

**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. David Michael O'Brien (CPSO #51578)
(the Respondent)**

INTRODUCTION

The Respondent had been following the Complainant for abnormal Pap test results. The Complainant decided to proceed with definitive treatment in the form of surgical procedures (including tubal ligation). The procedures were cancelled because the Complainant was found to be at a very early stage of pregnancy. The Complainant requested medical termination of the pregnancy, and the Respondent prescribed medication for this purpose. After the Complainant took the medication, the Respondent saw the Complainant and performed an ultrasound, which showed no intrauterine sac. He did not order bloodwork.

The Complainant underwent the surgical procedures a few weeks later. On the day of the procedures, a urine pregnancy test was positive. The Complainant learned several months later that she was approximately 28 weeks' pregnant at that time.

The Complainant contacted the College of Physicians and Surgeons of Ontario (the College) to express concerns about the Respondent's care.

COMPLAINANT'S CONCERNS

The Complainant is concerned that the Respondent:

- **failed to provide appropriate information to her pertaining to abnormal cells found on recurring Pap tests and the medical plan of treatment;**
- **failed to determine if her pregnancy had been successfully terminated after providing her medication to aid in this process;**
- **performed surgery on her even though a pregnancy test was positive on the day of surgery and without doing further bloodwork or diagnostic imaging;**
- **failed to follow up on bleeding and cramping symptoms and the pathology reports from the surgical procedure at her follow-up appointment; and,**
- **failed to follow up on calls that she made to his office when she started to feel fetal movement.**

COMMITTEE'S DECISION

An Obstetrical Panel of the Committee considered this matter at its meeting of October 15, 2021, and required the Respondent to appear before the Committee to be cautioned

with respect to disregarding a positive pregnancy test on the day of a surgical procedure. The Committee also asked the Respondent to review relevant literature and submit a report with respect to medical pregnancies and terminations.

COMMITTEE'S ANALYSIS

As part of this investigation, the Committee retained an independent Assessor who specializes in obstetrics and gynecology. The Assessor opined that the Respondent did not meet the standard of practice as follows: in managing the Complainant's medical termination of pregnancy, in that given the Complainant was at too early a gestational age for an ultrasound to identify an intrauterine gestational sac he should have arranged for follow-up testing; in failing to respond to and further investigate a positive urine pregnancy test on the date of the operative procedure; and in disregarding the presence of chorionic villi on the pathology specimen. The Assessor was of the opinion that the Respondent demonstrated a gap in knowledge in these areas, as well as a lack of judgement. The Assessor regarded the Respondent's actions as being likely an isolated event, and did not think the Respondent's clinical practice exposes or is likely to expose his patients to harm or injury.

The Committee accepted and agreed with the Assessor's conclusions. The Respondent showed poor judgement in his thinking regarding the interpretation of results, and ought to have delayed surgical interventions in this clinical circumstance, to pursue further testing. There was also a missed opportunity at the post-operative appointment to do further testing, given the pathology results.

The Respondent demonstrated insight in his response, including he indicated he did not dispute the Assessor's opinion and he has pursued continuing medical education about the medical termination of pregnancy. Nevertheless, taking into account the seriousness of the Respondent's error in choosing to ignore the warning of a positive pregnancy test on the day of the surgical procedure, the Committee decided to require him to appear before the Committee and asked him to prepare a written report, as outlined above.

The Committee took no further action on the concerns about the Respondent providing information to the Complainant and following up on calls to his office.