

Board Meeting

Tuesday, June 21, 2011

Junipero Serra Building 320 W. 4th Street 7th Floor Conference Room Los Angeles, CA 90013







Governor Edmund G. Brown Jr. State of California

Brian Stiger, Senior Chief Deputy Director Department of Consumer Affairs



Lee Goldstein, OD, MPA President

Alejandro Arredondo, OD Vice President

> Monica Johnson Secretary

Donna Burke Member

Kenneth Lawenda, OD Member

Fred Naranjo, MBA Member

Edward J. Rendon, MA Member

Alexander Kim, MBA Member

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Administration Andrea Leiva Elizabeth Bradley Krista Eklund

Licensing
Jeff Robinson
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Elvia Melendrez

Enforcement
Lydia Bracco
Dillon Christensen
Cheree Kimball
Brianna Miller
Jessica Sieferman

California State Board of Optometry

2420 Del Paso Road, Suite 255, Sacramento, CA 95834

Board Meeting Notice Tuesday, June 21, 2011 Junipero Serra Building 320 W. 4 Street The Floor Conference Room Los Angeles, CA 90013 (213) 576-6276

9:00 a.m.

FULL BOARD OPEN SESSION

- 1. Call to Order Establishment of a Quorum
- 2. President's Report

Welcome and Introductions

- 3. Approval of Board Meeting Minutes
 - A. October 22, 2010 Meeting
 - B. January 11, 2011 Meeting
 - C. April 11, 2011 Meeting
- 4. Director's Report

Representative from the Department of Consumer Affairs (DCA)

- 5. Executive Officer's Report
 - A. Budget Update
 - B. Board Operations
- 6. Petition for Reduction of Penalty and Early Termination of Probation
 - A. Dr. David Muris, O.D., License Number OPT 5059
 - B. Dr. Casey Finn, O.D., License Number OPT 8638
 - C. Dr. Gregory Tom, O.D., License Number OPT 10427
 - D. Dr. Sharon Samski, O.D., License Number OPT 9531
 - E. Dr. Richard Martin, O.D., License Number OPT 8799

FULL BOARD CLOSED SESSION

- 7. Pursuant to Government Code Section 11126(c)(3), to Deliberate on Petitions for Reduction of Penalty and Early Termination of Probation
 - A. Dr. David Muris, O.D., License Number OPT 5059
 - B. Dr. Casey Finn, O.D., License Number OPT 8638
 - C. Dr. Gregory Tom, O.D., License Number OPT 10427
 - D. Dr. Sharon Samski, O.D., License Number OPT 9531
 - E. Dr. Richard Martin, O.D., License Number OPT 8799
- 8. Pursuant to Government Code Section 11126(c)(3), to Deliberate on Disciplinary Matters
 - A. Proposed Decision and Disciplinary Order, Elise A. Millie, O.D., License Number OPT 13430
 - B. Revised Stipulated Settlement and Disciplinary Order, Brent Lee Gibson, OPT 10198
 - C. Stipulated Surrender of License and Disciplinary Order, Christine Ann Matson, O.D., OPT 7990

California State Board of Optometry Meeting Notice and Agenda June 21, 2011 Page 2

9. Pursuant to Government Code Section 11126(e)(1) the Board Will Confer With Legal Counsel to Discuss Pending Litigation: California Academy of Eye Physicians & Surgeons, and California Medical Association v. State Board of Optometry, Case Number CGC-11-507241, San Francisco Superior Court

FULL BOARD OPEN SESSION

- 10. Discussion and Possible Approval to Allow the Glaucoma Certification Case Management Course and Grand Rounds Program to Serve as Continuing Education Credit as Required in California Code of Regulations Section 1536
- 11. Discussion and Possible Action on Assembly Bill (AB) 778, Health Care Service Plans: Vision Care
- 12. Public Comment for Items Not on the Agenda

Note: the Board may not discuss or take action on any matter raised during this public comment section, except to decide whether to place the matter on the agenda of a future meeting. [Government Code Sections 11125, 7(a)]

- 13. Suggestions for Future Agenda Items
- 14. Adjournment

Public comments will be taken on agenda items at the time the specific item is raised. *Time limitations will be determined by the Chairperson*. The Board may take action on any item listed on the agenda. Agenda items may be taken out of order to accommodate speakers and to maintain a quorum.

NOTICE: The meeting is accessible to the physically disabled. A person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Krista Eklund at (916) 575-7170 or sending a written request to that person at the California State Board of Optometry 2420 Del Paso Road, Suite 255, Sacramento, CA 95834. Providing your request at least five (5) business days before the meeting will help ensure availability of the requested accommodation.



Memo

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To: Board Members Date: June 21, 2011

From: Dr. Lee Goldstein, O.D. Telephone: (916) 575-7170

Board President

Subject: Agenda Item 1– Call to Order – Establishment of a Quorum

Lee Goldstein, O.D., M.P.A., Board President

Alejandro Arredondo, O.D., Vice-President

Monica Johnson, Secretary

Donna Burke

Alexander Kim, M.B.A.

Kenneth Lawenda, O.D.

Fred Naranjo, M.B.A.

Edward J. Rendon, M.A.



Memo

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To: Board Members Date: June 21, 2011

From: Dr. Lee Goldstein, O.D. Telephone: (916) 575-7170

Board President

Subject: Agenda Item 2- President's Report

A. Welcome and Introductions

B. DCA Director and Board President Conference Calls

C. Other



Memo

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To: Board Members Date: June 21, 2011

From: Dr. Lee Goldstein, O.D. Telephone: (916) 575-7170

Board President

Subject: Agenda Item 3 – Approval of Board Meeting Minutes

Board Members are asked to review and approve the draft minutes from the following meetings:

A. October 22, 2010 Board Meeting

B. January 11, 2011 Board Meeting

C. April 11, 2011 Board Meeting



STATE BOARD OF OPTOMETRY

2420 Del Paso Road, Suite 255, Sacramento, CA 95834 P (916) 575-7170 F (916) 575-7292 web: www.optometry.ca.gov



Meeting Minutes

DRAFT 2

Friday October 22, 2010
Via Telephone at the Following Locations:

Southern California College of Optometry 2575 Yorba Linda Blvd., TVCI Room Fullerton, CA 92831

And

The Department of Consumer Affairs 1625 North Market Blvd. Sacramento Room S306, 3rd Floor Sacramento, CA 95834

Members Present in Fullerton

Lee Goldstein, O.D., M.P.A., Board President Alejandro Arredondo, O.D., Vice President Monica Johnson, Secretary Susy Yu, O.D., M.B.A., F.A.A.O. Kenneth Lawenda, O.D. Edward Rendon, M.P.A.

Members Absent (Excused)

Fred Naranjo, M.B.A.

Staff Present

Mona Maggio, Executive Officer Andrea Leiva, Policy Analyst Michael Santiago, Legal Counsel

Guest List

On File

Friday, October 22, 2010 9:00 a.m.

FULL BOARD OPEN SESSION

1. Call to Order – Establishment of a Quorum

Board President, Lee Goldstein, O.D. called the meeting to order at 9:08 a.m. Dr. Goldstein called roll and a quorum was established.

Dr. Goldstein welcomed Board member, Donna Burke (the Board's newest appointed member) to her first public meeting.

2. Review and Possible Approval of the Responses Considering the Comments Submitted During the 15-Day Comment Period (October 5, 2010 to October 19, 2010) Pertaining to the Proposed Rulemaking, California Code of Regulations (CCR), Title 16, Section 1571, Requirements for Glaucoma Certification

Policy Analyst, Andrea Leiva provided an overview of this agenda item.

Members Present in Sacramento

Donna Burk Katrina Semmes

Staff Present

Margie McGavin, Enforcement Manager

Guest List

On File

This proposal establishes the requirements for glaucoma certification for licensees that graduated prior to May 1, 2008. Senate Bill (SB) 1406 (Chapter 352, Statutes of 2008, Correa) became effective on January 1, 2009 and expanded the scope of practice of optometrists to include, among other things, the treatment of glaucoma. Business and Professions Code (BPC) section 3041.10 establishes procedures to be followed by the Board in order to make sure that the public is adequately protected during the transition to full certification for all licensed optometrists interested in treating and managing glaucoma patients.

A timeline of the Board's progress is as follows:

August 24, 2009 – The Board approved the language and initiated a rulemaking,

November 6, 2009 - The Notice was published and the 45-day comment period began,

December 21, 2009 - The 45-day comment period ended,

December 22, 2010 - The Regulatory hearing was held and no comments were received,

March 16, 2010 – The Board made the final approval of the modified language after acknowledging all the comments received.

March 24 – April 8, 2010 – The 15-day comment period on modified text began,

May 11, 2010- The Board made the final approval of the language after acknowledging all comments received and directed staff to complete the rulemaking file,

May 17 – August 23, 2010 – The Package was approved by the Department of Consumer Affairs, Consumer Services Agency, and the Department of Finance,

August 25, 2010 – Staff submitted the package for final review to the Office of Administrative Law (OAL),

September 24, 2010 – The Board voted to withdraw the regulation from the OAL after reviewing the Office's concerns with the regulation.

September 27, 2010 – The Board withdrew the regulation,

October 4, 2010 – The Board met to approve the modified text,

October 5, 2010 – October 19, 2010 – The 15-day comment period for the modified text began, October 22, 2010 – A board meeting was held to discuss comments and move forward with the rulemaking file.

Dr. Goldstein invited members of the public (in the Fullerton and Sacramento locations) to introduce themselves and welcomed everyone in attendance.

Ms. Leiva provided an overview of the comments received during the November 6, 2009 – December 21, 2009 15-day comment period, which is as follows:

The following is a recommended response to a portion of a comment that was not addressed during this regulation's 45-day comment period.

The California Academy of Eye Physicians and Surgeons (CAEPS) in their comment dated December 21, 2009 opposed the text of the regulation for the following reason:

• Simply choosing Option (A) and Option (B) together would allow the candidate for glaucoma certification to complete the Case Management Requirement in just 32 hours, the equivalent of less than a single week of work.

The Board's proposed response is to reject his comment because it is an incorrect assumption. It is true that the total of Option (A) Case Management Course and Option (B) Grand Rounds Program equal a total of 32 hours, but those 32 hours would not be completed in a week's time. Option (A) and Option (B) in the regulation are only a description of the minimum requirements for the development of these two courses and are not the final curriculum. Once this regulation is approved by the Secretary of State, the schools and colleges of optometry in California will present their proposed curriculums to the Board of Optometry (Board) for final approval. It is the Board's position that as educators, who are considered to be some of the best in the nation, the California schools and colleges of optometry should have the opportunity and flexibility to create a curriculum

that they know will be rigorous and time well spent for certification candidates taking the course. The Board would not approve courses that compromise the patient safety of California consumers. The Board is confident that the schools and colleges of optometry will develop courses that will produce students who are highly trained and skilled providers of medical eye care.

To be more specific, while it is possible that Option (A) Case Management Course may be completed in a weekend, Option (B) Grand Rounds would take longer, based on the fact that in the Grand Rounds Program, glaucoma certification candidates must participate in group discussions of cases with instructor feedback, attend follow-up meetings to properly evaluate the same or different patients, and perform all necessary tests to diagnose and create a treatment plan for the live patients all of which would take longer than a week to complete.

Also, CAEPS is not taking into account that the optometrists taking these courses already have prior training and experience that far exceeds the additional training Option (A) Case Management Course and Option (B) Grand Rounds Program will provide. Already licensed, practicing optometrists have the educational and clinical experiences, have already passed the national examination which requires that they be knowledgeable in glaucoma in order to pass it, and have spent years in practice in order to independently and effectively treat glaucoma.

Dr. Goldstein opened the floor to questions or comments from the Board regarding this response.

Public member, Monica Johnson inquired as to why this was not addressed during the November 6, 2009 – December 21, 2009 comment period. Ms. Leiva explained that when the Office of Administrative Law (OAL) provided their feedback, they referenced this comment and said that the Board did not respond to it.

Public member, Donna Burke referenced the last sentence of the third paragraph and requested confirmation that the program is not referring to just students but licensed practitioners as well. Ms. Leiva confirmed this is correct.

Dr. Goldstein noted that the words "is confident" should be replaced with "will assure".

Ms. Leiva provided an overview of the comments received during the October 5, 2010 – October 19, 2010 15-day comment period. The comments are as follows:

The California Optometric Association, Southern California College of Optometry, Western University of Health Sciences, College of Optometry and the University of California Berkeley, School of Optometry support the proposed regulation as modified for the following reasons:

Comment (1): The proposed regulations are appropriate in establishing rigorous standards, while also allowing greater access to care to California patients.

Comment (2): The aging of California's population, and increasing diversity, will put a great strain on all available health care resources. Supplementing the existing numbers of providers who can treat glaucoma will result in better and more efficient delivery of care.

Comment (3): Optometrists in 48 other states across the nation have been safely managing and treating glaucoma patients for decades. Some of these states do not require that their licensees be certified to treat glaucoma. California optometrists should be allowed the same privilege as it will allow California patients the right to choose their eye doctor of choice.

Comment (4): The schools and colleges of optometry across the nation and in California are fully accredited and pass stringent criteria to ensure that all graduates receive the education and training to provide safe and effective care to their patients, including those with glaucoma.

Comment (5): The certification established by this regulation is the most rigorous in the country and optometrists in California who are certified under this process will be the best educated and

best trained in the world.

Comment (6): Currently, there are nearly three times more licensed optometrists than ophthalmologists, practicing in over 100 cities and towns in 54 of California's 58 counties. More than 2,600 optometrists accept and treat Medi-Cal Patients, as opposed to about 1,200 ophthalmologists. Thus, because of their dispersion throughout the state, optometrists are more readily available to working families and potential patients.

Comment (7): The regulations have been well thought out and have been vetted publicly in a way that has given all stakeholders ample opportunity to participate.

Response: The Board acknowledges all of these comments of support.

Dr. Goldstein opened the floor to questions and comments by the Board. There were no comments.

The California Academy of Eye Physicians and Surgeons (CAEPS) oppose the proposed regulation as modified for the following reasons:

Comment (1) by CAEPS: The Board's latest modified text continues to threaten patient safety because the proposed regulation's definition of treatment would not require actual medical management of glaucoma patients.

Response: The Board's proposed response is to reject this comment. The definition of "treat" in the proposed regulation <u>does</u> require actual medical management of glaucoma patients.

According to BPC section 3041, before a Therapeutic Pharmaceutical Agents (TPA) certified optometrist can treat glaucoma with TPAs (which includes prescribing anti-glaucoma medication), the TPA-certified optometrist must first receive certification from the Board to treat glaucoma.

Business and Professions Code (BPC) section 3041(c) states that a TPA-certified optometrist may use topical and oral anti-glaucoma agents to treat primary open angle glaucoma, and exfoliation and pigmentary glaucoma only if the TPA-certified optometrist is certified by the Board to treat glaucoma. One of the ways to obtain glaucoma certification is to complete a didactic course of no less than 24 hours and complete the case management requirements for glaucoma certification established by the Board through this proposed regulation. Thus, until a TPA-certified optometrist receives glaucoma certification, the <u>TPA-certified optometrist cannot use anti-glaucoma agents to treat glaucoma</u>.

For the purposes of this regulation, treat had to be defined in a manner to comport with the aforementioned restriction in BPC section 3041. The definition of treat encompasses all the necessary steps that an optometrist must take in order to medically manage a glaucoma patient. Despite the fact that candidates for glaucoma certification are not allowed to use anti-glaucoma agents, they are working closely with individuals who are experienced with prescribing or applying anti-glaucoma agents and are participating in the proper evaluation of the patient, the performing of all necessary tests, the diagnosis of the patient, recognizing the types of glaucoma within their scope of practice, creating a treatment plan with proposed medications and target pressures, ongoing monitoring and reevaluation of the patient's condition, and making timely referrals to an ophthalmologist when appropriate. The candidate is in effect "treating" the patient without violating the requirement set forth in BPC section 3041 that only glaucoma certified optometrists may use anti-glaucoma medications to treat glaucoma. Thus, the definition of "treat" in the proposed regulation is consistent with the definition of "treat" in BPC section 3041 and does not compromise patient safety.

Dr. Goldstein opened the floor to questions and comments by the Board.

Professional member, Kenneth Lawenda commended the regulatory committee and expressed his belief that section 3041 could not possibly be any more clear or straightforward.

A comment from Sacramento was inaudible in both author and content.

Dr. Goldstein noted that this proposed regulation is consistent with the way the Board's been effectively certifying optometrists since Senate Bill (SB) 929 was put into effect.

Comment (2) by CAEPS: By using the Board's definition of "treat" for the purposes of this regulation, someone without any experience whatsoever using the class of drugs necessary for glaucoma management would be allowed to obtain certification to treat a serious, blinding disease.

Response: The Board's proposed response is to reject this comment because it is an incorrect statement. Although the candidate for glaucoma certification may not treat a patient by prescribing or applying anti-glaucoma medications to the patient, the candidate can and will work with those supervisors and instructors who are glaucoma certified and who are experienced with prescribing or applying anti-glaucoma medications to patients. Because the candidate would be closely monitoring the patient and working with the person who was glaucoma certified the candidate is engaging in more than just a mere diagnosis of the patient. The candidate is in effect "treating" the patient without violating the requirement set forth in BPC section 3041 that only glaucoma certified optometrists may use anti-glaucoma medications to treat glaucoma.

By going through the proposed certification process in this regulation, glaucoma certification candidates will be able to recognize glaucoma at all stages of the disease, as well as all TPA treatment options available to a glaucoma certified optometrist.

Further, the drugs necessary for glaucoma management, which are TPAs, consist of topical and oral anti-glaucoma medications, such as eye drops and pills. As of May 2008, according to the Board's public licensure database, 94% of California licensed optometrists have attained TPA certification. Thus, it is incorrect to assume that California optometrists who seek glaucoma certification have "no experience whatsoever" with the required class of drugs necessary for glaucoma management. It is important to keep in mind that optometrists who are glaucoma certified do not administer any medication to the patient during the treatment of glaucoma. The patient must obtain their medication through a prescription written by the glaucoma certified optometrist. Then, the patient would have to administer the drug to themselves using the dosage and intake frequency authorized by their optometrist.

Dr. Goldstein opened the floor for questions and comments by the Board.

Dr. Goldstein advised (and members agreed) that the text should be modified to read "authorized by the prescribing optometrist or ophthalmologist".

Professional member, Alejandro Arredondo noted that optometrists have been safely treating glaucoma, in other states, for years.

Comment (3) by CAEPS: The proposed regulation's definition of "treat" is inconsistent with the statutory definition in Business and Professions Code (BPC) section 3041(b)(2) because at a minimum, it does not involve actual use of pharmaceutical agents and it fails the Office of Administrative Law's (OAL) clarity and authority standards.

Response: The Board's proposed response is to reject this comment because the definition of "treat" in the proposed regulation is consistent with BPC section 3041.

According to BPC section 3041, before a Therapeutic Pharmaceutical Agents (TPA) certified optometrist can treat glaucoma with TPAs (which includes prescribing anti-glaucoma medication), the TPA-certified optometrist must first receive certification from the Board to treat glaucoma.

BPC section 3041(c) states that a TPA-certified optometrist may use topical and oral anti-glaucoma agents to treat primary open angle glaucoma, and exfoliation and pigmentary glaucoma only if the TPA-certified optometrist is certified by the Board to treat glaucoma. One of the ways to obtain glaucoma certification is to complete a didactic course of no less than 24 hours and complete the case management requirements for glaucoma certification established by the Board through this proposed regulation. Thus, until a TPA-certified optometrist receives glaucoma certification, the TPA-certified optometrist cannot use anti-glaucoma agents to treat glaucoma.

For the purposes of this regulation, treat had to be defined in a manner to comport with the aforementioned restriction in BPC section 3041. The definition of treat encompasses all the necessary steps that an optometrist must take in order to medically manage a glaucoma patient. Despite the fact that candidates for glaucoma certification are not allowed to use anti-glaucoma agents, they are working closely with individuals who are experienced with prescribing or applying anti-glaucoma agents and are participating in the proper evaluation of the patient, the performing of all necessary tests, the diagnosis of the patient, recognizing the type of glaucoma within their scope of practice, creating a treatment plan with proposed medications and target pressures, ongoing monitoring and reevaluation of the patient's condition, and making timely referrals to an ophthalmologist when appropriate. The candidate is in effect "treating" the patient without violating the requirement set forth in BPC section 3041 that only glaucoma certified optometrists may use anti-glaucoma medications to treat glaucoma. Thus, the definition of "treat" in the proposed regulation is consistent with the definition of "treat" in BPC section 3041.

Dr. Goldstein opened the floor to questions and comments by the Board. There were no questions or comments.

Comment (4) by CAEPS: SB 1406 did not authorize the Board to create a new definition of "treat" via regulation.

Response: The Board's proposed response is to reject this comment because the Board has statutory authority to define "treat" for the purposes of the proposed regulation. Senate Bill (SB) 1406 did not have to expressly grant the Board authority to redefine the term "treat" since the definition of "treat" in the proposed regulation is consistent with existing law. Thus, it is inappropriate to apply the same definition of "treat" to candidates who are seeking glaucoma certification as is applied to optometrists who are already certified and can practice at the full range of their scope of practice.

BPC section 3041.10 mandated the process that needed to be followed to create the guidelines for glaucoma certification. That portion of the process has been completed and BPC section 3041.10 was repealed on January 1, 2010, thus it no longer applies to this proposed regulation.

Dr. Goldstein opened the floor to questions and comments by the Board. There were no questions or comments.

Comment (5) by CAEPS: The proposed regulation's definition of "treat" is inconsistent with the definition provided in the Office of Professional Examination Services' (OPES) report, thus it violates OAL's authority standard. The Board draws from OPES' report for the proposed definition of "treat" in the regulation, but is altering OPES' findings by failing to include the report's full definition of treatment (i.e. the portions referring to the actual use of pharmaceuticals).

Given that the Board formally adopted the OPES report in its July 2009 meeting, the contents of the report in its entirety is official Board policy. Therefore, the Board is not free to pick and choose the

portions of a "complete" definition provided in OPES' report and to propose another, contrary definition.

Response: The Board's proposed response is to reject this comment because it is an incorrect statement. OPES' report did not define "treat," it merely described how optometrists who had been co-managing patients under Senate Bill (SB) 929 were treating glaucoma patients. Although BPC section 3041.10 mandated that the Board adopt the findings of OPES and implement them into regulation, that section was repealed on January 1, 2010, thus it no longer applies to this proposed regulation. For the same reason, this report is not official Board policy. At this time, the report is being used as a reference for further development of this regulation.

The Board was not attempting to alter OPES' findings. The report was used as a reference to create a definition that encompassed all procedures necessary for the treatment of glaucoma up to the point of prescribing the medication to the patient, while comporting with current law that only glaucoma certified licensees may use anti-glaucoma agents to treat glaucoma. Sections of OPES' description of treatment were omitted because they are not applicable to candidates for glaucoma certification.

Dr. Goldstein opened the floor to questions and comments by the Board. There were no questions or comments.

Comment (6) by CAEPS: The proposed regulation's creation of an "equivalency" mechanism whereby an optometrist may satisfy their "treatment" obligation by not treating actual patients is inconsistent with SB 1406 and violates OAL's consistency and authority standards. A classroom oriented experience clearly cannot replace the experience one gains from participating in the treatment of live patients in the Grand Rounds Program.

Response: The Board's proposed response is to reject this comment. The language stating that completion of the Case Management Course or the Ground Rounds Program is equivalent to prospectively treating 15 individual patients for 12 consecutive months and does not violate the consistency and authority standards of the Government Code. For clarity purposes, it was necessary to add explanatory language in the proposed regulation indicating that the Case Management Course and the Grand Rounds Program are to be counted as if the candidate for glaucoma certification had treated 15 individual patients for 12 consecutive months. Although it is not explicitly stated in the OPES report, the intent was to incorporate two extremely effective teaching methods in the glaucoma certification process that would count as "15-patient credits." By allowing these courses to count as 15-patient credits, it logically follows that these courses are equivalent to prospectively treating 15 individual patients for 12 consecutive months as the proposed regulation states.

Furthermore, the Case Management Course is the only option that does not require that live patients be present, and this is clearly stated in the proposed regulation modifications. The Grand Rounds Program requires that live patients be evaluated for the purposes of the creation of a management plan and for follow-up meetings. Likewise, the Preceptorship Program requires that patients be co-managed with a preceptor and this will most likely take place at the candidate's practice location. In all of these settings, the regulation's definition of "treat" will be utilized, which means candidates will be fully involved in all aspects of managing an actual patient. Also, candidates for glaucoma certification would be under the supervision of those experienced with using anti-glaucoma agents, which would allow for the proper medication to be prescribed. Patient safety is never compromised as candidates are not allowed to use anti-glaucoma medications until glaucoma certified.

Dr. Goldstein opened the floor to questions and comments by the Board.

Dr. Lawenda reported a typo in the text.

Comment (7) by CAEPS: SB 1406 and OPES' report do not give the Board authority to declare that the Case Management Course and Grand Rounds are equivalent to prospectively treating 15 individual patients for 12 consecutive months.

Response: The Board's proposed response is to reject this comment for the same reasons as stated in response (6).

Dr. Goldstein opened the floor to questions and comments by the Board. There were no questions or comments.

Comment (8) by CAEPS: The proposed regulation's definitions of "Diagnosis" and "Monitoring" as "Treatment" creates inconsistencies with other portions of the optometric practice act, including the statutory definition of "treatment," and violates OAL's authority standard.

Response: The Board's proposed response is to reject this comment. The proposed regulation's definition of treat, which includes diagnosing the patient and monitoring the patient's condition, does not create any inconsistency with the optometric practice act since it does not authorize the licensee to exceed his or her scope of practice. Although it is clear in BPC section 3041(h) that optometrists are not authorized to use therapeutic lasers and since the proposed regulation does not attempt to override or conflict with BPC section 3041(h), a candidate for glaucoma certification would not be able to utilize therapeutic lasers to "monitor" a glaucoma patient while completing the glaucoma certification requirements. Furthermore, BPC section 3041(h) authorizes optometrists to use diagnostic lasers whether they are glaucoma certified or not. Although treatment options are constantly changing as new technologies are introduced into the practice of optometry, this does not necessarily mean that the standard of care has changed to require the implementation of such new technology in the treatment of glaucoma patients. The standard of care remains focused on patient care and not on the technologies used to provide such care.

For the sake of clarity, Dr. Goldstein asked Legal Counsel, Michael Santiago if this comment is regarding the use of diagnostic versus treatment lasers. Mr. Santiago clarified that although that's a portion of it, the comment refers to the broad umbrella which the use of therapeutic lasers, as well as the standard of care argument, come under.

Dr. Goldstein asked the question: "If the diagnostic laser was a part of the standard of care, may it currently be used by an optometrist"? Mr. Santiago confirmed this statement correct.

Dr. Goldstein noted that lasers which are used for diagnosis are called diagnostic lasers rather then treatment lasers.

Dr. Goldstein opened the floor to questions and comments from board members.

Ms. Burke inquired and Dr. Goldstein clarified the difference between diagnostic and treatment lasers.

Ms. Johnson asked if it would be possible to increase clarity in the Board's response.

Dr. Goldstein advised that language be added which explains that optometrists are allowed to use diagnostic lasers which is becoming an increasing part of optometric and ophthalmologic practice.

Ms. Leiva suggested adding "Furthermore, BPC section 3041(h) authorizes optometrists to use diagnostic lasers whether they are glaucoma certified or not", to the Board's response.

Comment (9) by CAEPS: It is not clear in the proposed regulation's Case Management Requirement as to how many contacts with each patient will occur during the 12 month period of treatment.

Response: The Board's proposed response is to reject this comment. It would be impossible to determine how many contacts are necessary with each patient. Each patient's condition determines the frequency of such contact that the candidate for glaucoma certification needs to have with the patient for effective treatment of glaucoma.

Dr. Goldstein opened the floor to questions and comments from Board members.

Dr. Goldstein suggesting editing the second sentence of the response to read: "Each patient's condition, <u>and appropriate glaucoma case management</u>, determines the frequency of such contact that the candidate for glaucoma certification needs to have with the patient for effective treatment of glaucoma".

Ms. Johnson inquired about the relevancy of the comment since the laws and regulations speak to how many patients shall be seen during this training period.

Dr. Goldstein explained his belief that this has to do with the nature of the disease. Glaucoma patients are not seen once but require follow up visits over a long period of time.

A comment from Sacramento was inaudible in both author and content.

Comment (10) by CAEPS: Newly proposed regulation 1571 fails OAL's clarity standard because the regulation uses terms which do not have meanings generally familiar to those directly affected by the regulation, and those terms are defined neither in the regulation nor in the governing statute. The view of "general familiarity" is supported by the Glaucoma Diagnosis and Treatment Advisory Committee (GDTAC) optometry report.

Response: The Board's proposed response is to reject this comment. The Board believes the term it has used is specific enough that those who are affected by it will clearly understand what it encompasses. In the proposed regulation the terms diagnosis and referral have meanings generally familiar to those "directly affected" by the regulation - candidates for glaucoma certification. Such candidates have become familiar with these terms through their optometric education as well as through experience in the practice of optometry.

Dr. Goldstein opened the floor to questions and comments by the Board. There were no questions or comments.

Comment (11) by CAEPS: The proposed regulation's "Case Management Requirement" is internally inconsistent and therefore fails the clarity standard because the terms "individual" and "patient's condition" conflict with permitting "different" patients for follow-up in the Grand Rounds Program. For example, how can an applicant for certification monitor and reevaluate a patient's condition over a 12 month period if the same or different patients may be reviewed?

Response: The Board's proposed response is to reject this comment. There is no inconsistency or lack of clarity. Whether the same patient or different patients are seen or treated in the Grand Rounds Program, the regulation states that completion of the course will result in the candidate for glaucoma certification receiving 15-patient credits.

Dr. Goldstein opened the floor to questions and comments by the Board.

Ms. Burke requested an explanation of the Grand Rounds Program.

Dr. Goldstein explained that in the Grand Rounds Program an initial examination of the patients is conducted, followed by discussions of how the patients are followed and treated. The intention is that the candidate for glaucoma certification follows the same patients as much as possible.

Professional member, Dr. Susy Yu added that she believes the Board made this clear in one of its former responses. In that response, the board indicated that a cross-sectional analysis of a number of different patients, at different stages of glaucoma are just as effective (if not more effective) in educating an optometrist on the disease.

Comment (12) by CAEPS: The statement "prospectively treated for a minimum of 12 consecutive months" in section (a)(4) conflicts with the explicit acknowledgement that the Case Management Course "does not involve treatment of patients."

Response: The Board's proposed response is to reject this comment because there is no conflict. Regardless of the amount of patients seen or treated in the case management course (which is zero), the regulation states that completion of the course will result in the candidate for glaucoma certification receiving 15-patient credits.

Board members, staff, and legal counsel discussed suggested language additions and strikes and agreed upon the following modified text:

Response: The Board's proposed response is to reject this comment because there is no conflict. The types of patients actually seen during a case management course would span the spectrum of moderate to advanced cases of glaucoma. Whether the minimum number of cases (15) presented and discussed in the Case Management Course, the regulation states that completion of the course will result in the candidate for glaucoma certification receiving 15-patient credits.

The case management course requires that at least 15 cases of moderate to advanced complexity be presented. The definition of treat encompasses all the necessary steps that an optometrist must take in order to medically manage a glaucoma patient. Despite the fact that candidates for glaucoma certification are not allowed to use anti-glaucoma agents, they are working closely with individuals who are experienced with prescribing or applying anti-glaucoma agents and are participating in the proper evaluation of the patient, the performing of all necessary tests, the diagnosis of the patient, recognizing the types of glaucoma within their scope of practice, creating a treatment plan with proposed medications and target pressures, ongoing monitoring and reevaluation of the patient's condition, and making timely referrals to an ophthalmologist when appropriate.

Board members returned to this response after comment 18 by CAEPS.

Dr. Lawenda noted that case management is a learning experience even when it's not hands on. Observing case management is a learning experience as well.

Dr. Goldstein suggested the following text:

The Board's proposed response is to reject this comment because there is no conflict. The case management course requires that at least 15 cases of moderate to advanced complexity of glaucoma be presented. The glaucoma education provided by the proposed regulation will result in a robust and thorough examination, decision making, evaluation and treatment, and possible referral requirement. Altogether this will provide a complete longitudinal learning experience that will meet or exceed the care and treatment of any single patient.

Dr. Yu recommended ending with a reiteration of the board's definition of "treat" from the board's response to comment (1) by CAEPS: The definition of "treat" in the proposed regulation <u>does</u> require actual medical management of glaucoma patients.

Dr. Goldstein invited further comments and questions from Board members.

A comment by Dr. Lawenda was inaudible.

A comment by Ms. Burke was inaudible.

Comment (13) by CAEPS: The fundamental basis for the proposed regulation violates OAL's "authority" standard since, contrary to statute, it rests upon two sets of curricula issued by two groups of persons instead of a single curriculum issued by a single committee.

Response: The Board's proposed response is to reject this comment. It does not address the modified text. The Office of Professional Examination Services (OPES) report accurately summarized the optometry and ophthalmology reports provided by the Glaucoma Diagnosis and Treatment Advisory Committee (GDTAC) members. Also, the Board took all of the OPES report's recommendations, as it was the final report and the report that needed to be followed as mandated by SB 1406, not the ophthalmology or the optometry GDTAC reports.

Dr. Goldstein opened the floor to questions and comments by the Board. There were no questions or comments.

Comment (14) by CAEPS: The Addendum to the Final Statement of Reasons contains factually-inaccurate language that suggests "support" of the Grand Rounds Program by the ophthalmologist members of the GDTAC.

Response: The Board's proposed response is to reject this comment. The language being referred to that suggests support for the proposed regulation's Grand Round Program from the ophthalmological members of GDTAC was language contained in the OPES report (pg. 37), not just from the optometry member's report. The OPES report was adopted by the Board in July 2009 and made available to the public for review. The Board has relied on and referred to the report's findings during this entire regulatory process and (until this comment) has not received any other concerns from any person, group or organization regarding the veracity of the material contained in the report. Thus, the Board does not consider it necessary to remove it from the Addendum to the Final Statement of Reasons.

Dr. Yu requested clarification regarding the final report. Ms. Leiva and Dr. Goldstein clarified that originally there were two reports (an ophthalmology version and an optometry version). The Board now has a final report derived from the findings of the OPES.

Dr. Yu advised striking "until this comment" from the response.

Comment (15) by CAEPS: How can a candidate for glaucoma certification make a timely referral to an ophthalmologist when appropriate if the candidate does not see the same patients over the 12 month period in the Grand Rounds Program?

Response: The Board's proposed response is to reject this comment. In the treatment of any patient an optometrist is obligated to refer the patient to an ophthalmologist or physician as required. The glaucoma education provided by the proposed regulation will result in a robust and thorough examination, decision making, evaluation, treatment and possible referral requirement that will provide a complete longitudinal learning experience which will meet or exceed the care and treatment of any single patient.

A timely referral can be made to an ophthalmologist or physician as required even though the same patients are not seen over a 12 month period since the candidate will need to make the decision when to refer the patient, regardless of the time frame a patient may be seen by the candidate.

Board members and staff discussed at which point optometrists became required to diagnose glaucoma by the Optometry Practice Act.

Ms. Leiva suggested adding: "Furthermore, optometrists have had the obligation to hold to the same standards as ophthalmology to detect glaucoma since the 1970's".

A comment by Ms. Burke was inaudible.

Dr. Goldstein noted that it's been in the Optometry Practice Act since the 1970's, but has been a standard of care for much longer.

A comment by Dr. Lawenda was inaudible.

Ms. Johnson suggested adding: "This long history of making timely referrals provides optometrists with the ability to make timely referrals for all patients seen".

Dr. Goldstein offered the following language for comment:

"The glaucoma education provided by the proposed regulation will result in a robust and thorough examination, decision making, evaluation and treatment, and possible referral requirement. Altogether this will provide a complete longitudinal learning experience that will meet or exceed the care and treatment of any single patient".

Dr. Goldstein opened the floor to more questions and comments by the Board.

Mr. Santiago explained why he doesn't think the response responds directly to the comment.

Ms. Maggio suggested that preceding the current text of the response, there should be an actual explanation of the Grand Rounds accredit that one will receive by completing the program. This will provide a clear explanation of how the Board interprets the program.

Dr. Yu noted that the Grand Rounds student needs to be able to make the referral decision regardless of when the patient is seen or the point of progression of the disease. This fact makes the 12 month period somewhat irrelevant.

Dr. Goldstein suggested the following language:

"In the treatment of any patient, an optometrist is obligated to refer that patient to an ophthalmologist or physician as required".

A comment by Dr. Lawenda was inaudible.

Board members agreed that the additions and amendments result in a complete and to-the-point response.

Comment (16) by CAEPS: How has this candidate developed the decision-making capacity to meet the definition of treat proposed by the Board if the patient is not required to be the subject of evaluation at subsequent meetings?

Response: The Board's proposed response is to reject this comment. The Board has no authority to require a patient to return for any subsequent evaluation by the candidate for glaucoma certification.

Dr. Goldstein stated his belief that the Board's response to comment 15 may be reiterated.

A comment by Dr. Lawenda was inaudible.

Comment (17) by CAEPS: The existence of two reports makes the findings and recommendations upon which the proposed regulations were based null and void.

Response: The Board's proposed response is to reject this comment. Neither report is binding on the Board since BPC section 3041.10 was repealed January 1, 2010.

Dr. Goldstein asked Mr. Santiago if the language meets the response requirements.

A comment by Mr. Santiago was inaudible.

A comment by Dr. Lawenda was inaudible.

Ms. Leiva suggested amending the response to read:

This comment is rejected because it does not address the modified text. Neither report is binding on the Board since BPC section 3041.10 was repealed January 1, 2010.

Comment (18) by CAEPS: The Board is attempting to promulgate a regulatory structure based upon two sets of recommendations issued by two groups.

Response: The Board's proposed response is to reject this comment because it does not address the modified text.

Dr. Goldstein requested members go back to Comment 12 to finalize the response.

California Medical Association (CMA) opposes the proposed regulation as modified for the following reasons:

Comment (1): The Board's modifications to the proposed regulation fail to meet the statutory requirements of BPC section 3041.10(a) because the modifications threaten patient safety.

Response: The Board's proposed response is to reject this comment for the reasons stated in the board's responses to the CAEPS' comments (1) and (4).

Dr. Goldstein opened the floor to questions and comments by the Board. There were no questions or comments.

Comment (2): The Board's modifications to the proposed regulation violate the consistency and authority standards in the California Administrative Procedure Act by defining treat in a way that conflicts with the definition of treat in the BPC section 3041.

Response: The Board's proposed response is to reject this comment. The definition of "treat" in the proposed regulation is not in conflict nor inconsistent with the definition of "treat" in BPC section 3041 because only a TPA-certified optometrists who is also glaucoma certified by the Board may use topical or oral anti-glaucoma agents to treat glaucoma. Different definitions of "treat" are appropriate and necessary in order to distinguish between applicants who cannot yet actually use anti-glaucoma medications and optometrists who are glaucoma certified.

Dr. Goldstein opened the floor to questions and comments by the Board. There were no questions or comments.

Comment (3): The proposed regulation would allow an optometrist to become glaucoma certified without ever physically treating a glaucoma patient.

Response: The Board's proposed response is to reject this comment because it is not commenting on the modified text. Also, the Board has already addressed these concerns, which were presented during the 45- day comment period (November 6, 2009 – December 21, 2009) and the first 15-day modified text. Although these concerns are now targeted at the second 15-day comment period, they are not new.

Dr. Goldstein opened the floor to questions and comments by the Board. There were no questions or comments.

Comment (4): A classroom oriented experience clearly cannot replace the experience one gains from participating in the treatment of live patients.

Response: The Board's proposed response is to reject this comment for the reasons stated in the Board's response to CAEPS' comment (6).

Dr. Goldstein recommended adding "for the reasons stated in the Board's responses to CAEPS' comments (15) and (16) as well.

Dr. Goldstein opened the floor to questions and comments by the Board. There were no questions or comments.

Comment (5): The Board's modifications to the proposed regulation violate the consistency and authority standards in the California Administrative Procedure Act because the Board was not granted the authority to state that the Case Management Course or the Grand Rounds Program is "equivalent" to prospectively treating 15 individual patients for 12 consecutive months.

Response: The Board's proposed response is to reject this comment for the reasons stated in the board's response to CAEPS' comment (6).

Dr. Goldstein advised adding (15) and (16) as well.

Dr. Goldstein opened the floor to questions and comments by the board. There were no questions or comments.

California Council of the Blind (CCB) opposes the proposed regulation as modified for the following reasons:

Comment (1): The modifications to the proposed regulation are extremely dangerous and would result in reduced quality of care that will cause more glaucoma patients to lose their sight.

Response: The Board's proposed response is to reject this comment for the reasons stated in the board's response to the CAEPS' comments (1) and (4).

Dr. Goldstein suggested adding (6), (15) and (16).

A comment by Dr. Lawenda was inaudible.

A comment by professional member, Dr. Alejandro Arredondo was inaudible.

Board members discussed and agreed that the purpose of SB 1406 is to provide more patients access to appropriate glaucoma diagnosis and treatment. The result will be greater quality of care, not a reduced quality.

Ms. Johnson suggested, and members agreed, adding the following text: "The legislative and regulatory process that has been followed to date pursuant to the mandate of SB 1406 safeguards California's consumers and has allowed for full review by all impacted persons to disprove any assumptions of a reduction in quality of care".

Comment (2): The proposed regulation's modifications define the word "treatment" in a way that would not be understood by a patient to be actual "treatment." Optometrists need adequate training to treat glaucoma, and this training must include actual treatment of patients with glaucoma.

Response: The Board's proposed response is to reject this comment. The Board is defining the word "treat," not "treatment." For the purposes of this regulation, treat had to be defined in a manner to comport with the aforementioned restriction in BPC section 3041. The definition of treat encompasses all the necessary steps that an optometrist must take in order to medically manage a glaucoma patient. Despite the fact that candidates for glaucoma certification are not allowed to use anti-glaucoma agents, they are working closely with individuals who are experienced with prescribing or applying anti-glaucoma agents and are participating in the proper evaluation of the patient, the performing of all necessary tests, the diagnosis of the patient, recognizing the type of glaucoma within their scope of practice, creating a treatment plan with proposed medications and target pressures, ongoing monitoring and reevaluation of the patient's condition, and making timely referrals to an ophthalmologist when appropriate. The candidate is in effect "treating" the patient without violating the requirement set forth in BPC section 3041 that only glaucoma certified optometrists may use anti-glaucoma medications to treat glaucoma. Thus, the definition of "treat" in the proposed regulation is consistent with the definition of "treat" in BPC section 3041 and does not compromise patient safety.

Dr. Goldstein opened the floor to questions and comments by the board.

Dr. Lawenda stated his dislike with using the word individuals and suggested professionals, doctors, or optometrists.

Mr. Santiago cautioned against using the word "certified" because not all optometrists are certified.

Dr. Goldstein opened the floor again to further comments or questions. There were no comments or questions.

Comment (3): The proposed regulation should be modified to require candidates for glaucoma certification to treat glaucoma patients under the supervision of a practitioner who is certified to treat glaucoma.

Response: The Board's proposed response is to reject this comment. Adding to the regulation a requirement that a candidate must be supervised by a practitioner who is certified to treat glaucoma would exclude other practitioners, such as ophthalmologists (who by profession do not have a glaucoma certification requirement to treat glaucoma), from the possible participation in the training of glaucoma candidates to become glaucoma certified.

Dr. Goldstein, Dr. Lawenda, Ms. Maggio, and Mr. Santiago discussed the need for clarity in the response.

Dr. Goldstein opened the floor to questions and comments by the Board.

Public member, Katrina Semmes suggested amending the text to read: "Who by licensure are not required to have glaucoma certification to treat glaucoma".

Dr. Goldstein open the floor to questions and comments by the Board. There were no comment or questions.

Dr. Goldstein then opened the floor to the public.

Mr. Joe Lang (spokesman for CAEPS) commented that the whole purpose of the Administrative Procedures Act is to allow public participation in the creation of a regulation. He only had a chance to review the Board's responses to his organization's comments that morning. Also, the fact that in this discussion, the public was not able to be involved and the individual who drafted the regulation was allowed to make changes and re-write responses to the comments, makes the process lack credibility.

He also expressed that the Board's interpretations of CAEPS' comments were inaccurate and the responses were non-responsive. The Board's responses to the comments do not follow the format of CAEPS' comments, so it makes it difficult to for them to determine if the Board answered their comments appropriately.

Mr. Lang then brought up a point, which in his opinion was "new", relating to the last comment the Board responded to from the CCB regarding ophthalmologists who are not certified by the Board of Optometry to treat glaucoma. He pointed out that as the regulation is currently written, individuals who would be instructing licensees in the glaucoma certification courses would not be required to be glaucoma certified. For the record, he clarified that this new issue was brought up at this Board meeting during the discussion of the comments by the Board members, not by him. Thus, he formally requested more time to review the responses.

Dr. Goldstein announced that Mr. Lang requested a delay based on Government Code section 11346.8(e) which states:

If a comment made at a public hearing raises a new issue concerning a proposed regulation and a member of the public requests additional time to respond to the new issue before the state agency takes final action, it is the intent of the legislature that rulemaking agencies consider granting the request for additional time if under the circumstances granting the request is practical and does not unduly delay action on the regulation.

Dr. Goldstein opened the floor to questions and comments by the Board.

Ms. Johnson added that the Board has had ample time to thoroughly address all of the issues that have ever been made. The granting of Mr. Lang's request in not only impractical and would unduly delay action, but it would also delay protection for California consumers and deny them access to the care they need.

Thus, the request for additional time was denied (see motion below).

A question by Ms. Burke was inaudible.

Dr. Goldstein opened the floor to comments by the public.

Mr. Berg commented that there was no new issues as Mr. Lang indicated.

Mr. Lang continued to comment. He countered the Board's response to CAEPS' comment #3 by pointing out that there is a conundrum with the regulation because the Board decided to define "treat" in such a way that it would not allow licensees to use medications during the glaucoma certification training process. There would be no conundrum if the Board would have just kept the definition of the word "treat" as it is currently defined in law. That is why the Board spent so much time discussing their response to comment #15, because there is an inherent conflict.

Mr. Lang then addressed CAEPS' comment #4. He pointed out that the Board uses the process mandated by 3041.10 to refute comment #4 but then in a later comment contradicts this response by stating that 3041.10 was repealed in January 1, 2010 and thus no longer applies to the proposed regulation. He feels that the Board cannot have it both ways.

Mr. Lang then addressed CAEPS' comment #5. He pointed out that the Board only used a partial portion of the OPES report to develop the new definition of "treat." The entire definition was not used, and it should have been. The Board "cherry-picked" and left out the points which were made in CAEPS' comments. How is it possible, if the Board adopted the OPES report in its entirety, that they thought they could pick and choose what to include in the definition of treat? The Board specifically left out the fact that an optometrist going through a certification process should learn about changing medications over a 12-month period.

Mr. Lang then addressed CAEPS' comments #6 and #7. He questioned the Board's authority regarding the allowance in the regulation to count the Case Management Course as a 15-patient credit. He does not feel that the Board has the authority to decide what is equivalent. He also feels that the Board did not adequately answer comments #6 and #7 because the Board did not understand what CAEPS was asking. Mr. Lang also questions the Board's authority to create a new definition of treat. He does not believe they do.

Mr. Lang then addressed CAEPS' comment #8. The new definition of "treat" brings into question the use of diagnostic lasers. The new definition makes it seem like optometrists can use lasers for the treatment of glaucoma. The word "treat" should not have been re-defined since it appears to raise more questions instead of offer solutions.

Mr. Lang then addressed CAEPS' comment # 9. For the Grand Rounds Program, it is not clear how many contacts will occur with each patient during the 12-month period. Also, the language of the regulation states that follow-up with the patients during the Grand Round Program does not need to be with the same patient. He asked how can a licensee know when to refer if they are not seeing the same patient? Mr. Lang disagrees with this reasoning and feels that it creates an inconsistency. Mr. Lang assures that comment #9 was not answered by the Board because they missed the whole point of the question. If he would have been allowed to comment in between responses, he could have assisted in the Board's understanding so that they could give an appropriate answer.

Mr. Lang asserted that if the Board would have worked cooperatively with CAEPS and their team, then their responses to CAEPS' comments wouldn't have missed the point.

Mr. Lang then pointed out that the Board's responses to comments #15 and #16 also missed the point, so they didn't respond to the comments.

Mr. Lang then addressed CAEPS' comment #17 regarding BPC section 3041.10. Again he reiterates that the Board's responses are contradictory regarding this section of law. It either applies to the regulation or it doesn't.

Mr. Lang then addressed sections 3 (a), (b), (c), (d), and (e) of one of CAEPS' comments regarding the definition of the word "Authority" as OAL would use it in approving the regulation. He claims there was no response to this comment from the Board.

Mr. Lang then addressed comment #14. He states that there have been multiple criticisms of the OPES report and that the Board's response that there weren't any criticisms is untrue. He also refutes the Board's reference in the Final Statement of Reasons pertaining to ophthalmology's agreement to the Grand Rounds Program as described in the regulation. The ophthalmologists never agreed to the Grand Rounds Program.

Dr. Goldstein interceded Mr. Lang's comments and requested that he please finish.

Mr. Lang responded to this request by expressing his frustration and sharing that he couldn't believe how the Board was able to respond in just 48 hours to 18 pages worth of carefully crafted comments that took two weeks to develop by CAEPS' lawyers, lobbyists and doctors.

Ms. Johnson clarified that Dr. Goldstein's request for Mr. Lang to wrap up his arguments was only so she could make a 1:00 p.m. conference call at her place of employment and had nothing to do with frustration concerning Mr. Lang's comments.

Mr. Lang explained he understood and commented that due to the Board's compacted time frame to complete responses to their comments, their comments were not addressed satisfactorily. He feels the Board should have taken more time to do this.

Mr. Berg expressed his support of the regulation and stated that the amendments are clear. He believes this regulation will increase access to treatment, which was the legislature's goal. CAEPS is using the definition of treat in the regulation as a "black hole" to bring up issues that do not exist.

Ms. Veronica Ramirez (California Medical Association) supported Mr. Lang's comments and stated that they continue to oppose the regulation as written.

Dr. David Turetsky, O.D. commented on his personal standpoint as a practitioner who deals mainly with nursing home facilities. Dr. Turetsky explained that there are certain counties in this state; in which, there are no ophthalmologists available to treat patients. If these patients are on Medi-Cal and in a skilled nursing facility, they are required to take medical transport 2 and ½ hours from Chico. By not having the ability to treat these patients in a comfortable and convenient manner, we are putting their ocular health at risk.

Dr. Turetsky also recommended adding "certification" to the last sentence of the response to CCB's comment (3) to read: "glaucoma certification candidates".

Alex Arredondo moved to deny the request for additional time based on the circumstance that granting the request is not practical and would unduly delay action on the regulation. Monica Johnson seconded. The Board voted (7 – Ayes; 0 – No: 1 abstention) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Arredondo	Х		
Ms. Johnson	Х		
Dr. Yu	Х		
Dr. Lawenda	Х		
Mr. Rendon	Х		
Ms. Semmes	Х		
Ms. Burke			Х

Kenneth Lawenda moved to approve the language of the modified text and to move the regulation package. Monica Johnson seconded. The Board voted (7 - Ayes; 0 - No; 1 abstention) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Arredondo	Х		

Ms. Johnson	Х	
Dr. Yu	X	
Dr. Lawenda	Х	
Mr. Rendon	Х	
Ms. Semmes	Х	
Ms. Burke		X

3. Discussion and Possible Approval of the Response Considering the Comment Submitted during the 45-Day Comment Period Pertaining to the Proposed Rulemaking, CCR, Title 16, Section 1536, Continuing Optometric Education

Ms. Leiva provided an overview of this agenda item.

Staff is requesting that the Board review and fully consider the comments received pertaining to California Code of Regulations (CCR), Section 1536, Continuing Optometric Education. The comments were received during the regulation's 45-day comment period. A proper response shows adequate consideration of the comment and thoroughly describes why the comment is being accepted or rejected.

Mary Schombert, Regulatory Specialist, Health & Safety Institute (HSI) opposed the text of the regulation for the following reason:

As currently worded, the regulation would allow that four CE credits be awarded <u>only</u> for CPR courses taught by the American Heart Association (AHA) or the American Red Cross (ARC). This restrictive wording would prevent the use of training programs produced by HSI under the brand names of American Safety & Health Institute (ASHI) and MEDIC First Aid. These two organizations have more than 30 years of experience producing emergency medical training programs.

Also, AHA and ARC collect training revenues from the sale of their proprietary training materials. Thus the Board's endorsement of AHA and ARC grants those organizations control of the Optometry training market. This will hurt ASHI and MEDIC First Aid training centers by shutting them out of the training market, and deprive California optometrists of equivalent training options that would benefit from a market economy.

HIS asks the Board to consider either adding ASHI and MEDIC First Aid by name to the approved CPR courses in the regulation or to consider adding equivalency wording to the regulation, extending acceptance of CPR programs to those produced by training providers that follow the guidelines of the AHA and require a hands-on training component for certification.

Staff recommends that the Board accept HSI's recommendation and agrees with its reasoning. Staff suggests amending the proposed language as requested by HSI.

Ms. Leiva provided the Board with three possible language suggestions.

Dr. Goldstein offered (and members agreed) that the option to accept is the one that states: "from the American Red Cross, the American Heart Association, or other association approved by the Board. This will allow the Board to look at guidelines in training and in establishing equivalency.

Kenneth Lawenda moved to accept the recommended language. Susy Yu seconded. The Board voted (7 - Ayes; 0 - No; 1 abstention) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Arredondo	Х		
Ms. Johnson	Х		
Dr. Yu	Х		
Dr. Lawenda	Х		

Mr. Rendon	Х	
Ms. Semmes	Х	
Ms. Burke		X

Kenneth Lawenda moved to give authority to the Executive Officer to move forward with the rulemaking package at the end of the 15-day comment period if no negative comments are received. Alejandro Arredondo seconded. The Board voted unanimous (8-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Arredondo	Х		
Ms. Johnson	Х		
Dr. Yu	Х		
Dr. Lawenda	Х		
Mr. Rendon	Х		
Ms. Semmes	Х		
Ms. Burke	Х		

4. Discussion and Possible Approval of the Response Considering the Comment Submitted during the 45-Day Comment Period Pertaining to the Proposed Rulemaking, CCR, Title 16, Sections 1518, 1523, 1531, 1532, 1533 and 1561, Fictitious Name Permits, Licensing and Examinations

Ms. Leiva provided an overview of this agenda item.

Ms. Leiva reported that during the 45-day comment period, only one comment was received. Dr. Jim Kane opposes the regulation for the following reasons:

- 1. A five time increase of the fee from ten to fifty dollars is onerous.
- 2. Requiring that this fee be paid every year should certainly not be necessary and appears to be another revenue-based imposition.
- 3. A Fictitious Business Name should belong to the person who devised it, registered it with the state, paid for it, filed paperwork with the Board for it and paid to publish it. It should not be the dictate of the Board to direct sellers of the practice to freely or automatically include it in the transition of practice ownership unless that is the wish of the selling doctor. Some names have significant and separate values from the practice itself and the owner of that name may choose to re-register that name and continue the use of it in another part of the state as part of the new office. A business name has stand-alone proprietary value and should not be de-valued by government agency mandate.

The Board's proposed response to comment 1 is to reject Dr. Kane's comments for the following reasons:

- 1. This regulatory package does not increase Fictitious Name Permit fees. The fee increase that this regulation is reflecting became effective on April 28, 2009 upon the Secretary of State's approval of another rulemaking package pertaining to CCR section 1524, Fees. This proposed regulation is being updated to match subsection (h) of CCR section 1524, which increased the Fictitious Name Permit renewal fee from \$10 to \$50. CCR section 1518 should have been amended at the same time that CCR section 1524 was amended for consistency, but there was an oversight by previous Board staff.
- 2. Also, prior to 2009, the Board's last fee increase was implemented in 1993 (17 years ago) and was insufficient to support Board operations beyond Fiscal Year 2007/08. An analysis was conducted in order to determine the fee increases required for Board operations to continue. Changing the fee from \$10 to \$50 was the most reasonable solution so the Board could continue its operations, thus this fee is not onerous, but necessary.

The Board's proposed response to comment 2 is to reject the comment because payment of the Fictitious Name Permit Fee must be paid yearly and is not a revenue-based imposition. The annual requirement is not new and was only added to the regulation for clarity purposes and to match prior regulations.

Since 1997, the Board has been requiring that the Fictitious Name Permit renewal fee be paid every year pursuant to CCR section 1524. Adding this language to CCR 1518 will improve Board operations by properly informing licensees, who are not familiar with other regulations, what they need to do when it comes to maintaining their Fictitious Name.

The Board's proposed response to comment 3 is to reject the comment because it is irrelevant for the purposes of this rulemaking. The concern does not address any of the proposed changes.

Dr. Goldstein opened the floor to comments by the Board and public. There were no comments.

Donna Burke moved to accept the responses and move the rulemaking package. Edward Rendon seconded. The Board voted unanimously (8-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Arredondo	Х		
Ms. Johnson	Х		
Dr. Yu	Х		
Dr. Lawenda	Х		
Mr. Rendon	Х		
Ms. Semmes	Х		
Ms. Burke	Х		

5. Approval of Board Meeting Minutes

- A. March 16, 2010
- B. March 25-26, 2010
- C. May 11, 2010
- D. September 24, 2010
- E. October 4, 2010

Alejandro Arredondo moved to approve the minutes. Kenneth Lawenda seconded. The Board voted (7 - Ayes; 0 - No; 1 - Abstention) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Arredondo	Х		
Ms. Johnson	Х		
Dr. Yu	Х		
Dr. Lawenda	Х		
Mr. Rendon	Х		
Ms. Semmes	Х		
Ms. Burke			X

6. Public Comment for Items Not on the Agenda

Ms. Maggio announced that a representative with the Citizens Advocacy Center is scheduled to come out and speak on Board competency. The individual who heads up the center (which is housed in Washington DC) will be in Sacramento January 5, 6, 7, 2011. He is willing to meet with the Board.

Ms. Maggio and Dr. Goldstein discussed holding a teleconference meeting in late November/early December. This would provide an opportunity to discuss enforcement cases.

Dr. Lawenda reported that the National Board of Examiners in Optometry (NBEO) had a conference call with a number of state's representatives as well as various schools of optometry. The NBEO will be changing the part 3 to a single testing site. Additionally, injection will be added to the testing.

Dr. Goldstein announced that the Board will be holding another Halloween press conference on October 26, 2010 to reach out to high school students.

Dr. Goldstein opened the floor to comments by the Board. There were no comments.

7. Adjournment

Kenneth Lawenda moved to adjourn the meeting. Katrina Semmes seconded. The Board voted unanimously 8-0 to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Arredondo	Х		
Ms. Johnson	Х		
Dr. Yu	Х		
Dr. Lawenda	Х		
Mr. Rendon	Х		
Ms. Semmes	Х		
Ms. Burke	Х		

Date



STATE BOARD OF OPTOMETRY

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Meeting Minutes January 11, 2011

DRAFT 2

California State Board of Optometry Elihu Harris Building 1515 Clay Street, Room 15 Oakland, CA 94612

Members Present

Lee Goldstein, OD, MPA
Board President
Alejandro Arredondo, OD
Board Vice President
Monica Johnson
Board Secretary
Susy Yu, OD, MBA, FAAO
Fred Naranjo, MBA, Public Member
Donna Burke, Public Member
Alexander Kim, MBA, Public Member
Kenneth Lawenda, OD

Members Absent (Excused)
Edward Rendon, MA, Public Member

Staff Present

Mona Maggio, Executive Officer Margie McGavin, Enforcement Manager Andrea Levia, Policy Analyst Jessica Sieferman, Probation Monitor Jeff Robinson, Lead Licensing Analyst Michael Santiago, Staff Counsel Char Sachson, Deputy Attorney General

Guest List On File

Tuesday, January 11, 2011 10:00 a.m.

FULL BOARD OPEN SESSION

1. Call to Order – Establishment of a Quorum

Board President, Lee Goldstein, OD called the meeting to order at 10:01 a.m. Dr. Goldstein called roll and a quorum was established. Board members, staff, and members of the audience were invited to introduce themselves.

Public member, Fred Naranjo arrived at 10:24 a.m.

2. President's Report

A. Welcome and Introductions

Dr. Goldstein welcomed the Board's two new public members, Donna Burke and Alexander Kim. Dr. Goldstein noted that he had attended every Board meeting held in the last eight years and that Enforcement Manager, Margie McGavin had also attended every Board meeting since her hire date.

Dr. Goldstein reported that the Department of Consumer Affairs (DCA) Board Chairs have engaged in monthly conference calls. The Podiatry Board initiated communication

regarding continuing competency. In general these conference calls have been very useful, sometimes resulting in reports to the Board President.

Dr. Goldstein announced two upcoming meetings related to the California Optometric Association (COA):

- 1) House of Delegates February 4-5, 2011 Visalia Marriott
- Dr. Goldstein will be on the panel of this annual meeting which covers topics important to the profession. Chief topic of discussion from the Board will be glaucoma certification.
- 2) Legislative Day March 23, 2011
- All optometrists are welcome to attend and participate.

3. Approval of Board Meeting Minutes

A. July 28, 2010 Meeting

Kenneth Lawenda moved to accept the July 28, 2010 minutes. Alejandro Arredondo seconded. The Board voted (4 - Ayes; 0 - No; 3 - Abstention) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Ms. Johnson			Х
Ms. Burke			Х
Mr. Kim			Х

B. October 22, 2010 Meeting

Dr. Goldstein, public member Monica Johnson, and Dr. Craig Kliger (representing the California Academy of Eye Physicians and Surgeons) discussed their concerns that some comments were noted as inaudible. It is their belief that not all of the comments noted as inaudible are completely inaudible, and the October 22, 2010 minutes should be revised to include all comments received.

Monica Johnson moved to continue approval of the October 22, 2010 minutes and direct staff to revise the minutes to reflect all comments received from Board and public members. Kenneth Lawenda seconded. The Board voted (6 - Ayes; 0 - No; 1 - Abstention) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Ms. Johnson	Х		
Ms. Burke	Х		
Mr. Kim			X

4. Director's Report

Representative from the Department of Consumer Affairs (DCA)

Gil De Luna, representing DCA Director, Brian Stiger, welcomed the new Board members. Mr. De Luna reported on the following:

- Chief Deputy Director, Bill Young has retired. Deputy Director, Board and Bureau Relations, Kimberly Kirchmeyer has taken over some of Mr. Young's duties. Mr. De Luna reports that he has taken over some of Ms. Kirchmeyer's duties as well.
- On August 31, 2010 the DCA received Governor Schwarzenegger's directive to cease hiring of employees, only allowing interdepartmental transfers. The Department has continued to follow this directive, and is working to determine the exemption process under the new administration.
- The Department continues to encourage this Board to move forward with the Consumer Protection and Enforcement Initiative (CPEI) regulations in order to expedite the Board's investigation and prosecution processes. DCA has completed gathering data on the performance measurements and they are posted on the DCA website. These measurements address cycle time, volume of complaints, customer service, and probation monitoring. The department encourages this Board to review these performance measurements, which include timelines for processing the Board's complaints and disciplinary actions.
- The Department wants to thank this Board for moving forward with implementation of Senate Bill (SB) 1441 "Uniform Standards". The Department encourages this Board to move forward with the regulatory process for the amendments.
- The Department also encourages this Board to webcast as needed. DCA can provide
 this service to the Board, which improves transparency and assists with auditory
 issues. Additionally encouraged is the posting of meeting materials on the Board's
 website.
- The BreEZe project is moving forward, and Sean O'Conner with the Board of Behavioral Sciences (BSS) will provide a report later in this meeting.
- DCA is changing the way it pays its expert consultants. A contract will need to be in place for all of those who assist with enforcement and testing.

Mr. De Luna opened the floor to questions. Ms. Johnson inquired about two issues:

- 1) Does the hiring freeze apply to all boards, even if they're a special funded board? Mr. De Luna responded: "Yes".
- 2) Does a timeline exist for which board meeting materials are to be posted on board websites? Mr. De Luna responded: "The agenda materials can be posted later, but the actual agenda should be posted no later than 10 days prior to the meeting".

Dr. Kenneth Lawenda inquired and he, Ms. Johnson, and Mr. De Luna discussed that sensitive material should be redacted before web posting. Material posted on the website should be solely for the public. Mr. De Luna added that if the meeting is webcasted, the posted agenda should note that there is webcasting. The DCA has two mobile units that can come and webcast meetings.

Public member, Donna Burke inquired as to what impact the hiring freeze may have on the Department and what level of vacancies exist. Mr. De Luna responded that the freeze has definitely impacted every board and bureau. If there's a vacancy within a department, an employee may transfer but both parties have to agree, which makes transferring difficult. At this time, it is very difficult for an employee to promote. The freeze has impacted individual workloads. He concluded that under the current economic crises, we must do whatever we can.

Policy Analyst, Andrea Leiva asked how far in advance are we required to have expert witness contracts in place? Mr. De Luna responded that the contracts process is a 90 day process.

5. Executive Officer's Report

Executive Officer, Mona Maggio introduced DCA Budget Manager, Cynthia Dines. Ms. Dines provided a presentation of the Board's budget.

A. Budget Update

Ms. Dines provided an analysis of the Board's fund condition. The Board began fiscal year (FY) 2009/10 with a beginning balance of \$806,000 + a prior year adjustment of \$9,000 equaling \$815,000. Revenues and transfers and total resources brought the balance to \$2,388,000. The Board's expenditures totaled \$1,167,000 leaving a fund balance of 1.2 million. This is a very good figure, and where we want to be. The Board could operate 8.9 months without receiving any revenue into the next year. Ms. Dines answered questions from members (i.e budget change proposals, budget authority, hiring).

Dr. Kliger asked if any history has been maintained regarding budget fluctuations. Ms. Dine explained that the Board has never had a cash flow issue with expenditures during times of lower revenue; and that, we have enough of a revenue base to offset the months where less revenue is received.

Ms. Dines provided a summary of the Governor's proposed budget. She reported on healthcare adjustments, workforce cap, position cuts, and the impact on the boards and bureaus' operations. She provided a summary of the Board of Optometry FY 2010-11 expenditure projection and reported that budgets projects the Board of Optometry will realize a savings of about 6.2% of its budget.

B. Board Operations

Ms. Maggio reported that the Architectural drawings for our move are near completion and will be submitted for permits. Plan checks typically take any where from 1-8 weeks. Once permitted, it's anticipated there will be four weeks of construction. We hope to take occupancy by April.

She stated there are, currently, nine Board members, and two member vacancies, one professional member and one public member. Both are gubernatorial appointments.

Public member, Fred Naranjo asked why our rent for office space will double. Ms. Maggio explained that several of our enforcement staff are currently housed in the Bureau of Security and Investigative Services (BSIS) due to insufficient office space. Ms. Maggio added that our revenue base should be sufficient for both a manager position and the doubling of our rent. Ms. Maggio explained that there are few options and flexibility, in choosing where and how boards and bureaus move. Ms. Dines provided an overview of the very specific process that has to be undertaken for a move to occur.

Dr. Kliger questioned (from a public standpoint), is there a process in place for ensuring the Board does not overspend creating a public safety issue. Ms. Maggio responded that the budget office is that safety net. It's the budget Office's responsibility to make certain every board and bureau does not overspend on its budget or create a situation that would cause harm in any fiscal year. She provided examples of how this works.

C. Selection of Board Meeting Dates for 2011

Board members and staff discussed future meeting dates. The dates agreed upon are as follows:

April 11 or 12 in Los Angeles

- August 5 in Sacramento
- November 4 in Southern California

D. Other

There was nothing else reported.

6. Examination/Licensing Program Report

Policy Analyst, Andrea Leiva reported on the following:

A. California Laws and Regulations Examination (CLRE)

Ms. Leiva stated that in 2011 the Board will hold four workshops to develop 2011 – 2012's CLRE. She reported that a variety of licensees continue to apply to the workshops and thanks to them, we have a fair, psychometrically sound, valid, and legally defensible examination.

The upcoming workshops are as follows:

- March 27-28, 2011 (Sunday & Monday): Item Writing and Review Workshop and
- April 24-25, 2011 (Sunday & Monday): Item Writing and Review Workshop
 Purpose: To review the current questions in the California Laws and Regulations
 examination and to write new questions. Participants will receive training on how
 to write an exam question and will work in conjunction with a testing specialist to
 develop examination questions. Worth 8 CE credits.
- June 13, 2011 (Monday): Exam Construction
 Purpose: In this workshop, subject matter experts will select questions for the 2011 California Laws and Regulations Examinations. Participants will evaluate items for each content area included in the examination and select those that best represent the knowledge required for entry into the profession. Worth 4 CE credits.
- June 27, 2011 (Monday): Passing Score

Purpose: This workshop establishes the passing score of the 2011 California Laws and Regulations Examinations. Under the facilitation of a testing specialist, participants will apply minimum competence standard to establish a criterion-referenced passing score. **Worth 4 CE credits**.

December 2, 2010, staff attended a client and vendor meeting with the Board's CLRE vendor, Psychological Services Inc. (PSI). These meetings are held annually to ensure that PSI is meeting the needs of their computer-based testing clients. It was established at this meeting that PSI continues to be the DCA's testing vendor of choice and this was reflected by the positive scores they received in a customer satisfaction survey completed by all participating programs prior to the meeting.

B. National Board of Examiners in Optometry (NBEO)

Lead Licensing Analyst, Jeff Robinson reported on the NBEO's announcement of the opening of their Clinical Skill Examination (CSE) center.

C. Operational Improvements

Mr. Robinson provided an overview of operational improvements.

Last September, the NBEO announced the conversion of its twice-yearly administration of Part III CSE to a more stable, consistently administered examination than what is currently provided. This format will allow candidates to take the examination at one site, the NBEO's National Center of Clinical Testing in Optometry (NCCTO) located in Charlotte, NC, throughout the year. It is the NBEO's belief that

this new format will allow "great flexibility in the timing of the evaluation of a candidate's clinical optometric skills."

Job Creation Initiative.

In September, 2010 per the direction of the Governor's Office, the DCA's Licensing for Job Creation Unit (LJC) began collecting optometrist license statistics to better gauge the processing time required from the submission of an application for licensure to the date of issuance of the license. The information gathered is meant to relate to the Governor's Office and the California State and Consumer Services Agency (SCSA) how quickly an applicant for a California optometrist license can begin their contribution to California's work force after an application for licensure has been received.

D. Program Statistics

Mr. Robinson provided a report on the Board's licensing statistics through the end of November 2010. He noted that a section of his report indicates an abnormally high percentage of pending applications which more often than not isn't an accurate statistic. Status codes and descriptions need to be manually entered into the Applicant Tracking System (ATS) electronic file. This is a slow process but once completed the percentages will change dramatically.

7. Enforcement Program Report

Press Conference

Enforcement Manager, Margie McGavin reported that on October 26, 2010, the California State Board of Optometry hosted a press conference at the Spirit Halloween Store located within the Arden Fair Mall in Sacramento. Media covering this event included News 10 Sacramento, Capitol Television news Service, DCA Media Department, and Capitol Weekly newspaper. A photo of a staff member was featured in the November 4, 2010 issue of Capitol Weekly.

Dr. Goldstein addressed the media about the dangers of purchasing cosmetic contact lenses without a prescription from an unlicensed individual. Additionally, Mr. Naranjo made a plea for public awareness due to the potential of serious eye health problems that can occur from wearing lenses without the proper fit and care instructions necessary to maintain eye health.

To garner further public attention, Board staff dressed in costumes and modeled a variety of decorative lenses, including the red contacts featured on *Twilight* vampires, jaguar eyes, and flames.

A. Unlicensed Activity

Ms. McGavin provided an overview of unlicensed activity. Since April 2010, the Board has received fifteen complaints against unlicensed vendors (retail stores, tattoo parlors, gas stations, etc.) selling cosmetic contact lenses. Upon receipt of these complaints, Enforcement staff issues an "Educational Letter" detailing the laws and regulations related to the matter, specifically stating that it is unlawful to dispense lenses without a prescription. If the vendor does not respond to two of the Board's attempts to gain compliance, the case is forwarded to the Division of Investigation for confirmation of sales and issuance of a misdemeanor citation to a clothing store.

The Board also recruited the Unlicensed Activity Unit (ULA), within the Division of Investigation, to pursue their own findings of unlicensed activity related to the sale of cosmetic lenses. ULA dispensed Educational Letters to twenty two vendors and

received nine notices of compliance. Due to an exemplified lack of follow-through, the Board has elected to discontinue services with ULA at this time.

Ms. McGavin and Board members discussed methods of educating the public and the vendors, how vendors obtain the cosmetic lenses, and how staff finds out about this unlicensed activity.

Training

Ms. McGavin reported that on October 25, 2010, enforcement staff members, Cheree Kimball, Jessica Sieferman, Lydia Bracco, and herself attended a training course administered by the Department of Consumer Affairs which was conducted by the DCA's biological fluid testing vendor, Pharmatech. This course, titled "Understanding the Drug Testing Process" was designed to provide information regarding the roles and responsibilities of the board/bureau and their licensees. It also provided information regarding various types of drugs, their brand and street names, methods of administration, effects on the user, signs of use and the types of detection tests used by the vendor.

Ms. Kimball and Ms. Sieferman have been actively involved in the DCA's design of the new database system, BreEZe. They have been diligently working with the team on identifying the processes to be used by DCA's boards and bureaus in both the enforcement and licensing areas. They have dedicated a significant amount of time to this project, which has been an important investment to ensure the Board's processing needs and requirements are met.

B. Fingerprint Program

Ms. McGavin provided an overview of the fingerprint program. In order to identify the number of licensees who did not have fingerprints on file, staff used data from the Department of Justice (DOJ) and the Board's records. It was found that more licensees than expected had either not submitted fingerprints, or if they had, the fingerprints were not sent to the Federal Bureau of Investigation (FBI), which is now a requirement.

C. <u>Probation Program</u>

Probation Monitor, Jessica Sieferman reported on the Probation Program. Ms. Sieferman met with the Board of Registered Nursing (BRN), to explore the feasibility of creating an ACCESS database, similar to that of BRN's, in order to more accurately capture probation statistics. After the meeting, it was determined that creating such a database would not be in the Board's best interest. Instead, Board staff continues to clean the data in the Consumer Affairs System (CAS) in preparation for DCA's BreEZe database.

Phamatech, DCA's biological fluid testing vendor, continues to randomly drug test probationers throughout California. In addition, Phamatech has made various arrangements with collection sites throughout the country to accommodate DCA with traveling probationers. To date, the Board has had probationers drug tested in California, Oregon, Washington, and Georgia.

Ms. Sieferman announced that on January 6, 2011, she conducted probation interviews at the Division of Investigation (DOI) in Ontario, California. More interviews are scheduled at the DOI in Sacramento, California on January 20, 2011. These interviews are to review and ensure compliance of each term and condition of their stipulated settlement/decision and disciplinary order.

Ms. Sieferman and Ms. Maggio are actively participating in DCA's Probation Monitoring Workgroup. This workgroup is creating a class and manual for all probation monitors throughout DCA.

Ms. Sieferman provided an overview of the Probation Program Statistics for the Board.

Ms. Sieferman, Drs' Goldstein and Lawenda, Ms. Johnson, and Ms. McGavin discussed the probation program's tolling system.

D. Expert Witness Training

Ms. McGavin provided an overview of the Expert Witness Training Program, which the Board's Enforcement Unit is developing for new Expert Witnesses. It is estimated to take place in Fall 2011. The Board seeks to recruit optometrists whose licenses are in good standing and who have a comprehensive understanding of the Board's laws and regulations as well as an ability to determine the Standard of Care as it relates to their review of complaint cases.

In preparation for training, the Board will post a recruitment link to the Website's homepage as well as implement a mass-mailing to optometrists who have been licensed for three to ten years. Additionally, the Board will develop an Expert Witness handbook that will be included in a training packet as reference material.

E. <u>Statistics/Performance Measures</u>

Ms. McGavin provided a report of closed and pending disciplinary cases.

Deputy Attorney General, Char Sachson, Ms. McGavin, and Board members discussed the accusation/conviction process.

8. DCA BreEZe Project

A. <u>Presentation by Sean O'Connor, DCA BreEZe Business Project Manager</u> Sean O'Connor provided a summary of the BreEZE Project and answered questions. He explained his role as the liaison between Boards and Bureaus and the BreEZe

Project Team to ensure the BreEZe system meets the business needs of its users. He announced that he feels qualified for this project because he has over ten years of civil service experience, all gained at the California Department of Consumer Affairs.

Mr. O'Connor presented an overview of the scope and status of BreEZe. He explained that BreEZe is the modernized licensing and enforcement database that will replace the Department of Consumer Affair's current legacy systems.

B. Bidder Work Sessions

The Department does not want to bring in a person to custom build a system as there are inherent dangers in that endeavour. Rather the Department wishes to procure a preformed licensing database that can be configured to suit our needs. The database will work similar to Microsoft Windows. There will be software upgrades throughout.

The Bidder Work Sessions were comprised of representative (Subject Matter Experts) from the various boards and bureaus under DCA, the BreEZe Project Team and potential solution vendors. Enforcement Analyst, Cheree Kimball, and Probation Monitor, Jessica Sieferman represented the Board in the Working Sessions. These work sessions lasted seventeen business days over most of October and the first week of November.

Once the bid process has concluded and the final BreEZe Project has been awarded to a vendor, working sessions will resume. These sessions will again go over the project requirements, this time with the goal of building the final product and ensuring that it meets the business needs of DCA and boards and bureaus under DCA.

C. Forms Workgroup

Ms. Leiva reported on the Forms Workshop. This Workgroup meets twice a month and is comprised of representatives from the various boards and bureaus under the DCA. Ms. Leiva is representing the Board in this workgroup.

This Workgroup's efforts are intended to streamline and simplify the DCA's forms inventory in preparation for BreEZe implementation. The extent to which standardization is achieved is anticipated to correspondingly offset BreEZe development costs.

Ms. Leiva announced that the Workgroup is currently in the process of finalizing a complaint form package for consumers which will contain the following: A Consumer Complaint Form, Authorization for Release of Patient Records, and an Acknowledgement Letter to Consumer of Receipt of Complaint. Upon completion of the complaint form package, the Workgroup will begin to standardize business forms and applications, such as Fictitious Name Permits, Branch Office Licenses, and Statement of Licensures. The Workgroup's target completion date is sometime in July 2011.

D. Reports Workgroup

Ms. Sieferman provided an overview of the Reports Workgroup which is comprised of representatives from the various boards and bureaus under DCA. Ms. Sieferman is representing the Board in this Workgroup.

The Reports Workgroup's goal was to develop and document reporting requirements for the BreEZe Request For Proposal to ensure the selected vendor's solution will meet the BreEZe users and stakeholders reporting needs. To accomplish this, the Workgroup has completed an inventory of existing reports, identified relevant existing reports that need to continue in the new system, and determined any additional reports needed by users and stakeholders. The completion of this Workgroup was December 15, 2010.

E. Data Conversion Workgroup

Ms. Sieferman reported on the Data Conversion Workgroup which meets once a week and is comprised of representatives from the various boards and bureaus under the DCA. Ms. Sieferman is representing the Board in this workgroup.

She explained that the ultimate goal of the Workgroup is to facilitate a smooth data conversion process for the BreEZe Project. To achieve this goal, the Workgroup will study and draw conclusions about the quality of existing source data and then develop policies, guidelines, and business rules related to the conversion of that source data into the new or targeted BreEZe system. The Workgroup must also identify the existing data that can be deleted due to retention schedules. In addition, the Workgroup will document its results, conclusions, policies, and guidelines in a clear and comprehensive manner.

The Workgroup is now focusing on its next deliverable, the Data Cleanliness Study. In order to identify data that must be converted into the BreEZe system, boards and bureaus completed a survey of secondary databases that are used to track data outside of Consumer Affairs Systems (CAS) and Applicant Tracking System (ATS).

This survey identified over 200 secondary databases; however, half of these databases are estimated to serve the same functionalities of ATS and CAS and, if entered into ATS and CAS, may not need additional conversion. The Workgroup is currently contacting those boards and bureaus utilizing the secondary databases to identify exactly what data cannot be entered into ATS and CAS.

9. Review of Rulemaking Calendar

A. Discussion and Possible Approval of Response Considering the Comment Submitted During the 15-day Comment Period Pertaining to the Proposed Rulemaking, California Code of Regulations (CCR), Title 16, Section 1536, Continuing Optometric Education

Ms. Leiva provided an update of CCR, Title 16, Section 1536. She reported that this regulation was posted for an additional 15-day comment period because of a comment received against the regulation. The comment received was from Adolphus Lages, OD who disagrees with #2, Teaching. He states that "Every optometrist should have equal opportunity to earn credits, but only a few educators would qualify in this case. All optometrists are not asked to give a class, and on top of this, they are getting paid."

Staff Recommendation

Staff recommends that the Board reject Dr. Lages' comment because it does not pertain to any of the proposed changes being made to the regulation or the modified text. Furthermore, Dr. Lages' reasoning is incorrect. The regulation states:

"Teaching of continuing optometric education courses if attendance at such course would also quality for such credit, providing none are duplicate courses within the two-year period."

Thus, even if an educator gave the course regularly, they would only be able to get credit for teaching the course one time in two years. Since the course has to also provide continuing education for those optometrists who are not educators, then any optometrist could gain the same amount of continuing education by just attending the course. This type of arrangement results in all optometrists earning credits through equal opportunity. The comment from Dr. Lages that the educators are getting paid is out of the Board's control. If teaching the course, or just taking the course, result in the same amount of CE credit being obtained by the participant, then that individual has met the Board's requirements.

Monica Johnson moved to reject the comment and move forward with CCR Section 1536. Donna Burke seconded. The Board voted unanimously (6-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Ms. Johnson	Х		
Mr. Kim	Х		

Dr. Goldstein commented on section (5) which states that four hours of CE credit shall be granted for a cardiopulmonary resuscitation (CPR) course from the American Red Cross or the American Heart Association. He noted that at the last Board meeting, this was amended to include "or course approved by the Board. He wants to make certain we continue with the amended wording.

Dr. Kliger commented on section (i) which states:

"The following licensees shall be exempt from the requirements of this section:

(1) Any licensee serving in the regular armed forces of the United States during any part of the two years immediately preceding the license expiration date."
He noted that should an individual continue in the armed forces for more then two years, they would never have to do the CE.

Dr. Goldstein responded and noted that it is assumed that while they may be licensed in California, they are obtaining their CE licensure courses through the umbrella of the armed forces.

B. Status of Title 16, CCR Sections 1520, Infection Control Guidelines, 1518, Fictitious or Group Names, 1523, Licensure Examination Requirements, 1531, Licensure Examination, 1532, Re-Examination, and 1561 Topical Pharmaceutical Agents Usage – Purpose and Requirements

Ms. Leiva reported on section 1520. This regulation was approved by the office of Administrative Law (OAL) on December 20, 2010 and will become effective January 19, 2011. She announced that staff will post the approved language on the Board's website, update the California Laws and Regulation's Book, and create a user-friendly factsheet for licensee's and the public's reference which will also be posted on the Board's website.

Ms. Leiva added that Section's 1518, 1523, 1531, 1532, and 1561 were all part of the same rulemaking package. They were all submitted to the OAL for approval on December 29, 2010. Now we are just awaiting feedback from the OAL.

C. Status of Title 16, CCR Section 1571, Requirements for Glaucoma Certification

Ms. Leiva reported that these requirements became effective January 8, 2011. The next steps are as follows:

- Pursuant to the regulation, the accredited California schools and colleges of optometry must cooperatively develop the Case Management Course and Grand Rounds Program, which must then be approved by the Board. The Board will be establishing a committee in order to accomplish this final requirement and will be determining potential dates for this committee to meet.
- Staff is finalizing an inter-agency agreement to hire a consultant from California State University in order to facilitate the upcoming meetings to develop the two courses with the schools and colleges of optometry.
- Staff has sent out invitations requesting participation to the Southern California College of Optometry (SCCO), UC Berkeley School of Optometry, and Western University of Health Sciences College of Optometry. Staff is requesting two representatives from each school. The schools have been asked to consider the following criteria when choosing participants for this important committee:
 - 1) A thorough understanding of their school's curriculum, resources, staff strengths, etc.,
 - 2) The ability to be a strong decision-maker, and
 - 3) The ability to speak authoritatively for their school.

Ms. Leiva announced that Dr. Goldstein will serve as Chair of the committee, and Ms. Maggio will serve as the Vice Chair. Dr. Alex Arredondo will also be participating in the committee.

Ms. Leiva reported that staff has been receiving many calls from California licensees interested in beginning CCR 1571's Preceptorship Program. A proposed response form has been developed that can be used by licensees to track the glaucoma patients preceptored. Included with that form is an application for glaucoma certification which must be turned in to the Board upon completion of the program. Staff requests that the Board review the form and application to ensure its adequacy for certification purposes.

Dr. Kliger asked, for the treatment of glaucoma, who will write the prescriptions. Dr. Goldstein replied that the person who can legally write the prescription will be the one to write it. Dr. Kliger expressed his belief that this should be clarified more fully in writing so that it isn't missed by those involved.

Dr. Kliger described his regret that the two professions have not been able to develop regulations acceptable to both groups. He restated his group's belief that patient safety is at risk, and announced the California Academy of Eye Physicians and Surgeon's (CAEPS) filing of a lawsuit against the Board. He restated his belief that his organization's proposals were rebuffed by the Board and the California Optometric Association (COA).

D. Discussion and Action to Approve Draft Language and Recommend to the Board to Commence a Rulemaking to Add and Amend Regulations Pertaining to Senate Bill (SB) 1111 to Division 15, Title 16 of the CCR

This discussion was deferred to the next Board meeting.

E. Discussion and Action to Approve Draft Language and Update Disciplinary Guidelines and Recommend to the Board to Commence a Rulemaking to Add and Amend Regulations Pertaining to SB 1441 to Division 15, Title 16 of the CCR

This discussion was deferred to the next Board meeting.

Legal counsel, enforcement staff, Board members, and Dr. Kliger discussed proposed language changes of Title 16 of the CCR, and reasons for the changes, for the following sections/subsections:

- 720.2(b) Board delegation to the Executive Officer regarding stipulated settlements to revoke or surrender license,
- 720.10 Revocation for sexual misconduct,
- 726(a) and (b) Sexual misconduct,
- 720.12 Denial of application for registered sex offender,
- 720.14 Confidentiality agreements regarding settlements,
- 720.16(d) and (f) Failure to provide documents,
- 720.18(d) Failure to comply with court order,
- 737 Failure to provide information or cooperate in an investigation,
- 802.1 Failure to report an arrest, conviction, etc.,
- 720.32 Psychological or medical evaluation of applicant.

Ms. Sachson expressed her concern that automatic revocation for sexual misconduct is to severe/restrictive. It removes the Board's discretion to make decisions on a case by case basis.

Legal counsel, enforcement staff, Board members, and Dr. Kliger discussed SB 1441 (Ridley-Thomas) Uniform Standards Regarding Substance-Abusing Healing Arts Licensees.

Ms. Sachson explained that this regulation would result in an automatic suspension of licensure. She envisions a licensee who's had a few DUI's followed by being a year or two sober and now their going to be suspended from practice. Her opinion is that this seems extreme.

Ms. Sachson expressed another concern that the 30 day suspension for negative drug testing will have a huge impact on trying to settle cases. She believes that the practical implications would be so burdensome that individuals will choose to go to hearing and take their chances with a judge rather than try to settle.

Ms. Sachson stated that "major violations" can be just about anything. Any infraction of code, such as failing to update their address, could be considered a "major" violation according to the language.

Ms. Leiva and Mr. Santiago replied that because the Uniform Standards have been adopted, we cannot make Ms. Sachson's suggested changes.

Ms. Sachson commented that the posting of a notice of probation in the office of a probationer will be viewed as punitive. She argued "we are in the business of rehabilitating and disciplining probationers, not in punishing them. She believes this requirement will put a lot of licensees out of business.

DCA Board/Bureau Relations Representative, Gil DeLuna reiterated that consumer protection is paramount. It's the boards/bureaus and the Department's responsibility to protect the public.

Ms. Sachson replied that "disciplinary information is available to the public on the internet. This is going to put people out of business which we are not in the business of doing".

Board members, Legal Counsel, and staff discussed moving this term to an optional term.

Ms. Sachson's final concern is that of the requirement to re-take and pass the licensure examinations. She explained this is a "standard term". It's not optional, which subjects every probationer to re-licensure examination.

Ms. Maggio responded that she believes everyone on probation should have to take the California Laws and Regulations Exam (CLRE). She suggested keeping the CLRE standard and making the National Board of Examiners in Optometry (NBEO) an optional term should there be a need for it. Ms. Sachson agreed.

Ms. Sieferman reported that the requirement for probationers to function as an optometrist for a minimum of 24 hours per week for the entire term of his/her probation is becoming an issue for optometrists. She explained that on probation, they are finding it difficult to become re-credentialed with Vision Services Plan (VSP) and other insurances and lose their employment as a result.

Dr. Goldstein suggested, and Board members and staff discussed reducing the minimum number of hours to sixteen hours per month for the entire term of probation.

Board members and Staff members discussed remedial courses, structured to the need according to the violation, versus regular continuing education.

Mr. DeLuna submitted for clarification that the Board accepts the language of sections:

- 1502 Delegation of Certain Functions,
- 1575 Uniform Standards Related to Substance Abuse and Disciplinary Guidelines.
- 1575.2 Unprofessional Conduct
- 1523 Licensure and Examination Requirements

He confirmed that the Board wishes to see the language of 1575.1 (Required Actions Against Registered Sex Offenders) changed to state "the board shall have the discretion to:"

Monica Johnson moved to continue this agenda item to the next Board meeting. Kenneth Lawenda seconded. The Board voted unanimously (7-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Ms. Johnson	Х		
Ms. Burke	Х		
Mr. Kim	Х		

10. Legislative Update

Ms. Leiva provided a status report of the following bills:

A. Assembly Bill (AB) 2683, Health Facilities

This bill was approved by the Governor on September 30, 2010 and became effective January 1, 2011.

Dr. David Turetsky requested clarification regarding the maintenance of each prescription as a part of the patient's record. Board members, legal counsel, and staff discussed Dr. Turetsky's question.

Ms. McGavin announced that upon Vision Services Plan's (VSP) request, staff met with VSP and a representative from the Department of Health Care Services on December 20, 2010 to discuss VSP's plan to amend their policies and agreements regarding their network optometrists in order to comply with AB 2683. VSP is looking to recognize claims for VSP patient services rendered in health facilities, such as nursing homes, and requested Board staff's guidance in order to ensure their policies and agreements include all the requirements in AB 2683.

She explained that as of August 1, 2010, VSP has been conducting a nursing home pilot program with the participation of two groups of optometrists who are already following the requirements established by AB 2683. The pilot has been extended until the end of March 2011 in order to streamline VSP's administrative processes and the potential policies and agreements that will be used in California and possibly nationwide.

Ms. McGavin added that although the Board has no jurisdiction in any matters between VSP and their network, optometrists, or billing issues (and vice versa), sharing information regarding this newly recognized type of practice and its implementation will be beneficial for the Board and other providers to ensure patient safety remains the main priority and to measure AB 2683's effectiveness.

Board staff is also conducting outreach to licensees in order to inform them of this new law. The information is posted on the Board's website and other outreach documents will be developed as needed. It is still too early to tell if there will be a need for regulations in order to fine-tune the new requirements.

B. AB 2500, Licensees, Military Service

This bill was approved by the Governor on September 25, 2010 and became effective January 1, 2011.

This bill authorizes a licensee whose license expired while on active duty as a member of the California National Guard (CNG) or the United States Armed Forces (USAF) to reinstate his or her license without re-examination or penalty, unless the licensing agency determines that the applicant has not actively engaged in the practice of optometry while on active duty. Previous law was more restrictive and only allowed this type of reinstatement if the licensee had served during periods of war.

Ms. Leiva explained that the next steps for staff are to research and possibly draft a license renewal application specific for the licensees identified in AB 2500. Additionally, staff will consider drafting regulations to identify the criteria that could be used by the Board to evaluate these renewal applications.

C. AB 2699, Licensure Exemption, State of Emergency

This bill was approved by the Governor on September 23, 2010 and became effective January 1, 2011.

This bill provides an exemption from licensure and regulation requirements to optometrists, licensed or certified in good standing in another state or states, which offer or provide eye care services through a sponsored event. Eye care must be provided as follows:

- To uninsured or underinsured persons,
- On a short-term voluntary basis,
- In association with a sponsoring entity that registers with the California State Board
 of Optometry, and provides specified information to the county health department
 of the county in which the health care services will be provided, and
- Without charge to the recipient or a 3rd party on behalf of the recipient.

Ms. Leiva explained that the requirements in this bill cannot be fully implemented until each health board establishes regulations. The Department of DCA will be assisting the boards by developing customizable proposed regulatory language and initial statement of reasons to justify the need for the regulations and the forms required to apply for this status.

Dr. Goldstein stated his belief that regulations for emergency situations are more important than regulations for providing services at free clinics.

D. AB 2783, Professions and Vocations, Military Personnel

This bill was approved by the Governor on August 17, 2010 and became effective January 1, 2011.

This bill requires the Board to develop rules and regulations that provide methods of evaluating education, training, and experience obtained in the armed services, if applicable to the requirements of the practice of optometry. These rules and regulations shall also specify how this education, training and experience may be used to meet the licensure requirements for optometrists. The Board must consult with the

Department of Veterans Affairs and the Military Department before adopting any rules and regulations.

Ms. Leiva explained the next steps for staff. Current licensure requirements mandate that an applicant for an optometrist license in California must posses a doctor of optometry degree from an accredited school or college of optometry. In order to explore whether compliance with AB 2783 is possible, staff will review if other states count the education, training and experience obtained in the armed services towards licensure. Staff will also talk with other DCA healing arts boards to discover if there are already established paths for licensure by evaluating this type of experience.

E. SB 1489, Omnibus Bill

This bill was approved by the Governor on September 30, 2010 and became effective on January 1, 2011.

This bill enacts, amends, or repeals a number of provisions in the practice of optometry. The changes made by this bill are non-controversial and are intended to clarify, update and strengthen licensing laws.

Ms. Leiva explained the next steps staff will take. Board staff is conducting outreach to licensees in order to inform them of these new changes. The information is posted on the Board's website and other outreach documents will be developed as needed.

F. <u>Legislative Proposal Pertaining to Business and Professions Code Section 3059,</u> Continuing Education Requirements

Ms. Leiva reported that this proposal came from the Board's continuing education auditor. Staff would like the Board to consider and discuss the proposed statutory language. In order to implement this proposal, legislation would need to be initiated with the assistance of an author to carry the bill.

She explained that BPC Section 3059 currently indicates that 35 hours should be taken not just in "the diagnosis, treatment, and management of ocular disease" but specifically in glaucoma, ocular infection, ocular inflammation, topical steroids, systemic medication and pain medication. When enforcement staff is auditing licensees as part of the Enforcement CE Audit Program, many questions arise when certificates are received for courses relating to dry eyes or allergy eyes, or the comanagement of Lasik surgery. The last, in particular, does potentially involve infection, inflammation, steroids and medication, but does not typically involve ocular disease. Thus, it is difficult for the Board CE auditor to determine if certain courses fall under the categories listed in Business and Professions Code (BPC) Section 3059. This is resulting in licensees failing their audit, which is forcing the Board to inactivate their license until they complete their CE.

Staff would like to propose some statutory language that may make it much simpler for the CE Auditor to complete her audits, and possibly much easier for licensees since they'd be able to take a broader spectrum of CE courses.

Dr. Goldstein replied that he does not see this as an issue worth pursuing. He stated that the examples provided do not seem to be difficult to interpret, and that, in his opinion, courses on dry eyes and the co-management of Lasik surgery do fall within the scope of the diagnosis, treatment, and management of ocular disease. He added that perhaps we need to be more specific about what the concerns are.

Ms. Leiva, Mr. Robinson, Ms. McGavin and Dr. Goldstein, and Ms. Johnson discussed possible, resources the CE Auditor may utilize for CE course descriptions.

11. Public Comment for Items Not on the Agenda

There was no public comment given.

12. Suggestions for Future Agenda Items

There were no suggestions given.

13. Continued Competency for Healthcare Professionals

Presentation by the Citizens Advocacy Center (CAC)
David Swankin, President and CEO of CAC, and a partner in the law firm of Swankin and
Turner and Rebecca LeBuhn, Co-Founder and Chair, Board of Directors

Dr. Goldstein welcomed guests David Swankin and Rebecca LeBuhn of the Citizens Advocacy Center.

