

1 esignee, on behalf of patient F.B., in the amount of \$15,000.00, payable in 12 equal installments
2 of \$1,250.00. The *first* installment shall *be* due 30 days from the effective date of this decision
3 and order. Each additional installment shall be due 30 days thereafter until paid in full. The
4 Division or its designee, within 30 days of the receiving the installment from respondent, shall
5 remit the amount of that installment to patient F.B. or her authorized representative.

6 4. ORAL CLINICAL OR WRITTEN EXAM Upon returning to California
7 to practice medicine, Respondent shall *take and pass* an oral clinical exam or written exam in a
8 subject to be designated and administered by the Division or its designee. If respondent fails the
9 first examination, respondent shall be allowed to take and pass a second examination, which may
10 consist of a written as well as an oral examination. The waiting period between the first and
11 second examinations shall be at least three (3) months. If respondent fails to pass the first and
12 second examinations, respondent may take a third and final examination after waiting a period of
13 one (1) year. Failure to pass the oral clinical examination within eighteen (18) months after the
14 effective date of this decision shall constitute a violation of probation. The respondent shall pay
15 the costs of all examinations. For purposes of this condition, if respondent is required to take and
16 pass a written exam, it shall be either the Special Purpose Examination (SPEX) or equivalent
17 examination as determined by the Division or its designee.

18 Respondent shall not practice medicine until respondent has passed the required
19 examination and has been so notified by the Division or its designee in writing. This prohibition
20 shall not bar respondent from practicing in a clinical training program approved by the Division
21 or its designee. Respondent's practice of medicine shall be restricted only to that which is
22 required by the approved training program.

23 5. PSYCHIATRIC EVALUATION Upon returning to California to practice
24 medicine and on a periodic basis thereafter as may be required by the Division or its designee,
25 respondent shall undergo a psychiatric evaluation (and psychological testing, if deemed
26 necessary) by a Division-appointed psychiatrist, who shall furnish an evaluation report to the
27 Division or its designee. The respondent shall pay the cost of the psychiatric evaluation.

28 If respondent is required by the Division or its designee to undergo psychiatric

1 treatment, respondent shall within thirty (30) days of the requirement notice submit to the
2 Division for its prior approval the name and qualifications of a psychiatrist of respondent's
3 choice. Respondent shall undergo and continue psychiatric treatment until further notice from
4 the Division or its designee. Respondent shall have the treating psychiatrist submit quarterly
5 status reports to the Division or its designee indicating whether the respondent is capable of
6 practicing medicine safely. If, prior to the termination of probation, respondent is found not to
7 be mentally fit to resume the practice of medicine without restrictions, the Division shall retain
8 continuing jurisdiction over the respondent's license and the period of probation shall be
9 extended until the Division determines that the respondent is mentally fit to resume the practice
10 of medicine without restrictions. The respondent shall pay the cost of the therapy and
11 evaluations.

12 Respondent shall not engage in the practice of medicine until notified by the
13 Division, or its designee, of its determination that respondent is mentally fit to practice safely
14 respondent to undergo psychiatric evaluations by a Division-appointed psychiatrist.

15 6. MONITORING Upon returning to California to practice medicine,
16 respondent shall submit to the Division or its designee for its prior approval a plan of practice in
17 which respondent's practice shall be monitored by another physician in respondent's field of
18 practice, who shall provide periodic reports to the Division or its designee.

19 If the monitor resigns or is no longer available, respondent shall, within fifteen
20 (15) days, move to have a new monitor appointed, through nomination by respondent and
21 approval by the Division or its designee.

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

25 8. QUARTERLY REPORTS Respondent shall submit quarterly
26 declarations under penalty of perjury on forms provided by the Division, stating whether there
27 has been compliance with all the conditions of probation.

28 9. PROBATION SURVEILLANCE PROGRAM COMPLIANCE

1 Respondent shall comply with the Division's probation surveillance program. Respondent shall,
2 at all times, keep the Division informed of his business and residence addresses which shall both
3 serve as addresses of record. Changes of such addresses shall be immediately communicated in
4 writing to the Division. Under no circumstances shall a post office box serve as an address of
5 record, except as allowed by Business and Professions Code section 2021(b).

6 Respondent shall, at all times, maintain a current and renewed physician's and
7 surgeon's license.

8 Respondent shall also immediately inform the Division, in writing, of any travel
9 to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more
10 than thirty (30) days.

11 10. INTERVIEW WITH THE DIVISION, ITS DESIGNEE OR ITS

12 DESIGNATED PHYSICIAN(S) Respondent shall appear in person for interviews with the
13 Division, its designee or its designated physician(s) upon request at various intervals and with
14 reasonable notice.

