

Summary

Registrant:	FOROTAN FARD, Noushin* (Registration number 78302)
Type of case:	Conduct (Initial)
Outcome:	Fitness to practise impaired: registration suspended for 8 months, with resumed hearing
Date:	29 October – 2 November 2007

Miss Forotan Fard made comprehensive admissions to allegations, in the face of the threat of legal proceedings in respect of her treatment of a patient on 24 March 2005, that she had retrospectively completed a form FP 17 DC and that such action was dishonest and intended to mislead. Miss Forotan Fard then made an entry in the patient's computerised records on 7 July 2005 which bore the date 24 March 2005, and printed a treatment plan estimate on 6 October 2005. Miss Forotan Fard admitted that, in respect of all of the matters complained of, her conduct was inappropriate, unprofessional and likely to bring the profession into disrepute.

In finding her fitness to practise to be impaired by her conduct, the Committee made it clear that dishonesty is a significant shortfall in the behaviour of any dental professional, and suspended her registration for a period of eight months. This sanction took into account that Miss Forotan Fard made comprehensive admissions before the Committee and that her unequivocal acknowledgement of her dishonesty showed insight. While it considered her dishonesty wholly unacceptable, the Committee acknowledged that it was not for direct personal financial gain, and did not bear the hallmark of any sophistication in its execution. Moreover, there were no allegations related to her clinical competence, and she had fully engaged with the disciplinary proceedings.

The Committee directed that the case would be resumed for a review prior to the end of the period of suspension, and Miss Forotan Fard was advised that it would assist her if at the resumed hearing she could provide:

- 1) Satisfactory evidence of continuing professional development
- 2) Evidence that she had familiarised herself with the NHS Rules and Regulations, and the GDC Standards Guidance
- 3) Evidence that she had taken steps to establish a relationship with a professional mentor to whom she could turn for guidance and advice

Summary

Registrant:	KALHOR SADIGHI, Meroe Miranda (Registration number 84340)
Type of case:	Conduct (Initial)
Outcome:	Serious professional misconduct: judgement postponed for 12 months
Date:	6 - 8 November 2007

Between January and March 2005, Miss Kalhor Sadighi had provided treatment to one patient that included the extraction of her upper left lateral incisor and the subsequent provision of a 3-unit fixed bridge. Miss Kalhor Sadighi admitted that prior to the treatment she failed to take appropriate radiographs and so was not in a position to make a proper assessment of the difficulty of the extraction, or the suitability of the abutment teeth to support the proposed

bridge. Furthermore, Miss Kalhor Sadighi admitted that she failed to record in the patient's notes the reasons for an amoxicillin prescription.

The Committee has found that Miss Kalhor Sadighi did not explain to her patient that the treatment proposed would include filing down the healthy adjacent teeth which would support the proposed bridge, nor did she explain the alternative treatment options which may have included provision of a denture or an adhesive bridge. Consequently, she failed to obtain informed consent from the patient

Although the Committee heard from an expert witness that the work had been completed to acceptable standards, it found that Miss Kalhor Sadighi's failings could have resulted in harm to your patient and so found her guilty of serious professional misconduct.

In determining the appropriate sanction, the Committee was conscious that at the time these events took place, Miss Kalhor Sadighi had only recently commenced working in the UK and had little experience of working under NHS regulations, and it had heard of no further complaints against her. The Committee also noted that whilst Miss Kalhor Sadighi gave evidence there were admissions of dishonesty in fabricating a section of the patient's records, this was not an allegation in the heads of charge and could not be taken into account against her during these proceedings.

The Committee determined to postpone judgment for a period of twelve months, and Miss Kalhor Sadighi was advised that at the resumption of the case she should give evidence of undertaking a programme of education and/or training to include radiography, consent and record keeping. She was also advised to familiarise herself with all relevant NHS regulations and guidance, taking particular account of the ethical and other guidance published by the General Dental Council, and to engage with one or more professional bodies such as the BDA or the FGDP(UK).

Summary

Registrant:	SOLLO, Alexi (Registration number 39363)
Type of case:	Conduct (Resumed following postponed judgement for 12 months)
Outcome:	Case concluded following postpones judgement
Date:	9 November 2007

In October 2006 Mr Sollo had appeared before the Professional Conduct Committee and was found guilty of serious professional misconduct on the basis of the wholly inadequate cross-infection control procedures operating within his practice. Mr Sollo had allowed his knowledge of cross-infection control to become seriously out of date. On the basis of a substantial set of undertakings given by Mr Sollo, the Committee allowed him to continue in practise and postponed judgment for a period of twelve months.

At the resumed hearing on 9 November 2007 the Committee heard evidence about the practice inspections which had been carried out over the twelve months of the postponed judgment period under the Adverse Risk Member (ARM) Programme managed by Dental Protection Limited. It accepted that Mr Sollo co-operated fully with that scheme, that he had continued to take advice, and that he was engaging with professional colleagues. Mr Sollo also provided evidence of relevant continuing professional development.

