

## **NOTICE OF PUBLICATION BAN**

In the College of Physicians and Surgeons of Ontario and Dr. Stanley Thomas Dobrowolski, this is notice that the Discipline Committee ordered that no person shall publish or broadcast the identity of the complainants or any information that could identify the complainants under subsection 47(1) of the Health Professions Procedural Code (the Code), which is Schedule 2 to the Regulated Health Professions Act, 1991, S.O. 1991, c. 18, as amended.

The Committee also made an order that there shall be a ban on the publication or broadcasting of the identity of patients or any information that could identify patients under section 45(3) of the Code.

Subsection 93(1) of the Code, which is concerned with failure to comply with these orders, reads:

Every person who contravenes an order made under ... section 45 or 47... is guilty of an offence and on conviction is liable,

(a) in the case of an individual to a fine of not more than \$25,000 for a first offence and not more than \$50,000 for a second or subsequent offence; or

(b) in the case of a corporation to a fine of not more than \$50,000 for a first offence and not more than \$200,000 for a second or subsequent offence.

**Indexed as: Ontario (College of Physicians and Surgeons of Ontario) v.  
Dobrowolski, 2016 ONCPSD 2**

**THE DISCIPLINE COMMITTEE OF THE COLLEGE  
OF PHYSICIANS AND SURGEONS OF ONTARIO**

**IN THE MATTER OF** a Hearing directed  
by the Inquiries, Complaints and Reports Committee of  
the College of Physicians and Surgeons of Ontario  
pursuant to Section 26(1) of the **Health Professions Procedural Code**  
being Schedule 2 of the *Regulated Health Professions Act, 1991*,  
S.O. 1991, c. 18, as amended.

**B E T W E E N:**

**THE COLLEGE OF PHYSICIANS AND SURGEONS OF ONTARIO**

**- and -**

**DR. STANLEY THOMAS DOBROWOLSKI**

**PANEL MEMBERS:**

**DR. W. KING (CHAIR)  
P. PIELSTICKER  
DR. C. LEVITT  
DR. E. ATTIA (Ph.D.)  
DR. E. STANTON**

<b>Hearing Date:</b>	November 30, 2015
<b>Decision Date:</b>	November 30, 2015
<b>Release of Written Reasons:</b>	January 20, 2016

**PUBLICATION BAN**

## DECISION AND REASONS FOR DECISION

The Discipline Committee (the “Committee”) of the College of Physicians and Surgeons of Ontario heard this matter at Toronto on November 30, 2015. At the conclusion of the hearing, the Committee stated its finding that the member committed an act of professional misconduct, and delivered its penalty and costs order with written reasons to follow.

Dr. Dobrowolski was not present at the hearing.

## THE ALLEGATIONS

The Notice of Hearing alleged that Dr. Dobrowolski committed an act of professional misconduct:

1. under clause 51(1)(b.1) of the Health Professions Procedural Code (the “Code”), which is Schedule 2 to the *Regulated Health Professions Act, 1991*, S.O. 1991, c.18, in that he has engaged in the sexual abuse of a patient;
2. under paragraph 1(1)33 of Ontario Regulation 856/93 (“O./Reg. 856/93”) made under the *Medicine Act, 1991*, in that he has engaged in conduct or 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. under paragraph 1(1)(2) of O./Reg. 856/93, in that he has failed to maintain the standard of practice of the profession; and
4. under clause 51(1)(a) of the Code, in that he has been found guilty of an offence that is relevant to his suitability to practise.

## RESPONSE TO THE ALLEGATIONS

Dr. Dobrowolski pleaded no contest to the allegations in the Notice of Hearing.

## **THE FACTS**

The following facts were set out in a Statement of Uncontested Facts that was filed as an exhibit and presented to the Committee:

### ***Background***

1. Dr. Stanley Thomas Dobrowolski (“Dr. Dobrowolski”) is a psychiatrist who received his certificate of registration authorizing independent practice in 1981. During the relevant time period, until October 2012, he practised psychiatry in a city in Ontario, operating from an office adjoining his home.

2. On December 20, 2005, as a result of an appeal of a decision of the Discipline Committee of the College of Physicians and Surgeons of Ontario (“the College”), the Divisional Court made an order, attached at Tab 1 [to the Statement of Uncontested Facts], by which terms, conditions or limitations were imposed on Dr. Dobrowolski’s certificate of registration. These terms, conditions or limitations were in place until October 12, 2012 at 12:01 a.m. when his certificate of registration was suspended on an interim basis by the Inquiries, Complaints and Reports Committee of the College, pending this hearing. The terms, conditions or limitations imposed by the Divisional Court included that:

- (a) Dr. Dobrowolski was prohibited from performing any form of physical examination on any of his patients;
- (b) Dr. Dobrowolski was required to post signage in his waiting room in a location where it was visible to patients, in an approved form, advising patients of this restriction;
- (c) Dr. Dobrowolski was required to advise all female patients of the discipline findings made against him by the Discipline Committee of the College, and that as a result he was restricted from performing any form of physical examinations

on any of his patients, and that if a physical examination was necessary, it would have to be performed by another physician;

- (d) Dr. Dobrowolski was required to further advise all female patients that it was inappropriate and unacceptable for him to have any form of relationship with his patients outside of the physician-patient therapy relationship; and
- (e) Dr. Dobrowolski was required to have all existing and future female patients sign an acknowledgment in a form provided, indicating that they had been advised of all of this information.

### ***Investigation regarding Patient A***

3. In June 2011, Mr. A telephoned the College. Mr. A stated that he wished to complain about Dr. Dobrowolski's treatment of his wife, and that he believed there had been sexual misconduct on Dr. Dobrowolski's part. Mr. A's wife was in the hospital recovering from an emergent psychiatric condition at the time that Mr. A contacted the College.

4. College investigators interviewed Mr. A and, when she was no longer hospitalized, his wife, Patient A. She had been Dr. Dobrowolski's patient between approximately February 2006 and May 2011, having been referred to him by a friend when seeking treatment for panic attacks and anxiety. Patient A saw Dr. Dobrowolski on at least a weekly or bi-weekly basis, sometimes more frequently, between February 2006 and November 2008, then had five more appointments with him between February and May 2011. Dr. Dobrowolski billed the Ontario Health Insurance Plan for individual psychotherapy for Patient A's appointments.

5. As College investigators learned from interviewing Patient A and her husband:

- (a) Dr. Dobrowolski gave Patient A money on some occasions during the doctor-patient relationship when she attended appointments at his office, including

money to buy bus tickets. When Patient A asked Dr. Dobrowolski to lend her money to buy wine, he did so on some occasions, and on one occasion he gave her a bottle of wine, although he prescribed a number of medications to Patient A, including some for which alcohol consumption is contraindicated.

- (b) Dr. Dobrowolski and Patient A both attended an antique auction. Dr. Dobrowolski delivered a painting purchased at the auction to Patient A's house.
- (c) Dr. Dobrowolski told Patient A that he had training in gynecology. He asked to conduct physical examinations on her during her regular appointments, explaining that he was knowledgeable about women's health.
- (d) Dr. Dobrowolski conducted what were purported to be physical examinations on Patient A on a weekly or biweekly basis at almost every appointment from Patient A's second or third visit until November 2008, including of her breasts, vaginal area, and her rectum. Dr. Dobrowolski told Patient A that she had some moles, which he said had to be checked at each visit, and that she had cysts in one of her breasts. He justified his purported physical examinations by telling Patient A that in the past he had saved other patients' lives by recognizing cancerous moles. During Patient A's appointments, Dr. Dobrowolski would lock the door to both his office and his consulting room.
- (e) Dr. Dobrowolski remained in the room while Patient A disrobed during her appointments with him. On one occasion when she expressed discomfort, he offered to undress as well.
- (f) During the purported physical examinations, Dr. Dobrowolski made other inappropriate comments to Patient A, for example commenting that she looked so nice that she should not put on a gown.

