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11 **UNITED STATES DISTRICT COURT**  
12 **CENTRAL DISTRICT OF CALIFORNIA**

13 JACQUELINE PALMER, et al., ) Case No.: 5:23-cv-01047-JGB-SP  
14 Plaintiffs, )  
15 v. ) **MEMORANDUM IN SUPPORT**  
16 ) **OF PLAINTIFFS’ MOTION**  
17 ) **FOR SUMMARY JUDGMENT**  
18 )  
19 ) Date: April 21, 2025  
20 ) Time: 9:00 a.m.  
21 ) Courtroom: 1, Riverside  
22 ) Judge: Hon. Jesus G. Bernal  
23 ) Trial Date: June 24, 2025  
24 ) Action Filed: June 6, 2023  
25 )  
26 )  
27 )  
28 )

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1 **INTRODUCTION**

2 Plaintiffs Jacqueline Palmer, Heather Lewis, and Rodolfo Jaravata  
3 Hanson have put in years of clinical practice and coursework to earn their  
4 doctorates in nursing practice. It is the pinnacle of their profession—the  
5 highest advanced degree in nursing. They are truthfully and  
6 unequivocally “doctors” of nursing. This case challenges the state’s  
7 criminalization of their truthful use of the title “Dr.” and term “doctor.”  
8 These are common terms that a wide variety of professions employ  
9 without sanction—from dentists to professors to physical therapists.  
10 Nevertheless, the statute criminalizes this truthful speech by Doctors of  
11 Nursing Practice, even when it is accompanied by a disclosure that one  
12 is not a physician—both in- and outside of a healthcare setting. *See Cal.*  
13 *Bus. & Prof. Code § 2054.*

14 This case is not about semantics; it concerns reining in Defendants’  
15 power to threaten the livelihoods of healthcare professionals like  
16 Plaintiffs, who seek to truthfully state their earned credentials.  
17 Defendants have already unleashed this power on another nurse  
18 practitioner, chilling the truthful speech of Plaintiffs and others who fear  
19 the loss of their nursing license. The First Amendment does not allow the  
20 state to bully these Doctors of Nursing Practice into suppressing their  
21 speech. Plaintiffs’ Motion for Summary Judgment should be granted.

22 **BACKGROUND**

23 **I. Legal Background**

24 *Cal. Bus. & Prof. Code § 2054*

25 Under the California Medical Practice Act, no person may use the  
26 title “Dr.” or term “doctor” to refer to themself unless licensed as a  
27 physician or surgeon. This title restriction, *Cal. Bus. & Prof. Code*  
28 *§ 2054(a)* provides, in relevant part:

1 Any person who uses in any sign, business card, or letterhead,  
2 or, in an advertisement, the words “doctor” . . . the letters or  
3 prefix “Dr.,” . . . or any other terms or letters indicating or  
4 implying that the person is a physician and surgeon . . .  
5 without having at the time of so doing a valid, unrevoked, and  
6 unsuspended certificate as a physician and surgeon under  
7 this chapter, is guilty of a misdemeanor. No person shall use  
8 the words “doctor” or “physician,” the letters or prefix “Dr.,”  
9 . . . or any other terms or letters indicating or implying that  
10 the person is a physician and surgeon . . . in a health care  
11 setting that would lead a reasonable patient to determine that  
12 person is a licensed “M.D.” or “D.O.”

9 On its face, section 2054(a) sweeps in its ambit an array of  
10 professionals who are not physicians or surgeons but who still can  
11 truthfully (and regularly) call themselves “Dr.”: psychologists (PsyD),  
12 pharmacists (PharmD), naturopaths (ND), physical therapists (DPT),  
13 and Ph.Ds (including honorary Ph.Ds). Those professionals, and others,  
14 frequently—and truthfully—use “Dr.” in their professional names, in and  
15 outside of their workplaces.<sup>1</sup> In addition to Defendants’ enforcement of  
16 the law against Doctors of Nursing Practice (DNPs), separate inquiries  
17 from the California Board of Behavioral Sciences and the California  
18 Board of Psychology to the Medical Board of California suggest that other  
19 healthcare licensing boards are concerned about the reach of section 2054  
20 against their licensees. Pls’ SUF 3.

21 *SB 1451*

22 In September 2024, section 2054(a) was amended to allow Doctors of  
23 Osteopathy (D.O.) to use the title “Dr.” or the term “doctor” without  
24 running afoul of the law, and a sentence was added to restrict use of the  
25

26 <sup>1</sup> Plaintiffs do not challenge section 2054(a)’s restriction on the use of the  
27 terms “M.D.,” “D.O.,” “physician,” or any other terms indicating a medical  
28 specialty. The challenge here is only to the prohibition against using the  
more generic “Dr.” or “doctor.”



1 title “Dr.” or term “doctor” in any “healthcare setting.”<sup>2</sup> Prior to these  
2 amendments, it was only illegal “in any sign, business card, or letterhead,  
3 or in an advertisement.” Pls’ SUF 4, 5. Accordingly, the amendments both  
4 expand and contract allowable speech. As to the former, section 2054 now  
5 allows D.O.s to call themselves “Dr.” without violating the law. As to the  
6 latter, it now explicitly prohibits non-commercial speech. In all respects,  
7 the current statute bans and punishes Plaintiffs from engaging in  
8 truthful speech.

## 9 **II. Factual and Procedural Background**

### 10 *Plaintiffs*

11 Plaintiffs Jacqueline Palmer, Heather Lewis, and Rodolfo Jaravata  
12 Hanson are hardworking, dedicated nurse practitioners licensed by the  
13 California Board of Registered Nursing. Pls’ SUF 8, 22, 38. Each holds a  
14 DNP from an accredited institution. Pls’ SUF 7, 21, 37. A DNP is the  
15 highest “terminal” degree in the nursing profession. *See American Ass’n*  
16 *of Colleges of Nursing: AACN Fact Sheet, “What is the Doctor of Nursing*  
17 *Practice?”*<sup>3</sup> When introducing themselves to patients, they always  
18 disclose that they are nurse practitioners. Pls’ SUF 18, 29, 50.

19 Dr. Jacqueline Palmer began her nursing career in 2003 as a  
20 Licensed Vocational Nurse. Pls’ SUF 9. She earned a bachelor’s and three  
21 master’s degrees in nursing, finally achieving a DNP in 2020. Pls’ SUF  
22 10–11, 13. Dr. Palmer began working as a family nurse practitioner

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23  
24 <sup>2</sup> During the legislative debate on SB 1451, Defendant Melby asserted  
25 that she would support the bill if it allowed individuals with a terminal  
26 degree—like Plaintiffs—to truthfully use the “Dr.” identifier “regardless  
27 of setting” so long as they also disclosed their profession or specialty. Pls’  
28 SUF 6. Ultimately, the Legislature rejected that position.

<sup>3</sup> *Available at* <https://www.aacnnursing.org/news-data/fact-sheets/dnp-fact-sheet>.

1 (FNP) in 2018. Pls' SUF 12. Between 2020, when she earned her DNP,  
2 and 2023, in the family practice clinic where she worked, Dr. Palmer wore  
3 a clinician's jacket embroidered with her name, "Dr. J. Palmer, FNP-C."  
4 Pls' SUF 14. She typically signed her name on official clinic documents  
5 with the title "Dr.," always qualified by "FNP" as a post-nominal. Pls'  
6 SUF 16. During this period from 2020 to 2023, she introduced herself to  
7 patients with, "I'm Dr. Jacqueline Palmer. I'm a nurse practitioner." Pls'  
8 SUF 15.

9 Dr. Heather Lewis began her nursing career as a Licensed  
10 Vocational Nurse in 1993. Pls' SUF 23. In 2014 and 2016, Dr. Lewis  
11 earned Master's degrees in Nursing Education and Family Nursing  
12 Practice, respectively. Pls' SUF 24–25. She graduated with her DNP in  
13 May of 2023. Pls' SUF 21. While working toward her DNP, Dr. Lewis  
14 continued to work as a nurse practitioner at two different clinics, one in  
15 bariatric surgery and one in chiropractic. Pls' SUF 26. Several of her  
16 patients encouraged her to use the title "Dr." once she earned her degree.  
17 Pls' SUF 30.

18 Dr. Rodolfo Jaravata Hanson emigrated from the Philippines to the  
19 United States in 2007. Pls' SUF 39. He began his nursing career in 2017  
20 in the intensive care unit. Pls' SUF 43. Between 2018 and 2019, Dr.  
21 Hanson studied to obtain his Master's in Family Nursing Practice while  
22 working in intensive care. Pls' SUF 44. From May 2021 to May 2023,  
23 Dr. Hanson pursued his DNP while working as an FNP in neurosurgery  
24 and then in pre-anesthesia. Pls' SUF 46. Dr. Hanson currently works in  
25 an ambulatory pre-anesthesia clinic, where he ensures that pre-surgical  
26 patients are safe to undergo anesthesia before surgery. Pls' SUF 48–49.

27 In 2021, while Dr. Hanson was studying for his DNP, he made plans  
28 to open an esthetics clinic. Pls' SUF 86. To that end, he purchased a

1 website and intended to advertise his services using the full extent of his  
2 credentials. *Id.* Dr. Hanson believes that patients have the right to know  
3 that he has worked to the highest degree in his profession and that this  
4 information assures patients of the quality of his services. Pls’ SUF 55–  
5 56. However, because he now fears breaking the law, he has put his  
6 esthetic clinic plans on hold. Pls’ SUF 87.

7 *The State Cracks Down on a Fellow DNP, Sarah Erny*

8 According to an Accusation filed by Defendant Bonta on behalf of  
9 Defendant Melby and the Board of Registered Nursing, on or around  
10 August 30, 2019, the Medical Board of California received a complaint  
11 that a DNP named Sarah Erny “was representing to patients that she  
12 was a medical doctor” in violation of section 2054(a). Pls’ SUF 58–59.

13 Following the nursing board’s Accusation, the District Attorney for  
14 San Luis Obispo County filed a Complaint for Injunction, Civil Penalties  
15 and Other Equitable Relief against Dr. Erny, seeking to enjoin her from  
16 using “Dr.” or “doctor” Pls’ SUF 60. The Complaint contained no  
17 allegation of injury, confusion, or any other harm to any person or the  
18 public. Pls’ SUF 61. On the facts forming the basis of a section 2054  
19 violation, the Complaint bootstrapped claims of unfair or fraudulent  
20 business practice, false advertising, and unprofessional conduct. Pls’ SUF  
21 62. Within a week of filing, the District Attorney extracted a settlement  
22 of \$19,750 in civil penalties against Dr. Erny, \$16,000 of which went to a  
23 “Consumer Protection Trust Fund” for the San Luis Obispo County D.A.’s  
24 office, and \$3,750 for investigative costs. Pls’ SUF 64. Dr. Erny was  
25 ordered to scrub the internet of all reference to her as “Dr.” for five years,  
26 initially on a monthly basis. Pls’ SUF 65.

27 On January 4, 2023, the medical board issued a Citation Order  
28 against Dr. Erny for using “Dr.” without having a valid certificate as a

1 physician and surgeon. Pls’ SUF 66. The citation ordered her to pay  
2 \$2,500 and to “immediately cease and desist the use of the initials ‘Dr.’”  
3 Pls’ SUF 66–67.

4 *Plaintiffs Fear Enforcement of Section 2054 Against Them*

5 After news of the actions against Dr. Erny spread through the nurse  
6 practitioner community, Plaintiffs grew very concerned; all stopped using  
7 “Dr.” even with their disclosures that they were DNPs. For example, Dr.  
8 Palmer hung up her clinician’s jacket, Pls’ SUF 69; Dr. Lewis never used  
9 the business cards imprinted with “Dr. Heather Lewis, FNP-C,” Pls’ SUF  
10 75; and Dr. Hanson put a halt on his plans for an esthetics clinic because  
11 he wanted to be able to use the title “Dr.” on his website and in his clinic.  
12 Pls’ SUF 87. Plaintiffs feared their speech would be punished and they  
13 did not—and do not—want to break the law. Pls’ SUF 69, 75, 77, 85, 87.

14 If it were legal to do so, all Plaintiffs would use the title “Dr.” in  
15 conjunction with the disclosure to patients and others that they are nurse  
16 practitioners—a disclosure they make and have always made. Pls’ SUF  
17 15, 18, 29, 50, 53.

18 On June 6, 2023, Plaintiffs filed their original complaint challenging  
19 section 2054 on its face and as applied to them. ECF 1. Defendants moved  
20 to dismiss. ECF 19. The Court denied the motion as to Plaintiff Palmer  
21 and granted it as to Plaintiffs Lewis and Hanson on the grounds that the  
22 Complaint had not alleged facts sufficient to satisfy a “concrete plan” for  
23 purposes of standing. ECF 35. The Court granted leave to amend the  
24 Complaint. Plaintiffs filed an Amended Complaint on September 25,  
25 2023, ECF 36, and Defendants filed an Answer on October 13, 2023, ECF  
26 37.

27 ///

28 ///

1 **LEGAL STANDARD**

2 Absent a “genuine dispute as to any material fact,” summary  
3 judgment is proper when the “movant is entitled to judgment as a matter  
4 of law.” Fed. R. Civ. P. 56(a). The moving party bears the burden to show  
5 the undisputed material facts relevant to the legal claim. *Celotex Corp. v.*  
6 *Catrett*, 477 U.S. 317, 323 (1986). *See also Anderson v. Liberty Lobby,*  
7 *Inc.*, 477 U.S. 242, 250 (1986) (movant must show that “under the  
8 governing law, there can be but one reasonable conclusion as to the  
9 verdict.”).

10 After the moving party satisfies its burden, the non-moving party  
11 must show that there is a genuine issue of material fact that requires  
12 resolution at trial. *Celotex*, 477 U.S. at 324. “The non-moving party must  
13 make an affirmative showing on all matters placed at issue by the motion  
14 as to which it has the burden of proof at trial.” *C.B. v. Moreno Valley*  
15 *Unified Sch. Dist.*, 732 F.Supp.3d 1139, 1155 (C.D. Cal. 2023) (citing  
16 *Celotex*, 477 U.S. at 322; *Anderson*, 477 U.S. at 252). The non-moving  
17 party’s burden “is not a light one” and requires showing “more than the  
18 mere existence of a scintilla of evidence.” *In re Oracle Corp. Sec. Litig.*,  
19 627 F.3d 376, 387 (9th Cir. 2010) (citing *Anderson*, 477 U.S. at 252).

20 The evidence is construed in the light most favorable to the non-  
21 moving party. *Barlow v. Ground*, 943 F.2d 1132, 1134 (9th Cir. 1991). A  
22 genuine issue of material fact exists when “the evidence is such that a  
23 reasonable jury could return a verdict for the non-moving party.”  
24 *Anderson*, 477 U.S. at 248. Thus, “summary judgment for the moving  
25 party is proper when a ‘rational trier of fact’ would not be able to find for  
26 the non-moving party.” *C.B.*, 732 F.Supp.3d at 1155 (quoting *Matsushita*  
27 *Elec. Indus. Co. v. Zenith Radio Corp.*, 475 U.S. 574, 587, 599 (1986)).

28 ///

1 **ARGUMENT**

2 **I. PLAINTIFFS HAVE STANDING**

3 This Court previously found that Plaintiff Palmer had alleged facts  
4 that, if proven, would establish standing. ECF 35. She has now provided  
5 evidence to establish those facts. While the Court initially found that  
6 Plaintiffs Lewis and Hanson had not sufficiently alleged facts that would  
7 establish standing, *id.*, this Court granted Plaintiffs leave to amend their  
8 complaint, which they timely did, *see* ECF 36, to include allegations that  
9 would establish standing. Those allegations are now backed up by  
10 evidence. All three Plaintiffs have standing.

11 To establish standing, a plaintiff must demonstrate: (1) a concrete  
12 and particularized injury to a legally protected interest; (2) that the  
13 injury is fairly traceable to the defendant’s actions; and (3) is likely to be  
14 redressed by a favorable decision. *Lujan v. Defenders of Wildlife*, 504 U.S.  
15 555, 560–61 (1992).

16 **A. Plaintiffs Are Injured by Section 2054(a)**

17 In pre-enforcement actions, a plaintiff need not allege that she has  
18 violated the law or been punished for doing so; a plaintiff need only  
19 demonstrate that the statute’s operation or enforcement presents “a  
20 realistic danger of sustaining a direct injury.” *Babbitt v. United Farm*  
21 *Workers Nat’l Union*, 442 U.S. 289, 298 (1979). Here, Plaintiffs need not  
22 first suffer a direct injury by violating section 2054 and awaiting  
23 enforcement by Defendants. *See Arizona Right to Life Political Action*  
24 *Committee v. Bayless*, 320 F.3d 1002, 1006 (9th Cir. 2000) (*ARLPAC*).

25 Instead, a plaintiff’s injury can be established by self-censoring due  
26 to a well-founded fear of enforcement. *ARLPAC*, 320 F.3d at 1006. Self-  
27 censorship is a “harm that can be realized even without an actual  
28 prosecution”; the harm is created by the operation of the statute itself.

1 *Virginia v. Am. Booksellers Ass’n, Inc.*, 484 U.S. 383, 393 (1988); *see also*  
2 *Human Life of Wash. Inc. v. Brumsickle*, 624 F.3d 990, 1001 (9th Cir.  
3 2010). A plaintiff can establish injury in a pre-enforcement challenge by  
4 showing that she has altered her speech to comply with the statute and  
5 by alleging apprehension about enforcement. *Santa Monica Food Not*  
6 *Bombs v. City of Santa Monica*, 450 F.3d 1022, 1034 (9th Cir. 2006).

7 To demonstrate self-censorship based on a well-founded fear of  
8 enforcement, a plaintiff must allege: 1) a concrete plan to violate the  
9 challenged law; 2) a specific warning or threat of enforcement; and/or 3)  
10 a history of past enforcement under the statute. *Libertarian Party of Los*  
11 *Angeles County v. Bowen*, 709 F.3d 867, 870 (9th Cir. 2013) (*LPLAC*). Not  
12 all factors are required for a court to find standing. *See, e.g., id.* at 872  
13 (standing despite no history of past enforcement); *Wolfson v. Brammer*,  
14 616 F.3d 1045, 1060 (9th Cir. 2010) (giving “little weight” to the history  
15 of past enforcement). Plaintiffs have plainly established all three here.

