

PUBLIC RECORD

Dates: 29/09/2025 - 15/10/2025; 11/11/2025; 06/01/2026-08/01/2026

Doctor: Dr Farid SAEDI

GMC reference number: 7013362

Primary medical qualification: MB ChB 2008 University of Aberdeen

Type of case	Outcome on facts	Outcome on impairment
New - Misconduct	Facts relevant to impairment not found proved	Consideration of impairment not reached

Summary of outcome

Case concluded

Tribunal:

Legally Qualified Chair	Ms Ruth Curtis
Lay Tribunal Member:	Ms Caroline Friendship 29/09/2025 - 15/10/2025 11/11/2025 Mr Matthew Fiander 06/01/2026-08/01/2026
Registrant Tribunal Member:	Dr Pavan Rao

Tribunal Clerk:	Sewa Singh: 29/09/2025–29/09/2025; 03/10/2025–09/10/2025 Hinna Safdar: 30/09/2025 Olivia Gamble: 10/10/2025–15/10/2025 Ciara Fogarty: 11/11/2025; 06/01/2026–08/01/2026
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Attendance and Representation:

Doctor:	Present, not represented
GMC Representative:	Ms Eleanor Fry, Counsel
Special Counsel:	Sally Mertens, Counsel

Attendance of Press / Public

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

Determination on Facts - 11/11/2025

1. Throughout the decision-making process the Tribunal bore in mind the statutory overarching objective as set out in s1 of the Medical Act 1983 (the 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.

Background

2. Dr Saedi qualified in 2008 from the University of Aberdeen.

3. The Allegation against Dr Saedi is that on a number of occasions between XXX and XXX, Dr Saedi was violent towards Ms A, including physically assaulting her. Further that he repeatedly or continuously engaged in controlling or coercive behaviour towards Ms A during this time, which Dr Saedi knew, or ought to have known to have had a serious effect on Ms A.

4. XXX

5. In summary, Ms A's case is that XXX he was controlling and coercive, in that he checked up on her whereabouts, who she spoke to, told her what she should be wearing and restricted her social activities and interactions with her family members and relatives. Ms A alleges that XXX his controlling and coercive behaviour continued and developed in physical assaults.

6. It is alleged that several incidents took place on various dates XXX. These incidents are said to have taken place in XXX (Incident 1) when it is alleged by Ms A that Dr Saedi physically assaulted her when he threw a pillow at her and caught her face with his fist. It is further alleged that he forced her into the shower fully clothed.

7. The next incident is alleged to have taken place in XXX (Incident 2) where it is alleged by Ms A that during a verbal argument between them, Dr Saedi is said to have dug his finger

nails into Ms A's arms causing bruising and scarring. It is also alleged that later that day whilst Ms A was cooking in the kitchen a further verbal argument ensued following which Dr Saedi grabbed Ms A and threw her into the living room.

8. The next incident is said to have happened on XXX (Incident 3). It is alleged by Ms A that during an argument whilst moving a fridge from the kitchen to XXX, Dr Saedi is said to have grabbed Ms A, mishandled and locked her in various rooms causing her to hit her elbow and slapping her in the face on 2 occasions which caused red marks to her face. The police were called to this incident after a passer-by saw Ms A distressed XXX.

9. The final incident happened on XXX (Incident 4) when a verbal argument broke out after which it is alleged that Dr Saedi commented in disapproval of the clothing Ms A was wearing.

10. The alleged incidents are said to have involved controlling and coercive behaviour by Dr Saedi towards Ms A.

11. The incident on XXX, resulted in the police being called. Thames Valley Police ('the Police') attended XXX and he was arrested and taken to the local police station where he was detained for up to twenty-four hours and interviewed. He was then released on bail with conditions which included that he was not to have any contact with Ms A XXX. It is understood that these bail conditions were lifted sometime on XXX.

12. Following the incident on XXX, Ms A called the Police. Dr Saedi was again arrested and interviewed, and subsequently released on bail with conditions similar in terms to the previous conditions.

13. On 26 November 2020, in an email, Dr Saedi referred himself to the GMC. In his email, he made reference to the incident which took place on XXX and his arrest and being placed on bail conditions. He also advised that following conclusion of the police investigations on the 28 October 2020, all charges against him had been dropped and the bail conditions lifted with no further action by the Police required.

The Outcome of Applications Made during the Facts Stage

14. The Tribunal granted an application, made by Ms Eleanor Fry, Counsel for the GMC, pursuant to Rule 40 of the General Medical Council (Fitness to Practise Rules) 2004 as

amended ('the Rules'), for the entirety of the proceedings to be held in private. The application was unopposed by Dr Saedi. The Tribunal's full decision on the application is included at Annex A.

15. The Tribunal also granted an application, made by Ms Fry, pursuant to Rule 34(1) of the Rules, to admit into evidence two sets of WhatsApp messages, between Dr Saedi and Ms A and with others. Dr Saedi opposed the application in relation to one set of the WhatsApp messages. The Tribunal's full decision on the application is included at Annex B.

The Allegation and the Doctor's Response

16. The Allegation made against Dr Saedi is as follows:

That being registered under the Medical Act 1983 (as amended):

1. The nature of your relationship with Ms A is set out in Schedule 1.

To be determined

2. In or around XXX, during an argument with Ms A you:

a. punched Ms A in the side of the head;

To be determined

b. pushed Ms A into the shower, fully clothed;

To be determined

c. refused to let Ms A go to the hospital to seek medical attention. **To be determined**

3. In or around XXX during arguments with Ms A you:

a. grabbed Ms A and threw her into the living room;

To be determined

b. put your hands around Ms A's arms;

To be determined

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- c. dug your fingernails into Ms A's arms, causing injury.
To be determined
4. In or around XXX during an argument with Ms A you, on one or more occasion:
- a. grabbed Ms A;
To be determined
- b. slapped Ms A in the face;
To be determined
- c. threw Ms A into the living room;
To be determined
- d. grabbed Ms A and moved her to a different room;
To be determined
- e. caused Ms A to hit her elbow on the wardrobe by pulling her;
To be determined
- f. locked Ms A in the bathroom;
To be determined
- g. grabbed Ms A to stop her leaving the bathroom;
To be determined
- h. slapped Ms A in the face, causing her to fall into the bath;
To be determined
- i. locked the door whilst Ms A was in the living room area;
To be determined
- j. when Ms A left the house, you told passersby that Ms A had covid so they would not approach her to offer help.
To be determined
5. On XXX, during an argument with Ms A, you:

- a. on one or more occasion tried to grab a phone away from Ms A to prevent her from calling the police;

To be determined

- b. pushed Ms A against a wall;

To be determined

- c. caused injury to Ms A's finger.

To be determined

6. Your conduct as set out in Schedule 2 and paragraphs 2-5 above amounted to controlling and/or coercive behaviour as defined by S.76 of the Serious Crime Act 2015 in that you repeatedly or continuously engaged in behaviour towards Ms A, with whom at all material times you were personally connected, that was controlling or coercive, had a serious effect on Ms A, and which you knew or ought to have known would have a serious effect on Ms A.

To be determined

And that by reason of the matters set out above your fitness to practise is impaired because of your misconduct.

To be determined

Schedule 1

XXX

Schedule 2

- a. XXX

The Admitted Facts

17. No facts were admitted.

The Facts to be Determined

18. In light of the above, the Tribunal had to make a determination in relation to each of the disputed paragraphs of the Allegation, as set out above.

Witness Evidence

19. The Tribunal received on behalf of the GMC the witness statements from Ms A, dated 20 December 2023 and 1 June 2025. XXX. The Tribunal also received oral evidence from Ms A.

20. The Tribunal received a witness statement from Dr Saedi dated 20th August 2025 as well as oral evidence. Dr Saedi asserts numerous counter-allegations including that Ms A was aggressive and intimidating towards him as well as physically assaulting him on a number of occasions.

Special Counsel

21. Ms A was cross-examined on Dr Saedi's behalf by counsel appointed by the MPTS pursuant to Rule 36(5).

Documentary Evidence

22. The Tribunal had regard to the documentary evidence provided by both parties. This included but was not limited to:

- Email from Dr Saedi dated 26 November 2020 when self-referred to the GMC;
- Correspondence between the Police and the GMC on various dates in relation to Dr Saedi;
- Police body-worn camera footage following their attendance to the incident on XXX;
- Transcript of Police interviews with Dr Saedi on XXX and XXX;
- The Police crime reports of incidents on XXX, XXX and XXX;
- MG11 statements from police officers confirming Dr Saedi's arrest and police interview in relation to the XXX incident;
- Ms A's Police witness statement, XXX;
- Photographs of medication – provided by Ms A;
- A video footage taken in XXX showing scarring to Ms A's arms;
- Dr Saedi's completed Work Details Form (WDF) dated 20 April 2021 and 29 April 2020;

- Ms A's GP records;
- WhatsApp messages between Dr Saedi and Ms A XXX;
- Dr Saedi's defence bundle;
- Dr Saedi's witness statement dated 20 August 2025;
- XXX;
- Ms A's college registration for XXX;
- Photographs of Ms A in the UK, on outdoor trips and social interactions;
- Statements of Ms A's add on credit card;
- Photographs of alleged physical assault by Ms A on Dr Saedi;
- XXX;
- Two audio recordings made by Dr Saedi on his mobile phone during the altercation in XXX with Ms A;
- XXX.

