

PUBLIC RECORD**Dates:** 12/02/2025 - 13/02/2025**Doctor:** Dr Ioannis TOSOUNIDIS**GMC reference number:** 6055461**Primary medical qualification:** Ptychio Iatrikes 2001 Aristotelian University
of Thessaloniki**Type of case**Restoration following
disciplinary erasure**Summary of outcome**Restoration application refused. No further applications allowed for 12 months from last
application.**Tribunal:**

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|-----------------------------|---------------------------|
| Legally Qualified Chair: | Mr Richard Wood |
| Lay Tribunal Member: | Miss Susan Hurds |
| Registrant Tribunal Member: | Professor Eilish Gilvarry |
| | |
| Tribunal Clerk: | Mrs Jennifer Coakley |

Attendance and Representation:

| | |
|---------------------|--------------------------|
| Doctor: | Present, not represented |
| GMC Representative: | Mr Carlo Breen, Counsel |

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

Overarching Objective

Throughout the decision making process the tribunal has borne in mind the statutory overarching objective as set out in s1 Medical Act 1983 (the 1983 Act) to protect, promote and maintain the health, safety and well-being of the public, to promote and maintain public confidence in the medical profession, and to promote and maintain proper professional standards and conduct for members of that profession.

Determination on Restoration following disciplinary erasure - 13/02/2025

1. The Tribunal has convened to consider Dr Tosounidis' application for his name to be restored to the Medical Register following his erasure for disciplinary reasons in 2014.
2. The Tribunal has considered the application in accordance with Section 41 of the Medical Act 1983, as amended ('the Act') and Rule 24 of the GMC (Fitness to Practise) Rules 2004, as amended ('the Rules').
3. This is Dr Tosounidis' first application to be restored to the Medical Register.

Background

4. Dr Tosounidis qualified in Greece in 2001. He practised in Greece for several years before moving to the UK. At the time of the events that led to his erasure (August to October 2011 ('the relevant period')) he was practising as a Locum Consultant Histopathologist at Norfolk and Norwich University Hospital and Addenbrookes Hospital.
5. The circumstances that led to Dr Tosounidis' erasure were considered at a hearing before a Fitness to Practise Panel in July 2014 ('the 2014 Panel'). Dr Tosounidis did not attend that hearing and was not represented.
6. Those circumstances can be summarised as:

Deficient professional performance

7. It was found proved by the 2014 Panel that, during a review of cases upon which Dr Tosounidis reported during the relevant period, 228 of 713 of those cases showed errors as follows:

- a. 25 Category A (Inadequate dissection, sampling or macroscopic description);

- b. 21 Category B1 (Discrepancy in microscopy – a diagnosis one is surprised to see from any pathologist);
- c. 61 Category B2 (Discrepancy in microscopy – a diagnosis which is clearly incorrect but which one is not surprised to see a small percentage of pathologists suggesting);
- d. 78 Category B3 (Discrepancy in microscopy – a diagnosis where inter-observer variation is known to be large);
- e. 38 Category C (Discrepancy in clinical correlation);
- f. 3 Category D (Failure to seek a second opinion in an obviously difficult case);
- g. 29 Category E (Discrepancy in report).

Misconduct

- 8. The 2014 Panel also found proved that Dr Tosounidis' actions on a number of occasions were misleading and dishonest.
- 9. On 5 or 6 October 2011, Dr Tosounidis added another consultant's name to a pathology report without her knowledge and without accurately representing her opinion.
- 10. On 14 October 2011, Dr Tosounidis completed a GI Biopsy report in which he stated that another doctor concurred with the interpretation. On 17 October 2011, he implied that someone else may have made the entry referred to in the GI Biopsy report. He subsequently alleged that the entry was factually correct on the date it was made but that the other doctor had changed his opinion. These statements were found to be untrue, and Dr Tosounidis knew that they were untrue.
- 11. In January 2012, Dr Tosounidis submitted an online application form for a medical post at East and North Hertfordshire Trust ('the Trust'). In answer to the question on the Application: "Reason for leaving" he stated "Resignation due to end of contractual obligations". This answer was found to be untrue and Dr Tosounidis knew that it was untrue.
- 12. On 17 February 2012, during an interview for a medical post at the Trust, Dr Tosounidis stated that he had left Addenbrookes Hospital because his contractual term had ended. This answer was found to be untrue and Dr Tosounidis knew that it was untrue. Further, in response to being asked at the interview to explain an ongoing GMC investigation,

