

**Indexed as: Amer, E.E. (Re)**

**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. EMAD EL-DIN AMER**

**PANEL MEMBERS:**

**DR. E. STANTON (CHAIR)**  
**G. DEVLIN**  
**DR. B. LENT**  
**DR. E. ATTIA (Ph.D)**  
**DR. J. WATTS**

**Hearing Date:** October 26, 2011  
**Decision Date:** October 26, 2011  
**Release of Written Reasons:** November 4, 2011

## 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 October 26, 2011. 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.

### THE ALLEGATIONS

The Notice of Hearing alleged that Dr. Emad El-Din Amer committed an act of professional misconduct:

1. under paragraph 1(1)33 of Ontario Regulation 856/93 made under the *Medicine Act, 1991* (“O. Reg. 856/93”), in that he has engaged in 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; and
2. under paragraph 1(1)34 of O. Reg. 856/93 in that he engaged in conduct unbecoming a physician.

### RESPONSE TO THE ALLEGATIONS

Dr. Amer accepted the first allegation in the Notice of Hearing that he has engaged in 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. Counsel for the College withdrew the second allegation in the Notice of Hearing.

**FACTS AND EVIDENCE**

The following Agreed Statement of Facts was filed as an exhibit and presented to the Committee:

**Part I – Facts**

1. Dr. Emad El-Din Amer is a respirologist who received his certificate of registration authorizing independent practice in 1984.
2. At the time of the events at issue, Dr. Amer worked at the Credit Valley Hospital, as well as in an office-based practice.
3. On April 17, 2008, Dr. Amer became involved in a confrontation with members of the Credit Valley Hospital's security staff when he was unable to access his belongings from the doctors' lounge after the completion of his hospital rounds.
4. Dr. Amer became upset further to a telephone conversation he had with a security officer. When he attempted to open the doctor's lounge, his security card did not work. He called the security office to come and open the door for him. Dr. Amer states that he found the security officer's response to his request to get in the doctor's lounge to be slow and unhelpful and that he was in a rush as he had patients waiting for him in his office.
5. Dr. Amer then attended at the security office. He banged forcefully at the security office door, breaking the security office's door frame.
6. When the door was opened, Dr. Amer entered the office. A video recording attached as Schedule 1 [to the Agreed Statement of Facts] captures the incident between Dr. Amer and security staff. Staff report that they felt intimidated by Dr. Amer's inappropriate words and actions while in the security office.
7. Dr. Amer's privileges at the Credit Valley Hospital were suspended as a result of the incident.

**Part II – Admission**

8. Dr. Amer admits the facts in paragraph 1 to 7 above and admits that through his conduct, he engaged in 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, contrary to paragraph 1(1)33 of Ontario Regulation 856/93 made under the *Medicine Act*, 1991.

**FINDING**

The Committee accepted as true all of the facts set out in the Agreed Statement of Facts. Having regard to these facts, the Committee accepted Dr. Amer's admission and found that he committed an act of professional misconduct, in that he has engaged in 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

**PENALTY AND REASONS FOR PENALTY**

Counsel for the College and counsel for the member made a joint submission as to an appropriate penalty and costs order, and each made submissions in support of it.

In evaluating this proposed penalty, the Committee recognized that a joint submission should be accepted unless to do so would be contrary to the public interest and would bring the administration of justice into disrepute. In addition, the Committee accepted that the general principles to be followed in determining an appropriate penalty include specific and general deterrence, protection of the public, and the need to assure the public that the profession recognizes and accepts its responsibility with respect to self-regulation.

The Committee reviewed the Agreed Statement of Facts, as well as the mitigating factors described by Counsel for the College. The Committee noted that Dr. Amer admitted the facts in the agreed statement, thus obviating the need for a lengthy hearing. Dr. Amer has

had no previous appearances before the Discipline Committee. Moreover, the incident did not occur in the context of direct patient care.

The Committee found the proposed penalty to be consistent with those imposed in other cases presented by counsel involving similar circumstances. The proposed penalty expressed the Committee's disapproval of Dr. Amer's behavior. The penalty also reinforced the profession's expectations that all physicians interact with colleagues and staff in a respectful and civil fashion so that others do not feel threatened or intimidated. Recognizing the significant impact on physicians of a public reprimand, the Committee concluded that a public reprimand would meet the goals of specific and general deterrence, and would demonstrate to the public the profession's commitment to self-regulation.

The Committee appreciates that the agreed statement of facts and joint submission on penalty minimize the time and resources required to resolve this matter, and so agrees with the recommendation made with respect to costs.

For these reasons, the Committee accepted the proposed disposition on penalty and costs as fair and reasonable.

## **ORDER**

Therefore, the Committee ordered and directed that:

1. Dr. Amer appear before the Panel to be reprimanded.
2. Dr. Amer pay to the College costs in the amount of \$3,650.00, within 60 days of the date of this Order; and
3. The results of this proceeding be included on the register.

At the conclusion of the hearing, Dr. Amer waived his right to an appeal under subsection 70(1) of the Code and the Committee administered the public reprimand.