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

In the Matter of the Accusation
Against:

Lawrence Harold Resnick, M.D.  
Physician's and Surgeon's
Certificate No. G 16871
Respondent

Case No. 05-2012-228498

DECISION

The attached Stipulated Settlement 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 January 27, 2017.

IT IS SO ORDERED: December 28, 2016.

MEDICAL BOARD OF CALIFORNIA

[Signature]
Michelle Anne Bholat, M.D., Chair
Panel B
KAMALA D. HARRIS  
Attorney General of California  
E. A. JONES III  
Supervising Deputy Attorney General  
CINDY M. LOPEZ  
Deputy Attorney General  
State Bar No. 119988  
California Department of Justice  
300 So. Spring Street, Suite 1702  
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Attorneys for Complainant

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

In the Matter of the Accusation Against:  

Case No. 05-2012-228498  
OAH No. 2015110558  
STIPULATED SETTLEMENT AND DISCIPLINARY ORDER

LAWRENCE RESNICK, M.D.  
15335 Morrison Street, Ste. 304  
Sherman Oaks, CA 91403-1513  
Physician's and Surgeon's Certificate No. G16871  
Respondent.

In the interest of a prompt and speedy settlement of this matter, consistent with the public interest and the responsibility of the Medical Board of California of the Department of Consumer Affairs, the parties hereby agree to the following Stipulated Settlement and Disciplinary Order which will be submitted to the Board for approval and adoption as the final disposition of the Accusation.

PARTIES

1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board of California. She brought this action solely in her official capacity and is represented in this matter by Kamala D. Harris, Attorney General of the State of California, by Cindy M. Lopez, Deputy Attorney General.
2. Respondent Lawrence Resnick, M.D. ("Respondent") is represented in this proceeding by attorney Joel Bruce Douglas, whose address is 3699 Wilshire Boulevard, 10th Floor, Los Angeles, CA 90010-2719.

3. On or about August 22, 1969, the Medical Board of California issued Physician’s and Surgeon’s Certificate No. G16871 to Respondent. The Physician’s and Surgeon’s Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 05-2012-228498, and will expire on May 31, 2017, unless renewed.

JURISDICTION

4. Accusation No. 05-2012-228498 was filed before the Medical Board of California (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 September 21, 2015. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 05-2012-228498 is attached as exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 05-2012-228498. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

7. 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 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.

8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.
CULPABILITY

9. Respondent admits he was convicted of battery, a violation of Penal Code section 242, and sentenced for 24-months probation, as set forth in Accusation No. 05-2012-228498.

10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

CONTINGENCY

11. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or her counsel. By signing the stipulation, Respondent understands and agrees that she may not withdraw her 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.

12. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.

13. 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:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G16871 issued to 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. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of
the effective date of this Decision, Respondent shall enroll in a professionalism program, that
meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.
Respondent shall participate in and successfully complete that program. Respondent shall
provide any information and documents that the program may deem pertinent. Respondent shall
successfully complete the classroom component of the program not later than six (6) months after
Respondent’s initial enrollment, and the longitudinal component of the program not later than the
time specified by the program, but no later than one (1) year after attending the classroom
component. The professionalism program shall be at Respondent’s expense and shall be in
addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

A professionalism program taken after the acts that gave rise to the charges in the
Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
or its designee, be accepted towards the fulfillment of this condition if the program would have
been approved by the Board or its designee had the program been taken after the effective date of
this Decision.

Respondent shall submit a certification of successful completion to the Board or its
designee not later than 15 calendar days after successfully completing the program or not later
than 15 calendar days after the effective date of the Decision, whichever is later.