- (g) The breast examinations that Dr. Dobrowolski purported to conduct on Patient A during medical appointments at his office were not like breast examinations that Patient A had experienced from other doctors. He touched both her breasts at once, while she was standing up. Patient A felt that it was “like he was trying to make [her] feel excited,” and that he was trying to elicit a “reaction” from her.
- (h) In purporting to examine Patient A’s vaginal area during medical appointments at his office, Dr. Dobrowolski penetrated Patient A’s vagina on numerous occasions with two fingers while she lay on a chair in his consulting room that folded outwards. Dr. Dobrowolski used lubrication, but on at least one occasion, Patient A experienced pain when Dr. Dobrowolski probed her vaginal area with his fingers. Sometimes, Patient A tried to avoid having Dr. Dobrowolski touch her breasts or vaginal area by telling him that she had been examined on the previous visit or that she was menstruating, but Dr. Dobrowolski would often ignore her requests and proceed to touch these areas.
- (i) Patient A confided to Dr. Dobrowolski at her second or third visit for psychotherapy that she was anxious that Mr. A took photographs of young women for his job and did not take pictures of her. In response, Dr. Dobrowolski asked Patient A if he could take pictures of her. He gave her money for lingerie, and took photographs of her wearing the lingerie during medical appointments in his office. Dr. Dobrowolski also took photographs of Patient A’s vagina during appointments, telling her that he had found something on her vagina and was taking the photographs in order to show it to her.
- (j) Dr. Dobrowolski shaved Patient A’s legs on a few occasions with an electric razor during her medical appointments, after she told him that she did not want to take her clothes off because her legs were not shaved. Dr. Dobrowolski stated that he wanted to shave her pubic area as well.

- (k) Dr. Dobrowolski touched Patient A's legs, buttocks, and back during medical appointments in his office.
- (l) Dr. Dobrowolski hugged Patient A, and kissed her on the cheeks at her medical appointments in his office.
- (m) On one occasion, Patient A believed that she observed that Dr. Dobrowolski had an erection while she was talking to him during an appointment at his office. He touched the front of his pants and adjusted himself.
- (n) During medical appointments in his office, Dr. Dobrowolski showed Patient A photographs of her he had taken on his computer. He also showed her photographs of what he said were other patients' vaginal areas, pointing out cases where he said he had helped women to spot and survive cancer.
- (o) When Patient A told Dr. Dobrowolski that her daughters had moles, he said that he wanted to see their moles as well, when they were older.
- (p) In November 2008, Patient A stopped attending Dr. Dobrowolski's office for psychotherapy appointments for a period of time. She returned for further treatment in February 2011 when she began to experience anxiety again.
- (q) When Patient A returned to Dr. Dobrowolski for treatment in 2011, Dr. Dobrowolski hugged and kissed her. He asked her if he would be able to examine her physically again and she said no, she would keep her clothes on. Patient A perceived Dr. Dobrowolski to be surprised and angry. She then let him examine her breasts, for which he unzipped her top. He also unzipped her pants and moved his fingers as if to examine her genital area, but she refused to let him. Dr. Dobrowolski complimented her youthful appearance.



6. During the entire time period that he treated Patient A, Dr. Dobrowolski was subject to the terms, conditions or limitations on his certificate of registration and the Divisional Court order, as outlined at paragraph 2 above. He violated these terms, conditions or limitations and the Divisional Court order by conducting what purported to be physical examinations of Patient A. In addition, although he had Patient A sign the acknowledgement required by the Divisional Court's order, Dr. Dobrowolski gave Patient A false and misleading information about the terms on his certificate of registration, and the reasons for them, including his discipline history.

7. In the course of monitoring Dr. Dobrowolski's compliance with the terms, conditions or limitations on his certificate of registration and the Divisional Court order, a College representative reviewed Patient A's file for the acknowledgement required to be obtained by Dr. Dobrowolski from female patients. The College representative contacted Patient A in September 2007 to verify that she had signed the acknowledgement and understood the information set out in it. Patient A reported reading and signing the required acknowledgement that she was aware of Dr. Dobrowolski's discipline history and that he was not supposed to perform physical examinations. Patient A expressed satisfaction with Dr. Dobrowolski's care to the College representative in 2007. However, as Patient A later told College investigators, she was not truthful with the College representative in 2007 about Dr. Dobrowolski, because at the time she believed what he had been telling her.

8. In July 2012, to investigate Mr. A's complaint in view of the information provided by Patient A, College investigators attended at Dr. Dobrowolski's office to obtain any computers used in his practice, together with thumb drives, disc drives, storage units, and cameras for inspection and analysis. Dr. Dobrowolski had earlier received notice of the investigation and had already provided a written response in which he had described the allegations against him as "false and groundless." Dr. Dobrowolski stated to the investigators in attendance that the cameras and tripod had been used only while his practice was previously under supervision by the College, which was during a five-month period in 1999-2000 as a term of a prior Discipline Committee decision. He

further stated that he had taken no pictures of patients' genitals or of patients in states of undress. When asked if he had photographs of women, their genital areas, or anything similar, Dr. Dobrowolski stated that he browsed some sites on the Internet from time to time for his own pleasure, but that it had nothing to do with patients. The College investigators obtained materials from Dr. Dobrowolski's office, including three computers, a camera, 3 external hard drives, 4 USB thumb drives, 7 memory cards, 3 zip drives, 2 CDs, 1 DVD, and 79 floppy discs.

9. The College retained a computer forensics expert, Mr. Z, to perform a forensic analysis of the materials obtained from Dr. Dobrowolski's office. Preliminary results of his analysis showed numerous images of Patient A from Dr. Dobrowolski's computer that Mr. Z had recovered. These images were derived from videos taken on a computer camera, from which screen shots were then taken and saved by Dr. Dobrowolski. They included depictions of Patient A nude and partially nude. Dr. Dobrowolski was depicted helping Patient A to undress, touching her body including her breasts and pubic area, inserting his fingers into her vagina, and shaving her pubic area. While Patient A had been aware that Dr. Dobrowolski took some photographs of her while she was wearing lingerie, these recovered images were from a concealed camera, and Patient A had been unaware that she had been being recorded with it. Though Patient A believed that Dr. Dobrowolski was performing physical examinations on her, in fact he had been touching her for a sexual purpose and filming himself doing so. Mr. Z recovered thousands of images. They included images of other nude and partially nude women. The images were captured in Dr. Dobrowolski's medical office, in some cases while the women interacted with Dr. Dobrowolski, for example while he handled their breasts, and in some cases without the woman's face being visible. Mr. Z also recovered two videos of women in their underwear and/or nude, taken in Dr. Dobrowolski's medical office, in which Dr. Dobrowolski touched the women, including their breasts and vaginal areas. Both of these videos and many of the images had been deleted prior to Mr. Z's forensic analysis.

10. Upon the College's receipt of the preliminary results of the computer forensics analysis, in October 2012, the Inquiries, Complaints and Reports Committee of the

College referred allegations to the Discipline Committee arising from Mr. A's complaint and suspended Dr. Dobrowolski's certificate of registration without notice. At the same time, an investigation was commenced under section 75(1)(a) of the Health Professions Procedural Code, which is Schedule 2 to the *Regulated Health Professions Act, 1991*, based on the information obtained in the investigation into Mr. A's complaint, including in particular the videos and images of women other than Patient A that were obtained from Dr. Dobrowolski's computer devices.

11. With respect to Patient A, in summary between February 2006 and May 2011, during the doctor-patient relationship:

- Dr. Dobrowolski touched Patient A in a sexual manner, including her breasts, legs, vaginal area and anal area, in the guise of a medical examination;
- Dr. Dobrowolski shaved Patient A's legs and pubic area during medical appointments for a sexual purpose;
- Dr. Dobrowolski took photographs and videos of Patient A during medical appointments, on some occasions without her knowledge, including photographs and videos in which she was fully or partially nude and was being touched by Dr. Dobrowolski;
- Dr. Dobrowolski purchased lingerie for Patient A to wear and photographed her wearing it during medical appointments;
- Dr. Dobrowolski inappropriately showed photographs of other patients' genital areas to Patient A during medical appointments;
- Dr. Dobrowolski hugged and kissed Patient A during medical appointments;
- Dr. Dobrowolski offered to undress during Patient A's medical appointment;
- Dr. Dobrowolski made inappropriate and sexual remarks to Patient A during medical appointments;
- Dr. Dobrowolski gave and lent money and items to Patient A during medical appointments;
- Dr. Dobrowolski breached the terms, conditions or limitations of his certificate of registration and the Divisional Court order in his conduct towards Patient A.

***Criminal Conviction of Dr. Dobrowolski***

12. After allegations against Dr. Dobrowolski in respect of Patient A were referred to discipline, Dr. Dobrowolski was arrested by the local police service in November 2012, and charged with sexual assault of Patient A. The local police service advised the public that they believed that Dr. Dobrowolski had videorecorded females without their knowledge in his medical office and asked for other patients to come forward. As a result, the local police service was contacted by and interviewed other female patients of Dr. Dobrowolski.

