

**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. Sharadindu Rai (CPSO# 84749)
(the Respondent)**

INTRODUCTION

The Complainant had concerns about the care that the Respondent provided to a family member, the Patient, during a walk-in appointment, as well as the Respondent's conduct on this occasion.

COMPLAINANT'S CONCERNS

The Complainant is concerned that, during a visit, the Respondent failed to provide appropriate care to the Patient, and conducted himself in an unprofessional and uncaring manner. Specifically:

- **when the Patient was unable to tolerate a tongue depressor after two attempts, the Respondent became impatient, threw the tongue depressor and his gloves into the garbage, stated he "did not have time to waste" with the Patient, and abruptly left the room**
- **the Respondent failed to complete an assessment of the Patient's symptoms of fever, chills, no appetite, weakness, and vomiting, and failed to provide or suggest any treatment for these symptoms.**

COMMITTEE'S DECISION

A Family Practice Panel of the Committee considered this matter at its meeting of July 11, 2019. The Committee required the Respondent to complete a specified continuing education and remediation program (SCERP), which includes completion of a communications course as well as clinical supervision of the Respondent's practice. The Committee also required the Respondent to attend at the College to be cautioned in person with respect to his communications and how his communication impacted on his failure to assess and treat his patient.

COMMITTEE'S ANALYSIS

The Committee was concerned by the Respondent's behaviour towards the Patient, and noted that the Patient, who required medical care and did not speak English well, ended up leaving the Respondent's clinic without a proper examination and without treatment for his concerning symptoms. Furthermore, the Respondent's issues with communications placed the Patient at

risk, as he did not take the time to properly examine the Patient's throat, and simply referred him to the emergency room.

The Committee had significant concerns regarding the Respondent's communications and professionalism, especially given his significant history of complaints with the College and the fact that he has undertaken remediation to address similar issues in the past.

Given the above, the Committee was of the view that further remediation was necessary, and that a SCERP and a caution in person were warranted, as outlined above.