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FILED

March 20, 2000
NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS

By: Brenda Talbot Lewis
Deputy Attorney General
Tel. (973) 648-4738

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

IN THE MATTER OF THE LICENSE OF : Administrative Action
: :
PERCY NARANJO, M.D. : :
: :
TO PRACTICE MEDICINE & SURGERY : PROVISIONAL ORDER
IN THE STATE OF NEW JERSEY : OF DISCIPLINE

This matter was opened to the New Jersey State Board of Medical Examiners upon receipt of information which the Board has reviewed and on which the following preliminary findings of fact and conclusions of law are made;

FINDINGS OF FACT

1. Respondent Percy Naranjo, M.D., is a physician in the State of New Jersey and has been a licensee at all times relevant hereto.

2. Respondent's license to practice medicine in California was revoked on October 26, 1998. The revocation was stayed to become a two-year period of probation with terms and conditions, and respondent was

CERTIFIED TRUE COPY

ordered to enroll in The Physician Assessment and Clinical Education (PACE) Program at the University of California, San Diego School of Medicine to undergo assessment, clinical training and examination. Following said assessment, training and successful examination, respondent was to submit a plan of practice in which his practice would be monitored by another physician in respondent's field of practice, who was to provide periodic reports to the Division of Medical Quality of the Medical Board. Respondent was also ordered to submit quarterly declarations stating whether there had been compliance with the conditions of probation, and to appear in person for interviews at various intervals. (Copy of Stipulated Settlement and Disciplinary Order attached hereto and made a part hereof)

3. Respondent admitted each and every allegation of an accusation which had been filed against him charging gross negligence, repeated negligent acts, incompetence, prescribing without medical indication, and excessive prescribing. The charges were based on his prescribing of Nardil as a first line antidepressant to a patient on many occasions over a period of three years (October 1990 to October 1993) without any history pertaining to the patient's refractoriness to other antidepressant medications. He also failed to prescribe Nardil in a therapeutic dosage both initially and throughout the period of treatment, and without advising the patient of the need for a special diet and avoidance of certain over-the-counter drugs while taking Nardol. He prescribed Pamelor for the same patient during the same three-year period

(November 1990 to October 1993) as a first line antidepressant without any history of refractoriness to other antidepressant medications, including Nardil; failed to advise the patient and/or note in the medical records a warning regarding the potential life-threatening interaction between Pamelor and Nardil; failed to discontinue Nardil for 10 to 14 days before beginning the patient on Pamelor; and failed to prescribe Pamelor in therapeutic dosages. One year after beginning the patient on Nardil and Pamelor, and for about two years thereafter (October 1991 to October 1993), respondent prescribed three antidepressants (Nardil, Pamelor and Desipramine) to the patient at the same time, failing to discontinue Nardil before beginning Desipramine, and failing to advise the patient and/or note in the medical records a warning regarding the potential life-threatening interaction of Nardil with Desipramine and Pamelor. For just under three years (January 1991 to October 1993) respondent prescribed Dexamethasone to the patient in the absence of indications for its use. For just over a year (June 1992 to October 1993) respondent prescribed Inderal, which is contraindicated for use with Nardil, for the same patient. From October 1990 to October 1993, respondent failed to order laboratory tests for liver, thyroid and bone marrow function; failed to note the patient's weight in the medical chart; failed to consider alternative therapies in light of the patient's failure to obtain relief for the same symptoms over the course of three years under respondent's care; and failed to assess whether the headaches and high blood pressure of which the patient complained throughout the

three years of treatment was the result of the Nardil therapy, inasmuch as headaches and high blood pressure are common side effects of treatment with Nardil.

CONCLUSIONS OF LAW

Respondent's admission to each and every allegation of the accusation filed against him charging gross negligence, repeated negligent acts, incompetence, prescribing without medical indication, and excessive prescribing, and the revocation of his license to practice in California, provide grounds for the suspension or revocation of respondent's license to practice medicine in New Jersey pursuant to N.J.S.A 45:1-21(c), (d), (e) and (g).

ACCORDINGLY, IT IS on this 20th day of March, 2000,

ORDERED that:

1. Respondent's license to practice medicine and surgery in the State of New Jersey be and hereby is revoked.

2. The within Order shall be subject to finalization by the Board at 5:00 p.m. on the 30th business day following entry hereof unless respondent requests a modification or dismissal of the above stated Findings of Fact or Conclusions of Law by:

a) Submitting a written request for modification or dismissal to Judith I. Gleason, Executive Director, State Board of Medical Examiners, P.O. Box 183, Trenton, New Jersey 08625-0183.

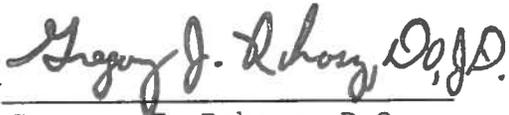
b) Setting forth in writing any and all reasons why said findings and conclusions should be modified or dismissed.

c) Submitting any and all documents or other written evidence supporting respondent's request for consideration and reasons therefor, as well as any evidence which respondent may wish the Board to consider in mitigation of the penalties set forth herein.

