

**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. Lavan Chandran (CPSO# 85086)

INTRODUCTION

The College received information raising concerns about Dr. Chandran's inappropriate prescribing to a friend/person close to him (X), including prescribing of controlled substances to X in the absence of a patient-physician relationship. Subsequently, the Committee approved the Registrar's appointment of investigators to conduct a broad review of Dr. Chandran's practice.

COMMITTEE'S DECISION

A Mental Health Panel of the Committee considered this matter at its meeting of June 11, 2019. The Committee required Dr. Chandran to attend at the College to be cautioned in person with respect to exhibiting poor judgment in agreeing to create a segregated and incomplete record for X, and in prescribing controlled substances for X on a recurrent basis without actually being the primary care physician or providing comprehensive care; on his failure to acknowledge the risks of substances abuse and his failure to attend to red flags for abuse; and on his failure to adhere to the College's *Prescribing Drugs* policy and the policy on *Physician Treatment of Self, Family Members, or Others Close to Them*.

COMMITTEE'S ANALYSIS

As a result of its investigation, the Committee had concerns about Dr. Chandran's practice, including his failure to maintain appropriate boundaries by inappropriately prescribing to those close to him. The Committee noted that the Respondent expressed his intention to take necessary steps to improve his practice, pursuant to an undertaking (a binding promise between the College and a physician which is posted on the public register and remains there while it is in effect, in which the physician agrees to do (or not do) certain things in order to address the Committee's concerns and to protect the public interest). The College and the Respondent agreed upon an undertaking that addressed the identified concerns, dated June 24, 2019.

In addition to accepting the Respondent's undertaking, the Committee determined that a caution, as set out above, was warranted.

The Committee noted that it was inappropriate for Dr. Chandran to agree to provide primary care to X. Dr. Chandran acknowledges that at X's request, he kept records pertaining to X separate and off the electronic medical record (EMR). The Committee noted that Dr. Chandran provided prescriptions for controlled substances to X and relied on a psychiatric assessment from a specialist as the main justification. The Committee found no indication that he sought

collateral or other sources of information, or appropriately considered concerns from X's family/friends.

The confirmed prescriptions to X were more than isolated occurrences and included refills. The Committee also noted that although the available information confirmed that Dr. Chandran had written certain prescriptions found in the investigative record, he indicated that many were not his. The Committee was concerned that not only did the objective evidence support that Dr. Chandran provided prescriptions for controlled substances to X, but that there was also indication that he may not have been diligent in guarding his prescription pad.

Overall, the Committee was of the view that Dr. Chandran showed poor judgment in agreeing to a segregated and ultimately incomplete record for X and in prescribing controlled substances on a recurrent basis when he was not X's primary care physician. In doing so, he failed to acknowledge both the risks of abuse of those substances and to attend to red flags for abuse. He also failed to reach out to X's family physician to gain a better understanding of the treatment rendered up to that point, and did not notify the family physician about the prescriptions he had been providing to X. The Committee was of the view that Dr. Chandran failed X by not treating X comprehensively, and also failed at the level of professionalism by not adhering to the policies regarding controlled substances and treating friends/family/colleagues in non-emergent circumstances.

The Committee noted that in May 2017, a previous panel of the Committee required Dr. Chandran to complete a remedial agreement on the prescribing of narcotics and controlled drugs in his family medicine practice, and on his approach to pain management and prescribing of opioids for chronic non-cancer pain. The Committee in this matter was concerned that this case suggests Dr. Chandran has not sufficiently learned from this previous education, and that he therefore requires an in-person discussion with this Committee regarding the prescribing and boundary concerns noted in his practice, in addition to the undertaking outline above.