

PUBLIC RECORD

Dates: 09/03/2026 - 27/03/2026

Doctor: Dr Muhammad IMRAN
GMC reference number: 7816173
Primary medical qualification: MBBS 2007 National University of Science and Technology - Army Medical College

Type of case	Outcome on facts	Outcome on impairment
New - Misconduct	Facts relevant to impairment found proved	Impaired

Summary of outcome

Suspension, 12 months
Review hearing directed
Immediate order imposed

Tribunal:

Legally Qualified Chair	Mrs Ruth Curtis
Lay Tribunal Member:	Mrs Jane Johnson
Registrant Tribunal Member:	Dr Pavan Rao
Tribunal Clerk:	Mr Michael Murphy

Attendance and Representation:

Doctor:	Present, represented
Doctor's Representative:	Mr Toby Hedworth, KC, direct access
GMC Representative:	Ms Harriet Tighe, Counsel

Attendance of Press / Public

In accordance with Rule 41 of the General Medical Council (Fitness to Practise) Rules 2004 the hearing was held partly in public and partly in private.

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 Facts - 20/03/2026

1. The Tribunal exercised its powers under Rule 41 of the General Medical Council (GMC) (Fitness to Practise) Rules 2004, as amended (the Rules), to sit in private when the matters under consideration or heard as evidence were confidential. This determination will be handed down in private but as this case concerns Dr Imran's alleged misconduct a redacted version will be published at the close of the hearing.

Background

2. Dr Imran qualified in Pakistan in 2007 and worked as a General Physician. He obtained his General Surgery qualification in Pakistan in 2016 and worked as a Consultant General Surgeon before becoming a registrar in the Armed Forces of Pakistan. Dr Imran registered with the GMC in 2020 and moved to the UK in 2022 to undertake a Fellowship in Congenital Cardiac Surgery with the Birmingham Women's and Children's NHS Foundation Trust. He has since returned to practise in Pakistan and relinquished his GMC licence to practise in 2025.

3. The allegations that have led to Dr Imran's hearing relate to Dr Imran's conduct towards Ms A. The GMC allege that Dr Imran physically abused Ms A between XXX and XXX. The GMC also allege that, between XXX and XXX, Dr Imran behaved in such a way towards Ms A that it amounted to XXX in that he repeatedly or continuously engaged in behaviour towards her, which had a serious effect on her and he ought to have known this.

4. The initial concerns were raised with the GMC in XXX by Ms A who completed an online referral form. In this she raised concerns about Dr Imran physically, verbally and mentally abusing her. The referral to the GMC was in addition to Ms A discussing Dr Imran with her GP and subsequently being referred to XXX. Also, Ms A was interviewed by West

Midlands Police, on XXX, regarding an incident that took place on XXX with Dr Imran. Dr Imran was arrested on XXX and was released on bail which was subsequently cancelled.

The Outcome of Applications made during the Facts Stage

5. The Tribunal granted the GMC's application, made pursuant to Rule 17(6) of the GMC (Fitness to Practise Rules) 2004 as amended ('the Rules'), to amend the Allegation and Confidential Schedule 2. The Tribunal's full decision on the application is included at Annex A.

6. The Tribunal refused the GMC's application, made pursuant to Rule 34(1) of the Rules, to make redactions to the evidence. The Tribunal's full decision on the application is included at Annex B.

7. The Tribunal granted Mr Hedworth's application, made pursuant to Rule 34(1) of the Rules, to admit additional evidence. The Tribunal's full decision on the application is included at Annex C.

The Allegation and the Doctor's Response

8. The Allegation made against Dr Imran is as follows:

That being registered under the Medical Act 1983 (as amended):

1. At the material times, the nature of your relationship with [Ms A] was as set out in Schedule 1. **To be determined**
2. On XXX you beat [Ms A]'s neck and shoulders, using your fists. **To be determined**
3. In or around late XXX whilst driving XXX you hit [Ms A] on one or more occasion. **To be determined**
4. On or around XXX you slapped [Ms A]'s face on one or more occasion. **To be determined**
5. In or around XXX you:
 - a. punched [Ms A]'s back; **To be determined**
 - b. slapped [Ms A]; **To be determined**

- c. pushed [Ms A]. **To be determined**
6. On XXX you:
 - a. punched [Ms A]'s back; **To be determined**
 - b. attempted to slap [Ms A]. **To be determined**
7. On XXX you beat [Ms A]. **To be determined**
8. On XXX you slapped [Ms A] twice. **To be determined**
9. In or around XXX, whilst in XXX, you slapped [Ms A]. **To be determined**
10. On or around XXX you: **Amended under Rule 17(6)**
 - a. held [Ms A]'s upper arms with force for around 1-2 minutes; **To be determined**
 - b. pushed [Ms A] towards the bed. **To be determined**
11. On XXX, whilst driving XXX, you:
 - a. shouted at [Ms A]; **Admitted and found proved**
 - b. slapped [Ms A]; **To be determined**
 - c. attempted to slap [Ms A]; **To be determined**
 - d. removed your hand from the steering wheel in order to attempt to slap [Ms A]; **To be determined**
 - e. scratched [Ms A]'s face. **To be determined**
12. In or around XXX you slapped [Ms A] because she was breathing loudly. **To be determined**
13. In or around XXX you slapped [Ms A] because she could not remember the document names for an audit. **To be determined**
14. On XXX:
 - a. at or around 10:30 you slapped [Ms A]'s cheek on one or more occasion; **To be determined**

- b. following your actions set out at paragraph 14a you:
 - i. grabbed [Ms A]'s hair at the top of her head and pulled it; **To be determined**
 - ii. pushed [Ms A] backwards towards the bed; **To be determined**
 - c. at or around 14:30 you:
 - i. slapped [Ms A] on one or more occasion; **To be determined**
 - ii. grabbed [Ms A]'s hair; **To be determined**
 - iii. hit [Ms A]. **To be determined**
15. Between XXX and XXX, you behaved in some or all of the manner set out in Schedule 2. **To be determined**
16. Your conduct as set out at:
- a. Schedule 2; and/or **To be determined**
 - b. paragraphs 2-14, **To be determined**

amounted to XXX in that you repeatedly or continuously engaged in behaviour towards [Ms A], with whom at all material times you were personally connected, XXX had a serious effect on [Ms A], and which you knew or ought to have known would have a serious effect on [Ms A].

And that by reason of the matters set out above your fitness to practise is impaired because of your misconduct. **To be determined**

The Admitted Facts

9. At the outset of these proceedings, through his Counsel, Mr Hedworth, Dr Imran made admissions to some paragraphs and sub-paragraphs of the Allegation, as set out above, in accordance with Rule 17(2)(d) of the Rules. In accordance with Rule 17(2)(e), the Tribunal announced these paragraphs and sub-paragraphs of the Allegation as admitted and found proved.

Witness Evidence

10. The Tribunal received oral evidence on behalf of the GMC from the following witnesses:

- XXX (Ms A), subject of the Allegation, on 9 March and 12 March 2026. Her witness statement was dated 17 October 2024 with supplemental witness statements dated 30 November 2024 and 17 November 2025.
- Ms B, Programme Manager at The Royal Academy of Engineering on 11 March 2026. Her witness statement was dated 25 November 2025;

11. Dr Imran provided his own witness statement, dated 6 February 2026 and also gave oral evidence at the hearing on 12 and 13 March 2026.

12. In addition, the Tribunal received evidence from Ms C, XXX. Her witness statement was dated 6 February 2026 and she was called to give evidence on 16 March 2026, on Dr Imran's behalf.

Documentary Evidence

13. The Tribunal had regard to the documentary evidence provided by the parties. This evidence included, but was not limited to, the following:

- Ms A's personal log of events from XXX to XXX;
- Messages between Dr Imran and Ms A between XXX and XXX;
- Video of voice messages Ms A received from Dr Imran on XXX;
- Photographs of Ms A's arm from XXX with metadata;
- Photographs of Ms A from XXX with metadata;
- Video recordings made by Ms A between XXX to XXX;
- Ms A's witness statement to West Midlands Police, dated XXX;
- XXX;
- XXX of messages and recordings that were originally XXX;
- Ms A's medical records from XXX to XXX;
- Photographs of Ms A XXX in XXX;
- Dr Imran's statement to the police;
- XXX;
- Screenshot of Ms A's WhatsApp status from XXX;
- West Midlands Police summary, dated XXX

- Messages sent by Ms A to Ms C;
- Recordings made by Ms C along with XXX;
- Police review document, dated XXX.

Legal Advice

14. The Tribunal accepted the Legally Qualified Chair's advice in which she reminded the Tribunal that the GMC brings this Allegation and the burden of proving each paragraph is on the GMC; there is no burden on Dr Imran to prove anything. In reaching its decision on the facts, the Tribunal will apply the civil standard of proof. This means that the Tribunal must decide whether, on the balance of probabilities, the GMC is able to prove it is more likely than not that the matters occurred as alleged.

15. The Tribunal should have regard to the whole of the evidence and form its own judgement about the witnesses, and which evidence is credible and reliable, and which is not.

16. In assessing credibility the Tribunal should not assess a witness's credibility exclusively on their demeanour when giving evidence, but their veracity should be tested by reference to objective facts proved independently and to the documents in the case. The LQC referred the Tribunal to *R (Gopalchrishnan) v GMC [2016] EWHC 1247* that lies in themselves, do not necessarily mean that the entirety of the evidence of a witness should be rejected. Credibility can be divisible. Further, the fact that a witness gives inconsistent evidence before a Tribunal is not necessarily fatal to their credibility. Inconsistency is one factor to be weighed in the balance.

17. The LQC reminded the Tribunal that inferences should only be drawn if other possibilities can be safely excluded.

18. The LQC advised the Tribunal on cross admissibility in respect of propensity. The LQC referred to the case of *Professional Standards Authority for Health and Social Care v The General Medical Council (Garrard) [2025] EWHC 318 (Admin)* and that the Tribunal needs to first be satisfied that there's "a sufficient connection and similarity between the facts of the allegations" and secondly must be satisfied that one allegation has occurred before deducing propensity to another allegation. Propensity, if found, is only one relevant factor to be weighed by the Tribunal.

19. The Tribunal has to reach a conclusion on each paragraph separately, but it is entitled, in determining whether or not each paragraph is proved, to have regard to relevant evidence in regard to any other paragraph. We may therefore consider the evidence in the round.

The Tribunal's Analysis of the Evidence and Findings

20. The Tribunal found Ms A to be a credible and reliable witness. Her accounts of events were measured and detailed and she was mostly consistent. Her evidence was backed up by the supporting WhatsApp messages and video/audio evidence and the Tribunal did not accept Mr Hedworth's submissions that she was effectively a woman who felt as though she had been wronged and had fabricated the events in order to achieve XXX. This submission was not supported by the evidence whereby Ms A returned to XXX of her own volition two days after the incident whereby she called the police on XXX. Further, the Tribunal did not believe that Ms A was being motivated by vengeance or bitterness towards Dr Imran as a result of XXX. The evidence was clear that even after finding out about XXX Ms A remained XXX, both parties gave evidence that they had continued to make plans to XXX. These actions did not support the narrative that Ms A was compiling evidence against Dr Imran to ruin him.

21. The Tribunal had consideration of the evidence of Ms C who had stated in her witness statement that Ms A had said she would 'destroy' Dr Imran. However, in oral evidence it became clear that she believed this to be something said in anger by Ms A and that minutes later she had calmed down and said she wanted to stay with him. The Tribunal was clear that Ms A had reasons to be angry and upset with Dr Imran at this time and that Ms C was not worried by what Ms A said.

22. Although there were some inconsistencies in Ms A's evidence, for example she told XXX the Tribunal did not accept that this was fatal to her credibility as at this moment in time she was in a stressed state, after being told to leave the house by Dr Imran. The Tribunal further accepted the evidence of Ms A that she did not want to involve or include XXX. The Tribunal noted the evidence of Ms C that XXX would be viewed very badly in their culture and the Tribunal were of the view that Ms A would have had conflicting loyalties and feelings even after being told to leave the house.

23. The Tribunal further rejected Mr Hedworth's contention that Ms A had lied on oath about XXX. The Tribunal was of the view that this was a misunderstanding of the question from Mr Hedworth and then upon re-examination the Tribunal had no reason to doubt Ms A when she said she had read the XXX documents XXX and that she would have to pick up Mr Hedworth's point with XXX. The Tribunal was clear that it did not have an understanding of

XXX and that to draw an inference that Ms A was lying or misleading the Tribunal would be unsafe.

24. The Tribunal noted that Dr Imran denied many paragraphs of the Allegation and provided only limited explanation of events during his oral evidence. Dr Imran's credibility was weakened by inconsistencies between his oral evidence and the written evidence presented to the Tribunal, in particular, Dr Imran denied that he had told Ms A she needed to come off social media. However, he gave many accounts to the Tribunal in his oral evidence of how he disliked Ms A's use of social media and her inclusion of him XXX (albeit not in an identifying way). He had further admitted saying, on XXX, *'that's why I'm telling you to stop with these XXX and social media matters'*. The Tribunal acknowledged that Dr Imran had admitted those aspects of the Allegation which were corroborated by supporting evidence.

25. The Tribunal gave substantial weight to the video and audio evidence that was produced.

26. Notwithstanding these general findings of the Tribunal with respect to the evidence as a whole, the Tribunal has considered each outstanding paragraph of the Allegation separately and has evaluated the evidence to make its findings on the facts.

27. In its deliberations, the Tribunal noted similarity between certain paragraphs of the Allegation which included multiple instances of it being alleged that Dr Imran punched, slapped, pushed and shouted at Ms A. It also noted a similarity that many of the paragraphs of the Allegation occurred in private, XXX with no witnesses present. There was also similarity between the context of some of the arguments.

28. Given this, the Tribunal first considered the paragraphs of the Allegation with the most supporting and corroborating evidence. It deemed these to be paragraphs 14 and 11 of the Allegation.

Paragraphs 14(a)-(c) of the Allegation and paragraph 20 of Confidential Schedule 2

29. The Tribunal first considered paragraph 14 of the Allegation.

30. The Tribunal had regard to the video evidence presented relating to XXX. The Tribunal noted that Dr Imran had admitted saying the words on the video to Ms A, XXX of this is as set out in Confidential Schedule 19. The Tribunal noted some of the comments were verbally abusive:

“If you ever say anything about [XXX] again, ill break your face. that’s it, the conversation is over”...

“your words don’t even have any meaning or importance”

31. The Tribunal was of the view that towards the end of that video it could hear audio evidence of a physical interaction occurring between Dr Imran and Ms A. Ms A’s evidence was that this was when Dr Imran slapped her and then subsequently grabbed her, pulled her hair, pushed her to the bed and further assaulted her. Dr Imran’s evidence was that this physical interaction on the video was most likely him trying to get his phone back from Ms A as he stated that Ms A would often take his phone.

