

Ophthalmologist reprimanded after prescribing drugs of dependence to family member for five years



Key messages from the case

Doctors may feel compelled to respond to a family member's after hours or urgent request for pain relief. However if such situations are not managed carefully they may lead to a protracted dilemma, as one experienced ophthalmologist discovered.

Details of the decision

Dr K was a consultant ophthalmologist in private practice, with around 30 years' experience.

His prescribing came to the attention of the medicines regulator.

Dr K admitted prescribing Schedule 8 medications to seven long-term patients including a close family member. All were experiencing non-ophthalmological pain conditions.

Dr K explained these patients would call him, sometimes late at night when they were experiencing pain episodes and unable to get an after-hours appointment. He said his sense of compassion meant he felt compelled to help.

Regulatory requirements for prescribing drugs of dependence

The medicines regulator initially raised concerns with Dr K about his prescribing reminding him:

- he must maintain detailed records of any administration or destruction of S8 drugs
- he must keep S8 drugs in a locked storage facility and ensure this remained locked and secured against unauthorised access.

A few years later, the medicines regulator was alerted to Dr K's ongoing prescribing of S8 drugs and warned him he required a permit to prescribe for longer than eight weeks.

Dr K acknowledged these requirements and undertook to comply.

However, he failed to do so and was charged and pleaded guilty to breaches of the state legislation for failing to obtain necessary permits for prescribing S8 medications longer than eight weeks and failing to comply with record keeping and storage requirements. The matter was also referred to the Medical Board.

The tribunal noted that all practitioners are expected to know and comply with their legal obligations. It was particularly concerned that Dr K's breaches had continued for a number of years, even after he had been warned and had given an undertaking to comply.

The tribunal found that his conduct constituted professional misconduct.

Prescribing for family and friends

The fact that Dr K was prescribing S8 medications for a close family member also came to the attention of the medicines regulator. It warned Dr K that this was also against the Medical Board's policy. Dr Kacknowledged he understood that and had ceased administering S8 medications (morphine or pethidine) to that patient.

However Dr K later admitted he had continued to treat his family member in non-emergency situations, including prescribing pethidine.

He claimed he had always intended to stop providing care, but somehow it was never the right time and 'tomorrow would be better'.

The tribunal found that his ongoing prescribing after he had been warned and undertaken to cease prescribing constituted professional misconduct.

Treatment outside expertise and competence

The tribunal accepted expert evidence that Dr K had treated patients for conditions outside his expertise and that all patients ought to have been referred to appropriate specialists for treatment.

It concluded Dr K lacked the necessary knowledge of pain medicine to provide appropriate care.

He had breached his professional obligations to act within the limits of his experience, ensure his care was appropriate, refer to other practitioners where that was in the patient's best interests, and inform patients' treating practitioners about care he provided or medications he prescribed.

The tribunal found this constituted professional misconduct.

Medical records

The tribunal also concluded Dr K had failed to maintain clear and accurate medical records of care he provided.

Outcome

In determining a penalty, the tribunal took into consideration that Dr K had complied with conditions for the four vears it took for the matter to come to the tribunal. It accepted that Dr K's conduct had not posed a risk to other patients in general and that the conditions were appropriate to protect the public.

Dr K was reprimanded.

The tribunal imposed conditions. requiring that Dr K must:

- not prescribe S8 and some high risk S4 medications
- not administer or possess those medications unless prescribed for him by his own treating doctor
- not provide any medical treatment to family members, and
- · limit his practice to treating ophthalmological conditions only.

Key lessons

Do not prescribe Schedule 8 medications, other drugs of dependence or psychotropic medications to family or friends except in a genuine emergency. This will almost always be considered unprofessional conduct and is also against the law in some jurisdictions.

Ensure that you understand and comply with the legal and professional requirements for prescribing medications, particularly drugs of dependence.

If a family member or close friend asks you for a prescription, set clear boundaries and expectations about any treatment you can provide. Avoid engaging in 'corridor consultations' and if you do need to provide care, ensure that consultations are formal and appropriate time is set aside for you to make considered clinical decisions.

Always act within the limits of your expertise and experience.

Keep a medical record of any treatment provided and ensure you communicate with the person's treating practitioner about any treatment and advice given, including any follow up.

References and further reading

Avant factsheet - Treating family members friends or staff

Avant factsheet - "But it's just a script": prescribing requests from family and friends

Avant - Prescribing safely

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