

PUBLIC HEARING**Professional Conduct Committee
Initial Hearing****3 to 7 November 2025****Name:** BALATHASAN, Sasitha**Registration number:** 257054**Case number:** CAS-203066

General Dental Council: Molly Dyas, counsel
Instructed by Claire Elam-Cooke, IHLPS**Registrant:** Present
Represented by Ben Rich, counsel
Instructed by Lily Lloyd, MDDUS

Fitness to practise: Impaired by reason of misconduct**Outcome:** Fitness to Practise Impaired. Reprimand Issued**Duration:** N/A**Immediate order:** None

Committee members: Aysha Ahmed Kibria (Dentist) (Chair)
Stephanie Carter (Dental Care Professional)
Caroline Healy (Lay)**Legal adviser:** Julian Weinberg**Committee Secretary:** Gareth Llewellyn

Determination on preliminary matters - 3 November 2025

Miss Balathasan

1. This is a hearing before the Professional Conduct Committee (PCC). The hearing is being held in person at the offices of the Dental Professionals Hearings Service in central London.
2. You are present and are represented by Ben Rich of counsel, instructed by Lily Lloyd of the Medical and Dental Defence Union of Scotland (MDDUS). Molly Dyas of counsel, instructed by Claire Elam-Cooke of the General Dental Council's (GDC's) In-House Legal Presentation Service (IHLPs), appears for the GDC.

The charge

3. The charge that you face at this hearing reads as follows:

"That being registered as a dentist

- 1) *On a date before 18 June 2020, you created non-contemporaneous clinical records in respect of Patient A.*
- 2) *On 1 May 2020, you provided non-contemporaneous clinical records for Patient A to your regulator, the General Dental Council, and did not identify that the records were non-contemporaneous.*
- 3) *Your conduct in relation to 1 and/or 2, above, was:*
 - a) *Misleading*
 - b) *Dishonest in that you knew that patient records should represent contemporaneous notes; and knowingly and/or intentionally did not highlight that non-contemporaneous notes had been added to the record.*

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

Background to the case and summary of allegations

4. The allegations giving rise to this hearing arise out of clinical records that you provided to the GDC in relation to its investigation into a patient complaint. The clinical records relate to a patient who is referred to for the purposes of these proceedings as Patient A. Patient A was a patient of a dental practice at which you worked as a self-employed dentist.
5. It is alleged that, on a date before 18 June 2020, you created clinical records that were not contemporaneous in respect of Patient A, and that on 1 May 2020 you provided those records to the GDC without identifying that the records were non-contemporaneous. The GDC alleges that such conduct was misleading, and was also dishonest, in that you knew that patient records should be contemporaneous and knowingly and/or intentionally did not highlight that non-contemporaneous notes had been added.

Admissions

6. Mr Rich on your behalf tendered admissions to each of the heads of charge that you face. The heads of charge that you admitted were, namely, 1, 2, 3 (a) and 3 (b). The Committee, having accepted the advice of the Legal Adviser, determined and announced that all of the facts were proved on the basis of your admissions in accordance with Rule 17 (4) of the General Dental Council (Fitness to Practise) Rules 2006 ('the Rules').

**Determination on rescinding finding of fact at 3 (b) and application to amend 3 (b) -
4 November 2025**

Basis upon which the facts are proved

7. Although you tendered full admissions to each of the heads of charge that the Committee went on to find proved, the Committee was invited to determine certain facts underlying your dishonest conduct, beyond the findings that it had already made at each of the heads of charge. More particularly, whether you acted alone in pursuing a dishonest course of conduct, or whether another individual advised or encouraged you to do so. The joint suggestion of parties was for the Committee to hold a 'Newton hearing' in order to hear evidence and argument about this matter.