3. Any submissions will be reviewed by the Board, and the Board will thereafter determine whether further proceedings are necessary. If no material discrepancies are raised through a supplemental submission during the thirty-day period, or if the Board is not persuaded that submitted materials merit further consideration, a Final Order of Suspension will be entered.

4. In the event that respondent's submissions establish a need for further proceedings, including, but not limited to, an evidentiary hearing, respondent shall be notified with regard thereto. In the event that an evidentiary hearing is ordered, the preliminary findings of fact and conclusions of law contained herein shall serve as notice of the factual and legal allegations in such proceeding.

BOARD OF MEDICAL EXAMINERS

By 
Gregory J. Rokosz, D.O.
President

MEDICAL BOARD OF CALIFORNIA

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

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

Carol Hurvitz 2-19-99
SIGNED DATE
Asst. Controller of Records
TITLE

In the Matter of the Accusation)
Against:)
)
)
PERCY NARANJO, M.D.)
Certificate No. A-35198)
)
)
Respondent.)
_____)

No.06-94-33730

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 on December 31, 1998.

IT IS SO ORDERED December 1, 1998.

By: *Carol Hurvitz*
CAROLE HURVITZ, M.D.
Chair - Panel B
Division of Medical Quality

1 DANIEL E. LUNGREN, Attorney General
of the State of California
2 E. A. JONES III (State Bar No. 71375)
Deputy Attorney General
3 California Department of Justice
300 South Spring Street, Suite 5212
4 Los Angeles, California 90013-1233
Telephone: (213) 897-2543

5 Attorneys for Complainant

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

| | | |
|------------------------------------|---|------------------------------|
| 11 In the Matter of the Accusation |) | Case No. 06-94-33730 |
| 12 Against: |) | |
| 13 PERCY NARANJO, M.D. |) | OAH No. L-1997090036 |
| 14 P.O. Box 2455 |) | STIPULATED SETTLEMENT |
| 15 Huntington Park, CA 90255 |) | AND |
| 16 Physician's and Surgeon's |) | DISCIPLINARY ORDER |
| 17 Certificate No. A35198, |) | |
| 18 Respondent. |) | |

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

21 1. An Accusation in case number 06-94-33730 was filed
22 with **the** Division of Medical Quality, of the Medical Board of
23 California Department of Consumer Affairs (the "Division") on
24 August 5, 1997, and is currently pending against Percy Naranjo,
25 M.D. (the "respondent").

26 2. The Accusation, together with all statutorily
27 required documents, was duly served on the respondent on or about

1 August 5, 1997, and respondent filed his Notice of Defense
2 contesting the Accusation on or about August 13, 1997. A copy of
3 Accusation No. 06-94-33730 is attached as Exhibit "A" and hereby
4 incorporated by reference as if fully set forth.

5 3. Complainant, Ron Joseph, is the Executive Director
6 of the Medical Board of California and brought this action solely
7 in his official capacity. The Complainant is represented by the
8 Attorney General of California, Daniel E. Lungren, by and through
9 Deputy Attorney General E. A. Jones III.

10 4. At all times relevant herein, respondent has been
11 licensed by the Medical Board of California under Physician's and
12 Surgeon's Certificate No. A35198.

13 5. Respondent is represented in this matter by
14 himself.

15 6. Respondent has fully read and reviewed the charges
16 contained in Accusation Number 06-94-33730. Respondent has been
17 fully advised regarding his legal rights and the effects of this
18 Stipulated Settlement and Disciplinary Order.

19 7. Respondent understands the nature of the charges
20 alleged in the Accusation and that, if proven at hearing, the
21 charges and allegations would constitute cause for imposing
22 discipline upon his Physician's and Surgeon's Certificate.
23 Respondent is fully aware of his right to a hearing on the
24 charges contained in the Accusation, his right to confront and
25 cross-examine witnesses against him, his right to the use of
26 subpoenas to compel the attendance of witnesses and the
27 production of documents in both defense and mitigation of the

1 charges, his right to reconsideration, court review and any and
2 all other rights accorded by the California Administrative
3 Procedure Act and other applicable laws.

4 8. Respondent knowingly, voluntarily and irrevocably
5 waives and gives up each of these rights.

6 9. Respondent admits the truth of each and every
7 allegation of the Accusation No. 06-94-33730, and agrees that
8 respondent has thereby subjected his Physician's and Surgeon's
9 Certificate to disciplinary action. Respondent agrees to be
10 bound by the Division's Disciplinary Order as set forth below.

11 10. Based on the foregoing admissions and stipulated
12 matters, the parties agree that the Division shall, without
13 further notice or formal proceeding, issue and enter the
14 following order:

15
16 **DISCIPLINARY ORDER**

17 IT IS HEREBY ORDERED that Physician's and Surgeon's
18 Certificate number A35198 issued to Percy Naranjo, M.D. is
19 revoked. However, the revocation is stayed and respondent is
20 placed on probation for 2 years on the following terms and
21 conditions. Within 15 days after the effective date of this
22 decision the respondent shall provide the Division, or its
23 designee, proof of service that respondent has served a true copy
24 of this decision on the Chief of Staff or the Chief Executive
25 Officer at every hospital where privileges or membership are
26 extended to respondent or where respondent is employed to
27 practice medicine and on the Chief Executive Officer at every

1 insurance carrier where malpractice insurance coverage is
2 extended to respondent.

