

**ONTARIO PHYSICIANS AND SURGEONS DISCIPLINE TRIBUNAL**

**Citation:** *College of Physicians and Surgeons of Ontario v. Ladhani*, 2024 ONPSDT 16

**Date:** April 29, 2024

**Tribunal File No.:** 23-012

**BETWEEN:**

College of Physicians and Surgeons of Ontario

**College**

- and -

Moyez Bahadurali Amarshi Mawji Ladhani

**Registrant**

**FINDING AND PENALTY REASONS**

**Heard:** April 4, 2024, by videoconference

**Panel:**

Sophie Martel (panel chair)

Markus de Domenico (public)

Joanne Nicholson (physician)

Linda Robbins (public)

Deborah Robertson (physician)

**Appearances:**

Ruth Ainsworth and Robin Goldberg, for the College

Amanda Smallwood and Nina Bombier, for the registrant

**RESTRICTION ON PUBLICATION**

Pursuant to Rule 2.2.2 of the OPSDT Rules of Procedure and ss. 45-47 of the Health Professions Procedural Code, no one shall publish or broadcast the names of patients or any information that could identify patients or disclose patients' personal health information or health records referred to at a hearing or in any documents filed with the Tribunal. There may be significant fines for breaching this restriction.

## **Introduction**

[1] The registrant, Dr. Ladhani, took a colleague's bag and its contents, inappropriately disposed of some of its contents, including patient medical records, and provided false and/or misleading information to his colleague and to hospital security officers during a hospital security investigation.

[2] Relying on an agreed statement of facts and Dr. Ladhani's admission of misconduct, we concluded that he engaged in an act or omission relevant to the practice of medicine that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional.

[3] The parties made a joint submission on penalty, which we accepted because the proposed penalty did not bring the administration of justice into disrepute and was not otherwise in the public interest. We reprimanded Dr. Ladhani and we ordered a two-month suspension as well as individualized instruction in medical ethics and professionalism. We ordered Dr. Ladhani to pay costs of \$6,000.

## **Misconduct**

[4] Dr. Ladhani is a pediatrician who practised at Hamilton Health Sciences (HHS) and held a concurrent faculty position at McMaster University.

[5] During the morning of October 28, 2019, Dr. Ladhani and Dr. X attended a monthly department meeting of the McMaster University Medical Centre. Dr. X forgot his bag in the meeting room after the meeting ended. His bag contained foreign currency, electronic cords, personal financial documents, hospital documents and patient medical records.

[6] Dr. Ladhani returned to the empty meeting room a few minutes after everyone had left. He picked up his own lunch bag and Dr. X's bag from the floor where they had been sitting. Dr. Ladhani went through Dr. X's bag, removed some of its contents and put them in his shoulder bag. He then left the room with his shoulder bag, his lunch bag and Dr. X's bag. Dr. Ladhani did not have Dr. X's consent to handle his bag and its contents, and he did not have consent or authorization to view the patient medical records contained in Dr. X's bag.

[7] After leaving the meeting room, Dr. Ladhani disposed of the bag and some of its contents. He deposited approximately 250-400 pages of Dr. X's documents, including patient medical records, in a locked shredding bin.

[8] Later that day, Dr. X noticed that he had forgotten his bag in the meeting room. After an unsuccessful search, he reported the missing bag to HHS Security Services.

[9] HHS Security staff reviewed video surveillance from the meeting room, which showed Dr. Ladhani taking Dr. X's bag. They informed Dr. X of the surveillance video, and that Dr. Ladhani had his bag.

[10] Dr. Ladhani denied having seen or picking up the bag when Dr. X called him to inquire about the missing bag. Dr. X informed HHS Security Services of this conversation.

[11] In the evening, the HHS Security Manager contacted Dr. Ladhani and informed him of the surveillance video. Dr. Ladhani admitted that he had taken the bag and agreed to return the items the following day. Dr. Ladhani also called Dr. X and admitted having taken some items from his bag but denied having the bag.

[12] The following day, Dr. Ladhani returned the contents of the bag still in his possession (the money, electronic cords and some paperwork) to HHS Security Services. Later that morning, the HHS Security Manager contacted Dr. Ladhani to advise that the bag and some of the documents were still missing. Dr. Ladhani subsequently returned the bag and led the Security Manager to the locked shredding bin where the remainder of the paperwork and the medical records were retrieved. At this point in the day, around 1:00 pm, all items taken by Dr. Ladhani had been recovered.

[13] After these events, Dr. Ladhani took a voluntary leave of absence from clinical and academic duties. His application to renew his privileges at HHS was denied in May 2021 and Dr. Ladhani also resigned his position at McMaster University around the same time.

[14] Dr. Ladhani engaged in disgraceful, dishonourable or unprofessional conduct in:

- a. taking his colleague's bag without his knowledge or consent;
- b. inappropriately disposing of some of the contents of the bag, including his colleague's personal documents and patient medical records; and

- c. providing false and/or misleading information to his colleague and to HHS Security.

[15] Disposing of the patient records from Dr. X's bag medical records by placing them in a locked shredding bin is contrary to the College's Policy, Medical Records (2012) which requires, among other things, that a physician not dispose of records until the obligation to retain them has ended. While there is no evidence of actual harm, the potential for harm was significant given the importance of medical records in patient care. Their destruction could have caused gaps in communication and continuity of care.

[16] In addition to violating his colleague's privacy, Dr. Ladhani did not initially admit taking the bag and its contents and only admitted having done so when told of the surveillance video.

