

PUBLIC RECORD**Dates:** 21/08/2025 - 22/08/2025**Doctor:**

Dr Tomasz FRYZLEWICZ

GMC reference number:

6151888

Primary medical qualification:

Lekarz 1985 Akademia Medyczna w Krakowie

Type of case**Outcome on impairment**Review - Language
impairment

Impaired

Summary of outcome

Suspension, indefinite

Tribunal:

Legally Qualified Chair	Mr Stephen Chappell
Lay Tribunal Member:	Mr John Kelly
Registrant Tribunal Member:	Dr Gabrielle Downey

Tribunal Clerk:	Mrs Rachel Horkin
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Attendance and Representation:

Doctor:	Not present, not represented
GMC Representative:	Mr Oliver Carr, 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 public.

Overarching Objective

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

Determination on Impairment - 21/08/2025

Background

1. Dr Fryzlewicz was employed by Cardio Analytics between 2007 and 2013. Concerns were first raised about Dr Fryzlewicz's knowledge of the English language in 2014 by way of a referral to the GMC by Cardio Analytics. Some confusion had arisen as a result of his limited English language proficiency whilst he had been working for them. Cardio Analytics stated that Dr Fryzlewicz's English language skills had deteriorated during the time that he had been employed by them and that efforts to get him to go to English lessons had been unsuccessful in improving his skills.
2. Between July 2014 and February 2015, Dr Fryzlewicz undertook International English Language Testing System (IELTS) tests, in which he failed to achieve the minimum standard required. The GMC referred Dr Fryzlewicz's case to a Fitness to Practise Panel of the Medical Practitioners Tribunal Service (MPTS).

2015

3. The first fitness to practise hearing to consider Dr Fryzlewicz's case took place from 19-28 October 2015 (the 2015 Panel). The 2015 Panel determined that Dr Fryzlewicz's fitness to practise was impaired by reason of his lack of knowledge of English. It determined that his deficiencies were capable of remedy and imposed a period of conditional registration, including direct supervision, on Dr Fryzlewicz's registration for a period of 12 months. The 2015 Panel considered that this was a realistic period for Dr Fryzlewicz to undertake further study in the English language and achieve a result in an IELTS test which met the minimum standard required by the GMC.

2016

4. Dr Fryzlewicz's case was reviewed on 10 and 18 November 2016 (the 2016 Tribunal). The 2016 Tribunal found that, despite having undertaken the IELTS test Dr Fryzlewicz had failed to achieve the required overall score of at least 7.5. The 2016 Tribunal determined that Dr Fryzlewicz had breached a condition by his failure to inform potential employers and his Responsible Officer of the conditions upon his registration but that he had not done so wilfully. The 2016 Tribunal imposed a further period of conditions for 12 months, again including direct supervision.

2017

5. Dr Fryzlewicz's case was next reviewed on 28-29 November 2017 (the 2017 Tribunal). The 2017 Tribunal was informed of further concerns from two employers relating to Dr Fryzlewicz's clinical skills and communication skills which had led to situations where patients were placed at risk of harm. Dr Fryzlewicz had not undertaken a further IELTS test and there

was no evidence from him of any formal training in English language. The 2017 Tribunal determined that conditional registration was no longer appropriate or proportionate and it decided to suspend Dr Fryzlewicz's registration for a period of six months.

2018

6. Dr Fryzlewicz's case was reviewed on 7-8 June and 11 July 2018 (the 2018 Tribunal). It was noted that from 6 February 2018, the GMC provided more flexibility to doctors needing to demonstrate English language skills by giving them the option of either taking the IELTS test or the Occupational English Test – medical profession version (OET). The 2018 Tribunal heard that Dr Fryzlewicz had undertaken two IELTS tests in March and April of 2018 and achieved an overall score of 6 in both tests. It concluded that Dr Fryzlewicz's fitness to practise remained impaired by reason of him not having the necessary knowledge of English, the minimum overall IELTS score required being 7.5. The Tribunal imposed conditions for a period of 9 months.

