

**BEFORE THE  
MEDICAL BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA**

**In the Matter of the Fourth Amended  
Accusation Against:**

**Patrick Stephen Clyne, M.D.**

**Case No. 800-2018-048871**

**Physician's and Surgeon's  
Certificate No. G 79053**

**Respondent.**

**DECISION**

**The attached Stipulated Surrender of License and 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 June 13, 2025.**

**IT IS SO ORDERED May 15, 2025.**

**MEDICAL BOARD OF CALIFORNIA**

*Sharlene Smith* For  
\_\_\_\_\_  
**Reji Varghese**  
**Executive Director**

1 ROB BONTA  
Attorney General of California  
2 GREG W. CHAMBERS  
Supervising Deputy Attorney General  
3 State Bar No. 237509  
4 455 Golden Gate Avenue, Suite 11000  
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6 *Attorneys for Complainant*

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

11 In the Matter of the Fourth Amended  
Accusation Against:

Case No. 800-2018-048871

12 **PATRICK STEPHEN CLYNE, M.D.**  
13 **Ped Med. Grp. of Watsonville**  
222 Green Valley Road  
Freedom, CA 95019-3136

**STIPULATED SURRENDER OF  
LICENSE AND ORDER**

14 **Physician' and Surgeon's Certificate No. G**  
15 **79053**

16 Respondent.

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

23 **PARTIES**

24 1. William Prasifka is the former Executive Director of the Medical Board of California  
25 (Board). He brought this action solely in his official capacity. Reji Varghese (Complainant) is  
26 now the Executive Director of the Board, and is represented in this matter by Rob Bonta,  
27 Attorney General of the State of California, by Greg W. Chambers, Supervising Deputy Attorney  
28 General.

2. PATRICK STEPHEN CLYNE, M.D. (Respondent) is represented in this proceeding by attorney Ian A. Scharg, Esq., whose address is: 400 University Avenue, Sacramento, CA 95825-6502.

3. On or about June 8, 1994, the Board issued Physician' and Surgeon's Certificate No. G 79053 to Respondent. The Physician' and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Fourth Amended Accusation No. 800-2018-048871 and will expire on October 31, 2025, unless renewed.

## JURISDICTION

4. Accusation No. 800-2018-048871 was filed before the Board. The Accusation and all other statutorily required documents were properly served on Respondent on February 19, 2021. Respondent timely filed his Notice of Defense contesting the Accusation. The Fourth Amended Accusation 800-2018-048871 was filed on January 4, 2023, and is currently pending against Respondent. A copy of Fourth Amended Accusation No. 800-2018-048871 is attached as Exhibit A and incorporated by reference.

## ADVISEMENT AND WAIVERS

5. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Fourth Amended Accusation No. 800-2018-048871. Respondent also has carefully read, fully discussed with counsel, and understands the effects of this Stipulated Surrender of License and Order.

6. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Fourth Amended Accusation; 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.

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

1 **CULPABILITY**

2 8. Respondent understands that the charges and allegations in Fourth Amended  
3 Accusation No. 800-2018-048871, if proven at a hearing, constitute cause for imposing discipline  
4 upon his Physician' and Surgeon's Certificate.

5 9. For the purpose of resolving the Fourth Amended Accusation without the expense  
6 and uncertainty of further proceedings, Respondent agrees that, at a hearing, Complainant could  
7 establish a factual basis for the charges in the Fourth Amended Accusation and that those charges  
8 constitute cause for discipline. Respondent hereby gives up his right to contest that cause for  
9 discipline exists based on those charges.

10 10. Respondent understands that by signing this stipulation he enables the Board to issue  
11 an order accepting the surrender of his Physician' and Surgeon's Certificate without further  
12 process.

13 **CONTINGENCY**

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

23 12. The parties understand and agree that Portable Document Format (PDF) and facsimile  
24 copies of this Stipulated Surrender of License and Order, including PDF and facsimile signatures  
25 thereto, shall have the same force and effect as the originals.

26 13. In consideration of the foregoing admissions and stipulations, the parties agree that  
27 the Board may, without further notice or formal proceeding, issue and enter the following Order:  
28

**ORDER**

IT IS HEREBY ORDERED that Physician' and Surgeon's Certificate No. G 79053, issued to Respondent PATRICK STEPHEN CLYNE, M.D., is surrendered and accepted by the Board.

