

ARREST / NOTICE TO APPEAR	OBTS Number		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		3	JUVENILE						
	Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5 4 22-000060							
	Charge Type: Check as many as apply: ☒ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type UNARMED		Multiple Clearance Indicator							
	Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address) 1200 TOWN CENTER DR 330, JUPITER, FL 33458									
DEFENSE	Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle					
	Name (Last, First, Middle) KIAN, HAMED		Alias (Name, DOB, Soc. Sec. #, Etc.)									
	Race W - White B - Black O - Oriental/Asian	Sex M	Date of Birth 03/03/1981	Height 5'07	Weight 145	Eye Color BROWN	Hair Color BLACK	Complexion MEDIUM	Build Medium			
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status S	Religion	Indication of: Alcohol Influence Yes ☐ No ☐ Unk. ☒ Drug Influence Yes ☐ No ☐ Unk. ☒							
JUVENILE	Local Address (Street, Apt. Number) 1200 TOWN CENTER DR, JUPITER, FL 33458		(City)	(State)	(Zip)	Phone (561) 406-3538		Residence Type: 1. City 2. County 3. Florida 4. Out of State 5. Other				
	Permanent Address (Street, Apt. Number) 1200 TOWN CENTER DR, JUPITER, FL 33458		(City)	(State)	(Zip)	Phone (561) 406-3538		Address Source FCIC				
	Business Address (Name, Street) CAPSTONE CHIROPRACTIC, 901 W INDIANTOWN RD		(City)	(State)	(Zip)	Phone		Occupation Chiropractor				
	D/L Number, State K500320810830 /		INS Number		Place of Birth (City, State) Iran		Citizenship US					
CO-DEFENDANT	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile						
	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile						
	☐ Parent ☐ Other: _____ Name (Last, First, Middle)		Residence Phone									
	☐ Legal Custodian Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone						
NOTICE TO APPEAR	Notified by: (Name)		Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated							
	Released To: (Name)		Relationship	Date	Time							
	The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.		School Attended		Grade							
	☐ Yes, by: _____ ☐ No: _____		Property Crime? ☐ Yes ☒ No		Description of Property		Value of Property					
CHARGE	Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperse/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetic	U. Unknown Z. Other
	Charge Description UNLICENSED PRACTICE OF HEALTH CARE PROFESSION		Statute Violation Number 456.065(1)(D)		Violation of ORD #							
	Drug Activity	Drug Type N	Amount / Unit	Offense #	Counts 1	Domestic Violence ☐ Y ☒ N	Warrant / Capias Number	Bond				
	Charge Description		Statute Violation Number		Violation of ORD #							
INTEAKE	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence ☐ Y ☐ N	Warrant / Capias Number	Bond				
	Charge Description		Statute Violation Number		Violation of ORD #							
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence ☐ Y ☐ N	Warrant / Capias Number	Bond				
	Charge Description		Statute Violation Number		Violation of ORD #							
NOTICE TO APPEAR	Health / Apparent Physical Condition of Defendant		Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Moderate ☐ Deformities ☐ Injuries									
	Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health		PROPERTY - Received By		Released By	Released To						
	Transported By		Date Transported	Time Transported	Other							
	☐ INSTRUCTION NO. 1 - Mandatory appearance in court ☒ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room)		Court Date and Time							
HOLD FOR OTHER AGENCY	I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.		Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed		No Photo Available					
	HOLD for Other Agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)							
	☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other		Name of Arresting Officer (Print) HIRSCH, DANIELLE		I.D. # 0897							
	Intake Deputy I.D. #		Pouch #	Transporting Officer I.D. #		Agency	PAGE 1 OF 1					
Witness here if subject signed with an "X".												

