

PUBLIC RECORD**Date:** 23/10/2025

Doctor: Dr Jan MOZNY
GMC reference number: 7036586
Primary medical qualification: MUDr 1976 Charles University Prague

Type of case	Outcome on impairment
Review - Misconduct	Impaired

Summary of outcome
Suspension, 12 months
Review hearing directed

Tribunal:

Legally Qualified Chair	Ms Chistina Moller
Lay Tribunal Member:	Mrs Clair McCarthy
Registrant Tribunal Member:	Dr Shehleen Khan

Tribunal Clerk:	Ms Fiona Johnston
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Attendance and Representation:

Doctor:	Not present, not represented
GMC Representative:	Mr Jonathan Lally, Counsel

Attendance of Press / Public

In accordance with Rule 41 of the General Medical Council (Fitness to Practise) Rules 2004 the hearing was held partly in public and partly in private.

Overarching Objective

Throughout the decision making process the tribunal has borne in mind the statutory overarching objective as set out in s1 Medical Act 1983 (the 1983 Act) to protect, promote

and maintain the health, safety and well-being of the public, to promote and maintain public confidence in the medical profession, and to promote and maintain proper professional standards and conduct for members of that profession.

Determination on Impairment - 23/10/2025

1. This determination will be handed down in private due to the confidential nature of some matters discussed. However, as this case concerns Dr Mozny's alleged misconduct, a redacted version will be published at the close of the hearing.

Background

2. Dr Mozny qualified in 1976 from Charles University Prague. At the time of relevant events Dr Mozny was practising as a Locum Consultant specialising in Medical Oncology for University Hospitals of Derby and Burton NHS Foundation Trust ('the Trust').
3. Dr Mozny's case was considered by a Medical Practitioners Tribunal ('MPT') in April 2023 ('the 2023 Tribunal'). Dr Mozny was neither present nor represented at the 2023 hearing.
4. The Allegation that led to Dr Mozny's hearing in April 2023 MPT can be summarised as follows.
5. It was alleged that, following consultations on various dates, Dr Mozny failed to dictate correspondence in a timely manner for six patients (Patient A, B, C, E, F and G). In relation to Patient B, it was also alleged that at the consultation, Dr Mozny prescribed chemotherapy and failed to dictate correspondence in a timely manner.
6. In relation to Patient C, it was alleged that on 10 March 2020 and 27 March 2020 Dr Mozny had a consultation with Patient C, where he recommended carboplatin, pemetrexed and pembrolizumab therapy when it is not licenced for squamous cell carcinoma ('SCC') of the lung.
7. In relation to Patient D, it was alleged that on 10 March 2020, Dr Mozny failed to document his clinical encounter with Patient D and failed to inform Patient D of the results of his computed tomography ('CT') scan.

8. The initial concerns were raised with the GMC on 22 September 2020 by Dr I, Executive Medical Director, on behalf of the Trust.
9. The 2023 Tribunal found the Allegation proved in its entirety. It found that Dr Mozny had breached several paragraphs of Good Medical Practice (2013) ('GMP') and that it was clear that, on six occasions, Dr Mozny failed to dictate correspondence for Patients A, B, C, E, F and G, in a timely manner. It also found that Dr Mozny failed to document his clinical encounter in relation to Patient D. The 2023 Tribunal was of the view that Dr Mozny's failures were serious and had potentially put patients at a risk of harm. The 2023 Tribunal identified that Dr Mozny's actions meant that the clinical staff undertaking the treatment of the patients had no background information and were disadvantaged when delivering cancer treatment without the basic information required.
10. The 2023 Tribunal was also of the view that, in relation to Patient C, Dr Mozny's actions were serious as he recommended the wrong course of treatment for Patient C. This meant that Dr Mozny had put Patient C at potential risk of harm.
11. The 2023 Tribunal concurred with the GMC expert that Dr Mozny's overall care of Patients A, B, C, D, E, F and G was seriously below the standard expected of a competent Consultant in Medical Oncology. Therefore, the 2023 Tribunal found that Dr Mozny's actions amounted to serious misconduct.
12. The 2023 Tribunal considered that in relation to the Allegation that Dr Mozny had failed to inform Patient D of the results of his CT scan, this was not as serious compared to the other allegations against Dr Mozny. The 2023 Tribunal noted that the CT scan results could have been chased by the patient himself with the GP or with the Trust. Therefore, the 2023 Tribunal was of the view that Dr Mozny's action in relation to this paragraph of the Allegation constituted misconduct but not serious misconduct.
13. The 2023 Tribunal determined that Dr Mozny's actions in relation to the entirety of the Allegation, save for paragraph 4b, amounted to serious Misconduct.
14. The 2023 Tribunal was satisfied that a period of suspension would be sufficient to mark the seriousness of Dr Mozny's misconduct and send a signal to the doctor, the profession and the public about the standards of conduct expected and how those standards would be upheld.