Mr. Swankin is an attorney specializing in regulatory and administrative law. He has a broad background in both government and public interest advocacy.

Ms. LeBuhn is responsible for research, policy development, and publications for CAC. She has coordinated public participation in government regulatory proceedings, private sector decision-making and technical standards development.

Mr. Swankin and Ms. LeBuhn provided an overview of the Citizen's Advocacy Center. The CAC began looking at health professional continuing competency in the early 1990's believing that, from a consumer protection point of view, it does not make sense to assess a professional's competence only once in the course of a career.

Ms. LeBuhn and Mr. Swankin initiated a discussion on the challenges of implementing valid and reliable programs to accomplish continued competency and how to reach the goal of state-based programs that assure the public of the ongoing competency of their clinicians and other health professionals.

FULL BOARD CLOSED SESSION

Pursuant to Government Code Section 11126 (c)(3), the Board Convened to Closed Session to Deliberate on Disciplinary Decisions

13. Proposed Decision in the Matter of the Accusation Against Collin Hugh Vaughn, OD, License Number OPT 12990

Administrative Law Judge, Rebecca Freie prepared a Proposed Decision for the Board's consideration in the matter of this accusation.

14. Proposed Decision in the Matter of the Accusation Against Lawrence Young, OD, License Number OPT 8618

Administrative Law Judge, Julie Cabos-Owen prepared a Proposed Decision for the Board's consideration in the matter of this accusation.

15. Stipulated Settlement and Disciplinary Order, Marc Douglass Dea, OD, License Number OPT 11124

16. Stipulated Settlement and Disciplinary Order, Phillip McEldowney, OD, License Number OPT 9741
18. Stipulated Settlement and Disciplinary Order, Scott Weinberg, OD, License Number OPT 8136
19. Stipulated Settlement and Disciplinary Order, Edward Rabb Neil, OD, License Number OPT 6522
Pursuant to Government Code Section 11126 (c)(3), the Board convened to close session to deliberate on the above disciplinary decisions
FULL BOARD OPEN SESSION
20. Adjournment The meeting was adjourned at 4:55 p.m.

Date

Monica Johnson, Board Secretary



STATE BOARD OF OPTOMETRY

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Meeting Minutes Monday, April 11, 2011 Southern California College of Optometry TVCI Conference Room 2575 Yorba Linda Boulevard Fullerton, CA 92831-1699

DRAFT

Members Present
Lee Goldstein, OD, MPA
Board President
Alejandro Arredondo, OD
Board Vice President
Monica Johnson
Board Secretary
Susy Yu, OD, MBA, FAAO
Fred Naranjo, MBA, Public Member
Kenneth Lawenda, OD

Alexander Kim, MBA, Public Member

Edward Rendon, MA, Public Member

Members Absent (Excused)
Donna Burke, Public Member

Staff Present
Mona Maggio, Executive Officer
Margie McGavin, Enforcement Manager
Andrea Levia, Policy Analyst
Jessica Sieferman, Probation Monitor

Jessica Sielerman, Probation Monitor
Jeff Robinson, Lead Licensing Analyst
Michael Santiago, Staff Counsel

Char Sachson, Deputy Attorney General

Guest List On File

Monday, April 11, 2011 10:00 a.m. FULL BOARD OPEN SESSION

1. Call to Order – Establishment of a Quorum

Board President, Lee Goldstein, O.D. called the meeting to order at 10:04 a.m. Dr. Goldstein called roll and a quorum was established.

Board member. Edward Rendon arrived at 10:20 a.m.

Board member, Monica Johnson arrived at 12:30 p.m.

2. President's Report

A. Welcome and Introductions

Dr. Goldstein welcomed everyone in attendance. He asked the Board members and members of the public to introduce themselves.

B. DCA Director and Board President Conference Calls

Dr. Goldstein announced that the Department of Consumer Affairs (DCA) Director and board presidents' meet via teleconference on the 2nd Tuesday of each month. This month's primary concern is continuing competency. He noted that he wants enforcement, pending legislation and regulation, and budget concerns to be on the next agenda.

C. California Optometric Association (COA) Legislative Day, March 23, 2011

Dr. Goldstein reported that he and Dr. Kenneth Lawenda attended the COA Legislative Day conference (Dr. Goldstein representing his society). The State Treasure spoke and provided a non-partisan view of the state budget. California is in the bottom five of having the least number of employees per capita of citizens.

D. Other

Fred Naranjo represented the Board at the Cal Berkeley School of Optometry workshop for senior students. Mr. Naranjo commended Jeff Robinson on providing great workshops for the students. He was pleased to see that the students were happy to have a Board member present and that they asked many questions. Some of the students concerns were as follows:

- Students requested a summary of the laws and regulations they are required to know.
- Misunderstanding regarding their birth date and paying their first renewal fee.
- Students would like to meet with Board staff early in their senior year rather than later in that year.

3. Approval of Board Meeting Minutes

- A. October 22, 2010 Meeting
- B. January 11, 2011 Meeting

This agenda item was continued to the Board's August meeting.

4. Director's Report

A representative from the Department of Consumer Affairs, Cindy Kanemoto provided a report on behalf of the Director, Brian Stiger. She thanked Executive Officer, Mona Maggio and staff for their assistance with all of the ongoing DCA projects (probation monitoring, BreEZe project, etc.).

Ms. Kanemoto's update included:

- An explanation of the Governor's hiring freeze exemption. She described the process for requesting an exemption and emphasized the necessity of proving a critical need justification for the requested position(s)
- She announced that the DCA is in its 3rd phase of developing measurements for the Consumer Protection Enforcement Initiative (CPEI) which should be posted to the Department's website by the end of April
- She explained that the DCA is requesting for each board to provide an enforcement program
 update, so the Department is aware of improvements made at each board. The Department will
 provide a more extensive enforcement report at the next meeting which will include an overview
 of the enforcement statistics gathered with other information regarding enforcement processes
- The Department encourages the Board to move forward with is its regulations to improve and strengthen their enforcement unit, and provide the Executive Officer with the tools needed to enhance their enforcement program
- The Department thanks the Board for moving forward with Senate Bill (SB) 1441 Uniform
 Standards and incorporating the necessary language into the disciplinary guidelines. The
 Department encourages the Board to continue to move forward with noticing the regulations and
 holding a hearing
- An update on the Vehicle Executive Order. On January 27, 2011 an Executive Order was
 issued requesting that each department look into home storage permits for state vehicles and
 withdraw those that are nonessential
- She thanked the Board for all of their assistance with the BreEZE project. Between April and August the program will be securing the final contract approvals between the Department of General Services and the Legislature. The contract is expected to begin in August of this year
- An overview of the Executive Officer (EO) Evaluation and Study. The Department receives
 several requests from Boards asking to increase the Executive Officer's salary. These requests
 must be approved by the Department of Personnel Administration (DPA) and the Governor's
 Office. The DCA wanted to assure that all Board EO's salary is reviewed to determine if the
 position is at the appropriate salary. Therefore, the Department has entered into a contract to

review all EO salaries. Until the study is completed (projected in August), the Department will not be moving forward with increasing EO's salaries

5. Executive Officer's Report

Ms. Maggio announced the upcoming Board Meeting dates which are as follows:

June 21, 2011 (Enforcement)
 August 5, 2011
 November 4, 2011
 Junipero Serra State Building
 DCA Hearing Room
 TBD
 Los Angeles, CA.
 Sacramento, CA
 Southern California

Board Members

Ms. Maggio provided an overview of the Board member appointment dates, expiration dates, and re-appointments. Dr. Goldstein informed the Board that he's asking the Governor's office to make appointment decisions as close to June 1 as possible to avoid agenda stalling.

A. Budget Update

Ms. Maggio reported on the 2010/2011 Fiscal Year (FY) budget. The Board's budget authority for the 2010/2011 fiscal year is \$1,651,385. Expenditure projections indicate that at the end of the FY, the Board anticipates an unexpended reserve in the amount of \$179,654. The expenditure projections for the remainder of the FY indicate the Board will not exceed its current budget authority.

B. Board Operations

Ms. Maggio reported on the BreEZe project, the office move, personnel issues, sunset review, and the Board's website.

BreEZe

Ms. Maggio acknowledged that Policy Analyst, Andrea Leiva and Probation Monitor, Jessica Sieferman are serving on the BreEZe project. Ms. Leiva serves on the forms project (standardized forms for entire department), and Ms. Sieferman serves as a subject matter expert on the BreEZE database development. Enforcement Analyst, Cheree Kimball also served on the project.

Ms. Leiva and Ms. Sieferman provided overviews of their projects.

Move

Ms. Maggio explained that the permits have been obtained. It is anticipated that construction will be completed and we will be moved in by early to mid June. \$125,000 was placed in the architectural revolving fund (ARF) for the costs associated with the construction and move, projected costs are \$80,000. Thus far, the project is well under our projected costs. Once complete the additional space affords the Board the room to accommodate all staff positions in one office as well as provide opportunity for future growth.

Personnel

Ms. Maggio reported the Enforcement Manager, Margie McGavin has accepted a position as the Enforcement Program Coordinator with the Bureau of Electronic & Appliance Repair, Home Furnishings and Thermal Insulation. Her last day with the Board of Optometry is April 22, 2011. Margie and her contributions to the Board and its Enforcement Program will be greatly missed by staff, members, and constituents.

Board Member, Dr. Kenneth Lawenda provided a personal thank you to Margie and the other members acknowledged agreement.

Enforcement Technician, Dillon Christensen's limited term office technician position ends August 21, 2011. Staff is working with Personnel and Budgets to determine if the Board would be able to continue to keep Dillon on staff with hopes that a budget change proposal (BCP) can be drafted and approved to make this position permanent.

Sunset Review

Ms. Maggio advised that the Board of Optometry is not scheduled for review until January 1, 2014. However, staff is monitoring the questions and issues the Committee is asking those boards going through the current review process.

Website

Ms. Maggio announced that Ms. Leiva has made many additions and updates to the Board's website since the last Board Meeting. Ms. Leiva has also worked on redesigning and updating the icons for Join Our Mailing List; Expert Witness Recruitment and the Customer Satisfaction Survey. Her efforts have made the icons more "eye catching".

Ms. Maggio commended Ms. Leiva's work on updating the Board's law book. The law book is now formatted differently, easy to follow and up-to-date.

6. Review and Possible Approval of the Records Retention Schedule

Ms. Maggio provided an overview of the records retention schedule status. The Board had not had an updated retention schedule since 2002. Enforcement Analyst, Lydia Bracco worked with staff and Ms. Maggio to update the schedule with respect to both paper and electronic files. Ms. Maggio requested the Board review and approve the records retention schedule.

Dr. Goldstein requested that Ms. Maggio highlight the major changes which are as follows:

- The addition of electronic record
- In regards to licensing: the breaking out further of the applicant examination information, foreign applicant information, laws and regulations information, and the addition of a deceased application file
- In regards to enforcement: the breaking out further of the disciplinary information, complaint file information, and the non-jurisdictional information

Board Member, Dr. Susy Yu inquired as to whether or not the department is shifting towards the elimination of paper records. Ms. Maggio explained that the use of both paper and electronic will remain in place.

Board Member, Fred Naranjo inquired about what security measure the department uses to protect confidential data. Ms. Sieferman provided and brief overview of the security measures in place.

Ms. Kanemoto asked, on behalf of the Department, if staff had referred to the new policy while preparing the records retention schedule. Ms. Sieferman and Ms. Maggio confirmed that they did.

Kenneth Lawenda moved to approve the records retention schedule. Alejandro Arredondo seconded. The Board voted unanimously (7-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	X		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Mr. Naranjo	Х		
Mr. Kim	Х		
Mr. Rendon	Х		

7. Review and Possible Approval of the Disciplinary Guidelines

Ms. Sieferman provided an overview of the disciplinary guidelines and uniform standards.

A. SB 1441 Uniform Standards

Ms. Sieferman explained that the first 12 uniform standards will be incorporated in the Board's Disciplinary Guidelines. The remaining three standards only apply to Boards with diversion programs and thus will not be incorporated.

Ms. Sieferman reported that there has been a great deal of opposition from various Boards and Bureaus throughout DCA, regarding Uniform Standard #4 (Drug Testing Standards) which has to do with the frequency of testing. We are currently at the standard which is 104 times during the first year and 50 times every year thereafter. Due to the continued opposition on this, the Subcommittee met on March 9, 2011 to discuss the proposed amendments. The amendments were approved by the Subcommittee. Ms. Sieferman provided the rational for their amendments as well as their proposed final amendments. The amendments reduce the frequency of testing quite a bit as well as break them down into levels of testing. The amendments also include five exemptions, which will allow more flexibility in the frequency of testing. The vote to adopt the amendments is scheduled for today.

B. Revised Disciplinary Guidelines

Ms. Sieferman stated that the Board's Disciplinary Guidelines have been revised to incorporate Senate Bill (SB) 1441 Uniform Standards which promote consistency, and provide further clarification of conditions. She noted that several comments, previously made, by Dr. Goldstein and Deputy Attorney General, Char Sachson, were incorporated into the guidelines. Ms. Sieferman explained that the main recommended changes by Ms. Sachson, which had to do with the wording of the uniform standards, couldn't be altered.

Dr. Goldstein questioned, with respect to substance abuse, what difference will these changes make for the Board? Ms. Sieferman responded that the most significant change is providing the Board options and flexibility in deciding the frequency of testing. Testing is quite expensive for the probationers and some cases don't necessitate the same testing frequency.

Dr. Yu asked if the wording gives the Board the option of increasing testing. Ms. Sieferman clarified that it does give the Board the option and authority to increase testing frequency.

Board Member, Alexander (Alex) Kim, Ms. Sieferman, and Ms. McGavin discussed the process of this compromise with regards to the legislature. There have been many comments taken from both sides, so the frequency that will be voted on today, is a compromise that both sides have agreed to.

Dr. Lawenda asked if California is more stringent then other states. Ms. Sieferman responded that currently (at the 104) California is at the top, if not the top for testing frequency.

Board Member, Dr. Alejandro (Alex) Arredondo asked if we are reimbursed for the testing. Ms. Sieferman replied that the Board does not pay for the testing. It is the sole responsibility of the probationer to pay for the substance abuse tests.

Alex Kim moved to accept the Uniform Standards, and approve the new Disciplinary Guidelines. Alex Arredondo seconded. The Board voted unanimously (7-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	X		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	X		
Mr. Naranjo	X		

Mr. Kim	Х	
Mr. Rendon	X	

8. Review and Possible Approval of the Case Management Requirement for Glaucoma Certification

Dr. Goldstein continued this agenda until 12:30 p.m., when Board member, Monica Johnson would be present.

Legal Counsel, Mr. Santiago provided an overview.

Pursuant to CCR Section 1571, the accredited California Schools and Colleges of Optometry must cooperatively develop the Case Management Course and Grand Rounds Program, which then must be approved by the Board.

On March 2, 2011 and March 18, 2011, representatives from the University of California, Berkeley Schools of Optometry, the Southern California College of Optometry, and Western University of Health Sciences, College of Optometry met to develop the glaucoma courses.

Mr. Santiago advised that if the Board has any substantive changes that they present them to the colleges for discussion before submitting the final program.

A. Case Management Course

The curriculum was developed by the three schools of optometry.

Dr. Goldstein announced the participants of the curriculum workgroup who are as follows:

Berkeley School of Optometry

Patsy Harvey, O.D.

Carl Jacobsen, O.D.

Southern California College of Optometry

David Sendrowski, O.D.

George W. Comer, O.D.

Western University of Health Sciences, College of Optometry

Maryke Neiberg, O.D.

Donald Egan, O.D.

Dr. Goldstein invited the participants present to comment. They discussed the case management requirement, course flexibility and curriculum, expectations, testing format and consistency of materials.

Dr. Lawenda asked if there is a preferable way via statistical studies of taking the courses (i.e. didactically or online).

Dr. Goldstein invited the participants to talk about the Grand Rounds Program. The goal of the Grand Rounds Program is to assist California optometrists in becoming glaucoma certified pursuant to CCR Section 1571. The objectives are:

- 1) Present a variety of patients selected for maximum educational value
- 2) Evaluate and analyze live patients
- 3) Develop contemporary treatment and management plans, including referrals when appropriate for medical or surgical consultation
- 4) Facilitate learning environment through open discussions
- 5) Demonstrate proficiency through a competency exam.

Dr. Goldstein provided an overview of the various methods of becoming certified to treat glaucoma under SB 1406 (Preceptorship, Case Management Course, and Grand Rounds Program).

Dr. Lawenda and Ms. Leiva inquired if taking these courses would apply towards continuing education (CE) credit requirements. Board members, staff, and guests from the optometry schools discussed this idea. Dr. Goldstein continued this question to the next meeting for further discussion.

Kenneth Lawenda moved to approve the case management requirement for glaucoma certification. Monica Johnson seconded. The Board voted unanimously (8-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Mr. Naranjo	Х		
Mr. Kim	Х		
Mr. Rendon	Х		
Ms. Johnson	Х		

9. Examination/Licensing Program Report

Lead Licensing Analyst, Jeff Robinson provided an overview on this agenda item.

A. California Laws and Regulations Examination (CLRE)

Mr. Robinson reported that Board staff has been working with Psychological Services, Inc. (PSI), the Board's computer-based testing vendor, in order to begin providing examination invitations for testing eligibility via e-mail. Most candidates are in a transition period at the time they submit an application. E-mailing eligibility notices will allow candidates to receive this important information regardless of their current location, and should increase efficiency.

Mr. Robinson added that the Board's 2011 Laws and Regulations book is now only one document on the website, not multiple links which created confusion. Staff is hopeful that studying for the CLRE will now be easier for the candidates.

B. CAS to ATS Conversion

Mr. Robinson announced that staff is working with the DCA Consumer Affairs System (CAS) and Applicant Tracking System (ATS) for a conversion of records from CAS to ATS. The CAS and ATS units of the Office of Information Services (OIS) held a "Retro Renewals Fingerprint Project" meeting on February 2, 2011 for several of its boards, including optometry. He explained that we are in the process of re-fingerprinting most of our licensees because they did not have FBI clearance which is now required of all our licensees. This conversion will allow licensing staff to export the fingerprint data of those licensees into CAS and provide them with the ability to verify those who have met the fingerprint requirement.

C. Student Outreach

Mr. Robinson reported that student outreach has formerly been provided to the graduating classes of the optometry schools and colleges. Recently, there have been staff discussions about whether or not it's important to provide the licensing process information to the graduating classes, since most likely they already know this information. It was decided, during these discussions, that the 3rd year students would benefit most from this particular outreach. Licensing staff are in the process of working with the schools to facilitate outreach to the 3rd year students.

D. Program Statistics and Performance Measures

Mr. Robinson presented the number of license applications received, those pending completion, and optometrists who were issued licenses/permits from 11/10 through 03/11. The Board has been working with the DCA 'Licensing for Job Creation (LJC) unit on statistics to find out how quickly we license optometrists and get them into the workforce. He explained that the data does not lend itself well to measurement in most cases because many of the new graduates do residencies upon graduation and are not interested in becoming licensed right away. Also, some graduates become licensed in other states.

Board members and staff discussed the number of applicants with "sitting" applications due to residency in another state, the length of time applications and exam scores are maintained via retention schedule and weeding out dead files.

Dr. Goldstein opened the floor to questions from members and the public. There were no questions.

10. Enforcement Program Report

Ms. McGavin provided an overview.

A. Unlicensed Activity/Outreach to California District Attorneys

Ms. McGavin reported that Board staff continues to enforce unlicensed activity when it's reported to staff. Since 2010, the Board has received approximately 20 complaints against unlicensed vendors (retail stores, tattoo parlors, gas stations, etc.) selling cosmetic contact lenses without a prescription.

She announced that on February 24, 2011, the Department hosted a training conference with the California District Attorney Association's (CDAA). At this training, staff members were able to discuss this information with the District Attorneys. Enforcement Analysts, Brianna Miller and Ms. Kimball were invited to present this information at the Northern California Consumer Protection Committee's roundtable discussion on March 4, 2011 in Berkeley.

B. CLEAR Training

Ms. McGavin stated that in February 2011, Fingerprint Coordinator, Lydia Bracco, Ms. Miller and Ms. Sieferman attended the Council on Licensure, Enforcement and Regulation (CLEAR), National Certified Investigator/Inspector Training (NCIT) Basic Program sponsored by the DCA. This was a three-day program that covered many topics regarding professional conduct and administrative law and the regulatory process. Enforcement Technician, Dillon Christensen has been scheduled to attend the next Basic NCIT in April 2011. After his training, the entire enforcement unit will have received this training.

C. Fingerprint Program

California Code of Regulations Section 1525.1 states, "(a) As a condition of renewal for a licensee who was initially licensed prior to January 1, 1998, or for whom an electronic record of the submission of fingerprints no longer exists, such licensee shall furnish to the Department of Justice (DOJ) a full set of fingerprints for the purpose of conducting a criminal history record check and to undergo a state and federal criminal offender record information search conducted through the DOJ."

Ms. McGavin explained that licensees have indicated that this language is unclear. Thus, to alleviate confusion regarding optometrists needing their fingerprints completed, staff proposes clarifying changes to regulation 1525.1.

She reported that staff continues to streamline the fingerprinting process. The Office of Information Services (OIS) is coordinating the transfer of records from CAS (Consumer Affairs System) into ATS (Applicant Tracking System) to reflect compliance with the fingerprint requirement. The transfer will commence once OIS has communicated with the affected DCA boards and bureaus, which is anticipated in April 2011.

She added that the Board is implementing a plan to insert fingerprint requirement notices into renewal notice envelopes. Three things must first be accomplished in order for the requirement notices to be executed. They are:

- 1) The Board's Executive Officer will approve the language of the notification.
- 2) Staff will contact DCA, Digital Print Services to reproduce the notification.
- 3) Upon completion of reproduction, the form will be forwarded to the Production Support Unit (PSU). PSU will then request Employment Development Department (EDD) to insert, assemble and mail the renewal notices, with the notification, on behalf of the Board.

D. Probation Program

Ms. McGavin reported that Ms. Sieferman has been active in conducting probation compliance and orientation interviews at the Division of Investigation (DOI) offices in Sacramento and Hayward, California. These interviews have proved to build stronger relationships (i.e. improved communication, eliminated confusion regarding probation conditions, and established a stronger understanding of the probation requirements). These improvements assist the Board in ensuring and maintaining compliance.

Ms. Sieferman continues to receive Biological Fluid Testing (BFT) through Phamatech, Inc., DCA's contracted vendor. The Board's testing frequency has complied with the frequency outlined in DCA's Uniform Standard #4: 104 times during the first year, and 50+ times during every year thereafter. However, due to the changes previously discussed, the frequency of testing will comply with the amended adopted guidelines.

The probationers subject to BFT received a written notification from the Board and Phamatech announcing a change in Phamatech's log-in procedure. This change was necessary because licensees waiting until the last hour to log-in to Pharmatech were having difficulty finding a collection site open. Consequently, Phamatech's log-in window has changed from 24 hours to 12 hours per day.

Ms. McGavin reported that Phamatech has corrected reporting inconsistencies experienced when reporting their results to the Board.

In addition to submitting BFT, probationers are required to attend some form of group support meetings throughout their entire probation term. Last quarter, Ms. Sieferman attended both Narcotics Anonymous and Alcoholics Anonymous meetings in order to obtain a better understanding of the offerings of these organizations, and experiences the probationers endure while participating in their programs.

Ms. McGavin announced that Ms. Sieferman, Ms. Maggio and staff from other boards and bureaus completed the creation of DCA's first probation monitoring training course. The two day training course was held on February 28 and March 1, 2011. Ms. Sieferman, Ms. Maggio, and Ms. Kimball each instructed portions of the course.

Participants of this course were introduced to a new resource, the Probation Monitoring Forum, created by Ms. Sieferman. This forum connects Probation Monitors throughout DCA in order to share information such as forms/reports and pertinent as well as general information pertaining to probation monitoring.

Ms. McGavin presented Probation Program Statistics for the Board.

E. Statistics/Performance Measure

Ms. McGavin presented an enforcement statistic overview. She announced that the optometry performance measures, for the second quarter of the 2010/2011 fiscal year, have been posted on the Department of Consumer Affairs Website. This data represents complaints and investigations in process for October 2010 through December 2010.

The intake and investigation process has an average of 92 days from receipt of complaint to closure. A contributing factor to the number of days a complaint remains open is whether it is being investigated by Board staff or at the Division of Investigation (DOI). In the past fiscal year, the Board has significantly increased its caseload referral to DOI, amounting in an 866% increase in cases submitted to the DOI from the previous year.

Ms. McGavin stated her gratitude for having been able to serve the Board for the last five years.

Dr. Lawenda inquired about what possible effect the current budget crisis may be having on the cases investigated. Ms. McGavin explained and clarified that the budget isn't having an effect on the investigations, rather many of the types of complaints staff receive are considered less severe in regards to physical harm and the DOI prioritizes their cases by severity. Our cases are not viewed as the highest priority in severity.

Drs. Yu, Goldstein, and Lawenda, and Ms. McGavin and Ms. Sieferman discussed the notice, citation, database, disciplinary action and proceedings for accusation process.

Drs. Goldstein, and Lawenda, and Ms. McGavin and Mr. Robinson discussed optometrists with discipline practicing outside the U.S. jurisdiction.

11. Review of Rulemaking Calendar

Ms. Leiva provided an overview.

A. Status of Title 16, CCR Section 1518, Fictitious or Group Names, Section 1523, Licensure Examination Requirements, Section 1531, Licensure Examination, Section 1532, Re-Examination, Section 1533, Re-Scoring of Examination Papers, Section 1536, Continuing Optometric Education, and Section 1561, Topical Pharmaceutical Agents Usage – Purpose and Requirements

1518, 1523, 1531, 1532, 1533, and 1561 were approved by the Office of Administrative Law (OAL) on February 8, 2011 and became effective on March 10, 2011. This information was posted on the Board's website and is included in the updated 2011 Law Book.

1536 Continuing Optometric Education updates the regulation with current information and offers new CE opportunities including up to eight credits for course work in ethics, up to two credits for a full days attendance at a Board meeting, up to four credits upon receipt of a CPR certification among other things.

This regulation has been reviewed favorably by the DCA and State and Consumer Services Agency (SCSA). It was submitted to OAL on April 6, 2011. We will know if it was approved in 30 business days.

B. Discussion and Action to Approve Draft Language and Commence a Rulemaking for CCR Section 1525.1, Fingerprint Requirements

Ms. Leiva re-stated Ms. McGavin's report that licensees have found the language in this regulation confusing. Thus to alleviate the confusion and reduce the number of calls received by the fingerprint coordinator, staff recommends that CCR Section 1525.1 be amended for clarification purposes.

Dr. Goldstein, Ms. Leiva, and Mr. Robinson discussed concerns regarding clarity. Dr. Goldstein asked members and staff if anyone thinks optometrists might mistakenly believe they need to be re-fingerprinted at each renewal (as a condition of renewal). Ms. Leiva noted that once everyone's been fingerprinted, this regulation will be eliminated.

Edward Rendon moved to approve the proposed language for the fingerprint requirement. Susy Yu seconded. The Board voted unanimously (7-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Mr. Naranjo	X		
Mr. Kim	X		
Mr. Rendon	X		

- **C.** Discussion and Action to Approve Draft Language and Commence a Rulemaking for CCR Section 1513, Registered Name Only
- **D.** Discussion and Action to Approve Draft Language and Commence a Rulemaking for CCR Section 1514, Renting Space from and Practicing on Premises of Commercial (Mercantile) Concern

Current law requires that all signs, cards, stationary or other advertising clearly and prominently identify an optometrist. Current law also requires that an optometrist who is practicing in a rented space at a commercial location display all advertising in such a way that it will be clear that the optometrist is separate and distinct from the other occupants.

Ms. Leiva reported that while enforcement staff was reviewing various optometry websites, signage and other advertising, it was discovered that it has become a common practice for optometrists to alter their names by either shortening their Fictitious Name Permit, or their first name (such as Stephen to Steve). Also, while investigating office locations or other mercantile locations, it was noted that some locations do not have proper signage indicating who owns the business or who is providing services at the location.

The language has been amended to further clarify the use of an optometrist name in advertising and at business locations. Board staff requests that the Board review the proposed language as amended, make edits if necessary, approve it, and make a motion to begin a rulemaking for this proposal.

Dr. Goldstein opened the floor to discussion and/or comments.

Dr Arredondo asked for clarification of leasing. Members and staff discussed proper signage that isn't misleading about the practice being separate and distinct.

Susy Yu moved to adopt the proposed language for Sections 1513 and 1514. Ed Rendon seconded. The Board voted unanimously (7-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Mr. Naranjo	Х		
Mr. Kim	Х		
Mr. Rendon	Х		

E. Discussion and Action to Approve Draft Language and Commence a Section 100 Rulemaking for CCR Section 1519, Ophthalmic Device Standards

Current law requires optometrists to follow ophthalmic device standards from the American National Standards Institute (ANSI). The current regulation only refers to ANSI standards Z80.1 and Z80.2.

Ms. Leiva explained that this regulation has not been updated since 1976. Since then, Z80.2 no longer exists, and there are 19 "new" standards which apply to optometry as it is practiced today. Staff originally thought it was possible to do a Section 100 (non-controversial) change, but upon further research discovered the regular rulemaking process is required. Board staff requests that the Board review the proposed language as amended, make edits if necessary, approve it, and make a motion to begin a rulemaking for this proposal.

Dr. Goldstein, Mr. Santiago, Ms. Maggio, and Ms. Leiva discussed why the language should not be incorporated by reference.

Dr. Goldstein opened the floor to questions/comments.

Members and staff discussed the wording of the amended language.

Kenneth Lawenda moved to direct staff to proceed with a draft of a rulemaking regarding ANSI standards including Z80 thru Z87 to be reviewed at the Board's August meeting. Susy Yu seconded. The Board voted unanimously (7-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Yu	Х		
Dr. Arredondo	X		
Dr. Lawenda	Х		
Mr. Naranjo	Х		
Mr. Kim	Х		
Mr. Rendon	Х		

F. Discussion and Action to Approve Draft Language and Commence a Rulemaking to Add and Amend Regulations Pertaining to Senate Bill 1111 and Senate Bill 1441 to Division 15, Title 16 of the CCR

Since the Disciplinary Guidelines have been approved, the Board may proceed forward with Senate Bill (SB) 1441. The only concern with SB 1111 is regarding Section 1575.1, Required Actions Against Registered Sex Offenders. The DCA had encouraged staff to keep this mandatory. Nevertheless, staff has added language which provides discretion to the Board to decide upon denying an application or revoking a license because this is the Board's jurisdiction.

Dr. Goldstein recalled that at the last Oakland meeting, an Attorney with the Attorney General's Office recommended the Board keep discretional authority.

Ms. Leiva requested that (before the final vote) the Disciplinary Guidelines be separated from SB 1111 because it's a very comprehensive and large rulemaking package. She recommended beginning SB 1441 first and after it has gone through then begin SB 1111.

She also advised that we would be waiting a year for the other regulations to go through before beginning the SB 1111 package. Dr. Goldstein and Mr. Santiago agreed with the plan to separate the packages.

Ms. Kanemoto stated the Department wants to go on record as not wanting the word discretion in relation to registered sex offenders.

Alejandro Arredondo moved to begin the rulemaking process for 1575 Uniform Standards Related to Substance Abuse and Disciplinary Guidelines. Kenneth Lawenda seconded. The Board voted unanimously (7-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Mr. Naranjo	Х		
Mr. Kim	Х		
Mr. Rendon	Х		

Edward Rendon moved to continue SB 1111 to the August 2011 meeting. Kenneth Lawenda seconded. The Board voted unanimously (7-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	X		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Mr. Naranjo	Х		
Mr. Kim	X		
Mr. Rendon	Х		

The meeting broke for lunch at this time and reconvened at 12:30 p.m. Ms. Johnson was present and Dr. Goldstein returned to agenda item 8 – Review and Possible Approval of Case Management Requirement for Glaucoma Certification.

12. Legislative Update

Ms. Leiva reported on the updates.

A. AB 761 (Roger Hernandez) Optometrists as CLIA Lab Directors

This bill expands the category of persons who may perform clinical laboratory tests or examinations that are classified as waived to include licensed optometrists if the results of the tests can be lawfully utilized within their practice, and would provide that a laboratory director may include a licensed optometrist, as specified for purposes of waived examinations.

Currently, optometrists are allowed to perform Clinical Laboratory Improvement Amendments (CLIA) waived tests under their scope of practice and are authorized to be lab directors for more complex tests under federal law, but state law hasn't been updated. CLIA tests specified tests that may be used at home and are performed by various methods such as dipstick, tablet, reagent urinalysis, fecal occult blood, etc.

As of November 1997, the CLIA waiver provisions were revised by Congress to make it

clear that tests approved by the Food and Drug Administration (FDA) for home use automatically qualify for CLIA waiver.

Currently, this legislation has been double referred to the Assembly Business & Professions Committee and Assembly Health Committee. No date has been set.

For all of the bills in this agenda item, staff's requesting that the Board members take each bill to the Legislation and Regulation Committee for further discussion.

Ms. Johnson inquired about the process of taking bills to the Legislation Committee. Dr. Goldstein, Ms. Johnson and Ms. Kanemoto discussed possible options.

Dr. Goldstein explained that he believes the language is too premature to take any position on. Ms. Maggio agreed and clarified that regarding all of the items in this legislative update, staff is not asking Members to take a position, but rather to discuss the bills, have the Legislation and Regulation Committee meet to review the bills, direct staff on any suggested amendments and stance. At that time the bills can be brought before the Board at the August meeting with the Committee's recommendation.

Dr. Goldstein provided an explanation of what CLIA tests are (for the public members). Board members and staff discussed this.

Vice President and Dean of Academic Affairs at the Southern California College of Optometry (SCCO) Dr. Morris Berman, O.D., made a brief comment announcing his support of the tests.

Monica Johnson moved to refer to the Legislation and Regulationa Committee. Fred Naranjo seconded. The Board voted unanimously (8-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Mr. Naranjo	Х		
Mr. Kim	Х		
Mr. Rendon	Х		
Ms. Johnson	Х		

B. SB 709 (Kevin de Leon) Children's Vision

This bill would create the Voluntary Children's Vision Educational fund in the State Treasury for the purposes of funding projects that help educate parents and guardians about the need for children to receive comprehensive eye examination prior to entering school.

The current system that provides vision screenings to detect vision problems is seriously flawed. Even the best vision screenings miss 30 percent of children with significant eye or vision problems. This information comes from the California Optometric Association (COA).

This bill has been re-referred to the Senate Education Committee. Action requested is that Board members refer this to the Legislation and Regulation Committee for discussion.

Dr. Goldstein opened the floor for comment. Dr. Arredondo expressed his sadness that a child can go on for years never having their eyes examined.

Dr. Goldstein explained that this bill is a way of initiating a discussion with the Legislature about mandatory eye examination laws. Board members and staff discussed this.

Fred Naranjo moved to refer this bill to the Legislation and Regulation Committee. Ken Lawenda seconded. Board members voted unanimously (8-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Mr. Naranjo	X		
Mr. Kim	Х		
Mr. Rendon	Х		
Ms. Johnson	Х		

C. SB 690 (Ed Hernandez) Provider Anti-Discrimination

This bill would prohibit a health care service plan contract or health insurance policy that is issued, amended, renewed, or delivered on or after January 1, 2014, from discriminating against any health care provider who is acting within the scope of that provider's license, as specified.

Commonly, health plans and insurance companies limit types of health care providers allowed to provide services. An example is that optometrists who are permitted to provide routine vision care under a health plan or insurance contract are often prohibited from treating medical eye conditions, such as glaucoma, that are within their scope of practice.

Currently, this bill is in the Senate Health Committee. It is set for hearing on April 27, 2011. Action requested is that the Board refers it to the Legislation and Regulation Committee for further discussion.

Dr. Goldstein stated that he does not believe this one needs to be referred to the Committee as it is not very controversial. Board members and staff discussed this.

Monica Johnson moved to refer bill to the Legislation and Regulation Committee for discussion. Kenneth Lawenda seconded. The Board voted (7-1) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein		X	
Dr. Yu	X		
Dr. Arredondo	X		
Dr. Lawenda	Х		
Mr. Naranjo	X		
Mr. Kim	X		
Mr. Rendon	X		
Ms. Johnson	Х		

D. AB 675 (Curt Hagman) Continuing Education Promoting Labor Organizing, Politics Not Accepted for Licensure Renewal Requirements

This bill would provide that continuing education courses that advance or promote labor organizing on behalf of a union or that advance or promote statutory or regulatory changes, political candidates, political advocacy, or political strategy shall not be considered content relevant to the practice regulated by the board and shall not be acceptable for meeting requirements for licensure renewal. The bill would also prohibit, to the extent applicable, an approved provider from representing that such a continuing education course is acceptable for meeting requirements for licensure renewal and would require a board, subject to specified procedural requirements, to withdraw its approval of a provider that violates that requirement for no less than five years.

The hearing for this bill was postponed by Assembly on Business, Professions and Consumer Protection. The action requested is that the Board refers this bill to the Legislative Committee for further discussion.

Dr. Goldstein opened the floor to comments/questions.

Dr. Yu inquired as to who this legislation really refers to. Ms. Leiva and Mr. Santiago explained that it is a DCA blanket legislation and should be reviewed by the Board.

Mr. Santiago clarified that this regulation not only prohibits CE courses that promote or advance labor organizing on behalf of unions, but it also prohibits CE courses that advance or promote statutory or regulatory changes. Mr. Santiago emphasized his concern that this language is a little too vague. Board members and staff discussed this.

Kenneth Lawenda moved to refer this bill to the Legislation and Regulation Committee. Monica Johnson seconded. The Board members voted unanimously (8-0) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein		Х	
Dr. Yu	X		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Mr. Naranjo	Х		
Mr. Kim	Х		
Mr. Rendon	Х		
Ms. Johnson	X		

E. Potential Spot Bill from Ophthalmological/Medical Associations Pertaining to Optometry Scope of Practice and Glaucoma Certification

There is a possibility that the California Academy of Eye Physicians and Surgeons (CAEPS) will be sponsoring legislation in order to repeal the recently enacted glaucoma regulations. Board staff is reviewing "spot bills" that may become CAEPS' legislation, and communicating with other stakeholders in order to stay on top of this issue, should action become necessary. At this time, it is unknown who the author of the bill will be.

No action is needed at this time.

F. Urgency Bill for Expert Consultants by the Senate Business, Professions & Economic Development Committee

The Board of Optometry, along with other health boards from the Department of Consumer Affairs, will be participating in an urgency bill in order to allow expert consultants to provide

their services to boards and bureaus without contracts.

Current law requires consultants hired by a board or bureau to enter into a contract that follows all guidelines, procedures, and rules governed by the State Contracting Manual and the California Public Contract Code. This requirement has not been enforced until now, thus many boards and bureaus have not been using contracts to hire expert consultants.

Thus, instead of being able to obtain an expert consultant in a day without a contract, it would take 30 to 90 days with a contract. The DCA's Contracts Unit has streamlined their own processes to drastically shorten the processing time to 2-3 weeks of receiving a request for an Expert Consulting Contract. Although many boards and bureaus appreciate the department's assistance, requiring expert consultants to contract with the state significantly increases staff workload and deters future expert consultants from working with the Board. Therefore, the health boards still wish to try to bypass this law with some type of emergency legislation. Staff supports this idea for the following reasons:

1) Subject Matter Experts (SME) for Law Development

Typically, SME's participate in one or two workshops a year for continuing education (CE) credits. Many participating SME's see this as a CE opportunity, not as a form of work. SME's sign up at will, sometimes a couple of weeks in advance and sometimes cancel a day before the workshop. This group enjoys the flexibility and ease of which they can participate in these workshops and a contract will be burden for them as well as Board staff. SME's are not paid. They receive a \$100 per day per diem as well as reimbursement for all travel costs and meals during the time they are providing services to the state. Staff would have to do nine separate contracts per workshop, since many SME's do not like to commit so far in advance,

2) Expert Witnesses for Enforcement Issues

Typically, expert witnesses are asked to review confidential case material, prepare written reports and, possibly testify at administrative hearings. They are paid at a rate of \$100 an hour for record review and preparation of a written report, and \$150 an hour for testimony at a hearing. Since expert witnesses are paid, this type of expert consultant will be easier to contract with. Also, there are only about five to ten enforcement complaint cases a year that require an expert witness.

Board staff is monitoring this bill's development and plans to be in support once it is introduced.

Ms. McGavin added that with these types of contracts, expenditures get tied up. Even if there is no activity with the contract whatsoever, the budget is impacted.

Kenneth Lawenda moved to refer bill to Legislative Committee. Alejandro Arredondo seconded. The Board voted (7-1) to pass the motion.

Member	Aye	No	Abstention
Dr. Goldstein	Х		
Dr. Yu	Х		
Dr. Arredondo	Х		
Dr. Lawenda	Х		
Mr. Naranjo	Х		
Mr. Kim	Х		
Mr. Rendon	Х		
Ms. Johnson		Х	

13. Review and Update Pertaining to the Strategic Plan

Ms. Leiva provided the update.

On March 25, 2010 the Board adopted its 2010-2011 Strategic Plan. Staff had begun working on achieving the goals established in the plan.

 $\underline{GOAL\ 1-LICENSING:}$ Provide applicants and licensees a fast, accurate and cost effective process for obtaining and maintaining licensure registration and certifications required to practice optometry in the State of California.

Ms. Kimball (CE auditor) conducted the first group of audits in December 2009, March 2010, October 2010, and April 2011. Staff's goal is to conduct audits on a monthly basis, auditing 10% of licenses renewed as active in a given month. Staff member, Krista Eklund is assisting Ms. Kimball with the CE process by sending out the initial audit letters and tracking responses to the audit. The audits include misunderstandings regarding the specifics of the CE requirements and options for licensees who are not actively practicing due to illness, lack of employment or living out of state. Staff hopes to address the most common misconceptions in an upcoming newsletter article. CE Audits do not have a deadline, so the status of this goal is ongoing.

Board members and staff discussed this.

Ms. Leiva provided an overview of the following highlights:

- Staff continue to work closely with the BreEZe project team to ensure the best possible outcome
- The Department has established the Online Professional Licensing Unit in order to implement online license renewals
- Staff is working to establish an appropriate address of record (for licensees), including a requirement for a valid e-mail address, for Board communications and consumer protection
- Staff is updating the Board's forms to be more consistent, clear, and user friendly. The forms will hopefully be updated before BreEZe goes into effect in 2014 because some forms have not been updated for approximately ten years
- Licensing staff will be improving efficiency in processing applications. This includes dealing with the birthdates of the licensees and syncing ATS and CAS
- Staff will be reviewing current accreditations and affirm and apply the accreditation process for new schools of optometry and clinics. Staff is planning to invite representatives from Western University of Health Sciences College of Optometry (Pomona, CA), University of the Incarnate Word School of Optometry (San Antonio, TX), and Midwestern University Arizona College of Optometry (Glendale, AZ) to a future board meeting so that they may present to the Board an overview of their programs

<u>GOAL 2 – EXAMINATIONS:</u> Provide a fair, valid and legally defensible licensing exam process to ensure that only qualified and competent individuals are licensed to provide optometric services in the State of California.

Ms. Leiva provided an overview of the following highlights:

- Staff have successfully implemented computer based testing with the new vendor
- The ongoing exam development and California Laws and Regulations Examinations validation workshops are going very well
- Board staff have expanded the subject matter expert pool
- Staff has provided outreach to the schools and colleges of optometry. Mr. Robinson is working
 on providing a presentation to the 3rd year students so that they may utilize the information that
 is provide to them
- The Board's Laws and Regulations book has been updated

<u>GOAL 3 – LEGAL AND REGULATORY:</u> Establish and maintain fair and just laws and regulations that provide for the protection of consumer health and safety and reflect current and emerging, efficient and cost effective practices.

Ms. Johnson requested that a meeting be scheduled soon between the Legislation and Regulation Committee and Board staff to begin discussions.

Ms. Leiva provided an overview of the following highlights:

- Ms. Leiva announced a new regulation that Members have not yet heard about. This bill (Sponsored Free Health Care Events – Requirements for Exemption). This is a proposal to exempt out-of-state optometrists from participating in free health clinics. The Department has provided staff with language, which is being reviewed, so that it may be presented either in August or at the Legislation and Regulation Committee meeting
- staff is reviewing the preparatory materials of other boards who have already gone through the sunset review to get a sense of the questions the Sunset Review Committee will be asking, to become more fully prepared
- Ms. Leiva will be preparing a pilot of assessing continuing competency of optometrists. This will be discussed at a later time

<u>GOAL 4 – ENFORCEMENT:</u> Protect the health and safety of consumers of optometric services through the active enforcement of the laws and regulations governing the safe practice of optometry in the State of California.

Ms. Leiva provided an overview of the following highlights:

- All enforcement staff participated in the development and implementation of DCA's new enforcement model
- Ms. Kimball and Ms. Sieferman are participating in the Department's BreEZe project as well as workgroups developed as part of this project
- Ms. Sieferman served on the Probation Monitoring Workgroup that created a training program for the Department's probation monitors
- In accordance wit the Consumer Protection Enforcement Initiative, Ms. Kimball issues monthly statistical reports to the Department detailing complaint case activity
- The BreEZE project is anticipated to be completed by 2014
- All enforcement staff are being trained on the implementation of the entire enforcement process
- Dillon Christensen will attend the Enforcement Academy in Spring 2011
- On February 1, 2011, Ms. Miller, Ms. Sieferman, Ms. Bracco, and Ms. Kimball attended the National Certified Investigator/Inspector Training. This two-day course discussed investigative report writing and how to properly and effectively conduct an interview and investigation
- On February 24, 2011, Ms. Miller, Ms. Sieferman, Ms. Bracco, and Ms. Kimball attended the California District Attorney Association (CDAA) training conference hosted by the Department. Here, Department representatives discussed their enforcement processes and District Attorneys presented exemplar cases to promote participation with them by Boards and Bureaus
- Ms. Miller is working on developing and implementing a training program and retaining subject matter experts for the enforcement unit
- On December 30, 2010, Ms. Miller created a recruitment advertisement form which will be posted on the Board's website and, possibly, distributed in a mass-mailing to licensees
- In January 2011, the Board began developing an Expert Witness Handbook, which will serve as reference material for future experts
- On March 11, 2011, in conjunction with the Department's design team, Ms. Miller and Ms. Leiva created a new link to advertise expert witness recruitment on our website. Ideally, this will attract more interested parties. This should be completed in 2011-2012
- Ms. McGavin has been exploring the feasibility of gaining site inspection authority

 Ms. Miller continues to work on exploring further options for preventing unlicensed practice of optometry

<u>GOAL 5 – EDUCATION AND OUTREACH:</u> Proactively educate, inform, and engage consumers, licensees, optometry students and other stakeholders on the practice of optometry and the laws and regulations which govern it.

Ms. Leiva provided an overview of the following highlights:

- Staff continues to publish summaries of disciplinary actions on the Board's website
- All staff will be working on developing and disseminating a "Your State Board Starter Kit for New Optometrists
- Mr. Robinson, and staff, will continue the outreach program to optometry students and licensed optometrists at optometric events in California
- Staff will expand involvement in consumer outreach and health fairs
- Staff will continue to develop regular public relations (PR) opportunities that highlight timely and pertinent optometric information
- Ms. Leiva, and staff, will develop and disseminate new publications and forms in multiple languages
- There will be a website overhaul for continuity between the Boards and Bureaus. This is anticipated to occur in June 2011
- Staff continues to develop and foster partnership with health care advocates and stakeholders.
 Staff has excellent working relationships with the California Optometric Assocation (COA) and
 the American Optometric Association (AOA). Vision Services Plan (VSP) worked with staff on
 Assembly Bill (AB) 2683, which became effective January 1, 2011. Staff work with the
 Department of Health Services, and collaborate on enforcement issues with the Medical Board
 of California. Enforcement staff participated in a roundtable discussion with Northern California
 District Attorneys

<u>GOAL 6-ORGANIZATIONAL EFFECTIVENESS:</u> Develop and maintain an efficient and effective team of professional and public leaders and staff with sufficient resources to improve the Board's provision of programs and services.

Ms. Leiva provided an overview of the following highlights:

- Staff are working on identifying their training needs and establishing corresponding training plans
- Board members and staff are working to solidify the Board's national presence as a regulator optometry. Staff continue to request permission to attend national optometric meetings held by the Association of Regulatory Boards of Optometry (ARBO), AOA and COA. Dr. Yu is an active member of ARBO
- Ms. Maggio and Ms. McGavin will develop and implement the new Board member orientation and training program. Orientation and training information will be incorporated into the Administrative Procedures Manual
- Ms. Miller is updating and revising the Administrative Procedures Manual
- Ms. Leiva will continually update and disseminate the California Laws and Regulations Related to the Practice of Optometry
- Ms. Leiva continues to receive completed customer service satisfaction surveys. She will
 provide an update on the results at a future Board meeting
- Ms. Maggio and Board members continue to hold Board meetings in geographically diverse areas of state and invite local stakeholders

Dr. Goldstein noted that some of the ongoing items should have completion dates.

Mr. Kim announced that he will be attending several Health Fairs in Orange County on behalf of his company. He will forward the information to staff.

Board members and staff discussed a bill that deals with free vision services and the underserved population.

14. Public Comment for Items Not on the Agenda

Dr. Goldstein opened the floor for comment.

Dr. David Turetsky commented on his groups interest in nursing home care. He reported that at least one (and possibly three) optometrists in health care facilities are providing services to staff and basically neglecting the residents. Legislation prohibits this practice. Turetsky asked if the Board might send an announcement to the administrators of the nursing homes advising them of this concern.

Board members discussed this issue.

Mr. Kim announced that he will be attending the California Asian Pacific Islander Policy Summit 2011, on May 2-3, on behalf of his company. Given that members of this conference are also on the health committee, Mr. Kim noted that it would be great if staff could visit the Summit.

15. Suggestions for Future Agenda Items

Dr. Goldstein opened the floor to suggestions.

Dr. Turetsky asked if AB 778 can be on the next meetings agenda. Dr. Goldstein confirmed it will be discussed at the next meeting if not before that time.

Dr. Yu reported that ARBO is requesting official Board positions on the issues of maintenance of licensure, continued competence, and board certification. Dr. Yu stated she does not believe the timing will work out for discussion before a Board meeting. Dr. Goldstein suggested a conference call for discussion of this subject.

Dr. Yu explained that ARBO has sent out three very specific questions. The idea is to have an open dialogue, and healthy discussion around this very controversial issue (nationally) to get an idea of where all the jurisdictions stand.

Dr. Goldstein provided an overview of his observations and thoughts on this issue.

FULL BOARD CLOSSED SESSION

16. Pursuant to Government Code Section 11126(e)(1) the Board Will Confer With Legal Counsel to Discuss Pending Litigation: California Academy of Eye Physicians & Surgeons, and California Medical Association v. State Board of Optometry, Case Number CGC-11-507241, San Francisco Superior Court

17. Pursuant to Government Code Section 11126(c)(3), to Deliberate on Disciplinary Decisions

- **A.** Stipulated Settlement and Disciplinary Order, Huyen Nguyen, O.D., License Number OPT 10148
- B. Default Decision, Brett Cornelison, O.D., License Number OPT 9861
- **C.** Stipulated Settlement and Disciplinary Order, Brent Lee Gibson, O.D., License Number OPT 10198

18. Discussion Regarding Executive Officer Pay Scale

The Board convened to close session at 2:25 p.m.

FULL BOARD OPEN SESSION 19. Adjournment The Board agreed to adjourn at 3:30 p.m.	
Monica Johnson, Board Secretary	Date





2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To: Board Members Date: June 21, 2011

From: Brian Stiger, Senior Chief Deputy Director Telephone: (916) 575-7170

Department of Consumer Affairs

Subject: Agenda Item 4- Director's Report

The Director's Report will be presented by a representative from the Department of Consumer Affairs.



Memo

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To: Board Members Date: June 21, 2011

From: Mona Maggio Telephone: (916) 575-7176

Executive Officer

Subject: Agenda Item 5 – Executive Officer's Report

2011 Board Meeting Dates:

June 21, 2011 Junipero Serra State Building Los Angeles, CA.

August/September 2011 Department of Consumer Affairs Sacramento, CA

November 4, 2011 Northern CA. TBD

Board Members

The Board consists of 11 members, five of whom shall be public members. (BPC section 3010.5)

Name	Appointment Authority	Date(s) of Appointment Initial Reappointment	Expiration of Term
Dr. Lee Goldstein, OD	Professional - Governor	04/2003 11/01/2007	*06/01/2011
Dr. Susy Yu, OD	Professional - Governor	04/2003 05/24/2007	06/01/2010
Monica Johnson	Public - Governor	12/2005 05/25/2010	06/01/2013
Dr. Alejandro Arredondo, OD	Professional - Governor	11/01/2007	*06/01/2011
Dr. Kenneth Lawenda, OD	Professional - Governor	11/2007 12/22/2010	06/01/2014
Fred Naranjo, MBA	Public - Governor	04/2003 11/01/2007	*06/01/2011
Donna Burke	Public - Senate Rules	10/07/2010 06/01/2011	06/01/2015
Edward Rendon, MA	Public - Assembly	01/06/2009	*06/01/2011
Alexander C. Kim	Public - Governor	12/27/2010	06/01/2014
Vacant (06/01/2009)	Professional - Governor		
Vacant (06/01/2009)	Professional - Governor		

There are currently three professional member vacancies and four members are serving in their grace periods.

Dr. Susy Yu, OD, served her one year grace period and her tenure on the Board has expired. We are grateful for all her service and the wealth of information, insight and assistance she provided the staff, the board and her service to the consumers of California. Thank you, Dr. Yu.

Dr. Lee Goldstein, OD; Dr. Alejandro Arredondo, OD; Mr. Fred Naranjo; and Mr. Edward Rendon are currently serving their one year grace period on the Board.

Ms. Donna Burke was reappointed to the Board by Senator Darrell Steinberg, Senate Rules Committee. Her term will expire on June 1, 2015.

Budget

2010/2011 Fiscal Year

The Board's budget authority for the 2010/2011 fiscal year is \$1,651,385. As of May 31, 2011 Board expenditures total \$1,254,041 which reflects 76% of the Board's total budget. Regarding expenditures to date, the Board has spent 52% on personnel services and 18% on Attorney General and Office of Administrative Hearing expenses. The remaining expenses are attributed to operating expenses, equipment and examination development.

Projected expenses through the end of the fiscal year reflect an unencumbered balance of \$215,032...

The board's fund condition reflects for current year an 8.7 month reserve balance. The reserve drops to a 1.1 month reserve next fiscal year (Governor's Budget) due to the loan to the General Fund in the amount of one million dollars.

Revenue collected through May 2011 totals \$1,644,925.

With the end of the fiscal year approaching typical budget closure directives are implemented (budget restrictions, submission of travel claims, etc.) These directives are an effort to assist the budget office and Board in processing all expenditures related to the 2010/2011 fiscal year.

Work on the 2011/2012 state budget began early 2011. To date, a final agreement on the state budget has not materialized. In the event a budget agreement is not in place by July 1, 2011, the Board is prohibited from spending any money from its \$1,577.000 budget. So that the Board's core functions are not affected by a potential delay in reaching a budget agreement, Board staff is in the midst of the necessary preparations to ensure minimal impact to our programs.

Executive Orders

On April 26, 2011, Governor Brown issued Executive Order B-06-11, which restricts in-state and out-of-state travel. Specifically, no travel will be permitted unless it is mission critical or at no cost to the state. Mission critical travel is defined as travel directly related to enforcement responsibilities, auditing, revenue collection, a function required by statute, contract or executive directive, and job required training necessary to maintain licensure or similar standards required for holding a position.

The Board will continue to evaluate all travel for compliance with the Executive Order and its statutory mandates.

Personnel

The Board staff is comprised of 13.5 positions - ten full time staff, one half-time staff and one seasonal clerk. The Board has two vacancies, one full time management services technician and one half-time associate governmental program analyst (AGPA), which is a limited term position that was obtain through the Department of Consumer Affairs Consumer Protection Initiative (CPEI). Once the 2011/2012 budget is signed and in effect, the Board will be able to hire a staff services manager (SSMI) to provide a first level of supervision. Staff is also seeking to establish an AGPA position in its Enforcement Program and to make the limited term office technician position permanent.

Office Relocation

We have received the construction plan from the Project Manager, Ken Brown, DCA. The actual move is scheduled to begin July 27th with our first day up and running in our new office to be August 3rd. During the transition period, staff will be temporarily housed within the Bureau of Security and Investigative Services (BSIS).

Website

The following additions/updates were made to the Board's website since the last Board Meeting:

- Continuing Education Regulation Updated: Effective June 17, 2011
- Reminder: Glaucoma Certified (TPG or TLG) Optometrists are required to Complete 10 CE Hours in Glaucoma Specific Education effective January 8, 2011
- Frequently Ask Questions New fingerprinting Requirements for Optometrist Licensed Prior to April 1, 2007
- Frequently Asked questions About Glaucoma Certification
- Reformatted Meetings Page

Licensing Program

This is the peak season for evaluating optometrist applications and issuing licenses to new optometrists. NBEO released the candidate scores on June 14, 2011 and staff expects to receive the scores at the Board within a week. Because applicants are now required to submit an application for optometric licensure to become eligible to sit for the California Laws and Regulations Examination, the Board receives applications on an on-going basis versus prior years when applications were received primarily in April and May. This has provided an opportunity for staff to evaluate the applications as they are received and communicate with applicants on deficiencies and how to remedy them. In most cases, once the NBEO scores are received, the licenses will be issued within a day or two.

<u>Health Resources and Services Administration – Data Bank</u>

On June 14, 2011, Cheree Kimball, Dillon Christensen, and Mona Maggio participated in a webinar sponsored by the U.S. Department of Health and Human Services, Health Resources and Services Administration Bureau of Health Professions, Division of Practitioner Data Banks. The purpose of the webinar was to discuss the upcoming audit of data bank compliance activities for chiropractic, optometry, and physical therapy licensing authorities. The Board will be participating in the review of compliance for the years 2006 – 2009. Attached for your review is a copy of the power point presentation highlighting the areas of yesterday's presentation. Report of the audit's findings and recommendations will be reported at a future meeting.

Attachments:

- 1. Expenditure Projection
- 2. Fund Condition
- 3. Executive Order B-06-11
- 4. Bureau of Health Professions, Division of Practitioner Data Banks Power Point

BOARD OF OPTOMETRY - 0763 BUDGET REPORT FY 2010-11 EXPENDITURE PROJECTION

May 31, 2011

	FY 20	PRIOR YEAR	BUDGET	CUDDENT VEAD	FY 2010-11		
	EXPENDITURES	EXPENDITURES	STONE	CURRENT YEAR EXPENDITURES	PERCENT	PROJECTIONS	UNENCUMBERE
OBJECT DESCRIPTION	(MONTH 13)	5/31/2010	2010-11	5/3/2011	SPENT	TO YEAR END	BALANCE
EDOONNEL GEDVIOEG							
ERSONNEL SERVICES		000 754		0.44.007	040/	000 440	50.7
Salary & Wages (Staff)		226,754		341,387	81%	369,416	50,73
tatutory Exempt (EO)		64,544		69,888	86%	76,385	5,34
Temp Help Reg (Seasonals)		55,513		47,502	402%	55,224	(43,4
Temp Help (Exam Proctors)							
Board Member Per Diem		6,500		4,000	54%	5,200	2,1
Committee Members (DEC)		5,000		.,		-,	_,
Overtime							
		450.000		404 077	700/	240.072	20.00
Staff Benefits		152,336		194,377	78%	210,972	38,9
Salary Savings		0		0	0%		(42,3
OTALS, PERSONNEL SVC		505,647		657,154	90%	717,197	11,3
PERATING EXPENSE AND EQUIPMENT							
General Expense		13,081		11,020	18%	14,000	46,7
•							40,7
Fingerprint Reports		2,320		4,921	93%	5,306	
Minor Equipment		1,673		707	71%	1,000	
Printing		4,379		7,359	79%	8,000	1,3
Communication		4,019		3,633	42%	4,300	4,3
Postage		9,095		14,206	111%	14,206	(1,3
		9,090		14,200	11170	17,200	(1,3
Insurance		60.005				.=	
Travel In State		28,933		13,187	41%	15,800	16,6
Travel, Out-of-State		0					
Training		575		1,030	29%	1,030	2,5
Facilities Operations		61,395		62,407	106%	64,000	(5,32
		01,555		02,407	10070	04,000	(0,0
Utilities							
C & P Services - Interdept.		15		9,576	325%	9,576	(6,6
C & P Services - External							
DEPARTMENTAL SERVICES:							
Departmental Pro Rata		74,767		73,302	89%	82,658	••••••
Admin/Exec		61,622		91,542	92%	99,864	
						-	4
Interagency Services		0		0	0%	0	1.
IA w/ OER		22,244		21,864		21,864	(21,8
DOI-ProRata Internal		2,475		3,485	92%	3,800	
Public Affairs Office		5,368		7,073	92%	7,716	
CCED		2,992		4,301	92%	4,692	
INTERAGENCY SERVICES:		2,332		7,501	32 /0	4,032	
		4 000		7.000	000/		0.4.0
Consolidated Data Center		1,000		7,000	22%	7,000	24,6
DP Maintenance & Supply				98	7%	200	1,2
Central Admin Svc-ProRata		19,302		60,194	100%	60,194	
EXAM EXPENSES:							
Exam Supplies				•••••••••••••••••••••••••••••••••••••••			
· ·		0		0	00/	^	4
Exam Freight		0		0	0%	0	4
Exam Site Rental							
C/P Svcs-External Expert Administrative				150		250	(2
C/P Svcs-External Expert Examiners		0		0	0%		55,7
C/P Svcs-External Subject Matter		13,095		10,513	2.0	11,000	(11,0
ENFORCEMENT:		10,030		10,513		11,000	(11,0
		60.446		100.00=	0.401	040.000	F.4.0
Attorney General		88,448		186,885	64%	240,000	54,0
Office Admin. Hearings		18,048		25,245	54%	28,000	18,9
Court Reporters		11,897		658		700	(7
Evidence/Witness Fees		4,100		16,734	47%	20,000	15,9
DOI - Investigations		11.198		. 5,. 5 1	,0	0	. 5,0
V				<mark></mark>	00/		0.0
Major Equipment		2,198			0%	0	8,0
Special Items of Expense							
ther (Vehicle Operations)		41					
OTALS, OE&E		464,280		637,090	69%	725,156	203,6
OTAL EXPENSE		969,927		1,294,244	159%	1,442,353	215,0
							210,0
Sched. Reimb Fingerprints		(1,989)		(5,712)	95%	(6,000)	
Sched. Reimb Other		(4,975)		(4,310)			
		(28,599)		(30,181)			
Jnsched, Reimb Other		\ - 0,000/		(50, 101)			
		024.264		1 254 044	760/	4 426 252	245.0
Jnsched. Reimb Other ET APPROPRIATION		934,364		1,254,041	76%	1,436,353	215,0

0763 - State Board of Optometry Analysis of Fund Condition

(Dollars in Thousands)

(Dollars in Thousands)								
Proposed Governor's Budget 2011-12 Proposed FY 11-12 GF Loan			CY 2010-11		Governor's Budget BY 2011-12		BY+1 2012-13	
BEGINNING BALANCE	\$	806	\$	1,220	\$	1,143	\$	146
Prior Year Adjustment	\$	9		-	\$	-	\$	-
Adjusted Beginning Balance	\$	815	<u>\$</u> \$	1,220	\$	1,143	\$	146
REVENUES AND TRANSFERS Revenues: 125600 Other regulatory fees	\$	15	\$	14	\$	14	\$	14
125700 Other regulatory licenses and permits	\$	116	\$	115	\$	115	\$	115
125800 Renewal fees	\$	1,425	\$	1,425	\$	1,425	\$	1,425
125900 Delinquent fees	\$	8	\$	8	\$	8	\$	8
141200 Sales of documents	\$	_	\$	_	\$	_	\$	_
142500 Miscellaneous services to the public	\$	1	\$	1	\$	1	\$	1
150300 Income from surplus money investments	Ψ	7	Ψ \$	10	\$	16	\$	2
160400 Sale of fixed assets	\$ \$	_ '	\$	-	\$	- 10	\$	
161000 Escheat of unclaimed checks and warrants	\$	_	\$	_	\$	_	\$	_
161400 Miscellaneous revenues	\$	1	\$	1	\$	1	\$	1
Totals, Revenues	\$	1,573	\$	1,574	\$	1,580	\$	1,566
Transfers from Other Funds					_			
Proposed GF Loan Repayment	\$	-	\$	-	\$	-	\$	-
Transfers to Other Funds								
Proposed GF Loan	\$	-	\$	-	\$	-1,000	\$	-
Totals, Revenues and Transfers	\$	1,573	\$	1,574	\$	580	\$	1,566
Totals, Resources	\$	2,388	\$	2,794	\$	1,723	\$	1,712
EXPENDITURES								
Disbursements:								
0840 State Controller (State Operations)	\$	1	\$	2	\$	2	\$	_
8880 Financial Information System for CA (State Operations)	\$	-	\$	1	\$	7	\$	-
1110 Program Expenditures (State Operations) BrEZe funding realignment	\$ \$	1,167 -	\$ \$	1,651 -3	\$ \$	1,568 -	\$ \$	1,599 -
Total Disbursements	\$	1,168	\$	1,651	\$	1,577	\$	1,599
FUND BALANCE								
Reserve for economic uncertainties	\$	1,220	\$	1,143	\$	146	\$	113

8.9

8.7

1.1

8.0

NOTES:

Months in Reserve

A. ASSUMES WORKLOAD AND REVENUE PROJECTIONS ARE REALIZED

B. EXPENDITURE GROWTH PROJECTED AT 2% BEGINNING FY 2012-13

EXECUTIVE ORDER B-06-11

4-26-2011

WHEREAS the Governor's 2011-12 budget proposes to close the state's structural budget deficit in part through increased efficiency that will substantially reduce state operational expenses; and

WHEREAS since the beginning of this Administration, Executive Orders and other directives have been issued to restrict hiring in state government, drastically reduce the number of state cell phones and vehicles, and stop spending taxpayer dollars on free giveaway and gift items; and

WHEREAS the Governor's 2011-12 budget proposes to cut state operational expenses by reducing discretionary expenditures and increasing efficiency; and

WHEREAS restricting both in-state and out-of-state travel to only non-discretionary purposes will further reduce operational expenditures.

WHEREAS the Governor's 2011-12 budget proposes a reduction of \$413 million (\$250 million from the General Fund) in state operation efficiencies and other savings; and

WHEREAS restrictions on travel are necessary to help achieve these savings; and

NOW, THEREFORE, I, EDMUND G. BROWN JR., Governor of the State of California, by virtue of the power vested in me by the Constitution and the statutes of the State of California, do hereby issue the following orders to become effective immediately:

IT IS ORDERED that discretionary travel is prohibited. All in-state non-discretionary travel must be approved by Agency Secretaries or Department Directors who do not report to an Agency Secretary. All out-of-state travel must be approved by the Governor's Office.

IT IS FURTHER ORDERED that the new travel restrictions are as follows:

1. No travel, either in-state or out-of-state, is permitted unless it is mission critical or there is no cost to the state.

Mission critical means travel that is directly related to:

- Enforcement responsibilities.
- Auditing.
- Revenue collection.
- A function required by statute, contract or executive directive.
- Job-required training necessary to maintain licensure or similar standards required for holding a position.

Mission critical does not mean travel to attend:

- Conferences (even those that historically have been attended).
- Networking opportunities.
- Professional development courses.
- Continuing education classes and seminars.
- Non-essential meetings that can be conducted by phone or video conference.
- Events for the sole purpose of making a presentation unless approved by the Department Director.
- 2. No travel is permitted for more than the minimum number of travelers necessary to accomplish the mission-critical objective. This restriction applies even when there is no cost to the state.
- 3. Agency Secretaries or Department Directors who do not report to an Agency Secretary may authorize in-

state travel when the request conforms to the principles identified above.

- 4. As referenced in Budget letter 11-06, Agencies and Departments must submit their out-of-state travel requests to the Governor's office by May 6, 2011. No substitutions will be allowed for trips approved per this Budget Letter.
- 5. The Department of Finance will issue all necessary instructions and forms to implement this restriction on state travel. In addition, the Department of Finance will work with agencies and departments to develop targets for budgetary reductions in lieu of travel restrictions. Departments that achieve their target budget reductions, as determined by the Director of the Department of Finance, may seek exemption from the provisions of this executive order.

IT IS REQUESTED that other entities of State government not under my direct executive authority conduct an analysis to determine the discretionary nature of their travel in order to reduce unnecessary costs.

This Executive Order is not intended to create, and does not create, any rights or benefits, whether substantive or procedural, or enforceable at law or in equity, against the State of California or its agencies, departments, entities, officers, employees, or any other person.

I FURTHER DIRECT that as soon as hereafter possible, this Order shall be filed with the Office of the Secretary of State and that it be given widespread publicity and notice.

IN WITNESS WHEREOF I have hereunto set my hand and caused the Great Seal of the State of California to be affixed this 26th day of April 2011.

EDMUND G. BROWN JR. Governor of California	_
ATTEST:	
DEBRA BOWEN Secretary of State	

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THE DATA BANK COMPLIANCE ACTIVITES

CHIROPRACTIC, OPTOMETRY & PHYSICAL THERAPY LICENSING AUTHORITIES

Bill West, R.N., M.A.

U.S. Department of Health and Human Services
Health Resources and Services Administration
Bureau of Health Professions
Division of Practitioner Data Banks



Presentation Overview & ARSA

- I. Health Resources and Services
 Administration's (HRSA's) Bureau of
 Health Professions (BHPr), Division of
 Practitioner Data Banks
- II. State Licensing Authority Reporting Requirements
- III. Compliance Activities
 - Chiropractic, Optometry & Physical Therapy Licensing Authorities



HRSA's Bureau of Health

Professions



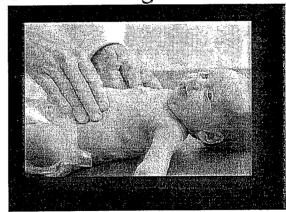


BHPF Mission



Increase the population's access to health care by providing national leadership in the development, distribution and retention of a diverse, culturally competent health workforce that can adapt to the population's changing health care needs and provide the highest

quality of care for all.



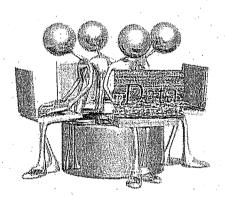


Division of Practitioner Data Banks



The Division of Practitioner Data Banks (DPDB), part of the Bureau of Health Professions, is committed to the development and operation of cost-effective and efficient systems that offer accurate, reliable, and timely information on practitioners, providers, and suppliers to credentialing, privileging and government authorities.

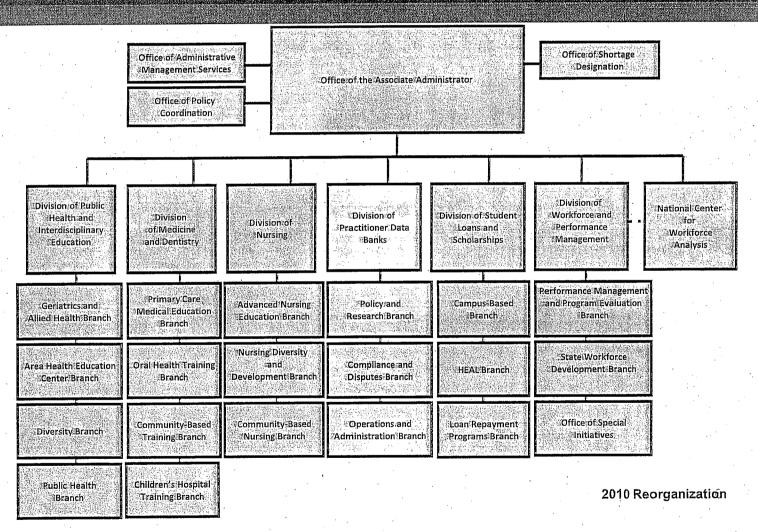






Bureau of Health Professions







Legislative Authorities



- The National Practitioner Data Bank (NPDB) was established through Title IV of the Health Care Quality Improvement Act of 1986.
 - Purpose is to act as an information clearinghouse, to collect and release certain information related to the professional competence and conduct of physicians, dentists, and other healthcare practitioners
- Section 1921 of the Social Security Act expanded the information collected and disseminated through the NPDB.
 - Final regulations went into effect March, 2010



Legislative Authorities



- The Healthcare Integrity and Protection Data Bank (HIPDB) was established under Section 1128E of the Social Security Act as added by Section 221(a) of the Health Insurance Portability and Accountability Act of 1996 (HIPAA).
 - Purpose is to deter fraud and abuse in the health care system and to promote quality health care by collecting and disseminating final adverse actions taken against health care practitioners, providers, and suppliers.



State Licensing Authority Reporting Requirements



- Adverse State licensure actions taken against <u>all</u> health care practitioners and health care entities
 - Guide for Reporting Practitioner
 Licensure Actions taken by State
 Licensing Authorities
 - http://www.npdbhipdb.hrsa.gov/resources/brochures/ReportingGuidanc e-PractitionerLicensureActions.pdf



State Licensing Authority Reporting Requirements



- Adverse State licensure actions, taken as a result of formal proceedings, are reportable to the Data Bank, within 30 days. These actions include:
 - Any adverse action, including revocation or suspension of a license, reprimand, censure, or probation;
 - Any dismissal or closure of the proceedings by reason of the practitioner or entity surrendering the license or leaving the State or jurisdiction;



State Licensing Authority Reporting Requirements



- Adverse State licensure actions, taken as a result of formal proceedings, are reportable to the Data Bank, within 30 days. These actions include:
 - —Any other loss of the license of the health care practitioner, or entity, whether by operation of law, voluntary surrender (excluding those due to non-payment of licensure renewal fees, retirement, or change to inactive status), or otherwise; and
 - —Any negative action or finding by such authority, organization, or entity regarding the health care practitioner, or entity.



compliance Activities



- Started February 2010
- Two initial groupings:
 - Never Reported Group
 - Adverse Action Comparison Group
 - Go to: http://www.npdb-
 hipdb.hrsa.gov/news/reportingCompliance.jsp
 - Results for Never Reported:
 - View Status of Compliance Effort
 - Results for Adverse Action Comparison:
 - View Status of Comparison Project



Compliance Activities



Overview

- Verification of contact information
- Data Capture public website / file exchange
- Data Analysis
- Gap report to Licensing Authority
- Reconciliation and correction of disciplinary actions
- Data cutoff
- Assign compliance status / Post results
- Case Management



Compliance Activities

- Data Capture
 - Review Period 2006-2009
 - Data obtained from Licensing Authority website
 - If not publicly available or only partial data on the website, data will be requested via secure file exchange
 - Inform us of the 'best' source to obtain your disciplinary actions
- Reporting Agents



Compliance Activities



- Data Analysis
 - We will identify actions not reported to the Data Bank
 - We will communicate Gaps in reporting with Licensing Authority



Compliance Addivities



- Licensing Authority Reconciliation and Correction
 - Submit reportable actions
 - Provide justification for non reportable actions
 - Make corrections as appropriate



Compliance Status Assignment ***

- Licensing Authority reconciliation data cutoff is September 1, 2011
- Assignment of compliance status based on Agency report reconciliation results
 - Compliant
 - Working Toward Compliance
 - Non Compliant
 - Under Review
 - http://www.npdb hipdb.hrsa.gov/news/reportingComplianceBackground.jsp#compliant
- Corrective Action Plan (CAP)



Posting Results



- Licensing Authority Compliance status posted on the Data Bank Website
 - Status posted by State & profession
 - To view results go to: <a href="http://www.npdb-http://www.npd-http://www.npd-http://www.npd-http://www.npd-http://www.npd-http://www.npd-http://www.npd-http://www.npd-http://www.npd-http://www
 - Look for: Adverse Licensure Action Comparison Project
 - View Status of Comparison Project



Case Management



- One on one assistance with adverse action report reconciliation
- Resources
 - Data Bank Compliance Coordinators
 - Education & training
 - Policy assistance
 - Help Desk
 - Report integrity
 - Website navigation



Question & Answer

To ask a question, press *1 on your telephone

To withdraw your question, press *2



Daila Bank Resources



- Web Site www.npdb-hipdb.hrsa.gov
 - NPDB and HIPDB Guidebooks
 - Interactive Training
 - FAQs, Brochures, and Fact Sheets
 - Statistics
 - Annual Reports
 - Instructions for Reporting and Querying
- Help Desk / Customer Service Center:
 1-800-767-6732 or 1-800-SOS-NPDB



Contact Information

Bill West R.N., M.A.

Division of Practitioner Data Banks

Compliance Coordinator

Telephone: 301-443-8441

Email: wwest@hrsa.gov





2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To:

Board Members

Date:

June 21, 2011

From:

Jessica Sieferman Probation Monitor Telephone:

(916) 575-7178

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Agenda Item 6A – Petition for Reduction of Penalty and Early

Termination of Probation

The State Board of Optometry is being asked to consider the following Petitions:

Reduction of Penalty or Early Termination of Probation of:

Dr. David Muris, O. D.

The Board is asked to grant or deny the petition after considering the facts presented at the hearing.

Deputy Attorney General, Michelle McCarron, will represent the interest of the public's health, safety and welfare, provide the petitioner's license history, as well as help the Board obtain the information it needs to evaluate the petition to reduce penalties or terminate probation.

The Board Members may ask questions, which should be simple and to the point and directed toward rehabilitation and assessing ability to practice safely, either with or without conditions. As stated in the California Code of Regulations (CCR), Section 1516, the criteria for determining whether a petitioner has shown rehabilitation is as follows:

CCR§ 1516. Criteria for rehabilitation

- (a) When considering the denial of a certificate of registration under Section 480 of the Code, the Board, in evaluating the
- rehabilitation of the applicant and his/her present eligibility for a certificate of registration, will consider the following criteria:
- (1) The nature and severity of the act(s) or crime(s) under consideration as grounds for denial.
- (2) Evidence of any act(s) committed subsequent to the act(s) or crime(s) under consideration as grounds for denial which also could be considered as grounds for denial under Section 480 of the Code
- (3) The time that has elapsed since commission of the act(s) or crime(s) referred to in subdivision (1) or (2).

(4) The extent to which the applicant has complied with any terms of parole, probation, restitution, or any other sanctions lawfully imposed against the applicant.

(5) Evidence, if any, of rehabilitation submitted by the applicant.

(b) When considering the suspension or revocation of a certificate of registration on the grounds that the registrant has been convicted of a crime, the Board, in evaluating the rehabilitation of such person and his/her present eligibility for a license, will consider the following criteria:

(1) Nature and severity of the act(s) or offense(s).

(2) Total criminal record.

(3) The time that has elapsed since commission of the act(s) or offense(s)

(4) Whether the licensee has complied with any terms of parole, probation, restitution or any other sanctions lawfully imposed against the licensee.

(5) If applicable, evidence of expungement proceedings pursuant to Section 1203.4 of the Penal Code.

(6) Evidence, if any, of rehabilitation submitted by the licensee.

(c) When considering a petition for reinstatement of a certificate of registration under Section 11522 of the Government Code, the Board shall evaluate evidence of rehabilitation submitted by the petitioner, considering those criteria of rehabilitation specified in subsection (b).

An Administrative Law Judge will sit with the Board and preside over the hearing to maintain order, determine admissibility of documents, assist the Board during closed session and write the Board's decision.

If the Board decides to deny the Petition, it must state its reasons for doing so.

Ms. Jessica Sieferman, Probation Monitor, prepared a compliance report for Dr. Muris.

PROBATION COMPLIANCE REPORT

Name of Optometrist: Dr. David Muris, O.D.

Case #: CC 2006-96 OPT License: #5059

Probation Monitor:

Jessica Sieferman

Jurisdictional Document:

Stipulated Settlement and Disciplinary Order

No. 2007110254

Term of Probation: October 9, 2008 - October 9, 2013

1) OBEY ALL LAWS: Did the Optometrist obey <u>all</u> laws, and report violations of any laws on time?

There is no record of any violations, and Dr. Muris has not reported violating any laws since the effective date of the Decision.

2) COOPERATE WITH THE PROABTION PROGRAM: Did the Optometrist fully cooperate with the Board's Probation Program and cooperate with Board Representatives?

Yes. Dr. Muris has fully cooperated throughout his entire probation program

3) REPORT IN PERSON: Did the Optometrist appear for probation interviews as directed?

Yes, Dr. Muris appeared for all scheduled interviews as directed.

4) RESIDENCY, PRACTICE, OR LICENSURE OUTSIDE OF STATE: Did the Optometrist leave California to reside or practice during the probation term?

No, Dr. Muris did not leave California to reside or practice outside of state during his probation term.

5) SUBMIT WRITTEN REPORTS: Did the Optometrist submit or cause to be submitted to the Board, all of the documents required for probation on time?

Dr. Muris submitted all Quarterly Reports as directed.

6) FUNCTION AS AN OPTOMETRIST: Did the Optometrist work as an Optometrist for the minimum required time?

Yes, to the Board's knowledge, Dr. Muris practiced at least the minimum required by this condition: "24 hours per week for 6 consecutive months, within each year of probation."

7) EMPLOYMENT APPROVAL AND REPORTING REQUIREMENTS: Did the Optometrist obtain approval from the Board prior to commencing the practice of optometry?

By the time Ms. Sieferman became Dr. Muris' probation monitor, he had been on probation for a little over two years and had been working. There is no record in Dr. Muris' file of the previous monitor approving employment or the fulfillment of this requirement. However, that does not mean the approval was never given.

8) EMPLOYMENT LIMITATIONS: Did the Optometrist work in any capacity prohibited by this condition?

No, Dr. Muris has maintained compliance with this condition.

9) COMPLETE OPTOMETRY COURSES: Did the Optometrist take all optometry courses required?

Yes. Dr. Muris continuously exceeds the required 25 hours per year of additional CE. In addition, Dr. Muris completed his ethics course, given by Dr. Morris Berman, on March 9, 2011.

10) SEE CLEARLY METHOD: Did the Optometrist advertise, sell, endorse, or assist in advertising, selling or endorsing the product known as the See Cleary Method or any product substantially similar?

No. According to Board records, Dr. Muris has not advertised the See Clearly Method or any similar product. When asked during compliance interviews, Dr. Muris maintains that he is in compliance with this condition.

11) POSTING: Did the Optometrist post a notice in his place of practice informing his patients that his license is on probation? Did the notice comply with the requirements outlined in this condition?

Yes. The notice is compliant and is posted in his office, as indicated by a photograph in Dr. Muris' file.

12) AMERICAN VISION INSTITUTE: Has the Optometrist complied with this condition in that he has not had any affiliation with American Vision Institute or any similar entities?

There is no record of any further associations with American Vision Institute or any similar entities. Dr. Muris maintains that he is in compliance with this condition.

13) RESTRICTION AS TO ADVERTISING: Did the Optometrist receive prior Board approval for all advertisements?

Yes. Dr. Muris continuously sought prior approval for all advertisements.

14) COST RECOVERY: Did the Optometrist pay all costs owed to the Board?

No. Dr. Muris owed a total of \$14,809.25. Dr. Muris agreed to a payment plan of \$308.53 per month of probation. Dr. Muris has paid a total of **\$8,021.59**, and has a remaining balance of **\$6787.66**. However, Dr. Muris previously stated that, if his Petition is granted, he would pay the remaining balance immediately.

15) VIOLATION OF PROBATION: Did the Optometrist violate any condition of probation or any laws?

No. According to Dr. Muris' file, he has been in compliance throughout his entire term of probation. There are no Notifications of Noncompliance in his file.

16) LICENSE SURRENDER: Did the Optometrist surrender his license at any time during probation?

No. Dr. Muris maintained a valid license throughout the entire term of probation.

Signature of Probation Monitor

G///D

EUDY FOPTCMETRY

2010 DEC 15 PM 5: 43

David W. Muris, O.D. 1111 Howe Avenue, Suite 235 Sacramento, CA 95825 Phone: (916) 929-9162

Fax: (916) 929-8837

December 15, 2010

Department of Consumer Affairs California State Board of Optometry 2420 Del Paso Road, Suite 255 Sacramento, CA 95834

Attn: Jessica Sieferman, Probation Monitor

RE: Petition for Reduction of Penalty or Early Termination of Probation

Dear Jessica,

Enclosed please find my Petition for Reduction of Penalty or Early Termination of Probation. I want to thank you for the assistance and information you have provided me.

I look forward to hearing from you regarding the scheduling of the March Board Meeting and being on its agenda.

Sincerely,

David W. Muris, O.D.

On Mmun of

Encl: Petition for Reduction of Penalty or Early Termination of Probation



Board of Optometry

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170/(866) 585-2666 www.optometry.ca.gov



PETITION FOR REDUCTION OF PENALTY OR EARLY TERMINATION OF PROBATION

No petition for reduction of penalty or early termination of probation will be entertained until one year after the effective date of the Board's disciplinary action. The decision of the petition will be made by the full Board and in accordance with the attached standards for reinstatement or reduction of penalty. Early release from probation or a modification of the terms of probation will be provided only in exceptional circumstances, such as when the Board determines that the penalty or probationary terms imposed have been excessive, considering both the violation of law charged and the supporting evidence, or when there is substantive evidence that there is no more need for the degree of probationary supervision as set forth in the original terms and conditions. As a rule, no reduction of penalty or early termination of probation will be granted unless the probationer has at all times been in compliance with the terms of probation.

PLEASE TYP	E OR PRINT LEGIB	LY	•						
1: NAME	(FIRST)	(MIDDLE)	(LAST)		CERTIFICATE OF REGISTRATION NO.				
	David	William	Muris		CA 5059T				
2. ADDRESS	(NUMBER) 1111	(STREET)	0.44-00		DATE OF BIRTH				
	1111	Howe Avenue	e, Suite 235		11/13/1940				
(CITY)	(STATE)	(ZIP CODE)			TELEPHONE				
Sacramen		95825			(916) 929-9162				
3. PHYSICAL	DESCRIPTION	(HEIGHT)	•	COLOR)	(HAIR COLOR)				
		5'10"	185 lbs B	lue	Blond				
4. EDUCATION	ON: NAME(S) OF S	CHOOL(S) OR COLLEGI	E(S) OF OPTOMETRY A	TTENDED					
NAME OF SC									
		ge of Optometry							
ADDRESS	(NUMBER)	(STREET)							
2575 Yorba Linda Boulevard									
(CITY)	(STATE)	(ZIP CODE)							
Fullerton	CA	92831							
5. ARE YOU	CURRENTLY LICEN	ISED IN ANY OTHER ST	ATE? YES	(NO)					
STATE .	LICENSE NO.	ISSUE DATE	EXPIRATION DATE	LICENSE	STATUS				
List locations	s, dates, and types o	f practice for 5 years prior	r to discipline of your Cali	fornia licens	e.				

LOCATION DATE FROM DATE TO TYPE OF PRACTICE

1111 Howe Ave,
#235,Sacramento, CA 95825

DATE FROM DATE TO TYPE OF PRACTICE

General Primary Care

		2)
7. Are you or have you ever been addicted to the use of narcotics or alcohol?	YES (NO)
3. Are you or have you ever suffered from a contagious disease?	YES (100)
9. Are you or have you ever been under observation or treatment for mental disorders, alcoholism or narcotic addiction?	YES (NO)
10. Have you ever been arrested, convicted or pled no contest to a violation of any law of a foreign country, the United States, any state, or a local ordinance? you must include all convictions, including those that have been set aside under Penal Code Section 1203.4 (which includes diversion programs)	YES (NO)
11. Are you now on probation or parole for any criminal or administrative violations in this state or any other state? (Attach certified copies of all disciplinary or court documents)	YES (NO
12. Have you ever had disciplinary action taken against your optometric license	VE0 /	110

IF YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, YOU MUST ATTACHMENT A STATEMENT OF EXPLANATION GIVING FULL DETAILS.

ON A SEPARATE SHEET OF PAPER PROVIDE THE FOLLOWING INFORMATION

SEE EXPLANATION ATTACHED

- 3. List the date of disciplinary action taken against your license and explain fully the cause of the disciplinary action.
- 14. Explain fully why you feel your license should be restored, or the disciplinary penalty reduced.
- 15. Describe in detail your activities and occupation since the date of the disciplinary action; include dates, employers and locations.
- 16. Describe any rehabilitative or corrective measures you have taken since your license was disciplined to support your petition.
- 17. List all post-graduate or refresher courses, with dates, location and type of course, you have taken since your license was disciplined.
- 18. List all optometric literature you have studied during the last year.

in this state or any other state?

- 19. List all continuing education courses you have completed since your license was disciplined.
- 20. List names, addresses and telephone numbers of persons submitting letters of recommendation accompanying this petition.

I declare under penalty of perjury under the laws of the State of California that the answers and information given by me in completing this petition, and any attachments, are true and I understand and agree that any misstatements of material facts will be cause for the rejection of this petition.

Date 12-15-2010 Signature 2011 M Mann-501

All items of information requested in this petition are mandatory. Failure to provide any of the requested information will result in the petition being rejected as incomplete. The information will be used to determine qualifications for sinstatement, reduction of penalty or early termination of probation. The person responsible for information maintenance is the Executive Officer of the Board of Optometry at 2420 Del Paso Road, Suite 255, Sacramento, California, 95834. This information may be transferred to another governmental agency such as a law enforcement agency, if necessary to perform its duties. Each individual has the right to review the files or records maintained on them by our agency, unless the records are identified confidential information and exempted by Section 1798.3 of the Civil Code.

12. Have you ever had disciplinary action taken against your optometric license in this or any other state?

I have not had any disciplinary action ever taken against my optometric license except for the Stipulated Settlement of October 9, 2008 which this petition applies to.

13. List the date of the disciplinary action taken against your license and explain fully the cause of the disciplinary action.

Disciplinary action was taken against my license October 9, 2008. I was involved with Steven Beresford, PhD, Founder of American Vision Institute (AVI), Merrill Allen, O.D., PhD., Professor Emeritus at Indiana School of Optometry, and Francis Young, PhD, Professor Emeritus at Washington State University. Both Professors, Drs. Allen and Young, were recipients of the American Optometric Association's highest award, the Apollo Award. Together we wrote a book, 'Improve Your Vision without Glasses or Contact Lenses' published by Simon and Schuster.

A company from Iowa (Vision Improvement Technologies) contacted American Vision Institute (AVI) regarding a program of vision improvement based on the book, 'Improve Your Vision Without Glasses or Contact Lenses'. We, AVI and I, cooperated in the "See Clearly Method" project which was ideas and eye exercises to help people with their vision. In fact I invested with the owners in the company approximately 2% of the value of the company. I had neither ownership per se nor any operational control. The See Clearly Method was designed to be an adjunct or supplemental program used under the supervision of an Optometrist or an Ophthalmologist. The Accusation and Stipulated Settlement and Disciplinary Order occurred as a result of my association and actions with the Iowa Company, the See Clearly Method and the American Vision Institute. The Probation period was stipulated from October 9, 2008 until October 9, 2013.

14. Explain fully why you feel your license should be restored, or the disciplinary penalty reduced.

I respectfully request my license be fully restored and the disciplinary penalty reduced to reflect current time served (almost 2 ½ years) for the following reasons.

- A. I have complied with all 16 items of the Disciplinary Order.
- B. All the conditions that caused the Probation have been remedied. Specifically the Iowa Company (VIT) offering the See Clearly Method no longer exists and the product is not available. I am no longer associated with the American Vision Institute. I no longer use the See Clearly Method or any programs like it in my office. I am in communication with my Probation Monitor and report quarterly and have paid restitution on a monthly basis.

- C. The probation order clearly contemplated that I would continue my existing practice. Paragraph 7 of the order provides that "Respondent may continue to practice Optometry in his current office, subject to the restrictions in this Order..."
- D. Two changes in the marketplace have made it impossible for me to maintain a viable practice under the Order. First, the number of patients having insurance has increased. Today, approximately 90 plus percent of my patients are covered by insurance. The trend is for more patients to be covered by insurance, and Vision Service Plan (VSP) has by far the largest market share in Sacramento. Of the approximately 90 plus percent of my patients with insurance, over 75% are covered by VSP. Second, when the Order was issued, as an Optometrist on Probation, I was able to see VSP patients under the supervision of another Optometrist. VSP changed its policy to deny reimbursement for services provided by any optometrist on probation, regardless of the reason for the probation. A second smaller insurance company has now followed suit.
- E. The reason for the disciplinary action is now wholly irrelevant to the manner in which I practice optometry. As explained above, I no longer engage in the practices that concerned the Board. Neither the Board, insurance companies, nor my patients have ever questioned the manner in which I currently conduct my practice. For over 40 years, most of my practice has involved the procedures and techniques I currently use.
- F. The Board's action clearly contemplated that I could continue to practice. I have complied with all other requirements of the Order. The market conditions that now make it impossible for me to continue my practice successfully were unknown to the Board, indeed did not then exist, when the Order was issued. Accordingly, continuation of the probationary period is unnecessary and would serve no purpose other than to turn the Board's original decision to place me on probation into a de facto ban on my ability to practice independently.
- G. Moreover, ending the probation would be in the best interests of my many long-standing patients. If the order continues, they must either pay out of pocket or seek out a new provider, which would destroy a long established doctor/patient relationship.
- H. Ending the probation is also in the best interests of my staff and their livelihood, especially in these economic times. Two of my staff are the sole support of their families. If the order continues it is likely that the practice will need to let go several more staff and/or cease to exist.
- J. There has never been a claim of optometric negligence regarding patient care in my 41 years of practice.
- 15. Describe in detail your activities and occupation since the date of the disciplinary action; include dates, employers and locations.

Since the date of the disciplinary action I have been practicing Optometry at my practice location, 1111 Howe Avenue, Suite 235, Sacramento, CA 95825 to the present. I practiced at this location continuously since approximately 1975. During this time I have continued my membership beginning in 1970 with the American Optometric Association, the California Optometric Association, Sacramento Valley Optometric Association (SVOS), and the Optometric Extension Program Foundation. (OEP). I was past President of the SVOS and past Regional Director of OEP. For a number of years I was a member of Point West Rotary. I have been a member of the Better Business Bureau with an A+ rating since 1985 (certificate attached). I am a member of the Sacramento Chamber of Commerce.

16. Describe any rehabilitative or corrective measures you have taken since your license was disciplined to support your petition.

I am currently undertaking the completion of the Ethics course required by the Stipulated Decision and Disciplinary Order. I have never had any ethics courses in conjunction with my Optometry training or Continuing Education.

Since the date of the disciplinary action I have provided significantly more free exams and glasses to patients who are unable to pay than previously.

I am witnessing the repercussions for my patients, my staff and, most importantly, my wife. I will do everything in my power to ensure nothing like this will happen again.

I have ceased doing the activities which caused this Probation, i.e. I am no longer associated with the See Clearly Method, Vision Improvement Technologies (they no longer exist), the American Vision Institute, and no longer offer the See Clearly Method or similar material in my office.

17. List all post-graduate or refresher courses, with dates, location and type of course, you have taken since your license was disciplined.

I have begun the Ethics Course provided by the Board in conjunction with Southern California College of Optometry and will have it successfully completed before the end of January 2011. The expenses are \$900.00 for the course, transportation, food and lodging. They are estimated to be \$375.00 for a total of approximately \$1,275.00.

