

**SINGAPORE MEDICAL COUNCIL  
DISCIPLINARY COMMITTEE  
IN THE MATTER OF DISCIPLINARY INQUIRY AGAINST  
DR AAB HELD FROM 7-8 JANUARY 2008**

**Disciplinary Committee:**

Dr Tan Kok Soo (Chairman)  
A/Prof Ong Biauwei Chi (Member)  
Prof Shamal Das De (Member)  
Ms Serene Wee (Lay Member)

**Legal Assessor:**

Mr Thean Lip Ping

**Prosecution Counsel for Singapore Medical Council:**

Mr Alvin Yeo S.C and Mr Sean La'Brooy  
of M/s WongPartnership

**Defence Counsel for Dr AAB:**

Mr K. Shanmugam S.C, Ms Mak Wei Munn and Mr Jonathan Tan  
of M/s Allen & Gledhill

**DECISION OF THE DISCIPLINARY COMMITTEE**

*(Note: Certain information may be redacted or anonymised to protect the identity of the parties.)*

**CHARGES:**

1. There are four charges against you, Dr AAB (the Respondent), and they are briefly as follows:
  - (a) Improper conduct which brings disrepute to the medical profession by engaging in a sexual relationship with a patient (Madam P) during the period from 21 April 2003 to around March 2005, and failing to preserve the absolute confidence and trust of a doctor-patient relationship, acted in breach of Regulation 17 of the Medical Registration Regulations read with Section 4.2.5.1 of the Singapore Medical Council's Ethical Code and Ethical Guidelines;
  - (b) Improper conduct which brings disrepute to the medical profession by tampering with and/or improperly causing inaccurate changes to be made to the biodata of

a patient (Madam P) during the period from around June 2004 to around August 2005, and thereby failing to keep medical records which were accurate, acted in breach of Regulation 17 of the Medical Registration Regulations read with Section 4.1.2 of the Singapore Medical Council's Ethical Code and Ethical Guidelines;

(c) Professional misconduct by failing during the period from February 2003 to March 2005, to record or properly document details of the patient's visits, medical condition and results on medical examinations in the case notes for the period of treatment; and

(d) Professional misconduct by failing to properly maintain patient confidentiality by improperly disclosing to a third party, (Madam P), confidential information relating to the treatment and care of 2 patients of Hospital A, namely Madam A and Madam B, during the period from February 2003 and March 2005.

2. You, Dr AAB, have pleaded guilty to all the four charges.

3. We now turn to consider what appropriate orders we should make in the circumstances. The Committee has carefully considered the lengthy submission in mitigation made by counsel for you, Dr AAB.

**PRINCIPLES AND FACTORS TAKEN INTO ACCOUNT IN SENTENCING:**

4. In respect of the first charge, it is important to bear in mind that one of the most fundamental duties of a doctor, recognised for as long as the profession has been in existence, is that a doctor must never permit his professional relationship with a patient to deteriorate into an association which would be described as improper. The Courts in Singapore and also in England have always supported the finding of the medical body that sexual intercourse with a patient is a most serious breach of the proper relationship between doctor and patient amounting to infamous conduct in a professional respect.

5. In any sexual relationship between the doctor and the patient, the principle is whether there is any exploitation of the patient. The patient may be physically or psychologically vulnerable to the doctor's advances. There is no evidence of this in your case. In your case, the patient was not vulnerable, and in the view of the Committee, the patient was in fact the dominant person in this doctor-patient relationship. From the first encounter, it was by mutual consent. Furthermore, there was a series of financial transactions as a result of which, a total of over \$90,000 was paid to the patient over a period of 2 years.
6. The Committee also noted that you readily pleaded guilty to prevent putting the complainant / patient through the limelight of a hearing to state her case.
7. Your conduct transgressed the professional boundary between the doctor and his patient. However, you have no previous offences. On the basis of the report from Dr DE, Senior Consultant Psychiatrist and Psychotherapist, the Committee is of the view that the risk of you repeating your offence would be very low.
8. Factors that helped the Disciplinary Committee in deciding the verdict are that:
  - (a) your practice of medicine is exemplary;
  - (b) there is no previous evidence of any wrong doing;
  - (c) you pleaded guilty to the charges;
  - (d) you are now aware of the seriousness of your misdoings and the damage done to the profession;
  - (e) you have accepted that your conduct was abhorrent and disgraceful; and
  - (f) you have many favourable testimonies from patients and colleagues.
9. One particular concern in such cases of moral turpitude is that the public reputation of the profession may suffer and public confidence in it may be prejudiced.
10. It is not the function of the Disciplinary Committee to be punitive, but it is tasked to mete out robust determination when necessary – on this occasion, the transgression of professional boundary between the doctor and the patient.

11. There have been no recent cases heard by the Disciplinary Committees of the Singapore Medical Council of doctors engaging in sexual relationships with patients. In this respect, this Committee has to look at current cases reported overseas. In "*Giele v General Medical Council* [2006] 1 WLR 942", the judge on hearing the appeal against deregistration commented that "although the improper sexual relationship which was established could have merited erasure, the mitigation, and in particular the testimonials, might have tipped the balance against it; that erasure was not required in order to maintain public confidence; and that, accordingly, the decision to erase the practitioner's name would be quashed and a period of suspension imposed".
12. The Committee is of the view that your action is a serious breach of professionalism and has to send a clear signal to the profession that gross improper behaviour between a doctor and his patient cannot be tolerated. The Committee also stresses the need for protection of the public and to restore public confidence in the profession. The Committee considers that this was a prolonged relationship that spanned almost two years.
13. Further, the Committee takes into account the testimonials and letters provided by your patients and colleagues in the medical profession, and notes that you are a competent doctor.
14. There are the remaining 3 charges, namely, tampering of medical records, improper maintenance of patient's records and failure to properly maintain patient confidentiality. These are serious offences. Offences of similar nature on the basis of past precedence have been dealt with severely. The Committee has taken these offences into account in meting out the sentence.

**SENTENCE:**

15. Having regard to all the circumstances, and with respect to all the four charges, the Committee makes the following orders pursuant to Section 45(2) of the Medical Registration Act:
  - (a) that you, Dr AAB, be suspended for a period of **24** months;

- (b) that you be censured;
- (c) that you give a written undertaking to abstain in future from the conduct complained of or any similar conduct; and
- (d) that you pay the costs of and incidental to these proceedings, including those of the solicitor of the Council and the Legal Assessor.

16. The hearing is concluded.

Dated this 8<sup>th</sup> Day of January 2008.