IN THE MATTER OF:	*The Regulated Health Professions Act,* C.C.S.M., c. R117, Part 8
AND IN THE MATTER OF:	DR. EARL SHELDON MINUK, a member of the College of Physicians and Surgeons of Manitoba
AND IN THE MATTER OF:	Amended Notice of Inquiry, dated May 20, 2026

INQUIRY PANEL:

Dr. Lewis Samuels, Chairperson

Dr. Werner van Dyk

Diana Yelland, Public Representative

REASONS FOR DECISION OF AN INQUIRY PANEL OF THE COLLEGE OF PHYSICIANS AND SURGEONS OF MANITOBA

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REASONS FOR DECISION OF THE INQUIRY PANEL

INTRODUCTION

On May 26, 2026, a hearing was convened before an Inquiry Panel (the "Panel") of the College of Physicians and Surgeons of Manitoba (the "CPSM") for the purpose of conducting an inquiry pursuant to Part 8 of *The Regulated Health Professions Act* C.C.S.M., c. R117 (the "Act") into charges against Dr. Earl Sheldon Minuk ("Dr. Minuk"), a member of the CPSM, as set forth in an Amended Notice of Inquiry dated May 20, 2026 (the "May NOI").

The May NOI charged Dr. Minuk with contravening the CPSM's Code of Ethics, Standards of Practice, and Practice Directions, with professional misconduct and/or conduct unbecoming, and/or with displaying a lack of skill, knowledge, or judgment in the practice of medicine.

Among other things, the May NOI states that:

1. On or about November 20, 2022, Dr. Minuk engaged in professional misconduct, conduct unbecoming a member, and/or contravened the Code of Ethics and/or the Practice Direction by breaching the undertakings he made to CPSM, in that Dr. Minuk:

    a. on or about June 30, 2022, signed an undertaking with CPSM which included the following requirements becoming conditions on his Certificate of Practice:

        i. Dr. Minuk would have a female attendant present as a chaperone at all times for any encounter with a female patient, whether in person or by telephone and whether in an institutional or non-institutional setting.

ii. At all times where the presence of the chaperone was required, Dr. Minuk would ensure that the chaperone:

(1) remained present for the entire encounter;

(2) carefully observed his encounters with patients;

(3) had an unobstructed view of personal encounters and the ability to listen to the encounter in the case of a telephone encounter; and

(4) Dr. Minuk would document the attendance of and identity of the chaperone in each patient record when the chaperone attended and require the chaperone to sign the record confirming the chaperone's attendance.

b. On or about November 20, 2022, Dr. Minuk saw Patient A in his clinic on a Sunday, when the clinic is normally closed and without a chaperone present.

2. From on or about September 1, 2021, until on or about February 10, 2022, Dr. Minuk violated his ethical obligations to Patient B, contravened the Code of Ethics of the CPSM and/or the Standards of Practice of Medicine, and/or committed acts of professional misconduct and/or engaged in conduct unbecoming a member by failing to maintain appropriate professional boundaries with Patient B, in that Dr. Minuk:

a. during clinical encounters, offered gifts and trips in the hope of entering into a personal, romantic, or sexual relationship with Patient B;

b. sent inappropriate communications via text to Patient B, such as asking her out on dates multiple times, including after she rejected Dr. Minuk's requests; and

c. made one or more phone calls to Patient B to ask her on a date.

3. By reason of one or more of the foregoing allegations, individually and cumulatively, Dr. Minuk demonstrated an unwillingness or inability to comply with the standards and meet the requirements of and/or be governed by CPSM.

The hearing proceeded before the Panel on May 26, 2026, in the presence of Dr. Minuk and his counsel, and in the presence of counsel for the Complaints Investigation Committee of the CPSM (herein the "CPSM"). Dr. Minuk, through his counsel, admitted his membership in the CPSM, and confirmed that the Panel had jurisdiction over the matter at issue. Dr. Minuk, through his counsel, also acknowledged service upon him of the May NOI.

