

**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. Manni Singh (CPSO #116169)
(the Respondent)**

INTRODUCTION

The Complainant attended a hospital Emergency Department (ED) for an animal bite, and the Respondent, a second-year resident in Family Medicine, assessed her. The Complainant had an elevated heart rate, and the Respondent performed an auscultation of the chest as part of his examination (auscultation is listening to the internal sounds of the body, usually using a stethoscope).

The Complainant contacted the College of Physicians and Surgeons of Ontario (the College) to express concern about the Respondent's care and conduct.

COMPLAINANT'S CONCERNS

The Complainant is concerned that the Respondent touched her breast inappropriately and unnecessarily on three separate occasions during her ED visit for assessment and treatment of an animal bite.

COMMITTEE'S DECISION

A General Panel of the Committee considered this matter at its meeting of December 8, 2021. The Committee required the Respondent to appear before the Committee to be cautioned with respect to medical record record-keeping.

COMMITTEE'S ANALYSIS

As part of this investigation, the Committee retained an independent Assessor who specializes in Emergency Medicine.

The Assessor accepted that the initial assessment and management by the Respondent was reasonable, but there was a difference in the Complainant's and Respondent's accounts as to subsequent examinations. The Assessor identified various deficiencies in the Respondent's documentation.

Examining the heart on the left side of the chest can sometimes necessitate movement of the breast; however, physicians should approach such an examination with care, as set out by the Committee, which would include providing gowning and ensuring effective communication and explanations for patients.

The Respondent's lack of documentation (which he acknowledged) made it difficult for the Committee to know the details of what happened in this case. The deficiencies in this regard, as set out in the Assessor's report and noted by the Committee, and the fundamental importance of good medical record-keeping to good patient care, led the Committee to conclude it was appropriate to require the Respondent to appear before the Committee to be cautioned on this subject.