1. The surrender of Respondent's Physician' and Surgeon's Certificate and the acceptance of the surrendered license by the Board shall constitute the imposition of discipline against Respondent. This stipulation constitutes a record of the discipline and shall become a part of Respondent's license history with the Board.

2. Respondent shall lose all rights and privileges as a physician and surgeon in California as of June 13, 2025.

3. Respondent shall cause to be delivered to the Board his pocket license and, if one was issued, his wall certificate on or before June 13, 2025.

4. If Respondent ever files an application for licensure or a petition for reinstatement in the State of California, the Board shall treat it as a petition for reinstatement. Respondent must comply with all the laws, regulations and procedures for reinstatement of a revoked or surrendered license in effect at the time the petition is filed, and all of the charges and allegations contained in Fourth Amended Accusation No. 800-2018-048871 shall be deemed to be true, correct and admitted by Respondent when the Board determines whether to grant or deny the petition.

5. Respondent shall pay the agency its costs of investigation and enforcement in the amount of \$25,714.25 prior to issuance of a new or reinstated license.

6. If Respondent should ever apply or reapply for a new license or certification, or petition for reinstatement of a license, by any other health care licensing agency in the State of California, all of the charges and allegations contained in Fourth Amended Accusation, No. 800-2018-048871, shall be deemed to be true, correct, and admitted by Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or restrict licensure.

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**ACCEPTANCE**

I have carefully read the above Stipulated Surrender of License and Order and have fully discussed it with my attorney Ian A. Scharg, Esq. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Surrender of License and Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical Board of California.

DATED: 05/09/2025

Patrick Clyne, MD  
PATRICK STEPHEN CLYNE, M.D.  
Respondent

I have read and fully discussed with Respondent Patrick Stephen Clyne, M.D. the terms and conditions and other matters contained in this Stipulated Surrender of License and Order. I approve its form and content.

DATED: 5/9/2025

Ian A. Scharg  
IAN A. SCHARG, ESQ.  
Attorney for Respondent

**ENDORSEMENT**

The foregoing Stipulated Surrender of License and Order is hereby respectfully submitted for consideration by the Medical Board of California of the Department of Consumer Affairs.

DATED: May 12, 2025

Respectfully submitted,  
ROB BONTA  
Attorney General of California

Greg W. Chambers  
GREG W. CHAMBERS  
Supervising Deputy Attorney General  
Attorneys for Complainant

**Exhibit A**

**Fourth Amended Accusation No. 800-2018-048871**

1 ROB BONTA  
Attorney General of California  
2 GREG W. CHAMBERS  
Deputy Attorney General  
3 State Bar No. 237509  
4 455 Golden Gate Avenue, Suite 11000  
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*Attorneys for Complainant*

6  
7 **BEFORE THE**  
8 **MEDICAL BOARD OF CALIFORNIA**  
9 **DEPARTMENT OF CONSUMER AFFAIRS**  
10 **STATE OF CALIFORNIA**

11 In the Matter of the Fourth Amended  
Accusation Against:

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12 **PATRICK STEPHEN CLYNE, M.D.**  
13 **Pediatric Med Grp. of Watsonville**  
14 **222 Green Valley Road**  
**Freedom, CA 95019-3136**

**FOURTH AMENDED ACCUSATION**

15 **Physician's and Surgeon's Certificate**  
16 **No. G 79053,**

Respondent.

17  
18  
19 **PARTIES**

20 1. William Prasifka (Complainant) brings this Fourth Amended Accusation solely in  
21 his official capacity as the Executive Director of the Medical Board of California, Department of  
22 Consumer Affairs (Board).

23 2. On or about June 8, 1994, the Medical Board issued Physician's and Surgeon's  
24 Certificate Number G 79053 to Patrick Stephen Clyne, M.D. (Respondent). The Physician's and  
25 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought  
26 herein and will expire on October 31, 2023, unless renewed.

27 ///

28 ///



**JURISDICTION**

3. This Fourth Amended Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code (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 2001.1 of the Code provides that the Board's highest priority shall be public protection.