18. List all optometric literature you have studied during the last year.

6

Review of Optometry
Optometric Management
en Vision, news from the UC Davis Health System Eye Center
Journal of Behavioral Optometry
Contact Lens Spectrum
AOA Journal
COA Journal
Ophthalmology Times

19. List all continuing education courses you have completed since your license was disciplined.

Date	CE Hrs	Course
10/10/2008	2	Educating Patients About Ultraviolet Radiation, Dr. Stephen Cohen,
10/10/2000	· . -	New England College of Optometry, Contact Lens Spectrum
10/21/2008	2	Tales of the Optic Nerve, Lewis Bliss, MD, FAAO, SVOS, Sacramento,
10/21/2000	-	CA
11/14/2008		Monterey Symposium, 11/14-11/16/2008, Monterey, CA:
11/1-1/2000	1	Effects of Systemic Medications on Contact Lens Wear, Dr. Schornack,
	-	OD, Monterey, CA
	2	Contact Lens Complications, Dr. Schornack, OD, Monterey, CA
`	2	Understanding Neurological Diseases – Multiple Sclerosis, Dr. Agarwal,
	- 1 · 2	MD, Monterey, CA
1/15/2008	2	The Pharmacology of Glaucoma, Damn Lies and Statistics, Dr. Onofrey,
11/13/2006	2	OD, RPh, FAAO, Monterey, CA
	n	Innovations in Glaucoma Treatment – What's New, What's True, Dr.
	2	Semes, OD, Monterey, CA
11/16/2000	2	Management of Ocular Pain and Inflammation, Dr. Onofrey, OD, RPh,
11/16/2008		
111/10/000		FAAO, Monterey, CA Third World Mission Eye Care, Robert B. Miller, MD, SVOS,
11/18/2008	2	
.10/11/0000	, · 1	Sacramento, CA An Easily Overlooked Disease: Ocular Ischemic Syndrome, Anjali Patel,
12/11/2008	1	
4 10 0 10 0 0 0		OD and Meredith Whiteside, OD, FAAO, California Optometry Journal
1/20/2009	2	The New Glaucoma Bill, Aaron Lech, O.D., SVOS, Sacramento, CA
1/29/2009	1	Glaucoma Review, Robert DiMartino, OD, MS, FAAO, Meredith M.
	_	Whiteside, OD, FAAO, California Optometry magazine
2/11/2009	2	Comprehensive Evaluation of Lid Disease, Paul Karpecki, OD, Kelly
		Nicholas, OD, Optometric Management, PA College of Optometry
2/17/ 2009	2	Emerging Trends in Contact Lenses, Mark Andre, FAAO, SVOS,
		Sacramento, CA
3/24/2009	3 .	1) Diagnosing Retinal & Optic Disc Disease w/ the OCT 2) What's
		New in Corneal Surgery? 3) Dysfunctional Tear Syndrome: Current
		Treatment Recommendations, Abbot Medical Optics/Eyemaginations,
<i>)</i>	****	Inc., Drs. Lewis, Grutzmacher, Sierra, MD's, Sacramento, CA
^ 1/2009	2	Ocular Surface Disease, John Lahr, OD, FAAO, SVOS, Sacramento, CA
29/2009	2	Therapeutic Opportunities in Anterior Segment Disease, Drs. Cooper and

•	· ·	Meister, MD's, Pacific Laser Eye Center, Sacramento, CA
5/19/2009	2	Dry Eye and Lid Disease & Strategies for Contact Lens Care, John
		Schachet, OD, FAAO, SVOS, Sacramento, CA
12/1/2009	1	New Approaches for Reducing Risk Macular Degeneration, Lloyd Snider,
		OD, Optometric Management, Pennsylvania College of Optometry
12/1/2009	1	Concurrent Treatment for Glaucoma and Ocular Surface Disease, Robert
		Wooldridge, OD, FAAO, Optometric Management, Pennsylvania College
* .		Of Optometry
12/2/2009	. 1	Revolutionizing Glaucoma Diagnosis and Treatment Using Advanced
12,2,200	*	Technology, John Warren, OD, Optometric Management, Pennsylvania
		College of Optometry
1/27/2010	. 1	Multi-Disciplinary Patient Care for Diabetes, Tina Mac Donald, OD,
1/2//2010	1	FAAO, California Optometry magazine
3/25/2010	3	
3/23/2010	J	Diagnostic Dilemmas in Glaucoma: Red Eye and how to treat it;
		Refractive Options in 2010, Drs. Lewis, Grutzmacher and Sierra, MD's, Sacramento, CA
3/31/2010	1 .	
3/31/2010		Providing Optimal Optics For Your Astigmatic Cataract Patients, Leo
	•.	Semes, OD, Review of Optometry, University of Alabama School of
4/1/2010	· 1·	Optometry Description APEDS The Prince III P. 11 St. 1 1 27 2
4/1/2010	· 1·	Beyond AREDS – The Fringe Has Become the Standard of Eye Care,
4/12/2010	2	Mark A. Slosar, OD, FAAO, California Optometry magazine
4/12/2010	. 2	An Expert Perspective on Lens Care, Leo Semes, O.D., Review of
4/00/0010	2	Optometry, University of Alabama School of Optometry
4/20/2010	. 2	A Primer on Optical Coherence Tomography, Bonnie Quiroz, MD, SVOS,
<i>5/</i> 19/2010	^	Sacramento, CA
5/18/2010	. 2	A Day in the Retina Clinic, Joel Pearlman, MD, SVOS, Sacramento, CA
5/18/2010	2	Proven Strategies to Market Your Ocular Allergy Practice, John M. G.
		Rumpakis, OD, MBA, Optometric Management, Pennsylvania College of
F. /1 0 /0 0 1 0		Optometry
5/18/2010	1	Shedding Light on a New Era in Refraction, John Warren, OD,
		Optometric Management, Pennsylvania College of Optometry
5/18/2010	1	Appreciating the Complexities of Glaucomatous Eyes-Inside and Out,
		Leo P. Semes, OD, Optometric Management, Pennsylvania College of
- /- 0 /- 0 0		Optometry
5/18/2010	1	Seizing Profitable Opportunities in the Treatment and Management of
		Ocular Allergy, Arthur B. Epstein, OD, John M. B. Rumpakis, OD,
	•	Optometric Management, Pennsylvania College of Optometry,
6/1/2010	2	Fitting Kids With Contact Lenses, Pauline Cho, PhD, FAAO, FBCLA &
· ·		Sin Wan Cheung, MPHIL, FAAO, Contact Lens Spectrum, New England
		College of Optometry
7/23-25/2010	13	Tahoe Seminar, South Lake Tahoe, CA
	• •	Clinical Decisions in Glaucoma, Robert Wooldridge, OD;
		What's New in Contact Lenses, LaMar Zigler, OD, FAAO;
		CS Eye and Future of Contact Lenses, Arthur Epstein, OD, FAAO;
		Advanced Dry Eye, Sheffer Tseng, MD, PhD;
		Common Ocular Diseases and Refractive Surgery, Shachar Tauber, MD;
		6,

		Retinigmas - Puzzles for the Puzzling Depths of the Eye, Paul Karpecki,
		OD, FAAO and Joel Pearlman, MD
7/29/2010	i	Is UV Good or Bad? Health Benefits and Risks Involving Ultraviolet
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Light, Donald L. Barniske, OD, FCSO, California Optometry magazine
8/31/2010	2	A Brief Look at Current Thoughts on Glaucoma Management and
		Diagnosis, Review of Optometry, University of Alabama School of
		Optometry
9/21/2010	2	East Meets West: Effective Management of Common Ocular Conditions,
		Aaron Lech, OD, SVOS, Sacramento, CA
10/19/2010	2	Retina Report, Joel Pearlman, MD, SVOS, Sacramento, CA
11/12/2010	1	Prescribing Anti-Infective Medications for Patients Who Are Pregnant or
		Breastfeeding, RoseAnn L. Jankowski, Pharm.D, COA Magazine
11/16/2010	2	Eye of Beholder & Science Based Nutrition for Patients with Diabetes,
		Paul Chous, MA, OD, FAAO, SVOS, Sacramento, CA
12/12/2010	. 8	Building a Therapeutic Practice: Ocular Surface Disease, Building A
		Therapeutic Practice: Coding & Billing, John W. Lahr, OD, FAAO and
	•	Marc Bloomenstein, OD, FAAO

20. List names, addresses and telephone numbers of persons submitting letters of recommendation accompanying this petition.

Letters are in the following order.

Professional

- Ronald H. Sargis, Federal Judge, and patient, 4413 Vico Way, Sacramento, CA 95814, 916-930-4544
- Timothy J. Muris, Esquire, Foundation Professor, George Mason University School of Law, 3301 North Fairfax Dr., Arlington, VA 22201-4426, 703-993-8000
- H. Douglas Cooper M.D., Ophthalmologist, 1220 25th Street, Sacramento CA 95816, 916-452-4706
- Richard B. Meister, M.D., Ophthalmologist, 5959 Greenback Lane, Ste. 310, Citrus Heights, CA 95621, 916-723-7400,
- Richard A. Lewis, M.D., Ophthalmologist, 1515 River Park Dr., Ste. 100, Sacramento, CA 95815, 916-649-1515
- William Richardson, O.D., 11879 Kemper Rd Ste 6, Auburn, CA 95603 530-885-1234
- Gary K. Scheffel, O.D., 9490 Madison Ave., Ste. 100, Orangevale, CA 95662 916-988-2212
- Bill Henshaw, O.D., FCOVD, 801 S. Fairmont Ave., #5, Lodi, CA 95240 209-334-2020
- James M. Keppler, D.C., patient, 5667 Freeport Blvd., Sacramento, CA 95822, 916-422-5111
- Robert A. Williams, Executive Director, Optometric Extension Program Foundation, Inc., 1921 E. Carnegie Ave., 3L, Santa Ana, CA 92705-5510,

Better Business Bureau®

Start With Irust

BBB Northeast California



Dr. David W. Muris O.D.

(DBA) Sacramento Visioncare Optometric Center

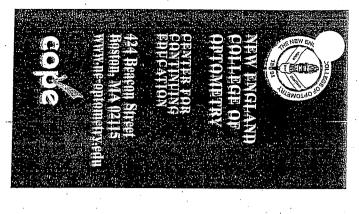
Sacramento, CA 95825

A+ Rating

MAR. 1985 - MAR. 2011

bborore

CONTINUING EDUCATION



Contact Lens Spectr. Just 2008
Educating Patients About Ultraviolet Radiation
Dr. Stephen Collen
COPE # 22751-60 2 Credit Hours

SENT 0CT 1.0 2008

Dear Doctor

This certifies that you have received the above continuing education credits.

and there is a \$15.00 service charge per copy. Requests for additional copies of this continuing education credit slip must be in writing,

Thank you for your interest in the programs offered through the Center for Continuing Education.

Sincerely,

Clifford Scott, OD, MPH Interim Director, Continuing Education

Validation requires your signature:

CALIFORNIA LICENSE NO. 5059

CERTIFICATION OF PARTICIPATION IN CONTINUING EDUCATION

THIS WILL CERTII	FYTHAT: MUR	15	DAVID	
THIS WILL CLICIT	Last Name	First	Middle	• .
1111 1+10	o Aup	Sac	Ca	9582,
(Address of Practice	Location)	City	State	Zip
Social Security Num	ber	_	7	
		/ Mm	mg2	
	Signature of I	Jensee		
COURSE:	"Tales of the Optic Ne (Course Title)	rve"		
SPONSORED BY	Sacramento Valley (Intometric Society		
2101001010101010101				· .
LOCATION:	VSP Facility, Ranc	ho Cordova, CA		
• .				
DATE	October 21, 2008	Two_(2 (CE Hour	· .	• • • •
COURSE INSTRU	CTOR(S): _Lewis Blis	s, MD, FAAO		
•				
		OI SCHAUFFELE	-, 60	<u>. </u>
	Heidi	Schauffele, OD		

*ENTIRE FORM MUST BE COMPLETE Please DO NOT send any records of Continuing Education attendance to the board office until requested to do so.

Program Director



California Optometric Association

2415 K Street, Sacramento, CA. 95816 P.O. Box 2591, Sacramento, CA. 95812-2591

Toll-Free: (800) 877-5738

Fax: (916) 448-1423

License Number: 05059

David W. Muris, O.D. 1111 Howe Ave #235 Sacramento, CA 95825

O - OTHER (Binocular Vision, Centent Lenses, Low Vision, Vision Therapy) PM - PRACTICE MANAGEMENT AGO - American Board of Opticlarry - Approvad NCLE - Natignal Contact Lans Examinars Approvad

California Optometric Association Monterey Symposium 2008 Monterey, CA November 14 - 16th, 2008

CONTINUING EDUCATION TRANSCRIPT

COURSE TITLE	Date	Speaker	CE HRS	Calegory	COPE
• 103 - Effects of Systemic Medications on Contact Lens Wear	11/14/08	Julie Ann Schornack, O.D.	1.00	TPA	COPE: 19130 TH
106 - Contact Lens Complications	11/14/08	Julie Ann Schornack, O.D.	2.00	TPA	COPE: 23004-CL
 108-Understanding Neurological Diseases - Multiple Sclerosis 	11/14/08	Madhu R. Agarwal, MD	2.00	TPA	COPE: 17604-PS
204-The Pharmacology of Glaucoma, Damn Lies and Statistics	11/15/08	Bruce Onofrey, OD. RPh,FAAO	2.00	TPA	COPE: 13892-GI
210-Innovations in Glaucoma Treatment-What's New, What's True	11/15/08	Leo Semes, O.D.	2.00	TPA	COPE: 15289 GL
304 - Management of Ocular Pain and Inflammation	11/16/08	Bruce Onofrey, OD. RPh,FAAO	2.00	TPA	COPE, 21931 PH

CALIFORNIA LICENSE NO. 5059

CERTIFICATION OF PARTICIPATION IN CONTINUING EDUCATION

THIS WILL CERTIFY T	HAT: ////////////////////////////////////	~	DAVID	·
	Last Name	First	Middle	
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(Address of Practice Local	ation)	City	State	Zip
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Social Security Number_				
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	Signature of Lice	nsee	•	
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COURSE: "Third Worl	d Mission Eye Care"	·		
(Course Title)		***		$(\cdot,\cdot) = (\cdot,\cdot)^{-1}$
		•		
SPONSORED BY:S	<u>acramento Valley Opto</u>	metric Society		
				•
•	.,,			.* .*
LOCATION : Radisson	Hotel, Sacramento CA	7		
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			(0)	•
DATE	Jovember 18, 2008	Two	· ·	
· .		(CE Hours)	
	m (C)	11 3.4T)		
COURSE INSTRUCTO)K(S):Koberl B. Mi	Her MD		

HEID! SCHAUFFFLE, O.D. Fleidi Schauffele, OD
Program Director



California Optometric Association

2415 K Street, Sacramento, CA 95816 P.O. Box 2591, Sacramento, CA 95812-2591 3990 Toll-Free: (800) 877-5738 Fax:

Tel: (916) 441-3990

Fax: (916) 448-1423

License Number:

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CONTINUING EDUCATION TRANSCRIPT

California Optometric Association CE@home

G - GLAUCOMA OI - OCULAR INFECTION I - INFLAMMATION SM - SYSTEMIC MEDS P - PAIN MEDICATIONS O - OTHER PM - PRACTICE MANAGEMENT

Date	COURSE TITLE		CE HRS	CAT	
12/11/08	"An Easily Overlooked Disease: Anjali Patel, OD and Meredith V Nov/Dec 2008 issue of Californi	Vhiteside, OD, FAAO, appearing in th	1.00 e	. TPA	

CALIFORNIA LICENSE NO. 5059

CERTIFICATION OF PARTICIPATION IN CONTINUING EDUCATION

THIS WILL CERTIFY TI	HAT. MU	RIS .	* :	DAULD	<u> </u>
(Please	Print)	Last Na	me	First	Middle
1111 120	Aug Si	-235	Suc	C st	•
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	ne New Glaucom	a Bill		e e e e e e e e e e e e e e e e e e e	
•	ourse Title)			•	
SPONSORED BY:S	acramento Valley	Optometri	c Society	· .	
LOCATION : Radisson I	Hotel, Sacrament	o_CA			
				· 	•
DATEI	inuary 20, 2009		Two (2) (CE Hours)		
COURSE INSTRUCTO	R(S): Aaron I	ech, OD_			

HRIDI SCHAUFFELE, 00

Heidi Schauffele, OD Program Director



California Optometric Association

2415 K Street, Sacramento, CA 95816 P.O. Box 2591, Sacramento, CA 95812-2591 Tel: (916) 441-3990 Toll-Free: (800) 877-5738 Fax: (916) 448-1423

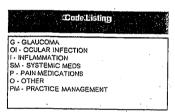
License Number:

05059

David W. Muris, O.D. 1111 Howe Ave #235. Sacramento, CA 95825

CONTINUING EDUCATION TRANSCRIPT

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Date	COURSE TITLE	CE HRS	CAT	
1/29/09	 "Glaucoma Review," by Robert DiMartino, OD, MS, FAAO and Meredith M. Whiteside, OD, FAAO, appearing in the 	1.00	TPA	
	January/February 2009 issue of California Optometry magazine.	+ + + · · ·		



at Salus University

IRVING BENNETT BUSINESS & PRACTICE MANAGEMENT CENTER 8360 OLD YORK ROAD • ELKINS PARK, PA 19027 • (215) 780-1235

David Muris, OD 1111 Howe Ave Ste 235 Sacramento, CA 95825 Del W Muss

To be completed by O.D.

O.D. License Number: 30 59 T

If required by your appropriate State Agency, please fill out before mailing this certified form to your State to earn your CE credits. Feel free to make a copy for your records.

NOTE TO AGENCIES REQUIRING CERTIFICATION

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To be completed by Bennett Center

This is to certify that the above-named individual has attained Two (2) clock hours of Continuing Education Course Work offered by the Center through the correspondence course in Optometric Management magazine.

Course Title: "Comprehensive Evaluation of Lid Disease" (COPE #22707-AS)

By Paul Karpecki, OD, Kelly Nicholas, OD

Management

Date:

August 2008 Issue

Test Graded: February 11, 2009



CALIFORNIA LICENSE NO. 5059

CERTIFICATION OF PARTICIPATION IN CONTINUING EDUCATION

THIS WILL CERTIFY THAT:	KO	1010	
(Please Print)	Last Name	First	Middle
1111 Iture Ane	Sac	Ca	95 E26
(Address of Practice Location)	City	State	Zip
Social Security Number			
1 Long	h mui		
Signature of I	Licensee		
COURSE: Emerging Trends in Contact Let	nses		
(Course Title)			
SPONSORED BY: Sacramento Valley (Optometric Societ	À	•
LOCATION: Radisson Hotel, Sacramento	<u>.C</u> A		•
DATE February 17, 2009	Two (CE Ho	· ·	
COURSE INSTRUCTOR(S): Mark Andre.	FAAO		

HEIDI SCHAUFFELE, O.D. Heidi Schauffele, OD

Program Director



Board of Optometry

2420 Del Paso Road, Suite 255, Sacramento, CA 95834-9674 Tel: (916) 575-7170

www.optometry.ca.gov



THIS WILL CERTIFY THAT:
MURIS David W
Last Name (Please Print) First MI
1111 House Hue Svite 23.5
Address (Practice Location) Street Number and Name
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City State Zip Code
California License No. 5059 T Signature of Licensee
ATTENDED: (1) <u>Diagnosing Retinal & Optic Disc Disease w/ the OCT (2) What's New in Corneal Surgery? (3) Dysfunctional Tear Syndrome: Current Treatment Recommendations</u>
(Course Title)
SPONSORED BY: Abbot Medical Optics (AMO) / Eyemaginations, Inc. (Name of Sponsoring Organization) AT: The Firehouse, 1112 Second Street, Old Sacramento, CA
Location where course(s) were provided
ON: March 24, 2009, FOR: three / three Date(s) Hours Credit
COURSE INSTRUCTOR(S): Richard A. Lewis. MD; Richard D. Grutzmacher, MD; Patricia B. Sierra. MD Signature of Instructor Signature of Instructor

NOTE: This ENTIRE form MUST be complete. Please DO NOT send any records of continuing education attendance to the board office unless requested to do so.

CALIFORNIA LICENSE NO. 5059

CERTIFICATION OF PARTICIPATION IN CONTINUING EDUCATION

THIS WILL CERTIFY THAT:_	MURIS		JAURD	
ITHS WILL CISCIII I IIIIII.	ast Name	First	Middle	
III Howe Avenue S	Suite 235	Sacrame	nto CA	95825
(Address of Practice Location)		City	State	Zip
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	LEAW	Mun		
Š	ignature of Licens	ee		
COURSE: "Ocular Surface Dis	ease"		•	
(Course Title)				
SPONSORED BY: Sacrame	nto Valley Optom	etric Society		
un material and a second secon				
LOCATION: Radisson Hotel, S	Sacramento CA			
e e w e e e e e e e e e e e e e e e e e				
DATE April 21	, 2009	<u>Two (2)</u> (CE Hours)		
		T. A.O.	•	•,
COURSE INSTRUCTOR(S):	<u>lohn Lahr, ()1),</u>	FAAU		

Heidi Schauffele, OD.

Program Director

David Muris, (J.)

License #: 50597

A

Therapeutic Opportunities in Anterior Segment Disease Has Successfully Completed 2 Hours of CE Credits on April 29, 2009



Richard B. Mei

CALIFORNIA LICENSE NO.

THIS WILL CERTIFY TH	AT: MURIS	\mathcal{I}	PAVID		
	Last Name	First	Middle		
IIII Howe Aver	rue Suita	235 Sac	amento, C	A 9582	\supset_{i}
(Address of Practice Location	on)	City	State	Zip	
Social Security Number					
	Signature of Licer	Mu	NO.		
	Signature of Elect	BCC		• •	
COURSE: "Dry Eye and I	id Disease" and "St			······································	
		(Course Tit	le)	•	
SPONSORED BY: Sacr	ramento Valley Opto	metric Society	ut e de la companya d		٠.
LOCATION : Pheasant Cli	ih, West Sacramento	CA .	1	e e a e e e e e e e e e e e e e e e e e	41
DATE May	19, 2009				
		(CE Hours)			
	7).				

HEIDI SCHAUFFELE, U.D. Heidi Schauffele, OD

Program Director



Pennsylvania College of Optometry at Salus University

IRVING BENNETT BUSINESS & PRACTICE MANAGEMENT CENTER 8360 OLD YORK ROAD • ELKINS PARK, PA 19027 • (215) 780-1235

David Muris, OD 1111 Howe Ave Ste 235 Sacramento, CA 95825

To be completed by O.D.

O.D. License Number:

5.059

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To be completed by Bennett Center

This is to certify that the above-named individual has attained One (1) clock hour of Continuing Education Course Work offered by the Center through the correspondence course in Optometric Management magazine.

Course Title: "New Approaches for Reducing Risk Macular Degeneration"

(COPE #23778-PS)
By Lloyd I. Snider, OD

Management

Date:

November 2008 MARCO

Test Graded: December 1, 2009





at Salus University

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To be completed by O.D.

O.D. License Number:

5059

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To be completed by Bennett Center

This is to certify that the above-named individual has attained **One** (1) clock hour of Continuing Education Course Work offered by the Center through the correspondence course in Optometric Management magazine.

Course Title: "Concurrent Treatment for Glaucoma and Ocular Surface

Disease"

(COPE #23776-AS)

By Robert Wooldridge, OD, FAAO

Management

Date:

November 2008 ALCON

Test Graded: December 1, 2009





at Salus University

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O.D. License Number:

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"Revolutionizing Glaucoma Diagnosis and Treatment Using Course Title:

> Advanced Technology" (COPE #23979-GL) By John Warren, OD



Date:

December 2008 (Marco) Test Graded December 2, 1009





California Optometric Association

2415 K Street, Sacramento, CA 95816 P.O. Box 2591, Sacramento, CA 95812-2591 3990 Toll-Free: (800) 877-5738 Fax: (916) 448-1423

Tel: (916) 441-3990

License Number:

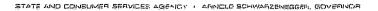
David W. Muris, O.D.. 1111 Howe Ave #235 Sacramento, CA 95825

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OI - OCULAR INFECTION
I - INFLAMMATION
SM - SYSTEMIC MEDS
P - PAIN MEDICATIONS
O - OTHER
PM - PRACTICE MANAGEMENT

Date	COURSE TITLE	CE HRS	CAT	
1/27/10	 "Multi-Disciplinary Patient Care for Diabetes," by Tina Mac Donald, OD, FAAO, appearing in the November/December 2009 issue of California Optometry magazine. 	1.00	TPA	





STATE BOARD OF OPTOMETRY 2420 Del Paso Road, Suite 255 P [916] 575-7170 F [916] 575-7292 web: www.optometry.ca.gov



CERTIFICATION OF PARTICIPATION IN CONTINUING EDUCATION

THIS WILL CERTIFY THAT:	· · · · · · · · · · · · · · · · · · ·
Muris Day J Last Name (Please Print) First	W
Last Name (Please Print) First	MI
1111 House And Suite # 235	
Address (Practice Location) Street Number and Name	
Su crunent Cy City State	95825 Žip Code
City State	Źip Code
Hendees Signature and California license number	
Attendees Signature and California license number	
COURSE ATTENDED: Diagnostic Dilemmas in Glaucoma; Red Eye a	and how to trea
it; Refractive Options in 2010	
(Title and ID number)	
SPONSORED BY: Alcon Pharmaceuticals / Surgical & Carl Zeiss	
(Name of Sponsoring Organization)	
VENUE: The Firehouse Old Sacramento, CA	
(Location where course was provided)	
DATE OF COURSE March 25, 2010 LENGTH OF COURSE 3 hours	
(Hours)	
COURSE INSTRUCTOR(S): Richard A. Lewis, MD; Richard A. Grutzmacher MD; Patri	cia B. Sierra. MD
Au that	
Signature of Instructor Signature of Instructor	
/ Signature of Instructor	

NOTE: This form must be completed in its entirety. Please <u>DO NOT</u> send any records of continuing education attendance to the Board's office unless requested to do so.



University of Alabama School of Optometry

Office of Continuing Education 1716 University Boulevard Birmingham, AL 35294-0010 (205) 934-5701

COPE approval is granted for this course. This course is COPE-qualified for 1.00 hours of CE credit. This course is joint-sponsored by Review of Optometry, a publication of Jobson Publishing LLC.

Course Title: Providing Optimal Optics For Your Astigmatic Cataract Patients

COPE ID: 26852-PO

Date: 03/31/2010

Score: 100%

Your Answers: CDADDDCCBDBBBBB

Correct Answers: CDADDDCCBD***** (* = evaluation questions)

David Muris 1111 Howe Ave Ste 235 : Sacramento, CA 95825

Leo Semes, O.D.

Director, Continuing Education

UAB School of Optometry



California Optometric Association

2415 K Street, Sacramento, CA 95816 P.O. Box 2591, Sacramento, CA 95812-2591

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Toll-Free: (800) 877-5738

Fax: (916) 448-1423

License Number:

05059

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OI - OCULAR INFECTION
I - INFLAMMATION
SM - SYSTEMIC MEDS
P - PAIN MEDICATIONS
O - OTHER
PM - PRACTICE MANAGEMENT

Date	COURSE TITLE	CE HRS	CAT	
4/1/10	"Beyond AREDS - The Fringe Has Become the Standard of Care," by Mark A. Slosar, OD, FAAO, appearing in the March/April 2010 issue of California Ontometry magazine.	1.00	TPA	



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Office of Continuing Education 1716 University Boulevard Birmingham, AL 35294-0010 (205) 934-5701

COPE approval is granted for this course. This course is COPE-qualified for 2.00 hours of CE credit. This course is joint-sponsored by Review of Optometry, a publication of Jobson Publishing LLC.

Course Title: An Expert Perspective on Lens Care

COPE ID: 26277-CL

Date: 04/12/2010

Score: 100%

Your Answers: AACACBDDACACABCDBDCDAAAAA

Correct Answers: AACACBDDACACABCDBDCD****** (* = evaluation questions)

David Muris 1111 Howe Ave Ste 235 Sacramento, CA 95825

Leo Semes, O.D.

Director, Continuing Education UAB School of Optometry

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THIS WILL CERTIFY THAT:	MURIS		DAL	110
	Last Name		Fi	rst Name
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Address of Practice		City/ State/Zip	("	
Social Security Number	<u> </u>			
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DATE & LOCATION: April	20, 2010 Rad	lisson Hotel in Sa	cramento	
COURSE INSTRUCTOR: Bon	nie Ouiroz, M.D.			

"A Primer on Optical Coherence Tomography"

CE HOURS: Two (2) Hours

COURSE:

Texas Smith, O.D.
Texas Smith, O.D.
Program Director

CALIFORNIA LICENSE NO. 5059, T

CERTIFICATION OF PARTICIPATION IN CONTINUING EDUCATION

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THIS WILL CERTIFY THAT:	MURI	Š		and
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DATE & LOCATION:May 18,	,2010 Radi	sson Hotel in Sac	ramento	
COURSE INSTRUCTOR:	earlman, M.D.			
COURSE: "A Day in the Retina (Clinic"			
			•	
CE HOURS: Two (2)				

Texas Smith, O.D. Texas Smith, O.D. Program Director



at Salus University

IRVING BENNETT BUSINESS & PRACTICE MANAGEMENT CENTER 8360 OLD YORK ROAD • ELKINS PARK, PA 19027 • (215) 780-1235

David Muris, OD 1111 Howe Ave Ste 235 Sacramento, CA 95825

To be completed by O.D.

O.D. License Number:

50597

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Course Title: "Proven Strategies to Market Your Ocular Allergy Practice" (COPE #224509-PM)

By John M. B. Rumpakis, OD, MBA

Management

Date:

March 2009 (Alcon)

Test Graded: May 18 2010



at Salus University

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David Muris, OD 1111 Howe Ave Ste 235 Sacramento, CA 95825

To be completed by O.D.

O.D. License Number:

5059T

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Course Title: "Shedding Light on a New Era in Refraction"

(COPE #24628-GO)
By John Warren, OD

Management

Date:

March 2009

Test Graded:

May 1/8 / 2010 ***



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David Muris, OD 1111 Howe Ave Ste 235 Sacramento, CA 95825

To be completed by O.D.

O.D. License Number:

5059

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Course Title: "Appreciating the Complexities of Glaucomatous Eyes-Inside and Out" (COPE #23952-GL)

By Leo P. Semes, OD

Date:

December 2008 ALCON

Test-Graded: May:18,2010





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To be completed by O.D.

O.D. License Number:

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To be completed by Bennett Center

This is to certify that the above-named individual has attained **One** (1) clock hour of Continuing Education Course Work offered by the Center through the correspondence course in Optometric Management magazine.

Course Title: "Seizing Profitable Opportunities in the Treatment and

Management of Ocular Allergy"

(COPE #24362-AS)

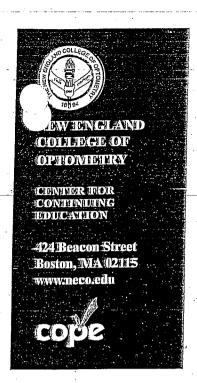
By Arthur B. Epstein, OD, John M. B. Rumpakis, OD

Management

Date:

February 2009

Test Graded: May 18-2010



JUN 01 ZOTU

Contact Lens Spectrum August 200# Fitting Kids With Contact Lenses Fauline Cho, PHD, FAAO, FBCLA & Sin Was interpreted MPHIL, FAAO

Dear Doctor

This certifies that you have received the above continuing education credits.

Requests for additional copies of this continuing education credit slip must be in writing, and there is a \$15.00 service charge per copy.

Thank you for your interest in the programs offered through the Center for Continuing Educ

Sincerely,

Alan L. Lewis, O.D., Ph.D. Director, Continuing Education

Validation requires your signature:

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THIS WILL CERTIFY THAT: _	MURIS.	DAVI	0	,
	(Last Name)	(First)	(Middle)	
HUMP HUNDE	Aug # 236 Suc.	Cq		
(Address of Practice Location)	(City)	(State) (Zip)		
Social Security Number	<u>-</u> .			
	Je Je	WWww	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	(Signature of Lie	censee)		
PLACE: Embassy Suites South La	ake Tahoe		•	
ATTENDED: Tahoe Seminar				
DATE: July 23-25, 2010		•		

COURSE INSTRUCTORS & SUBJECTS:

CE UNITS: (14 1/2 hours)

Robert Wooldridge, OD – Clinical Decisions in Glaucoma; LaMar Zigler, OD, FAAO – What's New in Contact Lenses; Arthur Epstein, OD, FAAO – CS Eye and Future of Contact Lenses; Sheffer Tseng, MD, Ph D – Advanced Dry Eye; Shachar Tauber, MD – Common Ocular Diseases and Refractive Surgery; Paul Karpecki, OD, FAAO; and Joel Pearlman, MD – Retinigmas – Puzzles for the Puzzling Depths of the Eye.

-Linda Rappa O.D.

Linda Rappa, OD Program Director



California Optometric Association

2415 K Street, Sacramento, CA 95816 P.O. Box 2591, Sacramento, CA 95812-2591

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David W. Muris, O.D. 1111 Howe Ave #235

Sacramento, CA 95825

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Code Listing

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SM - SYSTEMIC MEDS
P - PAIN MEDICATIONS
O - OTHER
PM - PRACTICE MANAGEMENT

Date

COURSE TITLE

CE HRS

CAT

7/29/10

 "Is UV Good or Bad? Health Benefits and Risks Involving Ultraviolet Light," by Donald L. Barniske, OD, FCSO, appearing in the July/August 2010 issue of California Optometry magazine.

1.00

TPA.



University of Alabama School of Optometry

Office of Continuing Education 1716-University Boulevard Birmingham, AL 35294-0010 (205) 934-5701

COPE approval is granted for this course. This course is COPE-qualified for 2.00 hours of CE credit. This course is joint-sponsored by Review of Optometry, a publication of Jobson Publishing LLC.

Course Title: A Brief Look at Current Thoughts on Glaucoma Managment and Diagnosis

COPE ID: 28887-GL

Date: 08/31/2010

Score: 85%

Your Answers: DBACCDAAADBCACDDBCDDAAAAA

Correct Answers: CBACCDABADBCACDDBCAD****** (* = evaluation questions)

David Muris 1111 Howe Ave Ste 235 Sacramento, CA 95825

Tan P. Than

Tammy P. Than, M.S., O.D. Director, Continuing Education UAB School of Optometry

SACRAMENTO VALLEY OPTOMETRIC SOCIETY

CALIFORNIA LICENSE NO. 5059 T.

CERTIFICATION OF PARTICIPATION IN CONTINUING EDUCATION

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THIS WILL CERTIFY THAT:	MURIS	DAVID		
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Address of Practice	City/	State/Zip		
Social Security Number				
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DATE & LOCATION:Septe	rmbe 21, 2010 VSI	P in Rancho Cordova	, ĆA	
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Texas Smith, D.D.

Texas Smith, O.D. Program Director

*ENTIRE FORM MUST BE COMPLETE I lease DO NOT send any records of Continuing Education attendance to the board office until requested to do so.

SACRAMENTO VALLEY OPTOMETRIC SOCIETY

CALIFORNIA LICENSE NO. 5059

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THIS WILL CERTIFY THAT:	ZURIS Last Name		DA		irst Name
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COURSE INSTRUCTOR: <u>Joel Pe</u>	arlman, MD.				
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COURSE: Retina Report

CE HOURS: _Two (2)

Texas Smith, O.D.

Texas Smith, O.D. Program Director

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California Optometric Association

2415 K Street, Sacramento, CA 95816 P.O. Box 2591, Sacramento, CA 95812-2591 Tel: (916) 441-3990 Toll-Free: (800) 877-5738 Fax: (916) 448-1423

License Number:

05059

David W. Muris, O.D. 1111 Howe Ave #235

Sacramento, CA 95825

CONTINUING EDUCATION TRANSCRIPT

California Optometric Association CE@home

CodeListing

G - GLAUCOMA
OI - OCULAR INFECTION
I - INFLAMMATION
SM - SYSTEMIC MEDS
P - PAIN MEDICATIONS
O - OTHER
PM - PRACTICE MANAGEMENT

Date	COURSE TITLE	CE HRS	CAT	
11/12/10	"Prescribing Anti-Infective Medications for Patients Who Are Pregnant	1.00	TPA	
	or Breastfeeding," by RoseAnn L. Jankowski, Pharm.D., appearing in the September/October 2010 issue of California Optometry magazine.			

SACRAMENTO VALLEY OPTOMETRIC SOCIETY

CALIFORNIA LICENSE NO. 5059

CERTIFICATION OF PARTICIPATION IN CONTINUING EDUCATION

THIS WILL CERTIFY THAT:	MURIS		DAVID	
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COURSE: Eye of Beholder (CO	<u> </u>	cience Based	Nutrition For Pati	ents with
Diabetes (Cope 27084-SD.				
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Texas Smith, O.D.

Texas Smith, O.D. Program Director

*ENTIRE FORM MUST BE COMPLETE Please DO NOT send any records of Continuing Education attendance to the board office until requested to do so.



COPE Certification Form

Name: David Muris OD.
Address: 1111 House Hup Suite 235
Sac Ca 9582/
State License(s)/Number(s): 5059 T
This certificate hereby states that Dand Muris Op.
Attended a COPE approved seminar for continuing education as follows:
Location (city and state) of education: Sacramento, CA
Date of education: December 12, 2010
COPE number for the COPE course presented:
25158-AS - Building a Therapeutic Practice: Ocular Surface Disease
25157-PM - Building a Therapeutic Practice: Coding & Billing
COPE Event # 100851
Instructor: John W. Lahr, O.D., FAAO and Marc Bloomenstein, O.D., FAAO
COPE Credits 6 Hours Anterior Segment, 2 Hours Practice Management
0
1 W Lilli, OS

Please submit this form to your state board for CE credit and retain a copy for your files.

COPE Instructor Signature

LETTERS OF RECOMMENDATION

Ronald and Janeece Sargis 4413 Vico Way Sacramento, California, 95814

December 7, 2010

Dear Board of Optometry Representative

I am writing to you on concerning David Muris, O.D., and his request of the Board to conclude his probationary period under the Stipulated Settlement and Disciplinary Order. During the past twenty-five years I have known David personally through our Church, professionally as one of his patients, and in representing him as an attorney with my former law firm Hefner, Stark & Marois, LLP. Knowing David in these three different capacities has provided me with a unique insight to David Muris as both the person and the doctor.

On the personal level, David has always been very considerate of others and their private lives. His professional and business life never intruded on his personal relationships with others. As opposed to some who use every opportunity to try and sell their business or profession to "friends," David has always respected the privacy of his friends and that their personal lives separate and apart from his profession.

As his patient, I always observed Dr. Muris and his staff operate his practice to the highest level of professionalism. It has always been clear that the proper care of his patients' eyes and vision was priority one with him. Over the years of maintaining current prescriptions for my glasses and contacts, or addressing questions and responding to questions about laser surgery (which I have not elected), his services were always focused on what was best for my vision.

Though I did not represent the other doctors and business persons who were involved in the vision improvement concept such as the See Clearly Method and AVI, representing Dr. Muris did provide me with an opportunity to observe how he was attempting to properly deal with these persons (and some unique personalities) and the proper development of such concepts. With respect to those concepts, I never observed any conduct of Dr. Muris engaging in any conduct which was not what he believed to be in the best interests of consumers investigating those concepts. But he could not unilaterally control others involved in the programs.

One immutable law of human existence is that each of us have our strengths and skills, which lead us to our respective careers. There would be no serious dispute that lawyers, in general, do not have the scientific curiosity and compassion of doctors. Conversely, my observation has been that many doctors and scientific minded clients I represented over the years did not have the skeptical eye and business organizational strategy skills of a business attorney. This does not mean the attorney, doctors, or scientists are not very good at what they do, just that the very skills which make the good

in their profession sometimes put them in situations where they are not naturally suited to address situations which do not develop as they envisioned. For the doctors, I have seen this arise in situations where the doctor or scientist have not put in place the business structure to control or direct the enterprise in the manner which that doctor believes to be in everyone's best interest.

To the extent that issues relating to the See Clearly Method and AVI are matters which have been addressed by the Board, those matters have been concluded as proscribed in the Stipulated Decision and Disciplinary Order. As I am sure you have confirmed from your follow up investigations, those matters are closed and Dr. Muris has no involvement with them or any similar programs. He is pursuing his profession and passion as a doctor, helping his patients. At this point continuing the probation is not working to deter any of the matters which were the subject of the Stipulated Decision and Disciplinary Order, but only punish Dr. Muris when no further punishment is warranted. The continued probation also punishes his existing and future patients who are unable to avail themselves of his services due to the insurance programs provided by their employers.

Though I have left my law practice to accept an appointment to the federal bench, please do not hesitate to contact me if I can provide you with any additional information or be of assistance as you address these issues. My direct chambers number is 916-930-4544, at which you will reach my Judicial Assistant, Dawn Nartker. If I am not available when you call, Ms. Nartker will arrange for us to have a phone conference at a convenient time on your schedule.

Thank you again for you all that you, the Board, and staff do to assist both the patients and doctors in the care of our vision.

Sincerely,

Ronald H. Sargis

George Mason University

School of Law 3301 North Fairfax Drive Arlington, Virginia 22201-4426

Office: (703) 993-8000 Fax: (703) 993-8088

November 29, 2010

VIA FEDERAL EXPRESS

California State Board of Optometry 2420 Del Paso Road
Suite 255
Sacramento, CA 95834

Re. Letter Supporting Dr. David Muris' Probationary Application

To Whom It May Concern:

I write to support the application of Dr. David Muris to shorten his probationary period from five years to two and one-half years. Unless the Board grants this request, Dr. Muris will be unable to practice his profession successfully, to the detriment of his many patients.

I am currently Foundation Professor, George Mason University School of Law, located in Arlington, Virginia. Besides a long career as an academic, starting in 1976, I have held six positions in the United States Government, most recently as Chairman of the Federal Trade Commission (FTC), from 2001-2004. The FTC is our nation's premier consumer protection agency, and I was honored to serve as its head, the fourth position that I held within that agency. Among other actions, my tenure was known for the creation of the National Do Not Call Registry, one of the most popular initiatives ever undertaken by our federal government.

As a former government official charged with enforcing the nation's consumer protection laws, I know the importance of active government supervision of the marketplace. I also know the importance of the maxim that the punishment should fit the crime. Because the Board did not remove Dr. Muris' license, instead placing him on probation, the punishment presumably was not designed to render it impossible for Dr. Muris to earn a living in his chosen profession. The growing importance of insurance companies to the practice of optometry and the reaction of those companies to probation,

regardless of the underlying reasons for the Board's action, is preventing Dr. Muris from serving a sufficient number of patients to maintain a viable practice.

I also know Dr. Muris personally, both as a patient and his younger-brother. As a professional myself, I have long marveled at his interest and dedication to serving his patients. For over 40 years, we have discussed often the intricacies of optometry, and I have seen few individuals who have as much enthusiasm for their work as my brother. I understand that the Board's action did not involve the quality of care that Dr. Muris provides. It would be a service not only to Dr. Muris, but more importantly to his patients, to reduce his probationary period, therefore allowing him to continue in the profession that he loves and practices so well.

I would be glad to answer any questions regarding this letter that the Board may have.

Sincerely,

Timothy J. Muris
Foundation Professor

George Mason University School of Law

TJM:dtb

11/19/2010

David Muris, O.D. 1111 Howe Ave. Ste. 235 Sacramento, CA. 95825

To Whom It May Concern:

This letter is written in recommendation of Dr. David Muris. As I'm sure you are aware Dr. Muris has been in practice in Sacramento California since 1976. In those 34 years of practice he has had tens of thousands of happy patients. We have worked together closely over the decades. Dr. Muris honored me by doing his externship at one point for therapeutic licensure in my office here in Sacramento. I can highly recommend David Muris after co managing many patients over the years with him for his continued practice of Optometry in the state of California.

I would be glad to provide any additional information should the Board feel necessary to contact me. In summary I can recommend Dr. David Muris without hesitation of qualifications for continued practice of Optometry in California.

Sincerely,

H. Douglas Cooper, M.D.

Board Certified American Board of Ophthalmology



A Medical Group, Inc.

5959 Greenback Lane Suite 310 Citrus Heights, CA 95621 tel: (916) 723.7400 fax: (916) 723.4449 www.lasermeister.com

November 19, 2010

California State Board of Optometry 2420 Del Paso Road, Suite 255 Sacramento, CA 95834

Re: DAVID MURIS, O.D.

Dear Board Members:

I have known Dr. David Muris for the last 25 years I have been in practice in Sacramento. I have had many patients in common with him. I have never to this day heard a complaint from a patient or otherwise about Dr. Muris or his practice. Dr. Muris also spent time in my office, certifying for TPA's when they were first approved for optometry. Dr. Muris is one of the first doctors I precepted for TPA's. He has always been at the forefront of optometry.

I feel that Dr. Muris is a very competent clinician and ethical practitioner. I support him in his past and continued practice.

Best regards,

Richard B. Meister, M.D.

RBM/rd DS331706



Richard D. Grutzmacher, M.D. Cornea, Cataract and Laser Vision Correction

Richard A. Lewis, M.D. Glaucoma and Cataract

Patricia B. Sierra, M. D. Cornea, Cataract and Laser Vision Correction

Monica C. Robinson, O.D.
Primary Eye Care

December 06, 2010

State Board of Optometry 2420 Del Paso Road, Suite 255 Sacramento, CA 95834

To Whom It May Concern:

I am glaucoma specialist practicing in Sacramento since 1984. As a consultant Dr. David Muris has referred patients to me for evaluation and treatment in addition I have referred patients to him for optometric care. Approximately 7 years ago Dr. David Muris did a proctorship under my tutelage evaluating patients for glaucoma.

I have enjoyed the relationship with Dr. Muris and look forward to working with him in the future.

Sincerely,

Richard A Lewis, MD

RAL: wlm

William Richardson. OD 11879 Kemper Rd Ste 6 Auburn, CA. 95603 (530) 885-4534 (530) 823-5380 fax

11/24/2010

To whom it may concern:

Thank you for the opportunity to recommend David Muris, O.D. for your consideration. I have had the pleasure to know and work with Dr Muris since 2004. During that time I have worked with him two days a week at his office on Howe Avenue in Sacramento.

Dr Muris possesses superior clinical skills and exceptional patient relation skills seeing patients of all ages and backgrounds. He has maintained a very successful practice and is a sought after practitioner with a very loyal and happy patient base.

Again I am proud have worked with Doctor Muris over these years. He is a benefit to our profession and patients. I urge you to consider him for full inclusion and without restriction as a valued and honored member of our profession.

Sincerely.

William P Richardson, O.D.

Thursday, November 18, 2010

RE: David Muris, O.D.

TO: California State Board of Optometry,

I have known David Muris for 30 plus years. Through out this time, I have gone to optometric continuing education meetings with him as well as working side by side in his office for several years.

He has always impressed me as a man of good character, high moral standards and professional integrity. Not many men that I have known come close to these qualities in an individual. He always practiced with the best interests of his patients in mind and went out of his way for them. You could see that by the way they kept returning to see him over the years. His patients were not just another pair of eye balls he was examining but they were people with problems he wanted to solve and get help for.

Working those years in his office, he held his staff to a very high standard. One to be envied, as he would institute programs for training and rewards and was always there for them far beyond what most employers would do. And always with the idea of how to provide the best patient care we could. He was firm and demanded no less than your best efforts in the work place, and no less for himself.

He has been in the same office location for probably 25 years. Dave was always involved in helping his fellow colleagues with moral support and served as past president of the Sacramento Valley Optometric Society.

Dave told me one time that going to the office should be fun in the work place and you should leave every day with a positive attitude. That has always stuck with me all these years and I can truly say that he has been a good mentor for me and for the profession that he represents.

Respectfully submitted,

Gary K. Scheffel, O.D.

License 5766T

9490 Madison Ave. Suite 100

Jany K Schiffel on

916-988-2212

BILL HENSHAW, OD, FCOVD

VISION EXCELLENCE practiced here 801 S . FAIRMONT AV #5 LODI, CA 95240 * 209-334-2020



11/21/10

California Board of Optometry
2420 Del Paso Road, Suite 255
Sacramento, CA 95834
Lee A. Goldstein, OD, MPA - President
Alejandro Arredondo, OD - Vice President
Monica Johnson - Secretary
Fred J. Naranjo, MPA
Susy Yu, OD, MBA, FAAO
Katrina R. Semmes
Edward J. Rendon, M.A.
Kenneth Lawenda, OD

re: David Muris. OD status

Dear Members:

I am writing in behalf of David Muris whom I have known personally and professionally over 30 years. Professionally he has been a leader in our field and a supporter of professional optometry and developed a large successful practice in Sacramento that has employed many assistants and aided many optometrists. He has on three occasions helped me during some tough spots in my professional and personal life.

Orthokeratology now has a prominent place in Sacramento. He has brought vision processing care to Sacramento and helped numerous children with visually related learning problems while at the same time aiding the prestige of optometry in Sacramento. He has developed ingenious business programs that help optometrists efficiently run their practices and stay professional. An unintentional consequence of your action now threatens his practice.

From my understanding you have put him on probation for five years, not suspended his license. This was for an action not entirely under his control in the See Clearly program and nothing to do with the care he has provided to patients at Sacramento Visioncare. Rather than vindicate himself causing extra work and attorney fees for himself and you he accepted your discipline and complied with all your requirements for the past two plus years.

Now VSP has burdened Dr Muris with an ex-post facto policy of removing him from the VSP panel because of his probation. The probation was prior to VSP"s policy. You probably understand that VSP is so powerful that expulsion form the panel for a professional optometrist is virtually a bankruptcy notice. I can not imagine you had any desire to stop Dr Muris from practicing optometry nor financially ruining him in his senior years. Yet, that is the result of VSP"s new policy based on your action. I respectfully request that you end his probation.

Very truly yours.

Bill Henshaw, OD, FCOVD

copy

Rob Lynch, President VSP

Dr. James M. Keppler
5667 Freeport Blvd, Sacramento, CA 95822

Drug-Free, Non-Surgical
Alternatives (916) 422-5111 FAX (916)

FAX (916) 422-5819

November 20th, 2010

To: The California State Board of Optometry

geter I.C.

Re: Dr. David Muris

I have been a patient of Dr. Muris's for about 20 years. He has always been knowledgeable and professional. He has a well-equipped office and courteous staff.

or North for the state and the continuence of the state o

I have known many patients who have gotten good results from Dr. Muris's care. It have been very happy with my experience there over the years and plan to continue to see Dr. Muris. I am thankful for the care I have received so far and look forward to future care.

Sincerely,

James M. Keppler, D.C.



Optometric Extension Program

Foundation, Inc.
1921 East Carnegie Avenue, 3L
Santa Ana, CA 92705-5510
(949) 250-8070
(949) 250-8157 FAX
www.oepf.org
rwill23@hotmail.com

November 29, 2010

California State Board of Optometry

To Whom It May Concern:

Re: David Muris, OD

Dr. David Muris has been a Clinical Associate of the OEP Foundation for nearly 25 years. During this period of association with the Foundation we are aware of only ethical, professional behavior on his part.

Should the Board have any specific questions regarding Dr. Muris I would be happy to discuss any issues related to Dr. Muris and his practice of optometry. Please feel free to call meat 949-250-8070 or e-mail to: rwilliams@oep.org.

Sincerely,

Robert A. Williams

Lace & Ch. Wille

Executive Director



November 24, 2010

Department of Consumer Affairs State Board of Optometry

Re: David Muris

To Whom It May Concern:

David has been a patient of mine for the past 18 months. He has had a significant number of medical challenges which are complicated by the probation that he is on with respect to the State Board of Optometry. The consequences of the probation and the stress involved has led to insomnia coupled with financial stress which decreased his healing potential. The additional health burden of the probation is certainly significant with respect to his overall process and health.

I have seen David Muris on many occasions and

know him to be an honest and forthright

individual. I would hope that this letter

will assist him in getting off of probation

in order to move toward a healthier and more

.),

MICHAEL J. KWIKER, D.O.

WILLIAM MORA, M.D.

KIRK HAMILTON, PA-C

WENDY POMERANTZ, PA-C, LAC.

TARAS LUMIERE, D.C., LAC. Sincerely,

productive life.

Michael Kwiker, D.O. MJK/ra

3301 Alta Arden
Suite 3
Sacramento
California 95825
(916) 489-4400

(800) 675-4515 ·

Fax 489-1710



The Holisticzone glsjewelry.com

Gay Lynn Saunders, D.C.



333 San Carlos, Suite B Stockton, CA 96207 (209) 607-2669 gaylynns@comcast.net info@glsjewelry.com

November 30, 2010

State Board of Optometry

To Whom It May Concern:

As a holistic chiropractic physician, I am always searching for quality holistic practitioners in every field, which is why I drive approximately 45 miles to see him. When I started with Dr. Muris, almost 15 years ago, my eyesight was deteriorating. I was having an extremely difficult time obtaining glasses for my complicated prescription. When I met Dr. Muris, I was immediately impressed by his understanding, compassion, humor, and desire to help me. Always the professional, he cut my prescription in half with his treatment. I will always be grateful and in his debt for that.

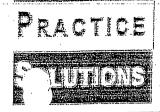
Over the years, I have observed that his office maintains a friendly and professional staff. Most of the staff has been there long-term, displaying a loyalty that I envy.

San Market Market Committee Committee

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Gay Lynn Saunders, D.C.



November 29, 2010

David Muris, O.D. 1111 Howe Avenue, Ste. 235 Sacramento, Ca. 95825

Dear David:

I am writing you this letter as a recommendation for you, both on a personal and professional level.

have known David Muris for over 25 years. I have owned my own management consulting company for about 29 years here in the Sacramento area. In that time I have worked with hundreds of health care providers. David started out as a client of my consulting company, and over the years we have developed a close relationship. Because of the high level of integrity that David possesses, and more importantly his uncompromising insistence that his patients' eyesight improve, I have chosen David as my family's personal eye care provider.

On a personal level, I have also come to regard David as one of my good friends. He and I have shared our viewpoints on many subjects, including sports and politics. I like people who are not afraid to tell the truth, and David definitely fits this category.

I can strongly recommend David to anyone for these reasons.

Should anyone care to contact me about David, feel free to do so. I will be more than happy to tell you nothing but the best regarding David and his work..

Sincerely,

Greg Andrews
President
Practice Solutions

1450 Earl Toma El Danada IIIIIa CA 05760 016 020 153



December 1, 2010

California State Board of Optometry

To whom it may concern,

I initially became acquainted with Dr. Muris and his practice in 1989. My vision had steadily deteriorated to the point that I was no longer picking up the rotation of the seams on a baseball delivered from 60' away. Attempting to play at night under lit conditions was an exercise in futility as the ball was a fuzzy white blur. I had become quite discouraged by the proposition of having to quit participating at a premature age.

Jerry Reynolds, the former Sacramento Kings coach, had been doing radio spots for Sacramento Visioncare for over a year. What struck a chord for me was the fact that Mr. Reynolds was a visible sports celebrity in Sacramento and was known to be a person of integrity within his profession. If Jerry Reynolds had a positive experience and was willing to associate his name with the practice, I thought it was probably worth looking into. I was impressed with Sacramento Visioncare from the first visit. After my initial examination, Dr. Muris didn't make any promises, but did express cautious optimism that there would be a better than even chance of bringing my vision back to normal. I was impressed as there was no hard sell. There was no pressure to make a decision; I was given the available facts, the cost options, and contact information in case I chose to pursue what Dr. Muris was able to offer. At the time of the exam my visual acuity was 20/140 in one eye and 20/160 in the other. With the progressive change in lenses, Dr. Muris was able to improve my vision to better than 20/20 in both eyes! If memory serves me correctly, this process took place in less than two years. Needless to say, I was more than satisfied with the results and have continued as a patient ever since.

In addition to the positive results I have experienced with my vision, the staff has always been extremely friendly and professional. I look forward to my visits at the office. The saying is overused, but I really do feel like a part of their family when I walk in the door. The staff knows the patients on a first-name basis even when we drop in unannounced. If there is an emergency, there is a contact person 24/7. Needless to say, Dr. Muris continues to exceed expectations for the care of my sight. I give Dr. Muris and his staff an A+ during my 20-plus years of association with Sacramento Visioncare.

Sincerely, Joe Potulny

Teacher / Baseball Coach potulnyi@jhssac.org

Joe Potulni

P.O. BOX 254647 - SACRAMENTO - CALLEGRANIA 95865-4647 - 111916 482 6060 - 1916 482 2310

To whom it may concern:

For over twenty years, I have been a family friend and patient of Dr. David Muris. And for as long as I've known David, he has been charitable in helping others, not only as a doctor and employer, but as a friend as well.

As a valued friend and mentor, he has taught me how to fish, on some truly memorable fishing adventures. David has graciously invited me into his family's home for holiday dinners on numerous occasions. I have even had the pleasure of accompanying David's family on several summer vacations. The sincerity of his generosity towards me and others is humbling.

Another aspect of our friendship I have cherished over the years is his eloquent advice. David has always motivated me to exceed in all areas of my own personal improvement. There are many simple philosophies he has shared with me that have helped me strengthen my work ethic and professional confidence. David's professional drive and ambition continue to inspire me.

As a patient of Dr. Muris, I arrived at Sacramento Visioncare with a vision of about 20/400 in the right eye and 20/475 in the left eye. Without surgery, Dr. Muris was able to improve my vision through the techniques he utilizes at Sacramento Visioncare. My vision is now roughly 20/60. Although I still wear corrective lenses most of the time, I am comfortable to go without them during some activities. I believe I have significantly benefited from the techniques Dr. Muris utilizes in his profession and have never doubted his exceptional expertise as a doctor.

To summarize my thoughts regarding David Muris, I can say he is a kind and generous man whom I owe a debt of gratitude.

Sincerely,

Brian Moore

Karen Castellí 575 Schooner Ridge Drive Dixon, CA 95620

November 30, 2010

California State Board of Optometry

Re: David W. Muris, OD

TO WHOM IT MAY CONCERN:

I am writing this to state my support and perspective regarding the sanction placed on Dr. Muris by the Board of Optometry. Dr. Muris has been my providing optometrist for about 25 years. During this time my vision care has been outstanding and I have frequently referred my friends and relatives to him as an excellent professional.

Prior to Dr. Muris providing my professional optometric care our families were acquainted and we enjoyed a social interaction. In this interaction I came to appreciate his moral, ethical and personal perspective, family and professional values. I can say that I believe that he demonstrates the highest level of integrity. Each of our families has experienced difficult personal situations that have had an extreme impact on our lives. During this time he remained composed and concerned with finding positive energy to sustain our families.

Over the past year I have personally and professionally observed the impact of the action taken by the Board regarding Dr. Muris's professional standing. The action has taken a significant toll on him professionally and financially. Perhaps an unanticipated outcome was the impact to his professional practice with the loss of coverage for long-time VSP covered patients. For example, as a University of California employee my VSP insurance no longer covers professional services provided by Dr. Muris. So after 25 or so years of outstanding vision care I am faced with the choice of selecting an unknown optometrist in order to receive services covered by my insurance carrier — or the choice I made, which was to pay for the professional services out of pocket. This decision had an impact on my personal financial situation, because I also was subjected to salary/time reductions in the past year due to budget reductions. With the current economic recession this is not a choice that most individuals can make. The financial

707-693-9367 krncastelli@yahoo.com

hardship placed on the professional practice, the employees supported by the practice, and Dr. Muris personally is, in my opinion, beyond equitable. The result is more than punitive, it is devastating. I have watched as several long-time employees in the practice have either been laid off or had their time reduced. With the compounding of the loss of jobs and insurance coverage by many-of-the-long-time-patients-within-the practice; the additional loss-of-those patients who are fortunate enough to still have insurance but are not able to utilize the professional of their choice, has had devastating results.

I encourage you to evaluate the actions taken, the significance of the unintended devastating financial outcome, and mitigate this situation with minimal impact to the parties involved.

Thank you for considering my sincere entreaty for a decision that can result in Dr. Muris again providing professional services to patients covered by insurance programs.

Sincerely,

Karen Castelli

It is with great pleasure I am writing a letter of recommendation on behalf of Dr. David Muris. For the past 4 years I have had the distinct pleasure of knowing him as my optometrist and as a personal friend.

As my optometrist, I greatly appreciate Dr. Muris' in depth knowledge of vision care, his kind, gentle and thorough approach to eye examinations and his initiative to ensure my questions and vision concerns are clearly addressed. I am also pleased that the health of my eyes (rather than the promotion of supplemental services or products) has always been the focus of my office visits. The professional advice I have received from Dr. Muris resonates well with me. Due to his services, I feel quite confident that my vision care is in excellent hands.

On a personal level I have found David Muris to be a generous, warm hearted, humorous and caring friend. I greatly enjoy the fact that he embodies a passionate regard for his profession and the needs of our community at large. On a variety of occasions I have witnessed David stretch himself to new heights as well as lend a helping hand to others. Without question, he is a man who seeks to better himself and the world around him.

I consider myself fortunate to know Dr. Muris and without reservation would be willing to answer any additional inquiries anyone might have regarding his professional or personal character.

Sincerely,

Carol J. Ashlin, M.A. Educational Consultant

arol J Ashlu

916 974-1566

To Whom It May Concern:

I have been a patient of Dr. David Muris since 2000. I sought Dr. Muris' services because of his reputation; I stay with him because of his years of experience, his friendly demeanor and his genuine concern for me and the health of my eyes.

I recently decided to undergo LASIK surgery. Prior to the surgery, Dr. Muris discussed the procedure with me and, more importantly, what I could expect afterward, in the long-term. He explained the monovision technique and worked with me to ensure my eyes would adapt successfully. I am pleased with the results of the surgery and attribute it to Dr. Muris' preparatory and follow-up work.

I was surprised to learn that some LASIK surgery patients continue their eye care with the surgeon rather than returning to the original provider. Given Dr. Muris' experience and my history with him, I never considered switching providers. In addition, Dr. Muris' office staff is another incentive for me to remain with him. The staff is courteous, knowledgeable of insurance procedures and helpful in accommodating special requests.

Overall, I am very satisfied with the level of care Dr. Muris provides, and recommend him at every opportunity.

Sincerely,

Kim Borgmeyer

128 Brightstone Circle

Folsom, California 95630

Kim Bargmigs

916.985.6113

JULIE A. MERRELL

1835 Vermont Street Gridley, CA 95948 (530) 846-4927 home julmerrell@sbcglobal.net

December 6, 2010

To Whom It May Concern:

This letter is in support of Dr. David W. Muris, O.D., License 5059, of Sacramento, California. It is my understanding Dr. Muris is on probation and, therefore, Vision Service Plan (VSP) is not allowing him to see VSP patients. VSP is my insurance coverage.

As background, I've worn corrective lenses since five (5) years of age. When my family moved to Woodland, California, from North Dakota in 1965, my parents continued my visual treatments with Dr. Romey, who placed me in hard contact lenses at the age of 11 due to extremely progressive myopia. With those hard contact lenses, my vision stabilized for approximately 19 years. My family moved from Woodland in 1966 to Oroville, California, but would take me back to Dr. Romey's practice in Woodland for my visual treatment (148 miles round trip). When Dr. Muris joined the practice with Dr. Romey, he became my primary vision doctor. As an adult, I still continued commuting to Woodland, and subsequently Sacramento when the practice opened that office, for my visual treatments. I am now 56 years old and Dr. Muris has been my visual doctor since I was a teenager. My daughter, Jennifer Sepulveda (Plaster), required corrective lenses around the age of 12 and, in spite of the commute, I chose Dr. Muris as her vision doctor as I trust his quality of care and expertise. She is now 37 years old and, although she resides in Paradise, California, has always commuted to Sacramento to be treated by Dr. Muris (175 miles round trip).

Although I have changed my primary medical physicians numerous times over the years, I have remained a patient of Dr. Muris for my visual treatment as he is very knowledgeable, thorough, and always takes care of my daughter and me as though we were family. I've been highly impressed with Dr. Muris's treatment throughout these years, as he does not simply prescribe corrective lenses, he goes the extra mile by researching natural methods of improving the health of our vision by means, such as, visual exercises. It has always been obvious to me that Dr. Muris is dedicated to his practice, truly cares for his patients and provides them with the best treatment possible.

Earlier this year, my daughter Jennifer was due for her annual visual exam but was advised that Dr. Muris is no longer on the VSP panel. Jennifer has had VSP coverage for approximately 10 years. She was very disappointed, as Dr. Muris has been her only vision doctor and she trusts him. She reluctantly is looking for a local eye doctor as she feels the commute is overburdensome if she cannot receive treatment personally from Dr. Muris. She is a CPA (Certified Public Accountant) and her schedule is demanding and spare time is limited.

I recently required a change in prescription and chose to be treated by one of the other doctors at that location. Although that doctor did an excellent job, I prefer to be seen by Dr. Muris as he is personally aware of my entire medical history and I feel more comfortable with him; thus, the visit is less burdensome on me. It would be a financial hardship for me to pay for treatment outside the VSP insurance coverage.

It is my hope you will reduce Dr. Muris's probationary period so he will once again qualify to treat VSP patients. Please feel free to contact me if you have any questions or require further information. Thank you for your consideration.

Sincerely,

Julie Merrell

\im



Ruth E. Squires 190 Allaire Circle Sacramento, CA 95835

California Board of Optometry 2420 Del Paso Road, Suite 255 Sacramento, CA 95834

12/2/2010

To Whom It May Concern:

I have been an optometric patient of Doctor David Muris since the fall of 1986, and I have received excellent care throughout my years. I have been fully satisfied with his services and the care of the courteous and attentive staff in his office.

I generally do not refer family or friends to any provider, group, or organization, however I referred both my husband and a brother in law to Doctor Muris since I started as his patient, and shared my experiences with his care to many family members and friends. My husband was a regular patient of Doctor Muris until he opted to be seen by Kaiser Permanente last year. I have remained with Doctor Muris although I do carry Kaiser medical insurance and VSP vision insurance which no longer provides direct coverage for my care by Doctor Muris.

I plan to continue to be a patient of Doctor Muris for as long as he is practicing as the services received have been dedicated to my needs, supportive of my capabilities and desires, and a tremendous assistance in maintaining my current level of eyesight through use of gas permeable contact lenses.

Thank you for the opportunity to share my experiences, support, and recommendation of Doctor David Muris and his office.

Ruth E. Squires

To Whom It May Concern:

We have known Dr. David Muris since 1980 as a neighbor, attended his wedding and he has been our optometrist for the last 24 years. We can say that he has always been very professional, keeps up to date on the latest procedures and has always had the latest equipment and instruments.

His office staff and Associates are also very professional and have always made one feel very welcome. We have always had a very good Patient to Doctor relationship and have recommended him to several of our friends.

Jacqueline J. Payor
Richard and Jacqueline Pryor

To Whom it may concern:

My name is Amy (Amelia, actually) Jones and I've known David W. Muris, OD, for almost forty-six years. I was a working registered nurse in California for forty years. I know my way around the medical field. We met in his last year of school at the Los Angeles College of Optometry and were married the next year. The union was for eleven years. We remained "family" for each other after we went our separate ways. He has also been in charge of my eye care over the years. I know him to be an honest, moral, highly-intelligent man. He has always had an up-to-date, modern office. It is clean, well-kept and staffed by educated, helpful people.

Please feel free to contact me if you have any questions about David.

Amy (Amelia) Jones

amy Jenes

1616 Grenoble Dr.

Woodland, Ca.

95695-5147

530-662-4026

Kate Muris

From: Bob Hall [bobwonghall@gmail.com]
Sent: Monday, December 06, 2010 11:43 AM

To: David W Muris
Subject: Fwd: Muris

Sent from my iPhone

Begin forwarded message:

From: Bob Hall < bobwonghall@gmail.com > Date: December 6, 2010 11:40:04 AM PST To: Bob Hall < bobwonghall@gmail.com >

Subject: Muris

To Whom It May Concern.

6 December 2010

I have been a patient of Dr. David W. Muris for about 23 years. My first impression of him was that he was a very friendly man of high integrity. Since that first impression he has never let me down he's and has always been verifiable honest and up front with me. He produced improved vision for me and maintained it with his understanding of how vision works.

Anytime I have had questions about my vision he has answered me patiently in a way that made me feel good about having asked the question in the first place. Neither he nor any of his staff have ever tried to push any opinions and products on me although ideas and products have been shown or recommended from time to time.

I noticed in my nearly 64 years in this life that there are some people one knows he can trust to always be honorable and some one must keep his eyes on. Dr. Muris is someone I have never felt I ever had to question the reliability of because he has always backed up everything he has recommended to me with the workability of it as proof of his recommendation with improved or maintained normal vision.

To me vision is certainly an important sense in life. Shortly after starting Dr. Muris's recommended Orthokeratology program I was able to easily pass a California DMV vision test and have the need to wear corrective lenses removed from my drivers lenses. most people are amazed that at my age I can read even the small print as well as see at a distance without corrective lenses and this ability is directly attributable to Dr. Muris because I have not seen another vision Doctor since I started using his practice.

Sincerely

Bob Hall 2422 U Street Sac, CA 95818 (916) 601-2746

To Whom It May Concern:

Dr. David Muris, O.D. has been my Optometrist since 1979. He and his very capable staff at Sacramento Visioncare have helped me to greatly improve my vision to 20/20 and to keep it there. I have been very satisfied with their professional service over the years and would recommend them to anyone. I have referred to them a number of friends who became regular patients.

When I started with Dr. Muris, my vision was 20/200 and I had been wearing glasses for twenty years. Dr. Muris fitted me with soft contact lenses, and my corrected vision was great. Within five years, however, my eyes weakened to 20/250. Instead of using stronger contact lenses, Dr. Muris suggested a program of vision therapy that could reverse the progressive weakening process.

In 1984, we began re-shaping my eyes with orthokeratology, using gas permeable lenses. In about a year and a half, my vision without contacts was 20/20. I was very excited, since I could legally drive without having to wear corrective lenses!

To maintain my 20/20 vision, I wore the lenses several hours during the day, three to four days a week. This was successful for many years. However, because of my work schedule, we found it more convenient to switch to night-time wear, two to four nights per week. This fits my life style even better, and works very well!

From the beginning, as a key ingredient of the vision therapy program, Dr. Muris has recommended an eye examination every four months. He does a variety of tests, including ocular pressures, using state-of-the-art equipment. During regularly scheduled appointments about six years ago, he noticed a gradual increase in my ocular pressures. This was a sign of glaucoma, and Dr. Muris referred me to a specialist, who confirmed the diagnosis. The glaucoma has been under control with prescription eye drops ever since.

My vision works so well that I almost take it for granted. The credit belongs to Dr. Muris and his staff. Also, he may have possibly saved me from eventual blindness when he discovered my glaucoma. So far, I have not noticed any effects of it, and may still not have known if it had not been for the regular professional care of Dr. Muris and his staff. I am very thankful for my great vision, both far and near.

Sincerely,

Joseph J. Goss 3867 Chimney Rock Way Sacramento, CA 95834

JAMES C. EVANS III, E.A.

THE TAX OFFICE

8300 Fair Oaks Blvd., Suite 401 Carmichael, CA 95608 (916) 944-3925

December 7, 2010

California State Board of Optometry

To Whom it May Concern:

This letter is being written with the utmost personal and professional respect we have for David W. Muris, O.D. My wife, Theia Taletta (Kvamme) Evans has been a patient of Dr. Muris' since 1970 and I became his patient in 1988. Along the way, Dr. Muris became a tax client of ours as well.

Since we are self-employed and have been in business for thirty-five years, we can appreciate how important it is to build a firm foundation with one's business and develop a loyal clientele. Dr. Muris has followed the same path with building his business and clientele. He has always employed a very personable and professional staff that has always represented him in the best way possible.

To maintain his loyal clientele, Dr. Muris has had to keep a meaningful relationship with his patients while giving them the best eye care with the most current and updated equipment. During economical times like these, it is not such an easy accomplishment. However, Dr. Muris has set a high standard for himself and his practice and we will continue to be grateful to have an Optometrist of his nature to trust in and rely on for our vision care.

Sincerely,

JAMES C. EVANS III, E.A.

Theia Juletta Evans-

November 29, 2010

To Whom It May Concern:

I am writing this letter of recommendation on behalf of David W. Muris, O.D.

I have been employed by Sacramento Visioncare Optometric Center since August 1999; part time for two years and full time since 2001. I have been trained to work in both the technical and administrative areas of the practice and I am currently the Assistant Office Manager.

As an employer, Dr. Muris sets high goals for himself and his staff. He is a demanding employer, but is always fair and reasonable with his expectations. I believe it's these high standards that have sustained the practice for over 35 years. He has many patients that travel hours, states, and sometimes countries to see him because they respect and trust his knowledge of the optometric field.

In 2009, VSP changed their policy regarding Doctors on probation which has disallowed Dr. Muris to see VSP patients. Although the majority of Dr. Muris' patients are with VSP, it has been rewarding to see some of his long time patients willing to pay out of network to continue their eye care with him.

Recently, another insurance company has taken him off their panel as they no longer allow Doctors to be contracted if the Doctor is on probation. Such policies have put a strain on the practice.

As an employee, Dr. Muris has taught me that "we" as a practice are here to provide the patients with professional, quality eye care and service. It is my opinion that Dr. Muris has always strived to meet or exceed these goals. Furthermore, if Dr. Muris was able to see all the patients who wish to see him as their eye care provider, it would lessen the patients' financial burden as well as that of the practice.

Thank you in advance for your consideration. If I can be of further assistance please contact me at (916) 974-7601.

Sincerely,

Tori Klinetobe

or: Klinetale

December 6, 2010

To: Board of Optometry From: JoAnne Agee

RE: David W. Muris, O.D.

I am sure that you all have a current curriculum vitae for Dr. Muris. It contains the validation of the continuing commitment that Dr. Muris has for his patient's eye health. He is the founding Director of Sacramento VisionCare; and in that capacity, he has been my employer since 1998.

This letter is to advise you of what you might not know about Dr. Muris before you undertake your re-evaluation of his probation status.

Dr. Muris is very active in his practice. He is so concerned about his patient's vision health that he provides the Stratus OCT imaging for a nominal fee when a patient does not have the means to pay. He is very active in his professional and personal community. He provides vision care for homeless two patients each month.

Dr Muris continues to attend seminars and the Optometric Society meetings to remain informed, and on the cutting edge of his profession.

He has been an extremely supportive employer, helping me, and other employees, to progress in various office skills and knowledge. Dr. Muris encourages all his employees to keep good personal eye health.

Every day, you have the opportunity to treat family, friends, and strangers with kindness and compassion while meeting their eye health needs. In my estimation, Dr. Muris is meeting that mission

JoAnne Agee Support Staff, Sacramento VisionCare Dolores McDonald 421 K Street Rio Linda, CA 95673 (916) 519-5011

December 12, 2010

To Whom it may concern: Re: Dr. David W. Muris, O.D.

My acquaintance with Dr. Muris began in 1994, -95 as a recent graduate from the National Career Education in the Optical/Optometric Assistant program. Sacramento Visioncare was gracious enough to let me complete my externship hours at their facility. Once I completed my externship hours I was offered a full time position as an Optometric Assistant.

In the winter of 2000 I made a career change. My years employed with Dr. Muris were consistently filled with weekly training, new technologies in vision improvement, non-traditional eye therapy, and the newest materials and fitting techniques in the gas permeable lenses field. Fellow students that completed the Optical/Optometric Assistant program did not have the exposure to gas permeable lenses as I. Now mind you this was also when PRK and RK where still being performed and the newest surgery, Lasik, was just emerging.

I may have changed careers but not my vision care needs. In the years that followed I still place my non-evasive vision care needs in the hands of Dr. Muris. I am so confident of Dr. Muris' care, I have entrusted him to the eye care needs of all three of my children, my spouse, my in-laws and my parents. I may be biased, but I doubt I can find another qualified and knowledgeable optometrist in the gas permeable field in the Sacramento Valley as Dr. Muris. My children and parents continue their care at Sacramento Visioncare as well, but see another optometrist.

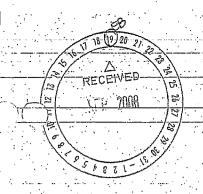
As the years have passed and insurances change my children are no longer able to be seen by Dr. Muris. Instead they must see another VSP panel optometrist or I pay the out of pocket fee. As for my care - I pay out of pocket in order to get the best gas permeable expertise care available.

In closing, it is a shame that even though I have vision coverage, I must pay out of pocket for services that were once covered under the care of Dr. Muris.

Thank you for your time,

Milonalel

Dolores McDonald



BEFORE THE BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:

Agency Case No. 2006-96

DAVID W. MURIS, O.D. 1111 Howe Avenue, Suite 235 Sacramento, CA 95825 OAH No. 2007110254

Certificate of Registration No. OPT 5059

Respondent.

DECISION

The attached Stipulated Decision and Disciplinary Order is hereby adopted by the Board of Optometry, Department of Consumer Affairs, as its Decision in the above-entitled matter.

This Decision shall become effective October 9, 2008.

It is so ORDERED September 9, 2008

LEE A. GOLDSTEIN, O.D. MPA

PRESIDENT

BOARD OF OPTOMETRY.

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atily to								
).	1	EDMUND G. BROWN JR., Attorney General						
	2	of the State of California FRANK H. PACOE						
· . · · .	3	Supervising Deputy Attorney General JONATHAN D. COOPER, State Bar No. 14146	51					
	4	Deputy Attorney General 455 Golden Gate Avenue, Suite 11000						
· ·		San Francisco, CA 94102-7004						
	. 5	Telephone: (415) 703-1404 Facsimile: (415) 703-5480						
•	6							
	7	Attorneys for Complainant						
	8		RE THE OF OPTOMETRY					
		DEPARTMENT OF C	CONSUMER AFFAIRS					
	9	SIAIE OF C	CALIFORNIA					
	10	In the Matter of the Accusation Against:	Case No. CC 2006-96					
	11	DAVID W. MURIS, O.D.	OAH No. 2007110254					
	. 12	1111 Howe Avenue, Suite 235 Sacramento, CA 95825	STIPULATED SETTLEMENT AND DISCIPLINARY ORDER					
	13							
)	14	Certificate of Registration No. OPT 5059						
	15	Respondent.						
	16	IT IS HEREBY STIPULATED A	AND AGREED by and between the parties to the					
		above-entitled proceedings that the following matters are true:						
	17	PAR	TIES					
	18	1. Mona Maggio (Complain	ant) is the Executive Officer of the State Board					
	19	of Optometry. She pursues this action solely in						
	20	matter by Edmund G. Brown Jr., Attorney Gene						
· · ·	21		rai of the Blate of Camorina, by Johannai D.					
	22	Cooper, Deputy Attorney General.						
	23	2. Respondent David Muris	(Respondent) is represented in this proceeding					
· ·	24	by attorney Robert J. Sullivan, whose address is	Nossaman, Guthner, Knox & Elliott, LLP, 915 L					
		Street, Suite 1000, Sacramento, CA, 95814-370.	5.					
:	25	3. On or about April 24, 196	59, the State Board of Optometry issued					
· · ·	26	Certificate of Registration to Practice Optometry	y No. 5059 to David Muris (Respondent). The					
)	27	license was in full force and effect at all times re	elevant to this Accusation and will expire on					
• ;	28							

November 30, 2009, unless renewed. JURISDICTION Accusation No. CC 2006-96 was filed before the State Board of 3 Optometry (Board), Department of Consumer Affairs, and is currently pending against 4 Respondent. The Accusation and all other statutorily required documents were properly served 5 on Respondent on August 27, 2007. Respondent timely filed his Notice of Defense contesting 6 the Accusation. A copy of Accusation No. CC 2006-96 is attached as exhibit A and incorporated 8 herein by reference. 9 ADVISEMENT AND WAIVERS Respondent has carefully read, fully discussed with counsel, and 10 understands the charges and allegations in Accusation No. CC 2006-96. Respondent has also $\cdot 11$ 12 carefully read, fully discussed with counsel, and understands the effects of this Stipulated .13 Settlement and Disciplinary Order. Respondent is fully aware of his legal rights in this matter, including the .14 right to a hearing on the charges and allegations in the Accusation; the right to be represented by 15 16 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 1.7 subpoenas to compel the attendance of witnesses and the production of documents; the right to 18 19 reconsideration and court review of an adverse decision; and all other rights accorded by the 20 California Administrative Procedure Act and other applicable laws. 21 Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above. CULPABILITY 23 24 Respondent understands that the charges and allegations in Accusation 25 Number CC 2006-96, if proven at a hearing, constitute cause for imposing discipline upon his 26 Certificate of Registration. For the purpose of resolving the Accusation without the expense and 27 uncertainty of further proceedings, Respondent hereby gives up his right to contest that cause for

discipline exists based on those charges. Respondent agrees that his Certificate of Registration to Practice 2 Optometry is subject to discipline and he agrees to be bound by the State Board of Optometry (Board) 's imposition of discipline as set forth in the Disciplinary Order below CONTINGENCY This stipulation shall be subject to approval by the State Board of Optometry, Respondent understands and agrees that counsel for Complainant and the staff of the State Board of Optometry may communicate directly with the Board regarding this 8 stipulation and settlement, without notice to or participation by Respondent or his counsel. By .9 signing the stipulation, Respondent understands and agrees that he may not withdraw his 10 agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon 11 it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement 12 and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be 13 inadmissible in any legal action between the parties, and the Board shall not be disqualified from 14 15 further action by having considered this matter. The parties understand and agree that facsimile copies of this Stipulated 16 Settlement and Disciplinary Order, including facsimile signatures thereto, shall have the same 17 18 force and effect as the originals. 19 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 20 21 following Disciplinary Order: DISCIPLINARY ORDER 22 23 IT IS HEREBY ORDERED that Certificate of Registration to Practice Optometry No. 5059, issued to Respondent David Muris (Respondent), is revoked. However, the revocation 24 is stayed and Respondent is placed on probation for five (5) years on the following terms and 25 conditions. 26 Severability Clause. Each condition of probation contained herein is a separate 27 and distinct condition. If any condition of this Order, or any application thereof, is declared 28

unenforceable in whole, in part, or to any extent, the remainder of this Order, and all other applications thereof, shall not be affected. Each condition of this Order shall separately be valid and enforceable to the fullest extent permitted by law.

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1. Obey All Laws. Respondent shall obey all federal, state and local laws and, in addition, all rules governing the practice of optometry in California. A full and detailed account of any and all violations of law shall be reported by Respondent to the Board in writing within seventy-two (72) hours of occurrence. To permit monitoring of compliance with this condition, Respondent shall submit completed fingerprint forms and fingerprint fees within 45 days of the effective date of the decision, unless previously submitted as part of the licensure application process.

Criminal Court Orders: If Respondent is under criminal court orders, including probation or parole, and the order is violated, this shall be deemed a violation of these probation conditions, and may result in the filing of an accusation and/or petition to revoke probation.

Cooperate with Probation Program: Respondent shall fully comply with the conditions of the Probation Program established by the Board and cooperate with representatives of the Board in its monitoring and investigation of Respondent's compliance with the Board's Probation Program. Respondent shall, at his own expense, report in person to the Board's headquarters in Sacramento within three (3) months of the effective date of the Board's decision, and as the Board deems necessary if it is determined that Respondent may not be compliant with any of the terms of conditions of his probation. Respondent shall inform the Board in writing within no more than 15 days of any address change and shall at all times maintain an active, current license status with the Board, including during any period of suspension.

Respondent shall comply with the Board's probation surveillance program, including but not limited to allowing access to Respondent's optometric practice(s) and patient records upon request of the Board or its agent, with or without prior notice to Respondent. Respondent shall pay the monitoring costs associated with the Board's probation surveillance program 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 Board of Optometry and delivered to the Board or its designee no later than January

3. Report in Person. Respondent, during the period of probation, shall appear in person at interviews/meetings as directed by the Board or its designated representatives.

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- Residency, Practice or Licensure Outside of California. Periods of residency or practice as an optometrist outside of California shall not apply toward a reduction of this probation time period. Respondent's probation is tolled, if and when he or she resides outside of California. Respondent must provide written notice to the Board within 15 days of any change of residency or practice outside the state, and within 30 days prior to re-establishing residency or returning to practice in this state. Respondent shall provide a list of all states and territories where he or she has ever been licensed as an optometrist. Respondent shall further provide information regarding the status of each license and any changes in such license status during the term of probation. Respondent shall inform the Board if he applies for or obtains a new optometry license during the term of probation. Within thirty days of the effective date of this decision and order, respondent shall provide a copy of the Board's decision and order to the optometry licensing authority of any other state where he is currently licensed or becomes licensed to practice optometry.
- 5: Submit Written Reports. Respondent, during the period of probation, shall submit or cause to be submitted such written reports/declarations and verification of actions under penalty of perjury, as are required by the Board. These reports/declarations shall contain statements relative to Respondent's compliance with all of the conditions of the Board's Probation Program. Respondent shall immediately execute all release of information forms as may be required by the Board or its representatives.
- 6. Function as an Optometrist. Respondent, during the period of probation, shall engage in the practice of optometry in California for a minimum of 24 hours per week for 6 consecutive months, within each year of probation, or as determined by the Board. For purposes of compliance with the section, "engage in the practice of optometry" may include, when approved by the Board, volunteer work as an optometrist, or work in any non-direct patient care position that requires licensure as an optometrist. If Respondent has not complied with this condition during the

probationary term, and Respondent has presented sufficient documentation of his or her good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of Respondent's probation period up to one year without further hearing in order to comply with this condition. During this one-year extension, all original conditions of probation shall apply.

7. Employment Approval And Reporting Requirements. Respondent may continue to practice Optometry in his current office, subject to the restrictions in this Order including, but not limited to, those regarding the supervision of employees. Respondent shall obtain prior approval form the Board before commencing or continuing any other practice of optometry. Respondent shall cause to be submitted to the Board any available performance evaluations and other employment related reports as an optometrist upon request of the Board. If working as an employee, Respondent shall provide a copy of this decision to his or her employer and immediate supervisors prior to commencement of the practice of optometry. In addition to the above requirements, Respondent shall notify the Board in writing within seventy-two hours after he or she obtains any optometric employment. Respondent shall notify the Board in writing within seventy-two hours after he or she is terminated or is separated, regardless of cause, from any optometric employment with a full explanation of the circumstances surrounding the termination or separation.

- 8. Employment Limitations. Respondent shall not work in any health care setting as a supervisor of optometrists. The Board may additionally restrict Respondent from supervising technicians and/or unlicensed assistive personnel on a case-by-case basis. Respondent shall not work as a faculty member in an approved school of optometry or as an instructor in a Board-approved continuing education program. Respondent shall work only on a regularly assigned, identified and predetermined worksite(s) and shall not work in a float capacity. If Respondent is working or intends to work in excess of 40 hours per week, the Board may request documentation to determine whether there should be restrictions on the hours of work.
- 9. Education Course. Within 90 days of the effective date of this decision, and on an annual basis thereafter, Respondent shall submit to the board for its prior approval and complete an educational program or course including, but not limited to, education in the field of

ethics, to be designated by the board, which shall not be less than 25 hours per year, for each year of probation. This program shall be in addition to the Continuing Optometric Education requirements for re-licensure, and shall be obtained with all costs being paid by Respondent. Following the completion of each course, the board or its designee may administer an examination to test Respondent's knowledge of the course. Respondent shall provide written proof of attendance in such course or courses as are approved by the board.

- 10. See Clearly Method. Respondent shall not advertise, sell, endorse or assist in advertising, selling or endorsing the product known as the See Clearly Method or any product that is substantially similar to the See Clearly Method.
- Posting. During the period of probation, Respondent shall post a notice in a prominent place in his office that is conspicuous and readable to the public. The notice shall state that Respondent's Certificate of Registration is on probation and shall contain the telephone number of the State Board of Optometry. Respondent shall also post a notice containing this information prominently on any website related to his practice of Optometry. The above-described notices shall be approved by the Board.
- of any ownership interests in and association interests substantially similar to the American Vision Institute. Respondent shall not be associated with the American Vision Institute or any other substantially similar associations or entitities in any way. Respondent shall not be associated with any internet website related to the American Vision Institute or any other substantially similar ownership interests. Respondent shall take affirmative action to remove his name and likeness from any and all literature, advertisements and internet websites related to the American Vision Institute and other substantially similar associations or entitities.
- Respondent shall, prior to any publication or public dissemination by any means, including, but not limited to, by means of internet advertising or websites, submit any and all advertisement of products and professional services in the field of optometry to the Board for its prior approval. Such

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advertisement may be published or disseminated to the public only after written approval by the

Board.

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Cost Recovery. Respondent shall pay to the Board costs associated with its investigation and enforcement pursuant to Business and Professions Code section 125.3 in the amount of \$14,809.25. Respondent shall be permitted to pay these costs in a payment plan approved by the Board, with payments to be completed no later than three months prior to the end of the probation term.

If Respondent has not complied with this condition during the probationary term, and Respondent has presented sufficient documentation of his good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of Respondent's probation period up to one year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation will apply.

- Violation of Probation. If Respondent violates the conditions of his probation in any respect, the Board, after giving Respondent notice and opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an accusation or petition to revoke probation is filed against Respondent during the period of probation, or if the Attorney General's Office has been requested to prepare an Accusation or Petition to Revoke 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.
- practicing due to retirement of health reasons, or is otherwise unable to satisfy the conditions of probation, Respondent may surrender his license to the Board. The Board reserves the right to evaluate Respondent's request and to exercise its discretion whether to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances, without further hearing. Upon formal acceptance of the tendered license and wall certificate, Respondent will no longer be subject to the conditions of probation. Surrender of Respondent's license shall be considered a disciplinary action and shall become a part of Respondent's license history with the

		<u> </u>						
		- -						
1	Board. An optometrist whose license has been surrendered may petition the Board for reinstatement.							
. 2	no sooner than one year from the effective date of the disciplinary decision.							
3	ACCEPTANCE							
4	I have carefully read the above Stipulated Settlement and Disciplinary Order							
5	and have fully discussed it with my attorney, Robert J. Sullivan. I understand the stipulation and the							
6	effect it will have on my Certificate of Registration to Practice Optometry. I enter into this							
7	Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to							
. 8	be bound by the Decision and Order of the State Board of Optometry.							
9	DATED: B-22-08 Llain Mang							
10	Respondent							
1.1	I have read and fully discussed with Respondent David Muris the terms and							
12	conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.							
13	I approve its form and content.							
14	DATED: 8-25-00 / SING VAN							
15	Attorney for Respondent							
16	ENDORSEMENT							
17	The foregoing Stipulated Settlement and Disciplinary Order is hereby							
18	respectfully submitted for consideration by the State Board of Optometry of the Department of							
19	Consumer Affairs.							
20	DATED: 9/4/8							
21	EDMUND G. BROWN JR., Attorney General							
22	of the State of California							
23	FRANK H. PACOE Supervising Deputy Attorney General							
24	Suporvising Deputy Money solitor	ļ						
25	JONATHAN D. COOPER/ Deputy Attorney General							
26								
27	Attorneys for Complainant							
28								

Exhibit A
Accusation No. CC 2006-96

	EDMUND G. BROWN JR., Attorney General of the State of California					
2	FRANK H. PACOE					
3	Supervising Deputy Attorney General JONATHAN D. COOPER, State Bar No. 141461					
.4	Deputy Attorney General California Department of Justice					
	455 Golden Gate Avenue, Suite 11000					
.5	San Francisco, CA 94102-7004 Telephone: (415) 703-1404					
6	Facsimile: (415) 703-5480					
7.	Attorneys for Complainant					
	BEFORE T	HE				
8.	STATE BOARD OF (DEPARTMENT OF CON	OPTOMETRY STIMER AFFAIRS				
9.	STATE OF CAL	IFORNIA				
10						
11:	In the Matter of the Accusation Against:	Case No. CC 2006-96				
12	DAVID W. MURIS, O.D.	OAH No.				
13	1111 Howe Avenue, Suite 235	ACCUSATION				
	Sacramento, CA 95825					
14	Certificate of Registration No. OPT 5059					
15	Respondent					
16						
17	Complainant alleges:					
18	PARTIE	<u>1S</u>				
19	1. Taryn Smith (Complainant) b	rings this Accusation solely in her official				
20	1	capacity as the Executive Officer of the State Board of Optometry, Department of Consumer				
21	Affairs.					
22	2. On or about April 24, 1969, the State Board of Optometry issued					
23	Certificate of Registration to Practice Optometry No					
23	license was in full force and effect at all times relev	, ·				
25	November 30, 2007 unless renewed.					
	דרים דמים ד	TION				
26						
27		efore the State Board of Optometry (Board),				
28	Department of Consumer Affairs, under the authority of the following laws. All section					

references are to the Business and Professions Code unless otherwise indicated. Section 118, subdivision (b), of the Code provides that the expiration of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary action during the period within which the license may be renewed, restored, reissued or reinstated. Section 3090 of the Code states: "Except as otherwise provided by law, the board may take action 6 against all persons guilty of violating this chapter or any of the regulations adopted by the board. The board shall enforce and administer this article as to Ż. license holders, and the board shall have all the powers granted in this chapter for these purposes, including, but not limited to, investigating complaints from the 8 public, other licensees, health care facilities, other licensing agencies, or any other source suggesting that an optometrist may be guilty of violating this chapter or 9 any of the regulations adopted by the board." 10 STATUTORY PROVISIONS 11 Section 480 of the Code states, in pertinent part: 12 "(a) A board may deny a license regulated by this code on the grounds that the 13 applicant has one of the following: 14 15 "(2) Done any act involving dishonesty, fraud or deceit with the intent to .16 substantially benefit himself or another, or substantially injure another. .1718 Section 651 of the Code states, in pertinent part: .19 "(a) It is unlawful for any person licensed under this division or under any initiative act referred to in this division to disseminate or cause to be 20 disseminated any form of public communication containing a false, fraudulent, misleading, or deceptive statement, claim, or image for the purpose of or likely to 21. induce, directly or indirectly, the rendering of professional services or furnishing of products in connection with the professional practice or business for which he 22. or she is licensed. A 'public communication' as used in this section includes, but is not limited to, communication by means of mail, television, radio, motion 23 picture, newspaper, book, list or directory of healing arts practitioners, Internet, or 24 other electronic communication. "(b) A false, fraudulent, misleading, or deceptive statement, claim, 25 or image includes a statement or claim that does any of the following: 26 "(1) Contains a misrepresentation of fact. 27 "(2) Is likely to mislead or deceive because of a failure to disclose 28 material facts.

(3)(A) Is intended or is likely to create false or unjustified expectations of favorable results, including the use of any photograph or other image that does not accurately depict the results of the procedure being advertised .2 or that has been altered in any manner from the image of the actual subject depicted in the photograph or image. 3 (B) Use of any photograph or other image of a model without clearly stating in a prominent location in easily readable type the fact that the photograph or image is of a model is a violation of subdivision (a). For purposes 5 of this paragraph, a model is anyone other than an actual patient, who has undergone the procedure being advertised, of the licensee who is advertising for 6 his or her services. 7 (C) Use of any photograph or other image of an actual patient that depicts or purports to depict the results of any procedure, or presents 'before' and 8. 'after' views of a patient, without specifying in a prominent location in easily readable type size what procedures were performed on that patient is a violation of 9 subdivision (a). Any 'before' and 'after' views (i) shall be comparable in presentation so that the results are not distorted by favorable poses, lighting, or :10 other features of presentation, and (ii) shall contain a statement that the same 'before' and 'after' results may not occur for all patients. 11 "(4) Relates to fees, other than a standard consultation fee or a 12. range of fees for specific types of services, without fully and specifically disclosing all variables and other material factors, 13 "(5) Contains other representations or implications that in 14 reasonable probability will cause an ordinarily prudent person to misunderstand or be deceived. 15 "(6) Makes a claim either of professional superiority or of 16 performing services in a superior manner, unless that claim is relevant to the service being performed and can be substantiated with objective scientific 17 evidence. 1.8 '(7) Makes a scientific claim that cannot be substantiated by reliable, peer reviewed, published scientific studies. 19 "(8) Includes any statement, endorsement, or testimonial that is 20 likely to mislead or deceive because of a failure to disclose material facts. 21 "(c) Any price advertisement shall be exact, without the use of phrases, including, but not limited to, 'as low as,' 'and up,' 'lowest prices,' or 22 words or phrases of similar import. Any advertisement that refers to services, or costs for services, and that uses words of comparison shall be based on verifiable 23 data substantiating the comparison. Any person so advertising shall be prepared to provide information sufficient to establish the accuracy of that comparison. 24 Price advertising shall not be fraudulent, deceitful, or misleading, including statements or advertisements of bait, discount, premiums, gifts, or any statements 25 of a similar nature. In connection with price advertising, the price for each product or service shall be clearly identifiable. The price advertised for products 26 shall include charges for any related professional services, including dispensing and fitting services, unless the advertisement specifically and clearly indicates 27 otherwise.

