In the Matter of the Accusation and Petition to Revoke Probation Against:

Robert I. Lifson, M.D.
164 North Carson Road
Beverly Hills, CA 90211

Physician's and Surgeon's Certificate
No. G 45355,

Respondent.

Complainant alleges:

PARTIES

1. Kimberly Kirchmeyer (Complainant) brings this Accusation and Petition to Revoke Probation solely in her official capacity as the Executive Director of the Medical Board of California.

2. On July 10, 1981, the Medical Board issued Physician's and Surgeon's Certificate Number G 45355 to Robert I. Lifson, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on January 31, 2019, unless renewed.

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3. In a disciplinary action entitled In the Matter of the Accusation Against Robert Lifson, M.D., Case No. 05-2011-214512, the Board issued a decision, effective May 8, 2014, under which Respondent’s certificate was Revoked, Stayed, subject to five years probation with terms and conditions. Respondent is currently on probation with the Board. A copy of the Decision is attached as Exhibit A and is incorporated herein by reference.

JURISDICTION

4. This Accusation and Petition to Revoke Probation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.

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

6. Section 2234 of the Code, states:

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

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

"(b) Gross negligence.

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

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

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

"..."

7. Section 2285 of the Code states, in relevant part:

"The use of any fictitious, false, or assumed name, or any name other than his or her own
by a licensee either alone, in conjunction with a partnership or group, or as the name of a
professional corporation, in any public communication, advertisement, sign, or announcement of
his or her practice without a fictitious name permit obtained pursuant to Section 2415 constitutes
unprofessional conduct."

8. Section 2286 of the Code states:

"It shall constitute unprofessional conduct for any licensee to violate, to attempt to violate,
directly or indirectly, to assist in or abet the violation of, or to conspire to violate any provision or
term of Article 18 (commencing with Section 2400), of the Moscone-Knox Professional
Corporation Act (Part 4 commencing with Section 13400) of Division 3 of Title 1 of the
Corporations Code), or of any rules and regulations duly adopted under those laws."

9. Section 2400 of the Code states:

"Corporations and other artificial legal entities shall have no professional rights, privileges,
or powers. However, the Division of Licensing may in its discretion, after such investigation and
review of such documentary evidence as it may require, and under regulations adopted by it, grant
approval of the employment of licensees on a salary basis by licensed charitable institutions,
foundations, or clinics, if no charge for professional services rendered patients is made by any
such institution, foundation, or clinic."

10. Section 2406 of the Code states:

"A medical or podiatry corporation is a corporation which is authorized to render
professional services, as defined in Section 13401 of the Corporations Code, so long as that
corporation and its shareholders, officers, directors and employees rendering professional services
who are physicians and surgeons, psychologists, registered nurses, optometrists, podiatrists,
chiropractors, acupuncturists, naturopathic doctors, physical therapists, occupational therapists,
or, in the case of a medical corporation only, physician assistants, marriage and family therapists, clinical counselors, or clinical social workers, are in compliance with the Moscone-Knox Professional Corporation Act [Corporations Code section 13400 et seq.], the provisions of this article and all other statutes and regulations now or hereafter enacted or adopted pertaining to the corporation and the conduct of its affairs.

"With respect to a medical corporation or podiatry corporation, the governmental agency referred to in the Moscone-Knox Professional Corporation Act is the board."

11. Section 2408 of the Code provides, in pertinent part, that except as provided in Section 13402.5 and 13403 of the Corporations Code, each shareholder, director and officer of a medical corporation shall be a licensed person as defined in Section 13401 of the Corporations Code. A non-licensed person may use business titles denoting an administrative function within the professional corporation.

12. Section 2415 of the Code requires any physician and surgeon who desires to practice under any name that would otherwise be a violation of Section 2285 to obtain and maintain in current status a fictitious-name permit issued by the Board. The Board shall only issue a fictitious-name permit if the applicant or shareholders of the professional corporation hold valid and current physicians and surgeon's licenses, and the professional practice is wholly owned and entirely controlled by the applicant.

