

GENERAL DENTAL COUNCIL

AND

AMIR, Mohamed

Registration number: 48432]

NOTICE OF INQUIRY

SUBSTANTIVE HEARING

This hearing opened on 24 February 2020 and concluded part-heard on 6 March 2020. A date and location for a resumed hearing will be arranged in due course.

The heads of charge contained within this sheet are current at the date of publication. They are subject to amendments at any time before or during the hearing. For the final charge, findings of fact and determination against the registrant, please visit the Recent Hearings page at www.gdc-uk.org after this hearing has finished.

Committee Members:

Catherine Elliott	(Lay)	Chair
Matthew King	(Dentist)	
Sufyaan Patel	(DCP)	

Legal Adviser: Paul Moulder

CHARGE

Mohamed AMIR, a dentist, MSc Lond 1977 LDS Royal College of Surgeons Of England 1975 BDS Lond 1974 is summoned to appear before the Professional Conduct Committee on 24 February 2020 for an inquiry into the following charge:

CHARGE (as **AMENDED** and **READ** on 25 February 2020)

“That, being a registered dentist:

1. You provided advice and treatment under private contract to Patient A between December 2015 and April 2016.
2. You failed to provide an adequate standard of care to Patient A between 17 December 2015 and 19 April 2016 by:
 - a) Not carrying out sufficient diagnostic assessments including by:
 - i) Not taking an adequate history of Patient A's presenting condition;
 - ii) Not undertaking any or any adequate;
 - (a) clinical examination of the jaw joints;
 - (b) clinical examination of the muscles of mastication;
 - (c) clinical examination of the occlusion;
 - (d) dental charting;
 - (e) intra oral examination;
 - (f) soft tissue examination;
 - (g) Basic Periodontal Examination;
 - (h) radiographic examination;
 - iii) Not undertaking any special tests namely;
 - (a) plain radiographs of the jaw joint;
 - (b) radiographs to exclude dental pathology;
 - (c) specific imaging of the jaw joints.
 - b) Not adequately considering all potential diagnoses prior to commencing treatment;
 - c) Not providing Patient A with any or any adequate treatment plan;
3. You failed to obtain informed consent for the treatment provided to Patient A from 17 December 2015 to 19 April 2016 including by:
 - a) Not providing Patient A with all appropriate treatment options;
 - b) Not informing Patient A of all appropriate advantages and disadvantages of all appropriate treatment options;
 - c) Not informing Patient A of all material risks of the proposed treatment;
4. You failed to maintain an adequate standard of record keeping in relation to Patient A's appointments from 17 December 2015 to 19 April 2016 including by:

- a) not recording adequately or at all discussions with Patient A;
 - b) not recording adequately or at all Patient A's presenting condition;
 - c) not recording adequately or at all any assessment undertaken;
 - d) not recording adequately or at all any examination undertaken;
 - e) not recording adequately or at all a diagnosis;
 - f) not recording adequately or at all a prognosis;
 - g) not recording adequately or at all a treatment plan;
 - h) not recording adequately or at all the treatment provided including;
 - i) the fitting of the appliance;
 - ii) information provided on its use;
 - i) not recording adequately or at all the material risks;
 - j) not recording adequately or at all the justification for deviating from established practice and guidance;
 - k) not recording adequately or at all rationale for withdrawing provision of care.
5. The treatment you provided to Patient A between 17 December 2015 and 19 April 2016 did not have any or any adequate clinical justification.
6. Between 17 December 2015 and 19 April 2016 you made statements to Patient A that:
- a) the treatment you were able to provide would slow Patient A's symptoms of Spinal Cerebellar Ataxia or words to that effect;
 - b) the treatment you were able to provide would improve Patient A's symptoms of Spinal Cerebellar Ataxia or words to that effect;
 - c) Patient A's symptoms were caused by a dysfunctional jaw joint and not Spinal Cerebellar Ataxia or words to that effect.
7. You conduct at 6(a) and/or 6(b) and/or 6(c) was:
- a) Misleading; and/or,
 - b) Dishonest, as you knew there was no reasonable body of evidence to support these statement(s).
8. For a period of time up to and including 22 January 2019, you made statements on <http://dramir.com> to the effect that:
- a. Cranio-dental symmetry aims to restore balance to bodily systems, bringing about a permanent and lifelong improvement in health and well-being.
 - b. That the following conditions can be attributed to a dysfunctional jaw joint:
 - i. Asthma;
 - ii. Ataxia;
 - iii. Allergies;
 - iv. Sciatic nerve pains;

- v. Breathing problems;
- vi. Crohn's/Coeliac disease;
- vii. Depression and anxiety;
- viii. Fibromyalgia;
- ix. Infertility;
- x. [withdrawn];
- xi. Arthritis;
- xii. Learning difficulties;
- xiii. A migraine;
- xiv. Multiple Sclerosis;
- xv. Heart palpitations;
- xvi. Speech difficulties, including stammering.

9. Your conduct at 8(a) and/or 8(b) was:

- a) Misleading; and/or,
- b) Dishonest, as you knew there was no reasonable body of evidence to support these statement(s).

And that, in consequence of the matters set out above, your fitness to practise is impaired by reason of misconduct.”