

# Summary of Discipline Committee Hearing



## DR. JOHN (JAMES) HOLMES

Hearing Date: December 3, 2014

### ALLEGATIONS OF PROFESSIONAL MISCONDUCT

- failed to suggest Fluorescein staining when assessing the dog
- failed to meet standards of practice
- an act or omission relevant to the practice of veterinary medicine that, having regard to the circumstances, would be regarded by members as disgraceful, dishonourable or unprofessional
- prescribed Fucithalamic rather than recommending appropriate tests, treatment and proper follow up.
- failed to keep proper records

### BRIEF SUMMARY

The panel and the member revised the allegations and accepted the following Agreed Statement of Facts.

The member examined a dog with concerns about irritation and discharge. The member diagnosed the dog with conjunctivitis in both eyes, caused by allergies. The member prescribed medications but the problem never resolved. The member conducted allergy testing but otherwise recommended no other tests or referrals.

The member examined the dog 20 months later as the dog had been pawing at his eyes and the whites of his eyes were barely discernible. The dog kept his eyes shut from the light. The member diagnosed conjunctivitis and uveitis, attributing the condition to allergies and prescribed Fucithalamic eye drops.

The next day, the client took the dog for a second opinion. That veterinarian applied some Alcaine and, with the assistance of staff, was able to open the dog's eyes and diagnosed severe blepharospasm, enophthalmos, chemosis and erythematous conjunctiva. The dog's third eyelid was prolapsed, his closed eyelids were markedly red and the eyes were very painful. The examination revealed a deep concave ventral defect in the right eye, although the cornea did not

appear to be ruptured. The left eye had a deep corneal ulcer that did appear to have ruptured.

The dog was referred to an emergency hospital, where a veterinarian also noted severe blepharospasm, enophthalmos, chemosis and prolapse of the third eyelids bilaterally. The blepharospasm was so severe that the lower eyelids had rolled in, resulting in an entropion. A Schirmer tear test was in the high normal range. The examination revealed a full thickness perforated corneal ulcer and iris prolapse of the right eye with little to no corneal vascularisation, suggesting an acute cause despite the dog's history of chronic problems. The left eye also had a full thickness perforated corneal ulcer without iris prolapse, with little to no corneal vascularisation.

The dog had corneal surgery in both eyes as well as other treatment and his vision was restored. The dog's chronic conjunctivitis also improved with Prednisolone and Cyclosporin.

### DECISION

The member pleaded and was found guilty with respect to the allegations. The College and the member had negotiated an Agreed Statement of Facts, including an admission of professional misconduct.

### PENALTY

- Reprimand
- Suspension of the member's licence to practise veterinary medicine for two months, one month to be remitted if the member completes a seminar on ophthalmology and prepares a paper summarizing the course
- Imposing a condition and limitation on the member's licence to practise veterinary medicine that the member undergo two random chart audits
- The member will pay costs to the College of \$5,000
- Pursuant to legislation, this matter is published including the member's name

### PANEL'S REASONING

The panel found the member did not recommend appropriate diagnostic testing after assessing the dog. Also, the panel found the member made a diagnosis of uveitis without requiring that testing be done to support the diagnosis. Furthermore, the panel found the member inappropriately prescribed Fucithalamic in lieu of further testing.

The panel recognized the need for the College to ensure that the public interest is protected and the public maintains its trust in the profession. The panel agreed that specific deterrents needed to be in place for the member, and that general deterrents be in place for the broader profession. The panel agreed that rehabilitation is also part of an appropriate penalty and the completion of a seminar or course on ophthalmology and submission of a paper ensures rehabilitation had been undertaken.

Properly written and maintained medical records are critically important. Another member requires the information contained in them, to provide prudent assessment, treatment and care of any given patient.

The panel is satisfied that specific and general deterrents have been provided and that steps to provide rehabilitation have been ordered. Furthermore, the public trust in the profession and the disciplinary process have been maintained.