

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

In the Matter of the Accusation Against:

RICHARD LESTER YUKL, M.D.

Physician's and Surgeon's Certificate
No. G 87341

Respondent.

No. 16-2009-202495

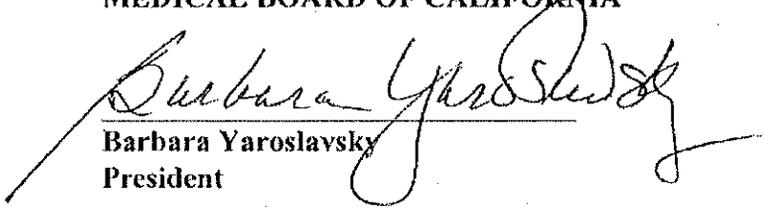
ORDER FOR LICENSE SURRENDER DURING PROBATION

The above named respondent was placed on 5 years probation effective December 3, 2010. Pursuant to the terms and conditions of the probationary order, the respondent elected to surrender his license effective March 16, 2011.

WHEREFORE, THE ABOVE IS ORDERED by the Medical Board of California.

So ordered May 6, 2011.

MEDICAL BOARD OF CALIFORNIA


Barbara Yaroslavsky
President

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

In the Matter of the Accusation Against:)

Richard Lester Yukl, M.D.)
P.O. Box 1159)
Loma Linda, CA 92354)

Case No. 16-2009-202495

Physician's and Surgeon's)
Certificate No. G 87341)

AGREEMENT FOR
SURRENDER OF LICENSE

Respondent.

TO ALL PARTIES:

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

1. Complainant, Linda K. Whitney, is the Executive Director of the Medical Board of California, Department of Consumer Affairs ("Board").

2. Richard Lester Yukl, M.D. ("Respondent") has carefully read and fully understands the effect of this Agreement.

3. Respondent understands that by signing this Agreement he is enabling the Medical Board of California to issue this order accepting the surrender of license without further process. Respondent understands and agrees that Board staff and counsel for complainant may communicate directly with the Board regarding this Agreement, without notice to or participation by Respondent. The Board will not be disqualified from further action in this matter by virtue of its consideration of this Agreement.

///

1 Medical Board of California for its acceptance. By signing this Agreement for Surrender of License.
2 I recognize that upon its formal acceptance by the Board, I will lose all rights and privileges to
3 practice as a Physician and Surgeon in the State of California and that I have delivered to the Board
4 my wallet certificate and wall license.
5

6 Richard Lester Yukl
7 Richard Lester Yukl, M.D.

3-3-2011
Date

8 Natalie Estrada
9 Attorney or Witness

3-3-2011
Date

10 A. Renee Threadgill
11 A. Renee Threadgill
12 Chief of Enforcement
13 Medical Board of California

3/16/2011
Date

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

In the Matter of the Accusation Against:)

Richard Lester Yukl, M.D.)
P.O. Box 1159)
Loma Linda, CA 92354)

Case No. 16-2009-202495

Physician's and Surgeon's)
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SURRENDER OF LICENSE**

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

In the Matter of the Accusation)	
Against:)	
)	
RICHARD LESTER YUKL, M.D.)	File No. 16-2009-202495
)	
Physician's and Surgeon's)	
Certificate No. G 87341)	
)	
Respondent)	
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DECISION

The attached **Proposed Decision** 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 **December 3, 2010.**

IT IS SO ORDERED **November 5, 2010.**

MEDICAL BOARD OF CALIFORNIA

By: _____

Hedy Chang
Panel B



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

In the Matter of the Accusation Against:

RICHARD LESTER YUKL, M.D.
Loma Linda, California

Physician and Surgeon's Certificate
No. G87341

Respondent.

Case No. 16-2009-202495

OAH No. 2010060175

PROPOSED DECISION

Administrative Law Judge Melissa G. Crowell, State of California, Office of Administrative Hearings, heard this matter in Oakland, California, on September 2, 2010.

Deputy Attorney General Jane Zack Simon represented complainant Linda K. Whitney, Executive Director¹ of the Medical Board of California.

Keith Rouse, Attorney at Law, represented respondent Richard Lester Yukl, M.D., who was present.

The matter was submitted for decision on September 2, 2010.