15. The 2023 Tribunal determined to impose a period of suspension for nine months. It would enable Dr Mozny to have the opportunity to develop insight and to take steps to remediate his actions.
16. The 2023 Tribunal also directed that a review hearing should take place shortly before the end of Dr Mozny's period of suspension.

The 2024 Review Hearings

17. There were two Review hearings last year, in January and November 2024. Until the 2024 Tribunal there had been a lack of engagement, but Dr Mozny did attend his Tribunal in January 2024.
18. At both Reviews in 2024, the Tribunal found that Dr Mozny had not provided sufficient evidence of insight or remediation. In addition, he failed to demonstrate that he had kept his medical skills and knowledge up to date.
19. Both 2024 Tribunals took account of the fact that Dr Mozny had put patients at risk of harm and not demonstrated that he had taken steps to minimise any risk of repetition.
20. Both 2024 Tribunals determined that Dr Mozny's fitness to practise was impaired by reason of his misconduct in 2020, taking account of the lack of evidence of insight, remediation or continuing professional development.
21. In January 2024 after receiving the impairment decision, Dr Mozny said that he does have remorse for his actions, indicating some insight into the potential seriousness of the consequences of his misconduct.
22. The 2024 Tribunals considered that suspension orders would allow Dr Mozny time to remediate or apply for voluntary erasure. In January 2024 he was suspended for 9 months and in November 2024 he was suspended for a year.
23. Both 2024 Tribunals directed reviews of Dr Mozny's case and suggested that future Review Tribunals would be assisted by:
 - Evidence of insight and remediation into his misconduct;
 - Reflective statements demonstrating remorse and understanding the impact of his actions;

- Evidence that he had kept his clinical knowledge up to date while suspended;
- Evidence of Continuing Professional Development (CPD) undertaken;
- Any other information considered relevant by Dr Mozny.

Today's hearing

The Evidence

24. The Tribunal has account of all documentary evidence received, including previous decisions from the 2023 and 2024 Tribunals, emails from the GMC and Dr Mozny and telephone notes by a GMC investigation officer dated 14 March 2025 and 8 September 2025.

Submissions on behalf of the GMC

25. Counsel for the GMC, Mr Jonathan Lally, summarised the background. He reminded the Tribunal that the 2024 Tribunal recommended that it would assist the reviewing Tribunal if Dr Mozny provided a detailed reflective statement focusing on the need to comply with any sanction and cooperate with regulatory provisions to protect the public and the wider public interest. Additional evidence of relevant CPD and testimonials would assist too.

26. The GMC has been in touch with Dr Mozny in connection with this Review hearing, but Dr Mozny has not yet applied for voluntary erasure. Mr Lally submitted that, in the absence of any evidence of insight or remediation, there is nothing to indicate that he has addressed the concerns identified by the 2023 and 2024 Tribunals. Mr Lally submitted that there has been no change in position since the last hearing, and Dr Mozny's fitness to practise remained impaired by reason of misconduct. A finding of impairment is required to protect the public and maintain confidence in doctors.

