

<b>IN THE MATTER OF</b>	*	<b>BEFORE THE MARYLAND</b>
<b>MUSTAFA ALI, M.D.</b>	*	<b>STATE BOARD OF</b>
<b>RESPONDENT</b>	*	<b>PHYSICIANS</b>
<b>License Number: D0094920</b>	*	<b>Case Number: 2226-0158</b>

\* \* \* \* \*

**CONSENT ORDER**

**PROCEDURAL BACKGROUND**

The Maryland Board of Physicians (the “Maryland Board”) received information that Mustafa Ali, M.D. (the “Respondent”), License Number D0094920, was disciplined by the Medical Board of California (the “California Board”). In a Decision and Order (“Order”) dated March 5, 2026, the California Board disciplined the Respondent by issuing a reprimand against his medical license and ordering him to complete a course in medical record keeping. Furthermore, the Respondent was ordered to pay the costs of the California Board’s investigation in the amount of \$49,686.50.

Based on the above-referenced California Board sanction, the Maryland Board has grounds to charge the Respondent with violating the following provisions of the Maryland Medical Practice Act (the “Act”), under H. O. § 14-404(a):

- (a) Subject to the hearing provisions of § 14-405 of this subtitle, a disciplinary panel, on the affirmative vote of a majority of the quorum of the disciplinary panel, may reprimand any licensee, place any licensee on probation, or suspend or revoke a license if the licensee:
  - (21) Is disciplined by a licensing or disciplinary authority or convicted or disciplined by a court of any state or country or disciplined by any branch of the United States uniformed services or the Veteran’s Administration for an act that would be grounds for disciplinary action under this section,

Disciplinary Panel A (“Panel A”) has determined that the acts for which the Respondent was disciplined in California would be grounds for disciplinary action under H.O. § 14-404(a). The grounds for disciplinary action under H.O. § 14-404(a) are as follows:

(3) Is guilty of:

(ii) Unprofessional conduct in the practice of medicine[.]

Based on the action taken by the California Board, the Respondent agrees to enter into this Consent Order with Panel A, consisting of Procedural Background, Findings of Fact, Conclusions of Law, Order and Consent.

#### **FINDINGS OF FACT**

Panel A makes the following findings of fact:

1. At all times relevant hereto, the Respondent was a physician licensed to practice medicine in the State of Maryland. The Respondent was initially licensed in Maryland on or about June 27, 2022.

2. On or about October 6, 2020, the Respondent served as part of the anesthesia team for Patient A’s laparoscopic appendectomy surgery. The Respondent removed “100 mcg fentanyl, 50 mg ketamine, and 2 mg midazolam” from a Pyxis cart, a cart containing controlled medications, using the Respondent’s login credentials.

However, documentation indicated that he only administered “2 mg of midazolam and 20 mg of ketamine” to Patient A. The Respondent did not document whether the 100 mcg fentanyl or the remaining 30 mg ketamine were administered or appropriately wasted.

3. On or about October 9, 2020, the Respondent served as part of the anesthesia team for Patient B’s arthroscopic shoulder surgery. The “Respondent withdrew 50 mg

ketamine and 2 mg midazolam” from a Pyxis cart; however, documentation indicated that Patient B only received 20 mg ketamine and 2 mg midazolam. The Respondent did not document the use of midazolam in the “anesthesia records of medications administered.” Additionally, the Respondent did not document whether the remaining 30 mg ketamine was administered or appropriately wasted.

4. On or about October 9, 2020, the Respondent served as part of the anesthesia team for Patient C’s ankle open reduction and internal fixation surgery. “The Respondent withdrew 100 mcg fentanyl” from a Pyxis cart and later “withdrew 2 mg midazolam and 50 mg ketamine” from a different Pyxis cart. Documentation indicates that Patient C received “2 mg midazolam, 10 mg ketamine, and bupivacaine, for the nerve block.” The Respondent did not document whether the remaining 40 mg ketamine or the 100 mcg fentanyl was administered or properly disposed.

5. On or about October 10, 2020, the Respondent withdrew 100 mcg fentanyl from a Pyxis cart but only administered 15 mcg fentanyl to Patient D. The Respondent did not document whether the remaining 85 mcg fentanyl was administered or appropriately disposed.