32. The Tribunal further noted that Ms A called the police on XXX. The Tribunal had regard to the police report, dated XXX, which was a contemporaneous report given by Ms A to the police in which she stated:

‘He then walked towards me and shouted "TELL ME WHO YOU ARE". He then grabbed my hair and slapped me a few times on the left side of my face with his right hand I believe. This caused me to have a headache for approximately few hours. The slapping caused lasting pain on my left side of the face. He then pushed me back on the bed. He then left the room.’

33. The Tribunal noted Dr Imran’s witness statement where he stated:

“At that point [Ms A] grabbed my phone and took it [XXX]. I said this was unacceptable and I tried to get my phone from her. I said again that I would call [XXX] and tell her what [Ms A] has said and she again tried to grab the phone.”

34. The Tribunal considered that the video footage supported Ms A’s account as Dr Imran’s voice on the video was aggressive and abusive in tone and towards the end of the video became louder indicating that he was walking towards her. He was overheard saying *‘are you happy now? Happy like this? Like this, are you happy like this?’*. Dr Imran’s own evidence was confusing and not credible as he said that Ms A grabbed his phone from him and that he was trying to retrieve it and that then he says she tried to grab the phone again.

35. The Tribunal found Ms A’s account to be credible and supported by the contemporaneous documents and the corroborating evidence. It found the evidence that she

called the Police and the fact that she XXX two days after the incident to be significant and indicative that something serious had occurred that day.

36. Accordingly, the Tribunal found paragraphs 14(a), 14(b)(i), 14(b)(ii), 14(c)(i), 14(c)(ii) and 14(c)(iii) of the Allegation proved.

Paragraphs 11(b)-(e) of the Allegation

37. The Tribunal then considered paragraph 11 of the Allegation. It reminded itself that Dr Imran had admitted paragraph 11a of the allegation, that he has shouted at Ms A. The Tribunal considered if Dr Imran, whilst driving XXX on XXX, slapped Ms A, attempted to slap Ms A, removed his hand from the steering wheel in order to attempt to slap Ms A and scratched Ms A's face.

38. The Tribunal had regard to the video recording, made on XXX, and the translation of this which showed what Dr Imran had said to Ms A, as set out in Confidential Schedule 13. The Tribunal noted the following:

'Daughter of a bitch, you don't know, you are shameless, if you have any honour in you, just leave this car right now. If you have money get a taxi, get money. You don't have that much honour but only to taunt me'

'I will kick your ass and kick you out. You are worthless. I am ending this episode but you. If you are ending it.'

[Ms A] *Hmm if you are raising your hands on me then I will raise my hands as well*

Daughter of a bitch.

[Ms A] *I am not an animal that you would hit me.*

You are an animal, your intellect is like them'

39. It was Ms A's evidence that Dr Imran had hit her and in her witness statement she said:

'On [XXX] we were driving [XXX]. Whilst we were driving, Imran was listening to sad songs and so I asked him 'why do you love sad songs?' He shouted at me and hit me. The second time that he tried to slap me, I got hold of his hand and said 'no, I am done

with this.’ As I was holding his hand, he then he tried to slap with me using his other hand. At this point, both his hands were off the steering wheel, so I got a bit scared that we would have a car accident and thought it better to be slapped than have a car accident. But he started to realise at this point that I would not continue to let him beat me. I recorded what he said to me during this incident, as I had been making a short travelling video whilst we were driving. I was used to recording short videos, and I wanted to record the scene as it was a beautiful late night and very calm. When we started fighting he slapped me and my phone fell down and continued to record what he said...During this incident, Imran scratched me on my face. I took a photo of my face the following day...’

40. It was Dr Imran’s evidence that he was driving on a motorway at 50mph and that he would not have taken his hands off the steering wheel. He stated that the sounds on the recording were Ms A’s phone falling off her legs.

41. The Tribunal had regard to a photograph of Ms A, dated XXX, which showed scratches on her nose.

42. The Tribunal was satisfied that Dr Imran’s words on the recording were threatening and verbally abusive towards Ms A. On the recording, towards the end, the Tribunal could clearly hear a physical altercation and then the sound of something (possibly the phone) hitting the floor. The Tribunal took the view that the audio recording evidenced that there was a physical altercation. The video captures Ms A saying ‘...if you are raising your hands on me then I will raise my hands as well’ and the scratch on her nose was an injury in keeping with Ms A’s explanation of what had happened in the car. It found this to be compelling evidence that the events had occurred in line with Ms A’s account.

43. Accordingly, the Tribunal found paragraphs 11(b), 11(c), 11(d) and 11(e) of the Allegation proved.

Cross admissibility

44. After finding both allegation 11 and allegation 14 proved in their entirety the Tribunal went on to determine the rest of the paragraphs of the Allegation in order. The Tribunal bore in mind that it was entitled to use paragraph 11 and 14 as evidence to other paragraphs of the Allegation provided there was ‘a sufficient connection and similarity between the facts of the allegations’.

Paragraph 1 of the Allegation

45. The Tribunal considered if Dr Imran was XXX to Ms A and XXX as set out in Confidential Schedule 1.

46. As Dr Imran admitted that he was XXX to Ms A and XXX, the Tribunal found paragraph 1 of the Allegation proved.

Paragraph 2 of the Allegation

47. The Tribunal considered if, on XXX, Dr Imran beat Ms A's neck and shoulders using his fists. It noted that this paragraph 2 of the Allegation related to additional allegations on the same date, as set out in Confidential Schedule 2 paragraph 2, that Dr Imran made the comments as set out in Confidential Schedule 3 '*Who the hell are you? [XXX]*', or words to that effect.

48. In its deliberations, the Tribunal had regard to Ms A's witness statement in which she said:

'The first time Imran beat me was on [XXX]. I [XXX]; so I remember dates. That day I was not feeling well. He had a night shift, and I [XXX]. That was the first time he beat me, and then it continued. He used to beat me in a way so that I didn't get marks. That day, he beat me on the back of my neck and shoulders with his fists. It lasted for about 50 minutes. He said, "who the hell are you? [XXX]" it happened in his house [XXX]. I was sitting in front of the cupboard [XXX]. The whole time I just tried to cover my face and shield myself.'

49. Dr Imran denied that this occurred and said in his witness statement:

'There has never been an incident where I have ever beat [Ms A]'s neck or shoulders with my fists...'

50. The Tribunal considered that Ms A's evidence was that Dr Imran beat her XXX and Dr Imran's evidence was that he would not assault her for not preparing his dinner.

51. The Tribunal had regard to WhatsApp messages, from XXX, which Dr Imran had admitted, which showed that Dr Imran had text Ms A saying 'XXX' and then told her XXX and to go to hell. The Tribunal was of the view that this contradicted and undermined Dr Imran's

evidence as he had clearly been verbally abusive towards Ms A as a result of XXX which was similar to this incident on XXX. Further, as the Tribunal had found paragraph 11 and 14 of the Allegation proved, this refuted his statement that there had never been an incident where he ‘beat’ her.

52. The Tribunal was of the view that Ms A’s account was credible and reliable and that this alleged incident was sufficiently similar to paragraphs 11 and 14 of the Allegation in that Dr Imran had been physically abusive towards Ms A in a private and closed setting as a result of him becoming frustrated with Ms A. The Tribunal determined that on the balance of probabilities it considered it more likely than not that it occurred.

53. Accordingly, the Tribunal found paragraph 2 of the Allegation proved.

Paragraph 3 of the Allegation

54. The Tribunal considered if Dr Imran hit Ms A, whilst driving XXX, in XXX. It noted that this paragraph 3 of the Allegation related to additional allegations, as set out in Confidential Schedule 2 paragraph 3 and Confidential Schedule 4, that Dr Imran made the comment ‘XXX’ or words to that effect, to Ms A in or around XXX.

55. The Tribunal noted commonality in the evidence between Dr Imran and Ms A that they had both attended a park for Dr Imran to go for a run, when he had finished his run and couldn’t find Ms A he had called XXX and she had called Ms A. Dr Imran stated that Ms A was not where he had left her in a café with his phone and keys. Ms A’s evidence was that she was exactly where he had left her but on a bench and that Dr Imran had left his phone in the car. It was clear from Dr Imran’s evidence that he was perturbed that Ms A had moved or that he had forgotten where she was.

56. The Tribunal noted that in this incident it appeared that Dr Imran was stressed, whether or not Ms A had moved or whether he had forgotten where she was, he had had to approach a security guard and have them call XXX in order for XXX to call Ms A and find out where she was so that Dr Imran could locate her. The Tribunal took the view that once again this was in a private setting, in this case the car, away from any observers and Dr Imran took his anger and frustration out on Ms A by physically assaulting her.

57. Dr Imran denied that he hit Ms A in the car stating, ‘*I did not hit [Ms A] while driving on any occasion*’. As the Tribunal had already found that Dr Imran had assaulted Ms A in a car on another occasion his evidence lacked credibility.

58. The Tribunal concluded that Ms A's evidence was detailed and credible and given that there were again sufficiently similar facts between this incident and paragraph 11 of the Allegation, which also took place in the car, the Tribunal found it was more likely than not to have occurred as Ms A stated.

59. In Ms A's evidence she said Dr Imran told her 'XXX'. The Tribunal took the view that this was an attempt by Dr Imran to justify his behaviour. It was clear that there were abusive and insulting words said by Dr Imran to Ms A XXX, many of these had been admitted by Dr Imran at the start of the hearing. In his oral evidence Dr Imran stated that although there were arguments there were good times too. The Tribunal identified a pattern of behaviour from Dr Imran's evidence of him buying Ms A gifts in order to appease her. The Tribunal drew a safe inference that Dr Imran would have proffered some justification in the aftermath of his behaviour (whether verbal and/or physical) towards Ms A. As such, the Tribunal concluded that it was more likely than not that these words were Dr Imran's choice of justification to say.

60. Accordingly, the Tribunal found paragraph 3 of the Allegation proved.

Paragraph 4 of the Allegation

61. The Tribunal considered if Dr Imran slapped Ms A's face on XXX. It noted that this related to the additional allegations contained in, Confidential Schedule 2 paragraph 4 and Confidential Schedule 5, that Dr Imran shouted at Ms A saying that she was a "useless creature in his life and [XXX]", or words to that effect, on or around XXX.

62. In her witness statement Ms A said *'Imran had to juggle between lots of things and during packing his documents he lost his [XXX] letter. This made him furious and he slapped me while I was standing in front of him in his house in the ground floor room. He slapped me two or three times with his right hand across my face and kept shouting and degrading me that I am a useless creature in his life and [XXX], and I stayed quiet...'*

63. Dr Imran denies slapping Ms A or saying words that she was a 'useless creature in his life'. The Tribunal noted that the words in this allegation were similar to words used by Dr Imran during other arguments which he had admitted:

'You have some insect in your arse that doesn't let you live peacefully'

'... You are an animal, your intellect is like them'

'You're talking nonsense in front of me. Your thinking is just low and dirty, isn't it? No matter how much you try to clean filth, filth remains filth. It never actually gets cleaned'

64. Further the words he is alleged to have said on this date, that he had '[XXX]' were also similar to comments Dr Imran had admitted texting to Ms A on other occasions:

'Yes; You fucking shit; [XXX]

65. The Tribunal noted commonality that this appeared to be another occasion when Dr Imran was under stress and in his frustrations and anger he allegedly lashed out at Ms A.

66. The Tribunal found Ms A's evidence to be detailed and credible. Given the other allegations which the Tribunal had found proved it was satisfied that this incident has similarity with the facts of its previous findings and that it was therefore more likely than not to have occurred as Ms A stated it did.

67. Accordingly, the Tribunal found paragraph 4 of the Allegation proved.

Paragraphs 5(a)-(c) of the Allegation

68. The Tribunal considered if Dr Imran punched Ms A's back, slapped her and pushed her in XXX.

69. The Tribunal noted Ms A's evidence that she had confronted Dr Imran with respect to his phone use and who he was contacting. She said he became angry and punched, slapped and pushed her. Dr Imran admitted to contacting XXX and his evidence was that at this point in time he was not XXX nor was he sending what he deemed to be inappropriate messages. It was not disputed between Dr Imran and Ms A and that he was in contact with XXX.

70. Dr Imran said in his evidence that there was no incident in which he punched or slapped Ms A but admitted that he had arguments with Ms A about his WhatsApp usage and that he allowed her to check his phone.

71. The Tribunal noted that this was the first of multiple incidents which related to Dr Imran's contact with XXX. Ms A's evidence was that this was a topic which effectively started

the arguments contained in this paragraph of the Allegation as well as paragraphs 6, 7, 8 and 9.

72. The Tribunal considered it likely that Ms A had noticed that Dr Imran was messaging XXX and that when she confronted him about this, he had got angry. Given the verbal and physical abuse which the Tribunal had already found proved the Tribunal considered it to be more likely than not that Dr Imran did have an argument with Ms A in XXX and that he was violent towards her in the way she states.

73. Accordingly, the Tribunal found paragraphs 5(a), 5(b) and 5(c) of the Allegation proved.

Paragraphs 6(a) and 6(b) of the Allegation

74. The Tribunal considered if Dr Imran punched Ms A's back and attempted to slap her on XXX.

75. This was the second incident alleged to have occurred as a result of Ms A confronting Dr Imran about his contact with XXX. The Tribunal noted the clear similarities between this paragraph of the Allegation and paragraph 5 of the Allegation such as the reason for the argument along with the allegations of slapping and punching. As it found paragraph 5 of the Allegation proved it took those reasons into account. As such, the Tribunal was satisfied on the balance of probabilities that Dr Imran became angry with Ms A and slapped and punched her.

76. Accordingly, the Tribunal found paragraphs 6(a) and 6(b) of the Allegation proved.

Paragraph 7 of the Allegation

77. The Tribunal considered if Dr Imran beat Ms A on XXX. It noted this related to allegations as set out in Confidential Schedule 2 paragraph 7 and Confidential Schedule 7, that Dr Imran made Ms A apologise to him, on XXX, as XXX. It also related to allegations that Dr Imran sent a WhatsApp message to Ms A on XXX, as set out in Confidential Schedule 2 paragraph 8 and Confidential Schedule 8, saying *'Don't [XXX] from my side, go to hell. If you have that much courage, try staying outside for a day. [XXX].*

78. The Tribunal bore in mind that this was the third argument that related to Ms A suspecting Dr Imran of XXX. She asked him why he and XXX were online at the same time and asked to see his phone. She claimed that Dr Imran then beat her.

79. The Tribunal had regard to WhatsApp messages between Ms A and Dr Imran, on XXX, and noted the translation of these shows Dr Imran messaged her to say:

*'There is no need to [XXX]
As far as I'm concerned stay outside
If you are that daring then try to stay outside for one day
Don't only say it'*

80. Dr Imran accepted that there was an argument between him and Ms A, on XXX, but stated *'I am certain I did not physically harm or threaten her'*. However he did admit to sending the WhatsApp message on XXX.

