

**DISCIPLINE COMMITTEE
OF THE COLLEGE OF NATUROPATHS OF ONTARIO**

PANEL:

Shelley Burns, ND – Chair
Jordan Sokoloski, ND
Vaishna Sathiamoorthy, ND
Samuel Laldin
Dianne Delany

BETWEEN:

COLLEGE OF NATUROPATHS OF ONTARIO

- and -

MICHAEL YARISH

) REBECCA DURCAN for the
) College of Naturopaths of Ontario
)
)
)
) MARIO DELGADO for
) Michael Yarish
)
)
) LUISA RITACCA, Independent
Legal Counsel
)
) Heard: July 25, 2019
)

DECISION AND REASONS

This matter came on for hearing before a panel of the Discipline Committee on July 25, 2019 at the College of Naturopaths of Ontario (“the College”) at Toronto.

The Allegations

The allegations against Michael Yarish (the “Member”) as stated in the Notice of Hearing dated November 5, 2018 are as follows:

1. At all relevant times, Dr. Michael Bohdan Yarish, ND (the “Member”) has been a member of the College of Naturopaths of Ontario (the “College”).
2. At all relevant times, the Member met the Therapeutic Prescribing and the Intravenous Infusion Therapy (IVIT) Standards of Practice.

3. The Member is the owner of The Lakeside Clinic Center for Integrated Medicine in Barrie, Ontario (the “Clinic”).

Administration of B12 Injections

4. On or about August 7, 2017, the Member administered an injection of Vitamin B12 to Persons 1, 2 and/or 3 (the “Injections”).
5. Persons 1, 2, and/or 3 worked at the Clinic.
6. Persons 1, 2, and/or 3 were together in the room when the Member administered the Injections.
7. It is alleged that:
 - a. The Member did not consider one or more of Persons 1, 2, and/or 3 as a patient and/or did not have a naturopath-patient relationship;
 - b. The Member did not obtain the health history of Persons 1, 2, and/or 3 prior to administering the Injections;
 - c. The Member administered the Injections without a Sharps container immediately available;
 - d. The Member administered the Injection to Person 3 using the needle used for Person 1 or Person 2;
 - e. The Member was immediately aware that he had administered the Injection to Person 3 using the needle used for Person 1 or Person 2; and/or
 - f. The Member did not create an incident report following his administration of the Injection to Person 3 using the needle used for Person 1 or Person 2.
8. It is alleged that the Member did not administer the Injections in accordance with Regulation 168/15.
9. The following are standards of practice of the profession:
 - a. A member must have a naturopath-patient relationship with the patient before performing a controlled act and must record the patient’s health history (s. 3(1) para 1 of Regulation 168/15 and/or *Performing Authorized Acts Standard of Practice* of the College);
 - b. A member must ensure that appropriate infection control procedures are in place at all times and that the controlled act is performed in an environment that is clean, safe, private and comfortable to the patient (s. 3(1) para 5 of Regulation 168/15);
 - c. A member must maintain appropriate therapeutic relationships and professional boundaries (*Therapeutic Relationships and Professional Boundaries Standard of Practice* of the College);
 - d. A member must incorporate routine practices that minimize the chance of, or spread of infection (*Standard Infection Control Standard of Practice* of the College); and/or
 - e. A member must ensure that an incident report is prepared in the event of an incident involving exposure to biomedical material that poses a risk of transmission (*Standard Infection Control Standard of Practice* of the College).
10. It is alleged that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991* (the “Code”) as set out in one or more of the following

paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:

- a. **Paragraph 1** (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession);
 - b. **Paragraph 36** (Contravening, by act or omission, a provision of the Act, the Regulated Health Professions Act, or the regulations under either of those acts); and/or
 - c. **Paragraph 46** (Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional).
11. In addition, it is alleged that the above conduct constitutes professional misconduct pursuant to subsection 4(3) of the *Naturopathy Act, 2007*.