'(g) Any violation of this section by a person so licensed shall 2 constitute good cause for revocation or suspension of his or her license or other disciplinary action. Section 3106 of the Code states: 5 "Knowingly making or signing any certificate or other document directly or indirectly related to the practice of optometry that falsely represents the existence or nonexistence of a state of facts constitutes unprofessional conduct." Section 3110 of the Code states in pertinent part: 8 "The board may take action against any licensee who is charged 9 with unprofessional conduct, and may deny an application for a license if the applicant has committed unprofessional conduct. In addition to other provisions of 10 this article, unprofessional conduct includes, but is not limited to, the following: 11 "(a) Violating or attempting to violate, directly or indirectly assisting in or abetting the violation of, or conspiring to violate any provision of :12 this chapter or any of the rules and regulations adopted by the board pursuant to this chapter. 13 14 "(d) Incompetence. 15 "(e) The commission of fraud, misrepresentation, or any act 16 involving dishonesty or corruption, that is substantially related to the qualifications, functions, or duties of an optometrist. . 17 18 "(f) Any action or conduct that would have warranted the denial of a license. 19 '(g) The use of advertising relating to optometry that violates Section 651 or 17500. 20 21 Section 17500 of the Code states: 22 23 It is unlawful for any person, firm, corporation or association, or any employee thereof with intent directly or indirectly to dispose of real or 24 personal property or to perform services, professional or otherwise, or anything of any nature whatsoever or to induce the public to enter into any obligation relating thereto, to make or disseminate or cause to be made or disseminated before the 25 public in this state, or to make or disseminate or cause to be made or disseminated from this state before the public in any state, in any newspaper or other 26 publication, or any advertising device, or by public outcry or proclamation, or in any other manner or means whatever, including over the Internet, any statement, 27 concerning that real or personal property or those services, professional or 28 otherwise, or concerning any circumstance or matter of fact connected with the

proposed performance or disposition thereof, which is untrue or misleading, and which is known, or which by the exercise of reasonable care should be known, to be untrue or misleading, or for any person, firm, or corporation to so make or disseminate or cause to be so made or disseminated any such statement as part of a plan or scheme with the intent not to sell that personal property or those services, professional or otherwise, so advertised at the price stated therein, or as so advertised. Any violation of the provisions of this section is a misdemeanor punishable by imprisonment in the county jail not exceeding six months, or by a 4 fine not exceeding two thousand five hundred dollars (\$2,500), or by both that imprisonment and fine. 6 COSTS: Section 125.3 of the Code provides, in pertinent part, that the Board may 8 request the administrative law judge to direct a licentiate found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation 10 and enforcement of the case. 11 FACTUAL SUMMARY 12 From approximately 2000 until November, 2006, Respondent was a part 13 owner of Vision Improvement Technologies, Inc. (hereinafter "VIT"), a corporation which 14 marketed a system of eye improvement exercises called the "See Clearly Method." VIT 15 marketed the See Clearly Method nationwide, including to California consumers, via television, 16 radio, the internet and other media. 17 Respondent contributed to the development of the See Clearly Method and 18 actively participated in its marketing. Respondent's name and a photograph of Respondent were 19 prominently displayed on the VIT website along with a description identifying Respondent as a 20 co-creator of the See Clearly Method. 21. The See Clearly Method consists primarily of eye exercises and is based, 22 in part, on the theories of William Horatio Bates, the creator of the "Bates Method" of eye 23 exercises in the early 1900's. The Bates Method, which has been thoroughly discredited in the 24 scientific community, was based on a belief that eye exercises could strengthen the muscles in 25 the eye that control the focusing process. 15. In marketing the See Clearly Method to consumers, Respondent and VIT

made Claims that the use of this method would result in improvements in vision which would

result in users being able to see without glasses. VIT and Respondent represented to consumers that the See Clearly Method is grounded in science and clinical research. The method's instruction manual, which consumers were urged to review in deciding whether to keep (and pay for) the kit or return it, contained a letter signed by Respondent. The letter claims that Respondent and his colleagues have "dedicated their professional lives to bringing this groundbreaking knowledge to the world -. 6 and to you." The letter discusses the academic achievements of Respondent's colleagues and their scientific research, and states: 8. And now, finally, after decades of research and clinical experience. 9 their effort to bring out this knowledge of how to improve your vision naturally are paying off. Tens of thousands of people are -10 now taking charge of the health and well-being of one of their most precious gifts, the gift of sight. Now it is your turn. 11 An additional letter signed by Respondent was provided with the See 12 Clearly Method when it was sent to consumers for their consideration. This letter states, in 13 14 pertinent part: My colleagues and I, a team of optometrists and research scientists, 15 developed the See Clearly Method for people just like you who want to improve their vision, the health of their eyes, and their 16 overall well-being. We believe that healthy eyes are among life's most precious gifts, and with serious eye disease reaching epidemic 17 proportions, we've devoted our lives to bringing this knowledge to others. 18 In describing to consumers the research that had been conducted regarding 19 the See Clearly Method, Respondent failed to disclose the fact that the See Clearly Method is not :20 accepted in the scientific community or supported by peer reviewed scientific studies. 21 Respondent described his own clinical evaluation of the See Clearly Method, but failed to 22 disclose material facts about the study that tend to undermine the study's reliability. These facts 23 24. include: The evaluation was a preliminary clinical evaluation only; 25 Respondent, a part owner of VIT, was one of the two people who 26 performed the evaluation: The evaluation was limited to individuals with minor vision problems;

1	d. Participants in the study attended weekly seminars that are not part of the	
2	See Clearly Method; and	
3,	e. Results were reported only as to the 21 people who appeared at a final eye	
4	exam at the end of the six-week study.	
5	FIRST CAUSE FOR DISCIPLINE	
6	(Acts Involving Dishonesty, Fraud or Deceif)	
7.	19. Respondent is subject to disciplinary action under sections 480, 3110(e).	
8	and 3.110(f) of the Code in that he committed acts involving dishonesty, fraud or deceit, as set	
9.	forth above in paragraphs 12 through 18.	
10	SECOND CAUSE FOR DISCIPLINE	
11	(False, Fraudulent, or Misleading Advertising)	
12	20. Respondent is subject to disciplinary action under sections 651(a), 651(g),	
13	3110(g) and 17500 of the Code in that he engaged in false, fraudulent or misleading advertising,	
14	as set forth above in paragraphs 12 through 18.	•
15	THIRD CAUSE FOR DISCIPLINE	
16	(False Representation of State of Facts)	
17.	21. Respondent is subject to disciplinary action under section 3106 of the	
18	Code in that he knowingly made or signed documents directly related to the practice of	
19	optometry that falsely represent the existence of a state of facts, as set forth above in paragraphs	
20	12 through 18.	
21	FOURTH CAUSE FOR DISCIPLINE	
22	(Incompetence)	
23	22. Respondent is subject to disciplinary action under section 3110(d) of the	
24	Code in that he acted incompetently, as set forth above in paragraphs 12 through 18.	
O 25	FIFTH CAUSE FOR DISCIPLINE	
26		
27		
28	in that he acted unprofessionally, as set forth above in paragraphs 12 through 18.	

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Electrical States	
	PRAYER
2	WHEREFORE, Complainant requests that a hearing be held on the matters herein
3	alleged, and that following the hearing, the State Board of Optometry issue a decision:
4	1. Revoking or suspending License Number OPT 5059, issued to David
5.	Muris;
6	2. Ordering David Muris to pay the State Board of Optometry the reasonable
7	costs of the investigation and enforcement of this case, pursuant to Business and Professions Code
8	section 125.3;
9	3. Taking such other and further action as decimed necessary and proper.
10	
11	DATED: My 22,207
12	
13	Jama Anot
14	TARYNGMITH
15	Executive Officer State Board of Optometry
16	Department of Consumer Affairs State of California
17	Complainant
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27.	
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Memo

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To:

Board Members

Date:

June 21, 2011

From:

Jessica Sieferman

Telephone:

(916) 575-7178

Probation Monitor

Subject: Agenda Item 6B - Petition for Reduction of Penalty and Early

Termination of Probation

The State Board of Optometry is being asked to consider the following Petitions:

Reduction of Penalty or Early Termination of Probation of:

Dr. Casey Finn, O. D.

The Board is asked to grant or deny the petition after considering the facts presented at the hearing.

Deputy Attorney General, Michelle McCarron, will represent the interest of the public's health, safety and welfare, provide the petitioner's license history, as well as help the Board obtain the information it needs to evaluate the petition to reduce penalties or terminate probation.

The Board Members may ask questions, which should be simple and to the point and directed toward rehabilitation and assessing ability to practice safely, either with or without conditions. As stated in the California Code of Regulations (CCR), Section 1516, the criteria for determining whether a petitioner has shown rehabilitation is as follows:

CCR§ 1516. Criteria for rehabilitation

(a) When considering the denial of a certificate of registration under Section 480 of the Code, the Board, in evaluating the rehabilitation of the applicant and his/her present eligibility for a certificate of registration, will

consider the following criteria:

(1) The nature and severity of the act(s) or crime(s) under consideration as grounds for denial.

(2) Evidence of any act(s) committed subsequent to the act(s) or crime(s) under consideration as grounds for denial which also could be considered as grounds for denial under Section 480 of the Code.

(3) The time that has elapsed since commission of the act(s) or crime(s) referred to in

subdivision (1) or (2).

(4) The extent to which the applicant has complied with any terms of parole, probation, restitution, or any other sanctions lawfully imposed against the applicant.

(5) Evidence, if any, of rehabilitation submitted by the applicant.

(b) When considering the suspension or revocation of a certificate of registration on the ground that the registrant has been convicted of a crime, the Board, in evaluating the rehabilitation of such person and his/her present eligibility for a license, will consider the following criteria:

(1) Nature and severity of the act(s) or offense(s).

(2) Total criminal record.

(3) The time that has elapsed since commission of the act(s) or offense(s)

- (4) Whether the licensee has complied with any terms of parole, probation, restitution or any other sanctions lawfully imposed against the licensee.
- (5) If applicable, evidence of expungement proceedings pursuant to Section 1203.4 of the Penal Code.

(6) Evidence, if any, of rehabilitation submitted by the licensee.

(c) When considering a petition for reinstatement of a certificate of registration under Section 11522 of the Government Code, the Board shall evaluate evidence of rehabilitation submitted by the petitioner, considering those criteria of rehabilitation specified in subsection (b).

An Administrative Law Judge will sit with the Board and preside over the hearing to maintain order, determine admissibility of documents, assist the Board during closed session and write the Board's decision.

If the Board decides to deny the Petition, it must state its reasons for doing so.

Below is a Probation Compliance Report, summarizing Dr. Finn's compliance throughout his entire probationary term.

PROBATION COMPLIANCE REPORT

Name of Optometrist: Dr. Casey Finn, O.D.

Case #: CC 2005-104 OPT License: #8638

Probation Monitor: Jessica Sieferman

Jurisdictional Document: Stipulated Settlement and Disciplinary Order

Term of Probation: July 17, 2008 - July 17, 2013

1) ACTUAL SUSPENSION: Was the Optometrist suspended for a period of tendays? If so, when did he serve his suspension?

There is no documentation in the file indicating dates Dr. Finn served his suspension. However, the previous probation monitor did inform the Board that Dr. Finn served his suspension during his vacation. Dr. Finn confirms that his suspension was served during his Christmas vacation in December 2008.

2) OBEY ALL LAWS: Did the Optometrist obey <u>all</u> laws, and report violations of any laws on time?

There is no record of any violations, and Dr. Finn has not reported violating any laws since the effective date of the Decision.

3) COOPERATE WITH THE PROABTION SURVEILLANCE: Did the Optometrist fully cooperate with the Probation Surveillance and cooperate with Board Representatives?

Yes. Dr. Finn has fully cooperated throughout his entire probation program

4) COMPLY WITH THE BOARD'S PROBATION PROGRAM: Did the Optometrist fully comply with the Board's Probation Program throughout the entire time of probation?

No. At times, Dr. Finn struggled to comply with conditions #18 - Community Services and #20 Supervised Environment. The details surrounding this are summarized in those conditions below.

Did the Optometrist maintain an active, current license status at all times during the probation period.

Yes. Dr. Finn maintained ac active, current license status at all times during his probation period.

5) INTERVIEWS: Did the Optometrist appear for probation interviews as directed?

Yes, Dr. Finn appeared for all scheduled interviews as directed.

6) SUBMIT WRITTEN REPORTS: Did the Optometrist submit or cause to be submitted to the Board, all of the documents required for probation on time?

Yes. Dr. Finn submitted all Quarterly Reports as directed.

7) FUNCTION AS AN OPTOMETRIST: Did the Optometrist work as an Optometrist for the minimum required time?

Yes, to the Board's knowledge, Dr. Finn practiced at least the minimum required by this condition: "24 hours per week for 6 consecutive months or as determined by the Board."

8) EMPLOYMENT APPROVAL AND REPORTING REQUIREMENTS: Did the Optometrist obtain approval from the Board prior to commencing the practice of optometry?

By the time Ms. Sieferman became Dr. Finn's probation monitor, he had been on probation for a year and a half and had been working. There is no record in Dr. Finn's file of the previous monitor approving employment or the fulfillment of this requirement. However, that does not mean the approval was never given.

In addition, the requirement requires Dr. Finn "notify the Board in writing within seventy-two hours after he obtains any optometric or other health care related employment." In a compliance interview held on January 6, 2011, Dr. Finn informed Ms. Sieferman that he had been working at Costco and for Dr. Lynn Parrish. Dr. Finn did not notify the Board within the seventy-two hour window. However, Dr. Finn does claim to have sent a letter notifying the Board of Costco, but the Board never received such letter.

9) RESIDENCY, PRACTICE, OR LICENSURE OUTSIDE OF STATE: Did the Optometrist leave California to reside or practice during the probation term?

No, Dr. Finn did not leave California to reside or practice outside of state during his probation term.

- 10) THERE IS NOT A #10 CONDITION IN HIS ORDER
- 11) COST RECOVERY: Did the Optometrist pay all costs owed to the Board?

Yes. Dr. Finn owed a total of \$3,600. Dr. Finn has paid the balance in full.

12) COMPLETION OF PROBATION

"Upon successful completion of probation, Respondent's certificate will be fully restored."

13) VIOLATION OF PROBATION: Did the Optometrist violate any condition of probation or any laws?

Yes. It appears during the first year and half of probation, Dr. Finn struggled with compliance. However, there is no record of the Board ever sending Dr. Finn any Notifications of Noncompliance or attempting to gain compliance from Dr. Finn during this time.

As soon as Dr. Finn was notified of the compliance issues, he was cooperative with Ms. Sieferman and worked to become compliant again. Communication between the Board and Dr. Finn improved dramatically. No disciplinary actions were taken against Dr. Finn for these compliance issues.

14) DRUGS & ABSTAIN FROM USE: Did the Optometrist completely abstain from the personal use or possession of controlled substances?

Yes, with the exception to his prescribed medications, Dr. Finn has completely abstained from controlled substances.

15) DRUGS - EXCEPTION FOR PERSONAL ILLNESS: Did the Optometrist ever utilize the prescription exception for personal illness?

Yes. In a letter dated July 26, 2010, Dr. Victor D. Contreras, M.D. notified the Board that he diagnosed Dr. Finn with "severe anxiety disorder." As a result, Dr. Contreras prescribed Xanax "[i]n order to keep him functional."

16) ALCOHOL - ABSTAIN FROM USE: Did the Optometrist abstain completely from the use of alcoholic beverages?

Yes. Dr. Finn abstained from alcoholic beverages as indicated by his biological fluid testing.

17) BIOLOGICAL FLUID TESTING: Did the Optometrist "immediately submit to biological fluid testing"?

No. The Board did participate in Biological Fluid Testing until July of 2010 when the Department of Consumer Affairs signed a contract with Phamatech. Dr. Finn began participating in the Biological Fluid Testing in August of 2010.

Dr. Finn has repeatedly tested positive for Alprazolam and Benzodiazepines. However, Phamatech has confirmed that Dr. Finn's prescription for Xanax has caused these positive results. Dr. Finn has not tested positive for any other substance.

18) COMMUNITY SERVICES - FREE SERVICES: Did the Optometrist submit a community service program within 60 days of the effective date of the Decision?

No. Sixty days from the effective date was September 15, 2008. Dr. Finn's file indicates the first mention of Dr. Finn providing community service was in April 2009.

Did the Optometrist "provide free non-optometric services [...] for at least fifteen hours a month for the first two years of probation"?

No. Dr. Finn met the fifteen hour requirement in May 2009, but did not meet it again until November 2009. Out of the first twenty four months of probation, Dr. Finn met the 15 hour requirement for nine months. However, since November of 2009, Dr. Finn continues to provide sixteen hours of community service through the Lions Club International. In total, the Board has received documentation for 18 months of providing 15+ hours of community service.

19) COMPLETE OPTOMETRY COURSES: Did the Optometrist enroll in continuing education classes "within 90 days of the effective date of this decision"?

No. Ninety days after the effective date was October 15, 2008. Dr. Finn's file indicates the first continuing education course submitted was for January 10, 2009.

Did the Optometrist take "40 hours of continuing education courses per year for each year of probation?

No. During the first year of probation, Dr. Finn only completed 22 hours of continuing education towards this condition. During the second year, however, Dr. Finn completed 42 hours. Dr. Finn is now in his third year of probation and has supplied documentation for 24 hours of continuing education. Dr. Finn has until July 16, 2011 to complete the remaining hours.

20) DRUG, ALCOHOL, OR OTHER CHEMICAL ABUSE COUNSELING AND TREATMENT: Did the Optometrist participate in counseling and treatment for drug, alcohol or other chemical abuse?

Yes. Dr. Finn completed a Drug Diversion Program through Alternative Action Programs (AAP) from August 18, 2005 though November 22, 2005. The previous probation monitor deemed this program as fulfilling this condition.

(There were two Conditions #20 in this Decision)

20) SUPERVISED ENVIRONMENT: Did the Optometrist submit names and qualifications of proposed supervisors within 60 days of the effective date of this decision?

No. Sixty days after the effective date was September 15, 2008. Dr. Finn did not submit a name for his monitor until October of 2009. A monitoring agreement was signed by Dr. Frank Giardino, O.D. on October 19, 2009.

Did the Optometrist receive Board approval of supervisor prior to practicing optometry?

Dr. Finn's file indicates that he was practicing optometry, prior to October 2009, without approval of a supervisor. However, prior to October 2009, there was no record of the Board ever notifying Dr. Finn that he was not in compliance with this condition or requests for supervisor information.

Further, as previously stated, Dr. Finn worked at Costco and for Dr. Lynn Parrish without notifying the Board prior to practicing optometry.

Did the approved supervisor submit quarterly reports throughout Dr. Finn's probation?

No. Since Dr. Giardino became Dr. Finn's monitor in October of 2009, the Board has received only four quarterly reports. The last quarterly report was submitted on November 5, 2010. In a telephone conversation and email dated June 10, 2011, Dr. Giardino stated that he made site visits on February 10, 2011 and May 26, 2011. Dr. Giardino further stated he would provide reports to the Board shortly.

21) LICENSE SURRENDER: Did the Optometrist surrender his license at any time during probation?

No. Dr. Finn maintained a valid license throughout the entire term of probation.

Signature of Probation Monitor

LAW OFFICES OF

GOULD & HAHN

ALAN J. GOULD

ALSO MEMBER OF
NEW YORK AND D.C. BAR

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THOMAS E. LOMBARD OF COUNSEL LOS ANGELES, CALIFORNIA

11/12/10 03

November 10, 2010

Ms. Mona Maggio, Executive Officer Board of Optometry 2420 Del Paso Road, Suite 255 Sacramento, CA 95834

Re:

Petition for Early Termination of Probation

Casey Jon Finn, OD

Request for placement on the January 2011 agenda

Dear Ms. Maggio:

My office represents Casey Finn, OD whose optometry license was placed on probation on July 17, 2008 pursuant to a stipulated settlement and disciplinary order. Mr. Finn has been in compliance with all of the conditions of probation as documented by the Board's probation monitor assigned to Mr. Finn's case, Jessica Sieferman.¹

Mr. Finn's license was placed on probation as the result of a misdemeanor conviction on August 10, 2005 to presenting false Medi-Cal claims. As the evidence in mitigation showed when presented to the Board prior to settling the case, Mr. Finn answered an ad for employment in the Los Angeles Times for an Optometrist one day a week at a clinic in Glendale, California. Mr. Finn accepted the position and performed general optometric procedures at the clinic. He was a salaried employee who received a fixed paycheck every two weeks.

One day he arrived at the clinic to find it surrounded by government agents. The office was raided and he was taken aside by one of the agents and told that major Medi-Cal fraud had been taking place at the clinic and that he was implicated because billing was going out under his name. Mr. Finn eventually learned that the clinic had been under surveillance for *a year* prior to his employment, but because he had signed blank Medi-Cal forms at the request of his employer to facilitate what he believed were legitimate claims for service, his employer had subsequently used these forms to perpetrate fraud.

Mr. Finn, as a licensee, realized he was responsible for the accuracy of billings submitted in his name, and agreed to plead to the charge. Mr. Finn offered to help prosecute the owners of the clinic who had actually created the fraudulent system. Because he had no prior knowledge of the fraud and had assisted the prosecutors in convicting those responsible, the charges against him were reduced to a misdemeanor. Despite this sympathetic action by the DA's office, Petitioner was devastated by his responsibility for such a professionally and personally destructive event.

¹ November 3, 2010 Letter to this office from Jessica Sieferman

Mr. Finn completed all of the terms of his conviction and on December 12, 2007 his conviction was expunged.² However, his record of conviction and the financial burdens imposed on him in payment of restitution had continuing corrosive effects on his professional and personal life. After his arrest and during his prosecution, Mr. Finn found himself becoming depressed, anxious, and overwhelmed. In September 2004 his father-in-law, who had been a close confidant and mainstay of support for Mr. Finn during this difficult period, passed away. Mr. Finn found himself continuing to isolate himself from his family and, unable to handle his feelings of shame, fear, and despair, began using alcohol in an effort to cope with his rising anxiety. By December 2004, his wife and daughter left him.

In January 2005, depressed, anxious, and separated from his family, he accepted a controlled substance from an acquaintance who promised that the drug would offer immediate relief from his feelings of depression and anxiety. Mr. Finn, unsophisticated and unknowledgeable in the use of illegal drugs, took the drug and within several hours began experiencing symptoms similar to having a heart attack. Luckily, he had the presence of mind to call 911, was candid with the healthcare providers, and was immediately transported to the hospital were he received care.

Because he admitted to ingesting an illegal substance during his 911 call, after receiving medical care he was transported to jail. Finding himself locked up in jail, Mr. Finn finally "hit bottom" and admitted how he needed to change his life. On that day, Mr. Finn vowed that he would do whatever it took to change his life, to never repeat the choices and actions that had brought him to jail. From that day forward, his entire focus has been on achieving sobriety, regaining his personal and professional reputation, and reuniting with his family.

As a first time offender, Mr. Finn was given a diverted sentence for this incident. Upon completion of the Diversion Program, the charges against him were dismissed. As part of his Diversion Program, Mr. Finn entered into group therapy, drug testing, and began attending AA meetings. After completing the Court-ordered Diversion Program, Mr. Finn has continued in his recovery and relapse prevention by attending 12-step meetings. He also has sought out effective treatment for depression and anxiety with his personal physician and has developed relaxation and coping strategies that do not involve the use of mind-altering medications. Most importantly, he has learned the dangers of using alcohol or illegal drugs as a means of coping and will never use any illegal drug again. As a result of his commitment to having a life dedicated to health and recovery, Mr. Finn now has 5 years of sobriety and he and his wife and daughter happily have been re-united for three years.

On June 22, 2007 the Board issued an Accusation against Mr. Finn alleging his conviction and arrest for self-administering a controlled substance. In response to the allegations of unprofessional conduct, Mr. Finn provided the Board with documentation of mitigation and rehabilitation. After a review of those materials, the Board agreed to settle the Accusation with a Stipulated Settlement and Disciplinary Order revoking his license, staying the revocation, suspending him for a period of ten days, and placing him on probation for a period of five years.

² December 14, 2007 letter from John K. Rounds confirming the December 12, 2007 Order of Expungement withdrawing Mr. Finn's plea and dismissing the charge.

The Decision became effective on June 17, 2008. On October 20, 2008, the Board issued its Conditions of Probation Supplement stating the length of the probationary term as 3 years.

After having served approximately one half of the probationary term, Mr. Finn petitions for early termination of probation based on the following grounds:

1. Petitioner has demonstrated rehabilitation.

Petitioner has demonstrated to the Board that he has achieved and continues to maintain successful rehabilitation of the lifestyle and conduct that led to his conviction and arrest. He has sustained a commitment to living an alcohol and drug free life for 5 years and continues to attend the Spiritual 12-Step Program at St. Philip the Apostle Church in Bakersfield as part of his relapse prevention and recovery program. He has documented his sobriety by complying with conditions 16 and 17 of the stipulation and consistently passing the biological fluid tests

2. <u>Petitioner has demonstrated profound changes in his manner of living since his conviction</u> and arrest.

Petitioner made it his mission to do whatever was necessary to reconcile with his wife and daughter. He has created a strong support group to help him sustain his positive focus. This group is made up of the attendees of the 12-step group, family, friends, and his physician, who together help him find healthy decisions in times of stress and difficulty.³

3. Petitioner has complied with all of the Board's conditions of probation.

The letter from the Board Monitor Sieferman confirms that Petitioner is in compliance with the Board's conditions of probation.

4. Petitioner is experiencing significant hardship as a result of the probation.

The fact that Petitioner is on probation has led to the loss of his employment and ability to support his family. Because Petitioner is on probation, he is denied credentialing by most of the insurance companies. This has led to the termination of his employment as his employer was unable to keep an optometrist on payroll who is denied credentialing by insurance companies. Petitioner's loss of his job for no other reason than his inability to be credential has created a severe hardship for not only him, but for his wife and daughter as well.

Petitioner's professional competence and skill as an optometrist have never been the focus of the Board's enforcement. He has never been the subject of a patient or Board complaint regarding his quality of care. Once Petitioner has demonstrated his present attention to billing issues and commitment to living a drug and alcohol free life, continuing the probationary restriction on his license does not serve to protect the public. Throughout the past years, Petitioner has demonstrated his ability to provide above average care to his patients.⁴

³ See letters of recommendation from Dr. Victor Contreras, Thomas G. O'Leary, and Anna Banuelo-Finn.

⁴ See October 29, 2010 letter from Frank Giardina, MS, OD, FAAO

5. Petitioner's conduct since the original enforcement events warrant support by the Board.

Petitioner acknowledges that he made serious mistakes in judgment that led to his conviction and arrest in 2005. He naively permitted a new employer to submit billing to Medi-Cal without him personally reviewing the claims to assure himself that the bills were accurate. Petitioner had never been in a situation in which he had a dishonest employer and simply did not take the necessary precautions to safeguard the legitimacy and accuracy of claims submitted in his name.

Petitioner also admits that during a period in which he was suffering from severe depression and anxiety, his judgment was so impaired as to permit him to take an illegal substance with no knowledge as to its physical effect and no regard for the consequences that taking it would lead to. This was the lowest period of Petitioner's life and he has effectively used the insight and understanding he has gained from that painful experience to completely turn his life around. As a result of the commitment to sobriety he forged in those early years, Petitioner has created a new life rooted in an understanding of health and personal responsibility.

6. Petitioner has satisfied the Board's standards for reduction of penalty

A. The original violations for which action was taken against the petitioner's license.

The original violation for which the enforcement action against Petitioner was taken involved the use of Petitioner's license by an unscrupulous employer to fraudulently bill Medi-Cal. Petitioner provided documentation during the resolution of the Accusation that he had no knowledge that the fraud was being committed until the clinic was raided by government agents. Petitioner fully cooperated in the investigation and assisted the agents in prosecuting the actual perpetrators of the fraud. Petitioner is no longer naïve regarding such potential abuses by an employer of his license and fully understands his affirmative responsibility in ensuring that all claims submitted for services are reviewed by him and accurate. It has been nearly seven years since the violation occurred. During that time Petitioner successfully completed all of the court-ordered conditions of his sentence and his conviction has been dismissed. Petitioner has been practicing as an optometrist without complaint or incident since the violation occurred.

The second violation occurred in January of 2005 when Petitioner accepted an illegal substance offered by an acquaintance to help alleviate the severe effects of depression and anxiety. Petitioner used this illegal substance only once with disastrous physical effects. He has since committed himself to living an alcohol and drug free lifestyle. Petitioner has no history of addition. He attends meetings of a 12-step recovery group, however, as one element of his personal rehabilitation program. Petitioner has at all times been completely candid with the Board regarding this incident and has demonstrated his commitment to abstain from using all non-prescription substances, including alcohol, for the past five years, through Court-ordered and then Board-ordered fluid testing.

B. Prior actions by the Board, any state, local or federal agency or court; state of compliance.

Petitioner has provided the Board with documentation of his compliance with all Board and Court probationary conditions including verification that the charges concerning both the Medi-Cal conviction and his use of an illegal substance have been dismissed. Petitioner is no longer the subject of any Court conditions.

Petitioner has no history with either the criminal justice system or the Board other than what is the subject of this action.

C.&D.&E. Petitioner's documented rehabilitative efforts, attitude toward his commission of the original violations, assessment of corrective efforts.

Petitioner, as described in his personal statement, is both extremely remorseful and extremely motivated to rehabilitate himself. He timely completed all of the conditions of both his Court and Board probations and has voluntarily continued to perform community service and attend meetings based upon the twelve-step approach. He has recommitted himself to his church, reunited with his family, and dedicated himself to his profession. Petitioner has used all of the tools, understanding, and self-awareness gained through his participation in the Court Diversion Program to rebuild his life based upon the positive structures of his church and the principles for living defined in the 12-steps of recovery. He continues to provide service to his community through his participation in the Lion's Club and is an active and committed father to his nine-year-old daughter. He has appropriately addressed his issues of depression and anxiety through treatment with his family physician and until recently, was a valued employee of First Sight Vision Services.

Conclusion

Petitioner brings this petition because he is not able to work in a clinical setting as an employee of a reputable optometry practice because of the restrictions on his license. Petitioner has a reputation for honesty and competence as an optometrist, but is unable to work for employers who accept most insurance. Petitioner's probationary status prohibits him for entering into participation agreements with insurers and, therefore, severely limits the type of clients he can see. Although he is valued for his skill with clients and competence as an optometrist, his inability to see clients with insurance diminishes his ability to be employed.

Petitioner cannot undo the decisions that he made in 2003 and 2005 that resulted in the original Board discipline. He can and does accept full responsibility for his actions during that period. At the same time, he is a professional who eagerly took full advantage of all of the rehabilitation resources available to him to reestablish himself as a respected professional and responsible, loving family man. Insisting that Petitioner complete the remaining years of his probationary term will continue to keep him unemployed or underemployed due to his ineligibility to be credentialed by most insurers.

Petitioner's conduct since his arrest in 2005 and the Board action in 2008 demonstrates both his commitment to his rehabilitation and his ability to practice optometry at the highest level. Given that Petitioner satisfied the criminal sanctions placed on him and all of the probationary conditions of the Stipulated Settlement and Disciplinary Order, the Board's responsibility now is

to determine whether or not he is safe to practice without probations restrictions. His record demonstrates that the answer to this question is "yes

Respectfully submitted on behalf of Petitioner Casey Finn on November 10, 2010 by

Gould & Hahn

Robert Hahn

Board of Optometry

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170/(866) 585-2666 www.optometry.ca.gov

PETITION FOR REDUCTION OF PENALTY OR EARLY TERMINATION OF PROBATION

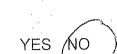
No petition for reduction of penalty or early termination of probation will be entertained until one year after the effective date of the Board's disciplinary action. The decision of the petition will be made by the full Board and in accordance with the attached standards for reinstatement or reduction of penalty. Early release from probation or a modification of the terms of probation will be provided only in exceptional circumstances, such as when the Board determines that the penalty or probationary terms imposed have been excessive, considering both the violation of law charged and the supporting evidence, or when there is substantive evidence that there is no more need for the degree of probationary supervision as set forth in the original terms and conditions. As a rule, no reduction of penalty or early termination of probation will be granted unless the probationer has at all times been in compliance with the terms of probation.

PLEASE TYPE OR PRINT LEGIBL	Υ .	•	
1. NAME (FIRST)	(MIDDLE)	(LAST)	CERTIFICATE OF
CASEY	JON	FINN	REGISTRATION NO.
2. ADDRESS (NUMBER)	(STREET)		DATE OF BIRTH
314 Lewisham	ST.		3/29/57
(CITY) (STATE)	(ZIP CODE)		TELEPHONE
	CA - 93311		(805-824-5958
3. PHYSICAL DESCRIPTION		(WEIGHT) (EYE	COLOR) (HAIR COLOR)
		184 Gr	n BRN
4. EDUCATION: NAME(S) OF SC	CHOOL(S) OR COLLEGE	E(S) OF OPTOMETRY AT	TENDED
NAME OF SCHOOL 3 4			
Pacific Univ	ersity Co	Hege of	Ophometrey
ADDRESS (NUMBER)	(STREET)		
(CITY) (STATE)	(ZIP CODE)		
Forest Grow	e, Orea	000	
5. ARE YOU CURRENTLY LICEN	ISED IN ANY OTHER-S	TATE? YES	(NO)
STATE LICENSE NO.	ISSUE DATE	EXPIRATION DATE	LICENSE STATUS
		·. · .	
6. List locations, dates, and types of	of practice for 5 years price	or to discipline of your Cal	fornia license.
LOCATION	DATE FROM	DATE TO	TYPE OF PRACTICE
1/pntyra, CA	1999	2008	Self employed
Glendale CA	2002	2003	Clinic
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7.	Are you or have you ever b addicted to the use of narcotic alcohol?	YES NO
 8.	Are you or have you ever suffered from a contagious disease?	YES (NO)
9.	Are you or have you ever been under observation or treatment for mental disorders, alcoholism or narcotic addiction?	YES NO
10	Have you ever been arrested, convicted or pled no contest to a violation of any law of a foreign country, the United States, any state, or a local ordinance? you must include all convictions, including those that have been set aside under Penal Code Section 1203.4 (which includes	VEONO

11. Are you now on probation or parole for any criminal or administrative violations in this state or any other state? (Attach certified copies of all disciplinary or court documents)



12. Have you ever had disciplinary action taken against your optometric license in this state or any other state?



IF YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, YOU MUST ATTACHMENT A STATEMENT OF EXPLANATION GIVING FULL DETAILS.

ON A SEPARATE SHEET OF PAPER PROVIDE THE FOLLOWING INFORMATION

- 13. List the date of disciplinary action taken against your license and explain fully the cause of the disciplinary action.
- 14. Explain fully why you feel your license should be restored, or the disciplinary penalty reduced.
- . 15. Describe in detail your activities and occupation since the date of the disciplinary action; include dates, employers and locations.
- Describe any rehabilitative or corrective measures you have taken since your license was disciplined to support your petition.
- 17. List all post-graduate or refresher courses, with dates, location and type of course, you have taken since your license was disciplined.
- 18. List all optometric literature you have studied during the last year.

diversion programs)

- 19. List all continuing education courses you have completed since your license was disciplined.
- 20. List names, addresses and telephone numbers of persons submitting letters of recommendation accompanying this petition.

I declare under penalty of perjury under the laws of the State of California that the answers and information given by me in completing this petition, and any attachments, are true and I understand and agree that any misstatements of material facts will be cause for the rejection of this petition.

Date	ı	1	. /	,	1	10	Signature		6 >	>
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All items of information requested in this petition are mandatory. Failure to provide any of the requested information will result in the petition being rejected as incomplete. The information will be used to determine qualifications for reinstatement, reduction of penalty or early termination of probation. The person responsible for information maintenance is the Executive Officer of the Board of Optometry at 2420 Del Paso Road, Suite 255, Sacramento, California, 95834. This information may be transferred to another governmental agency such as a law enforcement agency, if necessary to perform its duties. Each individual has the right to review the files or records maintained on them by our agency, unless the records are identified confidential information and exempted by Section 1798.3 of the Civil Code.

14) I have complied with the conditions of my probation during the past year, which are not limited to but included fifteen hours per month community service, quarterly reports to my probation monitor, supervision by an optometrist who also submits quarterly reports, payment of the fine \$3,600. A two week suspension, and near or more than twenty random fluid testing. Beyond all of these, I have become a new and better person. I can proudly and honestly say I am a different man. I have looked inward and discovered who I really am and found my purpose in life. I believe in the power of faith and my devotion to God and dedication to my family. Through these I have transformed and while shameful of my past wrong doing I am living a healthy life and looking forward with ambition and pride to continue life's journey. I have endured this scenario that has lasted almost eight years. Not only have I learned life's lessons, I am living them and am excited about the future and what it will bring.

15) When disciplinary action took place, I was self employed at 3001 Ming Ave. Bakersfield, Ca. Then in July 2009 a better opportunity presented itself and I was a hired employee for First Sight Vision Inc. at 8400 Rosedale, Bakersfield, Ca. After being employed for one year, I was laid off. The restrictions on my license prevented credentialing by many insurance companies as a provider resulting in loss revenue for the company. I am currently self employed part time at North Chester Optometry 2022 Suite B, Bakersfield, Ca. I am seeking additional work to supplement my income.

I have been complying with the conditions of probation. I spend fifteen hours a month volunteering for the Lion's Club. I retrieve used eye glasses from different locations and sort them for the less fortunate. I am busy with continuing education courses, taking in addition to my fifty hours for my license, forty extra hours this year. Also, the activities from number 16 below.

Since the date of my disciplinary actions my activities have focused on family. Three years ago we reunited and have been living back together. I have been blessed with a wonderful, caring wife who has had a tremendous impact on the positive changes in my life. My nine year old daughter is a gift from heaven, she is so special and the center of our lives.

16) I currently attend weekly meetings at a spiritual twelve step program through my church. I attend church weekly and have read numerous books and literature for personal growth both spiritually and emotionally.

17 & 18) I completed an ethics class directed by Dr. Berman at SCCO. It involved a one on one meeting with Dr. Carnevali for over three hours. We discussed the required reading:

- What is Ethics Anyway? Josephine Institute of Ethics
- Ethics a Professional Challenge. Richard Hopping, O.D.
- Resolving Ethical Dilemmas A Guide for Clinicians. Bernard Lo
- Ethical Theories. Wikipedia

I then submitted three essays in writing based on three scenarios determined by Dr. Berman. The course was successfully completed and all materials forwarded to the Board by Dr. Berman.

19 & 20) Enclosed.

At the end of 2002, I was in need of more income to support my family. My wife was a stay at home mom who took care of our young daughter. I began looking for a part time position and answered an ad in the Los Angeles Times for an Optometrist one day a week at a clinic in Glendale, California. After an interview by the clinic manager, I was offered the job. While the clinic was over 60 miles from my home and with traffic, a two hour commute each way, I accepted the position.

One day a week I performed general optometric procedures at the clinic. The patient flow was mainly of Armenian and Russian ethnicity and during the exams the clinic manager served as interpreter. I was a salaried employee receiving a paycheck every two weeks, with taxes taken out etc.

The clinic applied for use of my medical provider number for billing purposes. All billing was done by the clinic. Personally, I have never billed Medi-Cal myself and honestly don't know how.

One day I arrived at the clinic and it was surrounded by government agents. They had arrested several people including the clinic manager. The office was raided and I was taken aside and told by an agent from the Department of Justice that major Medi-Cal fraud had been taking place at the clinic. I was in complete shock. Truthfully answering his questions, I denied all and any knowledge of any fraudulent activities occurring. I told him that I was simply a one day a week employee performing Optometric procedures and the clinical manager did all of the billing, something I had no part in. The agent gave me his card, told me to get an attorney and to call him. After obtaining legal counsel an interview was arranged.

To my utter surprise and disbelief, my attorney told me I was implicated in the Medi-Cal fraud scheme. I was dumbfounded and shocked. Again, all I did was provide optometric care one day a week at the clinic, nothing else.

It was during the interview that I was told that the clinic had been under surveillance by the Department of Justice even prior to my employment. In my own ignorance without knowledge of what was occurring, I signed blank Medi-Cal billing forms. I was told by the manager that this was basic procedure to have forms run through the computer. I believed the clinic was legitimate and trusted my employer. Unknowingly to me, they were using those blank forms to bill patients I had never seen.

During the interview with the D.O.J., I agreed to help in any way I could to help prosecute those involved. To my astonishment, I was going to be convicted of felony Medi-Cal fraud. I could not believe what was happening. My inexperienced attorney recommended I sign a plea bargain and reduce the charges to a misdemeanor. I was to pay back all earnings in restitution (\$25,000), court fees and 3 years probation. During which I could not bill any Medi-Cal/ Medicare patients.

This nightmare had major affects not only on my professional life, but my personal life as well. I felt unjustly accused and fell into a period of mental disarray. I became depressed, anxious, completely over whelmed by the whole situation. In September 2004, my beloved father-in-law died. I had been able to confide and trust in this man all the troubles I was enduring. Feeling even more desperate, I withdrew and the emotional overload began to affect my choices. Shamefully, I began to self medicate with alcohol. I fell into a deeper depression and suffered extreme anxiety to the point that my wife and daughter left me in December 2004.

In January 2005 I was in the midst of my struggle. I was depressed, anxious, and separated from my family. I accepted a controlled substance from an acquaintance who promised instant relief from my pain. I made a tragic choice and ingested that controlled substance. Within several hours my heart was racing and I became extremely ill, I felt as if I was going to have a heart attack. I called 911 and told

them what had occurred. An ambulance arrived with the police and I was taken to the hospital and subsequently to jail.

I believe that was my rock bottom. I physically felt like I was going to die and never have the chance to make amends with my family or rebuild my career. Here I was, an educated man with all the blessings and opportunities anyone could ever hope for, and I was in a holding cell over night with murderers, thieves, and rapists. The only person to blame was myself. On that day, I vowed never to make such catastrophic choices again and certainly never take my family, my profession, or my life for granted again. I realized how quickly it could all disappear.

Fortunately, as a first time offender, I went thru the diversion program where counseling and random drug testing occurred. I went to A.A. meetings and followed the program diligently. I learned sharing and discussing my feelings eased my depression and anxiety. Upon completion of the diversion program, the charges were dismissed. Throughout the years I have found it important to continue with various twelve step programs which I currently attend on my own volition. I sought the help of my doctor to treat my anxiety, and I also developed better coping strategies for life's challenges. Most importantly, I have not used nor desired any illegal drug since, and I can without a doubt say that I never will. I am extremely proud to say that I have been sober for over five years.

I have kept that vow that I made to myself on that day in jail. I have not made one catastrophic choice and I do not take my profession, my family or my life for granted. I am grateful to have the chance to rebuild my career. I reconciled with my wife three years ago and I get to watch my nine year old daughter grow right in front of my eyes. And I get to live a healthy life. No alcohol and certainly no drugs.

I accept full responsibility for what I did and am remorseful beyond my ability to express myself. I am embarrassed for what I have done and the effects on everyone involved. I shamed myself, my family and my profession. My choices were wrong, no excuses, and I deeply apologize to my family, friends and to the Board of Optometry.

In conclusion, I plea with the Board for compassion of removal of my probationary status. Due to my restricted license, I am denied credentialing by most of the insurance companies as a provider. This has led to termination of employment and the inability to provide quality optometric care to all those in need. I have been unable to recover financially from acquiring such significant debt. I have had to pay restitution fees, legal fees, accounting fees, IRS fees, the list goes on. I feel I have paid my debt to society and most importantly become a better man, father, husband and Optometrist. Thank you for your consideration.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed in Bakersfield, California on October 29, 2010 by Casey J. Finn.

Thank you,

Casey Finn, OD

ATTACHMENTS TO PETITION FOR EARLY TERMINATION OF PROBATION CASEY JON FINN, OD

STIPULATED SETTLEMENT AND DISCIPLINARY ORDER

CONDITIONS OF PROBATION SUPPLEMENT

VERIFICATION OF COMPLIANCE WITH PROBATION & ATTACHMENT 3

CONTINUING EDUCATION CERTIFICATES

COMPLETION OF DIVERSION AND COMPLIANCE DOCUMENT

ATTACHMENT 4

MINUTE ORDER EXPUNGING CONVICTION

ATTACHMENT 5

LETTERS OF RECOMMENDATION

Frank Giardina, MS, OD, FAAO 2220 S. Bradley Road Santa Maria, CA 93455 (805) 925-4794

Tom O'Leary, Facilitator, Spiritual 12-Step Program St. Philip the Apostle Church 7100 Stockdale Highway Bakersfield, CA 93309-1399 (661) 300-0882

Victor D. Contreras, MD 126 N. Tenth Street Santa Paula, CA 93060 (805) 525-4446

Walter Jean Truax, Lion's Club 3510 Squire Lane Bakersfield, California 93309 (661) 831-2297

Ana Banuelos-Finn 314 Lewisham Street Bakersfield, CA 93311 (805) 824-5958

Richard Banuelos 6645 Thille Street 93003 Ventura, CA (805) 415-3427

BEFORE THE BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:) Case No. CC 2005-104
CASEY JON FINN, O.D. 3295 E. Main Street Ventura, CA 93003)))
Optometry License No. 8638)))
Respondent.	

DECISION

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

This Decision shall become effective July 17, 2008.

It is so ORDERED June 17, 2008.

LEE A. GOLDSTEIN, O.D., MPA

PRESIDENT

BOARD OF OPTOMETRY

1	EDMUND G. BROWN JR., Attorney General	
2	of the State of California JENNIFER S. CADY RECEIVED	
. 3	Supervising Deputy Attorney General KIMBERLEE D. KING, State Bar No. 141813 JAN 7 7 2008	
4	Deputy Attorney General California Department of Justice Office of Administrative to purpose.	
5_	300 So. Spring Street, Suite 1702 Los-Angeles, CA 90013	
6	Telephone: (213) 897-2581 Facsimile: (213) 897-2804	
7	Attorneys for Complainant	
. 8	BEFORE THE	
9	BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS	
10	STATE OF CALIFORNIA	
11	In the Matter of the Accusation Against: Case No. CC 2005-104	
12	CASEY JON FINN 3295 F. Main Street STIPULATED SETTLEMENT AND	
13	3295 E. Main Street STIPULATED SETTLEMENT AND Ventura, CA 93003 DISCIPLINARY ORDER	
14		
-15	Optometry License No. 8638	
16	Respondent.	
17		
18	IT IS HEREBY STIPULATED AND AGREED by and between the parties to the	
19	above-entitled proceedings that the following matters are true:	
20	<u>PARTIES</u>	
21	1. Taryn Smith (Complainant) is the Executive Officer of the Board of	
22	Optometry. She brought this action solely in her official capacity and is represented in this	
23	matter by Edmund G. Brown Jr., Attorney General of the State of California, by Kimberlee D.	
24	King, Deputy Attorney General.	
25	2. Respondent Casey Jon Finn (Respondent) is represented in this proceeding	
26	by attorney John K. Rounds, whose address is Law Offices of John K. Rounds, Correspondence	
27	Box 985, Santa Paula, CA 93061.	
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On or about February 2, 1987, the Board of Optometry issued Optometry License No. 8638 to Casey Jon Finn (Respondent). The License was in full force and effect at all times relevant to the charges brought in Accusation No. CC 2005-104 and will expire on March 31, 2009, unless renewed. JURISDICTION Accusation No. CC 2005-104 was filed before the Board, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on March 20, 2007. Respondent timely filed his Notice of Defense contesting the Accusation. A copy of Accusation No. CC 2005-104 is attached as exhibit A and incorporated herein by reference. ADVISEMENT AND WAIVERS Respondent has carefully read, discussed with counsel, and fully 5. understands the charges and allegations in Accusation No. CC 2005-104. Respondent has also carefully read, discussed with counsel, and fully understands the effects of this Stipulated Settlement and Disciplinary Order. 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. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above. CULPABILITY Respondent admits the truth of each and every charge and allegation in

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Accusation No. CC 2005-104.

9. Respondent agrees that his Optometry License is subject to discipline and he agrees to be bound by the Board's imposition of discipline as set forth in the Disciplinary 2 Order below. 3 CONTINGENCY This stipulation shall be subject to approval by the Board of Optometry. 5. Respondent understands and agrees that counsel for Complainant and the enforcement staff of 6 the Board of Optometry may communicate directly with the Board regarding this stipulation and 7. settlement, without notice to or participation by Respondent. 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 10 this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall 11 be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action 12 between the parties, and the Board shall not be disqualified from further action by having 13 considered this matter. 14 OTHER MATTERS 1.5 The parties understand and agree that facsimile copies of this Stipulated 16 Settlement and Disciplinary Order, including facsimile signatures thereto, shall have the same 17 force and effect as the originals. 18 DISCIPLINARY ORDER 19 In consideration of the foregoing admissions and stipulations, the parties agree 20 that the Board may, without further notice or formal proceeding, issue and enter the following 21. 22 Disciplinary Order: IT IS HEREBY ORDERED that Optometry License No. 8638 issued to 23 Respondent Casey Jon Finn (Respondent) is revoked. However, the revocation is stayed and 24 Respondent is placed on probation for five (5) years on the following terms and conditions. 25 Actual Suspension. Optometry License issued to Respondent Casey Jon 26 Finn is suspended for a period of ten (10) days. 27

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2. Obey All Laws. Respondent shall obey all federal, state and local laws, and all rules governing the practice of optometry in California.

- Cooperate with Probation Surveillance. Respondent shall comply with the board's probation surveillance program; including but not limited to allowing access to the probationer's optometric practice(s) and patient records upon request of the board or its agent.
- 4. Comply With The Board's Probation Program. Respondent shall fully comply with the conditions of the Probation Program established by the Board and cooperate with representatives of the Board in its monitoring and investigation of the Respondent's compliance with the Board's Probation Program.

Respondent shall inform the Board in writing within no more than 15 days of any address change and shall at all times maintain an active, current license status with the Board, including during any period of suspension.

Respondent shall, at his own expense, report in person to the Board's headquarters in Sacramento within three (3) months of the effective date of the Board's decision, and as the Board deems necessary if it is determined that Respondent may not be compliant with any of the terms or conditions of his probation.

- 5. Interviews. Respondent shall appear in person for interviews with a Board representative upon request at various intervals and with reasonable notice.
- 6. Submit Written Reports. Respondent, during the period of probation, shall submit or cause to be submitted such written reports/declarations and verification of actions under penalty of perjury, as required by the Board. These reports/declarations shall contain statements relative to Respondent's compliance with all the conditions of the Board's Probation Program. Respondent shall immediately execute all release of information forms as may be required by the Board or its representatives. Respondent shall provide a copy of this decision to the optometric regulatory agency in every state and territory in which he has an optometry license.
- 7. Function as an Optometrist. Respondent, during the period of probation, shall engage in the practice of optometry in California for a minimum of 24 hours per week for 6

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consecutive months or as determined by the Board. For purposes of compliance with the section, "engage in the practice of optometry" may include, when approved by the Board, volunteer work as an optometrist, or work in any non-direct patient care position that requires licensure as an optometrist. If Respondent has not complied with this condition during the probationary term, and the Respondent has presented sufficient documentation of his good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of the Respondent's probation period up to one year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation shall apply.

- shall obtain prior approval from the Board before commencing or continuing any employment, paid or voluntary, as an optometrist. Respondent shall cause to be submitted to the Board all performance evaluations and other employment related reports as an optometrist upon request of the Board. Respondent shall provide a copy of this decision to his employer and immediate supervisors prior to commencement of any optometric or other health care related employment. In addition to the above, Respondent shall notify the Board in writing within seventy-two (72) hours after he she obtains any optometric or other health care related employment. Respondent shall notify the Board in writing within seventy-two (72) hours after he is terminated or separated, regardless of cause, from any optometric, or other health care related employment with a full explanation of the circumstances surrounding the termination or separation.
- 9. Residency, Practice, or Outside of State. Any period of residency or practice as an optometrist outside of the State of California shall not apply toward a reduction of this probation time period. Respondents probation is tolled, any time he resides outside of California. Respondent must provide written notice to the Board within 15 days of any change of residency or practice outside California, and within 30 days prior to re-establishing residency or returning to practice in California. Respondent shall provide a list of all states and territories where he has ever been licensed as an optometrist. Respondent shall further provide information regarding the status of each license and any changes in such license status during the term of

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probation. Respondent shall inform the Board if he applies for or obtains a new optometry license during the term of probation. Within 30 days of the Board's Decision, Respondent shall provide a copy of the Board's Decision and Order to the Optometry Board of any other state where he is currently licensed or becomes licensed to practice optometry.

Cost Recovery. Respondent shall pay to the Board, costs associated with its investigation and enforcement pursuant to Business and Professions Code Section 125.3 in the amount of \$3600. Respondent shall be permitted to pay these costs in a payment plan approved by the Board, with payments to be completed no later than six months prior to the end of the probation term.

If Respondent has not complied with this condition during the probationary term, and Respondent has presented sufficient documentation of his or her good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of the Respondent's probation period up to one year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation will apply.

- Completion of Probation. Upon successful completion of probation, 12. Respondent's certificate will be fully restored.
- Violation of Probation. If Respondent violates probation in any respect, the board, after giving Respondent notice and opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an accusation or petition to revoke probation 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.
- 14. Drugs & Abstain From Use. Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the California Uniform Controlled Substances Act, and dangerous drugs as defined by Section 4211 of the Business and Professions Code or any drugs requiring a prescription.
- Drugs Exception for Personal Illness. Orders forbidding Respondent from personal use or possession of controlled substances or dangerous drugs do not apply to

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- 16. Alcohol Abstain From Use. Respondent shall abstain completely from the use of alcoholic beverages.
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first two (2) years of probation.

17. Biological Fluid Testing. Respondent shall immediately submit to biological fluid testing, at Respondent's cost, upon the request of the board or its designee.

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date of this decision, Respondent shall submit to the board for its prior approval a community service program in which Respondent shall provide free <u>non-optometric services</u> on a regular

Community Services - Free Services. Within 60 days of the effective

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basis to a community or charitable facility or agency for at least fifteen (15) hours a month for the

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19. Education Course. Within 90 days of the effective date of this decision, and on an annual basis thereafter, Respondent, at his own expense, shall enroll and successfully complete 40 hours of continuing education courses per year for each year of probation that are relevant to the practice of optometry. These course shall be in addition to the courses required for license renewal. At least one of the courses shall be on ethics. Respondent shall obtain prior

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approval from the Board before enrolling in the ethics course. The courses are to be completed no later than six months prior to the end of his probationary term. Respondent shall submit to the

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Board the original transcripts or certificates of completion for the above required courses. The

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Board shall return the original documents to the respondent after photocopying them for its

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records.

20. Drug, Alcohol, or Other Chemical Abuse Counseling and

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Treatment. Within 15 days of the effective date of this decision, Respondent shall submit the name, business address and business telephone number of three persons who are professionally

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qualified to provide counseling and treatment for drug, alcohol or other chemical abuse

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appropriate to the case. Thereafter the board through its staff shall select one of these persons to provide the necessary counseling and treatment. Within 30 days of written notification of this

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selection to the Respondent the Respondent shall, in consultation with this counselor and treating

- Supervised Environment. Within 60 days of the effective date of this decision, Respondent shall submit to the Board, for its prior approval, the name and qualifications of one or more proposed supervisors an a plan for each such supervisor by which Respondent's practice would be supervised. Respondent shall not practice until receiving notification of Board approval of Respondent's choice of a supervisor. The plan of supervision shall be general and not require the physical presence of the supervising optometrist during the time optometric procedures are performed, but does require an occasional random check of the work performed on the patient. Additionally, the supervisor shall have full and random access to all patient records of Respondent. Each proposed supervisor shall be a California licensed optometrist who shall submit written reports to the Board on a quarterly basis verifying that supervision has taken place as required and include an evaluation of Respondent's performance. It shall be Respondent's responsibility to assure that the required reports are filed in a timely manner. The supervisor shall be independent, with no prior business or professional relationship with Respondent and the supervisor shall not be in a familial relationship with or be an employee, (including independent contractor) partner or associate of Respondent. If the supervisor terminates or is otherwise no longer available, Respondent shall not practice until a new supervisor has been approved by the Board. All costs of the supervision shall be borne by the Respondent.
- License surrender During Respondent's term of probation, if he ceases practicing due to retirement or health reasons, or is otherwise unable to satisfy the conditions of probation, Respondent may surrender his license to the Board. The Board reserves the right to evaluate Respondent's request and to exercise its discretion whether or not to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances, without further hearing. Upon formal acceptance of the tendered license and wall certificate, Respondent

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will no longer be subject to the conditions of probation, except he may be subject to reimbursing the Board for its costs of investigation and prosecution upon a petition for reinstatement. ACCEPTANCE I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, John K. Rounds. I understand the stipulation and the effect it will have on my Optometry License. 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 Board of Optometry. CASEY JON FINN (Respondent) Respondent I have read and fully discussed with Respondent Casey Jon Finn the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content. Attorney for Respondent

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Board of Optometry, Department of Consumer Affairs.

DATED: MANUCUL H

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 DOJ Matter ID: LA2006601188

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EDMUND G. BROWN JR., Attorney General of the State of California

JENNIFER S. CADY Supervising Deputy Attorney General

KIMBERLEE D. KING Deputy Attorney General

Attorneys for Complainant

Exhibit A
Accusation No. CC 2005-104

	EDMUND G. BROWN JR., Attorney General
2	
. 3	Supervising Deputy Attorney General KIMBERLEE D. KING, State Bar No. 141813
4	Deputy Attorney General California Department of Justice
	300 So. Spring Street, Suite 1702
• 5	Los Angeles, CA 90013 Telephone: (213) 897-2581
6	Facsimile: (213) 897-2804
7	Attorneys for Complainant
. 8	BEFORE THE
9	BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA
10	
11	In the Matter of the Accusation Against: Case No. CC 2005-104
12	CASEY JON FINN ACCUSATION 3295 E. Main Street
13	Ventura, CA 93003
	Optometry License No. 8638
14	Respondent.
15	
16	Complainant alleges:
17	<u>PARTIES</u>
18	1. Taryn Smith (Complainant) brings this Accusation solely in her official capacity
.19	as the Executive Officer of the Board of Optometry (Board), Department of Consumer Affairs.
20	2. On or about February 2, 1987, the Board issued Optometry License No. 8638 to
21	Casey Jon Finn (Respondent). The Optometry License was in full force and effect at all times
22	relevant to the charges brought herein and will expire on March 31, 2007, unless renewed.
23	<u>JURISDICTION</u>
24	3. This Accusation is brought before the Board, under the authority of the following
25	laws. All section references are to the Business and Professions Code unless otherwise indicated.
26	4. Section 3090 of the Code states:
27	"Except as otherwise provided by law, the board may take action against all
28	persons guilty of violating this chapter or any of the regulations adopted by the board. The board

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shall enforce and administer this article as to licenseholders, and the board shall have all the powers granted in this chapter for these purposes, including, but not limited to, investigating complaints from the public, other licensees, health care facilities, other licensing agencies, or any other source suggesting that an optometrist may be guilty of violating this chapter or any of the regulations adopted by the board."

5. Section 3106 of the Code states:

"Knowingly making or signing any certificate or other document directly or indirectly related to the practice of optometry that falsely represents the existence or nonexistence of a state of facts constitutes unprofessional conduct."

6. Section 3110 of the Code states:

"The board may take action against any licensee who is charged with unprofessional conduct, and may deny an application for a license if the applicant has committed 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 or any of the rules and regulations adopted by the board pursuant to this chapter.

"(e) The commission of fraud, misrepresentation, or any act involving dishonesty or corruption, that is substantially related to the qualifications, functions, or duties of an optometrist.

"(k) Conviction of a felony or of any offense substantially related to the qualifications, functions, and duties of an optometrist, in which event the record of the conviction shall be conclusive evidence thereof.

Section 490 of the Code states:

"A board may suspend or revoke a license on the ground that the licensee has been convicted of a crime, if the crime is substantially related to the qualifications, functions, or duties

of the business or profession for which the license was issued. A conviction within the meaning of this section means a plea or verdict of guilty or a conviction following a plea of nolo 2 contendere. Any action which a board is permitted to take following the establishment of a 3 conviction may be taken when the time for appeal has elapsed, or the judgment of conviction has 4 been affirmed on appeal, or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code." 7 8

Section 810 of the Code states: 8.

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- "(a) It shall constitute unprofessional conduct and grounds for disciplinary action, including suspension or revocation of a license or certificate, for a health care professional to do any of the following in connection with his or her professional activities:
- "(1) Knowingly present or cause to be presented any false or fraudulent claim for the payment of a loss under a contract of insurance.
- "(2) Knowingly prepare, make, or subscribe any writing, with intent to present or use the same, or to allow it to be presented or used in support of any false or fraudulent claim.
- "(b) It shall constitute cause for revocation or suspension of a license or certificate for a health care professional to engage in any conduct prohibited under Section 1871.4 of the Insurance Code or Section 549 or 550 of the Penal Code.
- "(c) (1) It shall constitute cause for automatic suspension of a license or certificate issued pursuant to Chapter 4 (commencing with Section 1600), Chapter 5 (commencing with Section 2000), Chapter 6.6 (commencing with Section 2900), Chapter 7 (commencing with Section 3000), or Chapter 9 (commencing with Section 4000), or pursuant to the Chiropractic Act or the Osteopathic Act, if a licensee or certificate holder has been convicted of any felony involving fraud committed by the licensee or certificate holder in conjunction with providing benefits covered by worker's compensation insurance, or has been convicted of any felony involving Medi-Cal fraud committed by the licensee or certificate holder in conjunction with the Medi-Cal program, including the Denti-Cal element of the Medi-Cal program, pursuant to Chapter 7 (commencing with Section 14000), or Chapter 8 (commencing with Section 14200), of

Part 3 of Division 9 of the Welfare and Institutions Code. The board shall convene a disciplinary hearing to determine whether or not the license or certificate shall be suspended, revoked, or some other disposition shall be considered, including, but not limited to, revocation with the opportunity to petition for reinstatement, suspension, or other limitations on the license or certificate as the board deems appropriate." 5 California Code of Regulations, title 16, section 1517 states: 7

"For the purpose of denial, suspension, or revocation of the certificate of registration of an optometrist pursuant to Division 1.5 (commencing with Section 475) of the Code, a crime or act shall be considered to be substantially related to the qualifications, functions, and duties of an optometrist if to a substantial degree it evidences present or potential unfitness of an optometrist to perform the functions authorized by his/her certificate of registration in a manner consistent with the public health, safety, or welfare.

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

FIRST CAUSE FOR DISCIPLINE

(Conviction of a Substantially Related Crime)

- Respondent is subject to disciplinary action under section 3110, subdivision (k) 12. and 490, in conjunction with California Code of Regulations, title 16, section 1517, in that Respondent has been convicted of a crime substantially related to the qualifications, functions or duties of a licensed optometrist, as follows:
- On or about August 10, 2005, Respondent plead guilty to and was convicted by the Court for violating one count of Welfare and Institutions Code section 14107, a felony (presenting false Medi-Cal claims), in the Superior Court of California, County of Los Angeles, Central Judicial District, Case No. BA245393 entitled The People of the State of California v. Casey Finn.

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The circumstances surrounding the conviction are that about November, 2002 to March, 2003, Respondent presented false and fraudulent claims for furnishing professional services and merchandise to patients, under the Medi-Cal Act. SECOND CAUSE FOR DISCIPLINE (Fraud, Misrepresentation, or Acts Involving Dishonesty) Respondent is subject to disciplinary action under section 3110, subdivisions (a) 13. and (e), on the grounds of unprofessional conduct, in that from on or about November, 2002 to March, 2003, Respondent committed fraud, misrepresentation, or acts involving dishonesty by presenting false Medi-Cal claims, as more fully set forth above in paragraph 12. THIRD CAUSE FOR DISCIPLINE 10 (Knowingly Presenting False or Fraudulent Claims) 1.1 Respondent is subject to disciplinary action under section 3110, subdivision (a) 12 and 3106 of the Code, on the grounds of unprofessional conduct, for violating section 810, in that 13 from about November, 2002 to March, 2003, Respondent knowingly made, signed, and falsely 14 presented false Medi-Cal claims for professional services, as more fully set forth above in 15 paragraph 12. 16 /// 17 18 /// /// 19 ///: .20 /// 21 22 111 23 ./// 24 25 /// 26 /// 27 ///

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein 2 alleged, and that following the hearing, the Board issue a decision: Revoking or suspending Optometry License No. 8638, issued to Casey Jon 1. Finn. 5 Ordering Casey Jon Finn to pay the Board the reasonable costs of the 2. investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3. 8 Taking such other and further action as deemed necessary and proper. 9 10 DATED: 11 12 13 Executive Officer 14 Board of Optometry State of California 15 Complainant 16 17 18 19 .20 LA2006601188 60183418.wpd 21 jz (12/13/06) 22 23 24

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	n e e e e e e e e e e e e e e e e e e e
	EDMUND G. BROWN JR., Attorney General of the State of California
	2 JENNIFER S. CADY
	Supervising Deputy Attorney General KIMBERLEE D. KING, State Bar No. 141813
	Deputy Attorney General 4 California Department of Justice
	300 So. Spring Street, Suite 1702 Los Angeles, CA 90013
	Telephone: (213) 897-2581 6 Facsimile: (213) 897-2804
	7 Attorneys for Complainant
	8 BEFORE THE
	BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS
10	STATE OF CALIFORNIA
11	In the Matter of the First Amended Accusation Case No. CC 2005 104
12	1
13	3295 E. Main Street Ventura, CA 93003 FIRST AMENDED ACCUSATION
14	Optometry License No. 8638
15	Respondent.
16	
17	Complainant alleges:
18	<u>PARTIES</u>
19	1. Taryn Smith (Complainant) brings this First Amended Accusation solely in her
20	official capacity as the Executive Officer of the Board of Optometry (Board), Department of
21	Consumer Affairs.
22	2. On or about February 2, 1987, the Board issued Optometry License No. 8638 to
23	Casey Jon Finn (Respondent). The Optometry License was in full force and effect at all times
24]	relevant to the charges brought herein and will expire on March 31, 2009, unless renewed.
25	JURISDICTION
26	3. This Accusation is brought before the Board, under the authority of the following
27	laws. All section references are to the Business and Professions Code unless otherwise
28	indicated.

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4. Section 3090 of the Code states:

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"Except as otherwise provided by law, the board may take action against all persons guilty of violating this chapter or any of the regulations adopted by the board. The board shall enforce and administer this article as to licenseholders, and the board shall have all the powers granted in this chapter for these purposes, including, but not limited to, investigating complaints from the public, other licensees, health care facilities, other licensing agencies, or any other source suggesting that an optometrist may be guilty of violating this chapter or any of the regulations adopted by the board."

5. Section 3106 of the Code states:

"Knowingly making or signing any certificate or other document directly or indirectly related to the practice of optometry that falsely represents the existence or nonexistence of a state of facts constitutes unprofessional conduct."

6. Section 3110 of the Code states:

"The board may take action against any licensee who is charged with unprofessional conduct, and may deny an application for a license if the applicant has committed 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 or any of the rules and regulations adopted by the board pursuant to this chapter.
- "(e) The commission of fraud, misrepresentation, or any act involving dishonesty or corruption, that is substantially related to the qualifications, functions, or duties of an optometrist.
- "(k) Conviction of a felony or of any offense substantially related to the qualifications, functions, and duties of an optometrist, in which event the record of the conviction shall be conclusive evidence thereof.

"(1) Administering to himself or herself any controlled substance or using any of the dangerous drugs specified in Section 4022, or using alcoholic beverages to the extent, or in a manner, as to be dangerous or injurious to the person applying for a license or holding a license under this chapter, or to any other person, or to the public, or to the extent that the use impairs the ability of the person applying for or holding a license to conduct with safety to the public the practice authorized by the license, or the conviction of a misdemeanor or felony involving the use, consumption, or self administration of any of the substances referred to in this subdivision, or any combination thereof."

7. Section 490 of the Code states:

"A board may suspend or revoke a license on the ground that the licensee has been convicted of a crime, if the crime is substantially related to the qualifications, functions, or duties of the business or profession for which the license was issued. A conviction within the meaning of this section means a plea or verdict of guilty or a conviction following a plea of nolo contendere. Any action which a board is permitted to take following the establishment of a conviction may be taken when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal, or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code."

8. Section 810 of the Code states:

"(a) It shall constitute unprofessional conduct and grounds for disciplinary action, including suspension or revocation of a license or certificate, for a health care professional to do any of the following in connection with his or her professional activities:

- "(1) Knowingly present or cause to be presented any false or fraudulent claim for the payment of a loss under a contract of insurance.
- "(2) Knowingly prepare, make, or subscribe any writing, with intent to present or use the same, or to allow it to be presented or used in support of any false or fraudulent claim.

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"(b) It shall constitute cause for revocation or suspension of a license or certificate for a health care professional to engage in any conduct prohibited under Section 1871.4 of the Insurance Code or Section 549 or 550 of the Penal Code.

"(c) (1) It shall constitute cause for automatic suspension of a license or certificate issued pursuant to Chapter 4 (commencing with Section 1600), Chapter 5 (commencing with Section 2000), Chapter 6.6 (commencing with Section 2900), Chapter 7 (commencing with Section 3000), or Chapter 9 (commencing with Section 4000), or pursuant to the Chiropractic Act or the Osteopathic Act, if a licensee or certificate holder has been convicted of any felony involving fraud committed by the licensee or certificate holder in conjunction with providing benefits covered by worker's compensation insurance, or has been convicted of any felony involving Medi-Cal fraud committed by the licensee or certificate holder in conjunction with the Medi-Cal program, including the Denti-Cal element of the Medi-Cal program, pursuant to Chapter 7 (commencing with Section 14000), or Chapter 8 (commencing with Section 14200), of Part 3 of Division 9 of the Welfare and Institutions Code. The board shall convene a disciplinary hearing to determine whether or not the license or certificate shall be suspended, revoked, or some other disposition shall be considered, including, but not limited to, revocation with the opportunity to petition for reinstatement, suspension, or other limitations on the license or certificate as the board deems appropriate."

9. California Code of Regulations, title 16, section 1517 states:

"For the purpose of denial, suspension, or revocation of the certificate of registration of an optometrist pursuant to Division 1.5 (commencing with Section 475) of the Code, a crime or act shall be considered to be substantially related to the qualifications, functions, and duties of an optometrist if to a substantial degree it evidences present or potential unfitness of an optometrist to perform the functions authorized by his/her certificate of registration in a manner consistent with the public health, safety, or welfare.

(Knowingly Presenting False or Fraudulent Claims)

14. Respondent is subject to disciplinary action under section 3110, subdivision (a) and 3106 of the Code, on the grounds of unprofessional conduct, for violating section 810, in that from about November, 2002 to March, 2003, Respondent knowingly made, signed, and falsely presented false Medi-Cal claims for professional services, as more fully set forth above in paragraph 12.

FOURTH CAUSE OF ACTION

(Self-Administering a Controlled Substance)

15. Respondent is subject to disciplinary action under section 3110, subdivision (1), of the Business and Professions Code for violating Health and Safety Code section 11550, subdivision (a), in that Respondent, by his own admission, knowingly and willingly, ingested Methamphetamine, an illegal controlled substance. The circumstances are that on or about January 12, 2005, medical personnel and Bakersfield police officers were called to Howard's Mini Mart located in Bakersfield, California for a possible overdose of Methamphetamine. Respondent reported that he had called for medical aid due to a possible heart attack or panic attack. He displayed symptoms of Methamphetamine influence which included agitation, accelerated and repetitive speech, fixed pupils which reacted slowly to light and elevated blood pressure. Respondent admitted to the police and medical personnel that he used methamphetamine earlier that day.

PRAYER

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

- 1. Revoking or suspending Optometry License No. 8638, issued to Casey
- 2. Ordering Casey Jon Finn to pay the Board the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3.

///

Jon Finn.

	1	3. Taking such other and further action as deemed necessary and proper.
	2	DATED: 6/22/67
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	6	Executive Officer
	7.	TARYN SMITH Executive Officer Board of Optometry State of California Complainant
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CONDITIONS OF PROBATION SUPPLEMENT 10/20/08

ATTACHMENT 2



Board of Optometry 2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170/(866) 585-2666 www.optometry.ca.gov



CONDITIONS OF PROBATION SUPPLEMENT

NAME: Casey Jon Finn, O.D.

LICENSE NO. 8638

You must fully comply with all terms and conditions of your probation as stated in the Stipulated Settlement and Disciplinary Order. You must fully cooperate with your Probation Monitor or other Board representatives assigned to your case. Follow the instructions contained in this Supplement to guide you in complying with your probation requirements.

L PROBATION TERM STATISTICS

Decision/Stipulation No. : CC 2004-104
Beginning of Term : July 17, 2008

Length of Term : 3 Years

End of Term : July 17, 2011

First Quarterly Report Due : October 30, 2008

II. CONDITIONS OF PROBATION OBJECTIVES

SEVERABILITY:

 Each condition of probation is a separate condition and will be enforced as such, regardless of what happens to any other condition.

OBEY ALL LAWS:

- You must obey <u>all</u> federal, state, and local laws. If you violate any of these laws, you
 must report your violation to you Probation Monitor within 72 hours of the violation.
 Reportable violations include parking tickets, traffic or moving citations, arrests,
 convictions (even if dismissed by P.C. 1203.4), and violations of other probation
 orders.
- Report your violations by telephone first. If your Probation Monitor is not in the office at the time of your telephone call, leave a detailed message on the voice mailbox AND a return telephone number of contact person.
- If you receive a citation from a low enforcement officer, send a clear photocopy of the citation to your Probation Monitor.

 If you are arrested, booked, jailed, or convicted, obtain a copy of all related documents and submit them to your Probation Monitor as soon as possible.

CF COMPLY WITH PROBATION PROGRAM:

- Cooperate with your Probation Monitor or any Board representative in the monitoring of your probation.
- Read and follow all the directions on all documents and correspondence you receive from your Probation Monitor or other Board representative.
- Perform any tasks requested by your Probation Monitor or other Board representative by the due date shown on the documents, or as verbally directed.
- You must maintain an active and current optometrist license at all times during your probation.
- You must respond to all messages or contacts within 72 hours from your Probation Monitor or Board representative.
- You agree to pick up all certified mail that is sent to your address of record or post office box.
- Notify your Probation Monitor or other Board representative of any change in your address or telephone number as soon as the change occurs, but no later than 15 days from the change.
- You must allow access to your optometric practice and patient records upon request of the Board or its agent.

- F. REPORT IN PERSON:

- You must appear at the Board's Sacramento location to your initial probation interview, and may be required to appear at subsequent interviews as requested by the your Probation Monitor or other Board representative. You will receive written notice of such interviews approximately 14 21 days in advance of the interview date. Notice of such interviews will be sent to the address of record that you have registered with the Board and your Probation Monitor.
- Interview frequency can change and will be determined by the Probation Monitor.
- Rescheduling an interview is allowed at the discretion of your Probation Monitor. If
 you must request a change in your interview date or time, you may be asked to
 provide a written and/or verbal explanation for the request. Rescheduling will be
 granted if the Probation Monitor's schedule can accommodate the change.

C.F. SUBMIT WRITTEN REPORTS:

- You must read and follow the instructions included in all of the documents you receive from your Probation Monitor or Board representative.
- You must submit completed reports/declarations and verifications of action by the due date shown on such documents or as instructed.

- You must submit completed and signed Authorization for Release of Information forms to all parties involved in your probation process.
- You must submit your first quarterly report on October 30, 2008; your second on January 30, 2008; and every third month thereafter until your probationary term ends.
- You must submit with each quarterly report, a copy of complete patient records for 6 patient encounters. These are not to be of the same patient type, i.e. 3 patients under 40 years of age, 3 patients over 40 years of age with varying ranges of refractive and eye health characteristics.

FUNCTION AS A LICENSED OPTOMETRIST:

- You must possess an active, optometrist license when performing any functions of an optometrist.
- During the probation period, you must engage in the practice of optometry in California for a minimum of 24 hours per week for 6 consecutive months within each year of your probation.
- For purposes of compliance with the section "engage in the practice of optometry" may include, when approved by the Board, volunteer work as an optometrist, or work in any non-direct patient care position that requires licensure as an optometrist.
- If you have not complied with this condition and you present sufficient documentation of your good faith efforts to comply with this condition, and if no other conditions have been violated, the Board may grant an extension of your probation period up to one year without further hearing.

EMPLOYMENT REQUIREMENTS:

- You must obtain prior approval from the Board by submitting appropriate forms before commencing or continuing the practice of optometry.
- Upon request, you must provide any performance evaluations and other employment-related reports as an optometrist.
- If working as an employee, you must provide a copy of the Stipulated Settlement and Disciplinary Order to your employer and immediate supervisors prior to commencing to practice optometry.
- You must notify the Board in writing with seventy-two (72) hours after you obtain any
 optometric employment.
- You must notify the Board in writing within seventy-two (72) hours after you are terminated or separated, regardless of cause from any optometric employment with a full explanation of the circumstances surrounding the termination or separation.

RESIDENCY OR PRACTICE OUTSIDE OF STATE:

• You will only get credit for the time that you are residing and working in California. You must report any time that you are outside of California to your Probation Monitor.

- For travel periods of one week or greater, please provide written notification of your travel plans to your Probation Monitor as soon as you schedule them. This will avoid being scheduled for a probation interview at the same time.
- You may be required to make up the time that you are outside of California when your absence constitutes a change of residency. Generally, a period of time greater than 60 days is considered a change of residency.
- You must provide written notification to your Probation Monitor within 15 days of moving your residence or practice outside of California.
- You must provide written notification to your Probation Monitor 30 days prior to returning to practice or live in California.
- You must provide a list of all states and territories where you have ever been licensed as an optometrist.
- You must provide status of all other optometric licenses held and any change in status that may occur during your probation.



COST RECOVERY:

- You must reimburse the Board for actual costs incurred in the investigation and discipline of your license in the amount of \$3,600.00 within six months prior to the end of the probationary period.
- You must make your payments to the Board as instructed on the Cost Recovery Payment Plan form you sign.
- Notify your probation monitor if you anticipate a problem with making payments.



CF. COMPLETION OF PROBATION:

Upon successful completion of probation, your certificate will be fully restored.



C.F. VIOLATIONS:

- If you violate any of the conditions of your probation, the Board may revoke your license after giving you the opportunity to be heard.
- If you violate any law or your probation in any manner requiring the Board to request or to file an accusation or petition to revoke probation, your probation term will automatically extend until the matter is resolved.



DRUGS & ALCOHOL - ABSTAIN FROM USE

- You must totally abstain from possession and consumption by any route of all controlled substances, except when lawfully prescribed by a licensed physician or dentist as part of a documented medical treatment.
- You must have your prescribing dentist or physician send your Probation Monitor a letter describing any medication prescribed, why it is being

prescribed, dosage of medication and how long it will be needed. The letter must be sent within 14 days of the written prescription.

You must not use alcohol.



SUBMIT TO TESTS AND SAMPLES:

- You must, at your expense, participate in random biological fluid testing or a board approved drug-screening program.
- You must inform the Board of your current telephone number at all times.
- You must ensure that telephone messages may be left at that telephone number when you are not available.
- · You must ensure that reports are submitted directly to the Board, as directed.
- You must fully cooperate with the Board or its representatives, and shall submit to tests and samples as they may require.



COMMUNITY SERVICES:

Within sixty (60) days of the effective date of the decision, you must submit for prior approval, a community service program in which you shall provide free non-optometric services on a regular basis to a community or charitable facility or agency for at least fifteen (15) hours a month for the first twenty-four (24) months of probation.



COMPLETION OF EDUCATIONAL PROGRAM/COURSE(S):

- Within 90 days of the effective date of the decision, and on an annual basis thereafter during your probation period, you must submit for prior approval an education program or course which shall not be less than 40 hours per year, for each year of probation, and will include a Board approved ethics course. This program or course will be in addition to the Continuing Education requirements for re-licensure. You must receive approval from your Probation Monitor prior to enrollment in a course you select in fulfilling this condition. To obtain approval you must send to your Probation Monitor the following:
 - a) A course outline
 - b) A course catalogue
 - c) A course pamphlet or booklet
- If the course you submitted is acceptable, you will be notified of the approval by telephone.
- You must provide your Probation Monitor with the Original Course Completion Certificate or Transcript before you will be given credit for the course. The Board will return the original documents to you after photocopying them for our records.
- You will not be allowed to use home study or correspondence course to fulfill this
 requirement. Courses required under this condition will be related to the nature of
 your violation.

CF: DRUG, ALCOHOL OR OTHER CHEMICAL ABUSE COUNSELING AND (Initial) TREATMENT:

- You must within in 15 days of decision, submit the name and business address and telephone number of three persons professionally qualified to provide counseling and treatment for drug, alcohol or other chemical abuse.
- The probation monitor shall select one of these persons to provide the necessary counseling and treatment.
- Within 30 days of written notification of this selection, you must consult with the counselor and prepare and submit a counseling treatment program to the board for approval.
- All costs of the approved program will be your responsibility.
- You must successfully complete this counseling and treatment program as a condition of probation.



SUPERVISED ENVIRONMENT:

- You must within 60 days of the decision, submit to the board for prior approval, the name and qualifications of one or more proposed supervisors and a plan for each supervisor by which your practice will be supervised.
- You shall not practice until receiving notification of the Board's approval of your choice of supervisor.
- The plan of supervision shall be general and not require the physical presence of the supervising optometrist, but does require occasional random checks of your work performed on patients.
- The supervisor shall have full and random access to all patient records.
- The supervisor shall be a California licensed Optometrist, independent, with no prior business or professional relationship with you, or not be in a familial relationship or an employee (including independent contractor), or partner or associate.
- The supervisor shall submit written reports to the board on a quarterly basis verifying that supervision has taken place as required and provide an evaluation of your performance.
- It will be your responsibility to assure that the required reports are filed in a timely manner.
- If the supervisor terminates or is no longer available, you shall not practice until a new supervisor has been approved by the Board.
- · All costs for the supervision will be your responsibility.



LICENSE SURRENDER:

 During your probation, if you cease to practice due to retirement or health reasons, or are otherwise unable to satisfy the conditions of probation, you may surrender your license to the Board.

- The Board reserves the right to evaluate your request and to exercise its discretion
 whether to grant the request or take other action, without hearing.
- Upon formal acceptance of the license and wall certificate, you would no longer be subject to the conditions of probation.
- Surrender of your license would be considered a disciplinary action and become part of your license history with the Board.
- An optometrist whose license has been surrendered may petition the Board for reinstatement no sooner than one year from the effective date of the disciplinary decision.

CF PETITION:

• After one year of full compliance with the conditions of your probation, you may submit an application to petition the Board to modify your probation conditions.

CERTIFICATION

I participated in a probation orientation on xxxxxxxx at SACRAMENTO, CA I understand the terms and conditions of my probation order, my responsibility to fully comply with the Board's probation program, my responsibility to obey all federal, state, and local lows and regulations related to the practice of optometry, and the directions of my Probation Monitor or other Board representative.

I understand that my failure to comply with any of the terms and conditions of probation stated herein and in the Board's Stipulated Settlement and Disciplinary Order, or laws substantially related to the practice of optometry is a direct violation of my probation and may result in the suspension of my practice or license, the revocation of my probation, or the revocation of my license.

CASEY JON FINN

PRINTED NAME

1 IGHT LLD HAMIL

Signature

00

Date

10-20-08

LETTER FROM BOARD PROBATION MONITOR JESSICA SIEFERMAN INDICATING COMPLIANCE WITH PROBATION WITH DOCUMENTATION OF CONTINUING EDUCATION CREDITS 2008-2010

ATTACHMENT 3



Board of Optometry

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 Tel: (916) 575-7170

Fax: (916) 575-7292 www.optometry.ca.gov



November 3, 2010

Robert Hahn

Managing Partner

The Law Offices of Gould & Hahn
5801 Christie Ave, Suite 385

Emeryville, CA 94608

RE: Dr. Casey Finn, OD
Compliance with Probation

Dear Mr. Hahn:

This is in regards to Dr. Casey Finn's compliance with his probation program with the California State Board of Optometry (Board). Pursuant to Dr. Finn's request, I am forwarding you information pertaining to the following terms and conditions of his probation: Cost Recovery, Biological Fluid Testing, and Education Course.

Condition #11 of Dr. Finn's terms and conditions states, in part, the following:

"Cost Recovery: Respondent shall pay to the Board costs associated with its investigation and enforcement pursuant to Business and Professions Code Section 125.3 in the amount of \$3600."

Board records indicate that Dr. Finn has paid the full amount owed to the Board (Attachment #1); therefore, he is in complete compliance with this condition.

Condition #17 of Dr. Finn's terms and conditions states, in part, the following:

"Biological Fluid Testing: Respondent shall immediately submit to biological fluid testing, at Respondent's cost, upon request of the board or its designee."

Dr. Finn has fully cooperated with the Board's contracted vendor, Phamatech, and continues to submit to biological fluid testing. As of the date of this letter, Dr. Finn has complied with this condition.

Condition #19 of Dr. Finn's terms and conditions states, in part, the following:

"Education Course: Within 90 days of the effective date of this decision, and on an annual basis thereafter, Respondent, at his own expense, shall enroll and successfully complete 40 hours of continuing education courses per year for each year of probation that are relevant to the practice of optometry. [...] At least one of the courses shall be in ethics."

Mr. Robert Hahn November 3, 2010 Page 2

Board records indicate that Dr. Finn has been in compliance with this condition since January 26, 2009. I have attached all copies of Dr. Finn's continuing education certificates for your review (Attachment #2).

If you require any additional information, please do not hesitate to contact me directly at (916) 575-7184.

Sincerely,

Jessica Sieferman Probation Monitor

Attachments: 2

Cc. Dr. Casey Finn, O.D.

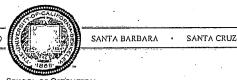
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DENNIS M. LEVI, O.D., PH.D.

BERKELEY, CALIFORNIA 94720-2020

January 26, 2009

To Whom It May Concern:

This is to certify that **Casey Finn**, *OD*, attended the following lectures at the 20th Annual Berkeley Practicum, held from January 10–12, 2009. The CE Program was presented by the School of Optometry, University of California, Berkeley.

License No. S6387 State____ State 8 TPA Hours (2 Syst. Med., 3 Inflam., 2 Glaucoma, 1 Infec.) January 10, 2009 Daniel Ting, MD Retinal Vascular Disease Marian Diamond, PhD Successful Aging of the Healthy Brain Robert Stamper, MD Glaucoma: New Surgical Approaches and Methods to Measure IOPs Karen Oxford, MD The Red Eye: Ocular Infections and Inflammations January 11, 2009 8 TPA Hours (4 Inflam., 2 Glaucoma, 2 Syst. Med.) Posterior and Intermediate Uveitis Michael Jumper, MD Jason Bacharach, MD Diagnosis and Management of Glaucoma - Update 2009 Paul Chous, MA, OD Diabetes: An Inside Perspective from an Optometrist with Diabetes Myopic Degeneration: New Treatments - New Hope Brian Ward, MD, PhD January 12, 2009 5 TPA Hours (2 Inflam., 2 Syst. Med., 1 Infec.) Paul Chous, MA, OD Common Mistakes Made by Optometrists and Their Patients with Diabetes Maziar Haririfar, OD Creative Methods for Diagnosing Usual and Unusual Corneas Wayne Verdon, OD, PhD Ocular Challenges: Grand Rounds

Attendance Certification University of California School of Optometry Patsy L. Harvey, O.D., M.P.H

Continuing Education Director

CERTIFICATE OF ATTENDANCE

ld, CA	3001 Ming Avenue, Bakersfield, CA	
ometry	Practice Name / Address: Valley Plaza Optometro	
	License Number / State: 8638 T / CA	
	Attendee Name: <u>Casey Finn</u> , OD	
Thursday, March 5, 2009	n: 661-325-3937 f: 661-283-3937	0: 661-32
Bakersfield, CA 93311	4101 Empire Drive, Suite 120 Bakersfield, CA 93309	4101 E Bak
2000 Grand Lakes Avenue	Joseph H. Chang, M.D.	Jose
Seven Oaks Country Club	Empire Eye and Laser Center	Empire
Meeting Location / Date	Administrator:	h ₇₁

PLEASE NOTE: Keep this certificate as your validated record of attendance. Empire Eye and Laser Center will not notify any licensing board, or any other agency, of your attendance unless specifically required by your licensing board.

Administrator Validation:

Course Instructor:

Joseph H. Chang, M.D.

Course Title:

Medical Oculoplastics 101:

Basic Eyelid Malpositions and Ptosis

Course Duration:

1.0 hours

CERTIFICATE OF ATTENDANCE

•	hs	Pr	Ľ.	At	Bakersfield, CA 93309 661-325-2927 f: 661-283-3	Mindy Caballero 101 Empire Drive, Sui	Administrator mpire Eye and Laser (
	8400 Rosedak Hwy	Practice Name / Address: First Sight	License Number / State: _8438_	Attendee Name: <u>Losey Fina , OT</u>	Bakersfield, CA 93309 p: 661-325-2927 f: 661-283-3937	Mindy Caballero 4101 Empire Drive, Suite 120	Administrator: Empire Eye and Laser Center	
•	Hwy	ldress: _First_	State: <u>8638</u>	usey Fian ,				
	Bakusfield, CA	Sight		<u>0D</u>	en e			
	5			į				
					Thursday, July 30, 2009	2000 Grand Lakes Avenue Bakersfield, CA 93311	Meeting Location / Date: Seven Oaks Country Club	

PLEASE NOTE: Keep this certificate as your validated record of attendance. Empire Eye and Laser Center will not notify any licensing board, or any other agency, of your attendance unless specifically required by your licensing board.

Administrator Validation:

Course Instructor:

COPE ID:

20515-AS (creat 12414)

Daniel H. Chang, M.D.

Course Title:

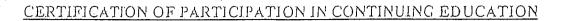
Common Corneal Disorders

Course Duration:

2.0 hours



STATE BOARD OF OPTOMETRY 2420 Del Paso Road, Suile 255 P [916] 575-7170 E [916] 575-7292 web: www.oplometry.ca.gov



	THIS WILL CERTIFY THAT:
	FINN ASIN
	Last Name (Please Print) ASE MI
	8400 ROSEDACE HIGHWAY
	Address (Practice Location) Street Number and Name
٠	BAKERSFIELS CA 933/2 State State 7 in Code
	BAKERS FIEZS CA 933/2 City State Zip Code
	(S638T
(Attendees Signature and California license number
	the state of the s
	Attendees Signature and California license number COURSE ATTENDED: Fluorescein imaging Conference (Title) SPONSORED BY: Alifornia Refina Consultants (Name of Sponsoring Organization)
	(Title)
	SPONSORED BY: (ALIFORNIA REHINA CONSULTANTS) (Name of Sponsoring Organization)
	VENUE: HUNGTY HUNTER STEAKHOUSE (Location where course was provided)
	(Location where course was provided)
	date of course: <u>NOV 5</u> <u>2009</u> , length of course
	(Hours)
	COURSE INSTRUCTOR(S): ALMYE PICRAMUCL, M. S. AHESSANDRO CASHELLARIN, M.
	Merson askly Long
	Signature of Instructor Signature of Instructor

NOTE: This form must be completed in its entirety. Please <u>DO NOT</u> send any records of continuing education attendance to the Board's office unless requested to do so.

REFLEY - DAVIS - IRVINE - FOS ANGELES - RIVERSIDE - SAN DIEGO - SAN FRANCISC



DENNIS M. LEVI, O.D., PII.D. DEAN

SCHOOL OF OPTOMETRY BERKELEY, CALIFORNIA 94720-2020

January 20, 2010

To Whom It May Concern:

This is to certify that *Casey Finn*, *OD*, attended the following lectures at the 21st Annual Berkeley Practicum, held from January 9-11, 2010. The CE Program was presented by the School of Optometry, University of California, Berkeley.

State A L	icense No. 8387 StateLicens	License No		
Y 0.0010		0.000		
January 9, 2010		8 TPA Hours		
Robert Johnson, MD	Intraocular Tumors: Are These Cases Benign or Malignant?			
Joel Schuman, MD	Optical Coherence Tomography (OCT): Development, Applicat	ion, and Pearls		
Harry Quigley, MD	Management of Glaucoma: The Systemic Approach			
Jill Autry, OD, RPh	Pharmaceutical Pearls for Optometrists			
		• .		
January 10, 2010		8 TPA Hours		
Jill Autry, OD, RPh	Glaucoma: What Goes Up, Must Come Down			
Patsy Harvey, OD, MPH	Infectious Diseases: Yesterday, Today, and Tomorrow			
Todd Margolis, MD, PhD	Adventures in External Ocular Disease			
Madhu Agarwal, MD	So You Think It's Just Ptosis			
January 11, 2010		4 TPA Hours		
Jacque Duncan, MD	RP Variants and Mimics: Don't Let Them Fool You			
Scott Lee, MD, MPH	Oculoplastics: Miracles and Mistakes			

Attendance Certification University of California School of Optometry

Patsy L. Harvey, O.D., M.P.H Continuing Education Director

CERTIFICATE OF ATTENDANCE

Administrator:
Empire Eye and Laser Center
Mindy Caballero
4101 Empire Drive, Suite 120
Bakersfield, CA 93309
p: 661-325-2927 f: 661-283-3937

2000 Grand Lakes Avenue Bakersfield, CA 93311

/Date:

Meeting Location /

Seven Oaks Country Club

Tuesday, January 26, 2010

Attendee Name: Casey J. Finn 9D

License Number / State: 8638 T

Practice Name / Address: Cosey J. Finn Of

8400 Rosedale Hwy Bakusfield CA 93312

Course Title: Observation and Management of Eyelid Lesions

Course Instructor: Joseph H. Chang, M.D.

Course Duration: 2.0 hours

Administrator Validation:

PLEASE NOTE: Keep this certificate as your validated record of attendance. Empire Eye and Laser Center will not norify any licensing board, or any other agency, of your attendance unless specifically required by your licensing board.



Office of Continuing Education 2575 Yorba Linda Boulevard • Fullerton, CA 92831-1699 714/449-7442 • Fax 714/992-7809 • email: satkinson@scco.edu

Casey Finn, O.D. 314 Lewisham Street Bakersfield CA 93311

CERTIFICATION OF CONTINUING EDUCATION CREDIT

This will certify that: Casey Finn, O.D.

Opt. License No:

8638T

Attended:

Advances in Ocular Disease Focus in Technology CE Program

Date: Sunday, June 13th, 2010

Instructor(s) & Lecture Information:

Can We Do Better in AMD? Diagnostic Considerations - John McGreal, O.D.

Optimizing the Use of Technology in Perioperative Care - Maynard Pohl, O.D.

New Developments in the Correlation of Structure to Function - Heidelberg Edge Perimetry - George Comer, O.D.

Advances in Imaging of the Anterior Segment - Mark Sawamura, O.D.

New Technology: It's Amazing - GCC and ONH - Dave Sendrowski, O.D.

Hands-On Equipment Workshop - J. Nishimoto, O.D., M.B.A.

Sponsored and Administered by:

The Department of Continuing Education Southern California College of Optometry

Total Continuing Education Credits Earned: 9

Susan Atkinson

Director, Department of Continuing Education Southern California College of Optometry

SOUTHERN CALIFORNIA COLLEGE OF OPTOMETRY



Office of Continuing Education 2575 Yorba Linda Boulevard • Fullerton, CA 92831-1699 714/449-7442 • Fax 714/992-7809 • email: satkinson@scco.edu

Casey Finn, O.D. 314 Lewisham St Bakersfield CA 93311

CERTIFICATION OF CONTINUING EDUCATION CREDIT

This will certify that: Casey Finn, O.D.

Opt. License No:

8638T

Attended:

Cornea & Cataract CE Program and Optometric Boot Camp

Date: Sunday, April 18th, 2010

Instructor(s) & Lecture Information:

Drs. Pirnazar and D. Tran - Cataract Panel Discussion: What Every Commanding Officer Needs to Know About Cataracts! Dr. L. Tran - Corneal Dystrophies and Degenerations Drs. Carver & Hus - In the Trenches of Co-managing Cataracts Dr. Kersten - ICL's and the Optometric Patient Dr. Kao - Cataracts and Beyond: What You Need to Know AboutIOLs, Intacs and RLEs Dr. Weissman - Corneal Infiltrates, the Soldiers in the Eye

Sponsored and Administered by:

The Department of Continuing Education Southern California College of Optometry

Total Continuing Education Credits Earned: 7

Minan & Atherican

Susan Atkinson

Director, Department of Continuing Education Southern California College of Optometry



Margie McGavin/Optometry/DCANot

03/02/2010 12:38 PM

Jessica Sieferman/Optometry/DCANotes@DCANotes

bcc

Subject Fw: Dr. Finn - Course Completion

History: Printing message has been replied to

Jessica

I did have the completion documents for Dr. Finn's ethics course. It was in my email, I just didn't print it.

Margie McGavin, Enforcement Manager California State Board of Optometry 2420 Del Paso Road, Suite 255 Sacramento, CA 95834

Phone: (916) 575-7174 Fax: (916) 575-7292

---- Forwarded by Margie McGavin/Optometry/DCANotes on 03/02/2010 12:39 PM ----



"mberman@scco.edu'" <mberman@scco.edu> 11/30/2009 04:48 PM

"Margie_McGavin@dca.ca.gov" <Margie McGavin@dca.ca.gov>

Subject Dr. Finn - Course Completion

November 30, 2009

Dear Margie:

I am pleased to report that Dr. Finn successfully completed all ethics course requirements.

As requested I am attaching copies for your files of the three essays he was required to write.

Please contact me if additional information is needed.

Regards,

Morris S. Berman, O.D. M.S. Vice President and Dean of Academic Affairs Southern California College of Optometry 2575 Yorba Linda Blvd. Fullerton, CA 92831 (714) 449-7455; Fax (714) 992-7809 mberman@scco.edu



California Optometric Association

2415 K Street, Sacramento, CA 95816 P.O. Box 2591, Sacramento, CA 95812-2591

Tel: (916) 441-3990

Toll-Free: (800) 877-5738

Fax: (916) 448-1423

License Number.