16 1. *Plaintiffs have a concrete plan to violate the law*

17 As this Court previously held, Plaintiff Palmer has a “concrete plan”  
18 because “she *was* violating the law and can readily resume doing so.” ECF  
19 35 at 7 (original emphasis). Plaintiff Palmer’s testimony, along with  
20 evidence produced in discovery, confirms that she has referred to herself  
21 as “Dr. Palmer, FNP” and wore a clinician’s jacket with “Dr. J. Palmer,  
22 FNP-C” embroidered on it, but since learning about Defendants’  
23 enforcement of section 2054(a) she has asked others not to refer to her as  
24 “Dr.” and has stopped referring to herself and signing her name as “Dr.”  
25 Pls’ SUF 14–16; 69–71. Palmer also confirms that she would again refer  
26 to herself as “Dr.” should section 2054(a) be enjoined. Pls’ SUF 20, 72.  
27 Thus, Plaintiff Palmer “has specified ‘when, to whom, where, or under  
28 what circumstances’ she intends to violate” section 2054. ECF 35 at 7

1 (quoting *Thomas v. Anchorage Equal Rights Comm’n*, 220 F.3d 1134,  
2 1139 (9th Cir. 2000) (en banc)).

3 While this Court previously held that Plaintiffs Lewis and Hanson  
4 had not sufficiently alleged a concrete plan, ECF 35 at 7–8, the facts  
5 alleged in the Amended Complaint—and subsequent evidence introduced  
6 to prove those allegations—amply satisfy Article III. For example, Dr.  
7 Lewis would use the business cards she already imprinted with “Dr.  
8 Heather Lewis, FNP-C,” and she would return to using that name in her  
9 social media accounts. Pls’ SUF 74–80. Dr. Hanson would return to his  
10 plans for an esthetic clinic, including his website where he wishes to use  
11 the title “Dr.” and otherwise use the title “Dr.” truthfully. Pls’ SUF 84,  
12 88. Using “doctor” is important to him because he believes it conveys a  
13 message to patients that his hard work translates into high quality at  
14 the top of his field. Pls’ SUF 56.

15 2. *Plaintiffs face a realistic threat of enforcement*

16 A plaintiff is not required to face direct threats of enforcement to  
17 demonstrate standing. *LSO, Ltd. v. Stroh*, 205 F.3d 1146, 1154 (9th Cir.  
18 2000). In fact, pre-enforcement challenges implicating the First  
19 Amendment loosen the rigid standing requirements, particularly the  
20 threat-of-enforcement requirement. *California Pro-Life Council v.*  
21 *Getman*, 328 F.3d 1088, 1094 (9th Cir. 2003) (rejecting district court’s  
22 interpretation of *Thomas* as requiring a specific enforcement warning to  
23 plaintiff); *LSO, Ltd.*, 205 F.3d at 1155. That is because, as this Court  
24 previously noted, “self-censorship is a constitutionally recognized injury.”  
25 ECF 35 at 8 (citing *Wolfson*, 616 F.3d at 1059). And “[e]specially where  
26 protected speech may be at stake, a plaintiff need not risk prosecution in  
27 order to challenge a statute.” *Wolfson*, 616 F.3d at 1059–60.



1 Likewise, when the state fails to disavow an intent to enforce the  
2 law, courts typically find a plaintiff’s fear understandably “real.” Failure  
3 to disavow gives substance to a plaintiff’s fears. *American-Arab Anti-*  
4 *Discrimination Comm. v. Thornburgh*, 970 F.2d 501, 508 (9th Cir. 1991).  
5 *See Am. Booksellers*, 484 U.S. at 393 (where state had not disavowed  
6 enforcement, Court found “no reason to assume otherwise.”).

7 Here, Plaintiffs have all testified that they have self-censored from  
8 using “doctor” and “Dr.” to refer to themselves because they fear legal  
9 action by Defendants. Pls’ SUF 69–71, 75, 77, 79, 82, 87. This fear is  
10 reasonable because Defendants have not disavowed enforcement against  
11 them or other DNPs. The speech prohibitions in section 2054(a) are  
12 statutorily mandated and were recently reaffirmed by the legislature.  
13 ECF 35 at 8 (threat of enforcement “inherent in the challenged statute”);  
14 SB 1451 (Cal. 2024). Defendants even participated in SB 1451’s  
15 legislative efforts, Pls’ SUF 6, thus confirming an active interest in  
16 enforcing the law. *See Dombrowski v. Pfister*, 380 U.S. 479, 494 (1965)  
17 (“So long as the statute remains available to the State the threat of  
18 prosecutions of protected expression is a real and substantial one.”).

19 3. *Defendants have a history of enforcing section 2054(a)*

20 In *303 Creative LLC v. Elenis*, the Supreme Court held that one  
21 instance (several years prior) of past enforcement was sufficient to confer  
22 standing on a website designer who challenged a Colorado law  
23 prohibiting discrimination based on sexual orientation. 600 U.S. 570, 589  
24 (2023). *See also 303 Creative LLC v. Elenis*, 6 F.4th 1160, 1173 (10th Cir.  
25 2021). Even with *no* history of enforcement, both the Supreme Court and  
26 the Ninth Circuit have found standing for pre-enforcement First  
27 Amendment plaintiffs. *See Am. Booksellers*, 484 U.S. at 393 (absent a  
28 history of enforcement, Court found “no reason” to assume the new law

1 would not be enforced); *LPLAC*, 709 F.3d at 872 (lack of history of  
2 enforcement is “not dispositive” in standing inquiry); *Bland v. Fessler*, 88  
3 F.3d 729, 737 (9th Cir. 1996) (finding standing although Attorney  
4 General had never enforced the challenged statute).

5 Here, it is undisputed that Defendants have enforced section  
6 2054(a) against nurse practitioners with DNPs exactly like the plaintiffs  
7 here. See Pls’ SUF 58–67. The prosecution of Sarah Erny by Defendants  
8 in *three* separate actions demonstrates their recent commitment to  
9 enforce the law. As a result, Plaintiffs have self-censored. Pls’ SUF 69–  
10 71, 75, 77, 79, 82, 87. Defendants’ history of enforcement is more than  
11 sufficient to establish Plaintiffs’ standing.

12 **B. Plaintiffs’ Injury Is Traceable to Defendants**

13 Establishing traceability requires a plaintiff to show “a causal  
14 connection between the injury and the conduct complained of . . . and not  
15 the result of the independent action of some third party not before the  
16 court.” *Lujan*, 504 U.S. at 560. Because of Defendants’ enforcement of  
17 section 2054(a), Plaintiffs have self-censored from referring to  
18 themselves as “doctor” and “Dr.” Pls’ SUF 69–71, 75, 77, 79, 82, 87.  
19 Defendant Bonta, as chief law enforcement officer, and Defendant  
20 Lawson, as President of the Medical Board of California, have authority  
21 to enforce section 2054(a), and have recently done so. ECF 36-2; ECF 36-  
22 4. Should Plaintiffs (or any other California-licensed DNP) be prosecuted  
23 under section 2054(a), then Defendant Melby, as the Executive Officer of  
24 the California Board of Registered Nursing, can take disciplinary action  
25 against nurses and has also done so recently. ECF 36-1.

26 **C. Plaintiffs’ Injury Is Redressable by a Favorable Decision**

27 Establishing redressability requires a plaintiff to show that it is  
28 “likely, as opposed to merely speculative, that the injury will be redressed

1 by a favorable decision.” *Lujan*, 504 U.S. at 561. Plaintiffs’ burden on this  
2 point is “relatively modest.” *Bennett v. Spear*, 520 U.S. 154, 171 (1997).  
3 Plaintiffs “need not demonstrate that there is a ‘guarantee’ that [their]  
4 injuries will be redressed by a favorable decision,” *Renee v. Duncan*, 686  
5 F.3d 1002, 1013 (9th Cir. 2012) (quoting *Graham v. FEMA*, 149 F.3d 997,  
6 1003 (9th Cir. 1998)); instead, they need only “show a ‘substantial  
7 likelihood’ that the relief sought would redress the injury.” *Mayfield v.*  
8 *United States*, 599 F.3d 964, 971 (9th Cir. 2010). Here, should this Court  
9 declare section 2054(a) unconstitutional and enjoin Defendants from  
10 enforcing it against Plaintiffs, then Plaintiffs’ injury will be redressed,  
11 and they will be able to refer to themselves as “doctor” and “Dr.” without  
12 fear of prosecution or penalty.

## 13 **II. SECTION 2054(a) VIOLATES THE FIRST AMENDMENT**

14 Section 2054(a) prohibits anyone who does not possess a “valid,  
15 unrevoked, and unsuspended certificate as a physician and surgeon”  
16 issued by the Medical Board of California from using the term “doctor” or  
17 “Dr.” Cal. Bus. & Prof. Code § 2054(a). That prohibition applies to  
18 individuals like Plaintiffs who have obtained DNPs and who inform  
19 patients of their exact role on the patient’s health care team. Pls’ SUF 18,  
20 29, 50. *See also* Cal. Bus. & Prof. Code § 2278. Section 2054(a) thus  
21 restricts truthful speech, depriving individuals of their right to speak  
22 freely, as protected by the First Amendment to the U.S. Constitution. *See*  
23 *Reed v. Town of Gilbert*, 576 U.S. 155, 163 (2015) (First Amendment  
24 incorporated against the states through the Fourteenth Amendment).

25 Because section 2054(a) restricts speech based on the content of the  
26 speech and the identity of the speaker, it is subject to strict scrutiny.  
27 When applied to DNP-holders like Plaintiffs, the ban on truthful speech  
28

1 fails. Even if section 2054(a) restricts only “commercial” speech and is  
2 subject to less than strict scrutiny, it is still unconstitutional.

3 **A. Section 2054(a) Is an Unconstitutional Content- and**  
4 **Speaker-Based Restriction**

5 1. *Section 2054(a) is a content-based speech restriction*

6 Content-based restrictions on speech “target speech based on its  
7 communicative content.” *Reed*, 576 U.S. at 163. A content-based  
8 restriction is “presumptively unconstitutional and may be justified only  
9 if the government proves that [it is] narrowly tailored to serve compelling  
10 state interests.” *Id.* Strict scrutiny “reflects the fundamental principle  
11 that governments have ‘no power to restrict expression because of its  
12 message, its ideas, its subject matter, or its content.’” *Nat’l Inst. of Family*  
13 *& Life Advocates v. Becerra*, 585 U.S. 755, 766 (2018) (quoting *Police Dep’t*  
14 *of Chicago v. Mosley*, 408 U.S. 92, 95 (1972)).

15 Section 2054(a) is content-based because it prohibits individuals  
16 from referring to themselves as “doctor” or “Dr.” unless they are a  
17 physician or surgeon. This is a hornbook example of a content-based  
18 speech restriction, because what is banned turns on the words used—i.e.  
19 their content. For example, Plaintiffs can truthfully refer to themselves  
20 as nurse practitioners, but as soon as they use the word “doctor” they are  
21 punished. As a result, section 2054(a) “alters the content of the speech”  
22 by individuals like Plaintiffs who possess doctorate degrees but are not  
23 physicians or surgeons. *See Riley v. Nat’l Fed. of the Blind of N. Carolina,*  
24 *Inc.*, 487 U.S. 781, 795 (1988).

25 2. *Section 2054(a) is a speaker-based speech restriction*

26 “In the realm of private speech or expression, government  
27 regulation may not favor one speaker over another.” *Rosenberger v.*  
28 *Rector and Visitors of Univ. of Va.*, 515 U.S. 819, 828 (1995). Laws

1 reflecting governmental preference for favored speakers, or restricting  
2 speech by disfavored speakers, are subject to strict scrutiny. *Turner*  
3 *Broad. Sys., Inc. v. Fed. Commc’ns Comm’n*, 512 U.S. 622, 658 (1994);  
4 *Sorrell v. IMS Health, Inc.*, 564 U.S. 552, 564–65 (2011). Laws targeting  
5 certain speakers suffer from the same core “vice of content-based  
6 legislation [which] is not that it is always used for invidious, thought-  
7 control purposes, but that it lends itself to use for those purposes.” *Reed*,  
8 576 U.S. at 167 (cleaned up); *see also Citizens United v. Fed. Election*  
9 *Comm’n*, 558 U.S. 310, 340 (2010) (speaker-based restrictions are all too  
10 often simply a means to control content).

11 Section 2054(a) is speaker-based because it restricts usage of the  
12 term “doctor” and title “Dr.” by all but physicians and surgeons. All others  
13 using the term or title—at least in the healthcare context—are subject to  
14 prosecution. Cal. Bus. & Prof. Code § 2054(a). Thus, section 2054(a)  
15 reflects the government’s “aversion” to anyone but physicians and  
16 surgeons calling themselves “doctor” in the healthcare setting. *See*  
17 *Turner*, 512 U.S. at 658.

18 3. “Commercial” speech is not implicated in this case

19 “Commercial” speech is that which “does no more than propose a  
20 commercial transaction.” *44 Liquormart, Inc. v. Rhode Island*, 517 U.S.  
21 484, 518 (1996) (Thomas, J., concurring) (quoting *Va. State Bd. of*  
22 *Pharmacy v. Va. Citizens Consumer Council, Inc.*, 425 U.S. 748, 762  
23 (1976)). Commercial speech is therefore distinct from fully protected  
24 speech that is “uttered for a profit” or simply made in a commercial  
25 context. *Bd. of Trustees of State Univ. of N.Y. v. Fox*, 492 U.S. 469, 482  
26 (1989); *Smith v. California*, 361 U.S. 147, 150 (1959); *see also New York*  
27 *Times Co. v. Sullivan*, 376 U.S. 254, 265–66 (1964) (paid editorial  
28 warranted full protection under the First Amendment).

1 Plaintiffs’ use of “doctor” and “Dr.” to refer to themselves “in a  
2 healthcare setting”<sup>4</sup> is not “commercial” speech. It doesn’t propose a  
3 commercial transaction or attempt to induce a provider-patient  
4 relationship; Plaintiffs have used, and intend to use, “doctor” and “Dr.”  
5 to accurately inform patients of their credentials and expertise. Pls’ SUF  
6 14–16, 20, 32, 56. Indeed, Plaintiffs interact with patients in their  
7 capacity as employees of a practice group or clinic from which patients  
8 often seek care without knowing ahead of time who their provider will  
9 be. Pls’ SUF 27–28, 51. By the time patients encounter Plaintiffs and  
10 learn of their qualifications and role in the patient’s care, the patient is  
11 already seeking care from Plaintiffs and their colleagues.

12 Even if Plaintiffs’ use of “doctor” and “Dr.” is “commercial” speech  
13 in some instances, section 2054(a) remains subject to strict scrutiny  
14 because it prohibits commercial speech inextricably intertwined with  
15 fully protected speech, *Riley*, 487 U.S. at 796, and it “restrict[s] truthful  
16 speech in order to suppress the ideas it conveys.” *Matal v. Tam*, 582 U.S.  
17 218, 254 (2017) (Thomas, J., concurring) (quoting *Lorillard Tobacco Co.*  
18 *v. Reilly*, 533 U.S. 525, 572 (2001) (Thomas, J., concurring)). In other  
19 words, while some of Plaintiffs’ plans for using the forbidden term and  
20 title may involve advertisements, Pls’ SUF 86, 88, they will invariably  
21 also use the term and title with patients without regard to inducing any  
22 commercial transaction. Pls’ SUF 14–16, 20, 32, 36, 56. And because SB  
23 1451 amended section 2054(a) beyond advertisements, signs, business  
24 cards, and letterhead to specifically prohibit use of the title “Dr.” or the  
25 term “doctor” “in a healthcare setting,” it is subject to strict scrutiny for  
26 restricting noncommercial speech.

27  
28 <sup>4</sup> Cal. Bus. & Prof. C. § 2054(a).

1           4.     *Section 2054(a) cannot withstand strict scrutiny*

2           Content- and speaker-based speech restrictions are “presumptively  
3 unconstitutional and may be justified only if the government proves that  
4 they are narrowly tailored to serve compelling state interests.” *Reed*, 576  
5 U.S. at 163. Indeed, “[i]t is rare that a regulation restricting speech  
6 because of its content will ever be permissible.” *United States v. Playboy*  
7 *Ent. Grp., Inc.*, 529 U.S. 803, 818 (2000).

8           Compelling interests recognized by the Supreme Court include  
9 preserving public confidence in the integrity of the judiciary, *Williams-*  
10 *Yulee v. Fla. Bar*, 575 U.S. 433, 444 (2015), protecting children, *Denver*  
11 *Area Educ. Telecomm. Consortium, Inc. v. F.C.C.*, 518 U.S. 727, 755  
12 (1996), and preventing *quid pro quo* corruption in political campaigns.  
13 *Citizens United*, 558 U.S. at 359. In contrast, interests in preventing  
14 commercial fraud are “legitimate,” but not compelling. *See Village of*  
15 *Schaumburg v. Citizens for a Better Env’t*, 444 U.S. 620, 637 (1980).

16           According to Defendants, section 2054(a) advances an interest in  
17 “protecting consumers from those who falsely hold themselves out as  
18 licensed physicians but have not been duly licensed.” Matias Decl. Exh. 4.  
19 Because Defendants’ interest in preventing fraudulent misrep-  
20 resentations is not a compelling one, section 2054(a) fails strict scrutiny  
21 at the outset.

22           Even if Defendants can establish a compelling interest advanced by  
23 section 2054(a), the law is not narrowly tailored to it. Narrow tailoring  
24 requires that where “a less restrictive alternative would serve the  
25 Government’s purpose, the legislature must use that alternative.”  
26 *Playboy Ent. Grp., Inc.*, 529 U.S. at 813. And unless a “curtailment of free  
27 speech” is “actually necessary to the solution,” it is not narrowly tailored.  
28 *Brown v. Ent. Merchs. Ass’n*, 564 U.S. 786, 799 (2011).

1 Here, Defendants have a less speech-restrictive alternative to  
2 section 2054(a) to protect patients from fraudulent misrepresentations.  
3 See Cal. Bus. & Prof. Code § 2278. Section 2278 requires practitioners  
4 who are not licensed as a physician or surgeon to clarify their licensure  
5 status when identifying themselves as a “doctor” or “Dr.” Defendants  
6 have produced no evidence demonstrating that section 2278—or any  
7 other alternative—is insufficient to protect consumers from fraudulent  
8 misrepresentations. Regardless of section 2278, Plaintiffs testified that  
9 they inform patients they are nurse practitioners anyway because they  
10 believe that patients should know the role of everyone on the patient’s  
11 care team. Pls’ SUF 18, 29, 50.