3 1. CLINICAL TRAINING PROGRAM Within ninety (90) days
4 of the effective date of this decision, respondent shall, at his
5 own expense, enroll in The Physician Assessment and Clinical
6 Education Program at the University of California, San Diego
7 School of medicine (hereinafter the "PACE Program") and shall
8 undergo assessment, clinical training and examination. First,
9 the respondent shall undergo the comprehensive assessment program
10 including the measurement of medical skill and knowledge, the
11 appraisal of physical health and psychological testing. After
12 assessment, the PACE Evaluation Committee will review all results
13 and make a recommendation to the Division or its designee, the
14 respondent and other authorized personnel as to what clinical
15 training is required, including scope and length, treatment of
16 any medical or psychological condition, and any other factors
17 affecting the respondent's practice of medicine. The respondent
18 shall undertake whatever clinical training and treatment of any
19 medical or psychological condition as may be recommended by the
20 PACE Program. Finally, at the completion of the PACE Program,
21 respondent shall submit to an examination on its contents and
22 substance. The examination shall be designed and administered by
23 the PACE faculty. Respondent shall not be deemed to have
24 successfully completed the program unless he passes the
25 examination. Respondent agrees that the determination of the
26 PACE Program faculty as to whether or not he has passed the
27 examination and or successfully completed the PACE Program shall

1 be binding.

2 Respondent shall complete the PACE Program no later than six
3 months after his initial enrollment unless the Division or its
4 designee agrees in writing to a later time for completion.

5 If respondent successfully completes the PACE Program,
6 including the examination referenced above, he agrees to cause
7 the PACE representatives to forward a Certification of Successful
8 Completion of the program to the Division or its designee.

9 If respondent fails to successfully complete the PACE
10 program within the time limits set forth above, respondent shall
11 be suspended from the practice of medicine until successful
12 completion has been achieved, as evidenced by the Certification
13 of Successful completion issued by the program.

14 Failure to participate in, and successfully complete all
15 phases of the PACE Program, as outlined above, shall constitute a
16 violation of probation.

17 2. MONITORING Within thirty (30) days of the
18 effective date of this decision, respondent shall submit to the
19 Division or its designee for its prior approval a plan of
20 practice in which respondent's practice shall be monitored by
21 another physician in respondent's field of practice, who shall
22 provide periodic reports to the Division or its designee.

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

27 3. OBEY ALL LAWS Respondent shall obey all federal,

1 state and local laws, all rules governing the practice of
2 medicine in California, and remain in full compliance with any
3 court ordered criminal probation, payments and other orders.

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

8 5. PROBATION SURVEILLANCE PROGRAM COMPLIANCE Respondent
9 shall comply with the Division's probation surveillance program.
10 Respondent shall, at all times, keep the Division informed of his
11 business and residence addresses which shall both serve as
12 addresses of record. Changes of such addresses shall be
13 immediately communicated in writing to the Division. Under no
14 circumstances shall a post office box serve as an address of
15 record.

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

20 6. INTERVIEW WITH THE DIVISION, ITS DESIGNEE OR ITS DESIGNATED
21 PHYSICIAN(S) Respondent shall appear in person for interviews with
22 the Division, its designee or its designated physician(s) upon
23 request at various intervals and with reasonable notice.

24 7. TOLLING FOR OUT-OF-STATE PRACTICE, RESIDENCE OR IN-STATE NON-
25 PRACTICE In the event respondent should leave California to
26 reside or to practice outside the State or for any reason should
27 respondent stop practicing medicine in California, respondent

1 shall notify the Division or its designee in writing within ten
2 (10) days of the dates of departure and return or the dates of
3 non-practice within California. Non-practice is defined as any
4 period of time exceeding thirty (30) days in which respondent is
5 not engaging in any activities defined in Sections 2051 and 2052
6 of the Business and Professions Code. All time spent in an
7 intensive training program approved by the Division or its
8 designee shall be considered as time spent in the practice of
9 medicine. Periods of temporary or permanent residence or
10 practice outside California or of non-practice within California,
11 as defined in this condition, will not apply to the reduction of
12 the probationary period.

13 8. COMPLETION OF PROBATION Upon successful completion
14 of probation, respondent's certificate shall be fully restored.

15 9. VIOLATION OF PROBATION If respondent violates
16 probation in any respect, the Division, after giving respondent
17 notice and the opportunity to be heard, may revoke probation and
18 carry out the disciplinary order that was stayed. If an
19 accusation or petition to revoke probation is filed against
20 respondent during probation, the Division shall have continuing
21 jurisdiction until the matter is final, and the period of
22 probation shall be extended until the matter is final.

23 10. COST RECOVERY The respondent is hereby ordered to
24 reimburse the Division the amount of \$1000.00 within ninety (90)
25 days of the effective date of this decision for its investigative
26 and prosecution costs. Failure to reimburse the Division's cost
27 of investigation and prosecution shall constitute a violation of

1 communicate directly with the Division regarding this stipulation
2 and settlement, without notice to or participation by respondent
3 or his counsel. If the Division fails to adopt this stipulation
4 as its Order, the stipulation shall be of no force or effect, it
5 shall be inadmissible in any legal action between the parties,
6 and the Division shall not be disqualified from further action in
7 this matter by virtue of its consideration of this stipulation.