13. In May 2014, Dr. Dobrowolski was found guilty in the Ontario Court of Justice of the following offences relevant to his suitability to practise:

- (i) having sexually assaulted sixteen persons, contrary to section 271, subsection (1) of the Criminal Code of Canada ( “sexual assault”);
- (ii) having without lawful excuse disobeyed a lawful order by conducting physical examinations on twelve persons, contrary to section 127, subsection (1) of the Criminal Code of Canada (“breach of a court order”);  
and
- (iii) having without lawful excuse, surreptitiously made visual recordings of nine persons, who were in circumstances that gave rise to a reasonable expectation of privacy when those persons were in a place in which they could reasonably be expected to be nude, to be exposing their genital organs or anal region or exposing their breasts or be engaged in explicit sexual activity, namely Dr. Dobrowolski’s office, and thereby having committed an offence under section 162, subsection (1), clause (a) of the Criminal Code, contrary to section 162, subsection (5) of the Criminal Code of Canada (“voyeurism”).

14. The criminal information, which among other things sets out the criminal charges against Dr. Dobrowolski and their disposition, is attached at Tab 2 [to the Statement of

Uncontested Facts]. The transcript of the criminal proceedings against Dr. Dobrowolski is attached at Tab 3 [to the Statement of Uncontested Facts]. The Agreed Statement of Facts from the criminal proceeding, describing Dr. Dobrowolski's criminal conduct, is attached at Tab 4 [to the Statement of Uncontested Facts]. In total, the criminal findings relate to Dr. Dobrowolski's conduct towards 22 female patients, including Patient A.

***Misconduct towards Other Patients***

15. The College's and police investigative processes led to the discovery of misconduct by Dr. Dobrowolski towards other patients who were not the subject of his criminal conviction:

- (i) Patient B: When College investigators attended at Dr. Dobrowolski's office in October 2012 to serve him with notice of his suspension and of the new investigation, Patient B was present at his office. Investigators identified her as being the subject of one of the videos recovered in the forensic analysis of Dr. Dobrowolski's computing equipment. The video shows Dr. Dobrowolski placing a concealed video camera in the area of his desk before Patient B enters the room. Patient B enters and undresses, after which Dr. Dobrowolski begins to touch her breasts and vaginal area, including inserting his fingers into her vagina. Upon encountering Patient B at Dr. Dobrowolski's office, College investigators advised her of the video that the College had discovered. They learned from Patient B that on numerous occasions during medical appointments Dr. Dobrowolski had conducted what Patient B believed at the time to be physical examinations on her, consisting of Dr. Dobrowolski touching her breasts and her genitals, including inside her vagina. Patient B had never been aware of Dr. Dobrowolski taking any photographs or videos of her. In fact, Dr. Dobrowolski had videotaped her without her knowledge, while touching her breasts and her genitals for his own sexual purposes.

- (ii) Patient C: in approximately 2011 or 2012, Dr. Dobrowolski purported to examine a mole on Patient C at a medical appointment. She removed her top but not her bra for the examination. In doing so, Dr. Dobrowolski breached the terms, conditions or limitations on his certificate of registration and the Divisional Court order prohibiting him from conducting physical examinations, and engaged in inappropriate touching of a sexual nature of Patient C.
- (iii) Patient D: Patient D was Dr. Dobrowolski's patient intermittently between 2000 and 2011. Dr. Dobrowolski on one occasion early in her treatment performed what purported to be a physical examination, including feeling around the area of her breast, while telling her that he had found cancerous spots on other women. In doing so, Dr. Dobrowolski engaged in inappropriate touching of a sexual nature of Patient D.
- (iv) Patient E: Patient E was Dr. Dobrowolski's patient from November 2005 to March 2006. Dr. Dobrowolski offered to check her breasts to see if she had any moles, and performed what purported to be a breast examination on one occasion during a medical appointment. In doing so, Dr. Dobrowolski engaged in inappropriate touching of a sexual nature of Patient E.
- (v) Patient F: Patient F was Dr. Dobrowolski's patient between February 2005 and December 2008. On approximately five occasions between 2007 and 2008 during medical appointments, Dr. Dobrowolski conducted what purported to be physical examinations, with Patient F's bra off and her underwear on. In doing so, Dr. Dobrowolski engaged in inappropriate touching of a sexual nature of Patient F and breached the terms, conditions or limitations on his certificate of registration and the Divisional Court order.
- (vi) Patient G: Patient G was Dr. Dobrowolski's patient between February 2005 and May 2012. Dr. Dobrowolski injected vitamin shots into Patient G's buttocks on 1 to 3 occasions during medical appointments, in breach of the terms, conditions or

limitations on his certificate of registration and the Divisional Court order. He also inappropriately lent her one hundred dollars during a medical appointment.

- (vii) Patient H: Patient H was Dr. Dobrowolski's patient between approximately 1999 and June 2012. Dr. Dobrowolski injected vitamin shots into Patient H's upper hip once a month between 2005 and 2007. While Dr. Dobrowolski had Patient H sign the acknowledgement required by the terms, conditions or limitations on his certificate of registration and the Divisional Court order, Dr. Dobrowolski falsely told her they arose because a patient's husband had overreacted when Dr. Dobrowolski examined his wife for a mole while she was breastfeeding.
- (viii) Patient I: Patient I was Dr. Dobrowolski's patient in approximately 2005 and 2006. Dr. Dobrowolski directed Patient I to disrobe, did not leave the room while she did so, and performed what purported to be physical examinations on her, including touching her legs, abdomen, and breasts. In doing so, he engaged in touching of Patient I of a sexual nature and breached the terms, conditions or limitations on his certificate of registration and the Divisional Court order.
- (ix) Patient J: Patient J was Dr. Dobrowolski's patient from approximately 1998 until June 2012. Dr. Dobrowolski made inappropriate comments to Patient J during medical appointments, including sharing personal information. Dr. Dobrowolski also commenced performing a physical examination on Patient J on one occasion during a medical appointment, inappropriately looking at and touching her back and chest, purportedly while looking for moles. Patient J did not remove her clothes. Dr. Dobrowolski inappropriately offered to perform a breast examination during a medical appointment, but Patient J declined.

## **PLEA OF NO CONTEST**

16. Dr. Dobrowolski does not contest the facts in paragraphs 1-15 above, and does not contest that they constitute professional misconduct, in that:

- (a) he has engaged in the sexual abuse of the patients set out above (except for patients G, H, and J);
- (b) he has engaged in conduct or 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;
- (c) he has failed to maintain the standard of practice of the profession in his care of Patient A; and
- (d) he has been found guilty of offences relevant to his suitability to practise.

The Statement of Uncontested Facts had appended to it the Agreed Statement of Facts that was filed in the criminal proceedings and highlighted in the submissions of College counsel and presented to the Committee. It provided the factual underpinnings for the criminal court conviction of Dr. Dobrowolski for sexual assault, breach of court order, and voyeurism. His conduct with respect to twenty-two (22) of his patients forms the basis for the criminal conduct addressed by that court, and is excerpted below:

### **Patient A**

In February of 2005 Patient A became a patient of Dr. Dobrowolski. She attended several appointments at the home office of Dr. Dobrowolski. She reported feeling anxiety. During the second appointment with the accused he asked her if he could examine her. He told her that he studied “gynecology,” “dermatology” and “cancers.” He proceeded to perform a physical exam that consisted of touching the victim’s breasts and vagina. The accused touched Patient A’s breasts and vagina underneath her clothing on her bare skin. The vagina touching took place on a leather chair in Dr. Dobrowolski’s office. She recalls feeling ashamed and asking to put her clothing back on and the accused would tell her no. Patient A had appointments with the accused once or twice a week between February 2005 and November 2009 and at almost every appointment the accused examined her breasts and vagina for up to a 30 minute period. At times the appointments would last 1 to 3 hours. On numerous occasions the accused digitally penetrated the



victim's vagina. On some of the occasions when the accused touched Patient A's vagina, he used medical gloves but on other occasions he did not. At times, he would close his eyes during some of the so-called examinations. Other times he would caress her back thigh and buttocks. Patient A felt that the manner in which the accused touched her breasts and vagina were different than the way her family doctor did when performing medical examinations.