2. PROFESSIONAL BOUNDARIES PROGRAM. Within 60 calendar days from the
effective date of this Decision, Respondent shall enroll in a professional boundaries program
equivalent to the Professional Boundaries Program offered by the Physician Assessment and
Clinical Education Program at the University of California, San Diego School of Medicine
("Program"). Respondent, at the Program’s discretion, shall undergo and complete the Program’s
assessment of Respondent’s competency, mental health and/or neuropsychological performance,
and at minimum, a 24 hour program of interactive education and training in the area of
boundaries, which takes into account data obtained from the assessment and from the Decision(s),
Accusation(s) and any other information that the Board or its designee deems relevant. The
Program shall evaluate Respondent at the end of the training and the Program shall provide any
data from the assessment and training as well as the results of the evaluation to the Board or its
Failure to complete the entire Program not later than six (6) months after Respondent’s initial enrollment shall constitute a violation of probation unless the Board or its designee agrees in writing to a later time for completion. Based on Respondent’s performance in and evaluations from the assessment, education, and training, the Program shall advise the Board or its designee of its recommendation(s) for additional education, training, psychotherapy and other measures necessary to ensure that Respondent can practice medicine safely. Respondent shall comply with Program recommendations. At the completion of the Program, Respondent shall submit to a final evaluation. The Program shall provide the results of the evaluation to the Board or its designee. The professional boundaries program shall be at Respondent’s expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

The Program has the authority to determine whether or not Respondent successfully completed the Program.

A professional boundaries course taken after the acts that gave rise to the charges in the Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the course would have been approved by the Board or its designee had the course been taken after the effective date of this Decision.

3. **PROHIBITED PRACTICE.** During the course of probation, Respondent shall limit his medical practice to interpreting, reporting in writing and consulting with other health care professionals regarding x-rays, mammograms, neuroradiological and other medical images. As of the effective date of this Agreement and during the course of probation, Respondent personally shall have no direct contact with patients. In that regard, Respondent is prohibited from communicating directly with, or seeing patients, or practicing in any office or facility where patients present for examination, evaluation, consultation or treatment.

After the effective date of this Decision, all patients being treated by the Respondent shall be notified that the Respondent is prohibited from treating them during the course of his three year probation. Any new patients must be provided this notification at the time of their initial
appointment.

Respondent shall maintain a log of all patients to whom the required oral notification was made. The log shall contain the: 1) patient’s name, address and phone number; patient’s medical record number, if available; 3) the full name of the person making the notification; 4) the date the notification was made; and 5) a description of the notification given. Respondent shall keep this log in a separate file or ledger, in chronological order, shall make the log available for immediate inspection and copying on the premises at all times during business hours by the Board or its designee, and shall retain the log for the entire term of probation.

4. **NOTIFICATION.** Within seven (7) days of the effective date of this Decision, the Respondent shall provide a true copy of this 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.

5. **SUPERVISION OF PHYSICIAN ASSISTANTS.** During probation, Respondent is prohibited from supervising physician assistants.

6. **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.

7. **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.

8. **GENERAL PROBATION REQUIREMENTS.**
Compliance with Probation Unit

Respondent shall comply with the Board’s probation unit and all terms and conditions of this Decision.

Address Changes

Respondent shall, at all times, keep the Board informed of Respondent’s business and residence addresses, email address (if available), and telephone number. 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(b).

Place of Practice

Respondent shall not engage in the practice of medicine in Respondent’s or patient’s place of residence, unless the patient resides in a skilled nursing facility or other similar licensed facility.

License Renewal

Respondent shall maintain a current and renewed California physician’s and surgeon’s license.

Travel or Residence Outside California

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.

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.

9. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be available in person upon request for interviews either at Respondent’s place of business or at the probation unit office, with or without prior notice throughout the term of probation.

10. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or its designee in writing within 15 calendar days of any periods of non-practice lasting more than
30 calendar days and within 15 calendar days of Respondent’s return to practice. Non-practice is defined as any period of time Respondent is not practicing medicine in California as defined in Business and Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct patient care, clinical activity or teaching, or other activity as approved by the Board. All time spent in an intensive training program which has been approved by the Board or its designee shall not be considered non-practice. Practicing medicine in another state of the United States or Federal jurisdiction while on probation with the medical licensing authority of that state or jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall not be considered as a period of non-practice.

