

PUBLIC RECORD

Date: 16/05/2025

Doctor: Dr Ahmed ABDELRAHMAN

GMC reference number: 7500711

Primary medical qualification: MB BCh 2001 Cairo University

Type of case MPT - Preliminary

Tribunal:

Legally Qualified Chair	Mr Graham White
Lay Tribunal Member:	Mrs Lorna Taylor
Registrant Tribunal Member:	Dr Joanne Topping
Tribunal Clerk:	Mrs Jennifer Ireland

Attendance and Representation:

Doctor:	Present, represented
Doctor's Representative:	Ms Vivienne Tanchel, Counsel, instructed by the MDDUS
GMC Representative:	Mr Salek Ahmed, 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.

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.

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Background

1. Dr Abdelrahman qualified MB BCh in 2001 from Cairo University, Egypt. At the time of the events in question, Dr Abdelrahman was practising as a Senior Registrar in Obstetrics and Gynaecology at Lewisham and Greenwich NHS Trust ('the Trust'). Dr Abdelrahman left this role in September 2023.
2. Dr Abdelrahman is due to attend a Medical Practitioners Tribunal ('MPT') hearing to face an Allegation of misconduct. It is alleged that, between October 2022 and February 2023, Dr Abdelrahman engaged in unwanted conduct with Ms A, a XXX at the Trust, including hugs, placing his hands on her lower back, placing his arms around her shoulders and attempting to take a photograph of himself and Ms A. It is further alleged that, on one occasion between September and December 2022, at a morning ward round, Dr Abdelrahman whispered in Ms A's ear that he loved working XXX and XXX, as he knew that these were the days of Ms A's XXX shifts.
3. It is also alleged that Dr Abdelrahman, in or around January 2023, stood behind Ms A, placed his hands on her hips, and pressed his penis and groin area against her bottom. This is alleged to have occurred in a kitchen at the hospital.
4. It is alleged that Dr Abdelrahman's conduct towards Ms A constituted sexual harassment, and further, that it was sexually motivated.
5. This hearing was convened to discuss preliminary matters relating to the substantive case. This primarily related to disclosure of:
 - a) Ms A's medical records between XXX to XXX
 - b) Ms A's employment records between XXX to XXX including occupational health records.

The outcome of applications made during the hearing

6. The Tribunal determined to sit entirely in private under Rule 41 of the General Medical Council (Fitness to Practise Rules) 2004 as amended ('the Rules'), as the issues primarily related to the health of Ms A.

The Evidence

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7. The Tribunal received evidence on behalf of the GMC in the form of witness statements from the following witnesses who were not called to give oral evidence:

- Ms A;
- Ms B, a friend of Ms A;
- Ms C, Delivery Suite Coordinator at the Trust;
- Ms D, Labour Coordinator at the Trust; and
- Ms E, former Labour Ward Coordinator at the Trust.

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

- A copy of the Allegation to be determined at the substantive MPT;
- Redacted copy of Ms A's Medical Records from XXX to XXX;
- An unredacted copy of Ms A's Medical Records from XXX to XXX (provided to the Tribunal during the hearing but not disclosed to the registrant); and
- Ms A's employee absence record from XXX to XXX.

9. The Tribunal also received written skeleton arguments from both parties in advance of the hearing.

Submissions

10. On behalf of Dr Abdelrahman, Ms Tanchel submitted that the GMC has now made some disclosures, which in her view were '*deeply regrettable*' and '*woeful*' as they were not adequate disclosure in line with the request made. She stated that the single page document provided by the Trust, which sets out XXX, was inadequate.

11. Ms Tanchel referred to the request for Ms A's employment and occupational health records, which she maintained had been conceded by the GMC to be an appropriate request. She was aware that the Trust had stated that Ms A has not accessed occupation health support, however, it was unclear whether that meant she had not ever accessed that support, or whether she has not accessed it during recent times. Further, she directed the Tribunal to the statement of Ms E, which referred to Ms A undertaking a return-to-work meeting following a period of absence, which she submitted were likely to have involved occupational health. She submitted that the disclosure currently received from the Trust was just simply not adequate.

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12. Ms Tanchel submitted that the Tribunal, now having the unredacted medical records, will be able to apply the disclosure test itself and decide whether anything further needs to be unredacted. In addition, she invited the Tribunal to make a direction requiring the GMC to go back to the Trust to request proper and adequate disclosure of the requested employment records that can be reviewed and appropriately disclosed. She stated that the reasons for that request were set out in her skeleton argument in relation to today's hearing, and the GMC are perfectly able to extract from that an appropriate request to the Trust.

13. On behalf of the GMC, Mr Ahmed submitted that there was no difficulty in the GMC going back to the Trust to request the additional information. He stated that the Trust confirmed that it did not have access to the occupational health records of Ms A. He stated that it would not be possible to obtain the additional employment information today or by early next week. He submitted that, to assist the GMC some further clarification as to what exactly Ms Tanchel was requesting, and why it was necessary, was needed. He stated that this would allow counter arguments to the Trust's questions, which the GMC is currently receiving, about the necessity and proportionality of this request.

The Tribunal's Approach

14. The Legally Qualified Chair reminded the Tribunal that whilst a regulator is not under a positive duty to gather evidence in favour of the practitioner as well as against him, the case of *Kirk v Royal College of Veterinary Surgeons* [2003] UKPC 3 confirms the entitlement of a party in regulatory proceedings to disclosure of any documents which might support that party's case or undermine that of the regulator.

The Tribunal's Determination

15. The Tribunal was provided with an unredacted version of Ms A's medical records, and was of the view that the redactions already made were largely appropriate.

16. However, the Tribunal considered that three entries that had been redacted may have some relevance and should be disclosed. These are the entries XXX

17. Having carefully considered the whole document, the Tribunal was of the view that there was nothing further of relevance to the matter in question, beyond the three entries identified.

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18. In relation to the employment records, the Tribunal was of the view that more detailed information could potentially be obtained to ascertain if any of the absences were attributed to mental health issues and determined to issue a direction to that effect.

19. The Tribunal noted that the Trust has confirmed that there has been no referral to occupational health, and it has no access to occupation health records. The Tribunal has no reason to doubt this information. Therefore, it would not be appropriate to issue further directions in relation to that issue.

Case Management Directions

20. By no later than 5pm on 28 May 2025, the GMC should obtain from the Trust, and disclose to Dr Abdelrahman and his legal representatives, details confirming the extent to which Ms A's sickness absences between XXX and XXX were attributed to mental health issues.