Dr. Dobrowolski requested that the victim purchase lingerie and provided her with money to do so. The accused kept the lingerie in his office so that the victim's husband did not find it. During appointments with the accused the victim put lingerie on and the accused took pictures of the victim in various poses including some where Patient A was naked. The accused took photos of Patient A's vagina. She requested that the accused not take any photos of her face. The accused would often show the victim pictures he had taken of her on his computer and tell her that she had a nice vagina.

The accused showed Patient A pictures of other females including photos of various vaginas that he said belonged to other female patients of his. On one occasion Patient A told the accused she did not want to be photographed as she had not shaved her legs or pubic hair. Dr. Dobrowolski proceeded to shave the victim's legs and pubic hair.

Patient A often told the accused that she did not want to be examined as he had just done so on the previous visit, or because she was menstruating. Dr. Dobrowolski would often ignore the victim's request and touch her breasts and vagina.

The victim stopped attending the accused's office in November 2009 and did not return for a period of almost two years.

Patient A resumed seeing the accused at his office in March 2011 as she had been experiencing family problems and was craving her medication. Upon her return to the accused's office, he was excited to see her again and hugged her. The accused touched the victim. He touched her breasts. The accused asked to touch the victim's vagina and she said no. Despite this, the accused touched Patient A's pant zipper. The victim did not allow the accused to take her photo. The accused provided the victim with medications and the victim saw the accused on three or four occasions between March 2011 and May 2011. The victim reported these incidents to the College of Physicians and Surgeons of Ontario.

In October 2012, the victim's husband contacted the local police service to report these incidents. Police Constable Y attended and obtained a statement from the victim. The investigation was then reassigned to Detective X of the Sexual Assault Unit for follow up.

Detective X spoke with Investigator W from the College of Physicians and Surgeons of Ontario. Investigator W confirmed that they had commenced an investigation and were in the process of seizing patient information from patient files and computer storage devices within the office, and that Stanley Dobrowolski had set up a hidden camera inside his office to record the patient interactions which included breast and vaginal touching during the psychiatric therapy sessions. The victim had no knowledge of the recording and provided no consent for the recording of these sessions which captured the photographing of the victim in lingerie, the shaving of her legs and pubic area and the touching of her breasts and digital penetration of her vagina by Stanley Dobrowolski.

The investigation continued. Various efforts were made to identify other women whose images were found on Dr. Dobrowolski's electronic storage devices. As a result of the various investigative steps, the following victims were identified.

**Patient 1**

Patient 1 was a patient of Dr. Dobrowolski beginning in May of 2002. She attended appointments at his home office. After a couple of months of sessions, a relationship was established and Dr. Dobrowolski began hugging Patient 1 at the conclusion of their session after obtaining her permission. During their sessions, he would ask questions about intimacy with her husband and he would comment on his own sexual preferences.

Between August 2007 and December 2007, Patient 1 and Dr. Dobrowolski were having a conversation about a breast lump she had found. As a result, Dr. Dobrowolski asked if he could feel the lump. With Patient 1's permission, Dr. Dobrowolski performed an examination of her right breast by placing his hand on her breast and feeling the side of her breast over her clothing. Patient 1 never showed the accused her breasts nor did she ever disrobe for him. Patient 1 was aware of Dr. Dobrowolski's restrictions in relation to conducting physical exams.

**Patient 2**

In May 1999, Patient 2 became a patient of Dr. Dobrowolski on her mother's suggestion to speak to someone about a breast reduction. In April 2000, the victim consulted a surgeon in relation to a breast reduction procedure. The surgeon never touched Patient 2's breasts but instead used a picture to show where the incisions would be made. Before her surgery date, the victim attended at Dr. Dobrowolski's office for a psychiatric evaluation in relation to the breast reduction procedure. During this appointment, Dr. Dobrowolski examined Patient 2's breasts. At first Patient 2 indicated that she did not want an examination performed on her but was convinced by the accused that it was a necessary step to the evaluation.

At the accused's request, Patient 2 removed her shirt and bra. Dr. Dobrowolski touched both breasts and moved them around, lifting them up and around. He then

had the victim position her arms over head as he sat in front of her to perform the examination. Dr. Dobrowolski explained where the scars would be and using his finger on her breasts traced the location of the incisions. He also traced around her areola and touched her nipples and then drew a line down to the crease of her breast and then underneath. This took several minutes.

### **Patient 3**

Patient 3 was a patient of Dr. Dobrowolski beginning the year she turned 18 years of age. She remained a patient for approximately one year. Dr. Dobrowolski saw Patient 3 on a weekly basis and was treating her for depression and panic attacks. All appointments took place at his home office in a city in Ontario.

Not long into their relationship, the accused asked Patient 3 if he could examine her body. She reluctantly agreed. The accused would leave the room as Patient 3 disrobed. She would leave her panties on. On two occasions the accused performed a breast examination on her. He also looked over her body for moles. The accused photographed Patient 3's moles on her back and toes. He also took a photo of her belly button ring because he thought it was interesting.

### **Patient 4**

Patient 4 was a patient of Dr. Dobrowolski between 2007 and 2009. She would see the accused approximately every 6 weeks for a 2 hour session. After being a patient for approximately 4 months, Dr. Dobrowolski asked Patient 4 if he could perform a breast examination on her. Patient 4 agreed and removed her top. The accused performed the exam. It was a medically typical exam and did not take long to complete. Dr. Dobrowolski also checked her heart rate and on other occasions injected her with vitamin shots into her hip.

Although the accused was subject to a Court Order prohibiting him from conducting medical examinations, he did so without informing Patient 4 that he was not permitted to do so. However, she recalls that he did advise her that he had had an inappropriate relationship with a patient and was supposed to advise other patients of that.

### **Patient 5**

Patient 5 was a patient of Dr. Dobrowolski from January 2007 to September 2012. She attended Dr. Dobrowolski's office to discuss issues that she felt were not being addressed by her family doctor. During this period of time she had bi-weekly sessions which later became monthly sessions.

Patient 5 told Dr. Dobrowolski that she had pain with her breasts. The accused conducted breast exams on her in his home office in a city in Ontario. Patient 5 described the breast exams as being normal exams that were typical of other breast exams she had experienced. The victim did indicate that during the exams he would touch her nipples but she did not feel that it was done in an inappropriate way. Dr. Dobrowolski did perform exams on her leg as well to check for moles but never performed vaginal exams on her. She was never naked in his office and always at least left her underwear on. Dr. Dobrowolski did not inform her that he was not to perform any physical exams. These physical exams were in direct violation of the conditions imposed upon him. However, she recalled signing a piece of paper but did not know what was on it. Further, she recalled Dr. Dobrowolski advising her of a patient that had caused him problems in the past.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. Within those devices were 10 photographic images of Patient 5. In these images she is standing with only her underwear on. Dr. Dobrowolski can be seen performing physical examinations on

her. Patient 5 had no idea that the accused was recording these visits and she never gave him permission to take pictures of her.

### **Patient 6**

Patient 6 was a patient of Dr. Dobrowolski for approximately one and a half years, beginning in August 2002. Dr. Dobrowolski performed physical exams on her, checking her for moles and he performed breast exams on some occasions. In addition, without Patient 6 indicating to Dr. Dobrowolski that she had any concerns that could warrant a vaginal exam, he performed one or two vaginal examinations.

Patient 6 was aware that Dr. Dobrowolski has taken photographs of her moles. She was not aware of any other photos. Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. Within those devices were 42 photographic images of Patient 6. In all cases the victim is either naked or wearing just her underwear.

### **Patient 7**

Patient 7 became a patient of Dr. Dobrowolski in 2000. This ended in June 2010. During this time period, Dr. Dobrowolski performed a number of physical exams of the victim over these years. Her visits were usually twice a month and lasted from 2 to 2.5 hours. These physical exams usually were conducted while she was naked under the guise of checking for moles and/or skin cancer. Since the victim did not have a family doctor, she allowed Dr. Dobrowolski to perform these physical exams. The exams took place nearly at every visit. On occasion, Patient 7 would tell the accused that she did not wish to be examined. The accused would become upset at her.

In the early stages of the examinations, he would provide a gown for her to wear. He would then remove the gown from her, indicating it interrupted him. He would also remove her bra. This happened many times during the years that Patient 7 was a patient of the accused.

Sometime in 2007 or 2008, Dr. Dobrowolski performed a vaginal examination on the victim. It was aggressive. Patient 7 continued to see Dr. Dobrowolski and he wanted to perform additional vaginal exams on her but she refused.