2019

7. Dr Fryzlewicz's case was reviewed on 21-22 March 2019 (the 2019 Tribunal). The 2019 Tribunal determined that there was no objective or independent evidence before it that Dr Fryzlewicz's knowledge of English had changed since the matter was last considered by the 2018 Tribunal. The 2019 Tribunal was of the opinion that Dr Fryzlewicz was distracted from gaining full insight into his lack of the necessary knowledge of English by his belief that he was being persecuted for religious and political reasons. The Tribunal decided to impose a further period of conditions, unvaried, for a period of 12 months, to protect patients and maintain public confidence in the profession.

2020

8. An MPT Tribunal (the 2020 Tribunal) reviewed Dr Fryzlewicz's case on 25 March 2020. Dr Fryzlewicz was not present or represented at the hearing but provided a written submission. The 2020 Tribunal found that Dr Fryzlewicz had made further progress in attaining a good level of English. However, he had not provided the Tribunal with evidence that he had passed either the IELTS or the OET test, which the Tribunal accepted were the standard objective tests. The 2020 Tribunal was also concerned about Dr Fryzlewicz's level of insight into the reasons for his referral to the GMC. It found that he did not appear to understand the importance of successive GMC requests for him to undertake an authorised test to demonstrate the necessary knowledge of the English language to practise medicine safely in the UK. The 2020 Tribunal determined that Dr Fryzlewicz's fitness to practise remained impaired. Taking into account Dr Fryzlewicz's limited engagement in the 2020 proceedings, his lack of insight and limited efforts to remediate, the 2020 Tribunal determined to suspend his registration for a period of 12 months to allow time for him to take either the IELTS or OET tests

2021

9. Dr Fryzlewicz's case was reviewed on 7-8 April 2021 (the 2021 Tribunal). The 2021 Tribunal found that Dr Fryzlewicz had passed his GCSE examination in English Language with a score of 5 but had not passed either the IELTS or OET test with the scores required by the GMC. The 2021 Tribunal found that Dr Fryzlewicz continued to lack insight into the importance of demonstrating the requisite English language skills through the tests authorised by the GMC. It determined that Dr Fryzlewicz's fitness to practise remained impaired by reason of not having demonstrated the necessary knowledge of English to practise medicine safely in the UK. The 2021 Tribunal determined to suspend Dr Fryzlewicz's registration for a period of 10 months to give him time to complete the IELTS or OET test.

2022

10. Dr Fryzlewicz's case was reviewed on 4 February 2022 (the 2022 Tribunal). The 2022 Tribunal was not presented with any evidence that Dr Fryzlewicz had passed either an IELTS or OET test with the minimum scores required to satisfy GMC requirements for English language competency. In the circumstances, the 2022 Tribunal determined that imposing conditions on Dr Fryzlewicz's registration for a period of 18 months was appropriate to give him time to find work, improve his English and gather the necessary evidence to provide to a reviewing Tribunal.

2023

11. Dr Fryzlewicz's case was next reviewed on 3 – 4 August 2023 ('the 2023 Tribunal'). The 2023 Tribunal noted that Dr Fryzlewicz had taken the IELTS test twice since the 2022 Tribunal but had not achieved the minimum scores required by the GMC. His overall test results were 5.5 and 6.0 on 26 January 2023 and 29 July 2023 respectively. The 2023 Tribunal noted the steps taken by Dr Fryzlewicz to address the concerns identified. This included attendance at a conference in Barcelona, reading journals and magazines, and joining the British Cardiovascular Society. However, the 2023 Tribunal was concerned there was no evidence of any up-to-date Continuing Professional Development (CPD), any patient feedback, testimonials from colleagues, a report from a workplace supervisor, or evidence of completing his Personal Development. It concluded that Dr Fryzlewicz's fitness to practise was impaired by reason of not having the necessary knowledge of English.