FACTUAL FINDINGS

1. On October 20, 2004, the Medical Board of California (board) issued Physician and Surgeon's Certificate No. G87341 to respondent Richard Lester Yukl, M.D. The license is current, and it has an expiration date of September 30, 2010.

Background

2. Respondent graduated from Loma Linda University School of Medicine in 1971. Respondent practiced medicine in Denver, Colorado, for 28 years. He retired from the practice to nurse his ill wife. He no longer has a license to practice medicine in Colorado.

¹ Ms. Whitney was Interim Executive Director at the time she issued the accusation.

3. After his wife died, respondent remarried and decided to practice medicine in Iowa, where he was from originally. He obtained a license to practice medicine in Iowa on October 27, 2004, and set up a surgical practice in Shenandoah, Iowa, in November 2004. In connection with the discipline discussed below, respondent surrendered his license to practice medicine in Iowa on October 1, 2009.

4. Respondent relocated to California in April 2006. In September 2006 he completed a fellowship in Advanced Laparoscopy at Loma Linda University. From September 2006 to August 2007 he performed Locum Tenens assignments; and from September 2007 to November 2008, he acted as an independent contractor doing trauma and general surgery at Loma Linda Hospital and Riverside Community Hospital.

Out-of-State Discipline

5. On October 1, 2009, the Iowa Board of Medicine issued a Statement of Charges and Settlement Agreement regarding respondent's license to practice medicine in Iowa. By its terms, this constitutes a resolution of a contested case.

6. The Statement of Charges concerns respondent's treatment of three patients in Iowa in 2005. In one case, it was alleged that he performed a surgical procedure without considering or documenting consideration of more conservative options. In a second case, it was alleged that he performed an elective laparoscopic procedure at a facility that did not have appropriate equipment. In the third case, it was alleged that respondent failed to timely recognize and address post-operative intra-abdominal bleeding following a laparoscopic appendectomy. The Statement of Charges reflected that respondent had subsequently left Iowa and completed training in laparoscopic surgery, and that he had retired from the practice of medicine due to health concerns.

7. Under the terms of the Settlement Agreement, respondent was cited by the Iowa Board of Medicine for failing to conform to the minimal standard of acceptable and prevailing practice of medicine and surgery in his treatment of the three surgical patients. He was warned any such practice in the future could result in further formal disciplinary action. Respondent voluntarily surrendered his Iowa medical license, which was accepted by the board.

Other Matters

8. Respondent stopped all clinical practice November 11, 2008. He has had a Partial Complex Seizure Disorder since age 3. The condition was controlled by medication as a child, and respondent has been able to live normally without medication as an adult. The symptoms of the disorder returned while respondent was on a trauma call at Riverside Community Hospital. He lost his hospital privileges as a consequence of his medical condition. Respondent states that he was subsequently cleared by a neurologist to go back to work. No evidence of such an evaluation was presented.

9. Respondent has what he calls an "administrative" medical practice. He works about 10 hours a week as an independent medical reviewer; he serves as a mentor to new medical students at Loma Linda University; and he lectures internationally on medical issues in foreign countries through World Health Service, Inc. He does not have any plans to return to a clinical practice.

10. Respondent states that he is regularly evaluated and treated for his seizure disorder. No evidence of such was presented at hearing.

11. Respondent did not appreciate that the surrender of his license in Iowa could affect his California medical license. Respondent requests that he be allowed to retain his license so that he may continue his "administrative" practice.

12. Complainant has concerns about respondent's current skill level and his ability to practice medicine safely. If respondent is to be allowed to retain a license, complainant argues that he should be required to complete a clinical assessment as a condition precedent to practice, followed by a period of supervised and monitored probation.

LEGAL CONCLUSIONS

1. Pursuant to Business and Professions Code section 2305, the revocation, suspension, or other discipline, restriction or limitation imposed by another state upon a license to practice medicine issued by that state, which would have been grounds for discipline of a licensee in California under the Medical Practice Act, constitutes cause for disciplinary action by the Medical Board of California for unprofessional conduct against the licensee. The unprofessional conduct lies not in the alleged underlying misfeasance, but in the fact that discipline has been imposed by another state regarding a license to practice medicine in that state. (*Marek v. Board of Podiatric Medicine* (1993) 16 Cal.App.4th 1089, 1095-1097.) Because the merits of the out-of-state discipline are not at issue, it does not matter that the licensee did not admit to committing any wrongdoing in that proceeding. (*Ibid.*)

The grounds for disciplining respondent's Iowa medical license concern three separate acts of failing to conform to the standard of care. These repeated negligent acts would provide cause for license discipline under the Medical Practice Act pursuant to Business and Professions Code section 2234, subdivision (c). Cause to discipline respondent's license to practice medicine in California exists pursuant to Business and Professions Code section 2305, by reason of the matters set forth in Findings 5 through 7.

