

Jason East
8847 Minnie Circle
Elk Grove, CA 95624
(916) 717-8148

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Dr. Michael Hooper
Medical Director for Care Services and Innovation
UC Davis Health
4301 X Street
Sacramento, CA 95817

Patient Relations Department
UC Davis Health
2315 Stockton Blvd.
Sacramento, CA 95817

Department of Family and Community Medicine
UC Davis Health
4860 Y Street, Suite 1600
Sacramento, CA 95817

Dr. Anthony Jerant
Chair, Department of Family and Community Medicine
UC Davis Health
4860 Y Street, Suite 1600
Sacramento, CA 95817

Office of the Ombuds
Email: ombuds@ucdavis.edu

RE: Formal Complaint Regarding Medical Negligence, Patient Abandonment, and Disability Discrimination
JASON EAST Medical Record # 7742044

To Whom It May Concern,

I am writing to formally document and escalate serious concerns regarding my treatment under Dr. Justin Curole, a Primary Care Physician at UC Davis Health, who has also assumed responsibility for my chronic pain management. As a clinically disabled patient on SSDI due to a full spinal fusion from T2-S1 as well as spinal deformity, I rely on consistent and effective pain management to maintain basic quality

of life. However, Dr. Curole has consistently engaged in neglectful, unethical, and potentially unlawful practices, severely impacting my health and well-being.

Below, I outline the specific violations and the harm they have caused me (in no particular order of significance or chronology). I request immediate intervention to rectify these issues before further harm occurs.

1. Consistent Failure to Communicate and Neglect of Medical Duties

Dr. Curole has explicitly stated that he does not answer messages due to him not being paid for the task, forcing me into a monthly anxiety ridden struggle to obtain my legally prescribed medication. Each month, I notify Dr. Curole via the UC Davis office, or MyChart message, a full week prior to when my opioid prescription is due. However, since he does not read messages, the month's prescription is often not filled until the day or day before it is due, after multiple messages (via both MyChart and calling into the office) from myself, my wife, Stacey East, and even my UC Davis patient advocate, Keri Halford, who has expressed her own frustration with Dr. Curole and called every month a "fight" in order to receive my pain medication. As an individual with clinically diagnosed General Anxiety Disorder and Depression, these days of waiting, uncertain of the actions of my doctor because of his communication silence, are simply tortuous. I rely on pain medication for basic life functions and this period of limbo with no communication or confirmation from my doctor often will send me into tremendous worry, hyper focused thoughts, depression, inability to sleep, and a decrease in my day to day functionality. This concern has explicitly been brought to Dr. Curole's attention repeatedly by my wife during multiple office visits.

One such example of this scenario, that had awful consequences, was back in July 2023 where Dr. Curole waited until the early evening (after 5pm) to fill my pain medication prescription. When I went to the pharmacy to pick it up, they indicated that they were out of stock and the prescription needed to be called to another pharmacy. Since it was a Friday evening, there was no one to get a hold of at UC Davis, let alone Dr. Curole. My wife and I ended up spending that night in the ER, only to have to come back the following day since the prescription was never successfully filled, as no one could get a hold of Dr. Curole. During this entire process, that had us in the ER waiting for over 9 hours, I was continuously treated as a drug seeker, despite my medical record of opioid use and my wife being there the entire time relaying the entire situation to each individual that spoke with us. It was the worst mistreatment of my entire life, as I am a chronic pain patient, not a drug addict. It was traumatic. I should have NEVER been put in this situation by Dr. Curole.

Violations:

- - Medical Neglect – Failing to provide continuous and necessary care.
- - Patient Abandonment – A doctor cannot ignore a patient's urgent medical needs.
- - Americans with Disabilities Act (ADA) Violation – Hindering my ability to access healthcare due to my disability.

2. Forced Retrying of a Dangerous Medication Despite Severe Side Effects

Dr. Curole forced me to take buprenorphine (Suboxone) twice, despite the fact that it caused me to black out repeatedly. The second time he prescribed it, I was using a sander, lost consciousness, and sustained scars on my arm from the tool cutting into my skin.

During an in-person visit in December 2024, I showed him my injuries, with my wife and a pain pharmacist, Dr. Mariya Kotova, present as witnesses. Despite this, my concerns were dismissed and the medication was continued as a viable source of my pain management regimen, and this information about my injury was never added to my medical report.

Violations:

- - Medical Malpractice – Ignoring dangerous side effects.
- - Failure to Obtain Proper Informed Consent – Forcing a patient to retry a medication that caused harm.
- - Failure to Adjust Treatment – Ignoring clear medical evidence of harm.