2024

12. Dr Fryzlewicz's case was reviewed on 15-16 August 2024 ('the 2024 Tribunal'). Dr Fryzlewicz was neither present nor represented. The 2024 Tribunal was concerned that there was no evidence before it to suggest that Dr Fryzlewicz understood the potential impact his actions, and his failure to attain the necessary standard of the English language, had on patients, the medical profession, and public confidence in the medical profession. The 2024 Tribunal considered whether there were any exceptional circumstances that would justify a finding that Dr Fryzlewicz's fitness to practise was no longer impaired by reason of his knowledge of English but determined that there were no exceptional circumstances. The 2024 Tribunal determined that Dr Fryzlewicz's fitness to practise is impaired by reason of his

not having the necessary knowledge of English and determined to suspend his registration for a further 12 months.

13. The 2024 Tribunal considered that a reviewing Tribunal would be assisted by:
- Evidence that he has a good command of the English language. This should be in the form of satisfactory OET (medical profession version) or IELTS test scores unless there are truly exceptional circumstances justifying other evidence;
 - Evidence of up to date Continuing Professional Development (CPD) specific to his area of practice.

Dr Fryzlewicz could also provide any other information that he considered will assist a reviewing Tribunal.

Today's hearing

14. At this review hearing the Tribunal has to decide in accordance with Rule 22(1)(f) of the General Medical Council (GMC) (Fitness to Practise) Rules 2004, as amended ('the Rules') whether Dr Fryzlewicz's fitness to practise is impaired by reason of not having the necessary knowledge of English.

The Outcome of Applications Made during the Impairment Stage

15. The Tribunal determined that service of the notice of this hearing had been effected in accordance with Rule 40 of the GMC (Fitness to Practise) Rules 2004 as amended ('the Rules'), and paragraph 8 of Schedule 4 to the Medical Act 1983, as amended. The Tribunal also determined to proceed with the hearing in Dr Fryzlewicz's absence in accordance with Rule 31 of the Rules. The Tribunal's full decision on this matter is included at Annex A.

The Evidence

16. The Tribunal has taken into account all the evidence received:
- The previous records of determination;
 - GMC letters sent to Dr Fryzlewicz dated between 24 September 2024 and 15 May 2025.

Submissions

17. On behalf of the GMC, Mr Oliver Carr, Counsel rehearsed the background of the case and submitted that, to date, no response has been received whatsoever from Dr Fryzlewicz whether that be correspondence or evidence to be submitted before this Tribunal.

18. Mr Carr submitted that Dr Fryzlewicz's fitness to practice remains impaired by not having the necessary knowledge of the English language. Mr Carr reminded the Tribunal that the onus is on Dr Fryzlewicz to demonstrate that he has sufficient knowledge of the English

language to practise safely. Mr Carr further reminded the Tribunal that Dr Fryzlewicz has not submitted any evidence to this Tribunal and, therefore, this Tribunal must assume that Dr Fryzlewicz's grasp of the English language is no better than he has demonstrated previously. Mr Carr submitted that there remains no objective evidence that Dr Fryzlewicz has either attempted or passed the tests which, have time and time again, been made clear to him as being necessary.

19. Mr Carr pointed the Tribunal to the relevant paragraph of Good Medical Practice (GMP) 2013,

'You must have the necessary knowledge of the English language to provide a good standard of practice and care in the UK'

20. Mr Carr submitted that the only evidence available to this Tribunal is that, over the last 9 years taking into account his test results, Dr Fryzlewicz's English language skills had not improved to meet the required standard. Mr Carr further submitted that Dr Fryzlewicz's fitness to practice remains impaired and such a finding ought to be made in order to ensure patient safety and the maintenance of public confidence in the profession.

The Relevant Legal Principles

21. The Tribunal reminded itself that the decision of impairment is a matter for the Tribunal's judgement alone. As noted above, the previous Tribunal set out the matters that a future Tribunal may be assisted by. This Tribunal is aware that it is for the doctor to satisfy it that he would be safe to return to unrestricted practise.

22. This Tribunal must determine whether Dr Fryzlewicz's fitness to practise is impaired today, taking into account any relevant factors since the events in question and then such as whether the matters are remediable, have been remedied and any likelihood of repetition.

The Tribunal's Determination on Impairment

Not Having the Necessary Knowledge of English

23. The Tribunal acknowledged that in 2020 Dr Fryzlewicz passed a GCSE examination in English Language with a score of 5 but determined that such a qualification does not equate to the standard of knowledge required by the IETLS and OET tests to be able to communicate medical issues effectively and practise medicine safely. Therefore, the Tribunal attached little weight to this qualification.