08638

Casey Jon Finn, O.D. 3295 E Main St Ventura, CA 93003

Code Listing

TPA - ANY OF THE FOLLOWING (Glaucoma, Ocular Intedion, Inflammation, Systemi Moda, Pain Medications)

(Binocular Vision, Contact Lensus, Low Vision, Vision

(Brioding Vision, Contact Lensis), Therepy) PM - PRACTICE MANAGEMENT ABO - American Board of Optician

ABO - American Board of Opticianry - Approved NCLE - National Contact Lens Examiners Approve

COPE Event # 10694

CONTINUING EDUCATION TRANSCRIPT

Monterey Symposium 2008 Monterey, CA November 14-16, 2008

COURSE TITLE	Date	Speaker	CE HRS	Category	COPE
102 - Treating Comeal Infections from Start to Finish	11/14/08	Christine Sindt, OD, FAAO	2.00	TPA	COPE: 20245-AS
103 - Effects of Systemic Medications on Contact Lens Wear	11/14/08	Julie Ann Schornack, O,D.	1.00	TPA	COPE: 19130-PH
• 106 - Contact Lens Complications	11/14/08	Julie Ann Schornack, O.D.	2.00	TPA	COPE: 23304-CL
107 - Specialty Contact Lenses in Today's Practice	11/14/08	Christine Sindt, OD, FAAO	2.00	OTHER/NCLE	COPE: 19431-CL
109 - Trends in Presbyopic Refractive Sugery	11/14/08	Jimmy Jackson, OD	1.00	OTHER	COPE: 17680-RS
202 - What You Haven't Heard in Dry Eyes DiseaseReally!	11/15/08	Kelly Nichols, OD, MPH, PhD	2.00	TPA	COPE: 22114-AS
206 - Keratoconus: Diagnosis and Management	11/15/08	Julie Ann Schornack, O.D.	2.00	TPA/AOA	COPE: 19678-CL
211 - Use and Abuse of Steriods	11/15/08	Bruce Onofrey, OD. RPh,FAAO	2.00	TPA	COPE: 15545-PH
215-Strategies for Minimizing Risk in Contact Lens Patients	11/15/08	Kelly Nichols, OD, MPH, PhD	1.00	TPA	COPE: 20620-CL
302 - The Must Have Systemic Medications	11/16/08	Bruce Onofrey, OD, RPh,FAAO	2.00	TPA	COPE: 19964-PH
305-Dry Eye Recipe Book: Clin. Apps of Consensus Panel Posts	11/16/08	Kelly Nichols, OD, MPH, PhD	2.00	TPA	COPE: 21869-AS
Repts 306 - Rigid Toric Contact Lenses Made Easy	11/16/08	Julie Ann Schomack, O.D.	1.00	OTHER/NCLE	COPE; 19676-CL

From: Vision Expo West (register@accureg.com)

To: annabfinn@att.net;

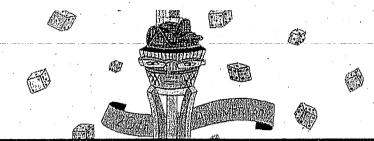
Date: Wed, October 27, 2010 11:31:04 AM

Cc:

Subject: VEW08 - 51887 Thank you for registering to attend INTERNATIONAL VISION EXPO

WEST 2008





CONFERENCE: DCTOBER 2:6, 2008 | EXHIBITION: DCTOBER 3:5, 2008 | SANDS EXPO & CONVENTION CENTER, LAS VEGAS, NV USA

Registration Confirmation

10/27/2010 CASEY FINN VALLY PLAZA OPTOMETRY 3001 MING AVE BAKERSFIELD, CA 93304 US ID # 51887

Thank you for attending International Vision Expo West 2008.

This document verifies successful attendance of the course(s) listed and should be submitted by the conferee to the applicable State Board of Optometry/Opticianry or National Accreditation Agency for license renewal.

International Vision Expo is recognized by the New York State Education Department's State Board for Ophthalmic Dispensing as an approved sponsor of ophthalmic dispensing continuing education.

	<u> </u>	SUCCESSFULLY COMP	LETED COURSES				
	Course Title	Course #	Date				
	Dry Eye And Contact Lenses	23-503-V	10/3/2008				
	Time	Room #	Lecturer	•			
	1:30pm - 2:30pm	503	Schaeffer, OD Karpecki, OD	."			
	Credit Hours	COPE	NCLE	ABO			
٠	1	19978-AS	CT08N188-1				
	Course Title	Course #	Date		,	**************************************	_
	Therapeutic Review: Ocular Surfa	24-205-S	10/3/2008		٠		
	□ Time	Room #	Lecturer				•
	2:45pm - 4:45pm	205	Alan Kabat OD, FAAC				
	Credit Hours	COPE	NCLE	ABO			
	2	19503-AS					
	Course Title	Course #	Date				
	Contact Lens Care: Problem Or So	21-503-V	10/3/2008	\$			
	Time	Room #	Lecturer			۲.	٠.

Hom, OD Gaddie, OD

8:30am - 9:30am	503	Ward	
Credit Hours	COPE 21747-CL	NCLE CT08N185-1	ABO
Course Title Complete Care For The Dry Eye Pa	Course # 22-503-V	Date 10/3/2008	
п Time 9:45am - 11:45am	Room # 503	Lecturer Thimons, OD Lane, OD	
Credit Hours	COPE	NCLE	ABO
		NACON HARON AND ESCHOLAR AND ESCHOLAR AND	
Course Title Oral Medications For Ocular Ther	Course # 33-205-S	Date 10/4/2008	
Time 1:30pm - 3:30pm	Room # 205	Lecturer Gary E. Oliver , OD	
Credit Hours 2	COPE	NCLE	ABO
			The state of the s
Course Title You Are What You Eat: Nutritiona	Course # 32-601-V	Date 10/4/2008	
Time 10:45am - 11:45am	Room # 601	Lecturer Scot Morris, OD	
Credit Hours	COPE 16025-PH	NCLE	ABO
Course Title Current Treatment Strategies For	Course # 34-304-S	Date 10/4/2008	
Time 3:45pm - 4:45pm	Room # 601	Lecturer Gary E. Oliver, OD	
Credit Hours 1	COPE 23407-PH	NCLE	ABO .
Course Title Corneal Controversies, Contacts	Course # 31-901-V	Date 10/4/2008	
Time 8:30am - 10:30am	Room # 901	Lecturer Carl Spear, OD	
Credit Hours 2	COPE 17224-AS	NCLE	ABO
Course Title Nutraceuticals, Supplements & Vi	Course # 43-203-S	Date 10/5/2008	

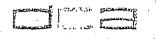
116					
110					

	•			
Time	Room #	Lecturer		
12:30pm - 2:30pm	203	Gary E. Oliver O.D.		
0	0005	LIOL P	400	· · · · · · · · · · · · · · · · · · ·
Credit Hours	COPE	NCLE	ABO	
2	14772-PH			
Course Title	Course #	Date		
The Ocular Surface And Infection	44-503-V	10/5/2008		
Time	Room-#	- Lecturer		
2:45pm - 3:45pm	503	Arthur Epstein, OD		•
Credit Hours	COPE ·	NCLE	ABO	
·1	22800-AS			
0	•			
Course Title	Course #	Date		
Inflammatory Fundus Disorders	41-503-V	10/5/2008		
time	Danu #	14		
8:30am - 9:30am	Room # 503	Lecturer Leo Semes, OD		
6.30am - 9.30am 0	503	Leo Semes, OD		
Credit Hours	COPE	NCLE	ABO	
1	21186-PS			
				·
Course Title	Course #	Date		
Diagnosis And Management Of Dipl	42-304-S	10/5/2008	•	
Time	Room #	Lecturer	•	
9:45am - 11:45am	304	Michelle Caputo, OD		
Credit Hours	COPE	NCLE	ABO	
2	22808-NO			
				•

If you have any questions, please contact Client Services at 800-811-7151 or 203-840-5610.

If some of the text on this letter is cutoff during printing please adjust your margins and print the document again. Go to your internet browser and click on File then Page Setup.

The Left/Right and Top/Bottom margins should be adjusted to 0.25 inches.



STATE BOARD OF OPTOMETRY 2420 Del Paso Road, Suite 255 P [916] 575-7170 F [916] 575-7292 web: www.optometry.ca.gov



CERTIFICATION OF PARTICIPATION IN CONTINUING EDUCATION

	THIS WILL CERTIFY THAT:
	FINN ASIN
	Last Name (Please Print) ASE MI
	8400 ROSEDACE HIGHWAY
	Address (Practice Location) Street Number and Name
٠.	BAKERS FIEZS CA 933/Z City State Zip Code
	City State Zip Code
	Attendees Signature and California license number
	Aftendees Signature and California license number
	Attendees Signature and California license number COURSE ATTENDED: Fluorescein imaging Conference (Title) SPONSORED BY: (Market of Sponsoring Organization)
	(Title)
	SPONSORED BY: California Retina Consultants
	(Ivanic of Sponsoring Organization)
	VENUE: HUNG YY HUNGER SHAKHOUS C (Location where course was provided)
,	(Location where course was provided)
	date of course: $Nov 5$, 2009 , length of course 2009
	(Hours)
	COURSE INSTRUCTOR(S): Ante Pieramici, M. S. Alessandro Castellarin, M
	lessande solli
	Signature of Instructor Signature of Instructor

NOTE: This form must be completed in its entirety. Please <u>DO NOT</u> send any records of continuing education attendance to the Board's office unless requested to do so.

From: mberman@scco.edu (mberman@scco.edu)

To: cifinnod@yahoo.com;

Date: Mon, November 30, 2009 4:43:17 PM

Cc:

Subject: Ethics Essays

November 30, 2009

Dr. Finn:

I have read your three essays and wish to compliment you on your understanding of the ethical issues and the quality of the writing. You did a very good job of referencing articles and incorporating ethical values and principles in the essays. You included Ethical theory in 2 of the 3 essays and my overall impression is that you took this task seriously and have hopefully used this opportunity to reflect on the standards we as health professionals need to believe in and live by.

I will be sending the State Board confirmation of the successful completion of the course and provide copies of your essays as requested.

Best wishes,

Morris S. Berman, O.D. M.S. Vice President and Dean of Academic Affairs Southern California College of Optometry 2575 Yorba Linda Blvd. Fullerton, CA 92831 (714) 449-7455; Fax (714) 992-7809 mberman@scco.edu



ETHICS CLASS REDUIRED BY BOARD AS
PART OF PROBATION = 2 UNITS CCE.

BERKELEY DAVIS IRVINE LOS ANGELES RIVERSIDE SAN DIEGO SAN FRANCISCO



DENNIS M. LEVI, O.D., PH.D.

SCHOOL OF OPTOMETRY BERKELEY, CALIFORNIA 94720-2020

January 20, 2010

To Whom It May Concern:

This is to certify that *Casey Finn*, *OD*, attended the following lectures at the 21st Annual Berkeley Practicum, held from January 9-11, 2010. The CE Program was presented by the School of Optometry, University of California, Berkeley.

State A L	icense No. 83387 StateLicense	e No
January 9, 2010		8 TPA Hours
Robert Johnson, MD	Intraocular Tumors: Are These Cases Benign or Malignant?	
Joel Schuman, MD	Optical Coherence Tomography (OCT): Development, Applicati	ion, and Pearls
Harry Quigley, MD	Management of Glaucoma: The Systemic Approach	
Jill Autry, OD, RPh	Pharmaceutical Pearls for Optometrists	
January 10, 2010		8 TPA Hours
Jill Autry, OD, RPh	Glaucoma: What Goes Up, Must Come Down	
Patsy Harvey, OD, MPH	Infectious Diseases: Yesterday, Today, and Tomorrow	
Todd Margolis, MD, PhD	Adventures in External Ocular Disease	
Madhu Agarwal, MD	So You Think It's Just Ptosis	
January 11, 2010		4 TPA Hours
Jacque Duncan, MD	RP Variants and Mimics: Don't Let Them Fool You	
Scott Lee, MD, MPH	Oculoplastics: Miracles and Mistakes	

Attendance Certification University of California School of Optometry

Patsy L. Harvey, O.D., M.P.H Continuing Education Director

and Dawing &

CERTIFICATE OF ATTENDANCE

•						,	p: 6	41(En	
Course Instructor.	Course Title:	8400 Rosedale Hwy	Practice Name / Address:	License Number / State: <u>8658</u>	Attendee Name: Cosey J. Firm		Bakersfield, CA 93309 p: 661-325-2927 f: 661-283-3937	Mindy Caballero 4101 Empire Drive, Suite 120	Administrator: Empire Eye and Laser Center	-
Tosenh H Chang M D	Observation and Management of Eyelid Lesion	Bakursfield CA 93312	y J. Fina OD		mr 00		Tuesday, January 26, 2010	2000 Grand Lakes Avenud Bakersfield, CA 93311	Meeting Location / Dat Seven Oaks Country Club	

PLEASE NOTE: Keep this certificate as your validated record of attendance. Empire Eye and Laser Center will not notify any licensing board, or any other agency, of your attendance unless specifically required by your licensing board.

Administrator Validation:

Course Duration: 2.0 hours

CALIFORNIA RETINA CONSULTANTS

Diseases & Surgery of the Retina, Macula & Vitreous

Offices
Santa Barbara
515 E. Michellorena Street
Suite C
Santa Barbara, CA 93103
(805) 963-1648
Fax (805) 965-5214

May 20, 2010

Santa Maria 116 S. Palisade Drive Sulte 102 Santa Maria, CA 93454 (805) 922-2068

Oxnard 1801 N. Solar Drive Suite 145 Oxnard, CA 93030 (805) 983-8808

Bakersfield 5329 Office Center Court Suite 120 Bakersfield, CA 93309 (661) 325-4393 Fax (661) 322-8489

Valencia 23861 McBean Parkway 9 E28 9 E28 9 E28 (661) 253-2939

Lancaster 1505 W. Avenue J Suite 303 Lancaster, CA 93454 (661) 951-9519

Clinical Studies

Macular Degeneration

- PDT: Visudyne™
- PĎT: Miravant™
- Anti-VEGF: Macugen™
- Anti-VEGF: Lucentis™
- Anti-VEGF: Avastin™
- VisTA: PDT & Triamcinolone
- Avastin™ & PDT
- RAP: Lucentis™ & PDT
- Retaane™ and Lucentis™
- · NeoVista: Subretinal Radiation

Diabetic Retinopathy

- Vitreous Hemorrhage: Vitrase™
- Fluocinolone Implant: Envision™
- Micropulse Laser
- CDME: Celebrex***
- DRCRN: Laser & Triamcinolone

Avastin™ & Triamcinolone

Surmodics: Triamcinolone Implant

Oculex™ Steroid Implant

Venous Occlusive Diseases

- SCORE: Trlamcinolone
- Lucentis™ for CRVO

Dear Doctor,

Thank you for attending our semi-annual retina imaging conference that was held on May 20, 2010 at The Padre Hotel located in Bakersfield, CA. Enclosed you will find your certification of participation in continuing education form for two continuing education credits. Thanks again for attending the conference and thank you for your kind and consistent referrals!

Robert L. Avery, M.D. Ma'an A. Nasir, M.D. Dante J. Pieramici, M.D.

Robert F. See, M.D.

Alessandro A. Castellarin, M.D.

Sincerely,

Amy Sterling
Education Event Coordinator
California Retina Consultants and Research Foundation

			FOR	BOARD	USE
Course Title	Date(s) of Course	CB Hours [9] Regressed	ed Approved	Disapproved	m#
VIHREOREHNAN DISEASES.	5/29/10	Mark J. Plesamul, M. D. 2.	2		8829
Fluckesin Imagina		Alessandes A. Castilinein m.			
nontekenee					
COMMUTTER COMMENTS:					



Association of Regulatory Boards of Optometry

This Continuing Education (CE)
Certificate of Completion

is awarded to

Casey J. Finn

For the satisfactory completion of the following course:

C.S. Eye - A Clinical Investigation of Real Malpractice Cases

COPE ID: 20144-EJ Hours: 1 hour Category: Ethics/Jurisprudence

Date: 2010-06-09

Course Format:

Provider:

Live

Tropical Ce Inc Dba Pinnacle

Meetings Events

Digital Validation:

1047979817

Media Sponsor:

NONE

Signature Agreement

By signing this document, I do hereby attest that I personally attended the listed course(s) and the information included is accurate to the best of my knowledge. I understand that the information attested to in this certificate may be shared with relevant optometry licensing boards or other state agency responsible for the licensure and regulation of optometrists.

Signature

. 1 9 / 10

Date



Association of Regulatory Boards of Optometry

This Continuing Education (CE)
Certificate of Completion

is awarded to

Casey J. Finn

For the satisfactory completion of the following course:

Strategies for Minimizing Risk Factors for Your Contact Lens Patient - The Science & Facts

COPE ID: 25004-CL Hours: 1 hour

Category: Contact Lenses

Date: 2010-06-09

Course Format:

Provider:

Live

Tropical Ce Inc Dba Pinnacle

Meetings Events

Digital Validation:

769621108

Media-Sponsor:

NONE

Signature Agreement

By signing this document, I do hereby attest that I personally attended the listed course(s) and the information included is accurate to the best of my knowledge. I understand that the information attested to in this certificate may be shared with relevant optometry licensing boards or other state agency responsible for the licensure and regulation of optometrists.

Signature Date

SOUTHERN CALIFORNIA COLLEGE OF OPTOMETRY



Office of Continuing Education 2575 Yorba Linda Boulevard • Fullerton, CA 92831-1699 714/449-7442 • Fax 714/992-7809 • email: satkinson@scco.edu

Casey Finn, O.D. 314 Lewisham St Bakersfield CA 93311

CERTIFICATION OF CONTINUING EDUCATION CREDIT

This will certify that: Casey Finn, O.D.

Opt. License No:

8638T

Attended:

Cornea & Cataract CE Program and Optometric Boot Camp

Date: Sunday, April 18th, 2010

Instructor(s) & Lecture Information:

Drs. Pirnazar and D. Tran - Cataract Panel Discussion: What Every Commanding Officer Needs to Know About Cataracts!

Dr. L. Tran - Corneal Dystrophies and Degenerations

Drs. Carver & Hua - In the Trenches of Co-managing Cataracts

Dr. Kersten - ICL's and the Optometric Patient

Dr. Kao - Cataracts and Beyond: What You Need to Know AboutIOLs, Intacs and RLEs

Dr. Weissman - Corneal Infiltrates, the Soldiers in the Eye

Sponsored and Administered by:

The Department of Continuing Education Southern California College of Optometry

Total Continuing Education Credits Earned: 7

Mary J. Atherican

Susan Atkinson

Director, Department of Continuing Education Southern California College of Optometry



Office of Continuing Education 2575 Yorba Linda Boulevard • Fullerton, CA 92831-1699 714/449-7442 • Fax 714/992-7809 • email: satkinson@scco.edu

Casey Finn, O.D. 314 Lewisham Street Bakersfield CA 93311

CERTIFICATION OF CONTINUING EDUCATION CREDIT

This will certify that: Casey Finn, O.D.

Opt. License No:

8638T

Attended:

Advances in Ocular Disease Focus in Technology CE Program

Date: Sunday, June 13th, 2010

Instructor(s) & Lecture Information:

Can We Do Better in AMD? Diagnostic Considerations - John McGreal, O.D.

Optimizing the Use of Technology in Perioperative Care - Maynard Pohl, O.D.

New Developments in the Correlation of Structure to Function - Heidelberg Edge Perimetry - George Comer, O.D.

Advances in Imaging of the Anterior Segment - Mark Sawamura, O.D.

New Technology: It's Amazing - GCC and ONH - Dave Sendrowski, O.D.

Hands-On Equipment Workshop - J. Nishimoto, O.D., M.B.A.

Sponsored and Administered by:

The Department of Continuing Education Southern California College of Optometry

Total Continuing Education Credits Earned: 9

Susan Atkinson

Director, Department of Continuing Education Southern California College of Optometry

CERTIFICATE OF ATTENDANCE

Administrator:	Meeting Location / Date:
Empire Eye and Laser Center	Seven Oaks Country Club
Mindy Caballero	2000 Grand Lakes Avenue
4101 Empire Drive, Suite 120	Bakersfield, CA 93311
Bakersfield, CA 93309	
»: 661-325-2927 f: 661-283-3937	Tuesday, July 13, 2010
Attendee Name: Cose Fine OJ	
License Number / State: 8638 T	
Practice Name / Address: First Sight Vision Services	ht Vision Services
8400 Rosedale Hwy ~ Bakysfield, CA 93312	cusfield CA 93312

Course Title: Presbyopia: The Final Frontier

Course Instructor: Daniel H. Chang, M.D.

Course Duration: 1.0 hours

Administrator Validation: Which (U)

PLEASE NOTE: Keep this certificate as your validated record of altendance. Empire Eye and Laser Center will not notify any licensing board, or any other agency, of your attendance unless specifically required by your licensing board.

From: Vision Expo West <rugistor@accuron.co.
To cilumod@yahoo.com

Add to Contacts











Course Attendance Verification

Course Attendance Verification

10/19/2010
CASEY FINN
NORTH CHESTER OPTOMETRY
314 LEWISHAM STREET
BAKERSFIELD, CA 93311
US
ID # 7778

Thank you for attending the International Vision Expo West 2010 Conference.

This document verifies successful aftendance of the course(s) listed and should be submitted by the conferee to the applicable State Board of Optometry/Opticianry or National Accreditation Agency for license renewal.

SUCCESSFULLY COMPLETED COURSES

		CCCHOCI CEL	I COM	CTLD GGGITGLG					
	Course Title The Musl-Have Systemic Medicatio	Course # . 12-303-S		Date 10/6/2010					
	Time	Room #		Lecturer	·			•	
	1:30pm - 3:30pm	303-S		Bruce Onofrey, OD					
	Credit Hours	COPE		NCLE	ABO	٠.			
	2	26118-PH							
	-			······································				<u> </u>	
	Course Title	Course #		Date	•				
	The Ocular Surface And Infection	11-201-S		10/6/2010					•
	Time	Room #		Lecturer					
	12:15pm - 1:15pm	201-S		Arthur Epstein, OD	1				
	Credit Hours	COPE		NCLE	ABO	•	•		
	1	22800-AS							
	Course Title	Course #		Date .					
	What Would You Do? Difficult Co	13-201-6		10/8/2010					
	Time	Room #		Lecturer				•	
	3:45pm - 5:45pm	201-8		Bruilc, OD Kading, OD					
			•						
	Credit Hours	COPE 28785-CL		NCLE CT10N128-2	ABO				
	2 .	20783-CL		C11014120-2					
	Course Title	Course #		Date					
	Are You Keeping Up	MS-200-3		10/7/2010					
	Time	Room #		Lecturer			•		
	12:30pm - 1:30pm			Kevin Gee, OD					
	Credit Hours .	COPE		NCLE	ABO				
	1	27479-PM							
		<u>.</u>	· ·		<u>.</u>				
	Course Title	Course #		Date					
	New Technologies For IOP Measure	23-106-S		10/7/2010				٠.	
•	Time	Room #		Lecturer					
	2:45pm - 3:45pm	106-5		Ben Gaddie, OD					
	Credit Hours	COPE		NCLE	ABO				
	1 .	28793-PD		•					
	Course Title	Course #		Date					
	From Print To Practice: How To T	24-106-S		10/7/2010				٠.	
	Time	Room#		Lecturer					
	4:00pm - 6:00pm	106-S		Millori Hom, OD					
	Credit Hours	COPE .		NCLE	ABO				-
	2	28771-CL		CT10N121-2	ABO .				٠
								<u>. </u>	
	Course Title Put A Lid On It The Role Of Th	Course # 21-207-S		Date 10/7/2010					
•	Time	Room #		Lecturer	·				
	8:30am - 9:30am	207-S		Blair Lonsberry,					

-KERN COUNTY PROBATION-DEPARTMENT

John R. Roberts

Chief Probation Officer



Friday, September 01, 2006

Re: FINN, CASEY JON Case #: BM668483A Prob #: 10-77-59

Diversion Granted: 3-18-05 Attorney: ROUNDS, JOHN

Judge of the Superior Court 1215 Truxtun Avenue Bakersfield, CA 93301 C ORIGINAL FILED ON: COORD
OF SEP 0 7 2006 PO SUPERIOR COURT METROPOLITAN DIVISION JUSTICE BUILDING

Your Honor:

The above referenced defendant has successfully completed drug diversion pursuant to PC 1000. If am recommending that the charge for which the defendant was diverted be dismissed.

Attached is a copy of the letter received from the PC1000 Service Provider indicating that the diversion requirement has been completed.

Sincerely,

Brenda S. Moore

Deputy Probation Officer

Adult Division .

It is hereby ORDERED for good cause and on the recommendation of the Deputy Probation Officer that drug diversion be terminated and dismissed in the case of CASEY JON FINN.

DATE: SEP 0 7 2006

JUDGE STEPHEN GILDNER

JUDGE OF THE SUPERIOR COURT OF CALIFORNIA COUNTY OF KERN METROPOLITAN DIVISION - JUSTICE BUILDING



Alternative Action Programs 2575 Wagon Wheel Road Oxnard CA 93030-1110

(805)988.1112 - Fax: 805.988.4883 E-mail: dmgassocinc@earthlink.net

DEFERRED ENTRY OF JUDGMENT

Progress Report

To: Melody Dellostritto DPO. Date 2005 Ridge Rd. P.O Box 3309	44 20 25
Bakersfield, CA 93385 Client: Casey Finn Case # BM668483A Court Kern County Courts Completion Non-Compliance The approved Deferred Entry of Judgment Program (PC1000) consists of the following activities: 3 Personal Interviews 11 Education/Group Sessions 12 Self-Help Group Meetings For cause drug testing The above named participant has completed the following activities: 3 Personal Interviews 5 Education/Group Sessions 5 Education/Group Sessions 7 Education/Group Sessions 8 Personal Interviews 9 The client's fee payments are XXXX current, delinquent. Attendance: 0 Absences, 1 Cancellations, 0 late arrival to activities. Comments:	11-22-05
Case # BM668483A	Date
Case # BM668483A	
Case # BM668483A 5135 Wooley Rd. #3 Court Kern County Courts Oxnard, CA 93035 DOB 3 / 29/1957 Program Status: XXXX Completion Non-Compliance Other The approved Deferred Entry of Judgment Program (PC1000) consists of the following activities:	
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12 Self-Help Meetings 2 Drug Tests The client's fee payments are XXXX current, Attendance: 0 Absences, 1 Cancellation Comments:	

Signature of Case Manager

From: Jessica Sieferman (Jessica.Sieferman@dca.ca.gov)

To: cjfinnod@yahoo.com;

Date: Fri, August 13, 2010 3:29:35 PM

Cc:

1 11111

Subject: Probation condition #20: Drug, Alcohol, or Other Chemical Abuse Counseling and Treatment

Hi Dr. Finn,

Thank you for resubmitting the documentation for your "Alternative Action Program." Condition #20 of your probationary terms is fulfilled.

In addition, I have contacted Karen from Phamatech and informed her of your procedure on August 23, 2010. I have made a note in your file that you will not be calling/logging in from August 21-23, 2010.

If you have any additional questions, please do not hesitate to contact me.

Sincerely,

Probation Monitor

California State Board of Optometry

2420 Del Paso Road, Suite 255

Sacramento, CA 95834 Phone: (916) 575-7184 Fax: (916) 575-7292

The Board is committed to providing quality customer service. Please click on http://www.surveymonkey.com/s/CD3TRQJ to share your feedback. Thank you.

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. 2	EDWARD R JAGELS DISTRICT ATTORNEY KERN COUNTY BY: VALETA SMITH WILDE	OPY
	1215 TRUXTUN AV BAKERSFIELD, CA 93301	
5	TELEPHONE: (661) 868-2340	
6	ATTORNEYS FOR PLAINTIFF	
8	SUPERIOR COURT OF CALIFORNIA, COUNTY OF KERN	
9	BAKERSFIELD JUDICIAL DISTRICT	•
10) NO BK05-7572 THE PEOPLE OF THE STATE OF CALIFORNIA,) BP CASE	
11	DA CASE: COM 053966 PLAINTIFF,) PC1210.1(PROP 36)	4 .
12	V. COMPLAINT	
13	CASEY JON FINN) 6684	83
14		• .
1,5	DEFENDANT(S).)	
16		
	 THE COUNTY OF KERN, STATE OF CALIFORNIA:	
18		
19		
20	COUNT: 001, ON OR ABOUT JANUARY 12, 2005, CASEY JON FINN, DID	•
21	WILLFULLY AND UNLAWFULLY USE OR BE UNDER THE INFLUENCE OF A	
22	CONTROLLED SUBSTANCE, IN VIOLATION OF HEALTH AND SAFETY CODE	•
23	SECTION 11550(A), A MISDEMEANOR.	
24		•
25	I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS	
26.	TRUE AND CORRECT EXCEPT FOR THOSE THINGS STATED ON INFORMATIO	N

Law Crices of John K. Lounds

Correspondence Box 985, Santa Paula, CA 93061 johnkrounds@msn.com 805 525 4114 805 525 5510 fax

*Offices in Ventura and Los Angeles Counties

*California licensed Attorney and Broker

*Of Counsel Harper & Assoc., P.C.

12/24/07

Kimberlee D. King Deputy Attorney General Ronald Reagan Building 300 South Spring St, Ste 1702 Los Angeles, CA 90013

Re: Case CC 2005-104

Dear Ms. King:

Enclosed, please find a copy of the Minute Order from Mr. Finn's 12/12/07 motion to set aside the Medi-Cal conviction.

Please note the following for the Board's consideration of Mr. Finn:

- Probation has been terminated;
- The Court Ordered the plea and conviction set aside;
- A Not Guilty plea has been entered;
- The Court dismissed the case in full.

Any and all prior or pending matters have been dismissed with not guilty pleas entered. Mr. Finn was used as a dupe in the Medi-Cal matter, and has made full restitution of the wages earned while an employee (Please see 12/12/07 letter from prosecuting A.G., sent under previous cover). He did not profit from his superior's fraud. He trusted a new employer to process his billing. His mistake was not being fully aware of the employer's acts.

The Court has reviewed the entire matter and has determined Mr. Finn's debt has been paid. Please consider the facts presented and the efforts undertaken to right Mr. Finn's mistake. All charges have been dismissed and all monies have been resolved prior to adjudication.

Upon and since the disclosure of the acts of his employer, Mr. Finn has completely cooperated with authorities and has fully complied with all requests. The Court has recognized his efforts and accountability. He has been given the opportunity to rebuild his life. Please do not punish Mr. Finn for offenses that have been dismissed, after the Court has recognized Mr. Finn satisfaction of his debt to the People and State.

Thank you for your consideration. If you have any questions or concerns, please do not hesitate to contact me directly.

Sincerely,

John K. Rounds

Law ffices of John K. Jounds

Gorrespondence Box 985, ta Paula, CA 98061 johnkrounds@msn.com 805 525 4114 805 525 5510 fax

*Offices in Ventura and Los Angeles Counties

*California licensed Attorney and Broker

*Of Counsel Harper & Assoc., P.C.

Ana Finn 15 Nevada Ave Ventura, CA 93004

12/17/07

Re: Dismissal

Dear Ana:

Enclosed, please find a copy of the minute order from LA Superior (12/12/07, dept 116, Judge Norman Shapiro) indicating probation is terminated, plea is set aside, not guilty is entered and case is dismissed.

I will be forwarding a copy of this order, and another letter emphasizing debt to society is paid, to A.G. King (for the optom board). Enclosed, please find a copy of the most recent letter sent to her.

I will keep you updated w\any developments.

Sincerely,

John K. Rounds

2	BILL LOCKYER, Attorney General of the State of California MARK ZAHNER,	
3	Senior Assistant Attorney General MARCUS COHEN, State Bar No. 204982,	
4	Deputy Attorney General Bureau of Medi-Cal Fraud and Elder Abuse 303 North Glenoaks Blvd., Suite 900 Burbank, California 91502	
6	Telephone: (818) 556-2920	
7	Attorneys for the People of the State of California	
8		
9	IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA FOR THE COUNTY OF LOS ANGELES	
10		
11	PEOPLE OF THE STATE OF CALIFORNIA, Case No.: BA 2453 72	
.12	Plaintiff,	
13	v. PLEA AGREEMENT	
14	CASEY FINN,	
15	Defendants:	
16	TO A CONTRACT TO	
17	This document sets out the terms of the plea agreement between defendant CASEY FINN	
18	and the Attorney General of the State of California.	
. 19	Guilty Plea	
20	1. Defendant will plead guilty to Count 1 of the complaint. Count 1 alleges that CASEY	
21	FINN, with intent to defraud, presented and caused to be presented for allowance and payment a	
22	false and fraudulent claim for furnishing services and merchandise under the Medi-Cal Act, in	
23	violation of section 14107 of the Welfare and Institutions Code, a felony.	
24	2. During entry of his guilty plea, defendant will waive his right to appeal all orders	
25	denying pre-trial motions.	
26	<u>Cooperation</u>	
27	3. Before and after sentencing, defendant will fully cooperate with law enforcement in its	
28	investigation and prosecution of health care fraud, kickbacks and any other economic crimes or	

- 1) If the defendant fails to successfully comply with the terms of paragraph 6, subsection (c) (pay \$15,000 in restitution), defendant acknowledges and agrees he will be sentenced to two years State Prison.
- d) If the defendant has complied with paragraph 6, subsection (c) (paid\$15,000 in restitution) prior to sentencing, the Attorney General will reduce count one of the complaint/information from a felony to a misdemeanor. The defendant will be placed on three years formal probation, terms of probation to include the following:
 - 1. Defendant will pay ten thousand dollars (\$10,000) to the California Department of Justice Litigation Fund. Payments will be submitted by the defendant monthly at the rate of \$250.00.
 - 2. Defendant agrees to provide only truthful information and testimony pursuant to this agreement.
- f) The defendant further agrees, during the term of probation, not to professionally associate with any individuals participating in government healthcare programs, to wit any Medicaid, Medicare, or Medi-Cal program, and to refrain from receiving any compensation for services rendered to individuals participating in any of the above mentioned government healthcare programs.
- 7. Defendant will have the right to withdraw his guilty plea if he is sentenced to more than the sentence set forth in this agreement.

Consequences of Violation

- 8. A violation of this plea agreement relieves the non-violating party of its obligations under the agreement and extinguishes any rights granted by the agreement to the violating party. A violation also gives the non-violating party the right to be returned to its pre-agreement position, or, if the non-violating party has been prejudiced by its reliance on the agreement and cannot be returned to its pre-agreement position, the right to specific performance of the agreement.
- 9. A violation of this plea agreement by defendant has the further consequence of waiving the statute of limitations as to any crimes whose prosecution is not presently time-barred.

10. For purposes of this plea agreement, "violation" means a material departure from the terms of the agreement. A disagreement about whether there has been a violation of the plea agreement will be decided by the court, with the party alleging the violation having the burden of proof by a preponderance of the evidence, which may include hearsay evidence.

Entire Agreement

11. This plea agreement binds only the Attorney General of California, and does not bind any other federal, state or local prosecuting, administrative or regulatory authorities. Nothing in this plea agreement restricts the filing or litigation of any civil suits or administrative actions.

12. The terms stated in this document constitute the entire plea agreement between defendant CASEY FINN and the Attorney General. There are no other promises or conditions, and no other agreements, oral or written, modifying this plea agreement. Any prior agreements are deemed null and void. This agreement cannot be modified or superseded except by a writing signed by both parties.

BILL LOCKYER Attorney General	
	9/8/04
WARCUS COHEN	Date
Deputy Attorney General	
CASEY FINN	Date Date
Defendant **	

IN ROUNDS Date

Attorney for Defendant

SUPERIOR COURT OF CALIFORNIA COUNTY OF LOS ANGELES

NO. BA245392

THE PEOPLE OF THE STATE OF CALIFORNIA

PAGE NO. CURRENT DATE 08/31/05

DEFENDANT 01: CASEY JON FINN

LAW ENFORCEMENT AGENCY EFFECTING ARREST: DEPARTMENT OF JUSTICE

OF BAIL

BAIL: APPEARANCE AMOUNT

DATE POSTED

RECEIPT OR SURETY COMPANY BOND NO.

REGISTER NUMBER

CASE FILED ON 09/08/04.

DATE

COMPLAINT, AND CERTIFICATE AND ORDER OF MAGISTRATE ARE FILED. DEFENDANT PLED GUILTY TO COUNT(S)

OFFENSE(S):

COUNT 01: 14107 W&I FEL - PRESNT FALSE MEDI-CAL CLAIM. COMMITTED ON OR ABOUT 11/30/02 IN THE COUNTY OF LOS ANGELES

NEXT SCHEDULED EVENT:

07/26/05 830 AM CERTIFIED PLEA/SENTENCING DIST CENTRAL DISTRICT DEPT 150

ON 07/26/05 AT 830 AM IN CENTRAL DISTRICT DEPT 650

CASE CALLED FOR CERTIFIED PLEA/SENTENCING

PARTIES: DAVID M. HORWITZ (JUDGE) ROBERT SAIKI (CLERK)

JANICE CORRADI (REP) VINCENT N. BONOTTO (AG)

DEFENDANT IS PRESENT IN COURT, AND REPRESENTED BY JOHN ROUNDS PRIVATE COUNSEL MATTER CONTINUED AS INDICATED BELOW.

COURT ORDERS AND FINDINGS:

-THE COURT ORDERS THE DEFENDANT TO APPEAR ON THE NEXT COURT DATE.

WAIVES STATUTORY TIME.

NEXT SCHEDULED EVENT:

08/10/05 830 AM CERTIFIED PLEA/SENTENCING DIST CENTRAL DISTRICT DEPT 650

CUSTODY STATUS: DEFENDANT REMAINS ON OWN RECOGNIZANCE

ON 08/10/05 AT 830 AM IN CENTRAL DISTRICT DEPT 650

CASE CALLED FOR CERTIFIED PLEA/SENTENCING

PARTIES: DAVID M. HORWITZ (JUDGE) ROBERT SAIKI JANICE CORRADI (REP) VIN (CLERK)

VINCENT N. BONOTTO (AG)

DEFENDANT IS PRESENT IN COURT, AND REPRESENTED BY JOHN ROUNDS PRIVATE COUNSEL DEFENDANT WAIVES ARRAIGNMENT FOR JUDGMENT AND STATES THERE IS NO LEGAL CAUSE WHY SENTENCE SHOULD NOT BE PRONOUNCED. THE COURT ORDERED THE FOLLOWING JUDGMENT:

AS TO COUNT (01):

IMPOSITION OF SENTENCE SUSPENDED

DEFENDANT PLACED ON FORMAL PROBATION

FOR A PERIOD OF 003 YEARS UNDER THE FOLLOWING TERMS AND CONDITIONS: PLUS \$20.00 COURT SECURITY ASSESSMENT (PURSUANT TO 1465.8(A)(1) P.C.) DEFENDANT SHALL PAY FINE THROUGH THE PROBATION OFFICER

TOTAL DUE: \$20.00

IN ADDITION:

-DEFENDANT IS TO MAKE RESTITUTION TO THE VICTIM PURSUANT TO PENAL CODE SECTION 1202.4(F), IN THE AMOUNT OF \$10,000.00 @ RATE OF \$250.00 OR MORE PER MONTH, TO THE DEPT OF JUSTICE

OF JUSTICE LITIGATION FUND, THROUGH THE PROBATION DEPARTMENT IN SUCH AMOUNT AND MANNER AS THE PROBATION OFFICER SHALL

-THE DEFENDANT IS TO PAY A RESTITUTION FINE PURSUANT TO SECTION 1202.4(B) PENAL CODE IN THE AMOUNT OF \$100.00 THROUGH THE PROBATION DEPARTMENT,

-KEEP PROBATION OFFICER ADVISED OF YOUR RESIDENCE AND WORK AND HOME TELEPHONE NUMBERS AT ALL TIMES.

-NOT OWN, USE OR POSSESS ANY DANGEROUS OR DEADLY WEAPONS, INCLUDING ANY FIREARMS, KNIVES OR OTHER CONCEALABLE WEAPONS.

-SUBMIT PERSON AND PROPERTY TO SEARCH OR SEIZURE AT ANY TIME OF THE DAY OR NIGHT BY ANY LAW ENFORCEMENT OFFICER OR BY PROBATION OFFICER WITH OR WITHOUT A WARRANT.

-OBEY ALL LAWS AND ORDERS OF THE COURT.

-OBEY ALL RULES AND REGULATIONS OF THE PROBATION DEPARTMENT.

-DEFENDANT ACKNOWLEDGES TO THE COURT THAT THE DEFENDANT UNDERSTANDS AND ACCEPTS ALL THE PROBATION CONDITIONS, AND

DEFENDANT AGREES TO ABIDE BY SAME.

COURT ORDERS AND FINDINGS:

-THE COURT ORDERS THAT THE DEFENDANT PROVIDE TWO SPECIMENS OF BLOOD, A SALIVA SAMPLE, RIGHT THUMBPRINT, AND A FULL PALM PRINT IMPRESSION OF EACH HAND FOR LAW ENFORCEMENT IDENTIFICATION

-DEFENDANT TO REPORT TO THE PROBATION OFFICER FORTHWITH TO THE ASCOT INTAKE TEAM AREA PROBATION OFFICE AT 210 W TEMPLE ST., 3RD FLOOR/RM 516 LA 90012 FOR FURTHER INSTRUCTIONS.

ANY MODIFICATIONS/VIOLATIONS OF PROBATION ARE

ARE TO BE HEARD IN DEPARTMENT 116.

PROBATION REPORT FILED

FINGERPRINT CARD FILED.

x-1888704

COUNT (01): DISPOSITION: CONVICTED DMV ABSTRACT NOT REQUIRED NEXT SCHEDULED EVENT: PROBATION IN EFFECT



THE DOCUMENT TO WHICH THIS CERTIFIE ATTACHED IS A FULL, TRUE, AND CO OF THE ORIGINAL ON FILE AND OF F ... MY OFFICE. AUG 3 1 2005

ATTEST _

JOHN A CLARKE

Executive Off Outlorma/ uperloi County of Los Angeles 5

LETTERS OF RECOMMENDATION

ATTACHMENT 6

Frank Giardina, MS, OD, FAAO Optometrist in Walmari 2220 S. Bradley Road Santa Maria, CA 93455

nhone: 805.925 4794 fax: 805.922.4147

10.29.10

Board of Optometry 2420 Del Paso Road, Suite 255 Sacramento, CA 95834

Dear Member of the Board,

Allow me to introduce myself. My name is Frank Giardina. I'm the Area Doctor for FirstSight Vision Services, and a practicing optometrist. I've known Dr. Casey Finn for many years. We first meet in 1982, at the time we were both optometry student at Pacific University.

Recently, Dr. Casey Finn was employed by FirstSight Vision Services in our Bakersfield location. As Area Doctor, I was his direct supervisor. Part of my responsibility was to audit patient records. Dr. Finn's record keeping was always excellent. The records were complete and meet our Standards of Patient Care. Dr. Finn was well-liked by both the staff and his patients. I never once received a patient complaint regarding Dr. Finn. I personally observed him. He has a great chair-side manner and is an experience and well-trained professional.

I am aware of the circumstances that lead to his probation. Dr. Finn was open about his situation before he was hired. He had accepted the responsibility for his actions and demonstrated a willingness to amend prior mistakes.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed in Santa Maria, California, October 29, 2010 by Frank Giardina.

Sincerely,

Frank Stion dina, MS, DD, FAAD

Frank Giardina, MS, OD, FAAO

fg/fg

My name is Tom O'Leary.

I am employed as Vice President of Pacific Coast Instruments, Inc., located in Bakersfield, CA. I started this company in 1987. The company is a Manufacturer's Representative and Distributor of Process Control Instruments.

I am also the facilitator for a Church sponsored Spiritual 12-Step Program at St. Philip the Apostle Church in Bakersfield, CA., having been in this ministry since 1996. This program is open to all faiths and to those individuals having *any* dysfunction in their lives. I have come to know Dr. Finn (Casey), as he came to our group in August of 2010 on his own volition, and he has been attending our meetings regularly since that time.

In our program, he has been actively involved in discussion with the group and has demonstrated a very sincere approach to dealing with his personal journey towards improving relationships with family, friends, and others in his life. I can see that he is committed to building meaning in his life. He regularly contributes very insightful ideas. Casey gets along and interacts well with others in the group. He is intelligent, articulate, and demonstrates leadership qualities with his peers.

I am aware of Dr. Hinds conviction in the past, as he has confided in me. I understand that he has been, and will continue to make restitution to injured parties. I strongly believe that Dr. Hinds should be given the opportunity to practice his profession, and contribute in a meaningful way to society.

I declare under penalty of perjury under the laws of the State of California, that the foregoing is true and correct. Executed in Bakersfield, California on October 29, 2010.

Thomas G. O'Leary

(661)300-0882

To the Board of Optometry;

My name is Walter Jean Truax and I belong to the Lion's Club of Bakersfield, California. I have been a member of this community for many years.

I am aware of the disciplinary action against Casey Finn. I was provided with a copy of the disciplinary order from the Board of Optometry.

I have known Casey for several years as a local optometrist with a straight forward, caring reputation. I would often visit him at his place of employment to retrieve eye glasses and always found him to be welcoming to me.

For the past year, I have been supervising the activities of Casey Finn. Casey is responsible for retrieving used eye glasses from different organizations and sorting them for distribution to those less fortunate. Casey is always eager to work and goes above and beyond his requirements, including bi-monthly meetings with the Lion's Club.

In the time that we have started working together, I have become a friend to Casey and he has become a friend to me. He has always treated me with respect and kindness. Casey has expressed remorse in his ignorance of his past and accepts full responsibility.

I would not hesitate to recommend that Dr. Finn's probation be terminated.

Sincerely,

Walter Jean Truax
(651)

(661) 831-2297

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed in Bakersfield, California on October 27, 2010 by Walter Jean Truax.

To the Board of Optometry:

My name is Ana Banuelos-Finn and I have been married to Casey Finn for ten years. I have been a stay at home mom since the birth of our daughter, Siena, in 2001.

I believe that there isn't anyone who knows my husband more deeply than I do. I know and lived through his convictions. I was right by his side through all the troubled times, even when we separated and lived apart.

I want to express all the positives that have transpired out of this period of turmoil. Casey Finn has undoubtedly proven his dedication to right his wrongs; not only with his family and friends, but with his profession. He has complied with every condition set by the Board and earlier with the Department of Justice. Casey has gone above and beyond what was expected of him. On his own, he reads spiritual literature, attends self-help meetings, attends church regularly and is a source of emotional support for many friends and family.

I know Casey's heart. He is a good man who made some really; simply put, stupid mistakes. I know that the man that he is today would never jeopardize his career or his life for any reason. Not only does he express his gratitude, but I can actually see how much he values everything in life. I am extremely moved by the person my husband has become.

Casey has many loyal patients that truly adore him. The elderly, the non-English speaking, all different individuals, he treats like family. His reputation in Bakersfield and Ventura is remarkable; honest, friendly and knowledgeable. And I know he loves his profession, I can see it in the way he looks forward to going to work.

Casey is an excellent optometrist, a humbled husband, and a caring father. I plead with the Board to end his probation. I truly believe he has learned many valuable lessons that will last him a lifetime and that he can pass on to our lovely daughter, Siena.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed in Bakersfield, California on November 1, 2010 by Ana Banuelos-Finn.

Thank you,

Ana Banuelos-Finn

(661) 903-1772

OPTOMETRIC LITERATURE REVIEWED BY CASEY JON FINN THROUGHOUT THE PREVIOUS YEAR

- 1. Optometric Management
- Contact Lens Spectrum
 Primary Care Optometry News
- 4. Review of Optometry
- 5. Optometry Times

VICTOR D. CONTRERAS, M.D.

Diplomate, American Board of Family Practice

10/26/10

TO: CALIFORNIA STATE BOARD OF OPTOMETRY

RE: CASEY FINN DOB:3/29/57

LETTER OF RECOMMENDATION

DEAR GENTLEPERSON(S):

I HAVE BEEN DR. FINN'S PRIMARY CARE PHYSICIAN OVER THE LAST FOUR YEARS. I AM AWARE OF THE DISCIPLINARY ACTION TAKEN AGAINST DR. FINN. I HAVE WATCHED HIM EMBRACE ALL PROBATIONARY REQUIREMENTS WITH THE UTMOST PROFESSIONAL ATTITUDE. I HAVE COME TO RESPECT HIS DILIGENCE AND DRIVE TO PERSEVERE OVER THESE TROUBLING CIRCUMSTANCES. OVER THE YEARS I HAVE DEVELOPED AN APPRECIATION OF DR. FINN'S INTEGRITY AND GOOD CHARACTER BY WATCHING HIM QUIETLY AND WITH DIGNITY SLOWLY REBUILDING HIS PROFESSIONAL REPUTATION. I BELIEVE THE ABOVE IS CONFIRMED BY NOTING THE YEARS OF PROBATION HE HAS COMPLETED WITHOUT ANY RECIDIVISM OR FURTHER ALLEGATIONS OF PERSONAL OR PROFESSIONAL MISCONDUCT. FORTUNATELY AT PRESENT I HAVE NO OPTOMETRIC ISSUES REQUIRING ATTENDANCE HOWEVER IF I DID I WOULD HAVE NO RESERVATION HAVING SERVICES RENDERED UNDER THE CARE OF DR. FINN.

I DECLARE UNDER PENALTY OF PERJURY UNDER LAW OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.

EXECUTED IN SANTA PAULA, CA. ON 26TH OF OCTOBER, 2010.

VICTOR D. CONTRERAS, M.D.

126 N. TENTH STREET SANTA PAULA, CA 93060

PH # (805) 525-4446

FAX # (805) 525-7211

My name is Richard Banuelos. I own Specialty Bathtub Refinishing Company in Ventura, California.

I have known Casey Finn for over fifteen years, ten of those as my brother in law.

I first met Casey as my Optometrist. I went to him because of his honest reputation. He had the patience to listen and answer all my questions and concerns. I know many of his patients and that reputation still holds true today.

I am completely aware of Casey's convictions and the struggles he's endured. I have seen a family man hit rock bottom and lose it all.

I have also seen Casey persevere. I saw him accept full responsibility for his mistakes and truly learn from them. Never making excuses for what happened, and certainly never repeating them. He threw himself into church, twelve step programs and anything that offered insight into why he made such mistakes. He worked harder than ever, at one point commuting to Bakersfield from Ventura and back every day for close to two years.

I have witnessed Casey rebuild his marriage. A day at a time, becoming a better husband and father to their nine year old daughter. They have been happily reunited for almost three years.

I am impressed at his determination and ability to maintain complete sobriety for more than five years.

Casey is one of my closest friends. Through him I have learned many lessons. Humility, perseverance, faith, the list can go on indefinitely. Without a doubt, I know that Casey Finn is an honest, trustworthy man who deserves a chance to live a normal life again.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed in Ventura, California on October 29, 2010 by Richard Banuelos.

Thank you,

Richard Banuelos (805)415-3427

ALAN J. GOULD ALSO MEMBER OF NEW YORK AND D.C. BAR

ROBERT F. HAHN

GOULD & HAHN

5801 CHRISTIE AVENUE, SUITE 385
EMERYVILLE, CALIFORNIA 94608
TELEPHONE: (510) 428:2229
FAX: (510) 428:2232
e-mail: law@gouldhahn.com

THOMAS E. LOMBARDI

OF COUNSEL

LOS ANGELES, CALIFORNIA

November 10, 2010

Ms. Mona Maggio, Executive Officer Board of Optometry 2420 Del Paso Road, Suite 255 Sacramento, CA 95834

Re

Petition for Early Termination of Probation

Casey Jon Finn, OD

Request for placement on the January 2011 agenda

Dear Ms. Maggio:

The following is information that you may need to process Mr. Finn's Petition for Early Termination of probation. I am sending you the addresses, as he knows them, of the location of offices where he practiced Optometry prior to the Board action. This information was inadvertently left out of the packet forwarded you under separate cover. I apologize for any inconvenience this may cause.

Location of Practice Prior to Discipline 3295 East Main Street Ventura, CA 93003 1999-2008

Glendale, CA 2002-2003 (address unknown) 2002-2003

3001 Ming Ave Bakersfield, CA 93304 2006-2008

Very truly yours,

GOULD & HAHN

Robert F. Hahn

RFH:bc

ALAN J. GOULD ALSO MEMBER OF NEW YORK AND D.C. BAR

ROBERT F. HAHN

GOULD & HAHN

5801 CHRISTIE AVENUE, SUITE 38

TELEPHONE: (510) 428-222

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THOMAS E. LOMBARDI

OF COUNSEL

LOS ANGELES, CALIFORNIA

May 25, 2011

Ms. Mona Maggio, Executive Officer Board of Optometry 2420 Del Paso Road, Suite 255 Sacramento, CA 95834

Re:

Addendum to Petition for Early Termination of Probation

Casey Jon Finn, OD

June 21, 2011 Meeting of the Board

Dear Ms. Maggio:

In preparing for the presentation before the Board on Mr. Finn's Petition for Early Termination of Probation, I came across a statement that with additional information, will clarify the chronology of the Medi-Cal conviction so that there is no confusion regarding the status of Mr. Finn's criminal record.

On September 8, 2004, Mr. Finn entered into a Plea Agreement, attached to the Petition as Attachment 5, whereby he pled guilty to Count 1 of the Complaint alleging that he allowed to be presented for payment a fraudulent claim for furnishing services under the Medi-Cal Act, a felony.

The Court reduced the felony to a misdemeanor prior to sentencing under paragraph d) of the Plea Agreement.

On December 12, 2007, the plea and conviction were set aside and the case dismissed in full.

Thank you for your attention to this matter.

Very truly yours,

GOULD & HAHN

Robert F. Hahn

RFH:bc

BEFORE THE BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:		Case No.	CC 2005-104
CASEY JON FINN, O.D.)		
3295 E. Main Street Ventura, CA 93003)		
Optometry License No. 8638)		
Respondent.))		
	: `` ``		

DECISION

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

This Decision shall become effective July 17, 2008.

It is so ORDERED June 17, 2008.

LEE A. GOLDSTEIN, O.D., MPA

PRESIDENT

BOARD OF OPTOMETRY

- <u></u> 1	EDMUND G. BROWN JR., Attorney General		
	of the State of California		
. 2	Julian Die Storie		
. 3	Supervising Deputy Attorney General KIMBERLEE D. KING, State Bar No. 141813 JAN 1 7 2008		
	Deputy Attorney General		
4	California Department of Justice Cos Society Street Spring 1702		
5	300 So. Spring Street, Suite 1702 Los Angeles, CA 90013		
م	Telephone: (213) 897-2581		
6	Facsimile: (213) 897-2804		
7	Attorneys for Complainant		
8			
	BEFORE THE BOARD OF OPTOMETRY		
. 9	DEPARTMENT OF CONSUMER AFFAIRS		
10	STATE OF CALIFORNIA		
11	In the Matter of the Accusation Against: Case No. CC 2005-104		
12	CASEY JON FINN		
1.0	3295 E. Main Street STIPULATED SETTLEMENT AND		
. 13	Ventura, CA 93003 DISCIPLINARY ORDER		
14			
15	Optometry License No. 8638		
	Respondent.		
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18	IT IS HEREBY STIPULATED AND AGREED by and between the parties to the		
19	above-entitled proceedings that the following matters are true:		
20	DARGER CONTRACTOR OF THE CONTR		
.20	<u>PARTIES</u>		
21	1. Taryn Smith (Complainant) is the Executive Officer of the Board of		
22	Optometry. She brought this action solely in her official capacity and is represented in this		
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23	matter by Edmund G. Brown Jr., Attorney General of the State of California, by Kimberlee D.		
24	King, Deputy Attorney General.		
25	2. Respondent Casey Jon Finn (Respondent) is represented in this proceeding		
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.26	by attorney John K. Rounds, whose address is Law Offices of John K. Rounds, Correspondence		
27	Box 985, Santa Paula, CA 93061.		
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On or about February 2, 1987, the Board of Optometry issued Optometry License No. 8638 to Casey Jon Finn (Respondent). The License was in full force and effect at all 3 times relevant to the charges brought in Accusation No. CC 2005-104 and will expire on March 31, 2009, unless renewed. JURISDICTION Accusation No. CC 2005-104 was filed before the Board, and is currently 6 pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on March 20, 2007. Respondent timely filed his Notice of Defense contesting the Accusation. A copy of Accusation No. CC 2005-104 is attached as 10 exhibit A and incorporated herein by reference. ADVISEMENT AND WAIVERS Respondent has carefully read, discussed with counsel, and fully 12 understands the charges and allegations in Accusation No. CC 2005-104. Respondent has also 13 14 carefully read, discussed with counsel, and fully understands the effects of this Stipulated 15 Settlement and Disciplinary Order. Respondent is fully aware of his legal rights in this matter, including the 16 17 right to a hearing on the charges and allegations in the Accusation; the right to be represented by 18. counsel at his own expense; the right to confront and cross-examine the witnesses against him; 19 the right to present evidence and to testify on his own behalf; the right to the issuance of 20 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 21 22 California Administrative Procedure Act and other applicable laws. 23 Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above. 24 CULPABILITY 25 26 Respondent admits the truth of each and every charge and allegation in Accusation No. CC 2005-104. 27

Respondent agrees that his Optometry License is subject to discipline and he agrees to be bound by the Board's imposition of discipline as set forth in the Disciplinary Order below.

CONTINGENCY

Respondent understands and agrees that counsel for Complainant and the enforcement staff of the Board of Optometry may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent. 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.

OTHER MATTERS

The parties understand and agree that facsimile copies of this Stipulated Settlement and Disciplinary Order, including facsimile signatures thereto, shall have the same force and effect as the originals.

DISCIPLINARY ORDER

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:

IT IS HEREBY ORDERED that Optometry License No. 8638 issued to Respondent Casey Jon Finn (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. Actual Suspension. Optometry License issued to Respondent Casey Jon Finn is suspended for a period of ten (10) days.

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- 2. Obey All-Laws. Respondent shall obey all federal, state and local laws, and all rules governing the practice of optometry in California.
- Cooperate with Probation Surveillance. Respondent shall comply with the board's probation surveillance program; including but not limited to allowing access to the probationer's optometric practice(s) and patient records upon request of the board or its agent.

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4. Comply With The Board's Probation Program. Respondent shall fully comply with the conditions of the Probation Program established by the Board and cooperate with representatives of the Board in its monitoring and investigation of the Respondent's compliance with the Board's Probation Program.

Respondent shall inform the Board in writing within no more than 15 days of any address change and shall at all times maintain an active, current license status with the Board, including during any period of suspension.

Respondent shall, at his own expense, report in person to the Board's headquarters in Sacramento within three (3) months of the effective date of the Board's decision, and as the Board deems necessary if it is determined that Respondent may not be compliant with any of the terms or conditions of his probation.

- 5. Interviews. Respondent shall appear in person for interviews with a Board representative upon request at various intervals and with reasonable notice.
- 6. Submit Written Reports. Respondent, during the period of probation, shall submit or cause to be submitted such written reports/declarations and verification of actions under penalty of perjury, as required by the Board. These reports/declarations shall contain statements relative to Respondent's compliance with all the conditions of the Board's Probation Program. Respondent shall immediately execute all release of information forms as may be required by the Board or its representatives. Respondent shall provide a copy of this decision to the optometric regulatory agency in every state and territory in which he has an optometry license.
- 7. Function as an Optometrist. Respondent, during the period of probation, shall engage in the practice of optometry in California for a minimum of 24 hours per week for 6

"engage in the practice of optometry" may include, when approved by the Board, volunteer work as an optometrist, or work in any non-direct patient care position that requires licensure as an optometrist. If Respondent has not complied with this condition during the probationary term, and the Respondent has presented sufficient documentation of his good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of the Respondent's probation period up to one year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation shall apply.

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- Shall obtain prior approval from the Board before commencing or continuing any employment, paid or voluntary, as an optometrist. Respondent shall cause to be submitted to the Board all performance evaluations and other employment related reports as an optometrist upon request of the Board. Respondent shall provide a copy of this decision to his employer and immediate supervisors prior to commencement of any optometric or other health care related employment. In addition to the above, Respondent shall notify the Board in writing within seventy-two (72) hours after he she obtains any optometric or other health care related employment. Respondent shall notify the Board in writing within seventy-two (72) hours after he is terminated or separated, regardless of cause, from any optometric, or other health care related employment with a full explanation of the circumstances surrounding the termination or separation.
- 9. Residency, Practice, or Outside of State. Any period of residency or practice as an optometrist outside of the State of California shall not apply toward a reduction of this probation time period. Respondents probation is tolled, any time he resides outside of California. Respondent must provide written notice to the Board within 15 days of any change of residency or practice outside California, and within 30 days prior to re-establishing residency or returning to practice in California. Respondent shall provide a list of all states and territories where he has ever been licensed as an optometrist. Respondent shall further provide information regarding the status of each license and any changes in such license status during the term of

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11. Cost Recovery. Respondent shall pay to the Board, costs associated with its investigation and enforcement pursuant to Business and Professions Code Section 125.3 in the amount of \$3600. Respondent shall be permitted to pay these costs in a payment plan approved by the Board, with payments to be completed no later than six months prior to the end of the probation term.

If Respondent has not complied with this condition during the probationary term, and Respondent has presented sufficient documentation of his or her good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of the Respondent's probation period up to one year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation will apply.

- 12. **Completion of Probation.** Upon successful completion of probation, Respondent's certificate will be fully restored.
- 13. Violation of Probation. If Respondent violates probation in any respect, the board, after giving Respondent notice and opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an accusation or petition to revoke probation 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.
- 14. **Drugs & Abstain From Use.** Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the California Uniform Controlled Substances Act, and dangerous drugs as defined by Section 4211 of the Business and Professions Code or any drugs requiring a prescription.
- 15. Drugs Exception for Personal Illness. Orders forbidding Respondent from personal use or possession of controlled substances or dangerous drugs do not apply to

medications lawfully prescribed to Respondent for a bona fide illness or condition by a licensed physician.

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- 16. Alcohol Abstain From Use. Respondent shall abstain completely from the use of alcoholic beverages.
- Biological Fluid Testing. Respondent shall immediately submit to biological fluid testing, at Respondent's cost, upon the request of the board or its designee.
- date of this decision, Respondent shall submit to the board for its prior approval a community service program in which Respondent shall provide free <u>non-optometric services</u> on a regular basis to a community or charitable facility or agency for at least fifteen (15) hours a month for the first two (2) years of probation.
- 19. Education Course. Within 90 days of the effective date of this decision, and on an annual basis thereafter, Respondent, at his own expense, shall enroll and successfully complete 40 hours of continuing education courses per year for each year of probation that are relevant to the practice of optometry. These course shall be in addition to the courses required for license renewal. At least one of the courses shall be on ethics. Respondent shall obtain prior approval from the Board before enrolling in the ethics course. The courses are to be completed no later than six months prior to the end of his probationary term. Respondent shall submit to the Board the original transcripts or certificates of completion for the above required courses. The Board shall return the original documents to the respondent after photocopying them for its records.
- Treatment. Within 15 days of the effective date of this decision, Respondent shall submit the name, business address and business telephone number of three persons who are professionally qualified to provide counseling and treatment for drug, alcohol or other chemical abuse appropriate to the case. Thereafter the board through its staff shall select one of these persons to provide the necessary counseling and treatment. Within 30 days of written notification of this selection to the Respondent the Respondent shall, in consultation with this counselor and treating

professional, prepare and submit to the board for its approval, a counseling and treatment program all costs of which shall be paid by the Respondent. Respondent shall successfully complete this counseling and treatment program as a condition of probation.

Supervised Environment. Within 60 days of the effective date of this decision. Respondent shall submit to the Board, for its prior approval, the name and qualifications of one or more proposed supervisors an a plan for each such supervisor by which Respondent's practice would be supervised. Respondent shall not practice until receiving notification of Board approval of Respondent's choice of a supervisor. The plan of supervision shall be general and not require the physical presence of the supervising optometrist during the time optometric procedures are performed, but does require an occasional random check of the work performed on the patient. Additionally, the supervisor shall have full and random access to all patient records of Respondent. Each proposed supervisor shall be a California licensed. optometrist who shall submit written reports to the Board on a quarterly basis verifying that supervision has taken place as required and include an evaluation of Respondent's performance. It shall be Respondent's responsibility to assure that the required reports are filed in a timely manner. The supervisor shall be independent, with no prior business or professional relationship with Respondent and the supervisor shall not be in a familial relationship with or be an employee, (including independent contractor) partner or associate of Respondent. If the supervisor terminates or is otherwise no longer available, Respondent shall not practice until a new supervisor has been approved by the Board. All costs of the supervision shall be borne by the Respondent.

License surrender - During Respondent's term of probation, if he ceases practicing due to retirement or health reasons, or is otherwise unable to satisfy the conditions of probation, Respondent may surrender his license to the Board. The Board reserves the right to evaluate Respondent's request and to exercise its discretion whether or not to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances, without further hearing. Upon formal acceptance of the tendered license and wall certificate, Respondent

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will no longer be subject to the conditions of probation, except he may be subject to reimbursing the Board for its costs of investigation and prosecution upon a petition for reinstalement. 3 ACCEPTANCE I have carefully read the above Stipulated Settlement and Disciplinary Order and .5 have fully discussed it with my attorney, John K. Rounds. I understand the stipulation and the 6 effect it will have on my Optometry License. I enter into this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the ٠8 9 Decision and Order of the Board of Optometry. 11 12 13 CASEY JON FINN (Respondent) Respondent 14 15 I have read and fully discussed with Respondent Casey Jon Finn the terms and 16 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content. 18 19 20 21 Attorney for Respondent 22 23 24 25 26 .27 28

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Board of Optometry, Department of Consumer Affairs.

DATED:

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January 11, 2008

EDMUND G. BROWN JR., Attorney General of the State of California

JENNIFER S. CADY Supervising Deputy Attorney General

KIMBERLEE D. KING
Deputy Attorney General

Attorneys for Complainant

DOJ Matter ID: LA2006601188 60228648.wpd

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Exhibit A
Accusation No. CC 2005-104

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	1· · 2·	EDMUND G. BROWN JR., Attorney General of the State of California JENNIFER S. CADY
	. 3	Supervising Deputy Attorney General KIMBERLEE D. KING, State Bar No. 141813 Deputy Attorney General
	4	California Department of Justice 300 So. Spring Street, Suite 1702
	5	Los Angeles, CA 90013 Telephone: (213) 897-2581 Facsimile: (213) 897-2804
	7	Attorneys for Complainant
	8	BEFORE THE
	9	BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS
. 1	- 11	STATE OF CALIFORNIA
1	1	n the Matter of the First Amended Accusation Case No. CC-2005-104
1.	2 (CASEY JON FINN
13	3 7	295 E. Main Street /entura, CA 93003 FIRST AMENDED ACCUSATION
14	l C	ptometry License No. 8638
15		Respondent.
16	-	
.17		Complainant alleges:
.18		<u>PARTIES</u>
. 19		1. Taryn Smith (Complainant) brings this First Amended Accusation solely in her
20	of	ficial capacity as the Executive Officer of the Board of Optometry (Board), Department of
21		onsumer Affairs.
22		2. On or about February 2, 1987, the Board issued Optometry License No. 8638 to
23	Са	sey Jon Finn (Respondent). The Optometry License was in full force and effect at all times
24	rel	evant to the charges brought herein and will expire on March 31, 2009, unless renewed.
25	*	<u>JURISDICTION</u>
26		3. This Accusation is brought before the Board, under the authority of the following
27	law	s. All section references are to the Business and Professions Code unless otherwise
28		icated.
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Section 3090 of the Code states: "Except as otherwise provided by law, the board may take action against all persons guilty of violating this chapter or any of the regulations adopted by the board. The board shall enforce and administer this article as to licenseholders, and the board shall have all the powers granted in this chapter for these purposes, including, but not limited to, investigating complaints from the public, other licensees, health care facilities, other licensing agencies, or any other source suggesting that an optometrist may be guilty of violating this chapter or any of the regulations adopted by the board. Section 3106 of the Code states: "Knowingly making or signing any certificate or other document directly or indirectly related to the practice of optometry that falsely represents the existence or nonexistence of a state of facts constitutes unprofessional conduct." Section 3110 of the Code states: "The board may take action against any licensee who is charged with unprofessional conduct, and may deny an application for a license if the applicant has committed 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 or any of the rules and regulations adopted by the board pursuant to this chapter. "(e) The commission of fraud, misrepresentation, or any act involving dishonesty or corruption, that is substantially related to the qualifications, functions, or duties of an optometrist.

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qualifications, functions, and duties of an optometrist, in which event the record of the

conviction shall be conclusive evidence thereof.

"(k) Conviction of a felony or of any offense substantially related to the

"(1) Administering to himself or herself any controlled substance or using any of the dangerous drugs specified in Section 4022, or using alcoholic beverages to the extent, or in a manner, as to be dangerous or injurious to the person applying for a license or holding a license under this chapter, or to any other person, or to the public, or to the extent that the use impairs the ability of the person applying for or holding a license to conduct with safety to the public the practice authorized by the license, or the conviction of a misdemeanor or felony involving the use, consumption, or self administration of any of the substances referred to in this subdivision, or any combination thereof."

Section 490 of the Code states:

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"A board may suspend or revoke a license on the ground that the licensee has been convicted of a crime, if the crime is substantially related to the qualifications; functions, or duties of the business or profession for which the license was issued. A conviction within the meaning of this section means a plea or verdict of guilty or a conviction following a plea of nolo contendere. Any action which a board is permitted to take following the establishment of a conviction may be taken when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal, or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code."

Section 810 of the Code states:

- "(a) It shall constitute unprofessional conduct and grounds for disciplinary action, including suspension or revocation of a license or certificate, for a health care professional to do any of the following in connection with his or her professional activities:
- "(1) Knowingly present or cause to be presented any false or fraudulent claim for the payment of a loss under a contract of insurance.
- "(2) Knowingly prepare, make, or subscribe any writing, with intent to present or use the same, or to allow it to be presented or used in support of any false or fraudulent claim.

"(b) It shall constitute cause for revocation or suspension of a license or certificate for a health care professional to engage in any conduct prohibited under Section 1871.4 of the Insurance Code or Section 549 or 550 of the Penal Code.

certificate issued pursuant to Chapter 4 (commencing with Section 1600), Chapter 5 (commencing with Section 2000), Chapter 6.6 (commencing with Section 2900), Chapter 7 (commencing with Section 3000), or Chapter 9 (commencing with Section 4000), or pursuant to the Chiropractic Act or the Osteopathic Act, if a licensee or certificate holder has been convicted of any felony involving fraud committed by the licensee or certificate holder in conjunction with providing benefits covered by worker's compensation insurance, or has been convicted of any felony involving Medi-Cal fraud committed by the licensee or certificate holder in conjunction with the Medi-Cal program, including the Denti-Cal element of the Medi-Cal program, pursuant to Chapter 7 (commencing with Section 14000), or Chapter 8 (commencing with Section 14200), of Part 3 of Division 9 of the Welfare and Institutions Code. The board shall convene a disciplinary hearing to determine whether or not the license or certificate shall be suspended, revoked, or some other disposition shall be considered, including, but not limited to, revocation with the opportunity to petition for reinstatement, suspension, or other limitations on the license or certificate as the board deems appropriate."

9. California Code of Regulations, title 16, section 1517 states:

"For the purpose of denial, suspension, or revocation of the certificate of registration of an optometrist pursuant to Division 1.5 (commencing with Section 475) of the Code, a crime or act shall be considered to be substantially related to the qualifications, functions, and duties of an optometrist if to a substantial degree it evidences present or potential unfitness of an optometrist to perform the functions authorized by his/her certificate of registration in a manner consistent with the public health, safety, or welfare.

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(Knowingly Presenting False or Fraudulent Claims)

14. Respondent is subject to disciplinary action under section 3110, subdivision (a) and 3106 of the Code, on the grounds of unprofessional conduct, for violating section 810, in that from about November, 2002 to March, 2003, Respondent knowingly made, signed, and falsely presented false Medi-Cal claims for professional services, as more fully set forth above in paragraph 12.

FOURTH CAUSE OF ACTION

(Self-Administering a Controlled Substance)

15. Respondent is subject to disciplinary action under section 3110, subdivision (1), of the Business and Professions Code for violating Health and Safety Code section 11550, subdivision (a), in that Respondent, by his own admission, knowingly and willingly; ingested Methamphetamine, an illegal controlled substance. The circumstances are that on or about January 12, 2005, medical personnel and Bakersfield police officers were called to Howard's Mini Mart located in Bakersfield, California for a possible overdose of Methamphetamine. Respondent reported that he had called for medical aid due to a possible heart attack or panic attack. He displayed symptoms of Methamphetamine influence which included agitation, accelerated and repetitive speech, fixed pupils which reacted slowly to light and elevated blood pressure. Respondent admitted to the police and medical personnel that he used methamphetamine earlier that day.

PRAYER

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

- 1. Revoking or suspending Optometry License No. 8638, issued to Casey Jon Finn.
- 2. Ordering Casey Jon Finn to pay the Board the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3.

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1	3. Taking such other and further action as deemed necessary and proper.			
2	DATED: 6/22/67			
4				
5	TARYN SMITH Executive Officer			
7 8	Board of Optometry State of California Complainant			
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	EDMUND G. BROWN JR., Attorney General					
	of the State of California					
. 2	JENNIFER S. CADY.					
:3	Supervising Deputy Attorney General KIMBERLEE D. KING, State Bar No. 141813					
,	Deputy Attorney General					
4	California Department of Justice					
5	300 So. Spring Street, Suite 1702 Los Angeles, CA 90013					
	Telephone: (213) 897-2581					
6	Facsimile: (213) 897-2804					
7	Attorneys for Complainant					
	BEFORE THE					
8	BOARD OF OPTOMETRY					
9	DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA					
10	This control is a second of the cause of the					
	In the Matter of the Accusation Against: Case No. CC 2005-104					
11	CASEY JON FINN A C C U S A T I O N					
12	3295 E. Main Street					
	Ventura, CA 93003					
13	Optometry License No. 8638					
14						
15	Respondent.					
16	Complainant alleges:					
17	<u>PARTIES</u>					
18	1. Taryn Smith (Complainant) brings this Accusation solely in her official capacity					
	as the Executive Officer of the Board of Optometry (Board), Department of Consumer Affairs.					
.19						
20	On or about February 2, 1987, the Board issued Optometry License No. 8638 to					
21	Casey Jon Finn (Respondent). The Optometry License was in full force and effect at all times					
22	relevant to the charges brought herein and will expire on March 31, 2007, unless renewed.					
23	JURISDICTION					
24	This Accusation is brought before the Board, under the authority of the following					
25	laws. All section references are to the Business and Professions Code unless otherwise indicated.					
26	4. Section 3090 of the Code states:					
	"Except as otherwise provided by law, the board may take action against all					
27	persons guilty of violating this chapter or any of the regulations adopted by the board. The board					
28	persons guilty of violating this chapter of any of the regulations accepted by the courts. The board					

shall enforce and administer this article as to licenseholders, and the board shall have all the powers granted in this chapter for these purposes, including, but not limited to, investigating complaints from the public, other licensees, health care facilities, other licensing agencies, or any other source suggesting that an optometrist may be guilty of violating this chapter or any of the 4. regulations adopted by the board." 5 Section 3106 of the Code states: "Knowingly making or signing any certificate or other document directly or 7 indirectly related to the practice of optometry that falsely represents the existence or nonexistence of a state of facts constitutes unprofessional conduct." Section 3110 of the Code states: 10 "The board may take action against any licensee who is charged with 11 unprofessional conduct, and may deny an application for a license if the applicant has committed 12 unprofessional conduct. In addition to other provisions of this article, unprofessional conduct 13 includes, but is not limited to, the following: .14 "(a) Violating or attempting to violate, directly or indirectly assisting in or 15 abetting the violation of, or conspiring to violate any provision of this chapter or any of the rules 16 and regulations adopted by the board pursuant to this chapter. 17 18 "(e) The commission of fraud, misrepresentation, or any act involving dishonesty 19 or corruption, that is substantially related to the qualifications, functions, or duties of an -20optometrist. 21 22 "(k) Conviction of a felony or of any offense substantially related to the 23 qualifications, functions, and duties of an optometrist, in which event the record of the conviction 24 shall be conclusive evidence thereof. 25 Section 490 of the Code states: 26 "A board may suspend or revoke a license on the ground that the licensee has been 27 convicted of a crime, if the crime is substantially related to the qualifications, functions, or duties 28

of the business or profession for which the license was issued. A conviction within the meaning of this section means a plea or verdict of guilty or a conviction following a plea of nolo contendere. Any action which a board is permitted to take following the establishment of a conviction may be taken when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal, or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code."

Section 810 of the Code states:

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- "(a) It shall constitute unprofessional conduct and grounds for disciplinary action, including suspension or revocation of a license or certificate, for a health care professional to do any of the following in connection with his or her professional activities:
- "(1) Knowingly present or cause to be presented any false or fraudulent claim for the payment of a loss under a contract of insurance.
- (2) Knowingly prepare, make, or subscribe any writing, with intent to present or use the same, or to allow it to be presented or used in support of any false or fraudulent claim.
- "(b) It shall constitute cause for revocation or suspension of a license or certificate for a health care professional to engage in any conduct prohibited under Section 1871.4 of the Insurance Code or Section 549 or 550 of the Penal Code.
- "(c) (1) It shall constitute cause for automatic suspension of a license or certificate issued pursuant to Chapter 4 (commencing with Section 1600), Chapter 5 (commencing with Section 2000), Chapter 6.6 (commencing with Section 2900), Chapter 7 (commencing with Section 3000), or Chapter 9 (commencing with Section 4000), or pursuant to the Chiropractic. Act or the Osteopathic Act, if a licensee or certificate holder has been convicted of any felony involving fraud committed by the licensee or certificate holder in conjunction with providing benefits covered by worker's compensation insurance, or has been convicted of any felony involving Medi-Cal fraud committed by the licensee or certificate holder in conjunction with the Medi-Cal program, including the Denti-Cal element of the Medi-Cal program, pursuant to Chapter 7 (commencing with Section 14000), or Chapter 8 (commencing with Section 14200), of

Part 3 of Division 9 of the Welfare and Institutions Code. The board shall convene a disciplinary hearing to determine whether or not the license or certificate shall be suspended, revoked, or some other disposition shall be considered, including, but not limited to, revocation with the opportunity to petition for reinstatement, suspension, or other limitations on the license or certificate as the board deems appropriate."

9. California Code of Regulations, title 16, section 1517 states:

"For the purpose of denial, suspension, or revocation of the certificate of registration of an optometrist pursuant to Division 1.5 (commencing with Section 475) of the Code, a crime or act shall be considered to be substantially related to the qualifications, functions, and duties of an optometrist if to a substantial degree it evidences present or potential unfitness of an optometrist to perform the functions authorized by his/her certificate of registration in a manner consistent with the public health, safety, or welfare.

10. Section 125.3 of the Code provides, in pertinent part, that the Board may request the administrative law judge to direct a licentiate found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case.

FIRST CAUSE FOR DISCIPLINE

(Conviction of a Substantially Related Crime)

- 12. Respondent is subject to disciplinary action under section 3110, subdivision (k) and 490, in conjunction with California Code of Regulations, title 16, section 1517, in that Respondent has been convicted of a crime substantially related to the qualifications, functions or duties of a licensed optometrist, as follows:
- a. On or about August 10, 2005, Respondent plead guilty to and was convicted by the Court for violating one count of Welfare and Institutions Code section 14107, a felony (presenting false Medi-Cal claims), in the Superior Court of California, County of Los Angeles, Central Judicial District, Case No. BA245393 entitled *The People of the State of California v. Casey Finn.*

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The circumstances surrounding the conviction are that about November, 2002 to March, 2003, Respondent presented false and fraudulent claims for furnishing 2 professional services and merchandise to patients, under the Medi-Cal Act. SECOND CAUSE FOR DISCIPLINE (Fraud, Misrepresentation, or Acts Involving Dishonesty) 5 Respondent is subject to disciplinary action under section 3110, subdivisions (a) 13. and (e), on the grounds of unprofessional conduct, in that from on or about November, 2002 to March, 2003, Respondent committed fraud, misrepresentation, or acts involving dishonesty by 8 presenting false Medi-Cal claims, as more fully set forth above in paragraph 12. 9 THIRD CAUSE FOR DISCIPLINE 10 (Knowingly Presenting False or Fraudulent Claims) .11 Respondent is subject to disciplinary action under section 3110, subdivision (a) 12 and 3106 of the Code, on the grounds of unprofessional conduct, for violating section 810, in that 13 from about November, 2002 to March, 2003, Respondent knowingly made, signed, and falsely :14 presented false Medi-Cal claims for professional services, as more fully set forth above in :15 paragraph 12. 16 17 18 19 20 21 23 24 25 ·/// 26 /// 27 28 ///

, 1	PRAYER					
2	WHEREFORE, Complainant requests that a hearing be held on the matters herein					
2	alleged, and that following the hearing, the Board issue a decision:					
ا د	1. Revoking or suspending Optometry License No. 8638, issued to Casey Jon					
4						
5	Finn. Ordering Casey Jon Finn to pay the Board the reasonable costs of the					
. 6.	Harborn Colored With the March Colored Colored Colored Colored Colored Colored Colored Colored Colored Colored					
7	investigation and enforcement of this case, pursuant to Business and Professions Code section					
8.	125;3;					
9	3. Taking such other and further action as deemed necessary and proper.					
10	DATED: 2/27/07					
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13.	TARYN SMITH					
14	Executive Officer Board of Optometry					
15	State of California					
16	Complainant					
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Memo

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To:

Board Members

Date:

June 21, 2011

From:

Jessica Sieferman

Telephone:

(916) 575-7178

Probation Monitor

Subject: Agenda Item 6C - Petition for Reduction of Penalty and Early

Termination of Probation

The State Board of Optometry is being asked to consider the following Petitions:

Reduction of Penalty or Early Termination of Probation of:

Dr. Gregory Tom, O. D.

The Board is asked to grant or deny the petition after considering the facts presented at the hearing.

Deputy Attorney General, Michelle McCarron, will represent the interest of the public's health, safety and welfare, provide the petitioner's license history, as well as help the Board obtain the information it needs to evaluate the petition to reduce penalties or terminate probation.

The Board Members may ask questions, which should be simple and to the point and directed toward rehabilitation and assessing ability to practice safely, either with or without conditions. As stated in the California Code of Regulations (CCR), Section 1516, the criteria for determining whether a petitioner has shown rehabilitation is as follows:

CCR§ 1516. Criteria for rehabilitation

(a) When considering the denial of a certificate of registration under Section 480 of the Code, the Board, in evaluating the

rehabilitation of the applicant and his/her present eligibility for a certificate of registration, will consider the following criteria:

(1) The nature and severity of the act(s) or crime(s) under consideration as grounds for denial.

(2) Evidence of any act(s) committed subsequent to the act(s) or crime(s) under consideration as grounds for denial which also could be considered as grounds for denial under Section 480 of the Code.

(3) The time that has elapsed since commission of the act(s) or crime(s) referred to in subdivision (1) or (2).

- (4) The extent to which the applicant has complied with any terms of parole, probation, restitution, or any other sanctions lawfully imposed against the applicant.
- (5) Evidence, if any, of rehabilitation submitted by the applicant.
- (b) When considering the suspension or revocation of a certificate of registration on the groundress that the registrant has been convicted of a crime, the Board, in evaluating the rehabilitation of such person and his/her present eligibility for a license, will consider the following criteria:
- (1) Nature and severity of the act(s) or offense(s).
- (2) Total criminal record.
- (3) The time that has elapsed since commission of the act(s) or offense(s)
- (4) Whether the licensee has complied with any terms of parole, probation, restitution or any other sanctions lawfully imposed against the licensee.
- (5) If applicable, evidence of expungement proceedings pursuant to Section 1203.4 of the Penal Code.
- (6) Evidence, if any, of rehabilitation submitted by the licensee.
- (c) When considering a petition for reinstatement of a certificate of registration under Section 11522 of the Government Code, the Board shall evaluate evidence of rehabilitation submitted by the petitioner, considering those criteria of rehabilitation specified in subsection (b).

An Administrative Law Judge will sit with the Board and preside over the hearing to maintain order, determine admissibility of documents, assist the Board during closed session and write the Board's Decision.

If the Board decides to deny the Petition, it must state its reasons for doing so.

Below is a Probation Compliance Report, summarizing Dr. Tom's compliance throughout his entire probationary term.

PROBATION COMPLIANCE REPORT

Name of Optometrist: Dr. Gregory Lawrence Tom, O.D.

Case #: CC 2003-125 OPT License: #10427

Probation Monitor: Jessica Sieferman

Jurisdictional Document: Decision and Disciplinary Order

No. 2009040794

Term of Probation: January 1, 2010 - January 1, 2015

1) OBEY ALL LAWS: Did the Optometrist obey <u>all</u> laws, and report violations of any laws on time?

There is no public record of any violations, and Dr. Tom has not reported violating any laws since the effective date of the Decision.

2) RESTRICTED PRACTICE: Did the Optometrist comply with the prohibition of owning and operating his own practice?

No. During a probation meeting on May 27, 2011, Dr. Tom admitted to "volunteering" his optometric services at three colleges in California from January 25, 2010 through

June 30, 2010. Although Dr. Tom stated all of his services were "volunteer" services, he was paid a stipend by the colleges and paid cash by the students. Dr. Tom contracted with the colleges under the business name of "Advanced Optometric Eyecare." According to the California Secretary of States Office, "Advanced Optometric Eyecare" is an active business with Dr. Tom as the agent for services. Dr. Tom claims that, although he still owns this business, he does not use it to provide optometric services.

Did the Optometrist only practice at a supervised employment approved by the Board prior to commencing employment?

No. On May 27, 2011, Dr. Tom admitted to "volunteering" at three colleges without notifying the Board or having any form of supervision by another optometrist. Due to the fact Dr. Tom had contracts with the colleges, was paid stipends by the colleges and paid in cash by the students, this would not be considered "volunteering." Instead, this appears to be a form of employment that he failed to notify the Board about prior to the May 27, 2011 meeting. It was only *after* an unannounced visit from the Division of Investigations that Dr. Tom requested this meeting and admitted to these violations.

3) REPORTING: Did the Optometrist inform the Board in writing of any change of practice and residence within 15 days?

No. As previously stated above, Dr. Tom practiced optometry from January 25, 2010 through June 30, 2010. Dr. Tom did not inform the Board of the optometric services he provided to three colleges until May 27, 2011.

4) RESIDENCY OF PRACTICE: Did the Optometrist leave California to reside or practice during the probation term?

No, Dr. Tom did not leave California to reside or practice outside of state during her probation term.

5) COOPERATE WITH PROBATION SURVEILLANCE: Did the probationer comply with the Board's Probation Surveillance Program?

No. The Probation Surveillance Program includes surveillance of all conditions of his probation. Dr. Tom substantially violated the following conditions: 2) Restricted Practice, 3) Reporting, and 7) Maintain Records. As a result, he violated this condition as well.

In addition, this condition requires Dr. Tom to allow "access to [his] optometric practice and patient records upon request of the Board or its agent." An investigator from the Division of Investigation, acting as the Board's agent, requested access to patient records. Dr. Tom failed to provide access to the requested records.

6) MONITORING: Did the probationer comply with this condition throughout his probationary term?

No. Dr. Tom was required to submit a name for a monitor within 30 days of the effective date of the decision. Thirty days from the effective date was August 15, 2009. Dr. Tom did not submit a name for a monitor until November of 2009. The

monitor Dr. Tom submitted was not approved by the Board because he was a recent graduate and licensee.

Dr. Tom did not obtain an approved monitor until August of 2010. Dr. Robert DiMartino, O.D. was the Board approved monitor. Dr. DiMartino was provided Probation Monitoring Guidelines for monitoring Dr. Tom's practice. On September 15, 2010, Dr. DiMartino expressed concerns regarding the time specified for monitoring in the Probation Monitoring Guidelines. Specifically, Dr. DiMartino expressed concerns with the following statement: "The Monitor must be in personal attendance at Respondent's place of practice no less than 40 hours each six-month period of probation." Dr. DiMartino informed the Board that Dr. Tom only works once a day, "plus or minus, a week" and 40 hours each six month period seemed excessive.

Ms. Sieferman explained to Dr. DiMartino that the frequency outlines was just a guideline and not a requirement. She further explained the guidelines were created with a full-time optometrist in mind. Ms. Sieferman stated that if Dr. DiMartino believed 40 hours was too excessive and a shorter amount of time would suffice, please not the reasoning for the shorter time period in his reports to the Board.

However, since Dr. DiMartino was approved in August of 2010, the Board has **not** received any probation monitoring reports. The first letter Dr. DiMartino sent to the Board in regards to Dr. Tom's monitoring was in a letter addressed to Dr. Goldstein dated May 15, 2011 (Attached).

In the letter, Dr. DiMartino refers to himself as Dr. Tom's "mentor" rather than his monitor. Dr. DiMartino made one site visit when he was initially approved as Dr. Tom's monitor. Dr. DiMartino claimed to have reviewed a "patient list" of approximately 400 patients, but it does not appear that Dr. DiMartino reviewed any patient files.

7) MAINTAIN RECORDS: Did the probationer maintain his patient records according to the specification outlined in his order?

No. Dr. Tom failed to maintain records for patients he saw while provided optometric services to three colleges. These records were required to be kept "in a separate file or ledger, in chronological order, and shall make them available for inspection and copying by the board or its designee, upon request." Dr. Tom admitted, in the May 27, 2011 meeting that he did not maintain these records as described in this condition.

Were these records available for inspection and copying by the board or its designee, upon request?

No. Dr. Tom failed to make any records available for inspection to the DOI investigator acting on behalf of the Board.

8) EDUCATION COURSEWORK: Did the probationer complete 40 hours of pre-approved continuing education courses for each year of probation?

Yes. This condition required Dr. Tom to complete 40 hours per year of probation. Although the effective date of the Decision was July 15, 2009, none of the probation conditions were effective until his license was reinstated on January 1, 2010.

However, Dr. Tom started submitting continuing education hours in August of 2009. Dr. Tom has completely complied with this condition.

Did the probationer complete an ethics course of at least 8 hours in length?

Yes. The Board received confirmation from Dr. Morris Berman, O.D., that Dr. Tom successfully completed the ethics course requirement on October 12, 2009.

9) COMMUNITY SERVICE: Did the Optometrist complete all required Community Service?

Yes. Dr. Tom has provided community service to First Tee of Contra Costa and remained in compliance with the condition throughout his probationary period.

Did the Board receive "Verification of Community Service" reports timely from the Community Service Coordinator?

No. In a Notification of Noncompliance dated July 30, 2010, the Board notified Dr. Tom that, although he claimed have provided community service to First Tee of Contra Costa since the beginning of his probation on January 1, 2010, the Board had yet to receive any verification reports. Shortly thereafter, the Board received backdated verification forms for the community service coordinator.

10) PAYMENT OF COSTS: Did the Optometrist pay all costs owed to the Board?

Yes. Dr. Tom has paid the total costs of \$11,284.57 in full.

11) RESTITUTION: Did the probationer submit proof that he has made full restitution to VSP Vision Care within 90 days of the effective date?

No. Ninety days of the effective date of the Decision was October 13, 2009. In a Notification of Noncompliance dated July 30, 2010, the Board notified Dr. Tom that he had failed to submit proof that he has made full restitution to VSP. Dr. Tom did not pay VSP Restitution until August of 2010.

12) VIOLATION OF PROBATION: According to this condition, "If petitioner violates probation in any respect, the Board, after giving him notice and opportunity to be heard, may terminate probation and impose the stayed discipline, or such discipline as it deems appropriate." Did the Optometrist violate any condition of probation or any laws?

Yes. Dr. Tom has violated several conditions of probation as described above.

13) COMPLETION OF PROBATION: This condition just states that "[u]pon successful completion of probation, petitioner's certificate will be fully restored."

Dr. Tom has yet to complete Probation.

Signature of Probation Monitor

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Petition For Full Reinstatement

Introduction and Summary

by

Gregory Tom, O.D.

To: CA Board of Optometry and its members

2010 DEC -6 PH 4: 29

Re: Gregory Tom, O.D. 10427T, Petition for Full Reinstatement and reduction of probation

I would like to address this letter to the Board of Optometry and its members. It has been almost 20 months since I was last in front of you all. In May 2009, I was petitioning for reinstatement of my optometry license. I had been out of practice since 2007 and I had surrendered my license. In July 2009, the Board of Optometry and its members granted the return of my optometry license and placed me on probation for 5 years. Today, I am requesting my full reinstatement and removal of my probationary terms. Hopefully the enclosed documents will prove that I have learned and changed as a person and I have the ability to make sound ethical decisions. I have been very diligent, cooperative, and proactive in meeting all the Board's demands and my probationary requirements. In fact, I have done more than what was required to further prove my desire to return to Optometry in full capacity and regain your respect and trust.

I was a very good student and one of the top clinicians at the UC Berkeley School of Optometry. As a student, I participated in the Lions Sight Saver Foundation meetings, Lions Clubs, Red Cross, and helped anchor the Mobile Clinic at UC Berkeley. I continued to volunteer my time after graduation with these same organizations and added more volunteer services such as performing eye exams on prisoners in the CA Penal System. I visited local nursing homes and helped bed ridden patients throughout the area. I helped raise funds and provided glasses for financially challenged college students throughout the Bay Area. In other words, my whole career originated from the concept of "providing for others". It gave me a great deal of personal satisfaction to help others. A dream as a child was to become a doctor.

As I continued in Optometry, I uncharacteristically lost sight of the ethical line between what was best for the patient and what was best for the patient and the doctor. I never placed the patient in any risk but in rare circumstance took advantage of an insurance company to help benefit the patient. Even though this type of action is prevalent, it by no means makes it ethically correct.

My actions resulted in the loss of jobs for my staff, loss of the ability to pay the rent, loss of the ability to treat patients, loss of the ability to donate back to the community, and the loss of my ability to be a doctor and make a difference.

I have suffered not only the loss of my license to practice but my business which I spent 12 years building. I lost my reputation in the community and in the business sector as well. I have lost not only patients but many friends. The inability to practice optometry has forever changed my outlook on life. My loss of my license has prevented me from treating my own parents. My father has gone blind in one eye from a bleed in his retina. My mother suffered a sudden vision loss from anterior uveitis which has now lead to severe optic nerve problems and open angle glaucoma. My grandmother now has ARMD

and cataracts. The disgrace of not being able to treat my own family is scar that I will never forget. As a result, I will never forget my mistakes and how I placed financial gains as a priority. I have lost almost all our savings and we are negative each month on our mortgage and expenses. We are about to lose our condo based on not being able to afford the payments and further ruin our credit. I blame no one but myself. I fully realize the consequences of my actions and what is has cost me and my family. I sold my practices at greatly reduced prices that took me 12 years to build.

Rehabilitation is defined as the restoring of one's self to a satisfactory state or vindication of character to a previous acceptable level. Rehabilitation is the key to my applying for reinstatement. The process of rehabilitation began much earlier than the forfeiture of my license in 11-2007. While I still owned my optometry practices, I realized that changes were required. Admitting my wrong doings to my family and friends was excruciatingly painful and embarrassing. However, facing those fears and pain helped reinforce the magnitude of unethical decisions.

Watching patients depart as a result of being removed from insurance panels was yet another part of my rehabilitation. This emphasized the importance of how one poor decision affects many surrounding people and their families. I had to now answer to other insurance plans about what had happened. Patients were now choosing to leave the office because we could not accept their insurance. I could no longer provide care for some of favorite patients. They were disappointed in my offices. I felt terrible and guilty. More important than losing patients, I realized that my actions affected many people around my office I never realized. My staff was affected as there was less workable hours. All my vendors who serviced my office were affected negatively by my actions.

Selling of my offices was another step of my rehabilitation. The stages of shock, sadness, anger, and acceptance were all required. I matured a great deal during this process. I appreciated and viewed things a lot differently as a result. To lose one's life work and place of business is a life changing event and will be a permanent reminder of what can be lost.

Community service, working with kids at local schools and teaching teachers about the eyes between my license surrender and my probationary reinstatement (1/2010) has emphasized the trust the public placed on doctors. They believe implicitly in what we do for their families. I realized that I had violated that trust.

I have designed a educational course for preschool and elementary children to introduce them to the human eye. I presented this at my May 2009 hearing. It includes definitions about the eye and how the human eye is similar to a sheep eye. A sheep or bovine eye is used as an interactive live dissection with the students. It provides them a hands on experience. I dissect each part of the eye from the sclera, cornea, iris, pupil, lens, retina, tapetum, optic nerve and extraocular muscles. The response has been overwhelming with the students and they can't wait to do it again.

