

SUMMARY

DR. ANNE DE SILVA (CPSO #56653)

1. Disposition

On July 14, 2016, the Inquiries, Complaints and Reports Committee (“the Committee”) required general practitioner Dr. De Silva to appear before a panel of the Committee to be cautioned with respect to her failure to examine the patient, leading to a misdiagnosis.

In addition, the Committee ordered Dr. De Silva to complete a specified continuing education and remediation program (“SCERP”). The SCERP requires Dr. De Silva to:

- attend the Medical Record-Keeping Course through the University of Toronto;
- attend the RACPG Certificate of Primary Care Dermatology, modules 1-3;
- engage in focused educational sessions with a clinical supervisor who has a specialty in dermatology; and
- provide a written summary of College policy #4-12, *Medical Records*.

2. Introduction

The family member of the patient complained to the College that Dr. De Silva failed to adequately listen to and assess the patient’s concerns about a growth on the bottom of her foot, and failed to refer the patient in a timely manner to have the growth addressed.

The family member indicated that the patient saw Dr. De Silva several times beginning in 2013 to report that there was something growing on the bottom of her foot that was making it difficult for her to walk. According to the family member, Dr. De Silva never examined the patient’s foot and brushed off her concerns until 2014, when she referred the patient to a foot specialist. The foot specialist directed the patient to a dermatologist who in turn instructed the patient to go to the emergency room (ER). The patient had an x-ray and biopsy in the ER and was diagnosed with invasive melanoma in April 2014. She died in July 2015.

Dr. De Silva responded that the patient came to her in 2011 regarding a callus on the sole of her foot. She said she did not examine the patient's foot because the patient had been under the care of a podiatrist; instead, she urged the patient to return to the podiatrist for proper treatment.

Dr. De Silva indicated that she saw the patient in March 2014 for burning on the lateral side of the right foot and a sore that opened frequently. She indicated that she saw a sore on the sole of the patient's right foot but did not recognize it as a melanoma. According to Dr. De Silva, she strongly advised a referral to a dermatologist but the patient declined this and chose to see her podiatrist for assessment and treatment.

Dr. De Silva acknowledged that not examining the patient's callus in 2011 may have been a lost opportunity for early investigation and possible diagnosis and treatment. She expressed regret that she was not more aggressive in her examination and insistent that the patient accept her referral advice. Dr. De Silva recognized that her knowledge of the appearance of skin cancer needs improvement so she planned to arrange to attend a refresher course in dermatology.

3. Committee Process

As part of this investigation, the Committee retained an Independent Opinion provider ("IO provider") who specializes in family medicine. The IO provider reviewed the entire written investigative record and submitted a written report to the Committee.

A Family Practice 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.cpso.on.ca, under the heading "Policies & Publications."

4. Committee's Analysis

The IO provider opined that Dr. De Silva demonstrated a lack of judgement when she failed to assess the patient's foot in January 2011. The Committee agreed with this conclusion and found Dr. De Silva's care in this regard to be concerning.

The IO provider was supportive of other aspects of Dr. De Silva's care of the patient, but the Committee felt that the investigative record provides support for all of the family member's concerns about Dr. De Silva's care, namely that she failed to adequately assess, treat and refer the patient for the growth on her foot and failed to listen to the patient's concerns about the growth.

Dr. De Silva did not examine the patient's foot when she first raised the issue of a callus in January 2011. This was concerning to the Committee not because Dr. De Silva missed a diagnosis of melanoma, as the diagnosis might not have been apparent by that stage, but because Dr. De Silva did not look at something about which a patient expressed concern. The Committee was forced to consider that Dr. De Silva may be rushing through patient encounters.

When it was clear in March 2014 that the lesion was significant, Dr. De Silva accepted the patient's explanation that she planned to return to her podiatrist for treatment. In the Committee's view, this was an insufficient response to a serious lesion. Dr. De Silva indicated that the patient declined her recommendation for a dermatology referral but there is no documentation in the medical record to support this statement, as required by the College's *Medical Records* policy.

The Committee noted other areas in which Dr. De Silva's documentation was incomplete. When the patient refused colonoscopy for investigation of her iron deficiency with mild anemia, there is no indication in the record that Dr. De Silva pursued this matter again at subsequent visits.

The Committee previously counseled Dr. De Silva on the issue of continuing to offer screening tests even after a patient refused testing on one occasion, and documenting this refusal, and her history includes another patient complaint about a failure to perform a physical examination. In light of Dr. De Silva's history, and given that her failure to examine led to such an unfortunate outcome in this patient's case, the Committee is of the view that a two-fold disposition, involving a SCERP and a caution, was warranted in this matter.