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A D M I N I S T R A T I V E	Agency ORI Number	Agency Name		Agency Report Number						
	FL 0501700	JUPITER POLICE DEPARTMENT		5 4 22-000060						
	Charge Type: ☒ 1. Felony ☐ 2. Traffic Felony		☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Special Notes:			
	Name (Last, First, Middle)						Race	Sex	Date of Birth	
	KIAN, HAMED						W	M	03/03/1981	
	Charge Description				Charge Description					
	456.065(1)(D) UNLICENSED PRACTICE OF HEALTH CARE									
	Charge Description				Charge Description					
	Victim's Name (Last, First, Middle)				Race		Sex		Date of Birth	
	State Of Florida									
	Local Address (Street, Apt. Number)				(City)		(State)		(Zip)	
	Business Address (Name, Street)				(City)		(State)		(Zip)	
	The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody . . . ☐ committed the below acts in my presence. ☐ confessed to _____ admitting to the below facts. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>13</u> day of <u>January</u>, <u>2022</u> at <u>14:44</u> (Specifically include facts constituting cause for arrest.)									
	On 01/05/2022, I was contacted by Department of Health Investigator Kathleen HealyBaez regarding a Jupiter Chiropractor, Hamed Kian, who was practicing while his license was suspended. I found that on 01/01/2022, JPD Officer Carla Irons took a simple battery report from victim, Alicia Ward, reference JPD case 22-000005. According to the report, Ward advised that on 12/30/2021 at about 1630 hours, she saw Dr. Kian for a medical issue at his practice, located at 1200 Town Center Dr. Suite 330 Jupiter, FL. 33458. Ward told Officer Irons that she was at Kian's office from 1430 until 1800 hours. She was checked in by the office staff and led into a treatment room, where Kian began working on her. Once finished, he told her they were done, and before she could get up, Kian bent down and kissed her on the lips. Ward advised that she became frightened and backed away. She told him that she had someone she loved and did not want to do anything like that, and he helped her to sit up, and he left the room so she could get dressed. Ward advised that once dressed, she walked out to the lobby area, and a female was knocking on the front door, which appeared to be locked. Kian told Ward it was his girlfriend, and he let her in. Ward advised that Kian told her he had a few more adjustments to do on her, and did them in the lobby while his girlfriend was there. Ward wished to pursue charges of simple battery for the unwanted kiss Kian gave her. Officer Irons contacted Kian to get a statement from him, and he referred her to his attorney, Scott Kirschbaum. Officer Irons filed the simple battery charges with the Palm Beach County State Attorney's Office. Additionally, the Department of Health was notified. In addition to Ward's complaint, there were two additional complaints that were filed against Kian with both the Jupiter Police Department and the Department of Health. The first was on 04/27/2017, reference JPD case 17-002060, in which the victim, Jennifer Keiser reported that on 04/27/2017, she went to Dr. Kian's office and was seen by a massage therapist. Afterwards, she was seen by Kian. He told her to undress, which she									
	SWORN AND SUBSCRIBED BEFORE ME NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 01/13/2022 DATE SIGNATURE OF ARRESTING / INVESTIGATING OFFICER HIRSCH, DANIELLE (0897) NAME OF OFFICER (PLEASE PRINT) 01/13/2022 DATE									
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STATE ATTORNEY

