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

In the Matter of the Accusation
Against:

HELEN YUK YU CHANG, M.D. ) Case No. 09-2013-229708

Physician's and Surgeon's
Certificate No. G34578

Respondent

DECISION

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

This Decision shall become effective at 5:00 p.m. on November 1, 2015.

IT IS SO ORDERED August 19, 2015.

MEDICAL BOARD OF CALIFORNIA

By: Kimberly Kirchmeyer
Executive Director
Before the
Medical Board of California
Department of Consumer Affairs
State of California

In the Matter of the Accusation Against:

HeLEN YUK YU CHANG, M.D.
15525 Pomerado Road, Suite A-8
San Diego, CA 92064

Physician's and Surgeon's Certificate No.
G34578,

Respondent.

Case No. 09-2013-229708

OAH No. 2014050908

Stipulated Surrender of License and Disciplinary Order

It is hereby stipulated and agreed by and between the parties to the above
entitled proceedings that the following matters are true:

Parties

1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board
of California. She brought this action solely in her official capacity as such and is represented in
this matter by Kamala D. Harris, Attorney General of the State of California, by Martin W.
Hagan, Deputy Attorney General.

2. Helen Yuk Yu Chang, M.D. (Respondent) is represented in this proceeding by Robert
W. Frank Esq., whose address is 1010 Second Ave., Ste. 2500. San Diego, CA 92101-4959.
3. On or about July 1, 1977, the Medical Board of California issued Physician's and Surgeon's Certificate No. G34578 to Helen Yuk Yu Chang, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges and allegations brought in Accusation No. 09-2013-229708, and will expire on February 29, 2016, unless renewed.

JURISDICTION

4. On April 23, 2014, Accusation No. 09-2013-229708 was filed before the Medical Board of California (Board), Department of Consumer Affairs, and is currently pending against respondent. A true and correct copy of Accusation No. 09-2013-229708 and all other statutorily required documents were properly served on respondent on April 23, 2014. Respondent timely filed her Notice of Defense contesting the Accusation. A true and correct copy of Accusation No. 09-2013-229708 is attached hereto as Exhibit A and incorporated by reference as if fully set forth herein.

ADVISEMENT AND WAIVERS

5. Respondent has carefully read, fully discussed with counsel, and fully understands the charges and allegations in Accusation No. 09-2013-229708. Respondent also has carefully read, fully discussed with counsel, and fully understands the effects of this Stipulated Surrender of License and Disciplinary Order.

6. Respondent is fully aware of her legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation No. 09-2013-229708; the right to confront and cross-examine the witnesses against her; the right to present evidence and to testify on her own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

7. Having the benefit of counsel, respondent hereby voluntarily knowingly and intelligently waives and gives up each and every right set forth above.

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CULPABILITY

8. Respondent does not contest that, at an administrative hearing, complainant could establish a *prima facie* case with respect to the charges and allegations contained in Accusation No. 09-2013-229708, a true and correct copy of which is attached hereto as Exhibit “A,” and that she has thereby subjected her Physician’s and Surgeon’s Certificate No. G34578 to disciplinary action. Respondent hereby surrenders her Physician’s and Surgeon’s Certificate No. G34578 for the Board’s formal acceptance.

9. Respondent further agrees that if she ever petitions for reinstatement of her Physician’s and Surgeon’s Certificate No. G34578, or if an accusation and/or petition to revoke probation is ever filed against her before the Medical Board of California, all of the charges and allegations contained in Accusation No. 09-2013-229708 shall be deemed true, correct, and fully admitted by respondent for purposes of any such proceeding or any other licensing proceeding involving respondent in the State of California or elsewhere.

10. Respondent understands that, by signing this stipulation, she enables the Executive Director of the Board to issue an order, on behalf of the Board, accepting the surrender of her Physician’s and Surgeon’s Certificate No. G34578 effective November 1, 2015, without further notice or opportunity to be heard.

CONTINGENCY

11. Business and Professions Code section 2224, subdivision (b), provides, in pertinent part, that the Medical Board “shall delegate to its executive director the authority to adopt a . . . stipulation for surrender of a license.”

