



## SINGAPORE MEDICAL COUNCIL

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### PRESS RELEASE

#### DISCIPLINARY TRIBUNAL INQUIRY FOR DR JEN SHEK WEI AND COURT OF THREE JUDGES' DECISION

##### Disciplinary Tribunal Inquiry

1. A Disciplinary Tribunal ("**DT**") Inquiry (the "**Inquiry**") was held for Dr Jen Shek Wei ("**Dr Jen**") between 9 May 2016 and 1 November 2016. The brief background of the Inquiry is as follows.
2. Dr Jen, aged 62 years, is a registered Gynaecologist & Obstetrician. At the material time, he was practising at Women's Clinic of Singapore located at Block 721, Ang Mo Kio Avenue 8, #01-2813, Singapore 560721.
3. The Inquiry arose from a complaint dated 12 December 2011 to the Singapore Medical Council ("**SMC**") by one of Dr Jen's patients ("**Patient**"). The complaint pertained to Dr Jen's removal of the Patient's left ovary during a surgery he had performed on the Patient on or about 31 August 2010, after she had consulted him on 30 August 2010 regarding a pelvic mass ("**Mass**") found on a Magnetic Resonance Imaging scan performed on her by another doctor.
4. Dr Jen claimed trial to the following two charges of professional misconduct preferred against him pursuant to section 53(1)(d) of the Medical Registration Act:
  - (a) that between 30 and 31 August 2010, Dr Jen had advised the Patient to undergo surgery to remove the Mass without carrying out further evaluation

and investigation of the Patient's condition when such further assessment was indicated, and that his aforesaid conduct amounted to such serious negligence that it objectively portrayed an abuse of the privileges which accompany registration as a medical practitioner ("**First Charge**"); and

- (b) that on or about 31 August 2010, Dr Jen performed a left oophorectomy (i.e. the removal of the left ovary) on the Patient ("**Procedure**") without obtaining the required informed consent from the Patient for the Procedure ("**Second Charge**"), in breach of the SMC's Ethical Code and Ethical Guidelines ("**ECEG**"), and that his aforesaid conduct constituted an intentional, deliberate departure from standards observed or approved by members of the profession of good repute and competency.

5. The DT found Dr Jen guilty of both the First Charge and the Second Charge and in coming to its decision, the DT made, *inter alia*, the following observations / findings:

- (a) Dr Jen had failed to take into account various factors including the Patient's age, pre-menopausal status, medical history, and failed to investigate with the necessary blood tests, repeat scans and risk of malignancy assessments to enable him to advise an acceptable management plan for the Patient. He had failed to show any credible evaluation of his differential diagnosis of the Patient's Mass that there was a high probability of malignancy;
- (b) Dr Jen had failed to ensure that the Patient was adequately informed about her medical condition and options for treatment so that she was able to participate and make informed decisions about her treatment. She was not made aware of the risks and possible complications of the removal of her left ovary and any alternatives available to her. Dr Jen appeared indifferent to the Patient's welfare; and
- (c) Dr Jen's medical records were not clear, especially details concerning the surgery advised. Some notes were inaccurate or illegible, and some appeared less than contemporaneous. It was not clear what surgical

procedure Dr Jen had actually advised the Patient to undergo. Dr Jen's testimony at the hearing in relation to whether and what he had explained to the Patient regarding the nature, risks and possible consequences of the Procedure was also somewhat repetitive and evasive.

6. In considering the appropriate sentence for Dr Jen, the DT took into account, *inter alia*, the following factors:
  - (a) Dr Jen saw the Patient on 30 August 2010 and within 24 hours had persuaded her to undergo the Procedure, without fulfilling his duty of informing her of the treatment option of conservative management and obtaining informed consent from her;
  - (b) The Procedure which Dr Jen performed, i.e. removing the Patient's left ovary and fallopian tube, was a grossly inappropriate treatment for the Patient, especially when he knew that the Patient did not want any part of her womb area to be removed because of her fertility concerns. This showed an indifference to the Patient's welfare and best interests;
  - (c) Dr Jen did not evaluate the Patient using acceptable guidelines to determine whether the Mass was likely benign or had a high degree of malignancy before advising surgery and this demonstrated he did not have his Patient's best interests at heart; and
  - (d) Dr Jen did not show any remorse over the removal of the Patient's left ovary and fallopian tube for a benign condition, and had even callously suggested that he had improved her fertility.
7. Having regard to all the facts and circumstances of the case, a significant period of suspension would be appropriate in order to adequately address Dr Jen's offending conduct.
8. Accordingly, the DT ordered that Dr Jen:
  - (a) be suspended from medical practice for a period of **eight (8) months**;

- (b) be fined S\$10,000;
  - (c) be censured;
  - (d) give a written undertaking to the SMC that he will not engage in the conduct complained of and any similar conduct; and
  - (e) pay the cost and expenses of and incidental to the Inquiry, including the costs of the solicitors to the SMC.
9. The DT also ordered the Grounds of Decision to be published.

### **Appeal before the Court of Three Judges**

10. In January 2017, Dr Jen appealed against the DT's decision on both charges, in respect of both his conviction and sentence. The appeal was heard before the Court of Three Judges ("the Court") on 25 July 2017.
11. On 14 November 2017, the Court dismissed Dr Jen's appeal in its entirety.
12. In coming to its decision to uphold Dr Jen's conviction, the Court held *inter alia* that:-
- (a) In respect of the First Charge, there was no reason to interfere with the DT's finding that Dr Jen's advice to the Patient to undergo surgery (which was not an appropriate treatment option) amounted to serious negligence.
  - (b) In respect of the Second Charge, Dr Jen had failed to raise a reasonable doubt in respect of the SMC's case that informed consent was not obtained from the Patient for the Procedure performed on her, and that Dr Jen's failure to do so (despite knowing full well that he had to comply with the requirements of the ECEG) was an intentional and deliberate departure from the applicable standard.
13. As regards Dr Jen's appeal on sentence, the Court noted the following :-
- (a) There was a lack of care in the way Dr Jen addressed the Patient's condition when he assessed the Mass to be malignant without applying any malignancy guidelines and that he had failed to make known to the

Patient that he had removed her ovary. The Court was of the view that such conduct called for a sufficiently deterrent sentence.

- (b) There was a lack of remorse on Dr Jen's part, especially in relation to the Second Charge, when he sought to disclaim responsibility for ensuring that the Patient understood the nature of the Procedure.
- (c) While the Court accepted that Dr Jen's sentence ought to reflect the delay in the prosecution of the case, the Court saw no reason to disturb the DT's sentence given that the term of suspension imposed by the DT was on the low side, and that a suspension of 16 months was justified in this case. Even if that term of suspension was halved on account of the delay in prosecution, the suspension would remain at eight months. The Court also saw no reason for disturbing the fine and written undertaking ordered by the DT.

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