Failing to install Laminar Air Flow Hood

12. It is alleged that between approximately March 2, 2017 and March 22, 2018 the Member did not install and/or utilize a Laminar Air Flow Hood when compounding for IVIT at the Clinic.
13. It is alleged that the College requires all sterile compounding for IVIT to be performed in a Laminar Air Flow Hood.
14. It is alleged that between approximately March 2, 2017 and March 22, 2018, the Member did not maintain the required equipment records related to the Laminar Air Flow Hood.
15. It is alleged that between approximately March 2, 2017 and March 22, 2018, the Member did not compound for IVIT in accordance with Regulation 168/15.
16. The following are standards of practice of the profession:
 - a. ***Withdrawn***;
 - b. A member must ensure that the controlled act of compounding a drug designated in Table 5 is performed in an aseptic preparation area using aseptic techniques to minimize the risk of contamination (s.11(2) para 4 of Regulation 168/15);
 - c. A member must maintain identified equipment records (*Equipment Records Standard of Practice* of the College).
17. It is alleged that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991* (the “Code”) as set out in one or more of the following paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:
 - a. **Paragraph 1** (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession);
 - b. **Paragraph 23** (Failing to keep records in accordance with the standards of the profession);
 - c. **Paragraph 36** (Contravening, by act or omission, a provision of the Act, the Regulated Health Professions Act, or the regulations under either of those acts); and/or
 - d. **Paragraph 46** (Engaging in conduct or performing an act relevant to the

practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional).

18. In addition, it is alleged that the above conduct constitutes professional misconduct pursuant to subsection 4(3) of the *Naturopathy Act, 2007*.

Leaving the Clinic during IVIT sessions

19. It is alleged that prior to March 2018 the Member would leave the Clinic while IVIT was being administered to patients.
20. It is alleged that the Member did not arrange for appropriate supervision of his patients who were undergoing IVIT while he was not in the Clinic.
21. It is a standard of practice of the profession to not leave the physical building when IVIT is being administered to patients and/or ensure that when IVIT is being administered that patients are always appropriately supervised.
22. It is alleged that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the Health Professions Procedural Code, being Schedule 2 to the *Regulated Health Professions Act, 1991* (the “Code”) as set out in one or more of the following paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:
- a. **Paragraph 1** (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession); and/or
 - b. **Paragraph 46** (Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional).

Member’s Plea

The Member admitted the allegations set out in the Notice of Hearing at paragraphs 10, 11, 17, 18 and 22.

The panel conducted an oral plea inquiry and was satisfied that the Member’s admission was voluntary, informed and unequivocal.

Agreed Statement of Facts (Exhibit #2)

BACKGROUND

The Member

1. At all relevant times, Dr. Michael Bohdan Yarish, ND (the “Member”) has been a member of the College of Naturopaths of Ontario (the “College”). Attached as **Tab “A”** is a copy of the Member’s print out on the College Register.

2. At all relevant times, the Member met the Therapeutic Prescribing and the Intravenous Infusion Therapy (IVIT) Standards of Practice.
3. The Member is the owner of The Lakeside Clinic Center for Integrated Medicine in Barrie, Ontario (the “Clinic”).
4. This is the first time the Member has been referred to the Discipline Committee. The Member made efforts to resolve this matter soon after the ICRC referred specified allegations of professional misconduct to the Discipline Committee.