Dr. Dobrowolski never advised the victim that he was prohibited from performing physical examination. However, she recalled signing a document and that he told her that he had a review because of problems with a female patient.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. Within those devices were 328 photographic images of Patient 7. These images show the victim standing naked while Dr. Dobrowolski performed examinations on her. In addition, within the 328 images are those of Patient 7 naked while lying in a chair in Dr. Dobrowolski's office. At no time did the victim give Dr. Dobrowolski permission to take the images and she had no knowledge of the images being taken.

### **Patient 8**

Patient 8 was a patient of Dr. Dobrowolski beginning December 2004 until 2011. She began seeing him after her family doctor retired. She was suffering from anxiety and she was suffering from pain. Her sessions with Dr. Dobrowolski were approximately every 3 weeks and typically lasted between 1 to 2 hours. On some occasions, Dr. Dobrowolski would examine Patient 8 for moles and perform breast exams, after asking her if she needed an examination. When the examinations were conducted, she would remove her clothing with the exception of her underwear and put on a robe. Dr. Dobrowolski performed approximately 5

breast exams on her during the course of their relationship. There was nothing out of the ordinary with respect to the breast exams themselves. However, they were conducted while Dr. Dobrowolski was prohibited from conducting any medical examinations. He never performed a vaginal exam.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. Within those devices were 6 photographic images of Patient 8. In all of the images Patient 8 is seen in her underwear only. In 5 of the images, her underwear is seen to be partially down. In these images, it appears that Dr. Dobrowolski is performing physical examinations. Although Patient 8 observed several cameras in Dr. Dobrowolski's office, at no time did Patient 8 give Dr. Dobrowolski permission to take the above mentioned images. Moreover, she had no knowledge of the images being taken. Had she been aware that photos were being taken, she would not have permitted Dr. Dobrowolski to perform any physical examinations on her.

### **Patient 9**

Patient 9 was a patient of Dr. Dobrowolski between 1998 and 2012. When she began to see Dr. Dobrowolski, she was in hospital and very sick. She saw him every month to month and a half. The sessions lasted between one and one and a half hours. Throughout the relationship, Dr. Dobrowolski conducted breast examinations on Patient 9 every three to four months. Many of these examinations were conducted while Dr. Dobrowolski was prohibited from conducting any physical examinations.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. Within those devices 14 photographs of Patient 9 were located. These images were of Patient 9 topless, with pants on and then just with underwear on. In some photos, Dr. Dobrowolski can be seen seated in a chair in front of Patient 9 touching her lower abdomen.



At no time did Patient 9 give Dr. Dobrowolski permission to take the above mentioned images. Moreover, she had no knowledge of the images being taken. Had she been aware that photos were being taken, she would not have permitted Dr. Dobrowolski to perform any physical examinations on her.

### **Patient 10**

Patient 10 is the daughter of another numbered patient. When Patient 10 was old enough to drive a car, she would drive her mother to her appointments with Dr. Dobrowolski. Dr. Dobrowolski began seeing Patient 10 and speaking to her in private. This would always occur on the days that Patient 10 took her mother to see Dr. Dobrowolski. He spoke to her about the stress between her and her mother. Dr. Dobrowolski told Patient 10 that he would not list her as a patient because it would look bad on her record if she was seeing a psychiatrist. The OHIP records and Dr. Dobrowolski's clinical notes obtained and reviewed in the course of the investigation reveal that while Dr. Dobrowolski was seeing Patient 10, these meetings are not reflected in any OHIP documentation or in his clinical notes. Patient 10 was not billed for any of the meetings with Dr. Dobrowolski.

After seeing Dr. Dobrowolski for approximately a year, when the victim was 16 years of age, Dr. Dobrowolski began to perform physical examinations on her. These physical examinations included breast exams as well as vaginal exams. He told her that problems ran in her family and he wanted to examine her skin for freckles.

By virtue of a prohibition order flowing from proceedings before the College of Physicians and Surgeons, Dr. Dobrowolski was prohibited from performing any of the physical examinations on Patient 10. When doing the exams he would take pictures of her, which she posed for. Patient 10 stopped seeing Dr. Dobrowolski in 2012.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. In total 2140 images and 42 video clips of Patient 10 were located. The images and videos appear to have been taken over a number of years as Patient 10 appears to age throughout the images and video clips. In a number of images, Patient 10 is seen posing; at times she is naked laying back in Dr. Dobrowolski's leather chair. There are a number of close up images of her breasts and vagina. In other images, Dr. Dobrowolski is seen performing breast and vaginal exams. The video clips are consistent in nature to the still images.

A total of 13 images contain EXIP data which enable investigators and analysts to determine the date that the image was created. With respect to these 13 images, some were of Patient 10's vagina. Analysts determined that these photos were taken when Patient 10 was 17 years of age. A review of Dr. Dobrowolski's clinical records revealed that Patient 10's mother had an appointment with Dr. Dobrowolski on the day said photos were taken.

Patient 10 identified herself in the images. She indicated that she was not aware that she was being video recorded by Dr. Dobrowolski and had she known that this was the case she would not have consented to any of the examinations.

### **Patient 11**

Patient 11 was a patient of Dr. Dobrowolski from March 2004 to February 2008. She saw him approximately 10 times. On the last three visits, Dr. Dobrowolski performed breast exams on her. Patient 11 indicated that these were not unlike other breast exams she had experienced although Dr. Dobrowolski used a magnifying glass. No vaginal exams were performed.

Patient 11 undressed in private and put on a gown. Dr. Dobrowolski requested that she remove the gown to allow him to examine her. Dr. Dobrowolski spoke to Patient 11 about moles and finding cancer in a patient as a result of the examinations. Patient 11 consented to Dr. Dobrowolski photographing the moles on her back and skin. She did not consent to the photographing of any other areas and did not consent to being video recorded. Dr. Dobrowolski did complete these examinations. He did advise Patient 11 that he was prohibited from performing any physical examinations.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. Approximately 100 images of Patient 11 were found on these devices. In these photos, Patient 11 was either totally naked or wearing panties. No close-up images of Patient 11's moles were located. In some of the photos, Dr. Dobrowolski can be seen apparently performing physical examinations on Patient 11.

### **Patient 12**

Dr. Dobrowolski became Patient 12's psychiatrist in 1997. She felt better and stopped seeing Dr. Dobrowolski. In February of 1999 she returned to seeing Dr. Dobrowolski as she was suffering from depression and anxiety. Within six months of being under Dr. Dobrowolski's care, she returned to her medication and felt better. Patient 12 left Dr. Dobrowolski's care until returning in January 2004 for several months. She stopped seeing Dr. Dobrowolski in the fall of 2005. Her appointments took place at his home office.

On one of the visits, Dr. Dobrowolski suggested to her that when a person suffers from depression or is stressed, they should be checked for cancer. He also told the victim that a possible side effect of Prozac was breast cancer. The victim subsequently agreed to allow a physical exam which took place. The accused also performed a physical exam, checking her stomach and feeling around her body,

on another occasion. He never told Patient 12 that he was prohibited from performing physical exams. He never advised Patient 12 that he was taking photos of her.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. During the examination of these devices, 10 images of Patient 12 were found. In these images, Patient 12 is seen standing wearing only her pants or only her underwear. Dr. Dobrowolski can be seen apparently performing a breast exam. In other photos, Dr. Dobrowolski can be seen pulling Patient 12's underwear away while he touches her pelvic area.

Patient 12 was not aware that these images existed and would never have consented to any examination had she known that Dr. Dobrowolski was being recorded.

### **Patient 13**

Dr. Dobrowolski became Patient 13's Psychiatrist in April 1999. She was in her early 20s at the time and had gone through a traumatic experience with which she continued to struggle. She met with Dr. Dobrowolski at his home office. The relationship lasted 3 to 4 years. The visits began on a weekly basis and then changed to bi-weekly. The sessions were typically 1 hour long. She was prescribed medication and was also provided with a prescription for birth control as she did not have a family doctor.

Patient 13 told Dr. Dobrowolski that she had a fear of cancer. Dr. Dobrowolski offered to check her skin. In some case he took pictures of marks on her skin. In some cases he took pictures of moles on her skin. The victim agreed to these pictures being taken, however, she only agreed to close-up pictures of moles and not full body shots. At some point during her visits, the victim recalls Dr. Dobrowolski telling her he was under restrictions because of a complaint.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. During the examination of these devices, 39 images of Patient 13 were located. In some images Patient 13 is seen naked and standing. Some of the images are of Patient 13's breasts and with her legs spread showing her vagina. Patient 13 was not aware that she was being photographed.

