

UNDERTAKING, ACKNOWLEDGEMENT AND CONSENT
(“Undertaking”)

of

DR. STEFAN JOSEPH KONASIEWICZ
(“Dr. Konasiewicz”)

to

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

A. PREAMBLE

(1) In this Undertaking:

“Code” means the Health Professions Procedural Code, which is Schedule 2 to the *Regulated Health Professions Act, 1991*, S.O. 1991, c. 18, as amended;

“Discipline Tribunal” means the Ontario Physicians and Surgeons Discipline Tribunal of the College;

“OHIP” means the Ontario Health Insurance Plan;

“Ontario Physicians and Surgeons Discipline Tribunal” means the Discipline Committee established under the Code;

“Public Register” means the College’s register that is available to the public.

(2) I, **Dr. Konasiewicz**, certificate of registration number **60999**, am a member of the College.

(3) I, **Dr. Konasiewicz**, acknowledge that the College conducted an investigation bearing File Number CAS-131545-C3F8S0 (the “Investigation”) into whether I engaged in professional misconduct and/or am incompetent in my chronic pain management practice.

B. UNDERTAKING

(4) I, **Dr. Konasiewicz**, undertake to abide by the provisions of this Undertaking, effective immediately.

(5) ***Practice Restrictions***

(a) I, **Dr. Konasiewicz**, undertake that I will see no more than forty-five (45) chronic pain patients per day, and schedule no more than five (5) chronic pain patient encounters per hour. The five (5) chronic pain patient encounters per hour does not

include any rounding on chronic pain patients seen earlier in the day for monitoring or follow up.

(6) ***Monitoring***

- (a) I, **Dr. Konasiewicz**, undertake to inform the College of each and every location at which I practice, delegate, or have privileges, including, but not limited to, any hospitals, clinics, offices, and any Out-of-Hospital Premises and Independent Health Facilities with which I am affiliated, in any jurisdiction (collectively my “Practice Location” or “Practice Locations”), within five (5) days of executing this Undertaking. Going forward, I further undertake to inform the College of any and all new Practice Locations within five (5) days of commencing practice at that location.
- (b) I, **Dr. Konasiewicz**, undertake that I will submit to, and not interfere with, unannounced inspections of my Practice Locations and patient charts by a College representative for the purposes of monitoring my compliance with the provisions of this Undertaking.
- (c) I, **Dr. Konasiewicz**, give my irrevocable consent to the College to make appropriate enquiries of OHIP, and/or any person who or institution that may have relevant information, in order for the College to monitor my compliance with the provisions of this Undertaking.
- (d) I, **Dr. Konasiewicz**, acknowledge that I have executed the OHIP consent form, attached hereto as Appendix “A”.

C. ACKNOWLEDGEMENT

- (7) I, **Dr. Konasiewicz**, acknowledge that all appendices attached to or referred to in this Undertaking form part of this Undertaking.
- (8) I, **Dr. Konasiewicz**, acknowledge and undertake that I shall be solely responsible for payment of all fees, costs, charges, expenses, etc. arising from the implementation of any of the provisions of this Undertaking.
- (9) I, **Dr. Konasiewicz**, acknowledge that I have read and understand the provisions of this Undertaking and that I have obtained independent legal counsel in reviewing and executing this Undertaking, or have waived my right to do so.
- (10) I, **Dr. Konasiewicz**, acknowledge that the College will provide this Undertaking to any Chief of Staff, or a colleague with similar responsibilities, at any Practice Location (“Chief of Staff” or “Chiefs of Staff”).
- (11) I, **Dr. Konasiewicz**, acknowledge that a breach by me of any provision of this Undertaking may constitute an act of professional misconduct and/or incompetence, and may result in a referral of specified allegations to the Discipline Tribunal.

(12) I, **Dr. Konasiewicz**, acknowledge that this Undertaking constitutes terms, conditions, and limitations on my certificate of registration for the purposes of section 23 of the Code.

(13) ***Public Register***

(a) I, **Dr. Konasiewicz**, acknowledge that, during the time period that this Undertaking remains in effect, this Undertaking shall be posted on the Public Register.

(b) I, **Dr. Konasiewicz**, acknowledge that, in addition to this Undertaking being posted in accordance with section (13)(a) above, the following summary shall be posted on the Public Register during the time period that this Undertaking remains in effect:

A College investigation was conducted into whether Dr. Konasiewicz engaged in professional misconduct and/or was incompetent in his chronic pain management practice. As a result of the investigation, Dr. Konasiewicz will see no more than forty-five (45) chronic pain patients per day, and will schedule no more than five (5) chronic pain patient encounters per hour.

D. CONSENT

(14) I, **Dr. Konasiewicz**, give my irrevocable consent to the College to provide all Chiefs of Staff with any information the College has that led to the circumstances of my entering into this Undertaking and/or any information arising from the monitoring of my compliance with this Undertaking.