6. 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.

7. Section 2234 of the Code, states:

The board shall take action against any licensee who is charged with unprofessional

1 conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not  
2 limited to, the following:

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

5 (b) Gross negligence.

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

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

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

16 (d) Incompetence.

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

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

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

23 8. Section 2228.1 of the Code states.

24 (a) On and after July 1, 2019, except as otherwise provided in subdivision (c), the board and  
25 the Podiatric Medical Board of California shall require a licensee to provide a separate disclosure  
26 that includes the licensee's probation status, the length of the probation, the probation end date,  
27 all practice restrictions placed on the licensee by the board, the board's telephone number, and an  
28 explanation of how the patient can find further information on the licensee's probation on the

1 licensee's profile page on the board's online license information internet web site, to a patient or  
2 the patient's guardian or health care surrogate before the patient's first visit following the  
3 probationary order while the licensee is on probation pursuant to a probationary order made on  
4 and after July 1, 2019, in any of the following circumstances:

5 (1) A final adjudication by the board following an administrative hearing or  
6 admitted findings or prima facie showing in a stipulated settlement establishing any  
7 of the following:

8 (A) The commission of any act of sexual abuse, misconduct, or relations with  
9 a patient or client as defined in Section 726 or 729.

10 (B) Drug or alcohol abuse directly resulting in harm to patients or the extent  
11 that such use impairs the ability of the licensee to practice safely.

12 (C) Criminal conviction directly involving harm to patient health.

13 (D) Inappropriate prescribing resulting in harm to patients and a probationary  
14 period of five years or more.

15 (2) An accusation or statement of issues alleged that the licensee committed  
16 any of the acts described in subparagraphs (A) to (D), inclusive, of paragraph (1), and  
17 a stipulated settlement based upon a nolo contendere or other similar compromise that  
18 does not include any prima facie showing or admission of guilt or fact but does  
19 include an express acknowledgment that the disclosure requirements of this section  
20 would serve to protect the public interest.

21 (b) A licensee required to provide a disclosure pursuant to subdivision (a) shall obtain from  
22 the patient, or the patient's guardian or health care surrogate, a separate, signed copy of that  
23 disclosure.

24 (c) A licensee shall not be required to provide a disclosure pursuant to subdivision (a) if any  
25 of the following applies:

26 (1) The patient is unconscious or otherwise unable to comprehend the  
27 disclosure and sign the copy of the disclosure pursuant to subdivision (b) and a  
28 guardian or health care surrogate is unavailable to comprehend the disclosure and

1 sign the copy.

2 (2) The visit occurs in an emergency room or an urgent care facility or the  
3 visit is unscheduled, including consultations in inpatient facilities.

4 (3) The licensee who will be treating the patient during the visit is not known  
5 to the patient until immediately prior to the start of the visit.

6 (4) The licensee does not have a direct treatment relationship with the patient.

7 (d) On and after July 1, 2019, the board shall provide the following information, with  
8 respect to licensees on probation and licensees practicing under probationary licenses, in plain  
9 view on the licensee's profile page on the board's online license information internet web site.

10 (1) For probation imposed pursuant to a stipulated settlement, the causes  
11 alleged in the operative accusation along with a designation identifying those causes  
12 by which the licensee has expressly admitted guilt and a statement that acceptance of  
13 the settlement is not an admission of guilt.

14 (2) For probation imposed by an adjudicated decision of the board, the causes  
15 for probation stated in the final probationary order.

16 (3) For a licensee granted a probationary license, the causes by which the  
17 probationary license was imposed.

18 (4) The length of the probation and end date.

19 (5) All practice restrictions placed on the license by the board.

20 (e) Section 2314 shall not apply to this section.

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

25 10. Section 2266 of the Code states: "The failure of a physician and surgeon to maintain  
26 adequate and accurate records relating to the provision of services to their patients constitutes  
27 unprofessional conduct."  
28

1 11. Section 726 of the Code states:

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

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

10 12. All of the incidents alleged herein occurred in California.