Dr. Minuk waived the requirement that the hearing must begin within 120 days after the complaints were referred to the Inquiry Panel pursuant to subsection 116(2) of the Act. In addition, he waived the reading of the May NOI and admitted all Counts of the May NOI, and all particulars relating to those Counts as outlined therein. By doing so, he admitted the truth of all of the allegations and of the factual particulars in support of the allegations in the May NOI, and also admitted that the facts and matters outlined therein constituted a breach of the Code of Ethics, Standards of Practice, and Practice Directions of CPSM, professional misconduct, conduct unbecoming, and a lack of skill, knowledge, and judgment in the practice of medicine, as more particularly referred to in the May NOI.

The Panel reviewed and considered the following documents, all of which were filed as exhibits in the proceeding by consent:

1. The Amended Notice of Inquiry dated May 20, 2026 (Exhibit 1);

2. Statement of Agreed Facts (Exhibit 2);

3. Agreed Book of Documents (Exhibit 3);

4. Joint Recommendation (Exhibit 4); and

5. Joint Recommendation with handwritten revisions (Exhibit 5).

The Panel has considered the guilty plea of Dr. Minuk having regard to the exhibits, evidence filed, and the submissions of counsel for the CPSM and of counsel for Dr. Minuk.

On the basis of their review of the Statement of Agreed Facts and the guilty plea of Dr. Minuk, the Panel is satisfied that all of the charges set forth in the May NOI and the particulars contained therein have been proven on a balance of probabilities.

The CPSM and Dr. Minuk proceeded by way of a Joint Recommendation as to the disposition of this matter as follows:

- An Order reprimanding Dr. Minuk pursuant to subsection 126(1)(a) of the Act;
- An Order imposing conditions on Dr. Minuk's right to practice pursuant to subsection 126(1)(f) of the Act, which include:
    - an undertaking to retire from the practice of medicine effective 12:00 midnight on June 30, 2026 (the "Effective Date"), subject to the following exception:

- following the Effective Date, Dr. Minuk will be permitted an exception to continue practicing dermatology only for:

    1. laser treatment of vascular lesions; and

    2. assessment, management, and treatment of nevi (moles), skin cancer, and pre-cancerous lesions.

  - Dr. Minuk will undertake to never request permission from CPSM to increase the scope of his practice beyond the exceptions set out above.

  - Dr. Minuk will remain bound by the requirements of his undertaking signed April 17, 2023, which requires, among other things, the presence of a female chaperone for any encounters with female patients.

- An Order that Dr. Minuk pay to the CPSM costs of the investigation and inquiry in the amount of $10,000 pursuant to subsection 127(1)(a) of the Act, to be paid on or before June 26, 2026.

At the hearing of this matter, the Joint Recommendation was amended by consent of both CPSM and Dr. Minuk to replace the words "retire from" with "cease".

The Panel is satisfied that the Joint Recommendation as to Disposition is within the realm of reasonable and ought to be accepted by the Panel, though the Panel remains concerned with Dr. Minuk's level of contrition and future compliance. The Panel's specific reasons for its decisions are outlined below.

BACKGROUND

Dr. Minuk registered with CPSM on July 1, 1981. He received his certification for internal medicine in 1986, and for dermatology in 1988. He has been licensed to practice both internal medicine and dermatology since 1989.

Prior CPSM Investigations

Prior to the events and allegations giving rise to the May NOI, Dr. Minuk was previously criticized by the CPSM and provided with advice or reminders regarding respectful communication with patients, the accuracy of clinical documentation, and making inappropriate comments and violating professional boundaries with patients.

In 2009, Dr. Minuk's patient, Ms. E, declined further paid treatment at her follow-up appointment for her upper lip wrinkle treatment, as she was dissatisfied with the results. Ms. E alleged that Dr. Minuk responded by abruptly ending the appointment in a rude and unprofessional manner, which left her feeling offended and disrespected. The Investigation Committee investigated the complaint, identified as IC1258, and acknowledged that the interaction between Ms. E and Dr. Minuk deteriorated and emphasized the importance of clear, respectful communication with patients. The Committee reminded Dr. Minuk to ensure that his records fully documented discussions of treatment options and patient communications.