The Relevant Legal Principles

27. The LQC advised that, at the impairment stage, there is no burden or standard of proof. It is a question of judgment for the Tribunal. Impairment may be based on past events or a continuing situation, but it is to be decided at the time of the hearing.

28. The Tribunal must consider whether there remains any risk of harm, breach of a fundamental tenet of the medical profession or bringing it into disrepute: *CHRE v Grant [2011] EWHC 927*.

29. This Tribunal must determine whether Dr Mozny's fitness to practise is currently impaired, taking account of his conduct in 2020 and subsequent changes in attitude or conduct.

The Tribunal's Determination on Impairment

30. The Tribunal took into consideration a telephone note dated 8 September 2025 from the GMC to Dr Mozny:

'I phoned Dr Mozny on 08/09/2025 for an update on his situation and to confirm that his email address was still valid for communication purposes. Dr Mozny apologised for not responding to recent GMC emails. He explained that [XXX]. Dr Mozny also explained that [XXX]. They are currently living in the Czech Republic. Dr Mozny confirmed that his email address is still and he is still ok to receive GMC correspondence via that address. Dr Mozny did however reiterate that he doesn't intend on attending his forthcoming review hearing in October, nor will he be engaging with any related correspondence. Dr Mozny doesn't intend on ever returning to practicing medicine in the UK, due to [XXX] and believing that he is too elderly. I told Dr Mozny that we are still required to send important correspondence to him in relation to his review hearing. I asked about the progress of Dr Mozny's voluntary erasure (VE) application. Dr Mozny stated that he's still awaiting a document from his previous employer before he's able to submit his VE application. Dr Mozny explained that he's been chasing this up for some time. I concluded the call by wishing Dr Mozny all the best and letting him know that he can contact me by email or phone should he have any queries.'

31. The Tribunal was aware that Dr Mozny told the GMC on the telephone that he had XXX. However, no XXX evidence was provided.
32. The Tribunal also noted that Dr Mozny intends to apply for voluntary erasure of his name from the Medical Register. Dr Mozny has said that he has no wish to practise medicine in the UK.
33. The Tribunal considered that Dr Mozny's actions and omissions in 2020 had put patients at unwarranted risk of harm. Dr Mozny has not provided the Tribunal with evidence that he has reflected on his misconduct or developed insight into catalysts for his misconduct, potential consequences or how to avoid repetition.

34. The Tribunal took account of the fact that Dr Mozny has not practised in the UK for several years, as well as the lack of evidence of keeping his clinical knowledge and skills up to date. The Tribunal concluded that there remains a risk of repetition of his misconduct, if back in practise.
35. The Tribunal found that a finding of impairment is required to protect members of the public and to maintain confidence in the medical profession. He has put patients at unwarranted risk of harm and may do so again if able to practise medicine.
36. This Tribunal determined that Dr Mozny's fitness to practise is impaired by reason of misconduct.

Determination on Sanction - 23/10/2025

1. This determination will be handed down in private due to the confidential nature of some matters discussed. However, as this case concerns Dr Mozny's alleged misconduct, a redacted version will be published at the close of the hearing.
2. Having determined that Dr Mozny's fitness to practise is impaired by reason of misconduct, the Tribunal had to decide, in accordance with Rule 22(1)(h) of the Rules what action, if any, it should take in relation to Dr Mozny's registration.

The Evidence

3. The Tribunal has taken account of background information and all evidence provided, where relevant, to sanction.

Submissions on behalf of the GMC

4. Mr Lally said that is the third review in relation to Dr Mozny. Previous Tribunals had indicated that Dr Mozny should provide evidence of insight, remediation and keeping knowledge up to date.
5. However, Dr Mozny has not provided any real evidence of remorse, insight, remediation or CPD to show that he has maintained his skills or kept his knowledge up to date. Dr Mozny had failed to apply for voluntary erasure, despite previous indications. No reasons for these failures had been given.

