Summary of Discipline Committee Hearing

DR. MATTHEW KORNYA

Hearing Date: June 10, 2019

ALLEGATIONS OF PROFESSIONAL MISCONDUCT

• failed to adequately work up muscle wasting by not considering protein losing diseases and failed to repeat a urinalysis that included a urine protein to creatinine ratio;
• failed to perform a complete blood count and failed to work up or investigate possible causes of anemia;
• failed to send the cytology slides to a pathologist for a cytological diagnosis to be confirmed prior to treating with chemotherapeutic drugs;
• failed to perform a pre-treatment complete blood count or a packed cell volume plus blood smear including a platelet evaluation prior to the commencement of chemotherapy; and,
• treated the cat with chemotherapy before properly diagnosing her condition.

• filed to maintain the standard of practice of the profession
• 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

The cat was examined for weight loss, reduced appetite and vomiting. The cat was diagnosed with renal insufficiency but suspected there was an underlying condition due to the weight loss. A urine culture and sensitivity was negative for an infectious cause of the renal insufficiency and hematuria. The cat was managed with subcutaneous fluids, anti-nausea/antiemetic medication and renal diet.

The next week the cat returned to the clinic and an abdominal ultrasound was performed by an internal medicine specialist. The ultrasound showed the cat’s liver, pancreas and intestines were mildly inflamed, suggesting feline braditis. There was also some indication of kidney disease. The cat was reassessed a week later and referred to another clinic where she was examined by the member. The member noted the cat had significant muscle wasting and was underweight. The member arranged for a partial repeat of the bloodwork and partial urinalysis and performed a focused abdominal ultrasound, concentrating on the kidneys.

The bloodwork revealed a significant progression of anemia in the past two weeks. Urinalysis was negative but the member believed the ultrasound suggested renal lymphoma.

The member advised the client of his concerns with the cat’s kidneys, including the possibility of renal neoplasia. The member recommended a fine needle aspirate (FNA) of the kidneys and the client agreed.

The member advised the client the FNA and ultrasound suggested cancer. The member indicated that without aggressive therapy, survival was likely to be very short. The member advised that survival may be longer with chemotherapy but the ideal therapy would depend on the type of cancer.

The member suggested referral to a specialist for further investigation. The client said he would consider the advice and discuss it with his regular veterinarian.

A week later, the member administered chemotherapy and supportive care. The next day, the cat returned to the clinic with a fever and a painful leg. The cat was assessed and blood was drawn. The cat was given subcutaneous fluids and other medication. The cat was discharged and continued to decline at home.

The cat returned to the original hospital where she had x-rays and blood work. Oxygen and further medications were administered. The cat was given a guarded prognosis and it was recommended that she be transferred to an emergency hospital where she was admitted for assessment and hospitalization.

The next day she was transferred to intensive care where she declined until she was euthanized. The body was sent for an autopsy which found there was no indication of a mass or the prior presence of a mass.

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 one month
• Prior to the end of the suspension the member must complete an assessment of his baseline understanding of the findings of professional misconduct made in the case.
• Prior to the end of the the suspension the member must complete a one-day mentorship with a board-certified specialist with respect to the findings of professional misconduct made in this case and complete an essay on learnings.
• Prior to the end of the suspension the member must complete a follow-up assessment of what was learned in the mentorship.
• The member will pay costs to the College of $3,500

PANEL’S REASONING

The evidence indicated the member failed to properly diagnose the cat’s condition prior to treating her with chemotherapy. The standard of practice requires members to properly diagnose patients before treating them. The standard of practice also required the member to have done a more thorough workup on the muscle wasting by considering protein losing diseases and repeating a urinalysis that included a urine protein to creatinine ratio; to have performed a complete blood count and investigated possible causes of anemia when cat first presented; and to have sent cytology slides to a pathologist for cytological diagnosis, and to perform a pre-treatment complete blood count or a packed cell volume plus blood smear prior to beginning chemotherapy. The member failed to take the necessary steps to maintain those standards of practice.

The member’s conduct would be best described as unprofessional rather than disgraceful or dishonourable. Although the member’s conduct demonstrated a serious disregard for his professional obligations, there was no element of deceit or moral failing that would elevate it to the more serious categories of disgraceful or dishonourable.

The penalty should maintain high professional standards, preserve public confidence in the ability of the College to regulate its members, and, above all, protect the public. This is achieved through a penalty that considers the principles of general deterrence, specific deterrence and, where appropriate, rehabilitation and remediation of the member’s practice. The panel also considered the principle that the panel should accept a joint submission on penalty unless it is contrary to the public interest and would bring the administration of justice into disrepute.

The joint submission satisfies the objectives of penalty. The publication of this panel’s findings and the penalty acts as a general deterrent to other members of the profession.

The suspension of the member’s licence and the reprimand, as well as the limitation and conditions on the member’s licence will deter the member from engaging in future acts of professional misconduct. The rehabilitative measures imposed through the limitation and conditions will help the member improve his practice in the future and avoid the pitfalls that led to the misconduct in this case.

The fact the member acknowledged and admitted his mistakes in failing to properly diagnose his patient’s condition prior to beginning chemotherapy demonstrates his remorse and willingness to take responsibility.

The costs order against the member is fair and not punitive. The payment of costs will reimburse the College for a portion of the expense of this proceeding, so that the entire burden of bringing this matter to a discipline hearing is not borne by other members of the profession.