The Investigation Committee investigated a further complaint made against Dr. Minuk in or around 2014, identified as IC2518. Ms. D saw Dr. Minuk on September 5, 2014 for a spreading skin lesion, and upon Ms. D indicating the rash was in her pubic area and lowering her pants in his direction to show him the rash, Dr. Minuk commented

on her being naked. The Investigation Committee concluded that Dr. Minuk displayed a lack of professionalism and poor communication skills and was critical of him in this regard. The Committee found that Dr. Minuk would benefit from further specific training to gain communication patterns that respect dignity of patients. The Investigation Committee accepted an undertaking from Dr. Minuk signed April 18, 2016, requiring him to complete a self-directed learning program. Dr. Minuk completed the program and was subsequently released from the undertaking in October 2016.

The Investigation Committee investigated complaints against Dr. Minuk by his former employee from November 2018 to January 2020, identified as IC5237. The Investigation Committee concluded that Dr. Minuk engaged in unprofessional conduct, including by making inappropriate comments that caused his employee significant discomfort, and that his behaviour reflected a lack of appropriate professional boundaries in the workplace. The Committee criticized Dr. Minuk and noted that he was entering into a voluntary undertaking with CPSM whereby, among other things, he would not have any closed-door meetings with staff members.

After receiving a referral from the Registrar in December of 2020, the Investigation Committee conducted another investigation, identified as IC5425. The Registrar received concerns from Ms. G that suggested that Dr. Minuk had engaged in inappropriate communication and/or conduct with Ms. G and another patient, Ms. A. As a result of the Investigation, Dr Minuk sought out a psychiatrist to provide an independent assessment, who then provided recommendations on how to address the patient safety concerns. The Investigation Committee criticized Dr. Minuk and accepted an undertaking from him, which he signed June 30, 2022, that placed conditions and restrictions on his practice

pertaining to communications with patients, meetings with staff, and the requirement for a chaperone when attending to female patients (the "June 2022 Undertaking").

The Investigation Committee conducted a further investigation around 2021, identified as IC6776. Ms. D alleged that at her medical consultation with Dr. Minuk on October 5, 2021, regarding alopecia, Dr. Minuk had made insensitive comments to her about her hair loss and treated her in an unkind manner. In response to the complaint, Dr. Minuk apologized and said if he could, he would go back and do the encounter again, paying more attention to Ms. D's reaction. The Investigation Committee expressed serious concerns that the complaint arose after Dr. Minuk completed education in communication. The Committee was particularly critical of Dr. Minuk and advised that it expected him to have learned from both the prior education and this complaint.

History of Practice Conditions

The June 2022 Undertaking with CPSM was later amended by agreement and signed by Dr. Minuk on December 21, 2022 (the "December 2022 Undertaking"). The December 2022 Undertaking includes conditions and restrictions on Dr. Minuk's practice in several areas.

With respect to communicating with patients, the December 2022 Undertaking stated that (collectively referred to as the "Communication Conditions"):

- Dr. Minuk will not personally communicate with or meet with any of his patients, either in person or by telephone, outside of their attendance at any of his practice locations or any other institutional facilities in which he attends patients

except for communicating to any patient about that patient's health issues that cannot be reasonably dealt with in a regularly scheduled appointment.

- Dr. Minuk understands that the communication and meetings described in the undertaking do not include incidental or chance encounters in public spaces in the community which cannot be reasonably avoided and that whenever he communicates or meets with a patient outside of the clinic in such circumstances, he will document the details of any such communication in that patient's chart.

- If Dr. Minuk communicates with female patients via telephone, he will do so only during regular clinic hours and will follow the chaperone requirements that are also set out in the undertaking.

- Dr. Minuk will not personally communicate by text messaging, email, or via social media of any kind with any of his patients for any reason and he understands that such communications will be conducted by his staff on his behalf if such communication is required.

- Dr. Minuk understands that none of the above conditions prevent him from contacting a patient by whatever means necessary to address an emergent medical condition that cannot be addressed otherwise. When this occurs, applicable details must be entered into the medical record.

The December 2022 Undertaking also included a chaperone requirement which states the following (collectively referred to as the "Chaperone Requirements"):

- Dr. Minuk will have a female attendant present as a chaperone at all times for any encounter with a female patient, whether it is in person or by telephone and whether it is in an institutional or non-institutional setting, unless it is an emergent situation, in which case he will document the circumstances in the record and report them in writing to the Investigation Chair within 7 days.