Evidence

8. The Committee has been provided with documentary material in relation to the heads of charge that you face, including the witness statements and documentary exhibits of a caseworker employed by the GDC in its Fitness to Practise team, namely Islam Zaman; the witness statements and documentary exhibits of the practice manager at the practice, who is referred to for the purposes of these proceedings as Witness 1; the report of the GDC's expert witness, namely Balraj Dhami; and a witness statement and documentary exhibits provided by you.
9. The Committee heard oral evidence from Witness 1, and from you.

Rescinding of finding of fact at head of charge 3 (b)

10. During the course of the Newton hearing referred to above, the Committee announced that, in light of the evidence presented to it, it had decided to set aside its earlier finding of fact at head of charge 3 (b). The Committee announced that that head of charge would fall to be considered and determined as part of a factual inquiry, pursuant to Rule 19 of the Rules.

Application to amend head of charge 3 (b)

11. Ms Dyas then applied to amend head of charge 3 (b) pursuant to Rule 18 of the Rules. The proposed amendment would read as follows:

Dishonest in that you knew the patient records were not contemporaneous but sought to present them as contemporaneous records.

12. Mr Rich on your behalf supported the application, and stated that the admission previously tendered would stand should the head of charge be amended. The Committee, having accepted the advice of the Legal Adviser, determined to refuse the application to amend. The Committee considered that the proposed amendment would be likely to cause injustice to you, and that it would not be fair and appropriate for the amendment to be made at this late stage, given that the Committee has now heard the GDC's and your evidence based on the original allegation.

**Determination on further application to amend head of charge 9 (b) –
5 November 2025**

13. On 4 November 2025, following the handing down of the Committee's findings in relation to preliminary matters, the rescinding of its finding at head of charge 3 (b) and the application

to amend that same head of charge, the hearing continued with the 'Newton hearing' referred to in its previous determination and the factual inquiry pertaining to head of charge 3 (b).

14. Ms Dyas then applied for a different amendment to be made to head of charge 3 (b). The proposed amendment would read as follows:

Dishonest in that you knowingly and/or intentionally did not highlight that non-contemporaneous notes had been added to the record.

15. Ms Dyas submitted that her application has been precipitated by the Committee's decision to rescind its finding of fact at head of charge 3 (b). Ms Dyas submitted that no injustice would be caused to you were the Committee to accede to this new application, given that the amendment is reflective of the GDC's case against you, and that you admit that case. Ms Dyas submitted that the proposed amendment simplifies the head of charge in question, and allows the Committee to focus on the 'crux' of the GDC's case.
16. Ms Dyas submitted that the unfairness that would be caused to the GDC were the head of charge not to be amended could not be easily remedied, given that the GDC's opportunity to cross-examine you has passed, and in reality did not arise given that the Committee had already found the head of charge proved by the time you came to give evidence in connection with the issue that formed the subject of the Newton hearing.
17. Mr Rich on your behalf made no opposition to the application.
18. The Committee accepted the advice of the Legal Adviser.
19. The Committee has determined not to accede to the application to amend head of charge 3 (b). The Committee considers that allowing the amendment would cause unfairness to you, despite the fact that you do not oppose the amendment, as the Committee has now heard and read the evidence adduced by the GDC and those who represent you pursuant to the existing allegation. The Committee considers that, were the head of charge to be amended in the terms sought by the GDC, it would not properly and fully reflect the basis for, and nature of, the dishonesty that the GDC alleges.
20. In relation to any unfairness that might be caused to the GDC by the Committee refusing its application to amend, the Committee considers that no unfairness arises, as the GDC is not placed at a disadvantage because the position in which it now finds itself is no different to that which existed at the outset of the hearing before you admitted to head of charge 3 (b) and the other heads of charge. Although the Committee has not made any findings of fact in relation to your alleged dishonesty, in approaching the question of whether to make the amendment it considers that the oral evidence that it heard from you appears to be consistent with the witness statement that you provided to the GDC. In reaching this decision the Committee reminded itself of its overarching objective to protect the public. The Committee considers that its decision not to accede to the GDC's application is consistent with this duty. In particular, and contrary to the submissions of Ms Dyas, the Committee has concluded that allowing the amendment sought may bind or fetter the Committee when it comes to determine head of charge 3 (b) and after being properly directed as to the law. In the Committee's judgement, the curtailing of head of charge 3 (b) at this late stage might constitute an under-prosecution of the case. The Committee, mindful as it always is of its overarching objective, considers that the merits of this particular case and the need to ensure that the proceedings are fair mean that the application to amend should be refused.

