

Medical Board of California



Twenty-six years after California became the 31st state, the legislature passed the state's first Medical Practice Act and established the California Medical Board. Between 1876 and 1901, the board issued 8,535 certificates to practice medicine in California at a fee of \$5 each.

In 1913, the Board of Medical Examiners was established. It consisted of nine physicians and one public member. Responding to [numerous reports of quackery](#), the board developed an active enforcement department, which handled 26 cases of Medical Practice Act violations in 1913. Beginning in 1914, written examinations were given to physicians, surgeons and drugless practitioners. From 1918 to 1949, the board issued nine different classes of certificates based on these examinations, reciprocity or credentials.

Major targets of the board in the 1920s included anatomy museums, diploma mills and beauty specialists. After a long and bitter battle, the Board of Medical Examiners and other state and federal agencies forced the closure of museums of anatomy, which presented displays of life-size wax figures depicting alarming disease conditions designed to frighten visitors into a consultation with the doctor. In 1927, the "diploma mills" bill passed by the legislature made it a felony to file fraudulent credentials, enabling the board to take action in such cases. Finally, beauty specialists performed a variety of face peelings at the time, including brushing the face with carbolic acid solution or applying a paste composed of salicylic acid, biochloride of mercury or other equally dangerous poisons. Pressure from the board forced legislative action to regulate the practice of cosmetology in California.

Under the Medical Injury Compensation Reform Act enacted in 1975, a cap was placed on malpractice awards for non-economic damages, commonly referred to as pain and suffering. The legislation also created a more effective medical board charged with regulating the professions and disciplining those few physicians who drive higher malpractice rates for everyone else. Under MICRA, the board was reorganized to include 12 physicians and seven public members and renamed the Board of Medical Quality Assurance.

In the 1980s, continued fallout from Caribbean medical school issues resulted in legislation requiring the board to evaluate medical education around the world, including onsite inspections of educational programs in Mexico, the Philippines and England. The board was renamed the Medical Board of California on Jan. 1, 1990, in order to make it more accessible and user-friendly to ordinary citizens. In addition, the legislature changed the board's highest priority to consumer protection from physician rehabilitation. In 2008, the composition of the board changed to 15 members - eight physicians and seven public members — in order to increase the board's efficiency. Currently, [Hedy L. Chang](#) serves on the FSMB Board of Directors as a Director-at-Large.