12. This Stipulated Surrender of License and Disciplinary Order shall be subject to approval of the Executive Director on behalf of the Medical Board. The parties agree that this Stipulated Surrender of License and Disciplinary Order shall be submitted to the Executive Director for her consideration in the above-entitled matter and, further, that the Executive Director shall have a reasonable period of time in which to consider and act on this Stipulated Surrender of License and Disciplinary Order after receiving it. By signing this stipulation, respondent fully understands and agrees that she may not withdraw her agreement or seek to
rescind this stipulation prior to the time the Executive Director, on behalf of the Medical Board, considers and acts upon it.

13. The parties agree that this Stipulated Surrender of License and Disciplinary Order shall be null and void and not binding upon the parties unless approved and adopted by the Executive Director on behalf of the Board, except for this paragraph, which shall remain in full force and effect. Respondent fully understands and agrees that in deciding whether or not to approve and adopt this Stipulated Surrender of License and Disciplinary Order, the Executive Director and/or the Board may receive oral and written communications from its staff and/or the Attorney General’s Office. Communications pursuant to this paragraph shall not disqualify the Executive Director, the Board, any member thereof, and/or any other person from future participation in this or any other matter affecting or involving respondent. In the event that the Executive Director on behalf of the Board does not, in her discretion, approve and adopt this Stipulated Surrender of License and Disciplinary Order, with the exception of this paragraph, it shall not become effective, shall be of no evidentiary value whatsoever, and shall not be relied upon or introduced in any disciplinary action by either party hereto. Respondent further agrees that should this Stipulated Surrender of License and Disciplinary Order be rejected for any reason by the Executive Director on behalf of the Board, respondent will assert no claim that the Executive Director, the Board, or any member thereof, was prejudiced by its/his/her review, discussion and/or consideration of this Stipulated Surrender of License and Disciplinary Order or of any matter or matters related hereto.

ADDITIONAL PROVISIONS

14. This Stipulated Surrender of License and Disciplinary Order is intended by the parties herein to be an integrated writing representing the complete, final and exclusive embodiment of the agreements of the parties in the above-entitled matter.

15. The parties agree that copies of this Stipulated Surrender of License and Disciplinary Order, including signatures of the parties, may be used in lieu of original documents and signatures and, further, that such copies shall have the same force and effect as originals.
16. In consideration of the foregoing admissions and stipulations, the parties agree the
Executive Director of the Medical Board may, without further notice to or opportunity to be heard
by respondent, issue and enter the following Disciplinary Order on behalf of the Board:

**DISCIPLINARY ORDER**

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G34578, issued
to respondent Helen Yuk Yu Chang, M.D., is surrendered and accepted by the Medical Board of
California.

1. The effective date of this Decision and Disciplinary Order shall be November 1,
2015.

2. The surrender of respondent's Physician's and Surgeon's Certificate No. G34578 and
the acceptance of the surrendered license by the Board shall constitute the imposition of
discipline against respondent. This stipulation constitutes a record of the discipline and shall
become a part of respondent's license history with the Medical Board of California.

3. Respondent shall lose all rights and privileges as a physician and surgeon in
California as of the effective date of the Board's Decision and Order.

4. Respondent shall cause to be delivered to the Board her pocket license and, if one was
issued, her wall certificate on or before the effective date of the Decision and Order.

5. If respondent ever applies for licensure or petitions 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 licensure in effect at the time the application or
petition is filed, and all of the charges and allegations contained in Accusation No. 09-2013-
229708 shall be deemed to be true, correct and fully admitted by respondent when the Board
determines whether to grant or deny the application or petition.

6. If respondent should ever apply or reapply for a new license or certification, or
petition for reinstatement of a license, by any other health care licensing agency in the State of
California or elsewhere, all of the charges and allegations contained in Accusation No. 09-2013-
229708 shall be deemed to be true, correct, and fully admitted by respondent for the purpose of
any Statement of Issues or any other proceeding seeking to deny or restrict licensure.
ACCEPTANCE

I have carefully read the above Stipulated Surrender of License and Disciplinary Order and have fully discussed it with my attorney, Robert W. Frank, Esq. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate No. C34578. I enter into this Stipulated Surrender of License and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical Board of California.