12 Moreover, one need only look to other states using less restrictive  
13 means to prevent patient confusion. For example, in Georgia, a person  
14 using the term “Doctor” or “Dr.” with his or her name must designate the  
15 degree awarded that entitles him or her to use the title. See GA Code  
16 § 10-1-422 (2024). See also West Virginia Code 61-10-21. Because  
17 California has failed to employ a less restrictive means here, section  
18 2054(a) fails strict scrutiny.

19 **B. Section 2054(a) Even Fails Intermediate Scrutiny**

20 Should the court decline to apply strict scrutiny or a heightened  
21 standard of review for content- and speaker-based restrictions on  
22 commercial speech, see *Sorrell*, 564 U.S. at 571 (speaker- and content-  
23 based burdens on commercial speech warrant “heightened scrutiny”),  
24 section 2054(a) still fails the test for restrictions on commercial speech as  
25 set out in *Central Hudson Gas & Elec. Corp. v. Pub. Serv. Comm’n of New*  
26 *York*, 447 U.S. 557, 566 (1980).

27 Under *Central Hudson*, when the government restricts commercial  
28 speech that: (1) “concern[s] lawful activity and [is] not . . . misleading,”



1 then the Court must consider (2) “whether the asserted governmental  
2 interest is . . . substantial;” (3) “whether the regulation directly advances  
3 the governmental interest asserted;” and (4) “whether it is not more  
4 extensive than is necessary to serve that interest.” *Id.* at 566–57.  
5 Defendants bear the burden of proving that section 2054(a)’s restrictions  
6 on the speech of doctorate-holding providers satisfies *Central Hudson’s*  
7 test. *Edenfield v. Fane*, 507 U.S. 761, 770 (1993) (citing *Bolger v. Youngs*  
8 *Drug Products Corp.*, 463 U.S. 60, 71 n.20 (1983)). That “burden is not  
9 satisfied by mere speculation or conjecture.” *Edenfield*, 507 U.S. at 770.  
10 Instead, the government “must demonstrate that the harms it recites are  
11 real and that its restriction will in fact alleviate them to a material  
12 degree.” *Id.* at 770–71. Defendants cannot meet that heavy burden here.

13 1. *It is not misleading for Plaintiffs to describe themselves*  
14 *as a “doctor” or “Dr.”*

15 It is truthful for Plaintiffs to use the term “doctor” and title “Dr.”  
16 when referring to themselves.<sup>5</sup> Plaintiffs all possess a Doctor of Nursing  
17 Practice (DNP) degree. Pls’ SUF 7, 21, 37. A DNP is the highest degree  
18 available in nursing. Just as it is truthful for other non-physicians and  
19 surgeons like dentists, pharmacists, and psychologists holding doctorate-  
20 level degrees in their relevant professions to refer to themselves as  
21 “doctor,” so is it truthful for nurse practitioners with a DNP to do so.

22 Nor is it misleading for Plaintiffs to refer to themselves as “Dr.” or  
23 “doctor” even in a healthcare setting. In the commercial speech context,  
24 the Supreme Court distinguishes between “inherently misleading” and  
25 “potentially misleading” speech. *In re R.M.J.*, 455 U.S. 191, 202–03

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26  
27 <sup>5</sup> That Plaintiffs lawfully practice as nurse practitioners—and do not seek  
28 to practice beyond their lawful scope of practice—is not disputed in this  
case. Pls’ SUF 19, 31, 54.

1 (1982). If an advertisement “is inherently likely to deceive [or] . . . has in  
2 fact been deceptive” it is not protected by the First Amendment. *Id.* If, on  
3 the other hand, an advertisement is only potentially misleading, it enjoys  
4 First Amendment protection if the “information may also be presented in  
5 a way that is not deceptive.” *Id.* at 203. *See also Peel v. Att’y Registration*  
6 *and Disciplinary Comm’n*, 496 U.S. 91, 100–01, 109 (1990) (“[S]tates may  
7 not place an absolute prohibition on certain types of potentially  
8 misleading information . . . if the information also may be presented in a  
9 way that is not deceptive.”). Courts applying this distinction in similar  
10 cases around the country have held that truthful use of professional titles  
11 is not misleading and subjected the restrictions on the use of such titles  
12 to First Amendment scrutiny.

13 For example, in *Byrum v. Landreth*, 566 F.3d 442 (5th Cir. 2009),  
14 the Fifth Circuit considered a Texas statute banning use of “interior  
15 designer” or “interior design” by unlicensed practitioners to describe their  
16 trade and services. While it was perfectly legal for these unlicensed  
17 practitioners to provide interior design services, they were prohibited  
18 from using the specific terms. *Id.* at 444–45. The state argued that  
19 because it created a licensing scheme for interior designers, unlicensed  
20 practitioners who refer to themselves as “interior designers” would  
21 necessarily mislead consumers. *Id.* at 447. The Fifth Circuit rejected that  
22 argument, finding that while the term could be used falsely (e.g., if one  
23 did not provide interior design services), there was nothing inherently  
24 misleading about the truthful description of a person’s trade or services.  
25 *Id.* “Where no fixed definition of the services [provided by interior  
26 designers] exists, there can hardly be a claim that the public is being  
27 misled about particular individuals’ truthfully expressed level of  
28 expertise or services.” *Id.* at 447. Moreover, the Fifth Circuit held that

1 the state’s tautologous argument “proves too much, as it would authorize  
2 legislatures to license speech and reduce its constitutional protection by  
3 means of the licensing alone.” *Id.*

4 The same is true here. As noted, Plaintiffs’ right to practice as nurse  
5 practitioners in California is not disputed. Nor is it disputed that  
6 Plaintiffs possess DNP degrees. While section 2054(a) effectively defines  
7 a “doctor” as a physician, surgeon, or one possessing an M.D. or D.O.  
8 degree, Defendants have not produced any evidence that there is such a  
9 fixed definition for “doctor,” much less that such a definition is limited to  
10 just those individuals protected by section 2054(a). And given the  
11 common usage by all holders of doctorate degrees to refer to themselves  
12 as “doctor,” any definition of the generic term includes Plaintiffs. As  
13 *Byrum* instructs, then, Plaintiffs’ use of truthful terms to describe  
14 themselves is protected by the First Amendment, even where the state  
15 creates a licensing program for the profession.

16 Likewise, in *Abramson v. Gonzalez*, the Eleventh Circuit considered  
17 a ban on the use of “psychologist” by unlicensed practitioners. 949 F.2d  
18 1567 (11th Cir. 1992). Like the defendants in *Byrum*, the state argued  
19 that because the statute defined the restricted term to mean one who is  
20 licensed by the state, the term was misleading if used by unlicensed  
21 practitioners. 949 F.2d at 1576. The Eleventh Circuit held that it was not  
22 bound by the state’s definition of “psychologist” and rejected defendants’  
23 position. *Id.* at 1577. Because plaintiffs could practice psychology without  
24 a license, “truthful advertising which conveys this message would be  
25 neither false nor inherently misleading.” *Id.*

26 Other courts have similarly rejected restrictions on the truthful use  
27 of other professional titles. *See Parker v. Ky. Bd. of Dentistry*, 818 F.2d  
28 504, 510 (6th Cir. 1987) ( “orthodontics” and related words); *Kiser v.*

1 *Kamdar*, 831 F.3d 784, 788 (6th Cir. 2016) (“endodontist”); *Am. Academy*  
2 *of Implant Dentistry v. Parker*, 152 F.Supp.3d 641, 650–51 (W.D. Tex.  
3 2016) (dental “specialists”); *Express Oil Change, L.L.C. v. Miss. Bd. of*  
4 *Licensure for Prof. Eng. & Surveyors*, 916 F.3d 483, 489–92 (5th Cir.  
5 2019) (use of “tire engineers” by automotive service company not  
6 misleading); *Roberts v. Farrell*, 630 F.Supp.2d 242, 249 (D. Conn. 2009)  
7 (refusing to accept that a term is misleading because the state says so);  
8 *Ocheese Creamery LLC v. Putnam*, 851 F.3d 1228, 1238 (11th Cir. 2017)  
9 (same); *Jarlstrom v. Aldridge*, 366 F.Supp.3d 1205, 1219–20 (D. Or. 2018)  
10 (same).

11 *American Academy of Pain Management v. Joseph*, 353 F.3d 1099  
12 (9th Cir. 2004), is not to the contrary. There, the Ninth Circuit held that  
13 a physician’s or surgeon’s use of “board certified” is inherently misleading  
14 when the certifying board in question does not meet the “special and  
15 particular meaning” given to “board certified” by statute and recognized  
16 medical organizations. *Id.* at 1104–05, 1108. “Board certified” when used  
17 in the medical context is a “term of art” referring only to 23 specific  
18 boards that convey certification. *Id.* at 1104–05. Thus, claiming to be  
19 “board certified” by a different board would mislead “physicians,  
20 hospitals, health care providers and the general public that the statutory  
21 standards have been met, when, in fact, they have not.” *Id.* at 1108.

22 Here, “doctor” and “Dr.” do not carry special meanings understood  
23 by health care providers and the general public to mean only a physician  
24 or surgeon. If courts have similarly refused to find use of statutorily  
25 prohibited terms such as “interior designer” (*Byrum* and *Roberts*),  
26 “psychologist” (*Abramson*), “orthodontist” (*Parker*), “endodontist” (*Kiser*),  
27 and “engineer” (*Jarlstrom* and *Express Oil Change*) inherently  
28 misleading, this Court certainly must do so here, where the title “Dr.”

1 and the term “doctor” are much more widely used and in wildly disparate  
2 and diverse contexts. For example, “Dr.” can refer to a variety of  
3 healthcare professionals, Ph.Ds (including honorary Ph.Ds), scientists,  
4 and even those holding no license to practice in a profession whatsoever:  
5 e.g., Dr. Phil, Dr. Demento, and Dr. Seuss. Thus, the use of “Dr.” by  
6 individuals who have earned a doctorate is not misleading. Rather, it  
7 identifies a level of educational accomplishment common to all who earn  
8 a doctorate. There is nothing misleading about Plaintiffs’ desired speech.

9           2.     *Section 2054(a)’s substantial interest*

10           As noted above, Defendants claim that section 2054(a) advances an  
11 interest in “protecting consumers from those who falsely hold themselves  
12 out as licensed physicians but have not been duly licensed.” Matias Decl.,  
13 Exh. 4. Plaintiffs will assume that such an interest is “substantial” for  
14 the purposes of this summary judgment motion.

15           3.     *Section 2054(a) does not directly advance a substantial*  
16                    *governmental interest*

17           Intermediate scrutiny requires Defendants to show that section  
18 2054(a) “directly and materially advances the asserted governmental  
19 interest[s].” *Greater New Orleans Broad. Ass’n v. United States*, 527 U.S.  
20 173, 188 (1999). Satisfying this *Central Hudson* prong is “critical;  
21 otherwise, ‘a State could with ease restrict commercial speech in the  
22 service of other objectives that could not themselves justify a burden on  
23 commercial expression.’” *Rubin v. Coors Brewing Co.*, 514 U.S. 476, 487  
24 (1995) (quoting *Edenfield*, 507 U.S. at 771).

25           Defendants’ interest in protecting consumers from fraudulent  
26 misrepresentations is not directly or materially advanced by section  
27 2054(a). Because Plaintiffs possess doctorate degrees, they can truthfully  
28 refer to themselves as “doctor” and “Dr.” The Supreme Court

1 contemplated this exact scenario in *44 Liquormart*. See 517 U.S. at 503  
2 (“Precisely because bans against truthful, nonmisleading commercial  
3 speech rarely seek to protect consumers from either deception or  
4 overreaching, they usually rest solely on the offensive assumption that  
5 the public will respond ‘irrationally’ to the truth.”). As a result, the  
6 Supreme Court reiterated that “[t]he First Amendment directs us to be  
7 especially skeptical of regulations that seek to keep people in the dark for  
8 what the government perceives to be their own good.” *Id.*

9 It would be one thing if Defendants only enforced section 2054(a)  
10 against those lacking a doctoral degree, or against those falsely claiming  
11 to possess an M.D. or D.O. degree, or against those with a doctoral degree  
12 unrelated to the general medical field. But Defendants have recently  
13 enforced 2054(a) against at least one nurse practitioner who possesses a  
14 DNP and truthfully referred to herself as “Dr.” without claiming to be a  
15 physician or hold a M.D. or D.O. degree. Pls’ SUF 58–67. Defendants  
16 have not disavowed future enforcement against other nurse practitioners  
17 with DNPs. ECF 35 at 8. Thus, at least as applied to nurse practitioners  
18 with DNPs, section 2054(a) does not directly advance Defendants’ only  
19 stated interest because it does not prevent fraudulent misrep-  
20 resentations.

21 4. *Section 2054(a) regulates more extensively*  
22 *than necessary*

23 For much the same reasons noted above regarding the lack of  
24 narrow tailoring, *see supra* at p. 22–23, section 2054(a) also regulates  
25 more extensively than necessary. While intermediate scrutiny does not  
26 require “the least restrictive means conceivable,” Defendants still “must  
27 demonstrate narrow tailoring of the challenged regulation to the asserted  
28 interest—‘a fit that is not necessarily perfect, but reasonable; that

1 represents not necessarily the single best disposition but one whose scope  
2 is in proportion to the interest served.” *Greater New Orleans Broad.*  
3 *Ass’n*, 527 U.S. at 188 (quoting *Bd. of Trustees v. Fox*, 492 U.S. at 480).  
4 “[W]hat constitutes a reasonable fit ‘is far different . . . from the ‘rational  
5 basis’ test used for Fourteenth Amendment equal protection analysis.”  
6 *New York State Ass’n of Realtors, Inc. v. Shaffer*, 27 F.3d 834, 844 (2d Cir.  
7 1994) (quoting *Fox*, 492 U.S. at 480). Defendants must also demonstrate  
8 that the “costs and benefits of burdening speech” were “carefully  
9 calculated.” *Greater New Orleans Broad. Ass’n*, 527 U.S. at 188.

10 As discussed, Defendants have a less restrictive alternative to  
11 section 2054(a) that ensures patients are protected from fraudulent  
12 misrepresentations. *See* Cal. Bus. & Prof. Code § 2278. Defendants have  
13 produced no evidence demonstrating that section 2278 is insufficient to  
14 protect consumers. Indeed, Defendant Melby herself proposed a less  
15 restrictive alternative while SB 1451 was being considered: allow  
16 professionals holding terminal degrees (in this case, nurses) to use the  
17 title “Dr.” so long as they “also indicate their profession or specialty on  
18 their badge and in communication.” Pls’ SUF 6. Moreover, regardless of  
19 what section 2278 requires, Plaintiffs already tell their patients they are  
20 nurse practitioners because they believe that is best for patients. Pls’  
21 SUF 18, 29, 50. Section 2054(a) fails even intermediate scrutiny.

## 22 CONCLUSION

23 For the reasons discussed above, the Court should grant summary  
24 judgment in Plaintiffs’ favor.

25 ///

1 DATED: March 10, 2025.

2 Respectfully submitted,

3 DONNA G. MATIAS  
4 CALEB R. TROTTER  
5 Pacific Legal Foundation

6 By /s/ DONNA G. MATIAS  
7 DONNA G. MATIAS

8 *Attorneys for Plaintiffs*

9  
10 **L.R. 11-6.2 Certificate of Compliance**

11 The undersigned, counsel of record for Plaintiffs, certifies that this  
12 memorandum contains 25 pages of argument, which complies with the  
13 limit set by court order dated March 3, 2025.

14 DATED: March 10, 2025.

15 By /s/ DONNA G. MATIAS  
16 DONNA G. MATIAS

17 *Attorney for Plaintiffs*



1 DONNA G. MATIAS, Cal. Bar No. 154268  
2 Email: DMatias@pacificlegal.org  
3 CALEB R. TROTTER, Cal. Bar No. 305195  
4 Email: CTrotter@pacificlegal.org  
5 Pacific Legal Foundation  
6 555 Capitol Mall, Suite 1290  
7 Sacramento, CA 95814  
8 Telephone: (916) 419-7111  
9 Facsimile: (916) 419-7747  
10 *Attorneys for Plaintiffs Jacqueline Palmer, et al.*

11 **UNITED STATES DISTRICT COURT**  
12 **CENTRAL DISTRICT OF CALIFORNIA**

13 JACQUELINE PALMER, et al.,

14 Plaintiffs,

15 v.

16 ROB BONTA, et al.

17 Defendants.

Case No.: 5:23-cv-01047-JGB-SP

18 **DECLARATION OF**  
19 **DONNA G. MATIAS IN**  
20 **SUPPORT OF PLAINTIFFS'**  
21 **MOTION FOR SUMMARY**  
22 **JUDGMENT**

Date: April 21, 2025

Time: 9:00 a.m.

Courtroom: 1, Riverside

Judge: Hon. Jesus G. Bernal

Trial Date: June 24, 2025

Action Filed: June 6, 2023

23 I, Donna G. Matias, hereby state and declare as follows:

24 The matters set forth herein are within my own personal  
25 knowledge, and if called to do so, I would and could competently testify  
26 thereto.

27 1. I am an attorney at law duly licensed to practice law before  
28

1 all the courts in the state of California. I am the attorney of record  
2 herein for Plaintiffs Jacqueline Palmer, Heather Lewis, and Rodolfo  
3 Jaravata Hanson.

4 2. Attached hereto as Exhibit 1 is a document produced by  
5 Defendants in this action, with Bates number MBC 0000437.

6 3. Attached hereto as Exhibit 2 is a document produced by  
7 Defendants in this action, with Bates numbers MBC 0000525–526.

8 4. Attached hereto as Exhibit 3 is a document produced by  
9 Defendants in this action, with Bates numbers BRN 0000117–118.

10 5. Attached hereto as Exhibit 4 is an excerpt from Defendant’s  
11 verified objections and responses to Plaintiffs’ First Set of  
12 Interrogatories.

13 6. Attached hereto as Exhibit 5 are excerpts of the transcript of  
14 the deposition of Plaintiff Jacqueline Palmer, taken on February 13,  
15 2025.

16 7. Attached hereto as Exhibit 6 are excerpts of the transcript of  
17 the deposition of Plaintiff Heather Lewis, taken on February 6, 2025.

18 8. Attached hereto as Exhibit 7 are excerpts of the transcript of  
19 the deposition of Plaintiff Rodolfo Jaravata Hanson, taken on February  
20 7, 2025.