13. 16 California Code of Regulations, Section 1343 provides that medical professional corporations must be organized and exist pursuant to the general corporation law and be a professional corporation within the meaning of the Moscone-Knox Professional Corporations Act (Corporations Code Section 13400 et seq.). Each shareholder, director or officer (except as provided in Section 13403 of the Corporations Code and Section 2408 of the code) must hold a valid physician's and surgeon's certificate or certificate to practice podiatric medicine, as the case may be, provided that, a licensed podiatrist, psychologist, optometrist, physician's assistant, 

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1 Moscone-Knox requires a medical professional corporation to be at least 51% owned by licensed physicians and surgeons. Up to 49% of shares may be owned by specified other types of healthcare licensees.
clinical social worker, marriage, family and child counselor, chiropractor or registered nurse may
be a shareholder, director or officer of a medical corporation so long as such licensed persons
own no more than 49% of the total shares issued by the medical corporation and the number of
licensed persons owning shares in the medical corporation does not exceed the number of
physicians owning shares in such a corporation, and a licensed physician may be a shareholder,
director or officer of a podiatry corporation so long as such physician owns no more than 49% of
the total shares issued by the podiatry corporation and the number of licensed physicians owning
shares in the podiatry corporation does not exceed the number of podiatrists owning shares in
such a corporation. A physician, psychologist, optometrist and registered nurse may also be a
shareholder, director or officer in a podiatry corporation subject to the same numerical
restrictions.

**FIRST CAUSE FOR DISCIPLINE**
(Unlawful Corporate Practice of Medicine)

14. In approximately 1997, Respondent began to serve as medical director for a medical
weight loss clinic operating under the name “Sylvan Medical Weight Center” (Sylvan) in Fresno,
California. Sylvan was associated with National Bariatrics, which was represented by its
corporate counsel as a “professional corporation.” National Bariatrics was owned and operated
by Christopher Sylvan, an unlicensed person, and the corporation was represented to have done
business as Sylvan Medical Weight Center. According to Respondent’s attorney, National
Bariatrics served as a “management company” for Sylvan. Respondent served as Sylvan’s
medical director through at least 2015. Patients were seen by nurse practitioners who operated
under practice protocols prepared by Respondent. Respondent has stated he was the principal
owner of Sylvan, and represented that his ownership in Sylvan was 51%. During his December
2015 interview with a Board investigator, Respondent described himself as the medical director
and owner of Sylvan, or as his attorney explained, the “sole proprietor doing business at Sylvan
Weight Loss.” However, Respondent displayed scant knowledge of the medical practice he
purported to own and direct. For example, while he received monthly checks under a verbal
agreement with Mr. Sylvan, at the time of his interview, Respondent had not visited the Sylvan
office in more than a year, he no longer reviewed patient charts. He had never seen a patient
there. Respondent did not know whether the controlled substances and prescription drugs used in
the weight loss practice were dispensed under his name or the name of the nurse practitioners
who worked at Sylvan, he was unaware that controlled substances and prescription drugs were
ordered under his DEA registration, and had no awareness of where the drugs were ordered from,
and no involvement in the ordering of drugs. He did not consider it important for him to be aware
of or keep track of the medications dispensed to patients of the practice he claimed to own and
direct, and he had little knowledge of the nurse practitioners who worked at Sylvan. He did not
know whether he was designated as CEO of Sylvan, and did not know if his provider number was
used for billings.

15. In fact, the California Secretary of State had no record of any corporation under the
name “National Bariatrics” or “Sylvan Medical Weight Loss Center.” At some point, counsel for
National Bariatrics admitted that no corporate or other legal documents for either entity were ever
finalized or filed. No Fictitious Name Permits for either National Bariatrics or Sylvan Medical
Weight Center were ever applied for or issued by the Board. Respondent’s association with
National Bariatrics and/or Sylvan ended in early 2016.

16. Respondent’s conduct in obtaining employment as medical director for a
nonprofessional entity owned and/or operated by unlicensed persons constitutes unprofessional
conduct and the illegal corporate practice of medicine, in violation of sections 2234 and/or 2286
in connection with sections 2406 and/or 2408 of the Code.

17. Respondent’s failure to seek and obtain a fictitious-name permits for Sylvan Medical
Weight Center constitutes unprofessional conduct and cause for discipline pursuant to sections
2234 and/or 2285, in connection with sections 2415 of the Code, and 16 Cal. Code of
Regulations section 1343.

FIRST CAUSE TO REVOKE

(Repeated Negligent Acts/Fictitious Name Permit)

18. In approximately March 2015, Respondent opened a “medical marijuana” evaluation
practice in Vista, California. The practice went by the name “Tree of Knowledge Evaluations”
although no fictitious-name permit application was ever filed with the Board, and no such permit was ever issued.