DATED: 7-20-15

HELEN YUK YU CHANG, M.D.
Respondent

I have read and fully discussed with respondent Helen Yuk Yu Chang, M.D., the terms and conditions and other matters contained in this Stipulated Surrender of License and Disciplinary Order. I approve its form and content.

DATED: 7-21-15

ROBERT W. FRANK, ESQ.
Attorney for Respondent

ENDORSEMENT

The foregoing Stipulated Surrender of License and Disciplinary Order is hereby respectfully submitted to the Executive Director of the Medical Board of California, Department of Consumer Affairs, for her consideration on behalf of the Board.

DATED: 7-22-2015

Respectfully submitted,

KAMALA D. HARRIS
Attorney General of California
THOMAS S. LAZAR
Supervising Deputy Attorney General

MARTIN W. HAGAN
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 09-2013-229708
BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

Case No. 09-2013-229708

In the Matter of the Accusation Against:

HELEN YUK YU CHANG, M.D.
15525 Pomerado Road, Suite A-8
San Diego, CA 92064

Physician's and Surgeon's Certificate No.
G34578

Respondent.

Complainant alleges:

PARTIES

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

2. On or about July 1, 1977, the Medical Board of California issued Physician's and Surgeon's Certificate Number G34578 to Helen Yuk Yu Chang, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on February 29, 2016, unless renewed.


Accusation
3. This Accusation is brought before the Medical Board of California (Board), Department of Consumer Affairs, under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

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

5. Section 2234 of the Code, states:

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

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

(b) Gross negligence.

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

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

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

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

FIRST CAUSE FOR DISCIPLINE
(Gross Negligence)

6. Respondent has subjected her Physician's and Surgeon's Certificate Number G34578 to disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (b), of the Code, in that she committed gross negligence in her care and treatment of patient MM, as more particularly alleged herein:

7. On or about July 13, 2010, patient MM, a fifty-four (54) year old female, presented to respondent for an annual well woman examination and consultation regarding her personal risk for gynecologic cancer. As part of this visit, the patient reported a strong family history for breast cancer, that she had had tested positive for the BRCA2 gene mutation and that she wanted her ovaries removed. The patient's surgical history included, among other things, a prophylactic double mastectomy in 1991, breast reconstructive surgery in 1992, gastric bypass in 1999, and additional breast reconstructive surgeries in 2009 and 2010. The plan section of the chart note for this visit indicated patient MM was a "candidate for laparoscopic supracervical hysterectomy, bilateral salpingo-oophorectomy [LSH-BSO], will coordinate surgery with Dr. [G] who will reconstruct right breast."

8. On or about July 21, 2010, patient MM was seen again by respondent who performed a pelvic ultrasound. The ultrasound showed a normal size uterus with a 3 millimeter lining, a small amount of endometrial cavity fluid and no visualization of the ovaries. The chart note for this visit indicated, once again, that patient MM was a candidate for LSH-BSO based on her strong family history of breast cancer and her positive test for the BRCA2 mutation.

9. On or about August 9, 2010, patient MM called respondent with several questions about the upcoming LSH-BSO surgery and an appointment was scheduled for August 12, 2010, so she could discuss her questions with respondent in more detail.
10. On or about August 12, 2010, patient MM had her appointment with respondent to discuss her questions regarding her upcoming surgery. During this visit, the patient discussed her history of a bowel obstruction in 1988 and also presented respondent with a copy of an Operative Report for her gastric bypass surgery in 1999, which noted adhesions to the undersurface of the anterior abdominal wall. The patient indicated she wanted to preserve her uterus and thus the surgical plan was modified from a LSH-BSO to a BSO. The patient expressed her concern about the possibility of adhesions that could be present and thus requested respondent to consult with a general surgeon to address the adhesions should they be present. Respondent indicated she would consult with a general surgeon colleague and subsequently made arrangements for her colleague, Dr. C, to be present during respondent’s upcoming surgery. Dr. C’s surgical consultation note indicates “Dr. Chang asked me to perform lysis of adhesions prior to GYN procedure” which he agreed to do.

