

Patient requests money and threatens disclosure after cosmetic practitioner ends sexual relationship



Key messages from the case

It is never acceptable to have a sexual relationship with a current patient, even if the relationship is consensual. Breaches of sexual boundaries have the potential to cause harm to patients and bring the profession into disrepute. They can also cause significant professional harm, as illustrated by a case involving a cosmetic practitioner whose patient threatened to disclose their relationship if he did not pay her \$50,000.

Details of the decision

Boundary violation – sexual relationship

Dr T performed cosmetic procedures on 21-year-old Ms P over a period of nearly three years including breast augmentations, lip fills and labiaplasty. Ms P initially contacted Dr T by email to request information about the surgical procedures. He did attempt to set some boundaries on email communication. However the patient's emails became increasingly personal and progressed to sending him nude photos. Eventually they arranged to meet socially, and the relationship became sexual while the treating relationship was still ongoing.

After speaking with a colleague about the relationship, Dr T ended the sexual relationship and told Ms P he could no longer be her doctor, referring her to a colleague for ongoing lip fills. However, he continued contact with her and provided some clinical treatments when that colleague was away.

The tribunal found that Dr T's conduct constituted professional misconduct.

The tribunal reiterated that sexual relationships between doctor and patient are always inappropriate and damage the community's trust in the medical profession.

The tribunal also pointed to the significant risk of harm to patients.

Patients necessarily grant doctors intimate access to their bodies and concerns. Certain specialties, such as psychiatry and cosmetic practice, may have even greater intimate access.

Cosmetic practitioners are also in position of power, particularly over patients whose self-worth may be linked to their physical appearance. Exploiting this intimacy and power imbalance has the potential to damage the patient emotionally and psychologically.

Failure to notify

Some months after contact ceased, Ms P contacted Dr T and asked for money. She implied that if he did not pay her, she would disclose their relationship.

Dr T independently engaged a lawyer and attempted to reach a settlement in exchange for the patient signing a non-disclosure agreement. Negotiations broke down and the patient threatened to disclose the relationship unless he paid her \$50,000.

Dr T declined to pay. He told his wife and self-reported to Ahpra.

The tribunal concluded that in failing to report the relationship, instead entering into negotiations to conceal it, Dr T had engaged in unprofessional conduct.

He should have sought advice from his insurers and self-reported far earlier – which would likely have reduced the severity of consequences.

Outcome

The tribunal took into consideration that Dr T had self-reported, sought counselling, co-operated with the investigation and taken steps to amend his practice to avoid similar situations in future. It considered he did not pose a risk to future patients.

The tribunal noted that it had considered cancelling Dr T's registration but concluded a 12-month suspension was appropriate.

Dr T was reprimanded. His registration suspended for 12-months and he was required to undergo professional supervision for two years.

Key lessons

It is never acceptable to have a sexual relationship with a current patient.

Be alert to signs that boundaries are blurring – for example social invitations, disclosures of intimate details not relevant to clinical care, phone calls, emails or requests for personal contact via social media.

If you do find yourself in a situation where boundaries have blurred, seek professional medico-legal advice.

If you are the subject of complaints or questions about your behaviour, always act with integrity and never attempt to conceal a breach or deceive regulatory authorities.

References and further reading

Avant factsheet – [Boundary issues](#)

Medical Board of Australia Guidelines – [Sexual boundaries in the doctor-patient relationship](#)

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