Summary of Discipline Committee Hearing

DR. ERAN GILADY

Hearing Date: May 26, 2016

ALLEGATIONS OF PROFESSIONAL MISCONDUCT
• failed to weigh the dog during his stay at the clinic
• failed to contact the clients with concerns
• failed to properly manage or treat the dog’s anxiety
• failed to properly manage or treat the dog’s weight loss
• failed to maintain the standards of practice of the profession
• failed to make or retain records required by the Regulation
• treating an animal receiving veterinary services from another member without notifying the other member and obtaining the relevant historical information
• an act or omission relevant to the practice of veterinary medicine that, having regard to the circumstances, would be regarded by members as unprofessional

BRIEF SUMMARY
In early August, a dog was brought to the member’s clinic for a consultation and examination prior to a three week boarding. The clients advised the member the dog had never been boarded for any length of time. The member examined the dog and his weight was noted to be 12.3kg.

One week later, the clients brought the dog back to the clinic for boarding. The clients provided the clinic’s records containing no information concerning the dog’s care or his behavior during this stay at the clinic, except for some history notes provided by a technician.

When the clients went to the clinic to get the dog, the member warned them they would be shocked. The dog had lost weight and his ribs were showing. The clients were shocked when they saw the dog. The dog also has a lesion on his lip and could barely bark.

The clients took the dog to a second veterinarian that day who confirmed an ulceration on the dog’s upper lip and significant weight loss. The dog’s weight was 9.9kg. The second veterinarian noted reduced fur on the dog’s muzzle which, along with the ulcer, were thought to be caused by the dog rubbing his face or chewing the cage door.

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The clinic’s records contained no information concerning the dog’s care or his behavior during this stay at the clinic, except for some history notes provided by a technician.

PLEA AND DECISION
The member admitted the allegations as outlined in the Agreed Statement of Facts, including an admission of professional misconduct.

PENALTY
• Reprimand
• Suspension of the member’s licence for two months, one month of which to be suspended if the member completes a half-day mentorship on canine separation anxiety, the Crucial Conversations course through Ontario Medical Association, the College’s medical records webinar, and a paper of at least 2,000 words with a focus on concepts the member learned from the mentoring session.
• The member must also provide his medical records for up to eight patients which will be reviewed by a peer reviewer.
• The member will pay costs to the College of $4,000.

PANEL’S REASONING
The Panel accepted the member’s admissions of professional misconduct and found the member had engaged in professional misconduct. The Panel accepted the joint submission on penalty and costs. A joint submission should be accepted unless doing so is not in the public interest.

In deliberations, the Panel considered three principles for penalty: public protection; general deterrence; and specific deterrence of the member with the goal of rehabilitation. The Panel agreed the reprimand provided general deterrence to the profession. The Panel also found the suspension served all three principles by sending a message to the public and profession. Publication of the decision also served as general deterrence. The Panel judged that the remedial actions imposed on the member served the goal of rehabilitation.

The Panel considered mitigating factors, including: the fact that the member cooperated, saving time and money to the College, and the member had no prior decisions against him. The Panel also took note of the fact that the Joint Submission was endorsed by the pre-hearing officer.

In its analysis, the Panel also reviewed two previous cases and was satisfied that the penalty imposed was within reasonable limits and also accepted the fact that there was a trend for increased costs awarded.

The Panel found that a Veterinarian-Client-Patient Relationship existed in this case, given the extent to which the member took responsibility for the dog and given the member admitted such a relationship existed.

The Panel noted the member had failed to advise or consult the usual treating veterinarian before taking him in and failed to obtain relevant historical information on the dog. The Panel also agreed the member’s medical records were inadequate. There was no evidence of the member trying to contact the clients or their daughter to advise them of his concerns. The member also failed to properly manage the dog’s weight loss as evidenced by the entries in the medical records of the dog’s regular veterinarian, and as stated by the expert in her reports.

In reaching its decision, the Panel also took into consideration the fact that the member admitted to the allegations. In addition, the Panel considered the report of the pre-hearing officer, who was satisfied that the Agreed Statement of Facts addressed the allegations against the member.