6. By Order dated March 5, 2026, the California Board disciplined the Respondent by issuing a reprimand against his medical license and ordering him to complete a course in medical record keeping. Furthermore, the Respondent was ordered to pay the costs of the California Board’s investigation in the amount of \$49,686.50.

A copy of the California Board Order is attached hereto.

## CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, Panel A concludes as a matter of law that the Respondent is subject to discipline under Health Occ. § 14-404(a)(21) for the disciplinary action taken by the California Board against the Respondent for an act or acts that would be grounds for disciplinary action under Health Occ. §14-404(a)(3)(ii).

### ORDER

It is, thus, by Panel A, hereby:

**ORDERED** that the Respondent's license to practice medicine in the State of Maryland be and is hereby **REPRIMANDED**; and it is further

**ORDERED** that the Respondent shall comply with all terms and conditions of the March 5, 2026 California Board Order; and it is further

**ORDERED** that this Consent Order shall not be amended or modified and future requests for modification will not be considered; and it is further

**ORDERED** that the effective date of the Consent Order is the date the Consent Order is signed by the Executive Director of the Board or her designee. The Executive Director or her designee signs the Consent Order on behalf of the disciplinary panel which has imposed the terms and conditions of this Consent Order; and it is further

**ORDERED** that the Respondent is responsible for all costs incurred in fulfilling the terms and conditions of this Consent Order; and it is further

**ORDERED** that, if the Respondent allegedly fails to comply with any term or condition imposed by this Consent Order, the Respondent shall be given notice and an opportunity for a hearing. If the disciplinary panel determines there is a genuine dispute as to a material fact, the hearing shall be before an Administrative Law Judge of the

Office of Administrative Hearings followed by an exceptions process before a disciplinary panel; and if the disciplinary panel determines there is no genuine dispute as to a material fact, the Respondent shall be given a show cause hearing before a disciplinary panel; and it is further

**ORDERED** that, after the appropriate hearing, if the disciplinary panel determines that the Respondent has failed to comply with any term or condition imposed by this Consent Order, the disciplinary panel may reprimand the Respondent, place the Respondent on probation with appropriate terms and conditions, or suspend Respondent's license with appropriate terms and conditions, or revoke the Respondent's license. The disciplinary panel may, in addition to one or more of the sanctions set forth above, impose a civil monetary fine on the Respondent; and it is further

**ORDERED** that this Consent Order is a public document. *See* Health Occ. §§1-607, 14-411.1(b)(2) and Gen. Prov. §4-333(b)(6).

06/10/2026  
Date

***Signature on File***

Christine A. Farfelly  
Executive Director  
Maryland Board of Physicians

CONSENT

I, Mustafa Ali, acknowledge that I have consulted with legal counsel before signing this document.

[OR]

I, \_\_\_\_\_, acknowledge that I am aware of my right to consult with and be represented by counsel in considering this Consent Order. I have chosen to proceed without counsel and I acknowledge that the decision to proceed without counsel is freely and voluntarily made.

By this Consent, I agree to be bound by this Consent Order and all its terms and conditions and understand that the disciplinary panel will not entertain any request for amendments or modifications to any condition.

I assert that I am aware of my right to a formal evidentiary hearing, pursuant to Md. Code Ann., Health Occ. § 14-405 and Md. Code Ann., State Gov't §§ 10-201 *et seq.* concerning the pending charges. I waive this right and have elected to sign this Consent Order instead.

I acknowledge the validity and enforceability of this Consent Order as if entered after the conclusion of a formal evidentiary hearing in which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my behalf, and to all other substantive and procedural protections as provided by law. I waive those procedural and substantive protections. I acknowledge the legal authority and the jurisdiction of the disciplinary panel to initiate these proceedings and to issue and enforce this Consent Order.

I voluntarily enter into and agree to comply with the terms and conditions set forth in the Consent Order as a resolution of the charges. I waive any right to contest the Findings of Fact and Conclusions of Law and Order set out in the Consent Order. I waive all rights to appeal this Consent Order.

I sign this Consent Order, without reservation, and fully understand the language and meaning of its terms.