81. In his witness statement Dr Imran said

'On the evening of [XXX], [Ms A] had said she wanted to [XXX]. She texted me the next day. The text said "going". I tried to call her to understand what she meant and whether [XXX]. I was worried I did not hear from her. I was upset and text her in the way stated in Confidential Schedule 8. I did apologise that night when we saw each other and we reconciled'.

82. Dr Imran in his evidence said he was worried that Ms A was XXX when she messaged him to say *'going'*. Ms A stated that the meaning behind this message was that she had made his breakfast and wrote the word as she was going to work. The Tribunal noted that Ms A had started to work XXX. Dr Imran proceeded to message Ms A to say there was no need for her to XXX and that she could go to hell (or words to that effect).

83. The Tribunal found Dr Imran's explanation implausible as he stated he was worried about Ms A but then messaged her to say *'go to hell'*. Ms A's account was consistent with the supporting facts and as such the Tribunal found her to be more truthful. It drew similarities between this paragraph of the Allegation with paragraphs 5 and 6 of the Allegation in that Ms A suspected Dr Imran of XXX, which was the cause of the argument, with a similar reaction from Dr Imran. As such, the Tribunal was satisfied that on the balance of probabilities it was more likely than not that Dr Imran beat Ms A on XXX.

84. Accordingly, the Tribunal found paragraph 7 of the Allegation proved.

Paragraph 8 of the Allegation

85. The Tribunal considered if Dr Imran slapped Ms A twice on XXX. It noted that this related to the additional allegations, as set out in Confidential Schedule 2 paragraph 11 and Confidential Schedule 11 that, on XXX, Dr Imran said that if Ms A wanted to stay with him, she had to delete and deactivate all of her social media accounts, or words to that effect and that he XXX Ms A, making this comment for the second time.

86. In her oral evidence, Ms A stated that, on 1 September 2023, after giving Dr Imran a birthday present he became angry about her uploading a picture of the present to social media. Dr Imran denied slapping her and denied saying that she had to delete all her social media accounts.

87. The Tribunal had evidence from both Dr Imran and Ms A that they were having arguments about her use of social media and her inclusion of Dr Imran in some of these posts. Dr Imran gave evidence that he was a very private person and he did not wish to be seen in any of XXX. The Tribunal were taken to a still image of one XXX which showed the back of Dr Imran XXX, walking. Dr Imran gave evidence that *'despite me saying I don't want a presence. It was unacceptable to me'*.

88. Dr Imran gave evidence that XXX. The Tribunal was of the view that it would therefore follow that Dr Imran may have been upset if XXX.

89. It was clear to the Tribunal that Dr Imran was unreasonably agitated by part of him (not identifying) being in XXX and that it was highly likely, given the propensity he had to get angry and to be verbally and physically abusive with Ms A, that he would have got angry at her uploading a birthday present she gave him. On the balance of probabilities, the Tribunal was satisfied that Dr Imran slapped Ms A twice on XXX.

90. In respect of the purported words said to Ms A, it was Dr Imran's evidence that he had not told her to delete the accounts and that a screenshot of XXX demonstrated that XXX had not been deleted. This was not given much weight by the Tribunal as it was unable to conclude XXX.

91. The Tribunal noted that Dr Imran had admitted to sending WhatsApp messages to Ms A on 16 April 2023 which used similar words to what is alleged on XXX: *'[XXX]* and *'How did*

that shit find out [XXX]?’. It considered these messages to be similar to those alleged by Ms A in that Dr Imran said he would XXX and that the argument was evolving around his frustration that someone had found out they were in XXX together. The Tribunal noted that on XXX, Dr Imran had admitted saying similar words to Ms A during XXX:

‘Listen to me, I’m not going to argue with you again over pointless social media, which is something non-existent. Alright? Even you are worth two pennies to me. Alright? And I don’t want to argue with you about this...That’s why I’m telling you to stop with these [XXX] and social media matters. Let’s make sure this doesn’t happen again, understood? If you don’t get it, let me know right now so [XXX].’

92. The Tribunal concluded that it was more likely than not that Dr Imran said these words as Ms A stated. Accordingly, the Tribunal found paragraph 8 of the Allegation proved.

Paragraph 9 and 10 of the Allegation

93. The Tribunal considered paragraph 9 and 10 of the Allegation together as they were closely connected in time and both parties suggest a causal link between the 2 incidents.

94. The Tribunal considered if Dr Imran slapped Ms A whilst in XXX in XXX. In its deliberations, the Tribunal had regard to the second supplemental witness statement of Ms A in which she said:

‘...when Imran slapped me whilst [XXX]. I guess it was [XXX], I don’t exactly remember the date, but it was nighttime..Whilst we were [XXX], Imran was messaging [XXX], whilst I was there with him. I told him that it was better not to use his phone, and he said he was talking to his friend. I said to him ‘I’m not a child, I know who you are talking to, it would be better if you don’t use your phone.’ He got worried about how I knew. We went back to our room, then we had to [XXX] and during the whole time he was just giving lectures about ‘how I only focus on whom he is talking and don’t pay attention to anything and that I should not ask who he is talking to and what talking about’ and [XXX]. I was quiet the whole time and that’s when he slapped me on my face. I can’t recall if it was my left or right cheek. Later, I [XXX] and I looked at him and said to him ‘[XXX]. You slapped me just because of a simple issue that I forgot to [XXX]. We should stop this relationship – [XXX].’ I lay down on the bed and Imran became apologetic and said, ‘I am sorry, I got upset, don’t say such things [XXX].’ His mood changed within minutes.’

95. Dr Imran agreed that he took Ms A to XXX. He denies slapping her during an argument in XXX.

96. The Tribunal found Ms A's evidence to be a detailed account of what happened in XXX which she again confronted Dr Imran about him using his phone to message XXX, XXX. The Tribunal noted that this allegation had similarities to other allegations found proved whereby Dr Imran became angry and violent towards Ms A when she confronted him about his contact with XXX.

97. The Tribunal noted that in his witness statement Dr Imran states that:

'During this trip I told [XXX] that [Ms A] did not want me to have any further communication with her. [XXX].'

98. The Tribunal was of the view that Dr Imran's account partly supported Ms A's account, in that he says that Ms A did not want him to have contact with XXX. In his oral evidence Dr Imran stated that after the XXX he didn't want to talk to XXX anymore XXX and in response to tribunal questions he stated that *'3 or 4 days before the [XXX] because he thought it was wrong, he had no other explanation'*.

99. Ms A's evidence was that *'from [XXX], Imran was on his phone talking to [XXX]. They had a fight about why he [XXX].'*

100. The Tribunal reminded itself that in paragraph 8 of the Allegation it appeared as though Dr Imran wanted to hide that XXX. And it had found that a violent argument had ensued as a result.

101. XXX

102. The Tribunal found Dr Imran's account that he simply decided to XXX on XXX not credible. He offered no explanation in his evidence of what had caused his change of mind. The Tribunal took the view that it was more likely that XXX.

103. Accordingly, the Tribunal accepted Ms A's account of what happened in XXX in XXX and found allegation 9 proved.

104. In the days following XXX, around XXX there is alleged to be a further incident of violence where Dr Imran held Ms A's upper arms with force for around 1 to 2 minutes and pushed her towards the bed.

105. The Tribunal had consideration of Ms A's witness statement in which she stated:

'... I checked Imran's phone, I was shocked to see that his phone was [XXX]. I tried to leave Imran [XXX]. Imran tried to hold me with all his force from my biceps and said 'what has happened to you? [XXX].' He held me for around 1 or 2 minutes, and pushed me toward the bed and I fell on the bed. I sustained bruises on my arms which I took pictures of'.

106. The Tribunal had regard to the photograph of Ms A's arm, dated XXX, which showed bruising to her arm. The Tribunal was of the view that this corroborated her account.

107. The Tribunal also had regard to Ms A's medical records for XXX which showed that Ms A had a telephone appointment with her GP on XXX and disclosed an episode of XXX occurring after she confronted him about texts on his mobile. The Tribunal gave a lot of weight to this evidence as her medical record was a contemporaneous note reflecting what had occurred and this seemed to be the first step that Ms A took to report what had been happening with Dr Imran.

108. Dr Imran's account is that when Ms A found out about XXX he did not argue with her as he knew he was in the wrong. He explained that Ms A made a set of 'demands' on him XXX and that she then became quick to anger with him. He denied this violent incident occurred, in his witness statement stating *'I did not assault her by holding her arms or pushing her towards the bed. As above, I deny ever hitting her, these things did not happen. She received no bruise from my actions'.*

109. The Tribunal preferred Ms A's account of the events and rejected Dr Imran's account. It took the view that Dr Imran tried to placate Ms A by setting out some terms upon which XXX. The Tribunal was of the view that giving XXX would have been Dr Imran's way to achieve this. The Tribunal accepted Ms A's evidence that XXX.

110. Accordingly, the Tribunal found paragraphs 10(a) and 10(b) of the Allegation proved.

Paragraph 12 of the Allegation

111. The Tribunal considered if Dr Imran slapped Ms A because she was breathing loudly in XXX. In its deliberations it noted that Ms A did not mention this in any of her witness statements but noted that she recorded this in her personal log as:

'We were [XXX] and he again slapped me very hard just because I was breathing loudly and he couldn't endure it. I told him that I was leaving, and he threatened me that if I left [XXX] everything would be over and he wouldn't get back, then he apologized and [XXX]. No, I don't have any evidence to prove this all.'

112. Ms A gave no oral evidence to the Tribunal in respect of this allegation and it did not feature in any of her witness statements. Dr Imran denied that this allegation ever happened. Although Ms A said that Dr Imran had slapped her, the circumstances around this allegation are materially different to the other allegations of violence. The Tribunal did not find sufficient similarity between this allegation and the other allegations of violence as there was no preceding argument where Dr Imran had got stressed or frustrated and lost his temper. The Tribunal was of the view that it should not cross admit evidence from the other allegations.

113. The Tribunal concluded that it did not have enough evidence to support that Dr Imran slapped Ms A because she was breathing loudly in XXX. As such, it was satisfied that the GMC has not discharged its persuasive burden in order to find this allegation proved.

114. Accordingly, the Tribunal found paragraph 12 of the Allegation not proved.

Paragraph 13 of the Allegation

115. The Tribunal considered if Dr Imran slapped Ms A because she could not remember the document names for XXX. In its deliberations it noted that Ms A did not mention this in any of her witness statements but noted that Ms A had detailed this in her personal log as:

*'He was very stressed because of his [XXX] and wasn't doing breakfast properly so I bought white bread and cheese for him. That day I planned to I visited XXX. I did not know what time he would be back [XXX] so I left the house at around **8:30 am** for [XXX]. And during the whole trip he would call me or massage me to ask here you put this where is that, and then will say I am missing you that's why I am calling.'*

“A few days ago he slapped me because I was making his presentation and I didn’t remember the document names from which I was making the [XXX]. Then he said sorry and I bought me [XXX]...”

116. Both Ms A and Dr Imran were in agreement that she was working on his XXX presentation. Dr Imran denies this allegation. The Tribunal considered that Ms A did not mention this in her witness statement, was not asked to provide oral evidence regarding this and was unable to give a date of the alleged event. The Tribunal further noted that this didn’t have the level of detail which Ms A provided on other incidents. The Tribunal noted that her personal log was created after she called the police on XXX and after she had left XXX .

117. As such, the Tribunal was satisfied that the GMC has not discharged its persuasive burden in order to find this allegation proved.

118. Accordingly, the Tribunal found paragraph 13 of the Allegation not proved.

Paragraph 15 of the Allegation

119. The Tribunal considered if Dr Imran between XXX and XXX, behaved in some or all of the way alleged in schedule 2. In doing so it noted that Dr Imran had admitted:

- Confidential Schedule 2 paragraph 6, that on XXX he sent a WhatsApp message to Ms A, saying *‘Stop creating drama. You laid down in front of the hospital. Show some maturity’* or words to that effect, when she attended his workplace to bring him lunch;
- Confidential Schedule 2 paragraph 8, on XXX he sent a WhatsApp message to Ms A, saying *‘Don’t [XXX], from my side, go to hell. If you have that much courage, try staying outside for a day. [XXX]’* as set out in Confidential Schedule 8;
- Confidential Schedule 2 paragraphs 9(a), on XXX he left a voice message for Ms A, as set out in Confidential Schedule 9, in which he said:
‘But when I told you something, why didn’t you act on it? A foolish woman like you shouldn’t [XXX], nor should you even exist in this world. Just open the door now, go and jump off, go die for all I care’

'No, but why don't you understand that I just don't like it? I have nothing to do with her, but I'm just telling you that I had told you not to do it, so why did you? You can't protect yourself from just a girl'

- Confidential Schedule 2 paragraphs 9(b), on XXX he sent WhatsApp messages to Ms A, as set out in Confidential Schedule 10, saying:

'Yes; You fucking shit; [XXX]; That's enough; You shit; You bloody shit; Get out of my house; How did that shit find out we [XXX]?; I am done; With you; Bitch'

- Confidential Schedule 2 paragraph 14, that on XXX, whilst driving XXX, he made the following comments to Ms A as set out in Confidential Schedule 13:

'[XXX] is a son of a bitch'

'Daughter of a bitch, you don't know, you are shameless, if you have any honour in you, just leave this car right now. If you have money get a taxi, get money. You don't have that much honour but only to taunt me'

'You have some insect in your arse that doesn't let you live peacefully'

'I took you to [XXX], did everything. Why don't you understand that because of your previous attitude I am bearing with you. You think what you are doing is very good'

'I will kick your ass and kick you out. You are worthless. I am ending this episode but you. If you are ending it. Hmm if you are raising your hands on me then I will raise my hands as well'

'Daughter of a bitch. I am not an animal that you would hit me. You are an animal, your intellect is like them'

'Sister fucker'

'I had enough now, said dear stop it but no, there is always an itch in her arse'

- Confidential Schedule 2 paragraph 15, that on XXX he said the following to Ms A, as set out in Confidential Schedule 14:

'Listen to me, I'm not going to argue with you again over pointless social media, which is something non-existent. Alright? Even you are worth two pennies to me. Alright? And I don't want to argue with you about this. I have many other issues to deal with which you don't know. Alright? You don't know, okay? I have other issues, especially the ones I want to focus my energy on. Because of that, you're living a relatively easy life, understand? That's why I'm telling you to stop with these [XXX] and social media matters. Let's make sure this doesn't happen again, understood? If you don't get it, let me know right now so I can [XXX]. Then take your [XXX], and everything else and deal with it. You can keep doing whatever you want on there. [XXX] Let me know if you need any further adjustments. It doesn't matter to me, I'll see how much benefit you get.'