6. Mr Lally said that there were no exceptional circumstances which could justify the Tribunal taking no action. Mr Lally added, that because of Dr Mozny's limited engagement with this process, conditions would not be appropriate, workable or sufficient to protect the public.
7. Mr Lally submitted that suspension was no longer appropriate, because Dr Mozny has been suspended twice before, to no real effect. There is no meaningful evidence of progress in relation to insight or remediation. Dr Mozny has not yet applied for voluntary erasure, so there is no point in giving him another suspension.
8. Mr Lally submitted that a further suspension would not suffice to maintain public confidence in the medical profession. Dr Mozny had been made aware of the risks of failing to act. Mr Lally suggested that erasure is the most appropriate sanction to protect the public and wider public interest.

The Tribunal's Determination

9. The LQC advised that decision as to the appropriate sanction, if any, to impose in this case is a matter for the Tribunal exercising its own judgment. The Tribunal is centrally concerned with the reputation or standing of the profession, rather than punishment of a doctor, although sanctions may have a punitive impact.
10. In reaching its decision, the Tribunal has taken account of relevant sections of the Sanctions Guidance ('SG') as well as the overarching objective. The LQC advised that, although a Tribunal need not adhere to SG, it should have proper regard to and apply it: *Bramhall [2021] EWHC 2109*. If departing from the SG, a Tribunal has a duty to state clear, substantial and specific reasons for the departure.
11. In deciding what sanction, if any, to impose the Tribunal will consider the options available, starting with the least restrictive. It will also take account of the principle of proportionality and the need to weigh the interests of the public against those of Dr Mozny.

No action

12. The Tribunal first considered whether to conclude the case by taking no further action. Taking no action following a finding of impaired fitness to practise would only be appropriate in exceptional circumstances. The Tribunal determined that there are no exceptional circumstances in this case to justify taking no action.

Conditions

13. The Tribunal went on to consider whether imposing conditions upon Dr Mozny's registration would be appropriate in this case. It was unable to identify any appropriate, proportionate, workable or measurable conditions as Dr Mozny is not in practice in the UK and says he does not intend to resume work as a doctor. Dr Mozny intends to apply for voluntary erasure.

Suspension

14. The Tribunal considered that the following paragraphs of the Sanctions Guidance (2020) were engaged in this case:

"91 Suspension has a deterrent effect and can be used to send out a signal to the doctor, the profession and public about what is regarded as behaviour unbefitting a registered doctor. Suspension from the medical register also has a punitive effect, in that it prevents the doctor from practising (and therefore from earning a living as a doctor) during the suspension, although this is not its intention.

92 Suspension will be an appropriate response to misconduct that is so serious that action must be taken to protect members of the public and maintain public confidence in the profession. A period of suspension will be appropriate for conduct that is serious but falls short of being fundamentally incompatible with continued registration..."

"97 Some or all of the following factors being present (this list is not exhaustive) would indicate suspension may be appropriate.

a A serious breach of Good medical practice, but where the doctor's misconduct is not fundamentally incompatible with their continued registration, therefore complete removal from the medical register would not be in the public interest. However, the breach is serious enough that any sanction lower than a suspension would not be sufficient to protect the public or maintain confidence in doctors."

15. The Tribunal was aware that this is the third review of Dr Mozny's case. It accepted that Dr Mozny has answered calls and emails from the GMC and that he wishes to apply for voluntary erasure of his name from the medical register. The Tribunal

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accepted that Dr Mozny has XXX, and that he is trying to obtain documents from a previous agency or employer. The Tribunal took account of information in an email from Dr Mozny dated 22 October 2025.

'Dear Yasmin,

my apologies for late response. I confirm I received and read your email including letter attached from 13.10.2025. This does not make a change in my decision about holding of MPT in my absence. As I said previously during our call discussion my application about voluntary withdrawal from GMC register is in process and I am awaiting UD8 form filed-in by my recruitment agency.