The First Tee of Contra Costa County is a non profit organization that was created to bring values and lessons to underprivileged communities. I taught life skills and how they relate to life and school and family. I recall several kids who had very poor attitudes and behaved poorly. Learning about their

community and how the children are raised made me understand how much of an impact I could have not only as a volunteer but as an optometrist. Teaching the core values (ex. Respect, Responsibility Accountability, Perseverance, etc) not only helped me impact these young students but also reemphasized their importance to my life. I now apply these teachings and practices to my family and my life.

Another rehabilitative measure has been keeping up with my continuing education. I have always kept up my continuing education even when I surrendered my license. However, I felt that I needed that to stay on top of my clinical knowledge. I also feel it was critical for me to associate with my peers and prove to myself my dedication to optometry and to making it back to active duty as an optometrist. It did remind me each hour of each day of each session that I was no longer fully licensed as a result of my poor decision making. This fact alone is a painful reminder each day.

In addition, I have continued to study each month the articles from Optometry Management, Optometry Today, Optometric Physician, Review of Optometry, Eye and Contact Lens Science and Clinical Practice, Vision Monday, and 20/20.

Fortunately, all my friends and family claim that they have seen me change for the better over the past several years. They say my demeanor is much more caring and patient. I am more appreciative of others and I value now every little positive asset that someone presents. In other words, I have mentally changed and the old person is now gone and what is left is a much better person who has better morals and higher standards. At this point, I am requesting the Board of Optometry grant full reinstate of my optometry license. I promise to continually donate my time and efforts to the community. I would treasure the opportunity to rebuild my career and more importantly, rebuild the foundation for my family. I am positive that I am completely rehabilitated from my past actions. I promise to practice optometry with the goal of helping my fellow man and contributing to making the community a better place. I want to be able help as many people as possible. I also plan on contacting VSP and making an offer to them donate 50% of all the exam fees to charity. I want to earn their trust again also and prove to them that its not all about the finances but the ability to help those around me.

My family is another factor which will not allow me to ever make an unethical and poor judgment. Just recently, my son, Gregory Ryan, said I want to be a doctor dad like you. I want to be his role model and show him how we help people in need. I want my son and daughter to be proud of their dad so they have something to look forward to as they grow up. I want to be able to volunteer at the local churches or Lion's clubs to help check eyes for those who can't afford eye care. I want to work with the school nurses and help them raise funds for their Health Centers which are experiencing budget deficits. I know I can make a difference if I am given the opportunity too.

Another important factor to consider is that these poor decisions occurred while I was single. Being a father has changed my perspective on life. I have a partner, my wife Claire, who I love dearly and want

to support her and our family. I realize how my actions are going to be watched and mimicked by my children. Being a responsible fatherhood is part of my rehabilitation. Every day I will be reminded of what I have to be held responsible for, my family.

In summary, I am requesting that the Board of Optometry of CA grant me full reinstatement of my optometry license and remove my probation. I have worked very hard and diligently to prove to you all that I have permanently changed as a person. I have the enhanced ability to make tough ethical decisions. My past lessons, rehabilitation, and family will never allow me to make such poor decisions. I will have to live with those poor decisions the rest of my life. I still have the passion an desire to impact my community and those around me. I want to Optometry to not only help patients but to help my fellow man and make the communities around me better.

I hope the Board of Optometry of CA can realize the sacrifice I have imparted on my family also. My wife has been so supportive. In this economy, I have found work very difficult. I have contacted many private practitioners for jobs and every one shies away from me once I explain I am on probation. Even the corporate jobs do not respond to me once I have disclosed this probation. My one and only job with Dr. Chin is limited. I am of very little value to any employer as I cannot grow or help him grow.

Insurance companies won't allow many doctors to be on probation and be part of their panels. I am asking the Board to consider this factor also. Full reinstatement without probation will at least allow me to search for work and support my family. I realize I may never be allowed on these vision plans as a result of my past actions. However, at least, I would have a chance to help my family and support them as they have supported me. My greatest asset is how I can help others. I was trained to help others and I am very good at it. Please consider these factors and my commitment to return to servicing the public in good trust.

I thank you for your time and consideration in allowing me this time. I will not disappoint the Board nor the profession of Optometry.

Yours Truly,

Gregory Tom, O.D.

Board of Optometry

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170/(866) 585-2666 www.optometry.ca.gov



PETITION FOR REDUCTION OF PENALTY OR EARLY TERMINATION OF PROBATION

No petition for reduction of penalty or early termination of probation will be entertained until one year after the effective date of the Board's disciplinary action. The decision of the petition will be made by the full Board and in accordance with the attached standards for reinstatement or reduction of penalty. Early release from probation or a modification of the terms of probation will be provided only in exceptional circumstances, such as when the Board determines that the penalty or probationary terms imposed have been excessive, considering both the violation of law charged and the supporting evidence, or when there is substantive evidence that there is no more need for the degree of probationary supervision as set forth in the original terms and conditions. As a rule, no reduction of penalty or early termination of probation will be granted unless the probationer has at all times been in compliance with the terms of probation.

PLEASE TYP	E OR PRINT LEGIBL	Υ				
1. NAME (FIRST)		(MIDDLE) (LAST)			CERTIFICATE OF REGISTRATION NO.	
	GREGURT	L	Tom			
2. ADDRESS	(NUMBER)	(STREET)			DATE OF BIRTH . `	
	202 Asp	renwood CT	·		7/16/67	
(CITY)	(STATE)	(ZIP CODE)			TELEPHONE	
Sun R	2mmon CA	94182			(570)201815-2	
3. PHYSICAL	DESCRIPTION	(HEIGHT)	(WEIGHT) (EYE	COLOR)	(HAIR COLOR)	
				Bna	BNN	
4. EDUCATION	ON: NAME(S) OF SC	CHOOL(S) OR COLLEGE	(S) OF OPTOMETRY A	TTENDED	UCSSO	
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	UCBSO					
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(CITY)	(STATE)	(ZIP CODE)		•		
Benkel	es ca	94720				
5. ARE YOU	CURRENTLY LICEN	ISED IN ANY OTHER ST	ATE? YES			
STATE	LICENSE NO.	ISSUE DATE	EXPIRATION DATE	LICENSE	STATUS	
6. List location	ns, dates, and types o	l f practice for 5 years prio	ı r to discipline of your Cali	fornia licer	ise.	
LOCATION		DATE FROM	DATE TO	TYPE OF	PRACTICE	
	mon let grist	09/94	10/07	privat		
,	have, San Mater	04/95	15/07	phivat	ī	
	157 ST, SANJOSE	01/2001	10/2003	private,		

	,	Are you or have you ever been addicted to the use of narcotics or alcohol?	YES NO)
			YES NO
-	8.	Are you or have you ever suffered from a contagious disease?	
-	9.	Are you or have you ever been under observation or treatment for mental disorders, alcoholism or narcotic addiction?	YES NO.
	10	Have you ever been arrested, convicted or pled no contest to a violation of any law of a foreign country, the United States, any state, or a local ordinance? you must include all convictions, including those that have been set aside under Penal Code Section 1203.4 (which includes diversion programs)	YES (NO)
	•	Are you now on probation or parole for any criminal or administrative violations in this state or any other state? (Attach certified copies of all disciplinary or court documents)	YES NO
	12	Have you ever had disciplinary action taken against your optometric license in this state or any other state?	YES NO
	IF EX	YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, YOU MUST ATTACHMENT A STATEN PLANATION GIVING FULL DETAILS.	
		ON A SEPARATE SHEET OF PAPER PROVIDE THE FOLLOWING INFORMATION	1
	13	. List the date of disciplinary action taken against your license and explain fully the cause of the disciplina	ry action.
		. Explain fully why you feel your license should be restored, or the disciplinary penalty reduced.	
	15	Describe in detail your activities and occupation since the date of the disciplinary action; include dates, of locations.	
		Describe any rehabilitative or corrective measures you have taken since your license was disciplined to petition.	
	1,7	List all post-graduate or refresher courses, with dates, location and type of course, you have taken sinc was disciplined.	e your license
		3. List all optometric literature you have studied during the last year.	
	19	9. List all continuing education courses you have completed since your license was disciplined.	
		 List names, addresses and telephone numbers of persons submitting letters of recommendation accor petition. 	
	, C(declare under penalty of perjury under the laws of the State of California that the answers and information ompleting this petition, and any attachments, are true and I understand and agree that any misstatements acts will be cause for the rejection of this petition.	given by me in of material
	D	Pacts will be cause for the rejection of this petition. Signature Signature	. .
	re re is ii	All items of information requested in this petition are mandatory. Failure to provide any of the requested in esult in the petition being rejected as incomplete. The information will be used to determine qualifications einstatement, reduction of penalty or early termination of probation. The person responsible for informations the Executive Officer of the Board of Optometry at 2420 Del Paso Road, Suite 255, Sacramento, Califor information may be transferred to another governmental agency such as a law enforcement agency, if necessary in the confidence of the confidential information and exempted by Section 1798.3 of the Civil Code.	on maintenance nia, 95834. This essary to

Petition for Reinstatement

Answers to questions 12 - 20

Question 12: Have you ever had disciplinary action taken against your optometric license in this state or any other state? Please attach a statement of explanation

Question 13: List the date of disciplinary action taken against your license and explain fully the cause of the disciplinary action.

These questions are very similar and two explanations are redundant. I will address both completely now.

Yes, I have had disciplinary action taken against my optometric license in the state of CA. I actually voluntarily surrendered my license in October 2007 and the Board of Optometry accepted this as of April 2008. The result of this surrender stems from findings from the Board of Optometry and Department of Justice, Office of the Attorney General in regards to accusation no 2003-125.

Vision Service Plan, VSP, performed its annual audit at my office locations. My San Mateo office was audited and found to have zero violations. Subsequent audits of my San Ramon and San Jose office produced several discrepancies with regards to billing on medically necessary contact lenses and glasses over contacts and prescription sunglasses for children.

At these offices, VSP specifically audited only patients that involved the above categories, necessary contacts and sunglasses on children. There were total of 30 files (total of 20 families) audited in San Jose and 37 files (total of 26 families) audited in San Ramon. The majority of the claims were actually accurately diagnosed.

We had our specialist, Dr. Daniel Lau review all the charts and he agreed with most of the diagnosis and indicated there was evidence of overbilling on contact lens supplies and children's sunglasses. VSP claimed that we owed them approximately \$85,000 in fees of which \$50,000 was paid immediately at the VSP hearing. Many of the charges were contested but VSP never responded to the claims. Several patients were in the middle of their fittings and had yet to return for follow up and they did wear contact lenses and yet VSP did not respond to our evidence. The difference was withheld from our offices but VSP did not provide any means of accounting.

Many of the claims were for medically necessary contact lenses. These patients had prescriptions that were -10.00 or worse and met the need for medically necessary under VSP guidelines. The majority of the claims actually met the requirements but ones that were just under, I wrote the prescription in + cyl form. In this manner, they would meet the requirements. In addition, VSP had always allowed a back up pair of lenses for patients that meet these requirements. However, VSP changed its rules to eliminate this and only allowed glasses over contacts. I had several patients negatively react to this change. I then would request the lab remove the lenses and replace them with their full prescription so they now have a back up pair. I felt at the time the insurance company was not taking care of the

patient and looking at the loss of revenue instead. The patient still paid for all their costs and got their contacts covered also. We were billing for the maximum contact lens service fee and maximum number of contact lenses boxes. We used a prefilled out form from VSP and always got paid the same amount. The fees received were in excess of those charged and in most cases discounted if you were a private paying patient. The patient care and diagnosis was never compromised; however, the patient did receive benefits they would not normally have received under the new guidelines. Thus, the doctor and patient benefited financially. It was a very foolish, irresponsible, and unethical, cavalier mistake to try and take something from an insurance company even though it benefited the patient. In addition, their children were given in some cases prescription sunglasses and in some cases just non-prescription sunglasses. I understood that VSP did not allow nonprescription lenses:

When I first obtained my optometry license I worked for a few private VSP doctors and they showed me how sunglasses were approved with just the smallest of prescriptions. I did not feel comfortable in giving prescription lenses to those who did not require it, so I contacted the lab and asked them if there was a way to remove the lenses and provide them with a better lens. They said yes and provided plano polycarbonate grey lenses. These actions were obviously not appropriate and very unprofessional and unethical. At the time, I thought it was a great way to promote sunglasses and get them covered under their insurance and help the parents out who were financially challenged. This method of billing was only done on these select patients. VSP at its hearing removed me from its panel without the option for reapplying. Other major insurance companies were made aware of VSP findings but did not remove me and did perform audits but no billing discrepancies were found and I remained in good status until I sold the businesses.

The overbilling accounted for less than 0.5% of the total number of yearly exams. However, this is no way justifies what was done even if it was just one patient. These occurrences occurred during my control of the offices and I am solely responsible for the results and its disciplinary actions, loss of my practices and loss of my license.

14. Explain why you feel your license should be restored, or the disciplinary penalty reduced.

I feel that my probation be reduced and my license be fully reinstated because of my compliance with all the Board's required terms and actions over the last 20 months (since 05/09 last Board Hearing).

Since my last hearing with the Board in 05/09, I have been proactive in serving my probation and meeting its terms. I have been in constant communication with my original enforcement manager, Margie McGavin and her successor, Jessica Sieferman. In fact, Ms. McGavin had stated that I was being very proactive and diligent in meeting my probation requirements ahead of schedule. I told her that I was very excited to be placed on probation and felt very fortunate to have a second chance to prove my character.

First, I started my community service on July 15, 2009, less than 30 days after the Board's issued its initial decision (August 26, 2009). I was not required to start at this time until my probation was suppose to begin on January 2010. However, I wanted to redeem myself and I wanted to contribute back to the community. I wanted to be responsible for my poor decisions and repay back to the community. I was required to serve 10 hrs per month and I doubled the requirements and also started early.

My community service requires that I teach life lessons to your adults 17 and under. Each day we review the lesson of the week. The First Tee's foundation is its 9 core values: Respect, Responsibility, Perseverance, Courtesy, Judgment, Honesty, Integrity, Sportsmanship, and Confidence. Each week I teach students their meanings and ask for examples. We then relate them to school and family and our outside world and how we can make it better. Interestingly, these values are the ones that I have relearned and apply each day to my life. They are a constant reminder of my mistakes and poor judgment in my past has affected me and my family. I am very dedicated to this program and want to make sure these students stay on the right path and make better choices. Coincidently, it has also taught me how to be a better person and to become more responsible and respectful of those around me. This community service has been a true blessing in disguise and has taught me invaluable lessons.

I have continued to also serve my community by helping out at the local schools since my probation. I have volunteered to educate the local teachers about children's vision and what to look for and how to address certain visual problems.

I completed the mandated ethic classes of at least 8 hrs or more that was designed by Dr. Berman at SCCO. I interviewed at SCCO with Dr. Tony Carnevali for several hours in his office. We reviewed and discussed several articles that were included in his CD. I then proceeded to write 3 articles of at least 600 words or more that discusses each topic and how it related to optometry and myself.

I have continued to strengthen my optometric background by studying optometric manuals each month from Review of Optometry, Optometric Physician, Optometric Management, Optometry Today, Contact Lens Science and several others.

I have continued to attend classes for continuing education. I have attended the Berkeley Practicum on January 2009 (21 hrs); Morgan Sarver symposium April 2009 (21hrs); COPE Classes (9hrs); Survival Strategies: Anti-Infectives, Ocular Surface Disease, NTG (August 2009 (4hrs); Prime Time December 2009 (25hrs); Berkeley Symposium January 2010 (20 hrs); 60th Annual Educational Program and Reunion for UCBSO Alumni Assoc October 2010 (7 hrs); Optometric Glaucoma Symposium November 2010 (10hrs): AOA conference November 2010 (3 hrs); Prime Time December 2010 (25 hrs); and an additional 16 hrs of COPE courses to be finished at end of December 2010. I am also scheduled to do the Berkeley Symposium January 2011 (20hrs)

With over 81 hrs completed in 2010 alone, I am well ahead of my required CE hours.

I have also made full restitution to VSP in the amount of \$8785.64. As you can see from the letter from Thomas Jones at VSP, the balance is paid in full. One of requirements for my probation was to resolve this within 90 days. I have attached several certified receipts from the USPS that shows I have sent numerous communications to VSP with no response. I also sent them an email. I coordinated my efforts with Margie McGavin and she was very aware of the difficulties I was having communicating with them. In fact, she actually had to make a few calls to VSP to help me. This is the reason for the delay in making the restitution within 90 days. I believe that shows that I attempted to stay in compliance with my probation.

I feel that my efforts and actions over the past 20 months show that I am a changed person with new values and dedication to my profession. I will apply what I have experienced and learned to improve my patient care and become a better optometrist with an obvious respect for my patients and surroundings. I realize the effect my actions have on everyone around me including my own family. I have contributed back to the community and will continue to contribute even when my probation is completed. The community and the Board will never have to worry about my ability to self regulate my self in making good ethical and sound decisions. The lessons I have learned are life long reminders each day and night.

I am requesting for my full reinstatement for the simple reason of trying to support my family. I have found it extremely challenging to find a job. Even with my 16 yrs of experience, many doctors will NOT hire an optometrist on probation. They do not want the added responsibility of an audit by the Board of their records nor do they want the burden of extra work. I have been passed for jobs in favor of less experienced doctors with clean histories. Major companies will not hire a doctor on probation at all. Some have said they will consider me once I have been fully reinstated. Furthermore, during these tough economic times many private practitioners are not hiring. In fact, many are letting their associates go because they have fewer patients.

I have a family of two children, Gregory (5 yrs) and Keira (2yrs). My wife works but we cannot even meet our mortgage and daily expenses. We are in a precarious financial position. I need to find work

and the only way would be to start fresh with my full license reinstatement. This would provide me the opportunity to either start a practice or shared overhead position. At least, I would have a chance to support my family. I understand my past actions and mistakes. I am asking the Board for a second chance to revive my career. I will still have to petition all the insurance companies for membership but at least I will have a fair chance to obtain a job or become a panel doctor. I hope you understand our position. I have worked very hard to climb to this point and hope you can see my efforts.

I have learned to accept myself and I am a much better person, husband, father, and with your understanding and forgiveness, a better optometrist. My family and I thank you for your consideration.

15. Describe in detail your activities and occupation since the date of the disciplinary action; include dates, employers, and locations.

I voluntarily surrendered my optometry license in October 2007. The Board of Optometry accepted my resignation in April 2008. Without my license, I realize that I had to change fields and could not practice optometry. I worked in the banking industry for several years until my probation was active in July 15, 2009. For a period of time, I was unemployed as I was laid off from work. I needed that experience to help me appreciate my schooling and the profession of Optometry and what it stands for. In addition, being laid off was a humbling experience that I will never forget. I felt worthless and it reminded me of what I had lost, my practices, my career, and my profession. I will never make that mistake again.

On June 19, 2009, I received the Boards decision to allow me to return to Optometry on a probationary terms. I immediately started volunteering at my approved community service, The First Tee. I began volunteering for this community service organization on July 15, 2009. I was not required to start this early but I was so excited to be given a second chance. I volunteered monthly more than double the required minimum hours by the Board. The director, Larry Lee, told me I was a valuable asset to the organization and often I ran the classes in his absence. As stated previously, we taught life lesson and 9 cores values to students and how they relate to family, school, and our surroundings. I have continued to volunteer at this organization and I will continue even when my probation ends. It's a great environment and I want to continue affecting children's lives outside of the optometry office.

As for employment, it has been a true disappointment and battle. In these economic times, doctors are laying off their associates, senior O.D.'s are working more and not retiring, and hospitals and chains are not hiring. Furthermore, my interview often results in a common outcome once I tell them I am on probation and why.

I have found one O.D. to work 1 to 1.5 days on average per week. Dr. Chin is a new graduate who opened a practice at 63 W Angela St., Pleasanton, CA. I have helped him with not only seeing some patients but also with his office set up, staff training, and practice management. However, I have not been able to grow significantly within his office because its too new and there aren't enough patients. Furthermore, since he is the primary doctor and he is on the insurance panels, new patients often are directed towards him. I have been able to generate patients from my old patients, friends, and families.

Based on this limited work, I have not been able to support my family. Many of you on the Board know what employed ODs make and its not very much especially in today's market. This is the reason for my request for full reinstatement. I hope to at least have a chance to apply to some insurance panels and then build a patient base and at least have a chance to try and survive as an optometrist in CA.

16. Describe any rehabilitative or corrective measures you have taken since your license was disciplined to support your petition.

Part of my initial rehabilitation measures started very early in 2006 when I sold my optometry practices. It did not matter what the circumstances were regarding the unprofessional conduct actions. The bottom line is that it happened and it was my responsibility. I decided then that I needed to be accountable for my actions. Each day leading up to the sale was such a painful reminder of what poor decisions I had made. I questioned the predicament I just put my new wife in and the commitment that I had made to her. I was ashamed for my name and for my family. Part of the rehabilitation was to let go of something that I had worked so hard since my graduation from optometry school in 1994. Each day since it was sold is a harsh reminder.

When I subsequently surrendered my license in October 2007, the shattering of my professional career had been complete. I could no longer practice optometry and I could not even care for my own family. lost my job, my source of income, my lifework, my friends and patients, the respect of the my peers and the loss of my license. Many times it takes a catastrophic event to change one's perception or outlook on life. This was it for me.

Since that time I have worked in the banking industry and discovered how blessed I was to have completed optometry school and been indoctrinated into such a respectful and ethical profession. You never really appreciate it until it is taken away.

I decided that my goal would be to try and pay my dues to society and return to optometry one day. I started by taking some ethics classes through the Real Estate Board. I studied ethics and principles and even passed my real estate exam. I do not practice real estate at all and its licensing was not required in any of my bank positions. I wanted it because of the exposure to the ethics requirement. In addition, I recently completed another 3 hr ethics course and passed (April 2009).

In September 2010, I also completed continuing education courses in CA mortgage brokering which included an ethics course. I passed both a Federal and State Test which was 90 minutes on law, ethics, and compliance. These additional courses have only further reinforced ethical and sound decision making and how it applies every day activities.

I have continued to attend classes for continuing education. I have attended the Berkeley Practicum on January 2009 (21 hrs); Morgan Sarver symposium April 2009 (21hrs); COPE Classes (9hrs); Survival Strategies: Anti-Infectives, Ocular Surface Disease, NTG (August 2009 (4hrs); Prime Time December 2009 (25hrs); Berkeley Symposium January 2010 (20 hrs); 60th Annual Educational Program and Reunion for UCBSO Alumni Assoc October 2010 (7 hrs); Optometric Glaucoma Symposium November 2010 (10hrs): AOA conference November 2010 (3 hrs); Prime Time December 2010 (25 hrs); and an additional 16 hrs of COPE courses to be finished at end of December 2010. I am also scheduled to do the Berkeley Symposium January 2011 (20hrs)

I have also been working with my local community by volunteering at a local preschool to help children. I work with them in their arts and crafts and teach them about behaving one another and respecting one another. I have designed a introduction course to the human eye for preschool and elementary students. I teach them about the structures in their eyes such as the cornea, retina, lens, optic nerve, pupil and muscles. I actually perform a hands on dissection of either a bovine or sheep eye and then I can compare the pupil shapes and demonstrate the lens magnifying characteristics. The response and wide eyes of the students are priceless. The excitement and overwhelming number of questions even from the preschool students is priceless. The response from the teachers has been fantastic. The short presentation is enclosed: It takes about a minimum of one hr but often runs much longer. This volunteer work has been very rewarding and I plan to continue it upon returning to optometry. I have been talking to local high schools and the science teachers welcome the idea and like the experience for the students for career exposure.

My community service time with the First Tee of Contra Costa County involves teaching your children life lessons and goals. I was very proactive in volunteering for this task. I started in July 2009. The Board only asked that I start in January 2010. So I started 6 months early and many months I volunteered much more than the 10 hrs required. I feel this effort shows my desire to repay my debt to society and prove that I can be trusted to return to Optometry in full capacity. In addition, it shows my desire to positively affect youths and working with them to make better life decisions.

My community service requires that I teach life lessons to your adults 17 and under. Each day we review the lesson of the week. The First Tee's foundation is its 9 core values: Respect, Responsibility, Perseverance, Courtesy, Judgment, Honesty, Integrity, Sportsmanship, and Confidence. Each week I teach students their meanings and ask for examples. We then relate them to school and family and our outside world and how we can make it better. Interestingly, these values are the ones that I have relearned and apply each day to my life. They are a constant reminder of my mistakes and poor judgment in my past has affected me and my family. I am very dedicated to this program and want to make sure these students stay on the right path and make better choices. Coincidently, it has also taught me how to be a better person and to become more responsible and respectful of those around me. This community service has been a true blessing in disguise and has taught me invaluable lessons.

I concluded that its best to start at the youngest age and try and serve as a role model for the children. By giving back to the community, I feel I have contributed something back in the name of optometry and that I have made an impression on these young children's lives. Personally, I believe it has put me back in touch with people and made me realize how much I do care about others. I want to be back to help these children and their parents. I even discovered an organization was doing vision screenings. After looking at their screening tests and personal (local health students at junior colleges), I realized that I, optometry, could help make this a better system and find more of those in need.

17. No courses were taken except for continuing education

18. List all optometric literature you have studied during the last year.

- 1. Review of Optometry
- 2. Optometric Physician
- 3. Optometric Management
- 4. Eye and Contact Lens Science and Clinical Practice
- 5. Optometry Today
- 6. Vision Monday
- 7. 20/20

Here is a sample list of the various articles that I have read and studied in the last 12 months

Get Ready, Get Set, Get E-Prescribing

Is Your Practice ADA Friendly?

Melatonin Shows Promise as Safer Uveitis Treatment

When OTC is Not OK

Study: AMD Patients Can Learn to Improve Sight

Wm Leads to Retinopathy

Individualized Drugs for Individual Needs

Dry Eye Syndrome Coding Issues

Epiphora Epiphany

Posterior Vitreous Detachment: A Common Process with Potential for Ocular Morbidity

Future Advances in Glaucoma Therapy

Win the Battle Against MRSA

When Dry Eye Therapy Fails

CSC: A Serious Concern?

Must Elderly Drivers Undergo Vision Screening?

The Styes Have It

Switch to ICD-10 Will Cost You

LASIK's Impact on Glaucoma

How Will Obama Affect Optometry?

Find the Perfect Match for Your Presbyopic Patients

Multiple Multifocal Lenses Make It Easy

Exotropia Triples the Risk for Mental Illness

Take the Wayefront View on IOLs

This is NOT Dry Eve

Credit Relief in a Sick Economy

Is AMD Really a Systemic Disease?

Stop Prostaglandin for Cataract?

Viral Trouble, Doubled

Presbyopic Lenses: an Evolution or a Revolution?

Your Role in the Care of Patients With MS

Comanaging VT After CITT

19. List all continuing education courses you have completed since your license was disciplined.

- 1. Berkeley Practicum on January 2009 (21 hrs)
- 2. Morgan Sarver symposium April 2009 (21hrs)
- 3. COPE Classes (9hrs)
- 4. Survival Strategies: Anti-Infectives, Ocular Surface Disease, NTG (August 2009 (4hrs)
- 5. Prime Time December 2009 (25hrs)
- 6. Berkeley Symposium January 2010 (20 hrs)
- 7. 60th Annual Educational Program and Reunion for UCBSO Alumni Assoc October 2010 (7 hrs)
- 8. Optometric Glaucoma Symposium November 2010 (10hrs)
- 9. AOA conference November 2010 (3 hrs).
- 10. Prime Time December 2010 (25 hrs)
- 11. Additional 16 hrs of COPE courses to be finished at end of December 2010.
- 12. Berkeley Symposium January 2011 (20hrs)

Letters of Recommendation

20. List names, addresses, and telephone numbers of persons submitting letters of recommendations accompanying this petition.

Radbert Chin, O.D. 63 W Angela St. Pleasanton, CA 94566 925-456-4393

Robert Dimartino, O.D. ------Dr. Dimartino letter will arrive separately 402 Minor Hall Berkeley, CA 94720 510-642-2020

Braden C. Woods Assistant D. A. San Francisco, CA 44 Fairfield Dr San Francisco, CA 94127 415-640-5898

Richard Tamor
Attorney at Law
1901 Harrison 9th Floor
Oakland, CA 94612
510-874-4170

Russell Wong Learning Disability Specialist Foothill College 12345 El Monte Rd Los Altos Hills, CA 94022 650-949-6040

Claire Tom, M.B.A.
Communications Analyst - Product Manager
Chevron Information Design & Communications (IDC)
San Ramon ,CA 94582
925-842-0467

Larry Lee Program Director The First Tee of Contra Costa County 925-963-0740 BERKELEY • DAVIS • IRVINE • LOS ANGELES • RIVERSIDE • SAN DIEGO • SAN FRANCISCO



Robert B. DiMartino, O.D., M.S., F.A.A.O. Professor of Clinical Optometry

School of Optometry Berkeley, California 94720-2020

May 15, 2011

Lee Goldstein, O.D. President, State Board of Optometry 2420 Del Paso Road, Suite 255 Sacramento, CA 95834

RE: Gregory Tom, O.D.

Dear Dr. Goldstein:

I have been asked to mentor Dr. Greg Tom during his probation period. During the past year I have completed the following in execution of this responsibility:

- 1) Dr. Tom and I met professionally at three continuing education meetings.
- 2) I have met one additional time with Dr. Tom at the beginning of his probation period.
- 3) I have made a site visit to Dr. Tom's place of practice that included a review of charts.
- 4) Dr. Tom and I have communicated regularly by email and telephone.
- 5) I have reviewed Dr. Tom's patient list of approximately 400 patients in 2010 and an equal number thus far in 2011.

The mentoring guidelines that Ms. Sieferman sent me do not seem appropriate. Dr. Tom has been evaluating only a few patients per day and works about two partial days per week. I think that neither Dr. Tom, the patients, nor the Boards' interests would be served by following the guidelines that I was provided. I have chosen to take a more reasonable approach given the volume of patients that Dr. Tom has been seeing. Given the increased number of patients in 2011 (projected to be twice the census in 2010), some additional oversight may be indicated.

I hope my actions are consistent with the role of mentoring Dr. Tom. Please advise me if additional or closer supervision is necessary to meet the Board's needs.

Sincerely,

Robert B. DiMartino, O.D., M.S., F.A.A.O.

From: Russell Wong

Learning Disability Specialist/Instructor

Foothill College

I am Russell Wong, an instructor/Leaning Disability Specialist at Foothill College in Los Altos, Ca. I have known Dr. Tom my entire life. Greg's dream was to be a doctor and he always said that he wanted to help as many people as he could. I know that when he surrendered his optometry license he was devastated. His passion in life had been taken away and he did not know what to do. He wanted so badly to help patients. What was more difficult was that he was very well known in the community. He was a past Board member for the San Ramon Chamber of Commerce. He was a Board member for the Pacific Laser Eye Center. He would often see patients in the community and many asked about his return to practice as they missed his professionalism and advice.

Dr. Tom has always been one of the most giving people I have known. He has always been more than willing to share his knowledge to help others. He designed the "Colored Chalk Test" that one a state award. He utilized this color vision test to help differentiate students labeled as learning disabled with those that had a color deficiency. Being a Learning Diasbled Specialist I found this test to be very profound and very helpful.

I know that Dr. Tom was temporarily put on probation and allowed to practice optometry. I am aware of his community service job. I also know that he constantly puts in more than the required hours each month. He advised me that he was going to be starting his volunteer work early in July 2009. I asked why he was starting in July when he was to begin in January 2010. He told me that he needed to do it to make it up to the community and to prove that he was committed to changing himself. I have seen him devote up to 20 hrs each month towards his volunteer work. He has mentioned that he would continue his volunteer work even when he obtained his full licensure. Working with these youths has definitely helped rehab Greg's attitude and moral character. He is more like a teacher and role model than just a volunteer. I can see this in his mannerisms and how he speaks about his work.

I have visited his work place where he is an employed doctor. I know his schedule is limited to only a handful of days per month. From what I understand, its because of limited patients in a new practice.

Braden C. Woods 44 Fairfield Way San Francisco, CA 94127

November 26, 2010

Re: Dr. Greg Tom, in support of his reinstatement

To Whom It May Concern:

I am writing on behalf of Dr. Greg Tom, in anticipation of the end of his probation. He has demonstrated his commitment to fulfilling the terms of his probation in order to be fully reinstated as a licensed optometrist.

Since summer of 2009, Greg has completed his required 10 hours of volunteer community service at First Tee of Contra Costa. And, in typical Greg fashion, he has given more than what was asked of him, serving additional volunteer hours each month and even stepping in for the instructor when needed. At Hacienda Child Development and Corvalis Elementary School, Dr. Tom has become a friendly and familiar face, a fun and informative doctor who educates teachers about children's eye care and educates children about vision.

I. personally, have visited Greg's office on two occasions for exams and to be outfitted with reading glasses. I have seen him interact with patients of all ages and backgrounds, always providing quality services, sound advice, and his undivided attention.

Greg has shared with me his regrets and remorse about his past, as well as his sincere dedication to strive to be the best doctor he can be in the future. In these past 18 months. I have seen first-hand the changes in his attitude and demeanor. I have known Greg, and his extended family, since we were college roommates at U.C. Berkeley. In my position as Assistant District Attorney for San Francisco (Head of Homicide Unit), I am frequently called upon to access a person's integrity and sincerity. Regarding Greg. I have every confidence in his intensions and abilities. I have seen him work through his probationary period with humility and dedication to regaining full reinstatement of his license. The Dr. Greg Tom I see today is the one I have always known at the core: a man of strong character who is dedicated to being the best doctor to his patients, a loving and responsible husband, father, and son, and a contributing member of his community.

Please contact me by phone or e-mail if I can provide any additional information.

Regards.

Mobile: 415-640-5898

bradencwoods850@hotmail.com

TAMOR & TAMOR

ATTORNEYS AT LAW

November 29, 2010

RE

REFERENCE LETTER FOR DR. GREGORY TOM

TO WHOM IT MAY CONCERN:

I have known Dr. Tom for over seven (7) years as his attorney on various matters and I am writing this letter on his behalf.

I am aware that Dr. Tom's license was reinstated on a probationary basis this past January 2010. Acknowledging and accepting his unprofessional conduct and business practices, Dr. Tom voluntarily surrendered his license in September 2007. This life changing decision affected him personally and greatly affected his family. I still remember the remorse and sadness he felt when I assisted him with the sale of his practices.

Over the past 18 months I know that Dr. Tom has worked extremely hard to re-establish himself as an Optometrist. During interviews, truthfully revealing his professional history was a very humbling and embarrassing experience for him. Nevertheless, undiscouraged during this difficult time, Dr. Tom has continued to expand his optometric knowledge through continuing education, exceeding the hours required by the Board of Optometry. In addition, having volunteered up to 20 hours a month of his time, he has made a solid commitment to community service—community service he started early in July 2009 even though he was not required to begin until January 2010.

I believe in Dr. Tom and his character. He has clearly proven he has the ability to self monitor his actions and thus I believe the California Board of Optometry should consider his full license reinstatement and remove his probation.

Very Truly Yours,

Tamor & Tamor

By: Richard A. Tamor

CA State Board of Optometry 2420 Del Paso Rd Sacramento, CA 95834

Re: Dr. Gregory Tom Petition

November 18, 2010

I have been asked by Dr. Gregory Tom to write a letter for his upcoming hearing with the CA State Board of Optometry. My name is Radbert Chin, O.D. and I graduated from The New England College of Optometry in Boston, MA. I met Dr. Tom over a year ago when we were introduced at a party. I told him about my plan to open an office in the Bay Area. We chatted for a bit and I was enlightened with the amount of knowledge he possessed and the willingness he displayed in trying to help me succeed.

After I drafted my business plan, I asked Dr. Tom if he would be open to meeting again for some more constructive criticism. We gathered together and he reviewed everything with great detail. I remember that our deepest conversation was not about the practice, but rather about each other. Why did we decide to become optometrists? What made us want to go into health care? It definitely was not for fame or fortune; rather, it was because each of us wanted to help others. We talked about the many changes of optometry throughout the years and the new advancements in technology that enable optometrists to better aide patients. I found him to be very passionate about our discipline, and because of his business experience, I approached him about joining my practice.

To my surprise, Dr. Tom explained his current inability to practice until January 2010, that he surrendered his license in 2007, and was recently reinstated in July 2009. He further elaborated that the Board of Optometry found him guilty of unprofessional conduct and questionable business methods. He actually admitted that it was his fault, making no excuses nor blaming others of his past mistakes. He ensured that I was pursuing my practice for the right reasons. He stressed the importance of all his patients and how he had failed them when he faltered. He did not want this for me, and advised me to always make sure that I do everything the right way, the ethical way. Looking back on that day, it must have been difficult for Dr. Tom to tell a stranger about his past errors, so I applaud him for his honesty.

I spoke to my wife about my conversation with Dr. Tom and my intent to offer him a position as an associate. Although she posed her concerns, she trusted my judgment and thought it would be noble to be the one who offered him a second-chance.

Dr. Tom accepted my offer and started working at my practice one day a week since January 2010. He has been a tremendous asset to my practice. Patients adore his candor and his positive outlook on life. I would recommend Dr. Tom to any other doctor seeking a great addition to his/her office. At the same time, since insurance companies do not allow probationary optometrists to be panel members, his work options are very limited forcing him to remain on this minimal schedule.

When he's not in the office, Dr. Tom is involved in community service programs. He supports youths in underprivileged areas, teaching them life skills. In addition, he puts in more time than required, volunteering for more hours when extra instructors are needed. Dr. Tom is a man of devotion and is a true value to the community.

Dr. Tom displays the utmost professionalism with all of my patients, following his own words of "do[ing] everything the right way, the ethical way." Even though I have only known him for a year, I trust him implicitly. He is a dedicated optometrist and is a great role model for other optometrists. It is my opinion that you consider him for full reinstatement of his license. Removing his probation would provide him a chance to support his family, already a challenging task in today's economy. He deserves a chance to rebuild his career.

The Board of Optometry need not worry about Dr. Tom's presence in public. He is both a professional and ethical man, representing the best in Optometry.

Please contact me if there are any questions. I would be happy to testify on his behalf.

Sincerely,

Radbert Chin, O.D. 63 W Angela St.

Pleasanton, CA 94566

Dr. Tom is still giving back to the community in Pleasanton, CA. He has volunteered to give seminars on eye health at local senior centers and assisted living homes. I applaud his generosity and devotion to his profession.

Dr. Tom has cared for my entire family and we trust his advice and professionalism. He has always provided us with top care. I am very proud of him and have recommended him to several colleagues and friends. His commitment to satisfying his probation and exceed its requirements only further supports his outstanding character. His actions over the past 18 months show that he is a changed person. I have seen this in person and I can attest to the fact that he is much more caring and even more concerned about doing what is right. This fact is even more evident in that he is struggling financially. Working a few days a week as a fill in doctor has got to be a very humbling experience.

I know he wishes to return to private practice one day. I support this idea and hope the Board of Optometry can support him by allowing him to come off of probation and pursue his career in optometry. He is an asset to the community and people need to find him and be helped by him. I think that everyone deserves a second chance and Dr. Tom's performance and dedication over the last 18 months clearly supports this. His respect for Optometry and patients is without question. It take a great deal of character to admit one's wrong doings. It takes an even greater person to admit he needs to change and then does it. Dr Tom has accomplished this. One thing he always mentions these days is that, "I want to be a role model and affect all the young adults especially my kids."

Feel free to contact me if you require any further comments. I will be more than willing and happy to vouch for his character.

Sincerely,

Russell Wong

wongrussell@foothill.edu

Ryssell frong

650.949.7040

Instructor/Learning Disabled Specialist

Foothill College

Dt: December 1, 2010

To: California Board of Optometry

Fr: Claire Tom

Re: Greg Tom's Petition for Full Reinstatement of his Optometry License

To the California Board of Optometry:

I previously wrote to you in support of my husband's reinstatement of his optometry license. Thank you for having granted him a partial reinstatement. We sincerely appreciate the opportunity you have given him to return to optometry.

Since the time that Greg has been given back the ability to practice optometry, he has enthusiastically embraced the opportunity to practice again. He has been working at an office in Pleasanton, California and is enjoying examining patients again, consulting with fellow doctors and interacting with people in the optometry field. He is also doing probono work at the First Tee, a golf clinic for children in economically challenged areas. He is a regular face there and contributes up to 20 hours per month of volunteer time.

Our family was profoundly affected by the surrender of his license and sale of his optometry practices financially, socially and emotionally. The past few years have been a challenging period for my husband, but he has made amends for past indiscretions and has evolved into a better person by taking responsibility for his choices and living with the consequences. I have seen him grow in character and in his actions through his dedication to his patients and colleagues, his community service, his role as a parent to our young son and daughter and as a devoted husband to me.

Dr. Radbert Chin, his current employer who decided to take a chance on Greg, seems to have no regrets in making that decision and often consults with him on various aspects of running and growing a practice. He fully respects and listens to Greg's advice, consultation and thoughts and undoubtedly holds his character in high esteem.

However, Greg has found it difficult to find employment at any other optometry office, private or corporate, aside from Dr. Chin's and is limited in his income possibilities with a probationary license. Other doctors won't hire him because of the inconvenience to them, the stigma having a doctor on staff with a restricted license, and because there is no growth possibility in hiring an optometrist who can only work a limited number of hours.

Today's economy, factored in with our significantly reduced income over the past several years, has put us in an unwanted position of financial strain. We would have a fair opportunity to help support our family should his license be fully reinstated.

I hope that the Board may seriously consider of a full reinstatement of Greg's optometry license. I believe that he possesses the right character, skills and intelligence to once again be a model representative of optometrists in California.

Sincerely.

Ms. Claire S. Tom, M.B.A.

Project Manager

Information Design & Communications

Chevron Corporation



. character development and life-enhancing values for youth

November 29, 2010

Board of Optometry 2420 Del Paso Road Ste. 255 Sacramento, Ca. 95834

Dear Board of Optometry,

I Larry Lee verify that Greg Tom has volunteered his services to The First Tee of Contra Costa since July of 2009. We are a non-profit organization that teaches life skills in the context of golf to young people ages 5-18. Our programming is throughout the year and is conducted in 12 week sessions.

Greg has volunteered for every session of programming since the summer of 2009. In addition he attended our 4 hour coaches and volunteer training in February of 2010. He has been my volunteer assistant coach. He volunteers one day during the week and one day during the weekend. During the summer, he actually worked extra days when he had free time or we needed additional help. Each class requires 2 hours of his time to help setup and deliver the lesson plan. In addition I have entrusted Greg on 3 or 4 occasions to be the lead coach when I needed to be at one of our other programming sites to teach a class. Greg has also volunteered during the winter time to help me with inventory and other First Tee activities.

Greg has been an outstanding volunteer; very dependable, always there and on time, works and relates exceptionally will with the young participants, exemplifies and possesses the ability to teach The First Tee 9 Core Values of respect, honesty, courtesy, responsibility, sportsmanship, confidence, judgment, integrity & perseverance. His passion to help others and contribute to the community is clearly evident in his work

As a closing Greg Tom is an excellent person with good values and our program is very fortunate to have him as a volunteer assistant coach. I am looking forward to working with him again during our future programming sessions.

Respectfully,

Larry Lee

Program Director

The First Tee Contra Costa.

925.963.0740

larrylee52@comcast.net

Community Service



BOARD OF OPTOMETRY

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170 / (866) 585-2666 www.optometry.ca.gov



VERIFICATION OF COMMUNITY SERVICE

Gregory Tom, O.D. (Probationer), Optometrist License No.10427 is on probation with the Board of Optometry. The probationer is required to provide evidence of the capacity in which they work when fulfilling the community service requirement. Please read the statements shown below in bold type, place your initials in the box next to the statement that applies to you and follow the instructions:

The probationer is not providing commu (Initial) (If this statement is true, initial to the left and comple	
1	
The probationer is providing community	
(Initial) (If this statement is true, initial to the left and complet	e-Section 1 and 2.)
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Section 1:	
Organization: First Tee of Comma	
Street address: Port Citienas 1	4n
City: Concord	
Supervisor's Name and Title: Larry Lu	Direcon
9,75 6	
Unit / Department:	
Please provide community service information the period of 97-09 fru 09-09	regarding the above mentioned probationer for
Services / Duties provided by probationer: Live	golf courses in comma costa
to 5-17-yands at various	golf coinses in comma cosTA
Date services began: 7/1-/69	000
Scheduled days /hours: W / F / 3 1T	
Total hours served this quarter (listed by month)	

Month/Yr: Jag 2 - Day	Hrs. Served:	15
Month/Yr: Auful 2009	Hrs. Served:	7.0
Month/Yr: Sept 2009	Hrs. Served:	20
Description of services provided: Little 444 Such as respectively	SICILL TERC	by + leanager +
youth such as respe	instaly re	specy courtery, ex
Pirt Lesson		
Section 2:		
Name of Organization Representative:	larglee	
Signature of Organization Representative: <u>t</u>	Mary	lee
Date: 16-15-09		925-913-0740
PETURN THE COMPLETED FORM TO		ng ngilang galagan mga Angli Sanggan sanggan sanggan sa

Board of Optometry Probation Program 2420 Del Paso Road Suite 255 Sacramento, CA 95834



BOARD OF OPTOMETRY

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170 / (866) 585-2666 www.optometry.ca.gov



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The probationer is not providing community services to this organization. (Initial) (If this statement is true, initial to the left and complete Section 2.)
Z.
The probationer is providing community services to this organization. (Initial) (If this statement is true, initial to the left and complete Section 1 and 2.)
Section 1:
Organization: Finst Tex of Contra Costa
Street address: 17050 Pons CHTCAGO Hours
City: Conco. State: C4 Zip: 94520
Supervisor's Name and Title: Large Lee, already fgip
Phone: 925-963-0790 Email: Larry le 52 c comeant no
Unit / Department: finis Tee at Com (1) sa the
Please provide community service information regarding the above mentioned probationer for the period of _7/2004
Services / Duties provided by probationer: LIFE SKILLS traing + GOIF traing to
5-17 youth at VARIOUS GOIF CUMUS IN CONTRACTOR COMING
Date services began: 3/1/09
Scheduled days /hours: 1 Prisay + sandy (total his Ng/week - 7 plus by week
Date services began: $\frac{1}{ F } \frac{ F }{ F$

1/20-10-0/2-24 in sul 15/20
Month/Yr: 1/1027 Hrs. Served: 30
Month/Yr: / 6/2#69 Hrs. Served: Z 0
Month/Yr: 11/2017 Hrs. Served: 15
12/2009 Has sarved: 10 Cobs
Description of services provided: LIFE SKILLS THENCHING TERRALE TO SULLING TO SELLING TO SELLING TO SELLING TO SELLING TO THE COLUMN THE NELLING TO SUSCOINDING AS WE MATTER LIFE LESS.
youths such as responsibit, respect, meeting + greating
Tracity 9017 SICILS TO 5-17 yr dd + how the relate to
LIFE + Education + Mr suscoinding as we maken UFE less.
Section 2:
Name of Organization Representative: LAZZI Lee
Signature of Organization Representative across 7. Lee
Date: $\frac{1/10}{100}$ Phone: $925 - 963 - 0770$

RETURN THE COMPLETED FORM TO:

Board of Optometry Probation Program 2420 Del Paso Road Suite 255 Sacramento, CA 95834



BOARD OF OPTOMETRY

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170 / (866) 585-2666 www.optometry.ca.gov



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The probationer is not providing community services to this organization. (Initial) (if this statement is true, initial to the left and complete Section 2.)
$\mathcal{L}_{\mathcal{A}}$
The probationer is providing community services to this organization.
(Initial) (If this statement is true, initial to the left and complete Section 1 and 2.)
Section 1:
Organization: Frast Tee of Come Cosm
Street address: 467 Pent CHICHO Hwy
City: Concord State: A Zip: 94520
Supervisor's Name and Title: Lory Lee process of any
Phone: 943079 Email: Lary Le 52 e concet, nt
Unit / Department: From Tree of conducte (15 m
Please provide community service information regarding the above mentioned probationer for the period of \(\frac{1}{2\cdot 2\cdot 2\cd
Services / Duties provided by probationer: 4FL SKILS TRAINS & GUIF MAIN 1:
5-17 you at various grif comes in contrag county
Date services began: 7/15/09
Scheduled days /hours:
Total hours served this quarter (listed by month): (39)

Month/Yr: /2 · / · Hrs. Served: /9	
Month/Yr: 2/2 Hrs. Served: 12	
Month/Yr: 3/2-19 Hrs. Served: 15	
Description of services provided: LIFE SICIUS TONCITY 1, teange	
Description of services provided: LIFE SICIRS TONCITY 1. teeringe yourns such to responsibility, regress, much of such the teering the feating good skill to 5-12 your I have the what he seeded the successful to the successful to the sealing to me make the harmonic to the sealing of the makes the sealing to the makes the sealing to the makes the sealing to the makes the sealing to the makes the sealing to the sealing the sealing the sealing to the sealing th	peinle to
Up education + our surrounding to me mature li	FZ Lessi
Section 2:	
Name of Organization Representative: Largue	
Signature of Organization Representative: M. L. C.	
Date: $\frac{4/2.5/10}{}$ Phone: $\frac{915-913-074}{}$	7
RETURN THE COMPLETED FORM TO:	

Board of Optometry Probation Program 2420 Del Paso Road Suite 255 Sacramento, CA 95834



BOARD OF OPTOMETRY

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The probationer is not providing community services to this organization. (Initial) (If this statement is true, initial to the left and complete Section 2.)
The probationer is providing community services to this organization. (Initial) (If this statement is true, initial to the left and complete Section 1 and 2.)
Section 1: Organization: Finist Tee of Commo Cosm
Street address: 4000 Part CHICHO Hwy
City: Conand State: CA Zip: 94 T20
Supervisor's Name and Title: Long her preum of guf
Phone: 95-965-0790 Email: Large Le 52 e com cat int
Unit / Department: From The of combinate (is in
Please provide community service information regarding the above mentioned probationer for the period of $\frac{\sqrt{1/2 c_1 c_2 - 6/30/2 c_1 c_2}}{\sqrt{1/2 c_1 c_2 - 6/30/2 c_1 c_2}}$
Services / Duties provided by probationer: 4FL SKINS TRAINS & GOIF TRAIS /2
5-12 ye at various guy comes in contra country
Date services began: 7/15./09
Scheduled days /hours: Fat /s45
Total hours served this quarter (listed by month): (35)

Month/Yr: // Z - / C	Hrs. Served	1: 12.	· · · · · · · · · · · · · · · · · · ·	
Month/Yr: 5/2000	Hrs. Served	1:/2	· · · · · · · · · · · · · · · · · · ·	· ·
Month/Yr: 6/2.00 €	Hrs. Served	: <u> </u>		· · · · · · · · · · · · · · · · · · ·
		•	. *	
Description of services provided: UFG	SICILIS TO	MC-1/79 11	teenge	}
Description of services provided: LIFE yours such a repensible teachy gry skill be 5- yp, education ; pour sur	by regger	1, muty	o guely	peinle
- teachy got skill to 5-	12 ya vd.	thin th	y report	<i>b</i>
lyp, education if our sur	counding B	ne ma	the U	Et Lessr
			•	
Section 2:				
Name of Organization Representative:	lary in			
Signature of Organization Representative:	1accens	5.15ce		
Date: 7/7/10	Phone:	925-95	3-0740	
PETLIEN THE COMPLETED FORM TO:				

Board of Optometry Probation Program 2420 Del Paso Road Suite 255 Sacramento, CA 95834



BOARD OF OPTOMETRY

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170 / (866) 585-2666 www.optometry.ca.gov



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(initial) (If this statement is true, initial to the left and complete Section 2.)
The probationer is providing community services to this organization. (Initial) (If this statement is true, initial to the left and complete Section 1 and 2.)
Section 1:
Organization: FIRST TEE OR CONTRA COSTA
Street address: 4000 Punt Citicacio Hing
City: Cincul State: C4 Zip: 94)20
Supervisor's Name and Title: LARAT Lee 101re over UF GUII-
Phone: GLT 963 0740 Email: Larrylee 52 Ecomensones
Unit / Department: First Tee on Comma Custa
Please provide community service information regarding the above mentioned probationer for the period of $\frac{7/1/70 - 9/30/70}{2}$
Services / Duties provided by probationer: Life SICILLS TRAINING + 90:12 Trans
5-17 yn dido AT VARIOUS GUIF CULTSED IN CUATRA CUSTA COUNTY
Date services began: 7/17/07
Scheduled days /hours: Fallsat
Total hours served this quarter (listed by month):(32)

Month/Yr: 7/20/0	Hrs. Served: 14
Month/Yr: 8/201.	Hrs. Served:
Month/Yr: 1/2017	Hrs. Served: 10
Description of services provided: LIFE SK	ins reacition to teering and
youths such as neponsibili	y respect neeting of greeting pears
teaching 7011- SICILLE to 5-174/1	ets + hun they relate to dundings as ne mature LIFE Lesson
UM Education + our sur	oundings as he matine Like Lesson
Section 2:	
Name of Organization Representative: LAR	27 Lee
Signature of Organization Representative $\sqrt{\alpha}$	
Date: 16/1/10	Phone: 947 963-0790

RETURN THE COMPLETED FORM TO:

Board of Optometry Probation Program 2420 Del Paso Road Suite 255 Sacramento, CA 95834

Compliance Reports

(up til 09.30.2010)



BOARD OF OPTOMETRY 2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170 Fax: (916) 575-7292

Quarterly Report of Compliance (Return to the address shown above)

(PLEASE PRINT OR TYPE)
NAME: Last First Middle License No.
Tom Garager L 10427T
RESIDENCE ADDRESS: Number Street City State Phone
202 Aspention CT SANRamon CA 910206
OFFICE ADDRESS: Number Street City State Phone
63 W Angely ST, Pleasardon CA 925 4393
NAME OF EMPLOYER, PARTNER, OR ASSOCIATE (if any, and as may be appropriate): Last First Middle
CITIN RADBERT J.
ADDRESS: Number Street City State Phone
63 W. Angela ST pleasanton A 925452 9393
Name of your probation surveillance officer:
Robert Bimartino
Since the last quarterly report have you had any problem securing or maintaining employment? (YES) (NO)
Explain in Detail, if answer is Yes:
DIPPICULT TO PIND MURE MURE, SEVERIL UD. + M.D. DODOT
want un vo en protoution + do not want to have their
records andited - they down to much work for morning

	Since the last quarterly report, have you:		.(Circle Yes or No
1.	. Been arrested, charged, or convicted of any viola	tion of Federal,	State and local laws?	(YES)(NO)
2.	Complied with every condition of the terms of you	r probation?		(VES)-(NO)
3.	Complied with all optometry laws?			(YES) (NO)
4.	. If required, have you paid the Board any Cost Red	covery? If so, ho	ow much	7 (YES) (NO)
5.	. Participated in any continuing education program	? If so, please co	emplete the following:	
	Course: ULBS b (appoint & Mr) Date	e: 12010	Certificate Attache	d: (YES) (NO)
	Course: Date	ə:	Certificate Attache	d: (YES) (NO)
	Course: Date	e:	Certificate Attache	d: (YES) (NO)
((Note: Original certificate of completion must be atta	ached for compli	ance credit – originals w	vill be returned)
	Please attach copies of complete patient records is same patient type, i.e. 3 for patients under 40 year varying ranges of refractive and eye health characteristics.	rs of age, 3 for p steristics.	atients over 40 years of	
			- O O	
EX	xplain any YES answer to question 1 and any NO ar	iswer to question	1 2 OF 3:	
Bo of t and om	hereby submit this Quarterly Report as required oard of Optometry and its order of probation the fithe State of California that I have read the foreign that all statements made are true in every resimissions of material fact may be cause for revoc	reof, and decla going report in spect, and unde cation of probat	re under penalty of perits entirety and know its entirety and know its erstand that misstatement.	erjury the laws ts contents
F10	ionalivingi digitature	Date	-	

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St. Pleasanton, CA 94566

925-456-4393 FAX: 925-226-3157

For:

Exam Date: 02/20/2010

Print Date: 04/08/2010 16:19

DOB: 10/07/1993

Age: 16

REASON FOR VISIT

EXAMINATION: Eye Examination, Adolescent eye health and vision examination. Last examination: 1-2 years

ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: OU: distance blur started recently in past 1 months in both Timeline: February 2010.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing routine headaches or double vision. No reports of visual floaters or light flashes.

:distnace blur

VISION COMPLAINT: Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists. **SYSTEMIC FAMILY HISTORY:** No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. **OCULAR FAMILY HISTORY:** Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications. **SOCIAL HISTORY:** No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/25 NVA 20/20 OS: DVA 20/25-- NVA 20/20 OU: DVA 20/25 NVA 20/20

PRESENTING SPECTACLE Rx: (#1)

OD: -0.25 DVA: 20/20 NVA: 20/20

OS: -0.25 -0.50 x 170 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

VISION

PD's:

Dist IPD: 67 OD: 33.5 OS: 33.5 .

RETINOSCOPY:

OD: -0.25 DVA: 20/20 NVA: 20/20

Patient:

- Exam Date: 02/20/2010 - Page: 2

OS: -0.25 -0.50 x 170 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

MANIFEST:

OD: -0.25 DVA: 20/20 NVA: 20/20

OS: -0.25 -0.50 x 170 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

FINAL SPECTACLE Rx:

OD: -0.25 DVA: 20/20 NVA: 20/20

OS: -0.25 -0.50 x 170 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

EXAMINATION

CUP/DISC RATIO:

OD: Horz .30 Vert .30 OS: Horz .30 Vert .30

TONOMETRY: OD: 15 mmHg OS: 15 mmHg Test: Goldmann Time: 17:32 Category: Examination

VISUAL FIELDS SCREENING: Bilateral: Visual Field Screening normal.

DILATION ORDERS: DFE performed using BIO and SLE w/Volk 90D lens. @04:19 PM

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were

found to be full in all quadrants, OS; Fields were found to be full in all quadrants.

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light. **SLIT-LAMP EXAM:** Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

BILATERAL: PINGUECULA

MYOPIA

ASTIGMATISM

PLAN

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected.

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment. **COUNSELING / EDUCATION:** I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: 30 minutes. 10+ minutes.

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination

PROCEDURE:

92004 Exam Comp. New 92015 Exam Refraction

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St.

Pleasanton, CA 94566

925-456-4393 FAX: 925-226-3157

For:

Exam Date: 04/08/2010
Print Date: 04/08/2010 16:11
DOB: 04/25/1975
Age: 34

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: .

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing

routine headaches or double vision. No reports of visual floaters or light flashes.

VISION COMPLAINT: Without spectacle correction. A noticeable decline or change in vision is experienced.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists. **SYSTEMIC FAMILY HISTORY:** No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. OCULAR FAMILY HISTORY: Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications. **SOCIAL HISTORY:** No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

PRESENTING SPECTACLE Rx: (#1)

OD: -1.50 -1.25 x 155 DVA: 20/30- NVA: 20/20 OS: -4.75 -1.25 x 147 DVA: 20/40 NVA: 20/20

OU: DVA: 20/30 NVA: 20/20

VISION

PD's:

Dist IPD: 62 OD: 31 OS: 31 Near IPD: 60 OD: 30 OS: 30

MANIFEST:

OD: -1.50 -2.00 x 155 DVA: 20/20 NVA: 20/20 OS: -4.25 -2.00 x 156 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20 FINAL SPECTACLE Rx: (Distance)

OD: -1.50 -2.00 x 155 DVA: 20/20 NVA: 20/20 OS: -4.25 -2.00 x 156 DVA: 20/20 NVA: 20/20

Patient: ____ Exam Date: 04/08/2010 - Page: 2

OU: DVA: 20/20 NVA: 20/20 ALTERNATE SPECTACLE Rx: (#1)

OD: -1.00 -2.00 x 155 DVA: 20/20 NVA: 20/20 OS: -3.75 -2.00 x 156 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

EXAMINATION CUP/DISC RATIO:

OD: Horz .10 Vert .10 OS: Horz .10 Vert .10

TONOMETRY: OD: 15 mmHg OS: 15 mmHg Test: Goldmann Time: 10:38 Category: Examination

VISUAL FIELDS SCREENING: Bilateral: Visual Field Screening normal.

DILATION ORDERS: DFE performed using BIO and SLE w/Volk 90D lens, OU, Tropicamide .5%, OU, INDIRECT

using 20D lens, OU @10:38 AM

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants, OS, Fields were found to be full in all quadrants.

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light. **SLIT-LAMP EXAM:** Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium

clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age. conjunctival papillae inferior grade 1+ OU.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

BILATERAL: MARGINAL BLEPHARITIS

BILATERAL: ACUTE HYPERSENSITIVITY CONJUNCTIVITIS

MYOPIA ASTIGMATISM

PLAN

TREATMENT ALLERGY: Bilateral: Rx antihistamine/mast cell stabilizer as directed.

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected. new rx for distance and computer rx for near to alleviate headaches pataday for allergy and return to clinic in 1 wk

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment. **COUNSELING / EDUCATION:** I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

rtc 1 week for follow up on pataday and allergic conjunctivits

TIME-ESTIMATE: Doctor face-to-face with patient 40 minutes. Counseling and/or Coordination of Care. 204 minutes.

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination

PROCEDURE:

92004 Exam Comp. New 92015 Exam Refraction

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St. Pleasanton, CA 94566

925-456-4393 FAX: 925-226-3157

For:

Exam*Date: 01/25/2010

Print Date: 04/08/2010 16:58

DOB: 12/14/1966

Age: 43

Occupation: Engineer

REASON FOR VISIT

EXAMINATION: Adolescent eye health and vision examination.

EXAM TECHNICIAN: Rana, Kamla

CHIEF COMPLAINT

CHIEF COMPLAINT: Needs new contacts and glasses for computer.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing routine headaches or double vision. No reports of visual floaters or light flashes. In addition, not experiencing blurry or uncomfortable vision.

CONTACT LENSES: Bilateral: Lenses are generally worn everyday. Improvement in vision is desired. Asymptomatic lens wear is the norm. Symptoms occur immediately upon lens insertion. Care solutions are comfortable and proper. Spectacle Rx requires update.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory Unless otherwise noted below.

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/400 NVA 20/20
OS: DVA 20/400 NVA 20/20
OU: DVA 20/400 NVA 20/20
PRESENTING SPECTACLE Rx: (#1)

OD: -5.50 DVA: 20/20 NVA: 20/20

OS: -5.50 -0.50 x 180 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20

VISION

WORKING DISTANCE: 22"

K-READINGS:

OD: 44.00 @ 180 Steep 43.13 @ 090 OS: 43.88 @ 018 Steep 43.75 @ 108

PD's:

Dist IPD: 64.5 OD: 32.25 OS: 32.25

COVER TEST (DIST): Method: Alternate Horz: Ortho **COVER TEST (NEAR):** Method: Bilateral Horz: 9.75XP

NEAR PT CONVERGENCE: Method: Push Up Blur: 0 Break: 0 Recv: 0

FUSION: Method: Worth test

STEREOPSIS: Method: Stereo Fly Dist: 20"

Patient:

Exam Date: 01/25/2010 - Page: 2

NEAR PT ACCOMMODATION: OD: 5.00 OS: 5.00 OU: 5

RETINOSCOPY:

OD: -5.50

OS: -5.50

MANIFEST:

OD: -5.50

OS: -5.50 -0.50 x 180

FINAL SPECTACLE Rx:

OD: -5.50

OS: -5.50 -0.50 x 180

TRIAL CONTACT LENS Rx: #1 *

OD: -5.50 BC: 8.6 Dia: 14. NVA: 20/20

OS: -5.50 BC: 8.6 Dia: 14. OU: DVA: 20/20 NVA: 20/20

NOTES: Trial fit #2.

FINAL CONTACT LENS Rx: (#1)

OD: -5.50 BC: 8.6 Dia: 14. NVA: 20/20

OS: -5.50 BC: 8.6 Dia: 14. OU: DVA: 20/20 NVA: 20/20

NOTES: Trial fit #2.

EXAMINATION

CUP/DISC RATIO:

OD: Horz .35 Vert .35 OS: Horz .35 Vert .35

TONOMETRY: OD: 16 mmHq OS: 16 mmHq Test: Goldmann Time: 14:09 Category: Examination

DILATION ORDERS: DFE performed using BIO and SLE w/Volk 90D lens. @04:58 PM

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, Fields were found to be full in all quadrants.

AMSLER STUDIES OBSERVATIONS: Amsler: Negative

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light. Unless otherwise noted below.

SLIT-LAMP EXAM: Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age. Unless otherwise noted below. **CONJUNCTIVA:** Bilateral: A fine, relatively flat papillary response is noted in the conjunctiva. Inferior.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy. Unless otherwise noted

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

RETINAL IMAGE: See retinal image for details.

IMPRESSION(S):

MYOPIA

ASTIGMATISM

<u>PLAN</u>

CONTACTS (Disinfection): DISINFECTION: Optifree.

CONTACTS (Wear Schedule): Wear contact lenses daily, if clear and comfortable.

SPECTACLE PLAN: Bilateral: Rx spectacles.

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment. **COUNSELING / EDUCATION:** I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: 35 minutes. 10+ minutes.

gr.

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St.

Pleasanton, CA 94566

925-456-4393 FAX: 925-226-3157

For: Management

Exam*Date: 02/13/2010

Print Date: 04/08/2010 17:02

DOB: 07/16/1967

Age: 4

Occupation: food scientist

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

OCCUPATION: food scientist

CHIEF COMPLAINT

CHIEF COMPLAINT: 6 month corneal erosion on the OS eye 6 months ago...eyecare.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing routine headaches or double vision. No reports of visual floaters or light flashes.

VISION COMPLAINT: Without spectacle correction A noticeable decline or change in vision is experienced, right eye is fainter and more difficulty with reading and taking off glasses with reading and lots of light

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists. **SYSTEMIC FAMILY HISTORY:** No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. **OCULAR FAMILY HISTORY:** Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications. **SOCIAL HISTORY:** No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears,nose,mouth,throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/400 NVA 20/20 OS: DVA 20/400 NVA 20/20 OU: DVA 20/400 NVA 20/20

PRESENTING SPECTACLE Rx: (#1)

OD: -4.50 -1.00 x 100 DVA: 20/20 NVA: 20/25

OS: -4.50 DVA: 20/20 NVA: 20/25

VISION

PD's:

Dist IPD: 61 OD: 30.5 OS: 30.5

MANIFEST:

OD: -4.00 -0.50 x 054 DVA: 20/20 NVA: 20/20-OS: -4.250 -0.50 x 115 DVA: 20/20 NVA: 20/20Patient:

Exam Date: 02/13/2010 - Page: 2-

OU: DVA: 20/20

FINAL SPECTACLE Rx: (Distance)

OD: -4.00 -0.50 x 054 DVA: 20/20 NVA: 20/20-OS: -4.250 -0.50 x 115 DVA: 20/20 NVA: 20/20-

OU: DVA: 20/20

ALTERNATE SPECTACLE Rx: (sunglasses Rx)

OD: -4.00 -0.50 x 054 DVA: 20/20 NVA: 20/20-OS: -4.250 -0.50 x 115 DVA: 20/20 NVA: 20/20-

-OU: DVA: 20/20

ALTERNATE SPECTACLE Rx: (Occupational)

OD: -3.50 -0.50 x 054 DVA: 20/20 NVA: 20/20-OS: -3.75 -0.50 x 115 DVA: 20/20 NVA: 20/20-

OU: DVA: 20/20

EXAMINATION

CUP/DISC RATIO:

OD: Horz .20 Vert .20 OS: Horz .20 Vert .20

TONOMETRY: OD: 17 mmHg OS: 17 mmHg Test: Applanation Time: 16:04 Category: Examination

VISUAL FIELDS SCREENING: Bilateral: Visual Field Screening normal.

DILATION ORDERS: DFE performed using BIO and SLE w/Volk 90D lens. @05:00 PM

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants, OS

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light. **SLIT-LAMP EXAM:** Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

BILATERAL: RECURRENT CORNEAL EROSION EBMD (BASEMENT MEMBRANE DYSTROPHY

MYOPIA

ASTIGMATISM

EARLY PRESBYOPE FOR COMPUTER DEMANDS

PLAN

PRINTED SPEC Rx: 02/13/2010 16:40

TREATMENT CORNEA: Bilateral: Rx hyperosmotic drops as directed. Rx antibiotic/steroid drops as directed. patient has corneal basement membrane dystrophy MDF in OD...slightly below center at 6 oclock 2 areas of spk and mild corneal staining...retro shows basement dystrophy...contineu on muro128 hs and add Restasis OD only bid... rtc 1.0 mon adn 3 months follow up

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected.

Rx new for distance sun polariod poly, hilndex clear distance and first time occupantional vdt reading rx for work

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment. **COUNSELING / EDUCATION:** I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: 40 minutes. 10+ minutes.

ORDERS:

- Exam Date: 02/13/2010 - Page: 3

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination
PROCEDURE:
92004 Exam Comp. New
92015 Exam Refraction

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St. Pleasanton, CA 94566

925-456-4393 FAX: 925-226-3157

For:

Exam Date: 03/30/2010 Print Date: 04/08/2010 16:16 Age: 63 **DOB:** 04/21/1946 Occupation: golf and grandkids

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: blurre dvision with glasses and can't see with sunglasses on.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing routine headaches or double vision. No reports of visual floaters or light flashes.

VISION COMPLAINT: Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists. SYSTEMIC FAMILY HISTORY: No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. **OCULAR FAMILY HISTORY:** Family history is reported to be unremarkable.

Atenolol (15 yeras) **SYSTEMIC MEDICATIONS:** No systemic medications are currently used except:

SOCIAL HISTORY: No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

diagnosed with htn 15 years ago CARDIOVASCULAR: Hypertension.

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/200 NVA 20/200 OS: DVA 20/200 NVA 20/200 NVA 20/200 OU: DVA 20/200

PRESENTING SPECTACLE Rx: (Progressives)

OD: +2.75 -0.50 x 47 Add: +2.25 DVA: 20/30 NVA: 20/20 +1.75 -0.50 x 126 Add: +2.25 DVA: 20/25 NVA: 20/20 OS:

PRESENTING CONTACT Rx:

OD: ACUVUE +2.50 Handling Tint OS: ACUVUE +1.75 Handling Tint

VISION

K-READINGS:

OD: 46 @ Steep 47 @ OS: 46 @ Steep 47 @

Patient:

- Exam Date: 03/30/2010 - Page: 2

MANIFEST:

OD: +2.50 Add: +2.25 DVA: 20/20 NVA: 20/20

OS: +2.25 -0.50 x 180 Add: +2.25 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

FINAL SPECTACLE Rx:

OD: +2.50 Add: +2.25 DVA: 20/20 NVA: 20/20

OS: +2.25 -0.50 x 180 Add: +2.25 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

TRIAL CONTACT LENS Rx: #1

OD: C/L Monthly 2 Clear Premium +5.00 NVA: 20/20 Clear OS: C/L Monthly 2 Clear Premium +.200 DVA: 20/20 - Clear

NOTES: good git and mvmt OD near .5M. / 4OS dist 20/20

monovision 03-31-2010

.75M Od SOR +0.25

20/25 SOR +0.50

try +5.25 OStry +2.50 OD

TRIAL CONTACT LENS Rx: #2

OD: C/L Monthly 2 Clear Premium +2.75 DVA: 20/20 Clear OS: C/L Monthly 2 Clear Premium +2.50 DVA: 20/20 Clear

NOTES: Trial fit #2.

need to order Od +5.25try on OS +2.50

gave extra OD also for golf +2.75

04/03/2010

patient picked up glasses and sees great no distortion. loves contacts...final contacts are +5.25 OD (near) +2.50 (distance)...monogolf contact extra 6.0 month free (QD only at 2.75)

EXAMINATION

CUP/DISC RATIO:

OD: Horz .30 Vert .30 OS: Horz .30 Vert .30

TONOMETRY: OD: 15 mmHg OS: 15 mmHg Test: Goldmann Time: 18:13 Category: Examination

VISUAL FIELDS SCREENING: Bilateral: Visual Field Screening normal.

DILATION ORDERS: DFE performed using BIO and SLE w/Volk 90D lens, OU, Proparacaine local anesthesia, OU, INDIRECT using 20D lens, OU @10:17 AM

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants, OS, Fields were found to be full in all quadrants.

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light.

SLIT-LAMP EXAM: Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

BILATERAL: PINGUECULA

HYPEROPIA

ASTIGMATISM

PRESBYOPIA

Patient:

Exam Date: 03/30/2010 - Page: 3

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected. new glasses and contact lenses

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment. **COUNSELING / EDUCATION:** I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: Doctor face-to-face with patient 40 minutes. Counseling and/or Coordination of Care. 10+ minutes.

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination
PROCEDURE:
92004 Exam Comp. New
92015 Exam Refraction



Vision One Optometry

Dr. Radbert Chin 63 W. Angela St.

Pleasanton, CA 94566

925-456-4393 FAX: 925-226-3157

For

Exam Date: 04/08/2010 Print Date: 04/08/2010 15:52 DOB: 07/01/1994 Age: 15

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: occasionally rubs eyes, OU: and eyelids are red...mom says this happens more as the

Timeline: January 2008.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing

routine headaches or double vision. No reports of visual floaters or light flashes.

VISION COMPLAINT: Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists. **SYSTEMIC FAMILY HISTORY:** No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists.

OCULAR FAMILY HISTORY: Family history is reported to be unremarkable. **OCULAR MEDICATIONS:** No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications. **SOCIAL HISTORY:** No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/20 NVA 20/20 OS: DVA 20/20 NVA 20/20 OU: DVA 20/20 NVA 20/20

VISION

PD's:

Dist IPD: 61 OD: 30.5 OS: 30.5 Near IPD: 59 OD: 29.5 OS: 29.5

RETINOSCOPY:

OD: $+0.50 -0.50 \times 180$ OS: $+0.50 -0.50 \times 180$

MANIFEST:

OD: +0.75 -0.50 x 180 DVA: 20/20 NVA: 20/20 OS: +1.00 -0.50 x 180 DVA: 20/20 NVA: 20/20

Patient:

i - Exam Date: 04/08/2010 - Page: 2

OU: DVA: 20/20 NVA: 20/20

FINAL SPECTACLE RX:

OD: +0.75 -0.50 x 180 DVA: 20/20 NVA: 20/20 OS: +1.00 -0.50 x 180 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

EXAMINATION CUP/DISC RATIO:

OD: Horz .10 Vert .10 OS: Horz .10 Vert .10

TONOMETRY: OD: 12 mmHg OS: 12 mmHg Test: Goldmann Time: 10:58 Category: Examination

VISUAL FIELDS SCREENING: Bilateral: Visual Field Screening normal.

DILATION ORDERS: DFE performed using BIO and SLE w/Volk 90D lens. @11:22 AM, Proparacaine local

anesthesia, OU, Tropicamide .5%, OU @11:22 AM

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants, OS, Fields were found to be full in all quadrants. Fields were found to be full in all quadrants.

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light. SLIT-LAMP EXAM: Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

conjuctival papillae injection 2 and with inflammation

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR: DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

BILATERAL: ACUTE HYPERSENSITIVITY CONJUNCTIVITIS HYPEROPIA ASTIGMATISM

PLAN

TREATMENT ALLERGY: Bilateral: Rx antihistamine as directed. Rx mast cell stabilizer used as directed.

Pataday OU one drop per day...

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected.

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment. **COUNSELING / EDUCATION:** I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: Doctor face-to-face with patient 35 minutes. Counseling and/or Coordination of Care. 10+ minutes.

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination **PROCEDURE:** 92004 Exam Comp. New 92015 Exam Refraction

Vision One Optometry

Dr. Radbert Chin
63 W. Angela St.
Pleasanton, CA 94566
925-456-4393 FAX: 925-226-3157

For:

Exam Date: 09/04/2010 Print Date: 09/30/2010 16:36 DOB: 07/28/1993 Age: 17

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: check but when reading his vision is odd in that goes in and.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing

routine headaches or double vision. No reports of visual floaters or light flashes.

VISION COMPLAINT: Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists.

SYSTEMIC FAMILY HISTORY: No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. **OCULAR FAMILY HISTORY:** Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications. **SOCIAL HISTORY:** No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/20 NVA 20/20 OS: DVA 20/20 NVA 20/20 OU: DVA 20/20 NVA 20/20

VISION

PD's:

Dist IPD: 60.0 OD: 30 OS: 30

COVER TEST (DIST): Method: Alternate Horz: Ortho COVER TEST (NEAR): Method: Bilateral Horz: 2.00XP

NEAR PT CONVERGENCE: Method: Push Up Blur: 1 Break: 1 Recv: 1

STEREOPSIS: Method: Stereo Fly Near: 20" NEAR PT ACCOMMODATION: OD: 17.00

RETINOSCOPY:

OD: +1.00

OS: +1.00

MANIFEST:

OD: +1.00 DVA: 20/20 NVA: 20/20 OS: +1.00 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

Patient: Smario, Jacob - Exam Date: 09/04/2010 - Page: 2

FINAL SPECTACLE RX:

OD: +0.50 DVA: 20/20 NVA: 20/20 OS: +0.50 DVA: 20/20 NVA: 20/20 OU: DVA: 20/20 NVA: 20/20

EXAMINATION

CUP/DISC RATIO:

OD: Horz .25 Vert .25 OS: Horz .25 Vert .25

TONOMETRY: OD: 12 mmHg OS: 12 mmHg Test: Goldmann Time: 15:34 Category: Examination

VISUAL FIELDS SCREENING: Bilateral: Visual Field Screening normal.

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants, OS

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light. **SLIT-LAMP EXAM:** Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

HYPEROPIA

PLAN

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected.

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment. **COUNSELING / EDUCATION:** I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: Doctor face-to-face with patient 45 minutes. Counseling and/or Coordination of Care. 20+ minutes.

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination

PROCEDURE:

92004 Exam Comp. New 92015 Exam Refraction

Completed Exam:		Date: 09/04/2010
•	Gregory I Tom O D	• • • • • • • • • • • • • • • • • • • •

EXAMINATION RECORD

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St. Pleasanton, CA 94566 925-456-4393 FAX: 925-226-3157

Form

Exam Date: 09/11/2010

Print Date: 09/30/2010 15:38

DOB: 04/07/2005

Age: 5

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: right eye rolls inward at end of day..at 6pm after school.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing

routine headaches or double vision. No reports of visual floaters or light flashes.

VISION COMPLAINT: Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists.

SYSTEMIC FAMILY HISTORY: No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. **OCULAR FAMILY HISTORY:** Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications. **SOCIAL HISTORY:** No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/20 NVA 20/20 OS: DVA 20/20 NVA 20/20 OU: DVA 20/20 NVA 20/20

VISION

PD's:

Dist IPD: 55.0 OD: 27.5 OS: 27.5

COVER TEST (DIST): Method: Alternate Horz: Ortho COVER TEST (NEAR): Method: Bilateral Horz: 3.00EP

NEAR PT CONVERGENCE: Method: Push Up Blur: 1 Break: 1 Recv: 1

STEREOPSIS: Method: Stereo Fly Near: 20" **NEAR PT ACCOMMODATION:** OD: 15.75

RETINOSCOPY:

OD: +0.50 OS: +0.50 Patient: Matus, Brighton - Exam Date: 09/11/2010 - Page: 2

MANIFEST:

OD: +0.50 DVA: 20/20 NVA: 20/20 OS: +0.50 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

CYCLOPLEGIC:

OD: +0.50 DVA: 20/20 NVA: 20/20 OS: +0.50 DVA: 20/20 NVA: 20/20 OU: DVA: 20/20 NVA: 20/20

FINAL SPECTACLE Rx:

OD: +0.50 Add: +0.75 DVA: 20/20 NVA: 20/20 OS: +0.50 Add: +0.75 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

EXAMINATION

CUP/DISC RATIO:

OD: Horz .20 Vert .20 OS: Horz .20 Vert .20

TONOMETRY: OD: 14 mmHg OS: 14 mmHg Test: Goldmann Time: 09:24 Category: Examination

VISUAL FIELDS SCREENING: Bilateral: Visual Field Screening normal.

INTRA OCULAR TENSIONS OBSERVATIONS: Eyelid squeezer. Accuracy of IOP values questionable.

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants.

found to be full in all quadrants, OS

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light. **SLIT-LAMP EXAM:** Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctive are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

BILATERAL: STAPHYLOCOCCAL BLEPHARITIS

BLEPH 2+ OS RATER THAN OD...MATTTED LASHES OU

HYPEROPIA

PLAN

TREATMENT EYELIDS: Bilateral: Rx warm compresses several times a day. Rx antibiotic ointment as directed. **SPECTACLE PLAN:** Change spectacle Rx. Adaptation to Rx expected. PAL for accommodative eso tropia intermittent since it occrus everyday and mom does not want line bifocal and possibly have him trip. we can alwayss go back to ft 35.

may need visint thereapy to retrain

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment. **COUNSELING.** / **EDUCATION:** I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: Doctor face-to-face with patient 40 minutes. Counseling and/or Coordination of Care. 10+ minutes.

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

Patient: Matus, Brighton - Exam Date: 09/11/2010 - Page: 3

V72.0 Vision Examination **PROCEDURE:** 92004 Exam Comp. New 92015 Exam Refraction

Completed Exam:

Gregory L. Tom, O.D.

Date: 09/11/2010

EXAMINATION RECORD

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St. Pleasanton, CA 94566

925-456-4393 FAX: 925-226-3157

Fors

Exam Date: 07/06/2010
Print Date: 09/30/2010 15:37
DOB: 05/22/2002
Age: 8

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: hard to board in school, likes to play soccer a lot.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing

routine headaches or double vision. No reports of visual floaters or light flashes.

VISION COMPLAINT: Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists. **SYSTEMIC FAMILY HISTORY:** No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. **OCULAR FAMILY HISTORY:** Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications. **SOCIAL HISTORY:** No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears,nose,mouth,throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/300 NVA 20/20 OS: DVA 20/300 NVA 20/20 OU: DVA 20/300 NVA 20/20

PRESENTING SPECTACLE Rx: (#1)

OD: -0.75 DVA: 20/100 NVA: 20/20 OS: -1.25 DVA: 20/80 NVA: 20/20

VISION

RETINOSCOPY:

OD: -2.50 -0.75 x 005 DVA: 20/20 NVA: 20/20 OS: -2.75 -0.50 x 006 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

MANIFEST:

OD: -2.50 -0.75 x 005 DVA: 20/20 NVA: 20/20 OS: -2.75 -0.50 x 006 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

Patient: Do, Jordan - Exam Date: 07/06/2010 - Page: 2

FINAL SPECTACLE Rx:

OD: -2.00 -0.75 x 005 DVA: 20/20 NVA: 20/20 OS: -2.50 -0.50 x 006 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

EXAMINATION

CUP/DISC RATIO:

OD: Horz .30 Vert .30 OS: Horz .30 Vert .30

TONOMETRY: OD: 15 mmHg OS: 15 mmHg Test: Goldmann Time: 10:46 Category: Examination

VISUAL FIELDS SCREENING: Bilateral: Visual Field Screening normal.

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants, OD,

found to be full in all quadrants, OS

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light. **SLIT-LAMP EXAM:** Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

MYOPIA

ASTIGMATISM PATIENT RX IS UP 100% AND WE ARE GOING TO RX LESS...HIGHLY RECOMMENDED CONTACT LENSES OR GOGGLES FOR SOCCER

<u>PLAN</u>

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected.

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment. **COUNSELING / EDUCATION:** I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: Doctor face-to-face with patient 40 minutes. Counseling and/or Coordination of Care. 20+ minutes.

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination

PROCEDURE:

92004 Exam Comp. New 92015 Exam Refraction

Completed Exam:

Gregory L. Tom, O.D.

Date: 09/11/2010

Patient Ledger

(up til 09.30.2010)

Patient exam, services received, dx, cost

Requirements for patient monitoring

Date	Patient Address	glasses	C/L	Diagnosis
1/19/2010	W	100		myope
-	Je	\$100		myope
1/16/2010	Jii	400	185	
	Sı	689	305	myope
	Ju .	202		myope
	K ₁	184		hyper
1/21/2010	• • •	500		hyper
	N	60		hyper
	№	125	•	hyper
	Fa	60		hyper
1/23/2010	В	303		myope
1,20,2010	El	299.97		myope
•	aı	350	375	myope
	EI	175		myope
	Se .	145		hyper
•	D	0	335	myope
1/28/2010		•		hyper
1/28/2010	Ai .	489	360	myope
1/30/2010		610		myope
1/30/2010	Pi	658	. 545	myope
· · · · · · · · · · · · · · · · · · ·	ká	283.6	•	myope
	Lē	379.02		myope
1941 V	₩	399	* :	myope
2/2/2010	· · · · · · · · · · · · · · · · · · ·	333		hyper
2/2/2010	R		145	myope
	Cl .	533		myope
2/9/2010	•	311.75	323	hyper
2/9/2010		.544		hyper
2/11/2010	B	414	275	myope
2/11/2010	. 3	7.7		presbyope
	Ci	746	205	presbyope
	m 	425		presbyope
2/48/2040	m	359	,	astig
2/18/2010		255		presbyope
. 0/03/0040	Di	653		hyper
2/23/2010		033		presbyope
0 10 10040	jo			astig
3/2/2010		704	205	-
3/4/2010	·	784		hyper
	Ja	174		myope
	C	675		presbyope
	K	563		myope
3/6/2010		675		presbyope
3/9/2010		461		astig
	N .	590		myope
3/16/2010	•	641		presbyope
	V			presbyope

	424.8	presbyope	
and the second of the second o	466.65	presbyope	
3/23/2010 B	766		*
		presbyope	
4/1/2010 M	59	myope	
4/6/2010 M		hyper	- child
4/8/2010 El	1166	, myope	• •
R(hyper	child
R(395	presbyope	
4/13/2010 Yi		myope	
W		myope	child
c Cl		myope	child
H	677.5		Cilira
		myope	
4/17/2010 Be	465	320 myope	
Ja	497	presbyope	
Re	1213	astig	
da	1210	presbyope	
Lii .	689	presbyope	
Ca	737	275 presbyope	
Ту	•	hyperope	child
4/20/2010 El	481	295 hyperope	
Lc	464	320 presb	
4/27/2010 Ka	431	hyper	
Ni Ni			
	646	hyper	
5/6/2010 Cc	740	presbyope	
Ke	470	presbyope	
G(,	727	presbyope	
5/8/2010 Aı		hyper	child
Cl Cl	1298	310 presbyope	
Vi	794	astig	
5/11/2010 M	· 668	presbyope	
5/13/2010 Di		hyper	child
M	236	myope	
Ca	235	hyper	child
5/15/2010 Vi	1325	presbyope	Ciliu
·			
W	243	presbyope	
Cl		hyper	child
Та	•	hyperope	child
Re		presbyope	
Di		hyperope	child
D(presbyope	
5/18/2019 Da	296	myope	
5/20/2010 M	787	presbyope	•
Lu	630	presbyope	4
5/25/2010 G:	1023	presbyope	
5/25/2010 G(. K€	1023	hiesphohe	
" Ye gorten		205	
D:	750	365 presbyope	
	753	presbyope	

Jar —		884	presbyope	
6/1/2010 Kir		245	astig	
Da		565	myope	
6/8/2010 Ro		i3.64	presbyope	
Vic		350	presbyope	
6/12/2010 pri		273	hyperope	
Dh		•	hyper	child
Vic	tanan dari dari dari dari dari dari dari dari	$\label{eq:continuous} (x,y) - (x,y) - (y,y) \leq 2 (x,y) - (y,y) $	hyper	child
kaı			hyper	÷
lisa		255	375 myope	
e eri	(330	myope	
scc		. 880	myope	
6/15/2010 No		443	presbyope	
Ga		1001	myope	
pri		565	presbyope	
6/22/2010 Dai		226	300 astigmatism	
Jan		450	presbyope	
Kat		725	presbyope	
6/26/2010 Kev			, ,	
Riz		1000	presbyope	
Ste		2000	p. 322) Op 2	
Del		883	359 myope	
Anc		407	myope	,
) 6/29/2010 Sar			170 myope	
Em		,	70 myope	
Eriı			195 myope	
7/1/2010 Yar		665	presbyope	
Me		535	125 presbyope	
Bet		474	125 astig	•
7/8/2010 kur		411	hyper	
7/10/2010 Tar		558	presbyope	
Doi		547	presbyope	
Roc		575	myope	
Pla		3,3	400 myope	
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Ethics Class and Essays

October 12, 2009

Dear Margie:

I am pleased to report that Dr. Tom has successfully completed the ethics course requirements.

As requested I am attaching copies of the three essays he was required to write.

Regards,

Morris S. Berman, O.D. M.S.
Vice President and Dean of Academic Affairs
Southern California College of Optometry
2575 Yorba Linda Blvd.
Fullerton, CA 92831
(714) 449-7455; Fax (714) 992-7809
mberman@scco.edu



Sent: Monday, October 12, 2009 11:18 AM

To: G Tom

Subject: Ethics essays

Dr. Tom:

I have read your three essays and wish to compliment you on your understanding of the ethical issues and the quality of the writing. You did a very good job of referencing articles and incorporating ethical values and principles in the essays. You included Ethical theory in 2 of the 3 essays and my overall impression is that you took this task seriously and have hopefully used this opportunity to reflect on the standards we as health professionals need to believe in and live by.

I will be sending the State Board confirmation of the successful completion of the course and provide copies of your essays as requested.

Best wishes,

Morris S. Berman, O.D. M.S.
Vice President and Dean of Academic Affairs
Southern California College of Optometry
2575 Yorba Linda Blvd.
Fullerton, CA 92831
(714) 449-7455; Fax (714) 992-7809
mberman@scco.edu





"You discover that one of your colleagues in an optometric office is behaving in an unprofessional and unethical manner. What are the legal and ethical implications and what steps will you take to address the matter?"

One of the most challenging and most difficult duties of a professional is to not only self monitor but to police one's peers for poor decisions. It is very common to see other professionals provide expert witness testimonials against fellow peers for unethical or unprofessional behavior or actions. What you rarely see and never hear is the "proactive" actions of a fellow peer implicating another peer. Part of the code of ethics adopted and modified in 2007 by the American Optometric Association states, "It shall be the ideal, resolve, and duty of all optometrists: To recognize their obligation to protect the health and welfare of society." ¹ Furthermore, the "Optometric Oath" states that with full deliberation, I freely and solemnly pledge that: I will do my upmost to serve my community, my country and humankind as a citizen, as well as an optometrist. ² These two associations clearly hold optometrist to a higher standard than the average citizen. We, as optometrists, are expected to be model citizens with higher ethical standards as a result of a being a professional. ³

We must not only police our own actions but our peers as well. Ethically, we are required to protect the patient and the public even when it is not our patient. We provide a needed service to the community but we must protect the patient and the community as a priority. It is our privilage as an optometric professional to provide care for society. The public is relying on our knowledge, expertise, and time to educate them on their diagnosis, treatment, and prognosis. The public depends upon us as optometrist to educate properly and with understanding so that they can make an informed decision. In a case whereby an optometrist has first hand knowledge that a law is being broken or ethical behavior is occurring, failure to report these findings to the Board of Optometry or police or insurance companies would make the observer just as responsible as the peer committing the act. In other words, turning a blind eye is just as guilty for not protecting the public and thus, would be an ethical violation of the Optometric Oath and a reason for losing our professional autonomy.

A doctor who knowing or unknowingly makes an unprofessional or unethical decision is creating his own medical dilemma. At this point, the doctor's ability to make a sound medical decision is compromised. He may only be thinking of the end result and that the actions along the way are justified if the result is favorable. This outlook or perspective is based on Utilitarianism. The contrary to this belief is that it may be the well being for one but not for the other. In the optometrist case, his unethical actions maybe in the end favorable for the patient but the means or actions to achieve this result were not ethical. Here, the insurance company is losing money. The doctor is violating his optometric oath and promise to protect society and the public.

A repeated unethical decision no longer is just a poor decision. At this point, it has become a violation of the law. Laws are defined as the minimum standard which must be upheld. Legal implication can lead to suspension, probation, and revocation of one's license. Laws were created to protect the public and to lead to justice and fairness, where people get what they deserve. As a professional, repeated

violation of these laws can affect the entire profession such as Optometry. We are already challenged by the public and other types of similar professions such as medicine and ophthalmology. Failure to address unethical behavior and violation of laws, will eventually lead to our loss of autonomy as a profession that we have fought so hard to preserve.

Intervention through confrontation should be the primary action for involvement. Bring the violation and unethical decision in the open and helping the optometrist to first acknowledge what he doing is wrong is key. Helping the optometrist to understand that while he may think he did the right thing, the result does not always justify the means. If he denies any wrongdoing, then the next stage would be for referral to a higher authority. My suggestion here is the local society. Getting the society's board members to help intervene would be ideal. First it provides a way for optometry to remain autonomous and allow peers to help. The local society could help with counseling and medical intervention if necessary. If all their documented efforts do not produce immediate results, then referral to the CA Board of Optometry would be next. At this stage, I believe the Board should try and resolve the situation and work with the optometrist both emotionally and medically and educationally.

References:

- 1. American Optometric Association. Code of Ethics. Modified 2007
- 2. California Optometric Association. The Optometric Oath.
- 3. Richard L Hopping, O.D., Ethics: a professional challenge revisited, J Am Optom Assoc 1990 51:345-351
- 4. Barnard Lo, M.D., UCSF, Resolving Ethical Dilemmas, 3rd edition, A Guide for Clinicians

"Ban is urged on companies drug gifts to doctor"

An ethical perspective:

Drug companies soliciting doctor approval. Is this ethical? Is this their ultimate goal?

The drug companies are for profit businesses that concentrate primarily on revenue growth. Our entire society is affected and dependent drug companies. They are massive in terms of size of employees, revenue is in the billions, and the amount of tax revenue they generate is tremendous. Wall Street loves the drug companies as they affect every aspect of daily life. Drug companies treat our newborns, inoculate our infants, cure our children, safeguard our adolescents, and save our elders. Their main goal is to generate profits by producing and controlling effective drugs for all ages all over the world. They want to grow each year and produce profits for their shareholders.1(Josephson Institute).

Michael Josephson defines ethics as a process, a logical code of conduct based on timeless values such as respect, caring, integrity, honesty, fidelity, and fairness. Ethical people will treat others with the same consideration and respect that you wish to be treated. Ethical values should always take precedence over non-ethical values such as wealth, success, or status. Finally, it is permissible to violate an ethical principle but only in favor of a more ethical principle. ² Doctors by nature of their profession are held to a higher standard by the public. As professionals, doctors are expected to be well educated and thus are upheld to higher ethical standards. Patients look up to us to be able to provide them with unbiased, educated, truthful opinions.

Now, comes the dilemma that drug companies cause. The primary target of drug company revenue is the physician. The drug companies solicit the doctors as they are graduating from school or serving their internship. The drug companies shower the doctors with gifts, meals, entertainment, sponsorship of events, free samples, vacations, golf outings, etc. How is this appropriate behavior? Shouldn't the doctor make the decision on what drug to prescribe based on results, efficacy, and availability? We should but this is not the case.

The drug companies are effectively creating an ethical dilemma. Drug company ethic view is based on Utilitarianism which is a form of consequentialism. This utilitarianism is an ethical philosophy that the moral worth of an action is solely determined by its contribution to overall utility. In other words, it's the end result that counts and the "results justifies the means". Drug companies are in the health business to help people; however, their methodology is the area of ethical debate. They do not care if they are creating ethical dilemmas for doctors. Their belief is to utilize any marketing tool to present their drugs to whomever is going to make them the most profit, that being the doctor. They justify the means by believing their drugs are going to help and better the patient regardless. Their marketing and market values should not be allowed to undermine a physicians' commitment to the patients' best interests.

Now, the doctors' ethical view is more like Virtue ethic which focuses on what makes a good person. A doctor's view is the opposite of the Utilitarianism view of the drug company. Doctor's should not base their ethical decision solely on the end result. In a doctor's ethical perspective, the "means" outweigh the results. In the case of drug company's gifts, a ban is needed. Doctors, being held to the higher standard, must always make their decision based on what is best for the patient. The patient should always come first and no harm shall ever come to a patient. The drug companies soliciting the doctors and trying to influence their prescribing habits is a definite conflict of interest. The doctor is protecting the patient and doing what is best for the patient. The drug company is trying to persuade the doctor to prescribe their drug because it benefits the drug company and more profits are the result. Drug companies should never be in the position to create another ethical dilemma for the doctor. Doctors go through clinical dilemma each day, where decisions are made based on competing ethical principles. Doctors should be allowed to prescribe what is best for their patient based on the drug efficacy and results.

