

SUMMARY

DR. AHMED FOUAD RAOUF-ALKADHIMI (CPSO# 89638)

1. Disposition

On July 18, 2018, the Inquiries, Complaints and Reports Committee (the Committee) required family physician Dr. Raouf-Alkadhimi to appear before a panel of the Committee to be cautioned with respect to missing a diagnosis of cauda equina syndrome in the patient, in part related to a lack of physical examination, and with respect to medical record keeping.

The Committee also accepted an undertaking from Dr. Raouf-Alkadhimi with respect to the investigation and management of back pain, the diagnosis of cauda equina syndrome, medical record keeping, and employing a patient-centred approach.

2. Introduction

The patient complained to the College that Dr. Raouf-Alkadhimi failed to provide appropriate care to the patient from around 2013 to 2014 when the patient reported increasingly severe back pain. For example, Dr. Raouf-Alkadhimi failed properly assess, diagnoses, and treat her back pain, right foot numbness, abdominal pain, and bowel and bladder concerns.

Dr. Raouf-Alkadhimi responded that he had thoroughly assessed the patient, referred her for the proper diagnostic test, informed her about the rests, referred her to an orthopedic surgeon for further assessment and treatment, and had addressed the patient's pain, bowel, and bladder problems.

3. Committee Process

A General Panel of the Committee, consisting of public and physician members, met to review the relevant records and documents related to the complaint. 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, under the heading "Policies & Publications."

4. Committee's Analysis

The Committee noted that Dr. Raouf-Alkadhimi documented few examinations of the patient's worsening back pain, despite his escalation of pain medications and the patient's numerous visits to the hospital Emergency Room. The brief nature of the documentation raised concern among the Committee that Dr. Raouf-Alkadhimi did not adequately examine the patient or ask appropriate questions to assess the patient.

The Committee found several record-keeping deficiencies, including a lack of comprehensive history, physical examination, diagnosis and management plan, an over-reliance on pre-populated templates, and a failure to document relevant investigations in the patient's record.

As a result of this investigation, the Committee had concerns about Dr. Raouf-Alkadhimi's investigation and management of back pain, missed diagnosis of cauda equina syndrome, and medical record keeping. In the Committee's view, Dr. Raouf-Alkadhimi failed to employ a patient-centred approach and provide appropriate care to the patient, and the patient experienced a delay of the diagnosis and treatment of cauda equina syndrome.

In this case, Dr. Raouf-Alkadhimi expressed his intention to take necessary steps to improve his practice, pursuant to an undertaking. In addition to accepting Dr. Raouf-Alkadhimi's undertaking, the Committee determined that the appropriate disposition is to require Dr. Raouf-Alkadhimi to attend at the College to be cautioned.