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

In the Matter of the Accusation Against:

ARNE LEONARD KLEPP, M.D.
16311 Ventura Boulevard, Suite 7
Encino, California 911745

Physician’s and Surgeon’s Certificate No.
C-17787,

Respondent.

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

1. An Accusation and First Amended Accusation in case number D-4207, are currently pending against Arne Leonard Klepp, M.D. (hereinafter the "Respondent"), said Accusation having been filed with the Board on March 28, 1990, and said First Amended Accusation having been filed with the Board on March 11, 1991.

2. The Accusation, together with all other statutorily required documents, was duly served on the Respondent on or about March 28, 1990, and Respondent filed his Notice of Defense contesting the Accusation on or about April 4, 1990.
1990. Likewise, lawful service of the First Amended Accusation was made. Copies of both documents are attached as Attachment "A" and are hereby incorporated by reference as if fully set forth.

3. The complainant, Dixon Arnett, is the Executive Director of the Medical Board of California (hereinafter the "Board") whose predecessor brought this action and who prosecutes it solely in his official capacity.

4. At all times relevant herein, Respondent has been licensed by the Medical Board of California under Physician's and Surgeon's Certificate No. C-17787.

5. The Respondent has retained Russell Iungerich, Esq. to act as his legal counsel in this matter.

6. The Respondent and his attorney have fully discussed the charges contained in Accusation and First Amended Accusation number D-4207, and the Respondent has been fully advised regarding his legal rights and the effects of this stipulation.

7. Respondent understands the nature of the charges alleged in the Accusation and First Amended Accusation as constituting causes for imposing discipline upon his Physician's and Surgeon's Certificate. Respondent is fully aware of his right to a hearing on the charges contained in said Accusation and First Amended Accusation, his right to confront and cross-examine witnesses against him, his right to reconsideration, appeal and any and all other rights which may be accorded him under the California Administrative Procedure Act and, with this in mind, freely, voluntarily and irrevocably waives and give up such rights.

8. Respondent admits that Complainant can present a prima facie case establishing the allegations of the Accusation and First Amended Accusation in case number D-4207. Respondent, however, declines to require the Complainant to put on its case and hereby waives his right to present a defense to the charges in the Accusation and First Amended Accusation.

2.
9. Respondent agrees that the Division of Medical Quality may impose discipline upon his physician’s and surgeon’s certificate in the manner set forth below.

10. Respondent is aware that, in any petition for reinstatement or reduction of penalty he may file pursuant to Business and Professions Code section 2307 and in any other proceeding alleging medical misconduct before the Medical Board of California committed after the effective date of this decision, the Board can consider as true and proven the allegations in the Accusation and First Amended Accusation filed in case number D-4207.

11. In consideration of the foregoing admissions and findings, the parties stipulate and agree that the Board shall, without further notice or formal proceeding, issue and enter the following order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician’s and Surgeon’s Certificate number C-17787 issued to Arne Leonard Klepp, M.D. is revoked. However, said revocation is stayed and Respondent is placed on probation for five (5) years on the following terms and conditions:

1. Actual Suspension. As part of probation, Respondent is suspended from the practice of medicine for forty-five (45) days beginning the effective date of this decision.

2. Education Course. Within ninety (90) days of the effective date of this decision, and on an annual basis thereafter, Respondent shall submit to the Division for its prior approval an educational program or course related to internal medicine and family practice, which shall not be less than 40 hours per year for each year of probation. This program shall be in addition to the continuing medical education requirements for re-licensure. Following the completion of each course, the
Division or its designee may administer an examination to test Respondent's knowledge of the course. Respondent shall provide proof of attendance for 65 hours of continuing medical education of which 40 hours were in satisfaction of this condition and were approved in advance by the Division or its designee.

3. **Intensive Family Practice Review Course.** Within 90 days of the effective date of this decision, Respondent shall submit to the Division for its prior approval an intensive family practice review course at an institution acceptable to the Division. Within 180 days of the effective date of this decision, Respondent shall successfully complete the review course and may be required to pass an examination administered by the Division or its designee related to the program content.

4. **Oral or Written Exam.** Within 60 days of the effective date of this decision, Respondent shall take and pass an oral competency exam in family practice to be administered by the Division or its designee. If Respondent fails this examination, Respondent must take and pass a re-examination consisting of a written as well as an oral examination. The waiting period between repeat examinations shall be at three month intervals until success is achieved. The Respondent shall pay the cost of the first examination and any subsequent re-examinations.