19. Respondent described Tree of Knowledge as a “telehealth” practice. Respondent evaluated patients for medical marijuana recommendations via Skype in his Los Angeles area office, never saw patients in person, and there was no other medical clinician at the practice, which was located in Vista, California. Under Respondent’s telehealth practice model, patients filled out a questionnaire, vital signs were taken by his non-medical staff, and patients were then briefly interviewed by Respondent via a Skype connection. He very rarely obtained prior medical records for patients and did not contact treating physicians. The typical patient interaction was 5-8 minutes, and by Respondent’s estimation, at least 98% of his evaluations resulted in the issuance of a recommendation for the use of marijuana for medical purposes. He made no follow up plans for his patients.

20. The standard of care for a physician evaluating a patient for the use of marijuana is to recommend marijuana for medical purposes only when it is clinically indicated and only as part of a rational treatment plan that has specific, identifiable goals. The standard of practice includes a history and appropriate prior examination of the patient, development of a treatment plan with objectives, provision of informed consent, periodic review of the efficacy of treatment, consultation as necessary, and proper medical record keeping that supports the decision to recommend the use of marijuana for medical purposes. The standard of care further requires a physician who is not a primary physician for the patient to consult with the primary treating physician and/or obtain the appropriate patient records to confirm the underlying diagnosis and prior treatment history.

21. The 5-8 minutes Respondent spent conducting a Skype “examination” of patients was inadequate to obtain a sufficient history to determine that marijuana was an appropriate treatment, conduct the necessary examination, provide informed consent, formulate a treatment plan with objectives, and plan for follow up. Moreover, Respondent’s telehealth based practice model did not allow for necessary physical examinations of patients who presented with medical complaints.
or issues requiring physical examination. Respondent’s failure to consult with treating physicians and/or obtain prior treatment records prevented him from properly evaluating patients.

22. Respondent is subject to disciplinary action under Business and Professions Code section 2234 (unprofessional conduct) and (c) (repeated negligent acts) in that his practice model failed to provide for appropriate or adequate evaluation of patients prior to recommending marijuana as a medical treatment, or to allow for formulation of an adequate treatment plan. Respondent failed to arrange for follow-up regarding the treatment’s efficacy, or for coordination with treating physicians. The limited time Respondent allotted for each patient’s evaluation made it impossible for him to adequately meet the clinical needs of each patient, or to adequately evaluate, examine and treat each patient.

23. Respondent’s failure to seek and obtain a fictitious name permits from the Board for his Tree of Knowledge medical practice constitutes unprofessional conduct and cause for discipline pursuant to sections 2234 and/or 2285 of the Code.

DISCIPLINARY CONSIDERATIONS

24. To determine the degree of discipline, if any, to be imposed, Respondent’s prior disciplinary history is as follows:

25. On October 24, 1989 an Accusation was filed in the Matter of the Accusation Against Robert Lifson, M.D., Case No. D-4097. On June 6, 1990 a Decision became effective under which Respondent’s certificate was Revoked, Stayed, subject to five years probation with terms and conditions. Respondent successfully completed probation on June 6, 1995.

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 Number G 45355, issued to Robert I. Lifson, M.D.;

2. Revoking the probation that was granted by the Medical Board of California in Case No. 05-2011-214512, and imposing the disciplinary order that was stayed thereby revoking Physician's and Surgeon's Certificate Number G 45355 issued to Robert I. Lifson, M.D.;
3. Revoking, suspending or denying approval of Robert I. Lifson, M.D.'s authority to supervise physician assistants, pursuant to section 3527 of the Code;

4. Ordering Robert I. Lifson, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and

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

DATED: April 11, 2017

KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant
BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation )
Against: )
) )
ROBERT LIFSON, M.D. ) Case No. 05-2011-214512
) )
Physician's and Surgeon's ) )
Certificate No. G-45355 ) )
) )
Respondent )

DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on May 8, 2014.

IT IS SO ORDERED: April 8, 2014.

MEDICAL BOARD OF CALIFORNIA

[Signature]
Barbara Yaroslavsky, Chair
Panel A
BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

ROBERT LIFSON, M.D.
8619 Reseda Blvd., Ste. 106
Northridge, CA 91324
Physician's and Surgeon's Certificate No. G 45355

Respondent.

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

PARTIES

1. Kimberly Kirchmeyer ("Complainant") is the Interim Executive Director of the Medical Board of California. She brought this action solely in her official capacity and is represented in this matter by Kamala D. Harris, Attorney General of the State of California, by Tan N. Tran, Deputy Attorney General.