8

9

ACCEPTANCE

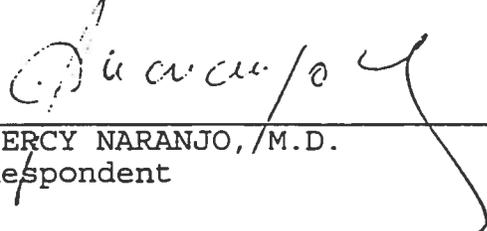
10 I have read the above Stipulated Settlement and
11 Disciplinary Order. I have fully reviewed the terms and
12 conditions and other matters contained therein. I understand the
13 effect this Stipulated Settlement and Disciplinary Order will
14 have on my Physician's and Surgeon's Certificate, and agree to be
15 bound thereby. I enter this stipulation freely, knowingly,
16 intelligently and voluntarily.

17

DATED: 10-26-98

18

19



PERCY NARANJO, M.D.
Respondent

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ENDORSEMENT

24 The foregoing Stipulated Settlement and Disciplinary
25 Order is hereby respectfully submitted for the consideration of
26 the Division of Medical Quality, Medical Board of California

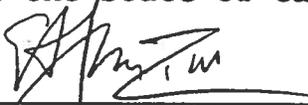
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1 Department of Consumer Affairs.

2 DATED: 10-26-98.

3
4 DANIEL E. LUNGREN, Attorney General
of the State of California

5 

6 E. A. JONES III
Deputy Attorney General

7 Attorneys for Complainant

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11 Exhibit: Accusation

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EXHIBIT A

Accusation No. 06-94-33730

1 DANIEL E. LUNGREN, Attorney General
of the State of California
2 E. A. JONES III, [State Bar No. 71375]
Deputy Attorney General
3 California Department of Justice
300 South Spring Street, Suite 5212
4 Los Angeles, California 90013-1233
Telephone: (213) 897-2543

5 Attorneys for Complainant
6

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO August 5 19 91
BY Janet E. Mosher ANALYST

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

11 In the Matter of the Accusation) Case No. 06-94-33730
12 Against:)
13)
PERCY NARANJO, M.D.) ACCUSATION
14 P.O. Box 2455)
Huntington Park, CA 90255)
15 Physician's and Surgeon's)
Certificate No. A35198,)
16 Respondent.)
17

18 The Complainant alleges:

19 PARTIES

- 20 1. Ron Joseph ("Complainant") brings this accusation
21 solely in his official capacity as the Executive Director of the
22 Medical Board of California, Department of Consumer Affairs, State
23 of California (hereinafter the "Board").
- 24 2. On or about April 15, 1980, Physician's and
25 Surgeon's Certificate No. A35198 was issued by the Board to Percy
26 Naranjo, M.D. (hereinafter "respondent"). At all times relevant to
27 the charges brought herein, this license has been in full force and

1 effect. Unless renewed, it will expire on January 31, 1998.

2 JURISDICTION

3 3. This accusation is brought before the Division of
4 Medical Quality of the Board, (hereinafter the "Division"), under
5 the authority of the following sections of the Business and
6 Professions Code (hereinafter "Code"):

7 A. Section 2227 of the Code provides that the Board may
8 revoke, suspend for a period not to exceed one year, or place
9 on probation and require to pay the costs of probation
10 monitoring, the license of any licensee who has been found
11 guilty under the Medical Practice Act.

12 B. Section 2234 of the Code provides that
13 unprofessional conduct includes, but is not limited to, the
14 following:

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

18 (b) Gross negligence.

19 (c) Repeated negligent acts.

20 (d) Incompetence.

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

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

27 D. Section 2242, subdivision (a) of the Code provides

1 that it is unprofessional conduct to prescribe, dispense or
2 furnish a dangerous drug without medical indication therefor.

3 C. Section 4211 of the Code provides, in pertinent
4 part, that a "dangerous drug" is any drug which is unsafe for
5 self-medication and includes any drug or device which by
6 federal or state law can be lawfully dispensed only on
7 prescription or furnished by a laboratory pursuant to Section
8 4240 of the Business and Professions Code.

9 D. Section 725 of the Code provides that repeated acts
10 of clearly excessive prescribing or administering of drugs or
11 treatment constitutes unprofessional conduct.

12 E. Section 125.3 of the Code provides, in part, that
13 the Board may request the administrative law judge to direct
14 any licentiate found to have committed a violation or
15 violations of the licensing act, to pay the Board a sum not to
16 exceed the reasonable costs of the investigation and
17 enforcement of the case.

18 FIRST CAUSE FOR DISCIPLINE

19 (Gross Negligence)

20 4. Respondent Percy Naranjo, M.D. is subject to
21 disciplinary action under section 2234, subdivision (b) of the Code
22 in that he committed acts of gross negligence in the care and
23 treatment of a patient. The circumstances are as follows:

24 A. On or about October 23, 1990, patient E.P.
25 presented to respondent for "stress related medical problems
26 (insomnia, anxiety, depression, gastritis, labile
27 hypertension)." Respondent examined patient E.P. on

1 approximately 42 occasions between October 23, 1990 a
2 October 15, 1993. During that period respondent prescribed
3 patient E.P. Nardil, Pamelor, Desipramine, Indera
4 Desamethesone, and other medications as more fully set for
5 below.

