

UNDERTAKING, ACKNOWLEDGEMENT AND CONSENT
(“Undertaking”)

of

DR. DONALD HARLAND SMITH
(“Dr. Smith”)

to

COLLEGE OF PHYSICIANS AND SURGEONS OF ONTARIO
(the “College”)

A. PREAMBLE

- (1) I, **Dr. Smith**, certificate of registration number **13826**, have been a member of the College since 1952. The College has received information regarding my standard of practice.
- (2) I, **Dr. Smith**, acknowledge that the Inquiries, Complaints and Reports Committee (the “ICR Committee”) referred allegations of professional misconduct and incompetence to the Discipline Committee in a Notice of Hearing dated September 10, 2014 and May 12, 2015 (the “Notice of Hearing”).
- (3) I, **Dr. Smith**, acknowledge and agree that, in exchange for me providing an original copy of this Undertaking as signed by me, the College has agreed to withdraw the Notice of Hearing.
- (4) I, **Dr. Smith**, acknowledge that this Undertaking replaces all other undertakings I have made to the College, including the undertakings dated February 24, 2011, October 14, 2014, and March 22, 2015.

B. UNDERTAKING, ACKNOWLEDGEMENT AND CONSENT

- (5) I, **Dr. Smith**, hereby resign from the College effective August 10, 2015 (the “Effective Date”).
- (6) I, **Dr. Smith**, hereby undertake not to apply or re-apply for registration as a physician to practise medicine in Ontario or any other jurisdiction after the

Effective Date.

- (7) I, **Dr. Smith**, agree that in the event that the College should become aware that I am in breach of this Undertaking including, but not limited to, becoming aware that I have either applied, re-applied or attempted to apply or re-apply for registration as a physician or for a certificate of registration, or equivalent, to practise medicine in any jurisdiction after the Effective Date, the College shall, in its sole discretion, have the right to proceed with a disciplinary proceeding on the basis of a breach of this Undertaking and shall have the right to proceed with the specified allegations set out in the Notice of Hearing.
- (8) I, **Dr. Smith**, hereby agree to bear the risk of any prejudice that the passage of time might cause to my ability to make full answer and defence, and waive the right to seek any remedy on the basis of the passage of time, should the College proceed with any allegations that may arise as a result of a breach of this Undertaking and/or pursuant to paragraph (7) above.
- (9) I, **Dr. Smith**, undertake to the College to abide by the terms of the College's Policy on Practice Management Considerations for Physicians Who Cease to Practise, Take an Extended Leave of Absence or Close Their Practice Due to Relocation, a copy of which is attached hereto as Appendix "A".
- (10) I, **Dr. Smith**, undertake to the College that upon signing this Undertaking, I shall forward a request to the General Manager of the Ontario Health Insurance Plan ("OHIP") that my billing number be deactivated for services rendered after the Effective Date.
- (11) I, **Dr. Smith**, acknowledge that I shall be solely responsible for payment of all fees, costs, charges, expenses, etc., if any, arising from the implementation of any of the terms of this Undertaking.
- (12) I, **Dr. Smith**, acknowledge and confirm that I have read and understand the terms and conditions provided in this Undertaking and that I have obtained independent legal counsel in reviewing and executing this Undertaking, or have waived my right to do so.
- (13) I, **Dr. Smith**, give my irrevocable consent to the College to make appropriate enquiries of OHIP and/or any person or institution who may have relevant information, in order for the College to monitor my compliance with the terms of

this Undertaking.

- (14) I, **Dr. Smith**, consent to the terms of this Undertaking being entered on the register as information that is available to the public.