June 3<sup>rd</sup>, 2026  
Date

***Signature on File***

Mustafa Ali, M.D.  
Respondent

NOTARY

STATE OF VIRGINIA

CITY/COUNTY OF LOUDOUN

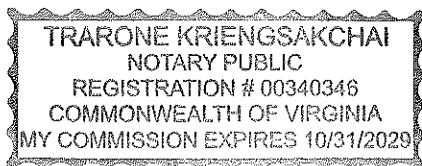
I HEREBY CERTIFY that on this 3RD day of JUNE, 2026, before me, a Notary Public of the State and City/County aforesaid, personally Mustafa Ali, M.D., and made oath in due form of law that the foregoing Consent Order was his voluntary act and deed.

AS WITNESS my hand and notarial seal.



Notary Public

My Commission expires: 10/31/2029



**California Order,  
dated March 5, 2026**

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

In the Matter of the Accusation Against:

Mustafa Ali, M.D.

Physician's & Surgeon's  
Certificate No. A 143423

Respondent.

Case No. 800-2021-078391

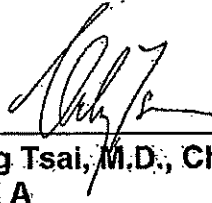
DECISION

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 April 3, 2026.

IT IS SO ORDERED: March 5, 2026.

MEDICAL BOARD OF CALIFORNIA

 M.D.

Veling Tsai, M.D., Chair  
Panel A

1 ROB BONTA  
Attorney General of California  
2 GLORIA CASTRO  
Senior Assistant Attorney General  
3 TESSA L. HEUNIS  
Supervising Deputy Attorney General  
4 State Bar No. 241559  
300 So. Spring Street, Suite 1702  
5 Los Angeles, CA 90013  
Telephone: (619) 738-9403  
6 Facsimile: (916) 732-7920  
E-mail: [Tessa.Heunis@doj.ca.gov](mailto:Tessa.Heunis@doj.ca.gov)

7 *Attorneys for Complainant*

8  
9 **BEFORE THE,**  
10 **MEDICAL BOARD OF CALIFORNIA**  
11 **DEPARTMENT OF CONSUMER AFFAIRS**  
12 **STATE OF CALIFORNIA**

13 In the Matter of the Accusation Against:

14 **MUSTAFA ALI, M.D.**  
15 **1551 Union St Apt 509**  
16 **San Diego, CA 92101-3441**

17 **Physician's and Surgeon's Certificate**  
18 **No. A 143423**

19 Respondent.

Case No. 800-2021-078391

OAH No. 2024081050

**STIPULATED SETTLEMENT AND  
DISCIPLINARY ORDER**

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

22 **PARTIES**

23 1. Reji Varghese (Complainant) is the Executive Director of the Medical Board of  
24 California (Board). He brought this action solely in his official capacity and is represented in this  
25 matter by Rob Bonta, Attorney General of the State of California, by Tessa L. Heunis,  
26 Supervising Deputy Attorney General.

27 2. Respondent Mustafa Ali, M.D. (Respondent) is represented in this proceeding by  
28 attorney Raymond J. McMahan, Esq., whose address is: 5440 Trabuco Road, Irvine, CA 92620.

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1 **DISCIPLINARY ORDER**

2 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 143423  
3 issued to Respondent Mustafa Ali, M.D., shall be and hereby is Publicly Reprimanded pursuant to  
4 Business and Professions Code section 2227. This Public Reprimand, which is issued in  
5 connection with the allegation as set forth in Accusation No. 800-2021-078391, is as follows:

6 In 2020, you committed gross negligence and repeated negligent acts, failed to  
7 maintain adequate and accurate records, and committed general unprofessional  
8 conduct in your provision of services to four patients, as more particularly alleged  
9 in Accusation No. 800-2021-078391.

10 1. **MEDICAL RECORD KEEPING COURSE** Within 60 calendar days of the effective  
11 date of this Decision, Respondent shall enroll in a course in medical record keeping approved in  
12 advance by the Board or its designee. Respondent shall provide the approved course provider with  
13 any information and documents that the approved course provider may deem pertinent.  
14 Respondent shall participate in and successfully complete the classroom component of the course  
15 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully  
16 complete any other component of the course within one (1) year of enrollment. The medical  
17 record keeping course shall be at Respondent's expense and shall be in addition to the Continuing  
18 Medical Education (CME) requirements for renewal of licensure.