The Committee was satisfied that Mr Sollo had honoured the undertakings which he gave in October 2006, and that he complied with the recommendations made by the Committee. The Committee also noted that he would remain on the ARM Programme for at least a further year, during which time his practice would be kept under review. The Committee acknowledged the professional way in which Mr Sollo had remedied the deficiencies in his practice and commended the motivation and enthusiasm he had displayed. On that note, the Committee concluded the case.

Summary

Registrant:	CARLESON, Joakim Anders* (Registration number 79961)
Type of case:	Conduct (Initial)
Outcome:	Fitness to practise impaired: erased with immediate suspension
Date:	13 – 14 November 2007

Although Dr Carleson was neither present nor represented at the hearing, the Committee determined that it was appropriate and just to continue in his absence. The allegations against Dr Carleson included:

- inadequate treatment that he provided to one patient during the period between June and December 2005;
- seeking the patient's consent to a change in the treatment plan while she was under the influence of Diazepam; and
- an article written by Dr Carleson and published in the journal "Private Dentistry" which was likely to damage both the reputation of a fellow dental practitioner and to bring the dental profession into disrepute.

The Committee heard evidence from an expert witness, a former colleague and the patient concerned, all of whom were credible witnesses. The Committee was satisfied that the bridges and a denture provided by Dr Carleson were poorly designed and ill-fitting, with the upper bridge causing the patient pain and loss of sleep for several weeks. The denture also caused pain each time it was fitted or removed. The Committee found that the occlusal scheme adopted by Dr Carleson was highly disordered, and as such was adverse to the patient's dental health. The torquing forces caused by the design of the partial denture, along with the undue force required during insertion and removal, were also adverse to the patient's dental health.

The Committee accepted the evidence of the General Dental Council's expert witness that the upper bridge was "frankly terrible" and that the provision of this particular type of bridge together with an upper denture was "bizarre". The Committee also accepted the expert evidence that any such discomfort as may be caused by such appliances should not last more than two or three days and should not in any event cause any loss of sleep.

The upper bridge was difficult to clean and the Committee accepted the expert evidence that cleanliness was of paramount importance in this patient who had a history of periodontal disease. The Committee accepted that the patient's dental health was further jeopardised by the advice that Dr Carleson gave to the patient that she should not brush her teeth for a month to allow the gum to grow over the lower bridge after it was fitted.

More importantly, the upper bridge caused the patient to develop a speech defect which was brought about by the repositioning of her front teeth. The Committee accepted the expert

evidence that this rarely occurs and can normally be rectified by a change in the design of the bridge. There was no evidence to suggest that Dr Carleson made any attempt to make any such changes. Instead he told the patient to adapt to the bridge.

The Committee found that Dr Carleson had clearly failed to put the interests of the patient first and accordingly found his fitness to practise impaired by reason of his conduct.

It was brought to the attention of the Committee that Dr Carleson had been the subject of two previous warning letters from the GDC for different matters, and had been before the Professional Conduct Committee in September 2007 at which hearing he had been suspended for six months with various recommendations concerning his conduct that should be addressed prior to a review to be held before the end of that suspension.

In reaching a decision on sanction the Committee took into account both the circumstances of the current appearance, the previous history of the respondent, and the attitude he displayed to the workings and rationale of the disciplinary process. It was clear that following the previous hearing Dr Carleson had displayed a lack of insight and a lack of willingness to engage with the Council's regulatory processes, or to take the opportunity to rejoin the Register by fulfilling the actions recommended by the PCC at that time.

The Committee determined that the only appropriate and proportionate sanction was the erasure of Dr Carleson's name from the Dentists Register, with immediate suspension.

Summary

Registrant:	OKUNIEK, Peter Gunter (Registration number 82652)
Type of case:	Conduct (Resumed following postponed judgement for 6 months)
Outcome:	Adjourned part-heard (for no longer than 3 months)
Date:	20 November 2007

When Mr Okuniek appeared before the Committee in March 2007 he was found guilty of serious professional misconduct on a range of allegations relating to his failure to comply with financial credit agreements, and at the time of that finding he had still not reached a workable solution with the Deutsche Apotheker-und Ärztebank ("Deutsche Apotheker"). These were highly important financial matters that related both to Mr Okuniek's personal and business life. At that hearing Mr Okuniek had represented himself.