2. Respondent ROBERT LIFSON, M.D. ("Respondent") is represented in this proceeding by attorney Michael S. Chernis, whose address is: 3110 Main Street, Suite 205, Santa Monica, CA 90405.

3. On or about July 10, 1981, the Medical Board of California issued Physician's and Surgeon's Certificate No. G 45355 to ROBERT LIFSON, M.D. (Respondent). The Physician's
and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 05-2011-214512 and will expire on January 31, 2015, unless renewed.

JURISDICTION

4. Accusation No. 05-2011-214512 was filed before the Medical Board of California (Board), Department of Consumer Affairs, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on October 22, 2013. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 05-2011-214512 is attached as exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 05-2011-214512. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

7. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to be represented by counsel at his own expense; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

9. Respondent does not contest that at an administrative hearing, complainant could establish a prima facie case with respect to the charges and allegations contained in Accusation No. 05-2011-214512, and that he has thereby subjected his Physician's and Surgeon's Certificate No. G45355 to disciplinary action.
10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

**CIRCUMSTANCES IN MITIGATION**

11. Respondent ROBERT LIFSON, M.D. has been cooperative and is admitting responsibility at an early stage in the proceedings.

**RESERVATION**

12. The admissions made by Respondent herein are only for the purposes of this proceeding, or any other proceedings in which the Medical Board of California or other professional licensing agency is involved, and shall not be admissible in any other criminal or civil proceeding.

**CONTINGENCY**

13. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or his counsel. By signing the stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.

14. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including Portable Document Format (PDF) and facsimile signatures thereto, shall have the same force and effect as the originals.

15. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:
DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician’s and Surgeon’s Certificate No. G 45355 issued to ROBERT LIFSON, M.D. (Respondent) is revoked. However, the revocation is stayed and Respondent is placed on probation for five (5) years on the following terms and conditions.

1. **CONTROLLED SUBSTANCES- MAINTAIN RECORDS AND ACCESS TO RECORDS AND INVENTORIES.** Respondent shall maintain a record of all controlled substances ordered, prescribed, dispensed, administered, or possessed by Respondent, and any recommendation or approval which enables a patient or patient’s primary caregiver to possess or cultivate marijuana for the personal medical purposes of the patient within the meaning of Health and Safety Code section 11362.5, during probation, showing all the following: 1) the name and address of patient; 2) the date; 3) the character and quantity of controlled substances involved; and 4) the indications and diagnosis for which the controlled substances were furnished.

   Respondent shall keep these records in a separate file or ledger, in chronological order. All records and any inventories of controlled substances shall be available for immediate inspection and copying on the premises by the Board or its designee at all times during business hours and shall be retained for the entire term of probation.

2. **PROFESSIONALISM PROGRAM (ETHICS COURSE).** Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a professionalism program, that meets the requirements of Title 16, California Code of Regulations (CCR) section 1358. Respondent shall participate in and successfully complete that program. Respondent shall provide any information and documents that the program may deem pertinent. Respondent shall successfully complete the classroom component of the program not later than six (6) months after Respondent’s initial enrollment, and the longitudinal component of the program not later than the time specified by the program, but no later than one (1) year after attending the classroom component. The professionalism program shall be at Respondent’s expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

   A professionalism program taken after the acts that gave rise to the charges in the Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
or its designee, be accepted towards the fulfillment of this condition if the program would have been approved by the Board or its designee had the program been taken after the effective date of this Decision.

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

3. **MEDICAL EVALUATION AND TREATMENT.** Within 30 calendar days of the effective date of this Decision, and on a periodic basis thereafter as may be required by the Board or its designee, Respondent shall undergo a medical evaluation by a Board-appointed physician who shall consider any information provided by the Board or designee and any other information the evaluating physician deems relevant and shall furnish a medical report to the Board or its designee. Respondent shall provide the evaluating physician any information and documentation that the evaluating physician may deem pertinent.

Following the evaluation, Respondent shall comply with all restrictions or conditions recommended by the evaluating physician within 15 calendar days after being notified by the Board or its designee. If Respondent is required by the Board or its designee to undergo medical treatment, Respondent shall within 30 calendar days of the requirement notice, submit to the Board or its designee for prior approval the name and qualifications of a California licensed treating physician of Respondent’s choice. Upon approval of the treating physician, Respondent shall within 15 calendar days undertake medical treatment and shall continue such treatment until further notice from the Board or its designee.