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

24 Respondent shall submit a certification of successful completion to the Board or its  
25 designee not later than 15 calendar days after successfully completing the course, or not later than  
26 15 calendar days after the effective date of the Decision, whichever is later.

27 2. **INVESTIGATION/ENFORCEMENT COST RECOVERY.** Respondent is hereby  
28 ordered to reimburse the Board its costs of investigation and enforcement, including, but not

1 limited to, expert review, legal reviews, investigation(s), and subpoena enforcement, as applicable,  
2 in the amount of \$49,686.50 (forty-nine thousand, six hundred eighty-six dollars and 50 cents).  
3 Costs shall be payable to the Medical Board of California. Failure to pay such costs shall be  
4 considered a violation of probation.

5 Payment must be made in full within 30 calendar days of the effective date of the Order, or  
6 by a payment plan approved by the Medical Board of California. Any and all requests for a  
7 payment plan shall be submitted in writing by Respondent to the Board. Failure to comply with  
8 the payment plan shall constitute unprofessional conduct and grounds for further disciplinary  
9 action. The filing of bankruptcy by Respondent shall not relieve Respondent of the responsibility  
10 to repay investigation and enforcement costs, including expert review costs.

11 3. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for a  
12 new license or certification, or petition for reinstatement of a license, by any other health care  
13 licensing action agency in the State of California, all of the charges and allegations contained in  
14 Accusation No. 800-2021-078391 shall be deemed to be true, correct, and admitted by Respondent  
15 for the purpose of any Statement of Issues or any other proceeding seeking to deny or restrict  
16 license.

17 4. FAILURE TO COMPLY. Any failure by Respondent to comply with terms and  
18 conditions of the Stipulated Settlement and Disciplinary Order set forth above shall constitute  
19 unprofessional conduct and grounds for further disciplinary action.

20 ACCEPTANCE


21 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully  
22 discussed it with my attorney, Raymond J. McMahon, Esq. I fully understand the stipulation and  
23 the effect it will have on my Physician's and Surgeon's Certificate No. A 143423. Having the  
24 benefit of counsel, I enter into this Stipulated Settlement and Disciplinary Order voluntarily,  
25 knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical  
26 Board of California.

27 DATED: June 16<sup>th</sup>, 2025

  
MUSTAFA ALI, M.D.  
Respondent

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

4  
5 DATED: June 16, 2025

  
6 RAYMOND J. MCMAHON, ESQ.  
Attorney for Respondent

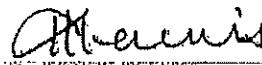
7 **ENDORSEMENT**

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

10 DATED: June 17, 2025

11 Respectfully submitted,

12 ROB BONTA  
Attorney General of California  
13 GLORIA CASTRO  
Senior Assistant Attorney General

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15 TESSA L. HEUNIS  
16 Supervising Deputy Attorney General  
17 Attorneys for Complainant  
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**Exhibit A**

**Accusation No. 800-2021-078391**

1 ROB BONTA  
Attorney General of California  
2 MATTHEW M. DAVIS  
Supervising Deputy Attorney General  
3 TESSA L. HEUNIS  
Deputy Attorney General  
4 State Bar No. 241559  
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5 San Diego, CA 92101  
P.O. Box 85266  
6 San Diego, CA 92186-5266  
Telephone: (619) 738-9403  
7 Facsimile: (619) 645-2061

8 *Attorneys for Complainant*

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

In the Matter of the Accusation Against:

Case No. 800-2021-078391

**MUSTAFA ALI, M.D.  
1551 Union St Apt 509  
San Diego CA 92101-3441**

**ACCUSATION**

**Physician's and Surgeon's Certificate  
No. A 143423,**

Respondent.

**PARTIES**

1. Reji Varghese (Complainant) brings this Accusation solely in his official capacity as the Executive Director of the Medical Board of California, Department of Consumer Affairs (Board).

