

**SUMMARY of the Decision of the Inquiries, Complaints and Reports Committee
(the Committee)**
(Information is available about the complaints process [here](#) and about the Committee [here](#))

**Dr. Kamini Manokaran
(CPSO #87787)
(the Respondent)**

INTRODUCTION

The Respondent managed the Complainant's severe clinical condition for several years. Due to disease progression, the Respondent prescribed treatment with a biologic agent (that is, an agent made from a living organism or its products that is used to treat a number of conditions and diseases). The agent in question had many serious side-effects and required monitoring for various things, including the risk of malignancy and infection due to immunosuppression. Two years after starting the biologic agent, the Complainant was diagnosed with cancer.

The Complainant contacted the College of Physicians and Surgeons of Ontario (the College) to express concerns about the Respondent's care and conduct.

COMPLAINANT'S CONCERNS

The Complainant is concerned that the Respondent failed to provide proper medical care and behaved in an unprofessional manner while acting as the Complainant's rheumatologist from October 2015 to the present. Specifically, the Respondent:

- **was verbally abusive to the Complainant by telling them that they need to learn to speak better English, that they are the Respondent's worst patient and that they do not take their medication as ordered;**
- **failed to inform the Complainant of the risks and benefits of the medications prescribed, especially the biologic agent, and did not listen to the Complainant's concerns and description of side-effects; and,**
- **prescribed the biologic agent without proper follow-up and diagnostic evaluations for side-effects as suggested on the drug monogram.**

COMMITTEE'S DECISION

An Internal Medicine Panel of the Committee considered this matter at its meeting of March 8, 2021. The Committee required the Respondent to appear before the Committee to be cautioned with respect to the ethics of altering the medical record and the manner in which she made such alterations.

The Committee also accepted an undertaking from the Respondent.

COMMITTEE'S ANALYSIS

The Respondent asserts that she specifically explained the risks and side-effects of the biologic agent to the Complainant and their family member (present at the time), including the increased risk of developing cancer. The Complainant and their family member deny these discussions took place.

The Respondent made changes to the medical record in this case three years after the original entries she had made, and she acknowledged that she did not clearly mark some of the revisions and changes as such. The changes she made included accounts of her discussions with the Complainant and their family member about the risks and benefits of the biologic agent, including cancer.

The Respondent said she recognized she should not have revised the medical record as she did and that consent discussions with the Complainant should have been documented contemporaneously (that is, at the time). The Respondent described that in the future she will be sure to clearly document such discussions and will ensure any amendments are clear on the face of the records.

The Committee cited the College policies, *Medical Records Documentation and Consent to Treatment*, and the obligations for physicians to clearly identify any revisions or additions to the record as such.

The Committee noted it was very difficult to assess this case based on the medical record (specifically around the issue of discussions of risks and benefits of the proposed biologic treatments) because the nature of the Respondent's additions and revisions meant the record could not be regarded as fully trustworthy.

The Committee determined that it was appropriate to caution the Respondent as set out above, and to accept an undertaking from the Respondent, which would include professional education in medical ethics and professionalism and medical record-keeping.

The Committee took no further action on concerns related to the Respondent's professional behaviour and follow-up and diagnostic evaluations.