- At all times where the presence of the chaperone is required, Dr. Minuk shall ensure that the chaperone:

    - remains present for the entire encounter;

    - carefully observes Dr. Minuk's encounters with patients; and

    - has an unobstructed view of personal encounters and the ability to listen to the encounter in the case of a telephone encounter.

- Dr. Minuk will document the attendance of and identity of the chaperone in each patient record which the chaperone attends, and he will require the chaperone to sign the record confirming the chaperone's attendance.

- Dr. Minuk will post conspicuous signage respecting the requirement for a chaperone in his office reception. The signage must be in a form and with content acceptable to the Investigation Committee.

- The chaperone may be in an employment relationship with Dr. Minuk but cannot be a member of his family or a person with whom he shares a close social relationship.

- Upon request, Dr. Minuk will produce to the Investigation Committee records evidencing compliance with the foregoing chaperone and signage requirements.

The December 2022 Undertaking also included a condition that Dr. Minuk agreed to not have closed-door meetings with any member of his staff without a third-party being present.

On April 3, 2023, CPSM wrote to Dr. Minuk requesting that he sign an amended December 2022 Undertaking, that would require him to display conspicuous signage regarding the Chaperone Requirements in his examination rooms as well in his office reception. Dr. Minuk signed the amended undertaking on April 17, 2023.

Investigation IC7964

In February of 2023, the Investigation Committee received a further referral from the Registrar regarding Dr. Minuk's conduct, identified as IC7964.

CPSM received information alleging that Dr. Minuk breached the Chaperone Requirements by seeing Patient A alone in his clinic on Sunday, November 20, 2022, when the clinic was closed. By letter dated December 1, 2022, CPSM informed Dr. Minuk of the concern and asked for his response.

In his response to the CPSM on December 8, 2022, through his legal counsel, Dr. Minuk stated that he had received and responded to texts from Patient A between 3:51 and 4:41 a.m. on November 18, 2022. While an attendant was not present for these text communications, he was communicating with Patient A about an emergency medical condition and, as such, the communication was permitted by the June 2022 Undertaking.

Dr. Minuk admitted to meeting with Patient A on November 20, 2022 for the same emergency medical condition, which resulted in an unintentional breach of the June 2022 Undertaking.

Additionally, CPSM discovered that Dr. Minuk had engaged in inappropriate behaviour and violated boundaries with Patient B, at the same time as Dr. Minuk was being investigated by CPSM for concerns about boundary crossing and inappropriate behaviour with another patient (IC5425). In particular, Dr. Minuk made phone calls to Patient B to ask her on a date, offered gifts and trips in the hope of entering into a personal or romantic relationship, and sent inappropriate text messages in which he sought Patient B's companionship even after she had rejected his request.

Patient B provided images of the text messages to CPSM, which included text messages from Dr. Minuk which he had not previously provided to CPSM when responding to this allegation. In Dr. Minuk's response to the CPSM on February 23, 2023, he stated he had no intention of withholding any text messages between him and Patient B from CPSM. He reiterated that he had already acknowledged that his communication with Patient B was improper and stated that his failure to review and provide certain text messages between him and Patient B was inadvertent.

THE JOINT RECOMMENDATION

The Panel's task is to determine the appropriate disposition pursuant to section 126 of the Act. The Panel has had the benefit of a Joint Recommendation as to Disposition made by counsel for CPSM and counsel for Dr. Minuk.

In assessing whether or not the Joint Recommendation as to Disposition should be accepted and which Order or Orders ought to be granted pursuant to section 126 of the Act, the objectives of such Orders need to be considered. On the basis of a review of the relevant authorities, those objectives include but are not limited to:

(a) The protection of the public. Orders under section 126 of the Act are not simply intended to protect the particular patients of the physician involved or those who are likely to come into contact with the physician, but are also intended to

protect the public generally by maintaining high standards of competence and professional integrity among physicians;

(b) The punishment of the physician involved;

(c) Specific deterrence, in the sense of preventing the physician from committing similar acts of misconduct in the future;

(d) General deterrence, in the sense of informing and educating the profession generally as to the serious consequences which will result from breaches of recognized standards of competence and ethical practice;