The Tribunal's Approach

23. The Tribunal accepted the Legally Qualified Chair's advice in which she reminded the Tribunal that the GMC brings this Allegation and the burden of proving each paragraph is on the GMC; there is no burden on Dr Saedi to prove anything.

24. There is one standard of proof in civil and regulatory cases and that is of the balance of probabilities, i.e., whether it is more likely than not that the events occurred as alleged.

25. The Tribunal should have regard to the whole of the evidence and form its own judgement about the witnesses, and which evidence is credible and reliable, and which is not.

26. In assessing credibility the Tribunal should not assess a witness's credibility exclusively on their demeanour when giving evidence, but their veracity should be tested by reference to objective facts proved independently and to the documents in the case. The LQC referred the Tribunal to R (Gopalchirshnan) v GMC [2016] EWHC 1247 that lies in themselves, do not necessarily mean that the entirety of the evidence of a witness should be rejected. Credibility can be divisible. Further, the fact that a witness gives inconsistent evidence before a Tribunal is not necessarily fatal to their credibility. Inconsistency is one factor to be weighed in the balance.

27. The Tribunal was mindful that Ms A was anonymised in these proceedings, and that Special Counsel had been instructed by the MPTS and was present to cross-examine Ms A.

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Further, reasonable adjustments were put in place as screens were provided in the room and placed between Ms A and Dr Saedi to ensure Dr Saedi had no view of Ms A throughout her evidence. The Tribunal reminded itself that these measures do not mean that Ms A's evidence carries any more weight, nor should it reflect on or prejudice Dr Saedi. They are simply measures to assist Ms A to give her evidence.

28. The Tribunal also reminded itself that its task at this stage is to consider the evidence and submissions and make findings in relation to the factual allegations in dispute. Each paragraph of the Allegation has to be considered separately and in turn.

29. The LQC advised the Tribunal that the doctor's good character was one aspect to take into account when weighing the evidence.

30. The LQC advised the Tribunal on cross admissibility, as the GMC had invited the Tribunal to consider this. The Tribunal needs to be satisfied that there's "a sufficient connection and similarity between the facts of the allegations" and must be satisfied that one allegation has occurred before deducing propensity to another allegation.

The Tribunal's Analysis of the Evidence and Findings

31. The Tribunal has considered each paragraph of the Allegation separately and has evaluated the evidence in order to make its findings on the facts.

32. Given that the Tribunal had been invited to consider cross admissibility, it concluded to consider the Allegations out of order and instead to look first to the allegations with the most corroborating evidence. The Tribunal was further of the view that this case was alleged to be a history of coercive and controlling behaviour which over the course of the relationship escalated into physical assaults, it was therefore necessary to look at the facts in a chronological order. The Tribunal therefore determined that it was necessary to first make findings on whether the facts as alleged in Schedule 2, which listed multiple allegations on how Dr Saedi is alleged to have behaved in a controlling or coercive way towards Ms A during the course of their relationship, were found proved. It therefore determined it appropriate to consider Schedule 2 of the Allegation first.

The Tribunal's Findings in Respect of the Matters Set Out in Schedule 2:

33. XXX

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XXX

34. XXX

35. XXX

36. XXX'

37. XXX

38. XXX

39. XXX

40. XXX

41. XXX

42. XXX

43. XXX

XXX

44. XXX

45. XXX

46. XXX

XXX

47. XXX

XXX

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48. XXX

49. XXX

50. XXX

51. XXX

52. XXX

53. XXX

54. XXX

55. XXX

56. XXX

57. XXX

XXX

58. XXX

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60. XXX

61. XXX

62. XXX

63. XXX

XXX

64. XXX

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65. XXX

66. XXX

67. XXX

68. XXX

69. XXX

70. XXX

71. XXX

XXX

72. XXX

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74. XXX

XXX

75. XXX

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77. XXX

78. XXX

79. XXX

XXX

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80. XXX

81. XXX

82. XXX

XXX

83. XXX

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XXX

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93. XXX

94. XXX

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96. XXX

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97. XXX

98. XXX

99. XXX

100. XXX

101. XXX

102. XXX

103. XXX

XXX

104. XXX

105. XXX

106. XXX

XXX

107. XXX

XXX

108. XXX

109. XXX

110. XXX

XXX

111. XXX

112. XXX

113. XXX

114. XXX

115. XXX

116. XXX

117. XXX

118. XXX

119. XXX

XXX

120. XXX

The Main Allegation

Allegation - Paragraph 1

121. The Tribunal considered paragraph 1 of the Allegation.

122. The Tribunal noted that this information was agreed as fact.

123. The Tribunal therefore found paragraph 1 of the Allegation proved.

124. The Tribunal turned to consider the evidence in respect of paragraph 4 and 5 of the Allegation as these alleged incidents had the most contemporaneous and supporting evidence available to the Tribunal. The Tribunal reminded itself of the invitation to consider cross-admissibility.

Allegation – Paragraph 4

125. The Tribunal considered paragraph 4 of the Allegation. It considered the evidence of both Dr Saedi and Ms A and noted that both parties agreed that there was an argument resulting from XXX. Ms A's evidence was that Dr Saedi slapped her and mishandled her into various rooms causing her to hit her elbow on the wardrobe door which caused irreparable damage. She further states that she was very angry and that in efforts to calm herself that she slapped herself in the face. Dr Saedi's evidence was that Ms A became hysterical and started hitting her head against a door which banged against the wardrobe causing the doorknob to penetrate the wardrobe door. When he attempted to stop her she was violent towards him.

126. The Tribunal looked at the evidence in the round relating to this incident and considered Ms A's statement at paragraph 68:

"I went into the kitchen and tried to shout from there. Mr Saedi grabbed me from the kitchen, slapped me really badly in the face, and threw me into the living room. I fell and my head was very close to hitting the coffee table. The window in the kitchen was open and the other windows in the house are always closed. Whenever I was really distressed I would walk towards the window if I needed to shout for help. Mr Saedi knew this- I was in the kitchen, so he grabbed me from the back and threw me into the living room area"

127. The Tribunal noted that when asked about this incident in examination in chief Ms A did not mention being slapped by Dr Saedi when in the kitchen. When asked about this incident in cross examination in particular to the time when she was at the kitchen window Ms A similarly did not mention being slapped by Dr Saedi and instead only commented that he came and grabbed her and threw her into the living room. The Tribunal understood that this event occurred more than XXX years ago and that this time passage may cause some level of inconsistency, however it was of the view that the physical slap was the most serious aspect of this incident and it therefore did not find it believable that Ms A would forget this aspect when recounting her experience.

128. The Tribunal had consideration of the body worn video footage from the Police and noted that during their arrival on the scene Ms A tells them that she got stressed and started slapping herself and that then Dr Saedi slapped her. This is again different to her witness

statement as she does not mention slapping herself. In her supplemental statement, which was produced after she had watched the body worn footage, she clarifies that:

"In video 1, I said that I slapped myself during incident 3. This is true. I slapped myself once to say stop covering for [XXX]. I was stressed and, in a way, I did this to protect myself to stop him attacking me. What I said on the video is correct, but I only slapped myself once."

129. The Tribunal had consideration to Dr Saedi's evidence at paragraph 52 of his statement:

"Ms A, began shouting whilst I was in [XXX]. She became hysterical and then hitting her head against a door in a rage. This had resulted in the doorknob penetrating through [XXX] wardrobe door. As Ms A [XXX], I was really worried and frightened for her. I attempted to stop her from inflicting harm to herself by holding her arms and trying to hug her and comfort her, but this resulted in her scratching my neck, leaving visible nail marks on my neck as in the photograph submitted as an EXHIBIT 10-B."

130. It further had consideration to the transcript of the police interview which was contemporaneous evidence taken just hours after the incident. It noted that Dr Saedi was mostly consistent in his evidence. He did mention to the police that Ms A had been slapping herself which was not mentioned in his witness statement but he did confirm to the Tribunal in his oral evidence that this happened and Ms A herself admits that she slapped herself after the argument started when they were moving furniture and XXX was mentioned.

131. Ms A alleges that Dr Saedi manhandled her between various rooms and locked her in both the bathroom and the living room area. Dr Saedi denies this.

