

UNDERTAKING, ACKNOWLEDGEMENT AND CONSENT
("Undertaking")

of

DR. SUKHDEV SINGH KOONER
("Dr. Kooner")

to

THE COLLEGE OF PHYSICIANS AND SURGEONS OF ONTARIO
(the "College")

A. PREAMBLE

(1) I, **Dr. Kooner**, certificate of registration number 43934, am a member of the College. The College has received information regarding my standard of practice.

(2) I, **Dr. Kooner**, acknowledge that the Inquiries, Complaints and Reports Committee (the "ICRC") referred allegations of professional misconduct to the Discipline Committee in a Notice of Hearing dated December 4, 2013 and November 7, 2014 (the "Notice of Hearing").

(3) I, **Dr. Kooner**, acknowledge that the ICRC suspended my certificate of registration by Order dated December 2, 2014, under section 37 of the *Health Professions Procedural Code* (the "Code"). I have commenced an Application for Judicial Review of the ICRC's Order in the Divisional Court by way of Notice of Application dated March 27, 2015 (Court File No 08/15).

(4) I, **Dr. Kooner**, acknowledge that I am currently the subject of an investigation bearing File No 7214567 (the "Investigation") by the College regarding whether I have maintained the standard of practice of the profession and am incompetent, and whether I have breached the terms, conditions and limitations on my certificate of registration (the "Investigation").

(5) I, **Dr. Kooner**, acknowledge and agree that, in exchange for me providing an original copy of this Undertaking as signed by me, and my consent to the dismissal of my Application for Judicial Review, the College has agreed to withdraw the Notice of Hearing and take no further action on the Investigation.

B. UNDERTAKING, ACKNOWLEDGEMENT AND CONSENT

(6) I, **Dr. Kooner**, hereby resign from the College effective immediately (the "Effective Date")

(7) I, **Dr. Kooner**, hereby undertake not to apply or re-apply for registration to practice medicine in Ontario or any other Canadian jurisdiction after the Effective Date.

(8) I, **Dr. Kooner**, agree that in the event that the College should become aware that I am in breach of this Undertaking including, but not limited to, becoming aware that I have either

applied, re-applied or attempted to apply or re-apply for registration as a physician or for a certificate of registration, or equivalent, to practise medicine, the College shall, in its sole discretion, have the right to proceed with a disciplinary proceeding on the basis of a breach of this undertaking, shall have the right to proceed with the specified allegations set out in the Notice of Hearing dated December 4, 2013 and November 7, 2014, and shall have the right to proceed with the Investigation it terminated as a result of this Undertaking and/or to proceed with a referral of specified allegations to the Discipline Committee.

(9) I, **Dr. Kooner**, hereby agree to bear the risk of any prejudice that the passage of time might cause to my ability to make full answer and defence, and waive the right to seek any remedy on the basis of the passage of time, should the College proceed with any allegations that may arise as a result of a breach of this Undertaking and/or pursuant to paragraph (8) above.

(10) I, **Dr. Kooner**, undertake to the College to abide by the terms of the College's Policy on Practice Management Considerations for Physicians Who Cease to Practise, Take an Extended Leave of Absence or Close Their Practice Due to Relocation, a copy of which is attached hereto as Appendix A.

(11) I, **Dr. Kooner**, undertake to the College that upon signing this Undertaking, I shall forward a request to the General Manager of the Ontario Health Insurance Plan ("OHIP") that my billing number be deactivated for services rendered after I sign this undertaking and provide a copy of the request to the College.

(12) I, **Dr. Kooner**, acknowledge that I shall be solely responsible for payment of all fees, costs, charges, expenses, etc., if any, arising from the implementation of any of the terms of this Undertaking.

(13) I, **Dr. Kooner**, acknowledge and confirm that I have read and understand the terms and conditions provided in this Undertaking and that I have obtained independent legal counsel in reviewing and executing this Undertaking, or have waived my right to do so.

(14) I, **Dr. Kooner**, give my irrevocable consent to the College to make appropriate enquiries of OHIP and/or any person or institution who may have relevant information, in order for the College to monitor my compliance with the terms of this Undertaking. I confirm I have executed the form attached at Appendix "B" and provided a copy to the College.

(15) I, **Dr. Kooner**, consent to this undertaking being entered on the public register as information that is available to the public.