(e) Protection of the public trust in the sense of preventing a loss of faith on the part of the public in the medical profession's ability to regulate itself;

(f) The rehabilitation of the physician involved in appropriate cases, recognizing that the public good is served by allowing properly trained and educated physicians to provide medical services to the public;

(g) Proportionality between the conduct of the physician and the orders granted under section 126 of the Act; and

(h) Additional factors which are relevant in this case are:

(i) The nature and gravity of the misconduct;

(ii) Dr. Minuk's prior pattern of professional boundary violations;

(iii) The presence or absence of mitigating or aggravating circumstances; and

(iv) The role of Dr. Minuk in acknowledging what had occurred.

As outlined earlier in these Reasons, all of the charges outlined in the May NOI have been proven. Dr. Minuk is therefore guilty of contravening the Code of Ethics, Standards of Practice, and Practice Directions of CPSM, professional misconduct or conduct unbecoming, and has demonstrated a lack of skill, knowledge, and judgment in the practice of medicine.

Dr. Minuk's misconduct is serious and concerning. As noted in the submissions of CPSM, Dr. Minuk's misconduct involved professional boundary violations with patients, which strike at the core of the trust that is expected in the physician-patient relationship.

The events that took place between Dr. Minuk and Patient A and Patient B were not isolated occurrences. As discussed further above, Dr. Minuk has a history of professional boundary violations which led to the communication and chaperone conditions in his 2022 undertaking with the CPSM.

With respect to Patient A, Dr. Minuk's actions were in breach of his undertaking with CPSM that was meant to address his prior boundary violations. However, the Panel acknowledges the submission that Dr. Minuk's breach occurred in the context of Patient A's emergent medical condition, and that Dr. Minuk provided his chart information regarding this visit.

As a mitigating factor, Dr. Minuk has admitted all counts of the particulars, which has saved CPSM time for a hearing and a need for witnesses. Dr. Minuk has also voluntarily sought [redacted] to address his ongoing professional boundary issues, which supports the goal of rehabilitation.

The seriousness of Dr. Minuk's admitted professional misconduct, among other breaches of professional standards, must be reflected in the Orders granted by the Panel.

The fundamental and primary purpose of an Order made under section 126 of the Act is the protection of the public, including the protection of patients and others with whom the physician will come into contact, and the protection of the public more generally by the maintenance of high standards of competence and integrity among physicians.

A joint submission on penalty must satisfy the fundamental penalty principles and fall within the spectrum of potential penalties, see *College of Physicians and Surgeons of Ontario v. Alexander,* 2022 ONPSDT 41.

The Panel was reminded that the Panel should not depart from a Joint Recommendation unless the proposed recommendation is so markedly out of line with the circumstances of the case that implementing it would bring the administration of justice into disrepute, or is otherwise contrary to the public interest, see *R. v. Anthony-Cook*, 2016 SCC 43.

In accordance with the regulatory authority granted under the Act, the CPSM may mandate that a registrant's scope of practice be restricted to specific days of the week and designated business hours. This directive would serve to ensure that the registrant operates only within a controlled environment where professional conduct can be monitored. Any failure to adhere to such stipulated conditions would constitute a breach of the undertaking, and such a breach may be viewed as grounds for the immediate suspension of the registrant's certificate to practice, with no option for the renewal of said certificate while it remains under suspension by the CPSM. The Panel would have preferred that the joint recommendation explicitly prohibit Dr. Minuk from performing

emergency or emergent assessments, as well as any patient assessments during weekends or after-hours.