Drug companies should really be targeting the public who then express their ideas to the doctors who are impartial and only make decisions based on results, efficacy, and availability. Perhaps the better way is to have multiple drug companies presenting one after another in shorter times (20 minutes) segments so that the doctors hear and see them all at one time and then can make their own informed decisions. The presentation of multiple drug companies at one meeting helps to avoid the ethical dilemma problem created with gifts or luncheons because the drug companies do not hold an advantage over one another in this instance. Drug company marketing such as pens, pad, dvd's are part of the business and will always be here. Removing drug company direct presence in the clinics and schools will help to preserve the doctors' delicate ethical foundation by eliminating the ethical dilemma caused by drug company's bombardment of gifts and solicitation.

References:

- 1. Josephson Institute. What is Ethics Anyway?
- 2. Richard L Hopping, O.D., Ethics: a professional challenge revisited, J Am Optom Assoc 1990 51:345-351

Essay 3: Discuss the ethical issues related to fraudulent billing by an optometrist. What should be the appropriate consequences be for this violation?

As an optometrist, we are bound by a code of ethics. Not only must we treat, resolve patient problems but we must also educate. We must protect our patients both health wise and privacy wise. We must also promote ethical relationships with the health care and public communities. And finally, we must conduct ourselves as exemplary citizens and professionals with honesty, integrity, fairness, kindness and compassion. ¹

Being that an optometrist is held to higher standard as a professional, we are expected to adhere to a higher ethical standard. The public inherently trust us as a doctor to make decisions that protect them and the public.

Unfortunately, there are situations that occur during optometric practice which causes confusion ethical values and non-ethical values. Non-ethical values are such as wealth, gratification, success, and notoriety should always be secondary to ethical values. ² Each of us has innate ability to be very noble, honest, and good. But we also have the ability to be selfish and dishonest when non-ethical values take priority.

Fraudulent billing by doctors are becoming a very common finding in today's news. All types of doctors and health facilities have been caught submitting false documents regarding Medicare and insurance billing. In some cases, medical supplies and services have been claimed to have been provided to patient who were actually deceased or never received services. Non-ethical values such as greed and money always seem to be at the forefront of this confrontation and battle within.

Eye care is no different with regards to fraudulent billing. Optometry and Ophthalmology professions have seen cases of falsifying information for levels of care, distorting findings in order to maintain market share, excessive prescribing, providing unnecessary procedures for billing purposes, alteration of medical charts, etc.

As an eye care professional, we are not only held to higher standards but we are exemplary in the fact that as a professional we are self monitoring and self policing. In other words, we are autonomous and we fight this each day. Even our peers in ophthalmology have tried to reduce our level of care and what we can or cannot practice. Fraudulent billing is not only unethical but it hurts our profession. It places our autonomy at risk. It is becomes imperative that we accept responsibility for our actions and intent and we do not misuse that privilege. We have won some battles and have lost some. We must not lose any more. 3(hopping)

Another important aspect related to fraudulent billing is our ethical values and how our senior experienced optometrist must help educate and serve as role models for our younger optometrist. In CA, we are one of the few states with a strong private practice presence. However, because of economic turmoil and the rising costs of education, it has become very difficult for today's new

graduates to enter private practice. Many must work for experienced older optometrists who have been well established in private practice. These senior optometrist must take it personally to educate and share their experience both in patient management as well as ethical values in patient care. The reason for this is that many new optometrists do not have the experience to make such decisions as they have not seen as many patients and they are not owners of practices yet. James Mason Wood stated, "Education today, more than ever before, must see clearly the dual objectives: education for a living and educating for making a living. We must teach character as well as visual science." ³ Whenever possible, the senior optometrist must discuss ethical dilemnas with the younger optometrist. Practitioners who recognize unethical behavior such as "fraudulent billing" must not turn their backs. They must be proactive and confront the optometrist. It is not adequate to just say that I would not do that. Its our professional and our autonomy that we are all protecting.

Again, as an optometrist we have a moral and ethical obligation to protect the public from harm but we also have an obligation to our profession and peers and must protect and educate them also. The practitioner committing the billing fraud does not realize how is affecting his patient, the public, the optometric profession, and the insurance company which affect us all in higher costs. We must work to alter this very nearsighted and self promoting attitude. Richard Hopping, O.D. believes strongly that ethical behavior can be addressed and unethical behavior can be altered in subsequent years.

The question most difficult to address is that since we are autonomous and self regulating is what should be the consequences for fraudulent billing. 39% of polled medical physicians said they exaggerated or changed billing code or reported symptoms that did not exist in order to get insurance coverage. ⁴ Many doctors state that they made this decision because of red tape or that it benefited the patient. The fact remains that both the patient is benefiting but so is the doctor financially because they paid also.

For a first time optometrist who has committed billing fraud, we should consider probation and education. Probation is a viable option because we must protect our profession. As stated earlier, optometry's autonomy is always a battle ground. We have enough to worry about with medicine and ophthalmology. We need to support our practitioners and private practice. By keeping control of our own affairs and keeping them, we can keep our name, Optometry, strong. In addition, we are providing a model for unethical practitioners to have a second chance. Many times there are reasons and situations which lead to the unethical decision making. By allowing the practitioners to remain in practice and simultaneously make amends for their actions we are empowering the doctor and strengthening our profession. Probation should be a based on the severity of the billing but a minimum time of one year with having to report to the Board quarterly in person. Maximum time of probation should be 3 years.

During the probation, there should be an education requirement that needs to be satisfied. I believe that added education on ethics and its consequences are imperative to understand the one's reasons for committing the fraud. Meeting with a doctor to discuss articles and communicating the reason and actions are required. Additional continuing education is appropriate but needs to be in the area of ethics and law and should be designed by the schools of Optometry. Just taking additional CE on

treatment of disease and practice management does not really address the issue. These course should be designed by the appropriate faculty members of the schools and the time paid to design them should be reimbursed by the practitioner. I also think it is appropriate for the practitioner to provide a lecture where by he lectures on private practice and ethics and his own personal experience. This class should be open to students at the school and be a voluntary attended lecture. Speaking about it in public not only will be a memorable experience for the students but the practitioner will never want to do this again. It's a win-win situation.

A private practitioner should have the ability to retain his license if he can admit to the guilt and do all the necessary actions required by the Board. Taking away an O.D. 's license will only further damage the mental capacity of the practitioner. If the actions were sever in enough, the Board could recommend the probation be accompanied with a leave of absence for a a set time period (say 6 months). During this time, we could utilize the new graduates to help provide coverage and gain invaluable private practice experience. The guilty OD will now have time to reflect and change his inner moral and ethical outlook. At the end of the probation/suspension, the OD may apply to the Board for full reinstatement. There are of course a wide arrange of circumstances but we must try to protect the public and make sure that patients were not harmed.

I truly believe in what Richard Hopping, O.D. belief in that we are held to a higher standard and code of ethics. Ethical behavior can be addressed and unethical behavior can be altered in subsequent years. If we can return to this standard through hard work and sacrifice, then the practitioner deserves a second chance. In this way, we are not only recognizing an error in judgment but we are as a group helping to rehab our peers and preserve and strengthen our autonomy. A loss of a good practitioner hurts the public also. And as we age and live longer, we will need more highly educated professionals with higher ethical standards.

References:

- 1. American Optometric Association. Code of Ethics. Modified 2007
- 2. Richard L Hopping, O.D., Ethics: a professional challenge revisited, J Am Optom Assoc 1990 51:345-351
- 3. Richard L Hopping, O.D., Ethics: a professional challenge revisited, J Am Optom Assoc 1990 51:345-351
- 4. Barnard Lo, M.D., UCSF, Resolving Ethical Dilemmas, 3rd edition, A Guide for Clinicians

Continuing Education

Optometric Glaucoma Society Annual Meeting

November 15-16, 2010 COPE Event # 101286

CE Attendance Verification

The below-named practitioner completed the following education courses on November 15-16, 2010. (*Please Print*)

First Name	GREGORY	Last N	ame John		
Address 2	02 Aspenwood	CF			
City <u>San</u>	Ram on		State C4	Zip 9458	<u></u>
Phone (5	70, 206 8152	Email	Idoxyuz	ce yaho	o., Com
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At the end of each session - you must have this form stamped to receive CE credit.

		Course		receive CE Credit.
Date	COPE	Duration	Course Title	Validation
·	ID#	(hrs)		
11/15/2010	29718-GL	1	Past Perspectives and New Research for Low Vision in Glaucoma	Attendance Verified By UABS0
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11/16/2010	29657-GL	2	Open Angles and More	Attendance Verified
				By UABSO
11/16/2010	29659-GL	2	Glaucoma: Genetics and Other Risk Factors	Attendance Verified
				By UABSO
11/16/2010	29660-GL	2	Glaucoma Clinical Trials: Risk and Other Factors	Attendance Verified By UABSO
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11/16/2010	29661-GL	1	New Surgical Approaches in Glaucoma	Attendance Verified By UABSO

Total CE Credits Obtained:

VALID ONLY IF STAMPED WITH OFFICAL UAB School of Optometry Stamp 1716 University Blvd. Birmingham, AL 35294-0010 - (205)-934-5701



2010 ATTENDANCE VERIFICATION FORM

Course Title: Detection and Diagnosis of Retinal Disease Invisible to Ophthalmoscopy

Course #: PS-02

Credit Hours: 1

Speaker(s): Sherman

Date/Time: Wednesday, November 17, 2010 9:00 AM

Keep this for your personal records

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2010 ATTENDANCE VERIFICATION FORM

Course Title: Developing a Process of Differential Diagnosis in Anterior Segment

Disease

Course #: AS-01

Credit Hours:

Greg Tom

Speaker(s): Karpecki

Date/Time: Wednesday, November 17, 2010 10:00 AM

Keep this for your personal records

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UNIVERSITY OF CALIFORNIA, BERKELEY

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SANTA BARBARA

SANTA CRUZ

SCHOOL OF OPTOMETRY BERKELEY, CALIFORNIA 94720-2020

June 2010

Greg Tom, OD 202 Aspenwood Ct. San Ramon, CA 94582

Dear Dr. Tom,

The School of Optometry at UC Berkeley offers a unique opportunity for optometrists to meet the requirements for the California Board of Optometry licensure renewal. By attending our Berkeley Practicum and Morgan/Sarver Symposium Continuing Education Programs and completing three of the four programs offered during the two-year period, optometrists meet the current State Board Licensure requirements. To further simplify your task of documenting the hours, we have coordinated our database so that the two-year cycle corresponds to the expiration date of your license. Your license will expire on the last day of the month of your birthday, which, according to the California Board of Optometry, is July 31, 2010.

Our records indicate that you attended the following programs:

Berkeley Practicum
Morgan/Sarver Symposium
Berkeley Practicum

January 10-12, 2009 April 24-26, 2009 21 hrs. 21 hrs.

January 9-10, 2010

20 hrs.

You have completed 50 Continuing Education hours, with a minimum of 35 hours in the topics of Glaucoma, Ocular Infection, Ocular Inflammation, Topical Steroids, Systemic Medications, and Pain Medications, and a maximum of 15 hours of Miscellaneous. Your UC Berkeley School of Optometry Certificate of Completion is enclosed.

Congratulations on your accomplishment and thank you for your interest in Continuing Education at the UC Berkeley School of Optometry. We hope to see you at our CE Programs in the future.

Best regards,

Patsy L. Harvey, OD, MPH

Director, Continuing Education

tay Dawey &

UNIVERSITY OF CALIFORNIA, BERKELEY

BERKELEY DAVIS IRVINE LOS ANGELES - RIVERSIDE - SAN DIEGO - SAN FRANCISCO



SANTA BARBARA - SANTA CRU

DENNIS M. LEVI, O.D., PH.D.

SCHOOL OF OPTOMETRY BERKELEY, CALIFORNIA 94720-2020

January 20, 2010

To Whom It May Concern:

This is to certify that *Greg Tom*, *OD*, attended the following lectures at the 21st Annual Berkeley Practicum, held from January 9-11, 2010. The CE Program was presented by the School of Optometry, University of California, Berkeley.

State CA License No. 10427 State License No. _____ License No. _____

January 9, 2010

8 TPA Hours

Robert Johnson, MD

Intraocular Tumors: Are These Cases Benign or Malignant?

Joel Schuman, MD

Optical Coherence Tomography (OCT): Development, Application, and Pearls

Harry Quigley, MD

Management of Glaucoma: The Systemic Approach

Jill Autry, OD, RPh

Pharmaceutical Pearls for Optometrists

January 10, 2010

8 TPA Hours

Jill Autry, OD, RPh

Glaucoma: What Goes Up; Must Come Down

Patsy Harvey, OD, MPH

Infectious Diseases: Yesterday, Today, and Tomorrow

Todd Margolis, MD, PhD

Adventures in External Ocular Disease

Madhu Agarwal, MD

So You Think It's Just Ptosis

January 11, 2010

4 TPA Hours

Jacque Duncan, MD

RP Variants and Mimics: Don't Let Them Fool You

Scott Lee, MD, MPH

Oculoplastics: Miracles and Mistakes

Attendance Certification University of California School of Optometry Fatsay Dawey &

Patsy L. Harvey, O.D., M.P.H Continuing Education Director



60th Annual Educational Program and Reunion Saturday, October 2, 2010 Optometry Alumni Association of the UC School of Optometry Berkeley, CA. 94720 510-642-4491

This is to certify that Gregory Tom, OD

State A

License No. /0427 T

Attended the following lectures on Saturday, October 2, 2010 7.0 CE Hours (7.0 TPA)

Gregory Perrone, O.D.

"Autism: Traditional and Non-Traditional Treatments

Lou Catania, O.D., F.A.A.O.

"Our Future Is Shifting Rapidly"

John McGreal, O.D.

"Using New Technology to Improve Quality Care"

Rich Castillo, O.D., D.O.

"An Introduction to Dermato-Radiofrequency Surface Ablation"

1.0 hr. Systemic Meds

2.0 hrs Ocular Disease

2.0 hrs. Glaucoma

2.0 hrs. Ocular Disease

Actandancy Cartified Oniversity of California School of Optometry

Paul Peng, O.D., F.A.A.O., OAAUC President



University of Alabama School of Optometry

Office of Continuing Education 1716 University Boulevard Birmingham, AL 35294-0010 (205) 934-5701

COPE approval is granted for this course. This course is COPE-qualified for 1.00 hour of CE credit.

This course is joint-sponsored by Review of Optometry, a publication of Jobson Medical Information LLC.

Course Title: Diagnosis and Treatment: Glaucoma and Ocular Surface Disease

COPE ID: 25864-GL

Date: 8/19/2009

Score: 70

QUESTIONS ANSWERED INCORRECTLY: 1-C,8-B,9-B

Gregory Tom 202 Aspenwood Ct

San Ramon, CA 94582

Leo Semes, O.D.

Director, Continuing Education UAB School of Optometry

Survival Strategies in the Next Decade:

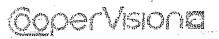
Smarter Care - Stronger Practice

CE CERTIFICATE: August 1, 2009 – Sonoma, CA

This Certificate confirms that the below-named practitioner completed the following education courses on August 1, 2009. AFTER COURSES – YOU MUST TURN INTO REGISTRATION DESK FOR STAMPED CONFIRMATION

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Overall Comments: Great speakers Best CE never son in HAUE 2 per your in the area (St., NASA/SUNDING & SAN JONE). HAVE in a Sun or SAN oftenion so





RECORD OF ATTENDANCE FOR CONTINUING EDUCATION CREDIT

Please provide all information requested. On completion of the course identified below, the room monitor will validate and immediately return this form to you. Keep this as your validated record of attendance. CooperVision, Inc. will not notify any licensing board, or any other agency, of your attendance unless specifically required by your state board. CooperVision does not guarantee that the course you have attended has been approved for continuing education credit by your licensing board.

	PARTICIPANT INFORMATION		COURSE INFORMATION			
LAST NAMI	FIRST	МІ	COURSE NUMBER	LENGTH (HOURS)		
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	(866) 595-6833 FAX		(925) 283-	3700		
		. :	August 19,	2009		
			7:00 pg			

san ramon, CA 94582

202 Aspenwood ct

gregory tom

100 Ave of Americas, 9th Jobson Publishing LLC New York, NY 10013

ADMINISTRATOR: Review of Optometry, a publication of Medical Information, LLC DATE: 08/01/2009

COURSE TITLE: A Clinical Perspective on Ocular Surface Disease

INSTRUCTOR: Perspective on Ocular Surface Disease

AUTHORIZED SIGNATURE: $(\psi \psi_{L \cap \ell})$ CREDIT EARNED: 1.00 Hours

COPE ID#:

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100 Ave of Americas, 9th FI Vew York, NY 10013

ADMINISTRATOR: Review of Optometry, a publication of Medical Information, LLC CERTIFICATE OF ATT **JATE: 08/01/2009**

COURSE TITLE: Anti-Infectives: What's New & What's Next in the Managment of Ocular Infection NSTRUCTOR: Managment of Ocular Infection

COPE ID #: 24621-PH CREDIT EARNED: 1.00 Hours

AUTHORIZED SIGNATURE: $(\mathcal{U}_{U,\mathcal{U}})$

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esponsibility to submit this certificate participation in the above mentioned continuing education credit. Jobson o his/her state licensing board for This documentation verifies your Publishing will not forward this course. It is each participant's documentation to any agency

New York, NY 10013

CERTIFICATE OF ATTENDANCE

Jobson Publishing LLC 100 Ave of Americas, 9th

ADMINISTRATOR: Review of Optometry, a publication of Medical Information, LLC

DATE: 08/01/2009

Course Title: Strategies for Minimizing Risk Factors for your Contact Lens Patient - The Science &

INSTRUCTOR: Minimizing Risk Factors for your Contact Lens Patient

CREDIT EARNED: 1.00 Hours

COPE ID #: 20403-CL

AUTHORIZED SIGNATURE: (LUCIU) (Confe)

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PARTICIPANT INFORMATION

gregory tom 202 Aspenwood ct san ramon, CA 94582

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Jobson Publishing LLC 100 Ave of Americas, 9th FI New York, NY 10013

CERTIFICATE OF ATTENDANCE

ADMINISTRATOR: Review of Optometry, a publication of Medical Information, LLC

DATE: 08/01/2009

DATE, TIME FAX NO./N DURATION

MODE

COURSE TITLE: Normal Tension Glaucoma - What We Don't Know May Hurt Us!

INSTRUCTOR: Normal Tension Glaucoma

COPE ID #: 20290-GL CREDIT EARNED: 1.00 Hours ...-

AUTHORIZED SIGNATURE: QUERNE Combo

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Publishing will not forward this documentation to any agency.

PARTICIPANT INFORMATION

gregory tom 202 Aspenwood ct san ramon, CA 94582

Halmhalalaladadadadal



The University of California Berkeley School of Optometry Prime Time Optometric CE December 4-9, 2009

Charles H. Bailey, O.D.

Co-Chair

Robert B. DiMartino, O.D., M.S.

Co-Chair



The University of California Berkeley School of Optometry Prime Time Optometric CE December 4-9, 2009

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Co-Chair



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Co-Chair

Robert B. DiMartino, O.D., M.S.

Co-Chair



The University of California Berkeley School of Optometry Prime Time Optometric CE December 4-9, 2009

This certifies that _	GNEG	Ton		· · · · · · · · · · · · · · · · · · ·	<u> </u>
attended the 5 hour	continuing e	ducation pr	ogram on	Diabet	es and
Diabetic Retinopath	y, December	7, 2009.			

Charles H. Bailey, O.D.

Co-Chair

Robert B. DiMartino, O.D., M.S.

Co-Chair



The University of California Berkeley School of Optometry Prime Time Optometric CE December 4-9, 2009

Charles H. Bailey, O.D.

Co-Chair

Robert B. DiMartino, O.D., M.S.

Co-Chair



The University of California Berkeley School of Optometry Prime Time Optometric CE December 4-9, 2009

This certifies that _	Gaes Tom	· · · · · · · · · · · · · · · · · · ·	
attended the 5 hou	ır continuing educ	cation program	on Progressive
Lenses: Past, Pres	sent and Future, I	December 9, 2	009.

Charles H. Bailey, O.D.

Co-Chair

Robert B. DiMartino, O.D., M.S.

Co-Chair

Restitution

VS O Vision care for life

August 9, 2010

Gregory Tom, O.D. 202 Aspenwood Court San Ramon, CA 94582

Re: Final Payment check #1142

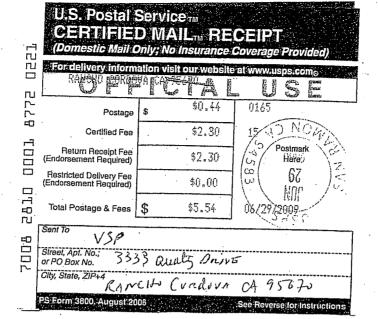
Dear Dr. Tom

This letter acknowledges our receipt of check #1142 in the amount of \$8,785.64. This constitutes payment in full of the previously outstanding restitution amount. Thank you for your cooperation in this matter.

Sincerely,

Thomas M. Jones, CFE, AHFI
Senior Fraud Investigator

/tmj



6/2009 No response by VSP

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so that we can return the card to you.	B. Received by (Printed Name) C. Date of Delivery
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item 4 If Restricted Delivery is desired.	Addressee
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07/30/2010

(800)275-8777

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Sales Receipt Product Sale Unit Final Description Qty Price Price RANCHO CORDOVA CA 95670 \$0.44 Zone-2 First-Class Letter 0.40 oz. Expected Delivery: Mon 08/02/10 Certified \$2.80 Label #: 70101060000121983553 Issue PVI: \$3.24

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BOARD OF OPTOMETRY 2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170 Fax: (916) 575-7292

Quarterly Report of Compliance (Return to the address shown above)

(PLEASE PRINT OR TYPE)				
NAME: Last	First	Middle		License No.
Tom	GREGURY			10427-1
RESIDENCE ADDRESS: Number	Street	City	State	Phone
262	Aspennica	CT Sun Ac	um CA	5702068152
OFFICE ADDRESS: Number	Street Le Angela Si	City - Neusun	State San CA	Phone 925-456-4393
NAME OF EMPLOYER, PARTNER Last CHIV	R, OR ASSOCIATE (if any, and First Radber	Mido		
ADDRESS: Number	Street	City	State	Phone
63 W	Angels ST	flensanta	<i>C</i> 4	925457 4393
Name of your probation survei	llance officer:			
Robert	DIN ARTINO			
Since the last quarterly report	have you had any problem :	securing or maintain	ing employment?	(YES) (NO)
Explain in Detail, if answer is (es:			
DIFIFICUT,	no me all	hir once	I tell	Min Jam
on probation	n. VSC docor	as don't n	ant an o	Pm probation
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Since the last quarterly report, have	you:	, (C	Circle Yes or No)
Been arrested, charged, or convicted	of any violation of Federal, S	State and local laws?	(YES) (NO)
2. Complied with every condition of the t	erms of your probation?		. (YES) (NO)
3. Complied with all optometry laws?			. (YES) (NO)
4. If required, have you paid the Board a	ny Cost Recovery? If so, ho	w much	(NO)
5. Participated in any continuing education	•		
Course:	Date:	_ Certificate Attached	I: (YES) (NO)
Course:	Date:	Certificate Attached	I: (YES) (NO)
Course:	Date:	_ Certificate Attached	I: (YES) (NO)
(Note: Original certificate of completion	must be attached for complia	ınce credit – originals wi	II be returned)
6. Please attach copies of complete patie same patient type, i.e. 3 for patients up varying ranges of refractive and eye h	nder 40 years of age, 3 for pa	unters. These are not to atients over 40 years of a	be of the age with
Explain any YES answer to question 1 and	d any NO answer to question	2 or 3:	
- The second sec			
I hereby submit this Quarterly Report a Board of Optometry and its order of pr of the State of California that I have re and that all statements made are true omissions of material fact may be cause Probationer Signature	obation thereof, and decla ad the foregoing report in i in every respect, and unde	re under penalty of pets entirety and know it erstand that misstatem ion.	rjury the laws s contents
Propationer Signature	Date	≠	•

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St. Pleasanton, CA 94566 925-456-4393 FAX: 925-226-3157

For: # State

Exam Date: 05/15/2010
Print Date: 07/21/2010 18:23
DOB: 03/30/1999
Age: 11

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: check up slow reader in tutoring...she is in 5th grade, but doing 4th grade level equivalent.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing routine headaches or double vision. No reports of visual floaters or light flashes. **VISION COMPLAINT:** Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists.

SYSTEMIC FAMILY HISTORY: No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. OCULAR FAMILY HISTORY: Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used
SYSTEMIC MEDICATIONS: No reported systemic medications.
SOCIAL HISTORY: No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/20 - NVA 20/20 OS: DVA 20/20 - NVA 20/20 OU: DVA 20/20 - NVA 20/20

VISION

PD's:

Dist IPD: 59.5 OD: 29.75 OS: 29.75 Near IPD: 59.5 OD: 29.75 OS: 29.75

COVER TEST (DIST): Method: Alternate Horz: Ortho Vert: OD: Ortho OS: Ortho COVER TEST (NEAR): Method: Bilateral Horz: 3.00EP Vert: OD: Ortho OS: Ortho

NEAR PT CONVERGENCE: Method: Push Up Blur: 9

NEAR PT ACCOMMODATION: OD: 10.25

RETINOSCOPY:

OD: +1.25

OS: +1.25

MANIFEST:

OD: +1.25 -0.50 x 10 DVA: 20/20 NVA: 20/20 +1.50 -0.50 x 078 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

CYCLOPLEGIC:

OD: +3.25 DVA: 20/20 OS: +3.50 DVA: 20/20 OU: DVA: 20/20

FINAL SPECTACLE RX:

OD: +2.75 OS: +3.00

EXAMINATION

CUP/DISC RATIO:

OD: Horz .20 Vert .20 OS: Horz .20 Vert .20

TONOMETRY: OD: 14 mmHg OS: 14 mmHg Test: Goldmann Time: 17:53 Category: Examination

VISUAL FIELDS SCREENING: Bilateral: Visual Field Screening normal.

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants, OS

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light.

SLIT-LAMP EXAM: Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy. DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

HYPEROPIA

ASTIGMATISM LATENT HYPEROPE...NEEDS FULL DROPS TO GET ALL PLUS

BILATERAL: UNSPECIFIED BINOCULAR VISION DISORDER

DISORDERS OF ACCOMMODATION

PLAN

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected. TREATMENT VISUAL EFFICIENCY: vision threapy recommended to treat conv insufficiency....vt program to last 6 to 8 weeks

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment.

COUNSELING / EDUCATION: I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: Doctor face-to-face with patient 40 minutes. Counseling and/or Coordination of Care.

Date: 06/22/2010

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination

PROCEDURE:

92004 Exam Comp. New 92015 Exam Refraction

Completed Exam:

Gregory L. Tom, O.D.

ġ

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St. Pleasanton, CA 94566 925-456-4393 FAX: 925-226-3157

For: Exam Date: 04/24/2010

Print Date: 07/21/2010 18:19
DOB: 11/20/2003 Age: 6

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: glasses are broken and old.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing routine headaches or double vision. No reports of visual floaters or light flashes. **VISION COMPLAINT:** Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

patient was born 4 weeks early and farsighted

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists. **SYSTEMIC FAMILY HISTORY:** No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. OCULAR FAMILY HISTORY: Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used SYSTEMIC MEDICATIONS: No reported systemic medications.

SOCIAL HISTORY: No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

PRESENTING SPECTACLE Rx: (#1)

OD: +3.25 -0.50 x 152 HPrism: 2.5 ouBt DVA: 20/40-OS: +3.25 -0.50 x 18 HPrism: 2.5 ouBt DVA: 20/30+

<u>VISION</u>

PD's:

Dist IPD: 56 OD: 28 OS: 28

COVER TEST (DIST): Method: Alternate Horz: Ortho COVER TEST (NEAR): Method: Bilateral Horz: 20.00EP

FUSION: Method: Worth test Near: 4 Fusion STEREOPSIS: Method: Stereo Fly Near: 200" NEAR PT ACCOMMODATION: OD: 17.25

MANIFEST:

OD: +3.25 -1.25 x 155 HPrism: 2.5 ouBt OS: +2.75 =0.50 x 18 HPrism: 2.5 ouBt

CYCLOPLEGIC:

OD: +3.00 -1.25 x 155 HPrism: 2.5 ouBt DVA: 20/25 OS: +3.00 -0.50 x 18 HPrism: 2.5 ouBt DVA: 20/20

FINAL SPECTACLE RX:

OD: +3.00 -1.25 x 155 HPrism: 2.5 ouBt DVA: 20/25 OS: +3.00 -0.50 x 18 HPrism: 2.5 ouBt DVA: 20/20

EXAMINATION

CUP/DISC RATIO:

OD: Horz .30 Vert .30 OS: Horz .30 Vert .30

TONOMETRY: OD: 15 mmHg OS: 15 mmHg Test: Goldmann Time: 23:01 Category: Examination **VISUAL FIELDS SCREENING:** Bilateral: Visual Field Screening normal.

DILATION ORDERS: DFE performed using BIO and SLE w/Volk 90D lens. @05:45 PM

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants, OS

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light.

SLIT-LAMP EXAM: Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy. **DISPOSITION:** Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal. Left Eye: Color vision was found to be normal.

IMPRESSION(S):

HYPEROPIA

ASTIGMATISM

INTERMITTENT ESOTROPE WITH FUSINO AT NEAR IN PHOROPTER WITHOUT BASE

OUT PRISM.

PREVIOUS MD HAD 5.0 PRISM DIOPTERS SPLIT OU BASE OUT DID WET RETINSOCPOTY AND NO EXTRA PLUS

FULL RX WITH BINASAL OCCULSION AND PRISM...AND TRY AND WEEN PRISM OFF DO FOLLOW UP WORTH DOT AND POSSIBLE FT 28 IN FUTURE BILATERAL: STRABISMUS, INTERMITTENT

PLAN

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected.

see previous summaruy

binaasal occlusion with prism and try to ween prism off over 1 year and then use plus lenses at near such as bifocal to keep fusion at all times vt with stereo glasses or red/green glasses while reading or doing home work

rtc 4 weeks and check fusikon and possible vt

05/15/2010 Patient dispensed....va 20/25 OD and 20/20 OS ...did worth 4 dot and he is fusing at near, see in 4 weeks and possibly do nasal occlusion and recheck if fusion can be made better with higher plus at near

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment.

COUNSELING / EDUCATION: I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions. **TIME-ESTIMATE:** Doctor face-to-face with patient 40 minutes. Counseling and/or Coordination of Care. 10+ minutes.

Date: 06/18/2010

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination

PROCEDURE:

92004 Exam Comp. New 92015 Exam Refraction

Completed Exam:

Gregory L. Tom, O.D.

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St. Pleasanton, CA 94566 925-456-4393 FAX: 925-226-3157

For

Exam Date: 05/15/2010
Print Date: 07/21/2010 18:24
DOB: 12/14/2000 Age: 9

REASON FOR VISIT

EXAMINATION: Adult eye health and vision examination.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: teacher says slow reader and loses place while reading.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing routine headaches or double vision. No reports of visual floaters or light flashes. In addition, not experiencing blurry or uncomfortable vision.

VISION LOSS: None reported OCULAR SYMPTOMS: None reported

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

OCULAR HISTORY: OK (None). .

MEDICAL HISTORY: No pertinent past medical history exists. **SYSTEMIC FAMILY HISTORY:** No pertinent medical history exists.

OCULAR SURGICAL HISTORY: None.

OCULAR FAMILY HISTORY: Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/20 NVA 20/20 OS: DVA 20/20 NVA 20/20 OU: DVA 20/20 NVA 20/20

VISION

PD's:

Dist IPD: 58.0 OD: 29 OS: 29

COVER TEST (DIST): Method: Cover-Uncover Horz: Ortho Vert: OD: Ortho OS: Ortho COVER TEST (NEAR): Method: Bilateral Horz: 5.00EP Vert: OD: Ortho OS: Ortho

NEAR PT CONVERGENCE: Method: Push Up Blur: 4

NEAR PT ACCOMMODATION: OD: 10.25 OS: 10.25 OU: 10.25

RETINOSCOPY:

OD: +0.75 OS: +0.75

MANIFEST:

OD: # 40.75 -0.25 x 094 DVA: 20/20 NVA: 20/20 OS: +0.75 -0.50 x 085 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

CYCLOPLEGIC:

OD: +2.75 DVA: 20/20 OS: +3.00 DVA: 20/20 OU: DVA: 20/20

FINAL SPECTACLE Rx:

OD: +2.25 DVA: 20/20 NVA: 20/20 OS: +2.50 DVA: 20/20 NVA: 20/20 OU: DVA: 20/20 NVA: 20/20

EXAMINATION

CUP/DISC RATIO:

OD: Horz .10 Vert .10 OS: Horz .10 Vert .10

TONOMETRY: OD: 15 mmHg OS: 15 mmHg Test: Goldmann Time: 17:43 Category: Examination **EXTRAOCULAR MUSCLES:** Bilateral: Ocular motility assessment; full and unrestricted Saccades 4+, smooth and accurate. Pursuits 4+, smooth and accurate.

EYELASHES: Bilateral: Slit lamp observations include: Eyelashes are normal. **EYELIDS:** Bilateral: Slit-lamp observations include: Eyelids are normal.

PUPILS: Bilateral: Pupils are equally round, reactive to direct, consensual and near stimulation. No

afferent pupillary defect is noted. Mesopic pupil size is:

NEUROLOGY: Bilateral: Neuro-ophthalmic examination normal.

ORBIT: Bilateral: The orbit is normal.

HEAD and NECK: Facial findings are normal. No observable head tilt or rotation. Mouth/lip examination

normal.

CONJUNCTIVA: Bilateral: The cornea appears normal.

SCLERA: Bilateral: Sclera is normal.

IRIS: Bilateral: The iris appears healthy with normal anatomy and convexity. LENS: Bilateral: The lens shows normal clarity and integrity for age of patient.

ANTERIOR CHAMBER: Bilateral: Anterior chamber is normal.

VITREOUS: Bilateral: The vitreous is normal.

OPTIC NERVE: Bilateral: Optic disc appears normal.

MACULA: Bilateral: Macular anatomy is normal with no abnormalities.

CHOROID: Bilateral: Choroid is normal.

RETINA: Bilateral: Retina is flat, attached and normal.

RETINA - VASCULAR: Bilateral: No retinal micro aneurysms, exudates, edema or drusen. No retinal

hemorrhages.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal. Testing, Ishihara pseudoisochromatic plates.

IMPRESSION(S):

HYPEROPIA

ASTIGMATISM ACCOMMADTIVE INFACILITY

LATENT HYPEROPE.....NEEDS FULL TIME RX WITH GRADUAL RX CHANGE

PLAN

SPECTACLE PLAN: Adaptation to Rx expected. for focusing....vt needed

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment.

COUNSELING / EDUCATION: I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions. **HOME MONITORING:** Report changes in vision.

TIME-ESTIMATE: Doctor face-to-face with patient 35 minutes. Counseling and/or Coordination of Care. 20+ minutes.

ORDERS:

Recall on or about: Examination: None

DIAGNOSIS:

367.0 Hyperopia PROCEDURE:

92004 Exam Comp. New

Completed Exam: Date: 06/22/2010

Gregory L. Tom, O.D.

Vision One Optometry Dr. Radbert Chin 63 W. Angela St. Pleasanton, CA 94566 925-456-4393 FAX: 925-226-3157

For: Exam Date: 07/10/2010
Print Date: 07/21/2010 18:16
DOB: Age: Unknown

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: broken glasses and eyes are irritated and skin around eye is.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing routine headaches or double vision. No reports of visual floaters or light flashes. VISION COMPLAINT: Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non

otherwise noted below.

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists.

SYSTEMIC FAMILY HISTORY: No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. OCULAR FAMILY HISTORY: Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications. **SOCIAL HISTORY:** No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/300 NVA 20/20 OS: DVA 20/300 NVA 20/20 OU: DVA 20/300 NVA 20/20

VISION

PD's:

Dist IPD: 67.0 OD: 33.5 OS: 33.5

Near IPD: 64.0 OD: 32 OS: 32

COVER TEST (DIST): Method: Alternate Horz: Ortho COVER TEST (NEAR): Method: Bilateral Horz: 1.00XP NEAR PT CONVERGENCE: Method: Push Up Blur: 4

STEREOPSIS: Method: Stereo Fly Near: 20"

NEAR PT ACCOMMODATION: OD: 7.25 OS: 7.25

RETINOSCOPY:

OD: -2.25 -1.25 x 030 OS: -2.50 -1.00 x 180

MANIFEST:

OD: -2.25 -1.25 x 030 DVA: 20/20 NVA: 20/20 OS: -2.25 -1.00 x 180 DVA: 20/20 NVA: 20/20 OU: DVA: 20/20 NVA: 20/20

FINAL SPECTACLE Rx:

OD: -2.25 -1.25 x 030 DVA: 20/20 NVA: 20/20 OS: -2.25 -1.00 x 180 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

EXAMINATION

CUP/DISC RATIO:

OD: Horz .35 Vert .35 OS: Horz .35 Vert .35

TONOMETRY: OD: 15 mmHg OS: 15 mmHg Test: Goldmann Time: 17:59 Category: Examination

VISUAL FIELDS SCREENING: Bilateral: Visual Field Screening normal.

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants, OS

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light.

SLIT-LAMP EXAM: Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

BILATERAL: ATOPIC DERMATITIS STAPHYLOCOCCAL BLEPHARITIS MYOPIA ASTIGMATISM

<u>PLAN</u>

TREATMENT EYELIDS: Bilateral: Rx warm compresses several times a day. Rx lid hygiene therapy as

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected.

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment.

COUNSELING / EDUCATION: I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: Doctor face-to-face with patient 40 minutes. Counseling and/or Coordination of Care.

20+ minutes.

Date: 07/21/2010

ORDERS:

Schedule on or about: Examination: Annual Eye Examination.

DIAGNOSIS:

V72.0 Vision Examination

PROCEDURE:

92004 Exam Comp. New 92015 Exam Refraction

Completed Exam:

Gregory L. Tom, O.D.

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Vision One Optometry

Dr. Radbert Chin 63 W. Angela St. Pleasanton, CA 94566 925-456-4393 FAX: 925-226-3157

For:

Exam Date: 06/30/2010 Print Date: 07/21/2010 18:18 DOB: 04/17/1972 Age: 38

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: ned new glasses.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing routine headaches or double vision. No reports of visual floaters or light flashes. **VISION COMPLAINT:** Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists. **SYSTEMIC FAMILY HISTORY:** No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. OCULAR FAMILY HISTORY: Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications. **SOCIAL HISTORY:** No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/50 NVA 20/20 OS: DVA 20/100 NVA 20/20 OU: DVA 20/50 NVA 20/20

PRESENTING SPECTACLE Rx: (#1)

OD: -1.25 OS: -1.25

VISION

PD's:

Dist IPD: 68 OD: 34 OS: 34.

COVER TEST (DIST): Method: Alternate Horz: Ortho COVER TEST (NEAR): Method: Bilateral Horz: .25XP NEAR PT CONVERGENCE: Method: Push Up Blur: 2 NEAR PT ACCOMMODATION: OD: 17.00

RETINOSCOPY:

OD: -0.50 -0.50 x 081

OS: -0.75

MANIFEST:

OD: -0.25 -0.75 x 080 DVA: 20/20 NVA: 20/20 OS: -0.75 -0.50 x 85 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

FINAL SPECTACLE Rx:

OD: -0.25 -0.75 x 080 DVA: 20/20 NVA: 20/20 OS: -0.75 -0.50 x 85 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

EXAMINATION

CUP/DISC RATIO:

OD: Horz .30 Vert .30 OS: Horz .30 Vert .30

TONOMETRY: OD: 15 mmHg OS: 15 mmHg Test: Goldmann Time: 18:17 Category: Examination **VISUAL FIELDS SCREENING:** Bilateral: Visual Field Screening normal.

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants. OS

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light.

SLIT-LAMP EXAM: Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy. DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal. Left Eye: Color vision was found to be normal.

IMPRESSION(S):

BILATERAL: PINGUECULA

MYOPIA ASTIGMATISM

PLAN

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected.

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for

treatment.

COUNSELING / EDUCATION: I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: Doctor face-to-face with patient 35 minutes. Counseling and/or Coordination of Care. 10+ minutes.

Date: 07/21/2010

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination **PROCEDURE:**

92004 Exam Comp. New 92015 Exam Refraction

Completed Exam:

Gregory L. Tom, O.D.

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St. Pleasanton, CA 94566 925-456-4393 FAX: 925-226-3157

For:

Exam Date: 07/15/2010

Print Date: 07/21/2010 17:49

DOB: 06/12/1956

Age: 54

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: near vision is getting worse and distance is better.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing routine headaches or double vision. No reports of visual floaters or light flashes. **VISION COMPLAINT:** Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists. **SYSTEMIC FAMILY HISTORY:** No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. OCULAR FAMILY HISTORY: Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications. **SOCIAL HISTORY:** No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/40 NVA 20/40 OS: DVA 20/30 NVA 20/40 OU: DVA 20/30 NVA 20/40

VISION

K-READINGS:

OD: 43.00 @ Steep @

OS: 43.13 @ Steep @

COVER TEST (DIST): Method: Alternate Horz: Ortho COVER TEST (NEAR): Method: Bilateral Horz: 3.00XP NEAR PT CONVERGENCE: Method: Push Up Blur: 3

STEREOPSIS: Method: Stereo Fly Near: 20" NEAR PT ACCOMMODATION: OD: 7.00

RETINOSCOPY:

OD: Plano -0.50 x 100 OS: -0.50 -0.50 x 075

MANIFEST:

OD: Plano -0.75 x 099 Add: +1.50 DVA: 20/20 NVA: 20/20 OS: -0.25 -0.50 x 075 Add: +1.50 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

FINAL SPECTACLE Rx:

OD: Plano -0.75 x 099 Add: +1.50 DVA: 20/20 NVA: 20/20 OS: -0.25 -0.50 x 075 Add: +1.50 DVA: 20/20 NVA: 20/20 OU: DVA: 20/20 NVA: 20/20

TRIAL CONTACT LENS Rx: #1

OD: +0.50 NVA: 20/20 OS: -0.50 DVA: 20/20

EXAMINATION

CUP/DISC RATIO:

OD: Horz .30 Vert .30 OS: Horz .30 Vert .30

TONOMETRY: OD: 16 mmHg OS: 16 mmHg Test: Goldmann Time: 10:40 Category: Examination **VISUAL FIELDS SCREENING:** Bilateral: Visual Field Screening normal.

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants, OS

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near: Pupils are equal, round and fully reactive to light.

SLIT-LAMP EXAM: Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy, **DISPOSITION:** Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

BILATERAL: PATIENT EXPERIENCING GOOD/ACCEPTABLE CONTACT LENS COMFORT, VISION AND EYE HEALTH

MYOPIA

ACTIONATION

ASTIGMATISM

PRESBYOPIA

PLAN

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected. CONTACT LENS PLAN: Bilateral: Re-Fitting: Daily disposable soft lens.

PATIENT MANAGEMENT
COUNSELING: Counseling has been provided to review this patient's case and discuss options for

COUNSELING / EDUCATION: I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions. TIME-ESTIMATE: Doctor face-to-face with patient 40 minutes. Counseling and/or Coordination of Care. 20+ minutes.

Date: 07/16/2010

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination

PROCEDURE:

92004 Exam Comp. New 92015 Exam Refraction

Completed Exam:

Gregøry L. Tom, O.D.



BOARD OF OPTOMETRY 2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170 Fax: (916) 575-7292

Quarterly Report of Compliance (Return to the address shown above)

(PLEASE PRINT OR TYPE)	
NAME: Last First Middle	License No.
Tom Garager L	104277
RESIDENCE ADDRESS: Number Street City Sta	te Phone
202 Aspenwood CT SANRumor	- CA G10206
OFFICE ADDRESS: Number Street City Stat	
63 W Angely ST, Pleasanton (A 925 4393
NAME OF EMPLOYER, PARTNER, OR ASSOCIATE (if any, and as may be appropriate): Last First Middle	
CHIN RADBERT J.	
ADDRESS: Number Street City State	Phone
63 W. Angela ST pleasanton CA	921411 9393
Name of your probation surveillance officer:	
Robert & imartino, 0,0.	
Since the last quarterly report have you had any problem securing or maintaining employm	ient? (XES) (NO)
Explain in Detail, if answer is Yes:	
DIPPILLET TO PIND MINE WURK, SEVERAL COMPAN	es WILL NOT BARE
on want un vo m probation + de not want l	
necords and ited.	

Since the	st quarterly report, have you: (Circle Yes or No
1. Been arres	ed, charged, or convicted of any violation of Federal, State and local laws? (YES)(NO)
2. Complied v	th every condition of the terms of your probation?
3. Complied w	th all optometry laws?
4. If required,	ave you paid the Board any Cost Recovery? If so, how much No Apol. (YES) (NO)
5. Participated	n any continuing education program? If so, please complete the following:
	du in 1/10 + 1/0. Date: Certificate Attached: (YES) (NO)
	Date: Certificate Attached: (YES) (NO)
Course:	Date: Certificate Attached: (YES) (NO)
6. Please attac same patient varying range	certificate of completion must be attached for compliance credit – originals will be returned) copies of complete patient records for 6 patient encounters. These are not to be of the type, i.e. 3 for patients under 40 years of age, 3 for patients over 40 years of age with sof refractive and eye health characteristics.
of the State of Cand that all state	try and its order of probation thereof, and declare under penalty of perjury the laws alifornia that I have read the foregoing report in its entirety and know its contents made are true in every respect, and understand that misstatements of erial fact may be cause for revocation of probation. 7-30-70 Date

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St. Pleasanton, CA 94566

925-456-4393 FAX: 925-226-3157

For:

Exam Date: 07/06/2010 Print Date: 09/30/2010 15:32 **DOB:** 03/28/1959 Age: 51

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: cant read with contact and eyes feel dry, Glaucoma Evaluation.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing routine headaches or double vision. No reports of visual floaters or light flashes.

VISION COMPLAINT: Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

Xalatan, Cosopt

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists. SYSTEMIC FAMILY HISTORY: No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. OCULAR FAMILY HISTORY: Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No ocular medications are currently used except:

SOCIAL HISTORY: No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/200 NVA 20/20 DVA 20/60 OS: NVA 20/20 OU: DVA 20/60 NVA 20/20 PRESENTING SPECTACLE Rx: (#1)

OD: -1.50 Add: +2.00

OS: -0.75 -1.00 x 167 Add: +2.00

VISION

K-READINGS:

OD: 44.13 @ Steep 44.00 @ OS: 43.75 @ Steep 44.00 @

COVER TEST (DIST): Method: Cover-Uncover Horz: Ortho COVER TEST (NEAR): Method: Unilateral Horz: .00XP **NEAR PT CONVERGENCE:** Method: Push Up Blur: 5 NEAR PT ACCOMMODATION: OD: 9.75

RETINOSCOPY:

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Patient: Lo, Tom - Exam Date: 07/06/2010 - Page: 2
       -1.50 DVA: 20/20 NVA: 20/20
  OS:
       -0.50 -0.75 x 161 DVA: 20/20 NVA: 20/20
 OU:
           DVA: 20/20 NVA: 20/20
MANIFEST:
  OD: -1.50 Add: +1.50 DVA: 20/20 NVA: 20/20
       -0.50 -0.75 x 161 Add: +1.50 DVA: 20/20 NVA: 20/20
 OU:
           DVA: 20/20 NVA: 20/20
FINAL SPECTACLE Rx:
      -1.50 Add: +1.50 DVA: 20/20 NVA: 20/20
 OD:
       -0.50 -0.75 x 161 Add: +1.50 DVA: 20/20 NVA: 20/20
 OS:
 OU:
           DVA: 20/20 NVA: 20/20
TRIAL CONTACT LENS Rx: #1
 OD: C/L Monthly Bifocal ProclearEP -1.50 DVA: 20/20 NVA: 20/30 Clear
 OS: C/L Monthly Bifocal ProclearEP -1.25 DVA: 20/25 NVA: 20/30 Clear
 NOTES: patient likes vision a lot but lenses dry out in office...refit in silicon
TRIAL CONTACT LENS Rx: #2
 OD: C/L 2 wk Aqua Clear 100 -1.50 DVA: 20/20+ Clear
       C/L 2 wk Aqua Clear 100 -1.00 DVA: 20/25 Clear
 NOTES: Trial fit #2.
these are for tennis only
```

gave+0.50 for reading at work in the OS

TRIAL CONTACT LENS Rx: #3

OD: C/L 2 wk Aqua Clear 100 -1.50 DVA: 20/20 Clear OS: C/L 2 wk Aqua Clear 100 +0.50 NVA: 20/20 Clear NOTES: Trial fit #3.

OS near for workalso gave checmical

rtc 2.days

lenses still drying out after 10 minutes...

plan: try and go to biofinity
TRIAL CONTACT LENS Rx: #4

OD: C/L Monthly Aqua Clear -1.50 Clear OS: C/L Monthly Aqua Clear +0.50 Clear

NOTES: Trial fit #4.

vent is right above her head

gave new set to compare and did punctal occulsion inf OU

plan: rtc 1.0 wk and try both pairs

patient reports that dryness is virtually gone and can't tell the difference between any of the lenses...go with aqua clear 100 for monthly and cost reasons. special 260 for tennis set and one extra set on Os for work

EXAMINATION

TONOMETRY: OD: 11 mmHg OS: 11 mmHg Test: Goldmann Time: 15:52 Category: Examination **VISUAL FIELDS SCREENING:** Bilateral: Visual Field Screening normal.

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants, OS

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light. **SLIT-LAMP EXAM:** Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

BILATERAL: OPEN ANGLE GLAUCOMA

Patient: Lo, Tom - Exam Date: 07/06/2010 - Page: 3

MYOPIA ASTIGMATISM PRESBYOPIA

PLAN

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected.

CONTACT LENS PLAN: Bilateral: Re-Fitting:

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment. **COUNSELING / EDUCATION:** I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: Doctor face-to-face with patient 40 minutes. Counseling and/or Coordination of Care. 20-minutes.

Gregory L. Tom, O.D.

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination

PROCEDURE:

92004 Exam Comp. New 92015 Exam Refraction

Completed Exam:

Date: 07/13/2010

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St.

Pleasanton, CA 94566

925-456-4393 FAX: 925-226-3157

For

Exam Date: 09/10/2010 Print Date: 09/30/2010 15:31 DOB: 06/27/1963 Age: 47

Occupation: finance

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

OCCUPATION: finance

CHIEF COMPLAINT

CHIEF COMPLAINT: need new contacts.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing

routine headaches or double vision. No reports of visual floaters or light flashes.

VISION COMPLAINT: Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

PATIENT HISTORY: No systemic medications reported. No ocular medications. No history of ocular surgery. No history of trauma or ocular injuries. Ocular family history is unremarkable. Patient is currently a non-smoker. No out-of-the-ordinary social history is reported. Past medical history, unremarkable. Unless otherwise noted below.

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists. **SYSTEMIC FAMILY HISTORY:** No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists. **OCULAR FAMILY HISTORY:** Family history is reported to be unremarkable.

OCULAR MEDICATIONS: No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications. **SOCIAL HISTORY:** No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory

MUSCULOSKELETAL: Arthritis. arthritis in the knee 2009

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/400 NVA 20/20 OS: DVA 20/400 NVA 20/20 OU: DVA 20/400 NVA 20/20

PRESENTING SPECTACLE Rx: (#1)

OD: -6.25

OS: $-5.50 -0.50 \times 177$

PRESENTING CONTACT Rx:

OD: -6.75 BC: 8.02 Dia: 9.6 DVA: 20/20-OS: -5.50 BC: 8.02 Dia: 9.6 DVA: 20/20 -

<u>VISION</u>

K-READINGS:

OD: 43.25 @ Steep @ OS: 43.25 @ Steep @

Patient: Lo, Mei - Exam Date: 09/10/2010 - Page: 2

PD's:

Dist IPD: 57.0 OD: 28.5 OS: 28.5

RETINOSCOPY:

OD: -7.00

OS: -5.50

MANIFEST:

OD: -7.00 DVA: 20/20 NVA: 20/20

OS: -5.50 -0.50 x 129 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

FINAL SPECTACLE Rx: (Distance)

OD: -7.00 DVA: 20/20 NVA: 20/20

OS: -5.50 -0.50 x 129 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20 ALTERNATE SPECTACLE Rx: (#1)

OD: 0.00 Add: +0.50

OS: 0.00 Add: +0.50

NOTES: must have Antireflective

TRIAL CONTACT LENS Rx: #1

OD: -6.50 BC: 7.98 Dia: 9.8 DVA: 20/20 NVA: 20/20

OS: -5.50 BC: 7.98 Dia: 9.58 DVA: 20/20 NVA: 20/20

NOTES: great fit and va

patient happy.

recommended vdt rx over contacts for work

FINAL CONTACT LENS Rx: (#1)

OD: C/L RGP FRP -6.50 BC: 7.98 Dia: 9.8 Clear

OS: C/L RGP FRP -5.50 BC: 7.98 Dia: 9.5 Clear

EXAMINATION

CUP/DISC RATIO:

OD: Horz 50 Vert 50 OS: Horz 50 Vert 50

TONOMETRY: OD: 12 mmHg OS: 12 mmHg Test: Goldmann Time: 13:50 Category: Examination

VISUAL FIELDS SCREENING: Bilateral: Visual Field Screening normal.

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were

found to be full in all quadrants, OS

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light.

SLIT-LAMP EXAM: Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

ROUTINE OPHTHALMOSCOPY: Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

BILATERAL: LENS IS UNCOMFORTABLE

CORNEAL WARPAGE

RIGHT CONTACT IS WARPED

BILATERAL: PINGUECULA

MYOPIA

ASTIGMATISM .

PLAN

PRINTED ALT Rx: 09/30/2010 11:22

Patient: Lo, Mei - Exam Date: 09/10/2010 - Page: 3

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected.

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment. **COUNSELING / EDUCATION:** I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: Doctor face-to-face with patient 40 minutes. Counseling and/or Coordination of Care. 20+

Gregory L. Tom, O.D.

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

DIAGNOSIS:

V72.0 Vision Examination

PROCEDURE:

92004 Exam Comp. New 92015 Exam Refraction

Completed Exam:

Date: 09/10/2010

EXAMINATION RECORD

Vision One Optometry

Dr. Radbert Chin 63 W. Angela St.

Pleasanton, CA 94566

925-456-4393 FAX: 925-226-3157

Fori-

Exam Date: 09/30/2010
Print Date: 09/30/2010 15:31
DOB: 04/24/1947
Age: 63

REASON FOR VISIT

EXAMINATION: Eye Examination Last examination: 1-2 years ago.

PRIMARY CARE PHYSICIAN: Unknown

CHIEF COMPLAINT

CHIEF COMPLAINT: mom has glaucoma and armd and all he sistes have glaucoma, go to africa every 3-6 months to help and she started found.

HISTORY PRESENT ILLNESS (HPI)

HISTORY OF PRESENT ILLNESS: No complaints reported of physical ocular symptoms. Not experiencing routine headaches or double vision. No reports of visual floaters or light flashes.

VISION COMPLAINT: Without spectacle correction A noticeable decline or change in vision is experienced.

PATIENT HISTORY

OCULAR HISTORY: OK (None).

MEDICAL HISTORY: No pertinent past medical history exists.

SYSTEMIC FAMILY HISTORY: No pertinent medical history exists.

OCULAR SURGICAL HISTORY: No pertinent past ocular surgical history exists.

OCULAR MEDICATIONS: No Ocular medications used

SYSTEMIC MEDICATIONS: No reported systemic medications. **SOCIAL HISTORY:** No reported use of tobacco, alcohol or narcotics.

REVIEWED HISTORY: I have reviewed this patient's previous exam records.

REVIEW OF SYSTEMS

REVIEW OF SYSTEMS: No reported disorders or current medical treatment of: Allergy Cardiovascular Constitutional Ears, nose, mouth, throat Endocrine Gastrointestinal Genitourinary Hematologic / Lymphatic Immunologic Integumentary / Skin Musculoskeletal Neurologic Psychiatric Respiratory **MUSCULOSKELETAL:** Arthritis.

PRESENTING FINDINGS

UNAIDED ACUITIES:

OD: DVA 20/70 NVA 20/50 OS: DVA 20/50 NVA 20/50 OU: DVA 20/50 NVA 20/50

PRESENTING SPECTACLE Rx: (#1)

OD: +2.00 -0.75 x 093 Add: +2.50 DVA: 20/20 OS: +1.50 -0.25 x 093 Add: +2.50 DVA: 20/20-

VISION -

RETINOSCOPY:

OD: $+2.00 -0.75 \times 093$ OS: $+2.50 -1.00 \times 093$

MANIFEST:

OD: +2.00 -1.00 x 093 Add: +2.25 DVA: 20/20 NVA: 20/20 PH: 20/20

OS: +2.50 -1.00 x 093 Add: +2.25 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

FINAL SPECTACLE RX:

OD: +2.00 -0.75 x 093 Add: +2.25 DVA: 20/20 NVA: 20/20 PH: 20/20

OS: +2.00 -0.75 x 093 Add: +2.25 DVA: 20/20 NVA: 20/20

OU: DVA: 20/20 NVA: 20/20

Patient: Patterson, Kathleen - Exam Date: 09/30/2010 - Page: 2

EXAMINATION

CUP/DISC RATIO:

OD: Horz .25 Vert .25 OS: Horz .25 Vert .25

TONOMETRY: OD: 16 mmHg OS: 16 mmHg Test: Goldmann Time: 15:28 Category: Examination

VISUAL FIELDS SCREENING: Bilateral: Visual Field Screening normal.

CONFRONTATION FIELDS OBSERVATIONS: Fields were found to be full in all quadrants, OD, Fields were found to be full in all quadrants, OS

AMSLER STUDIES OBSERVATIONS: Amsler: Negative, OD, Amsler: Negative, OS

EXTERNAL EXAM: Confrontation fields are full in all quadrants. Facial symmetry exists. Ocular adnexa and nodes normal. Eyelids and lashes clean, healthy and free of defects. Extraocular muscle motilities and versions full. Cover test testing ortho @ primary gaze, distance and near. Pupils are equal, round and fully reactive to light. **SLIT-LAMP EXAM:** Tears demonstrate normal surface qualities. Corneal epithelium, stroma and endothelium clear and healthy. Bulbar and palpebral conjunctiva are healthy and white. Chambers are deep and free of cells and flare. Iris appears healthy, normal anatomy and convexity. Lens, both capsules, cortex, and nucleus are normal for age.

patient uses Latisse for eyelasshes 3x per week. trace blepharitis....also inflammed pingueculae **ROUTINE OPHTHALMOSCOPY:** Vitreous body clear for age and fully attached. Nerve head well perfused, with good rim tissue. Healthy macula with no edema or degenerative pigmentation. Healthy peripheral retinal structures and vasculature. No drusen, exudate, hemorrhages or evidence of retinopathy.

DISPOSITION: Patient is pleasant and sociable.

ORIENTATION: Patient is fully alert to time, place and person.

SPECIAL TESTING

COLOR DISCRIMINATION: Right Eye: Color vision was found to be normal.

Left Eye: Color vision was found to be normal.

IMPRESSION(S):

BILATERAL: NUCLEAR SCLEROSIS CATARACT

CATARACT WITH VACUOLES

VACUOLES IN OS = RX CHANGE...OD CORTICAL SPOKE SUPER 11 OCLOCK

HYPEROPIA ASTIGMATISM

PRESBYOPIA UV PROTECTINO SINCE SHE IS AFRICA.3-6 MONTHS AT A TIME NO UV

IS HIGHER NEAR EQUATER AND PINGUECULAE IS PRESENT AND MOM HAS GLAUCOMA AND ARMC

<u>PLAN</u>

TREATMENT EYELIDS: Bilateral: Rx lid hygiene therapy as directed.

rtc 1wk lids scrubs and 99213

TREATMENT CATARACT: Bilateral: Rx UV tint.

SPECTACLE PLAN: Change spectacle Rx. Adaptation to Rx expected.

PATIENT MANAGEMENT

COUNSELING: Counseling has been provided to review this patient's case and discuss options for treatment. **COUNSELING / EDUCATION:** I have verbally discussed my clinical findings and recommendations in detail with this patient and/or parents. They acknowledge that they do not have additional questions.

TIME-ESTIMATE: Doctor face-to-face with patient 45 minutes. Counseling and/or Coordination of Care. 20+ minutes.

rtc 1 wk 99213 for 373.00

rtc after africa to check on progress of cataratcs and she does not see well at night

ORDERS:

Schedule on or about: Examination: Annual Eye Examination

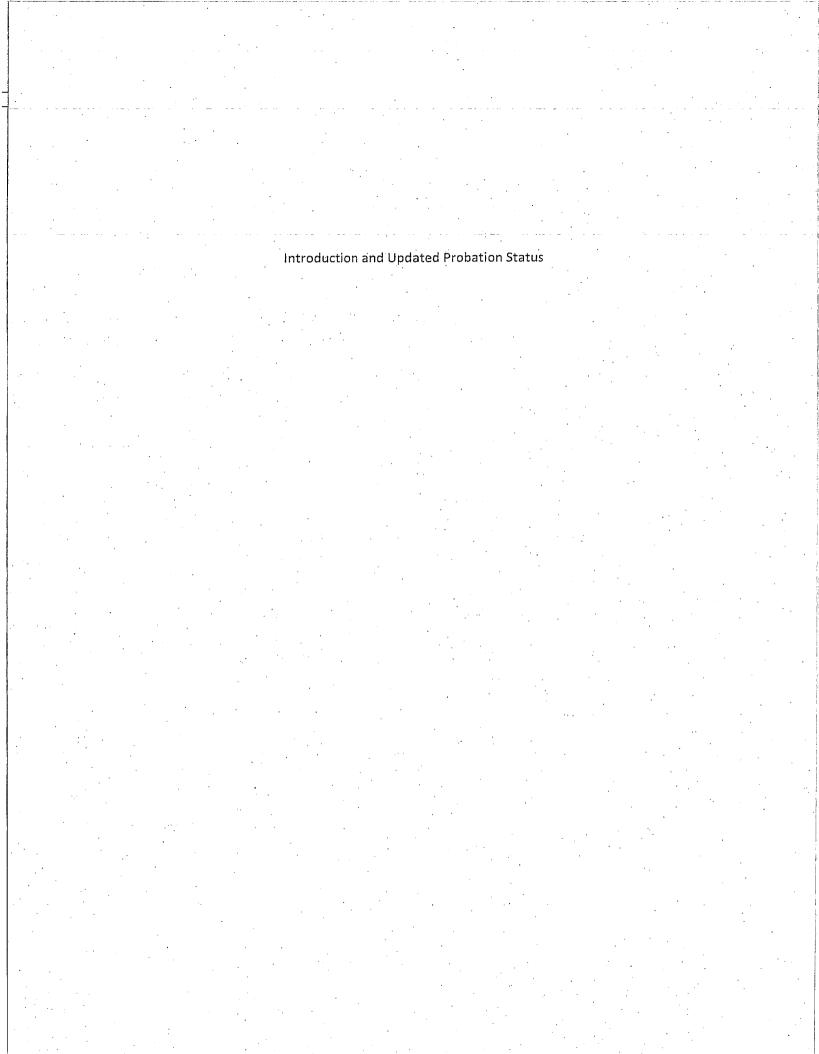
DIAGNOSIS:

V72.0 Vision Examination

PROCEDURE:

92004 Exam Comp. New 92015 Exam Refraction

June 2011



To: CA Board of Optometry and its members

21.1 July -9 AH 10:21

Date: June 7, 2011

Re: Gregory Tom, O.D. 10427T, Updated Petition for Full Reinstatement and reduction of probation

I have submitted my petition for full reinstatement and reduction of my probation. I would like to update my earlier letter to the Board and its members.

I would like the Board to know that I have worked diligently to abide by the terms of my probation. I have taken more than the required continuing education hours. I am scheduled to take the 25 hour glaucoma course and reach my glaucoma certification. I have continued to work with The First Tee and have, in fact, promised to work beyond the 24 month requirement of my probation which started in July 2009. I have often been asked to head one of the classes and have decided to do so. Many parents have thanked me for my time and complimented my passion and dedication. Often, I have stayed longer to work with the students individually.

I have tried to reach all of my probation requirements earlier than requested.

Reinstatement of my license in January 2010 was a true blessing. I have worked so hard to rehabilitate myself and my internal moral compass. I had to learn how to view difficult decisions in a different manner. The time away from Optometry was very painful and difficult. However, it was necessary for me in order to change and learn to become more accountable and responsible. It has taken me two years to get back my license. It has been another 18 months since my reinstatement that has brought me before you today.

On May 27th 2011, I had a voluntary meeting with my probation officer, Jessica Sieferman. I initiated this meeting to advise her of the realization of my inadvertent probation violations after receiving an inquiry from the Department of Consumer Affairs. I advised her of my reasoning and realization of what I had done. I wanted to be pro-active so I went to my probation monitor to admit my mistake and immediately tried to correct my error in judgment. I advised her that I had returned any stipends received from the colleges since my reinstatement and that I also donated money to their Health Center programs.

As you read my previous letter for reinstatement and this updated portion, it is important to me that you understand that I did not intentionally violate my probation. I was so pleased that my hard work and patience had allowed the Board to grant me a chance to return to Optometry. I love what I do and who I represent as a profession. My patient care has never been questioned. Since my return, I have

helped many patients with conditions such as congenital nystagmus, end stage glaucoma, wet armd, and autistic visually deficient children.

I truly believed I was only doing a good community service. I am sorry and I want to continue to practice Optometry. I want to be able to work to better my community and my fellow citizens. I would hope that the Board could understand where my heart is and that I will do what it takes to correctly and faithfully complete my probation. I want to have the ability to finish helping these colleges in the future by establishing a program with the Optometry schools and the local community colleges. I will do this completely voluntarily. I love my profession and I am proud to call myself an Optometrist.

Thank you for your time and dedication to our profession.

Sincerely,

Initial Full Reinstatement & Reduction of Probation

To: CA Board of Optometry and its members

Re: Gregory Tom, O.D. 10427T, Petition for Full Reinstatement and reduction of probation

I would like to address this letter to the Board of Optometry and its members. It has been over 24 months since I was last in front of you all. In May 2009, I was petitioning for reinstatement of my optometry license. I had been out of practice since 2007 and I had surrendered my license. In July 2009, the Board of Optometry and its members granted the return of my optometry license and placed me on probation for 5 years. Today, I am requesting my full reinstatement and removal of my probationary terms. Hopefully the enclosed documents will prove that I have learned and changed as a person and I have the ability to make sound ethical decisions. I have been very diligent, cooperative, and proactive in meeting all the Board's demands and my probationary requirements. In fact, I have done more than what was required to further prove my desire to return to Optometry in full capacity and regain your respect and trust.

I was a very good student and one of the top clinicians at the UC Berkeley School of Optometry. As a student, I participated in the Lions Sight Saver Foundation meetings, Lions Clubs, Red Cross, and helped anchor the Mobile Clinic at UC Berkeley. I continued to volunteer my time after graduation with these same organizations and added more volunteer services such as performing eye exams on prisoners in the CA Penal System. I visited local nursing homes and helped bed ridden patients throughout the area. I helped raise funds and provided glasses for financially challenged college students throughout the Bay Area. In other words, my whole career originated from the concept of "providing for others". It gave me a great deal of personal satisfaction to help others. A dream as a child was to become a doctor.

As I continued in Optometry, I uncharacteristically lost sight of the ethical line between what was best for the patient and what was best for the patient and the doctor. I never placed the patient in any risk but in rare circumstance took advantage of an insurance company to help benefit the patient. Even though this type of action is prevalent, it by no means makes it ethically correct.

My actions resulted in the loss of jobs for my staff, loss of the jobs of the contracted lab, loss of the ability to treat patients, loss of the ability to donate back to the community, and the loss of my ability to be a doctor and make a difference.

I have suffered not only the loss of my license to practice but my business which I spent 12 years building. I lost my reputation in the community and in the business sector as well. I have lost not only patients but many friends. The inability to practice optometry has forever changed my outlook on life. My loss of my license has prevented me from treating my own parents. My father has gone blind in one eye from a bleed in his retina. My mother suffered a sudden vision loss from anterior uveitis which has now lead to severe optic nerve problems and open angle glaucoma. My grandmother now has ARMD

and cataracts. The disgrace of not being able to treat my own family is scar that I will never forget. As a result, I will never forget my mistakes and how I placed financial gains as a priority. I have lost almost all our savings and we are negative each month on our mortgage and expenses. We are about to lose our condo based on not being able to afford the payments and further ruin our credit. I blame no one but myself. I fully realize the consequences of my actions and what is has cost me and my family. I sold my practices at greatly reduced prices that took me 12 years to build.

Rehabilitation is defined as the restoring of one's self to a satisfactory state-or vindication of character to a previous acceptable level. Rehabilitation is the key to my applying for reinstatement. The process of rehabilitation began much earlier than the forfeiture of my license in 11-2007. While I still owned my optometry practices, I realized that changes were required. Admitting my wrong doings to my family and friends was excruciatingly painful and embarrassing. However, facing those fears and pain helped reinforce the magnitude of unethical decisions.

Watching patients depart as a result of being removed from insurance panels was yet another part of my rehabilitation. This emphasized the importance of how one poor decision affects many surrounding people and their families. I had to now answer to other insurance plans about what had happened. Patients were now choosing to leave the office because we could not accept their insurance. I could no longer provide care for some of favorite patients. They were disappointed in my offices. I felt terrible and guilty. More important than losing patients, I realized that my actions affected many people around my office I never realized. My staff was affected as there was less workable hours. All my vendors who serviced my office were affected negatively by my actions.

Selling of my offices was another step of my rehabilitation. The stages of shock, sadness, anger, and acceptance were all required. I matured a great deal during this process. I appreciated and viewed things a lot differently as a result. To lose one's life work and place of business is a life changing event and will be a permanent reminder of what can be lost.

Community service, working with kids at local schools and teaching teachers about the eyes between my license surrender and my probationary reinstatement (1/2010) has emphasized the trust the public placed on doctors. They believe implicitly in what we do for their families. I realized that I had violated that trust.

I have designed a educational course for preschool and elementary children to introduce them to the human eye. I presented this at my May 2009 hearing. It includes definitions about the eye and how the human eye is similar to a sheep eye. A sheep or bovine eye is used as an interactive live dissection with the students. It provides them a hands on experience. I dissect each part of the eye from the sclera, cornea, iris, pupil, lens, retina, tapetum, optic nerve and extraocular muscles. The response has been overwhelming with the students and they can't wait to do it again.

The First Tee of Contra Costa County is a non profit organization that was created to bring values and lessons to underprivileged communities. I taught life skills and how they relate to life and school and family. I recall several kids who had very poor attitudes and behaved poorly. Learning about their

community and how the children are raised made me understand how much of an impact I could have not only as a volunteer but as an optometrist. Teaching the core values (ex. Respect, Responsibility Accountability, Perseverance, etc) not only helped me impact these young students but also reemphasized their importance to my life. I now apply these teachings and practices to my family and my life.

Another rehabilitative measure has been keeping up with my continuing education. I have always kept up my continuing education even when I surrendered my license. However, I felt that I needed that to stay on top of my clinical knowledge. I also feel it was critical for me to associate with my peers and prove to myself my dedication to optometry and to making it back to active duty as an optometrist. It did remind me each hour of each day of each session that I was no longer fully licensed as a result of my poor decision making. This fact alone is a painful reminder each day.

In addition, I have continued to study each month the articles from Optometry Management, Optometry Today, Optometric Physician, Review of Optometry, Eye and Contact Lens Science and Clinical Practice, Vision Monday, and 20/20.

Fortunately, all my friends and family claim that they have seen me change for the better over the past several years. They say my demeanor is much more caring and patient. I am more appreciative of others and I value now every little positive asset that someone presents. In other words, I have mentally changed and the old person is now gone and what is left is a much better person who has better morals and higher standards. At this point, I am requesting the Board of Optometry grant full reinstate of my optometry license. I promise to continually donate my time and efforts to the community. I would treasure the opportunity to rebuild my career and more importantly, rebuild the foundation for my family. I am positive that I am completely rehabilitated from my past actions. I promise to practice optometry with the goal of helping my fellow man and contributing to making the community a better place. I want to be able help as many people as possible. I also plan on contacting VSP and making an offer to them donate 50% of all the exam fees to charity. I want to earn their trust again also and prove to them that its not all about the finances but the ability to help those around me.

My family is another factor which will not allow me to ever make an unethical and poor judgment. Just recently, my son, Gregory Ryan, said I want to be a doctor dad like you. I want to be his role model and show him how we help people in need. I want my son and daughter to be proud of their dad so they have something to look forward to as they grow up. I want to be able to volunteer at the local churches or Lion's clubs to help check eyes for those who can't afford eye care. I want to work with the school nurses and help them raise funds for their Health Centers which are experiencing budget deficits. I know I can make a difference if I am given the opportunity too.

Another important factor to consider is that these poor decisions occurred while I was single. Being a father has changed my perspective on life. I have a partner, my wife Claire, who I love dearly and want

to support her and our family. I realize how my actions are going to be watched and mimicked by my children. Being a responsible fatherhood is part of my rehabilitation. Every day I will be reminded of what I have to be held responsible for, my family.

In summary, I am requesting that the Board of Optometry of CA grant me full reinstatement of my optometry license and remove my probation. I have worked very hard and diligently to prove to you all that I have permanently changed as a person. I have the enhanced ability to make tough ethical decisions. My past lessons, rehabilitation, and family will never allow me to make such poor decisions. I will have to live with those poor decisions the rest of my life. I still have the passion and desire to impact my community and those around me. I want to Optometry to not only help patients but to help my fellow man and make the communities around me better.

I hope the Board of Optometry of CA can realize the sacrifice I have imparted on my family also. My wife has been so supportive. In this economy, I have found work very difficult. I have contacted many private practitioners for jobs and every one shies away from me once I explain I am on probation. Even the corporate jobs do not respond to me once I have disclosed this probation. My one and only job with Dr. Chin is limited. I am of very little value to any employer as I cannot grow or help him grow. Insurance companies won't allow many doctors to be on probation and be part of their panels. I am asking the Board to consider this factor also. Full reinstatement without probation will at least allow me to search for work and support my family. I realize I may never be allowed on these vision plans as a result of my past actions. However, at least, I would have a chance to help my family and support them as they have supported me. My greatest asset is how I can help others. I was trained to help others and I am very good at it. Please consider these factors and my commitment to return to servicing the public in good trust.

I thank you for your time and consideration in allowing me this time. I will not disappoint the Board nor the profession of Optometry.

Yours Truly,

Notice of Noncompliance

Questions and Answers

Condition #2 - Restricted Practice: petitioner is prohibited from owning or operating his own optometry private practice. He is restricted to supervised employment by an optometrist or ophthalmologist whose license is in good standing and who has been approved by the board of its designee prior to petitioner commencing employment.

I wrote on page 5 (paragraph 4) of my initial application for reinstatement that I would return to providing volunteer community service to the community colleges. When the Board approved my reinstatement, I assumed they approved of this service as part of my rehabilitation process. My goal for returning to optometry was to show the Board that I could be a positive contributor to the community. This had been my ambition even as a freshly minted optometrist seventeen years ago - I decided to go to optometry school to help as many people as possible.

I therefore viewed my work at the colleges as an additional component of my volunteer community service. I was providing a needed service to students of who had limited access to eye care. Many students were struggling with tuition, books, and other costs. Many cannot afford healthcare let alone eye care. I was excited to help students view computers without headaches and view the board from the back of a large classroom.

It never occurred to me that I should have notified the Board specifically about these services. I have been diligent in informing the Board of my mandated, non optometric related, community service. I did not intend to mislead the Board. I also would not intentionally violate my probation within weeks of having my license reinstated. It would not make sense to do such an act.

From the time the Board reinstated my license, I have always done more than the required minimums for my probation. I received my notice of reinstatement in July 2009 and even before my actual reinstatement date of January 2010, I started immediately by meeting with Margie McGavin, my first probation monitor. I started my non optometric community service immediately after receiving notification of my reinstatement and volunteered more than, often over twice, the number of mandated hours. I had continued with Continuing Education (CE) classes prior to my license being reinstated and took more than the required number CE classes per my probation terms. I volunteered my time at local schools where I performed eye dissections and designed an eye education program for the kids. One parent mentioned that his son remembers the eye structures I talked about in his class. I love to donate my time and give back to the community. I wanted to prove to the Board that I was dedicated to being a better person, contributing back to society and atoning for my past mistakes. I would not work so passionately and then jeopardize it all by intentionally going against the Board's probationary terms.

I didn't view my service with the colleges as employment. I do not have a contract with the school. The nurses determined the date for me to come in and see students, set and coordinated the appointment schedule, set the fees for the examinations, and collected the fees. I understood the nurses to be overseeing my services, which took place in the colleges' health centers. I only went to the colleges when they requested eye exams for their students. I have visited the colleges about ten times since my reinstatement.

I only told my probation monitor, Dr. Robert DiMartino OD, that I was doing community service when we initially reviewed my probation terms. In retrospect, I should have brought this specific aspect of my probation related activities clearly to the Board's attention and requested clear direction on making sure that I could engage in this type of service and if so, how to make sure it aligned with my probation terms. I have since advised and discussed with Dr. DiMartino that I unintentionally violated my probation.

Condition #3 - Reporting: Petitioner shall inform the Board in writing of any change of place of practice and place of residence within 15 days:

My primary place of employment has been in Pleasanton, CA since my reinstatement. Because I did not view my service with the schools as employment, but rather as community service, I did not think to report any change in employment to the Board.

On May 14, 2011, an investigator from the Department of Consumer Affairs, Andrew Omahen, visited the office where I work. I was seeing patients at the time of his unannounced visit and therefore could not immediately see him. When I became available, I then called him and said I had a few minutes to meet him. He said that he was investigating a consumer complaint. I then asked him to identify who filed the complaints. He said that he did not know and that it was anonymous but there were two complaints related to students that I had seen at the community colleges. One complaint was about spending almost \$700 and the other was about not being able to obtain a copy of his/her prescription. asked if they had come to the office (my primary place of work), as all patients always receive a copy of their prescription. He would not say. I then explained that students who chose to come to visit me at the office would be subject to the standard office policy and prices. I explained to him that if the student had come to the office that I could check right there on the EMR when the date of exam was and what amount was spent. He then proceeded to ask about the other patient not receiving a copy of his prescription and that my assistant would not provide it to him. I told him that I did not have an assistant; rather, my mother had volunteered to help me. A retired elementary school teacher of 40 years, she taught in under-privileged areas during her entire career. I even questioned her since my meeting with Mr. Omahen and she does not recall ever denying a request for a prescription. I mentioned to the investigator that the only reason for not providing a prescription would be for a contact lens prescription since I could not perform a fitting at the college locations without the proper equipment. Some students assumed that they could just get a contact lens prescription for things such as cosmetic colored contact lens, without ever being fitted. I had advised the investigator that if there was a complaint that my goal would be to address the concern and make the student happy even if it meant providing them a new exam.

Mr. Omahen then asked for my list of patients that I am required to keep according to my probation terms. His aggressive and accusatory tone of voice immediately put me on the defensive, but I wanted to do my best to accommodate his request since I didn't want to seem uncooperative. I advised him that I did have my computer with me at that time.

It wasn't clear to me until later that I was expected by him to have kept a list of students seen from the colleges as well — in my view this was part community service and not as part of my patient base at the place of my employment. I am diligent in providing a list of patients seen at my place of employment to the Board so I never questioned my compliance with my probationary terms. I did have records of the students seen at the colleges, but they were not kept in a manner that the Board would have wanted since I did not think that these were necessary to be submitted to the Board.

There was a recent situation that involved some equipment emitting smoke after hours. The Fire Department had to enter and spray water and oil in the back office and hallway. Many items had to be removed and some discarded due to water damage. Because of this, the information regarding the colleges was not readily available of his visit.

The investigator then told me he was working on behalf with the Board of Optometry and would be sending a report to them and needed the list of patients seen. I never refused to provide him the list, although I clearly mentioned several times that the list was not in the office. I advised him that I could obtain the list but it would take some time since the information was not at the office.

I then located the information on the students seen from the colleges to the best of my ability and provided a list of all students seen, date, diagnosis, materials obtained, and amount into the format required by the Board to the investigator at a later scheduled meeting. Again, this took time to gather since I did not have it in the particular format required for the Board. The only discrepancy is that I mistyped two of the patients seen in 2011 with a 2010 date.

I advised the investigator that I could not locate one college list, Foothill. I have the date but somehow misplaced the records of the students seen on that day. I attempted to contact the school and the head nurse reported she no longer had the records or list. I then emailed her again and she called back. This time she stated that she had some of the records and the list but refused to provide them since someone had spoken with her. I have since found a few of the patients seen at Foothill College.

College Return of Income

Canada College Health Center 4200 Farm Hill Boulevard Bldg. 22 Room 106 Redwood City, CA 94061

May 14, 2011

To whom it may concern:

The following check is a return of funds to the Canada College Health Center. I would request that the returned funds remain within the Health Center budget and be used for the care and welfare of the students and staff.

Thank you,

Foothill College Health Center 12345 El Monte Road Los Altos Hills, CA 94022

May 14, 2011

To whom it may concern:

The following check is a return of funds to the Foothill College Health Center. I would request that the returned funds remain within the Health Center budget and be used for the care and welfare of the students and staff.

Thank you,

College of San Mateo Health Center 1700 W Hillsdale Blvd, Building 1 Rm 226 San Mateo, CA 94402

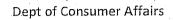
May 14th, 2011

To whom it may concern:

The following check is a return of funds to the San Mateo College Health Center. I would request that the returned funds remain within the Health Center budget and be used for the care and welfare of the students and staff.

Thank you,

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Department of Consumer Affairs 22320 Foothill Blvd, Ste 220 Hayward, CA 94541

Attn: Andrew Omahen

Per our last conversation, you had questions regarding my probationary terms. You request for answers to your questions are included in this summary. I believe I have addressed your questions. A copy of this will also be sent to the Board of Optometry.

Thank you for your time.

Sincerely,

Andrew Omahen Department of Consumer Affairs 22320 Foothill Blvd, Ste 220 Hayward, CA 94541

<u>RE:</u> Subject: Follow-up to our conversation on the alleged consumer complaint regarding my services at the Foothills College, Cañada College, and/ or the College of San Mateo.

Purpose of Work

I contributed optometry services at Foothills College, Cañada College, and the College of San Mateo to:

- 1. Provide students with needed services that were not available at any of the school health centers and:
- 2. Educate students with regards to their eyes.

While the costs of education have skyrocketed, needed medical services are, at times, unaffordable to many students. I assist students by helping them obtain eye care and/or glasses that they otherwise could not have afforded. Many students have thanked me for my services and I believe that I have made a difference in helping the community by providing access to eye care services in this manner.

While volunteering at the health centers I work under the supervision of the staff nurses. The nurses made the appointments, endorsed the services and were responsible for billing. All eye exams fees were designated and collected directly by the health centers. For services rendered, I was initially paid a fair market stipend that was returned to the school with a request that the funds be made available to the health centers for the students and staff. Please note that I have also made personal, financial donations to each school. At the time, I truly believed that I was providing a needed community service.

Probationary Compliance

In working at the schools, I believed that I was providing a volunteer community service by helping students and staff and that in doing so, I was in compliance with my probation. In my reinstatement letter to the Board of Optometry I had documented that upon reinstatement, I would once again provide community services to the schools and health centers. I had also mentioned these specific services to my current employer and monitor. I trusted that my actions were accordance with the Board terms.

Prior to our meeting in your office, I had scheduled a meeting with my Board assigned probation monitor. I have since met with the State Board monitor on May 27, 2011 to review my actions and bring forth my unintentional violation of my probationary terms.

Student / Patient Records re: Foothill College for services rendered on January 26 and April 10, 2010

As we discussed earlier, I am unable to locate the list of students that I saw on January 26, 2010 and April 10, 2010 at Foothill College. Following our conversation concerning these records, I contacted the Foothill Health Center, requesting a copy of the student records. I was informed by the Head Nurse, Naomi Kitajima, that the Department no longer had a copy of the records. As the Health Department records are a back up to my records, I have re-contacted her, requesting additional information as to how I may obtain a copy of the records in question. She then clarified the fact that the records were indeed at the college and that her department after being interviewed by the Dept of Consumer Affairs refused to provide a copy of the medical records.

I would like to clarify your earlier question about a list of patients. I have always kept a list of all patients I have seen at my primary place of employment. It includes the required information that meets the terms of my probation. I update the in office patient list by keeping a manual note of who was seen in the office for each particular day worked. Then I update the spread sheet periodically to make sure that the list is complete.

With regards to the college students, I have a list of the students seen at each college organized by college and date. However, as stated earlier, I honestly and truthfully did not feel that I was employed by the colleges and considered this a community service act. As a result, I did not keep a list identical to the one that I keep for all patients seen in the office with all of the data mandated by the Board.

With your request for a complete list, I made a new list which included all the patients see in the office and the college patients seen with all data included. Lastly, you had pointed out a discrepancy in the list sent to the Board initially and the list that I provided to you. The reason for the difference is that the first two patients on your list do not match because the dates were typed as 2010 and actually they are 2011.

Thank you for your patience and I trust this should help you understand my position and intentions. I never meant to mislead the Board. I made an honest mistake in my quest to help people. I wanted to give back to the community. My willingness to meet with the Board should indicate my ability to admit my wrongdoing and responsibility to correct an honest mistake. I am proud to be an optometrist and my goal has always been to help as many people as I can.

Sincerely Yours,



BEFORE THE BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Petition for Case No. 2003-125
Reinstatement of: OAH No. 2009040794

GREGORY LAWRENCE TOM, O.D.
Optometry License No. 10427

DECISION

The attached Decision of the Administrative Law Judge is hereby adopted by the Board of Optometry, Department of Consumer Affairs, as its Decision in the above-entitled matter.

This Decision shall become effective July 15, 2009.

Respondent.

It is so ORDERED June 15, 2009

LEE A. GOLDSTEIN, O.D. MPA

PRESIDENT

BOARD OF OPTOMETRY

BEFORE THE

In the Matter of the Petition for Reinstatement of:

Case No. 2003-125

GREGORY LAWRENCE TOM, O.D., Optometry License No. 10427

OAH No. 2009040794

Petitioner.

DECISION

This matter was heard by a quorum of the Board of Optometry (Board) on May 15, 2009, in Fullerton, California. Amy C. Lahr, Administrative Law Judge, Office of Administrative Hearings, State of California, presided. Board members present and participating were Lee A. Goldstein, O.D., President; Alejandro Arredondo, O.D.; Martha Burnett-Collins, O.D.; Monica Johnson; Kenneth Lawenda, O.D.; Fred Naranjo; Edward J. Rendon, M.P.A.; and Susy Yu, O.D.

The record was closed and the matter was submitted for decision. Thereafter, the Board met in an executive session and decided the matter on the day of the hearing.

Gregory Lawrence Tom (petitioner) represented himself.

Erin Sunseri, Deputy Attorney General, California Department of Justice, appeared pursuant to Government Code section 11522.

FACTUAL FINDINGS

- 1. On or about September 22, 1994, the Board issued Optometry License Number 10427 to petitioner.
- 2. a. The Board, by Decision and Order effective April 3, 2008, in Case No. 2003-125, adopted a Stipulated Settlement and Disciplinary Order resolving an accusation that had been brought against petitioner.
- b. In the Stipulated Surrender of License and Order, petitioner agreed that there was a factual basis for discipline against his license for unprofessional conduct with regard to insurance fraud and alteration of medical records. The facts underlying the

accusation are that from 2001 through 2006, petitioner fraudulently submitted bills to insurance provider Vision Services Plan (VSP), totaling approximately \$80,000. Petitioner also committed unprofessional conduct by altering his patients' medical records.

- c. Pursuant to the Stipulated Surrender of License and Order, paragraph 22, Petitioner agreed to pay the Board its costs of investigation and enforcement in the amount of \$11,284.57, prior to the issuance of a new or reinstated license.
- 3. a. Pursuant to the Order, petitioner surrendered his license. Petitioner agreed not to petition the Board for reinstatement until one year from the effective date of the Decision and Order; i.e., until April 3, 2009.
- b. Petitioner filed the instant petition for reinstatement on February 23, 2009. Although he filed the petition more than one month prior to the earliest agreed upon application date, the Board decided to consider it.
- 4. Petitioner contends his license should be reinstated because he admitted and accepted responsibility for his wrongful conduct. Petitioner acknowledged that he should not have substituted his own judgment for the insurance company rules. He grasped the gravity of his actions, and recognized how he harmed others. Petitioner believes that he has learned a painful lesson, and he is willing to comply with whatever guidelines the Board deems necessary.
- 5. Since petitioner surrendered his license, he has worked in the bank industry and has volunteered at a local preschool. Petitioner has completed 63 continuing education hours, and has studied various optometric literature. He also took an ethics class through the Department of Real Estate. In addition, petitioner paid \$75,460 restitution to VSP.
- 6. Petitioner submitted multiple references supporting his petition, including a letter from Robert DiMartino, O.D., Professor of Clinical Optometry at University of California, Berkeley. Dr. DiMartino highlighted petitioner's intellect and talent. He noted that although petitioner's actions demonstrated a lack of judgment, he has the capacity to learn from his error. Dr. DiMartino stated that petitioner's expertise was a great loss to the public, and that ongoing audits would best protect the public.
- 7. Petitioner's wife, Claire Syn Tom, testified in support of his reinstatement. She reiterated how difficult it has been for petitioner, and their family, to lose his license. Subsequent to the surrender, Mrs. Tom has noticed that petitioner's behavior has changed in numerous ways; for example, before his license was revoked, he focused primarily on his practice, and now he devotes himself to their family. In addition, Mrs. Tom has observed that petitioner has accepted responsibility for his actions, and he possesses more integrity than before this occurred.

LEGAL CONCLUSIONS

- 1. Cause exists to grant petitioner's petition for reinstatement, pursuant to Business and Professions Code section 11522, as set forth in factual findings 1-7 and legal conclusions 2-4.
- 2. Petitioner bears the burden to prove, by clear and convincing evidence, that he is sufficiently rehabilitated and entitled to reinstatement. (Flanzer v. Board of Dental Examiners (1990) 220 Cal.App.3d 1392, 1398; Hippard v. State Bar (1989) 49 Cal.3d 1084, 1092.)
- 3. California Code of Regulations, title 16, section 1516 provides that the following rehabilitation criteria may be evaluated when considering a petition for reinstatement: (1) the nature and severity of the act(s) or crime(s) under consideration as grounds for denial; (2) evidence of any act(s) committed subsequent to the act(s) or crime(s) under consideration as grounds for denial which also could be considered as grounds for denial under Section 480 of the Code; (3) the time that has elapsed since commission of the act(s) or crime(s); (4) the extent to which the applicant has complied with any terms of parole, probation, restitution or any other sanctions lawfully imposed against the applicant; and (5) rehabilitation evidence.
- 4. Petitioner has demonstrated sufficient rehabilitation to warrant his reinstatement on probationary terms. Petitioner showed a sincere change in attitude and acceptance of responsibility. He submitted evidence of partial restitution. Because of his experience and family support, similar misconduct is not likely to be repeated. The evidence also showed that the public would benefit from Petitioner's medical talent. Conversely, Petitioner committed serious misconduct by defrauding insurance provider VSP and altering his patients' medical records, and only one year has passed since the effective date of petitioner's license surrender. Because of the relatively short period of time since the conduct and the surrender of his license, petitioner must wait an additional period of time before the license is actually reinstated. Given the forgoing, the following order adequately protects the public interest while acknowledging petitioner's rehabilitation efforts.

ORDER

Gregory Tom's petition for reinstatement is granted and his certificate of registration to practice optometry shall be reinstated, effective January 1, 2010. The certificate shall be immediately revoked, provided that the revocation shall be stayed, and the certificate shall be placed on probation for five (5) years, upon the following terms and conditions:

1. <u>Obey All Laws</u>: Petitioner shall obey all federal, state and local laws, and all rules governing the practice of optometry in California.

- 2. Restricted Practice: Petitioner is prohibited from owning or operating his own optometry-private practice. He is restricted to supervised employment by an optometrist or ophthalmologist whose license is in good standing and who has been approved by the Board or its designee prior to petitioner commencing employment.
- 3. Reporting: Petitioner shall inform the Board in writing of any change of place of practice and place of residence within fifteen (15) days.
- 4. Residency of Practice: The period of probation shall not run during the time petitioner is residing or practicing outside the jurisdiction of California. If, during probation, petitioner moves out of the jurisdiction of California to reside or practice elsewhere, petitioner is required to immediately notify the Board in writing of the date of departure, and the date of return, if any.
- 5. <u>Cooperate with Probation Surveillance</u>: Petitioner shall comply with the Board's probation surveillance program, including but not limited to allowing access to the probationer's optometric practice and patient records upon request of the Board or its agent.
- 6. Monitoring: Within 30 days of the effective date of this decision, petitioner shall submit to the Board for its prior approval a monitoring plan in which petitioner shall be monitored by another optometrist, who shall provide periodic reports to the board. Petitioner shall bear any cost for such monitoring. If the monitor resigns or is no longer available, petitioner shall, within 15 days, move to have a new monitor appointed, through nomination by petitioner and approval by the board.
- Maintain Records: Petitioner shall maintain a record of all lens prescriptions that he dispensed or administered during his probation, showing all the following: 1) the name and address of the patient, 2) the date, 3) the price of the services and goods involved in the prescription, and 4) the visual impairment identified for which the prescription was furnished. Petitioner shall keep these records in a separate file or ledger, in chronological order, and shall make them available for inspection and copying by the board or its designee, upon request.
- 8. Education Coursework: Within 90 days of the effective date of this decision, and on an annual basis thereafter, petitioner shall submit to the board for its prior approval an educational program or course to be designated by the board, which shall not be less than 40 hours per year, for each year of probation. This program must include at least eight hours of ethics course(s); and the program shall be in addition to the Continuing Optometric Education requirements for re-licensure. Petitioner shall bear all associated costs. Following the completion of each course, the Board or its designee may administer an

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examination to test petitioner's knowledge of the course. Petitioner shall provide written proof of attendance in such course or courses as are approved by the board.

- 9. <u>Community Service</u>: Within 60 days of the effective date of this decision Petitioner shall submit to the Board, for its approval, a plan for community service, according to which he shall provide free services on a regular basis to an underserved community or charitable facility or agency for at least 10 hours a month, for the first 24 months of probation. Once a year Petitioner shall provide the Board with proof that he has complied with the plan.
- 10. Payment of Costs: Petitioner must pay to the Board the full amount of the unpaid costs assessed against him, as he agreed in the Stipulated Surrender and Order, totaling \$11,284.57. This amount is payable in equal monthly installments during the period of probation, provided that the full amount shall be paid 90 days prior to completion of probation. Petitioner shall commence making payments upon notification by the Board or its designee of the amount of unpaid costs, the monthly installment amount, and the payment schedule. A failure to make timely payments pursuant to the payment schedule shall constitute a violation of probation, although petitioner is free to pay the costs earlier than prescribed in the schedule. If petitioner has not paid the full amount of costs at the end of the five-year period of probation, his probation shall be extended until full payment has been made.
- 1.1. Restitution: Within 90 days of the effective date of this order, Petitioner shall submit to the Board proof that he has made full restitution to VSP Vision Care.
- 12. <u>Violation of Probation</u>: If petitioner violates probation in any respect, the Board, after giving him notice and an opportunity to be heard, may terminate probation and impose the stayed discipline, or such discipline as it deems appropriate. If an accusation or petition to revoke probation is filed against petitioner during probation, the Board shall have continuing jurisdiction and the period of probation shall be extended until the matter is final.
- 13. <u>Completion of Probation</u>: Upon successful completion of probation, petitioner's certificate will be fully restored.

IT IS SO ORDERED.

Dated: Ware 15, 2009

LEE A. GOLDSTEIN, O.D., President

Board of Optometry

Department of Consumer Affairs

State of California

BEFORE THE STATE BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:

Case No. 2003-125

D.B.A. 20/20 OPTOMETRY GREGORY LAWRENCE TOM 3191 Crow Canyon Place, Suite C San Ramon, CA 94583

Optometry License No. 10427
Fictitious Name Permit No. 2081
Fictitious Name Permit No. 2155
Branch Office License No. 6275
Statement of Licensure Cert. No. 5181

Respondent.

DECISION AND ORDER

The attached Stipulated Surrender of License and Order is hereby adopted by the State Board of Optometry, Department of Consumer Affairs, as its Decision in this matter.

This Decision shall become effective on April 3, 2008

It is so ORDERED <u>March 3, 2008</u>

FOR THE STATE BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS

EDMUND G. BROWN JR., Attorney General

of the State of California -----

WILBERT E. BENNETT

Supervising Deputy Attorney General

DIANN SOKOLOFF, State Bar No. 161082

Deputy Attorney General

California Department of Justice

1515 Clay Street, 20th Floor

P.O. Box 70550

Oakland, CA 94612-0550

Telephone: (510) 622-2212

Facsimile: (510) 622-2270

Attorneys for Complainant

BEFORE THE STATE BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:

GREGORY LAWRENCE TOM D.B.A. 20/20 OPTOMETRY 3191 Crow Canyon Place, Suite C San Ramon, CA 94583

Optometry License No. 10427
Fictitious Name Permit No. 2081
Fictitious Name Permit No. 2155
Branch Office License No. 6275
Statement of Licensure Cert. No. 5181

Respondent.

Case No. 2003-125

STIPULATED SURRENDER OF LICENSE AND ORDER

IT IS HEREBY STIPULATED AND AGREED by and between the parties in

this proceeding that the following matters are true:

PARTIES

1. Taryn Smith (Complainant) is the Executive Officer of the State Board of

Optometry. She brought this action solely in her official capacity and is represented in this

matter by Edmund G. Brown Jr., Attorney General of the State of California, and by Diann Sokoloff, Deputy Attorney General.

- 2. Gregory Lawrence Tom (Respondent) is represented in this proceeding by attorney Richard Tamor, whose address is 1901 Harrison Street, 9th Floor, Oakland, CA 94612.
- 3. On or about September 22, 1994, the State Board of Optometry issued Optometry License No. 10427 to Gregory Lawrence Tom, doing business as 20/20 Optometry. The License was in full force and effect at all times relevant to the charges brought in Accusation No. 2003-125 and will expire on July 31, 2008, unless renewed.
- 4. On or about December 12, 2006, the State Board of Optometry issued a Statement of Licensure Certificate No. 5181 to Gregory Lawrence Tom, doing business as 20/20 Optometry. The license was in full force and effect and at all times relevant to the charges brought in Accusation No. 2003-125 and will expire on July 31, 2008, unless renewed.
- 5. On or about January 13, 1995, the State Board of Optometry issued Fictitious Name Permit No. 2081 to Gregory Lawrence Tom, doing business as 20/20 Optometry. The Permit expired on April 14, 2003, and has not been renewed.
- 6. On or about May 11, 1995, the State Board of Optometry issued Fictitious Name Permit No. 2155 to Gregory Lawrence Tom, doing business as 20/20 Optometry. The Permit expired on April 14, 2003, and has not been renewed.
- 7. On or about June 15, 2001, the State Board of Optometry issued Branch Office License No. 6275 to Gregory Lawrence Tom, doing business as 20/20 Optometry. The Permit expired on February 1, 2004, and has not been renewed.

JURISDICTION

8: Accusation No. 2003-125 was filed before the State Board of Optometry (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 March 26, 2007. Respondent timely filed his Notice of Defense contesting the Accusation. A copy of Accusation No. 2003-125 is attached as Exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

- 9. Respondent has carefully read, discussed with counsel, and fully understands the charges and allegations in Accusation No. 2003-125. Respondent also has carefully read, discussed with counsel, and fully understands the effects of this Stipulated Surrender of License and Order.
- 10. 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.
- 11. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

- 12. Respondent, without making specific admissions, stipulates that there is a factual basis for imposition of discipline and agrees that cause exists for discipline based on the allegations in Accusation No. 2003-125, and hereby surrenders his Optometry License No. 10427 for the Board's formal acceptance.
- 13. Respondent without making specific admissions, stipulates that there is a factual basis for imposition of discipline and agrees that cause exists for discipline based on the

allegations in Accusation No. 2003-125, and hereby surrenders his Statement of Licensure-Certificate No. 5181 for the Board's formal acceptance.

14. Respondent understands that by signing this stipulation he enables the Board to issue an order accepting the surrender of his Optometry License and Statement of Licensure Certificate without further process.

CONTINGENCY

Optometry. Respondent understands and agrees that counsel for Complainant and the staff of the State Board of Optometry 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 Surrender 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.

OTHER MATTERS

- 16. The parties understand and agree that facsimile copies of this Stipulated Settlement and Disciplinary Order, including facsimile signatures thereto, shall have the same force and effect as the originals.
- 17. 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 Order:

ORDER'

IT IS HEREBY ORDERED that the surrender of Optometry License No. 10427, and Statement of Licensure Certificate No. 5181 issued to Respondent Gregory Lawrence Tom, doing business as 20/20 Optometry, is accepted by the State Board of Optometry.

- 18. The surrender of Respondent's Optometry License and Statement of Licensure Certificate, and the acceptance of the surrendered license, permits, and certificate 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.
- 19. Respondent shall lose all rights and privileges as an optometrist in California as of the effective date of the Board's Decision and Order.
- 20. Respondent shall cause to be delivered to the Board his Optometry

 License No. 10427, his Statement of Licensure Certificate No. 5181, and his wall and pocket

 license certificates on or before the effective date of the Decision and Order.
- 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 license in effect at the time the petition is filed, and all of the charges and allegations contained in Accusation No. 2003-125 shall be deemed to be true, correct, and admitted by Respondent when the Board determines whether to grant or deny the petition.
- 22. Respondent shall pay the Board its costs of investigation and enforcement in the amount of \$11,284.57 prior to issuance of a new or reinstated license.
- 23. Respondent shall not apply for licensure or petition for reinstatement for one year from the effective date of the Board's Decision and Order.

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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, Richard Terror. Tunderstand the stipulation and the effect it will have on my Optometry License, Fictitions Name Permits, and Branch Office License, 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 State Board of Optometry. DATED:

GREGORY LAWRENCE TUM

Respondent (

I have read and fully discussed with Respondent Gregory Lawrence Tom the terms and conditions and other matters commined in this Stipulated Surrender of License and Order. I approve its form and content.

RICHARD TAMOR Attorney for Respondent

ENDORSEMENT

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

DATED: 12 20 07

EDMUND G. BROWN JR., Attorney General of the State of California

WILBERT E. BENNETT Supervising Deputy Attorney General

DIANN SOKOLOFF
Deputy Attorney General

Attorneys for Complainant.

1	EDMUND G. BROWN JR., Attorney General
	of the State of California
2-	WILBERT E. BENNETT
	Supervising Deputy Attorney General
3	DIANN SOKOLOFF, State Bar No. 161082
· .	Deputy Attorney General
4	California Department of Justice
	1515 Clay Street, 20th Floor
5	P.O. Box 70550
	Oakland, CA 94612-0550
. 6	Telephone: (510) 622-2212
4	Facsimile: (510) 622-2270
7	
	Attorneys for Complainant
8	
	BEFORE THE
9	STATE BOARD OF OPTOMETRY
10	DEPARTMENT OF CONSUMER AFFAIRS
10	STATE OF CALIFORNIA
11	
. 12	In the Matter of the Accusation Against: Case No.
13	GREGORY LAWRENCE TOM
	DBA 20/20 OPTOMETRY A C C US A T I O N
14	3191 Crow Canyon Place, Suite C
	San Ramon, CA 94583
15	
	Optometry License No. 10427 Fictitious Name Permit No. 2155
16	Fictitious Name Permit Number 2081
11.17	Branch Office License Number 6275
	Diamon Office Dicombe Patrice 275
. 18	Respondent.
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20	Complainant alleges:
	The state of the s
21	PARTIES IN THE PROPERTY OF THE PARTIES IN THE PARTI
	1. Taryn Smith (Complainant) brings this Accusation solely in her official
22	1. Taryii Simili (Complaniant) bings time recombined below in the
23.	capacity as the Executive Officer of the State Board of Optometry, Department of Consumer
	capacity as the Exceptive Circor of the State Board of Opening, 1 - P
24	Affairs. The control of the control
	[전 - 1일] [- 1 - 1] 전화는 사이트 사람들이 하는데 살아왔다고 하는데 하는데 나는데 하는데 함께 없는데 없다.
25	2. On or about September 22, 1994, the State Board of Optometry issued
. 26	Optometry License Number 10427 to Gregory Lawrence Tom (Respondent). The Optometry
27	License was in full force and effect at all times relevant to the charges brought herein and will
28	expire on July 31, 2008, unless renewed.
	ritura en la comparta de la formación de la familia de marca de propertion de la formación de presentación de c

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1	3. On or about January 13, 1995, the State Board of Optometry issued
· · · · · · · · · · · · · · · · · · ·	Fictitious Name Permit Number 2081 to Gregory Lawrence Tom, DBA-20/20-Optometry
3	(Respondent). The Fictitious Name Permit expired on April 14, 2003, and has not been renewed.
4	4. On or about May 11, 1995, the State Board of Optometry issued Fictitious
5	Name Permit Number 2155 to Gregory Lawrence Tom, DBA 20/20 Optometry (Respondent).
6	The Fictitious Name Permit expired on April 14, 2003, and has not been renewed.
7	5. On or about June 15, 2001, the State Board of Optometry issued Branch
8	Office License Number 6275 to Gregory Lawrence Tom, DBA 20/20 Optometry (Respondent).
9	The Branch Office License expired on February 1, 2004, and has not been renewed.
10	JURISDICTION
11	6. This Accusation is brought before the State Board of Optometry (Board),
12	Department of Consumer Affairs, under the authority of the following laws. All section
13	references are to the Business and Professions Code unless otherwise indicated.
. 14	7. Section 125.3 of the Code provides, in pertinent part, that the Board may
15	request the administrative law judge to direct a licentiate found to have committed a violation or
16	violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation
17	and enforcement of the case.
18	8. Section 3105 of the Code states: "Altering or modifying the medical
19	record of any person, with fraudulent intent, or creating any false medical record, with fraudulent
20	intent, constitutes unprofessional conduct. In addition to any other disciplinary action, the State
21	Board of Optometry may impose a civil penalty of five hundred dollars (\$500) for a violation of
22	this section."
23	9. Section 3106 of the Code states: "Knowingly making or signing any
24	certificate or other document directly or indirectly related to the practice of optometry that falsely
25	represents the existence or nonexistence of a state of facts constitutes unprofessional conduct."
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FIRST CAUSE FOR DISCIPLINE

(Unprofessional-Conduct-Insurance Fraud)

12. Respondent is subject to disciplinary action under sections 810(a)(1) and 810(a)(2), in conjunction with section 3110, in that between March 23, 2002 and June, 2003, respondent fraudulently submitted bills to Vision Service Plan (VSP).

VSP conducted an audit of respondent's San Ramon and San Jose offices on July 28-29, 2003. A sample of respondent's insurance claims were selected and reviewed. Fifty-five (55) claims from both his San Jose and his San Ramon offices were audited. The audit disclosed that thirty seven (37) claims or 67% of the claims that were reviewed from his San Jose office, and forty-four (44) claims or 80% of the claims reviewed from his San Ramon office were billed inappropriately or could not be substantiated because the patient record could not be located. The audit further found that inappropriate billing patterns were also found to have occurred with some of the same patients' services from previous years dating back to 2001 and 2002. As a result of the audit, VSP terminated respondent from membership status on October 24, 2003, and determined that the amount improperly paid to respondent by VSP was \$84,829.53. In general, the audit revealed the following inappropriate billing patterns: (1) billing for medically necessary contact lenses when none were provided; (2) providing prescription lenses for use without contact lenses when authorization was given only for spectacle lenses for use over contact lenses; (3) providing plano gray-3 lenses when a prescription lens was ordered and billed to VSP; (4) inflating amounts billed to VSP for medically necessary contact lenses, and (5) committing other infractions, including double billing for medically necessary contact lenses, double billing insurance plans, switching dates of service, changing patients' dates of birth to support billing, billing an intermediate exam for a comprehensive exam, inflating the wholesale frame costs, overcharging patients for options, and billing plano sunglasses as frame only

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a. In some cases (patients 5, 14, 15, 32, 49, and 51) the VSP materials and Interim Benefits Pre-Certification Request Forms (Pre-Cert) for medically necessary contact lenses (MNCL) i.e., contact lenses that are required by the patient as defined by VSP and do not include elective, cosmetic contact lenses, were filled out for patients using + cylinder formats for the Spectacle Rx (prescription), when the patient record showed - cylinder format on the examination findings. The cylinder on the Pre-Cert Forms was not marked + or -; this often made it appear that there was a significant change in the patient's Rx when that was not true. Pre-Cert Forms were filled out with a different spectacle Rx than that which was documented on the patient's record.

b. In one case (patient 28), MNCL were pre-certified by VSP but the Patient Survey (the survey sent by VSP to patients who have received services and materials under VSP plans, and filled out by the patients and returned to VSP) stated that he/she did not wear or receive contact lenses. (Respondent billed VSP for these services and he was paid the maximum allowance under the coverage.)

c. In some cases (patients 15, 23, 25, 49 and 50), VSP was routinely billed for spectacle lenses to be worn on top of the MNCL. Respondent provided prescription lenses for use without contact lenses when authorization was given only for spectacle lenses with use over contacts. The Rx of these lenses was routinely a +0.50 D for each eye. There was no apparent therapeutic objective for these Rxs. The Rxs were given without any documentation on the patient record of near-point testing to establish a need for this type of help; it appeared to be done solely for the purpose of inflating the VSP billing.

d. In some cases (patients 1, 3, 10, 17, 20, 21, 28, 29, 41, 53, 55 and 58), children as young as 18 months were given Rxs for glasses when the findings were unreliable - as would be expected at that age. The resulting Rx given to the children, and billed to VSP, were not therapeutically significant; the documented examination findings did not establish any need for the correction.

e. In some cases (patients 57 and 58), where spectacle lenses for use over contact lenses and spectacle lenses for young children were prescribed, and billed to VSP, the VSP Patient Surveys that were filled out by the patients or their parents showed that no lenses were supplied to the patient by Dr. Tom's office.

f. In some cases (patients 10, 17, 21, 21, 29, 33, 36, 41, 46, 48), where spectacle lenses for use over MNCL and spectacle lenses for young children were prescribed, the VSP Patient Surveys that were filled out by the patients or their parents showed that non-prescription sunglasses were supplied to the patient instead of the Rx lenses billed to VSP.

g. In some cases (patients 1, 3, 4, 10, 17, 20, 21, 48 and 62), the documentation on the "Laboratory Instructions" part of the spectacle lens orders instructed the laboratory to ship plano (non-prescription) sunlenses (Gray 3 planes) to Dr. Tom's office instead of the Rx spectacle lenses specified on the billings to VSP for that patient.

h. In some cases (patients 4, 5, 7, 10, 17, 20, 21, 26, 29, 30, 33, 38, 41, 46, 48, 50, 60, 61 and 62), the billings to VSP routinely stated that dilation of the patient was performed on almost every patient, but inspection of the individual patient records reviewed showed that nineteen of those patients did not receive a dilated examination.

i. In one case (patient 24), Dr. Tom's office billed VSP for MNCL and spectacle lenses for use over the contacts. The patient had Lasik surgery 18 months before the billing took place; Dr. Tom was the co-managing optometrist on the surgery and filled out forms documenting that the patient had 20/20 acuity without Rx 12 months before his office executed the billing in question to VSP.

j. In some cases (patients 3 and 60), the Rx on VSP Doctor Service Report (IDC) was not supported by the patient record.

15. Incorporating by reference the allegations in paragraphs 12 through 14, respondent's conduct in knowingly presenting false and fraudulent claims to VSP for payment constitutes unprofessional conduct within the meaning of Code sections 810 (a)(1) and 810(a)(2) and provides grounds for disciplinary action under Code section 3110.

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SECOND CAUSE FOR DISCIPLINE

Unprofessional-Conduct-Alteration of Medical-Records)

- Respondent is subject to disciplinary action under section 3105, in conjunction with section 3110, in that between March 23, 2002, and June, 2003, respondent
- Incorporating by reference the allegations in paragraphs 12 through 14, respondent's conduct in fraudulently submitting bills to VSP necessarily involved altering and modifying the medical records of some of his patients with fraudulent intent and creating a false medical record with fraudulent intent. This conduct constitutes unprofessional conduct within the meaning of Code section 3105 and provides grounds for disciplinary action under Code

THIRD CAUSE FOR DISCIPLINE

(Unprofessional Conduct-False Representation of Facts)

- Respondent is subject to disciplinary action under section 3106, in conjunction with section 3110, in that between March 23, 2002, and June, 2003, respondent fraudulently submitted bills to Vision Service Plan (VSP).
- Incorporating by reference the allegations in paragraphs 12 through 14, respondent's conduct in fraudulently submitting bills to VSP necessarily involved knowingly creating paperwork directly related to his practice of optometry that falsely represented facts regarding several of his patients constitutes unprofessional conduct within the meaning of Code section 3106 and provides grounds for disciplinary action under Code section 3110.

WFIEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the State Board of Optometry issue a decision:

- Revoking or suspending Optometry License Number 10427, issued to Gregory Lawrence Tom, DBA 20/20 Optometry;
- Revoking or suspending Fictitious Name Permit Number 2155, issued to Gregory Lawrence Tom, DBA 20/20 Optometry

1	3. Revoking or suspending Fictitious Name Permit Number 2081, issued to
2	Gregory Lawrence Tom, DBA 20/20-Optometry.
3	4. Revoking or suspending Branch Office License Number 6275, issued to
4 4	Gregory Lawrence Tom, DBA 20/20 Optometry.
5	5. Ordering Gregory Lawrence Tom to pay the State Board of Optometry a
6	civil penalty of five hundred dollars (\$500) for a violation of Code section 3105.
7	6. Ordering Gregory Lawrence Tom to pay the State Board of Optometry the
رر 8	reasonable costs of the investigation and enforcement of this case, pursuant to Business and
9	Professions Code section 125.3;
10	7. Taking such other and further action as deemed necessary and proper.
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14	DATED: 3/26/67
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16	Tonna In the
. 17	TARYN SMITH
18	Executive Officer State Board of Optometry
. 19	Department of Consumer Affairs State of California
20	Complainant
21	03581110-SF2006402477
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	事人 医动物性病 医二乙酰磺基酚 医氯化丁基酚 医克克勒氏征 医克勒氏试验检尿 经股票 我们就是这个人,这个人们就是这种的人,只是这种人的人,
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Memo

2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To:

Board Members

Date:

June 21, 2011

From:

Jessica Sieferman

Telephone:

(916) 575-7178

Probation Monitor

Subject: Agenda Item 6D – Petition for Reduction of Penalty and Early

Termination of Probation

Dr. Sharon Samski, O.D. filed a Petition for Reduction of Penalty and Early Termination of Probation.

However, a Petition to Revoke Probation was filed by the Board on May 23, 2011. The Petition is currently pending at the Office of Attorney General.

In a letter dated June 4, 2011, Dr. Samski withdrew her Petition.



Memo

2420 Del Paso Road, Suite 255 —— Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To:

Board Members

Date:

June 21, 2011

From:

Subject:

Jessica Sieferman Probation Monitor

Telephone:

(916) 575-7178

Agenda Item 6E - Petition for Reduction of Penalty and Early

Termination of Probation

The State Board of Optometry is being asked to consider the following Petitions:

Reduction of Penalty or Early Termination of Probation of:

Dr. Richard Martin, O. D.

The Board is asked to grant or deny the petition after considering the facts presented at the hearing.

Deputy Attorney General, Michelle McCarron, will represent the interest of the public's health, safety and welfare, provide the petitioner's license history, as well as help the Board obtain the information it needs to evaluate the petition to reduce penalties or terminate probation.

The Board Members may ask questions, which should be simple and to the point and directed toward rehabilitation and assessing ability to practice safely, either with or without conditions. As stated in the California Code of Regulations (CCR), Section 1516, the criteria for determining whether a petitioner has shown rehabilitation is as follows:

CCR§ 1516. Criteria for rehabilitation

(a) When considering the denial of a certificate of registration under Section 480 of the Code, the Board, in evaluating the

rehabilitation of the applicant and his/her present eligibility for a certificate of registration, will consider the following criteria:

(1) The nature and severity of the act(s) or crime(s) under consideration as grounds for denial.

- (2) Evidence of any act(s) committed subsequent to the act(s) or crime(s) under consideration as grounds for denial which also could be considered as grounds for denial under Section 480 of the Code.
- (3) The time that has elapsed since commission of the act(s) or crime(s) referred to in subdivision (1) or (2).
- (4) The extent to which the applicant has complied with any terms of parole, probation, restitution, or any other sanctions lawfully imposed against the applicant.

(5) Evidence, if any, of rehabilitation submitted by the applicant.

(b) When considering the suspension or revocation of a certificate of registration on the grounds that the registrant has been convicted of a crime, the Board, in evaluating the rehabilitation of such person and his/her-present-eligibility for a license, will consider the following criteria:

(1) Nature and severity of the act(s) or offense(s).

(2) Total criminal record.

(3) The time that has elapsed since commission of the act(s) or offense(s)

(4) Whether the licensee has complied with any terms of parole, probation, restitution or any other sanctions lawfully imposed against the licensee.

(5) If applicable, evidence of expungement proceedings pursuant to Section 1203.4 of the Penal

Code.

(6) Evidence, if any, of rehabilitation submitted by the licensee.

(c) When considering a petition for reinstatement of a certificate of registration under Section 11522 of the Government Code, the Board shall evaluate evidence of rehabilitation submitted by the petitioner, considering those criteria of rehabilitation specified in subsection (b).

An Administrative Law Judge will sit with the Board and preside over the hearing to maintain order, determine admissibility of documents, assist the Board during closed session and write the Board's Decision.

If the Board decides to deny the Petition, it must state its reasons for doing so.

Below is a Probation Compliance Report, summarizing Dr. Tom's compliance throughout his entire probationary term.

PROBATION COMPLIANCE REPORT

Name of Optometrist: Dr. Richard Martin, O.D.

Case #: CC 2007-71 OPT License: #8799

Jessica Sieferman Probation Monitor:

Decision and Disciplinary Order Jurisdictional Document:

April 26, 2010 - April 26, 2013 Term of Probation:

1) OBEY ALL LAWS: Did the Optometrist obey all laws, and report violations of any laws on time?

Dr. Martin received a traffic citation in November of 2010. Dr. Martin did not notify the Board of the citation until December 20, 2010. Therefore, he failed to report the violation within the 72 hour required timeframe.

Since then, Dr. Martin has complied with the condition.

2) COMPLY WITH THE BOARD'S PROBATION PROGRAM: Has the Optometrist fully complied the conditions of his probation and cooperate with representatives of the Board?

The Board has sent Dr. Martin two Notifications of Noncompliance. One for the above mentioned violation and one for failing to show when selected for Biological Fluid

Testing. Dr. Martin responded promptly to both Notifications. Neither violation warranted further Disciplinary Action from the Board. Dr. Martin was notified that further violations may result in further action.

3) REPORT IN PERSON: Did the Optometrist appear in person at all scheduled interviews as directed?

Yes. Dr. Martin has fully complied with this condition.

4) RESIDENCY OF PRACTICE: Did the Optometrist leave California to reside or practice during the probation term?

No, Dr. Martin did not leave California to reside or practice outside of state during her probation term.

5) SUBMIT WRITTEN REPORTS: Has the Optometrist submitted required quarterly reports?

Yes. Dr. Martin has fully complied with this condition.

6) FUNCTION AS AN OPTOMETRIST: Has the Optometrist engaged in the practice of optometry for "a minimum of 24 hours per week for 6 consecutive months, within each year of probation"?

Yes. Dr. Martin has fully complied with this condition.

7) EMPLOYMENT APPROVAL AND REPORTING REQUIREMENTS: Did the Optometrist obtain prior approval from the Board before commencing or continuing to practice optometry?

Yes. Dr. Martin has fully complied with this condition.

8) SUPERVISED ENVIRONMENT: Did the Optometrist submit for prior approval a name and qualifications for a proposed supervisor?

Yes. Dr. Martin immediately submitted the name of his supervisor and has been in full compliance with this condition.

Has the supervisor provide quarterly reports to the Board.

Yes. The Board continues to receive quarterly reports from the approved supervisor. All reports have been compliant.

9) EMPLOYMENT LIMITITAIONS: Has the Optometrist abided by all of his employment limitations outlined in his Decision?

Yes. Dr. Martin has fully complied with this condition.

10) COMPLETE OPTOMETRY COURSES: Has the Optometrist submitted documentation of 40 hours of continuing education courses per year of probation?

Yes. Dr. Martin has fully complied with this condition.

11) COST RECOVERY: Has the Optometrist paid the Cost Recovery in full?

No. Dr. Martin owed a total of \$3, 272.00 in Cost Recovery. Dr. Martin has been making payments, pursuant to a Board approved payment plan, and has fully complied. Dr. Martin has a remaining balance of \$472.00.

12) VIOLATION OF PROBATION: Did the Optometrist violate conditions of his probation that resulted in the Board filing a Petition to Revoke his Probation?

No. As previously stated, Dr. Martin did receive two Notifications of Noncompliance, but neither violation warranted the Board filing a Petition to Revoke Probation.

13) LICENSE SURRENDER: Did the Optometrist surrender his license at any time during his probation?

No. Dr. Martin maintained a valid license throughout his probation. He never surrendered his license.

14) PARTICIPATE IN TREATMENT/REHABILITATION PROGRAM FOR CHEMCIAL DEPENDENCE: Did the Optometrist successfully complete a Board-approved treatment/rehabilitation program of at least six months duration?

Yes. Dr. Martin completed an 18 month program provided by Cascade Circle Inc. He has fully complied with this condition.

15) ABSTAIN FROM USE OF PSYCHOTROPIC (MOOD-ALTERING) DRUGS: Has the Optometrist "completely abstain[ed] from the possession, injection or consumption by any route of all controlled substances..."?

Yes. Dr. Martin continuously tests negative for all controlled substances through his Biological Fluid Testing. He is in full compliance with this condition.

16) SUBMIT TO TESTS AND SAMPLES: Has the Optometrist submitted samples to all selected Biological Fluid Testing?

No. As previously stated, Dr. Martin has missed selected Biological Fluid Testing. However, Dr. Martin promptly responded to the Notification of Noncompliance and the violations did not warrant further Board action.

17) THERAPY OR COUNSELING PROGRAM: Has the Optometrist participated in on-going counseling?

Yes. Dr. Martin has been participating in counseling provided by Phil Rapin, CASII, MFT. Mr. Rapin has sent the Board reports timely and has kept communication open with the Board. In a letter dated May 25, 2011, Mr. Rapin recommends "that he be released from counseling obligations." He further states that "Richard has not demonstrated to me the necessity to remain in counseling."

The condition states that Dr. Martin "shall participate in an on-going counseling program until such time as the Board releases him/her from this requirement and only upon the recommendation of the counselor."

Therefore, the Board may release Dr. Martin from this requirement. Dr. Martin has fully complied with this condition.

18) COMMUNITY SERVICE: Did the Optometrist complete all required Community Service?

Yes. Dr. Martin is in full compliance with this condition.

Signature of Probation Monitor

Date

Board of Optometry

2420 Del Paso Road, Suite 255 Sacramento, GA 95834 (916) 575-7170/(866) 585-2666

www.optomietry.ca.gov

PETITION FOR REDUCTION OF PENALTY OR EARLY TERMINATION OF PROBATION

No petition for reduction of penalty or early termination of probation will be entertained until one year after the effective date of the Board's disciplinary action. The decision of the petition will be made by the full Board and in accordance with the attached standards for reinstatement or reduction of penalty. Early release from probation or a modification of the terms of probation will be provided only in exceptional circumstances, such as when the Board determines that the penalty or probationary terms imposed have been excessive, considering both the violation of law charged and the supporting evidence, or when there is substantive evidence that there is no more need for the degree of probationary supervision as set forth in the original terms and conditions. As a rule, no reduction of penalty or early termination of probation will be granted unless the probationer has at all times been in compliance with the terms of probation.

probation will be granted timess t	no probationer trae at all			
PLEASE TYPE OR PRINT LEGIBLY	/			
1. NAME (FIRST)	(MIDDLE)	(LAST)		CERTIFICATE OF REGISTRATION NO.
RICHARD 2. ADDRESS (NUMBER)	ARTHUR	MART	IN	DATE OF BIRTH
2. ADDRESS (NUMBER)	(STREET)		. [
4626 SHAS	TA DAM	BLUD		8-1-56
(CITY) (STATE)	(ZIP CODE)		1 .	ELEPHONE
SHASTA LAR 3. PHYSICAL DESCRIPTION	E,CA 9	6019		53) 275-0866
3. PHYSICAL DESCRIPTION	(HEIGHT)	WEIGHT) (EYE	COLOR)	(HAIR COLOR)
4. EDUCATION: NAME(S) OF SC	54000	185	BR -	BR
4. EDUCATION: NAME(S) OF SC	HOOL(S) OR COLLEGE	(S) OF OPTOMETRY AT	TENDED	
NAME OF SCHOOL				
SOUTHERN CALL	SOUTHERN CALIFORNIA COLLEGE OF COTTONIETRY			
ADDUCOO (NOMBEN)	(0111221)	·		
257 YORBA LIN	NOA BLUD	_		
(CITY) (STATE)	(ZIP CODE)			
FULLERTON CA 5. ARE YOU CURRENTLY LICEN	7 92831			
5. ARE YOU CURRENTLY LICEN	SED IN ANY OTHER ST.	ATE? YES	(NO)	
STATE LICENSE NO.	ISSUE DATE	EXPIRATION DATE	LICENSE S	STATUS
				·
				•
6. List locations, dates, and types of	practice for 5 years prior	r to discipline of your Cali	fornia licens	e.
LOCATION	DATE FROM	DATE TO	TYPE OF I	PRACTICE
LOUATION		•		

7. Are you of have you ever been addicted to the dae of harcones of alcohor.	120 (110
8. Are you or have you ever suffered from a contagious disease?	YES NO
9. Are you or have you ever been under observation or treatment for mental disorders, alcoholism or narcotic addiction?	YES (NO
 10. Have you ever been arrested, convicted or pled no contest to a violation of any law of a foreign country, the United States, any state, or a local ordinance? you must include all convictions, including those that have been set aside under Penal Code Section 1203.4 (which includes diversion programs)	YES NO
11. Are you now on probation or parole for any criminal or administrative violations in this state or any other state? (Attach certified copies of all disciplinary or court documents)	YES NO
12. Have you ever had disciplinary action taken against your optometric license in this state or any other state?	YES NO
IF YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, YOU MUST ATTACHMENT A STAEXPLANATION GIVING FULL DETAILS.	ATEMENT OF
ON A SEPARATE SHEET OF PAPER PROVIDE THE FOLLOWING INFORMA	TION
13. List the date of disciplinary action taken against your license and explain fully the cause of the disci	plinary action.
14. Explain fully why you feel your license should be restored, or the disciplinary penalty reduced.	
15. Describe in detail your activities and occupation since the date of the disciplinary action; include data locations.	es, employers ar.
16. Describe any rehabilitative or corrective measures you have taken since your license was discipline petition.	d to support your
17 List all post-graduate or refresher courses, with dates, location and type of course, you have taken was disciplined.	since your license
18. List all optometric literature you have studied during the last year.	
19. List all continuing education courses you have completed since your license was disciplined.	
20. List names, addresses and telephone numbers of persons submitting letters of recommendation ad petition.	ecompanying this
I declare under penalty of perjury under the laws of the State of California that the answers and information completing this petition, and any attachments, are true and I understand and agree that any misstatements will be cause for the rejection of this petition. Date H30/I/ Signature Signature	tion given by me in ents of material

All items of information requested in this petition are mandatory. Failure to provide any of the requested information will result in the petition being rejected as incomplete. The information will be used to determine qualifications for reinstatement, reduction of penalty or early termination of probation. The person responsible for information maintenance is the Executive Officer of the Board of Optometry at 2420 Del Paso Road, Suite 255, Sacramento, California, 95834. This information may be transferred to another governmental agency such as a law enforcement agency, if necessary to perform its duties. Each individual has the right to review the files or records maintained on them by our agency, unless the records are identified confidential information and exempted by Section 1798.3 of the Civil Code.

Richard Martin, O.D.

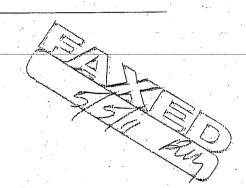
4626 Shasta Dam Blvd. Shasta Lake. CA 96019

(530) 275-0866 FAX (530) 275-8551

Board of Optometry Department of Consumer Affairs 2420 Del Paso Road Suite 255 Sacramento, CA 95834

Case # CC 2007 71

MARTIN, Richard A.



#10. Have you ever been arrested, convicted or pled no contest to a violation of any law of a foreign country, the United States, any state, or a local ordinance?

I was arrested Jan, 2007 in Shasta County. CA for a DUI with a Blood Alcohol level of 0.09. I received a traffic ticket Oct. 2010 for failure to completely stop at a red light.

#11. Are you now on probation or parole for any criminal or administrative violations in this state or any other state.

My license to practice Optometry is currently on probation with the Board of Optometry. Otherwise, no, I am no longer on probation or parolewith Shasta County Courts.

#12. Have you ever had disciplinary action taken against your optometric license in this state or any other state?

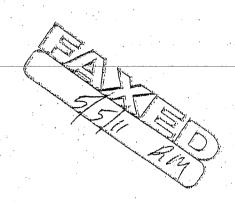
Disciplinary action was taken against my optometric license by the California Board of Optometry YES. on April 26, 2010. A probationary period was enforced. Otherwise, no, there has not been any other action taken against my license in this state or in any other state.

Richard A. Martin, O.D.

Richard A. Martin, O.D. 4626 Shasta Dam Blvd. Shasta Lake, CA 96019

Case # CC 2007 71 MARTIN, Richard A.

April 28th, 2011



13. List the date of disciplinary action taken against your license and explain fully the cause of the disciplinary action.

My license to practice Optometry in the State of California was placed on probation April 26, 2010 for a 2nd DUI conviction dated March 29, 2007. The first offense was charged in 2001

14. Explain fully why you feel your license should be restored, or the disciplinary penalty reduced.

I understand the danger that I forced upon others when I drove with a BAC of 0.09. It was an irresponsible action and one that I will never repeat. I have not had any alcohol since the date of the arrest in January 2007. I have made a decision to remain a non-drinker. I have completed the requirements of my probation and have greatly advanced my career with research and invention.

15. Describe in detail your activities and occupation since the date of the disciplinary action; include dates, employers and locations.

I have continued without interruption in my practice hours. 9-5 M-F and have only worked at my office location on Shasta Dam Blvd. I have not worked for any another doctor. In addition to my regular hours of consultation, I have researched neuro-visual processing, written technical papers, have met with Pentagon officials to discuss new technologies relating to visual performance as they may apply to military personnel, and have prepared for the launch of a new business relating to these newly patented technologies. I remain very much involved in my local community.

16.Describe any rehabilitative or corrective measures you have taken since your license was disciplined to support your petition.

I have totally abstained from alcohol. I volunteered at Sobering Choice, a rehabilitation agency for drunk drivers. I have attended regular private counseling sessions with a state certified drug and alcohol rehabilitation counselor for one year.

17. List all post-graduate or refresher courses, with dates, location and type of course, you have taken since your license was disciplined.

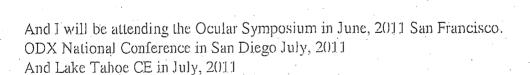
I am attending the glaucoma certification course May 27-30, 2011 @ Southern California College of Optometry.

18. List all optometric literature you have studied during the last year.

I have compiled 85 published articles relating to intrinsically-photosensitive retinal ganglion cells. I have read each publication of Review of Optometry, AOA news, AOA Journal. I have studied visual perception through Duane's and the text book entitled. Visual Perception. In an effort to prepare our technical papers for the medical investigators in the Pentagon. I put in numerous hours of study in neuro-optometry. 19. List all continuing education courses you have completed since your license was disciplined.

2010 West Coast Glaucoma Symposium Corneal Refractive Surgery Femtosecond Lasers in integrated Eye Care When Autoimmune Disease Initiates dry Eye Adjunctive Therapy in Glaucoma Nutrition and the Eye Oculoplastics. Recent Advances in Corneal Surgery Latest Innovations in Cataract and Refractive Surgery Ocular Emergencies of the Anterior Segment Contact Lenses and Ocular Surface Conditions Acquired Macular Disease Vision therapy Grand Rounds Vision transformation. Power of visualization Future of Refractive Surgery Cosmetic rejuvenation of the Peri-orbital Region & Face ECommerce Solution for Optometry New Eye Care Technology Latest in Corneal Dystrophies and Degenerations Clinical Ocular grand Rounds

Vision Fatigue Syndrome



20. List names, addresses and telephone numbers of persons submitting letters of recommendation accompanying this petition.

Phil Rapin, Ph.D State Certified Drug and Alcohol Counselor. Shasta Options, 2972 Churn Creek Road, Redding. CA 96002 (530) 224-5469 Jay Kaze, O.D. FAAO, MA, 206 Sharon Way, Roseville, CA 95678 (916) 208-0155. Royce Barrett, D.C. 636 Azalea Ave. Redding. CA 96002 (530) 941-7520.

Dan Waldrop 4624 Shasta Dam Blvd. Shasta Lake, CA 96019 (530) 275-8581.

Dellatio, 0.0. 5/4/11

Royce A. Barreff, D.C

636 Azalea Ave Redding, CA 96002

Phone: (530) 221-7151 Fax: (530) 221-7151 E-mail address: Rabsoffice@Pacbell net

State of California
Office of the Attorney General
Department of Justice
P.O. Box 944255
Sacramento. CA 94244-2550

Attention Jeffrey M Phillips, Deputy Attorney General RE: Richard Martin, O.D.

6/03/2009

Dear Mr Phillips

I have known Rick Martin both professionally and socially for over six years. I know him to be a competent optometrist and a close friend. I also know him to be a responsible and upstanding citizen, involved in numerous non-profit agencies, his local elementary school board, and in his church.

On numerous social occasions, Rick has refused alcoholic beverages. I believe him when he says that he has not had alcoholic beverages since his DUI in January 2007.

I don't believe that Rick poses any threat to society or his patient population. He takes his work seriously and professionally. I have seen him often enough in his office to know that he is not consuming alcohol at work. I know him well enough to know that he wouldn't.

If I can be or further service, please call: 530.221.7151

I declare, under penalty of perjury, under the laws of California, that the foegoing is true and correct.

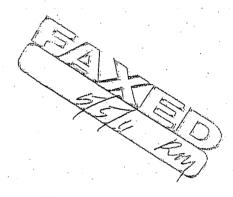
Sincerely:

Royce A. Barrett, D.C.

4624 Shasta Dam Blvd. Shasta Lake, GA 96019 (530) 275-8581 FAX (530) 275-8956

Jeffrey Phillips Deputy Attorney General

State of California Office of the Attorney General Department of Justice P.O. Box 944255 Sacramento, CA 94244-2550



Dear Mr. Phillips:

Dr. Martin and I have adjacent rental office spaces. I have known him for several years. Our children play together, we have joint office parties together, and share in the care of numerous patients.

I am aware of the circumstances surrounding his DUI in 2007. I have never known Dr. Martin to drink alcohol very often. Since the time of his DUI, he doesn't drink at all. I see him everyday and am close to the events of his daily routine.

Dr. Martin is an excellent optometrist. He is a specialist in Low Vision and is much needed in our community. He is the primary Low Vision provider in the north state. He serves the developmentally delayed and physically challenged patients that would otherwise not receive treatment. He is of sound character and would never put his patients at risk.

I declare, under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct.

Sincerely,

Dan Waldrop Certified Optician <u>D6-02-09</u> Date

COMMENTS:	(cureus amount collected on day of sewice
	and amount Rilled
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	Additional review will not
	Benefit Dr. Mortin or the State
	of California I find the care given by Dr. Mantin exceptional as it is being given to his Patient
	as it is being given to his
	Patient'
MONITOR INFORMA	TION
Name: Ly Address: 20	6 Shavon Way Ose Ville CA. Zip Code: 95678
City: C	Obe Ville CA. Zip Code: 95678
Telephone: (9/6	208-0185 Fax Number: Phone first
	(916) 774-588 5
information is true	f - Max G - Max G - Max G - Max G - Max G - Max G - Max G - Max G - Max G -
,	Jey P. Kaze O.D. 7/22/10 DATE
	101AM 5 P.M
Begin Time: 1/	9/10 End Time: 2/11/10 Total Hours this Visit: 26

BEFORE THE BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

•	o. 2007-71
*	

DECISION

The attached Stipulated Decision and Disciplinary Order is hereby adopted by the Board of Optometry, Department of Consumer Affairs, as its Decision in the above-entitled matter.

This Decision shall become effective April 26, 2010.

It is so ORDERED March 26, 2010.

LEE A. GOLDSTEIN, O.D. MPA

PRESIDENT

BOARD OF OPTOMETRY

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		EDMUND.G. BROWN JR.
		Attorney General of California
	2	Arthur D. Taggart
	3	Supervising Deputy Attorney General JEFFREY M. PHILLIPS
	-	Deputy Attorney General
	-4-	State Bar No. 154990
	5	1300 I Street, Suite 125 P.O. Box 944255
• •		Sacramento, CA 94244-2550
	6	Telephone: (916) 324-6292 Facsimile: (916) 327-8643
	7	Attorneys for Complainant
	8	BEFORE THE STATE BOARD OF OPTOMETRY
	9	DEPARTMENT OF CONSUMER AFFAIRS
		STATE OF CALIFORNIA
	10	
	11	In the Matter of the Accusation Against: Case No. CC 2007-71
	12	RICHARD MARTIN STIPULATED SETTLEMENT AND
		4626 Shasta Dam Blvd. DISCIPLINARY ORDER
	13	Shasta Lake, CA 96019
\bigcup	14	
		Certificate of Registration No. 8799
	. 15	Fictitious Name Permits No. 2940, 2609 Statement of Licensure No. 4356
	16	
•	17	Respondent.
	. 1 /	
	1.8	IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
	19	entitled proceedings that the following matters are true:
,	20	<u>PARTIES</u>
	21	1. Mona Maggio (Complainant) is the Executive Officer of the State Board of
	22	Optometry. She brought this action solely in her official capacity and is represented in this matter
	.	
٠.	23	by Edmund G. Brown Jr., Attorney General of the State of California, by Jeffrey M. Phillips,
	24	Deputy Attorney General.
-	25	2. Respondent Richard Martin is representing himself in this proceeding and has chosen
$\langle \cdot \rangle$	-26	not to exercise his right to be represented by counsel.
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CTIDITI ATEN CETTI EMENT AND DICCIDI MADV ODDED (Coso No. CC 2007 71)

- 3. On or about August 28, 1987, the State Board of Optometry issued Certificate of Registration No. 8799 to Richard Martin (Respondent). The license will expire on August 31, 2011, unless renewed.
- 4. On or about October 15, 2003 and August 27, 1999, the State Board of Optometry issued Fictitious Name Permits No. 2940 and 2609, respectively, to Richard Martin (Respondent). These Permits will expire on January 31, 2010, unless renewed.
- 5. On or about August 13, 2003, the State Board of Optometry issued Statement of Licensure No. 4356 to Richard Martin (Respondent). This license will expire on August 31, 2009, unless renewed.

JURISDICTION

6. Accusation No. CC 2007-71 was filed before the State Board of Optometry (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 May 11, 2009. Respondent timely filed his Notice of Defense contesting the Accusation. A copy of Accusation No. CC 2007-71 is attached as exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

- 7. Respondent has carefully read, and understands the charges and allegations in Accusation No. CC 2007-71. Respondent has also carefully read, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 8. 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.
- 9. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

- 10. Respondent admits the truth of each and every charge and allegation in Accusation No. CC 2007-71.
- 11. Respondent agrees that his Certificate of Registration, Fictitious Name Permits, and Statement of Licensure are subject to discipline and he agrees to be bound by the State Board of Optometry (Board)'s imposition of discipline as set forth in the Disciplinary Order below.

RESERVATION

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

CONTINGENCY

- Respondent understands and agrees that counsel for Complainant and the staff of the State Board of Optometry may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent. 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 facsimile copies of this Stipulated Settlement and Disciplinary Order, including 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:

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DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Certificate of Registration No. 8799, Fictitious Name Permits No. 2940 and 2609, and Statement of Licensure No. 4356 issued to Respondent Richard Martin is revoked. However, the revocation is stayed and Respondent is placed on probation for three (3) years on the following terms and conditions.

1. OBEY ALL LAWS - Respondent shall obey all federal, state and local laws. A full and detailed account of any and all violations of law shall be reported by the respondent to the Board in writing within seventy-two (72) hours of occurrence. To permit monitoring of compliance with this condition, respondent shall submit completed fingerprint forms and fingerprint fees within 45 days of the effective date of the decision, unless previously submitted as part of the licensure application process.

CRIMINAL COURT ORDERS: If respondent is under criminal court orders, including probation or parole, and the order is violated, this shall be deemed a violation of these probation conditions, and may result in the filing of an accusation and/or petition to revoke probation.

2. COMPLY WITH THE BOARD'S PROBATION PROGRAM - Respondent shall fully comply with the conditions of the Probation Program established by the Board and cooperate with representatives of the Board in its monitoring and investigation of the respondent's compliance with the Board's Probation Program. Respondent shall, at his own expense, report in person to the Board's headquarters in Sacramento within three (3) months of the effective date of the board's decision, and as the Board deems necessary if it is determined that respondent may not be compliant with any of the terms of conditions of his probation.

Respondent shall inform the Board in writing within no more than 15 days of any address change and shall at all times maintain an active, current license status with the Board, including during any period of suspension.

Respondent shall comply with the Board's probation surveillance program, including but not limited to allowing access to Respondent's optometric practice(s) and patient records upon request of the Board or its agent.

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Respondent shall pay the monitoring costs associated with the Board's probation surveillance program 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 Board of Optometry and delivered to the Board or its designee no later than January 31 of each calendar year. Failure to pay costs within 30 calendar days of the due date is a violation of probation.

Upon successful completion of probation, respondent's license shall be fully restored.

- 3. <u>REPORT IN PERSON</u> Respondent, during the period of probation, shall appear in person at interviews/meetings as directed by the Board or its designated representatives.
- 4. RESIDENCY, PRACTICE, OR LICENSURE OUTSIDE OF STATE Periods of residency or practice as an optometrist outside of California shall not apply toward a reduction of this probation time period. Respondent's probation is tolled, if and when he resides outside of California. The respondent must provide written notice to the Board within 15 days of any change of residency or practice outside the state, and within 30 days prior to re-establishing residency or returning to practice in this state.

Respondent shall provide a list of all states and territories where he has ever been licensed as an optometrist. Respondent shall further provide information regarding the status of each license and any changes in such license status during the term of probation. Respondent shall inform the Board if he applies for or obtains a new optometry license during the term of probation.

5. <u>SUBMIT WRITTEN REPORTS</u> - Respondent, during the period of probation, shall submit or cause to be submitted such written reports/declarations and verification of actions under penalty of perjury, as required by the Board. These reports/declarations shall contain statements relative to respondent's compliance with all of the conditions of the Board's Probation Program. Respondent shall immediately execute all release of information forms as may be required by the Board or its representatives.

Respondent shall provide a copy of this decision to the optometric regulatory agency in every state and territory in which he has an optometry license.

 6. <u>FUNCTION AS AN OPTOMETRIST</u>- Respondent, during the period of probation, shall engage in the practice of optometry in California for a minimum of 24 hours per week for 6 consecutive months, within each year of probation, or as determined by the Board.

For purposes of compliance with the section, "engage in the practice of optometry" may include, when approved by the Board, volunteer work as an optometrist, or work in any non-direct patient care position that requires licensure as an optometrist.

If respondent has not complied with this condition during the probationary term, and the respondent has presented sufficient documentation of his or her good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of the respondent's probation period up to one year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation shall apply.

7. EMPLOYMENT APPROVAL AND REPORTING REQUIREMENTS Respondent shall obtain prior approval from the Board before commencing or continuing the
practice of optometry. Respondent shall cause to be submitted to the Board any available
performance evaluations and other employment related reports as an optometrist upon request of
the Board.

If working as an employee, Respondent shall provide a copy of this decision to his or her employer and immediate supervisors prior to commencement of the practice of optometry.

In addition to the above, respondent shall notify the Board in writing within seventy-two (72) hours after he obtains any optometric employment. Respondent shall notify the Board in writing within seventy-two (72) hours after he is terminated or separated, regardless of cause, from any optometric employment with a full explanation of the circumstances surrounding the termination or separation.

8. <u>SUPERVISED ENVIRONMENT</u> – Within 60 days of the effective date of this decision, Respondent shall submit to the Board, for its prior approval, the name and qualifications of one or more proposed supervisors and a plan for each such supervisor by which Respondent's practice will be supervised. Respondent shall not practice until receiving notification of Board

approval of Respondent's choice of a supervisor. The plan of supervision shall be general and not require the physical presence of the supervising optometrist during the time optometric procedures are performed, but does require an occasional random check of the work performed on patients. Additionally, the supervisor shall have full and random access to all patient records of Respondent. Each proposed supervisor shall be a California licensed optometrist who shall submit written reports to the Board on a quarterly basis verifying that supervision has taken place as required and include an evaluation of Respondent's performance. It shall be Respondent's responsibility to assure that the required reports are filed in a timely manner. The supervisor shall be independent, with no prior business or professional relationship with Respondent, and the supervisor shall not be in a familial relationship with or be an employee (including independent contractor), partner, or associate of Respondent. If the supervisor terminates or is otherwise no longer available, Respondent shall not practice until a new supervisor has been approved by the Board. All costs of the supervision shall be borne by the Respondent.

9. <u>EMPLOYMENT LIMITATIONS</u> - Respondent shall not work in any health care setting as a supervisor of optometrists. The Board may additionally restrict respondent from supervising technicians and/or unlicensed assistive personnel on a case-by-case basis.

Respondent shall not work as a faculty member in an approved school of optometry or as an instructor in a Board approved continuing education program.

Respondent shall work only on a regularly assigned, identified and predetermined worksite(s) and shall not work in a float capacity.

If the respondent is working or intends to work in excess of 40 hours per week, the Board may request documentation to determine whether there should be restrictions on the hours of work.

10. <u>COMPLETE OPTOMETRY COURSE(S)</u> - Respondent, at his own expense, shall enroll and successfully complete 40 hours of course(s) per year of probation, relevant to the practice of optometry, which completion shall take place no later than six months prior to the end of his probationary term.

Respondent shall obtain prior approval from the Board before enrolling in the course(s).

8.

 Respondent shall submit to the Board the original transcripts or certificates of completion for the above required course(s). The Board shall return the original documents to respondent after photocopying them for its records.

11. <u>COST RECOVERY</u> - Respondent shall pay to the Board costs associated with its investigation and enforcement pursuant to Business and Professions Code Section 125.3 in the amount of \$3,272.00. Respondent shall be permitted to pay these costs in a payment plan approved by the Board, with payments to be completed no later than six months prior to the end of the probation term.

If respondent has not complied with this condition during the probationary term, and respondent has presented sufficient documentation of his or her good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of the respondent's probation period up to one year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation will apply.

12. <u>VIOLATION OF PROBATION</u> - If a respondent violates the conditions of his/her probation, the Board, after giving the respondent notice and an opportunity to be heard, may set aside the stay order and impose the stayed discipline (revocation/suspension) of the respondent's license.

If, during the period of probation, an accusation or petition to revoke probation has been filed against respondent's license or the Attorney General's Office has been requested to prepare an accusation or petition to revoke probation against the respondent's license, the probationary period shall automatically be extended and shall not expire until the accusation or petition has been acted upon by the Board.

LICENSE SURRENDER - During respondent's term of probation, if he ceases practicing due to retirement or health reasons, or is otherwise unable to satisfy the conditions of probation, respondent may surrender his or her license to the Board. The Board reserves the right to evaluate respondent's request and to exercise its discretion whether to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances, without further

hearing. Upon formal acceptance of the tendered license and wall certificate, respondent will no longer be subject to the conditions of probation.

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Surrender of respondent's license shall be considered a disciplinary action and shall become a part of respondent's license history with the Board. An optometrist whose license has been surrendered may petition the Board for reinstatement no sooner than one year from the effective date of the disciplinary decision.

CHEMICAL DEPENDENCE - Respondent, at his/her expense, shall successfully complete during the probationary period or shall have successfully completed prior to commencement of probation a Board-approved treatment/rehabilitation program of at least six months duration. As required, reports shall be submitted by the program on forms provided by the Board. If respondent has not completed a Board-approved treatment/rehabilitation program prior to commencement of probation, respondent, within 45 days from the effective date of the decision, shall be enrolled in a program. If a program is not successfully completed within the first nine months of probation, the Board shall consider respondent in violation of probation.

Based on Board recommendation, each week respondent shall be required to attend at least one, but no more than five 12-step recovery meetings or equivalent (e.g., Narcotics Anonymous, Alcoholics Anonymous, etc.) as approved and directed by the Board. Respondent shall submit dated and signed documentation confirming such attendance to the Board during the entire period of probation. Respondent shall continue with the recovery plan recommended by the treatment/rehabilitation program or a licensed mental health examiner and/or other ongoing recovery groups.

DRUGS -Respondent shall completely abstain from the possession, injection or consumption by any route of all controlled substances, psychotropic (mood-altering) drugs and alcohol, except when the same are ordered by a health care professional legally authorized to do so as part of documented medical treatment. Respondent shall have sent to the Board, in writing and within fourteen (14) days, by the prescribing health professional, a report identifying the medication,

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dosage, the date the medication was prescribed, the respondent's prognosis, the date the medication will no longer be required, and the effect on the recovery plan, if appropriate.

Respondent shall identify for the Board a single physician, nurse practitioner or physician assistant who shall be aware of respondent's history of substance abuse and will coordinate and monitor any prescriptions for respondent for dangerous drugs, controlled substances or moodaltering drugs. The coordinating physician, nurse practitioner, or physician assistant shall report to the Board on a quarterly basis respondent's compliance with this condition. If any substances have been prescribed, the report shall identify a program for the time-limited use of any such substances.

The Board may require the single coordinating physician, nurse practitioner, or physician assistant to be a specialist in addictive medicine, or to consult with a specialist in addictive medicine.

participate in a random, biological fluid testing or a drug screening program which the Board approves. The length of time and frequency will be subject to approval by the Board. The respondent is responsible for keeping the Board informed of respondent's current telephone number at all times. Respondent shall also ensure that messages may be left at the telephone number when he is not available and ensure that reports are submitted directly by the testing agency to the Board, as directed. Any confirmed positive finding shall be reported immediately to the Board by the program and the respondent shall be considered in violation of probation.

In addition, respondent, at any time during the period of probation, shall fully cooperate with the Board or any of its representatives, and shall, when requested, submit to such tests and samples as the Board or its representatives may require for the detection of alcohol, narcotics, hypnotics, dangerous drugs, or other controlled substances.

If respondent has a positive drug screen for any substance not legally authorized and not reported to the coordinating physician, nurse practitioner, or physician assistant, and the Board files a petition to revoke probation or an accusation, the Board may suspend respondent from

practice pending the final decision on the petition to revoke probation or the accusation. This period of suspension will not apply to the reduction of this probationary time period.

If respondent fails to participate in a random, biological fluid testing or drug screening

program within the specified time frame, the respondent shall immediately cease practice and shall not resume practice until notified by the Board. After taking into account documented evidence of mitigation, if the Board files a petition to revoke probation or an accusation, the Board may suspend respondent from practice pending the final decision on the petition to revoke probation or the accusation. This period of suspension will not apply to the reduction of this probationary time period.

- 17. THERAPY OR COUNSELING PROGRAM Respondent, at his/her expense, shall participate in an on-going counseling program until such time as the Board releases him/her from this requirement and only upon the recommendation of the counselor. Written progress reports from the counselor will be required at various intervals.
- 18. <u>COMMUNITY SERVICE</u> Within 60 days of the effective date of this decision, respondent shall submit to the board for its prior approval a community service program in which respondent shall provide free <u>non-optometric services</u> on a regular basis to a community or charitable facility or agency for at least 20 hours a month for the first 24 months of probation.

ACCEPTANCE

I have carefully read the Stipulated Settlement and Disciplinary Order. I understand the stipulation and the effect it will have on my Certificate of Registration, Fictitious Name Permits, and Statement of Licensure. 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 State Board of Optometry.

DATED: 12/16/09 PRO

RICHARD MARTIN

Respondent

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	<u>ENDORSEMENT</u>		
2	The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully		
3	submitted for consideration by the State Board of Optometry of the Department of Consumer.		
4	Affairs.		
5	Dated: 1 (9 10 EDMUND G. BROWN JR.		
6	Attorney General of California ARTHUR D. TAGGART		
. 7	Supervising Deputy Attorney General		
- 8	Gy flullys		
9	JEFFRITY M. PHILLIPS		
10	Deputy Attorney General Attorneys for Complainant		
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	12		
	STIPULATED SETTLEMENT AND DISCIPLINARY ORDER (Case No. CC 2007-71)		

1	EDMUND G. BROWN JR., Attorney General of the State of California	
2	ARTHUR D. TAGGART Supervising Deputy Attorney General JEFFREY M. PHILLIPS, State Bar No. 154990	
4	Deputy Attorney General 1300 I Street, Suite 125	
5	P.O. Box 944255 Sacramento, CA 94244-2550	
6	Telephone: (916) 324-6292 Facsimile: (916) 327-8643	
7	Attorneys for Complainant	
8	BEFORE	
9	STATE BOARD OF DEPARTMENT OF CON	SUMER AFFAIRS
10	STATE OF CAL	AFURNIA
11	In the Matter of the Accusation Against:	Case No. CC 2007 71
12	RICHARD A. MARTIN, O.D.	
13	4626 Shasta Dam Blvd. Shasta Lake, CA 96019	ACCUSATION
14	Certificate of Registration No. 8799	
15	RICHARD A. MARTIN, O.D.,	
16	doing business as, SHASTA LAKE OPTOMETRY	
17	4601 Shasta Dam Blvd. Shasta Lake, CA 96019	
18	Fictitious Name Permit No. 2940	
19	RICHARD A. MARTIN, O.D. 3080 Victor Avenue	
. 20	Redding, CA 96002	
21	Statement of Licensure No. 4356	
22	Respondent,	
23	Complainant alleges:	
24	PARTIE	<u>s</u>
25.	1. Mona Maggio (Complainant)	brings this Accusation solely in her official
26	capacity as the Executive Officer of the State Board	of Optometry, Department of Consumer
27	Affairs.	
28	2. On or about August 28, 1987,	the State Board of Optometry issued

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a. On or about May 14, 2007, in the Superior Court of California, County of Shasta, in the case entitled, *People of the State of California v. Richard A. Martin* (Super. Ct. Shasta County, Case No. 07-01446), Respondent was convicted on his plea of nolo contendere of violating Vehicle Code section 23152, subdivision (b) (Driving Under the Influence (DUI) while having an .08% or Higher Blood Alcohol Content Causing Injury), a misdemeanor. The circumstances of the crime are that on January 14, 2007, Respondent did willfully and unlawfully, while having 0.08% or more, by weight, of alcohol in his blood, drive a vehicle, causing bodily injury to a minor (I.M.), with an enhancement for a prior DUI coviction.

b. On or about May 14, 2007, in the Superior Court of California, County of Shasta, in the case entitled, *People of the State of California v. Richard A. Martin* (Super. Ct. Shasta County, Case No. 07-01446), Respondent was convicted on his plea of nolo contendere of violating Penal Code section 273A(B) (Child Endangerment). The circumstances of the crime are that on January 14, 2007, Respondent did willfully and unlawfully cause and permit a child to suffer; and did inflict thereon unjustifiable physical pain and mental suffering; and having the care and custody of a child, did cause and permit the person and health of that child (T.M.) to be injured; and did cause and permit that child to be placed in a situation where his/her person and health might be endangered.

c. On or about October 14, 2003, in the Superior Court of California, County of Shasta, in the case entitled, *People of the State of California v. Richard A. Martin* (Super. Ct. Shasta County, Case No. 0306879), Respondent was convicted of violating Vehicle Code section 23152 (Driving Under the Influence while having an .08% or Higher Blood Alcohol Content), a misdemeanor. The circumstances of the crime are that on or about August 9, 2003, Respondent did willfully and unlawfully, while having 0.08% or more, by weight, of alcohol in his blood, drive a vehicle.

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27.

PRAYER . WHEREFORE, Complainant requests that a hearing be held on the matters herein 2 alleged, and that following the hearing, the State Board of Optometry issue a decision: 3 Revoking or suspending Certificate of Registration Number 8799, issued to Richard A. Martin, O.D. Revoking or suspending Fictitious Name Permit Number 2940, issued to . 2. Richard A. Martin, O.D. Revoking or suspending Statement of Licensure Number 4356, issued to 3. Richard A. Martin, O.D. 9 Ordering Richard A. Martin, O.D. to pay the State Board of Optometry the 4. 10 reasonable costs of the investigation and enforcement of this case, pursuant to Business and 11 Professions Code section 125.3; 12. Taking such other and further action as deemed necessary and proper. 13 14 DATED: 03/23/2000 15 16 17 18 Executive Officer State Board of Optometry 19 Department of Consumer Affairs State of California 20 Complainant 21 22 23 SA2008300610 24 Accusation, wpd 25 26 27 28

BEFORE THE STATE BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:

Case No. CC 2007-71

RICHARD MARTIN

J. 473 6th (FE

4626 Shasta Dam Blvd. Shasta Lake, CA 96019

Certificate of Registration No. 8799 Fictitious Name Permit No. 2940 Statement of Licensure No. 4356

Respondent.

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted by the State Board of Optometry, Department of Consumer Affairs, as its Decision in this matter.

This Decision shall	become	effectiv	e on		
It is so ORDERED		•			
				 '	

FOR THE STATE BOARD OF OPTOMETRY DEPARTMENT OF CONSUMER AFFAIRS



2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To: Board Members Date: June 21, 2011

From: Jessica Sieferman Telephone: (916) 575-7178

Probation Monitor

Subject: Agenda Items 7, 8 & 9: Full Board Closed Session

FULL BOARD CLOSED SESSION

7. Pursuant to Government Code Section 11126(c)(3), to Deliberate on Petitions for Reduction of Penalty and Early Termination of Probation

- A. Dr. David Muris, O.D., License Number OPT 5059
- B. Dr. Casey Finn, O.D., License Number OPT 8638
- C. Dr. Gregory Tom, O.D., License Number OPT 10427
- D. Dr. Sharon Samski, O.D., License Number OPT 9531
- E. Dr. Richard Martin, O.D., License Number OPT 8799

8. Pursuant to Government Code Section 11126(c)(3), to Deliberate on Disciplinary Matters

- A. Proposed Decision and Disciplinary Order, Elise A. Millie, O.D., License Number OPT 13430
- B. Revised Stipulated Settlement and Disciplinary Order, Brent Lee Gibson, OPT 10198
- C. Stipulated Surrender of License and Disciplinary Order, Christine Ann Matson, O.D., OPT 7990
- 9. Pursuant to Government Code Section 11126(e)(1) the Board Will Confer With Legal Counsel to Discuss Pending Litigation: California Academy of Eye Physicians & Surgeons, and California Medical Association v. State Board of Optometry, Case Number CGC-11-507241, San Francisco Superior Court





2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To: Board Members Date: June 21, 2011

From: Jeff Robinson Telephone: (916) 575-7171

Licensing Analyst

Subject: Agenda Item 10 - Discussion and Possible Approval to Allow the Glaucoma

Certification Case Management Course and Grand Rounds Program to Serve as Continuing Education Credit as Required in California Code of Regulations

Section 1536

Background

California State Board of Optometry (Board) staff has received inquiries as to whether or not licensees seeking glaucoma certification could receive continuing optometric education (CE) credit for the completion of a Case Management Course and/or Grand Rounds Program offered by California schools/colleges of optometry.

Although it has been a practice of the Board to grant CE credit to California-licensed optometrists seeking therapeutic pharmaceutical agent (TPA) certification for the 80 hours they receive for completing a didactic course and passing a final examination in the diagnosis, pharmacological, and other treatment and management of ocular disease, it has not done the same for optometrists who have completed ten (10) lacrimal irrigation and dilation procedures under the supervision of a California-licensed ophthalmologist or a 24-hour didactic course in glaucoma.

Since it appears that the Case Management Courses and Grand Rounds Programs offered by the California schools/colleges of optometry meet the requirements listed in California Code of Regulations (CCR) Section 1536, it is the opinion of Board staff that licensees who complete either of the courses should be granted CE credit.

One of the California optometry schools, Western University of Health Sciences School of Optometry, has not received its full accreditation yet. Therefore, the CE courses they provide do not meet the provisions of CCR 1536(e)(1). Board staff is uncertain as to how their courses should be handled.

Action Requested

Board staff requests that Board members:

- 1. Review its current procedures when granting CE credit for optometrists seeking TPA, lacrimal irrigation and dilation, and glaucoma certification
- 2. Discuss the possible approval of glaucoma certification Case Management Course and/or Grand Rounds Program for CE credit and,
- 3. On the matter regarding Western University of Health Sciences School of Optometry (Western). Discuss whether prior approval of the glaucoma certification courses provided by the California schools/colleges is sufficient, or should Western be required to submit a "Request for Approval of Continuing Optometric Education Course(s)" along with the required information and fee?

Attachment

CCR 1536(e)

§1533.1. EXAMINATION APPEALS

Authority cited: Section 3025, Business and Professions Code. Reference: Section 3025, Business and Professions Code. History

- 1. New section filed 10-11-89; operative 11-10-89 (Register 89, No. 41).
- 2. Repealer filed 4-25-2001; operative 5-25-2001 (Register 2001, No. 17).

§1534.-NATIONAL-BOARD-OF-EXAMINERS-IN-OPTOMETRY (NBO)

Authority cited: Section 3025, Business and Professions Code. Reference: Section 3053, Business and Professions Code. History

- 1. Amendment of subsection (c) filed 1-24-80; effective thirtieth day thereafter (Register 80, No. 4).
- 2. Repealer filed 10-25-83; effective thirtieth day thereafter (Register 83, No. 44).

§1535. EXAMINATION-REQUIREMENTS

Authority cited: Sections 3025, 3041.2 and 3053, Business and Professions Code. Reference: Sections 3041.2 and 3053, Business and Professions Code. History

- 1. Amendment filed 8-7-69; effective thirtieth day thereafter (Register 69, No. 32).
- 2. Amendment filed 11-22-77; effective thirtieth day thereafter (Register 77, No. 48).
- 3. Amendment filed 4-20-81; effective thirtieth day thereafter (Register 81, No. 17).
- 4. Amendment filed 5-20-83; effective upon filing pursuant to Government Code Section 11346.2(d) (Register 83, No. 21). 5. Amendment filed 2-21-89; operative 3-23-89 (Register 89, No. 10).
- 6. Editorial correction of printing error of HISTORY No. 5 filing date (Register 89, No. 20).
- 7. Amendment of section heading and former subsection (a), and repealer of subsection designations and former section (b) filed 5-8-96; operative 6-7-96 (Register 96, No. 19).
- 8. Repealer filed 6-24-97; operative 7-24-97 (Register 97, No. 26).

ARTICLE 6.5 CONTINUING OPTOMETRIC EDUCATION

§1536. CONTINUING OPTOMETRIC EDUCATION; PURPOSE AND REQUIREMENTS

- (a) Except as otherwise provided in Section 1536(b), each licensee shall complete 40 hours of formal continuing optometric education course work within the two years immediately preceding the renewal deadline. Such course work shall be subject to Board approval. No more than eight hours of course work shall be in the area of patient care management. Courses dealing with business management shall not be approved.
- (b) An optometrist certified to use therapeutic pharmaceutical agents pursuant to Business and Professions Code Section 3041.3 shall complete a total of 50 hours of continuing education every two years in order to renew his or her certificate. Thirty-five of the required 50 hours of continuing education shall be on the diagnosis, treatment and management of ocular disease and consistent with Business and Professions Code section 3059, subdivision (f).
- (c) Up to 20 hours of required biennial course work may be accomplished by using any or all of the following alternative methods:
- (1) Documented and accredited self study through correspondence or an electronic medium.
- (2) Teaching of continuing optometric education courses if attendance at such course would also qualify for such credit, providing none are duplicate courses within the two-year period.
- (3) Writing articles that have been published in optometric journals, magazines or newspapers, pertaining to the practice of optometry (or in other scientific, learned, refereed journals on topics pertinent to optometry), providing no articles are

- duplicates. One hour of credit will be granted for each full page of printing or the equivalent thereof.
- (d) A credit hour is defined as one classroom hour, usually a 50-minute period, but no less than that.
- (e) Continuing optometric education programs which are approved as meeting the required standards of the Board include the following:
- (1) Continuing optometric education offerings officially sponsored or accredited by any accredited school or college of optometry.
- (2) Continuing optometric education offerings of any national or state affiliate of the American Optometric Association, the American Academy of Optometry, or the Optometric Extension Program.
- (3) Continuing optometric education offerings approved by the Association of Regulatory Boards of Optometry known as COPE (Council on Optometric Practitioner Education).
- (f) Other educational programs approved by the Board as meeting the criteria as set forth in (g) below, after submission of a program, schedule, topical outline of subject matter, and curriculum vitae of all instructors involved, to the Executive Officer of the Board not less than 45 days prior to the date of the program. The Board may, upon application of any licensee and for good cause shown, waive the requirement for submission of advance information and request for prior approval. Nothing herein shall permit the Board to approve of an educational program which has not complied with the criteria set forth in paragraph (g) below.
- (g) The criteria for judging and approving education programs by the Board for continuing optometric

education credit will be determined on the following basis:

- (1) Whether the program is likely to contribute to the advancement of professional skill and knowledge in the practice of optometry.
- (2) Whether the speakers, lecturers and others participating in the presentation are recognized by the Board as being qualified in their field.
- -(3)-Whether-the-proposed-course is-open-to-alloptometrists licensed in this State.
- (4) Whether the provider of any mandatory continuing education course agrees to maintain and furnish to the Board and/or attending licensee such records of course content and attendance as the Board requires, for a period of at least three years from the date of course presentation.
- (h) Proof of attendance at continuing education programs shall be provided in a form and manner specified in writing by the Board and distributed to all licensed optometrists in this state. Certification of attendance at continuing education courses shall be submitted by the licensee to the Executive Officer or his/her designee upon request, and shall contain the following minimal information:
- (1) The name of the sponsoring organization.
- (2) The name, signature, practice address, and license number of the attending licensee.
- (3) The subject or title of the educational program.
- (4) The number of hours in actual attendance.
- (5) The date of the educational program.
- (6) The location of the educational program.
- (7) The name(s) of the course instructor(s).
- (8) Such other evidence of course content or attendance as the Board may deem necessary.

Use of a Board-specified certificate form is recommended for any educational programs approved by the Board pursuant to the above. Such forms will be furnished by the Executive Officer on request.

- (i) The following licensees shall be exempt from the requirements of this section.
- (1) Any licensee serving in the regular armed forces of the United States during any part of the 24 months immediately preceding the annual license renewal date.
- (2) Those licensees as the Board, in its discretion, determines were unable to attend sufficient hours of continuing optometric education courses due to illness, incapacity, or other unavoidable circumstances.
- (3) Any licensee who is renewing an active license for the first time, if he/she graduated less than one year from the date of initial licensure.
- (j) The Board may conduct an audit of any licensee's attendance at continuing education programs as a means of verifying compliance with this section.
- (k) As a condition of license renewal, all licensees are required to maintain current certification in cardiopulmonary resuscitation (CPR) from the American Red Cross, American Heart Association, or other association approved by the Board. Training required for the CPR certificate shall not be credited toward the requirements of subdivision (a). Exemptions will be made for licensees as the Board, in its discretion, determines were unable to maintain current CPR certification due to physical impairment, illness, incapacity, or other unavoidable circumstances.

Authority cited: Sections 3023.1 and 3059, Business and Professions Code. Reference: Section 3059, Business and Professions Code. History

- 1. New section filed 2-21-89; operative 3-23-89 (Register 89, No. 10).
- 2. Amendment of subsections (a) and (d), new subsection (d)(3), and amendment of subsections (e), (f), (f)(2), (f)(4), (g), (g)(8), (h)(2), (h)(3) and (i), and new subsection (j) and amendment of Note filed 5-8-96; operative 6-7-96 (Register 96, No. 19).
- 3. Amendment filed 12-22-2004; operative 1-21-2005 (Register 2004, No. 52).

ARTICLE 7 OPTOMETRIC CORPORATIONS

§1540. CITATION OF RULES

Authority cited: Sections 3025 and 3167, Business and Professions Code. Reference: Section 3025, Business and Professions Code.

History

- 1. New Article 7 (# 1540 through 1550) filed 9-27-71; effective thirtieth day thereafter (Register 71, No. 40).
 2. Repealer filed 10-25-83; effective thirtieth day thereafter (Register 83, No. 44).
- §1541. DEFINITIONS

Authority cited: Section 3167, Business and Professions Code. Reference: Section 13410, Corporations Code. History 1. Change without regulatory effect repealing Section 1541 (Register 88, No.15).

§1542. PROFESSIONAL RELATIONSHIPS, RESPONSIBILITIES, AND CONDUCT NOT AFFECTED

Authority cited: Section 3167, Business and Professions Code. Reference: Section 13410, Corporations Code. History

1. Change without regulatory effect repealing Section 1542 (Register 88, No.15).



2420 Del Paso Road, Suite 255 Sacramento, CA 95834 (916) 575-7170, (916) 575-7292 Fax www.optometry.ca.gov

To: Board Members Date: June 21, 2011

From: Andrea Leiva Telephone: (916) 575-7182

Policy Analyst

Subject: Agenda Item 11 – Discussion and Possible Action on Assembly Bill (AB) 778,

Health Care Service Plans: Vision Care

Action Requested

Staff would like to request that the Board discuss this bill and approve staff's suggested letter of opposition.

Background

Current Law

<u>Business and Professions Codes (BPC) section 655</u> prohibits business relationships between optometrists and opticians. Business relationships include:

- Membership;
- Proprietary interest;
- Co-ownership;
- · Landlord/tenant relationships; and
- Any profit-sharing arrangement in any form, directly or indirectly which includes:
 - 1) Stock ownership;
 - 2) Interlocking directors;
 - 3) Trusteeship;
 - 4) Mortgage;
 - 5) Trust deed; and
 - 6) Manufacture, sale, or distribution to optometrists of optical products or anything related.

<u>BPC section 2556</u> prohibits registered dispensing opticians from hiring optometrists and advertising their services, specifically:

 To directly or indirectly employ or maintain on or near the premises used for optical dispensing, an optometrist for the purpose of any examination or treatment of the eyes, or to duplicate or change lenses without a prescription.

<u>BPC section 3109</u> prohibits optometrists from accepting employment from an unlicensed person or from any company or corporation attempting to practice optometry. Notwithstanding the provisions of this section or any other sections, optometrists may be employed by:

- A licensed ophthalmologist; and
- A health care service plan (Knox-Keene).

What AB 778 Proposes

This bill proposes to allow registered dispensing opticians, an optical company, a manufacturer or distributor of optical goods, or a non-optometric corporation (violates BPC section 3109) to do the following:

- Own a health care services plan that provides vision care services and shares profits; (Violates BPC section 655)
- Contract for business services with, lease office space or equipment to or from, or share office space with, a health care service plan that provides vision care services; and (Violates BPC section 655)
- Jointly advertise vision care services with a health care service plan that provides vision care services.
 - (Violates BPC section 2556)

How Will AB 778 Affect Current Law?

There are two main issues that are of concern regarding the co-location of opticians and optometrists:

- 1) BPC sections 655 and 2556 are being violated by large optical companies such as LensCrafters and Pearl Vision Inc. These sections, designed to protect consumers, have been part of California law for 90 years. The optical companies are interpreting provisions in the Knox-Keene Act (Health & Safety Code section 1395(b) specifically) as "relieving" specialized health care service plans of restrictions on employing doctors, optometrists, and other health care professionals by providing in section 1395 (b) that plans licensed under the Knox-Keene Act shall not be deemed to be engaged in the practice of a profession and may employ, or contract with, any professional to deliver services." According to the California Attorney General, this is not so. Knox-Keene specialized health care service plans must still comply with BPC sections 655 and 2556.
- 2) LensCrafters and Pearl Vision are not only clearly violating the law, but they are also engaging in conduct designed to influence and interfere with the clinical decisions of their optometrists. Examples are outlined in the chart below.

The bill would delete the above consumer protection provisions.

AB 778 – LensCrafters Arguments	California Attorney General & Board of Optometry Arguments
The co-location model provides a one-stop experience for the patient versus a private optometrist who also sells frames and lenses. Definition: Co-location model – a retail optical store that exists in the same location as optometrists who are employed by a separate health plan.	1) The California Attorney General's (AG) findings* indicate that legislative history demonstrates that section 2556 was intended to strengthen the 1930's amended version of section 3103's employment prohibition where optometrists were not permitted to work for corporation or commercial entities. The aim was to prevent lay control and advertising for non-prescription eyewear in conjunction with the advertising of professional optometric eye care services.
	2) History also shows that business relationships with optometrists are a public health issue

^{*}National Association of Optometrists & Opticians; Lenscrafters, Inc., Eye Care Center of America, Inc., vs. California Attorney General & the Department of Consumers Affairs. Defendants' Separate Statement of Undisputed Facts in Support of Defendants' Motion for Summary Judgment; April 19, 2010. 2 of

	because they result in "captive" arrangements contrary to public interest." Optometrists must be protected from greed of corporations or employer-optometrists and supported when they refuse to service 40 or 50 patients daily "in a speed up system so outrageous that no good labor union would tolerate such conditions.
On the surface, both look the same to the patient. The consumer won't see the difference.	1) The AG's findings indicate that patients undergoing eye examinations are not knowledgeable enough about optometric procedures to actually know whether or not they have received a thorough, quality eye exam. This gives chain firms the ability to get away with providing lower quality eye exams, and high priced eyewear.
	2) Consumers are unaware that section 655 prohibits business relationships between optometrists and optical companies to protect them from over-prescribing of eyewear and unnecessary or inadequate eye examinations.
	3) Uninformed consumers have no idea of the subtle pressures placed on optometrists to produce as many prescriptions as possible per day, and because they are not able to distinguish a quality eye exam from a poor one, they do not suspect that eye care at a chain store is really just incidental to the optical retailer's efforts to increase eyewear. Therefore, they cannot complain about what they do not know or understand.
	4) According the AG's findings, it is well documented that informed consumers prefer quality of care over convenience or price.
This arrangement provides patients with exceptional care, broadens eye care access, and creates thousands of jobs in the state.	1) According to the AG's findings, EYEXAM optometrists were counseled in both meetings and written materials to "leverage" their doctor-patient trust relationship to persuade patients to purchase eyewear at LensCrafters. The optometrists were told that most patients will follow their doctor's advice to purchase multiple pairs of eyewear because optometrists are medical providers, whom they trust.
Without this bill, the vision care choices of working Californians could be severely limited. Our state would lose affordable vision care.	Consumers receive higher quality of care from independent optometrists than from optometrists located inside of optical chains. According to the AG's findings, pressure from outside sources, such as optical companies

^{*}National Association of Optometrists & Opticians; Lenscrafters, Inc., Eye Care Center of America, Inc., vs. California Attorney General & the Department of Consumers Affairs. Defendants' Separate Statement of Undisputed Facts in Support of Defendants' Motion for Summary Judgment and Opposition to Plaintiffs' Motion for Summary Judgment; April 19, 2010. 3 of 7

	create incentives that challenge the optometrist's ethical boundaries. 3) LensCrafters would not consider locating in smaller rural areas because it would not have enough scale (profit margin) to justify the store. 4) Chain stores are not generally located outside of urban areas, those markets are served by independent optometrists. There are no LensCrafters stores in Wyoming due to lack of population.
Due to an ambiguity in the law that regulates these relationships, optometrists, their staff and optical employees may be forced out of their jobs.	 According to the AG's findings, if the challenged laws are held to be unconstitutional and optical companies are free to have optometrists located in their premises, then a likely result would be that the market would have fewer independent optometrists available to the public, and more optometrists would work for optical companies, either through the Knox-Keene plan or a sub-lessees. According to the AG, there would be less competition as the chains take over and the market would concentrate in the optical retailers, causing the weaker market participants — optometrists — to seek employment with the chain stores, leaving fewer private optometrists, and fewer opportunities for employment for optometrists. Jobs will be lost no matter what.
Hundreds of optometrists prefer the colocation model.	1) According to the AG, optometrists working inside of a LensCrafters' store is dependant on EyeExam for his/her salary, bonus, pension, 401K plan with matching funds, the office space, optometric equipment, assistants, and even patients. 2) According the AG's findings, the ability to make judgments and have integrity in your practice is the ability to hire personnel that are qualified and to manage them, to be able to interact with patients in an appropriate amount of time for their disease and the ability to choose your supplies to have a functioning office. Being forced to have someone in your exam room, the sharing of confidential patient records, trying to predetermine patient needs for sales purposes and basing an optometrist's good standing with the company to keep your employment based on retail numbers is wrong.

^{*}National Association of Optometrists & Opticians; Lenscrafters, Inc., Eye Care Center of America, Inc., vs. California Attorney General & the Department of Consumers Affairs. Defendants' Separate Statement of Undisputed Facts in Support of Defendants' Motion for Summary Judgment; April 19, 2010. 4 of 7

	3) According to the AG's findings, an optometrist who complains about commercial interests interfering with his/her professional judgment is easily replaced. Optometrists were forced to go to the company's legal counsel and later received pressure to sign up for arbitration with the threat of termination if they did not comply.
 AB 778 will not create a new type of business practice, only codify what is currently being practiced by optical companies and Knox-Keene plans regulated by the Department of Managed Health Care (DMHC). The bill is limited to defining rights for licensed Knox-Keene plans. Definition: Knox-Keene Plan – A specialized healthcare service plan undertakes to arrange for the provision of health care services, in a single specialized area, to subscribers or enrollees, or to pay for or to reimburse any part of the cost of those services, in return for a prepaid or periodic charge paid by or on behalf of the subscribers or enrollees. 	1) LensCrafters operates stores in Canada where they do not have optometrists located on the same premises. They locate stores near independent optometrists to achieve the "onestop" shopping convenience. Why can't they do this in California in compliance with the law?
AB 778 will not allow optical companies to hire an optometrist or ophthalmologist.	1) AB 778 does not allow just any optical company to hire an optometrist, but it does allow for Knox-Keene plans to hire optometrists. LensCrafter's Knox Keene Plan is EYEEXAM, a wholly owned subsidiary of LensCrafters' corporation, Luxottica. Thus, an optical dispenser is indirectly hiring the optometrists and that is a violation of the law. The bill includes the language "notwithstanding any other provision of law" thus BPC sections 655, 2556 and 3109 continue to apply.
Without this bill, California would become one of only three states in the country that do not allow patients the option of the co-location vision office.	1) Patient safety is the California Board of Optometry's priority. If this model is not in the best interest of California consumers, as the AG has proven multiple times in the last 10 years, then California should continue to be one of those states.
Californians will be limited to only one vision care option (private practice) that requires less oversight.	1) The AG's findings indicate that an optometrist in private practice is able to provide higher quality exams because they can spend more time with the patients (not just 20 min. as required by the corporations) and answer questions. One patient seen per hour is the ideal situation in the best interest of the patient.
	2) How can this be possible? Despite the claim

^{*}National Association of Optometrists & Opticians; Lenscrafters, Inc., Eye Care Center of America, Inc., vs. California Attorney General & the Department of Consumers Affairs. Defendants' Separate Statement of Undisputed Facts in Support of Defendants' Motion for Summary Judgment and Opposition to Plaintiffs' Motion for Summary Judgment; April 19, 2010. 5 of 7

LensCrafters is not like Stanton Optical and Costco. LensCrafters is co-located but has separate entrances. Walmart and First Sight Vision also have completely separate entrances. They work in a low-cost, high traffic environment with up to 300,000 eye exams per year. They are providing more access to low-income patients.	of a high level of oversight, there continue to be complaints that the co-location models apply pressure on optometrists to increase profits at the expense of patient care. 1) LensCrafters, a purely commercial entity controls EYEXAM (a Knox-Keene HMO employer), a wholly owned subsidiary of LensCrafters' parent corporation, Luxottica. EYEXAM exists primarily to increase the profits of LensCrafters.
LensCrafters has a no tolerance policy for undue influence on an optometrist's clinical judgment. AB 778 also has provisions to address this. Optometrists are not compensated for selling more lenses or frames.	 1) Examples of problems with retail chain stores found by the AG: Optometrists only allowed 15-minute exams that don't diagnose medical conditions leading to preventable blindness. Unauthorized access to medical records. Restraining trade by prescribing proprietary products to prevent patients from taking their Rx to another location. Medical judgment is interfered with by requiring optometrists to focus on number of sales generated, percentage of dilations and retinal photos, retail management talking to optometrists about ways to maximize sales and leverage the doctor to hit those numbers, told not to separate the doctor from the business side. Doctor-patient problems created – patients will want lenses on sale, even though it is not good for them. Doctor must educate them, but this would hurt sales. Non-optometric staff on the retail side scheduling appointments without knowing patient needs, screening patients and making decisions that are sales based, no clinically based because they are not medical professionals. Forced to accept all walk-in appointments. Forced to perform procedures that cost more for profit purposes even though they are not necessary. Disciplined if they don't follow retail store's business procedures even though they may be harmful or unnecessary to

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	the patient e.g., overprescribing.
	2) Luxottica's wholly owned subsidiary, Pearle Vision, Inc. has recently been sued for exerting control over optometrists in three Texas lawsuits.
LensCrafters has been using the co-location model for 25 years.	1) For 10 of the 25 years, the co-location model has been challenged in the courts by the AG, and the battle continues to this day.

Attachments

- 1) Board of Optometry Letter of Opposition Final Draft
- 2) Section of Law Pertaining to Co-location of Optometrists (BPC 655, 2556, 3109 and H&SC 1395(b))
- 3) Business Models of Optometry

Agenda Item 11, Attachment 1

Position Letter by The Board of Optometry regarding AB 778 will be provided at the Board meeting.

Sections of Law Pertaining to the Co-Location of Optometrists, Opticians and Knox-Keene Plans

Business and Professions Code section 655: Prohibition of Business Arrangements Between Optometrists and Opticians or Persons in Optical Product Business

- (a) No person licensed under Chapter 7 (commencing with Section 3000) of this division may have any membership, proprietary interest, coownership, landlord-tenant relationship, or any profit-sharing arrangement in any form, directly or indirectly, with any person licensed under Chapter 5.5 (commencing with Section 2550) of this division.
- (b) No person licensed under Chapter 5.5 (commencing with Section 2550) of this division may have any membership, proprietary interest, coownership, landlord-tenant relationship, or any profit sharing arrangement in any form directly or indirectly with any person licensed under Chapter 7 (commencing with Section 3000) of this division.
- (c) No person licensed under Chapter 7 (commencing with Section 3000) of this division may have any membership, proprietary interest, coownership, landlord-tenant relationship, or any profit-sharing arrangement in any form, directly or indirectly, either by stock ownership, interlocking directors, trusteeship, mortgage, trust deed, or otherwise with any person who is engaged in the manufacture, sale, or distribution to physicians and surgeons, optometrists, or dispensing opticians of lenses, frames, optical supplies, optometric appliances or devices or kindred products.

Any violation of this section constitutes a misdemeanor as to such person licensed under Chapter 7 (commencing with Section 3000) of this division and as to any and all persons, whether or not so licensed under this division, who participate with such licensed person in a violation of any provision of this section.

Business and Professions Code section 2556: Unlawful Practices: Advertising Optometry Services by Optical Dispenser

It is unlawful to do any of the following: to advertise the furnishing of, or to furnish, the services of a refractionist, an optometrist, or a physician and surgeon; to directly or indirectly employ or maintain on or near the premises used for optical dispensing, a refractionist, an optometrist, a physician and surgeon,

or a practitioner of any other profession for the purpose of any examination or treatment of the eyes; or to duplicate or change lenses without a prescription or order from a person duly licensed to issue the same.

Business and Profession Code section 3109: Accepting Employment from Non-Licensee; Right of Incorporation

Directly or indirectly accepting employment to practice optometry from any person not having a valid, unrevoked license as an optometrist or from any company or corporation constitutes unprofessional conduct. Except as provided in this chapter, no optometrist may, singly or jointly with others, be incorporated or become incorporated when the purpose or a purpose of the corporation is to practice optometry or to conduct the practice of optometry.

The terms "accepting employment to practice optometry" as used in this section shall not be construed so as to prevent a licensed optometrist from practicing optometry upon an individual patient.

Notwithstanding the provisions of this section or the provisions of any other law, a licensed optometrist may be employed to practice optometry by a physician and surgeon who holds a certificate under this division and who practices in the specialty of ophthalmology or by a health care service plan pursuant to the provisions of Chapter 2.2 (commencing with Section 1340) of Division 2 of the Health and Safety Code.

Health and Safety Code 1395(b): Pertaining to Knox-Keene Plans

(b) Plans licensed under this chapter shall not be deemed to be engaged in the practice of a profession, and may employ, or contract with, any professional licensed pursuant to Division 2 (commencing with Section 500) of the Business and Professions Code to deliver professional services. Employment by or a contract with a plan as a provider of professional services shall not constitute a ground for disciplinary action against a health professional licensed pursuant to Division 2 (commencing with Section 500) of the Business and Professions Code by a licensing agency regulating a particular health care profession.

MODES OF OPTOMETRIC PRACTICE

Solo Private Practice

A career as a Solo Private Practice owner is the most sought after career path by new Optometrists today. Over half of all practices today are in this format, however, this type of practice represents significantly less than half of sales in the optometric marketplace. Entering private practice in any profession is challenging as a large variety of skills (both optometric and business operations) must be in place in order to build a successful business model. For that reason, this mode of practice contains both the lowest and highest paid Optometrists. For the right individual with the required skills and mind set, this can be a very lucrative practice mode, but is also a high-risk, high-debt option that should be entered with full knowledge of the business operations commitment that is required.

Optometrists operating in this mode are a full business operator in all regards. In some cases, no optical goods are sold, which simplifies the model, but reduces the lucrative draw of this mode of practice. In a "full" scope practice, duties range from clinical care, hiring and training, bookkeeping, product selection, manufacturing, inventory management, managed care enrollment and processing, etc. In most cases, Optometrists who choose this mode do so after learning the ropes of the business environment by working in one of the other modes of practice. Historically, practices built in this manner created an asset that could be sold to another Optometrist, and represented a retirement or "exit" strategy. As the presence of retail optical has grown, the "exit" value of this type of practice has diminished. For the right individual, this mode of practice brings tremendous benefit, but for most this is becoming a less attractive option.

Retail Optical Setting (Employment)

Retail optical practices are becoming increasingly popular for both new graduates and established Optometrists due to the level of income they provide, low risk, flexibility they can offer, and the ability to focus more on the clinical side of the practice rather than the business operations. As the number of retail optical locations continues to grow at a high rate, practices of this type are available in almost every state. As the trend of more women in optometry and two income professional families continues to increase, the flexibility offered via employment in a retail optical setting fits well with the needs of today.

Practices of this type are most often referred to as "Turn-Key" as all of the equipment, staff training, scheduling, charting, etc. has been taken care of in advance, and the optometrist is free to focus on the clinical aspects of the practice. In many cases, a successful business with adequate patient flow has been established. A full range of employee benefits are included such as healthcare, vacations, retirement savings, disability, etc. (this will vary by employer, but is typical of the benefit package offered as a part of employment). As employees the Optometrist is covered by the same State and Federal labor laws and protections as any other employee. Inclusion under the Family Medical Leave Act (FMLA) can be of particular benefit for young families. Sometimes referred to as a great place to "Learn The Optometric Trade", in reality, long-term retention rates in the employment practice mode are quite high across Optometrists of all ages. Due to the higher immediate income potential and stability associated with this mode of practice, it is considered by many new graduates as a great way to have activities outside of growing a practice while paying off significant student debt.

Clinical standards are an important component of any practice, and the association with a larger Professional Services organization adopted by most major retail optical companies helps to maintain those standards. The position of Clinical Director exists to address any clinical issues, and to make sure that all Optometrists are kept abreast of any new or changing standards or technology. In this environment, all of the non-clinical activities are handled by the retail side of the business. This includes the sale of optical goods (Contact Lens sales may vary by state), the collection of payment for both goods and optometric services, as well as billing and collecting from the various managed care companies. Regional and national relocation and transfer opportunities will vary by company, but are significantly more prevalent in the retail optical practice mode.

Retail Optical Setting (Independent Practitioner)

In many ways, this mode is similar to practicing as an employee at a Retail Optical company, with the major exception being that you are responsible for all aspects of the clinical side of the business. The business is still "Turn-Key" in that the optometrist typically leases from the Retail Optical company, and the location, equipment, patient flow, and retail sales components are taken care of without taking away from the Optometrists clinical activities. For this reason, Independent Practitioners in this mode are often referred to as "Lease" or "Sub-Leasing" Optometrists. This mode is basically a mix of the Solo Practice model and the employee model. As an independent practitioner in a Retail Optical setting, you will not be an employee of the Retail Optical company, and will own your company. There are many ways to set up the independent business with the most popular being a Professional Corporation or "PC". If you have employees, your company will be responsible for their hiring, training and pay (not a clinical activity).

Most retail optical companies offer both direct and indirect support to allow their Optometrists to focus on the patient. Help in navigating issues such as credentialing, managed care enrollment, current changes or updates in the legal environment, new product trends, equipment maintenance, etc. can significantly simplify your practice activity. In most cases the internal operations of your practice are up to you as long as legal and clinical standards are maintained. Association with a large optical retailer can bring you benefits in terms of negotiated discounts on computer equipment, software, insurance coverage, and optometric equipment that is not part of the leased equipment package. This is less risky than a Solo Practice with some of the benefits, can offer a higher level of income if well run and marketed, and has inherently more support. The success rate of this mode of practice is typically greater than the Solo mode, as many of the pitfalls that any business encounters has been worked out by others, and the support exists to avoid those pitfalls. Like any practice, it usually takes longer to get this type of practice to the same level or personal compensation as employment, with more time require to "build" the business, but can be more lucrative in the long run.

HMO Setting (Employed Or Independent Practitioner)

Working in an HMO (Health Maintenance Organization) can be either as an independent or as an employee, but is most typically as an employee. In either case, the Optometrist is a provider of services to the members of the HMO, and the business end of the transaction is handled by the HMO, not by the Optometrist. As an employee, this will work almost identically to the Retail Optical Employee mode discussed above. As an independent, benefits such as healthcare insurance will not be present. In either case, the clinical activities will be somewhat dictated by the structure of the overall HMO. In a full service HMO, certain clinical activities will be provided by another professional group within the HMO. For the most part every patient will be a member or "collateral member" of the HMO. On a clinical basis this does not impact the Optometrist, but on the business end, marketing or building the practice is really an activity taken on by the HMO in building its membership.

In certain states (such as California) single service HMO's have been formed to facilitate the delivery of optometric services. FirstSight Vision, Inc. operates as a single service HMO. In a single service HMO environment, virtually 100% of the clinical activity is performed by the Optometrist, with any other activity referred out to the appropriate specialist. The single service HMO is more like the Retail Optical model than the Full Service HMO.

Ophthalmology Group

Typically based in a medical office setting, most Ophthalmology groups are owned by the Ophthalmologists who in turn employ the Optometrist to perform clinical testing and refractions prior to the patient visiting the Ophthalmologist. This mode of practice is typically a turn-key operation without any financial outlay required by the Optometrist. As is the Retail Optical Employment Model, almost all activity is clinical in nature without the distractions of operating the administrative components of the business. The primary activity in most Ophthalmology Practices is the medical and surgical care of their patient base; for this reason an Ophthalmology setting may or may not include an dispensary, and other full service features. This varies by practice, and the only way to find out about a particular practice is to research that setting. Optometrists who wish to specialize may find this mode of practice very beneficial to moving to the next stage in their career.



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To: Board Members Date: June 21, 2011

From: Dr. Lee Goldstein, O.D. Telephone: (916) 575-7170

Board President

Subject: Agenda Item 12- Public Comment for Items Not on the Agenda

The Board may not discuss or take action on any matter raised during this public comment section, except to decide whether to place the matter on the agenda of a future meeting. [Government code Sections 11125, 11125.7(a)]

Comments from the public:



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To: Board Members Date: June 21, 2011

From: Dr. Lee Goldstein, O.D. Telephone: (916) 575-7170

Board President

Subject: Agenda Item 13- Suggestions for Future Agenda Items

Members of the Board and the public may suggest items for staff research and discussion at future meetings.



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To: Board Members Date: June 21, 2011

From: Dr. Lee Goldstein, O.D. Telephone: (916) 575-7170

Board President

Subject: Agenda Item 14 - Adjournment