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## RE : **Physician Save Thy License**

Dear Colleague,

Please accept my apologies for the enclosed convenience re-posting of our prior mailing - which went out in unbound form by staff minor oversight.

I have taken this opportunity to also post the current (Jan 2007) CMA advisory "Physicians and Medical Marijuana" section from their 'Physician On-Call' publication. Please note that this document is NOT 'binding' but rather purely an educational advisory resource. Still, one would be well advised to only deviate from it with great trepidation, and then only after serious in-depth discourse and consideration with your personal Med Board counsel.

FAR more onerously, please note the additional enclosure of the entire 'Mikuriya' decision. **URGENT MANDATORY READING** in its ENTIRITY. As you presumably by now are aware, the Medical Board abruptly placed this item on their 27 July '07 meeting agenda and subsequently adopted it as a 'precedent case'. This apparently is most unusual for legal finding as 'unripe' as this one is. It has now already become an integral evolutionary clarification addition to the official May 2004 Medical Marijuana Physician Practice Guidelines we are legally required to meet at all times as a basic condition of retaining our licenses. It also serves as an example of licensure hearing reality. This document outlines, far more explicitly, multiple detailed 'field-level' practice requirements and specifications as derived from their earlier work, including (but by no means limited to) :

Mandates **physical examination** of *ALL* non-'psych' dx Medical Cannabis patients.

Mandates *FULL* **Formal mental status exams** AND *FULL* **prior psych history** of *ALL* 'psych' dx patients.

Requires *FULL* **medical work up** or obtaining dx / documentation from their underlying treating physicians prior to issuance of *any* Medical Cannabis recommendation (Other than perhaps AT MOST a VERY brief temporary 'good faith' coverage while work-up / documentation assembly proceeds).

Mandates provision of *MEDICALLY APPROPRIATE* (i.e. recognized) **on-going care** for the entire dx at hand – by the 'Cannabis' physician them self if there is not another as primary physician on the case. (i.e. admission/ER coverage, 'Vicodin', MRI, Neurosurg consults, etc...)

**Vital Signs** on *ALL* patients – apparently at ALL visits.

Underscores the necessity of **detailed, thorough medical record keeping**, *including* a treatment plan.

ALL is to be performed as per the generally recognized routine greater standards of Medicine (i.e. **“It’s just another medicine”**...).

Want to challenge the above ‘City Hall’ reality? > then :

a: Simply come to a Med Board meeting, step up to the mike at public comment, and freely advocate to the entire Board in the full light of day why no documentation, V/S, whatever, etc. are indicated.

(or) b: Simply ignore the above until caught. *Automatically* WILL lose at ‘Investigation’ through Hearing/‘Trial’ with fines, fees, Atty costs=~?2+ years/~?\$ 100,000 > *ALMOST CERTAINLY* lose 1st Appeal=~1+yr/~\$ 100,000 > *finally* THEN ‘get your chance(s)’ at ~?1-2yrs/ ?~\$ 100,000+ per cycle until???

Given the impending MAJOR Medical Cannabis physician ‘crackdown’ (perhaps the largest in CA Med Board history) and that ‘the pasts’ presumably are already multiply *well* documented on tape, one’s current best hope lies in a good-faith implementation of a spotless ‘future’ NOW – before ‘they’ come - by *either* :

a) BOLT from ALL of Medical Marijuana IMMEDIATELY, TOTALLY, and PERMANENTLY. Actually *clearly* THE safest action – ‘they’ will have their hands full with current cases, and thus far have expressed minimal desire to pursue closed and forgotten activities. Be grateful for what was gotten away with. One can always re-enter latter, after The Big Cleanup. Given the present exponentially collapsing we-match-*any-price* current ‘reimbursement levels’ (‘working girls’ on SF Tenderloin district street corners normatively ‘earn’ more...): win-*or*-lose, is the upcoming ‘battle’ even worth it?

OR : b)

IMMEDIATELY CEASE *all* activities that could even remotely be construed as inconsistent with the enclosed documents. If necessary, just cancel your day.

Retain APPROPRIATE (i.e. ‘med board’) counsel ASAP.

Obtain URGENT full *on site* detailed practice review by a medical practice specialist.

ANALLY strictly adhere to your new protocols *always*. Surely your MD license is worth more than \$100, \$90, \$80 or whatever streetwalker-price-du-jour.

5) Bend over, kiss your butt, and cross your fingers.

There MAY be some ‘safety in numbers’, especially as ‘med pot’ has been such a red-hot issue for the Board to date, AND their own past record on this matter has hardly always been ‘exemplary’. Indeed, to a very large measure, the present destructive disarray of CA Medical Marijuana practices is merely the inevitable end product of past Boards’ ‘obstructive’ rather than ‘constructive’ Prop 215 implementation efforts. The longer a physician has already fully (and permanently!) ‘healed thyself’, the more resource consumptive Board reparative intervention becomes (genuinely) irrelevant – perhaps better

replaced with mere a confirmatory 'observation' period followed by eventual inquiry dissolution. There already is precedence for this path in CA Medical Marijuana. And the Board actually is seriously resource constrained – especially after their Executive Director, Chief of Investigations, at least 1 'Senior Investigator', perhaps up to 1/4 – 1/5 of their entire investigative staff!!!), and countless untold others abruptly and immediately 'left the Board for other opportunities' upon public questioning by Medical Marijuana physician leadership regarding entrenched 'Conant' violations (notably never answered...). Surely, by now, the Medical Board of California has done enough pot. And clearly, the Medical Board of California has better things to do than pot. This issue will not 'go away' until properly and definitively resolved by all. Instead, let us all mutually focus on a future of constructive, appropriate, legal, definitive, and conclusive Medical Marijuana implementation rather than continued replayed mire of past fogged shortcomings. Our Patients and the Peoples of California deserve nothing less.

Good luck,  
& Have fun!

(At least nowadays there is a ~clearly defined legally accepted practice path – all any Physician that chooses to remain has to do is merely to follow it !)

Stephen –  
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