11 **COST RECOVERY**

12 13. Section 125.3 of the Code provides, in pertinent part, that the Board may request the  
13 administrative law judge to direct a licensee found to have committed a violation or violations of  
14 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and  
15 enforcement of the case, with failure of the licensee to comply subjecting the license to not being  
16 renewed or reinstated. If a case settles, recovery of investigation and enforcement costs may be  
17 included in a stipulated settlement.

18 **FIRST CAUSE FOR DISCIPLINE**

19 (Unprofessional Conduct: Gross Negligence/Repeated Negligent Acts – Patient One)<sup>1</sup>

20 14. Respondent has subjected his license to disciplinary action under sections 2234  
21 [unprofessional conduct], 2234(b) [gross negligence] and/or 2234(c) [repeated negligent acts] of  
22 the Code for unprofessional conduct, in that his care and treatment of Patient One included  
23 departures from the standard of care constituting gross negligence and repeated negligent acts.  
24 The circumstances are as follows:

25 15. On or around January 24, 2014, Patient One, then nine years old, was seen by  
26 Respondent for a routine physical exam. Patient One was fully clothed for the visit. Respondent

27 <sup>1</sup> The patients are identified herein as Patient One through Patient Six and Patient Eleven and Patient  
28 Twelve to preserve confidentiality. The patients' names will be provided to Respondent in discovery.

1 told Patient One's mother that Respondent had to take Patient One's pants and underwear off. He  
2 said he was going to check Patient One's stomach and that he would have to put his fingers in her  
3 vagina in order to examine her stomach. The mother took Patient One and left before the  
4 examination could be conducted.

5 16. Respondent is guilty of unprofessional conduct and subject to disciplinary action  
6 under sections 2234 [unprofessional conduct], and/or 2234(b) [gross negligence], and/or 2234(c)  
7 [repeated negligent acts] of the Code, including but not limited to, the following:

8 A. Failure to follow a standard well-child check and with standard Tanner staging<sup>2</sup> when  
9 there is no indication to insert a finger or speculum into the vagina.

10 **SECOND CAUSE FOR DISCIPLINE**  
11 **(Unprofessional Conduct: Gross Negligence/Repeated Negligent Acts - Patient Two)**

12 17. Respondent has subjected his license to disciplinary action under sections 2234  
13 [unprofessional conduct], 2234(b) [gross negligence], and/or 2234(c) [repeated negligent acts] of  
14 the Code for unprofessional conduct, in that his care and treatment of Patient Two included  
15 departures from the standard of care constituting gross negligence, and/or repeated negligent acts.  
16 The circumstances are as follows:

17 18. On or about May 7, 2018, Patient Two, then eight years old, was seen by Respondent  
18 for a routine physical exam. Initially, Patient Two was provided a gown to wear over his  
19 underwear. During the examination, Respondent had Patient Two completely disrobe and walk  
20 around the room, apparently to evaluate the patient's balance.

21 19. Without indication that Patient Two had constipation, blood in the stool, or  
22 neurological complaints, Respondent used his hands to spread Patient Two's buttocks apart and  
23 asked Patient Two if he cleaned his anus well.

24 20. Respondent is guilty of unprofessional conduct and subject to disciplinary action  
25 under sections 2234 [unprofessional conduct], and/or 2234(b) [gross negligence], and/or 2234(c)  
26 [repeated negligent acts] of the Code, including but not limited to, the following:

27 <sup>2</sup> Also known as Sexual Maturity Rating (SMR), it is an objective classification system that providers use to  
28 document and track the development and sequence of secondary sex characteristics of children during puberty.

1 A. Failure to follow a standard well-child check.

2 **THIRD CAUSE FOR DISCIPLINE**  
3 **(Unprofessional Conduct: Repeated Negligent Acts – Patient Three)**

4 21. Respondent has subjected his license to disciplinary action under sections 2234  
5 [unprofessional conduct], and 2234(c) [repeated negligent acts] of the Code for unprofessional  
6 conduct, in that his care and treatment of Patient Three included departures from the standard of  
7 care constituting repeated negligent acts. The circumstances are as follows:

