

CENSURE: IC1983
DR. LEONARD ELIA LOCKMAN

On May 6, 2015 in accordance with Section 47(1)(c) of *The Medical Act*, the Investigation Committee censured Dr. Lockman as a record of its disapproval of the deficiencies in his conduct. Censure creates a disciplinary record which may be considered in the future by the Investigation Committee or an Inquiry Panel when determining the action to be taken following an investigation or hearing.

I. PREAMBLE

Before referring a patient to the Emergency Department of a hospital for care, it is incumbent upon a family physician who sees the patient in his or her office to assess the acuity of the patient's condition through appropriate history-taking, physical examination and investigations. No patient should be referred from the family physician's office to an Emergency Department when the patient's acuity does not warrant urgent or emergent intervention.

Medical records must accurately reflect the interaction between the physician and the patient and must document all relevant history, physical examination, the physician's assessment, any treatment provided and the physician's plan.

II. THE RELEVANT FACTS ARE:

The Committee assessed the facts as follows:

1. At all material times, Dr. Lockman practised family medicine at his own clinic, St. Vital Family Medical Clinic.
2. During the period between September 2011 and March 2012, Dr. Lockman saw 8 patients, the identities of whom are known to him, in his capacity as their family physician and 2 patients, the identities of whom are known to him, as patients who attended Dr. Lockman from time to time for episodic care.
3. In each of these patient visits, Dr. Lockman's record:
 - a. Documents the patient's entrance complaint, but does not always document relevant details.
 - b. Does not document any examination of the patient and instead records "exam not necessary acc to patient".
 - c. Documents Dr. Lockman's plan as "Refer St. Boniface ER STAT".
4. Each of the ten patients subsequently attended at the St. Boniface Hospital Emergency Department in relation to the same complaint which the patient had presented to Dr. Lockman in his office, where:
 - a. In six of the ten cases, the Emergency Department physician elicited relevant history beyond that which Dr. Lockman recorded in his office record.
 - b. Each of the ten patients consented to an appropriate physical examination.
 - c. In each of the ten cases, the Emergency Department physician conducted a physical

- examination which could have been performed by Dr. Lockman in his office.
- d. In six of the cases, the Emergency Department physician ordered investigations which could have been ordered by Dr. Lockman.
 - e. In one case, the Emergency Department physician initiated a referral for specialist consultation which could have been made by Dr. Lockman.
 - f. Eight of the cases were triaged as Level 4 (less urgent) or Level 5 (non-urgent).
5. Three patients stated to the College that they did not decline a physical examination by Dr. Lockman on the visits in question, and one of these patients stated to the College that a physical examination had in fact occurred.
 6. In none of the cases that Dr. Lockman referred, did he provide to the Emergency Department a detailed summary of the information relevant to the referral.
 7. The Investigation Committee obtained the opinion of an independent family physician. This consultant opined that in each of the ten cases referred to above, Dr. Lockman's management and documentation fell below the standard of the profession based upon:
 - a. Dr. Lockman's minimal histories recorded,
 - b. Dr. Lockman's failure to conduct an appropriate physical examination of the patient,
 - c. Dr. Lockman's referral of the patient to St. Boniface Hospital Emergency Department when the patient's acuity did not warrant urgent or emergent intervention, and
 - d. Dr. Lockman's referral of the patient to an Emergency Department without providing adequate verbal or written information to the Emergency Department physician about the patient.

III. ON THESE FACTS, THE INVESTIGATION COMMITTEE RECORDS ITS DISAPPROVAL OF DR. LOCKMAN'S CONDUCT IN:

1. Failure to meet the standard of the profession when referring his patients to the Emergency Department for care in that he referred one or more patients to the Emergency Department:
 - a. without taking an adequate history and without performing an adequate physical examination or an adequate assessment of the patient to determine if the patient's acuity warranted emergent or urgent intervention.
 - b. without adequate written or verbal communication to the Emergency Department physician about the patient's condition, Dr. Lockman's diagnosis or differential diagnosis and the reason for the referral.
2. Documenting that one or more of Dr. Lockman's patients had declined a physical examination when one or more of the patients state that they did not decline an examination.

Dr. Lockman paid the costs of the investigation in the amount of \$20,000.00.