3. Mismanagement of Opioid Prescriptions Leading to Withdrawal & Suicidal Thoughts

In August 2024, Dr. Curole deliberately misrepresented opioid equivalencies, claiming that Norco was equal to Oxycodone, and reduced my dose without medical justification. This resulted in extreme pain and withdrawal, which led to suicidal thoughts—a fact that I explicitly reported to him in My Chart, as well as in person.

Violations:

- - Gross Medical Negligence – Mismanaging opioid therapy and causing a preventable withdrawal crisis.
- - Medical Malpractice – Misrepresenting medication equivalencies and reducing dosage without informed consent.
- - Mental Health Endangerment – Ignoring a patient's report of suicidal thoughts.

4. Dangerous & Inconsistent Prescription Practices Leading to Withdrawal Episodes

Dr. Curole has approved 12 extra pills per month for breakthrough pain. However, in February 2025, it was indicated to myself and my wife by our CVS pharmacist that the extra amount or “early fill” would no longer be allowed since it went over the 180 pills per 30 days that the pharmacy was implementing and enforcing as their policy. We informed Dr. Curole of this change, indicating to him that something needed to be figured out before the next refill. He said he would take care of it, call CVS Pharmacy, and find out if he could get an early release. We NEVER heard a response from him regarding this situation, so breakthrough medication was used throughout the month and the refill request was requested at the normal time. However, the pharmacy held

firm, indicating that they had let Dr. Curole know about this change, and refused to fill my prescription early to account for the breakthrough pain medication that had been prescribed to me. This situation caused me to suffer withdrawal from oxycodone for 24 hours.

Violations:

- - Failure to Ensure Continuity of Care – Doctors must prevent withdrawal when adjusting medication regimens.
- - Reckless Prescription Mismanagement – Granting extra medication without adjusting refill schedules.
- - Patient Endangerment – Causing withdrawal through medical mismanagement.

5. Involvement of Pain Pharmacist Mariya Kotova in Unsafe Treatment Decisions

In November 2023, Mariya Kotova, a pain pharmacist involved in my care, initially expressed concerns about me taking buprenorphine, since it had significant and dangerous side effects for me. However, in August, 2024, during a joint meeting with my wife, Dr. Curole, and myself, she did not contest his decision to force me to try the medication again, despite my history of blacking out from it.

Since my second round with buprenorphine also resulted in dangerous situations with my blood pressure, and even injury due to blacking out, Dr. Curole has now placed me on a low-dose buprenorphine patch instead of increasing my oxycodone dosage. This prescription is despite knowing that I continue to experience blackouts. His justification is that buprenorphine will activate once my oxycodone wears off. I have repeatedly informed him that I am still blacking out, yet instead of discontinuing the dangerous medication or adjusting my oxycodone appropriately, he instructed me to place tape over the patch to reduce its effect.

This reckless decision places my life at risk. Rather than properly adjusting my pain regimen to keep me safe, Dr. Curole would rather I endure dangerous blackouts than increase my oxycodone dose by 10mg. This is inhumane and medically indefensible. The pain pharmacist, despite her initial concerns, has been complicit in these unsafe prescribing decisions, allowing this mistreatment to continue unchecked.

Violations:

- - Reckless Endangerment – Persisting with a medication that causes blackouts, creating a severe fall risk.
- - Medical Negligence – Ignoring patient-reported adverse effects and continuing dangerous treatment.
- - Failure to Adhere to Safe Prescribing Practices – Forcing a dangerous alternative rather than adjusting an existing safe and effective regimen.
- - Complicity in Medical Malpractice – The pain pharmacist failed to intervene in an unsafe prescribing decision.

Requested Actions

1. Immediate Review & Investigation of Dr. Curole's treatment practices.
2. Assignment to a New Pain Management Specialist or Primary Care Physician who understands chronic pain and opioid therapy.
3. Official Written Response explaining how these issues will be addressed.
4. Corrective Action Against Dr. Curole for failing to meet the standard of care.
5. Immediate Discontinuation of the Dangerous Buprenorphine Patch and Adjustment of My Pain Management Plan to Avoid Further Harm.
6. Accountability for Pain Pharmacist Mariya Kotova's Complicity in Unsafe Prescribing Decisions.

I expect timely intervention on this matter. If no action is taken, I will escalate this complaint to the State Medical Board, the Office for Civil Rights (OCR) under the Department of Health and Human Services, and seek legal counsel for disability discrimination and medical negligence.

Sincerely,

Jason East