2. Pursuant to Business and Professions Code section 141, subdivision (a), a disciplinary action taken by another state upon a license to practice medicine issued by that state, for any act which is substantially related to the practice governed by the practice regulated by the California license, constitutes grounds for disciplinary action by the Medical Board of California. The conduct set forth in Findings 5 through 7 is substantially related to the practice of medicine regulated by the board under the Medical Practice Act. Cause to

discipline respondent's license to practice medicine in California exists pursuant to Business and Professions Code section 141.

3. The case law is clear that the primary purpose of this proceeding is to protect the public, not to punish the licensee. (See e.g., *Camacho v. Youde* (1979) 95 Cal.App.3d 161, 164.) This view is consistent with the Medical Practice Act, which provides that in exercising its disciplinary authority the board's highest priority is protection of the public. (Bus. & Prof., § 2229, subd. (a).) But, the Medical Practice Act further directs that in exercising its disciplinary authority, the board "shall, wherever possible, take action that is calculated to aid in the rehabilitation of the licensee," although "where rehabilitation and protection are inconsistent, protection shall be paramount." (Bus. & Prof. Code, § 2229, subds. (b) & (c).) Under the terms of his license, respondent may practice clinical medicine. As such, complainant's recommendation that he be required to under a clinical training program is found to be appropriate.

The public will be adequately protected by the following order, which places respondent on a period of probation to the board with the condition precedent that he completes a clinical training program.

ORDER

Physician and Surgeon's Certificate No. G87341 issued to respondent Richard Lester Yukl, M.D., is revoked. However, revocation is stayed and respondent is placed on probation for five years upon the following terms and conditions.

1. Clinical Training Program

Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a clinical training or educational program equivalent to the Physician Assessment and Clinical Education Program (PACE) offered at the University of California - San Diego School of Medicine (Program).

The Program shall consist of a Comprehensive Assessment program comprised of a two-day assessment of Respondent's physical and mental health; basic clinical and communication skills common to all clinicians; and medical knowledge, skill and judgment pertaining to Respondent's specialty or sub-specialty, and at minimum, a 40-hour program of clinical education in the area of practice in which respondent was alleged to be deficient and which takes into account data obtained from the assessment, Decisions, Accusations, and any other information that the Board or its designee deems relevant. Respondent shall pay all expenses associated with the clinical training program.

Based on Respondent's performance and test results in the assessment and clinical education, the Program will advise the Board or its designee of its

recommendation(s) for the scope and length of any additional educational or clinical training, treatment for any medical condition, treatment for any psychological condition or anything else affecting Respondent's practice of medicine. Respondent shall comply with Program recommendations.

At the completion of any additional educational or clinical training, Respondent shall submit to and pass an examination. The Program's determination whether or not Respondent passed the examination or successfully completed the Program shall be binding.

Respondent shall complete the Program not later than six months after Respondent's initial enrollment unless the Board or its designee agrees in writing to a later time for completion.

Failure to participate in and complete successfully all phases of the clinical training program outlined above is a violation of probation.

After Respondent has successfully completed the clinical training program, Respondent shall participate in a professional enhancement program equivalent to the one offered by the Physician Assessment and Clinical Education Program at the University of California, San Diego School of Medicine, which shall include quarterly chart review, semi-annual practice assessment, and semi-annual review of professional growth and education. Respondent shall participate in the professional enhancement program at respondent's expense during the term of probation, or until the Board or its designee determines that further participation is no longer necessary.

Failure to participate in and complete successfully the professional enhancement program outlined above is a violation of probation.

Respondent shall not practice medicine until respondent has successfully completed the Program and has been so notified by the Board or its designee in writing, except that respondent may practice in a clinical training program approved by the Board or its designee. Respondent's practice of medicine shall be restricted only to that which is required by the approved training program.