11. On or about September 2, 2010, patient MM was seen again by respondent for a pre-operative appointment. The chart note for this visit indicates, “risks, indication and alternatives as well as nature of procedure explained to [patient]. Will proceed [with] LSO [laparoscopic salpingo-oophorectomy] via laparoscope [with] lysis of adhesions. If need to open, [patient] then wants TAHBSO [total abdominal hysterectomy, bilateral salpingo-oophorectomy].” Patient MM initialed the “Hysterectomy Consent Form” at various sections. The consent form stated “[m]y scheduled operation is: Bilateral salpingo-oophorectomy, possible TAHBSO if opened surg[ery] only.”

12. On or about September 7, 2010, Patient MM was admitted to Pomerado Hospital for her scheduled surgery. Dr. G performed right breast reconstructive procedures while Dr. C did the lysis of adhesions on the abdominal wall and then respondent proceeded with her procedure. In her Operative Report, respondent noted the fallopian tubes and ovaries appeared atrophic and that she used a harmonic scalpel to transect the blood supply to the patient’s ovaries without difficulties. According to respondent, she was concerned about the potential for bleeding with removal of the fallopian tubes, and if bleeding occurred this would contribute to future scarring in the area. Thus, according to respondent, she made an intra-operative decision to leave patient MM’s fallopian tubes in place and not remove them. Respondent did not collect and retain the pelvic washings for
cytologic analysis. Respondent did not explain the rationale for her intra-operative decision to leave the fallopian tubes in place in her Operative Report. Respondent’s Operative Report identifies the procedure she performed as a “Bilateral laparoscopic oophorectomy and enterolysis.” The total estimated blood loss for respondent’s procedure was listed as 2mL. The patient was discharged later that evening in stable condition.

13. On or about September 19, 2010, patient MM was informed by telephone that her pathology report was negative for malignant or atypical cells.

14. On or about September 21, 2010, patient MM had a post-operative appointment with respondent. Respondent’s chart note for this visit indicates patient had normal bowel movement and urination, she was off her pain medications one week after her surgery, she would continue “bioidentical cream” and her annual well woman examination was due in July 2011. Respondent provided patient MM with a copy of the Operative Report for her recent surgery and a copy of the pathology report at this appointment.

15. On or about October 25, 2010, patient MM met with respondent in her office to address concerns over her surgery. Specifically, the patient inquired whether her ovaries were taken out with her fallopian tubes, i.e., the BSO procedure that was requested by the patient, discussed with respondent, and referenced in the consent form. Respondent’s chart note for this visit states, “Question about sequence of surgery & whether if [sic] ovaries taken out. Explained to patient that...”

1 A cytologic evaluation is the microscopic analysis of cells collected from a particular part of the body. This is done to determine what the cells look like, and how they form and function. The test is usually used to look for cancers and precancerous changes. “For women with an increased risk of ovarian cancer, risk-reducing salpingo-oophorectomy should include careful inspection of the peritoneal cavity, pelvic washings, removal of the fallopian tubes, and ligation of the ovarian vessels at the pelvic brim.” (ACOG Practice Bulletin No. 89, January 2008, Elective and Risk-Reducing Salpingo-oophorectomy, at p.7, underline added.) Respondent admitted in her physician interview before the Board that she was unaware at the time of patient MM’s surgery of the need to collect and retain pelvic washings for BRCA positive patients.

2 Bilateral laparoscopic oophorectomy indicates removal of ovaries only and enterolysis relates to the removal of adhesions.

3 As previously mentioned, the consent form stated “[m]y scheduled operation is: Bilateral salpingo oophorectomy, possible TAHBSO if opened surgery only.”
infundibular ligaments were cut across with harmonic scalpel so BSO was carried out but due to adhesions may be only partially removed.

16. After the visit with respondent of October 25, 2010, patient MM consulted with an oncologist, who referred her to Dr. BD, a gynecologic oncologist. Dr. BD recommended the patient undergo surgery to remove her fallopian tubes. This recommendation was based on national guidelines for risk reducing surgery in patients, such as patient MM, who are positive for the BRCA 1 or 2 gene mutations. Dr. BD performed a laparoscopic bilateral salpingectomy with collection of pelvic washings in January 2011 without complication. Dr. BD’s findings included adhesions between the omentum and anterior abdominal wall, normal uterus and fallopian tubes and absent ovaries.