'Don't take too many pictures, pictures shouldn't be taken everywhere. When we go places, it's to enjoy the moment, right? Not just for taking pictures. We go places to enjoy the experience, and taking pictures is a secondary thing'

'You're talking nonsense in front of me. Your thinking is just low and dirty, isn't it? No matter how much you try to clean filth, filth remains filth. It never actually gets cleaned'

- Confidential Schedule 2 paragraph 17(b) that on XXX and XXX he sent WhatsApp messages to Ms A, as set out in Confidential Schedule 17, stating:

'Please don't message me now; Goodbye; I tried to make you understand but you didn't, now goodbye; I want you [XXX]; I have had enough; You think that you'll keep blackmailing the whole life?; So, this is your delusion; You bitch; You think, you will do whatever you want and blackmail me, you are mistaken; From today, [XXX]; I have nothing to do with you'

- Confidential Schedule 2 paragraph 19, that on XXX or XXX he left a voice message for Ms A, which contained the comments, as set out in Confidential Schedule 18, *'Stop talking nonsense, first, you did something wrong and now you're talking rubbish. You have this attitude now, [XXX], I don't know what you are going to do then, you're only humiliating me now [XXX], and I am only tolerating'*.

- Confidential Schedule 2 paragraph 20(a), that on XXX, at or around 10:30 he shouted at Ms A, making the following comments, as set out in Confidential Schedule 19: *'What I'm saying is the truth because if you're in this condition now, tomorrow [XXX], you'll become completely irresponsible. Then you'll say 'Oh I [XXX], I can't do anything, that's it'*

'You always have to cause trouble, don't you? There is nothing to do, it's just causing trouble. Nothing is going to be productive; just here to cause trouble and do nothing else. Are you happy now? Happy like this? Like this, are you happy like this?'

'If you ever say anything about [XXX] again, I'll break your face. That's it, the conversation is over. It's my choice to say whatever I want to [XXX]. You can tell [XXX] whatever you want; I don't care about that. but if you say anything about [XXX] again, it won't be good'

'Stop talking nonsense, just stop. And don't mention [XXX] name again'

'I told you not to say anything, didn't I? I told you myself, it's my choice. I told you not to, and then I told you myself. So what? It's my decision'

'Stop talking nonsense, man. Don't waste my time with useless talk. Most of the things you say – 70% of them – are pointless'

'Your words don't even have any meaning or importance'

'What are you? What kind of person are you?'

'Listen, stop talking nonsense. Yes, I can say whatever I want to [XXX]. You can say whatever you want to [XXX], and you keep saying it. That's a different matter. I don't want to hear your nonsense; don't mess with my mind. See your behaviour makes me think, what will happen next?'

'You must be thinking that [XXX], you'll just sit back and say '[XXX]. Now it's my time to enjoy. Whether it's [XXX], this, or that, it doesn't matter'. Your whole focus is just to [XXX] somehow so you can blackmail me later. Isn't that what you're thinking? Isn't that what you're planning?'

'Stop talking nonsense. Don't say you haven't blackmailed me, just stop with the nonsense'

120. The Tribunal further reminded itself that in its deliberations so far the Tribunal has already determined the following incidents alleged in Confidential Schedule 2 to be found proved:

- Confidential Schedule 2 paragraph 2, that on XXX made the following comments to Ms A as set out in Confidential Schedule 3:

'Who the hell are you? [XXX], or words to that effect;

- Confidential Schedule 2 paragraph 3, that in or around XXX he made the following comments to Ms A as set out in Confidential Schedule 4:

'[XXX] or words to that effect;

- Confidential Schedule 2 paragraph 4, that on or around XXX he shouted at Ms A and made the following comments as set out in Confidential Schedule 5:

'That [Ms A] was a useless creature in your life and [XXX]', or words to that effect ;

- Confidential Schedule 2 paragraph 11, that on XXX he made the following comments to Ms A as set out in Confidential Schedule 11:
'that if [Ms A] wanted to stay with you, she had to delete and deactivate all of her social media accounts, or words to that effect that [XXX] making this comment for the second time'.

Other allegations contained in Confidential Schedule 2

121. The Tribunal noted that it still needed to consider and determine the following paragraphs of confidential Schedule 2 paragraphs 1, 5, 10, 12, 13, 16, 17(a), 18, 20(a) and 20(b).

122. The Tribunal considered Confidential Schedule 2 paragraph 1 whether Dr Imran did not allow Ms A to XXX. XXX. The Tribunal noted that there were multiple arguments about XXX. The Tribunal noted that Ms A stated that she was working XXX. In her witness statement she stated:

'[XXX]

123. When Ms A did get a job XXX there was no evidence given as to why Dr Imran had at this point XXX. On balance the Tribunal was of the view that other than Ms A's contention, there was no evidence that Dr Imran prevented Ms A from getting a job during this time period. Accordingly the Tribunal did not find this paragraph proved.

124. The Tribunal considered Confidential Schedule 2 paragraph 5 that in or around XXX Dr Imran shouted at Ms A and asked her why she did not call him and ask if he was okay, or words to that effect and said that she was so lazy, or words to that effect. In her witness statement Ms A stated:

'I had taken care of Imran [XXX]. One night I fell asleep whilst waiting for him to come home for work. When Imran came home at around 11:45pm he started shouting at me because I had been sleeping and asked me why I am so lazy. He said something along the lines of 'I always come home at 11:00 and how come you are sleeping

peaceful don't you worry about me what if something happened to me or what if I am ok or not. But no, you are sleeping peacefully''.

125. The Tribunal took the view that this fit the narrative that Dr Imran was quite demanding and had certain expectations of what Ms A should do XXX. In her evidence, Ms A said that she was there to XXX. The Tribunal was of the view that Ms A's account was detailed, gave a specific time frame reference and had context, that XXX. All these factors would make the incident more memorable to her. The Tribunal had already found Ms A to be a credible witness and looking at all the evidence it had regarding how Dr Imran behaved and spoke to Ms A, the Tribunal was satisfied that Dr Imran acted in this way in or around XXX.

126. The Tribunal considered Confidential Schedule 2 paragraph 10 if between approximately XXX to XXX, Dr Imran gave Ms A XXX to spend and when Ms A told him that XXX was not a lot, he said it was more than enough, or words to that effect. In her witness statement, Ms A said:

'I began to think that Imran was not someone I could rely on. He gave me [XXX]. He would pay [XXX]. I told him it was not a lot and he said it was more than enough.

127. The Tribunal noted that during this time Ms A was XXX. In his witness statement Dr Imran said:

'I deny that between [XXX]. I was generous with [Ms A]...In addition to the information I have provided above, I also recall buying her gifts (for example, [XXX]). Frankly, I am confused by her allegations of financial abuse, particularly where she was also trying to ensure XXX.'

128. Both Dr Imran and Ms A gave evidence that they were XXX. The Tribunal was of the view that the evidence suggested that the XXX was for her to spend as she chose and that Dr Imran gave Ms A other money XXX. The Tribunal concluded that it had not received sufficient evidence to support that Dr Imran gave Ms A XXX and when she told him that this was not a lot he said it was more than enough. Accordingly it did not find this paragraph proved.

129. The Tribunal considered Confidential Schedule 2 paragraph 12 if on or around XXX Dr Imran made comments to Ms A as set out in Confidential Schedule 12, *'That if she wanted to [XXX], she had to stay away from [XXX], and if [Ms A] didn't trust you, you would [XXX]'*, or words to that effect. It also considered Confidential Schedule 2 paragraph 13 if Dr Imran, in or around late [XXX], told Ms A that she was mentally retarded, or words to that effect.

130. In her witness statement, Ms A said:

'Imran had an [XXX] for which I went with him but he instructed me to cook something from home in order to save the food expense. When he came back from [XXX] the only activity we did was wander around the streets and during this time he started lecturing me about how immature I am and think of [XXX] to which I responded what if I only keep his [XXX] unblocked and upload [XXX] statuses that are only visible to her. He replied "what's your problem actually, why always you have to drag [XXX] into this I have already told you that I have nothing to do with [XXX], if you want to [XXX] you have to stay away from [XXX] and if you don't trust me then tell me I will [XXX].'

131. The Tribunal noted similarity between the cause of the argument here and the cause of arguments set out in other allegations. Dr Imran had previously said he would XXX Ms A and admitted making this comment on XXX. The Tribunal had already found that Dr Imran would frequently get frustrated and angry at Ms A if she brought up his contact with XXX. The Tribunal had also previously found that Dr Imran would argue and get angry with Ms A about her use of social media. Dr Imran denied that he made these comments but on the balance of probabilities, the Tribunal was satisfied that he did.

132. The Tribunal considered Confidential Schedule 2 paragraphs 16(a) and (b) that on 15 December 2023 he destroyed a cake Ms A had brought home from work, by smashing it. The Tribunal had regard to Ms A's witness statement in which she said:

'Imran was trying to apply for [XXX] but he couldn't do it. I had been working that day and had brought a cake home [XXX]. When he told me he couldn't [XXX] I said, 'it's ok, we will visit some other place'. I suggested that we eat some of the cake because I was extremely hungry. He got so angry that he smashed the cake up. He absolutely destroyed it and the whole sitting area was a mess. He said, "you are worried about cake and I am applying from morning and its almost 10:00pm. I seriously feel like we are not the right match, [XXX]." I quietly listened and after he smashed the cake he went to the room and lay on the bed, and I got busy in cleaning the living area. Once it was clean after almost 15 minutes, I went to the room and apologised as I felt that my apology would end his anger or else he would beat me again like he always did. I also suggested him to get some professional help for his anger management, but he said, 'you should not say anything that make me anger. Why don't you behave and act maturely?'

133. In his witness statement, Dr Imran said:

‘When I returned home, I explained the situation to [Ms A]. She did not take it well. She was angry and was shouting about my ability to [XXX]. She said she should have taken a “stricter stance” with me earlier. [Ms A] had a cake which she smashed in frustration about my inability to go to [XXX]. [Ms A] must have then photographed the cake – although I only became aware she had a picture when she shared it with her witness statement during this process. Looking back, it seems clear that [Ms A] had been trying to collate evidence to support her case that I was abusive to her. She states that I got angry and smashed the cake – I had no reason to get angry. [XXX].’

134. The Tribunal took the view that Ms A’s account fits the pattern of behaviour identified that Dr Imran gets angry and lashes out at Ms A when he gets stressed or frustrated by a situation. It noted similarities between this allegation and paragraph 4 of the Allegation where the Tribunal had found that Dr Imran had slapped Ms A because he could not find his XXX letter. The Tribunal concluded that in this instance Dr Imran took his frustration out on the cake and verbally insulted her. It therefore found paragraphs 16(a) and 16(b) of the Allegation proved.

135. The Tribunal considered Confidential Schedule 2 paragraph 17(a) and Confidential Schedule 16, that on XXX and XXX Dr Imran made the following comments to Ms A:

*‘That you should keep your relationship hidden
That if she wanted to stay with you, she was not allowed to upload any pictures on [XXX] or social media, or else he would have to [XXX], or words to that effect
Told her to leave the house, or words to that effect
Told her that you did not want her in the house when you returned from work, or words to that effect
Told her to come back and that she was [XXX], or words to that effect
That you were angry because she was not listening to you, or words to that effect’*

136. The Tribunal bore in mind that Dr Imran and Ms A were in agreement that they had an argument on 19 December 2023. In her witness statement Ms A said that the argument was because she had uploaded a picture with both of their names to XXX. She stated that Dr Imran became angry as he said they should keep their relationship hidden and was verbally abusive towards her by making the comments set out above. Ms A claimed to have left the house the following morning in order to attend XXX.

137. In Dr Imran's witness statement he agreed that he had an argument with Ms A about XXX but he denied saying they should keep their relationship hidden. In his oral evidence, Dr Imran said he had an issue with Ms A uploading a picture of their names to social media when they were XXX.

138. The Tribunal had evidence to confirm that Ms A left the house in the letter from XXX, dated XXX, and in the case management notes from XXX which corroborate when she went there.

139. The Tribunal had regard to the witness statement of Ms B in which she said '*[Ms A] went back to [XXX]. I know this as she called me crying and she informed me he had hit her. Even though I had left [XXX] at the time, I messaged [Ms D] about getting a call from [Ms A] and referring her to [XXX] later in the day. I have the WhatsApp conversation... [Ms A] was under the impression that if [Dr Imran] did something, nothing was going to happen to him because of his status as a Doctor*'. The Tribunal had regard to WhatsApp messages, dated XXX, between Ms B and Ms D, the Development Director at XXX, in which Ms A was referred to.

140. The Tribunal took the view that the comments alleged by Ms A tie in with Dr Imran's WhatsApp's which he has admitted sending her on the following day after the argument. Further the comments fit with Dr Imran's evidence that he was a private person and that he had taken issue with Ms A posting things about him on social media previously. On balance the Tribunal was of the view that Dr Imran did make the comments as set out by Ms A on XXX and that this resulted in Ms A attending the XXX and Dr Imran sending the WhatsApp's the following day. Accordingly, the Tribunal found this paragraph proved.

141. The Tribunal considered Confidential Schedule 2 paragraph 18, if Dr Imran, on XXX, sent a WhatsApp message to Ms A and told her not to come back, or words to that effect, as she had not made him breakfast. Ms A's account was that she had gone to stay with XXX. The Tribunal had regard to a screenshot of these messages, where it can be seen that Dr Imran states '*no breakfast?*' and then proceeds to say the words '*stay there for as much as you want*', '*don't come back*'. Dr Imran's evidence was that his words were said in jest and that he was teasing her. The Tribunal found this to be completely implausible given all the other evidence it had before it, including the admissions from Dr Imran on other insults he had used towards Ms A. The Tribunal accepted Ms A's account and found this paragraph proved.

142. The Tribunal considered Confidential Schedule 2 paragraph 20(b), if Dr Imran, on XXX, shouted at Ms A and asked her to tell you who she was, or words to that effect.

143. The Tribunal reminded itself that it had found this incident which formed paragraph 14 of the Allegation proved in its entirety and that Dr Imran had admitted to saying the words set out at Confidential Schedule 19. It had regard to the translations of the videos recorded by Ms A, on XXX, which showed that Dr Imran had said:

‘What are you? What kind of person are you?’

[Ms A’s response] *One minute, I haven’t said anything about [XXX], and I’m not saying anything now.*

Listen, stop talking nonsense. Yes, I can say whatever I want to [XXX].

You say whatever you want to [XXX], and you keep saying it. That’s a different matter. I don’t want to hear your nonsense; don’t mess with my mind.’

144. In her witness statement, Ms A set out the chronology of the events of XXX. She said that during the course of the argument she moved to the bedroom and that whilst she was sitting on the bed, Dr Imran shouted tell me who you are. Dr Imran did not give any evidence on this subject.

145. The Tribunal noted that Dr Imran admitted to something similar to this in Confidential Schedule 19 paragraph 8 and Confidential Schedule 3. As such, it took the view that it was more likely than not that Dr Imran did say these things to Ms A.

146. The Tribunal considered Confidential Schedule 2 paragraph 20(c) if, on XXX, at or around 14:30, Dr Imran stated *‘we can’t live like this, you did something bad, you should apologise for making me angry’* or words to that effect.

