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Ms. Genevieve Currie
General Council
c/o Patient Ombudsman of Ontario
393 University Ave
Suite 1801
Toronto, ON
M5G 1E6

Re. Complaint re. Cancer Care Ontario's PET Scan Policy, Case File# 201700672

Dear Ms. Currie:

QUESTIONS AND POINTS OF CLARIFICATION RE RULING:

QUESTION 1:

1. I would ask that you explain in detail and in a way that patients, and in particular the family members of patient ID 21337, **why these cases would not lie within the section of the mandate** you have quoted with respect to why the portion referring to publicly funded hospitals ***is not considered part of the Patient Ombudsman Mandate.***

POINT OF CLARIFICATION 1:

Please describe in detail a case example of a patient **that would** be covered under the section of issues related to:

- a. **'actions or inactions of a health sector organization that relate to the care taking place within a** health sector organizations are defined in the act as a **publicly funded hospital.'**

Question 2:

Why would the statement from Professor Hicks not be of concern to Ontario's Patient Ombudsman, Ms Elliott, and indeed not even acknowledged in your ruling?

QUESTION 3:

Why has Ontario's Patient Ombudsman, Ms. Christine Elliott, chosen not to comment on the threats against my ability to practice medicine when it would be reasonable to conclude that all the medical advice and information I gave to the patients and their physicians was in fact true and meeting the standards of practice of what is expected of Ontario physicians?

POINT OF CLARIFICATION 2:

If Ms. Elliott has ruled that the 'standard of care that patient ID 21337' received in a publicly funded Ontario hospital' is consistent with "excellent care for all" in Ontario, please explain in full detail ***which, if any aspects of this patient's care, are consistent with what would be implied by 'excellent care for all.'***

POINT OF CLARIFICATION 3:

By claiming all the issues we raised were related to established government **policy**, did you mean the following?

That once the decision had been made by Ontario politicians with their CCO 'experts' in the late 1990's or early 2000's, to allow the use of a scientifically baseless and agenda driven 'methodologies/processes' to assess the "quality of evidence" of "science based medical papers with respect to PET", as well as the basis of deliberately designing 'experiments on human cancer patients', and how the results would be analyzed:

That this was now 'accepted Government Policy' and therefore would no longer be covered by the Patient Ombudsman mandate.

- ***Yes, or No?***

Question 4:

Why would this issue be of so little concern to Ms. Elliott that it is not

even mentioned in her ruling?

Please answer this in sufficient detail so that the 'naive' physicians and patients will now understand why this is of no concern to the individual designated to act independently of the Ontario government and prevent government abuses or other actions, not in the best interest of Ontario's patients.

Question 5:

Would this 'justification to set 'Standards' for investigation and treatment decisions for patients based solely on one's 'belief/faith' that the approach was correct, apply to all Ontario physicians, or just the Ontario government designated 'physician experts'?

Question 6:

Does accepting that it is 'legitimate government Policy' to exempt Ontario physicians from the longstanding and Internationally accepted norms of using a validated scientific methodology/process to make critical decisions with respect to our patients now mean:

That in a potential malpractice case against a physician in Ontario, that it would be a legitimate defense to say that the physician based their investigation and treatment decisions solely on their 'belief/faith' in the validity of this approach and thus they were applying the 'Standards of Medical Care as appropriate to Ontario?'

POINT OF CLARIFICATION 4:

It is a matter of established fact that the "unethical, and bordering on immoral" actions of the government's 'medical experts' and all investigations and PET/CT exams as part of CCO designed PET experiments on patients took place fully within publicly funded Ontario hospitals.

Please state clearly why there was not any acknowledgement or mention in your ruling of such serious and unprecedented actions by Ontario government 'experts' directly impacting 'Ontario Patients' and leading inevitably to the unnecessary and severe physical and emotional suffering of the patient and a profound and severe impact on Ontario patients in general:

Question 7:

Given that all of these 'experimental' PET scans were performed on these patients *in publicly funded hospitals, why this would not be covered under the Patient Ombudsman's mandate?*

YOUR DEFENSE OF THE OMBUDSMAN OF ONTARIO'S CONCLUSIONS ABOUT ASSESSING PET IN ONTARIO:

Therefore as I have previously challenged the Ombudsman's Office:

I would respectfully request that you provide all the necessary documentation, and in particular:

- **Listing the examples of the 'established government policies with respect to PET' that you are claiming my colleagues and I asked the Ombudsman's Office to review.**
- **Specifically making clear why issues my colleagues and I raised such as: the use of a 'medical poster' to halt the introduction of PET in Ontario; the 'elevation of this medical poster to a Level A quality medical reference; the downgrading of Level A/B papers that favoured PET to unacceptable Level C/D papers; the 'methodological tools such as health technology assessment' in the design of experiments on patients and evaluation of the results; WERE NOT ABOUT THE PROCESS RELATED TO HOW GOVERNMENT EXPERTS DETERMINED POSSIBLE ROLES FOR PET IN ONTARIO.**

Respectfully Submitted

Dr Dave Webster