Dr Tosounidis stated that it related to “interpretation errors as opposed to errors that matter” or words to that effect.

13. The 2014 Panel found that Dr Tosounidis’ fitness to practise was impaired by reason of both deficient professional performance and misconduct.

14. The 2014 Panel considered that the instances of deficient professional performance were wide-ranging and repeated; indicating a pattern of deficient performance which raised concerns regarding Dr Tosounidis’ overall competence as a consultant histopathologist. It considered that the errors indicated significant departures from the standards expected of a reasonably competent consultant histopathologist. The Tribunal determined that Dr Tosounidis’ deficient performance was remediable, but it had received no evidence of remediation. It found that Dr Tosounidis would present a risk to patient safety if he were to practise unrestricted. The 2014 Panel determined that Dr Tosounidis’ fitness to practise was impaired by reason of his deficient professional performance.

15. In terms of misconduct, the 2014 Panel had regard to the following paragraphs of *Good Medical Practice* (‘GMP’):

‘56. Probity means being honest and trustworthy, and acting with integrity: this is at the heart of medical professionalism.’

‘57. You must make sure that your conduct at all times justifies your patients’ trust in you and the public’s trust in the profession.’

‘63. You must be honest and trustworthy when writing reports, and when completing or signing forms, reports and other documents.’

‘65. You must do your best to make sure that any documents you write or sign are not false or misleading. This means that you must take reasonable steps to verify the information in the documents, and that you must not deliberately leave out relevant information.’

16. The 2014 Panel found that Dr Tosounidis’ dishonesty clearly breached these principles of GMP. Dr Tosounidis’ dishonesty was repeated over a period of time. The 2014 Panel was of the view that such dishonesty would be regarded as deplorable by fellow practitioners and constituted a breach of a fundamental tenet of the profession, namely probity. It considered that it was sufficiently serious to amount to misconduct. The 2014 Panel determined that Dr Tosounidis’ misconduct seriously undermined the standards the public expects and the confidence placed in the profession. The Panel considered that it was extremely difficult to

remediate dishonesty, but in any event did not receive any evidence that Dr Tosounidis had taken any steps to remediate or that he understood the seriousness of his actions. It therefore determined that his fitness to practise was impaired by reason of misconduct.

17. The 2014 Panel concluded that Dr Tosounidis' misconduct was fundamentally incompatible with continued registration. It was satisfied that erasure was necessary to uphold professional standards and maintain confidence in the profession. It was of the view that erasure was the proportionate and appropriate sanction.

The Current Restoration Hearing

The Outcome of Applications made during the hearing

18. The Tribunal refused Dr Tosounidis' application that the entirety of the hearing be held in public. The Tribunal's full decision on the application is included at Annex A.

The Evidence

19. The Tribunal has taken into account all the evidence that it has received, both oral and documentary.

Documentary Evidence

20. The parties provided documentary evidence, which included:

- Restoration application form, dated 21 October 2023;
Dr Tosounidis declared on his application form that *'I received 7-month imprisonment sentence [sic] 3 years suspension for syncofancy [sic] against a BP cotractor [sic] of benzin (2022). I have a pending hearing in Athens for damaging stuff, because of bullying against XXX by Starbucks customers and staff.'*

XXX

Dr Tosounidis also stated on his application form that *'The Greek Medical Association refused to give me licence to practice [sic] for the last 10 years (2014-2024) based on the English narrative of the situation'*

- Email from Dr Tosounidis to the GMC, dated 30 October 2023, in which he states *'As explained in the application I have not worked anywhere for the last 9 and a half*

years. I also cannot provide you with certificates since twice the Panhellenic Medical Association ruled on my not having medical registration valid.'