147. It noted Ms A’s evidence in which she said Dr Imran told her that they cannot live like this as she did something bad and should apologise for making him angry. Dr Imran gave no evidence on this point. The Tribunal bore in mind that Dr Imran made admissions to Confidential Schedules 4 and 15 which were of a similar nature and as such it was satisfied that it was more likely than not he made this statement to Ms A.

148. Accordingly, the Tribunal found paragraph 15 of the Allegation proved in relation to Confidential Schedule 2 paragraphs 2, 3, 4, 5, 6, 7, 8, 9, 11, 12, 13, 14, 15, 16, 17, 18, 19 and 20.

Paragraphs 16(a) and 16(b) of the Allegation

149. The Tribunal considered if Dr Imran’s conduct toward Ms A, as found proved in confidential schedule 2 and in paragraphs 2 to 14 of the Allegation, amounted to XXX.

150. The Tribunal took the view that the evidence presented supports a pattern of behaviour over this period of time from Dr Imran towards Ms A which created an atmosphere in which he subjected her to various physical assaults as well as verbally abusing her. He frequently threatened XXX and told her XXX was a mistake, gaslighted her by XXX and telling her she was making him angry by bringing up his contact with XXX when he knew he was XXX. The Tribunal found Dr Imran to be controlling of Ms A by creating arguments about her social media use which culminated in him requiring her to deactivate her accounts for a period. The Tribunal had evidence of times when Dr Imran would justify his behaviour to Ms A as being normal (XXX) and times when he would give her gifts to appease her XXX. Dr Imran clearly had a temper and would become angry if Ms A was not there to serve his needs such as making him breakfast or being awake at 11.30pm when he arrived back from a work shift. The Tribunal was in no doubt that Dr Imran was XXX towards Ms A.

151. Ms A stated that her mental health was affected by how Dr Imran treated her and this was evidenced in her GP record XXX.

152. The Tribunal was satisfied that Dr Imran subjecting Ms A to physical assaults, verbal abuse and threatening to XXX would have adversely affected her mental health and that he ought to have been aware that treating Ms A in this way would have a serious effect on her.

153. Accordingly, the Tribunal found paragraphs 16(a) of the Allegation proved and 16(b) of the Allegation proved in relation to paragraphs 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 14 and 15 of the Allegation.

The Tribunal’s Overall Determination on the Facts

154. The Tribunal has determined the facts as follows:

That being registered under the Medical Act 1983 (as amended):

1. At the material times, the nature of your relationship with [Ms A] was as set out in Schedule 1. **Determined and found proved**

2. On XXX you beat [Ms A]’s neck and shoulders, using your fists. **Determined and found proved**
3. In or around late XXX whilst driving to your home you hit [Ms A] on one or more occasion. **Determined and found proved**
4. On or around XXX you slapped [Ms A]’s face on one or more occasion. **Determined and found proved**
5. In or around XXX you:
 - a. punched [Ms A]’s back; **Determined and found proved**
 - b. slapped [Ms A]; **Determined and found proved**
 - c. pushed [Ms A]. **Determined and found proved**
6. On XXX you:
 - a. punched [Ms A]’s back; **Determined and found proved**
 - b. attempted to slap [Ms A]. **Determined and found proved**
7. On XXX you beat [Ms A]. **Determined and found proved**
8. On XXX you slapped [Ms A] twice. **Determined and found proved**
9. In or around early XXX, whilst in XXX, you slapped [Ms A]. **Determined and found proved**
10. On or around XXX you: **Amended under Rule 17(6)**
 - a. held [Ms A]’s upper arms with force for around 1-2 minutes; **Determined and found proved**
 - b. pushed [Ms A] towards the bed. **Determined and found proved**
11. On XXX, whilst driving XXX, you:
 - a. shouted at [Ms A]; **Admitted and found proved**
 - b. slapped [Ms A]; **Determined and found proved**
 - c. attempted to slap [Ms A]; **Determined and found proved**

- d. removed your hand from the steering wheel in order to attempt to slap [Ms A]; **Determined and found proved**
 - e. scratched [Ms A]'s face. **Determined and found proved**
12. In or around XXX you slapped [Ms A] because she was breathing loudly. **Not proved**
13. In or around XXX you slapped [Ms A] because she could not remember the document names for an audit. **Not proved**
14. On XXX:
- a. at or around 10:30 you slapped [Ms A]'s cheek on one or more occasion; **Determined and found proved**
 - b. following your actions set out at paragraph 14a you:
 - i. grabbed [Ms A]'s hair at the top of her head and pulled it; **Determined and found proved**
 - ii. pushed [Ms A] backwards towards the bed; **Determined and found proved**
 - c. at or around 14:30 you:
 - i. slapped [Ms A] on one or more occasion; **Determined and found proved**
 - ii. grabbed [Ms A]'s hair; **Determined and found proved**
 - iii. hit [Ms A]. **Determined and found proved**
15. Between XXX and XXX, you behaved in some or all of the manner set out in Schedule 2. **Determined and found proved**
16. Your conduct as set out at:
- a. Schedule 2; and/or **Determined and found proved**
 - b. paragraphs 2-14, **Determined and found proved**

amounted to XXX in that you repeatedly or continuously engaged in behaviour towards [Ms A], with whom at all material times you were personally connected, that was XXX, had a serious effect on [Ms A], and which you knew or ought to have known would have a serious effect on [Ms A].

And that by reason of the matters set out above your fitness to practise is impaired because of your misconduct. **To be determined**

Determination on Impairment - 25/03/2026

1. The Tribunal exercised its powers under Rule 41 of the General Medical Council (GMC) (Fitness to Practise) Rules 2004, as amended (the Rules), to sit in private when the matters under consideration and heard as evidence were confidential. This determination will be handed down in private but as this case concerns Dr Imran's alleged misconduct a redacted version will be published at the close of the hearing.
2. The Tribunal now has to decide in accordance with Rule 17(2)(l) of the Rules whether, on the basis of the facts which it has found proved as set out before, Dr Imran's fitness to practise is impaired by reason of misconduct.

The evidence

3. The Tribunal has reviewed its findings of fact and in addition, the Tribunal received further evidence as follows:
4. Dr Imran provided a reflective statement, dated 3 April 2025 and also gave oral evidence at the hearing. He stated that the language he used towards Ms A was wrong and that he cannot give any further justification as to why he spoke to her in this way. He stated that he has undertaken courses which have helped him to understand XXX and emotional abuse. Dr Imran was asked what he has learned about himself following the allegations made against him and the Tribunal's findings. He said he used to respond with anger and that he has considered what was wrong with him at the time. He stated that he overreacted, due to constant conflict with Ms A, and that now he would now respond in a different way. Dr Imran said that Ms A triggered him as they would have the same argument over and over again and he felt as though she didn't understand him, which frustrated him.

5. Dr Imran said that the way he treated Ms A was *'unacceptable and that he should have acted in a more mature way'*. He said he should have resolved the conflicts with Ms A in a different way and that now he is working on himself by XXX, which is ongoing. He said that *'he should have understood her better and established healthy boundaries'*. He said he has developed coping strategies to face stressful situations in the future such as taking his time and not reacting immediately. Dr Imran said that he was *'maybe a reactive person at times'*. Dr Imran said that as he is a doctor he needs to understand the effects of XXX in order to help patients who may have experienced it. He said that he has reflected on the impact his actions have had and stated that *'I learned that what I did impacted someone really badly and that it should never have happened'*.

6. The Tribunal also received certificates of courses completed by Dr Imran which focused on XXX, along with Dr Imran's reflections on XXX, character references and 360 feedback from colleagues and patients.

Submissions

Submissions on behalf of the GMC

7. Ms Tighe submitted that the majority of Dr Imran's behaviour towards Ms A took place when Good Medical Practice (2013)(GMP 2013) was in place and that his behaviour engaged with paragraphs 1 and 65 of GMP 2013 which state:

'1 Patients need good doctors. Good doctors make the care of their patients their first concern: they are competent, keep their knowledge and skills up to date, establish and maintain good relationships with patients and colleagues, are honest and trustworthy, and act with integrity and within the law.'

65 You must make sure that your conduct justifies your patients' trust in you and the public's trust in the profession.'

8. Ms Tighe stated that other allegations took place under the current GMP (2024) and paragraphs 1 and 81 were engaged which are the same as the paragraphs above. She also drew the Tribunal's attention to the Introductory section to domain 4 of GMP 2024 which states:

'Patients must be able to trust medical professionals with their lives and health, and medical professionals must be able to trust each other.'

Good medical professionals uphold high personal and professional standards of conduct. They are honest and trustworthy, act with integrity, maintain professional boundaries and do not let their personal interests affect their professional judgements or actions.'

9. As such, Ms Tighe submitted that Dr Imran's actions amount to conduct which is serious misconduct.

10. Ms Tighe stated that the allegation features a number of different incidents of misconduct in that Dr Imran subjected Ms A to physical abuse and verbal abuse over a protracted period of time. She informed the Tribunal that the *'Guidance for MPTS Tribunals, Section three: MPT hearings, Part B'* at paragraph 31 states that:

'Allegations that are likely to fall at the higher end of the spectrum of seriousness include, but are not limited to:

... violence, other than where it occurred outside of the doctor's professional role and was limited in nature, and did not cause any significant physical injuries or any significant physical emotional or psychological harm'

11. Ms Tighe reminded the Tribunal that Ms A's mental health was impacted by Dr Imran's actions resulting in XXX. She referred the Tribunal to the *'Guidance for MPTS Tribunals, Section three: MPT hearings, Part B'*, paragraph 36 which states:

'Features of the allegation that may increase seriousness include, but are not limited to:

The behaviour or poor performance was persistent or repeated

Behaviour or poor performance will be persistent or repeated where the same, or similar, act(s) or omission(s) occur(s) multiple times and/or where an act or omission continues over a prolonged period. Persistent or repeated behaviour can be seen inside or outside a doctor's working life...'

12. Ms Tighe submitted it is evident that Dr Imran's behaviour was repeated and that it falls at the higher end of the spectrum of seriousness which indicates that the starting point for assessing current and ongoing risk to public protection should be high.

13. Ms Tighe reminded the Tribunal that Dr Imran provided evidence about the difficulties and stressors XXX. She stated that XXX, so the circumstances have now changed from the time of the events in the Allegation. However, she stated that Dr Imran has not provided any information about the steps he has taken to minimise the impact of this stress on their relationship. As such, Ms Tighe submitted that there remains a risk of repetition should Dr Imran find himself in a similar situation. She submitted that Dr Imran’s personal context in this case does not lower the level of risk to public protection.

14. In relation to insight, remediation and Dr Imran’s efforts to keep his knowledge and skills up to date, Ms Tighe referred the Tribunal to Dr Imran’s reflective statement dated 3 April 2025, testimonials, certificates for courses relating to XXX. She stated that all these were provided at the Rule 7 stage (prior to the matter being referred to a hearing).

15. Ms Tighe submitted that Dr Imran poses a current and ongoing risk to public protection and that the level of the current and ongoing risk is high. She went on to submit that the risk in this case has engaged all three parts of public protection. As such, she submitted a finding of impairment was necessary.

Submissions on behalf of Dr Imran

16. Mr Hedworth submitted that the level of psychological harm Dr Imran inflicted upon Ms A was not at the most serious level. He submitted that although XXX she demonstrated significant strength. He submitted that there are circumstances in which much greater suffering occurs and further submitted that the starting point is on the cusp of mid to high but taking into account the persistent nature this would become high.

17. Mr Hedworth stated that Dr Imran’s actions were all the result of XXX which was XXX and that Dr Imran is acutely conscious of placing himself in a similar situation in another close personal relationship. Mr Hedworth said that Dr Imran is not pursuing such a relationship until he is content he has adequate coping strategies to deal with the inevitable conflicts that arise in a close personal relationship. As such, he submitted that there is no risk of repetition as Dr Imran has shown insight by making sure that he is not in a similar situation again.

18. Mr Hedworth submitted that Dr Imran has demonstrated considerable insight and that, apart from the context of his relationship with Ms A, is a person of good character. He submitted that the testimonials give a clear picture of Dr Imran and that these should be

considered by the Tribunal and that it would be wrong to discount them as a result of them being in a clinical setting.

19. Mr Hedworth submitted that in his evidence to the Tribunal, Dr Imran demonstrated the difficulty for someone, a proud person, having to acknowledge that the fault lies with you and there might not be an easy way of doing that. Mr Hedworth reinforced that Dr Imran does have considerable insight he was assessing his trigger points and looking at the sort of situations where he needed to take a step back. He submitted that Dr Imran acknowledges that in the future he can't behave in that way even if he may not find it easy to verbalise.

20. Mr Hedworth said that Dr Imran had demonstrated that he has remediated, has acknowledged that he has done wrong, has acknowledged the harm he has caused and is addressing how he can avoid similar behaviour in the future. Mr Hedworth stated that Dr Imran has undertaken training modules, CPD, has put in place a personal development plan and has come to terms with his own behaviour.

21. Mr Hedworth informed the Tribunal that Dr Imran is now horrified by his previous behaviour towards Ms A and that there is no current or ongoing risk to public protection.

The relevant legal principles

22. There is no burden or standard of proof at this stage of the proceedings and the decision of impairment is a matter for the Tribunal's judgement alone.

23. The Tribunal will only make a finding of impairment where there is a legal basis for doing so, the Tribunal must therefore first consider whether the facts found proved amount to misconduct that is serious. The LQC advised the Tribunal that misconduct has been defined in the case of *Roylance v GMC (No.2)* [2000] 1 AC 311 as '*a word of general effect, involving some act or omission which falls short of what would be proper in the circumstances*'.

24. The relevant standards to be applied to the current case are set out in both GMP 2013 and GMP 2024.

25. If found, the Tribunal must then consider whether that serious misconduct poses a current and ongoing risk to one or more of the three parts of public protection which is likely to require restrictive action in response. The three parts of public protection are:

- to protect, promote and maintain the health, safety and well-being of the public;
- to promote and maintain public confidence in the profession;
- to promote and maintain proper professional standards and conduct for members of the profession.

26. To assess whether Dr Imran poses any current and ongoing risk to public protection which may require restrictive action in response, the Tribunal will consider where on the spectrum of seriousness the proved allegations lie, the impact of any relevant context known about Dr Imran and his working environment and how Dr Imran has responded to the allegations.

27. The Tribunal must determine whether Dr Imran's fitness to practise is impaired today, taking into account his conduct at the time of the events and any relevant factors since, such as his level of insight, whether the matters are remediable, have been remedied and any likelihood of repetition.

The Tribunal's determination on impairment

Misconduct

Is there a legal basis for considering impairment?

28. The Tribunal considered whether Dr Imran's actions amounted to serious misconduct to establish a legal basis to consider impairment. In doing so, it noted the nature of Dr Imran's behaviour towards Ms A which included physical, emotional and verbal abuse amounting to XXX.