In the event Respondent’s period of non-practice while on probation exceeds 18 calendar months, Respondent shall successfully complete a clinical training program that meets the criteria of Condition 18 of the current version of the Board’s “Manual of Model Disciplinary Orders and Disciplinary Guidelines” prior to resuming the practice of medicine.

Respondent’s period of non-practice while on probation shall not exceed two (2) years.

Periods of non-practice will not apply to the reduction of the probationary term.

Periods of non-practice 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; and General Probation Requirements.

11. COMPLETION OF PROBATION. Respondent shall comply with all financial obligations (e.g., restitution, 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...
13. LICENSE SURRENDER. Following the effective date of this Decision, if
the matter is final.

Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
the terms and conditions of probation. Respondent may request to surrender his license. The
Board reserves the right to evaluate Respondent’s request and to exercise its discretion in
determining 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 wallet 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. 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.

ACCEPTANCE

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
discussed it with my attorney, Joel Bruce Douglas. I understand the stipulation and the effect it
will have on my Physician’s and Surgeon’s Certificate. 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 Medical Board of California.

DATED: 7/13/16

[Signature]

LAWRENCE RESNICK, M.D.
Respondent
I have read and fully discussed with Respondent LAWRENCE RESNICK, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED: 1/29/16

JOEL BRUCE DOUGLAS
Attorney for Respondent

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

Dated: Dec. 23, 2014

Respectfully submitted,

KAMALA D. HARRIS
Attorney General of California
E. A. JONES III
Supervising Deputy Attorney General

CINDY M. LOPEZ
Deputy Attorney General
Attorneys for Complainant

LA2015601939
Exhibit A

Accusation No.: 05-2012-228498
In the Matter of the Accusation Against:  

**LAWRENCE HAROLD RESNICK, M.D.**  
15335 Morrison Street, Ste. 304  
Sherman Oaks, CA 91403-1513  

Physician's and Surgeon's Certificate  
No. G16871,  

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 (Board).

2. On or about August 22, 1969, the Medical Board issued Physician's and Surgeon's Certificate Number G16871 to Lawrence Resnick, 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 May 31, 2017, unless renewed.
JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions 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, or 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.

"(e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon."
“(f) Any action or conduct which would have warranted the denial of a certificate.

“(g) The practice of medicine from this state into another state or country without meeting the legal requirements of that state or country for the practice of medicine. Section 2314 shall not apply to this subdivision. This subdivision shall become operative upon the implementation of the proposed registration program described in Section 2052.5.

“(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and participate in an interview by the board. This subdivision shall only apply to a certificate holder who is the subject of an investigation by the board.”

6. Section 2236 of the Code states:

“(a) The conviction of any offense substantially related to the qualifications, functions, or duties of a physician and surgeon constitutes unprofessional conduct within the meaning of this chapter [Chapter 5, the Medical Practice Act]. The record of conviction shall be conclusive evidence only of the fact that the conviction occurred.

“(b) The district attorney, city attorney, or other prosecuting agency shall notify the Division of Medical Quality\(^1\) of the pendency of an action against a licensee charging a felony or misdemeanor immediately upon obtaining information that the defendant is a licensee. The notice shall identify the licensee and describe the crimes charged and the facts alleged. The prosecuting agency shall also notify the clerk of the court in which the action is pending that the defendant is a licensee, and the clerk shall record prominently in the file that the defendant holds a license as a physician and surgeon.

“(c) The clerk of the court in which a licensee is convicted of a crime shall, within 48 hours after the conviction, transmit a certified copy of the record of conviction to the board. The division may inquire into the circumstances surrounding the commission of a crime in order to fix the degree of discipline or to determine if the conviction is of an offense substantially related to the qualifications, functions, or duties of a physician and surgeon.

