

**SUMMARY of the Decision of the Inquiries, Complaints and Reports Committee  
(the Committee)**  
(Information is available about the complaints process [here](#) and about the Committee [here](#))

**Dr. Abdalhakim Imohd Mustafa (CPSO # 69458)  
(the Respondent)**

## **INTRODUCTION**

The Complainant went to an emergency room (ER) with signs of a stroke. The Respondent provided care to the Complainant during his time in the ER and subsequent hospital admission. The Complainant contacted the College of Physicians and Surgeons of Ontario (the College) to express concerns about the Respondent's care.

## **COMPLAINANT'S CONCERNS**

**The Complainant is concerned that the Respondent:**

- Did not follow stroke protocol;
- Did not authorize or administer Tissue Plasminogen Activator (tPA); and,
- Did not follow up on evolving stroke.

## **COMMITTEE'S DECISION**

An Internal Medicine Panel of the Committee considered this matter at its meeting of May 13, 2019. The Committee required the Respondent to complete a specified continuing remediation and education program (SCERP), consisting of taking a medical record-keeping course, reviewing and providing a written summary of the College's policy, *Medical Records*, and undergoing a reassessment within six months of completing the medical record-keeping course.

## **COMMITTEE'S ANALYSIS**

As part of this investigation, the Committee retained an independent Assessor who specializes in Neurology. The Assessor concluded that the Respondent's decision to not administer tPA was reasonable. However, the Assessor did note that for relative contraindications, patients and their families can be engaged in the decision-making process, and the rationale for administering or not administering tPA should be clearly documented.

*Re: the Respondent's clinical care*

- Given that the Assessor in this case concluded that the Respondent's care met the standard of practice, the Committee took no further action in regards to the Respondent's clinical care.

- It does not appear that the Respondent discussed with the Complainant what the risks and benefits of tPA would be, and why he was not going to administer it. The Committee did not accept the Respondent's rationale that the Complainant was too emotional and that he could not reach next of kin. It is a physician's duty to discuss the risks and benefits of a medication with patients. As such, the Committee stated its expectation that physicians maintain appropriate communications with patients at all times.

*Re: the Respondent's medical records*

- The Respondent should have documented in the medical record that he considered administering tPA, even if there was a satisfactory reason to not eventually administer it. The lack of information about his decision to not administer tPA was not in line with the College's *Medical Records* policy.
- The Respondent's ER note also contains no date or time, which made it difficult for the Committee to know for certain when he saw the Complainant. Further, the Respondent's handwriting was very difficult to read. The Committee determined that the Respondent's record-keeping did not satisfactorily align with the expectations set out in the College's policy on *Medical Records*, and that he therefore would benefit from further education in this area.