

## SUMMARY

### DR. REGINALD MIECYSLAW GORCZYNSKI (CPSO# 61102)

#### 1. Disposition

On August 17, 2016, the Inquiries, Complaints and Reports Committee (“the Committee”) ordered general practitioner Dr. Gorczynski to appear before a panel of the Committee to be cautioned with respect to the treatment of a family member in contravention of the College policy #7-06 on *Treating Self and Family Members* (which has recently been replaced by the revised policy #2-16 on *Physician Treatment of Self, Family Members, or Others Close to Them*.) The Committee also accepted an undertaking from Dr. Gorczynski, with respect to prescribing.

#### 2. Introduction

The College received concerns from a pharmacist about Dr. Gorczynski’s prescribing practices and subsequently, the Committee approved the Registrar’s appointment of investigators to conduct a broad review of Dr. Gorczynski’s practice.

#### 3. Committee Process

As part of this investigation, the Registrar appointed a Medical Inspector (“MI”) to review a number of Dr. Gorczynski’s patient charts, interview Dr. Gorczynski, and submit a written report.

A General Panel of the Committee, consisting of public and physician members, met to review the relevant records and documents related to the investigation. The Committee always has before it applicable legislation and regulations, along with policies that the College has developed, which reflect the College’s professional expectations for physicians practising in Ontario. Current versions of these documents are available on the College’s website at [www.cpso.on.ca](http://www.cpso.on.ca), under the heading “Policies & Publications.”

#### 4. Committee’s Analysis

The MI concluded that in 22 of the 25 patient charts reviewed, Dr. Gorczynski failed to meet the standard of practice, with respect to his management of chronic pain patients, opioid prescribing

and documentation and demonstrated a lack of knowledge or skill. The MI also found that in the case of one patient, Dr. Gorczynski's treatment fell below the expected standard in that he contravened the College's policy by treating a family member. The MI stated that Dr. Gorczynski displayed a lack of judgment in treating his family member. The MI was of the opinion that in the majority of cases reviewed, Dr. Gorczynski's practice exposed the patients to a risk of harm.

In responding to the MI's report, Dr. Gorczynski acknowledged that his prescribing skills, especially with respect to fentanyl, were lacking and raised the very real spectre of abuse, diversion and risk of harm. He also acknowledged that he was and is aware of the College's policy titled *Treating Self and Family Members* and that he knew that he should not treat his family, but felt compelled to do so in circumstances in which he perceived that the health care system was failing his family member. He advised he had transferred his family member's care to another physician, that he was no longer treating his family member, and that he did not plan to do so in the future.

Based on the above, the Committee had concerns about Dr. Gorczynski's prescribing practices, as well as his actions in treating a family member in contravention of the College's policy on that point.

Dr. Gorczynski agreed to restrict his practice pursuant to an undertaking (a voluntary, binding promise which the physician makes to the College), under which he restricted his prescribing privileges and agreed not to issue new prescriptions or renew existing prescriptions for any narcotic drugs, narcotic preparations, controlled drugs, benzodiazepines and other targeted substances, and all other monitored drugs. The undertaking also requires Dr. Gorczynski to post signs in his practice locations relating to the above restriction. As the Committee was satisfied that this undertaking would address the concerns identified in the College's investigation about the opioid prescribing aspect of Dr. Gorczynski's practice, the Committee accepted the undertaking as an appropriate resolution of that aspect of this matter.

In terms of Dr. Gorczynski's actions in treating his family member, the Committee concluded that a caution (as described above) would be appropriate.