8 22. Respondent saw and treated Patient Three from around October 14, 2014 to February  
9 8, 2019. On December 14, 2016, Respondent noted in the records that Patient Three  
10 demonstrated Attention Deficit Hyperactivity Disorder (ADHD) behavior in class but not at  
11 home. There is reference in the charts to Vanderbilt questionnaire results,<sup>3</sup> but the questionnaire  
12 and actual scores are not in the records. Additionally, there is no evidence of any discussion with  
13 the parent or patient regarding risks versus benefits of medication for ADHD. The patient was  
14 started on 27 mg. of Concerta,<sup>4</sup> not the traditional starting dose of 18 mg. Records for the follow-  
15 up visits list vital signs but are deficient in review of progress, side effects and necessary vital  
16 sign data for Patient Three in light of his course of treatment for ADHD.

17 23. Respondent is guilty of unprofessional conduct and subject to disciplinary action  
18 under sections 2234 [unprofessional conduct] and/or 2234(c) [repeated negligent acts] of the  
19 Code, including but not limited to, the following:

20 A. The care delivered on the visits since the stimulants were started for ADHD were not  
21 consistent with the standard of care for the diagnosis, treatment and follow-up of ADHD  
22 involving the use of psychostimulant medication.

23  
24 <sup>3</sup> The NICHQ Vanderbilt Assessment Scales are used by health care professionals to help diagnose ADHD  
in children between the ages of 6 and 12-years of age.

25 <sup>4</sup> Concerta, the trade name for methylphenidate hydrochloride, is a CNS stimulant indicated for the  
26 treatment of attention deficit hyperactivity disorder ("ADHD"). Methylphenidate should be given cautiously to  
27 patients with a history of drug dependence or alcoholism. Chronic abusive use can lead to marked tolerance and  
28 psychological dependence with varying degrees of abnormal behavior. The minimum dosage is one, 18 mg. tablet  
daily; the maximum dosage is one, 54 mg. tablet daily. Methylphenidate is a dangerous drug as defined in section  
4022 of the Code and a Schedule II controlled substance under Health and Safety Code section 11055(d)(6).

**FOURTH CAUSE FOR DISCIPLINE**  
**(Unprofessional Conduct: Repeated Negligent Acts – Patient Four)**

24. Respondent has subjected his license to disciplinary action under sections 2234 [unprofessional conduct], and 2234(c) [repeated negligent acts] of the Code for unprofessional conduct, in that his care and treatment of Patient Four included departures from the standard of care constituting repeated negligent acts. The circumstances are as follows:

25. Patient Four appears to have been treated by Respondent between at least August 4, 2017, and February 27, 2019. On August 17, 2018, Patient Four, then sixteen years old, was seen by Respondent for a physical examination. The mother of Patient Four alleges that Respondent did not use gloves during an examination of the patient's genitalia.

26. Patient Four had previously been diagnosed with ADHD by another treatment provider. Respondent's records first note an ADHD diagnosis on August 4, 2017, with a prescription for 27 mg. of Concerta for use on school days. However, there is no reference in the medical records regarding the original diagnosis, response to treatment or medication side effects, including risk versus benefits of the prescribed medicines. Records of subsequent visits are inconsistent with respect to review of potential side effects and full vital signs that are important when stimulants are prescribed.

27. Respondent is guilty of unprofessional conduct and subject to disciplinary action under sections 2234 [unprofessional conduct] and/or 2234(c) [repeated negligent acts] of the Code, including but not limited to, the following:

A. Failure to follow a standard well-child check.

B. The care delivered to the patient on the visits since the stimulants were started for ADHD were not consistent with the standard of care for the diagnosis, treatment and follow-up of ADHD involving the use of psychostimulant medication.

**FIFTH CAUSE FOR DISCIPLINE**  
**(Unprofessional Conduct: Repeated Negligent Acts – Patient Five)**

28. Respondent has subjected his license to disciplinary action under sections 2234 [unprofessional conduct], and 2234(c) [repeated negligent acts] of the Code for unprofessional



1 conduct, in that his care and treatment of Patient Five included departures from the standard of  
2 care constituting repeated negligent acts. The circumstances are as follows:

3 29. Respondent treated Patient Five between around August 15, 2017 and February 27,  
4 2019. On around August 17, 2018, and April 15, 2019, Respondent saw Patient Five, then  
5 thirteen and fourteen years old, for a physical examination. Patient Five's mother alleges that  
6 Respondent did not use gloves during an examination of the patient's genitalia.