132. The Tribunal looked at Ms A's evidence. In her witness statement she said:

"He then grabbed me from the living room and tried to take me to [XXX] room with force. I think he did this because I was crying, shouting and yelling and he didn't want the neighbours to hear anything so he took me there so I would calm down. He grabbed hold of me with his arms; I can't explain how he did this he just held his arms around me. [XXX] He pulled me into [XXX] and my elbow hit the wardrobe and broke the wardrobe door. He then took me to the bathroom and locked the door and went to get me some water"

133. The Tribunal noted that although she starts by stating that Dr Saedi grabbed her and took her from the living room to XXX, she later says “*he pulled me into [XXX]*”. The Tribunal was clear that both parties had given evidence that the incident continued in XXX, not XXX. A further inconsistency was that in her examination in chief she stated that “*she*” tried to go to XXX and it was at this point that Dr Saedi grabbed her and lifted her towards the bathroom. This is different from the account in her statement which clearly states that it was Dr Saedi who tried to take her to XXX.

134. A further inconsistency in Ms A’s evidence was in respect of whether Dr Saedi took her to the bathroom and locked her in, which is what she alleges in her statement. In her oral evidence she stated that she may have walked to the bathroom, but that she was in shock so could not remember. The Tribunal further noted that Ms A states that Dr Saedi locked her in the bathroom and went to get some water, however it is agreed that the bathroom cannot be locked from the outside. In her oral evidence she stated that he stood in front of the bathroom door whilst in the bathroom with her, effectively locking her in.

135. Ms A further alleges in her statement that Dr Saedi slapped her in the face causing her to fall into the bath. The Tribunal noted that when asked about this incident in examination in chief Ms A did not mention being slapped by Dr Saedi when in the bathroom. She instead stated that Dr Saedi “pushed” her into the bath. Again, although the Tribunal was aware that many years had passed and that Ms A’s examination in chief was not a memory exercise or test, it considered it unbelievable that she would forget to mention the slap when recounting the incident.

136. The Tribunal noted that Ms A stated that Dr Saedi locked her in the living area. It was agreed that the lockable door into this area was in fact the front door to the flat. Both Dr Saedi and Ms A agree that the keys would have been left in the front door and the Tribunal noted that Ms A’s evidence is that later during this incident she grabbed her scarf and left the flat. This demonstrated that she was able to leave the flat. The Tribunal had no supporting evidence to suggest that Dr Saedi had locked the door whilst Ms A was in the living room area but considered it more likely that the door was already locked. The Tribunal concluded that it would be common for a front door to be locked with the key in the door, especially given that XXX.

137. The Tribunal looked to any supporting evidence and noted the photos of the damaged wardrobe. The parties agreed that this wardrobe was in XXX and at the time of the

incident was positioned behind the door to that room. The Tribunal could see in the photo that the height of the damage was the exact height of the doorknob on the door. It therefore concluded that this supported Dr Saedi's evidence that it was the doorknob which had caused the damage because Ms A was hitting her head against the door. The Tribunal therefore accepted Dr Saedi's version of events that Ms A had been hitting her head against the door.

138. The Tribunal considered Dr Saedi's reliability and noted that he told the Tribunal that he did not get angry and did not shout. The Tribunal considered the evidence of the initial occurrence report by Thames Valley Police which was reported by South Central Ambulance Service. In this report it is stated that "*the SCAS operator remarked that they could hear the male in the background, shouting*". The Tribunal noted that in his police interview Dr Saedi said he was frightened when Ms A was slapping herself. It was of the view that it was more likely than not that if the event occurred as Dr Saedi alleged, that he would have been shouting or raising his voice.

139. In relation to paragraph 4a, the Tribunal considered the evidence it had before it regarding the argument. It noted that it was clear from both parties' evidence that the topic of XXX made the relationship difficult, and that this argument was volatile and physical. The Tribunal noted that Dr Saedi states that he was "*holding her arms and trying to hug her and comfort her*". Ms A's evidence was that "*He grabbed hold of me with his arms; I can't explain how he did this he just held his arms around me*". The Tribunal accepted that both parties agreed that this had occurred, the issue to determine was perhaps the force or intention behind the action. Given the nature of the altercation the Tribunal considered that during this particular argument XXX the "holding" of Ms A could have been with more force than possibly intended and that on the balance of probabilities it was more likely that Dr Saedi did "grab" Ms A. It therefore found paragraph 4a of the Allegation proved

140. The Tribunal found Ms A's evidence unclear, inconsistent and not supported by the limited corroborating evidence. The Tribunal considered Ms A's evidence to be so inconsistent in relation to this part of the Allegation that she was not reliable. The Tribunal could not be sure on the balance of probabilities that the incident occurred as she said it did. Accordingly the Tribunal found paragraph 4b, 4c, 4d, 4e, 4f, 4g, 4h and 4i not proved.

141. In relation to paragraph 4j, the Tribunal considered that it only has Ms A's word against Dr Saedi's word in relation to this part of the allegation. The Tribunal knew that a member of the public did approach Ms A whilst she was outside XXX, it further understood

that this passer-by had offered Ms A help and had called the police. The evidence suggested that the member of the public called the police and allowed Ms A to use their phone thus meaning that they would have been in close proximity to Ms A. Given the public perception of Covid-19 during XXX, the Tribunal felt it was more likely than not that this member of the public did not think Ms A had Covid-19 and therefore, the Tribunal found it less likely that Dr Saedi had said this. The Tribunal therefore found paragraph 4j of the Allegation not proved.

142. The Tribunal therefore found paragraph 4 of the Allegation not proved, apart from Allegation 4a, which it found proved.

Allegation - Paragraph 5

143. The Tribunal considered paragraph 5 of the Allegation.

144. Dr Saedi's account of the incident is that Ms A was angry at him for not taking calls from XXX and that this started an argument. He tried to walk away from Ms A but she followed him around the flat whilst talking to XXX. She blocked his exit XXX and it was at this point that he started an audio recording. Ms A continued to follow him and Dr Saedi told her he was going to call the police if she did not stop. At this point XXX advised her to call the police and she did so. Dr Saedi walked outside XXX to sit in the car and Ms A followed him with XXX on loudspeaker who were insulting Dr Saedi. At this point Ms A got a call back from the police. Dr Saedi continues that he then went back inside XXX and that Ms A punched him in the back of the head twice.

145. Ms A's account of the incident is that Dr Saedi commented on her wearing XXX and threatened to XXX. The conversation got heated and Ms A said she would call the police again if he continued. Ms A called her family and XXX told her to XXX and to call the police. Ms A says that at this point Dr Saedi started verbally abusing her and called her a whore. She says she ended the call with XXX and that it was at this point that Dr Saedi brought out paperwork with police stamps on them and was threatening her that she would be sleeping in the station. Ms A then went to call the police and Dr Saedi tried to grab the phone from her and pushed her up against the wall where she hit her finger on the door handle. She says she managed to push past him out of the house and call the police.

146. The Tribunal listened to the audio recording and reviewed the transcripts and noted that although both transcripts of the audio clip had been officially translated there were differences between the two.

147. The Tribunal were of the view that although some of the aspects of Ms A's account were heard on the audio recording, such as "whore" and "have to go there (police station) tonight", the audio supported the account given by Dr Saedi more than it did the account of Ms A. The Tribunal noted that Ms A had not mentioned that any of the argument had occurred outside, however, the Tribunal could clearly hear that at some point during the call it appeared as though Dr Saedi had walked outside to the car, in that car doors were heard opening and closing, as well as the car radio.

148. The Tribunal considered the reliability and credibility of Dr Saedi. Dr Saedi said in his evidence that Ms A had hit him 2 times on the back of his head as he had walked back into the flat, this would have occurred at the end of the audio recording. He confirmed in his oral evidence this was the only 2 hits he sustained. However, the Tribunal noted that there are multiple times on the recording where Dr Saedi is heard saying 'don't hit', this is whilst he is out in or by the car. Ms A gave evidence that Dr Saedi was saying this because he knew he was recording and the Tribunal found this highly likely. The Tribunal noted that it did not hear any sounds resembling hits nor any sounds of Dr Saedi reacting to a hit on the audio recording and concluded that it did not accept that Dr Saedi was being truthful in this regard during the call and that this called into question Dr Saedi's credibility.

149. The Tribunal were clear that an argument had clearly occurred on this evening and that both parties stated that the other party had been violent towards them. The Tribunal noted Ms A's witness statement:

'I said to Mr Saedi, I'm going to call the Police. At first, I think he thought that it was just a threat, but then he saw the Police number being called on my phone. He tried to grab the phone from me, pushed me against the wall and I hit my finger against the door handle. My finger was scratched and bleeding and there was blood everywhere. He tried to take the phone again to stop me calling for help. [XXX] when this happened but there was nobody else there. I was scared that he would cause me injury. The front door was open and I managed to push past him and leave the house with my phone and called the Police.'

150. The Tribunal again considered the audio recording it had of this incident and the transcripts in relation to it. It noted that at no point during this audio does Ms A make any noises or say anything to suggest that Dr A grabbed her phone, pushed her against a wall or injured Ms A's finger. For example, there was no audio of Ms A saying anything along the

lines of ‘get off me’ or ‘stop’ and no audio of Ms A indicating that she was in any pain. The Tribunal was of the view that overall, Ms A’s statement was not corroborated by what it had heard on the audio recording.

