



MEDICAL PRACTITIONERS DISCIPLINARY TRIBUNAL

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DECISION NO.: 129/00/62D

IN THE MATTER of Section 104 of the Medical
Practitioners Act 1995

AND

IN THE MATTER of disciplinary proceedings against
GRAHAM KEITH PARRY
medical practitioner of Whangarei

BEFORE THE MEDICAL PRACTITIONERS DISCIPLINARY TRIBUNAL

BY ORDER dated Friday 8 September 2000.

TRIBUNAL: Mrs W N Brandon - Chair
Mr R W Jones, Dr F McGrath, Dr B J Trenwith, Mrs H White
(Members)

APPEARANCES: Being an order made pursuant to Section 104(3) of the Act, there were no appearances by counsel .

ORDER OF THE TRIBUNAL

TO: Dr Graham Keith Parry by his counsel, Mr C J Hodson QC/Ms J A Gibson

AND TO: The Director of Proceedings/Mr M F McClelland

AND TO: The Medical Council of New Zealand

TAKE NOTICE THAT pursuant to Section 104(1)(a), (2) and (3) of the Medical Practitioners Act 1995 (“the Act”) **AND** notice of disciplinary proceedings against him having been given to Dr Graham Keith Parry on or about 12 July 2000 by notice of a Charge, and on or about 1 September 2000 by notice of an amended Charge **AND** the Tribunal being satisfied that it is necessary or desirable to do so having regard to the health or safety of members of the public, the Tribunal

HEREBY ORDERS:

1. **THAT** the registration of Dr Graham Keith Parry be suspended until the disciplinary proceedings in respect of which the Notice was issued have been determined.

2. **THAT** this Order is to take effect immediately.

3. **FOR THE FOLLOWING REASONS:**

THE Charge against Dr Parry alleges that he erred in his management and treatment of his patient, Colleen Poutsma of Paihia between 22 August 1997 and 9 February 1998 in that:

1. He failed to carry out an adequate clinical assessment and examination of his patient on 22 August 1997; and/or
 2. Performed an unnecessary and/or clinically unjustified cone biopsy on his patient on 19 January 1998; and/or
 3. Despite receiving a pathology report on or about 9 January 1998 confirming the diagnosis of invasive carcinoma he did not refer his patient to the Oncology Unit at National Women's Hospital, Auckland for further treatment until 9 February 1998.
 4. The conduct alleged amounts to disgraceful conduct in a professional respect and paragraphs 1 to 3 inclusive either separately or cumulatively are particulars of that disgraceful conduct.
4. **ON** his behalf, his counsel, Mr C J Hodson QC has entered a plea of not guilty to the Charge of disgraceful conduct in a professional respect.
5. **THE** Charge against Dr Parry was originally laid at the level of professional misconduct, a charge in the mid-range of the level of penalties available to the Tribunal under Section 109 of the Act. However that Charge has recently been 'upgraded' to one of disgraceful conduct in a professional respect, the most serious of the penalties available to the Tribunal.

6. **IN** the event that the Tribunal ultimately determines that Dr Parry is guilty of the Charge now laid against him, he is at risk of being struck off the Medical Register pursuant to Section 110 of the Act.

7. **FOLLOWING** a request from the Director of Proceedings, and because Mrs Poutsma is now seriously ill and may not survive until the hearing of the Charge scheduled to commence on 9 October 2000, or she may be unable to attend the hearing due to her illness, a special hearing of the Tribunal was convened at St Joseph's Mercy Hospice in Auckland for the purposes of hearing Mrs Poutsma's evidence on 7 September 2000.

8. **AT** the hearing Mr Hodson indicated that while Dr Parry denied the allegations made in relation to his care and treatment of Mrs Poutsma, he did not contest the facts set out in the Particulars of the Charge, and he accepted that his management of Mrs Poutsma's care fell below an acceptable standard. He denied that his conduct amounted to disgraceful conduct in a professional respect.

9. **HAVING** now heard Mrs Poutsma's evidence, and Dr Parry's acceptance of the factual evidence giving rise to her complaint, the Tribunal is satisfied that serious issues have been raised as to Dr Parry's clinical judgment and the safety of his professional practise.

10. **THE** evidence given to the Tribunal at the special hearing, in conjunction with the concessions made on behalf of Dr Parry, together with evidence previously provided to the Tribunal by the Director of Proceedings, and the fact that Mrs Poutsma's complaint arises in the context of Dr Parry's practice as a specialist gynaecologist and obstetrician, has

persuaded the Tribunal that Dr Parry's registration should be suspended until the disciplinary proceedings have been determined.

11. **THE** Tribunal is aware that a considerable amount of publicity has been generated as a result of Mrs Poutsma's complaint, and, in fairness to Dr Parry, it has endeavoured to disregard that publicity. But equally, it would be irresponsible of the Tribunal to ignore reports of a number of other possible complaints against Dr Parry (perhaps as many as 35 - 40), and it is clear that there is now a high level of alarm present in the Northland community as a result of Dr Parry's being permitted to continue his practise pending the hearing and determination of this Charge.
12. **DR** Parry himself must be under a considerable degree of stress as a result of the publicity and scrutiny he now faces, and, in addition, he was unable to attend the special hearing as a result of a family bereavement. All of these matters cumulatively also raise concerns about the health and safety of members of the public.
13. **THERE** can be no doubt that those women, who in practical terms have no choice about receiving care and treatment from Dr Parry must be, rightly or wrongly, concerned for their safety. The terms of Section 104(1) are very clear; the Tribunal must have regard to the health and safety of members of the public. It cannot be conducive to the health and continued well-being of patients, or to good outcomes, if they are forced to have their medical care including surgery entrusted to a doctor with whom they have concerns or whom they feel they are unable to trust.

14. **THE** Tribunal is aware that Dr Parry's practise is under close supervision and scrutiny by the Medical Council, but it is no longer satisfied that this adequately addresses the issues of public safety which have now arisen as a result of the admissions made on his behalf, and the increased level of the Charge laid against him with the attendant possibility that he may ultimately be struck off the register if the Charge is proven.
15. **THEREFORE**, for all of these reasons, and in all of the circumstances which are now present, the Tribunal is satisfied that it is necessary and desirable, having regard to the need to protect the health and safety of members of the public to suspend Dr Parry until the determination of the Charge.
16. **IN** making this order the Tribunal emphasises that it is not making any judgment or decision about the outcome of this Charge. It is simply the case that it is satisfied that it is in the public interest, and possibly also in Dr Parry's interest, that he be suspended from practising until the Charge is determined.
17. **THE** Tribunal's decision is unanimous.

ADVICE TO DR PARRY:

PURSUANT TO Section 105 of the Act you may apply to the Tribunal for a revocation of this Order at any time. Any such application must be made in accordance with the requirements of Section 105. Your counsel will advise you regarding your rights in this regard.

DATED at Auckland this 8th day of September 2000.

W N Brandon

CHAIR

Medical Practitioners Disciplinary Tribunal