15 11. TOLLING FOR OUT-OF-STATE PRACTICE, RESIDENCE OR IN-

16 STATE NON-PRACTICE In the event respondent should leave California to reside or to
17 practice outside the State or for any reason should respondent stop practicing medicine in
18 California, respondent shall notify the Division or its designee in writing within ten (10) days of
19 the dates of departure and return or the dates of non-practice within California. Non-practice is
20 defined as any period of time exceeding thirty (30) days in which respondent is not engaging in
21 any activities defined in Sections 2051 and 2052 of the Business and Professions Code. All time
22 spent in an intensive training program approved by the Division or its designee shall be
23 considered as time spent in the practice of medicine. A Board-ordered suspension of practice
24 shall not be considered as a period of non-practice. Periods of temporary or permanent residence
25 or practice outside California or of non-practice within California, as defined in this condition,
26 will not apply to the reduction of the probationary order.

27 12. COMPLETION OF PROBATION Upon successful completion of
28 probation, respondent's certificate shall be fully restored.

1 13. **VIOLATION OF PROBATION** If respondent violates probation in any
2 respect, the Division, after giving respondent notice and the opportunity to be heard, may revoke
3 probation and carry out the disciplinary order that was stayed. If an accusation or petition to
4 revoke probation is filed against respondent during probation, the Division shall have continuing
5 jurisdiction until the matter is final, and the period of probation shall be extended until the matter
6 is final.

7 14. **COST RECOVERY** The respondent is hereby ordered to reimburse the
8 Division the amount of \$5,000.00 within ninety (90) days of the effective date of this decision
9 for its investigative and prosecution costs. Failure to reimburse the Division's cost of
10 investigation and prosecution shall constitute a violation of the probation order, unless the
11 Division agrees in writing to payment by an installment plan because of financial hardship. The
12 filing of bankruptcy by the respondent shall not relieve the respondent of his responsibility to
13 reimburse the Division for its investigative and prosecution costs.

14 15. **PROBATION COSTS** Respondent shall pay the costs associated with
15 probation monitoring each and every year of probation, as designated by the Division, which are
16 currently set at \$2,488.00 but may be adjusted on an annual basis. Such costs shall be payable to
17 the Division of Medica! Quality and delivered to the designated probation surveillance monitor
18 no later than January 31 of each calendar year. Failure to pay costs within 30 days of the due
19 date shall constitute a violation of probation.

20 16. **LICENSE SURRENDER** Following the effective date of this decision, if
21 respondent ceases practicing due to retirement, health reasons or is otherwise unable to satisfy
22 the terms and conditions of probation, respondent may voluntarily tender his certificate to the
23 Board. The Division reserves the right to evaluate the respondent's request and to exercise its
24 discretion whether to grant the request, or to take any other action deemed appropriate and
25 reasonable under the circumstances. Upon formal acceptance of the tendered license, respondent
26 will not longer be subject to the terms and conditions of probation.

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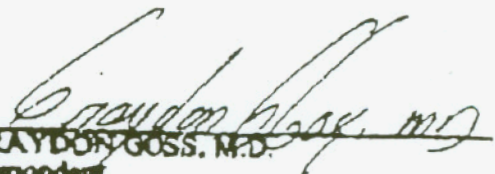
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ACCEPTANCE

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed the terms and conditions and other matters contained therein with my attorney Jerrie S. Weiss, Esq. I understand the effect this stipulation will have on my Physician and Surgeon's Certificate. I enter into this Stipulated Settlement voluntarily, knowingly and intelligently and agree to be bound by the Disciplinary Order and Decision of the Division of Medical Quality, Medical Board of California. I further agree that a facsimile copy of this Stipulated Settlement and Disciplinary Order, including facsimile copies of signatures, may be used with the same force and effect as the originals.

DATED: 1/20/01


GRAYDON GOSS, M.D.
Respondent

I have read and fully discussed with Respondent Graydon Goss, 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: 1/20/01


JERRIE S. WEISS, ESQ.
Attorney for Respondent

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ENDORSEMENT

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The foregoing **Stipulated Settlement and Disciplinary Order** is hereby respectfully submitted for consideration by the **Division of Medical Quality, Medical Board of California** of the **Department of Consumer Affairs**.

6

DATED: January 29, 2001.

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BILL LOCKYER, Attorney General
of the State of California

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RICHARD D. MARINO
Deputy Attorney General

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Attorneys for Complainant

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Exhibit A:
Accusation Case No. 05-1999-94168

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FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO January 2, 2000
BY Arden Shipman ANALYST

1 BILL LOCKYER, Attorney General
of the State of California
2 RICHARD D. MARINO (State Bar No. 90471)
Deputy Attorney General
3 California Department of Justice
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4 Los Angeles, California 90013-1233
Telephone: (213) 897-8644

5 Attorneys for Complainant

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

11 In the Matter of the Accusation) Case No. 05-1999-94168
Against:)
12)
13 GRAYDON GOSS, K.D.) ACCUSATION
3903 Buckingham Circle)
Middletown, New Jersey 07748)
14)
Physician and Surgeon's Certificate)
15 No. G38487,)
16 Respondent.)

18 Complainant alleges:

19 **PARTIES**

20 1. Complainant Ron Joseph (hereinafter "complainant")
21 is the Executive Director of the Medical Board of California,
22 Department of Consumer Affairs, State of California (hereinafter
23 "Board") and brings this accusation solely in his official
24 capacity.