29. The Tribunal was satisfied that the abuse Dr Imran subjected Ms A to breached the paragraphs of GMP 2013 and GMP 2024 referred to by the GMC which amounted to a serious departure from the principles set out.

30. As such, the Tribunal determined that there was a legal basis to consider impairment by reason of Dr Imran's misconduct.

Impairment

31. The Tribunal had regard to paragraph 6 of the MPTS Guidance which states:

‘Where there is a legal basis for considering a doctor’s fitness to practise, to assess whether that doctor poses any current and ongoing risk to public protection, an MPT will consider:

- *the seriousness of the facts found proved,*
- *any relevant context known about the doctor and/or their working environment, and*
- *how the doctor has responded to the allegation(s).’*

32. The Tribunal considered each of these three steps in turn (Steps 2(b) to 2(d) in the MPTS Guidance)

Where on the spectrum of seriousness does the allegation lie?

33. In assessing where on the spectrum of seriousness the allegation lies, the Tribunal had regard to the *‘Guidance for MPTS tribunals - Guidance introduction’* which at paragraph 101 and 109 which states:

‘101 *Violent or abusive behaviour describes behaviour that may be aggressive, coercive, controlling, destructive, harassing, intimidating, isolating, or threatening. It can be demonstrated through physical acts or omissions, or verbally.*

109 *Whilst a range of behaviour can be seen, the nature of the departure from the standards expected may mean that a concern or allegation of violence or abusive behaviour falls at the high end of the spectrum of seriousness. Even a single incident of violent or abusive behaviour can have a significant harmful impact and pose a risk to public protection.’*

34. In its deliberations, the Tribunal bore in mind that Ms A had XXX whilst Dr Imran was working as a surgeon. Ms A had stated she had XXX, the Tribunal took the view that Ms A would not have had many friends or family XXX at this time XXX. The Tribunal accepted that she was XXX on Dr Imran and it had found that she was being emotionally and physically abused by him. The Tribunal concluded that this context increased the seriousness of Dr Imran’s behaviour towards her.

35. The Tribunal noted its findings that the nature of Dr Imran’s actions towards Ms A had persisted over a significant period of time, from XXX until XXX. The Tribunal was not in a position to assess the extent of Ms A’s psychological state but noted that her GP records had

shown XXX. Ms A had given evidence that she was seeing a counsellor and that she had flashbacks of the abuse. The Tribunal also had regard to the evidence of physical abuse, specifically scratches to Ms A's nose and bruises on her arm. The Tribunal concluded that the repeated nature of the behaviour also increased the seriousness.

36. As such, the Tribunal concluded that Dr Imran's actions towards Ms A fell at the higher end on the spectrum of seriousness.

What is the impact of any relevant context known about Dr Imran?

37. The Tribunal had regard to paragraph 71 of the 'Guidance for MPTS Tribunals - Section three: MPT hearings - Part B: stage two – impairment' which states:

'If the personal context that directly influenced the doctor's behaviour, performance or health at the time of the allegation has since resolved, or steps have been put in place to avoid the circumstances arising again and/or to help the doctor cope with those circumstances if they did arise again, this may decrease the level of current and ongoing risk posed by the doctor to one or more of the three parts of public protection because it reduces the likelihood of repetition.'

38. The Tribunal bore in mind that the misconduct in this case was related to XXX and noted Mr Hedworth's submission that Dr Imran's conduct was a feature of one difficult relationship. However, whilst the Tribunal acknowledged this, it concluded that such context did not impact upon the assessment of the seriousness of Dr Imran's actions.

How has Dr Imran responded to the allegations?

39. The Tribunal considered Dr Imran's reflective statement and noted that this had not been updated since 3 April 2025. The Tribunal also had regard to Dr Imran's oral evidence at this stage 2 of the proceedings as well as the documentary evidence submitted. In considering all of the evidence received, the Tribunal accepted Ms Tighe's submission that Dr Imran's insight was superficial. The Tribunal was of the view that Dr Imran had not adequately addressed what had led to his actions, how his actions impacted Ms A or how his actions impacted upon public confidence in the medical profession and the medical profession as a whole. Dr Imran has XXX, and the Tribunal had regard to a statement regarding his XXX, but from his oral evidence he seems to blame Ms A for his actions, in that, XXX, she would argue with him and that as a result he was being overly reactive.

40. The Tribunal was of the view that Dr Imran, in his account of events had attempted to justify his actions as opposed to taking responsibility and understanding the impact his behaviour had had on Ms A and the wider profession.

41. As such, the Tribunal was satisfied that Dr Imran's insight was not genuine or fully developed as his evidence of insight was not specific to his actions and was more generic lacking self-reflection, introspection and responsibility.

42. With regard to remediation, the Tribunal was of the view that Dr Imran has still not fully apologised to Ms A. In his reflective statement, Dr Imran stated:

'I sincerely apologise to [Ms A] for my role in the arguments and for any words or actions that caused her to feel angry or upset.'

Given that the Tribunal had found Dr Imran had been emotionally and physically abusive towards Ms A on multiple occasions this apology did not address or accept responsibility for the extent of his actions.

43. Mr Hedworth submitted that Dr Imran will not get into another close personal relationship until he has addressed the issues raised in this case. This indicated to the Tribunal that Dr Imran is not yet confident that he will not act in the same way again. There was limited acknowledgement of fault by Dr Imran preventing him from fully remediating at this stage. Although the Tribunal noted that the courses Dr Imran attended were relevant and possibly measurable to demonstrate remediation, he was unable to articulate what he had learned from them and how he would put this learning into practise in his own circumstances going forward.

44. The Tribunal considered the testimonials received in support of Dr Imran but took the view that testimonials relating to character or good standing have little relevance at this stage of the proceedings. Even though the authors of the testimonials were made aware of the Allegation against Dr Imran the testimonials were all dated before this hearing was listed to take place so they may not have known the full extent of the Allegation. Accordingly, the Tribunal attached little weight to the testimonials received in support of Dr Imran.

45. The Tribunal had regard to *'Guidance for MPTS Tribunals - Section three: MPT hearings - Part B: stage two – impairment'* paragraph 109 which states:

'109 Cases involving the following features can be more difficult to remediate:

- *there is a high risk of harm to patients due to the doctor's deliberate, reckless, persistent, or repeated behaviour*
- *the nature of, or circumstances giving rise to, the allegation suggests there is an underlying issue with the doctor's attitude, and/or*
- *the allegation falls at the higher end of the spectrum of seriousness and is capable of damaging public confidence in the professions.'*

46. The Tribunal concluded that Dr Imran has a character trait, of being quick to anger which causes him to lash out verbally and physically, it noted that a character trait is an attitudinal issue and as such it is difficult to remediate. The Tribunal was of the view that Dr Imran has not addressed and therefore not resolved this character trait and the Tribunal therefore concluded that there is a likelihood of repetition of Dr Imran's misconduct. The Tribunal considered that if there was a repetition of Dr Imran's behaviour then this would have a significant impact on public confidence in the medical profession and on proper standards of conduct for members of the profession. The risk of repetition increased the level of current and ongoing risk to public protection posed by the doctor.

47. The Tribunal has not been made aware of any additional courses or continuing professional development completed by Dr Imran to ensure that he has kept his clinical knowledge and skills up to date. Dr Imran relinquished his licence to practise in 2025. The Tribunal had no evidence that his knowledge and skills had deteriorated, nor did it have evidence that he had kept these up to date. The Tribunal noted that this was not of much relevance in this case of XXX outside of the doctors professional practice and determined that this factor did not impact on the current and ongoing risk to public protection.

Tribunal's decision as to whether Dr Imran poses any current and ongoing risk to public protection which may require restrictive action in response and its finding on impairment

48. In its deliberations, the Tribunal had regard to paragraph 112 of the *'Guidance for MPTS tribunals - Guidance introduction'* which states:

'Many allegations relating to violent or abusive behaviour fall at the higher end of the spectrum of seriousness. Where they do, the starting point for assessing current and ongoing risk to public protection will be high.'

49. The Tribunal reviewed its decisions above, that the starting point for assessing the current and ongoing risk was high and that Dr Imran has breached the standards of GMP by physically and emotionally abusing XXX for a period of around XXX. The Tribunal had found that there were no factors which decreased the seriousness of the current and ongoing risk to public protection.

50. The Tribunal had regard to the *'Guidance for MPTS tribunals - Guidance introduction' Case type 3: Violent or abusive behaviour* on how the three parts of public protection might be engaged in a case of violent and abusive behaviour. It noted that *'Violent or abusive behaviour outside a clinical setting may still present an indirect risk to patients or the wider public if this behaviour could be repeated within a clinical setting or elsewhere'*. The Tribunal was of the view that it had no evidence that this limb was engaged. The Tribunal had regard to the specific circumstances relating to the Allegation, that Ms A was XXX and that the abuse occurred in a private setting. Although the Tribunal had determined that the abuse was as a result of Dr Imran's temper, it had no evidence to suggest that Dr Imran would repeat this behaviour in a clinical setting. The Tribunal had regard to the testimonials and patient feedback for Dr Imran and concluded that this limb was not engaged.

51. The Tribunal next looked at whether there was a current and ongoing risk to the public confidence in the profession. It noted *'Violent or abusive behaviour by a doctor may have the effect of undermining public confidence in the profession and professional standards, especially if the act results in a criminal conviction. As doctors have respected positions in society, members of the public will expect them to uphold professional standards and where they do not, this will impact on public confidence'*.

52. The Tribunal was of no doubt that Dr Imran's misconduct brought the medical profession into disrepute. The public would be appalled to know that a doctor was physically and emotionally abusive in his private life. Given the time period over which the abuse occurred, Dr Imran's limited insight and remediation and the harm caused to Ms A, the Tribunal concluded that a finding of impairment was necessary to uphold public confidence.

53. Finally, the Tribunal looked at whether there was a current and ongoing risk to uphold the profession standards. It noted that *'Good medical practice requires that doctors treat others fairly and with respect, and act with integrity and within the law. Violent or abusive behaviour will usually amount to a significant breach of the standards expected'*.

54. The Tribunal took the view that Dr Imran’s behaviour towards Ms A was a significant breach of the standards in GMP and could undermine proper professional standards and conduct for members of the profession.

55. The Tribunal concluded that there was a current and ongoing risk to public confidence and upholding professional standards and that overall, the current and ongoing risk to public protection was high. The Tribunal determined that a finding of impairment was necessary to uphold public confidence in the profession and to send a clear message to the profession that this conduct, even in a private setting, was unacceptable.

56. The Tribunal has therefore determined that Dr Imran’s fitness to practise is impaired by reason of misconduct.

Determination on Sanction - 27/03/2026

1. This determination will be handed down in private due to the confidential nature of some of the matters under consideration. However, as this case concerns Dr Imran’s alleged misconduct a redacted version will be published at the close of the hearing.

The Evidence

2. The Tribunal has reviewed its findings at the facts and impairment stages and taken into account evidence received during the earlier stages of the hearing where relevant to reaching a decision on sanction.

Submissions

3. On behalf of the GMC, Ms Tighe submitted that the appropriate sanction in this case is one of erasure. She referred the Tribunal to the sanction banding for *‘violent or abusive behaviour’* and the column for *‘higher level of risk to public protection’* gives the banding of *‘suspension 12 months to erasure’*.

4. Ms Tighe submitted that there are no exceptional circumstances in this case to justify taking no action and that the public interest would not be met if the Tribunal were to take no action. She submitted that conditions are neither appropriate, proportionate or workable in this case and reminded the Tribunal that the sanction banding for this case is *‘12 month Suspension to erasure’*.

5. Ms Tighe went on to submit that suspension would be insufficient to maintain public confidence in the profession and to maintain professional standards as the Tribunal has found that Dr Imran's insight was superficial, that there was limited evidence of remediation and that his actions brought the medical profession into disrepute.

6. As such, Ms Tighe submitted that erasure is appropriate and proportionate as Dr Imran's misconduct is fundamentally incompatible with continued registration as he had shown a persistent lack of insight into the seriousness of the allegation. She drew the Tribunal's attention to paragraph 35:

'Patients and members of the public must be able to trust doctors with their lives, including their health. Trust in the profession is essential so that when individuals need medical care, they have confidence in those who provide it. This ensures they will not be put off from seeking care. It also prevents barriers to accessing the care they need and eliminates fear of receiving less favourable treatment than others'

She stated that any lesser sanction than erasure would undermine public confidence in the medical profession.

7. Mr Hedworth submitted that a finding of impairment is significant in itself in sending a considerable message to the public. He submitted that if a sanction was imposed it should be no more than necessary in order to protect the public. He submitted that suspension would be sufficient. He stated that he accepts the sanctions banding referred to *'suspension 12 months to erasure'* and that the issue was to decide between suspension and erasure.

8. Mr Hedworth submitted that the Tribunal should be wary of double counting at this stage as it is those same facts of the Allegation which led to the finding of impairment.

9. Mr Hedworth stated that patient safety has not been an issue in this case and he accepted that a period of suspension would be needed in order to protect public confidence in the medical profession and to maintain proper professional standards. He submitted that the circumstances of this case do not require the *'nuclear option'* of erasure and that Dr Imran, as a paediatric cardiac surgeon, is not someone who the public would be deterred from seeking the services of.

10. Mr Hedworth submitted that erasure would be unnecessary in this case and that a suspension of up to 12 months would be sufficient to send a message to other members of the medical profession and to the public.

Legal Advice on Sanction

11. The LQC advised the Tribunal that the procedure to be adopted is set out under the MPTS Guidance (*MPT Hearings > Part C: stage three – sanction > Step 3: decide on sanction*). The Tribunal should have regard to the sanctions bandings as set out in the MPTS Guidance (Introduction > Case Type 3: Violent or abusive behaviour). The LQC reminded the Tribunal that the sanctions bandings provide a guide, and there may be evidence relevant to the individual circumstances of the case that indicates the appropriate action should be lower or higher than that indicated by the bandings.

12. The Tribunal should remind itself of the level of current and ongoing risk which it found at impairment and consider what sanction is proportionate to protect the public interest. The Tribunal should have regard to the overarching objective and ask itself what is required but no more than necessary to achieve public protection. In making its determination the Tribunal should consider the least restrictive sanction first, before moving on to consider the other available sanctions in ascending order of severity.

13. The Tribunal at this stage can take into account any references and testimonials about the doctor's character. It is for the Tribunal to determine what weight to give to this evidence.

14. The Tribunal's decision as to the appropriate sanction, if any, is a matter for the Tribunal's own independent judgment. Whilst the Tribunal will consider the interests of the doctor, case law has made it clear that the need to protect the public always outweighs the interests of any individual medical professional and whilst restrictive action is not put in place to punish or discipline a doctor, a sanction may have a punitive effect.

15. The LQC advised that if a sanction of suspension is imposed the Tribunal will need to consider the length of the sanction and whether a review needs to be directed. The Tribunal should have regard to the level of remediation found at stage 2 and the amount of time the doctor is likely to need to remediate.