151. The Tribunal considered whether this altercation could have occurred before the voice recording commenced. It noted in Dr Saedi’s statement that there were 2 calls to the police. Dr Saedi states at paragraph 64 and 65:

“...She came to the living room where I was [XXX]. I could hear in the background noise that [XXX], was shouting and insulting me. This was mainly because of my refusal to speak to them. At this point I immediately got up and tried to leave the house again but Ms A physically blocked my access out [XXX]. At this stage, I decided to start an audio recording of the conversations”...

“Ms A then followed me around [XXX] with her phone on a loud speaker and [XXX] still on the phone. [XXX] I advised Ms A that I was going to call the police if she didn’t stop behaving this way. As soon as [XXX] heard me saying this, [XXX] advised her to contact the police first. At this point, she made an initial call to the police”

152. Dr Saedi’s account is that the first call to the police is made whilst he is recording. The Tribunal noted from the transcripts of Dr Saedi’s recording that there was only one call to the police that was picked up on the audio, however it noticed that Ms A is overheard saying to [XXX] that the police were calling her, therefore it was clear that there had been a previous call to the police. It was possible that Ms A’s injury was caused before the recording was started.

153. The Tribunal reviewed the police transcripts where Ms A stated that the injury caused a “small cut to my middle finger”. She further states that she “managed to push him away and leave the house with my phone and called for the Police...thankfully the Police arrived very quickly”. The Tribunal were again of the view that this narrative was not corroborated by the audio clip and respective transcripts. The Tribunal noted that this account, taken at the police station on the evening of the incident, was different to Ms A’s witness statement which said there was “blood everywhere”. The Tribunal noted that the police report did not mention any blood within the property and therefore concluded that this was either an exaggeration or a lie.

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154. Further the Tribunal noted that during the call to the police Ms A is overheard telling them that Dr Saedi has hit her and that XXX. Her witness statement makes no mention of Dr Saedi hitting her, only pushing her whilst trying to grab her phone. In her oral evidence Ms A clarified that she believed XXX, but the Tribunal were of the view that she was either not being honest to the police or exaggerating the severity of her situation and either way she was deliberately misleading the police when she made these comments on the phone.

155. The Tribunal were of the view that Ms A was not a credible witness in respect of this incident, there were multiple exaggerations, and the supporting evidence did not corroborate her narrative. This impacted on Ms A's credibility overall.

156. The Tribunal found that the reliability of both Ms A's and Dr Saedi's account was questionable. The Tribunal concluded that by the point of this argument, XXX and each party was in some way building a narrative against the other, this seriously impacted on the credibility of both parties.

157. As a result of the issues with Ms A's credibility the Tribunal could not determine on the balance of probabilities that the incident had occurred as Ms A stated.

158. The Tribunal therefore found paragraph 5 of the Allegation not proved in its entirety.

159. The Tribunal reminded itself that as it had made a determination on facts for the allegation in paragraph 5, it now needed to now make its determination on Schedule 2 paragraphs 4 which related to further behaviours alleged to have occurred during the course of this incident.

XXX

160. XXX

161. XXX

162. XXX

163. XXX

164. XXX

XXX

165. XXX

166. XXX

167. XXX

168. XXX

XXX

169. XXX

170. XXX

Allegation – Paragraph 2

171. The Tribunal considered paragraph 2a of the Allegation. It referred to Ms A's witness statement where she said:

'Mr Saedi picked up a pillow and he was carrying it and tried to throw the pillow at me. He was holding the pillow with his fist-clenched but as we were so close to each other, he actually punched me on the side of my head. We were standing really close to each other and as he went to throw it, the side of his hand made contact with my head.'

172. The Tribunal noted that the way Ms A describes this incident is as an accident occurring, which resulted in Dr Saedi accidentally punching Ms A on the side of her head. Dr Saedi denies the allegation.

173. The Tribunal noted the oral evidence of Dr Saedi when questioned regarding this, Dr Saedi asserted that he and Ms A may have been 'playing' and that this 'could' have happened but, that if it did, it was an accident.

174. The Tribunal considered the dictionary definition of punch: strike with the fist.

175. The Tribunal considered the credibility of Ms A in relation to this incident. It noted that it had found Ms A not to be credible in respect of the incident occurring in paragraph 5 of the Allegation nor in respect of her evidence relating to the video calls and credit card. Further it had not found her to be reliable due to inconsistencies in her evidence relating to some of the other paragraphs of the Allegation.

176. The Tribunal further noted that it had found Dr Saedi not to be credible in respect of the incident occurring in paragraph 5 of the Allegation.

177. Whether or not the Tribunal accepted the narrative of either Dr Saedi or Ms A, the supporting evidence clearly showed that there were arguments between them during their relationship. The Police had been called on 2 occasions and there was evidence that arguments within the house caused damage to property and that XXX third parties heard shouting.

178. With all this in mind the Tribunal considered the evidence of both parties in respect of this incident.

179. The Tribunal noted that this incident occurred almost a year before the other alleged incidents. It further noted that Ms A was more consistent in her statement and in her recount of this incident, it did not have lots of inconsistencies which her evidence in respect of other allegations did. Further, there did not appear to be any exaggerated or inflammatory statements which, on other incidents, had led the Tribunal to find her evidence implausible. Ms A's account was measured in that she herself suggests that it was not necessarily intentional. For these reasons the Tribunal found Ms A's account to be credible.

180. The Tribunal considered that it was being asked to determine whether an argument had occurred around XXX as Ms A said it had or whether this was fabricated and that an argument did not occur. The Tribunal was of the view that given the history of arguments, particularly around the topic of XXX, it was more likely than not that an argument had occurred and that during this argument Dr Saedi had accidentally punched Ms A whilst throwing the pillow.

181. Accordingly, the Tribunal found paragraph 2a proved

182. The Tribunal considered paragraph 2b and looked at Ms A's statement. She said:

'I was in such a shock that I couldn't talk or breathe. He took me to the shower and stood me up in the running water to try and bring me out of the shock.'

183. The Tribunal noted that Ms A does not allege that Dr Saedi 'pushed' her into the shower. Her evidence is that he took her to the shower and stood her under the running water. The Tribunal could find no evidence adduced that stated that Dr Saedi pushed Ms A into the shower.

184. Accordingly, the Tribunal found paragraph 2 b of the Allegation not proved.

185. As the Tribunal had found Ms A's evidence of the incident to be credible and that it was more likely than not to have occurred as she reports, the Tribunal accepted her evidence that Dr Saedi had refused to let her go to the hospital. The Tribunal took the view that as Ms A XXX she would have been reliant on Dr Saedi taking her to seek medical assistance. The Tribunal further noted that with Dr Saedi being medically trained he may have considered it unnecessary for Ms A to seek medical attention after this incident and it was therefore plausible that he 'refused' to take Ms A to hospital.

186. The Tribunal therefore found paragraph 2c of the Allegation proved.

187. The Tribunal reminded itself that as it had made a determination on facts for the allegation in paragraph 2, it now needed to now make its determination on Schedule 2 paragraph 1s (i) which related to further behaviours alleged to have occurred during the course of this incident.

XXX

188. XXX

189. XXX

190. XXX

Allegation - Paragraph 3

191. The Tribunal noted that in relation to this paragraph of the Allegation, the only evidence it had before it, was Ms A's version of events against those of Dr Saedi's version of the events.

192. Ms A states that on a certain day in May (XXX) that she and Dr Saedi argued and that Dr Saedi insulted XXX. She alleges he was so angry that he grabbed her and dug his nails into her arms. She further alleges that also that day when she was in the kitchen they were arguing again and he threw her into the living room. Dr Saedi denies this allegation but does mention that there was an argument that occurred in April/May whereby they argued about XXX and that Ms A assaulted him by slapping him across the neck.

193. The Tribunal referred to the video evidence it had before it where Ms A showed scarring, bruises or marks on her arm, which she alleges were caused by Dr Saedi during the incident in XXX. The Tribunal noted that this video footage was taken some five-months after the incident in XXX. The Tribunal did not find it plausible that these marks or bruises would be visible this long after the event. Additionally, the Tribunal considered that the GMC has not provided additional evidence, such as expert opinion, that these marks could still be there at this point in time. As such the Tribunal gave little weight to this evidence.

194. The Tribunal noted that Ms A said in her witness statement:

"I have some scars from this incident still. We were both standing in the middle of the living room, close to the kitchen window when this happened. When he squeezed his nails into my arms, I fell down onto the ground"

195. The Tribunal noted that Ms A didn't say she was thrown into the living room and could find no evidence adduced to suggest that this is what happened. As such the GMC had not discharged its burden of proof and accordingly the Tribunal found paragraph 3a not proved.

196. Dr Saedi states in his statement at paragraph 48:

"Around the month of [XXX], a verbal argument around [XXX] started. Ms A, became so emotional that she slapped me across my neck resulting in visible bruising and pain. This incident happened [XXX] in the living room".