24. The Tribunal considers that it has no up to date evidence before it regarding Dr Fryzlewicz's knowledge of English and that the information before it suggests that his IELTS scores did not sufficiently improve over multiple years of re-testing. The Tribunal was also satisfied that there is no evidence before it that there are exceptional circumstances that would justify a finding that Dr Fryzlewicz's fitness to practise was no longer impaired by reason of his knowledge of English.

25. The Tribunal also considered that it has no evidence before it that Dr Fryzlewicz has provided any CPD certificates to demonstrate that he has maintained his clinical knowledge.

26. The Tribunal considered that there is no evidence that Dr Fryzlewicz has developed insight regarding these matters and that there was no evidence of any recent remediation. The Tribunal further noted that Dr Fryzlewicz appears to have disengaged with these proceedings.

27. The Tribunal balanced Dr Fryzlewicz's interest against the public interest. It was mindful of the overarching objective which is to protect, promote and maintain the health, safety, and wellbeing of the public; to maintain public confidence in the profession; and to promote and maintain proper professional standards and conduct for members of the profession.

28. Dr Fryzlewicz's inability to objectively demonstrate his competence in English language skills represents a clear risk to patient safety. In addition, an informed member of the public would be concerned if, having failed to reach the required standard over a period of 10 years, a finding of impairment were not made. A finding of impairment is therefore necessary to maintain public confidence and also to declare and uphold proper professional standards.

29. The Tribunal considers that a finding of impairment remains necessary to satisfy the overarching objective. This Tribunal has therefore determined that Dr Fryzlewicz's fitness to practise remains impaired by reason of not having the necessary knowledge of English.

Determination on Sanction - 22/08/2025

30. Having determined that Dr Fryzlewicz's fitness to practise is impaired by reason of not having the necessary knowledge of English, the Tribunal now has to decide in accordance with Rule 22(1)(h) of the Rules what action, if any, it should take with regard to Dr Fryzlewicz's registration.

Submissions

31. Mr Carr informed the Tribunal that there is no new evidence to submit at this stage. Mr Carr submitted that taking no action or imposing a period of conditions was not appropriate in this case. Mr Carr reminded the Tribunal that conditions have been imposed previously and Dr Fryzlewicz has failed to satisfy these conditions on numerous occasions over a number of years.

32. Mr Carr reminded the Tribunal that Dr Fryzlewicz has been suspended twice consecutively for a year at a time, and nothing has changed since those suspensions. Mr Carr further reminded the Tribunal that the only objective evidence before it was the results of

previous English tests which demonstrated no discernible improvement in English language skills since 2014.

33. Mr Carr submitted that a practitioner who is impaired by way of not having the necessary knowledge of English is objectively a risk to his patients. Secondly, the general public would lose confidence in the profession should this situation be allowed to continue. Thirdly, not having the necessary knowledge of English required by the profession clearly falls short of the professional standards that are required to be met by members of the profession.

34. Mr Carr submitted that the appropriate sanction is one of suspension. Mr Carr reminded the Tribunal of paragraph 105 of the Sanctions Guidance (SG):

105 In cases that relate solely to a doctor's health or language where the doctor's registration has been suspended for at least two years because of two or more successive periods of suspension, the tribunal can suspend the doctor's registration indefinitely. If the tribunal decides to direct indefinite suspension, there is no automatic further hearing of the case. But two years after the indefinite suspension takes effect, the doctor can ask for it to be reviewed.

35. Mr Carr invited the Tribunal to look objectively at the evidence before it today when considering whether it would be appropriate to suspend Dr Fryzlewicz. There have been no objective signs of any further progress on Dr Fryzlewicz's part in relation to improving his English language skills to the requisite level. Mr Carr submitted that Dr Fryzlewicz has over many years now failed to adhere to conditions imposed on his registration or to take the steps recommended to him to improve an essential skill that goes to the heart of his fitness to practise.

