

SUMMARY

DR. CORY STEPHEN TORGERSON (CPSO# 77996)

1. Disposition

On October 18, 2017, the Inquiries, Complaints and Reports Committee (“the Committee”) required otolaryngologist Dr. Torgerson to appear before a panel of the Committee to be cautioned with respect to maintaining boundaries with patients.

The Committee also ordered Dr. Torgerson to complete a specified continuing education and remediation program (“SCERP”). The SCERP requires Dr. Torgerson to:

- Attend and successfully complete the next available session of the course, *Understanding Boundaries and Managing Risks Inherent in the Doctor-Patient Relationship*, through a course provider indicated by the College
- Engage in self-directed learning, where he shall review and provide a written summary of the College’s *Practice Guide* and policy on *Maintaining Appropriate Boundaries and Preventing Sexual Abuse*.

2. Introduction

A patient of Dr. Torgerson complained about Dr. Torgerson’s conduct towards her during office visits. Specifically, she was concerned about a hug she received from Dr. Torgerson that she described as being different from other hugs in that Dr. Torgerson pulled her in much closer, to the point where her breast hurt afterward; certain gestures that he made on another occasion, pointing with his fingers at her breast; and the fact that he denied her concerns and yelled at her during their last appointment.

Dr. Torgerson responded that he never hugged the patient or any other patient in an inappropriate manner. He said that sometimes patients will initiate a hug, usually because they

are happy with their surgical results, but that he never initiates hugs. Dr. Torgerson stated that the patient did not mention the issue of the hug until their last appointment, and that her comments about gestures he may have made with his hands were “projections of perceived behaviour.” He confirmed that he denied the patient’s claims when she brought them up at their last appointment, but did not yell at her; he pointed out that a staff member immediately became part of the conversation at the time.

The staff member provided information, which corresponded with Dr. Torgerson’s account. The staff member stated that perhaps the patient misinterpreted Dr. Torgerson looking at her when he may have been looking at her clothing, as he sometimes complements patients on their attire. The staff member also stated that sometimes patients reach out for hugs, but she has never seen Dr. Torgerson initiate a hug, and Dr. Torgerson’s behaviour with the patient was calm.

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.cpsso.on.ca, under the heading “Policies & Publications.”

4. Committee’s Analysis

As to the concern that Dr. Torgerson engaged in a hug that the patient felt was inappropriate, the Committee concluded that a referral to the Discipline Committee was not warranted in all the circumstances of the case, as there was no reasonable prospect of successfully prosecuting the concern.

The Committee noted that the patient's account of Dr. Torgerson's gesturing towards her was difficult to follow (in terms of the order of events, who was there, and what happened) and appeared to relate to looks, facial expressions and gestures. The Committee noted the staff member's information that Dr. Torgerson was calm during the patient's last appointment.

However, the Committee was concerned that Dr. Torgerson's sense of boundaries with patients was lacking, for example:

- Dr. Torgerson acknowledged that he sometimes accepts hugs from patients, which at a minimum may cause patients to misinterpret his actions. The Committee referred the parties to the College policy *Maintaining Appropriate Boundaries and Preventing Sexual Abuse*, which includes as one of its guidelines the following: "While physicians may intend non-sexual and non-clinical touching of patients to be therapeutic or comforting, supportive words or discussion may be preferable to avoid misinterpretation."
- Dr. Torgerson's staff member indicated he sometimes comments on patients' clothing, which again has the potential to lead to misinterpretation on the part of patients, and the blurring of boundaries, by straying into more personal areas of conversation.
- In a previous matter the Committee considered, the issue of recognizing privacy concerns when communicating with patients via e-mail formed part of a specified continuing education and remediation program that the Committee ordered for Dr. Torgerson.

The Committee was concerned that Dr. Torgerson's actions may be leading patients to have an impression he has a personal interest in them or is crossing boundaries. The Committee decided the two-fold disposition set out above was appropriate in all the circumstances of this case.