#### **Patient 14**

Dr. Dobrowolski became Patient 14's psychiatrist in June 2003 as she was dealing with depression. The relationship ended in December 2004. The appointments begin on a weekly basis and then on a monthly basis. On her first visit, Dr. Dobrowolski asked Patient 14 to undress for the purpose of conducting an examination. He explained to her that he wanted to do a breast exam as he had found breast cancer in the past on other patients. She agreed. Dr. Dobrowolski examined her breast on this occasion and then on every occasion thereafter with the exception of one time. On no occasion did she give Dr. Dobrowolski consent to photograph her.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. During the examination of these devices, 4 images of Patient 14 were found. In these images, she is topless with underwear on while Dr. Dobrowolski can be seen pulling aside her underwear.

#### **Patient 15**

Dr. Dobrowolski became Patient 15's psychiatrist in October or November of 2002. She began seeing him after he was suggested to her by a friend. She went to the accused as she was having a hard time dealing with the death of a relative.

Patient 15 saw the accused nearly every month until she stopped seeing him in October 2012.

Shortly after she starting seeing Dr. Dobrowolski, he began conducting physical examinations on her. Examinations involving her breasts and vagina continued throughout her time seeing Dr. Dobrowolski, Some of these examinations were while Dr. Dobrowolski was prohibited from doing so by virtue of a prohibition order from the College of Physicians and Surgeons. Patient 15 does not specifically recall the accused ever telling her about the prohibition. However, she did recall Dr. Dobrowolski advising that he got into trouble after someone complained about an incident in which he stayed in a hotel with another patient.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. During the examination of these devices, 245 images of Patient 15 were found. She was not aware that any of the photos were taken. The images range from her being topless with pants on to being entirely naked. In some images, she is naked and laying on a chair in Dr. Dobrowolski's office. In other images Dr. Dobrowolski can be seen performing breast exams and other exams. These images were taken over the course of the lengthy time span that Patient 15 was a patient of Dr. Dobrowolski.

### **Patient 16**

Dr. Dobrowolski became Patient 16's psychiatrist in March 2005. The relationship ended in August 2006. She turned to the accused when she was struggling with her weight and later to assist her with dealing with a failed relationship.

On one occasion, the accused performed a breast exam on Patient 16 which she described as being longer and more thorough than others that she has received from other physicians. She also recalled him examining her body for moles. Dr.

Dobrowolski did advise Patient 16 that he had been disciplined and was prohibited from conducting physical exams but downplayed the incident, citing a misunderstanding on the part of his female patient.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. During the examination of these devices, 22 images of Patient 16 were found. The images range from Patient 16 being topless to her wearing underwear to her wearing underwear and bra. Dr. Dobrowolski can be seen conducting what appears to be a breast exam. In two images he is standing behind Patient 16 and pressing on the nipple area of her breast. When some of the conduct captured on the images took place, Dr. Dobrowolski was prohibited from conducting any physical exams by virtue of a prohibition order from the College of Physicians and Surgeons. Patient 16 was not aware that she was being photographed and was unaware that the photos existed.

### **Patient 17**

Dr. Dobrowolski became Patient 17's psychiatrist in 1993. Patient 17 was in her early 20s at the time. She saw the accused for approximately 6 months. In February 2008, she returned to Dr. Dobrowolski. She saw the accused for a couple of months. In the sessions in 2008, Dr. Dobrowolski offered to conduct a physical examination, and as part of that he conducted breast examinations on Patient 17. Dr. Dobrowolski advised Patient 17 that he had been disciplined for having a relationship with a patient. She described Dr. Dobrowolski as downplaying the incident. He did not advise her that he was prohibited from conducting breast exams.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. During the examination of these devices, 49 images of Patient 17 were found. The images were of Patient 17 standing either topless with underwear on or entirely naked. Dr. Dobrowolski is

seen on the images performing breast examinations or touching other parts of her body. Patient 17 never consented to being photographed and would not have consented to the physical contact had she been aware that photographs were being taken.

### **Patient 18**

Dr. Dobrowolski became Patient 18's psychiatrist in 2001. She had been diagnosed with a physical condition which caused her great emotional stress. As her condition progressed, she would see Dr. Dobrowolski approximately once every 3 months. Patient 18 was aware that Dr. Dobrowolski had been in trouble as a result of a complaint from a female patient. She was aware that he was not allowed to perform physical examinations on her.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. During the examination of these devices, one photo of Patient 18 was found. This image showed Patient 18 topless, with her pants pulled down to mid-thigh, exposing her pubic region. She is standing in front of Dr. Dobrowolski who is seated in a chair. In this image the accused can be seen with his hands on her thighs with Patient 18 facing him with her hands on his shoulders for support.

Had Patient 18 been aware that she was being photographed, she would not have consented to the examination.

### **Patient 19**

Dr. Dobrowolski was Patient 19's psychiatrist from 1999 to 2012. Sometime in 2009, the accused asked to perform a physical examination on Patient 19. He performed 2 physical exams on her. She wore only a gown for the examinations.



Dr. Dobrowolski checked her entire body and performed breast examinations and one vaginal exam using his fingers. These examinations were not at the request of Patient 19 and are not recorded in any of Dr. Dobrowolski's clinical notes or related records.

Patient 19 signed an acknowledgement in January 2006 indicating that Dr. Dobrowolski was not allowed to perform examinations. She did not recall signing this document or being told why she was required to sign it.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. During the examination of these devices, 12 images of Patient 19 were found. These images depict Patient 19 naked while Dr. Dobrowolski performs a physical examination on her.

Had Patient 19 been aware that she was being photographed, she would not have consented to these examinations. Dr. Dobrowolski was prohibited from performing these examinations due to a prohibition by the College of Physicians and Surgeons.

### **Patient 20**

Patient 20 became a patient of Dr. Dobrowolski after being referred to him by her family doctor. At the time she was suffering from depression and was going through a difficult personal situation. She was in her mid-30s at the time.

The appointments took place at Dr. Dobrowolski's home office. She first saw him every week and then the appointments tapered to once a month and then to every 6 weeks.

Upon learning that a family member of Patient 20 had died of cancer due to a mole, he suggested to Patient 20 that he check her for moles. She agreed and Dr.

Dobrowolski photographed her moles. Patient 20 was naked. In addition, Dr. Dobrowolski took photos of her vaginal area as she was laying on a chair. He asked her to spread her legs and he would zoom in to the vaginal area. At Dr. Dobrowolski's direction, Patient 20 manipulated herself holding open her labia as he photographed it. These examinations occurred once a month at Dr. Dobrowolski's request. He explained that the frequency of the examinations was necessary to monitor the changes in her moles. There were no moles in her vagina or vaginal area. There were moles near her labia.

In 2001, Dr. Dobrowolski conducted the first breast exam on Patient 20. Others followed. Dr. Dobrowolski would complete the examinations from behind Patient 20. He conducted them in a gentle way and different other doctors did and they took longer.

Approximately four times a year, Dr. Dobrowolski would conduct an internal vaginal examination. He used lubricant and gloves for these examinations. Patient 20 did not feel that Dr. Dobrowolski was touching her in a sexual way. From 2006 to 2011, Dr. Dobrowolski routinely performed breast exams, internal examinations and mole examinations on Patient 20. None of these appear on the OHIP billings in relation to Patient 20.

### **Patient 21**

Patient 21 became a patient of Dr. Dobrowolski while she attended a local post-secondary institution which, at the time, employed Dr. Dobrowolski in student health services. Once she left the school, she lost contact with the accused.

In 1994 Patient 21 became a patient of the accused again and remained so until 2010. Patient 21 saw Dr. Dobrowolski whenever environmental stressors aggravated her clinical depression. She also sought Dr. Dobrowolski's assistance when she was in the midst of a marital breakup.

At the end of a session between December of 2005 and November of 2007, Dr. Dobrowolski spoke to Patient 21 about breast cancer and self-examination. He performed a breast examination on Patient 21. The examination was very quick. This was completed in contravention of the order prohibiting him from conducting physical examinations.

Patient 21 recalls that Dr. Dobrowolski had a document posted in his office near the door. He advised her that he got into trouble with the College as a result of an affair that he had with a patient. Dr. Dobrowolski disclosed this to her on an occasion prior to the breast exam and told her that it was his obligation to advise patients of the circumstances of his discipline by the College.