6 B. Respondent prescribed Nardil to patient E.P.
7 or about October 23, 1990; November 1 and 16, 1990; Decemb
8 7, 1990; January 3 and 22, 1991; February 15, 1991; March
9 and 21, 1991; April 15, 1991; October 7 and 23, 1991; Decemb
10 6, 1991; May 8, 1992; June 1 and 16, 1992; July 9, 23 and 2
11 1992; August 7, 17 and 20, 1992; September 10, 1992; Octob
12 5 and 29, 1992; November 30, 1992; December 21, 1992; Janua
13 7 and 29, 1993; February 22, 1993; March 11, 1993; April
14 1993; May 7, 1993; June 9, 1993; July 16 and 29, 1993; Augu
15 5, 1993; September 7, 1993; and October 15, 1993.

16 C. Respondent prescribed Pamelor to patient E.
17 on or about November 1 and 16, 1990; December 7, 1990; Janua
18 3 and 22, 1991; February 15, 1991; March 7 and 21, 1991; Apr
19 15, 1991; May 30, 1991; August 9, 1991; October 7 and 2
20 1991; December 6, 1991; August 20, 1992; September 10, 199
21 October 5 and 29, 1992; November 30, 1992; December 21, 199
22 January 7 and 29, 1993; February 22, 1993; March 11, 199
23 April 6, 1993; May 7, 1993; June 9, 1993; July 29, 199
24 August 5, 1993; September 7, 1993; and October 15, 1993.

25 D. Respondent prescribed Desipramine to patie
26 E.P. on or about October 7 and 23, 1991; December 6, 199
27 June 1 and 16, 1992; July 9, 23 and 29, 1992; and August 7 a

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17, 1992.

E. Respondent prescribed Dexamethasone to patient E.P. on or about January 22, 1991; June 16, 1992; July 9, and 29, 1992; August 7 and 20, 1992; September 10, 1992; October 5 and 29, 1992; November 30, 1992; December 21, 1992; January 7 and 29, 1993; February 22, 1993; March 11, 1993; April 6, 1993; May 7, 1993; June 9, 1993; July 16 and 29, 1993; and August 5, 1993.

F. Respondent prescribed Inderal to patient E. on or about June 1 and 16, 1992; July 9, 23 and 29, 1992; August 7, 17 and 20, 1992; September 10, 1992; October 5 and 29, 1992; November 30, 1992; December 21, 1992; January 7 and 29, 1993; February 22, 1993; March 11, 1993; April 6, 1993; May 7, 1993; and June 9, 1993.

G. On or about October 23, 1990, and at a material times thereafter as more specifically alleged in subparagraph 4.B. above, respondent was grossly negligent when he prescribed Nardil to patient E.P. as a first line antidepressant without any history in patient E.P. of refractoriness to other antidepressant medications.

H. On or about October 23, 1990, and at a material times thereafter as more specifically alleged in subparagraph 4.B. above, respondent was grossly negligent when he failed to prescribe Nardil in a therapeutic dosage both initially and throughout the period of treatment.

I. On or about October 23, 1990, and at a material times thereafter as more specifically alleged

1 subparagraph 4.B. above, respondent was grossly negligent when
2 he failed to advise, and/or note in the medical records for,
3 patient E.P. of the need for a special diet and the avoidance
4 of certain over-the-counter drugs while taking the
5 prescription medication Nardil.

6 J. On or about November 1, 1990, and at all
7 material times thereafter as more specifically alleged in
8 subparagraph 4.C. above, respondent was grossly negligent when
9 he prescribed Pamelor to patient E.P. as a first line
10 antidepressant without any history in patient E.P. of
11 refractoriness to other antidepressant medications, including
12 Nardil.

13 K. On or about November 1, 1990, and at all
14 material times thereafter as more specifically alleged in
15 subparagraphs 4.B. and 4.C. above, respondent was grossly
16 negligent when he failed to advise, and/or note in the medical
17 records for, patient E.P. a warning regarding the potential
18 life-threatening interaction between Pamelor and Nardil.

19 L. On or about November 1, 1990, and at all
20 material times thereafter as more specifically alleged in
21 subparagraphs 4.B. and 4.C. above, respondent was grossly
22 negligent when he failed to discontinue Nardil for 10 to 14
23 days before beginning patient E.P. on Pamelor.

24 M. On or about November 1, 1990, and at all
25 material times thereafter as more specifically alleged in
26 subparagraph 4.C. above, respondent was grossly negligent when
27 he failed to prescribed Pamelor for patient E.P. in

1 therapeutic dosages.

2 N. On or about October 23, 1991, and at all
3 material times thereafter as more specifically alleged in
4 subparagraphs 4.B., 4.C., and 4.D. above, respondent was
5 grossly negligent when he prescribed three antidepressants
6 (Nardil, Pamelor and Desipramine) to patient E.P. at the same
7 time.