25 2. On or about November 27, 1978, Physician and
26 Surgeon's Certificate No. G38487 was issued by the Board to
27 GRAYDON GOSS, M.D. {hereinafter "respondent"}. At all times

relevant to the charges brought herein, this license has been in full force and effect. Unless otherwise renewed, this license will expire on February 29, 2000.

JURISDICTION

3. This Accusation is brought before the Board's Division of Medical Quality (hereinafter the "Division"), under the authority of the following sections of the *Business and Professions Code* (hereinafter "Code") :

A. Section 2220 of the Code provides:

"Except as otherwise provided by law, the Division of Medical Quality *may* take action against all persons guilty of violating the provisions of this chapter. The division shall enforce and administer the provisions of this article as to physician and surgeon certificate holders, and the division shall have all the powers granted in this chapter for these purposes including, but not limited to:

"(a) Investigating complaints from the public, from other licensees, from health care facilities, or from a division of the board that a physician and surgeon may be guilty of unprofessional conduct.

". . . ."

B. Section 2227 of the Code provides:

"(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 may, in accordance with the provisions of this chapter:

"(1) Have his or her license revoked upon order of the division.

"(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the division.

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

"(4) Be publicly reprimanded by the division.

"(5) Have any other action taken in relation to discipline as the division 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, or other matters made confidential or privileged by existing law, is deemed public, and shall be made available to the public by the board.

C. Section 2234 of the Code provides that unprofessional conduct includes, but is not limited to, the following:

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

"(b) Gross negligence.

4,

1 "(c) Repeated negligent acts.

2 "(d) Incompetence.

3 "(e) The commission of *any act involving*
4 *dishonesty or corruption which is substantially related*
5 *to the qualifications, functions, or duties of a*
6 *physician and surgeon.*

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

9 ". . . ."

10 D. Section 2266 of the Code pre-rides:

11 "The failure of a physician and surgeon to
12 maintain adequate and accurate records relating to the
13 provision of services to their patients constitutes
14 unprofessional conduct."

15 E. Section 125.3 of the Code provides that in
16 any order issued in resolution of a disciplinary proceeding
17 before any board within the department, the board may
18 request the administrative law judge to direct a licentiate
19 found to have committed a violation or violations of the
20 licensing act to pay a sum not to exceed the reasonable
21 costs of the investigation and enforcement, including the
22 Attorney General costs, of the case.

23 REIMBURSEMENT FOR MEDI-CAL CLAIMS

24 4. Section 14124.12 of the Welfare and Institutions
25 Code provides:

26 "(a) Upon receipt of written notice from the
27 Medical Board of California, the Osteopathic Medical

Board of California, or the Board of Dental Examiners of California, that a licensee's license has been placed on probation as a result of a disciplinary action, the department may not reimburse any Medi-Cal claim for the type of surgical service or invasive procedure that gave rise to the probation, including any dental surgery or invasive procedure, that was performed by the licensee on or after the effective date of probation and until the termination of all probationary terms and conditions or until the probationary period has ended, whichever occurs first. This section shall apply *except* in any case in which the relevant Licensing board determines that compelling circumstances warrant the continued reimbursement during the probationary period of any Medi-Cal claim, including any claim for dental services, as so described. In such a case, the department shall continue to reimburse the licensee for all procedures, *except* for those invasive or surgical procedures for which the licensee was placed on probation.

"(b) The Medical Board of California, the Osteopathic Medical Board of California, and the Board of Dental Examiners of California, shall work in conjunction with the State Department of Health Services to provide all information that is necessary to implement this section. These boards and the department: shall annually report to the Legislature by

no later than March 1 that number of licensees of these boards, placed on probation during the immediately preceding calendar year, who are:

"(1) Not receiving Medi-Cal reimbursement for certain surgical services or invasive procedures, including dental surgeries or invasive procedures, as a result of subdivision (a).

"(2) Continuing to receive Medi-Cal reimbursement for certain surgical or invasive procedures, including dental surgeries or invasive procedures, as a result of a determination of compelling circumstances made in accordance with subdivision (a).

"(c) This section shall become inoperative on July 1, 2003, and, as of January 1, 2004, is repealed, unless a later enacted statute that is enacted before January 1, 2004, deletes or extends the dates on which it becomes inoperative and is repealed."

DANGEROUS DRUGS

5. The following medication is a dangerous drug within the meaning of Business and Professions Code section 4022:^{1/}

A. Lithium (lithium carbonate) - used in the treatment of manic episodes of manic-depressive illness"

1. See footnote 1, *ante*.

2. Lithium is effective in the treatment of bipolar affective disorder; however, it can cause kidney and thyroid damage. Accordingly, a patient who regularly receives lithium as part of a regimented treatment for bipolar affective disorder

3. Depakote (divalproex sodium) - indicated for the treatment of manic episodes associated with bipolar disorder

C. Zyprexa (Olanzapine) - indicated for the management of the manifestations of psychotic disorders

FIRST CAUSE FOR DISCIPLINE

(Gross Negligence--Patients F.B. and R.O.^{3/})

6. Respondent is subject to revocation of his physician and surgeon's certificate or other disciplinary action under section 2234, subdivision (b), of the Code in that respondent committed gross negligence during the care, treatment, and management of patient: F.B., as follows:

(Patient F.B.)