- Medical Association of Serres – Legal Entity of Public Law document in Greek, dated 21 July 2023, with English translation. The document confirms that Dr Tosounidis cannot be issued a licence to practise and be registered with the Medical Association of Serres since his name has been removed from the Medical Register in the UK;
- *Dr Ioannis Tosounidis v General Medical Council [2012] EWHC 2921 (QB)* judgment, dated 19 July 2012, relating to a successful appeal against the imposition of Dr Tosounidis' interim order of suspension;
- High Court Order confirming that Dr Tosounidis' interim order of suspension imposed on 22 March 2012 be terminated, dated 19 July 2012;
- Correspondence with PIS Greece confirming that they are unable to issue a certificate of good standing for Dr Tosounidis since he does not hold active registration with any medical regulator in Greece and has not done so since 21 October 2018;
- European Criminal Records Information System document, dated 29 May 2024, confirming that Dr Tosounidis received a 6 month sentence suspended for 3 years for 'Defamation';
- Email from Dr Tosounidis to the GMC, dated 16 December 2023, stating that '*I would like to stress in the utmost degree that my 5 years punishment was totally unfair since ... I was caught in the net of the [Patient A] gastrointestinal case. I received the resection specimen of this patient and as the reporting pathologist I discover misdiagnosis of the case in the biopsy stage (reported by the lead GI pathologist and head of Department ... as an adenocarcinoma when in fact was a mesothelial tumour).*' He went on to state that '*the department organized [sic] a backlash case review of my cases As a well-bred pathologist trained in the UK I am asking you to restore me as a full time pathologist and/or restrictions in the GI pathology practice;*
- Email from Dr Tosounidis to the GMC, dated 8 February 2024, stating that he does not intend to accept a performance test since '*this would be devaluation of the Royal College qualifications I possess*';
- Copy of criminal record for general use by the Hellenic Republic, Ministry of Justice, in Greek, dated 5 November 2021, with English translation – detailing a criminal offence

of Defamation with a sentence of imprisonment for 6 months with a suspended term of 3 years, executed on 1 April 2019;

- XXX
- Summons – to appear at Magistrates’ Court of Athens on 06/11/23 to stand trial, dated 26/05/23 (in Greek and translated to English);
- Two lawyer responses from the Panhellenic Medical Association regarding his inscription to the Greek Register (in Greek with English translations);
- Qualification, dated 17/09/10 confirming Dr Tosounidis’ Medical Specialist in Pathology (in Greek with English translation);
- Email from Dr Tosounidis, dated 16 February 2024, stating *‘Regarding the exected [sic] public note of [XXX] stating that Ioannis Tosounidis picked up a heavy object and threw it at a guard of the Serres Police Department in Aug. 2020, Ioannis Tosounidis argues that this is a piece of police fiction and fake news since it never happened (he picked up an object and threw it next to him to show a degree of indignation) ...’*;
- XXX;
- Email from Dr Tosounidis, dated 6 March 2024, stating *‘... proof that the coming MPTS hearing ... regarding Ioannis Tosounidis in the UK, is a political persecution is fact-demonstrated by the fact the legal expenses of the HIGH COURT of England amounting from 2012 to [XXX] pounds is yet to be obtained by Ioannis Tosounidis, demonstrating a classical case of contempt of court.’*;
- Email from Dr Tosounidis to the GMC, dated 30 April 2024 stating that *‘My fit to practice proof is based on the series of webinars I underwent (like most people were doing during the pandemic) and visits at [XXX’s] surgery of pathology in my hometown in [XXX], Greece’*;
- Certificate of Completion of Training – Histopathology, dated 1 March 2011;
- Email from Dr Tosounidis, dated 2 May 2024, stating *‘One of the main reasons I seek restoration by the GMC is the fact that [XXX]. A steady professional course, I believe, would be a step forward for the reunification of my family.’*;

- XXX;
- European Court of Human Rights letters, dated 10 October 2014, 15 October 2015 and 05 February 2020;
- Dr Tosounidis' Curriculum Vitae, dated 2024.