197. The Tribunal had consideration of the photographic evidence provided by Dr Saedi and determined that this did corroborate his counter-allegation.

198. The Tribunal reminded itself that it was not being suggested that this was two versions of the same incident and in fact these two incidents could have both occurred.

199. The Tribunal was again of the view that it was being asked to consider whether an argument had occurred as Ms A alleges. On the balance of probabilities, it found it was more likely than not that an argument had occurred on or around XXX.

200. The Tribunal then considered 3b and whether during that argument Dr Saedi had put his hands around Ms A's arms. The Tribunal referred to the incident in paragraph 4 where Dr Saedi stated that in order to try and calm Ms A he put his arms around her. In his police interview he demonstrated how during this incident he had taken hold of her wrists and when asked by police officers "*so you've tried to take hold of her wrists...*" he replied "*absolutely*". The Tribunal was of the view that he could have used a similar method during this argument and therefore accepted Ms A's account that he had put his hands around her arms. Accordingly, the Tribunal found 3b proved.

201. In considering 3c the Tribunal took into account that it could give little weight to the video evidence adduced by Ms A of her injuries. The Tribunal also had consideration of the injuries shown to police officers in the body worn footage dated XXX, approximately 2 months later. It noted that it could not see the injuries clearly from this footage and the GMC had adduced no other evidence of the injuries.

202. With the exception of the date on which the incident occurred the Tribunal found Ms A's evidence to be consistent. It noted that on XXX when the police attended, Ms A told the police that Dr Saedi had dug his nails into her arms a couple of months earlier, which was consistent with her witness statement. She also commented to the police at this time that "*when he gets upset he throws me around and breaks things holds my arm very tight and dig nails into flesh*". This is again consistent with her witness statement and is somewhat corroborated by the entry from the police house calls on XXX where neighbours reported:

"Has not heard this incident but has previously seen female crying in the car park and has heard shouting coming from the address. Stated the voice sounded male."

"Has not heard this incident but has previously heard a female screaming and shouting and a male trying to calm her down. On one occasion he has heard what sounded like something being thrown against a wall"

203. The Tribunal considered Ms A's credibility and noted that it had not found her credible on a number of occasions. It further noted that there were a number of inconsistencies in her account of this incident in terms of the date of when it occurred. The Tribunal reminded itself that it did find it implausible that there would be scars resulting from these injuries in XXX and this was the injury that has alleged to have been caused. Therefore, the suggestion by Ms A that her arms showed marks from this incident did impact on Ms A's credibility. Overall, the Tribunal were not satisfied that Dr Saedi had dug his nails into Ms A's arms causing injury and found paragraph 3c not proved.

204. The Tribunal reminded itself that as it had made a determination on facts for the allegation in paragraph 3, it now needed to now make its determination on Schedule 2 paragraphs 3 which related to further behaviours alleged to have occurred during the course of this incident.

XXX

205. XXX

206. XXX

207. XXX

Allegation - Paragraph 6

208. The Tribunal considered paragraph 6 of the Allegation and noted that this paragraph related to all the facts found proved in Schedule 2 as well as to Paragraphs 2-5 of the Allegation.

209. The Tribunal had regard to all the evidence it had before it in this case. It took the view that overall, the picture that had been painted, reflected a very dysfunctional relationship. It was clear to the Tribunal that arguments and conflict had occurred within the relationship between Ms A and Dr Saedi and that subsequently, the relationship ended in an acrimonious manner.

210. The Tribunal, when having regard to the facts it has found proved in this case, did not consider that Dr Saedi was controlling or coercive towards Ms A. Or, that Dr Saedi exhibited any behaviours which would have led Ms A to believe she was at risk of serious harm. The Tribunal noted that it had found proved that Dr Saedi would call Ms A's XXX phone, he controlled the finances, and he would go through her receipts. The Tribunal did not think this amounted to coercive or controlling behaviour. The Tribunal took the view that the other facts it had found proved, occurred XXX during a deteriorating relationship.

211. Additionally, the Tribunal considered that if Dr Saedi was subjecting Ms A to controlling and coercive behaviour as described in paragraph 6 of the Allegation, it is unlikely that Ms A, during her evidence would say positive things about Dr Saedi such as '*he really looked after me during [XXX]*'.

212. Overall, the Tribunal did not find a persistent pattern of cumulating events or incidents which could lead it to determine that Dr Saedi exhibited controlling or coercive behaviours towards Ms A.

213. The Tribunal therefore found paragraph 6 of the Allegation not proved.

The Tribunal's Overall Determination on the Facts

214. The Tribunal has determined the facts as follows:

1. The nature of your relationship with Ms A is set out in Schedule 1.
Determined and found proved
2. In or around XXX, during an argument with Ms A you:
 - a. punched Ms A in the side of the head;
Determined and found proved
 - b. pushed Ms A into the shower, fully clothed;
Not proved
 - c. refused to let Ms A go to the hospital to seek medical attention.
Determined and found proved

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3. In or around XXX during arguments with Ms A you:
 - a. grabbed Ms A and threw her into the living room;
Not proved
 - b. put your hands around Ms A's arms;
Determined and found proved
 - c. dug your fingernails into Ms A's arms, causing injury.
Not proved
4. In or around XXX during an argument with Ms A you, on one or more occasion:
 - a. grabbed Ms A;
Determined and found proved
 - b. slapped Ms A in the face;
Not proved
 - c. threw Ms A into the living room;
Not proved
 - d. grabbed Ms A and moved her to a different room;
Not proved
 - e. caused Ms A to hit her elbow on the wardrobe by pulling her;
Not proved
 - f. locked Ms A in the bathroom;
Not proved
 - g. grabbed Ms A to stop her leaving the bathroom;
Not proved
 - h. slapped Ms A in the face, causing her to fall into the bath;
Not proved

- i. locked the door whilst Ms A was in the living room area;
Not proved
- j. when Ms A left the house, you told passersby that Ms A had covid so they would not approach her to offer help.
Not proved

5. On XXX, during an argument with Ms A, you:

- a. on one or more occasion tried to grab a phone away from Ms A to prevent her from calling the police;
Not proved
- b. pushed Ms A against a wall;
Not proved
- c. caused injury to Ms A's finger.
Not proved

6. Your conduct as set out in Schedule 2 and paragraphs 2-5 above amounted to controlling and/or coercive behaviour as defined by S.76 of the Serious Crime Act 2015 in that you repeatedly or continuously engaged in behaviour towards Ms A, with whom at all material times you were personally connected, that was controlling or coercive, had a serious effect on Ms A, and which you knew or ought to have known would have a serious effect on Ms A.

Not proved

Schedule 1

XXX

XXX

Schedule 2

XXX

1. The Tribunal now has to decide in accordance with Rule 17(2)(l) of the Rules whether, on the basis of the facts which it has found proved as set out before, Dr Saedi's fitness to practise is impaired by reason of misconduct.

The evidence

2. The Tribunal has reviewed its findings of fact. The Tribunal also received:

- CPD Certificates of courses completed by Dr Saedi dated November 2025 to January 2026
- Statement from Dr Saedi's Responsible Officer, Mr C dated 27 May 2025
- Reflective statement by Dr Saedi dated 6 January 2026.

Submissions

Submissions on behalf of the GMC

3. Ms Fry, Counsel, submitted that there were three findings of fact of particular relevance to the issue of impairment. Ms Fry reminded the Tribunal of its findings in regard to XXX. The Tribunal found that Dr Saedi physically assaulted Ms A when, in the course of an argument, he attempted to throw a pillow at her and caught her face with his clenched fist. Although the incident was referred to at times in the evidence as an accidental punch, the Tribunal found that this amounted to an intentional use of force in the course of an argument, albeit that the intention was to strike Ms A with the pillow rather than with the fist holding it. Ms Fry submitted that, while this was less serious than a deliberate punch to the face, it nevertheless amounted to serious misconduct, involving violence in anger during an argument, and not playful behaviour as suggested by Dr Saedi. The incident occurred at a time when Ms A was XXX vulnerable, which further aggravated its seriousness.

4. Ms Fry reminded the Tribunal that this finding sat against a wider backdrop in which the Tribunal found that there were arguments between Dr Saedi and Ms A XXX, including some that caused damage to property, and that XXX third parties reported hearing shouting. Against that backdrop, Ms Fry submitted that the second and third findings of particular relevance arose from incidents in XXX and XXX.

5. Ms Fry reminded the Tribunal that in the course of at least two arguments, Dr Saedi chose to lay his hands on Ms A, grabbing or holding her. The Tribunal found that on at least one occasion more force was used than was intended, but that force was nonetheless applied. Ms Fry submitted that Dr Saedi's own evidence was that he could not explain why he chose to lay his hands on Ms A rather than adopting a more appropriate means of calming the situation. Ms Fry submitted that the Tribunal may consider that this amounted to an

unnecessary escalation of an argument into physicality. It would have been abundantly clear to Dr Saedi that Ms A did not welcome his physical intervention, particularly given his knowledge that, in XXX, he had already injured [Ms A] by using physical force in the course of an argument.