A. Beginning in 1986, respondent undertook the care, treatment and management of patient F.B., then 64 years old, for bipolar disorder. Respondent treated patient F.B. on an outpatient basis. The thrust of his treatment was to medicate patient F.B. with Lithium. Respondent continually treated patient F.B. in this fashion for approximately seven (7) years. In and around 1993, respondent sold his medical practice to another California

must be regularly tested for lithium toxicity.

3. All references to individuals other than respondent in this pleading shall be by initials only. The true names of the individuals are known to respondent and, in any event, will be disclosed to him upon his timely, written request for discovery pursuant to Government Code section 11507.6:

4. At the time, respondent specialized in adolescent, not geriatric, psychiatry.

1 licensed physician and surgeon. Respondent then moved to
2 Idaho and, later, to New Jersey where he now resides and
3 practices medicine.

4 B. In and around 1993, respondent asked patient
5 F.B. for financial assistance, Patient F.B. agreed to
6 assist respondent and, to this end, loaned respondent
7 \$15,000. According to respondent, "She wanted me to work it
8 off, I didn't have to pay it back." It was about that same
9 time that respondent left California^{5/} and, correspondingly,
10 his psychiatrist-patient relationship with patient F.B.
11 ended.

12 C. Between 1986 and 1993, respondent did not
13 regularly test patient F.B. for lithium toxicity^{6/} or, in
14 the alternative, respondent did not record the fact that he
15 did so in the medical records kept and maintained by
16 respondent for patient F.B.

17 D. Sometime in and around 1996, patient F.B.,
18 now 74 years old, contacted respondent and requested that he
19 resume patient F.B.'s care, treatment and management for
20 bipolar disorder. Respondent agreed.

21 E. Thereafter, for approximately the next two
22 years, respondent visited patient F.B. about once every
23

24 5. Respondent used this money as the down payment for a
house that he purchased in Idaho.

25 6. At a minimum, patient F.B.'s blood should have been
26 tested annually to ensure that the lithium level was not
27 excessive. Similarly, patient F.B.'s kidney, liver and thyroid
functions should have been tested annually to ensure that they
were not being affected by the lithium.

1 month. Respondent stayed for approximately one week during
2 each visit. He charged patient F.B. \$1,000 per day for
3 medical and psychiatric care. He also billed patient F.B.
4 for airfare and other expenses. On occasions, respondent
5 stayed at patient F.B.'s home and used patient F.B.'s
6 automobile during his visits.

7 F. During each visit, respondent also provided
8 what he terms "supportive home care" which, according to
9 respondent, included performing caretaker functions, and
10 chauffeuring patient F.B. to and from various personal
11 appointments. For these services, respondent billed patient
12 F.B. \$50 per hour.

13 G. During this period, patient F.B.
14 experienced periods of delusional mania. Patient F.B.'s
15 delusions included, among others, that she and respondent
16 were married and that, together, she and respondent owned an
17 art gallery.

18 H. During this period and while being paid as
19 patient F.B.'s treating psychiatrist, respondent dined with
20 patient F.B., accompanied patient F.B. to social functions,
21 played golf with patient F.B., and accepted money and other
22 gifts, including a computer, from patient F.B.

23 I. On or about and between 1996 and January
24 1999, respondent failed to maintain adequate and accurate
25 records relating to the provision of his services to patient
26 F.B.

27 J. On or about January 5, 1999, patient F.B. was

1 admitted to the Encino-Tarzana Regional Medical Center.
2 Patient F.B.'s condition had deteriorated.⁷ At the time of
3 her admission, patient F.B. was confused, unkempt,
4 disheveled, and in a manic-psychotic state. During her
5 admission, patient F.B.'s condition was stabilized through
6 the administration of Lithium, Depakote and Zyprexa.

7 K. At or about the time of her hospitalization,
8 patient F.B. advised that she had delegated her "Durable
9 Power of Attorney for Health Care" to respondent.

10 L. On or about January 22, 1999, patient F.B.
11 was discharged into the care of her daughter. At or about
12 the same time, respondent agreed with patient F.B.'s
13 daughter and others that a conservator should be appointed
14 to handle patient F.B.'s affairs. Angered that respondent
15 agreed to the appointment of a conservator, patient F.B.
16 terminated the psychiatrist-patient relationship with
17 respondent.

18 M. The following acts and omissions by
19 respondent during his care, treatment and management of
20 patient F.B., individually and collectively, constitute
21 extreme departures from the standard of care:

- 22 (1) Failing to maintain adequate and
23 accurate records relating to the provision of services
24 to patient F.B.;

25
26
27 7. Patient F.B. apparently had not been taking her
bipolar disorder medication regularly during the month preceding
her hospitalization.

