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

5 In the Matter of the Case Against:

) **MBC Case No. 800-2017-032032**

6 **Bradford Winslow Noll, M.D.**

7 **58 Hathaway Ave.**

8 **Beverly, MA 01915**

) **STIPULATION FOR
SURRENDER OF LICENSE**

9 **Physician's and Surgeon's**

10 **Certificate No. G73227**

11 **Respondent.**

12 **IT IS HEREBY STIPULATED AND AGREED** by and between the parties to
13 the above-entitled proceedings, that the following matters are true:
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15 1. Complainant, Kimberly Kirchmeyer, is the Executive Director of the
16 Medical Board of California, Department of Consumer Affairs ("Board").

17 2. Bradford Winslow Noll, M.D. ("Respondent") has carefully read and
18 fully understands the effect of this Stipulation.

19 3. Respondent agrees that based on the action taken by the Massachusetts
20 Board of Registration in Medicine, (Exhibit A) cause exists to discipline his California
21 Physician's and Surgeon's certificate pursuant to Business and Professions Code sections 141(a)
22 and 2305.

23 4. Respondent understands that, if proven at hearing, the charges and
24 allegations under investigation would constitute cause for imposing discipline upon
25 Respondent's license issued by the Board.

26 5. Respondent is aware of each of his rights, including the right to a hearing,
27 the right to confront and cross-examine witnesses who would testify against Respondent, the
28 right to testify and present evidence on his own behalf, as well as to the issuance of subpoenas to

1 compel the attendance of witnesses and the production of documents, the right to contest any
2 charges and allegations, and other rights which are accorded Respondent pursuant to the
3 California Administrative Procedure Act (Gov. Code, §11500 et seq.) and other applicable laws,
4 including the right to seek reconsideration, review by the superior court, and appellate review.

5 6. In order to avoid the expense and uncertainty of a hearing, Respondent
6 freely and voluntarily waives each and every one of these rights set forth above. Respondent
7 hereby agrees to surrender Physician's and Surgeon's Certificate No. G73227.

8 7. Respondent understands that by signing this Stipulation he is enabling the
9 Board to accept the surrender of his license without further process, as provided by section
10 11415.60(b) of the Government Code.

11 8. Upon acceptance of the Stipulation by the Board, Respondent understands
12 that he will no longer be permitted to practice as a Physician and Surgeon in California, and also
13 agrees to surrender and cause to be delivered to the Board both his license and wallet certificate
14 before the effective date of the Decision.

15 9. Respondent hereby represents that he does not intend to seek relicensure
16 or reinstatement as a Physician and Surgeon. Respondent fully understands and agrees, however,
17 that if Respondent ever files an application for relicensure or reinstatement in the State of
18 California, the Board shall treat it as a Petition for Reinstatement, and the Respondent must
19 comply with all the laws, regulations and procedures for reinstatement of a revoked license in
20 effect at the time the Petition is filed. Case Report No. 800-2017-032032, including all
21 referenced attachments and other exhibits, and any additional attachments, and other exhibits,
22 that may be generated subsequent to the filing of the surrender of license, shall be admissible as
23 direct evidence, and any time based defenses, such as laches or any applicable statute of
24 limitations, shall be waived when the Board determines whether to grant or deny the Petition.

25 10. Respondent understands that this document may be disclosed to the
26 public, and/or the National Practitioner Data Bank and/or the Federation of State Medical
27 Boards.
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3 ACCEPTANCE
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5 I, Bradford Winslow Noll, M.D., have carefully read the above Stipulation and enter into
6 it freely and voluntarily, with the full knowledge of its force and effect, do hereby surrender
7 Physician's and Surgeon's Certificate No. G73227, to the Medical Board of California. By
8 signing this Stipulation for Surrender of License, I recognize that upon its formal acceptance by
9 the Board, I will lose all rights and privileges to practice as a Physician and Surgeon in the State
10 of California, and I also will cause to be delivered to the Board both my license and wallet
11 certificate before the effective date of the Decision.
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14 DATED: August 21, 2017



15 **Bradford Winslow Noll, M.D.**
16 Respondent

17 DATED: 8/21/17



18 **WITNESS**
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Exhibit A

COMMONWEALTH OF MASSACHUSETTS
BOARD OF REGISTRATION IN MEDICINE

Middlesex, ss.

Adjudicatory Case No. 2017-014

In the Matter of)
)

Bradford W. Noll, M.D.)
_____)

Order

On the date referenced below, at a duly convened meeting of the Board of Registration in Medicine (the "Board"), the Board considered the statement of the above-named physician setting forth the terms of resignation attached hereto and pursuant to 243 CMR 1.05(5)(a), during the pendency of an adjudicatory proceeding.

Having determined that the resignation is in conformity with the requirements of 243 CMR 1.05(5)(a), the Board voted to accept the resignation.

The Respondent shall provide a complete copy of this Resignation and Order within (10) days by certified mail, return receipt requested, or by hand delivery to the following designated entities: any in- or out-of-state hospital, nursing home, clinic, other licensed facility, or municipal, state, or federal facility at which he practices medicine; any in- or out-of-state health maintenance organization with whom he has privileges or any other kind of association; any state agency, in- or out-of-state, with which he has a provider contract; any in- or out-of-state medical employer, whether or not he practices medicine there; and the state licensing boards of all states in which he has any kind of license to practice medicine, and the Drug Enforcement Administration Boston Diversion Group and the DPH Drug Control Program. The Respondent shall also provide this notification to any such designated entities with which he becomes associated for the duration of this Resignation and Order. The Respondent is further directed to certify to the Board within ten (10) days that he has complied with this directive.

Date: April 6, 2017

Candace Lapidus Sloane, MD

Candace Lapidus Sloane, M.D.
Chair

COMMONWEALTH OF MASSACHUSETTS

Middlesex, SS.

Board of Registration in Medicine

Adjudicatory Case No. 2017-014

In the Matter of

BRADFORD W. NOLL, M.D.

RESIGNATION

I, BRADFORD W. NOLL, M.D., being duly sworn, depose and state:

1. I desire to resign my license to practice medicine in the Commonwealth of Massachusetts pursuant to the terms of 243 CMR 1.05(5)(a).
2. My resignation is tendered voluntarily.
3. I realize that this resignation is a final act that deprives me of all privileges of registration and is not subject to reconsideration or judicial review.
4. I will resign any other licenses contemporaneously with my resignation in Massachusetts, and I will make no attempt to seek licensure elsewhere.
5. I understand that my resignation is a disciplinary action that is reportable to any national data reporting agency, pursuant to G.L. c. 112, §2.

Signed under the penalties of perjury this 6 day of April, 2017.

Bradford W. Noll

M.D.

Then personally appeared before me the above-named Bradford W. Noll, M.D. who signed the foregoing resignation in my presence and acknowledged said resignation to be his free act and deed.

Dated: 4/6/17

[Signature]
Notary Public

My Commission Expires: 1/12/18