Kind regards

Yours sincerely

JanMomy

16. The Tribunal considered that a further suspension order would provide Dr Mozny with an opportunity to progress his voluntary erasure application. The Tribunal took account of the need to impose the least restrictive sanction required to protect the public and wider public interest.
17. However, it also considered whether erasure was required to protect the public or to uphold standards or maintain public confidence in doctors. The Tribunal considered that whilst Dr Mozny's misconduct was serious, it was not fundamentally incompatible with continued registration.
18. Dr Mozny's misconduct is remediable, and he has engaged with the GMC to a limited extent. The Tribunal considered that erasure would be disproportionate.
19. In conclusion, the Tribunal decided that it was necessary to impose an order of suspension for 12 months. This would allow Dr Mozny sufficient time to proceed with his application for voluntary erasure. A suspension order would also provide an opportunity for Dr Mozny to develop insight, remediate his misconduct and update his skills and knowledge should he wish to resume medical practice.

Review Hearing Directed

20. The Tribunal ordered a review hearing to convene shortly before the expiry of the suspension order. At the review hearing, the onus will be on Dr Mozny to provide any evidence of insight and remediation to demonstrate that any risk of repetition has been minimised. It would assist the reviewing Tribunal to have the following information from Dr Mozny:
 - Reflective statement or any other evidence of insight and remediation.
 - Any evidence of having applied for voluntary erasure.
21. The Tribunal determined to impose an order of suspension for 12 months, with a Review. The MPTS will send Dr Mozny a letter informing him of his right of appeal and when the new sanction will come into effect. The current order of suspension will remain in place during the appeal period.
22. That concludes this case.

ANNEX A – 23/10/2025

Application on Service and Proceeding in Absence

Service

1. Dr Mozny is neither present nor represented at today's Medical Practitioners Tribunal ('MPT') hearing. The Tribunal therefore considered whether the relevant documents had been served in accordance with Rule 40 of the General Medical Council ('GMC') Fitness to Practise Rules 2004 ('the Rules') and paragraph 8 of the fourth Schedule to the Medical Act.
2. Mr Jonathan Lally, Counsel, on behalf of the GMC, drew the Tribunal's attention to various documents regarding service of the notice of hearing. These included:
 - Screenshot of Dr Mozny's registered address;
 - GMC letter and draft bundle, dated 12 September 2025;
 - Dr Mozny's email to the GMC saying he will not attend his hearing in response to GMC letter dated 12 September 2025;
 - MPTS Notice of Hearing dated 9 September 2025;
 - Proof of delivery of Notice of Hearing dated 9 September 2025;
 - GMC letter and final bundle dated 13 October 2025;
 - Email from Dr Mozny to the GMC dated 13 October 2025.
3. Mr Lally submitted that all reasonable efforts had been made to serve notice on Dr Mozny, by email, post and telephone. Dr Mozny confirmed his email address when the GMC telephoned. Mr Lally said Dr Mozny was aware of the hearing today and had chosen not to attend.
4. Mr Lally submitted that service had been effected in accordance with Rule 31 of the Rules and that it was in the public interest for the hearing to proceed without delay.
5. The Tribunal was satisfied that all reasonable efforts were made to serve notice on Dr Mozny and that he was aware of the hearing. Notice of hearing had been served in accordance the Rules.

Proceeding in Absence

6. Having been satisfied that notice was properly served upon Dr Mozny, the Tribunal then considered whether to proceed with this hearing in his absence. The Tribunal was aware that the discretion to proceed in the absence of a doctor should be exercised with the utmost care and caution, balancing the interests of the doctor with the wider public interest.
7. The Tribunal noted that Dr Mozny had not requested an adjournment and he appears to have chosen not to attend this hearing. Dr Mozny was aware that there would be a review of his case.
8. The Tribunal found no evidence to suggest that an adjournment would result in Dr Mozny's participation in any future hearing. The Tribunal considered that Dr Mozny had waived his right to attend. The Tribunal was satisfied that it was fair and in the public interest for this hearing to proceed today.
9. Accordingly, the Tribunal determined to proceed in Dr Mozny's absence.