\(^1\) Business and Professions Code section 2002, as amended and effective January 1, 2008, provides that, unless otherwise expressly provided, the term "board" means the Medical Board of California, and references to the Division of Medical Quality shall be deemed to refer to the Board.
“(d) A plea or verdict of guilty or a conviction after a plea of nolo contendere is deemed to be a conviction within the meaning of this section and Section 2236.1. The record of conviction shall be conclusive evidence of the fact that the conviction occurred.”

FIRST CAUSE FOR DISCIPLINE

(Gross Negligence)

7. Respondent Lawrence Harold Resnick, M.D., is subject to disciplinary action under section 2234, subdivision (b), in that he was inappropriate with two female patients. The circumstances are as follows:

Factual Allegations Regarding Patient J.K.:

A. In October 2012, J.K., a female patient, went to a local clinic for a visit regarding a breast lump. At that time, J.K. received a referral to the Respondent.

B. In November 2012, Patient J.K. arrived for her appointment with Respondent. She was given several forms to complete and waited for approximately 20 minutes, until a technician took J.K. to a dressing room. Patient J.K. did not recall seeing a form asking if she preferred a chaperone. She put on a robe and waited another 15 to 20 minutes, at which time, the technician performed a mammogram. Thereafter, J.K. returned to the dressing room and was told that Respondent would conduct an additional exam and ultrasound in a few minutes.

C. Respondent entered the room 10 minutes later with no chaperone. Respondent introduced himself and told J.K. to lie down on the exam table and he began to perform a breast exam. Respondent noticed J.K.’s shoes and said “cute shoes,” and then he said “I like your hat.” J.K. estimated that the breast exam lasted about 20 minutes.

D. During the breast exam Respondent asked J.K., “Are you married?” J.K. responded that she was “divorced.” Respondent then asked “Do you have a man in your life?” J.K. replied, “No.” Respondent further asked, “Why would somebody so cute not have a man in her life?” and told J.K., “You need to meet a nice Caucasian man.” Respondent then suggestively said to J.K., “I have a house in Italy, I should take a special lady there.” Approximately three or four times during the examination Respondent told J.K., “You’re really cute.” J.K. asked Respondent, “Do I have cancer?” Respondent told J.K. she was fine.
E. Respondent completed the breast exam and moved onto the ultrasound. During the ultrasound, Respondent told J.K. “You’re not like most of the Korean women who come here.” Respondent told J.K. that most Korean women are “different.” J.K. asked Respondent again if she had cancer. Respondent said she was fine.

F. During the ultrasound, Respondent repeatedly said to J.K., “You’re really cute.” By this time, J.K. had stopped responding to Respondent’s comments and questions. Respondent then asked, “Are you shy?”, but J.K. did not respond. Respondent stopped the ultrasound and moved forward until he was looking directly at J.K.’s face, and asked again “Are you shy?” J.K. was intimidated and replied “Yes.” She pulled her hat down over her eyes, so she would not have to look in Respondent’s eyes. Respondent wiped the gel off J.K.’s breast. The ultrasound took approximately 20 minutes.

G. Respondent asked her to remove her glasses and looked into J.K.’s eyes and said, “You have really pretty eyes.” Respondent thereafter asked Patient J.K. “will you have lunch with me?” Patient J.K. felt very uncomfortable.

H. Suddenly, Respondent grabbed Patient J.K.’s hands and clasped them between his hands. Respondent had his legs spread apart and was holding J.K.’s hands close to his penis. Respondent moved his torso from side to side and his face was very red, and told her that she got him “really excited.” Then Respondent went straight towards Patient J.K.’s face like he was going to kiss her, but J.K. turned her face and he kissed her cheek. She quickly pulled her hands back and clinched her robe. Respondent continued to ask J.K. to lunch and told her “You have beautiful skin.” Respondent left the room saying he did not want to leave her but he had other patients.