21  
22 I declare under penalty of perjury under the laws of the State of  
23 California that the foregoing is true and correct, and that this  
24 declaration was executed on March 10, 2025 at San Clemente,  
25 California.

26 By /s/ DONNA G. MATIAS  
27 DONNA G. MATIAS  
28 Cal. Bar No. 154268

Email: DMatias@pacificlegal.org  
Pacific Legal Foundation  
555 Capitol Mall, Suite 1290  
Sacramento, CA 95814  
Telephone: (916) 419-7111

*Attorneys for Plaintiffs*

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**EXHIBIT - 1**

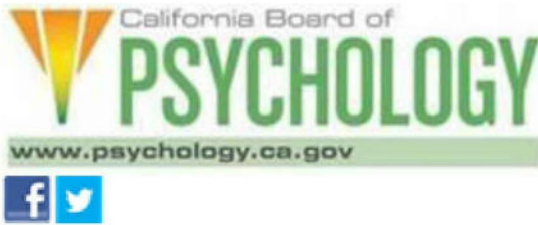
Message

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**From:** Sorrick, Antonette@DCA [Antonette.Sorrick@dca.ca.gov]  
**Sent:** 8/9/2023 3:25:44 PM  
**To:** Varghese, Reji@MBC [Reji.Varghese@mbc.ca.gov]  
**CC:** Monterrubio, Sandra@DCA [Sandra.Monterrubio@dca.ca.gov]; Burke, Jonathan@DCA [Jonathan.Burke@dca.ca.gov]  
**Subject:** BPC 2054

Good afternoon. Last week, I received a request for information about a recent case against a licensed nurse who misused the term "Dr." and was cited pursuant to BPC 2054. An anonymous psychologist was concerned about the use of "Dr." in advertising, etc.

Are you free 8/21 in the afternoon to discuss this issue a bit further? Thank you in advance.



**Antonette Sorrick**  
**Executive Officer**

1625 North Market Blvd., Suite N-215  
Sacramento, CA 95834  
(916) 574-8938 Direct  
[antonette.sorrick@dca.ca.gov](mailto:antonette.sorrick@dca.ca.gov)

**EXHIBIT - 2**

Message

**From:** Helms, Rosanne@DCA [Rosanne.Helms@dca.ca.gov]  
**Sent:** 8/31/2023 1:20:01 PM  
**To:** Bone, Aaron@MBC [Aaron.Bone@mbc.ca.gov]  
**CC:** Sodergren, Steve@DCA [Steve.Sodergren@dca.ca.gov]  
**Subject:** FW: Concerns Regarding the use of Dr. as prefix

Hello Aaron,

I am reaching out to you from the Board of Behavioral Sciences, in hopes that you can connect me with the correct person to speak with at Medical Board regarding the concern below, which has to do with a Medical Board disciplinary action against a nursing licensee who held a doctorate degree and was using the "Dr." title.

Generally, some of our licensed therapists who also hold a Psy.D. or Ph.D will use the "Dr." title. Our law does not prohibit them from doing this, as long as the degree is earned and they are not using the title in a false or misleading manner.

This case has sparked the concern of some of our stakeholder groups, and while I suspect there might be a bit more background detail to the case, we are looking to speak to someone at Medical Board to find out more information. We are going to begin the process of updating our advertising regulations very soon, so if clarification to those would be beneficial, we would like to do so.

If you could let me know who we could speak to regarding this, it would be greatly appreciated.

Sincerely,  
Rosanne

Rosanne Helms  
Legislative Manager  
Board of Behavioral Sciences  
1625 N. Market Blvd. Ste. S-200  
Sacramento, CA 95834  
Phone: 916-574-7939



Please consider the environment before printing this e-mail.

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**From:** [concernedproviderphd@tutanota.com](mailto:concernedproviderphd@tutanota.com) <[concernedproviderphd@tutanota.com](mailto:concernedproviderphd@tutanota.com)>  
**Sent:** Monday, July 31, 2023 4:00 PM  
**To:** Sodergren, Steve@DCA <[Steve.Sodergren@dca.ca.gov](mailto:Steve.Sodergren@dca.ca.gov)>

**Cc:** EnforcementUnit, BBS@DCA <[BBS.EnforcementUnit@dca.ca.gov](mailto:BBS.EnforcementUnit@dca.ca.gov)>

**Subject:** Concerns Regarding the use of Dr. as prefix

Dear Board

I am reaching out to you concerned about the use of the prefix, "Dr." as a licensed mental health provider. As you may know, the CA Board of Medicine took action against a BRN Registered Nurse Practitioner for using "Dr." in her advertisement and name badge. This individual had a Doctor of Nursing (DNP) and appeared to utilize this degree consistently as any other person with a doctoral degree. The CA BOM determined that she violated BPC 2054, which indicates no one can use the Dr. prefix or be referred to as "Doctor" unless they are a licensed physician/surgeon by their board. This would exclude anyone now that this precedent has taken place. Many licensed mental health providers are now, well, scared of a disgruntled client (or even a colleague) making a complaint and having similar actions taken, significantly harming our livelihood. This has been on the new and written about via several news outlets.

We also noticed that even in your own board newsletters, meeting minutes, and live meetings, licensees are referred to by "Dr" when they hold that degree, so it would seem that your board would not take such action against its licensees, but, this does not stop the Medical Board from doing so, as they did with the DNP, citing the same BPC 2054. I am hoping that this board would be protective of us and develop some regulations in this manner, similar to those perhaps of the Physical Therapy Board of California, wherein their licensees are explicitly able to use Dr. and doctoral suffixes as long as they clearly identify their degree and/ licensee, per BPC 2633.

They provided clarification to their licensees here: [https://www.ptbc.ca.gov/forms/use\\_of\\_dr.shtml](https://www.ptbc.ca.gov/forms/use_of_dr.shtml)

citing "Examples of proper usage in written communication would be:

Dr. Jane Smith, Doctor of Physical Therapy  
Jane Smith, DPT"

I hope this board can do something similar. Unfortunately, I am sending this email anonymously due to concerns that I might find myself sanctioned for using my doctoral degree.

With utmost respect,

cc Board of Behavioral Sciences  
Executive Officer, Steve Sodergren ([steve.sodergren@dca.ca.gov](mailto:steve.sodergren@dca.ca.gov))  
Enforcement Unit, [bbs.enforcementunit@dca.ca.gov](mailto:bbs.enforcementunit@dca.ca.gov)



**EXHIBIT - 3**



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR  
**BOARD OF REGISTERED NURSING**  
PO BOX 944210, Sacramento, CA 94244-2100  
P (916) 322-3350 | TTY (800) 735-2929 | [www.m.ca.gov](http://www.m.ca.gov)



June 4, 2024

Assemblymember Marc Berman  
Chair, Assembly Business and Professions Committee  
1020 N Street, Room 379  
Sacramento, CA 95814

**RE: SB 1451 (Ashby) – Support, If Amended Position**

Dear Chair Berman:

The Board of Registered Nursing (Board) licenses Registered Nurses and certifies Advanced Practice Nurses as well as regulates over 535,000 licensees. The Board also approves and oversees approximately 157 prelicensure nursing programs in California. The Board's mission is to protect the health, safety, and wellbeing of the public through fair and consistent application of the statutes and regulations governing nursing practice and education in California.

The Board considered SB 1451 by Senator Ashby at their May 24, 2024, Board meeting, and took a **SUPPORT, IF AMENDED** position on this bill. The Board supports the author's desire to simplify the certification processes that were put in place after passage of AB 890 (Wood, Chapter 265, Statutes of 2020). The Board recognizes the critical importance of striking a balance between public protection and access to care. We are open to working with all parties involved to develop a process for NPs that is effective, efficient, and implementable.

Since the proposed language would remove majority of the requirements the Board currently evaluates for a Nurse Practitioner (NP) to be eligible for the 103 NP certification, members requested further amendments be made to align with the original intent of AB 890 and fully remove the requirement for a NP to seek an additional certification from the Board to practice without standardized procedures in a group setting (commonly referred to as a 103 NP).

In its place, the Board could update its regulatory definition of Transition to Practice to align with current and proposed statute. Employers of NPs in a group setting could use the definition to develop policies and protocols as needed for an NP to perform functions in accordance with their experience, education, and training. This would eliminate an administrative barrier and reduce the amount of time a NP who meets the specified qualifications would need to wait to work without standardized procedures.

In addition, the Board requested further amendments to the provision that would prohibit anyone other than a licensed physician and surgeon from using the word "doctor" or the initials "Dr." to allow for individuals that have earned their terminal degree to use the appropriate title, regardless of setting, so long as they also indicate their profession or specialty on their badge and in communication.

There was specific unease expressed for nurses who work in academia as they typically have a terminal degree, work in a non-healthcare setting when providing classroom instruction and work in a healthcare setting when accompanying students to their clinical sites. In clinical settings, students often continue to use the "Dr" identifier as they do in the classroom out of habit or respect for their professor. Members were concerned that this could result in the nurse receiving a complaint and/or misdemeanor.

Should you have any questions, please contact our Chief of Legislative Affairs, Marissa Clark at [Marissa.Clark@dca.ca.gov](mailto:Marissa.Clark@dca.ca.gov). Thank you for your consideration.

Sincerely,



Loretta Melby, RN, MSN  
Executive Officer  
Board of Registered Nursing

CC: Senator Ashby

**EXHIBIT - 4**

1 ROB BONTA  
Attorney General of California  
2 LARA HADDAD  
Supervising Deputy Attorney General  
3 STEPHANIE ALBRECHT  
Deputy Attorney General  
4 State Bar No. 281474  
300 South Spring Street, Suite 1702  
5 Los Angeles, CA 90013-1230  
Telephone: (213) 269-6166  
6 Fax: (916) 731-2124  
E-mail: Stephanie.Albrecht@doj.ca.gov  
7 *Attorneys for Defendants Attorney General  
of California Rob Bonta, President of the  
8 Medical Board of California Kristina D.  
Lawson, and Executive Officer of the  
9 California Board of Registered Nursing  
Loretta Melby, in their official capacities*

10 IN THE UNITED STATES DISTRICT COURT  
11 FOR THE CENTRAL DISTRICT OF CALIFORNIA  
12

13  
14  
15 **JACQUELINE PALMER, et al.,**  
16 Plaintiffs,  
17 v.  
18 **ROB BONTA, in his official capacity**  
19 **as Attorney General of the State of**  
20 **California, et al.,**  
21 Defendants.

5:23-cv-01047-JGB-SP

**DEFENDANTS' RESPONSES TO  
PLAINTIFFS' FIRST SET OF  
INTERROGATORIES**

22 PROPOUNDING PARTY: Plaintiffs

23 RESPONDING PARTIES: Defendants Attorney General Rob Bonta, President  
24 of the Medical Board of California Kristina D.  
25 Lawson, and Executive Officer of the California  
26 Board of Registered Nursing Loretta Melby, in  
their official capacities

27 SET NUMBER: One  
28

1 Defendants Rob Bonta, in his official capacity as Attorney General of the  
2 State of California, Kristina D. Lawson,<sup>1</sup> in her official capacity as President of the  
3 Medical Board of California, and Loretta Melby, in her official capacity as  
4 Executive Officer of the California Board of Registered Nursing (collectively,  
5 “Defendants”), respond and object to Plaintiffs’ First Set of Interrogatories as  
6 follows:<sup>2</sup>

7 **PRELIMINARY STATEMENT**

8 Defendants have not yet completed the investigation of the facts relating to  
9 this case and have not yet completed discovery in this action. All of the responses  
10 contained herein are based solely upon information and documents that are  
11 presently available to and specifically known by Defendants, and disclose only  
12 those contentions that presently occur to Defendants. It is anticipated that further  
13 discovery, independent investigation, legal research, or analysis will supply  
14 additional facts and lead to additions, changes, and variations from the responses  
15 herein.

16 Defendants expressly reserve the right to assert any and all objections as to  
17 the admissibility of such responses into evidence in this action, or in any other  
18 proceedings, on any and all grounds including, but not limited to, competency,  
19 relevancy, materiality, and privilege. Further, Defendants make the responses and  
20 objections herein without in any way implying that the Interrogatories and  
21 responses to the Interrogatories are relevant or material to the subject matter of this  
22 action.

23 An objection or response to an interrogatory shall not be construed as an  
24 acknowledgment that Defendants performed any of the acts described in the

25 \_\_\_\_\_  
26 <sup>1</sup> Pursuant to Federal Rule of Civil Procedure 25(d), Kristina D. Lawson is  
27 automatically substituted as a defendant in place of her predecessor, former  
28 President of the California Medical Board Randy W. Hawkins.

<sup>2</sup> Although Plaintiffs’ First Set of Interrogatories was served on August 7,  
2024, these responses are timely made pursuant to stipulation of the parties  
memorialized via e-mail.

1 interrogatory or definitions applicable to the interrogatory, or that Defendants  
2 acquiesce in the characterization of the conduct or activities contained in the  
3 interrogatory or definitions applicable to interrogatory.

4 The following responses are given without prejudice to the right to produce  
5 evidence or witnesses that Defendants may later discover. Defendants reserve the  
6 right to supplement, clarify, revise, or correct any or all of the responses and  
7 objections herein, and to assert additional objections or privileges, in one or more  
8 subsequent supplemental response(s).

9 **GENERAL OBJECTIONS**

10 1. Defendants object to each instruction, definition, and interrogatory to  
11 the extent that it purports to impose any requirement or discovery obligation greater  
12 than or different from those under the Federal Rules of Civil Procedure and the  
13 applicable Rules and Orders of the Court.

14 2. Defendants object to the Interrogatories to the extent that any  
15 particular interrogatory is overbroad, vague, ambiguous, unintelligible, unduly  
16 burdensome, or not relevant to any party's claim or defense and not proportional to  
17 the needs of the case.

18 3. Defendants object to the definition of "You" and "Your" as overbroad  
19 and unduly burdensome and without reasonable limitation as to time and scope, as  
20 pertains to the issues in this case.

21 4. Defendants object to the definition of "Investigation" as overbroad and  
22 unduly burdensome and without reasonable limitation as to time and scope, as  
23 pertains to the issues in this case.

24 5. Defendants object to the Interrogatories to the extent that any  
25 particular interrogatory requires the production of information available to Plaintiffs  
26 through the subpoena process or their own records.

27 6. Defendants object to the Interrogatories to the extent that any  
28 individual interrogatory calls for information subject to a claim of privilege,

1 including, without limitation, the attorney-client privilege and/or the attorney work-  
2 product doctrine, the governmental deliberative process privilege, the law  
3 enforcement investigatory privilege, the official information privilege, the common  
4 interest privilege, or any other applicable privilege or protection. Defendants  
5 hereby claim the attorney-client privilege and invoke the attorney work-product  
6 doctrine. The fact that Defendants may not specifically object to any individual  
7 interrogatory on the ground that it seeks information subject to the attorney-client  
8 privilege or the attorney work-product doctrine is not to be deemed a waiver of the  
9 protection of non-disclosure afforded by the attorney-client privilege or the attorney  
10 work-product doctrine. Should any disclosure by Defendants of such information  
11 occur, it is inadvertent and shall not constitute a waiver of any privilege or  
12 protection.

13 7. Defendants object to the Interrogatories to the extent that any  
14 individual interrogatory assumes the truth of facts either in dispute or not yet in  
15 evidence.

16 8. Defendants object to the Interrogatories insofar as any individual  
17 interrogatory calls for speculation or legal conclusions.

18 9. To the extent that any individual interrogatory purports to impose on  
19 Defendants the burden of providing information that is not in Defendants'  
20 possession, custody, or control, or is already in Plaintiffs' possession, custody or  
21 control, or is not reasonably available to Defendants after a diligent search and  
22 reasonable inquiry, Defendants object on the grounds that the Interrogatories are  
23 overbroad, unduly burdensome, oppressive, and the burden, expense and/or  
24 intrusiveness of the discovery clearly outweighs the likelihood that the information  
25 sought will lead to the discovery of admissible evidence.

26 10. The foregoing objections apply to each and every response contained  
27 herein and are incorporated by reference to the extent applicable in the specific  
28 responses set forth below as though fully set forth therein. The failure to mention



1 one of the foregoing objections in the specific response set forth below shall not be  
2 deemed a waiver of such objection.

3 Defendants will make reasonable efforts to respond to each interrogatory, to  
4 the extent that no objection is made, as Defendants understand and interpret the  
5 interrogatory. If Plaintiffs' interpretation of any individual interrogatory differs  
6 from that of Defendants, Defendants reserve the right to supplement its objections  
7 and responses.

8 **OBJECTIONS AND RESPONSES TO INTERROGATORIES**

9 **INTERROGATORY NO. 1:**

10 Identify all individuals consulted in the preparation of answers to these  
11 interrogatories, indicating each interrogatory or interrogatories for which they were  
12 consulted.

13 **RESPONSE TO INTERROGATORY NO. 1:**

14 Defendants incorporate by reference the General Objections stated above as if  
15 fully set forth herein.

16 Defendants object on the basis that the terms "consulted" and "in the  
17 preparation of answers" are vague and overbroad, causing Defendants to speculate  
18 as to the intended meanings of the terms. Defendants further object that this  
19 interrogatory is not reasonably calculated to lead to the discovery of admissible  
20 evidence relevant to any party's claim or defense and is not proportional to the  
21 needs of the case. Defendants also object on the ground that the interrogatory is  
22 compound, presenting 19 separate interrogatories rather than one, and therefore  
23 seeks to circumvent the limitation on the number of interrogatories that may be  
24 served under Federal Rule of Civil Procedure 33.

25 Defendants object that the interrogatory calls for disclosure of information  
26 protected by the attorney-client privilege, the attorney work product doctrine, the  
27 governmental deliberative process privilege, and the official information privilege.  
28 Defendants further object to this interrogatory on the basis that a responding party

1 the ground that the interrogatory seeks personal information of non-parties in  
2 violation of their right to privacy.

3 **INTERROGATORY NO. 18:**

4 If You contend that prohibiting non-physicians and non-surgeons who hold a  
5 doctorate degree from using the prefix “Dr.” or the title “Doctor” serves a purpose  
6 related to the health, safety, or welfare of patients or the public, please state in  
7 detail all material facts supporting that contention.

8 **RESPONSE TO INTERROGATORY NO. 18:**

9 Defendants incorporate by reference the General Objections stated above as if  
10 fully set forth herein.

11 Defendants object to the interrogatory to the extent that it seeks expert  
12 materials, including information or facts that expert witnesses may locate or rely  
13 on, outside of the framework and schedule for expert disclosures. Defendants also  
14 object that the interrogatory calls for information protected from disclosure by the  
15 attorney-client privilege, the attorney work product doctrine, the governmental  
16 deliberative process privilege, and the official information privilege.