Patient 21 observed a camera in Dr. Dobrowolski's office located on top of his computer. She questioned whether she was being recorded. Dr. Dobrowolski advised that it was not recorded and covered it with a piece of Kleenex.

Dr. Dobrowolski's electronic storage devices that were seized as part of the investigation of this matter were searched. During the examination of these devices, no images of Patient 21 were found.

#### **Search of Dr. Dobrowolski's Computers and Electronic Storage Devices**

As indicated, Dr. Dobrowolski's electronic storage devices were seized and analyzed. The images found therein were not organized in any way to suggest they were part of some record keeping scheme and therefore had no legitimate purpose related to his practice.

Total number of images located on electronic storage device is 9,994. Generally, the images involve nudity of women (no men) as they are preparing for an examination or undergoing an examination by Dr. Dobrowolski.

**The Documentation from the Ministry of Health and Long Term Care –  
Personal Health Information Security and Disclosure (The Ministry of  
Health)**

In the course of the police investigation, Ministry of Health (MOH) information in relation to each victim was obtained and reviewed. The records are extensive and detailed. The MOH billing records, in relation to Dr. Dobrowolski's dealing with the victims, record the psychiatric treatment received. Absent from the MOH billing records is any reference to the physical or gynecological examinations performed. Also absent from the MOH billing records is reference to any dermatological examinations. The MOH billing scheme allows for the billing of physical, gynecological and dermatological examinations.

**Dr. Dobrowolski's Clinical Notes**

In the course of the police investigation, the clinical notes created by Dr. Dobrowolski in relation to each victim's sessions were seized. Some notes were incomplete for sessions that had taken place. The clinical notes that did exist in relation to the victims were reviewed. Absent from the clinical notes is any reference to the physical, dermatological, or gynecological examinations performed.

**Summary**

The physical, gynecological and dermatological examinations performed and which form the basis for the offences had no legitimate connection to any psychiatric care being provided by Dr. Dobrowolski to the victims in this matter. There was no legitimate medical purpose for the physical, gynecological, and dermatological examinations performed. In relation to each of the victims of

sexual assault, Dr. Dobrowolski acknowledges that he unlawfully violated their sexual integrity.

It is acknowledged by the Crown that Dr. Dobrowolski's admission of these facts and ultimately his plea of guilty is a significant mitigating factor to sentencing. This is so, especially considered in the context of the general reluctance of the victims to engage in the court process due to the potential personal detrimental impact inherent in that process.

## **FINDINGS**

On pleading no contest to the allegations of professional misconduct, there are certain legal consequences that follow under the Rules of the Discipline Committee. Rule 3.02 of the Discipline Committee's Rules of Procedure provides:

3.02(1) Where a member enters a plea of no contest to an allegation, the member consents to the following:

- a) that the Discipline Committee can accept as correct the facts alleged against the member on that allegation for the purposes of the proceeding only;
- b) that the Discipline Committee can accept that those facts constitute professional misconduct or incompetence or both for the purposes of the proceeding only; and
- c) that the Discipline Committee can dispose of the issue of what finding ought to be made without hearing evidence.

The Committee accepted as correct all of the facts set out in the Statement of Uncontested Facts and found that these facts constituted professional misconduct, in that Dr. Dobrowolski:

- engaged in the sexual abuse of patients;

- engaged in conduct or 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;
- failed to maintain the standard of practice of the profession; and
- has been found guilty of offences relevant to his suitability to practise.

## **PENALTY AND REASONS FOR PENALTY**

The following facts were set out in an Agreed Statement of Facts filed in the penalty phase of the hearing:

1. Following his guilty plea in the criminal proceedings against him, Dr. Stanley Thomas Dobrowolski (“Dr. Dobrowolski”) received a sentence of four years in a federal penitentiary on May 15, 2014. He remains incarcerated at the time of the present hearing. He was also required to provide a sample of his DNA for the DNA Data Bank maintained in respect of sexual offenders, and must register with the Sex Offender Registry. He was banned from communicating with his victims while he serves his sentence.

Counsel for the College and counsel for the member made a joint submission as to an appropriate penalty and costs order.

The Committee was provided with a Brief of Authorities and reviewed prior decisions of the Discipline Committee, including cases involving sexual abuse of a patient. In addition, the Committee reviewed previous decisions of the Discipline Committee involving Dr. Dobrowolski.

The Committee understands that, as a matter of law, a joint submission should be accepted unless the joint submission is contrary to the public interest and that accepting the joint submission would bring the administration of justice into disrepute.

The Committee considered the underlying principles which govern the determination of an appropriate penalty. Paramount amongst these principles is the protection of the public. Others include specific deterrence of the member and general deterrence of the profession as a whole, and the need to maintain public confidence in the profession and its ability to govern itself in the public interest. In cases where rehabilitation of the member would be appropriate, such a provision may form part of the order.

It is this Committee's task to weigh these guiding principles and to take into account the specific facts and circumstances of the case in arriving at its decision regarding penalty and costs. Aggravating and mitigating factors, if any, will also be considered. In addition, proportionality is an important element to be considered by the Committee.

The joint submission on penalty and costs requested an order that included:

- i) immediate revocation of Dr. Dobrowolski's certificate of registration;
- ii) a reprimand;
- iii) reimbursement of the College for funding provided to those patients in respect of whom this panel has found Dr. Dobrowolski to have engaged in sexual abuse under the program required under section 85.7 of the code, including posting an irrevocable letter of credit or other security acceptable to the College in the amount of \$449,680.00 within ninety (90) days of this order; and
- iv) reimbursement of costs to the College for a one-day hearing in the amount of \$4,460.00.

It is the Committee's opinion that the joint submission on penalty and costs is consistent with the overarching purpose of the legislation, which is to serve and protect the public interest. It is also consistent with the ultimate purpose of the provisions of the Code with respect to sexual abuse of patients by members, which is to encourage the reporting of such abuse; to provide funding for therapy and counselling for patients who have been sexually abused by members; and, ultimately, to eradicate the sexual abuse of patients by

members of the profession. The penalty is also consistent with the accepted guiding principles as outlined above.

The Committee found Dr. Dobrowolski's behaviour, described in the Statement of Uncontested Facts, to be repugnant. The Committee found that this was one of the worst cases of egregious misconduct that has ever come before it.

Dr. Dobrowolski's misconduct relates to a total of 31 female patients, 22 of whom were the subject of his criminal convictions, including patient A, and nine who were not the subject of the criminal finding. His misconduct occurred over a 13 year period, demonstrating a persistent pattern of intolerable and inappropriate behaviour.

In 2014, the Ontario Court of Justice found Dr. Dobrowolski guilty of:

- sexual assault in relation to sixteen (16) persons;
- breaching a court order by conducting physical examinations on twelve (12) persons; and
- voyeurism through surreptitiously making visual recordings of nine (9) persons.

The Committee found Dr. Dobrowolski victimized and sexually abused 28 female patients.

Dr. Dobrowolski violated a court order by performing what were purportedly breast, vaginal, and dermatological examinations on numerous female patients. Dr. Dobrowolski would request female patients remove all or part of their clothing under the guise of examining the skin for moles or possible skin cancers. His misconduct involved, but was not limited to, fondling the breasts of female patients in a sexual manner while he purported to perform breast examinations. Dr. Dobrowolski also intentionally inserted one or more of his fingers into certain patients' vaginas on several occasions. These examinations had no legitimate connection to any medical or psychiatric care being provided to his patients, and were, in fact, for his own sexual purposes.



Female patients who trusted Dr. Dobrowolski to provide psychiatric help during difficult times in their lives were repeatedly violated when Dr. Dobrowolski used hidden cameras to photograph them – with neither their knowledge nor consent – in a naked or semi-naked state. Dr. Dobrowolski also touched and fondled these female patients in an inappropriate, sexual manner while secretly recording these touchings as well. Thousands of such photographs and video recordings were recovered from Dr. Dobrowolski's various storage devices.

Dr. Dobrowolski engaged repeatedly in voyeurism and in predatory behaviour towards his female patients. The public must be reassured that reprehensible behaviour, boundary violations, and the sexual abuse of patients will not be tolerated.

These actions, by which Dr. Dobrowolski selfishly sought sexual gratification, caused deep anguish and lasting harm to his patients and their loved ones. The long-lasting impact and suffering that resulted from Dr. Dobrowolski's misconduct was eloquently described in two victim impact statements, one of which was made by the child of one of the patients sexually abused by Dr. Dobrowolski.