Witness Evidence

21. Dr Tosounidis provided his own witness statement, dated 6 December 2024.

22. In his witness statement, Dr Tosounidis stated that a backlash review of his cases was sparked by other GI pathologists after he changed the diagnosis given to a biopsy specimen from adenocarcinoma (diagnosis given by the Head of GI Pathology and Director of the Department at Cambridge) to mesothelioma. He stated that the review was a *'petty and vindictive move'*.

23. With regards to the incident of breaking a glass door XXX in 2020, Dr Tosounidis stated that children were knocking on the intercom of his flat and when he went to the police to address this, they did nothing. He stated that he smashed a glass door out of indignation and the police XXX. He also stated that he is a descendant of Tosoun Pasha of Egypt (the Russian branch) and Mohammed Ali Abu Tosoun.

24. With regards to his criminal record, Dr Tosounidis stated that he was jumped whilst at a BP gas station by 4-5 people in 2019. He stated that he wrote an email to BP and BP sacked a contractor and that contractor then made a civil case against him.

25. With regards to the dismissed case in Athens in 2018, Dr Tosounidis stated that he had problems with the service at a Starbucks store. He said that there was constant bullying against him XXX. He stated that he complied with restrictive orders after the incident and he believes that the case has now been concluded.

26. Dr Tosounidis stated that all of the incidents in Greece need to be seen in the light of the ECHR case 2020 Ioannis Tosounidis vs Greece which many see as a treasonous act which generated a police payback.

27. Dr Tosounidis stated that he wants to be reinstated to the Medical Register because he has been using webinars to keep himself in touch with his specialty and has been shadowing a pathologist XXX who has a lab in Greece. He stated that what happened in Cambridge

represents 5% of a pathologists time which is the average time a consultant pathologist deals with GI specimens. He stated that he is a Fellow of the Royal College of Pathologists and is trained in all aspects of pathology practice and management.

28. Dr Tosounidis also gave oral evidence at the hearing. He stated that he does not agree with the findings of the 2014 Panel in respect of his professional performance being deficient. He stated that the expert called to give evidence had the same qualifications as him and was therefore not an expert nor in a position to judge the quality of his work.

29. When asked whether he accepted the findings of the 2014 Panel in respect of dishonesty, Dr Tosounidis stated that it was '*such a petty thing*' and he did not agree with the 2014 Panel's conclusions. When asked again if he agreed with the 2014 findings, he stated "No. Of course not. Nothing had changed except that time has passed".

30. Dr Tosounidis stated that the 2014 Panel was a cover up because they wanted to cover up the case of Patient A.

31. In order to keep his knowledge and skills up-to-date, Dr Tosounidis stated that he has completed free webinars on pathology topics and has also shadowed XXX in a pathology lab in Greece.

32. With regards to the Starbucks incident, Dr Tosounidis stated that he has not heard anything in relation to this for a very long time, so he presumes that the case was dismissed after five years.

33. Dr Tosounidis stated that he believes he should be restored to the Register because he is a 'successful' pathologist, he likes his work and was involved in a very unfortunate situation at Cambridge. He reminded the Tribunal that he had worked at other hospitals in the UK without problems. He stated that he is up-to-date in pathology through the lab of XXX in Greece.

34. XXX

35. Dr Tosounidis stated that XXX. He asked the Tribunal to restore his name to the Medical Register so he could be near to XXX. XXX

Submissions

On behalf of the GMC

36. On behalf of the GMC, Mr Carlo Breen, Counsel, submitted that Dr Tosounidis' application for restoration should be refused.