The Relevant Legal Principles

36. The decision as to the appropriate sanction, if any, to impose is a matter for the Tribunal exercising its own judgment by reference to the SG. It must consider the least restrictive sanction first and then, if necessary, consider the other sanctions. The Tribunal must consider its determination on impairment and take those matters into account during its deliberations on sanction.

37. The Tribunal recognised the purpose of a sanction is not to be punitive but to protect patients and the wider public interest, although it may have a punitive effect. It reminded itself that in deciding what sanction, if any, to impose, it should consider the sanctions available, starting with the least restrictive.

Aggravating factors

38. The Tribunal considered the aggravating factors in this case.

39. Dr Fryzlewicz has failed to engage with his regulator for over a year and has a history of non-engagement with the GMC and the MPTS proceedings.

40. The Tribunal had no evidence that Dr Fryzlewicz has updated his knowledge of English and passed either an IELTS or OET test. Further, the Tribunal had no evidence that Dr Fryzlewicz has kept up to date with his CPD and that he is safe to return to clinical practice.

41. The Tribunal has no evidence before it that Dr Fryzlewicz has developed his insight and no evidence that he has taken steps to remediate his position.

Mitigating factors

42. The Tribunal had regard to paragraphs 24 and 25 of the SG which set out matters that may be considered mitigating factors. Having carefully considered the evidence before it today, the Tribunal was unable to identify any mitigating factors in this case.

The Tribunal's Determination

43. The Tribunal bore in mind its finding at the impairment stage along with the submissions of Mr Carr. The Tribunal considered which sanction, if any, it should impose starting with the least restrictive.

No action

44. The Tribunal first considered whether it would be appropriate to take no action in this matter.

45. The Tribunal could not find any exceptional circumstances in this case to justify taking no action. It concluded that it would not be sufficient, proportionate or in the public interest to take no action. In addition, it considered that the overarching objective would not be satisfied if no action were taken. In the light of this the Tribunal went on to consider conditions.

Conditions

46. The Tribunal next considered whether it would be sufficient to impose conditions on Dr Fryzlewicz's registration. It bore in mind that any conditions imposed would need to be appropriate, proportionate, workable and measurable.

47. The Tribunal had regard to the following paragraphs of the SG:

82 Conditions are likely to be workable where:

a the doctor has insight

...

84 Depending on the type of case (e.g. health, language, performance or misconduct), some or all of the following factors being present (this list is not exhaustive) would indicate that conditions may be appropriate: a no evidence that demonstrates remediation is unlikely to be successful, e.g. because of previous unsuccessful attempts or a doctor's unwillingness to engage

85 Conditions should be appropriate, proportionate, workable and measurable.

48. Dr Fryzlewicz's registration has been made subject to conditions on previous occasions but did not result in him obtaining the required IELTS or OET score. The Tribunal also reminded itself of Dr Fryzlewicz's history of non-engagement with his regulator and there is no evidence of any attempt at remediation since July 2023 when he undertook his last IELTS test.

49. The Tribunal determined that, in light of no evidence before provided to the contrary, Dr Fryzlewicz has an ongoing lack of insight regarding these matters and has taken no further steps to remediate.

50. In the circumstances, the Tribunal concluded that there were no conditions it could impose which would be workable or measurable and conditions were not appropriate in these circumstances.

Suspension

51. Having determined that the imposition of conditions would not be appropriate, the Tribunal next considered whether to extend the current order of suspension on Dr Fryzlewicz's registration.

52. The Tribunal had regard to the following paragraphs of SG:

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

92 Suspension will be an appropriate response to misconduct that is so serious that action must be taken to protect members of the public and maintain public confidence in the profession. A period of suspension will be appropriate for conduct that is serious but falls short of being fundamentally incompatible with continued registration (i.e. for which erasure is more likely to be the appropriate sanction because the tribunal considers that the doctor should not practise again either for public safety reasons or to protect the reputation of the profession).

...

94 Suspension is also likely to be appropriate in a case of deficient performance or lack of knowledge of English in which the doctor currently poses a risk of harm to patients but where there is evidence that they have gained insight into the deficiencies and have the potential to remediate if prepared to undergo a rehabilitation or retraining programme.

...