**Determination on the reinstatement of the GDC's finding of fact at
head of charge 3 (b) - 6 November 2025**

21. Following the handing down of the Committee's determination in relation to the GDC's further application to amend head of charge 3 (b) on the morning of 5 November 2025, the hearing

continued on the afternoon of that same date.

Submission as to whether the Committee's decision to rescind its finding of fact at head of charge 3 (b) was unlawful

22. Ms Dyas on behalf of the GDC then submitted that the GDC is concerned that the Committee may not have had the power to rescind its earlier finding of fact at head of charge 3 (b), and to open a factual inquiry in relation to that head of charge, as announced on 4 November 2025.
23. Mr Rich on your behalf submitted that the legal position about the issue is not clear, and that although the point is arguable either way, the Committee may have acted lawfully, given that its finding of fact at head of charge 3 (b) was made before the Committee had heard evidence. Mr Rich made his submissions on a provisional basis with a view to giving further consideration to the matter. Ms Dyas concurred that the legal position is not clear.
24. The hearing then adjourned on the afternoon of 5 November 2025 until the morning of 6 November 2025 in order to allow parties time to consider the matter further and prepare skeleton arguments.
25. On the morning of 6 November 2025 the Committee received skeleton arguments prepared by Ms Dyas and Mr Rich. The Committee also received a supplementary witness statement written by you dated 6 November 2025.

Committee's decision as to whether to reinstate its finding of fact at head of charge 3 (b)

26. In light of your further evidence about the alleged dishonesty at head of charge 3 (b) as set out in your supplementary witness statement of 6 November 2025, the Committee announced that it has determined that it would be appropriate for it to reinstate its previously-rescinded finding of fact at this head of charge. The Committee was satisfied that, taking all of the evidence that it has received into consideration, including your supplementary witness statement, you have provided a clear and unequivocal acceptance of the alleged dishonesty. The Committee therefore announced that head of charge 3 (b), which you admit, is proved.
27. Accordingly, the Committee has found all of the facts proved on the basis of your admissions.

Committee's findings as to underlying facts - 6 November 2025

28. The hearing then proceeded with the 'Newton hearing' referred to in the Committee's earlier determinations.
29. As referred to above, the Committee has been invited to determine certain facts underlying your dishonest conduct, beyond the findings that it had already made at head of charge 3 (b). More particularly, whether you acted alone in pursuing a dishonest course of conduct, or whether another individual advised or encouraged you to do so. It is the joint position of parties that this matter may go towards a consideration of your culpability and towards any sanction that the Committee may go on to impose, once properly directed as to the law. The relevant evidence and submissions about this issue are summarised below.

Summary of key evidence

30. Your evidence is that on or around 29 April 2020 you informed Witness 1, as well as the principal dentist at the practice, that a complaint had been made about your care and treatment of Patient A. You had been notified by the GDC on 14 April 2020 that a complaint had been made. Your evidence is that on 30 April 2020 you were present at the practice with Witness 1, and that you expressed to her that you considered that there were details missing

from the patient's records. You stated that Witness 1 was attempting to help you. You stated that you *'relied upon the support from [Witness 1] to assist me through the process of a GDC investigation'*. Your evidence is that Witness 1 suggested that you add further details to the records. Your evidence is that Witness 1 also told you to rewrite the patient's records from when you started seeing Patient A, and that Witness 1 rewrote previous entries relating to appointments in 2017. You state that, once you had finished rewriting the records, you handed them over to Witness 1, who then asked you to destroy the original records, which you did not do.