37. With regards to insight, Mr Breen submitted that it is quite clear that Dr Tosounidis does not accept the findings of the 2014 Panel in terms of deficient professional performance or dishonesty and consequential misconduct. He submitted that Dr Tosounidis' current level of insight is the same as it was in 2014. He maintains that there was some sort of influence on the 2014 Panel to make findings against him.

38. In terms of remediation and risk of repetition, Mr Breen submitted that the matters are potentially remediable, albeit dishonesty can be difficult to remedy. He submitted, however, that there is no evidence of remediation. He submitted that there is a risk of repetition since Dr Tosounidis has no insight.

39. Mr Breen submitted that, in relation to the new matters which have arisen since 2014, including the XXX and conviction, the Tribunal may have concerns in relation to these matters. He submitted that both are serious matters and noted that the suspended sentence for Dr Tosounidis' conviction is still in force.

40. Mr Breen drew the Tribunal's attention to paragraphs of the guidance which he said were relevant in this case, including B26, B35 and B51. He submitted that Dr Tosounidis has not demonstrated that he has insight, there is no evidence of remediation and he has not practised medicine for a considerable period of time. He submitted that those factors, taken with Dr Tosounidis' criminal conviction and other matters XXX, renders Dr Tosounidis' application for restoration speculative.

On behalf of Dr Tosounidis

41. Dr Tosounidis submitted that it is simply not true that he has not shown insight and that his case is more complicated than that.

42. He submitted that the fact that ten years have passed does not really have any consequence because he was trained well in Manchester.

43. Dr Tosounidis submitted that he does have insight and that he is very sorry about patients who may have had to come back for a further biopsy because of his case. He stated that this is a case whereby he went '*by the book*' and then that was backlashed with the review of his work.

44. Dr Tosounidis submitted that the Tribunal should reinstate him to pathology because he has a lot to offer yet. He submitted that, even with all the ups and downs of his career, he is still a ‘successful’ pathologist and that *‘Going from one failure to another is the meaning of success without loss of enthusiasm’*.

45. He submitted that *‘it’s obvious’* that the police treat him differently from everybody else because he has tried to bring a case against the state.

46. XXX

47. In relation to his conviction and suspended sentence, Dr Tosounidis submitted that he has been honest and is not the only one who has had such an experience.

The Tribunal’s Approach

48. The Tribunal reminded itself that its power to restore a practitioner to the Medical Register in accordance with Section 41 of the Act is a discretionary power. This power is to be exercised in the context of the Tribunal’s primary responsibility to act in accordance with the statutory overarching objective to protect the public, as set out later in this determination.

49. While the Tribunal has borne in mind the submissions made by the parties, the decision as to whether to restore Dr Tosounidis’ name to the Medical Register is a matter for this Tribunal exercising its own judgment. The Tribunal reminded itself that, if it directs that Dr Tosounidis’ name should be restored to the Medical Register, it can do so only without restrictions on his practice.

50. Throughout its consideration of Dr Tosounidis’ application for restoration, the Tribunal was guided by the approach laid out in the MPTS *‘Guidance for medical practitioners tribunals on restoration following disciplinary erasure’* (‘the guidance’).

51. The Tribunal reminded itself that the onus is on Dr Tosounidis to satisfy it that he is fit to return to unrestricted practice and that the Tribunal should not seek to go behind the original Tribunal’s findings on facts, impairment and/or sanction.

52. The guidance sets out at B2 that the test for the Tribunal to apply when considering restoration is:

‘Having considered the circumstances which led to erasure and the extent of remediation and insight, is the doctor now fit to practise having regard to each of the three elements of the overarching objective?’

