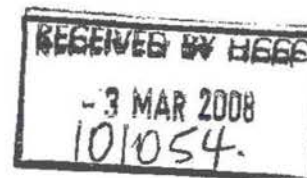


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19 February 2008

Angela O'Gorman  
 Investigator  
 Health Care Complaints Commission  
 Locked Mail Bag 18  
 STRAWBERRY HILLSNSW 2012



Dear Ma O'Gorman

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RE: Complaint against Dr John Rolleston      Your ref File No: 03/01056      07/00070

Thank you for your letter of 18 February 2008

You have requested an independent review of the documents provided and comment on Dr Rolleston' conduct in relation to Mr AWC, Mr AWH, and Mr AWO. **REDACTED**.

You have provided me with the following documents;

- 20
1. Statement of Mr AWC dated 6 February 2007
  2. Copy of the entry in the medical record for Mr AWC's consultation with Dr Rolleston dated 24 July 1979.
  3. Statement of Mr AWH dated 19 January 2007.
  4. Statement of Mr AWO previously known as **REDACTED** dated 13 August 2007.
  5. Copy of a response from Dr Rolleston dated 21 November 2006.

30 I note that Dr Rolleston has denied any recollection of Mr AWH and did not respond to the allegations in relation to Mr AWC and Mr AWO. You have requested that my review proceeds on the assumption that the statements of the patients are the preferred facts

Mr AWC

1. Following an injury to the coccyx, as described by Mr AWC, what are the usual examinations that a medical practitioner would perform?

40 A medical practitioner would ask the patient to reveal the injured part to assess any bruising. An examination of the coccyx bone would then be undertaken by palpating the base of the spine externally, pressing the skin. A second examination is undertaken, with a gloved hand, where one finger is inserted into the anus and the posterior wall of the anus is examined to assess boney integrity. Unless there is a history of anal penetration, there is no indication for examining other parts of the anus, or the prostate

2. Following an injury to the coccyx, is it appropriate to perform a rectal examination?

2. Following an injury to the coccyx, is it appropriate to perform a rectal examination?

Yes: see above

50 3. Following an injury to the coccyx, is it usual practice for a medical practitioner to require a semen sample from the patient, in the manner described by Mr AWC?

No. A semen examination is not usual practice.

4. If a semen sample is required, how does a medical practitioner usually obtain such a sample?

60 The patient would be asked to go into a private room on his own, and undertake self masturbation to produce a sample into a provided jar, for immediate microscopic examination

5. Please state whether Dr Rolleston's conduct, as alleged by Mr AWC in his statement, is a significant departure from the standard reasonably expected of a practitioner with an equivalent level of training or experience.

70 Dr Rolleston's conduct, as alleged by Mr AWC in his statement, is a significant departure from the standard reasonably expected of a practitioner with an equivalent level of training or experience. (see Medical Board statement appendix 1) The departure is significantly below that standard and invites my strong criticism.

Mr AWH

1. Please state whether Dr Rolleston's conduct, as alleged by Mr AWH in his statement, is a significant departure from the standard reasonably expected of a practitioner with an equivalent level of training or experience.

80 Dr Rolleston's conduct, as alleged by Mr AWH in his statement, is a significant departure from the standard reasonably expected of a practitioner with an equivalent level of training or experience. (see Medical Board statement appendix 1) The departure is significantly below that standard and invites my strong criticism.

Mr AWO

1. Please state whether Dr Rolleston's conduct, as alleged Mr AWO in his statement, is a significant departure from the standard reasonably expected of a practitioner with an equivalent level of training or experience.

90 Dr Rolleston's conduct, as alleged by Mr AWO in his statement, is a significant departure from the standard reasonably expected of a practitioner with an equivalent level of training or experience. (see Medical Board statement appendix 1) The departure is significantly below that standard and invites my strong criticism.

2. Was it appropriate for Dr Rolleston to provide a backdated medical certificate for depression and anxiety, in order for Mr AWO to obtain sickness benefits from Centrelink?

100 It was not appropriate to provide such a certificate. The certificate appears to have been supplied for a condition that the doctor had not formally diagnosed. Back dating

certificates occurs uncommonly and is considered to be an undesirable activity ( see appendix 2)

3. Please state whether Dr Rolleston's conduct, in alluding to repeating the masturbatory incidents which occurred during Mr AWO's adolescence, when consulted for a medical certificate and prescription, is a significant departure from the standard reasonably expected of a practitioner with an equivalent level of training or experience

110 Dr Rolleston's conduct, in alluding to repeating the masturbatory incidents which occurred during Mr AWO's adolescence, when consulted for a medical certificate and prescription is a significant departure from the standard reasonably expected of a practitioner with an equivalent level of training or experience. (see Medical Board statement appendix 1) The departure is significantly below that standard and invites my strong criticism.

This particular conduct exemplifies the reliance on previously established power relationships to enforce sexual activity which is inappropriate. This harms patients most deeply. This is specifically identified in the Medical Board Statement Paragraph 5c

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Yours sincerely,



130 Linda Mann