17 Subject to and without waiving the foregoing objections, Defendants respond  
18 that the information sought by this interrogatory is set forth in documents filed in  
19 this matter, including Defendants’ Motion to Dismiss (ECF No. 19). As set forth in  
20 Defendants’ Motion to Dismiss, prohibiting non-physicians and non-surgeons from  
21 using the title “Dr.” and “Doctor” serves the important public interest of protecting  
22 consumers from those who falsely hold themselves out as licensed physicians but  
23 have not been duly licensed. The medical community and patients have a specific  
24 understanding of the title “Dr.”—namely, that the individual using the term has  
25 provided to the Medical Board of California proof that he or she has graduated from  
26 a medical school that has been approved by the Medical Board and meets the  
27 minimum number of years and courses for resident instruction, and that he or she  
28 has completed a post-graduate training course that meets the minimum

1 requirements prescribed by statute. Thus, for an individual not licensed under the  
2 Medical Practice Act to use the term “doctor” would be false and misleading to  
3 potential patients. At this time, Defendants intend to rely on those facts along with  
4 whatever expert testimony and reports, legislative materials, and other supporting  
5 materials they offer in accordance with the Federal Rules of Civil Procedure and  
6 scheduling orders in this case.

7 As discovery is ongoing and the parties develop their respective cases further,  
8 Defendants reserve the right to disclose any additional facts, information, or  
9 evidence responsive to this request that may arise or become relevant in the future.

10 **INTERROGATORY NO. 19:**

11 If You contend that prohibiting non-physicians and non-surgeons who hold a  
12 doctorate degree from using the prefix “Dr.” or the title “Doctor” serves a purpose  
13 or purposes unrelated to the health, safety, or welfare of patients or the public,  
14 please identify all such purposes and state in detail all material facts supporting that  
15 contention.

16 **RESPONSE TO INTERROGATORY NO. 19:**

17 Defendants incorporate by reference the General Objections stated above as if  
18 fully set forth herein.

19 Defendants object to the interrogatory to the extent that it seeks expert  
20 materials, including information or facts that expert witnesses may locate or rely  
21 on, outside of the framework and schedule for expert disclosures. Defendants also  
22 object that the interrogatory calls for information protected from disclosure by the  
23 attorney-client privilege, the attorney work product doctrine, the governmental  
24 deliberative process privilege, and the official information privilege.

25 Subject to and without waiving the foregoing objections, Defendants respond  
26 that the information sought by this interrogatory is set forth in documents filed in  
27 this matter, including Defendants’ Motion to Dismiss (ECF No. 19). As set forth in  
28 Defendants’ Motion to Dismiss, prohibiting non-physicians and non-surgeons from

1 Dated: October 18, 2024

Respectfully Submitted,

2

ROB BONTA  
Attorney General of California

3

LARA HADDAD  
Supervising Deputy Attorney General

4

5

6

/s/ Stephanie Albrecht

7

STEPHANIE ALBRECHT  
Deputy Attorney General

8

*Attorneys for Defendants Attorney*

9

*General of California Rob Bonta,*

10

*President of the Medical Board of*

11

*California Kristina D. Lawson, and*

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*Executive Officer of the California*

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*Board of Registered Nursing Loretta*

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*Melby, in their official capacities*

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**VERIFICATION OF INTERROGATORY RESPONSES**

I, Jenna Jones, am employed by the State of California as Chief of Enforcement of the Medical Board of California. I believe, based on information provided to me, that the foregoing answers are true and correct to the best of my knowledge, and reflect the information available to the Medical Board of California.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on October 18, 2024, at Sacramento, California.

  
\_\_\_\_\_  
Jenna Jones

**VERIFICATION OF INTERROGATORY RESPONSES**

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I, Evon Lenerd Tapps, am employed by the State of California as the Assistant Executive Officer at the Board of Registered Nursing. I believe, based on information provided to me, that the foregoing answers are true and correct to the best of my knowledge, and reflect the information available to the Board of Registered Nursing.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on October 18, 2024, at Sacramento, California.

Evon Lenerd Tapps

Evon Lenerd Tapps

**VERIFICATION OF INTERROGATORY RESPONSES**

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I, Anabel Renteria, am employed by the California Department of Justice as an Associate Governmental Program Analyst in the Government Law Section of the Office of the Attorney General. I believe, based on information provided to me, that the foregoing answers are true and correct to the best of my knowledge, and reflect the information available to the Office of the Attorney General.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on October 18, 2024, at Sacramento, California.

/s/ Anabel Renteria

Anabel Renteria

**EXHIBIT - 5**



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IN THE UNITED STATES DISTRICT COURT  
FOR THE CENTRAL DISTRICT OF CALIFORNIA

- - - -

JACQUELINE PALMER,

Plaintiff,

vs.

No. 5:23-cv-01047-  
JGB-SP

ROB BONTA, in his official  
capacity as Attorney General  
of the State of California,  
et al,

Defendants.

\_\_\_\_\_ /

- - - -

VIDEOCONFERENCE DEPOSITION OF

JACQUELINE PALMER

Held via Zoom

Witness located in Lancaster, California  
Thursday, February 13, 2025, 9:34 a.m. PST

- - - -

1 A. It's too stressful.

2 Q. When you say too stressful, can you explain?

3 A. It was just they would give me a heavy patient  
4 load. I was seeing patient about 14 patients between  
5 the hours of 8:00 a.m. and 11:00 a.m. And then going to  
6 lunch and having to see more patients. It was just a  
7 heavy workload and not enough, how can I say, not enough  
8 assistance, I guess, if you will. It was just too much.

9 Q. When you -- or strike that. Might be able to  
10 short circuit some of this work history. Let me put  
11 up --

12 MR. CHOE: I'm going to show you what I'm  
13 going to mark as Exhibit number 2.

14 (Whereupon, Exhibit 2 was marked for  
15 identification.)

16 BY MR. CHOE:

17 Q. This is a four-page document starting with the  
18 Bates stamp page 594.

19 A. Can you zoom in a little bit?

20 Q. Of course.

21 A. Thank you.

22 Q. So this appears to be an email that you wrote  
23 to what they call info@flawlessskincenter.com. Do you  
24 see that?

25 A. Yes.

1 Q. It attaches JPalmer122024resume.docx. Do you  
2 see that?

3 A. Yes.

4 Q. Is this an email that you sent?

5 A. Yes.

6 Q. Going to page 2, which is Bates stamped Palmer  
7 595. Take your time to read the whole document. I can  
8 scroll up and down.

9 Is this document an accurate copy of your  
10 resume?

11 A. Yes.

12 Q. And is the work history -- let me scroll all  
13 the way down. Let me know at any point if you want me  
14 to stop. Starting on page 2 and scrolling down. Have  
15 you read the full document?

16 A. Yes.

17 Q. Is this an accurate statement of your work  
18 history?

19 A. Yes.

20 Q. How do you introduce yourself to patients?

21 A. As Jacqueline Palmer, nurse practitioner.

22 Q. Have you ever introduced yourself using the  
23 title Doctor?

24 A. Yes.

25 Q. Please describe how you introduced your

1 patient -- sorry, how you introduced yourself to  
2 patients with the title Doctor?

3 A. My name is Doctor Jacqueline Palmer. I'm a  
4 nurse practitioner.

5 Q. Have you ever had to find patients yourself?

6 A. No.

7 Q. Do you advertise at all?

8 A. No.

9 Q. Do you have any web pages?

10 A. Yes.

11 Q. What are those?

12 A. It's Mobile Health PLLC.

13 Q. Mobile Health PLLC?

14 A. Yes.

15 Q. Is that all one word, MobileHealthPLLC.com?

16 A. No, it's amh22.org.

17 Q. Amh22 -- sorry, could you repeat that?

18 A. Dot org.

19 Q. What is that?

20 A. That's my website for business that I'm  
21 starting.

22 Q. What's the business that you're starting?

23 A. It's telemedicine for healthcare.

24 Q. And what is that website?

25 A. Amh22.org.

1 the role of a nurse practitioner and the role of a  
2 physician or surgeon in healthcare?

3 A. From a family practice standpoint or overall?

4 Q. Both. Let's start with family practice.

5 A. Family practice, no. Overall, yes.

6 Q. What's the difference overall?

7 A. Overall a surgeon is able to do surgery that  
8 nurse practitioners can't do. And physicians, depending  
9 on the role, would be able to -- I don't know. To be  
10 honest, I don't know. I don't know that as far as  
11 physicians other than, like I said, the schedule 1. It  
12 would just depend on the department or the job.

13 Q. Now in you're amended complaint you say  
14 that -- let me just pull it up so we can read it.

15 MR. CHOE: Let's mark this as Exhibit 3.

16 (Whereupon, Exhibit 3 was marked for  
17 identification.)

18 BY MR. CHOE:

19 Q. Can you see this document?

20 A. M-hm. Yes.

21 Q. Going to scroll down to paragraph 20. Do you  
22 see paragraph 20?

23 A. Yes.

24 Q. So paragraph 20 reads, "At the family practice  
25 clinic where she serves primary care clientele, Dr.

1 Palmer's colleagues, including physicians, have never  
2 expressed concerns that she is referred to as Dr.  
3 Palmer, FNP. When she, " referring to you, "interacts  
4 with all the patients at the clinic, she explains that  
5 she is a nurse practitioner and not," italics, "a  
6 physician or surgeon as required by Cal Business and  
7 Professions Code 2837.103d and 2837.104d. Do you see  
8 that?

9 A. Yes.

10 Q. How do you explain to patients that you are a  
11 nurse practitioner and not a physician or surgeon?

12 A. That I'm a nurse practitioner and not a  
13 physician.

14 Q. Have any patients ever asked you what the  
15 difference is between a nurse practitioner and a  
16 physician?

17 A. Yes.

18 Q. What have they asked?

19 A. What's the difference.

20 Q. How do you respond or how did you respond?

21 A. Something along the lines of I went to nurse  
22 practitioner school and they went to school to become  
23 physicians.

24 Q. Did they have any follow-ups?

25 A. Not that I recall.

1 Q. Did they ask you what the difference is  
2 between nurse practitioner school and school to become a  
3 physician?

4 A. Yes.

5 Q. And what did you answer?

6 A. I would answer that our path, as far as you  
7 have to become an RN first, for my path. Not  
8 necessarily everybody's, but you had to become a  
9 nurse -- excuse me, a registered nurse first. Practice  
10 for at least two years, and then from there you go on to  
11 do FNP school. Whereas a physician, I'm not too sure of  
12 the actual qualifications, but it's just a different  
13 program.

14 Q. Have any patients ever asked you if you were a  
15 doctor?

16 A. Yes.

17 Q. How did you answer?

18 A. Yes, that I'm a doctor as in the title, but  
19 that's because I have a doctorate in nursing practice,  
20 not that I'm a physician.

21 Q. That would be the response that you give to  
22 patients?

23 A. Yes.

24 Q. Did -- have patients ever asked if you were a  
25 medical doctor?

1 from, to be honest. I just know that before I became  
2 licensed as a nurse practitioner I didn't receive those  
3 emails or those types of things. And now that I am  
4 licensed, I do receive stuff like that, so.

5 Q. Okay. Just a couple last things here.  
6 Referring back to -- there was a discussion on a website  
7 you have, AMH22.org. When you say you launched that  
8 website in October, what did you mean?

9 A. So I worked with a web designer, and if I'm  
10 not mistaken that's when we finalized how we wanted --  
11 how I wanted it to look. And he made it go live. If  
12 that makes sense.

13 Q. Okay. Have you had any patients come to you  
14 through that website, AMH22.org?

15 A. Not yet.

16 Q. Okay. Let's see, in your work as a nurse  
17 practitioner, have you ever provided care beyond your  
18 scope of practice under your license?

19 A. Absolutely not.

20 Q. There was a question earlier about how you're  
21 harmed by being unable to use the title doctor. Have  
22 you self-censored as a result of the -- the statute  
23 challenge in this case?

24 A. Yes.

25 Q. And so because of the statute challenge in



1 STATE OF CALIFORNIA. )  
2 County of Sonoma ) ss.  
3

4 I, Debbie Welch, holding CSR License No. 9029, a  
5 Certified Shorthand Reporter, licensed by the State of  
6 California, hereby certify that, pursuant to Notice to  
7 take the foregoing deposition, said witness was by me  
8 duly remotely sworn to tell the truth, the whole truth  
9 and nothing but the truth in the within-entitled cause;  
10 that said deposition was taken at the time and place  
11 stated herein; that the testimony of the said witness  
12 was recorded by me by stenotype, and that said  
13 deposition was under my direction thereafter reduced to  
14 computer transcript and, when completed, was available  
15 to said witness for signature under penalty of perjury.

16 I further certify that I am not of counsel or  
17 attorney for either of the parties to said deposition,  
18 nor in any way interested in the outcome of the cause  
19 named in the caption.

20 IN WITNESS WHEREOF, I have hereunto set my hand  
21 and affixed my official seal this 28th day of February,  
22 2025.

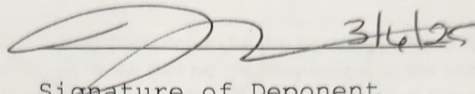
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25 Debbie Welch, CSR No. 9029

CERTIFICATE OF DEPONENT

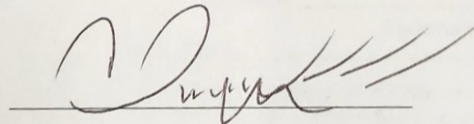
I hereby certify that I have read and examined the foregoing transcript, and the same is a true and accurate record of the testimony given by me.

Any additions or corrections that I feel are necessary, I will attach on a separate sheet of paper to the original transcript.

 3/6/25

Signature of Deponent

I hereby certify that the individual representing himself/herself to be the above-named individual, appeared before me this 6 day of March, 2025 and executed the above certificate in my presence.



NOTARY PUBLIC IN AND FOR

Los Angeles

County Name

MY COMMISSION EXPIRES: Nov 28 2027

California Notary  
Certificate  
Attached



**CALIFORNIA ACKNOWLEDGMENT**

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

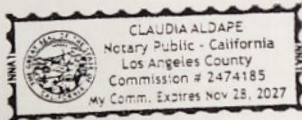
State of California }  
County of Los Angeles }  
On March 04 2025 before me, \_\_\_\_\_  
Date Here Insert Name and Title of the Officer  
personally appeared Jacqueline N. Palmer  
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature \_\_\_\_\_  
Signature of Notary Public



Place Notary Seal and/or Stamp Above

**OPTIONAL**

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: Acknowledgment Certificate of Dependent  
Document Date: March 04 2025 Number of Pages: 2  
Signer(s) Other Than Named Above: N LA

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_ Signer's Name: \_\_\_\_\_  
 Corporate Officer – Title(s): \_\_\_\_\_  Corporate Officer – Title(s): \_\_\_\_\_  
 Partner –  Limited  General  Partner –  Limited  General  
 Individual  Attorney in Fact  Individual  Attorney in Fact  
 Trustee  Guardian or Conservator  Trustee  Guardian or Conservator  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_  
Signer is Representing: \_\_\_\_\_ Signer is Representing: \_\_\_\_\_

**EXHIBIT - 6**

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IN THE UNITED STATES DISTRICT COURT  
FOR THE CENTRAL DISTRICT OF CALIFORNIA

JACQUELINE PALMER, et al.,

Plaintiffs,

vs.

CASE NO.: 5:23-cv-01047-JGB-SP

ROB BONTA, in his  
official capacity as  
Attorney General of the  
State of California, et al.,

Defendants.

\_\_\_\_\_ /

REMOTE

DEPOSITION OF: HEATHER MICHELLE LEWIS

DATE: THURSDAY, FEBRUARY 6, 2025

TIME: 9:29 A.M. - 12:06 P.M.

LOCATION: VIA ZOOM

STENOGRAPHICALLY  
REPORTED BY: LINDY ROMANOFF, COURT REPORTER

1 Q. Is there any difference in your ability or  
2 authority to provide patient care after you obtained a  
3 DNP versus before you obtained a DNP?

4 A. None.

5 Q. What are you seeking in this lawsuit?

6 A. I would like to use the title that I earned.

7 Q. When you say you would like to use the title  
8 that you earned, what specifically does that mean?

9 A. I would like to be able to introduce myself as  
10 Dr. Heather Lewis, family nurse practitioner.

11 Q. In what context would you like to be able to  
12 introduce yourself --

13 A. Every interaction with patients.

14 Q. Is it fair to say that you would like to use  
15 the title doctor if you were allowed to do so?

16 A. If I was, yes.

17 Q. In meeting new patients?

18 A. Yes.

19 Q. In -- on websites?

20 A. Yes.

21 Q. On social media?

22 A. Yes.

23 Q. On business cards?

24 A. Yes.

25 Q. In advertisement?

1 A. Yes, if I advertised.

2 Q. With patients?

3 A. Yes.

4 Q. In person or in spoken communication, or  
5 written communication, or both?

6 A. Both.

7 Q. Do you intend to use the title doctor as  
8 opposed to the letters DNP?

9 A. I think I would like the wording of our current  
10 statutes to be changed and be consistent more with other  
11 practitioners, such as the doctors of chiropractic that  
12 I work with, Dr. Jeffrey Stansberry, D.C. How I would  
13 like to be able to say, Dr. Heather Lewis, FNP-C, DNP.  
14 I would like the statutes for the State of California to  
15 change and become consistent with other practitioners  
16 that are allowed to use the title doctor.

17 Q. Why would you like to use the title doctor?

18 A. My veterinarian can use it, my chiropractor can  
19 use it. They've all earned their degrees. I've earned  
20 it.

21 Q. The question I asked a little while ago was  
22 whether you would -- you wanted to use the title doctor  
23 as opposed to the letters DNP, and I think you responded  
24 about the statute, but just to make sure I have a clear  
25 answer on this.

1 mistake you for a medical doctor?

2 MS. MATIAS: Objection, that calls for  
3 speculation.

4 THE WITNESS: I do not believe so because I  
5 believe I would still introduce myself the same way  
6 that I do now, that I am their family nurse  
7 practitioner.

8 BY MR. CHOE:

9 Q. So, let me just unpack that because you say you  
10 would introduce yourself the same way you do now.

11 Do you currently introduce yourself as doctor?

12 A. I do not.

13 Q. So, it would be fair to say that if you prevail  
14 in this lawsuit, that you would introduce yourself in a  
15 different way to patients going forward?

