

香港醫務委員會

The Medical Council of Hong Kong

DISCIPLINARY INQUIRY **MEDICAL REGISTRATION ORDINANCE, CAP. 161**

Date of hearing: 20 September 2010

Defendant: Dr KWONG Tsun Tze (鄺駿子醫生)

1. The charge alleged against Dr KWONG Tsun Tze is that:

“On or around 29 January 2009 he, being a registered medical practitioner, still failed to fulfil the condition previously imposed under the order of the Medical Council made at the disciplinary inquiry on 30 July 2007 under section 21(1) of the Medical Registration Ordinance that he should complete a course in continuing medical education in clinical pharmacology equivalent to 30 CME points

In relation to the facts alleged, he has breached the condition previously imposed under the Medical Council order pursuant to section 21(1)(e) of the Medical Registration Ordinance.”

2. The Defendant is neither present nor represented by lawyer at this inquiry. We are satisfied on evidence that the Notice of Inquiry was properly served on the Defendant in accordance with the statutory requirements. The Secretariat has contacted the Defendant over the telephone. He said that he was aware of the inquiry, but he would not attend the inquiry as he noted from the Notice of Inquiry that he was not obliged to attend.
3. Given that the Notice of Inquiry has been properly served and that it is the Defendant's own choice not to attend, we decided to proceed with the inquiry in his absence.

Facts of the case

4. The Defendant was previously found guilty of professional misconduct by the Medical Council. On 30 July 2007, the Council ordered that his name be

removed from the General Register for a period of 3 months and the order be suspended for 12 months, subject to the condition that he should complete a course in continuing medical education in clinical pharmacology equivalent to 30 CME points within the suspension period. The deadline for compliance with the order was 29 July 2008.

5. On 27 July 2008, the Defendant applied to the Council for extension of time on the ground that he had not been able to find a course in clinical pharmacology with 30 CME points. The Council granted extension of 6 months up to 29 January 2009, and amended the condition so that he could comply with it by participating in either active or receptive CME courses or activities relating to clinical pharmacology or therapeutics. At the same time, the Council expressed deep concern on his failure to comply with the condition and applied for extension only at the very end of the suspension period.
6. Despite the extension of time and relaxation of the requirements of the condition, the Defendant still failed to comply with the condition upon expiry of the extended suspension period. In fact, up to the date of this inquiry which is over 3 years after the condition was imposed, he still has not obtained any CME point pursuant to the disciplinary order.
7. In a letter dated 13 September 2010, the Defendant claimed that his failure to comply with the condition was due to non-existence of "*a course in continuing medical education in clinical pharmacology equivalent to 30 CME points within the suspension period*". On the other hand, in a letter dated 16 September 2010, the Defendant said that he was able to find a series of certificate courses in Internal Medicine which might meet the condition.
8. We do not accept that the Defendant was prevented from fulfilling the condition because of objective circumstances of unavailability of the relevant courses. As we have pointed out, upon extension of time the condition has been amended to cover either active or receptive CME courses or activities. The scope of the CME activities was expanded from clinical pharmacology to both clinical pharmacology and therapeutics. Even if assuming that there were no relevant CME courses, he could have obtained CME points by self- study.

9. We are of the view that he had not made proper efforts to fulfil the condition before the deadline, despite a number of warnings and reminders that he had to do so.
10. We are satisfied that the Defendant had breached the condition imposed by the Council. We find him guilty as charged.

Sentencing

11. The Defendant has been found guilty of professional misconduct on 30 July 2007. He has no other disciplinary conviction.
12. The case leading to the order made in 2007 involved the injection of a drug to which the patient was allergic. Despite the fact that the patient had informed the Defendant that he was allergic to the drug, he injected the patient with the drug and sent him away as soon as the injection was given. The patient then experienced discomfort. However, the clinic was already closed and so he had to go home. Upon returning home, the patient developed breathing difficulty and was rushed to hospital only 35 minutes after the injection. He had to be treated in the Intensive Care Unit. It was a dangerous situation which could have been fatal to the patient.
13. The Council in 2007 expressed its concern that *“the Defendant took a rather casual attitude towards the allergies stated in the patient’s allergy card. If he adopts the same attitude in future cases, his practice can result in disasters for his patients. He needs to seriously review his approach in this respect if he continues to practise.”*
14. The Council in 2007 suspended the removal order, so as to give the Defendant an opportunity to rehabilitate himself from that misconduct by improving his knowledge and competence in the area of clinical pharmacology. Nevertheless, the Defendant had not made proper efforts to do so.
15. If the Defendant had partially or substantially complied with the condition, we would have considered a lesser order than full activation of the 3-months removal order. However, the Defendant had not complied with the condition to any extent at all, despite extension of time, relaxation of the condition, and repeated reminders. Furthermore, the Defendant indicated in his letters dated

27 July 2008 and 4 August 2008 that he would gladly accept the removal order made in 2007.

16. After our finding that the Defendant had breached the condition, the Defendant was given the opportunity to appear and advance mitigation before we consider sentencing. However, the Defendant categorically indicated that he would not attend to advance any mitigation.
17. We see no reason why the removal order should not be activated in full. We order that the Defendant's name be removed from the General Register for a period of 3 months. There is no reason for suspension of the order.
18. We feel obliged to make the observation that the Defendant has been taking a rather casual attitude towards the Council's order made in 2007. This reflects his lack of insight into his misconduct in respect of drug allergy, despite the strong remarks of the Council in that inquiry. This is a dangerous attitude, and we must repeat the same remarks with stronger emphasis that *"If he adopts the same attitude in future cases, his practice can result in disasters for his patients. He needs to seriously review his approach in this respect if he continues to practise."*
19. While it is for the future Council to consider the Defendant's application for restoration to the General Register if and when the application is made, we recommend that the Council should require cogent evidence that the Defendant has properly and sufficiently improved his competence in clinical pharmacology before approving such application.

Dr. David LAM
Temporary Chairman, Medical Council