

## **SUMMARY**

### **DR. ANNE MARIE GASKIN (CPSO# 65101)**

#### 1. Disposition

On April 18, 2017, the Inquiries, Complaints and Reports Committee (the Committee) accepted an undertaking from Dr. Gaskin (Family Medicine), and required Dr. Gaskin to appear before a panel of the Committee to be cautioned with respect to dangerous and inappropriate prescribing of narcotics and controlled substances.

#### 2. Introduction

The Office of the Chief Coroner contacted the College with information raising concerns about Dr. Gaskin's prescribing practices and subsequently, the Committee approved the Registrar's appointment of investigators to conduct a broad review of Dr. Gaskin's practice.

#### 3. Committee Process

As part of this investigation, the Registrar appointed a Medical Inspector (MI) to review a number of Dr. Gaskin's patient charts, interview Dr. Gaskin, and submit a written report to the Committee.

A Panel of the Committee, consisting of public and physician members, met to review the relevant records and documents related to the investigation. The Committee always has before it applicable legislation and regulations, along with policies that the College has developed, which reflect the College's professional expectations for physicians practising in Ontario. Current versions of these documents are available on the College's website at [www.cpso.on.ca](http://www.cpso.on.ca), under the heading "Policies & Publications."

#### 4. Committee's Analysis

The MI concluded that in 25 of the 25 patient charts reviewed, Dr. Gaskin did not meet the standard of practice, having regard to the prescribing of controlled drugs (including narcotics), and demonstrated a lack of knowledge and skill. The MI was also of the opinion that in 24 of the 25 cases reviewed, Dr. Gaskin displayed a lack of judgment and that her practice exposed or was likely to expose her patients and/or society to a risk of harm.

Further, the MI identified concerns with respect to Dr. Gaskin's medical record-keeping (for example, not all charts had cumulative patient profiles).

In responding to the MI's report, via counsel, Dr. Gaskin acknowledged that improvements to her practice were needed and that there were concerning deficiencies. She indicated that she had taken positive steps to address these deficiencies, and advised that she had reduced her prescribing of opioids to involve only three patients in her entire practice (all other patients to whom she previously prescribed opioids had either tapered off narcotics, or had switched to methadone or Suboxone).

After considering all the information, including Dr. Gaskin's response, the Committee had concerns about Dr. Gaskin's prescribing practices and medical record-keeping.

Dr. Gaskin agreed to restrict her practice pursuant to an undertaking (a voluntary, binding promise which the physician makes to the College), under which she agreed not to issue new prescriptions or renew existing prescriptions for any narcotic drugs, narcotic preparations, controlled drugs, benzodiazepines and other targeted substances, and all other monitored drugs. The undertaking also requires Dr. Gaskin to post specific signs in her practice locations relating to the above restriction, and to participate in and successfully complete a course on medical record-keeping. As the Committee was satisfied that this undertaking would address the concerns identified in the College's investigation about the medical record-keeping and prescribing aspects of Dr. Gaskin's practice, the Committee accepted the undertaking as an appropriate resolution of those aspects.

In terms of Dr. Gaskin's prescribing, the Committee further felt that a caution-in-person (as described above) would be appropriate.