### **Penalty and Costs**

[17] The parties jointly proposed a reprimand, a suspension of two months, individualized instruction in medical ethics and professionalism, and costs of \$6,000.

[18] Our role is limited when the parties agree on penalty. We should only depart from a joint submission if the proposed penalty would bring the administration of justice into disrepute or is otherwise not in the public interest: *R. v. Anthony Cook*, 2016 SCC 43. A disciplinary body that rejects a joint submission on penalty must show why the proposed penalty is so unhinged from the circumstances of the case that it must be rejected: *Bradley v. Ontario College of Teachers*, 2021 ONSC 2303.

[19] We are satisfied that the proposed penalty would not bring the administration of justice into dispute or is otherwise not in the public interest. We are also satisfied that the proposed penalty appropriately balances the penalty goals: the protection of the public, general and specific deterrence, rehabilitation and expressing the Tribunal and the profession's disapproval of the misconduct.

[20] The parties mainly relied on two cases, which share some similarities with the present case. In *College of Physicians and Surgeons Ontario v. Yaghini*, 2017 ONCPSD 15, the registrant, who had a poor personal and professional relationship with his colleague, accessed his colleague's personal health records through a hospital electronic medical records system. He had no justification for viewing such personal records. Accepting a jointly proposed penalty, the Discipline Committee (now the

Tribunal) reprimanded the registrant, suspended his certificate of registration for three months and required that he complete a medical ethics course.

[21] There was also an acrimonious relationship between Dr. Remillard and his colleague in *College of Physicians and Surgeons of Ontario v. Remillard*, 2017 ONCPSD 10. In the context of a deteriorating relationship with his colleague, Dr. Remillard deleted his entries from the charts of multiple patients who were being transferred to his colleague. The deletions included family histories, diagnoses, diagnostic results, letters, forms and other documents. The Discipline Committee accepted a joint submission on penalty, which included a reprimand, a suspension of three months and completion of an ethics course.

[22] In the case before us, there is no evidence of an acrimonious relationship between Dr. Ladhani and his colleague. There is also no evidence that Dr. Ladhani purposefully set out to view the medical records for any improper purpose. On the contrary, there is evidence from a psychiatric assessment that Dr. Ladhani's behaviour on October 28, 2019, is best described as an incident of situational atypical stealing. Furthermore, that same assessment indicates that the risk of Dr. Ladhani engaging in similar stealing in the future is very low.

[23] While Dr Ladhani's conduct was serious, particularly his attempt to dispose of patient records and his initial denial of the events, there are mitigating circumstances in this case. Dr. Ladhani proactively engaged in remediation, having completed a series of personal counselling sessions focused on stress management and developing insight into the events. He provided a written admission and apology to the hospital. His conduct was completely out of character with his otherwise unblemished lengthy career as a clinician and educator. He has been severely sanctioned by the hospital where he previously held privileges. Taking these factors into consideration, in our view, the proposed penalty is proportionate to the penalties imposed in *Yaghini* and *Remillard*.

[24] The reprimand serves the penalty goals of specific and general deterrence as well as denounces the misconduct. It sends the message that disruptive conduct in the workplace, including the improper mishandling of medical records, constitutes serious professional misconduct.

[25] We also accept the parties' agreement to costs of \$6,000, which reflects the tariff rate in the Rules of Procedure.

## Order

[26] For the above reasons, our order provides:

1. The Tribunal requires the registrant to appear before the panel to be reprimanded.
2. The Tribunal directs the Registrar to:
  - a. suspend the registrant's certificate of registration for two (2) months commencing April 5, 2024, at 12:01 a.m.;
  - b. place the following terms, conditions and limitations on the registrant's certificate of registration effective immediately:
    - i. Dr. Ladhani shall participate in and successfully complete, at his own expense and within six (6) months of the date of this Order, individualized instruction in medical ethics and professionalism satisfactory to the College, with an instructor approved by the College, who shall provide a summative report to the College including whether Dr. Ladhani successfully completed the instruction.
3. The Tribunal requires the registrant to pay the College costs of \$6,000.00 by May 3, 2024.

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College of Physicians and Surgeons of Ontario

- and -

Moyez Bahadurali Amarshi Mawji Ladhani

**The Tribunal delivered the following Reprimand  
by videoconference on Thursday, April 4, 2024.**

**\*\*\*NOT AN OFFICIAL TRANSCRIPT\*\*\***

Dr. Ladhani, you engaged in disgraceful, dishonourable or unprofessional conduct by inappropriately taking a colleague's bag and personal possessions without his consent, by inappropriately disposing of the bag and its contents, which included medical records, and by providing false and misleading information. The theft of your colleague's bag, and the subsequent mishandling of the medical records that came into your possession because of this theft demonstrate a serious breach in your judgement on that fateful day.

Physicians in our society are held in high regard and are expected to act with integrity and honesty in both their professional and personal lives. Your behavior was out of character, impulsive and senseless; however, even after it was discovered that you had stolen the items, it took a full day for the medical records to be recovered. The potential for harm in this instance was significant, in that, among other things, medical records are an essential element of good patient care and their destruction could have caused gaps in communication or continuity of care in the patients whose records were taken.

It is unfortunate that your lapse in judgement has marred an otherwise exemplary career. This panel is aware that you continue to work towards remediation, and we are hopeful that after your suspension you will be able to successfully return to providing pediatric care in your community.