

SUMMARY

DR. ZUBAIDA SIDDIQUI (CPSO# 86158)

1. Disposition

On September 19, 2018, the Inquiries, Complaints and Reports Committee (the Committee) required family medicine specialist Dr. Siddiqui to appear before a panel of the Committee to be cautioned with respect to clinical assessment and management of a patient in the Emergency Department and accuracy in documentation of record-keeping to reflect what the patient was told with respect to follow-up instructions.

The Committee also ordered Dr. Siddiqui to complete a specified continuing education and remediation program (SCERP). The SCERP requires Dr. Siddiqui to:

- Practice under the guidance of a Clinical Supervisor acceptable to the College for six (6) months to address educational needs identified by the CanMEDS roles of Medical Expert and Communicator (Record Keeping). Among other things, the Clinical Supervisor will:
 - meet with Dr. Siddiqui no less than every month (for an initial meeting and monthly meetings for a total of seven [7] visits)
 - observe Dr. Siddiqui in her Emergency (ER) practice for a full shift at each of six (6) visits
 - review a minimum of 15 charts at each meeting
 - report to the College on a quarterly basis
- Undergo a reassessment of her practice by an assessor selected by the College approximately six (6) months following completion of the SCERP
- Successfully complete the next available sessions of the following courses:
 - CMPA eLearning Module, “Documentation: Charting Medical Records”
 - CMPA eLearning Module, “Documentation II: Principles of Medical Record Keeping”

- Engage in self-directed learning, including review of the College's *Medical Records* policy and preparation of a written summary of up to 2,000 typed words to be submitted to the College within three (3) months to ensure completeness of review.

2. Introduction

A family member of the patient complained to the College that Dr. Siddiqui failed to provide appropriate care when the patient (who was in her 80s) sought assessment through the ER after being struck by a car while out for a walk. Specifically, the family member expressed concern that Dr. Siddiqui: refused to order an x-ray for the patient; did not perform any physical examination of the patient; and did not follow up with the patient after a left arm fracture was confirmed.

Dr. Siddiqui responded that she did not refuse to order an x-ray but rather told the patient to return the following morning when the x-ray technician would be on duty, but the patient did not return; she also maintained that she did perform a physical examination.

3. Committee Process

A General Panel of the Committee, consisting of public and physician members, met to review the relevant records and documents related to the complaint. The Committee always 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 available on the College's website at www.cpsso.on.ca, under the heading "Policies & Publications."

4. Committee's Analysis

The Committee noted that in her response to the College, Dr. Siddiqui contradicted information documented in the record by claiming she advised the patient to wait until the next morning to return to the hospital for an x-ray. No other documentation in the record supports this claim.

The Committee also had concerns about the lack of a clearly documented follow-up plan given the serious nature of the patient's injury, and considering the patient's age.

The Committee observed that elbow fractures, such as the patient had, are a common injury for the elderly with falls. For this reason, Dr. Siddiqui should have been acutely aware of the importance of obtaining an x-ray. The Committee could not understand why Dr. Siddiqui did not simply order the necessary imaging on an urgent basis for the following morning.

The Committee in fact noted concerning discrepancies between the ER assessment as documented and the claims Dr. Siddiqui put forth in her submissions to the College about the extent of her assessment of the patient. The Committee had concerns about the reliability of aspects of Dr. Siddiqui's submissions, and was troubled by its impression that Dr. Siddiqui had not been honest in her communications with the College.

The Committee noted that Dr. Siddiqui has been practising in Ontario since 2010 but has been the subject of several complaints to the College, including a caution about not following up appropriately on an x-ray report and the adequacy of the physical examination and correlation with the x-ray. The Committee's concern about Dr. Siddiqui's care in this case was compounded by the fact that the Committee had considered another, similar complaint at the same meeting as the present matter.

On the basis of its concerns about Dr. Siddiqui's poor assessment and management of the patient in this case, and taking into consideration Dr. Siddiqui's history with the College and the questions about her honesty in her communications with the College, the Committee issued its caution and ordered a SCERP as outlined above.