

**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. Nelson David Friesen (CPSO #32532)
(the Respondent)**

INTRODUCTION

The Respondent was family physician for the Complainant and her son, the Patient, from January 2019 to August 2020.

COMPLAINANT'S CONCERNS

The Complainant is concerned that the Respondent:

- **Failed to provide appropriate care to the Patient in that he failed to refer him to an ear, nose and throat (ENT) specialist in April 2019 when he was unable to ascertain the cause of the Patient's loud mouth-breathing during sleep. The Respondent also failed to act on at least three additional reminders from the Complainant about the referral**
- **Failed to provide appropriate care to the Complainant in that he failed to refer her to an obstetrician-gynecologist (OB-GYN) in March 2020 and June 2020 for assessment of lower abdominal pain and consultation for insertion of an intrauterine device (IUD)**
- **Failed to refer the Complainant to a specialist for pain and numbness in her hands and feet**
- **Communicated in an unprofessional and inappropriate manner by telling the Complainant in September 2019 how busy he was and that he had patients with more pressing health concerns "like cancer;" and on August 21, 2020, by telling her, "It's not like I wake up every morning thinking how am I going to screw over [the Complainant] today."**

COMMITTEE'S DECISION

A General Panel of the Committee considered this matter at its meeting of March 25, 2021. The Committee required the Respondent to complete a specified continuing remediation and education program (SCERP) consisting of a medical record-keeping course, individualized coaching in communications, self-directed learning and a period of supervision.

COMMITTEE'S ANALYSIS

Failed to refer the Patient to an ENT specialist

The Committee conducted a review of documentation only and was unable to determine exactly what occurred on the issue of the ENT referral. The Complainant indicated that she raised the issue of the referral several times, but the Respondent disputed this version of events. According to the Respondent's own information, however, he and the Complainant engaged in more than one discussion about her desire for an ENT referral for her son, and on one occasion the Respondent likely indicated that he was busy with more important concerns and would complete the consultation request when he had time.

The Respondent did not refer the Patient for an ENT consultation as the Complainant requested. He did not document any mention of the Complainant's concerns about her son's breathing in the Patient's medical record.

Failed to refer the Complainant to her OB-GYN

The Respondent confirmed that the Complainant asked for a referral to her OB-GYN for consideration of insertion of an IUD in March 2020 and again in July 2020. There is no indication in the medical record that the Respondent followed through on his documented plan to consult with the Complainant's OB-GYN.

It was very concerning to the Committee that the Respondent did not find over a period of several months the few minutes it would have taken to refer the Complainant to her OB-GYN. The Complainant had a history of unwanted pregnancy and her OB-GYN had expressed willingness to see her upon receipt of the requested referral.

Failed to refer the Complainant regarding pain and numbness in her hands and feet

On the basis of the documentation, it appeared to the Committee that the Respondent gave some consideration to referring the Complainant for nerve conduction studies to investigate her symptoms of pain and numbness in her hands and feet. The Respondent did not ultimately refer the Complainant despite the fact that she raised concern about her hand and foot symptoms in March 2019, March 2020 and again during an appointment in July 2020. The chart note for the July 2020 encounter did not include any diagnosis for the hand and foot symptoms or a plan to address the Complainant's pain.

Communicated with the Complainant in an unprofessional and inappropriate manner

The Respondent acknowledged that he probably did say something to the Complainant to the effect of not "waking up with an idea to make anyone's life miserable" or to

“screw them over”. He stated that this part of the complaint “is possibly accurate.” The Respondent also acknowledged that the comment about being busy treating patients with more pressing concerns like cancer “sounds like something I might have said” as his brain “would certainly be thinking that cancer patients would take a priority over a category 4 consult.”

The Committee found it concerning that the Respondent was unable to deny making the two statements the Complainant mentioned in her complaint, statements that the Committee considered to be paternalistic and demeaning. The Respondent’s response to the College did not convey regret for any lapses in professionalism in his communication with the Complainant.

On the basis of the above, the Committee considered it appropriate to require the Respondent to complete the SCERP.