2. On or about June 24, 2016, the Medical Board issued Physician's and Surgeon's Certificate No. A 143423 to Mustafa Ali, M.D. (Respondent). The Physician's and Surgeon's Certificate expired on December 31, 2021, and has not been renewed.

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1 JURISDICTION

2 3. This Accusation is brought before the Board under the authority of the following  
3 laws. All section references are to the Business and Professions Code (Code) unless otherwise  
4 indicated.

5 4. Section 2004 of the Code states:

6 The board shall have the responsibility for the following:

7 (a) The enforcement of the disciplinary and criminal provisions of the Medical  
8 Practice Act.

9 (b) The administration and hearing of disciplinary actions.

10 (c) Carrying out disciplinary actions appropriate to findings made by a panel or  
an administrative law judge.

11 (d) Suspending, revoking, or otherwise limiting certificates after the conclusion  
12 of disciplinary actions.

13 (e) Reviewing the quality of medical practice carried out by physician and  
14 surgeon certificate holders under the jurisdiction of the board.

14 ...

15 5. Section 2220 of the Code states:

16 Except as otherwise provided by law, the board may take action against all  
17 persons guilty of violating this chapter. The board shall enforce and administer this  
18 article as to physician and surgeon certificate holders, including those who hold  
19 certificates that do not permit them to practice medicine, such as, but not limited to,  
retired, inactive, or disabled status certificate holders, and the board shall have all the  
20 powers granted in this chapter for these purposes ...

21 6. Section 2227 of the Code states:

22 (a) A licensee whose matter has been heard by an administrative law judge of  
23 the Medical Quality Hearing Panel as designated in Section 11371 of the Government  
Code, or whose default has been entered, and who is found guilty, or who has entered  
24 into a stipulation for disciplinary action with the board, may, in accordance with the  
provisions of this chapter:

25 (1) Have his or her license revoked upon order of the board.

26 (2) Have his or her right to practice suspended for a period not to exceed one  
27 year upon order of the board.

28 (3) Be placed on probation and be required to pay the costs of probation  
monitoring upon order of the board.

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1 (4) Be publicly reprimanded by the board. The public reprimand may include a  
2 requirement that the licensee complete relevant educational courses approved by the  
board.

3 (5) Have any other action taken in relation to discipline as part of an order of  
4 probation, as the board or an administrative law judge may deem proper.

5 (b) Any matter heard pursuant to subdivision (a), except for warning letters,  
6 medical review or advisory conferences, professional competency examinations,  
7 continuing education activities, and cost reimbursement associated therewith that are  
8 agreed to with the board and successfully completed by the licensee, or other matters  
made confidential or privileged by existing law, is deemed public, and shall be made  
available to the public by the board pursuant to Section 803.1.

8 **STATUTORY PROVISIONS**

9 7. Section 2234 of the Code states:

10 The board shall take action against any licensee who is charged with  
11 unprofessional conduct. In addition to other provisions of this article, unprofessional  
conduct includes, but is not limited to, the following:

12 (a) Violating or attempting to violate, directly or indirectly, assisting in or  
13 abetting the violation of, or conspiring to violate any provision of this chapter.

14 (b) Gross negligence.

15 (c) Repeated negligent acts. To be repeated, there must be two or more  
16 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.

17 (1) An initial negligent diagnosis followed by an act or omission medically  
18 appropriate for that negligent diagnosis of the patient shall constitute a single  
negligent act.

19 (2) When the standard of care requires a change in the diagnosis, act, or  
20 omission that constitutes the negligent act described in paragraph (1), including, but  
21 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.

22 ...

23 (f) Any action or conduct that would have warranted the denial of a certificate.

24 ...

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1 8. At the time of the events alleged in this Accusation, section 2266 of the Code stated<sup>1</sup>:

2 The failure of a physician and surgeon to maintain adequate and accurate  
3 records relating to the provision of services to their patients constitutes unprofessional  
4 conduct.

4 **COST RECOVERY**

5 9. Section 125.3 of the Code provides, in pertinent part, that the Board may request the  
6 administrative law judge to direct a licensee found to have committed a violation or violations of  
7 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and  
8 enforcement of the case, with failure of the licensee to comply subjecting the license to not being  
9 renewed or reinstated. If a case settles, recovery of investigation and enforcement costs may be  
10 included in a stipulated settlement.