The treating physician shall consider any information provided by the Board or its designee or any other information the treating physician may deem pertinent prior to commencement of treatment. Respondent shall have the treating physician submit quarterly reports to the Board or its designee indicating whether or not the Respondent is capable of practicing medicine safely. Respondent shall provide the Board or its designee with any and all medical records pertaining to treatment, the Board or its designee deems necessary.

If, prior to the completion of probation, Respondent is found to be physically incapable of
resuming the practice of medicine without restrictions, the Board shall retain continuing
jurisdiction over Respondent’s license and the period of probation shall be extended until the
Board determines that Respondent is physically capable of resuming the practice of medicine
without restrictions. Respondent shall pay the cost of the medical evaluation(s) and treatment.

STANDARD CONDITIONS

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

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

5. SUPERVISION OF PHYSICIAN ASSISTANTS. During probation, Respondent is
prohibited from supervising physician assistants.

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

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

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

8. GENERAL PROBATION REQUIREMENTS.

Compliance with Probation Unit

Respondent shall comply with the Board’s probation unit and all terms and conditions of
this Decision.
Address Changes

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

Place of Practice

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

License Renewal

Respondent shall maintain a current and renewed California physician’s and surgeon’s license.

Travel or Residence Outside California

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

In the event Respondent should leave the State of California to reside or to practice Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of departure and return.

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

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

In the event Respondent's period of non-practice while on probation exceeds 18 calendar
months, Respondent shall successfully complete a clinical training program that meets the criteria
of Condition 18 of the current version of the Board’s “Manual of Model Disciplinary Orders and
Disciplinary Guidelines” prior to resuming the practice of medicine.

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

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

Periods of non-practice will relieve Respondent of the responsibility to comply with the
probationary terms and conditions with the exception of this condition and the following terms
and conditions of probation: Obey All Laws; and General Probation Requirements.

11. COMPLETION OF PROBATION. Respondent shall comply with all financial
obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
completion of probation. Upon successful completion of probation, Respondent’s certificate shall
be fully restored.

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

13. LICENSE SURRENDER. Following the effective date of this Decision, if
Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
the terms and conditions of probation, Respondent may request to surrender his or her license.

The Board reserves the right to evaluate Respondent's request and to exercise its discretion in determining whether or not to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its designee and Respondent shall no longer practice medicine. Respondent will no longer be subject to the terms and conditions of probation. If Respondent re-applies for a medical license, the application shall be treated as a petition for reinstatement of a revoked certificate.

PROBATION MONITORING COSTS. Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Board or its designee no later than January 31 of each calendar year.
ACCEPTANCE

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, Michael S. Chernis. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical Board of California.

DATED: 2-14-14

[Signature]

Robert Lifson, M.D.
Respondent

I have read and fully discussed with Respondent ROBERT LIFSON, 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: 2-14-14

[Signature]

Michael S. Chernis
Attorney for Respondent

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

Dated:

[Signature]

KAMALA D. HARRIS
Attorney General of California
JUDITH T. ALVARADO
Supervising Deputy Attorney General

[Signature]

TAN N. TRAN
Deputy Attorney General
Attorneys for Complainant
Exhibit A

Accusation No. 05-2011-214512
BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

ROBERT LIFSON, M.D.
164 N. Carson Road
Beverly Hills, CA 90211

Physician's and Surgeon's Certificate No. G 45355

Respondent.

Complainant alleges:

PARTIES

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

2. On or about July 10, 1981, the Medical Board of California issued Physician's and
Surgeon's Certificate Number G 45355 to ROBERT LIFSON, M.D. (Respondent). The
Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the
charges brought herein and will expire on January 31, 2015, unless renewed.
JURISDICTION

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

4. Section 2004 of the Code states:

"The board shall have the responsibility for the following:

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

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

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

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

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

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

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

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

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

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

6. Section 2234 of the Code states:

"The board shall take action against any licensee who is charged with unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:
"(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate any provision of this chapter.

"(b) Gross negligence.

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

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

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

"(d) Incompetence.

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

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

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

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

7. Section 2236 of the Code states:

"(a) The conviction of any offense substantially related to the qualifications, functions, or duties of a physician and surgeon constitutes unprofessional conduct within the meaning of this
chapter [Chapter 5, the Medical Practice Act]. The record of conviction shall be conclusive evidence only of the fact that the conviction occurred.