The Tribunal's Determination on Sanction

16. In making its decision on sanction, the Tribunal has reviewed its decision on facts and impairment and has considered the level of current and ongoing risk Dr Imran poses to public protection. It bore in mind its findings at the impairment stage that Dr Imran's conduct was

at the high end of the spectrum of seriousness, and that he poses a high level of current and ongoing risk to public protection.

17. The Tribunal had regard to the sanctions banding, as set out in Part C of the Guidance for MPT hearings, for *'violent or abusive behaviour'* and noted that for Allegations with a *'Higher level of risk to public protection'* the bandings guidance indicated that *'Suspension 12 months to Erasure'* would be appropriate.

18. The Tribunal was mindful of the references and testimonials provided and of Dr Imran's written and oral evidence.

No action

19. In reaching its decision as to the appropriate sanction, if any, to impose in this case, the Tribunal first considered whether to conclude by taking no action.

20. The Tribunal determined that there were no exceptional circumstances to justify taking no action in this case.

Conditions

21. The Tribunal next considered whether it would be appropriate to impose conditions on Dr Imran's registration. It bore in mind that any conditions imposed should be appropriate, proportionate, workable and measurable. In doing so it had regard to paragraph 22 of the *'Guidance for MPTS Tribunals - Section three: MPT hearings - Part C: stage three – sanction'* which states:

'22. To be workable, conditions must be capable of producing the desired result of addressing the specific findings about the current and ongoing risk to public protection posed by the doctor.'

22. Given Dr Imran's misconduct occurred outside of a clinical setting within his private life, the Tribunal took the view that imposing conditions on Dr Imran's professional practice would not be workable at this stage as they would not appropriately address the attitudinal issue the Tribunal found Dr Imran had. The Tribunal was of the view that Dr Imran needed to gain insight and remediate his misconduct further to demonstrate that he was not a current and ongoing risk to the public interest.

23. The Tribunal also had regards to paragraph 28 and 30 of the *'Guidance for MPTS Tribunals - Section three: MPT hearings - Part C: stage three – sanction'* which state:

'28. Conditions may be proportionate in cases where the doctor has shown a degree of insight into the allegation and some, or all, of the following factors are present:

- a. the doctor has demonstrated they are willing and/or able to remediate*
- b. identifiable areas of the doctor's practice need prohibiting, monitoring, or retraining*
- c. the doctor has demonstrated they are willing to be open and honest with patients and others they work with if things go wrong*
- d. the doctor will not put patients at harm, either directly or indirectly, by having conditions on their registration.*

30. Conditions are unlikely to be a proportionate response in cases where the nature of the allegations about the doctor's behaviour fall at the higher end of the spectrum of seriousness and/or suggest an underlying problem with their attitude.'

24. The Tribunal reminded itself that Dr Imran's misconduct was as the higher end of the spectrum of seriousness given the protracted length of time over which the abuse occurred. Due to the level of seriousness of Dr Imran's misconduct and the Tribunal's finding that the level of risk to public protection was high, it did not consider conditions to be an appropriate or proportionate response to protect the public interest.

25. The Tribunal therefore concluded that conditions are insufficient to meet the public interest or to maintain proper professional standards of conduct for the members of the profession.

Suspension

26. The Tribunal then went on to consider whether imposing a period of suspension on Dr Imran's registration would be appropriate and proportionate. In doing so it had regard to paragraphs 43, 44 and 45 of the *'Guidance for MPTS Tribunals - Section three: MPT hearings - Part C: stage three – sanction'* which state:

‘43. Suspension restricts a doctor’s registration and prevents them from practising during the period it is in effect. The purpose of suspending a doctor’s registration is to protect the public by removing them from practice to manage the current and ongoing risk they pose to public protection.

44. Restrictive action of suspension is intended to address the level of current and ongoing risk to public protection and is not intended to be punitive. However, as it prevents a doctor from working and earning a living within that profession, it can have this effect. Suspension can also have a deterrent effect and be used to send a signal to the individual doctor, the profession and public about what is regarded as behaviour unbefitting a registered doctor.

45. Suspension may be proportionate in cases where some, or all, of the following factors are present:

a. conditions are not appropriate, measurable and/or workable

b. the level of current and ongoing risk to public protection is such that it cannot be safely managed with conditions and suspension is necessary to stop the doctor from working and putting patients at risk while they gain insight into any deficiencies and remediate, or undergo medical treatment, and/or

c. the level of current and ongoing risk to public protection is such that, although patient safety is not an issue, suspension is needed to maintain public confidence in the profession and/or maintain professional standards.’

27. The Tribunal bore in mind that Dr Imran’s misconduct had breached fundamental tenets of the medical profession as set out in GMP. He had caused harm to Ms A through his emotional and physical abuse of her which it found to have been XXX. The Tribunal reminded itself that it had found Dr Imran’s insight to be superficial and that he still sought to blame Ms A and had not taken responsibility for his actions. The Tribunal was of the view that Dr Imran required a period of time to gain insight into his deficiencies and to remediate his misconduct.

28. The Tribunal reminded itself that it had found limited evidence of Dr Imran’s remediation and that he was unable to articulate what he had learned from the XXX courses and how he would put that learning into practice along with developing coping strategies to manage his anger.

29. The Tribunal took into account that although Dr Imran’s insight was superficial he had taken some steps to show he was willing to develop his insight. Further, undertaking the courses on XXX showed willingness by Dr Imran to remediate his misconduct.

30. The Tribunal noted the testimonials which all stated that Dr Imran was well regarded as a doctor by his colleagues. The Tribunal had regard to the testimonial from Dr E who had known Dr Imran personally and professionally for over 20 years. He stated that *‘I have always found him to be a kind, humble and well mannered individual. He is respectful towards others and maintain a calm demeanour’*. The Tribunal was mindful of the audio and video evidence it had before it which undermined this testimonial and reminded itself that these testimonials predate the Tribunal’s findings on facts and therefore, they would have been written without the knowledge of the facts found proved.

31. The Tribunal determined that Dr Imran’s insight was superficial and not fully developed. It bore in mind its finding that Dr Imran was quick to anger which was an attitudinal issue that has not been fully addressed at this point. The Tribunal was aware that Dr Imran has XXX but took the view that further introspection and self reflection were required from him in order to achieve the appropriate outcomes particularly as he continues to blame Ms A for his actions.

32. The Tribunal considered that a period of suspension would enable Dr Imran to further develop his insight into his misconduct and gain an understanding of his triggers and the reasons he had behaved in such an appalling manner. The Tribunal was further of the view that a period of suspension would also send a message to the medical profession that this conduct is unbecoming of a doctor and that serious action would be taken to uphold the standards of GMP.

Erasure

33. In considering whether erasure was the appropriate and proportionate sanction, the Tribunal had regard to paragraph 57 of the *‘Guidance for MPTS Tribunals - Section three: MPT hearings - Part C: stage three – sanction’* which states:

‘57. Erasure may be the proportionate response where:

a. conditions are not appropriate, measurable and/or workable and suspension is not sufficient to protect the public

b. the doctor's behaviour or performance is such that it caused serious harm, and the risk of harm recurring cannot be mitigated sufficiently through putting conditions or suspension in place

c. the doctor has shown a persistent lack of insight into the seriousness of the allegation about their behaviour or performance and the potential or actual consequences, and/or

d. the seriousness of the facts found proven and/or impact of any relevant context that increased the current and ongoing risk to public protection mean the effect of the doctor continuing to hold registration is such that it will undermine public confidence in the profession.'

34. The Tribunal noted that Dr Imran had demonstrated a willingness to develop insight and remediate his misconduct. Although there was limited evidence of remediation, the Tribunal took the view that Dr Imran had not shown a persistent lack of insight into his misconduct. Further, the Tribunal was satisfied that although Dr Imran had caused harm to Ms A, it reminded itself that it had not found there to be any patient safety risk and that there was no evidence that Dr Imran would cause harm to patients. As Dr Imran had contested the Allegations made against him, the Tribunal was of the view that this would have impacted upon his ability to gain insight into his misconduct. A period of suspension would provide him an opportunity to further reflect and demonstrate deeper insight and remediation which may reduce the current and ongoing risk to the public interest. The Tribunal concluded that erasure would not be an appropriate or a proportionate sanction at this stage and was not necessary for public protection.

35. The Tribunal therefore determined that a period of suspension would be an appropriate and proportionate sanction which would maintain public confidence in the medical profession and promote and uphold proper standards of conduct and behaviour.

Length of suspension

36. In considering the appropriate period of suspension, the Tribunal was aware that the maximum period of suspension is 12 months. The Tribunal reminded itself of the sanctions banding for '*violent or abusive behaviour*' with a '*Higher level of risk to public protection*' which indicated a '*Suspension 12 months to Erasure*' would be appropriate.

37. The Tribunal had regard to paragraph 46 of '*Guidance for MPTS Tribunals - Section three: MPT hearings - Part C: stage three – sanction*' :

'46. The MPT will need to decide the appropriate length of time that suspension should be put in place for, up to the maximum of 12 months. The following factors will be relevant:

- a. the assessment of the level of current and ongoing risk to public protection posed by the doctor*
- b. the reasons for assessing suspension as being the proportionate response*
- c. the amount of time the doctor is likely to need to remediate, complete treatment for and/or recover from a health condition that is having, or is likely to have, an impact on their ability to practise safely and effectively, and/or*
- d. the amount of time the parties will reasonably need to prepare for any review of whether the doctor continues to pose a current and ongoing risk to public protection requiring restrictive action in response or is safe to return to unrestricted practice.'*

38. The Tribunal noted that Dr Imran's current and ongoing risk to public protection was high and that no findings were made at the impairment stage in respect of context or mitigating factors which decreased this level. Dr Imran has just begun to remediate and develop insight and has some way to go to evidence that he has addressed his attitudinal issue which appeared to drive the emotional and physical abuse of Ms A. As such, the Tribunal determined that a 12 month suspension would be required in order to allow Dr Imran adequate time to demonstrate that he has remediated and developed his insight to a satisfactory level which could reduce the level of risk he poses to public protection.

39. The Tribunal determined to direct a review of Dr Imran's case. A review hearing will convene shortly before the end of the period of suspension. The Tribunal wishes to clarify that at the review hearing, the onus will be on Dr Imran to demonstrate how he has remediated and developed insight. It therefore may assist the reviewing Tribunal if Dr Imran provided:

- A further, and up to date, reflective statement demonstrating that he has further developed his insight;
- Any evidence of appropriate training which goes to the issues relevant to his misconduct;
- Evidence of any remediation to address the finding of the Tribunal;

- An up to date report from his counsellor;
- Evidence he has kept his knowledge and skills up to date.

Determination on Immediate Order - 27/03/2026

1. Having determined to suspend Dr Imran’s registration, the Tribunal has considered, in accordance with Rule 17(2)(o) of the Rules, whether Dr Imran’s registration should be subject to an immediate order.

Submissions

2. On behalf of the GMC, Ms Tighe submitted that an immediate order of suspension is necessary in this case. She stated that it would be inappropriate for Dr Imran to hold unrestricted registration until the substantive suspension comes into effect. She referred the Tribunal to paragraphs 84(b) and 84(c) of the ‘*Guidance for MPTS Tribunals - Section three: MPT hearings - Part C: stage three – sanction*’ and submitted that as the risk to one or more parts of public protection is high, immediate action is needed to maintain public confidence in the medical profession.

3. On behalf of Dr Imran, Mr Hedworth submitted he does not accept that paragraphs 84(b) and 84(c) are made out but that he did not want to dissuade the Tribunal from making an immediate order, if it was deemed appropriate. Dr Imran has no objections to an immediate order of suspension being imposed.

The Tribunal’s Determination

4. In its deliberations, the Tribunal had regard to the following paragraphs of ‘*Guidance for MPTS Tribunals - Section three: MPT hearings - Part C: stage three – sanction*’:

79. The MPT may impose an immediate order where it is necessary to protect members of the public, or is otherwise in the public interest, or is in the best interests of the doctor. 17 Where the MPT has imposed a sanction of conditions, it may impose an immediate order of conditions. Where the MPT has imposed a sanction of suspension or erasure, it may impose an immediate order of suspension.

83. The decision whether to impose an immediate order is at the discretion of the MPT based on the facts of the case. When deciding if an immediate order is needed the

MPT should consider the seriousness of the proved allegation and the level of current and ongoing risk to public protection posed by the doctor.

84. *It will not usually be appropriate for a doctor to hold unrestricted registration until*

a sanction takes effect in cases where: a. the doctor poses a risk to patient safety

b. the risk to one or more parts of public protection is high, and/or

c. immediate action is needed to maintain public confidence in the medical profession.'

5. The Tribunal bore in mind its finding that Dr Imran's misconduct was at the high end of the spectrum of seriousness and that the risk to one or more parts of public protection was high. As such, it was satisfied that immediate action is needed to maintain public confidence in the medical profession.

6. The Tribunal noted that Dr Imran does not currently hold a licence to practise. However, given that the substantive direction does not come into effect immediately and that Dr Imran could potentially re-apply for a licence to practise, the Tribunal took the view that it would not be appropriate for Dr Imran to be free to practise without restrictions.

7. The Tribunal therefore determined to impose an immediate order of suspension.

8. This means that Dr Imran's registration will be suspended from today. The substantive direction, as already announced, will take effect 28 days from the date on which written notification of this decision is deemed to have been served, unless an appeal is made in the interim. If an appeal is made, the immediate order will remain in force until the appeal has concluded.

9. That concludes the case.

ANNEX A – 09/03/2026

Application to amend the Allegation

1. This determination will be handed down in private due to the confidential nature of matters under consideration. However, as this case concerns Dr Imran’s alleged misconduct a redacted version will be published at the close of the hearing.

2. At the outset of these proceedings, Ms Tighe made an application to amend the Allegation and Confidential Schedule 2 pursuant to Rule 17(6) of the GMC (Fitness to Practise Rules) 2004 as amended (‘the Rules’).

Submissions

3. Ms Tighe made an application for the Tribunal to amend paragraph 10 of the Allegation so it reads:

‘On or around 11 October 2023 you:’

4. In addition, Ms Tighe made an application for the Tribunal to amend paragraph 10 of Confidential Schedule 2 so it reads:

‘Between approximately ~~June and September 2023~~ April 2022 to July 2023:’

5. Ms Tighe submitted that these amendments should be made as they properly reflect the evidence in this case and as such, would not cause any unfairness or injustice to Dr Imran.

6. Mr Hedworth had no objection to the GMC’s application to amend the Allegation.

The Tribunal’s Decision

7. In its deliberations, the Tribunal had regard to Rule 17(6) which states:

‘Where, at any time, it appears to the Medical Practitioners Tribunal that—

(a) the allegation or the facts upon which it is based and of which the practitioner has been notified under rule 15, should be amended; and

(b) the amendment can be made without injustice, it may, after hearing the parties, amend the allegation in appropriate terms'

8. The Tribunal noted that Dr Imran had no objections to these amendments being made. It considered that, these amendments were helpful in clarifying the Allegation against Dr Imran and more accurately reflected the evidence presented in this case. The Tribunal was of the view they can be made without causing any injustice to Dr Imran or to the GMC.