Allegations of Gross Negligence:

I. A physician should not discuss overly personal issues with a patient. Respondent’s remarks were not medically relevant, and were made in a disrespectful and invasive manner. Attempting to kiss a patient is a violation of her personal space. Holding hands in a suggestive manner near Respondent’s genitals is threatening. Respondent’s making of sexual advances was inappropriate and represents an extreme departure from the standard of care.
Factual Allegations Regarding Patient R.E.:

J. On September 23, 2013, Patient R.E. presented herself at Respondent’s office for a routine mammogram. After R.E. arrived, she was told to change into a gown. She got her mammogram and was told that she had “dense breasts,” therefore she would also have to be examined by a doctor. R.E. was led into an examination room. She had seen Respondent approximately four or five times prior to this without incident.

K. Respondent entered the examination room and asked her to lie down on the examination table. He began to compliment R.E. about her age and then asked if she had children. Respondent began examining R.E.’s left breast with his bare hands. While performing the breast exam, Respondent began to question R.E. about her boss, whom Respondent knew. Respondent began to ask R.E. personal questions, like if she was married. Respondent then asked if her needs were taken care of. Respondent asked R.E. if she was sexually active.

L. After the breast exam was completed, Respondent advised R.E. that he needed to perform an ultrasound on her breasts. Respondent put gel on both breasts and started the ultrasound on the left breast. Respondent stated that he could see a breast lump, but was 90 percent sure it was nothing. At this point R.E. became scared and shocked. Respondent stated that he needed to extract liquid out of her left breast with a syringe.

M. Respondent picked up a syringe and started to clean R.E.’s breasts with a brown cleaning solution. Respondent extracted some fluid, and R.E. attempted to get up. Respondent told R.E. to lie down and started to wipe R.E.’s breasts with a tissue. Respondent then said, “I am 98 percent sure it’s nothing.” While R.E. was trying to get up, Respondent told her that she was “so gorgeous and has pretty blue eyes.”

N. Respondent then walked over to R.E. and sat on the examination table and told her “She could make an old man feel good.” Patient R.E. stood up and Respondent walked toward R.E. and kissed her once on the lips, once on her right cheek and once on her left cheek. Respondent continued to move closer towards R.E. She could feel that Respondent was about to kiss her neck. Patient R.E. told Respondent that this was making her uncomfortable and that this
was very upsetting. Respondent then asked R.E. if she liked the kiss. Respondent told her that he “liked her and wanted to see her again” and that “he has not felt this way in a long time and he did not want to leave the room.” Patient R.E. was scared and shocked and walked around Respondent and out of the examination room.

Allegations of Gross Negligence:

O. A physician should not discuss overly personal issues with a patient. Respondent’s remarks were not medically relevant, and were made in a disrespectful and invasive manner. His many unwanted comments were of a sexual nature, had no relevance to the medical issues, violated the boundaries of the doctor-patient relationship, and constituted an extreme departure from the standard of care.

SECOND CAUSE FOR DISCIPLINE

(Criminal Conviction)

8. Respondent Lawrence Harold Resnick, M.D. is subject to disciplinary action under section 2236 in that he was convicted of an offense that was substantially related to the practice of medicine. The circumstances are as follows:

A. Complainant incorporates by reference the allegations contained in paragraph 7, 7J through 7N, as though fully set forth herein.

B. On October 2, 2014, the City Attorney of Santa Monica filed a criminal complaint in the case of People of the State of California vs. Lawrence H. Resnick, Los Angeles County Superior Court, Case number 4WA24387, alleging two counts of Penal Code section 243.4(c), misdemeanor sexual battery committed on or about September 23, 2013.

C. On April 7, 2015, the People amended the complaint to add count 3: a violation of Penal Code section 242, battery. Respondent pled guilty to battery and was placed on summary probation for 24 months, and ordered to serve 80 hours of community service.

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 G16871, issued to Lawrence Harold Resnick, M.D.;

2. Revoking, suspending or denying approval of Lawrence Harold Resnick, M.D.'s authority to supervise physician assistants, pursuant to section 3527 of the Code;

3. Ordering Lawrence Harold Resnick, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and

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

DATED: September 21, 2015

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

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