"(b) The district attorney, city attorney, or other prosecuting agency shall notify the Division of Medical Quality\(^1\) of the pendency of an action against a licensee charging a felony or misdemeanor immediately upon obtaining information that the defendant is a licensee. The notice shall identify the licensee and describe the crimes charged and the facts alleged. The prosecuting agency shall also notify the clerk of the court in which the action is pending that the defendant is a licensee, and the clerk shall record prominently in the file that the defendant holds a license as a physician and surgeon.

"(c) The clerk of the court in which a licensee is convicted of a crime shall, within 48 hours after the conviction, transmit a certified copy of the record of conviction to the board. The division may inquire into the circumstances surrounding the commission of a crime in order to fix the degree of discipline or to determine if the conviction is of an offense substantially related to the qualifications, functions, or duties of a physician and surgeon.

"(d) A plea or verdict of guilty or a conviction after a plea of nolo contendere is deemed to be a conviction within the meaning of this section and Section 2236.1. The record of conviction shall be conclusive evidence of the fact that the conviction occurred."

8. Section 802.1 of the Code states:

"(a) (1) A physician and surgeon, osteopathic physician and surgeon, and a doctor of podiatric medicine shall report either of the following to the entity that issued his or her license:

"(A) The bringing of an indictment or information charging a felony against the licensee.

"(B) The conviction of the licensee, including any verdict of guilty, or plea of guilty or no contest, of any felony or misdemeanor.

\(^1\) California Business and Professions Code section 2002, as amended and effective January 1, 2008, provides that, unless otherwise expressly provided, the term “board” as used in the State Medical Practice Act (Cal. Bus. & Prof. Code, section 2000, et.seq.) means the “Medical Board of California,” and references to the “Division of Medical Quality” and “Division of Licensing” in the Act or any other provision of law shall be deemed to refer to the Board.
“(2) The report required by this subdivision shall be made in writing within 30 days of the date of the bringing of the indictment or information or of the conviction.

“(b) Failure to make a report required by this section shall be a public offense punishable by a fine not to exceed five thousand dollars ($5,000).”

FIRST CAUSE FOR DISCIPLINE
(Conviction of Crime)

9. Respondent is subject to disciplinary action under section 2236 of the Code, in that he was convicted of a crime substantially related to the qualifications, functions or duties of a physician. The circumstances are as follows:

10. On or about February 20, 2013, in the case entitled People of the State of California v. Robert Isadore Lifson, Case No. BA393565, Respondent pled guilty to failing to file corporate income tax returns with intent to evade payment of taxes, in violation of California Revenue and Taxation Code section 19706.2

11. As a result of said plea, Respondent was sentenced to summary probation for a period of three years, with terms and conditions, and payment of fines and restitution.

SECOND CAUSE FOR DISCIPLINE
(Failure to Report Conviction)

12. Respondent is subject to disciplinary action under sections 2234, subdivision (a), and section 802.1, of the Code, in that he was convicted of a crime substantially related to the qualifications, functions or duties of a physician and failed to report said conviction to the Board. The circumstances are as follows:

13. Paragraphs 10 through 11, inclusive, above are incorporated by reference herein as if fully set forth.

THIRD CAUSE FOR DISCIPLINE
(Dishonest Acts)

2 The criminal case against Respondent began with a consumer complaint alleging that Respondent may be involved in running a “pill mill” with others at several clinics in the Los Angeles area.
14. By reason of the facts and circumstances set forth in the First Cause for Discipline above, Respondent is subject to disciplinary action for dishonest acts under section 2234, subdivision (e), of the Code.

DISCIPLINE CONSIDERATIONS

15. To determine the degree of discipline, if any, to be imposed on Respondent, Complainant alleges that on or about June 6, 1990, in a prior disciplinary action entitled In the Matter of the Accusation Against Robert Lifson, M.D. before the Medical Board of California, Respondent's license was placed on five years probation, with terms and conditions. That decision is now final and is incorporated by reference as if fully set forth.

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 Number G45355, issued to Robert Lifson, M.D.;
2. Revoking, suspending or denying approval of his authority to supervise physician's assistants, pursuant to section 3527 of the Code;
3. If placed on probation, ordering him to pay the Board the costs of probation monitoring; and
4. Taking such other and further action as deemed necessary and proper.

DATED: October 22, 2013

KIMBERLY KIRCHMEYER
Interim Executive Officer
Medical Board of California
Department of Consumer Affairs
State of California

Complainant

LA2013609638