16 A. Yes.

17 Q. And the way that you would introduce --

18 Well, can -- can you clarify the way that you  
19 would introduce yourself to patients?

20 A. So, currently I introduced myself as Heather,  
21 I'm the family nurse practitioner at -- whichever  
22 practice, and these are the things that I understand our  
23 visit is for today, and then we proceed forward.

24 If I had the option to use the title I earned,  
25 I would probably still introduce myself as Dr. Heather,



1           A.     So, when I started my DNP program, it was  
2     during COVID, and my family practice with Dr. Sabbah had  
3     closed down March of 2020, and I was not working.

4           Our surgical services, we are considered --  
5     with Dr. Bobby Bhasker-Rao, we are considered elective  
6     surgery, and at that point, the hospital was only  
7     allowing emergent surgeries. And so we were pretty --  
8     pretty closed.

9           There wasn't a whole lot we could do, we  
10    couldn't move patients forward to proceed with surgery.  
11    So work had really dwindled off. Patients were not  
12    coming in on referrals, and so I think -- if I remember  
13    correctly, I stopped seeing patients around July of 2022  
14    at that practice.

15           And so, I was just kind of spending a lot of  
16    days on internet, and stuff like that, catching up on  
17    CEUs. Then I came across the Aspen --

18           Q.     What's -- what's a CEU?

19           A.     The continuing education units for my nursing  
20    licenses.

21           Q.     Okay.

22           A.     So, I enrolled for Aspen, that's when -- I  
23    think it was around October that I enrolled for Aspen.

24           And then I was hired at Go Healthcare in  
25    November, and I thought, great, now I'm back to work and

1 I just signed up for a doctoral degree. How is this  
2 going to work? But truly made it work. It was -- it  
3 was very easy.

4 And then I believe it was around March of '21,  
5 possibly -- I think it -- the beginning of the year of  
6 2021 surgical services was open again to elective  
7 surgeries. It may have been as late as April or May.  
8 And then we all went back to work at Dr. Bobby  
9 Bhasker-Rao's office also.

10 And then in January -- let's see, November --  
11 in January, I started back one day a week at my family  
12 practice. And so it was a lot of work and a lot of  
13 school.

14 Q. Okay. So, at any time prior to your getting  
15 your DNP, did you ever have to take a class in biology?

16 A. Yes.

17 Q. What about biochemistry?

18 A. Yes.

19 Q. Anatomy?

20 A. Yes.

21 Q. Immunology?

22 A. Yes.

23 Q. Differential diagnosis?

24 A. Yes.

25 Q. What about pathology?

1 would just clarify.

2 Q. What would you clarify?

3 A. I would say, oh, I'm glad that you found us,  
4 I'm -- I'm the nurse practitioner. Dr. Bobby still is  
5 the surgeon on the team.

6 Q. Have you ever operated outside the scope your  
7 practice?

8 A. No.

9 MS. MATIAS: Okay. I think that's all the  
10 questions I have.

11 Shiwon?

12 MR. CHOE: Yes, I have a few follow-ups.

13 REDIRECT EXAMINATION

14 BY MR. CHOE:

15 Q. In the scenario that Ms. Matias just raised,  
16 you said you would clarify that you're a nurse  
17 practitioner, why would you do that?

18 A. I just always do.

19 Q. Do you think it's important --

20 A. I'm not -- if they thought I was their  
21 anesthesiologist, I would say, no, I'm not your  
22 anesthesiologist. I'm just here to do your history and  
23 physical for Dr. Bobby.

24 Q. So, you think it's important for patients to  
25 know that you are a nurse practitioner?

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CERTIFICATE OF OATH

STATE OF FLORIDA:  
COUNTY OF CITRUS:

I, Lindy Romanoff, Notary Public, State of Florida,  
do hereby certify that HEATHER MICHELLE LEWIS remotely  
appeared before me on February 6, 2025 and was duly  
sworn and produced driver's license as identification.

Signed this 24th day of February, 2025.

  
Lindy Romanoff, Court Reporter

Notary Public, State of Florida  
My Commission No.: HH 578868  
Expires: August 14, 2028

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CERTIFICATE OF REPORTER

STATE OF FLORIDA:  
COUNTY OF CITRUS:

I, Lindy Romanoff, Notary Public, State of Florida,  
certify that I was authorized to and did  
stenographically report the deposition of HEATHER  
MICHELLE LEWIS; that a review of the transcript was  
requested; and that the foregoing transcript, pages 4  
through 98, is a true and accurate record of my  
stenographic notes.

I further certify that I am not a relative,  
employee, or attorney, or counsel of any of the parties,  
nor am I a relative or employee of any of the parties'  
attorneys or counsel connected with the action, nor am I  
financially interested in the action.

DATED this 24th day of February, 2025.

  
Lindy Romanoff, Court Reporter

CERTIFICATE OF DEPONENT

I hereby certify that I have read and examined the foregoing transcript, and the same is a true and accurate record of the testimony given by me.

Any additions or corrections that I feel are necessary, I will attach on a separate sheet of paper to the original transcript.

*Heather Lewis*

Signature of Deponent

I hereby certify that the individual representing himself/herself to be the above-named individual, appeared before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_, and executed the above certificate in my presence.

**SEE ATTACHED  
NOTARY DOCUMENT**

\_\_\_\_\_  
NOTARY PUBLIC IN AND FOR

\_\_\_\_\_  
County Name

MY COMMISSION EXPIRES:

# CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Riverside

On 03/07/2025 before me, Zsuzsanna Pheil, Notary Public,  
(Here insert name and title of the officer)

personally appeared Heather Lewis

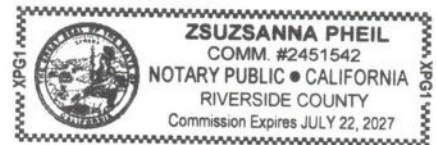
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Zsuzsanna Pheil  
Signature of Notary Public

(Notary Seal)



## ADDITIONAL OPTIONAL INFORMATION

### DESCRIPTION OF THE ATTACHED DOCUMENT

Certificate of Dependent  
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages \_\_\_\_\_ Document Date 3/7/25

(Additional information)

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**EXHIBIT - 7**



1 IN THE UNITED STATES DISTRICT COURT  
2 FOR THE CENTRAL DISTRICT OF CALIFORNIA

3  
4 JACQUELINE PALMER, et al.,  
5 Plaintiffs,

6 vs. CASE NO.: 5:23-cv-01047-JGB-SP

7 ROB BONTA, in his  
8 official capacity as  
9 Attorney General of the  
10 State of California, et al.,  
11 Defendants.

\_\_\_\_\_ /

12 REMOTE  
13 DEPOSITION OF: RODOLFO JARAVATA HANSON  
14 DATE: FRIDAY, FEBRUARY 7, 2025  
15 TIME: 9:28 A.M. - 12:02 P.M.  
16 LOCATION: VIA ZOOM  
17 STENOGRAPHICALLY  
18 REPORTED BY: LINDY ROMANOFF, COURT REPORTER  
19  
20  
21  
22  
23  
24  
25

1 background, starting after high school.

2 A. After high school, I went to a local college in  
3 the Philippines, graduated with a bachelor of science in  
4 physical therapy. And then started master's of arts in  
5 science education in the local university there,  
6 Immigrated here.

7 And then I started an accelerated bachelor of  
8 science in nursing at a college -- a university in Los  
9 Angeles, and then worked as a nurse.

10 And then got into Master of Science in  
11 Nursing -- Family Nurse Practitioner track. And then  
12 while I was working as a nurse practitioner, I undertook  
13 a Doctor of Nursing Practice with Johns Hopkins  
14 University and graduated 2023.

15 Q. Thanks. I would like to break that down a  
16 little bit, starting with the local college in  
17 Philippines.

18 What were the dates that you went to that  
19 college?

20 A. It was June of 1998; graduated March 2003. And  
21 I can't remember the exact year I started the master's,  
22 but I graduated 2009 for the master's in -- Master of  
23 Arts in Science Education.

24 Q. Then, you said you started an accelerated BSN,  
25 or bachelor of science in nursing; is that right?

1 A. Yes.

2 Q. In Los Angeles.

3 What -- when did you start that program?

4 A. I can't exactly remember from the top of my  
5 unless I pull up my résumé.

6 Q. Your best recollection.

7 A. 2014, graduated 2015.

8 Q. You say it was an accelerated program.

9 What's an accelerated program?

10 A. So, the -- if someone has a prior bachelor's  
11 degree, the prerequisite non-nursing courses are no  
12 longer required. And so the program is shortened to  
13 focus on core nursing courses without the need for,  
14 like, English, history, that you would normally need to  
15 graduate a bachelor program.

16 Q. What part are the core nursing courses?

17 A. So, that would be public health nursing,  
18 maternity and child nursing, medical surgical nursing,  
19 research, human anatomy and physiology, pharmacology; to  
20 name the ones that I can remember.

21 Q. What school did you attend that program?

22 A. Mount St. Mary's University.

23 Q. Was that an in-person program or an online  
24 program?

25 A. Yes, in person.

1 Q. And you graduated that in 2015?

2 A. 2015.

3 Q. And you said you went to get a master's; is  
4 that right?

5 A. Yes.

6 Q. What were the dates of that?

7 A. Again, I can't remember from the top of my  
8 head. 2017 to 2020, if I'm not mistaken.

9 Q. Where was that, what school?

10 A. Chamberlain University.

11 Q. So, what was that program? Like, what was the  
12 coursework? What were the requirements?

13 A. So, these are the courses required by national  
14 certification to sit for the family nurse practitioner  
15 certification.

16 Q. What's the family nurse practitioner  
17 certification?

18 A. This is to -- this is for the -- the -- this is  
19 a board exam for advanced training nurses to be able to  
20 practice as a family nurse practitioner based on the  
21 requirements by the American Academy of Nurse  
22 Practitioners.

23 Q. So, what are the courses required to sit for  
24 the family nurse practitioner's certification?

25 A. I don't remember all of them. I don't have

1 A. Riverside University Health Systems Medical  
2 Center.

3 Q. So, when you say where you work, you mean it's  
4 a condition of Riverside specifically, not of the  
5 location -- not of the geographic location where you  
6 work?

7 A. It's a requirement for my place of work, yes.

8 Q. So, I was just about to turn to your work.  
9 You currently work, you said, at Riverside?

10 A. RUHS, to be more short.

11 Q. RUHS?

12 A. Yes.

13 Q. What do you do there?

14 A. I'm a nurse practitioner in the pre-testing --  
15 Pre-anesthesia Testing Clinic, PAT clinic.

16 Q. And what do you do there?

17 A. So, the Pre-anesthesia Testing Clinic, or PAT  
18 clinic, is responsible for making sure that the patients  
19 are safe to proceed in getting anesthesia for a surgery  
20 or procedure they're scheduled to undergo.

21 Q. How many patients do you see a day?

22 A. A day? Anywhere between 15 and 19 patients a  
23 day.

24 Q. Do you ever search for your own patients, or do  
25 patients just come into --

1 A. No, patients are scheduled with the PAT clinic.  
2 Once there is a decision made for the patient to have  
3 surgery, or a medical procedure, they need to go through  
4 PAT to be cleared to have anesthesia.

5 Q. How long have you worked at RUHS?

6 A. More than three years.

7 Q. When did you start?

8 A. October 2022.

9 Q. Where did you work before that?

10 A. With Arrowhead Neurosurgery Medical Group.

11 Q. And what were the dates of your work there?

12 A. August 2021 to September 2022.

13 Q. What did you do there?

14 A. I was a nurse practitioner with the  
15 neurosurgery services. This medical group provides  
16 neurosurgery care to four hospitals; Arrowhead Regional  
17 Medical Center, RUHS, Redlands Community Hospital,  
18 Desert Regional Medical Center. And my role is to  
19 assist the neurosurgeons and the resident doctors in  
20 providing their surgery services.

21 Q. Prior to working at Arrowhead, where, if  
22 anywhere, did you work?

23 A. I was an ICU nurse in Menifee Medical --  
24 Menifee Global -- it's changed names, Menifee -- Menifee  
25 Global Medical Center.

1 A. Yes.

2 Q. What is that?

3 A. So, these would be -- this would be a clinic  
4 that provides, for example, Botox injection, facial  
5 treatments.

6 Q. Anything else?

7 A. Injections, like, fillers.

8 Q. So, at this esthetic clinic that you plan to  
9 open, describe to me how that would work; who -- who  
10 would work there, how you would find patients. What's  
11 your plan?

12 A. So --

13 MS. MATIAS: Objection, break it -- can you  
14 break it -- sorry, compound question.

15 Can you break it down, please?

16 BY MR. CHOE:

17 Q. Can -- well, let's start with this: So, in the  
18 esthetic clinic that you plan to open, who would work  
19 there?

20 A. Myself and an assistant, perhaps a medical  
21 assistant.

22 Q. Anyone else?

23 A. If I can afford more, then maybe more. At  
24 least one assistant, and then if -- if I can afford --  
25 like I said, maybe more than one assistant, maybe a

1 nurse.

2 Q. Do you plan to work with any physicians or  
3 surgeons at this esthetic clinic?

4 A. As the law stands, I'm required to have a  
5 collaborating physician.

6 Q. So, what would the plan be for the  
7 collaborating physician?

8 A. Can you explain the question a little bit more?

9 Q. In your plan to open this esthetic clinic, do  
10 you have a plan for how you would work with the  
11 collaborating physician?

12 A. I would have to have a discussion with a  
13 physician about the plan, and the -- the exact  
14 interactions, I would have with the physician -- for  
15 example, if the physician would be physically in the  
16 clinic or will be on a supervisory role and what -- and  
17 how much interaction they're going to have with the  
18 patients in the clinic.

19 Q. Have you had discussions with physicians about  
20 serving as the supervising physician for this clinic?

21 A. Once, briefly.

22 Q. What was the plan for this physician with  
23 respect to your clinic, or your planned clinic?

24 A. That they would be the supervising physician  
25 and that would be up to them how much interaction they



1 will have with me and the clients.

2 Q. What's your plan, if you have a plan, for  
3 finding patients for this clinic?

4 A. It would be word of mouth, among co-workers,  
5 online advertisement.

6 Q. You stated in your interrogatory responses that  
7 you have reserved the website xoeyclinic.com; is that  
8 correct?

9 A. Yes.

10 Q. What does xoeyclinic. mean? Does X-O-E-Y have  
11 any meaning?

12 A. That's Zoe, just spelled with an X.

13 Q. Does it mean --

14 A. Xoey is a name.

15 Q. Does that have any meaning or significance?

16 A. That's -- that's the name of my dog.

17 Q. You stated in your interrogatory responses that  
18 you have halted work on this clinic as a result of this  
19 lawsuit.

20 Can you explain why you have halted work on the  
21 clinic as a result of this lawsuit?

22 A. I don't know if I'm able to present my  
23 qualification, my degree, without violating the law as  
24 it is. I'm concerned that stating that I am a Doctor of  
25 Nursing -- a graduate of Doctor of Nursing Practice is a

1 violation of the law. And I'm concerned about being  
2 prosecuted for using a doctor -- my doctorate program,  
3 my doctorate title.

4 Q. You say you're concerned about being prosecuted  
5 for using your doctorate title.

6 How do you want to use your doctorate title?

7 A. So, after my name would be the post-nominals,  
8 the -- the letters, DNP, and I would qualify that at the  
9 bottom of my name as Doctor of Nursing Practice, Johns  
10 Hopkins University, and that -- that is one of the  
11 qualifications I have. And I'm concerned that this is  
12 grounds for being prosecuted for using the word doctor.

13 Q. When you say post-nominals, what do you mean by  
14 that?

15 A. Those are the letters after someone's name.

16 Q. What are the letters of your name, or what --  
17 what -- what -- strike that. Let me ask again.

18 What letters -- let's start with this: What  
19 letters do you currently use after your name?

20 A. There's a lot. So DNP, which stands for Doctor  
21 of Nursing Practice; MASE, Master of Arts and Science  
22 Education; MSN, Master of Science and Nursing; BS --  
23 BSPT, Bachelor in Science for Physical Therapy; RN,  
24 which stands for Registered Nurse; PHN, Public Health  
25 Nurse.

1 Q. So, I'm showing you what's been marked as  
2 Exhibit 1. This is the amended complaint that you filed  
3 in this case. I'm going to scroll down to paragraph 29.

4 Do you see that?

5 A. Yes.

6 Q. So, 29 reads: Dr. Hanson desires AND intends  
7 to use the title doctor, qualified by his educational  
8 and specialty credentials, in a professional context,  
9 including with current patients and at the esthetics  
10 clinic he plans to open. Specifically, if it were legal  
11 to do so, Dr. Hanson would use the honorific title on  
12 business cards, his work scrubs, his prescription pad,  
13 and on the professional website he has been building for  
14 his planned esthetics clinic.

15 Do you see that?

16 A. Yes.

17 Q. In that second sentence where it says use the  
18 honorific title; does that mean the title doctor?

19 A. Yes.

20 Q. It says that you intend to use the title of  
21 doctor qualified by your education and specialty  
22 credentials.

23 What do you mean by qualified by your  
24 educational and specialty credentials?

25 A. That I'm a nurse practitioner, that I work --

1 I'm board certified as a family nurse practitioner. And  
2 depending where I work, I would include that I'm working  
3 at a pre-anesthesia testing clinic, or an esthetic  
4 clinic, or both.

5 Q. Do you intend to use the title doctor without  
6 such qualification?

7 A. No.

8 Q. Why not?

9 A. Because I'm proud of being a nurse  
10 practitioner.

11 Q. You mentioned that you want to use this title  
12 with patients in paragraph 29.

13 Do you see that?

14 A. I'm sorry, can you repeat that? You cut -- cut  
15 out a little bit.

16 Q. Sure.

17 It says in paragraph 29: Dr. Hanson desires  
18 and intends to use the title of doctor qualified by his  
19 educational and specialty credentials, in a professional  
20 context, including with current patients and at the  
21 esthetics clinic he plans to open.

22 Do you see that?

23 A. Yes.

24 Q. What do you mean using the title with current  
25 patients?

1 A. In the pre-anesthesia testing clinic, patients.

2 Q. So, specifically, how would you use the title  
3 with patients? How would you use the title doctor with  
4 patients?

