



Dr. Tshipita KABONGO

Charges

Date Charge(s) Laid:	March 12, 2024
Charge(s) Amended:	N/A
Penalty Hearing:	Completed
Charge(s):	Unprofessional Conduct
Outcome Date:	June 7, 2024

*The Executive Committee of the College of Physicians and Surgeons directs that, pursuant to section 47.5 of **The Medical Profession Act, 1981**, the Discipline Committee hear the following charges against Dr. Tshipita Kabongo:*

CHARGE 1

You Dr. Tshipita Kabongo are guilty of unbecoming, improper, unprofessional, or discreditable conduct contrary to the provisions of section 46(o) and/or section 46(p) of The Medical Profession Act, 1981, S.S. 1980-81, c. M-10.1, and/or bylaw 8.1(b)(ix) and/or the Code of Ethics contained in bylaw 7.1 of the bylaws of the College of Physicians and Surgeons of Saskatchewan, particulars whereof are that you failed to maintain the standard of practice of the profession in relation to the patient referred to in this charge by the initials T.B.

The evidence that will be led in support of this charge will include some or all of the following:

- a) You failed to develop an appropriate and comprehensive treatment plan to address T.B.'s medical needs.
- b) You failed to advise T.B. that the use of opioids increased the risk of T.B. experiencing seizures.
- c) You prescribed Ritalin to T.B. without taking appropriate measures to establish a diagnosis of ADHD.
- d) Having begun treatment with Ritalin, you failed to assess whether the continued treatment with Ritalin was appropriate.
- e) Despite a problem list which referenced amnesia, epilepsy and age related memory issues, there was no referral to a specialist or other method to assess and treat these medical conditions.
- f) You diagnosed T.B. with oral thrush without an appropriate assessment to establish that diagnosis.

CHARGE 2

You Dr. Tshipita Kabongo are guilty of unbecoming, improper, unprofessional, or discreditable conduct contrary to the provisions of section 46(o) and/or section 46(p) of The Medical Profession Act, 1981, S.S. 1980-81, c. M-10.1, and/or bylaw 8.1(b)(ix) and/or the Code of Ethics contained in bylaw 7.1 of the bylaws of the College of Physicians and Surgeons of Saskatchewan, particulars whereof are that you failed to maintain the standard of practice of the profession in relation to the patient referred to in this charge by the initials D.M.

The evidence that will be led in support of this charge will include some or all of the following:

- a) Your clinical notes did not clearly reflect the reasons for the choice to use prescribed opioid analgesia for D.M..
- b) Your clinical notes did not clearly indicate the name(s) and dosage(s) of the opioid(s) chosen or the rationale for changes in the drug regimens.
- c) Your clinical notes did not clearly describe a discussion with the patient at the onset of treatment regarding the risks/benefits of using opioid analgesia.
- d) Your clinical notes did not clearly describe D.M.'s response to opioid therapy or any adverse effects the patients might have suffered.
- e) Narcotic contracts were not consistently completed at the onset of treatment with opioid analgesics or opioid agonist therapy. Where narcotic contracts were found, these were not signed by the D.M. or you.
- f) Where tools (fillable forms with or without scoring scales) such as the "6 A's of Monitoring Opioid Therapy", the "Brief Pain Inventory", the "Opioid Risk Tool", the "Spine Pathway" form, the "COWS (Clinical Opiate Withdrawal Signs)" form, the "Tapering Readiness Questionnaire", and mood questionnaires such as the Mood Disorders Questionnaire, the GA-7 and the PHQ-9 were found in D.M.'s charts, they were not referenced in your notes or used to influence treatment.

CHARGE 3

You Dr. Tshipita Kabongo are guilty of unbecoming, improper, unprofessional, or discreditable conduct contrary to the provisions of section 46(o) and/or section 46(p) of The Medical Profession Act, 1981, S.S. 1980-81, c. M-10.1, and/or bylaw 8.1(b)(ix) and/or the Code of Ethics contained in bylaw 7.1 of the bylaws of the College of Physicians and Surgeons of Saskatchewan, particulars whereof are that you failed to maintain the standard of practice of the profession in relation to the patient referred to in this charge by the initials K.L.

The evidence that will be led in support of this charge will include some or all of the following:

- a) You misused or conflated diagnostic terms that are not synonymous with the patient's diagnosis.
- b) You poorly managed K.L./s chronic, progressive and ultimately fatal neurological disease. There was no evidence of team-based collaborative care and no referral to therapies until 2020. Reference to therapies in your Encounter Notes is only to physiotherapy although the referral form is generic.
- c) Your charts contained little reference to social supports, etc.
- d) You did not facilitate the application for the Disability Tax Credit application on a timely basis.
- e) You inadequately managed K.L.'s COVID episode – the Encounter Notes for dates when she was in hospital are inaccurate or misleading.
- f) You prescribed inappropriately to the patient. Your prescriptions included cannabinoids, benzodiazepines, Vitamin B12, Ivermectin and supplements.
- g) The intention stated in your chart for K.L. to referring her to internal medicine for management of stable, controlled hyperthyroidism was inappropriate.
- h) Your chart stated a reliance on an "endocrine specialist" for management of mild Type II Diabetes mellitus on Metformin, which was inappropriate.
- i) You conducted an incomplete investigation for a UTI and provided inappropriate treatment thereof, including one instance of prescribing apple cider vinegar or cranberry and one of MacroBID) without supporting evidence of a UTI.

CHARGE 4

You Dr. Tshipita Kabongo are guilty of unbecoming, improper, unprofessional, or discreditable conduct contrary to the provisions of section 46(o) and/or section 46(p) of The Medical Profession Act, 1981 and/or bylaw 7.2(bb) of the bylaws of the College of Physicians and Surgeons of Saskatchewan in relation to billing for Remote Telephone call from Primary Health Nurse/Triage Nurse in Another Community (Code 761A).

The evidence that will be led in support of this charge will be that you failed to take reasonable care to ensure that your claims for payment for professional services were consistent with the payment schedule for insured services.