11 **DEFINITIONS**

12 10. Unprofessional conduct under California Business and Professions Code section 2234  
13 is conduct which breaches the rules or ethical code of the medical profession, or conduct which is  
14 unbecoming a member in good standing of the medical profession, and which demonstrates an  
15 unfitness to practice medicine. (*Shea v. Board of Medical Examiners* (1978) 81 Cal. App.3d 564,  
16 575.)

17 **FACTUAL ALLEGATIONS**

18 11. At all relevant times, Respondent was a board-certified anesthesiologist with active  
19 hospital privileges at a hospital ("Hospital") in San Diego, California.

20 12. At Hospital, controlled medications that are used during a surgical procedure may be  
21 pulled from the Pyxis cart or an anesthesia cart by a provider under that provider's log in details.

22 13. By the conclusion of the procedure or as soon thereafter as practicable, all controlled  
23 medications pulled from Pyxis or the anesthesia cart should be accounted for and documented  
24 either as having been administered to a particular patient, returned, or wasted.

25 14. When anesthesia is provided by a care team, there is a shared responsibility with  
26 regard to documentation of controlled medications and their proper disposal. It is, however,

27 <sup>1</sup>The section was amended by Stats. 2023, Ch. 294, Sec. 18 (SB 815), effective January 1,  
28 2024, and now requires records to be maintained "for at least seven years after the last date of  
service to a patient."

1 ultimately the responsibility of the provider who pulled out the controlled medications under their  
2 credentials to confirm that correct documentation and disposal is occurring.

3 Patient 1:<sup>2</sup>

4 15. Patient 1 presented to Hospital for laparoscopic appendectomy surgery on or about  
5 October 6, 2020. Respondent and a CRNA (Certified Registered Nurse Anesthetist) were the  
6 anesthesia team responsible for Patient 1.

7 16. Pyxis documentation shows that Respondent withdrew 100 mcg fentanyl,<sup>3</sup> 50 mg  
8 ketamine,<sup>4</sup> and 2 mg midazolam<sup>5</sup> from Pyxis for Patient 1 at or around 11:30 a.m.

9 17. Patient 1 is documented to have received 2 mg of midazolam and 20 mg of ketamine.

10 18. There is no documentation showing that any of the 100 mcg fentanyl taken from  
11 Pyxis by Respondent was either administered to Patient 1 or disposed of as required.

12 19. There is no documentation showing that any of the remaining 30 mg ketamine taken  
13 from Pyxis by Respondent was either administered to Patient 1 or disposed of as required.

14 Patient 2:

15 20. Patient 2 presented to Hospital for arthroscopic shoulder surgery on or about  
16 October 9, 2020. Respondent and two CRNAs were the anesthesia team responsible for Patient 2.

17 21. Pyxis documentation shows that Respondent withdrew 50 mg ketamine and 2 mg  
18 midazolam from Pyxis for Patient 2 at or around 7:12 a.m.

19 22. Patient 2 received an interscalene nerve block prior to induction of general anesthesia.

20 ////

21 \_\_\_\_\_  
22 <sup>2</sup> The identities of all the patients are known but not disclosed herein to protect their  
privacy.

23 <sup>3</sup> Fentanyl is a Schedule II controlled substance pursuant to Health and Safety Code  
24 section 11055, subdivision (c), and a dangerous drug pursuant to Code section 4022. It is a potent  
synthetic piperidine opioid primarily used as an analgesic.

25 <sup>4</sup> Ketamine is a Schedule III controlled substance pursuant to Health and Safety Code  
26 section 11056, subdivision (g), and a dangerous drug pursuant to Code section 4022. It is a  
dissociative anesthetic used medically for induction and maintenance of anesthesia.

27 <sup>5</sup> Midazolam, sold under the brand name Dormicum and Versed among others, is a  
28 Schedule IV controlled substance pursuant to Health and Safety Code section 11057, subdivision  
(d), and a dangerous drug pursuant to Code section 4022. It is a benzodiazepine medication.

1           23. The procedure note for the nerve block shows Patient 2 received 2 mg midazolam and  
2 bupivacaine for the nerve block.

