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. Richard Alexander Irvine (CPSO #25701)
(the Respondent)

INTRODUCTION

The Respondent prescribed Vyvanse to two adult women (the Patients). Another individual complained to the College about their care (the Complainant).

The Complainant contacted the College of Physicians and Surgeons of Ontario (the College) to express concerns about the Respondent's care, as follows:

COMPLAINANT'S CONCERNS

The Complainant is concerned that the Respondent inappropriately prescribed medications to Patient 1. Specifically, the Respondent:

- **Inappropriately prescribed Vyvanse, including in large quantities, when Patient 1 was not his patient;**
- **Failed to appropriately form a diagnosis of attention deficit hyperactivity disorder (ADHD), perform a physical examination, and order testing prior to prescribing Vyvanse;**
- **Failed to appropriately document the care and prescriptions provided;**
- **Failed to follow up and provide appropriate monitoring for the medication Vyvanse; and;**
- **Inappropriately charged Patient 1 $100, to be paid in cash, for each prescription while advising her to not inform her parents of the prescriptions.**

The Complainant is concerned that the Respondent inappropriately prescribed medications to Patient 2. Specifically, the Respondent:

- **Inappropriately prescribed Vyvanse, including in large quantities, when Patient 2 was not his patient;**
- **Failed to appropriately form a diagnosis of ADHD, perform a physical examination and order testing prior to prescribing Vyvanse;**
- **Failed to appropriately document the care and prescriptions provided;**
- **Failed to follow up and provide appropriate monitoring for the medication Vyvanse; and,**
- **Inappropriately charged Patient 2 $100, to be paid in cash, for each prescription while advising her to not inform her parents of the prescriptions.**

COMMITTEE'S DECISION

A General Panel of the Committee considered this matter at its meeting of October 16, 2019. Upon receipt of the Respondent's signed undertaking to resign his certificate of registration and never reapply in any jurisdiction, the Committee required the Respondent to attend at the College to be cautioned in person with respect to his inadequate documentation, treatments, and assessments. The Committee will also state its expectation that physicians cannot charge patients for an Ontario Health Insurance Plan (OHIP)-covered service, including writing prescriptions.

COMMITTEE'S ANALYSIS

Inappropriately prescribing Vyvanse to the Patients, diagnosing ADHD, examination and testing, and other clinical care.

- Regarding Patient 1, there was no history or physical examination documented in the Respondent's medical records when the Respondent started her on Vyvanse, and no documentation for subsequent prescription refills until a year later. This was inappropriate care. First, all prescriptions should be carefully considered, and physicians must appropriately assess the patient (including taking an adequate history). These findings should be recorded in the medical record.

- Regarding Patient 2, there was similarly no history or physical examination documented when the Respondent started this medication. There was only one notation from a month later about the prescription, with no further documentation regarding refills until one year after that. This was not appropriate care or record-keeping for the same reasons as stated for Patient 1.

- For both Patients, the Committee could not determine what the Respondent based his ADHD diagnosis on. There was no information in the medical record, and the only information provided by the Respondent was that he based it on information related to poor academic performance. However, this was not adequate for determining whether a patient has ADHD.

- For both Patients, the Respondent also did not appear to have provided appropriate follow-up or monitoring for the Vyvanse prescriptions. There was no documentation that indicated how he was monitoring the escalating medication doses, or of the medication's impact on the Patients (including any form of functional inquiry). This was, again, not adequate care and documentation.

- The Committee also noted that the Respondent had an extensive College history related to problems with his practice.

Charging for OHIP-covered prescriptions

- The Respondent denied charging the Patients for the Vyvanse prescriptions. In this case, the Committee stated its expectation that physicians should not charge patients for an OHIP-covered service, including writing prescriptions.

Undertaking to Resign

- The Committee noted that the Respondent expressed his willingness to sign an undertaking never to re-apply for a medical licence in Ontario or any other jurisdiction. This, along with a caution regarding his inadequate documentation, treatments, and assessments, satisfied the Committee's concerns in this case.