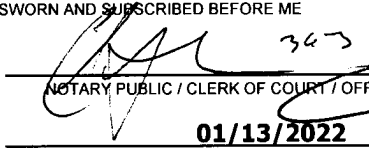
CENTRAL RECORDS

JAIL

CRIME ANALYSIS

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Name (Last, First, Middle) KIAN, HAMED		Alias			Race W	Sex M	Date of Birth 03/03/1981		
did, and he began treatment on her. She advised that it was just her and Kian in the room and she was covered with a sheet. According to Keiser, Kian told her he had to adjust her psoas muscle to alleviate pain in her lower extremities. Kieser advised that she was on her stomach and Kian pulled the sheet off her, exposing her buttocks and she pulled it back on. He then put his hand on her inner thigh and touched her inner labia> she advised that he told her to turn over, which she did, and he again pulled the sheet off of her exposing her vagina. He again touched her inner labia. He also tried to kiss her on the lips, but she turned her head and he got her cheek. Keiser advised she was so distraught, she left, and later reported the incident to JPD. Detective Panczak filed the case as a sexual battery with the Palm Beach County State Attorney's Office but they declined to file the case. The Department of Health was notified about this case and an Order of Emergency Restriction of License was filed for and obtained. The second case that was reported to the Jupiter Police Department in regards to Kian was on 08/26/2021, reference JPD case 21-002961. In this case, the victim, Marcie Patterson reported that she saw Kian several times between the dates of 07/28/2021 through 08/03/2021, and during those visits, she found his behavior to be inappropriate. She advised that he hugged her, and massaged her pelvic area in a way she thought was not appropriate for why she was there. On 08/03/2021, she advised that he actually came to her home to treat her. She advised that he told her to undress, and tried to get her to go into her bedroom, but she told him he could treat her in the living room. She said she was very uncomfortable and when he tried to hug her at the end of treatment, she declined. I investigated this case, and while his behavior did not rise to criminal in this case, I was aware of the other case Det. Panczak worked against Kian. I contacted the Department of Health, and advised Patterson to make a formal complaint to the DOH, as well, which she did. Based on these new allegations, Kian had to have a monitor in the room with him when he saw female patients. Based on the allegations made by victims Marcie Patterson and Jennifer Keiser, as well as the fact that Kian did not follow the orders of having a monitor with him when he saw female patients, an order of emergency suspension of license was sought by the Florida Department of Health (Kian's license number is CH 10343). On 10/27/2021 the order was granted by the State Surgeon General, Joseph Ladapo, MD, PhD, reference case number DC 2021-30381. Kian did file an appeal to fight the suspension, but on 12/29/2021, the appeal was denied in the First District Court of Appeal, reference No. 1D21-3563. Kian was not to practice medicine, but he was allowed to have another licensed chiropractor see his patients. Dr. Thomas Toia was the person who was helping with the patients in Kian's practice. When the DOH found out about the new allegations of Kian kissing Ward, Investigator HealyBaez became involved. She advised me that she wrote subpoenas for Ward's patient records and Kian's schedules, and made an appointment at the office to see if Kian would be the person who treated her. According to HealyBaez, when she arrived at the office									
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D E F	Name (Last, First, Middle) KIAN, HAMED				Race W		Sex M		Date of Birth 03/03/1981
	Alias								
at 1400 hours on 01/05/2022, she was seen by Dr. Thomas Toia. She interviewed him and he told her that he only saw Kian's patients in the morning and then he went to his own practice in the afternoon. Dr. Toia also advised that no other chiropractors were working at the office with him and Kian. HealyBaez received Kian's patient scheduling since 10/27/2021, when Kian was suspended, and it showed patients scheduled to see a chiropractor in both the morning and the afternoon. Kian would have been the only chiropractor available for patients to see in the afternoon. HealyBaez also advised that she received Ward's medical records and it showed that she was seen by Kian on 12/30/2021. Kian even made a note in the record that Ward met his girlfriend that day. HealyBaez asked Dr. Toia if he would have signed Dr. Kian's name if he had seen a patient for Kian, and he said he would not have done that, and that he would only sign his own name to a record. I contacted Kian's attorney, Scott Kirschbaum and asked if he would like to have Kian give me a statement or provide any information that would counter the allegations that Kian was practicing without a license. Kirschbaum advised that he did not represent Kian for criminal matters, and that he would contact Kian to see if he had a criminal attorney. I did not hear back from any other attorney or Kian to date. Based on my above described investigation, I believe probable cause exists to charge Dr. Hamed Kian with UNLICENSED PRACTICE OF HEALTH CARE PROFESSION as he did practice, attempt to practice, or offer to practice Chiropractic medicine, a health care profession without an active, valid Florida license to practice that health care profession, contrary to Florida Statute 456.065 (2) (d) 1.									
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