7 30. Patient Five appears to have been diagnosed with ADHD by another treatment  
8 provider prior to July 29, 2017. However, there is no reference in the medical records regarding  
9 the original diagnosis. There is no record of assessment tools being used for the ADHD diagnosis  
10 and no significant reference to the symptoms. The records of subsequent follow-up visits are  
11 deficient in regard to review of the patient's progress, the medication's side effects, vital sign  
12 data, and medication risks versus benefit consultations or advisements.

13 31. Respondent is guilty of unprofessional conduct and subject to disciplinary action  
14 under sections 2234 [unprofessional conduct] and/or 2234(c) [repeated negligent acts] of the  
15 Code, including but not limited to, the following:

16 A. Failure to follow a standard well-child check.

17 B. The care delivered to the patient on the visits since the stimulants were started for  
18 ADHD were not consistent with the standard of care for the diagnosis, treatment and follow-up of  
19 ADHD involving the use of psychostimulant medication.

#### 20 **SIXTH CAUSE FOR DISCIPLINE**

#### 21 **(Unprofessional Conduct: Repeated Negligent Acts – Patient Six)**

22 32. Respondent has subjected his license to disciplinary action under sections 2234  
23 [unprofessional conduct], and 2234(c) [repeated negligent acts] of the Code for unprofessional  
24 conduct, in that his care and treatment of Patient Six included departures from the standard of  
25 care constituting repeated negligent acts. The circumstances are as follows:

26 33. Respondent treated Patient Six between around July 29, 2017 and April 29, 2019.  
27 Around August 29, 2017, Respondent refilled a prescription for methylphenidate ER 27 mg., #30,  
28 for Patient Six, then six years old. Respondent's records for this patient contain no prior

1 diagnosis of ADHD and there is no evidence in the chart of any assessment tools being used, and  
2 no significant reference is made to the symptoms. Additionally, there is no indication of response  
3 to treatment or medication side effects, or reference to risks versus benefit consultations or  
4 advisements.

5 34. Respondent is guilty of unprofessional conduct and subject to disciplinary action  
6 under sections 2234 [unprofessional conduct] and/or 2234(c) [repeated negligent acts] of the  
7 Code, including but not limited to, the following:

8 A. The care delivered to the patient on the visits since the stimulants were started for  
9 ADHD were not consistent with the standard of care for the diagnosis, treatment and follow-up of  
10 ADHD involving the use of psychostimulant medication.

11 **SEVENTH CAUSE FOR DISCIPLINE**

12 **(Unprofessional Conduct: Gross Negligence/Repeated Negligent Acts/ Failure to Maintain  
13 Adequate and Accurate Records – Patient Eleven<sup>5</sup>)**

14 35. Respondent has subjected his license to disciplinary action under sections 2234  
15 [unprofessional conduct], 2234(b) [gross negligence] and/or 2234(c) [repeated negligent acts] for  
16 unprofessional conduct, and 2266 [inadequate medical records] of the Code, in that his care and  
17 treatment of Patient Eleven included departures from the standard of care constituting gross  
18 negligence and repeated negligent acts, and failure to maintain adequate and accurate medical  
19 records. The circumstances are as follows:

20 36. Respondent treated Patient Eleven between October 26, 1999 and September 29,  
21 2008, on approximately 18 occasions, while Patient Eleven was between the ages of 4 months and  
22 8 years of age. Patient Eleven alleges that during one of these visits Respondent conducted an  
23 ungloved rectal examination of Patient Eleven without a chaperone present. The medical records  
24 for Patient Eleven do not indicate the need for such an examination, nor do they indicate any  
25 discussion with a parent or guardian regarding such an examination. There are no medical  
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27 <sup>5</sup> Patients 7, 8, 9 and 10 have been omitted from this Fourth Amended Accusation based on Statute of  
28 Limitations issues. Complainant preserves the right to introduce evidence regarding Respondent's care and treatment  
of Patients 7, 8, 9 and 10 for all legally permissible reasons, during the administrative hearing.