31. The evidence of Witness 1 is that records are handwritten on paper at the practice, and that records should be contemporaneous. Witness 1 states that you informed her that Patient A may be making a complaint following the appointment that the patient had with you on 2 March 2020. Witness 1's evidence is that you informed her that you considered that your notes were not very clear and that you had rewritten them in order to make them clearer. Witness 1 denies ever having instructed you to rewrite records, and that the decision to do so was yours alone. Witness 1 accepted that she did make some entries in relation to matters such as a referral letter and a payment, but that these entries, whilst 'wrong', were purely 'administrative' in nature and were made from a practice management point of view. Witness 1 similarly denies that she asked you to destroy the patient's original records, or that she reviewed them or had knowledge of the retrospective entries that you made.

Summary of parties' submissions

32. The GDC's case is that Witness 1 did not instruct, suggest or advise you to add to, rewrite and then destroy the original records, and that your actions in creating and providing records purporting to be contemporaneous when they were not in fact contemporaneous were entirely yours. The GDC notes that you did not make any suggestion that Witness 1 had any involvement in your initial response to the GDC, and did not make any suggestion of her involvement until making further representations in 2022 in connection with the GDC's investigation. The GDC argues that you have chosen to apportion some blame to Witness 1 in order to detract from your own conduct. The GDC invited the Committee to bear in mind its finding of dishonesty in approaching the question before it.
33. Your case is that, whilst you admit that you acted dishonestly, you asked Witness 1 for advice and guidance, that Witness 1 was aware of what you were doing, that she encouraged or supervised you rewriting records, or that she at least did not discourage or dissuade you from doing so. It is also your case that Witness 1 also acted wrongly in similarly passing off records as being contemporaneous when they were not contemporaneous. It is also your case that Witness 1 asked you to destroy the original records, which you did not do. Witness 1 denies making this request. It was submitted on your behalf that Witness 1 is seeking to minimise her own involvement so as to avoid any potential regulatory action being taken against her, and that the Committee may have significant concerns about relying on Witness 1's evidence. Your case is not that you were acting under duress, and you accept that you were responsible for your actions.

Committee's findings

34. The Committee has taken into account all the evidence presented to it, both written and oral. It has considered the submissions made by Ms Dyas on behalf of the GDC and those made by Mr Rich on your behalf. The Committee has had regard to the GDC's *Guidance for the Practice Committees, including Indicative Sanctions Guidance* (October 2016, updated December 2020).
35. The Committee has accepted the advice of the Legal Adviser concerning the principles to which it should have regard. The Committee is mindful that the burden of proof lies with the GDC, and has considered the issue that is in dispute according to the civil standard of proof, that is to say, the balance of probabilities.