6. Ms Fry submitted that, in relation to the XXX incident, Ms A was so distressed that a member of the public felt compelled to intervene and assist her in contacting the police. Ms Fry submitted that each of these incidents was capable of amounting to serious misconduct in its own right, and certainly when considered collectively and alongside the XXX incident.

7. Ms Fry submitted that the conduct giving rise to these findings amounted to breaches of paragraph 65 of Good Medical Practice (2013) ('GMP'), which requires doctors to ensure that their conduct justifies their patients' trust in them and the public's trust in the profession. Ms Fry submitted that members of the public would be deeply concerned to learn that a doctor had used physical force against XXX Ms A XXX. Such conduct was entirely unbecoming of the medical profession.

8. Turning to current impairment, Ms Fry submitted that, whilst Dr Saedi's most recent witness statement read positively on its face and certificates had been provided demonstrating some work undertaken, the evidence lacked sufficient depth to provide the Tribunal with a proper insight into his insight. In particular, the Tribunal was not assisted as to what Dr Saedi actually accepted he had done by reason of the findings, what specific work he had undertaken that related to those findings, or how that work had assisted him in understanding the seriousness of his conduct or identifying areas requiring improvement.

9. Ms Fry reminded the Tribunal that, within its facts determination, it had expressed concerns at times about Dr Saedi's credibility, including concerns that he appeared to be seeking to build a case against [Ms A]. Whilst this did not undermine the findings themselves, it was relevant to Dr Saedi's acceptance of responsibility for his conduct. In relation to the XXX incident, Dr Saedi's evidence had been that the incident did not occur, or that if it did, it was accidental or playful. That account was inconsistent with the Tribunal's findings and demonstrated a lack of insight into his conduct and its impact on Ms A. Ms Fry submitted that nothing before the Tribunal today materially altered that position. While the written statement adopted the language of insight, it remained superficial and did not engage meaningfully with the substance of the findings.

10. Ms Fry submitted that the Tribunal must also consider public confidence in the medical profession arising from the findings it has made. In her submission, all three limbs of the overarching objective were engaged, and a finding of impairment was necessary 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. Absent a finding of impairment, it would send an unacceptable message to both the public and the profession that a doctor could behave in a manner wholly contrary to professional and personal standards without regulatory consequence.

Submissions on behalf of Dr Saedi

11. Dr Saedi submitted that, in relation to the XXX incident, he did not accept that the incident happened. He stated that Ms A suggested that he may have accidentally punched her when throwing a pillow, but he had no recollection of that event whatsoever. He submitted that he had mentioned it may have happened because at that time they did have fun, were playing and “messing about”, and he was trying his best to look after Ms A, XXX.

12. Dr Saedi submitted that the same applied to the incident in or around XXX, where Ms A claimed he acted physically against her will. He submitted that no findings were made in terms of physical assault, that he refuted the allegation on that occasion, and that he had presented his own version of the XXX incident. He submitted, however, that on one occasion he did lay hands on Ms A in circumstances where he was trying to prevent her from doing self-harm. He stated that, as a doctor, he felt responsible not only as XXX, but also as a doctor, to prevent a member of the public or any person from inflicting self-harm if he could. He submitted that his instinctive reaction was to prevent harm, and that reflected what he did in the workplace when dealing with people who, at times, had gone through difficult situations and had tried to harm themselves. He referred to circumstances in clinical settings where healthcare professionals may need to restrain someone against their will when they have lost capacity, whilst making clear he was not saying Ms A had lost capacity, but he submitted that in those circumstances his instinct was to prevent her hitting herself, and that was the occasion when he held her. He submitted that as soon as he realised, and as he mentioned in his statement, that this had led to an escalation, he let her go and let her arm go. He submitted that this was the only time he really recalled laying hands on her, apart from the occasion he said he pushed her off his chest, as set out in his own evidence.

13. Dr Saedi submitted that he had told both the police and the Tribunal that he had held Ms A’s hands, and he understood the Tribunal concluded that this may have happened in the past. He submitted that XXX the Tribunal had seen only a very small version of the situations he said he went through, where she could become hysterical and start screaming. He submitted that if such situations happened XXX when he was there, she would certainly try to harm herself.

14. Dr Saedi submitted that he accepted that his reactions were as a result of the stressful events. He submitted that he has now developed an understanding of boundaries between himself and Ms A and that at the time, he should perhaps have gone away, or responded differently when she became physical and hysterical towards herself. He submitted he did not know what the right or wrong answer was, because his instincts as a human being and as a doctor were to prevent harm. He submitted that this was consistent with one of the pillars of GMP. He submitted that, rather than demonstrating a lack of insight, it showed that he cared, as he did not want to see somebody inflicting harm to themselves and walk away. He submitted that his instinct was to prevent that, and if that was used against him, he considered that was unfair.

15. Dr Saedi submitted he had developed learning and insight into how to prevent conflict by undertaking courses, including learning to respect other people's boundaries, will and wishes. He submitted he had learned to identify early signs that an argument was developing and to seek help earlier. He explained that he was reluctant in how he expressed this because he had previously mentioned seeking help and was then told he was "making a case" for himself and collecting evidence, which left him in a difficult position. He submitted that, being unrepresented, he felt disadvantaged and that many of the terms being used were new to him. He submitted that a long time had passed since the incidents, XXX, and that his recollection had been affected by persistent stress and proceedings over the last XXX, which had put a tremendous amount of stress on him. He submitted that he had developed resilience and good coping mechanisms, but he remained a human being with responsibilities not only to XXX, but also towards the public as a medical professional, and he had remained calm and collected over the last XXX.

16. Dr Saedi submitted that he did not believe his fitness to practise was impaired. He submitted that he had clear insight, showed respect, and maintained boundaries even during the proceedings. He submitted that even when he felt intimidated, both by Ms A and by cross-examination, he remained calm, collected, and professional. He submitted that this was his personality both at work and outside, and that he always respected others regardless of their relationship to him, firstly as a human being and secondly as a professional person, and that applied to patients as well as family members and Ms A.

17. Dr Saedi submitted that, to demonstrate he had learned from these incidents, he had undertaken courses not only to prove it but to improve his own understanding and prevent any recurrence. He submitted that he had undertaken remediation and had taken steps to prevent future incidents.

18. Dr Saedi submitted that, as to public confidence and whether his fitness to practise was impaired, there had been a statement from his responsible officer dated last year and he submitted that nothing had changed since that time. He submitted that he had always been caring and compassionate towards patients, received positive and constructive feedback from patients and colleagues, and never had any concerns raised about his conduct in practice. He referred to patient feedback and 360 feedback he had submitted previously, describing him as caring, compassionate and kind, someone who listened to patients, cared, and respected patients and their boundaries.

19. Further to his oral submissions, Dr Saedi submitted written submissions for the Tribunal's consideration.

20. Dr Saedi acknowledged that his physical actions during arguments, regardless of intent, constituted inappropriate behaviour and may amount to serious misconduct. He recognised that any physical conduct in such circumstances was inappropriate, unwelcome, and capable of causing physical and emotional harm, and he did not seek to minimise the seriousness of the incidents. He accepted that the decision to use physical force at all was wrong.

21. Dr Saedi submitted that he now accepted responsibility without equivocation, recognised that intent is irrelevant where physical force is used, and understood how his behaviour could reasonably be perceived as threatening. He accepted that insight must be demonstrated through reflection, learning, and sustained behavioural change rather than assertion alone.

22. Dr Saedi submitted that he accepted the Tribunal must consider the risk of repetition. He respectfully submitted that this risk had been significantly reduced through the implementation of robust and structured safeguards, including XXX. He submitted that these safeguards were practical, proportionate, and sustainable.

23. Dr Saedi submitted that he accepted his conduct undermined public confidence and proper professional standards and did not seek to minimise its seriousness. However, he respectfully invited the Tribunal to take into account his developed insight, the targeted remediation he had completed, the safeguards now in place, and his ongoing commitment to reflection and professional standards.

24. Dr Saedi submitted that he remained fully committed to upholding the principles of GMP, including honesty, integrity, self-control, and respect for others. He recognised that maintaining trust requires sustained adherence to these principles both inside and outside clinical practice.

The relevant legal principles

25. There is no burden or standard of proof at this stage of the proceedings and the decision of impairment is a matter for the Tribunal's judgment alone.

26. In relation to misconduct, the Tribunal was advised that there is no statutory definition. However, legal authorities provide guidance. In *Roylance v General Medical Council (No 2) [2000]*, misconduct was described as a word of general effect, involving some act or omission which falls short of what would be proper in the circumstances. A single act may be sufficiently serious to amount to misconduct, or a series of acts taken together may do so.