2. Monitoring – Practice

Within 30 calendar days of the successful completion of the clinical training program, Respondent shall submit to the Board or its designee for prior approval as a practice monitor, the name, and qualifications of one or more licensed physicians and surgeons whose licenses are valid and in good standing, and who is preferably American Board of Medical Specialties (ABMS) certified. A monitor shall have no prior or current business or

personal relationship with Respondent, or other relationship that could reasonably be expected to compromise the ability of the monitor to render fair and unbiased reports to the Board, including but not limited to any form of bartering, shall be in Respondent's field of practice, and must agree to serve as Respondent's monitor. Respondent shall pay all monitoring costs.

The Board or its designee shall provide the approved monitor with copies of the Decision, and Accusation, and a proposed monitoring plan. Within 15 calendar days of receipt of the Decision, Accusation, and proposed monitoring plan, the monitor shall submit a signed statement that the monitor has read the Decision and Accusation, fully understands the role of a monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor disagrees with the proposed monitoring plan, the monitor shall submit a revised monitoring plan with the signed statement.

Within 60 calendar days of the effective date of this Decision, and continuing throughout probation, Respondent's practice shall be monitored by the approved monitor. Respondent shall make all records available for immediate inspection and copying on the premises by the monitor at all times during business hours and shall retain the records for the entire term of probation.

The monitor shall submit a quarterly written report to the Board or its designee which includes an evaluation of Respondent's performance, indicating whether Respondent's practices are within the standards of practice of medicine and whether Respondent is practicing medicine safely, billing appropriately or both. It shall be the sole responsibility of Respondent to ensure that the monitor submits the quarterly written reports to the Board or its designee within 10 calendar days after the end of the preceding quarter.

If the monitor resigns or is no longer available, Respondent shall, within five calendar days of such resignation or unavailability, submit to the Board or its designee, for prior approval, the name and qualifications of a replacement monitor who will be assuming that responsibility within 15 calendar days. If Respondent fails to obtain approval of a replacement monitor within 60 days of the resignation or unavailability of the monitor, Respondent shall be suspended from the practice of medicine until a replacement monitor is approved and prepared to assume immediate monitoring responsibility. Respondent shall cease the practice of medicine within three calendar days after being so notified by the Board or designee.

In lieu of a monitor, Respondent may participate in a professional enhancement program equivalent to the one offered by the Physician Assessment and Clinical Education Program at the University of California, San Diego School of Medicine, that includes, at minimum, quarterly chart review, semi-annual practice assessment, and semi-annual review of

professional growth and education. Respondent shall participate in the professional enhancement program at Respondent's expense during the term of probation.

Failure to maintain all records, or to make all appropriate records available for immediate inspection and copying on the premises, or to comply with this condition as outlined above is a violation of probation.

3. Notification

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

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

4. Supervision of Physician Assistants

During probation, Respondent is prohibited from supervising physician assistants.

5. Obey All Laws

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

6. Quarterly Declarations

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

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

7. Probation Unit Compliance

Respondent shall comply with the Board's probation unit. Respondent shall, at all times, keep the Board informed of Respondent's business and residence addresses. Changes of such addresses shall be immediately communicated in writing to the Board or its designee.

Under no circumstances shall a post office box serve as an address of record, except as allowed by Business and Professions Code section 2021, subdivision (b).

Respondent shall not engage in the practice of medicine in Respondent's place of residence. Respondent shall maintain a current and renewed California physician's and surgeon's certificate.

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

8. Interview with the Board or its Designee

Respondent shall be available in person for interviews either at Respondent's place of business or at the probation unit office, with the Board or its designee upon request at various intervals and either with or without prior notice throughout the term of probation.

9. Residing or Practicing Out-of-State

In the event Respondent should leave the State of California to reside or to practice Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of departure and return. Non-practice is defined as any period of time exceeding thirty calendar days in which Respondent is not engaging in any activities defined in sections 2051 and 2052 of the Business and Professions Code.

All time spent in an intensive training program outside the State of California which has been approved by the Board or its designee shall be considered as time spent in the practice of medicine within the State. A Board-ordered suspension of practice shall not be considered as a period of non-practice. Periods of temporary or permanent residence or practice outside California will not apply to the reduction of the probationary term. Periods of temporary or permanent residence or practice outside California will relieve Respondent of the responsibility to comply with the probationary terms and conditions with the exception of this condition and the following terms and conditions of probation: Obey All Laws; Probation Unit Compliance; and Probation Monitoring Costs.