53. The Tribunal reminded itself that, in making its decision, it should consider the following five factors set out within paragraphs B4-B34 of the guidance which address:

- a. the circumstances which led to the erasure;
- b. whether Dr Tosounidis has demonstrated insight into the matters that led to erasure, taken responsibility for his actions and actively addressed the findings about his behaviour or skills;
- c. what Dr Tosounidis has done since his name was erased from the register;
- d. the steps Dr Tosounidis has taken to keep his skills and knowledge up to date; and
- e. the lapse of time since erasure;

and then go on to determine whether restoration will meet the overarching objective.

54. In relation to new allegations, the Tribunal had regard to paragraph C2 of the guidance which states:

‘C2 The approach which should be taken by tribunals is to consider all the factors detailed in part B in relation to the original matters which led to erasure. In addition, where there are previously untested allegations which call into question the doctor’s fitness to practise, tribunals must weigh the evidence carefully to reach a judgment:

a firstly on whether the new allegations are proved on the balance of probabilities

b secondly on whether the doctor’s fitness to practise is impaired by reason of those new allegations.

The tribunal should invite the parties to make submissions and present evidence on both questions.’

The Tribunal’s Decision

55. The Tribunal has considered the parties’ submissions carefully and has evaluated the evidence in order to reach its decision as to whether Dr Tosounidis is fit to practise.

The circumstances which led to Dr Tosounidis' erasure

56. The Tribunal took into account the determination of the 2014 Panel. It noted the seriousness of Dr Tosounidis' misconduct, which involved repeated dishonesty, in addition to the findings in relation to deficient professional performance. The 2014 Panel was concerned with Dr Tosounidis' *'apparent total lack of insight'*. This Tribunal had regard to the 2014 Panel's view that Dr Tosounidis' *'course of dishonest conduct, demonstrated a reckless disregard for the fundamental principles of GMP'*. The 2014 Panel concluded that Dr Tosounidis' misconduct was fundamentally incompatible with continued registration and was of the view that erasure was necessary in order to uphold professional standards and maintain confidence in the profession.

Whether Dr Tosounidis has demonstrated insight into the matters that led to erasure, taken responsibility for his actions, and actively addressed the findings about his behaviour or skills

57. This Tribunal considered Dr Tosounidis' current level of insight. In doing so, it had regard to the following paragraph of the guidance:

'B10 Factors that can be relevant to a doctor demonstrating genuine insight include, but are not limited to, evidence they have:

- a considered the concern, understood what went wrong and accepted they should have acted differently*
- b demonstrated that they fully understand the impact or potential impact of their performance or conduct, for example by showing remorse (see below)*
- c demonstrated empathy for any individual involved, for example by apologising fully (see below)*
- d taken steps to remediate and to identify how they will act differently in the future to avoid similar issues arising'*

58. The Tribunal noted Dr Tosounidis' expressions of remorse during his oral evidence in relation to patients who may have needed to return for a further biopsy. However, other than this, the Tribunal considered that there was a shocking lack of evidence to demonstrate insight. It noted that Dr Tosounidis clearly does not accept the findings of the 2014 Panel in relation to deficient professional performance or misconduct, and again alleged bias on the part of the 2014 Panel. There is limited evidence to suggest that he has reflected upon the implications of his misconduct and deficient professional performance on others, including colleagues.

59. Dr Tosounidis maintains his view that the review of his cases prior to the 2014 hearing was a backlash following the Patient A case. He was of the view that the ‘expert’ who reviewed the cases had the same qualifications as him and so was not in a position to judge his performance and was not an expert. The Tribunal noted that Dr Tosounidis refused to undergo a performance assessment prior to both the 2014 hearing and this hearing. As indicated in his email to the GMC dated 8 February 2024, he was of the view that a performance assessment ‘*would be devaluation of the Royal College qualifications I possess*’. The Tribunal was of the view that such an attitude demonstrated a real lack of insight.

60. In relation to the High Court determination regarding the appropriateness of his interim order, Dr Tosounidis appears to be of the view that the outcome amounts to a complete vindication, and that he is absolved of any culpability for his actions which led to his erasure. It was his view that the judgment was that he had been telling the truth and the GMC had been lying. This was, at best, a highly distorted interpretation of the High Court’s judgment.