Administration of B12 Injections

5. On or about August 7, 2017, the Member administered an injection of Vitamin B12 to Persons 1, 2 and 3 (the “Injections”).
6. Persons 1, 2 and 3 worked at the Clinic.
7. Persons 1, 2 and 3 were together in the room when the Member administered the Injections.
8. It is agreed that on or about August 7, 2017:
 - a. The Member did not consider one or more of Persons 1, 2 and 3 as a patient and did not have a naturopath-patient relationship;
 - b. The Member did not obtain the health history of Persons 1, 2 and 3 prior to administering the Injections;
 - c. The Member administered the Injections without a Sharps container immediately available;
 - d. The Member administered the Injection to Person 3 using the needle used for Person 1 or Person 2;
 - e. The Member was immediately aware that he had administered the Injection to Person 3 using the needle used for Person 1 or Person 2; and
 - f. The Member did not create an incident report following his administration of the Injection to Person 3 using the needle used for Person 1 or Person 2.
9. It is agreed that the Member did not administer the Injections in accordance with the following standards of practice of the profession set out in Regulation 168/15 and the College’s published standards.
 - a. A member must have a naturopath-patient relationship with the patient before performing a controlled act and must record the patient’s health history (s. 3(1) para 1 of Regulation 168/15 and *Performing Authorized Acts Standard of Practice* of the College);
 - b. A member must ensure that appropriate infection control procedures are in place at all times and that the controlled act is performed in an environment that is clean, safe, private and comfortable to the patient (s. 3(1) para 5 of Regulation 168/15);

- c. A member must maintain appropriate therapeutic relationships and professional boundaries (Therapeutic Relationships and Professional Boundaries Standard of Practice of the College);
- d. A member must incorporate routine practices that minimize the chance of, or spread infection (Standard Infection Control Standard of Practice of the College); and
- e. A member must ensure that an incident report is prepared in the event of an incident involving exposure to biomedical material that poses a risk of transmission (Standard Infection Control Standard of Practice of the College).

Attached as **Tab “B”** is a copy of the relevant excerpts and Standards.

- 10. It is agreed that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991* (the “Code”) as set out in the following paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:
 - a. Paragraph 1 (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession);
 - b. Paragraph 36 (Contravening, by act or omission, a provision of the Act, the Regulated Health Professions Act, or the regulations under either of those acts); and
 - c. Paragraph 46 (Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional).
- 11. In addition, it is agreed that the above conduct constitutes professional misconduct pursuant to subsection 4(3) of the *Naturopathy Act, 2007*.

Failing to install Laminar Air Flow Hood

- 12. It is agreed that between approximately March 2, 2017 and March 22, 2018, the Member did not install and utilize a Laminar Air Flow Hood when compounding for IVIT at the Clinic.
- 13. It is agreed that the College requires all sterile compounding for IVIT to be performed in a Laminar Air Flow Hood.
- 14. It is agreed that between approximately March 2, 2017 and March 22, 2018, the Member did not maintain the required equipment records related to the Laminar Air Flow Hood.
- 15. It is agreed that between approximately March 2, 2017 and March 22, 2018, the Member did not compound for IVIT in accordance with the following standards of

practice of the profession set out in Regulation 168/15 and the College's published standards:

- a. ~~A member must ensure that appropriate infection control procedures are in place at all times and that the controlled act is performed in an environment that is clean, safe, private and comfortable to the patient (s. 3(1) para 5 of Regulation 168/15);~~
- b. A member must ensure that the controlled act of compounding a drug designated in Table 5 is performed in an aseptic preparation area using aseptic techniques to minimize the risk of contamination(s.11(2) para 4 of Regulation 168/15)
- c. A member must maintain identified equipment records (Equipment Records Standard of *Practice* of the College)

Attached as **Tab "C"** is a copy of the relevant excerpts and Standards.

- 16. It is agreed that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the Code as set out in the following paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:
 - a. Paragraph 1 (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession);
 - b. Paragraph 23 (Failing to keep records in accordance with the standards of the profession);
 - c. Paragraph 36 (Contravening, by act or omission, a provision of the Act, the Regulated Health Professions Act, or the regulations under either of those acts); and
 - d. Paragraph 46 (Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional).
- 17. In addition, it is agreed that the above conduct constitutes professional misconduct pursuant to subsection 4(3) of the *Naturopathy Act, 2007*.