1 (2) Failing to obtain baseline data from
2 patient F.B. at the commencement of the lithium
3 carbonate therapy and, thereafter, failing to test
4 patient F.9. at regular intervals for lithium toxicity
5 or, in the alternative, failing to record the fact that
6 he did so in *the* patient's medical record;

7 (3) Exploiting the psychiatrist-patient
8 relationship by soliciting and accepting a personal
9 loan from patient F.B.;

10 (4) Exploiting the psychiatrist-patient
11 relationship by agreeing to resume the care, treatment
12 and management of patient F.B. notwithstanding the fact
13 that respondent was practicing and residing in New
14 Jersey and charging patient F.B. \$1,000 per day as well
15 as other expenses for her care, treatment and
16 management;

17 (5) Exploiting the psychiatrist-patient
18 relationship by charging patient F.B. \$50 per hour and
19 other expenses for performing personal tasks and non-
20 medically related functions;

21 (6) Performing personal tasks and non-
22 medically related functions for patient F.B.;

23 (7) Socializing with patient F.B.;

24 (8) Accepting money and other gifts,
25 including a computer, from patient F.B.; and,

26 (9) Exploiting a vulnerable elderly female
27 patient by fostering and promoting patient F.B.'s

1 delusions, among others, that patient F.B. and
2 respondent were married and own an art gallery.

3 (Patient R.O.)

4 N. Beginning in April 1987, respondent undertook
5 the care, treatment and management of patient R.O. for
6 depression. On a regular basis for the next seven years and
7 at times as often as once a week, respondent treated patient
8 R.O. In addition, between April 1987 and January 1992,⁸
9 respondent provided conjoint marital counseling and other
10 therapy to R.O. and her husband.

11 O. Throughout the course of the psychiatrist-
12 patient relationship, respondent engaged in or attempted to
13 engage in multiple inappropriate dual relationships with
14 patient R.O. which included:

15 (1) Beginning in February 1989,
16 respondent asked patient R.O. and her husband,
17 J.O., to join him for dinner at the conclusion of
18 therapy; R.O. and her husband accepted.
19 respondent's dining invitations on several
20 occasions. Among other restaurants, respondent
21 and patient R.O. dined together at Mogo's
22 Mongolian Barbecue, Anajac Thai, Emilio's Presto
23 and the Moonlight Tango Cafe.

24 (2) While dining with patient R.O.,
25

26 8. According to respondent, patient R.O. was concerned
27 over the lack of sex in her marriage while her husband was
concerned over what he perceived to be his wife's infidelity.

1 respondent talked of his own marital problems.

2 (3) On one occasion, after dining with
3 R.O. and her husband following a therapy session,
4 respondent asked them to come to his home to view
5 his recording studio.

6 (4) On or about and during December
7 1990, respondent told patient R.O. during a
8 therapy session that he, respondent, had thought
9 about killing himself by jumping off a building.
10 Respondent told patient R.O. that he, respondent,
11 was upset because it was his first Christmas since
12 he and *his* wife separated. On or about the same
13 time, respondent told patient R.O. that he,
14 respondent, previously had been hospitalized in a
15 psychiatric facility for several weeks.

16 (5) On or about: and during February
17 1991, respondent told patient R.O. that he,
18 respondent, had problems drinking alcoholic
19 beverages and that he **had** stopped drinking such
20 beverages.

21 (6) On or about and during May 1991,
22 respondent agreed to help patient R.O. and her
23 husband purchase a computer. Respondent bought
24 the computer and patient R.O. and her husband
25 repaid him. In his apartment which was located
26 across the street from his office, respondent
27 taught patient R.O. how to use the computer he had

1 purchased on her behalf.

2 (7) On or about and during March or
3 April 1992, respondent had patient R.O. bring her
4 computer to respondent's apartment so that he
5 could upgrade the computer's memory.

6 (8) On or about and during March or
7 April 1992, patient R.O. went to respondent's
8 apartment to retrieve her computer. Respondent
9 was still working on it. Respondent made dinner
10 for the two of them. Afterward, respondent and
11 patient R.O. sat on a couch and watched videos.
12 Respondent hugged R.O. and kissed her on the
13 forehead. At around midnight, when patient R.O.
14 said that she had to leave, respondent asked her
15 to spend the night. Patient R.O. refused. She
16 then left but did not take her computer.

17 (9) On or about and during March or
18 April 1992, respondent telephoned patient R.O. and
19 told her that he had had a wonderful time watching
20 videos with her the preceding evening.

21 (10) On or about: and during March or
22 April 1992, or the date that patient R.O.
23 retrieved her computer from respondent at his
24 apartment, respondent apologized for having made
25 sexual advances toward her.

26 (11) On or about May 12, 1992,
27 respondent invited patient R.O. to join him and

1 several of his friends for dinner. Days later,
2 respondent telephoned patient R.O. and told her
3 how much his friends enjoyed her company.

4 (12) On or about June 24, 1992,
5 respondent took patient R.O. to a house that
6 respondent was planning to lease as an office.
7 There was a hot tub at the house. When patient
8 R.O. sat on the edge of the tub and dangled his
9 feet in the water, respondent excused himself from
10 the area. He returned a few minutes later wearing
11 only a towel around his waist. He removed the
12 towel and exposed himself to patient R.O.
13 Respondent entered the hot tub and asked patient
14 R.O. to join him. Patient R.O. refused.