3           24. The anesthesia record of medications administered to Patient 2 makes no mention of  
4 the use of midazolam.

5           25. Patient 2 received 20 mg ketamine with induction.

6           26. There is no documentation showing that any of the remaining 30 mg ketamine taken  
7 from Pyxis by Respondent was either administered to Patient 2 or disposed of as required.

8 Patient 3:

9           27. Patient 3 presented to Hospital for ankle open reduction and internal fixation (ORIF)  
10 surgery on or about October 9, 2020. Respondent and two CRNAs were the anesthesia team  
11 responsible for Patient 3.

12           28. Anesthesia care started at or around 10:50 a.m.

13           29. Pyxis documentation shows that, at or around 9:05 a.m., Respondent withdrew 100  
14 mcg fentanyl from a Pyxis machine for Patient 3. Subsequently, at or around 10:20 a.m.,  
15 Respondent withdrew 2 mg midazolam and 50 mg ketamine from a different Pyxis machine for  
16 Patient 3.

17           30. Patient 3 received a sciatic nerve block prior to induction of general anesthesia.

18           31. The procedure note for the nerve block shows Patient 3 received 2 mg midazolam,  
19 10 mg ketamine, and bupivacaine, for the nerve block.

20           32. There is no documentation showing that any of the remaining 40 mg ketamine taken  
21 from Pyxis by Respondent was either administered to Patient 3 or disposed of as required.

22           33. There is no documentation showing that any of the 100 mcg fentanyl taken from  
23 Pyxis by Respondent was either administered to Patient 3 or disposed of as required.

24 Patient 4:

25           34. Patient 4 presented to Hospital for Cesarean Section surgery on or about October 10,  
26 2020. Respondent and a CRNA were the anesthesia team responsible for Patient 4.

27           35. Pyxis documentation shows that Respondent withdrew 100 mcg fentanyl from Pyxis  
28 for Patient 4 at or around 8:48 a.m.

1 36. A total of 15 mcg fentanyl was given to Patient 4.

2 37. There is no documentation showing that any of the remaining 85 mcg fentanyl taken  
3 from Pyxis by Respondent was either administered to Patient 4 or disposed of as required.

4 **FIRST CAUSE FOR DISCIPLINE**

5 **(Gross Negligence)**

6 38. Respondent is subject to disciplinary action under sections 2227 and 2234, as defined  
7 by section 2234, subdivision (b), of the Code, in that he committed an act or acts of gross  
8 negligence in his care and treatment of Patient 1 and/or Patient 3, as more particularly alleged  
9 hereinafter:

10 39. Respondent failed to document the use and/or wasting of 100 mcg fentanyl he  
11 removed from Pyxis for Patient 1.

12 40. Respondent failed to document the use and/or wasting of 100 mcg fentanyl he  
13 removed from Pyxis for Patient 3.

14 **SECOND CAUSE FOR DISCIPLINE**

15 **(Repeated Negligent Acts)**

16 41. Respondent is further subject to disciplinary action under sections 2227 and 2234, as  
17 defined by section 2234, subdivision (c), of the Code, in that he committed repeated negligent  
18 acts in his care and treatment of Patient 1, Patient 2, Patient 3, and Patient 4, as more particularly  
19 alleged hereinafter:

20 42. Paragraphs 39 and 40, above, are hereby incorporated by reference as if fully set forth  
21 herein.

22 43. Respondent failed to document the use and/or wasting of 30 mg ketamine remaining  
23 from the ketamine he removed from Pyxis for Patient 1.

24 44. Respondent failed to document the use and/or wasting of 30 mg ketamine remaining  
25 from the ketamine he removed from Pyxis for Patient 2.

26 45. Respondent failed to document the use and/or wasting of 40 mg ketamine remaining  
27 from the ketamine he removed from Pyxis for Patient 3.

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3. Ordering Respondent Mustafa Ali, M.D., to pay the Board the costs of the investigation and enforcement of this case, and if placed on probation, the costs of probation monitoring; and

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

DATED: MAY 29 2024



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REJI VARGHESE  
Executive Director  
Medical Board of California  
Department of Consumer Affairs  
State of California  
*Complainant*