36. The Committee has sought to determine certain facts underlying your dishonest conduct, beyond the findings that it had already made at head of charge 3 (b). More particularly, whether you acted alone in pursuing a dishonest course of conduct, or whether another individual advised or encouraged you to do so.
37. The Committee has found that the GDC has not demonstrated to the standard required that Witness 1 had no involvement in you creating and then providing non-contemporaneous records. The Committee considers that the account that you have given as summarised above is credible, and has not been demonstrated to be false by the GDC, which bears the burden of proof, on the balance of probabilities.
38. The Committee considers that it is more likely than not that you sought guidance and assistance from Witness 1, and the principal dentist, upon hearing of a complaint from the GDC. The Committee has taken account of an email that you sent to Witness 1 on 29 April 2020 in which you asked for guidance about how to proceed. The Committee accepts your evidence that you then received a telephone call from Witness 1 and the principal dentist, and that you then attended the practice on the following day, namely 30 April 2020, to review and add to your records at the suggestion of the principal dentist. The Committee also considers that it is plausible for you to have contacted Witness 1 in the first instance given the delays that you were experiencing in obtaining guidance and support from your indemnifier.
39. The Committee considers that the account that you have provided of what happened at the practice on 30 April 2020 as credible and plausible, and the Committee finds that the GDC has not demonstrated to the standard required that those events did not take place in the ways that you have stated they did. The Committee specifically finds your evidence of Witness 1 suggesting that you rewrite your records for Patient 1, and of her having knowledge of what you were doing, to be credible, and was consistent with you having sought advice and guidance from Witness 1 in your email of 29 April 2020. The Committee also accepts your evidence that Witness 1 asked you to destroy the original entries that you had rewritten. The Committee recognises that your evidence conflicts with that of Witness 1. However, the Committee considers that the GDC has not demonstrated to the standard required that Witness 1 did not play the role that you have described in your evidence. The Committee considers that it is more likely than not that Witness 1 would have been involved in and have knowledge of the rewriting of the patient's notes, as the potentially poor state of patient records may reflect badly on the practice. The Committee noted that Witness 1 herself accepted that she made some retrospective entries in the patient's records without marking them as non-contemporaneous. The Committee accepts that Witness 1 had no malicious intent, and was endeavouring to be supportive of you. The Committee also considers that it is reasonable to infer that Witness 1 wished to avoid any potential criticism of the practice of which she is the manager, and the plausibility of that potential motivation adds further credibility to your account.
40. The GDC submits that, in part, your account cannot be relied on, as you did not make any mention of Witness 1's involvement until some time later, namely when making further representations to the GDC in 2022. The Committee was not persuaded that this detracts from the credibility of your evidence, as it finds that it is reasonable and plausible for you not to detail Witness 1's role as you were only initially asked about the records themselves rather than the circumstances of their production. You subsequently provided an account of Witness 1's involvement. Therefore, the Committee does not infer from you not initially mentioning Witness 1's involvement as being suggestive of you having fabricated her role.
41. The Committee is mindful that you have come before it making full admissions to the heads of charge that the Committee went on to find proved. The Committee does not consider your reference to Witness 1's role as an attempt to implicate her or to deflect blame, and it instead considers that you have provided a factual account of your recollection of what happened.

42. The Committee's findings as to these underlying facts were made subsequent to, and separately from, its findings of fact in respect of each of the heads of charge. For the avoidance of doubt, the findings set out in this determination should not be interpreted as in any way detracting from the Committee's finding of dishonest conduct.

43. We move to stage two.

Determination on misconduct, impairment and sanction – 7 November 2025

44. Following the handing down of the Committee's findings of underlying facts on 6 November 2025, the hearing proceeded to stage two; that is to say, misconduct, impairment and sanction.

Proceedings at stage two

45. The Committee has considered all the evidence presented to it, both oral and documentary. It has taken into account the submissions made by Ms Dyas on behalf of the GDC and those made by Mr Rich on your behalf.

46. In its deliberations the Committee has had regard to the GDC's *Guidance for the Practice Committees, including Indicative Sanctions Guidance* (October 2016, updated December 2020). The Committee has accepted the advice of the Legal Adviser concerning its powers and the principles to which it should have regard.

Evidence at stage two

47. The Committee has been provided with a bundle of documentary evidence relevant to the second stage of this hearing. This information includes a personal development plan (PDP), record-keeping audits, certificates of continuing professional development (CPD), reflections on professional and remedial ethics courses, reflections on the complaint that was made to the GDC, and testimonials submitted on your behalf by professional colleagues.

48. The Committee also heard oral evidence from you.

Summary of submissions

49. Ms Dyas on behalf of the GDC submitted that the facts that the Committee have found proved amount to misconduct. Ms Dyas submitted that a finding of impairment is required in the public interest alone. Ms Dyas invited the Committee to direct that your name be suspended from the register for a period of four months.