If Respondent fails the first examination, Respondent shall cease the practice of medicine until the re-examination has been successfully passed, as evidenced by written notice to Respondent from the Division. Upon Respondent’s request, the Division shall reschedule a second examination within 60 days. Failure to pass the required examination no later than 100 days prior to the termination date of probation shall constitute a violation of probation. The grading of any oral or written competency examination shall be done immediately upon completion of the examination and written notice of the examination results shall be mailed to Respondent and his attorney within five days of the date that grading is completed.

5. **Recovery of Investigation and Prosecution Costs.** The Respondent
is hereby ordered to pay the Board the liquidated amount of $5,000.00 for recovery of some of the costs of the investigation and prosecution of this matter.

Respondent shall pay to the Board the amount set forth above within ninety (90) days of the effective date of this decision. If the amount due is not paid as of that date, the Respondent’s license to practice medicine, if not revoked, shall be suspended until payment is received by the Board. Respondent’s license to engage in the practice of medicine shall not be renewed or reinstated if Respondent has failed to pay all of the costs.

6. **Chelation Therapy.** During probation, the use of chelation therapy with ethylenediamine tetraacetic acid (EDTA) or any of its salts by the Respondent or by any other person acting on the instructions of the Respondent shall be prohibited other than: (a) in the treatment of heavy metal poisoning, hypercalcemia or digitalis toxicity which have been documented in writing by generally accepted medical tests; or (b) as part of a formal, controlled clinical trial under an investigational protocol approved in advance by the United States Food and Drug Administration.

7. **Monitoring.** Within 30 days of the effective date of this decision, Respondent shall submit to the Division for its prior approval the name of and qualifications of one or more California licensed physicians whose license is clear and current and who has agreed to serve as a practice monitor. Once approved, the monitor shall submit to the Division a plan by which Respondent’s medical practice shall be monitored for a period of eighteen (18) months. The monitor’s education and experience shall be in the field of family practice or internal medicine. The monitor shall submit written reports to the Division on a quarterly basis verifying that monitoring has taken place and providing an evaluation of Respondent’s performance. It shall be Respondent’s responsibility to assure that the required reports are filed in a timely fashion. The Respondent shall provide access to the monitor of his client records, including billings, and the monitor shall be permitted to make direct contact...
with patients. Further, the monitor shall have no prior business, professional, personal
or other relationship with Respondent. Respondent shall execute a release authorizing
the monitor to divulge any information that the Division may request. In exercising his
or her role, it is understood and agreed that the monitor shall be held harmless from
liability for any communication of fact or of opinion made in good faith to the Division
or its designees regarding Respondent and/or his care of patients.

If, at any time prior to the completion of the 18-month monitoring
period, the monitor quits or is otherwise no longer available, Respondent shall have 15
days in which to replace the monitor selected in accordance with the conditions
outlined above. The period of monitoring shall be tolled until a new monitor is
approved. All costs of monitoring shall be borne by the Respondent.

8. Obey All Laws. Respondent shall obey all federal, state, and local
laws, and all rules governing the practice of medicine in California.

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

10. Surveillance Program. Respondent shall comply with the Division’s
probation surveillance program.

11. Interview With Medical Consultant. Respondent shall appear in
person for interviews with the Division’s medical consultant upon request at various
intervals and with reasonable notice.

12. Tolling for Out-of-State Practice or Residence. The period of
probation shall not run during the time Respondent is residing or practicing outside the
jurisdiction of California. If, during probation, Respondent moves out of the
jurisdiction of California to reside or practice elsewhere, Respondent is required to
immediately notify the Division in writing of the date of departure, and the date of
return, if any.
13. **Completion of Probation.** Upon successful completion of probation, Respondent’s certificate will be fully restored.

14. **Violation of Probation.** If Respondent violates probation in any respect, the Division, 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 is filed against Respondent during probation, the Division shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

**CONTINGENCY**

This stipulation shall be subject to the approval of the Board. If the Board fails to adopt this stipulation as its Order, the stipulation shall be of no force or effect for either party, nor shall it be mentioned or referred to in any legal action between the parties.

**ACCEPTANCE**

I have read the above Stipulation and Disciplinary Order, understand their terms, and agree to be bound thereby.

DATED: 7/14/94.

ARNE LEONARD KLEPP, M.D.
Respondent

Approved and notarized.
DATED: July 14, 1994.

RUSSELL IUNGERICH
Attorney for Respondent
ENDORSEMENT

The attached stipulation is hereby respectfully submitted for the consideration of the Board.