15 (13) On or about July 31, 1992, patient
16 R.O. and her girlfriend helped respondent move
17 into his new house. Patient R.O. and her
18 girlfriend brought swimsuits to wear in the hot
19 tub. After patient R.O. and her girlfriend got
20 into the hot tub, respondent joined. Respondent
21 was not wearing a swimsuit. Respondent brushed
22 his penis against patient R.O.'s leg.

23 (14) On or about March 16, 1993, during
24 a therapy session conducted at respondent's home
25 office, respondent asked patient R.O. to review a
26 book that he, respondent, was writing. Respondent
27 sat next to R.O. while she scrolled through parts

of the book which respondent kept on his lap top computer.

P. On or about August 25, 1992, patient R.O. attempted suicide. Patient R.O. was treated at Downey Community Hospital and began seeing a psychiatrist other than respondent. Patient R.O. had tired of trying to avoid respondent's frequent sexual advances and overtures.

Q. On or about March 3, 1992, however, patient R.O. visited respondent at the hospital where respondent was recovering from surgery necessitated from an accident in which he was involved while on a skiing trip. Patient R.O. told respondent that she needed his help and that she needed him not to come on to her. R.O. did not like her new psychiatrist and wanted to return to respondent's care and treatment. Respondent said, "I hear you. It won't happen again."

R. On or about April 2, 1993, patient R.O. attempted to terminate her psychiatrist-patient relationship with respondent. Respondent did not refer patient R.O. to another therapist: or did not record the fact that he did so in the patient's records. Not long thereafter, respondent telephoned R.O. and told her that he had moved to Idaho. Respondent invited R.O. to visit him there.

S. When respondent moved to Idaho, he did not take either patient R.O. or her husband's psychiatric patient records with him. Instead, he left the records with the physician and surgeon who purchased his medical

1 practice. According to respondent, patient E.O. and her
2 husband's psychiatric records were lost or destroyed during
3 the January 1994 Northridge earthquake.

4 T. On or about and during August 1993, patient
5 R.O. made application to Blue Cross for health insurance.
6 On or about August 31, 1993, R.O. received a letter from
7 Blue Cross instructing her to have respondent provide the
8 necessary remaining information needed on her health
9 insurance application and return the completed application
10 to Blue Cross.

11 U. On or about September 14, 1993, patient R.O.
12 received another letter from Blue Cross. The letter advised
13 R.O. that the insurance carrier had not yet received the
14 necessary information from respondent. Patient R.O.
15 telephoned respondent. Respondent said that he would get
16 the information to Blue Cross.

17 V. Blue Cross subsequently denied patient R.O.'s
18 application as respondent did not provide the necessary
19 information.

20 W. On or about January 17, 1994, after the
21 Northridge earthquake, respondent telephoned R.O. and asked
22 how she was doing.

23 X. On or about February 17, 1994, respondent
24 again telephoned R.O. at her home. It was late. Respondent
25 was inebriated. Respondent told R.O. that there was nothing
26 wrong with her physically but that she needed to take
27 Lithium and other newer antidepressants. Respondent told

1 R.O. that she needed to get away and again invited her to
2 Idaho. *Angry* that respondent was drunk, R.O. called
3 respondent right back to vent. R.O. asked respondent how he
4 could conclude that R.O. needed to be on medication when he,
5 respondent, had not seen her. Respondent told R.O., in no
6 uncertain terms, that she, R.O., would *try* to kill herself
7 within a year.

8 Y. The following acts and omissions by
9 respondent during his care, treatment and management of
10 patient R.O., individually and collectively, constitute
11 extreme departures from the standard of care:

12 (1) Failing to maintain adequate and
13 accurate records relating to the provision of services
14 to patient R.O.;

15 (2) Promoting and engaging in a multiple of
16 dual relationships with patient R.O. as hereinabove
17 described;

18 (3) Exploiting the psychiatrist-patient
19 relationship with patient R.O. throughout its duration
20 by telling the patient that he had sexual feelings
21 toward her, asking the patient to spend the night with
22 respondent, and making other sexual advances to the
23 patient;

24 (4) Failing to provide patient R.O.'s
25 prospective insurance carrier with patient R.O.'s
26 mental health history;

27 (5) Exploiting the psychiatrist-patient

1 relationship for respondent's personal gratification by
2 contacting patient R.O. and offering to pay her airfare
3 for the purpose of having patient R.O. visit and stay
4 with respondent at his private residence;

5 (6) Telephoning patient R.O. at her home
6 while he, respondent, was inebriated; and,

7 (7) Intimidating a former patient by
8 exploiting the psychiatrist-patient relationship and
9 telling patient R.O. that she would commit suicide
10 within one year after she had refused the respondent's
11 offer to visit him.

12 SECOND CAUSE FOR DISCIPLINE

13 (Repeated Negligent Acts--Patients F.B. and R.O.)

14 7. Respondent is subject to revocation of his
15 physician and surgeon's certificate or other disciplinary action
16 under section 2234, subdivision (c), of the Code in that
17 respondent committed repeated negligent acts during the care,
18 treatment and management of patient F.B., as follows:

19 (Patient F.B.)