8 O. On or about October 23, 1991, and at all
9 material times thereafter as more specifically alleged in
10 subparagraphs 4.B. and 4.D. above, respondent was grossly
11 negligent when he failed to discontinue Nardil for 10 to 14
12 days before beginning patient E.P. on Desipramine.

13 P. On or about October 23, 1991, and at all
14 material times thereafter as more specifically alleged in
15 subparagraphs 4.B., 4.C., and 4.D. above, respondent was
16 grossly negligent when he failed to advise, and/or note in the
17 medical records for, patient E.P. a warning regarding the
18 potential life-threatening interaction of Nardil with
19 Desipramine and Pamelor.

20 Q. On or about January 22, 1991, and at all
21 material times thereafter as more specifically alleged in
22 subparagraph 4.E. above, respondent was grossly negligent when
23 he prescribed to patient E.P. Dexamethasone in the absence of
24 indications for its use.

25 R. On or about June 1, 1992, and at all material
26 times thereafter as more specifically alleged in subparagraphs
27 4.B. and 4.F. above, respondent was grossly negligent when he

1 prescribed to patient E.P. Inderal, which is contraindicated
2 for use with Nardil.

3 S. From on or about October 23, 1990 through
4 October 15, 1993, respondent was grossly negligent in the care
5 and treatment of patient E.P. for the following reasons:

6 (1) Respondent failed to order laboratory
7 tests for liver, thyroid and bone marrow function for the
8 treatment of depression and hypertension in patient E.P.

9 (2) Respondent failed to note patient E.P.'s
10 weight in the medical chart in connection with the
11 treatment of hypertension in patient E.P.

12 (3) Respondent failed to consider alternative
13 therapies in light of patient E.P.'s failure to obtain
14 relief for the same symptoms over the course of three
15 years under respondent's care as more specifically
16 described in subparagraphs 4.A. through 4.F.

17 (4) Respondent failed to assess whether the
18 headaches and high blood pressure of which patient E.P.
19 complained throughout the three years of treatment by
20 respondent was a result of the Nardil therapy, inasmuch
21 as headaches and high blood pressure are common side
22 effects of treatment with Nardil.

23 T. Nardil, Pamelor, Desipramine, Inderal and
24 Dexamethasone are dangerous drugs within the meaning of
25 section 4211 of the Code.

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1 FIFTH CAUSE FOR DISCIPLINE

2 (Excessive Prescribing)

3 8. Respondent Percy Naranjo, M.D. is subject to
4 disciplinary action under section 725 of the Code in that he
5 clearly excessively prescribed or administered drugs or treatment
6 for a patient. The circumstances are as follows:

7 A. The facts and allegations in subparagraphs 4.Q.
8 and 4.R. above are incorporated here as if fully set forth.

9 B. Repeatedly prescribing a drug which is either
10 not indicated or contraindicated constitutes excessive
11 prescribing within the meaning of section 725 of the Code.

12 PRAYER

13 WHEREFORE, the complainant requests that a hearing be
14 held on the matters herein alleged, and that following the hearing,
15 the Division issue a decision:

16 1. Revoking or suspending Physician's and Surgeon's
17 Certificate Number A35198, heretofore issued to respondent Percy
18 Naranjo, M.D.;

19 2. Revoking, suspending or denying approval of
20 respondent's authority to supervise physician's assistants,
21 pursuant to section 3527 of the Code;

22 3. Ordering respondent to pay the Board the reasonable
23 costs of the investigation and enforcement of this case and, if
24 placed on probation, the costs of probation monitoring;

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1 4. Taking such other and further action as the Division
2 deems necessary and proper.

3 DATED: August 5, 1997 .

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6 
7 _____
8 Ron Joseph
9 Executive Director
10 Medical Board of California
11 Department of Consumer Affairs
12 State of California

13 Complainant

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1 DANIEL E. LUNGREN, Attorney General
of the State of California
2 E. A. JONES III, [State Bar No. 71375]
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3 California Department of Justice
300 South Spring Street, Suite 5212
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FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO August 5 19 91
BY Samuel S. Master ANALYST

5 Attorneys for Complainant

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

10
11 In the Matter of the Accusation)
Against:)
12)
13 PERCY NARANJO, M.D.)
P.O. Box 2455)
Huntington Park, CA 90255)
14)
15 Physician's and Surgeon's)
Certificate No. A35198,)
16)
Respondent.)

Case No. 06-94-33730

ACCUSATION

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

17
18 The Complainant alleges:

Carol Taylor 2-19-91
SIGNED DATE

19 PARTIES

Carl S. Catalano
TITLE

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

24 2. On or about April 15, 1980, Physician's and
25 Surgeon's Certificate No. A35198 was issued by the Board to Percy
26 Naranjo, M.D. (hereinafter "respondent"). At all times relevant to
27 the charges brought herein, this license has been in full force and

1 effect.- Unless renewed, it will expire on January 31, 1998.

2 JURISDICTION

3 3. This accusation is brought before the Division of
4 Medical Quality of the Board, (hereinafter the "Division"), under
5 the authority of the following sections of the Business and
6 Professions Code (hereinafter "Code"):

7 A. Section 2227 of the Code provides that the Board may
8 revoke, suspend for a period not to exceed one year, or place
9 on probation and require to pay the costs of probation
10 monitoring, the license of any licensee who has been found
11 guilty under the Medical Practice Act.