The Committee found that in failing to address the issue of his outstanding debt to the Deutsche Apotheker, and in particular the Order for Registration by the High Court (Queen's Bench Division) which was served on Mr Okuniek on 30 May 2006, he had acted inappropriately and unprofessionally, and in a way which is liable to bring the dental profession into disrepute. Given that the safety of the public was not an issue, the Committee postponed judgment for a period of nine months. The Committee made it clear to Mr Okuniek that at the resumed hearing it expected to see evidence that he had taken positive steps towards finding a workable solution with Deutsche Apotheker. The Committee also expected Mr Okuniek to show an improved understanding of the wider aspects of professionalism, as it affects all aspects of his life, and to be conversant with ethical guidance contained in *Standards for Dental Professionals*.

At the resumption of the hearing, on 20 November 2007, Mr Okuniek's defence counsel requested an adjournment. The Committee voiced its concern that following the advice given

to Mr Okuniek at the previous hearing, he had instructed at a very late stage leading to his initial conference with his defence counsel taking place only the evening before the hearing. The Committee was also concerned that all the relevant information had not yet been obtained. However, with a considerable degree of reluctance, the Committee agreed to adjourn the hearing for a period not exceeding three months, with a warning to Mr Okuniek that he should make the most rigorous attempts to obtain all further relevant information prior to the resumption of the hearing.

Summary

Registrant:	ALI, Karim* (Registration number 57242)
Type of case:	Conviction
Outcome:	Fitness to practise impaired by conviction: reprimanded
Date:	21 November 2007

On 5 June 1996 Mr Ali was convicted on four counts of obtaining property by deception and on 26 July 1996 was sentenced to two years imprisonment.

The Committee heard that Mr Ali was convicted on his own plea of guilty of a series of fraudulent claims for housing benefit which took place over a period of no less than 18 months between 1992 and 1994, and found his fitness to practise impaired by reason of his conviction.

The Committee noted that the most recent guidance for disposal in cases of this type would justify a serious sanction, including erasure, and that to impose such a sanction for Mr Ali's offences was unlikely to be capable of effective challenge. However, the Committee took into account of the following matters:

1. The convictions were recorded against Mr Ali over eleven years ago, and there was no evidence of any subsequent dishonest behaviour.
2. It was conceded by the Council that the failure to bring these matters before the Committee earlier was not a matter for which Mr Ali bore any responsibility.
3. Mr Ali had demonstrated considerable insight into, and expressed remorse for, his dishonest conduct.
4. In the period between Mr Ali's release from custody and the hearing, he had shown himself to be a capable and trustworthy practitioner who played an important role in the provision of general dental services to several thousand patients in a socially deprived part of London. It was evident that any disposal which would affect such provision would have a profoundly detrimental effect on that community.
5. Mr Ali had also contributed significantly and consistently to the wider community by giving his time, financial resources and experience.
6. The Committee reviewed a large number of varied testimonials from colleagues, patients and others. Clearly the authors, including officers of the relevant Primary Care Trust, were supportive of him in the full awareness of his conviction.

The Committee found the circumstances in this case to be highly unusual, and in acting proportionately by balancing the interests of the profession and the public against Mr Ali's own

interests, concluded that it could take an exceptional course and concluded the case with a reprimand.

Summary

Registrant:	WILKINSON, Alan Stuart* (Registration number 3786 - hygienist)
Type of case:	Conduct
Outcome:	Not fitness to practise: no case to answer
Date:	26 November 2007

Mr Wilkinson answered allegations of (a) carrying out tooth-whitening when there were no dentists in his practice and of (b) misleading the public by displaying advertising flyers that could have led people to believe that he was a dentist.

A significant number of the allegations were withdrawn by the GDC, and on the remaining allegations the Committee accepted Mr Wilkinson's submissions at the end of the prosecution case that there was no case to answer.

The Committee found that the wording used on the flyers was capable of being interpreted in two ways, and the Council had no way of proving that the document was in the public domain before Mr Wilkinson had already made arrangements to have a dentist or dentists in the practice. At times some of the evidence was confused and to a degree contradictory, so the Committee was unable to rely on it.

The Committee therefore found Heads of Charge 11, 13, 14 and 15 are not capable of being proved on the evidence adduced, and the remaining Heads of Charge 9, 10 and 12 (which Mr Wilkinson admitted) were not on their own capable of sustaining the allegation that his fitness to practise is impaired.

The Interim Order imposing conditions on Mr Wilkinson was hereby revoked. However, the Committee made it clear that this did not mean that Mr Wilkinson was entitled to engage in the practise of tooth whitening. Nor did it imply that Mr Wilkinson may treat a patient before that patient has been seen by a dentist who has carried out a full mouth assessment and provided a treatment plan.

Summary

Registrant:	HUSSAIN, Faris Hazim (Registration number 58546)
Type of case:	Conduct
Outcome:	Adjourned part-heard, to resume in April 2008
Date:	23 - 30 November 2007

Mr Hussain faces allegations concerning the treatment given to one patient during the period 1994 to February 2003. The case did not reach the end of stage one and was adjourned until a date in April 2008.