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

...

d In cases that relate to knowledge of English, where the doctor's language skills affect their ability to practise and there is a risk to patient safety if the doctor were allowed to continue to practise even under conditions.

53. The Tribunal noted Dr Fryzlewicz's continued lack of engagement with his regulator and, similarly, the Tribunal was satisfied there was no information that suggested that Dr Fryzlewicz would engage in participation in any future process.

54. The Tribunal had no evidence that Dr Fryzlewicz has maintained his clinical knowledge and skills. Further, the Tribunal had no evidence that the doctor has gained insight into the deficiencies identified by previous tribunals.

55. The Tribunal determined that Dr Fryzlewicz's lack of knowledge of English demonstrates a departure from GMP 2013:

'14.1 You must have the necessary knowledge of the English language to provide a good standard of practice and care in the UK'

and has breached fundamental tenets of GMP.

56. In the circumstances, the Tribunal determined that a further period of suspension would be the appropriate and proportionate sanction in this case.

Indefinite Suspension

57. When considering whether to impose an indefinite order of suspension on Dr Fryzlewicz's registration the Tribunal bore in mind paragraph 105 of the SG:

105 In cases that relate solely to a doctor's health or language where the doctor's registration has been suspended for at least two years because of two or more successive periods of suspension, the tribunal can suspend the doctor's registration indefinitely. If the tribunal decides to direct indefinite suspension, there is no automatic further hearing of the case. But two years after the indefinite suspension takes effect, the doctor can ask for it to be reviewed.

58. Dr Fryzlewicz has been subject to a sanction of suspension since September 2023. The Tribunal, having considered the Medical Act 1983 section 35D (6) and the Guidance, found that the initial period of suspension remained in effect until the commencement of the second period, resulting in a continuous suspension.

59. Section 35 D (6) of the Medical Act 1983 sets out that:

In a language case a Medical Practitioners Tribunal may give a direction in relation to a person whose registration has been suspended under this section extending his period of suspension indefinitely where—

(a) the period of suspension will, on the date on which the direction takes effect, have lasted for at least two years; and

(b) the direction is made not more than two months before the date on which the period of suspension would otherwise expire.

60. The 2023 Tribunal suspended Dr Fryzlewicz's registration for 12 months – the tribunal's direction took effect on 7 September 2023 and Dr Fryzlewicz was advised his registration was suspended until 6 September 2024. The 2024 Tribunal suspended Dr Fryzlewicz's registration for 12 months the tribunal's direction took effect on 23 September 2023 and Dr Fryzlewicz was advised his registration was suspended until 5 September 2025.

61. Taking into account the date on which a direction from this Tribunal will take effect the Panel concluded that the provisions of Section 35 D (6) of the Medical Act 1983 are engaged which means that Dr Fryzlewicz will have been suspended for a total of two consecutive years due to not having the necessary knowledge of English.

62. The Tribunal was satisfied that Dr Fryzlewicz was made aware that indefinite suspension was a potential outcome at this hearing as he was advised that the Tribunal had this power in the MPTS Notice of hearing. The Tribunal was further satisfied that Dr Fryzlewicz was given the opportunity to engage in these proceedings.

63. The Tribunal is satisfied that the circumstances of this case are unlikely to change and that an order imposing an indefinite suspension is necessary in these circumstances to protect public safety and to otherwise meet the requirements of the overarching objective.

64. Therefore, the Tribunal has determined to indefinitely suspend Dr Fryzlewicz's registration.

65. The Tribunal have directed to suspend Dr Fryzlewicz's registration indefinitely. The MPTS will send Dr Fryzlewicz a letter informing him of his right of appeal and when the direction and the new sanction will come into effect. The current suspension will remain in place during the appeal period.

66. This concludes the hearing.

ANNEX A – 21/08/2025

Application on Service and Proceeding in Absence

Service

67. Dr Fryzlewicz is neither present nor represented at these proceedings.

68. Mr Carr referred the Tribunal to the GMC's proof of service bundle which included a screenshot of the GMC database showing Dr Fryzlewicz's registered address.