Respondent's certificate shall be automatically cancelled if Respondent's periods of temporary or permanent residence or practice outside California totals two years. However, Respondent's certificate shall not be cancelled as long as Respondent is residing and practicing medicine in another state of the United States and is on active probation with the medical licensing authority of that state, in which case the two-year period shall begin on the date probation is completed or terminated in that state.

10. Failure to Practice Medicine - California Resident

In the event Respondent resides in the State of California and for any reason Respondent stops practicing medicine in California, Respondent shall notify the Board or its designee in writing within 30 calendar days prior to the dates of non-practice and return to practice. Any period of non-practice within California, as defined in this condition, will not apply to the reduction of the probationary term and does not relieve Respondent of the responsibility to comply with the terms and conditions of probation. Non-practice is defined as any period of time exceeding thirty calendar days in which Respondent is not engaging in any activities defined in sections 2051 and 2052 of the Business and Professions Code.

All time spent in an intensive training program which has been approved by the Board or its designee shall be considered time spent in the practice of medicine. For purposes of this condition, non-practice due to a Board-ordered suspension or in compliance with any other condition of probation, shall not be considered a period of non-practice.

Respondent's certificate shall be automatically cancelled if Respondent resides in California and for a total of two years, fails to engage in California in any of the activities described in Business and Professions Code sections 2051 and 2052.

11. Completion of Probation

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

12. Violation of Probation

Failure to fully comply with any term or condition of probation is a violation of probation. If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an

Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

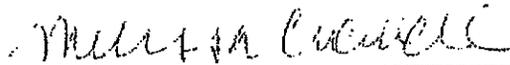
13. License Surrender

Following the effective date of this Decision, if Respondent ceases practicing due to retirement, health reasons or is otherwise unable to satisfy the terms and conditions of probation, Respondent may request the voluntary surrender of Respondent's license. 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. Upon formal acceptance of the surrender, Respondent shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its designee and Respondent shall no longer practice medicine. Respondent will no longer be subject to the terms and conditions of probation and the surrender of Respondent's license shall be deemed disciplinary action. If Respondent re-applies for a medical license, the application shall be treated as a petition for reinstatement of a revoked certificate.

14. Probation Monitoring Costs

Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Board or its designee no later than January 31 of each calendar year. Failure to pay costs within 30 calendar days of the due date is a violation of probation.

DATED: 10/1/10



MELISSA G. CROWELL
Administrative Law Judge
Office of Administrative Hearings

1 EDMUND G. BROWN JR.
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8 *Attorneys for Complainant*
Medical Board of California

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10 **BEFORE THE**
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DEPARTMENT OF CONSUMER AFFAIRS
11 **STATE OF CALIFORNIA**

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13 In the Matter of the Accusation Against:
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15 P.O. Box 1159
Loma Linda, CA 92354
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17 Physician's and Surgeon's
Certificate No. G87341
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19 Respondent.
20

Case No. 16-2009-202495

ACCUSATION

21
22 The Complainant alleges:

23 1. Complainant Linda K. Whitney is the Interim Executive Director of the
24 Medical Board of California, Department of Consumer Affairs, and brings this Accusation solely
25 in her official capacity.

26
27 2. On or about October 20, 2004, Physician's and Surgeon's Certificate
28 No. G87341 was issued by the Medical Board of California to Richard Lester Yukl, M.D.

1 (hereinafter "respondent.") The certificate is renewed and current with an expiration date of
2 September 30, 2010.

3 **JURISDICTION**

4 3. This Accusation is brought before the Medical Board of California¹,
5 (hereinafter the "Board") under the authority of the following sections of the California Business
6 and Professions Code (hereinafter "Code") and/or other relevant statutory enactment:

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

11 B. Section 2305 of the Code provides, in part, that the revocation,
12 suspension, or other discipline, restriction or limitation imposed by another state upon a
13 license to practice medicine issued by that state, that would have been grounds for
14 discipline in California under the Medical Practice Act, constitutes grounds for discipline
15 for unprofessional conduct.