17. On or about August 20, 2013, during the Medical Board investigation in this case, respondent appeared for her physician’s interview and, during that interview, demonstrated her lack of knowledge regarding the recommended surgical techniques for risk-reducing salpingo-oophorectomy and the risk of fallopian tube cancer. During her interview, she explained her intra-operative decision for not removing the fallopian tubes and indicated the fallopian tubes were the least likely to cause cancer and “…primary tubal cancer is very rare.” In fact, the risk for primary peritoneal cancer is higher in BRCA positive women compared to the general population, and this...

4 Respondent was asked in her deposition on November 13, 2012, in a related underlying civil matter, and in her physician’s interview of August 20, 2013, about her chart note which indicated “BSO was carried out” when, in fact, that procedure was not performed and the fallopian tubes were left in place. In her deposition, respondent first claimed she mistakenly left the word “not” out and then indicated she had “dictated as not taken out” which makes little sense since the chart note was handwritten and not dictated and then typed out. In her physician interview, respondent claimed that she meant to write “BO” and explained “I only did a partially removed adnexa which is BSO which is what she had in her OP report and she has in her hands.”

5 Dr. BD explained in her deposition on November 13, 2012, in the related underlying civil matter, that she performed the procedure to reduce the risk of any further cancer and believed that the standard of care required “[t]hat a risk-reduction surgery for a BRCA mutation carrier would include, as I wrote, washings and bilateral salpingo-oophorectomy.” (Deposition, at pp. 37-39.)

6 On February 13, 2013, respondent provided the Board with a written summary regarding her care and treatment of patient MM. In this summary, she indicated, among other things, “[o]n 10/25/2010, the patient came in questioning whether if [sic] the tubes were removed. I did not think it was important to remove the tubes because the risk of ovarian cancer was the main concern and tubal cancer was extremely rare.”
risk is higher when the fallopian tubes are not removed. Additionally, respondent admitted at her
interview that she was not aware at the time of patient MM's surgery on September 7, 2010, of the
need to collect and retain pelvic washings.

18. Respondent committed gross negligence in her care and treatment of patient M.M. which
included, but was not limited to, the following:
   (a) Not removing the fallopian tubes of patient MM, a carrier of the BRCA 2
gene mutation, at the time of her surgery on September 7, 2010; and
   (b) Not collecting the peritoncal washings of patient MM, a carrier of the
BRCA 2 gene mutation, at the time of her surgery on September 7, 2010.

SECOND CAUSE FOR DISCIPLINE
(Repeated Negligence)

19. Respondent has further subjected her Physician's and Surgeon's Certificate Number
G34578 to disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision
(c), of the Code, in that she committed repeated negligent acts in the care and treatment of patient
M.M., as more particularly alleged in paragraphs 6 through 18, above, and which are hereby realleged
and incorporated by reference as if fully set forth herein.

THIRD CAUSE FOR DISCIPLINE
(Incompetence)

20. Respondent has further subjected her Physician's and Surgeon's Certificate Number
G34578 to disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision
(d), of the Code, in that she demonstrated her incompetence in her care and treatment of patient MM,
as more particularly alleged hereinafter:

21. Respondent demonstrated incompetence in her care and treatment of patient MM which
included, but was not limited to, the following:
   (a) Paragraphs 6 through 18, above, are hereby incorporated by reference and
   realleged as if fully set forth herein;
(b) Respondent lacked knowledge regarding the recommended surgical techniques for risk-reducing salpingo-oophorectomy and the need to collect pelvic washings.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:

1. Revoking or suspending Physician's and Surgeon's Certificate Number G34578, issued to respondent Helen Yuk Yu Chang, M.D.;

2. Revoking, suspending or denying approval of respondent Helen Yuk Yu Chang, M.D.'s authority to supervise physician's assistants, pursuant to section 3527 of the Code;

3. Ordering respondent Helen Yuk Yu Chang, M.D., to pay the Medical Board of California, if placed on probation, the costs of probation monitoring; and

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

DATED: April 23, 2014

KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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