Patient A's victim impact statement provided the Committee with an emotionally moving account and insight as to the mental anguish experienced by a patient who has been sexually abused by her physician over a period of five years. Patient A described how she was manipulated by Dr. Dobrowolski, how he breached her trust, and how he worked hard to foster her dependency on him. She described how Dr. Dobrowolski's actions made her feel guilty, nervous, ashamed, and worthless. As a result of Dr. Dobrowolski's long-term abuse, Patient A lost her job. She told the Committee that maintaining employment has been difficult as a result of the continuing emotional and mental stress caused by Dr. Dobrowolski's abuse. She indicated that she still has periods of anxiety, depression, and self-blame. The experience has left her with a decreased sense of self-esteem, shattered her sense of self, and changed her relationship with her husband and children. As a result, she has lost friends and community. She has difficulty trusting men and the world no longer feels like a safe place to her.

Patient A's child also provided the Committee with tremendous insight into how family members of sexual abuse victims can also become victimized.

Patient A's child described an incident when, as young children, Patient A's children attended Dr. Dobrowolski's office, where Dr. Dobrowolski told them that their father no longer loved their mother. Patient A's child recounted knowing that this was "downright blasphemy."

Patient A's child stated that Dr. Dobrowolski manipulated their mother to the point where Patient A believed that her husband and her whole family were the enemy. Patient A's child described the arguments that occurred between their parents because Dr. Dobrowolski had convinced their mother that their father was cheating on her. Patient A's child outlined in chilling detail how they "bawled their eyes out" and would scream to "pierce the air" in hopes of somehow stopping the fighting between their parents. As a result of this trauma, Patient A's children were unable to sleep and were unable to focus on their school lessons in the days following those arguments.

Patient A's child described the chaos all around her at home, including witnessing her mother overdosing. At the time, at their young age, Patient A's children did not understand or appreciate the role that Dr. Dobrowolski played in the chaos in their lives. This understanding came much later.

Patient A's child's anger stems from the fact that Dr. Dobrowolski dared to destroy Patient A as a mother and wife, and that he made every effort to separate her mother from her family. Patient A eventually did move out of the family home and lived in various shelters because her former residence reminded her too much of the past. Patient A's child recalled Patient A telling the children that she could no longer live with them and that she wished she could have been a better mother. Ultimately, Patient A's child asked, "What did we do to deserve this?" The answer, of course, was "absolutely nothing."

The impact statements of Patient A and her child describe, in graphic detail, the pain and suffering that Dr. Dobrowolski has inflicted on both his patients and their family members.

**Therapy and Counselling for Patients Sexually Abused by Dr. Dobrowolski**

The Committee ordered that Dr. Dobrowolski reimburse the College for funding of therapy and counselling provided to any of the patients sexually abused by Dr. Dobrowolski and to post an irrevocable letter of credit or other security acceptable to the College in the amount of \$449,680.00 to guarantee that payment, under s. 85.7 of the Code.

**Mitigating and Aggravating Factors**

The Committee considered both mitigating and aggravating factors in this case.

The only mitigating factor in this case was Dr. Dobrowolski's plea of no contest to the allegations. As a result, a potentially lengthy and costly contested hearing was avoided and patients were spared having to testify.

However, there were a number of aggravating factors as outlined below.

Firstly, Dr. Dobrowolski breached the sacred trust that is necessary for an effective and therapeutic doctor-patient relationship. As a psychiatrist, Dr. Dobrowolski was in a position of power over extremely vulnerable patients and would have been aware of both the power imbalance inherent in the doctor-patient relationship and of the risk of harm to his patients likely to arise on account of his actions and his breach of their trust. Despite that awareness, Dr. Dobrowolski exploited, manipulated, and deceived his patients for his own personal sexual gratification. The Committee found particularly egregious that one of the patients he sexually abused was only sixteen years old when the abuse began.

Secondly, Dr. Dobrowolski's conduct involved intentionally and repeatedly breaching not only a court order but also College restrictions placed on his certificate of registration that were in place to protect the public. The Committee concluded that Dr. Dobrowolski did not accept that boundaries in medical practice applied to him. He manipulated his patients so that he could deceive his regulator and evade the controls that were in place to protect the very individuals that he exploited and abused. Dr. Dobrowolski demonstrated,

through his actions, not only a blatant disregard for the authority of the College but also a blatant disregard for the authority of the court.

Finally, the Committee considered Dr. Dobrowolski's prior discipline history as a significant aggravating factor. Dr. Dobrowolski was found by previous Discipline Committee panels of this College to have committed professional misconduct that occurred between 1986 and 1992. These findings were made in April 1995, September 1995, March 2000, and July 2004, respectively. While there was never previously a finding of patient sexual abuse, Dr. Dobrowolski was found to have engaged in disgraceful, dishonourable, or unprofessional conduct and failure to maintain the standard of practice of the profession. His misconduct had involved boundary violations in therapy, such as inappropriately touching patients, making inappropriate comments, seeing patients socially during therapy, and conducting inappropriate physical exams, as well as having inappropriate relationships with two patients after the doctor-patient relationship had ended, including a sexual relationship in one case.

Given the sexual abuse findings in this case, and the previous Discipline Committee findings for other boundary violations, which included performing inappropriate physical examinations, it is the opinion of this Committee that Dr. Dobrowolski is ungovernable.

Dr. Dobrowolski's ungovernability is also demonstrated by the fact that Dr. Dobrowolski had been under a court order dated December 20, 2005 not to conduct any form of physical examination on any of his patients. Despite that order, Dr. Dobrowolski repeatedly conducted physical examinations on his patients between December 20, 2005 and October 11, 2012.

The Committee also considered whether there was masturbation of a patient by their physician. It is the opinion of the Committee that there was insufficient detail, descriptors or particulars in the Statement of Uncontested Facts for the Committee to make a finding as to whether masturbation of a patient had occurred or not.

However, it is the opinion of this Committee that placing a finger or fingers in the vagina of his patients when there was no clinical indication to do so constitutes the digital sexual

violation of a patient. This finding, by itself, warrants revocation of Dr. Dobrowolski's certificate of registration.

As a result of his misconduct, Dr. Dobrowolski has brought shame to not only himself but also to the profession as a whole. The Committee wishes to send a message in the strongest of terms to both the public and to the medical profession that sexual exploitation and abuse of patients will never be tolerated.

It is therefore the Committee's opinion that the only penalty sufficient to address the gravity of Dr. Dobrowolski's professional misconduct, while simultaneously protecting the public, is revocation of Dr. Dobrowolski's certificate of registration. He has shown himself to be unworthy of the privilege of practising medicine.

Given the evidence before it, including the repetitive nature of the misconduct involving numerous female patients that occurred over a period of 25 years, the Committee found that Dr. Dobrowolski is a poor candidate for rehabilitation. There is no assurance that he would not reoffend if he did not have his certificate of registration revoked.

The awarding of costs for a single day at the tariff rate was requested by both parties and, in this case, the Committee found that to be appropriate. The Committee fully recognizes that the tariff rate only partially reimburses the College for the actual costs incurred in conducting the hearing.

A public reprimand is not only mandatory under section 51(5) of the Code in cases where sexual abuse of a patient has been proven, but it also serves as an appropriate way to express the profession's abhorrence of Dr. Dobrowolski's professional misconduct. In addition, the reprimand will convey to Dr. Dobrowolski, the public, and his patients whom he has harmed, that this Committee abhors his behaviour.

**ORDER**

Therefore, having stated its findings of professional misconduct in paragraph 1 of its written order of November 30, 2015, the Committee ordered and directed on the matter of penalty and costs that:

1. the Registrar revoke Dr. Dobrowolski's certificate of registration, effective immediately;
2. Dr. Dobrowolski appear before the panel to be reprimanded;
3. Dr. Dobrowolski reimburse the College for funding provided to those patients in respect of whom this panel has found Dr. Dobrowolski to have engaged in sexual abuse, under the program required under section 85.7 of the Code;
4. Dr. Dobrowolski post an irrevocable letter of credit or other security acceptable to the College, to guarantee the payment of any amounts he may be required to reimburse under paragraph 4 of this Order, such security to be posted within ninety (90) days of the date of this Order, in the amount of \$449,680.00; and
5. Dr. Dobrowolski pay costs to the College in the amount of \$4,460.00 within thirty (30) days of the date of this Order.

Dated this 20<sup>th</sup> day of January, 2016.