61. The Tribunal concluded that Dr Tosounidis has not provided any evidence to demonstrate that his insight has developed since 2014.

62. The Tribunal gave careful consideration to the remediability of the matters which led to Dr Tosounidis’ erasure and was aware that dishonesty is difficult to remediate. It had regard to the following paragraph of the guidance when considering remediation:

‘B15 *Remediation can take several forms, including, but not limited to:*

a participating in training, supervision, coaching and/or mentoring relevant to the concerns raised

b attending courses relevant to the concerns raised, for example anger management, maintaining boundaries, ethics or English language courses

c evidence that shows what a doctor has learnt following the events that led to the concerns being raised, and how they have applied this learning in their practice (where applicable)

d evidence of good practice in a similar environment to where the concerns arose.’

63. The Tribunal took into account that Dr Tosounidis stated that he has undertaken webinars on topics relating to pathology and has undertaken shadowing in a XXX pathology lab in Greece. However, the Tribunal was provided with no evidence confirming any details of

these, such as dates, times, locations or content. Further, the Tribunal concluded that until Dr Tosounidis fully addresses his misconduct and deficient professional performance, he will not be able to remediate his failings.

64. Taking into account Dr Tosounidis' lack of insight and very limited evidence of remediation, the Tribunal concluded that he had not demonstrated that he has fully remediated his failings.

65. In considering the risk of repetition, the Tribunal took into account Dr Tosounidis' current level of insight and remediation. It concluded that, in the circumstances, there remained a risk that Dr Tosounidis might repeat his misconduct and deficient professional performance.

What Dr Tosounidis has done since his name was erased from the register, any steps he has taken to keep his medical knowledge and skills up to date, and lapse of time since erasure

66. Since his name was erased from the Medical Register in 2014, Dr Tosounidis has not worked in a medical capacity.

67. Dr Tosounidis' oral evidence was that he has undertaken webinars on topics relating to pathology and has undertaken shadowing in a XXX pathology lab in Greece. However, the Tribunal has been provided with no documentary evidence in relation to these. His witness statement, and the documents he has submitted, are remarkably lacking in detail on these matters.

68. Dr Tosounidis refused to undertake a performance assessment and has provided no alternative evidence to demonstrate that his knowledge and skills are up-to-date and of an acceptable standard. The panel notes that it has been 10 years since he practised in medicine.

New matters

69. XXX

70. XXX

71. In relation to Dr Tosounidis' conviction, the Tribunal noted that the documents available provide limited details. However, the offence was serious enough to attract a six month sentence, suspended for three years. These facts were agreed by Dr Tosounidis. That suspended sentence remains in force.

72. The Tribunal had regard to paragraph B51 of the guidance which states:

'B51 Tribunals should also exercise caution and consider carefully whether the doctor is fit to practise unrestricted in the following circumstances:

- the doctor has a criminal conviction resulting in a suspended sentence which remains in force*
- ...'*

73. The Tribunal had regard to Dr Tosounidis' view that the police treat him differently because he tried to bring a case against the state. He answered *'it's obvious'* to a question from a Tribunal member about this during his oral evidence.

74. The Tribunal had regard to Rule 34(3) of the Rules, which states:

"Production of a certificate purporting to be under the hand of a competent officer of a Court in the United Kingdom or overseas that a person has been convicted of a criminal offence or, in Scotland, an extract conviction, shall be conclusive evidence of the offence committed."

75. In reliance on the certificate of conviction produced, and in the absence of any contest from Dr Tsounidis that he is not the subject of the conviction, the Tribunal determined that the offence took place and that Dr Tosounidis received a six month sentence, suspended for three years. The Tribunal was of the view that Dr Tosounidis' fitness to practise may be impaired by reason of his conviction, on the basis of public confidence.