50. Mr Rich on your behalf submitted that you accept that your proven conduct amounts to misconduct. Mr Rich also submitted that you also accept that a finding of impairment is required with regard to public interest considerations, but not in relation to public protection issues. Mr Rich invited the Committee to impose a reprimand in the particular circumstances of this case.

Fitness to practise history

51. Ms Dyas previously informed the Committee that you have no fitness to practise history with the GDC.

Misconduct

52. The Committee first considered whether the facts that it has found proved constitute misconduct. In considering this and all other matters, the Committee has exercised its own

independent judgement. In its deliberations the Committee has had regard to the following paragraphs of the GDC's *Standards for the Dental Team* (September 2013) in place at the time of the incidents giving rise to the facts that the Committee has found proved. These paragraphs state that, as a dentist:

1.3 You must be honest and act with integrity.

1.3.2 You must make sure you do not bring the profession into disrepute.

4.1.5 If you need to make any amendments to a patient's records you must make sure that the changes are clearly marked up and dated.

9.1 You must ensure that your conduct, both at work and in your personal life, justifies patients' trust in you and the public's trust in the dental profession.

9.4 You must co-operate with any relevant formal or informal inquiry and give full and truthful information.

53. The Committee's findings relate to you having created non-contemporaneous clinical records in connection with a patient, and then providing those records to the GDC without identifying that those records were not contemporaneous. The Committee has found that your conduct was misleading, and was also dishonest, in that you knew that patient records should be contemporaneous, and knowingly and intentionally did not highlight that non-contemporaneous records were being provided.

54. In light of the findings of fact that it has made, the Committee has determined that the proven facts amount to misconduct. The Committee considers that your conduct was serious, and was a significant falling short of the standards reasonably to be expected of a registered dentist. The Committee considers that the need to act with honesty is a fundamental tenet of the profession, and that fellow professionals and members of the public would properly expect registrants to act with honesty.

55. The Committee has therefore determined that the facts that it has found proved amount to misconduct.

Impairment

56. The Committee next considered whether your fitness to practise is currently impaired by reason of the misconduct that it has found. In doing so, the Committee again exercised its own independent judgement.

57. Throughout its deliberations, the Committee has borne in mind that its overarching objective is to protect the public, which includes the protection of patients and the wider public, the maintenance of public confidence in the profession and in the regulatory process, and the declaring and upholding of proper standards of conduct and behaviour.

58. The Committee considers that your fitness to practise is not impaired with regard to public protection considerations. The Committee considers that any risks to the public that may have arisen from your dishonest conduct had been remedied to the extent that your fitness to practise is not currently impaired. The Committee noted that the GDC has not submitted that there are any public protection concerns in this case. You have clearly recognised the nature and seriousness of your conduct, including the risks that your conduct may have posed to the public. The Committee has had regard to the evidence that you have provided of your insight into your conduct, and of the steps that you have taken to remediate your dishonesty. This remediation includes targeted and consistent learning and development. In the circumstances the Committee is satisfied that a repeat of your dishonest conduct is highly

unlikely. The Committee considers that there are no public protection issues that arise, and that your fitness to practise is not currently impaired with regard to the public protection.

59. However, the Committee considers that a finding of impairment is, nonetheless, required to maintain public confidence in the profession and to declare and uphold proper professional standards of conduct and behaviour. In the Committee's judgement the public's trust and confidence in the profession, and in the regulatory process, would be significantly undermined if a finding of impairment was not made given the nature of your misconduct, relating as it does to dishonest conduct that took place in connection with enquiries being made by your regulator about a patient.
60. Accordingly, the Committee finds that your fitness to practise is currently impaired by reason of your misconduct on public interest grounds alone.