20 A. Complainant refers to and, by this reference
21 incorporates herein paragraph 6, subparagraphs A through L,
22 inclusive, above, as though fully set forth.

23 B. The following acts and omissions by
24 respondent during his care, treatment and management of
25 patient F.B. constitute departures from the standard of
26 care:

27 (1) Failing to maintain adequate and

1 accurate records relating to the provision of services
2 to patient F.B.;

3 (2) Failing to obtain baseline data from
4 patient F.E. at the commencement of the lithium
5 carbonate therapy and, thereafter, failing to test
6 patient F.B. at regular intervals for lithium toxicity
7 or, in the alternative, failing to record the fact that
8 he did so in the patient's medical record;

9 (3) Exploiting the psychiatrist-patient
10 relationship by soliciting and accepting a personal
11 loan from patient F.B.;

12 (4) Exploiting the psychiatrist-patient
13 relationship by agreeing to resume the care, treatment
14 and management of patient F.B. notwithstanding the fact
15 that respondent was practicing and residing in New
16 Jersey and charging patient F.B. \$1,000 per day as well
17 as other expenses for her care, treatment and
18 management;

19 (5) Exploiting the psychiatrist-patient
20 relationship by charging patient F.B. \$50 per hour and
21 other expenses for performing personal tasks and non-
22 medically related functions;

23 (6) Performing personal tasks and non-
24 medically related functions for patient F.B.;

25 (7) Socializing with patient F.B.;

26 (8) Accepting money and other gifts,
27 including a computer, from patient F.B.; and,

1 (9) Exploiting a 'vulnerable elderly female
2 patient by fostering and promoting patient F.B.'s
3 delusions, among others, that patient F.B. and
4 respondent were married and own an art gallery.

5 (Patient R.O.)

6 C. Complainant refers to and, by this reference
7 incorporates herein paragraph 6, subparagraphs N through X,
8 inclusive, above, as though fully set forth.

9 D. The following acts and omissions by
10 respondent during his care, treatment and management of
11 patient R.O., individually and collectively, constitute
12 departures from the standard of care:

13 (1) Failing to maintain adequate and
14 accurate records relating to the provision of services
15 to patient R.O.;

16 (2) Promoting and engaging in a multiple of
17 dual relationships with patient R.O. as hereinabove
18 described;

19 (3) Exploiting the psychiatrist-patient
20 relationship with patient R.O. throughout its duration
21 by telling the patient that he had sexual feelings
22 toward her, asking the patient to spend the night with
23 respondent, and making other sexual advances to the
24 patient;

25 (4) Failing to provide patient R.O.'s
26 prospective insurance carrier with patient R.O.'s
27 mental health history;;

1 (5) Exploiting the psychiatrist-patient
2 relationship for respondent's personal gratification by
3 contacting patient R.O. and offering to pay her airfare
4 for the purpose of having patient R.O. visit and stay
5 with respondent at his private residence;

6 (5) Telephoning patient R.O. at her home
7 while he, respondent; was inebriated; and;

8 (7) Intimidating a former patient by
9 exploiting the psychiatrist-patient relationship and
10 telling patient R.O. that she would commit suicide
11 within one year after she had refused the respondent's
12 offer to visit him.

13 THIRD CAUSE FOR DISCIPLINE

14 (Incompetence--Patient F.B.)

15 8. Respondent is subject to revocation of his
16 physician and surgeon's certificate or other disciplinary action
17 under section 2234, subdivision (d), of the Code in that
18 respondent demonstrated a lack of skill and knowledge necessary
19 to discharge the duties and responsibilities of his licensure
20 during his care, treatment and management of patients F.B. and
21 R.Q., as follows:

22 (Patient F.B.)

23 A. Complainant refers to and, by this reference
24 incorporates herein paragraph 6, subparagraphs A through M,
25 inclusive, above, as though fully set forth.

26 (Patient R.O.)

27 B. Complainant refers to and, by this reference

1 incorporates herein paragraph 6, subparagraph N through Y,
2 inclusive, above, as though fully set forth.

3 **FOURTH CAUSE FOR DISCIPLINE**

4 (Corrupt or Dishonest Acts--Patients F.B. and R.O.)

5 9. Respondent is subject to revocation[?] of his
6 physician and surgeon's certificate or other disciplinary action
7 under section 2234, subdivision (e), of the Code in that
'8 respondent has committed corrupt or dishonest acts during his
9 care, treatment, and management of patients F.B. and R.O., as
10 follows:

11 (Patient F.B.)

12 A. Complainant refers to and, by this reference
13 incorporates herein paragraph 6, subparagraphs A through M,
14 inclusive, above, as though fully set forth.

15 (Patient R.O.)

16 B. Complainant refers to and, by this reference
17 incorporates herein paragraph 6, subparagraphs N through Y,
18 inclusive, above, as though fully set forth.

FIFTH CAUSE FOR DISCIPLINE

(Failure To Maintain Adequate Medical Records--Patients F.B. and R.O.)