27. The Tribunal was further advised of the guidance in *Remedy UK Ltd v General Medical Council*, which identifies two principal categories of misconduct: first, sufficiently serious misconduct in the exercise of professional practice; and secondly, conduct which is morally culpable, whether occurring within or outside professional practice, and which brings disgrace upon Dr Saedi and the profession. It was emphasised that it is for the Tribunal to exercise its own skilled judgment in deciding whether the conduct found proved amounts to misconduct, having regard to the facts and circumstances.

28. If the Tribunal finds misconduct proved, it must then consider whether Dr Saedi's fitness to practise is currently impaired. Again, there is no statutory definition of impairment. The Tribunal was advised that it would be assisted by the guidance of Dame Janet Smith in

the Fifth Shipman Report, as adopted by the High Court in *Council for Healthcare Regulatory Excellence v Nursing and Midwifery Council and Grant [2011]*. In particular, the Tribunal should consider whether any of the following features are present: whether Dr Saedi has in the past acted, or is liable in the future to act, so as to put patients at unwarranted risk of harm; whether he has in the past, or is liable in the future to bring the medical profession into disrepute; whether he has in the past breached, or is liable in the future to breach, one of the fundamental tenets of the profession; and whether he has in the past acted dishonestly, or is liable to act dishonestly in the future.

29. The Tribunal was advised that, when considering insight and remediation, it should have regard to *Cohen v General Medical Council [2008]*. At the impairment stage, the Tribunal should consider whether the concerns about Dr Saedi's behaviour are remediable, whether those concerns have been remedied, and whether they are unlikely to be repeated.

30. The Tribunal was reminded that, in determining impairment, it must look forward. The question is whether Dr Saedi's fitness to practise is impaired today, taking into account both the conduct at the time and developments since. Insight is relevant to the assessment of future risk of repetition and is to be distinguished from remorse for past conduct.

31. When assessing insight, the Tribunal was advised to have regard to *Sayer v General Optical Council [2021]*. It is wrong to equate the maintenance of innocence with a lack of insight. Denial of misconduct is not an absolute bar to a finding of insight, although it is a factor which the Tribunal is entitled to take into account when weighing insight. The Tribunal may consider the registrant's understanding of, and attitude towards, the underlying allegations and is entitled to consider the background to any differing accounts given.

32. Finally, the Tribunal was advised that, in coming to a conclusion on whether Dr Saedi's fitness to practise is currently impaired, it must have regard to the overarching objective and consider whether a finding of impairment is required on public interest grounds.

The Tribunal's determination on impairment

Misconduct

33. The Tribunal first considered paragraph 1 of the Allegation, which concerned the nature of the relationship between Dr Saedi and Ms A. The Tribunal found this paragraph proved as a matter of fact. XXX. The Tribunal determined that this paragraph was purely contextual and provided background to the remaining allegations. It did not, of itself, allege misconduct and therefore did not require further consideration at the misconduct stage.

34. The Tribunal had regard to GMP, in particular paragraph 65 of GMP, which states:

'65 You must make sure that your conduct justifies your patients' trust in you and the public's trust in the profession.'

35. The Tribunal considered the incident in XXX, and paragraph 2a of the Allegation, as found proved at paragraphs 179-181 of the facts determination. The Tribunal reminded itself that it had found that the incident occurred during an argument and that Dr Saedi intended to throw a pillow towards Ms A, but that, due to their close proximity, his clenched fist holding the pillow made contact with the side of her head. The Tribunal accepted that the contact occurred, but did not find that Dr Saedi intended to punch Ms A. It determined that the contact was accidental in nature, arising from the intended act of throwing a pillow, rather than an intentional application of force with his fist. The Tribunal noted that Dr Saedi had no recollection of the incident, but was satisfied on the balance of probabilities that it occurred broadly as described by Ms A.

36. Whilst the Tribunal considered that Dr Saedi's behaviour in intending to throw a pillow was not appropriate, XXX, it did not consider it crossed the threshold for a breach of professional standards. The Tribunal rejected Ms Frys submission that the throwing of the pillow was an intentional use of force. It noted that Dr Saedi had no recollection of the incident and Ms A's evidence was:

"I told Mr Saedi that I was tired and I couldn't do this anymore and [XXX], as it wasn't my responsibility. We were [XXX] and I was sitting on the bed. Mr Saedi picked up a pillow and he was carrying it and tried to throw the pillow at me"

37. Given this, the Tribunal was unable to determine the intention behind the action. Further, given the circumstances that the contact with Ms A's head was accidental and that there was no evidence that this occurred due to recklessness, the Tribunal was of the view that this did not represent a serious departure from those standards such as to amount to serious misconduct.

38. The Tribunal next considered paragraph 2c of the Allegation that, following the XXX incident, Dr Saedi refused to let Ms A attend hospital to seek medical attention. The Tribunal reminded itself that Dr Saedi had no recollection of this incident but that it had accepted Ms A's evidence that she had asked to go to the hospital, at paragraph 40 of her witness statement dated 20th December 2023:

"I was so worried about [XXX] that I asked Mr Saedi, could we please go to the hospital to have it checked? He wouldn't let me: he said, no, I'm a doctor myself, I know that nothing is wrong. He said I would never take that risk, I know everything is fine."

39. The Tribunal was of the view that Dr Saedi had not actively prevented Ms A going to the hospital, however, because she did not XXX and did not have independent means of transport, she was reliant on Dr Saedi to take her to hospital. Given this, the Tribunal had found this paragraph of the Allegation proved.

40. When assessing the seriousness of the conduct, the Tribunal accepted Ms A's evidence that Dr Saedi was of the view that medical attention was not required. The Tribunal noted the GP XXX records, which demonstrated that Dr Saedi had, on other occasions, taken

Ms A to medical appointments and facilitated her access to healthcare including on two occasions taking her to hospital resulting from medical need. The Tribunal considered that this was evidence that had Ms A needed hospital treatment on this occasion he would have taken her to hospital. The Tribunal was of the view that Dr Saedi genuinely believed that Ms A did not need to attend hospital. Taking the context and circumstances into account, the Tribunal determined that this conduct did not amount to serious misconduct.

41. The Tribunal then considered the incident in XXX, and paragraph 3(b) of the Allegation, namely that during an argument Dr Saedi put his hands around Ms A's arms. The Tribunal noted that Dr Saedi did not accept this incident occurred and instead reported an alternative incident whereby Ms A was physical with him. The Tribunal reminded itself that as Dr Saedi had accepted holding Ms A's arms during a later incident it had accepted that he could have done a similar action during the XXX incident and had therefore found this proved.

42. The Tribunal considered paragraph 4a of the Allegation in conjunction with paragraph 3b, given the similarity and the fact that one had supported the factual finding of the other.

43. The Tribunal reminded itself that under paragraph 4(a) of the Allegation, it had found proved that Dr Saedi grabbed Ms A during a volatile argument XXX.

44. The Tribunal considered Dr Saedi's explanation for his action of grabbing/putting his hands around Ms A's arms and took account of the evidence from his police interview where he said "I tried to stop her hitting herself". In his police interview, taken just hours after the incident he described the following:

I mean she was hitting herself. I hold her hand like this, from the front, and I've tried to hug her in my arms. I swear to God, I was just hugging her in my arms. I said, "Calm down. It's fine, it's fine," and she was just screaming, so I had to hold her in my arms firm, not to hit herself because her hair was down, she was just beating her face, [XXX]. So I was just worried. At one stage – at one stage – she was hitting her head against the door in the bedroom; she was hitting her head like this to the door. The door was banging against the [XXX] wardrobe that was on the wall in that bedroom. I was just so scared. I just let her go and I just ran to [XXX].

45. It accepted that Dr Saedi's explanation for his actions was consistent with his witness statement and his account of attempting to calm Ms A and prevent her from harming herself, rather than an attempt to control or assault her.

46. The Tribunal accepted that an attempt to stop XXX injuring themselves, which stems from a genuine intention to help and calm them was an understandable human reaction. The Tribunal further noted that there was no evidence that Dr Saedi had overpowered Ms A, in fact moments later in her own evidence Ms A says she picked up her scarf and left the apartment.

47. The Tribunal accepted that two things could be true: that Ms A experienced the interaction as distressing and controlling, and that Dr Saedi's intention was not to harm or control her, but to calm her down. The Tribunal was of the view that Dr Saedi was not attempting to exert control over Ms A, nor was he overly aggressive in his actions. It concluded that Ms A was highly distressed during an argument and that Dr Saedi attempted to restrain her in order to prevent her from harming herself.

48. The Tribunal considered the incidents both individually and together. It accepted that grabbing or holding someone may not be appropriate and may involve the use of more force than intended. However, having regard to all the circumstances the Tribunal did not believe there was any intention to harm or control Ms A. The Tribunal therefore concluded that these actions, whether considered individually or together, did not amount to serious misconduct.