16 C. Section 141 of the Code provides:

17
18 "(a) For any licensee holding a license issued by a board under
19 the jurisdiction of a department, a disciplinary action taken by another state, by
20 any agency of the federal government, or by another country for any act
21 substantially related to the practice regulated by the California license, may be
22 ground for disciplinary action by the respective state licensing board. A certified
23 copy of the record of the disciplinary action taken against the licensee by another
24 state, an agency of the federal government, or by another country shall be
25 conclusive evidence of the events related therein.

26 "(b) Nothing in this section shall preclude a board from applying
27 a specific statutory provision in the licensing act administered by the board that
28 provides for discipline based upon a disciplinary action taken against the licensee
by another state, an agency of the federal government, or another country."

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¹. As used herein, the term "Board" means the Medical Board of California. As used herein, "Division of Medical Quality" shall also be deemed to refer to the Board.

1 **FIRST CAUSE FOR DISCIPLINE**

2 (Discipline, Restriction, or Limitation Imposed by Another State)

3
4 4. On or about October 1, 2009, the Iowa Board of Medicine issued a
5 Statement of Charges and Settlement Agreement (Combined) regarding respondent's license to
6 practice medicine in Iowa. The Statement of Charges alleged that respondent failed to conform to
7 the minimal standard of acceptable and prevailing practice of medicine and surgery in his
8 treatment of three surgical patients in Iowa in 2005. In one case respondent performed a surgical
9 procedure without considering and/or documenting more conservative treatment options; in a
10 second case respondent performed an elective laparoscopic procedure at a facility that lacked
11 appropriate equipment; and, in the third case, respondent failed to timely recognize and address
12 post-operative intra-abdominal bleeding following a laparoscopic appendectomy. Respondent
13 subsequently left Iowa and completed training in laparoscopic surgery. The Iowa board noted
14 that respondent had retired from the practice of medicine due to health concerns. The Iowa board
15 cited respondent for failing to conform to the minimal standard of acceptable and prevailing
16 practice of medicine and surgery, and warned that such practice in the future may result in further
17 formal disciplinary action. Respondent then voluntarily surrendered his Iowa medical license.
18 The Statement of Charges and Settlement Agreement was deemed to be a resolution of a
19 contested case proceeding. A true and correct copy of the Statement of Charges and Settlement
20 Agreement (Combined) issued by the Iowa Board of Medicine is attached hereto as Exhibit A.

21 5. Respondent's conduct and the action of the Iowa Board of Medicine as set
22 forth in paragraph 4, above, constitute unprofessional conduct within the meaning of section 2305
23 and conduct subject to discipline within the meaning of section 141(a).

24 **PRAYER**

25 **WHEREFORE**, the complainant requests that a hearing be held on the matters
26 herein alleged, and that following the hearing, the Board issue a decision:

27 1. Revoking or suspending Physician's and Surgeon's Certificate Number
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G87341 heretofore issued to respondent Richard Lester Yukl, M.D.;

2. Revoking, suspending or denying approval of the respondent's authority to supervise physician assistants;

3. Ordering respondent, if placed on probation, to pay the costs probation monitoring; and

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

DATED: April 14, 2010



LINDA K. WHITNEY
Interim Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

Exhibit A

BEFORE THE IOWA BOARD OF MEDICINE

IN THE MATTER OF THE STATEMENT OF CHARGES AGAINST

RICHARD L. YUKL, M.D., RESPONDENT

FILE Nos. 02-05-500 & 02-05-565

STATEMENT OF CHARGES AND SETTLEMENT AGREEMENT
(Combined)

COMES NOW the Iowa Board of Medicine (Board), and Richard L. Yukl, M.D., (Respondent), on October 1, 2009, and pursuant to Iowa Code sections 17A.10(2) and 272C.3(4) (2007), enter into this combined Statement of Charges and Settlement Agreement to resolve this matter.

STATEMENT OF CHARGES

1. Respondent was issued Iowa medical license no. 35878 on October 27, 2004.
2. Respondent's Iowa medical license is active and will next expire on September 1, 2011.
3. The Board has jurisdiction in this matter pursuant to Iowa Code chapters 147, 148 and 272C.

COUNT I

4. Respondent is charged under Iowa Code sections 147.55(2), 148.6(2)(g) and 272C.10(2) and 653 IAC 23.1(2)(f) for failing to conform to the minimal standard of acceptable and prevailing practice of medicine and surgery in Iowa.