5 A. I would introduce myself as Dr. Hanson, instead  
6 of just introducing myself as Rodolfo.

7 Q. Why do you want to introduce yourself as  
8 Dr. Hanson instead of Rodolfo?

9 A. Because it is what I've earned after graduating  
10 my doctorate program, and it tells the patient that I am  
11 a doctorate holder.

12 Q. Now, before the break, we were talking about  
13 the post-nominals that you say that you use, and I would  
14 like to go over them.

15 Starting with MASE, and you said that stands  
16 for Master of Arts and Science Education?

17 A. Yes.

18 Q. When did you first encounter the post-nominal  
19 MASE?

20 A. I don't recall.

21 Q. When did you first learn what the post-nominal  
22 MASE means?

23 A. When I was applying for the program.

24 Q. When you were applying for which program?

25 A. The Master of Arts and Science Education

1 The next question actually is not about the  
2 exhibit specifically, but I'm happy to put it up, if  
3 you want to take a look at it.

4 Okay. The next question is not about the  
5 exhibit, so I'm going to take it down again. Part  
6 of it -- when I put it up, it changes the view on my  
7 screen, so I can't see everybody as well. Just --  
8 just as note, but at -- at any time, if you want to  
9 see the exhibit, let me know and I can put it back  
10 up.

11 BY MR. CHOE:

12 Q. What other situations would you like to use the  
13 term -- sorry, scratch that. Let me -- let me reask  
14 that.

15 What other situations -- in what other  
16 situations -- I keep misstating this.

17 In what other situations would you like to use  
18 the title doctor?

19 A. If I were to write or publish an article. I  
20 cannot think of any other right now.

21 Q. You want to use the title doctor on your  
22 letterhead?

23 A. Yes.

24 Q. Do you want to use the title doctor in  
25 advertisements?

1 A. Yes.

2 Q. Do you want to use the title doctor in  
3 advertisements to patients?

4 A. Yes.

5 Q. Do you want to use the title doctor in --  
6 in-person interactions with patients?

7 A. Yes.

8 Q. In spoken communications?

9 A. Yes.

10 Q. In written communications?

11 A. Yes.

12 Q. Do you plan to use the qualifications of your  
13 education and specialty credentials in each of those  
14 communications that you have?

15 A. Yes.

16 Q. Do you plan to put those educational and  
17 specialty credentials in your prescription pad?

18 A. Yes.

19 Q. On your letterhead?

20 A. Yes.

21 Q. On your website?

22 A. Yes.

23 Q. On social media?

24 A. Yes.

25 Q. In advertisements?

1 A. Yes.

2 Q. In your spoken communication with patients?

3 A. Yes.

4 Q. In your written communication with patients?

5 A. Yes.

6 Q. How would you respond if someone referred to  
7 you as doctor without those educational and specialty  
8 credential qualifications?

9 MS. MATIAS: Objection, vague.

10 Can you clarify -- clarify the context you are  
11 referring to?

12 BY MR. CHOE:

13 Q. If a patient referred to you as doctor without  
14 using those educational and specialty credential  
15 qualifications, how would you respond?

16 A. The question is still vague, but if the -- this  
17 happened inside the Pre-anesthesia Testing Clinic, in  
18 the PAT clinic, I would make sure that they are aware  
19 they are talking to their nurse practitioner, not their  
20 anesthesiologist.

21 Q. How do you make them aware that they are  
22 talking to their nurse practitioner and not their  
23 anesthesiologist?

24 A. I tell them.

25 Q. What do you tell them?



1 A. That I am an anesthesia nurse practitioner;  
2 that I'm not their anesthesiologist, and I would not be  
3 doing their anesthesia.

4 Q. Has any patient ever asked you what an  
5 anesthesia nurse practitioner is?

6 A. Yes.

7 Q. What do they ask?

8 A. What is an anesthesia nurse practitioner? And  
9 I tell them what they're -- they're -- what -- what I am  
10 supposed to be doing for them in that encounter.

11 Q. What do you tell them you are supposed to be  
12 doing for them in that encounter?

13 A. So, I always tell this at the beginning of each  
14 interaction with patients: That I am seeing them to  
15 clear them for anesthesia, to make sure that they are  
16 safe to proceed to go under anesthesia.

17 Q. So, I would like to put up Exhibit 1 again.  
18 This is the amended complaint.

19 Can you see it?

20 A. Yes.

21 Q. So, I'm going to read a portion of paragraph  
22 28, it says: When he interacts with new patients, he  
23 explains that he is a nurse practitioner and not,  
24 italicized, a physician or surgeon, as required by  
25 California Business and Profession Code, Section

1 2837.103(d) and 2837.104(d) .

2 Do you see that?

3 A. Yes.

4 Q. How do you explain to new patients that you are  
5 a nurse practitioner and not a physician or a surgeon?

6 A. I tell them that I am a nurse practitioner, I  
7 am not their anesthesiologist. I am there to make sure  
8 that they can proceed with being under anesthesia for  
9 the procedure, that I will not be the one doing the  
10 anesthesia. I am not their anesthesiologist the day of  
11 their procedure. I am here to look at their medical  
12 record, ask them questions, exam them and see if there's  
13 any concern with them being under anesthesia.

14 Q. What is the difference between a nurse  
15 practitioner and a physician or a surgeon?

16 A. That's a broad question. I will try to answer,  
17 as best as I can.

18 A nurse practitioner is trained under the  
19 nursing school program. We are never -- we never claim  
20 to be training under medicine. A physician is someone  
21 who graduated from a Doctor of Medicine, M.D., or Doctor  
22 of Ophthalmology, D.O. training and are licensed as a  
23 medical doctor.

24 Q. What is the difference, in your view, between  
25 the role that a nurse practitioner plays and the role

1 that a medical doctor plays in healthcare?

2 A. I cannot speak for physicians. So, I'll only  
3 speak for my role as a nurse practitioner.

4 A nurse practitioner is a registered nurse who  
5 received additional training in education to be able to  
6 examine patients, order tests, prescribe medication,  
7 interpret tests and create a plan of care for a patient.

8 Q. Do you have an understanding of the role that  
9 physicians and surgeons play in healthcare?

10 A. I have an understanding, yes.

11 Q. So, what is your understanding of the  
12 difference, if any, between the role that a DNP -- a DNP  
13 plays in healthcare and the role that a physician or  
14 surgeon plays in healthcare?

15 A. Again, that's a broad question, but as a nurse  
16 practitioner, I do what I am trained and what the law  
17 says is my scope of practice. And that is determined by  
18 the state you practice in, and so I -- I practice within  
19 the scope of my practice, as this -- as is described by  
20 the law in California.

21 Q. So, what is your understanding of the  
22 difference, as prescribed by law, between the role of a  
23 DNP and the role of a physician and surgeon in  
24 healthcare?

25 A. So, a nurse practitioner is able to order

1 tests, prescribe medication, diagnose a patient within  
2 their specialty. A physician is able to do those and  
3 more, including doing surgery, depending on their  
4 training and their qualifications.

5 Q. Other than surgery, are you aware of anything  
6 that physicians and surgeons can do that DNPs cannot?

7 A. They can perform interventional procedures.  
8 So, these are procedures where the patient is not cut  
9 open, but is done with instruments that penetrate the  
10 body.

11 Physicians are able to do specialized tests and  
12 interpret those tests. For example, if they're able to  
13 do an echocardiogram and interpret that on their own  
14 without the need of a specialized physician, like a  
15 radiologist, to interpret that for them.

16 Q. Is there anything else that a physician and  
17 surgeon can do that a DNP cannot?

18 A. Not that I can recall.

19 Q. You said that a DNP or NP can order tests,  
20 prescribe medicine -- medication, diagnose patients  
21 within their specialty.

22 What do you mean by within their specialty?

23 A. So, I am a family nurse practitioner, which I'm  
24 able to see patients from birth until just before their  
25 death.

1 medical doctor?

2 A. I don't know. I don't know what they're  
3 thinking. I only know what they ask.

4 Q. Have any patients ever asked if you were a  
5 medical doctor?

6 A. No.

7 Q. Have any patients ever said anything to suggest  
8 that they thought that you were a medical doctor?

9 A. They ask if I will be doing their anesthesia,  
10 and I tell them I am not doing their anesthesia.

11 Q. Do you think it's important for patients to  
12 know whether a given healthcare provider is a medical  
13 doctor versus a DNP?

14 A. Well, the patients need to know anyone they're  
15 facing, who they are and what their profession is,  
16 regardless of whether the patient is seeing a nurse, a  
17 nurse practitioner, a CRNA, or a physician.

18 Q. So, you would agree that it's important for  
19 patients to understand whether a health provider is a  
20 medical doctor versus a DNP?

21 A. Yes.

22 Q. Do you have a view as to whether patients  
23 prefer to be seen by a medical doctor versus someone who  
24 is not a medical doctor?

25 A. I don't know what they think.

1 Practice, and the word nursing is in there; so that's  
2 not a physician title.

3 Q. Would it -- do you have a view as to whether a  
4 patient encountering the title Dr. Rodolfo Jaravata  
5 Hanson, DNP would understand that you are not a medical  
6 doctor?

7 A. Yes, because DNP is in there, not M.D., not  
8 D.O.

9 Q. Do you have a view as to whether the use -- or  
10 scratch that.

11 Do you have a view as to how the use of the  
12 title doctor would affect your ability to find patients  
13 for your esthetic clinic?

14 A. Yes, it would -- it would have some -- it will  
15 have an impact on my ability to find patients.

16 Q. What impact?

17 A. I would probably have more patients ascribing  
18 to the services I would provide, if they know that the  
19 person who is running that clinic is trained at a  
20 doctorate level versus a nurse practitioner with only a  
21 master's degree education.

22 Q. What's your basis for that view?

23 A. That someone with a doctorate degree is trained  
24 at the highest level versus someone who's trained at the  
25 master's can still get a higher degree from them.

1 Q. When you say the highest level, what do you  
2 mean by that?

3 A. Doctor of Nursing Practice.

4 Q. Do you think that patients would be more  
5 confident in an individual who has a higher level of  
6 education?

7 A. Yes.

8 Q. Do you think that medical school as a higher  
9 level of education than a DNP program?

10 A. No, it's a different training.

11 Q. Do you think that patients would be more  
12 confident for someone who has pursued in -- someone that  
13 has pursued a medical doctorate as opposed to a DNP?

14 A. I don't know. I can't speculate to what the  
15 patients thinks, but they would know that someone who's  
16 trained as a doctor, whether in medical school or in  
17 nursing school, has achieved the highest level of  
18 training and education that they can achieve in their  
19 field.

20 Q. I'm asking for your view.

21 So, your view is that patients would be more  
22 confident in someone who has received a DNP than someone  
23 who has not, or received only a master's in nursing,  
24 because a person who has received a DNP has pursued more  
25 education; is that correct?

1 A. Well, I don't even know if calling myself a  
2 Doctor of Nursing Practice would be violating the -- the  
3 statute, as it is. So, I would not even venture in  
4 trying to call myself that.

5 And so, how am I going to be able to explain my  
6 qualifications if the law even prevents me from using  
7 the word doctor in front of a patient?

8 Q. So, I believe you said that patients would  
9 gravitate toward you if you are able to use the title  
10 because they would have confidence that you have  
11 received the highest possible degree in nursing; is that  
12 correct?

13 A. Yes.

14 Q. If you were able to tell patients that you have  
15 the highest possible degree in nursing, why would they  
16 not gravitate toward you if you do not use the term  
17 doctor?

18 A. Because they know that patient -- that the  
19 person they're seeing has a master's degree, and  
20 they're -- and only a master's degree; and therefore,  
21 they need to know more whether they are getting the best  
22 care that they can from a person based solely on their  
23 educational credential.

24 Q. Are you able to explain to patients who come  
25 across your website what your education and



1 qualifications mean?

2 A. The website has not been constructed yet  
3 because I'm concerned about using the word doctor.

4 Q. In a website format, are you able to  
5 communicate directly with patients about what your  
6 titles and education and qualifications mean?

7 A. I don't know if it's violating the law if I  
8 even mention the word Doctor of Nursing Practice on the  
9 website.

10 Q. Do you maintain any websites?

11 A. Yes.

12 Q. What websites do you maintain?

13 A. pathophysiologytutor.com.

14 Q. What is pathophysiologytutor.com?

15 A. This is a previous -- previous profession or  
16 previous job that I had before where I provide  
17 tutoring -- tutoring services, and I created the website  
18 to market that job that I used to do.

19 Q. Is the website still active?

20 A. Yes.

21 Q. Do you still tutor?

22 A. No.

23 Q. Does anyone else work on the website with you?

24 A. No.

25 Q. Does anyone else work at this tutoring program

1 Q. In those terms?

2 A. Yes.

3 Q. I would like to turn back to Exhibit 2. This  
4 is the news article.

5 Do you see that?

6 A. Yes.

7 Q. Go back to the top, if you want.

8 So, I'm scrolling down now to page 5.

9 Do you see that?

10 A. Yes.

11 Q. And it says -- the second-to-last paragraph of  
12 the article says: Even before he earned his doctorate,  
13 Jaravata-Hanson decided to join the case as a plaintiff.

14 Is that -- do you see that sentence?

15 A. Yes.

16 Q. Is that correct, that you decided to join this  
17 lawsuit even before you earned your DNP?

18 A. Yes.

19 Q. Why did you decide to do that?

20 A. Because it's a miscarriage of justice what the  
21 law is trying to do for nurse practitioners who have  
22 rightfully earned their doctorate degree and not to be  
23 able to call themselves doctor.

24 Q. Why is that a miscarriage of justice?

25 A. Because there's more other important things

1 that the law should be doing other than persecuting  
2 nurses.

3 Q. Do you have any concern that patients might be  
4 confused about DNPs using the title doctor?

5 A. No.

6 Q. You have no concern?

7 A. No.

8 Q. Do you think that any patients -- do you think  
9 it's possible that patients might be confused about DNPs  
10 using the title doctor?

11 A. I don't know what they're thinking. If they  
12 are confused, they ask; and if they ask, I answer what  
13 they ask.

14 Q. In situations where they're not face-to-face  
15 with you and can't ask, do you have any concern that  
16 patients might be confused about DNPs using the title  
17 doctor?

18 A. No, the phone calls that I have with patients,  
19 I always tell them: My name is Rodolfo, I saw you  
20 earlier today, I was the nurse practitioner you saw in  
21 the clinic. I have these results to tell you. And  
22 patients never tell me that they think I'm a nurse -- I  
23 mean, I'm a physician or a medical doctor.

24 Q. Do you have concerns that DNPs using the title  
25 doctor in advertising on web pages, situations where

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CERTIFICATE OF OATH

STATE OF FLORIDA:  
COUNTY OF CITRUS:

I, Lindy Romanoff, Notary Public, State of Florida,  
do hereby certify that RODOLFO JARAVATA HANSON remotely  
appeared before me on February 7, 2025 and was duly  
sworn and produced driver's license as identification.

Signed this 25th day of February, 2025.



-----  
Lindy Romanoff, Court Reporter

Notary Public, State of Florida  
My Commission No.: HH 578868  
Expires: August 14, 2028

1 CERTIFICATE OF REPORTER

2 STATE OF FLORIDA:

3 COUNTY OF CITRUS:

4

5 I, Lindy Romanoff, Notary Public, State of Florida,  
6 certify that I was authorized to and did  
7 stenographically report the deposition of RODOLFO  
8 JARAVATA HANSON; that a review of the transcript was  
9 requested; and that the foregoing transcript, pages 4  
10 through 97, is a true and accurate record of my  
11 stenographic notes.

12 I further certify that I am not a relative,  
13 employee, or attorney, or counsel of any of the parties,  
14 nor am I a relative or employee of any of the parties'  
15 attorneys or counsel connected with the action, nor am I  
16 financially interested in the action.

17

18 DATED this 25th day of February, 2025.

19

20

21

  
Lindy Romanoff, Court Reporter

22

23

24

25

Notice Date: Tuesday, 25. February 2025

Attention: Rodolfo Jaravata Hanson

Re:Palmer v. Bonta, et al.  
Deposition of Rodolfo Jaravata Hanson (2/7/2025)

NOTICE REGARDING SIGNING DEPOSITION TRANSCRIPT

The above referenced transcript is available for review. Within 30 days, or the applicable timeframe of your legal jurisdiction, the witness may read the testimony to verify its accuracy. Any changes can be noted on the following errata page.

Once the transcript has been reviewed, the witness should sign and date the certificate of deponent page. The signed certificate, errata, and original transcript (if provided) must be returned to TP.One per the rules of civil procedure.

If the transcript and errata are not returned within the allotted time, the unsigned transcript may be used as if signed by the witness.

Thank you,

TP.One Production Department  
Production@tp.one



## Deponent Errata Page

Notice Date: 02/25/2025

Deposition Date: 2/7/2025

Deponent: Rodolfo Jaravata Hanson

Case Name: Palmer v. Bonta, et al.

Page:Line	Now Reads	Should Read
12:7	2014, graduated 2015	2016, graduated 2017
13:2	2015	2017
13:7	... 2017 to 2020	... 2018 to 2019
32:12	August 2021	September 2021
33:4	2015 until 2021	2017 until 2020
34:25	... October 2022	... October 2021
35:20	... October 2022	... October 2021
36:19	... whole aspirin ... whole	... hold aspirin ... hold
37:17	... should whole	... should hold
37:18	... or not whole	... or not hold
38:4	2022	2021
38:8	October 2022...	October 2021...
41:12	That's Zoe...	That's Zoey...
45:24	... Registered Nurse; PHN...	... Registered Nurse; FNP-C, certified family nurse practitioner; PHN
57:22	of Ophthalmology	of Osteopathy
91:3	Radial physical therapy	Several in physical therapy
92:16	... path of physiology	... pathophysiology

CERTIFICATE OF DEPONENT

I hereby certify that I have read and examined the foregoing transcript, and the same is a true and accurate record of the testimony given by me. Any additions or corrections that I feel are necessary, I will attach on a separate sheet of paper to the original transcript.

  
\_\_\_\_\_

Signature of Deponent

I hereby certify that the individual representing himself/herself to be the above-named individual, appeared before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_, and executed the above certificate in my presence.