12 B. Section 2234 of the Code provides that
13 unprofessional conduct includes, but is not limited to, the
14 following:

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

18 (b) Gross negligence.

19 (c) Repeated negligent acts.

20 (d) Incompetence.

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

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

27 D. Section 2242, subdivision (a) of the Code provides

1 that it is unprofessional conduct to prescribe, dispenseⁱ or
2 furnish a dangerous drug without medical indication therefor.

3 C. Section 4211 of the Code provides, in pertinent
4 part, that a "dangerous drug" is any drug which is unsafe for
5 self-medication and includes any drug or device which by
6 federal or state law can be lawfully dispensed only on
7 prescription or furnished by a laboratory pursuant to Section
8 4240 of the Business and Professions Code.

9 D. Section 725 of the Code provides that repeated acts
10 of clearly excessive prescribing or administering of drugs or
11 treatment constitutes unprofessional conduct.

12 E. Section 125.3 of the Code provides, in part, that
13 the Board may request the administrative law judge to direct
14 any licentiate found to have committed a violation or
15 violations of the licensing act, to pay the Board a sum not to
16 exceed the reasonable costs of the investigation and
17 enforcement of the case.

18 **FIRST CAUSE FOR DISCIPLINE**

19 (Gross Negligence)

20 4. Respondent Percy Naranjo, M.D. is subject to
21 disciplinary action under section 2234, subdivision (b) of the Code
22 in that he committed acts of gross negligence in the care and
23 treatment of a patient. The circumstances are as follows:

24 A. On or about October 23, 1990, patient E.P.
25 presented to respondent for "stress related medical problems
26 (insomnia, anxiety, depression, gastritis, labile
27 hypertension)." Respondent examined patient E.P. on

1 approximately 42 occasions between October 23, 1990 and
2 October 15, 1993. During that period respondent prescribed to
3 patient E.P. Nardil, Pamelor, Desipramine, Inderal,
4 Desamethesone, and other medications as more fully set forth
5 below.

6 B. Respondent prescribed Nardil to patient E.P. on
7 or about October 23, 1990; November 1 and 16, 1990; December
8 7, 1990; January 3 and 22, 1991; February 15, 1991; March 7
9 and 21, 1991; April 15, 1991; October 7 and 23, 1991; December
10 6, 1991; May 8, 1992; June 1 and 16, 1992; July 9, 23 and 29,
11 1992; August 7, 17 and 20, 1992; September 10, 1992; October
12 5 and 29, 1992; November 30, 1992; December 21, 1992; January
13 7 and 29, 1993; February 22, 1993; March 11, 1993; April 6,
14 1993; May 7, 1993; June 9, 1993; July 16 and 29, 1993; August
15 5, 1993; September 7, 1993; and October 15, 1993.

16 C. Respondent prescribed Pamelor to patient E.P.
17 on or about November 1 and 16, 1990; December 7, 1990; January
18 3 and 22, 1991; February 15, 1991; March 7 and 21, 1991; April
19 15, 1991; May 30, 1991; August 9, 1991; October 7 and 23,
20 1991; December 6, 1991; August 20, 1992; September 10, 1992;
21 October 5 and 29, 1992; November 30, 1992; December 21, 1992;
22 January 7 and 29, 1993; February 22, 1993; March 11, 1993;
23 April 6, 1993; May 7, 1993; June 9, 1993; July 29, 1993;
24 August 5, 1993; September 7, 1993; and October 15, 1993.

25 D. Respondent prescribed Desipramine to patient
26 E.P. on or about October 7 and 23, 1991; December 6, 1991;
27 June 1 and 16, 1992; July 9, 23 and 29, 1992; and August 7 and

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17, 1992.

E. Respondent prescribed Dexamethasone to patient E.P. on or about January 22, 1991; June 16, 1992; July 9, 23 and 29, 1992; August 7 and 20, 1992; September 10, 1992; October 5 and 29, 1992; November 30, 1992; December 21, 1992; January 7 and 29, 1993; February 22, 1993; March 11, 1993; April 6, 1993; May 7, 1993; June 9, 1993; July 16 and 29, 1993; and August 5, 1993.

F. Respondent prescribed Inderal to patient E.P. on or about June 1 and 16, 1992; July 9, 23 and 29, 1992; August 7, 17 and 20, 1992; September 10, 1992; October 5 and 29, 1992; November 30, 1992; December 21, 1992; January 7 and 29, 1993; February 22, 1993; March 11, 1993; April 6, 1993; May 7, 1993; and June 9, 1993.

G. On or about October 23, 1990, and at all material times thereafter as more specifically alleged in subparagraph 4.B. above, respondent was grossly negligent when he prescribed Nardil to patient E.P. as a first line antidepressant without any history in patient E.P. of refractoriness to other antidepressant medications.

H. On or about October 23, 1990, and at all material times thereafter as more specifically alleged in subparagraph 4.B. above, respondent was grossly negligent when he failed to prescribe Nardil in a therapeutic dosage both initially and throughout the period of treatment.