Leaving the Clinic during IVIT sessions

- 18. It is agreed that prior to March 2018, the Member would leave the Clinic while IVIT was being administered to patients.
- 19. It is agreed that the Member did not arrange for appropriate supervision of his patients who were undergoing IVIT while he was not in the Clinic.
- 20. It is agreed that it is a standard of practice of the profession to not leave the physical building when IVIT is being administered to patients and/or ensure that when IVIT is being administered that patients are always appropriately supervised.

21. It is agreed that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the Code as set out in the following paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:
- a. Paragraph 1 (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession); and
 - b. Paragraph 46 (Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional).

Admission of Professional Misconduct

22. By this document, the Member admits to the truth of the facts referred to in paragraphs 1 to 21 above (the “Agreed Facts”).
23. By this document, the Member states that:
- a. He understands fully the nature of the allegations made against him;
 - b. He has no questions with respect to the allegations against him;
 - c. He admits to the truth of the facts contained in this Agreed Statement of Facts and Admission of Professional Misconduct and that the admitted facts constitute professional misconduct;
 - d. He understands that by signing this document he is consenting to the evidence as set out in the Agreed Statement of Facts and Admission of Professional Misconduct being presented to the Discipline Committee;
 - e. He understands that by admitting the allegations, he is waiving his right to require the College to prove the allegations against him at a contested hearing;
 - f. He understands that the decision of the Committee and a summary of its reasons, including reference to his name, will be published in the College’s annual report and any other publication or website of the College;
 - g. He understands that any agreement between him and the College with respect to the penalty proposed does not bind the Discipline Committee; and
 - h. He understands and acknowledges that he is executing this document voluntarily, unequivocally, free of duress, free of bribe, and that he has been advised of his right to seek legal advice.
24. In light of the Agreed Facts and Admission of Professional Misconduct, the College and the Member submit that the Discipline Committee should find that the Member has committed professional misconduct.

Decision

The Panel finds that the Member committed acts of professional misconduct as admitted by the Member in the Agreed Statement of Facts.

Reasons for Decision

In coming to this decision, the Panel considered the following: the Member's admission of professional misconduct, the Agreed Statement of Facts (including the documents appended as tabs to the Agreed Statement of Facts) and the parties' submissions.

The Panel was satisfied that the conduct described in the Agreed Statement of Facts did constitute professional misconduct as alleged in the Notice of Hearing and as admitted by the Member for the following reasons:

1. He contravened a standard of the practice of the profession and failed to maintain the standard of practice of the profession by his acts of inappropriately administering B12 injections to persons he had not established a therapeutic relationship with; by not ensuring good infection control practice; and by failing to complete an incident report when a risk of transmission due to exposure to biomedical material occurred.
2. Further, the Member failed to maintain the standard of practice of the profession, by not having installed and/or utilized a Laminar Flow Hood when compounding for IVIT at the clinic and by leaving the physical building while IVIT was being administered to patients without arranging for appropriate supervision.
3. He contravened a provision of the *Regulated Health Professions Act* by not having a naturopath-patient relationship prior to performing a controlled act; by not ensuring appropriate infection control procedures are in place at all times; and by not compounding a drug in an aseptic preparation area to minimize risk of contamination.
4. The Member failed to keep records in accordance with the standards of the profession, in that he did not maintain identified equipment records.
5. The Member's conduct would reasonably be regarded by members of the profession as disgraceful, dishonourable or unprofessional.

Penalty Submissions

Counsel for the College advised the panel that a Joint Submission on Order and Costs had been agreed upon (Exhibit #3). The Joint Submission provides as follows:

1. Requiring the Member to appear before the panel to be reprimanded immediately following the hearing of this matter.
2. Directing the Registrar to suspend the Member's certificate of registration for a period of six months, on a schedule to be set by the

Registrar, three months of which shall be remitted if the Member complies with the provisions of paragraphs 3(a) through 3(c) no later than September 30, 2019.