10. Respondent is subject to revocation of his physician and surgeon's certificate or other disciplinary action under section 2266 of *the* Code in that respondent failed to maintain adequate and accurate records relating to the provision of services to patients F.B. and R.O., as follows:

(Patient F.B.)

A. Complainant refers to and, by this reference incorporates herein paragraph 6, subparagraphs A through M, inclusive, above, as though fully set forth.

(Patient R.O.)

B. Complainant refers to and, by this reference incorporates herein paragraph 6, subparagraphs N through Y, inclusive, above, as though fully set forth.

SIXTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct--Patients F.B. and R.O.)

11. Respondent is subject to revocation of his physician and surgeon's certificate or other disciplinary action under section 2234, generally, of the Code in that respondent committed acts of gross and repeated negligence, failed to maintain adequate and accurate records relating to the provision of his services, and exploited the psychiatrist-patient relationship for personal gratification during his care, treatment and management of patients F.B. and R.O., as follows:

(Patient F.B.)

A. Complainant refers to and, by this reference incorporates herein paragraph 6, subparagraphs A through M, inclusive, above, as though fully set forth.

(Patient R.O.)

B. Complainant refers to and, by this reference incorporates herein paragraph 6, subparagraphs N through Y, inclusive, above, as though fully set forth.

1 PRAYER

2 **WHEREFORE**, complainant requests that a hearing be
3 held on the matters herein alleged, and that following the
4 hearing, the Division issue a decision:

5 1. Revoking or suspending Physician and Surgeon's
6 Certificate No. G38487, heretofore issued to respondent GRAYDON
7 MOSS, M.D.;

8 2. Revoking, suspending or denying approval of the
9 respondent's authority to supervise physician's assistants,
10 pursuant to Business and Professions Code section 3527;

11 3. Ordering respondent to pay the Division the
12 reasonable costs of the investigation and enforcement of this
13 case and, if placed on probation, the costs of probation
14 monitoring; and,

15 4. Taking such other and further action as the
16 Division deems necessary and proper.

17 DATED: January 20, 2000

18
19 
20 _____
21 RON JOSEPH
22 Executive Director
23 Medical Board of California
24 Department of Consumer Affairs
25 State of California

26
27 Complainant

BEFORE THE IDAHO STATE BOARD OF MEDICINE

In the Matter of:

GRAYDON G. GOSS, M.O.,
License No. M-6379,

Respondent.

Case No. 01-04C

ORDER FOR RECIPROCAL DISCIPLINE

The Idaho State Board of Medicine, hereinafter referred to as the Board, reviewed the Stipulated Settlement and Disciplinary Order dated January 29, 2001, executed by Bill Lockyer, Attorney General, and the Decision adopting the Stipulated Settlement and Disciplinary Order, dated February 28, 2001, issued by Ira Lubell, M.D., President, Division of Medical Quality, of the State of California, in Case No. 05-1999-94168. The Board also took official notice of the fact that Graydon G. Goss, M.D., holds an active Idaho license to practice medicine and surgery, License No. M-6379, issued December 4, 1993. Based upon the foregoing,

IT IS HEREBY ORDERED That, pursuant to Idaho Code §54-1806A(6)(g), (or the purpose of reciprocal discipline and upon recommendation of the Committee on Professional Discipline, the Board adopts and incorporates by reference the terms and conditions of the Stipulated Settlement and Disciplinary Order entered in Case No. 05-1999-94168, a copy of which is attached hereto and incorporated herein as though fully set forth, and Respondent is ordered to comply with said terms and conditions.

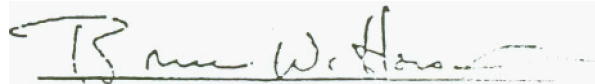
EXHIBIT B

IT IS FURTHER ORDERED That, in the event Respondent decides to practice medicine in Idaho. Respondent must provide prior written notification to the Board of the date and location of his practice.

IT IS FURTHER ORDERED That, pursuant to Idaho Code §54-1806A(6)(g), the Respondent, Graydon G. Goss, M.D., shall have thirty (30) days within which to file with the Board an appropriate motion and notice to appear and show cause why such Order should not apply in his case.

DATED This 4th Day of June, 2001.

IDAHO STATE BOARD OF MEDICINE


BRUCE W. HONSINGER, M.D.
Chairman

BEFORE THE IDAHO STATE BOARD OF MEDICINE

In the Matter of:

GRAYDON G. GOSS, M.D.,
License No. M-6379,

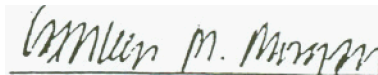
Respondent.

Case No. 01-040

CERTIFICATE OF MAILING

I HEREBY CERTIFY That on this 4th day of June, 2007, I served a true and correct copy of the ORDER FOR RECIPROCAL DISCIPLINE, Case No. 01-040 by depositing a copy thereof in the United States mail, certified mail #7099 3220 0006 2685 8074, return receipt requested, in an envelope addressed to:

Graydon G. Goss, M.D.
3903 Buckingham Circle
Middletown, New Jersey 07748-3462


Cathleen M. Morgan