

**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. Mario Anthony Nucci (CPSO #103595)
(the Respondent)**

INTRODUCTION

The College received information about the Respondent from the Ministry of Health with concerns about:

- deficiencies in medical record keeping,
- care concerns about prescribing ketamine, and
- care concerns about delegation to non-physicians.

The Respondent, a specialist in family medicine, was providing ketamine to treat patients with mental health conditions and chronic pain in his clinic. The clinic has not been approved as an Out-of-Hospital Premises (OHP) by the College's Out-of-Hospital Premises Inspection Program (OHPIP).

The College's Premises Inspection Committee ordered the Respondent to cease the performance of any procedures outlined in section 2 of the OHPIP Standards, including the provision of ketamine administered by intravenous and/or intramuscular route, which requires the premises to be approved as an OHP.

Subsequently, the ICR Committee approved the Registrar's appointment of investigators to conduct a review of the Respondent's practice.

COMMITTEE'S DECISION

A Family Practice Panel of the Committee considered this matter at its meetings of May 16, 2024. The Committee required the Respondent to appear before a Panel of the Committee to be cautioned to ensure compliance with the College's OHPIP Standards, proper delegation of care, billing, and medical record keeping.

The Committee also accepted the Respondent's undertaking, which included a period of clinical supervision, professional education, and practice reassessment.

COMMITTEE'S ANALYSIS

The Committee identified the following concerns about the Respondent's practice:

Standard of care

As part of the investigation, an independent Assessor was retained to review a number of the patient charts and interview the Respondent. The Assessor concluded that the Respondent failed to meet the standard of practice of the profession in, among other areas, medical records documentation, including legibility, and lack of significant details regarding psychiatric assessments, diagnoses, therapy, and follow-up.

The Committee acknowledged the Respondent's initiative to actively address the medical record keeping issues by completing professional education.

Compliance with the OHIP Standards/Scope of practice

The provision of ketamine requires an OHIP approval and oversight, including that all premises intending to provide ketamine must meet Level 2 OHP requirements. The Respondent did not adhere to the standards/policy framework established to ensure safe care in this regard.

Although family physicians have training, knowledge and skill in the diagnosis and management of mental health conditions, the Respondent's current training does not qualify him to provide ketamine-assisted therapy or use ketamine in chronic pain management. As such, the Respondent was advised of the requirement to initiate the change-of-scope-of-practice process.

Delegation of care

The Committee noted that the Respondent was involved with patients virtually, generally before their therapy started and at specific intervals, while the clinic staff provided most of the care, which was not appropriate.

OHIP billing

The concerns were regarding a lack of documentation required for the use of certain fee codes. Additionally, services were not personally rendered by the Respondent, which is required in order to bill OHIP.

CONCLUSION

The Committee required the Respondent to appear before a Panel of the Committee to be cautioned to ensure compliance with the College's OHPIP Standards, proper delegation of care, billing, and medical record keeping.

This is a summary of the Committee's decision as it relates to the caution disposition.