

SUMMARY

Dr. Kenneth James Fletcher (CPSO# 55605)

1. Disposition

On November 23, 2016, the Inquiries, Complaints and Reports Committee (“the Committee”) ordered Dr. Fletcher, a family physician, to complete a specified continuing education and remediation program (“SCERP”). The SCERP requires Dr. Fletcher to:

- Successfully complete the Safe Opioid Prescribing Course through a course provider indicated by the College and provide proof of successful completion
- Review the *Canadian Guidelines for Safe and Effective Use of Opioids for Chronic Non-Cancer Pain* and the College’s policy on *Medical* records and provide written summaries of these documents and how they relate to his medical practice
- Engage in focused educational sessions with a Clinical Supervisor for six months
- Undergo a reassessment with an assessor selected by the College which is to include a review of at least 25 patient charts and an interview with the assessor

2. Introduction

A family member of a patient complained to the College that Dr. Fletcher continued to prescribe the patient powerful narcotics on a regular basis for her abdominal pain instead of ordering appropriate investigations to determine the cause of the patient’s pain.

Dr. Fletcher responded that he did not prescribe the patient any narcotics for her abdominal pain; the patient had been taking a stable dose of narcotics for musculoskeletal pain for several years. The pain medication did not raise any concerns with respect to habitation or any other problems. The only time the dose of narcotics was increased was when the patient’s lumbar disc prolapsed. The patient’s dose did not come down again after that because the surgical result was not ideal. The one concern about “double doctoring” was due to a miscommunication with the pharmacist. He and the patient’s other specialist were actively investigating the patient’s abdominal pain and she underwent endoscopies, blood work, an abdominal and pelvic ultrasounds and a CT scan.

3. Committee Process

The Committee, consisting of public and physician members, met to review the relevant records and documents related to the complaint. The Committee has before it applicable legislation and regulations, along with policies that the College has developed, which reflect the College's professional expectations for physicians practising in Ontario. Current versions of these documents are on the College's website at www.cpso.on.ca, under "Policies & Publications."

4. Committee's Analysis

The Committee reviewed Dr. Fletcher's medical records for the patient in question and the information that is contained in the patient's record is minimal and reflects poor record-keeping. There is no indication in the records that Dr. Fletcher ever took a comprehensive history from the patient nor is there any documentation of the patient's physical examinations or his plan of care. There is no sign in the chart that he reviewed medication dosages or tried to use other modalities, there is no review of pain/function, attempts to wean, urine drug screens or a narcotics contract. There are examples in the record that he did occasionally provide the patient with early refills. The Committee noted that it already required Dr. Fletcher to successfully complete an educational program regarding safe opioid prescribing for patients with chronic non-cancer pain and yet Dr. Fletcher's narcotics prescribing, as exemplified by the current case, is still concerning. Due to the significant concerns with respect to Dr. Fletcher's narcotics prescribing practices, which the previous specified and continuing education program apparently failed to remediate, the Committee is of the view Dr. Fletcher would benefit from a more comprehensive program

The Committee notes, however, that Dr. Fletcher did investigate the patient's abdominal pain. He ordered his own investigations and also appropriately referred her to a number of specialists. The patient underwent CT scans, blood work, and endoscopies that yielded no firm diagnosis. The Committee will therefore take no further action with respect to this aspect of the complaint.