3. Directing the Registrar to impose the following specified terms, conditions and limitations on the Member's certificate of registration:
 - a. Requiring that the Member successfully complete by November 30, 2019, and at his own expense, the ProBe course in ethics and boundaries;
 - b. Requiring that the Member successfully complete by November 30, 2019, to the satisfaction of the Registrar and at his own expense, the Medical Records Course at the University of Toronto;
 - c. Requiring that the Member successfully complete by November 30, 2019, to the satisfaction of the Registrar and at his own expense, the IPAC Core Competencies program provided by Public Health Ontario;
 - d. Requiring that the Member write an essay between 1000-1500 words in length, and provide it to the Registrar, no later than December 20, 2019, that shall be published by the College at a time and in a format determined by the Registrar, on the following issues:
 - i. The lessons he learned in completing the terms, conditions, and limitations described in paragraphs 3(a) through (c); and
 - ii. The methods he will incorporate into his practice to ensure proper infection control, including but not limited to his provision of IVIT.
4. For greater certainty, the Member's obligation to comply with the proposed terms, conditions and limitations on his certificate of registration contained in paragraphs 3(a) through 3(c) is not relieved by serving the entire suspension referred to in paragraph 2 above.
5. Requiring the Member to pay of fine of not more than \$350 to the Minister of Finance within two months of the date of the hearing of this matter.
6. The Member shall pay the College's costs fixed in the amount of \$3,500 payable in a schedule determined by the Registrar.
7. The Member acknowledges that this Joint Submission as to Penalty and Costs is not binding upon the Discipline Committee.

8. The Member acknowledges and understands and acknowledges that he is executing this document voluntarily, unequivocally, free of duress, free of bribe, and that he has been advised of his right to seek legal advice.

Penalty and Costs Decision

The panel accepts the Joint Submission and accordingly orders:

1. The Member is to appear before the panel to be reprimanded immediately following the hearing of this matter.
2. The Registrar is directed to suspend the Member's certificate of registration for a period of six months, on a schedule to be set by the Registrar, three months of which shall be remitted if the Member complies with the provisions of paragraphs 3(a) through 3(c) no later than September 30, 2019.
3. The Registrar is directed to impose the following specified terms, conditions and limitations on the Member's certificate of registration:
 - a. Requiring that the Member successfully complete by November 30, 2019, and at his own expense, the ProBe course in ethics and boundaries;
 - b. Requiring that the Member successfully complete by November 30, 2019, to the satisfaction of the Registrar and at his own expense, the Medical Records Course at the University of Toronto;
 - c. Requiring that the Member successfully complete by November 30, 2019, to the satisfaction of the Registrar and at his own expense, the IPAC Core Competencies program provided by Public Health Ontario;
 - d. Requiring that the Member write an essay between 1000-1500 words in length, and provide it to the Registrar, no later than December 20, 2019, that shall be published by the College at a time and in a format determined by the Registrar, on the following issues:
 - i. The lessons he learned in completing the terms, conditions, and limitations described in paragraphs 3(a) through (c); and
 - ii. The methods he will incorporate into his practice to ensure proper infection control, including but not limited to his provision of IVIT.
4. For greater certainty, the Member's obligation to comply with the proposed terms, conditions and limitations on his certificate of registration contained in paragraphs 3(a) through 3(c) is not relieved by serving the entire suspension referred to in paragraph 2 above.

5. The Member is to pay of fine of not more than \$350 to the Minister of Finance within two months of the date of the hearing of this matter.
6. The Member shall pay the College's costs fixed in the amount of \$3,500 payable in a schedule determined by the Registrar.
7. The Member acknowledges that this Joint Submission as to Penalty and Costs is not binding upon the Discipline Committee.
8. The Member acknowledges and understands and acknowledges that he is executing this document voluntarily, unequivocally, free of duress, free of bribe, and that he has been advised of his right to seek legal advice.

Reasons for Penalty Decision

The Panel considered the Joint Submissions as to Penalty and Costs, as well as submissions from the parties. The Panel recognized that the penalty should maintain high professional standards, preserve public confidence in the ability of the College to regulate its members, and, above all, protect the public. This is achieved through a penalty that considers the principles of general deterrence, specific deterrence and, where appropriate, rehabilitation of the Member's practice.