9. The Tribunal therefore determined to grant the GMC's application to amend the Allegation and Confidential Schedule 2.

ANNEX B – 09/03/2026

Application to redact evidence

1. On behalf of the GMC, Ms Tighe made an application pursuant to Rule 34(1) for parts of the hearing bundle to be redacted.

Submissions

2. Ms Tighe drew the Tribunal's attention to redactions made to the police investigation review document, dated 3 June 2024. She submitted that two of these redactions are disputed and relate to the assessment of audio and visual evidence by the police.

3. Ms Tighe submitted that the redactions should remain and that the Tribunal should assess the video and audio footage and make their own conclusions as to what weight to afford that evidence. She stated that the evidence is not relevant as it relates to an evidential assessment carried out by the police.

4. Mr Hedworth stated it is apparent that there was a police investigation into the allegations made against Dr Imran and that there is no suggestion of a prosecution being made against Dr Imran after the police assessed all of the evidence.

5. Mr Hedworth submitted that it would be artificial and inconsistent for the GMC to make the two redactions to the police investigation review report. He opined that given that the police decided not to proceed with their investigation, the current redactions would result in the Tribunal having to guess why the police case did not proceed. He stated that the Tribunal will assess what weight to give to the evidence but that it would be good for it to be aware of what the police made of the evidence as they decided that there was nothing in the evidence that went against Dr Imran.

The Tribunal's Decision

6. In its deliberations, the Tribunal had regard to Rule 34(1) which states:

'The Committee or a Tribunal may admit any evidence they consider fair and relevant to the case before them, whether or not such evidence would be admissible in a court of law'

7. The Tribunal considered whether it was fair and relevant to remove the two disputed redactions in the police investigation review document.

8. In relation to relevance, the Tribunal noted that the evidence seemed to be a police officer's opinion, given in a professional capacity, and included an analysis of the evidence the officer had before them. The Tribunal took the view that the issues it will be considering will be similar to the issues put before the police officer. As such, the Tribunal concluded that this evidence was relevant for these proceedings.

9. In relation to fairness, the Tribunal agreed with Mr Hedworth's submission that these two redactions to the police investigation review report, were inconsistent. It took the view that the redactions were selective and that it would be in the interests of fairness to remove the two disputed redactions.

10. The Tribunal was clear that any particular weight to be attached to the evidence is not a consideration as to whether to admit the evidence, they will assess the appropriate weight to give to this information at a later stage in the proceedings.

11. The Tribunal therefore determined to refuse the GMC's application to make redactions to the evidence and directed that an unredacted document be provided to the Tribunal.

ANNEX C – 12/03/2026

Application to admit additional evidence

1. Mr Hedworth made an application under Rule 34(1) for the Tribunal to admit additional evidence.

Submissions

2. Mr Hedworth submitted that he has presented Dr Imran's case via his witness statement and the various documents exhibited to it. He stated that he could not foreshadow that Ms A, in her oral evidence, would make reference to XXX.

3. Mr Hedworth made an application for the XXX to be admitted into evidence. He stated that this sets out the claim that Ms A is making XXX and contradicts her evidence. Mr Hedworth submitted that it would be wrong for Dr Imran to be prevented from presenting this evidence as part of his case as this relates to a claim made by Ms A which could indicate that what she said whilst under oath, during her oral evidence, was incorrect.

4. Ms Tighe submitted that the GMC oppose this application on the basis of fairness. She stated the evidence is a single page document XXX. She stated that neither her nor those who instruct her at the GMC have any experience of XXX and there are some difficulties in understanding what the document is, what it is claiming and when it is from.

5. Ms Tighe submitted that Ms A has already concluded her evidence and that there isn't an opportunity for her to comment on the document or to explain it. She stated that Mr Hedworth has set out that the document seemingly appears to contradict the oral evidence given by Ms A but that Ms A is not in a position to respond to that. Ms Tighe said that Mr Hedworth is seeking to demonstrate that what Ms A said in her oral evidence was incorrect and that this goes towards a credibility issue in relation to Ms A. As such, Ms Tighe submitted that admitting this evidence would be unfair upon the GMC as it is restricted in how it can respond.

6. Ms Tighe submitted that the GMC's smaller argument relates to the relevance of this document to this Tribunal deciding the issues it has to decide, this being allegations of

violence, and verbal abusive behaviour between XXX and XXX. She submitted that this Tribunal is not deciding XXX or the respective responses from Dr Imran and Ms A XXX.

7. In response, Mr Hedworth submitted that the GMC's objection, on the basis of fairness, is objected to on the basis of unfairness to the doctor. He stated that the GMC want to have their witness, Ms A, say something in oral evidence which is contradicted by her own document XXX. He stated that the relevant part of the document, is dated the 26 of April 2025 and that when he suggested to Ms A she was claiming XXX going back to XXX, she denied this. Mr Hedworth submitted that the document shows that Ms A has served documents making that claim.

8. Following these submissions, the Tribunal queried if Ms A could be recalled to give further witness evidence. The GMC made enquiries and informed the Tribunal that Ms A would be available to give further oral evidence but still opposed the application to admit the additional evidence based on its relevance.

The Tribunal's Decision

9. In its deliberations, the Tribunal had regard to Rule 34(1) and considered whether it was fair and relevant to admit the additional evidence.

10. With regard to relevance, the Tribunal accepted Ms Tighe's submission that the document did not appear to be relevant to the subject matter of the issues contained within the Allegation. However, the Tribunal accepted Mr Hedworth's submission that the document was relevant to the credibility and truthfulness of Ms A and therefore was relevant to the issues the Tribunal would need to determine. The Tribunal was of the view that the document was relevant.

11. With regard to fairness, the Tribunal considered that admitting the document may have been unfair, as an unfavourable or incorrect inference may have been drawn, if Ms A was not given a chance to respond to the proposed new evidence. As Ms A was willing to be recalled under oath, the Tribunal was of the view that fairness could be achieved.

12. In conclusion, the Tribunal considered it fair and relevant to admit the XXX into evidence and the Tribunal determined to recall Ms A to give further oral evidence in order to respond to the new document.

13. The Tribunal therefore determined to grant Dr Imran’s application to admit further evidence.

XXX Schedule 1

XXX

XXX Schedule 2

1. Between XXX and in or around XXX you did not allow [Ms A] to XXX.
2. On XXX you made the comments set out at Schedule 3 to [Ms A].
3. In or around late XXX you made the comments set out at Schedule 4 to [Ms A].
4. On or around XXX you shouted at [Ms A] and made the comments set out at Schedule 5.
5. In or around XXX you shouted at [Ms A] and asked her why she:
 - a. did not call you and ask if you were okay, or words to that effect;
 - b. was so lazy, or words to that effect.
6. On XXX you sent a WhatsApp message to [Ms A], as set out at Schedule 6, when she attended your workplace to bring you lunch.
7. On XXX you made [Ms A] apologise to you for the reason set out at Schedule 7.
8. On XXX you sent a WhatsApp message to [Ms A], as set out in Schedule 8.
9. On XXX you:
 - a. left a voice message for [Ms A], in which you made the comments set out at Schedule 9;
 - b. sent WhatsApp messages to [Ms A], as set out at Schedule 10.
10. Between approximately XXX to XXX:

Amended under Rule 17(6)

 - a. you gave [Ms A] XXX;
 - b. when [Ms A] told you that XXX was not a lot, you said it was more than enough, or words to that effect.
11. On XXX you made the comments set out at Schedule 11 to [Ms A].
12. On or around XXX you made the comments set out at Schedule 12 to [Ms A].
13. In or around late XXX you told [Ms A] that she was mentally retarded, or words to that effect.
14. On XXX, whilst driving XXX, you made the comments set out at Schedule 13 to [Ms A].
15. On XXX you made the comments set out at Schedule 14 to [Ms A].

16. On XXX you:
 - a. destroyed a cake [Ms A] XXX, by smashing it;
 - b. made the comments set out at Schedule 15 to [Ms A].
17. On XXX you:
 - a. made the comments set out at Schedule 16 to [Ms A];
 - b. sent WhatsApp messages to [Ms A], as set out at Schedule 17.
18. On XXX you sent a WhatsApp message to [Ms A] and told her not to come back, or words to that effect, as she had not XXX.
19. On XXX you left a voice message for [Ms A], which contained the comments set out at Schedule 18.
20. On XXX:
 - a. at or around 10:30 you shouted at [Ms A], making the comments set out at Schedule 19;
 - b. following your actions as set out at 20a you shouted at [Ms A] and asked her to tell you who she was, or words to that effect;
 - c. at or around 14:30 you stated ‘we can’t live like this, you did something bad, you should apologise for making me angry’ or words to that effect

XXX Schedule 3

‘Who the hell are you? XXX, or words to that effect

XXX Schedule 4

‘XXX’ or words to that effect

XXX Schedule 5

That [Ms A] was a useless creature in your life and XXX, or words to that effect

XXX Schedule 6

‘Stop creating drama. You laid down in XXX. Show some maturity’ or words to that effect

XXX Schedule 7

Because she believed you were XXX

XXX Schedule 8

‘Don’t XXX, from my side, go to hell. If you have that much courage, try staying outside for a day. XXX

XXX Schedule 9

‘But when I told you something, why didn’t you act on it? A foolish woman like you XXX, nor should you even exist in this world. Just open the door now, go and jump off, go die for all I care’

No, but why don’t you understand that I just don’t like it? I have nothing to do with XXX, but I’m just telling you that I had told you not to do it, so why did you? You can’t protect yourself from just a girl’

XXX Schedule 10

Yes

You fucking shit

I will XXX

That’s enough

You shit

You bloody shit

Get out of my house

How did that shit find out XXX?

I am done

With you

Bitch

XXX Schedule 11

1. that if [Ms A] wanted to stay with you, she had to delete and deactivate all of her social media accounts, or words to that effect
2. that you XXX [Ms A], making this comment for the second time

XXX Schedule 12

That if she wanted to XXX, she had to stay away from XXX, and if [Ms A] didn't trust you, you would XXX, or words to that effect

XXX Schedule 13

1. 'Your XXX is a son of a bitch'
2. 'Daughter of a bitch, you don't know, you are shameless, if you have any honour in you, just leave this car right now. If you have money get a taxi, get money. You don't have that much honour but only to taunt me'
3. 'You have some insect in your arse that doesn't let you live peacefully'
4. 'I took you to XXX, did everything. Why don't you understand that because of your previous attitude I am bearing with you. You think what you are doing is very good'
5. 'I will kick your ass and kick you out. You are worthless. I am ending this episode but you. If you are ending it. Hmm if you are raising your hands on me then I will raise my hands as well'
6. 'Daughter of a bitch. I am not an animal that you would hit me. You are an animal, your intellect is like them'
7. 'Sister fucker'
8. 'I had enough now, said dear stop it but no, there is always an itch in her arse'

XXX Schedule 14

1. 'Listen to me, I'm not going to argue with you again over pointless social media, which is something non-existent. Alright? Even you are worth two pennies to me. Alright? And I don't want to argue with you about this. I have many other issues to deal with which you don't know. Alright? You don't know, okay? I have other issues, especially the ones I want to focus my energy on. Because of that, you're living a relatively easy life, understand? That's why I'm telling you to stop with these XXX and social media

matters. Let's make sure this doesn't happen again, understood? If you don't get it, let me know right now so I can XXX. Then take your XXX, and everything else and deal with it. You can keep doing whatever you want on there. XXX Let me know if you need any further adjustments. It doesn't matter to me, I'll see how much benefit you get.'

2. 'Don't take too many pictures, pictures shouldn't be taken everywhere. When we go places, it's to enjoy the moment, right? Not just for taking pictures. We go places to enjoy the experience, and taking pictures is a secondary thing'
3. 'You're talking nonsense in front of me. Your thinking is just low and dirty, isn't it? No matter how much you try to clean filth, filth remains filth. It never actually gets cleaned'

XXX Schedule 15

1. that you should XXX, or words to that effect
2. (when [Ms A] suggested that you get some professional help for your anger management) 'You should not say anything that makes me angry. Why don't you behave and act maturely?' or words to that effect

XXX Schedule 16

1. That you should keep your relationship hidden
2. That if she wanted to stay with you, she was not allowed to upload XXX on XXX or social media, or else he would have to XXX, or words to that effect
3. Told her to leave XXX, or words to that effect
4. Told her that you did not want her XXX when you returned from work, or words to that effect
5. Told her to come back and that she was XXX, or words to that effect
6. That you were angry because she was not listening to you, or words to that effect

XXX Schedule 17

Please don't message me now

Goodbye

I tried to make you understand but you didn't, now goodbye

I want you XXX before 9am tomorrow

Take your XXX
I have had enough
You think that you'll keep blackmailing the whole life?
So, this is your delusion
You bitch
You think, you will do whatever you want and blackmail me, you are mistaken
From today, XXX
I have nothing to do with you

XXX Schedule 18

'Stop talking nonsense, first, you did something wrong and now you're talking rubbish. You have this attitude now, and XXX, I don't know what you are going to do then, you're only humiliating me now XXX, and I am only tolerating'

XXX Schedule 19

1. 'What I'm saying is the truth because if you're in this condition now, tomorrow when XXX, you'll become completely irresponsible. Then you'll say 'XXX'
2. 'You always have to cause trouble, don't you? There is nothing to do, it's just causing trouble. Nothing is going to be productive; just here to cause trouble and do nothing else. Are you happy now? Happy like this? Like this, are you happy like this?'
3. 'If you ever say anything about XXX again, I'll break your face. That's it, the conversation is over. It's my choice to say whatever I want to XXX. You can tell XXX whatever you want; I don't care about that. but if you say anything about XXX again, it won't be good'
4. 'Stop talking nonsense, just stop. And don't mention XXX name again'
5. 'I told you not to say anything, didn't I? I told you myself, it's my choice. I told you not to, and then I told you myself. So what? It's my decision'
6. 'Stop talking nonsense, man. Don't waste my time with useless talk. Most of the things you say – 70% of them – are pointless'
7. 'Your words don't even have any meaning or importance'
8. 'What are you? What kind of person are you?'
9. 'Listen, stop talking nonsense. Yes, I can say whatever I want to XXX. You can say whatever you want to XXX, and you keep saying it. That's a different matter. I don't

want to hear your nonsense; don't mess with my mind. See your behaviour makes me think, what will happen next?'

10. 'You must be thinking that XXX, you'll just sit back and say 'Now that I have XXX Now it's my time to enjoy. Whether XXX, this, or that, it doesn't matter'. Your whole focus is just to have a XXX so you can blackmail me later. Isn't that what you're thinking? Isn't that what you're planning?'
11. 'Stop talking nonsense. Don't say you haven't blackmailed me, just stop with the nonsense'