STATEMENT OF MATTERS ASSERTED

5. Respondent is an Iowa-licensed physician who formerly practiced surgery in Shenandoah, Iowa.

6. The Board alleges that Respondent failed to conform to the minimal standard of acceptable and prevailing practice of medicine and surgery in his treatment of three surgical patients in Shenandoah, Iowa, in 2005, including the following:

Patient #1: Respondent performed a surgical palliation of an obstructing pancreatic mass without considering and/or documenting more conservative treatment options;

Patient #2: Respondent performed a laparoscopic cholecystectomy, an elective procedure, at a facility that lacked appropriate equipment; and

Patient #3: Respondent performed a laparoscopic appendectomy and failed to timely recognize and address the patient's post-operative intra-abdominal bleeding.

7. Respondent subsequently left Iowa and completed significant training in laparoscopic surgery.

8. Respondent has retired from the practice of medicine due to health concerns.

SETTLEMENT AGREEMENT

9. **CITATION AND WARNING:** Respondent is hereby **CITED** for failing to conform to the minimal standard of acceptable and prevailing practice of medicine and surgery in his treatment of three surgical patients in Shenandoah, Iowa, in 2005. Respondent is hereby **WARNED** that such practice in the future may result in further formal disciplinary action, including suspension or revocation of his Iowa medical license.

10. **VOLUNTARY SURRENDER:** Respondent **voluntarily surrenders** his Iowa medical license.

11. Respondent voluntarily submits this Order to the Board for consideration.

12. In the event Respondent fails to comply with any of the terms of this Order, the Board may initiate action to suspend or revoke Respondent's license or to impose other license discipline as authorized in Iowa Code chapters 148 and 272 and 653 IAC 25.

13. This Order constitutes the resolution of a contested case proceeding.

14. By entering into this Order, Respondent voluntarily waives any rights to a contested case hearing on the allegations in the Statement of Charges, and waives any objections to the terms of this Order.

15. Respondent understands that by entering into this combined Statement of Charges and Settlement Agreement, he cannot obtain a copy of the investigative file. Pursuant to Iowa Code section 272C.6(4), a copy of the investigative file may only be provided to a licensee after a Statement of Charges is filed but before the final resolution of those charges.

16. Respondent agrees that the State's counsel may present this Order to the Board.

17. This Order is subject to approval of the Board. If the Board fails to approve this Order it shall be of no force or effect to either party.

18. The Board's approval of this Order shall constitute a **Final Order** of the Board.

Richard L. Yuki
Richard L. Yuki, M.D., Respondent

See attached
notarial certificate
MD 2009

Subscribed and sworn to before me on _____, 2009.

Notary Public, State of _____.

This Order is approved by the Board on October 1, 2009.

Siroos S. Shirazi
Siroos S. Shirazi, M.D., Chairman
Iowa Board of Medicine
400 SW 8th Street, Suite C
Des Moines, Iowa 50309-4686

Jurat

State of California

County of San Bernardino

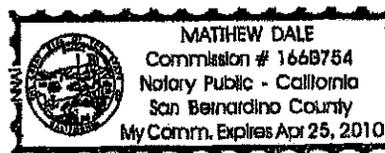
Subscribed and sworn to (or affirmed) before me on this 31 day of Aug

2009 by Richard L. Yuki

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Mathew Dale
Signature

(Notary seal)



OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages _____ Document Date _____

(Additional information)

INSTRUCTIONS FOR COMPLETING THIS FORM

The wording of all Jurats completed in California after January 1, 2008 must be in the form as set forth within this Jurat. There are no exceptions. If a Jurat to be completed does not follow this form, the notary must correct the verbiage by using a jurat stamp containing the correct wording or attaching a separate jurat form such as this one which does contain proper wording. In addition, the notary must require an oath or affirmation from the document signer regarding the truthfulness of the contents of the document. The document must be signed AFTER the oath or affirmation. If the document was previously signed, it must be re-signed in front of the notary public during the jurat process.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the jurat process is completed.
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Signature of the notary public must match the signature on file with the office of the county clerk.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different jurat form.
 - ❖ Additional information is not required but could help to ensure this jurat is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
- Securely attach this document to the signed document