Will restoration meet the overarching objective?

76. Having made the above findings as to whether Dr Tosounidis is fit to practise, the Tribunal next had regard to the statutory overarching objective. In so doing, it performed a balancing exercise, weighing its findings above with its obligations under the individual limbs of the overarching objective which are:

- To protect, promote and maintain the health, safety and well-being of the public
- To promote and maintain public confidence in the profession, and

- To promote and maintain proper professional standards and conduct for members of that profession.

77. The Tribunal was mindful of the serious findings that led to Dr Tosounidis' erasure by the 2014 Panel. Bearing in mind all of the evidence received, the Tribunal was satisfied that Dr Tosounidis' would still pose a risk to patients if he were permitted to return to unrestricted practice. As such, the Tribunal concluded that restoration to the Medical Register would undermine patient safety. The Tribunal took the view that public confidence in the profession would be seriously undermined by the restoration of Dr Tosounidis' name to the Medical Register given his lack of insight and the Tribunal's findings in relation to remediation, together with the identified ongoing risk to patients. It follows that professional standards and conduct for members of the profession would not be upheld if Dr Tosounidis were permitted to be restored to the Medical Register at this point in time.

78. The Tribunal was of the view that, even without taking into consideration the new matters outlined above, restoration would not meet the overarching objective.

79. The Tribunal therefore determined that restoring Dr Tosounidis' name to the Medical Register would not protect, promote and maintain the health, safety and wellbeing of the public, promote and maintain public confidence in the profession or promote and maintain professional standards and conduct for members of the profession. Accordingly, it determined that Dr Tosounidis' name should not be restored to the Medical Register.

Dr Tosounidis' right to make further applications for restoration

80. It remains open for Dr Tosounidis to reapply for restoration of his name to the Medical Register. If he wishes to do so, he must wait at least 12 months from the date of his application (not the date of the Tribunal's decision not to restore) before submitting any further application.

ANNEX A – 13/02/2025

Application for the entirety of the hearing to be held in public

1. On Day 1 of the hearing, Dr Tosounidis made an application for the entirety of the hearing to be heard in public, XXX. He submitted that he disagreed with aspects of XXX and wished for such matters to be in the public eye.
2. Mr Breen submitted that the fact that Dr Tosounidis wishes the Tribunal to sit in public is not a compelling reason to do so. He submitted that, having listened very carefully to what the doctor has said, he has not provided a coherent reason as to why XXX should be ventilated in public. Mr Breen submitted that this was a matter for the Tribunal, and that it should take into account the public interest which, he submitted, would not be served by these matters being ventilated in public.
3. In reaching its decision, the Tribunal had regard to the relevant parts of Rule 41 of the General Medical Council (Fitness to Practise) Rules 2004 (as amended) ('the Rules') which states:

'41.

...

XXX

...

(5) A Tribunal shall, where it is considering matters under paragraph (3)(a), sit in public where the practitioner requests it to do so.

(6) Subject to paragraph (5), the Committee or Tribunal may, where they are considering matters [XXX]), hold a hearing in public where they consider that to do so would be appropriate, having regard to-

(a) the interests of the maker of the allegation (if any);

(b) the interests of any patient concerned;

(c) whether a public hearing would adversely affect the health of the practitioner; and

(d) all the circumstances, including the public interest.

...'

4. The Tribunal listened carefully to the submissions of both Dr Tosounidis and Mr Breen. It noted that, as is the case with matters relating to consideration of an interim order,

the fact that Dr Tosounidis has requested for XXX matters to be considered in public does not mean that the Tribunal *shall* do so (Rule 41(5)). The Tribunal was of the view that Dr Tosounidis has not provided a coherent or compelling reason for the entirety of this hearing to be held in public. It considered that it would not be appropriate for matters relating to XXX to be heard in public. As such, the Tribunal determined to refuse Dr Tosounidis' application and to continue to hear matters relating to XXX in private.