The Panel also considered the principle that the Panel should accept a joint submission on penalty unless convinced that doing so would bring the process of this College into disrepute or would otherwise be contrary to the public interest.

In the circumstances of this case, the penalty proposed by the parties is reasonable and so ordered by the Panel.

The aggravating factors in this case include the nature of the conduct itself, in that the Member placed persons at risk for harm by inappropriately administering B12 injections, by increasing risk for contamination by compounding drugs in a non-sterile area, and by leaving the clinic during IVIT administration. The mitigating factors include the fact that the Member readily agreed to the allegations and was prompt in engaging in settlement resolution of this matter. The Panel also considered it a mitigating factor that this was the first time the Member was appearing before the Discipline Committee.

The penalty order meets the requirement of being both a specific deterrent to the Member, and a general deterrent to the profession for the following reasons. The length of the suspension sends a message to both the Member and the membership at large that this kind of professional misconduct will result in a serious disruption to a person's practice. Similarly, the fine, while not oppressively high, is an acknowledgment of the cost of regulation for the Province. The oral reprimand is an opportunity to make clear to the Member and the profession that members must be held to a high standard in keeping with the College's goal of public protection and accountability. Finally, the remedial terms will help to ensure that the Member learn from his misconduct and is able to return to practice safer and better equipped to treat his patients competently and safely.

The penalty order meets the requirement to preserve public confidence in the profession to properly regulate its members to serve and protect the public interest. The penalty order is robust and sends a clear message that this matter has been taken seriously.

While the costs ordered are not part of the penalty *per se*, they are reasonable in all of the circumstances. The College and its membership should not bear the full responsibility for the costs of the discipline process. It is fair to ask that the Member who has been found to have engaged in professional misconduct to share in a portion of the costs incurred in connection to the discipline hearing.

At the conclusion of the hearing, having confirmed that the Member waived any right to appeal, the Panel delivered its reprimand.

I, Shelley Burns, sign this decision and reasons for the decision as Chairperson of this Discipline panel and on behalf of the members of the Discipline panel as listed below:

Dr. S. Burns, ND
Chairperson

Wednesday, August 7th, 2019
Date

Names of panel members

Shelley Burns, ND – Chair
Jordan Sokoloski, ND
Vaishna Sathiamoorthy, ND
Samuel Laldin
Dianne Delany

REPRIMAND

As you know, Dr. Yarish, ND, as part of its penalty order this Discipline Panel has ordered you that you be given an oral reprimand. You agreed to this term of order as part of your joint submission on penalty filed during the course of the hearing.

The fact that you have received this reprimand will be part of the public portion of the Register and, as such, part of your record with the College.

Although you will be given an opportunity to make a statement at the end of the reprimand, this is *not* an opportunity for you to review the decision made by the Discipline Panel, *nor* a time for you to debate the merits of our decision.

The Panel has found that you have engaged in professional misconduct in the following ways:

- A) Administration of B12 injections;
- B) Failing to install a laminar air flow hood; and
- C) Leaving the clinic during IVIT sessions

It is a matter of profound concern to this Panel that you have engaged in these forms of professional misconduct.

Moreover, the result of your misconduct is that you have let down the public, the profession, and yourself.

We need to make it clear to you that your conduct is unacceptable.

Consequently, it is necessary for us to take steps to impress upon you the seriousness of the misconduct in which you have engaged.

We also want to make it clear to you that while the penalty that this Panel has imposed upon you is a fair penalty, a more significant penalty will be imposed by another Discipline Panel in the event that you are ever found to have engaged in professional misconduct again.

As I have already stated, this is not an opportunity for you to review the decision or debate the correctness of the decision, which in any event, was agreed to by you and your counsel.

However, do you have any questions or do you wish to make any comments?

Thank you for attending today. We are adjourned.