1 records indicating that any chaperone was present for Respondent's examinations and treatment  
2 of Patient Eleven.

3 37. Physical examination documentation is missing completely in several notes and only  
4 partial descriptions of examinations and treatments of Patient Eleven exist in other notes. Aside  
5 from Patient Eleven's temperature, vital signs are not documented in Respondent's notes during  
6 Patient Eleven's infant and toddler visits, including sick and well child visits. No rectal  
7 examination is ever documented, and no parent or guardian is ever documented as being present  
8 for any examination of Patient Eleven by Respondent.

9 38. Respondent is guilty of unprofessional conduct and subject to disciplinary action  
10 under sections 2234 [unprofessional conduct], and/or 2234(b) [gross negligence], and/or 2234(c)  
11 [repeated negligent acts], and 2266 [failure to maintain adequate records] of the Code, including  
12 but not limited to, the following:

13 A. Respondent performed a rectal examination of Patient Eleven without indication; failed  
14 to use gloves while performing the rectal examination on Patient Eleven; failed to have a  
15 chaperone present when performing the rectal examination of Patient Eleven, then a minor; and  
16 failed to maintain adequate and accurate medical records for Patient Eleven.

17 **EIGHTH CAUSE FOR DISCIPLINE**

18 **(Unprofessional Conduct: Gross Negligence/Repeated Negligent Acts/Sexual Misconduct –  
Patient Twelve)**

19 39. Respondent has subjected his license to disciplinary action for unprofessional conduct  
20 under section 2234 subdivision (b) [gross negligence], and/or 2234(c) [repeated negligent acts],  
21 and/or section 726 [sexual misconduct] in that his care and treatment of Patient Twelve included  
22 departures from the standard of care constituting gross negligence and repeated negligent acts,  
23 and sexual misconduct. The circumstances are as follows:

24 40. Patient Twelve, a then 8-year old female, presented to Respondent on or about April  
25 22, 2003, for an eight-year old well child examination. The records document a GU examination  
26 of a normal female with Tanner 1 puberty staging.<sup>6</sup>

27 <sup>6</sup> GU examination is the genitourinary, vaginal and rectal examination essential for the evaluation of the  
28 female patient.

41. Approximately one year later, Patient Twelve presented to Respondent on May 24, 2004, for a nine-year old well child examination. The records document a Tanner 2 GU examination “with estrogenized pubic hair and hymen.”

42. According to Patient Twelve, during the course of her eight-year old well-child examination on April 22, 2003, she was disrobed but for a gown. Respondent then asked Patient Twelve to lie on her back and squat like a frog. Subsequently, Respondent used his hands and fingers to "swab" her vagina, starting below the vaginal opening to as high as her clitoris.

43. The mother, who was present in the room, had been told to stay behind a curtain, so she did not have line of sight of her child during the examination.

44. Respondent is guilty of unprofessional conduct and subject to disciplinary action under sections 2234(b) [gross negligence], and/or 2234(c) [repeated negligent acts], and/or 726 [sexual misconduct] of the Code, including but not limited to, the following:

A. There was no medical reason for Respondent to use his hand to conduct the vaginal examination of Patient Twelve.

B. Respondent conducted the examination of Patient Twelve without a chaperone who could visually witness the examination.

## PRAAYER

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 79053,  
issued to Respondent Patrick Stephen Clyne, M.D.;

2. Revoking, suspending or denying approval of Respondent Patrick Stephen Clyne, M.D.'s authority to supervise physician assistants and advanced practice nurses;

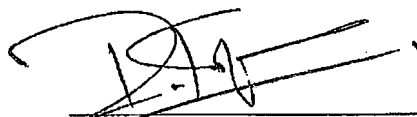
3. Ordering Respondent Patrick Stephen Clyne, M.D., to pay the Board the costs of the investigation and enforcement of this case, and if placed on probation, the costs of probation monitoring;

4. Ordering Respondent Patrick Stephen Clyne, M.D., if placed on probation, to provide patient notification in accordance with Business and Professions Code section 2228.1; and

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

DATED: JAN 04 2023



RETI VARGHESE  
Deputy Director  
Medical Board of California  
Department of Consumer Affairs  
State of California  
*Complainant*