\_\_\_\_\_

NOTARY PUBLIC IN AND FOR

\_\_\_\_\_

County Name

MY COMMISSION EXPIRES:

**See Attached  
Notorial Certificate**



### ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

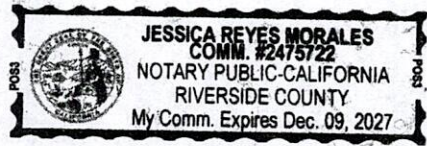
State of California  
County of RIVERSIDE)

On 3/3/2025 before me, JESSICA REYES MORALES (Notary Public)  
(insert name and title of the officer)

personally appeared Rodolfo Jaravata Hanson,  
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature [Handwritten Signature]

(Seal)

1 DONNA G. MATIAS, Cal. Bar No. 154268  
Email: DMatias@pacificlegal.org  
2 CALEB R. TROTTER, Cal. Bar No. 305195  
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7 Telephone: (916) 419-7111  
8 Facsimile: (916) 419-7747  
*Attorneys for Plaintiffs Jacqueline Palmer, et al.*

9  
10 **UNITED STATES DISTRICT COURT**  
11 **CENTRAL DISTRICT OF CALIFORNIA**

12 JACQUELINE PALMER, et al.,

13 }  
14 Plaintiffs,

15 v.  
16

17 ROB BONTA, et al.

18 Defendants.  
19  
20  
21  
22

Case No.: 5:23-cv-01047-JGB-SP

**DECLARATION OF  
PLAINTIFF JACQUELINE  
PALMER IN SUPPORT OF  
MOTION FOR SUMMARY  
JUDGMENT**

Date: April 21, 2025

Time: 9:00 a.m.

Courtroom: 1, Riverside

Judge: Hon. Jesus G. Bernal

Trial Date: June 24, 2025

Action Filed: June 6, 2023

23 I, Jacqueline Palmer, hereby state and declare as follows:

24 1. The matters set forth herein are within my own personal  
25 knowledge, and if called to do so, I would and could competently testify  
26 thereto.

27 2. I am a nurse practitioner licensed by the State of California  
28

1 Board of Registered Nursing.

2 3. I earned my Doctor of Nursing Practice (DNP) from  
3 Chamberlin University in 2020. Attached as Exhibit A is a true and  
4 correct copy of my DNP degree.

5 4. I began my nursing career in 2003 as a licensed vocational  
6 nurse (LVN), and went on to receive my bachelor's degree in nursing in  
7 2010.

8 5. Since then, I have earned a Master's degree in Nursing  
9 Leadership (2012), Family Nursing Practice (2018) and Psychiatric  
10 Nursing Practice (2023). Each of these degrees, which I earned while  
11 also working full-time, have added to my education in specialized areas  
12 of nursing practice.

13 6. I have worked as a family nurse practitioner since 2018.  
14 Between 2020, when I earned my DNP, and 2023, I worked at a family  
15 practice clinic called Bartz Altadonna, providing primary care to  
16 individuals of all ages. My colleagues consisted of physicians and other  
17 healthcare professionals, including other nurse practitioners.

18 7. During this time between 2020 and 2023, I signed my name  
19 on official clinic documents using the title "Dr." and qualified with  
20 "FNP." I also wore a clinician's jacket embroidered with my name, "Dr.  
21 J. Palmer, FNP." Attached as Exhibit B is a true and correct copy of a  
22 photograph that I took of my clinician's jacket.

23 8. Also during this period, I did not realize that it was illegal to  
24 use the title "Dr." even if I qualified it with my credentials, "FNP-C."

25 9. In all my time working as a nurse practitioner, I have  
26 always told patients that I am a nurse practitioner. I have never  
27 misrepresented to anyone, patient, physician, or otherwise, that I was a  
28 physician.

1 10. When I first heard that Sarah Erny had to pay thousands of  
2 dollars for using the title “Dr.” as a DNP, I immediately stopped  
3 wearing my clinician’s jacket. Prior to that, I did not know that it was  
4 illegal to use the title so long as I clarified that I was not a physician. I  
5 also stopped signing clinic documents and emails using the title “Dr.,”  
6 and I asked my colleagues not to refer to me using that title. I did not  
7 and do not want to break the law.

8 11. If it were legal to do so, I would return to wearing my  
9 clinician’s jacket and signing my name with “Dr. Palmer, FNP-C” or  
10 “Dr. J. Palmer, FNP-C.” I would continue to tell my patients, as I  
11 always have, that I am a nurse practitioner and not a physician.

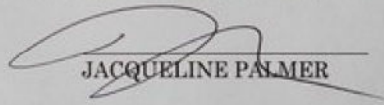
12  
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15 SIGNED this \_\_\_\_ day of \_\_\_\_\_, 2025, at \_\_\_\_\_, Cal.

16  
17 signature page attached below  
18 \_\_\_\_\_  
19 JACQUELINE PALMER  
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1           10. When I first heard that Sarah Erny had to pay thousands of  
2 dollars for using the title "Dr." as a DNP, I immediately stopped  
3 wearing my clinician's jacket. Prior to that, I did not know that it was  
4 illegal to use the title so long as I clarified that I was not a physician. I  
5 also stopped signing clinic documents and emails using the title "Dr.,"  
6 and I asked my colleagues not to refer to me using that title. I did not  
7 and do not want to break the law.

8           11. If it were legal to do so, I would return to wearing my  
9 clinician's jacket and signing my name with "Dr. Palmer, FNP-C" or  
10 "Dr. J. Palmer, FNP-C." I would continue to tell my patients, as I  
11 always have, that I am a nurse practitioner and not a physician.

12  
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15 SIGNED this 8 day of March, 2025, at Lancaster, Cal.

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18 JACQUELINE PALMER  
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# **EXHIBIT A**

# Chamberlain University



*Be it known that*

**Jacqueline N. Palmer**

*having successfully completed the course of study as proscribed by the faculty of the*

**College of Nursing**

*is hereby granted the*

**Doctorate in Nursing Practice  
Healthcare Systems Leadership**

*and is entitled to all the rights and privileges appertaining thereto.*

IN TESTIMONY WHEREOF THE BOARD OF TRUSTEES HAS CONFERRED THIS DEGREE FROM ADDISON, ILLINOIS, BEARING THE SEAL OF THE UNIVERSITY THIS NINETEENTH DAY OF DECEMBER, TWO THOUSAND TWENTY.

*Karen Coy*

VACANCY CHIEF, COLLEGE OF NURSING  
CHAMBERLAIN UNIVERSITY

*Carol Anderson*

DEAN, COLLEGE OF NURSING  
CHAMBERLAIN UNIVERSITY

*Joanne Dick*

CHIEF, BOARD OF TRUSTEES  
CHAMBERLAIN UNIVERSITY

*Jill Price*

DEAN, COLLEGE OF NURSING  
CHAMBERLAIN UNIVERSITY  
COLLEGE OF NURSING

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**CHAMBERLAIN  
UNIVERSITY**

*Abbey McElligott*

Abbey McElligott  
University Registrar

Questions? Contact:  
registrar@chamberlain.edu



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<https://www.parchment.com/u/s/d7qZ>

# **EXHIBIT B**





1 DONNA G. MATIAS, Cal. Bar No. 154268  
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2 CALEB R. TROTTER, Cal. Bar No. 305195  
3 Email: CTrotter@pacificlegal.org  
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5 555 Capitol Mall, Suite 1290  
6 Sacramento, CA 95814  
7 Telephone: (916) 419-7111  
8 Facsimile: (916) 419-7747  
9 *Attorneys for Plaintiffs Jacqueline Palmer, et al.*

10 **UNITED STATES DISTRICT COURT**  
11 **CENTRAL DISTRICT OF CALIFORNIA**

12 JACQUELINE PALMER, et al.,

13 }  
14 Plaintiffs,

15 v.  
16

17 ROB BONTA, et al.

18 Defendants.  
19  
20  
21

Case No.: 5:23-cv-01047-JGB-SP

**DECLARATION OF  
PLAINTIFF HEATHER LEWIS  
IN SUPPORT OF MOTION  
FOR SUMMARY JUDGMENT**

Date: April 21, 2025  
Time: 9:00 a.m.  
Courtroom: 1, Riverside  
Judge: Hon. Jesus G. Bernal  
Trial Date: June 23, 2025  
Action Filed: June 6, 2023

22 I, Heather Lewis, hereby state and declare as follows:

23 1. The matters set forth herein are within my own personal  
24 knowledge, and if called to do so, I would and could competently testify  
25 thereto.

26 2. I am a nurse practitioner licensed by the State of California  
27 Board of Registered Nursing.  
28

1           3.     I hold a Doctor of Nursing Practice (DNP) from Aspen  
2 University, which I was awarded in March 2023. Attached as Exhibit A  
3 is a true and correct copy of my DNP degree.

4           4.     I began my nursing career as a Licensed Vocational Nurse,  
5 graduating from Mt. San Jacinto College in December 1993. I completed  
6 my Bachelor of Science in Nursing as a Registered Nurse (RN) from  
7 California State University, San Bernardino in June 2002. While  
8 working as an RN, I studied full-time at Chamberlin University to  
9 obtain my Master of Science in Nursing education (2014), and my  
10 Master of Science in Family Nursing Practice (2016).

11          5.     Since then, I have worked as a nurse practitioner at  
12 bariatric surgery center and chiropractic clinic while also studying to  
13 earn my DNP. At the bariatric surgery center, I work for a surgeon  
14 licensed by the state of California. At the chiropractic clinic, I work for  
15 two Doctors of Chiropractic.

16          6.     Having spent several years working for both clinics, I have  
17 established good relationships with my patients and the doctors for  
18 whom I work. Many of my ongoing patients, as well as the doctors I  
19 work for, supported and encouraged me to pursue my doctorate. They  
20 even encouraged me to use the title "Dr." because they saw how hard I  
21 worked to earn it. Not one indicated that they believed I was a  
22 physician. In fact, the physician colleague mentored me through my  
23 doctoral program.

24          7.     I always tell new patients that I am a nurse practitioner. I  
25 have never misrepresented to anyone, directly or indirectly, that I am a  
26 physician or surgeon, and no one has expressed to me the belief that I  
27 was a physician.

28          8.     When I first received my DNP, I had business cards and an

1 office door name plate with the name, “Dr. Heather Lewis, FNP-C.  
2 DNP.” I also had referred to myself on social media as “Dr. Heather  
3 Lewis, FNP-C, DNP.” This did not last long once I learned about all the  
4 actions against Sarah Erny, because I did not want to find myself in her  
5 position.

6 9. I do not use the business cards or name plate with “Dr.”, and  
7 I deleted the title “Dr.” from. My social media.

8 10. If it were legal to do so, I would use the title “Dr.” in my  
9 name and continue to state that I am a nurse practitioner, as I always  
10 do anyway. I would use this title, which I have earned, in and outside of  
11 the workplace, and on social media, just as other non-physician  
12 providers do. As I understand it, it is already illegal for me to represent  
13 that I am a licensed physician, and I would not start doing so just  
14 because I was truthfully using the honorific title “Dr.”

15  
16  
17 SIGNED this 8th day of March, 2025, at Indian Wells, Cal.

18   
19 \_\_\_\_\_  
20 HEATHER LEWIS

# **EXHIBIT A**

# Aspen University

The Trustees of Aspen University, upon the recommendation of the Faculty,  
and by virtue of the authority vested in them, have conferred upon

Heather Lewis

The degree of

## Doctor of Nursing Practice

With all the rights, privileges, and responsibilities thereunto appertaining.

In witness whereof, the Seal of the University and the Signatures are hereunto affixed.

Given in Phoenix, Arizona this 14th day of March, 2023.

*Cheri Stumpel*  
Chief Academic Officer



*Mia M...*  
Chairman

1 DONNA G. MATIAS, Cal. Bar No. 154268  
Email: DMatias@pacificlegal.org  
2 CALEB R. TROTTER, Cal. Bar No. 305195  
3 Email: CTrotter@pacificlegal.org  
4 Pacific Legal Foundation  
5 555 Capitol Mall, Suite 1290  
6 Sacramento, CA 95814  
7 Telephone: (916) 419-7111  
8 Facsimile: (916) 419-7747  
*Attorneys for Plaintiffs Jacqueline Palmer, et al.*

9  
10 **UNITED STATES DISTRICT COURT**  
11 **CENTRAL DISTRICT OF CALIFORNIA**

12 JACQUELINE PALMER, et al.,

13  
14 Plaintiffs,

15 v.

16  
17 ROB BONTA, et al.

18 Defendants.

Case No.: 5:23-cv-01047-JGB-SP

19  
20 **DECLARATION OF**  
21 **PLAINTIFF RODOLFO**  
22 **JARAVATA HANSON IN**  
23 **SUPPORT OF MOTION FOR**  
24 **SUMMARY JUDGMENT**

Date: April 21, 2025

Time: 9:00 a.m.

Courtroom: 1, Riverside

Judge: Hon. Jesus G. Bernal

Trial Date: June 23, 2025

Action Filed: June 6, 2023

25 I, Rodolfo Jaravata Hanson, hereby state and declare as follows:

26 1. The matters set forth herein are within my own personal  
27 knowledge, and if called to do so, I would and could competently testify  
28 thereto.

1           2.     I am a nurse practitioner licensed by the State of California  
2 Board of Registered Nursing.

3           3.     I hold a Doctor of Nursing Practice (DNP) from Johns Hopkins  
4 University. I earned this degree in May 2023, shortly before this lawsuit  
5 was filed. Attached as Exhibit A is a true and correct copy of my DNP  
6 degree.

7           4.     In 2007, I emigrated to the United States from the Philippines  
8 with a bachelor's degree in physical therapy and a Master's degree in  
9 Education. When I came to the United States, I enrolled in an accelerated  
10 bachelor degree program in Nursing at Mount St. Mary's University in  
11 Los Angeles. I completed the program in May 2017 and began working  
12 as a nurse in an intensive care unit.

13          5.     From January 2018 to October 2019, I attended school full-  
14 time and worked full-time toward my Master's degree in Family Nursing  
15 Practice (FNP). A Family Nurse Practitioner is trained to treat patients  
16 all across the human lifespan, from newborns to geriatric patients.

17          6.     From May 2021 to May 2023, I worked full-time as an FNP,  
18 first in neurosurgery and then in pre-anesthesia, while studying to earn  
19 my DNP.

20          7.     I currently work in an ambulatory pre-anesthesia testing  
21 clinic with resident and attending physicians, where I have worked since  
22 October 2021. My job is to make sure several days in advance that pre-  
23 surgical patients are safe to undergo anesthesia for the procedure  
24 ordered by the surgeon or proceduralist.

25          8.     Whenever I introduce myself to a patient, I clearly state that  
26 I am a nurse practitioner and not a physician. I also tell them that my  
27 role is to clear them for anesthesia, not to administer anesthesia like an  
28



1 anesthesiologist would or to perform surgery. I have never  
2 misrepresented myself as a physician or surgeon.

3 9. I believe it is important for all patients to know and  
4 understand the role of the healthcare professional providing them care,  
5 and what the provider's credentials are. I believe I have an obligation to  
6 explain that to patients.

7 10. As a Doctorate holder, I believe I have earned the right to use  
8 the title "Dr." both in and outside of a healthcare setting so long as I am  
9 truthful that I am a nurse practitioner and not a physician or surgeon (or  
10 any other doctorate holder).

11 11. When I first learned about the legal actions against Sarah  
12 Erny, I was angry and shocked. In my experience, the nursing board  
13 encourages nurse practitioners to obtain their doctorates because this  
14 serves the entire profession. We should therefore be able to use our hard-  
15 earned titles.

16 12. I own a desk nameplate that reads "Dr. Rodolfo Hanson"  
17 followed by my degrees (DNP, MSN, MASE, BSPT, RN, FNP-C, PHN).  
18 Attached as Exhibit B is a true and correct copy of a photograph I took of  
19 my nameplate. However, I do not use this in my workplace out of fear  
20 that the state will take action against me like they did against Sarah  
21 Erny. I am concerned that even using the word "Doctor" in the phrase  
22 "Doctor of Nursing Practice" in my email signature block is in violation  
23 of § 2054.

24 13. While I was pursuing my DNP, I had plans to open an esthetic  
25 clinic to provide services consistent with my training and education. In  
26 2021, I purchased the website, "xoeyclinic.com." Attached as Exhibit C is  
27 a true and correct copy of the receipt for the website URL. I have not done  
28 any more with it while this lawsuit is pending; I don't want to break the

1 law by using the title “Dr.” or the word “doctor” on the website, and I  
2 believe patients and potential patients should know my credentials and  
3 that I have worked to earn the highest degree in my profession.

4 14. If it were legal to do so, I would use the title “Dr.” in my name  
5 along with my credentials and/or my identification as a nurse  
6 practitioner, in conjunction with my workplace, my future esthetic clinic,  
7 and on social media, business cards, letterhead, and in advertisements. I  
8 would also put my name plate on my desk at my workplace.

9  
10  
11 SIGNED this 8 day of March, 2025, at Murrieta, Cal.

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RODOLEO JARAVATA HANSON

**EXHIBIT A**

# The Johns Hopkins University

*Upon the recommendation of the Faculty of*  
**The School of Nursing**

*has conferred upon*

**Rodolfo Jaravata Hanson**

*the degree of*

**Doctor of Nursing Practice**

*with all the rights, honors and privileges appertaining thereto.*

*Given under the seal of the University at Baltimore, Maryland*  
*on May twenty-fifth, two thousand and twenty-three.*



*Janet L. Lane*  
*Dean*

*Ronald Daniels*  
*President*

*Janet L. Lane*  
*Chair of the Board of Trustees*

**EXHIBIT B**



**EXHIBIT C**

CONTACT US 24/7 1-480-505-8877

# Receipt

№ 1984304585

DATE:  
11/29/2021CUSTOMER #:  
72386637BILL TO:  
Rodolfo Hanson  
29180 Gandolf Ct,  
Murrieta, California 92563,  
United States  
+1.9516633836PAYMENT:  
Visa \*\*\*\* 0008 \$9.17

---

**Previous Balance** \$9.17**Received Payment** (\$9.17)

---

**Balance Due (USD)** \$0.00

Term	Product	Amount
1 yr	.COM Domain Registration xoeyclinic.com <sup>1</sup>	\$8.99
1 mo	Websites + Marketing Free	\$0.00



<b>Subtotal</b>	<b>\$8.99</b>
Taxes	\$0.00
Fees	\$0.18
<hr/>	
<b>Total (USD)</b>	<b>\$9.17</b>

**REFERENCE**

Taxes	\$0.00
GoDaddy.com, LLC 2155 E GoDaddy Way, Tempe, Arizona 85284, United States	\$0.00
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Fees	\$0.18
1. ICANN	\$0.18
xoeyclinic.com	\$0.18

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