Sanction

61. The Committee then determined what sanction, if any, is appropriate in light of the findings of facts, misconduct and impairment that it has made. The Committee recognises that the purpose of a sanction is not to be punitive, although it may have such an effect, but is instead imposed to protect patients and safeguard the wider public interests mentioned above.
62. In reaching its decision the Committee has again taken into account the GDC's *Guidance for the Practice Committees, including Indicative Sanctions Guidance* (October 2016, updated December 2020). The Committee has applied the principle of proportionality, balancing the public interest with your own interests. The Committee has once more exercised its own independent judgement.
63. The Committee has paid careful regard to the aggravating and mitigating factors present in this case.
64. In terms of aggravating factors, the Committee notes that there was an element of intention in your dishonest conduct, although the Committee accepts that your response was panicked and misjudged. The Committee is also mindful that your dishonest conduct relates to formal enquiries being made of you by your regulator, to whom you have a duty to provide truthful information.
65. In respect of the mitigating factors that are present, the Committee is mindful of the circumstances surrounding the events giving rise to these proceedings. The Committee dealt with these matters in detail in its earlier determination, and found that you were provided with guidance by Witness 1 when you found that you were unable to obtain prompt assistance by your indemnifier. The Committee recognises, as do you, that you panicked, and acted in a misguided manner. The Committee considers that your conduct should be seen in the context of you seeking to provide full and truthful clinical records to the GDC, and that there is no suggestion that the records that you provided were not correct in and of themselves. The Committee has taken into account the fact that the incident giving rise to these proceedings was an isolated event, and that you are otherwise of good character, with no fitness to practise history or any reports of any similar or different complaints since. The Committee notes that over five years have elapsed since these matters occurred, and that you appear to have practised without incident in that extensive intervening period. The Committee has also had regard to the insight and remediation that you have provided, which includes full admissions to each of the heads of charge that the Committee went on to find proved. The Committee also finds that your conduct was not motivated by, and did not result in, a financial gain for you. The Committee has also taken into consideration that you took personal responsibility for your actions and did not seek to apportion any blame to Witness 1.
66. The Committee has considered the range of sanctions available to it, starting with the least restrictive. In the light of its findings, the Committee considers that taking no action would not

be sufficient in the particular circumstances of this case. In the Committee's judgement public trust and confidence in the profession and in the regulatory process would also be significantly undermined if no action were taken.

67. The Committee next considered whether it would be appropriate to conclude the case with a reprimand. After careful consideration the Committee has concluded that it would be appropriate and proportionate to issue a reprimand. The Committee has found that you do not pose a risk to the public, and that you have shown genuine and extensive remorse for, insight into and remediation of your misconduct. The Committee has found that you received some advice and guidance from Witness 1, and that you acted in a misguided way arising out of your panic. The Committee again considers that your conduct should be seen in the context of you seeking to provide full and truthful clinical records to the GDC, and that there is no suggestion that the records that you provided were not correct in and of themselves. The Committee has again taken into account the fact that the incident giving rise to these proceedings was an isolated event, and that you are otherwise of good character, with no fitness to practise history or any reports of any similar or different complaints since.
68. The Committee did consider whether a higher sanction such as a period of conditional or suspended registration would be appropriate. It considered that no higher sanction than that of reprimand is needed in order to address the public interest considerations referred to above. The Committee further recognised the nature of the misconduct that it has found, relating as it does to dishonesty, could not be properly addressed by conditions. Having considered, in particular, paragraph 6.28 of the GDC's *Guidance for the Practice Committees, including Indicative Sanctions Guidance* (October 2016, updated December 2020), the Committee determined that a suspension would be disproportionate, given that the potential factors mentioned at that paragraph are not present in this case. The Committee is satisfied that a reprimand is sufficient to meet the public interest considerations engaged in the particular circumstances of this case.
69. This reprimand, and a copy of the public determination, will appear alongside your name in the register for a period of 12 months. The reprimand forms part of your fitness to practise history and is disclosable to prospective employers and prospective registrars in other jurisdictions.
70. That concludes this case.