I. On or about October 23, 1990, and at all material times thereafter as more specifically alleged in

1 subparagraph 4.B. above, respondent was grossly negligent when
2 he failed to advise, and/or note in the medical records for,
3 patient E.P. of the need for a special diet and the avoidance
4 of certain over-the-counter drugs while taking the
5 prescription medication Nardil.

6 J. On or about November 1, 1990, and at all
7 material times thereafter as more specifically alleged in
8 subparagraph 4.C. above, respondent was grossly negligent when
9 he prescribed Pamelor to patient E.P. as a first line
10 antidepressant without any history in patient E.P. of
11 refractoriness to other antidepressant medications, including
12 Nardil.

13 K. On or about November 1, 1990, and at all
14 material times thereafter as more specifically alleged in
15 subparagraphs 4.B. and 4.C. above, respondent was grossly
16 negligent when he failed to advise, and/or note in the medical
17 records for, patient E.P. a warning regarding the potential
18 life-threatening interaction between Pamelor and Nardil.

19 L. On or about November 1, 1990, and at all
20 material times thereafter as more specifically alleged in
21 subparagraphs 4.B. and 4.C. above, respondent was grossly
22 negligent when he failed to discontinue Nardil for 10 to 14
23 days before beginning patient E.P. on Pamelor.

24 M. On or about November 1, 1990, and at all
25 material times thereafter as more specifically alleged in
26 subparagraph 4.C. above, respondent was grossly negligent when
27 he failed to prescribed Pamelor for patient E.P. in

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therapeutic dosages.

N. On or about October 23, 1991, and at all material times thereafter as more specifically alleged in subparagraphs 4.B., 4.C., and 4.D. above, respondent was grossly negligent when he prescribed three antidepressants (Nardil, Pamelor and Desipramine) to patient E.P. at the same time.

O. On or about October 23, 1991, and at all material times thereafter as more specifically alleged in subparagraphs 4.B. and 4.D. above, respondent was grossly negligent when he failed to discontinue Nardil for 10 to 14 days before beginning patient E.P. on Desipramine.

P. On or about October 23, 1991, and at all material times thereafter as more specifically alleged in subparagraphs 4.B., 4.C., and 4.D. above, respondent was grossly negligent when he failed to advise, and/or note in the medical records for, patient E.P. a warning regarding the potential life-threatening interaction of Nardil with Desipramine and Pamelor.

Q. On or about January 22, 1991, and at all material times thereafter as more specifically alleged in subparagraph 4.E. above, respondent was grossly negligent when he prescribed to patient E.P. Dexamethasone in the absence of indications for its use.

R. On or about June 1, 1992, and at all material times thereafter as more specifically alleged in subparagraphs 4.B. and 4.F. above, respondent was grossly negligent when he

1 prescribed to patient E.P. Inderal, which is contraindicated
2 for use with Nardil.

3 S. From on or about October 23, 1990 through
4 October 15, 1993, respondent was grossly negligent in the care
5 and treatment of patient E.P. for the following reasons:

6 (1) Respondent failed to order laboratory
7 tests for liver, thyroid and bone marrow function for the
8 treatment of depression and hypertension in patient E.P.

9 (2) Respondent failed to note patient E.P.'s
10 weight in the medical chart in connection with the
11 treatment of hypertension in patient E.P.

12 (3) Respondent failed to consider alternative
13 therapies in light of patient E.P.'s failure to obtain
14 relief for the same symptoms over the course of three
15 years under respondent's care as more specifically
16 described in subparagraphs 4.A. through 4.F.

17 (4) Respondent failed to assess whether the
18 headaches and high blood pressure of which patient E.P.
19 complained throughout the three years of treatment by
20 respondent was a result of the Nardil therapy, inasmuch
21 as headaches and high blood pressure are common side
22 effects of treatment with Nardil.

23 T. Nardil, Pamelor, Desipramine, Inderal and
24 Dexamethasone are dangerous drugs within the meaning of
25 section 4211 of the Code.

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1 **FIFTH CAUSE FOR DISCIPLINE**

2 (Excessive Prescribing)

3 8. Respondent Percy Naranjo, M.D. is subject to
4 disciplinary action under section 725 of the Code in that he
5 clearly excessively prescribed or administered drugs or treatment
6 for a patient. The circumstances are as follows:

7 A. The facts and allegations in subparagraphs 4.Q.
8 and 4.R. above are incorporated here as if fully set forth.

9 B. Repeatedly prescribing a drug which is either
10 not indicated or contraindicated constitutes excessive
11 prescribing within the meaning of section 725 of the Code.

12 **PRAYER**

13 **WHEREFORE**, the complainant requests that a hearing be
14 held on the matters herein alleged, and that following the hearing,
15 the Division issue a decision:

16 1. Revoking or suspending Physician's and Surgeon's
17 Certificate Number A35198, heretofore issued to respondent Percy
18 Naranjo, M.D.;

19 2. Revoking, suspending or denying approval of
20 respondent's authority to supervise physician's assistants,
21 pursuant to section 3527 of the Code;

22 3. Ordering respondent to pay the Board the reasonable
23 costs of the investigation and enforcement of this case and, if
24 placed on probation, the costs of probation monitoring;

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

DATED: August 5, 1997



Ron Joseph
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California

Complainant

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