However, the Panel accepts the parties' submissions that the Joint Recommendation falls within the spectrum of potential penalties. The objectives and purpose of an Order under section 126 are met by the Joint Recommendation, in that:

(a) An Order of reprimand pursuant to subsection 126(1)(a) of the Act is a formal denunciation of Dr. Minuk's misconduct;

(b) Imposing conditions on Dr. Minuk's entitlement to practice pursuant to subsection 126(1)(f) of the Act, including a requirement that Dr. Minuk cease the practice of medicine subject to specific limitations, is a form of punishment and provides a general and specific deterrent. It holds Dr. Minuk accountable for his conduct, and takes into consideration his prior history of boundary violations with CPSM. It also serves as a general deterrent in that it imposes serious punishment for serious misconduct, which serves as a warning and education to the public and other physicians as to the consequences of such misconduct. It also maintains public confidence and trust, as CPSM will restrict a member's practice to uphold public trust and standards;

(c) The fundamental objective of the CPSM, as a self-regulated body, is the protection of the public. This objective will be fulfilled by the extensive and detailed conditions and limitations to be imposed upon Dr. Minuk's certificate of practice. The conditions and limitations are put forward to address and

remediate the deficiencies in Dr. Minuk's conduct which were of grave concern to CPSM, and to ensure that patients who attend upon Dr. Minuk in the future will receive competent treatment in conformity with the standards of the profession;

(d) The narrow scope of practice and continued use of the undertaking signed April 17, 2023, including the communication and chaperone conditions, will, assuming compliance, prevent further risk to the public;

(e) The facts of this matter, as set out in detail above, support a serious penalty. Costs are warranted given Dr. Minuk's prior complaints for boundary issues;

(f) Dr. Minuk continues to [redacted], which supports the goal of rehabilitation;

(g) The Joint Recommendation proposed and accepted by the Panel will support public confidence in the ability of the profession to regulate itself; and

(h) The Joint Recommendation agreed to by Dr. Minuk reflects his acceptance of his guilty in these matters and commitment to self-regulation, which spared the CPSM the expense of a full inquiry and is a mitigating factor.

In assessing the appropriateness of the Joint Recommendation in relation to the nature and extent of Dr. Minuk's misconduct, and the fundamentally important objective of the protection of the public, the Panel reviewed the authorities submitted to it by the parties and specifically considered the penalties imposed in other cases involving somewhat similar circumstances. The Panel is satisfied that the Joint Recommendation, which includes a reprimand and undertaking that Mr. Minuk will cease the practice of

the protection of the public, the Panel reviewed the authorities submitted to it by the parties and specifically considered the penalties imposed in other cases involving somewhat similar circumstances. The Panel is satisfied that the Joint Recommendation, which includes a reprimand and undertaking that Mr. Minuk will cease the practice of medicine, subject to limited exceptions, is within a reasonable range of outcomes as defined by the authorities before the Panel.

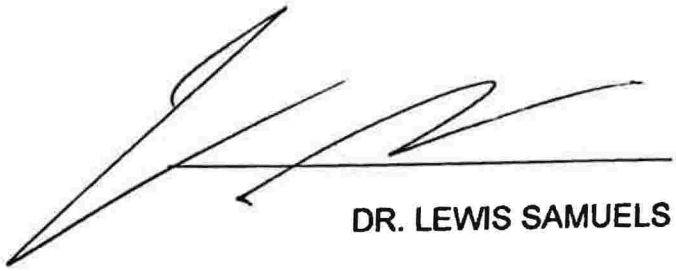
In this case, the Panel recognizes that counsel for CPSM and counsel for Dr. Minuk are in the appropriate positions to arrive at a Joint Recommendation that reflects the interests of both the public and Dr. Minuk. The Panel believes that by accepting and implementing the Joint Recommendation, a properly informed member of the public would be satisfied that the medical profession is able to properly regulate itself.

In this case, the Panel is satisfied that the Joint Recommendation serves to protect the public interest. The Joint Recommendation does not bring the administration of justice into disrepute, nor is otherwise contrary to the public interest. A properly informed and reasonable member of the public should recognize that the Joint Recommendation fulfills the objectives of Orders under section 126 of the Act.

CONCLUSION

Based on all of the foregoing, the Panel accepts the Joint Recommendation as to Disposition made by the CPSM and Dr. Minuk. The Panel hereby issues an Order, as more particularly set forth in the Resolution and Order issued concurrently herewith and attached hereto.

DATED this 30 day of June, 2026.



DR. LEWIS SAMUELS

Chairperson of the Inquiry Panel

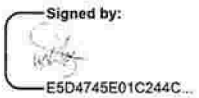
DR. WERNER VAN DYK

Member of CPSM

DIANA YELLAND

Public Representative

Chairperson of the Inquiry Panel



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