49. The Tribunal then considered the seriousness of the facts found proved cumulatively. It identified three instances of physical intervention: the XXX incident, the XXX holding of Ms A's arms, and the XXX grabbing of Ms A. The Tribunal noted that the police investigated the incidents in XXX and XXX and took no further action. The Tribunal was satisfied that Dr Saedi's actions in XXX and XXX, whilst possibly escalating, were motivated by concern and an intention to de-escalate conflict, rather than by aggression or an intention to cause harm. The punch to the side of Ms A's head was accidental in nature and the allegation was found proved as it met the dictionary definition of the word 'punch'. The Tribunal noted that in Ms A's own words she described it as, '*the side of his hand made contact with my head*'. The Tribunal had found no intention to cause harm.

50. The Tribunal considered that Dr Saedi's behaviour cumulatively did not represent a serious departure from the standards expected of a registered medical practitioner. The Tribunal concluded that the conduct did not reach the level of seriousness required to amount to serious misconduct.

51. Accordingly, the Tribunal determined that the facts found proved did not amount to serious misconduct. As the allegation of impairment was advanced solely on the basis of misconduct, and the Tribunal did not find misconduct proved, it did not go on to consider impairment.

Determination on Warning - 08/01/2026

1. The Tribunal considered whether in accordance with Section 35D(3) of the Medical Act 1983, a warning was required.

Submissions

2. On behalf of the GMC, Ms Fry, Counsel submitted that as the Tribunal had found no departure from the professional standards and no misconduct the GMC would not be seeking to make submissions in respect of a warning.
3. She confirmed there is no IOT to revoke.
4. Dr Saedi did not seek to make submissions.

The Tribunal's approach

5. The Tribunal reminded itself that a warning may be imposed where a doctor's conduct has fallen significantly below the standard expected but does not amount to misconduct.
6. The Tribunal had reference to the Sanctions Guidance and the overarching objective.
7. Given the Tribunal's findings that Dr Saedi's conduct did not breach GMP the Tribunal determined that consideration of a warning was not appropriate. It determined not to issue a warning.
8. The Tribunal concludes this case by taking no further action.

ANNEX A – 29/09/2025

Application for hearing to be held in private session

1. On day one of these proceedings, Ms Eleanor Fry on behalf of the GMC made an application pursuant to Rule 41(2) of the General Medical Council (Fitness to Practise Rules) 2004 as amended ('the Rules'), for the entirety of these proceedings to be held in private session, or in default of such an order being granted, that, pursuant to Rule 36(e), the evidence in the case be heard in private session.

Submissions

On behalf of the GMC

2. Ms Fry said that the only witness, the complainant in this case, is XXX (Ms A). She reminded the Tribunal that a Case Manager had already determined, under Rules 16(6)(g) and 36 of the Rules, to grant an application for Ms A to be treated as a vulnerable witness XXX. Ms Fry submitted that Ms A's evidence may be adversely affected if the application were not granted.

3. Ms Fry acknowledged that the general Rule 41(1) is for proceedings to be held in public, but submitted however, that the circumstances in this case outweighed the public interest. Ms Fry drew the Tribunal's attention to the relevant sub-paragraphs of Rule 41(1) and to the MPTS Tribunal Circular, dated 9 September 2025, and entitled '*Consideration of privacy and anonymity at medical Practitioner Tribunal (MPT) hearings*', and to Rule 41(1) which states:

'Where either party considers that part or all of the hearing should be held in private, then an application should be made pursuant to Rule 41(1). Applications for privacy:

- a. *Should not be granted if the MPT is satisfied that the witness' needs can be met by anonymisation. As much of the hearing should be held in public as possible.*

[XXX]

4. Ms Fry concluded by stating that the derogation from the principle of open justice in the particular circumstances of this case was necessary and proportionate, and referred the Tribunal to the case of *Miller v GMC [2013] EWHC 1934 (Admin)*. She invited the Tribunal to grant the application.

Dr Saedi

5. Dr Saedi told the Tribunal that he did not oppose the application.

The Tribunal's Approach and Decision

6. In its deliberations, the Tribunal had regard to Rule 41(2) which states:

'The Committee or Medical Practitioners Tribunal may determine that the public shall be excluded from the proceedings or any part of the proceedings, where they consider that the particular circumstances of the case outweigh the public interest in holding the hearing in public.'

7. The Tribunal also had regard to the presumption of hearings being in public; the principle of open justice; and the need for any derogation to be justified and proportionate. The Tribunal was also mindful of the overarching objective, specifically the need to uphold public confidence in the profession and it was required to balance these matters with the rights of parties involved, in this case, XXX Ms A.

8. In its deliberations, the Tribunal was mindful that the application is unopposed by Dr Saedi, and of the decisions already made by a Case Manager, as set out above.

9. The Tribunal took into account that the Allegation in its entirety relates to matters which arose XXX. The only witness in this case is Ms A. XXX

10. Given the above, the Tribunal was concerned that if any part of these proceedings were conducted in public session, particularly during Ms A's evidence, that the potential for members of the public attendance may have an impact on the quality of Ms A's evidence.

11. The Tribunal was satisfied, in the circumstances, that the need to XXX outweighs the public interest and that there are compelling reasons to derogate from the default position of the hearing being in public.

12. The Tribunal therefore determined to grant the GMC's application for the entirety of the proceedings to be held in private.

ANNEX B – 03/10/2025

Application under Rule 34(1) to adduce evidence

286. On day four of the hearing, 3 October 2025, Ms Fry made an application under Rule 34(1) of the Rules, to admit into evidence two documents which contained WhatsApp messages between Dr Saedi and Ms A and between Dr Saedi and others.

Submissions by Counsel for the GMC

287. Ms Fry informed the Tribunal that both sets of WhatsApp messages had been provided by Ms A XXX. Ms Fry added that her understanding was that Dr Saedi did not oppose the admission of the first set of WhatsApp messages, but was opposed to part of the second set of WhatsApp messages being admitted on the grounds that he did not recall sending those messages nor was he aware of their provenance. Ms Fry said that she intended to ask Ms A about the provenance of the WhatsApp messages during her oral evidence to the Tribunal. Ms Fry said that the WhatsApp messages appeared to be screenshots of conversations between Dr Saedi and Ms A and her family members.

288. Ms Fry reminded the Tribunal of the provisions of Rule 34(1) of the Rules. She submitted that the WhatsApp messages were relevant to the matters to be considered by the Tribunal and, it was fair to admit them into evidence, adding that Dr Saedi would be able to test the evidence by questioning of Ms A's evidence during cross examination as to their provenance. Ms Fry added that it was also fair to admit the WhatsApp messages given that they had been mentioned in response to questions already put to Ms A by special counsel on Dr Saedi's behalf. Ms Fry invited the Tribunal to grant the application.

Dr Saedi

289. Dr Saedi confirmed that he had no objection to the first set of WhatsApp messages being admitted. In relation to the second set of WhatsApp messages, he told the Tribunal that he had reviewed the messages XXX, stating that there appeared to be a name on top of some of the messages which was similar to his first name with a profile picture which he did not recognise. He added that he also did not recognise the content within the WhatsApp messages at all. Dr Saedi submitted that there was nothing in the WhatsApp messages to indicate the messages came from him, there were no names or numbers or any evidence to support the assertion that the WhatsApp messages had been sent to a contact number in XXX. He submitted that the application to admit the second set of WhatsApp messages should be refused.

Legal Advice

290. The Legally Qualified Chair (LQC) drew attention to relevant legal principles, and Rule 34(1) of the Rules which states:

'The Committee or a Tribunal may admit any evidence they consider fair and relevant to the case before them, whether or not such evidence would be admissible in a court of law.'

291. The Tribunal should consider whether the WhatsApp messages were relevant to the Allegation. If deemed relevant, the Tribunal must consider whether it is fair to admit them into evidence.

The Tribunal's Decision

292. The Tribunal took account of Rule 34(1) and its discretion to admit any evidence it considers relevant and fair to this case, whether or not it would be admissible in another court or tribunal.

293. The Tribunal took account of the submissions from Ms Fry and Dr Saedi.

294. The Tribunal was mindful that it had not been provided with a copy of the WhatsApp messages. It first considered whether the WhatsApp messages which are the subject of this application were relevant to the matters upon which it needed to decide. It took into account that the WhatsApp messages were referred to during Ms A's evidence at cross examination and had been produced as a direct result of that cross examination and were being produced to prove the point she was making in her oral evidence. The Tribunal determined that they were relevant to the Allegation upon which it needed to decide.

295. The Tribunal then considered whether it was fair to admit the WhatsApp messages. It was mindful of Dr Saedi's submission that he did not recognise the WhatsApp messages at all and there was no information to show the provenance of the messages. However, the Tribunal considered that Dr Saedi would have ample opportunity through his special counsel to test such evidence by way of cross examination of Ms A's evidence. The Tribunal would be entitled to attach such weight to the messages at it saw fit, but reminded itself that this was not a consideration for this application.

296. The Tribunal therefore determined to grant Ms Fry's application to adduce both sets of WhatsApp messages (labelled as exhibits C5 and C6).