

Doctor deregistered after findings of sexual boundary violations with nine patients



Key messages from the case

Doctors may be more likely to commit boundary violations when they are themselves unwell, feeling isolated or under stress or having personal difficulties. It is important to seek support from professional mentors, not from patients.

A medical practitioner engaged in conduct with patients that breached professional boundaries, including by sending numerous messages via text and messaging apps as a way of seeking 'emotional support' from his patients. The practitioner also engaged in other conduct that was found to be unsatisfactory professional conduct.

Boundary violations

The medical regulator brought complaints against Dr K, alleging he had breached professional boundaries with nine patients by:

- Conducting an inappropriate chest examination on a female patient without clinical reason or justification and unnecessarily requiring the patient to remove her shirt and bra.
- Failing to offer patients privacy to undress.
- Inappropriately touching patient for no therapeutic reason.
- Conducting an inappropriate breast examination while asking the patient if he could kiss her.
- Exchanging personal text messages and telephone calls with patients (in one case over 200 text messages).
- Discussing personal circumstances and making inappropriate personal and sexual remarks to multiple patients.

- Inviting himself to visit patients at home.
- Inappropriately accessing patient records to contact patients for personal reasons and using confidential information disclosed by one patient in an attempt to influence her to enter into a relationship with him.

Dr K had left the country and did not appear at the hearing, but provided a written response to the complaints. Several of the patients also did not provide evidence. As a result, the tribunal was unwilling to speculate about inappropriate motives in relation to the chest examination.

In relation to the text messages, misuse of confidential information, personal visits, inappropriate disclosures, sexual remarks, and sexual conduct, the tribunal found these separately constituted unsatisfactory professional conduct.

Other complaints

In addition to boundary violations, the regulator brought complaints against Dr K alleging incorrect diagnosis of a patient and Medicare billing unsupported by his records.

Diagnosis

The complaint alleged that Dr K had recorded a diagnosis of schizophrenia for one patient that was incorrect and not justified by clinical evidence. Having recorded this diagnosis, he then invited himself to the patient's home and made inappropriate comments of a sexual nature.

Dr K claimed the diagnosis was only provisional but this was not clear from the record. Recording such a diagnosis without clinical evidence, without qualifying it or correcting the record was found to constitute unsatisfactory professional conduct.

Medicare

Dr K was alleged to have claimed Medicare item 2713 (GP Mental Health Treatment) for consultations with six patients on multiple occasions. The item requires an extended consultation (minimum 20 minutes) for treating a mental disorder. In all but one case the clinical records did not support either that such a mental health consultation had occurred, or that it had lasted at least 20 minutes.

Making such claims without supporting documentation constituted unsatisfactory professional conduct.

Outcome

The tribunal concluded Dr K's conduct overall constituted professional misconduct.

In his defence, Dr K said he was depressed and isolated and sought emotional support from the patients.

The tribunal noted that Dr K was aware the patients were vulnerable – most had sought treatment for mental health challenges, some had suicidal ideation or had attempted suicide, one had been the victim of sexual assault.

Dr K appeared to be unaware of the impact of his behaviour on the patients. While he had expressed shame and remorse, the tribunal was not persuaded he understood the reason for professional boundaries or the harm boundary breaches could cause. There was no evidence he had undertaken training, therapy or sought assistance to address the issues. The tribunal was not persuaded the conduct would not re-occur.

The tribunal concluded Dr K was not a fit and proper person to be registered. His registration was cancelled for three years.

Key lessons

It is never appropriate to seek a sexual relationship with a patient.

Judgement can be impaired and boundary breaches are more likely to occur when practitioners are otherwise under stress or isolated.

Set up protective strategies and maintain your personal and professional support networks, particularly if you are practising away from your usual support networks or practising in an isolated setting.

References and further reading

Avant factsheet: [Boundary issues](#)

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

Avant wellbeing resources: [Doctors' mental health](#)

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