69. The Tribunal was provided with a copy of a Service bundle from the General Medical Council (GMC). This included a GMC information letter and draft bundle dated 14 July 2025 and the Medical Practitioners Tribunal Service (MPTS) notice of hearing letter dated 7 July 2025. Both letters were sent by post to Dr Fryzlewicz's registered address via special delivery. The Tribunal had regard to the tracking information, which showed that both the GMC and MPTS letters were returned to their respective senders as they were not collected.

70. The Tribunal further considered the GMC letter and final bundle dated 7 August 2025 (this final bundle contained the same documentation as was contained in the draft bundle) which was signed for by "RUMEN" on 12 August 2025.

71. Mr Carr took the Tribunal through the documents provided regarding service. He informed the Tribunal that the initial GMC information letter and draft bundle was resent to Dr Fryzlewicz via first class post to his registered address on 7 August 2025.

72. Mr Carr submitted that reasonable attempts have been made to serve Dr Fryzlewicz with notice of these proceedings.

73. The Tribunal had regard to the above documents and the submissions from Mr Carr. The Tribunal reminded itself that it is a matter for the practitioner to keep their registered address up to date. The Tribunal is satisfied that the notice of this hearing was served to Dr Fryzlewicz's registered address in a timely manner. In all the circumstances, the Tribunal determined that notice of this hearing had been served on Dr Fryzlewicz in accordance with Rule 40 of the GMC's (Fitness to Practise) Rules 2004, as amended, ('the Rules'), and paragraph 8 of Schedule 4 to the Medical Act 1983, as amended.

Proceeding in the doctor's absence

74. The Tribunal then went on to consider whether it would be appropriate to proceed with this hearing in Dr Fryzlewicz's absence pursuant to Rule 31 of the Rules. The Tribunal was conscious that the discretion to proceed in the absence of a doctor should be exercised with the appropriate care and caution, balancing the interests of the doctor with the wider public interest.

75. Mr Carr reminded the Tribunal that it has the discretion to proceed in Dr Fryzlewicz's absence. Mr Carr further reminded the Tribunal that Dr Fryzlewicz's was neither present nor represented at the last review hearing and that his attendance had not been consistent throughout the period under consideration (he did not attend the 2020 or 2024 hearings). Mr Carr submitted that Dr Fryzlewicz is a practitioner with a history of some non-attendance and there has been no contact from Dr Fryzlewicz as to why he is not in attendance today.

76. Mr Carr submitted that there was no practical purpose to be served in adjourning this case. Mr Carr further submitted that if this matter is adjourned it is inevitable that the suspension would have to be extended and there is nothing to say that a future Tribunal will not be back in the same position. He argued that it is overwhelmingly in the public interest to hold this review in a timely fashion to satisfy both public confidence and public safety considerations. Mr Carr submitted that the Tribunal should proceed in Dr Fryzlewicz's absence.

77. The Tribunal balanced Dr Fryzlewicz's interests with the public interest in deciding whether to proceed in his absence. In accordance with Rule 31, it is appropriate to proceed in Dr Fryzlewicz's absence. The Tribunal is satisfied that Dr Fryzlewicz has voluntarily absented himself from this hearing.

78. The Tribunal noted that there are instances of non-attendance and lack of engagement on behalf of the doctor. Further that this is the latest in a number of reviews, that Dr Fryzlewicz is aware that a review was directed by the previous Tribunal and/or he is aware of requirement for reviews in these proceedings. He had asked for previous hearings to be adjourned. The Tribunal further noted that Dr Fryzlewicz has not sent any correspondence to either the GMC or the MPTS regarding this hearing and has not requested an adjournment. Furthermore, an adjournment could not guarantee Dr Fryzlewicz attendance at a subsequent hearing; and therefore, an adjournment would serve no useful purpose. The Tribunal acknowledged that there may be some disadvantage to Dr Fryzlewicz in not attending this hearing or being represented at it. However, the Tribunal balanced this against the requirements of fairness to all parties and determined that there is a public interest in dealing with this hearing in a timely manner.

79. In accordance with Rule 31, the Tribunal considers that it is appropriate and in the public interest to proceed in Dr Fryzlewicz's absence.