DANIEL E. LUNGREN, Attorney General of the State of California

ROBERT McKIM BELL
Deputy Attorney General

Attorneys for Complainant
DECISION AND ORDER

The foregoing Stipulation and Order, in case number D-4207, is hereby adopted as the Order of the Division of Medical Quality of the Medical Board of California. An effective date of October 21, 1994, has been assigned to this Decision and Order.

Made this 22nd day of September, 1994.

FOR THE DIVISION OF MEDICAL QUALITY

Attachment: Accusation and First Amended Accusation
In the Matter of the Accusation
Against:

ARNE LEONARD KLEPP, M.D.
16311 Ventura Blvd., Suite 725
Encino, CA 91436
Physician and Surgeon
Certificate No. C-17787,

Respondent.

COMPLAINANT ALLEGES FURTHER THAT:

6. He makes and files this first amended and supplemental accusation solely in his official capacity.

7. Section 2234(e) provides that the commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon is unprofessional conduct.

8. Respondent is subject to disciplinary action pursuant to section 2234, 2234(b) and 2234(c), as follows:

Patient P.T.

A. On or about August 17, 1984, respondent first saw P.T., a male, then 72 years old, with a long
history of hypertension, peripheral vascular disease
and intermittent claudication. Respondent last saw
P.T. on or about December 2, 1985.

B. Respondent was guilty of gross negligence,
repeated acts of negligence and unprofessional conduct
in his treatment of P.T. in that:

(1) He failed to note or treat P.T.'s
hypertension;

(2) He used chelation therapy to treat'
peripheral vascular disease;

(3) He prescribed Ionamin to a patient
with significant peripheral vascular disease
and hypertension;

(4) He noted, on November 8, 1985, but
failed to treat or refer for consultation and
treatment, an ulcer of the left ankle, as a
proximate result of which the ulcer worsened
and the leg ultimately, on January 17, 1985,
had to be amputated.

Patient B.G.

C. In or about May 1989, respondent first saw
patient B.G. for chronic fatigue syndrome.

D. Respondent was guilty of gross negligence,
repeated acts of negligence and unprofessional conduct,
in that:

(1) He employed analysis of urinary
steroid metabolites to investigate the
possibility of adrenal insufficiency;
(2) He prescribed Cortisol, a potentially harmful steroid, without having first properly substantiated adrenal insufficiency;
(3) He prescribed Cortisol in an amount totalling 10mg per day, where, had there been a basis for so doing, at least 30mg per dose would have been indicated.

Patient A.C.

E. On or about July 14, 1989, respondent first saw patient A.C., a female, then 30 years old, for laser hemorrhoidectomy surgery, which respondent performed, in his office, on that date.

F. Respondent was guilty of gross negligence, repeated acts of negligence and unprofessional conduct, in that:

(1) Respondent left his office, without a covering physician, while A.C. was still in post-surgical recovery and, in fact, continued to bleed and fainted before leaving respondent's office;
(2) He failed to properly respond to A.C.'s continuing complaint of bleeding, including heavy bleeding, after A.C. went home, including, specifically, failing to have A.C. evaluated immediately and failing
to recognize surgical complications despite both substantial blood loss and syncope;

(3) He thereafter failed to be available to the patient or to have a covering physician available when the patient continued to bleed, passing blood clots, and to faint and said patient repeatedly attempted to reach respondent, before finally seeking care at an emergency room;

(4) He failed to recognize the nature and extent of injuries at the time of surgery and failed to treat same, specifically, a bleeding artery at the operative site.

G. Complainant incorporates the allegations of paragraph 5 of the Accusation by reference herein as though fully set forth at this point.

H. Respondent's conduct as set out hereinabove constituted, as to any two patients and as to all four patients taken together, gross negligence, repeated acts of negligence and unprofessional conduct.

9. Respondent is subject to disciplinary action pursuant to section 2234 and section 2234(e), as follows:

A. Complainant incorporates paragraph 8C and D by reference herein as though fully set forth at this point.

B. Respondent told B.G. that Cortisol was not generally available and convinced B.G. to obtain
Cortisol through him.

C. In truth, as respondent well knew, Cortisol was readily available in pharmacies at a substantially lower price.

D. Respondent had B.G. purchase Cortisol directly from him in order to profit thereby and not for any medical reason or lack of availability of Cortisol.

WHEREFORE, Complainant prays a hearing be held on the charges set out hereinabove and in the accusation, and, following said hearing, the Division of Medical Quality issue a decision:

1. Revoking or suspending Physician and Surgeon Certificate No. C-17787, heretofore issued to respondent; and

2. Taking such other and further action as the Division may deem proper.

DATED: March 11, 1991

KENNETH J. WAGSTAFF
Executive Director
Medical Board of California

Complainant