PUBLIC RECORD

Dates: 01/07/2026

Doctor:	Dr Rukmana RABINDRAN
GMC reference number:	7727911
Primary medical qualification:	MB BS 2020 St George's Hospital Medical School

Type of case	**Outcome on impairment**
Review – Misconduct	Not Impaired

Summary of outcome
Suspension Revoked

Tribunal:

Legally Qualified Chair	Mrs Kiran Musgrave
Lay Tribunal Member:	Dame Nicola Stephenson
Registrant Tribunal Member:	Dr Kamran Shahid

Tribunal Clerk:	Ms Fiona Johnston

Attendance and Representation:

Doctor:	Present, represented
Doctor's Representative:	Mr Rossano Cifonelli, Counsel, instructed directly
GMC Representative:	Ms Lucy Chapman, Counsel

Attendance of Press / Public
In accordance with Rule 41 of the General Medical Council (Fitness to Practise) Rules 2004 the hearing was held in public.

Protecting the Public

Throughout the decision making process the tribunal has borne in mind the statutory duty as set out in s1(1) of the Medical Act 1983 (the 1983 Act) to protect the public. The tribunal has considered the relevance and impact on each of the three distinct parts of public protection 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 Impairment - 01/07/2026

1. At this review hearing the Tribunal now has to decide in accordance with Rule 22(1)(f) of the General Medical Council (GMC) (Fitness to Practise) Rules 2004, as amended ('the Rules') whether Dr Rabindran's fitness to practise remains impaired by reason of conviction.

Background and 2025 Tribunal

2. Dr Rabindran qualified in 2020 with an MB BS from St George's Hospital Medical School, University of London and then completed his foundation training. Dr Rabindran has been employed as a locum doctor at St Peter's Hospital, Chertsey since 2022 and was working there at relevant times: May to July 2024.

3. The allegations that led to Dr Rabindran's original hearing can be summarised as follows: on 7 July 2024., at Staines Magistrates' Court, Dr Rabindran was convicted of drink driving and dangerous driving on 23 May 2024. Dr Rabindran was sentenced to 24 weeks' imprisonment, suspended for 18 months and disqualified from driving for 12 months, with an extended test, for the offence of dangerous driving on 23 May 2024. He was fined £923 and disqualified from driving for 12 months for the offence of drink driving.

4. Dr Rabindran self-referred to the GMC on 28 May 2024, following the two charges on the 23 May 2024.

5. Dr Rabindran's original hearing took place in April, June and December 2025. At the outset of proceedings, the doctor admitted the full Allegation and his fitness to practise was found impaired by reason of conviction.

6. The Tribunal found that the doctor's fitness to practise was impaired by way of his conviction, that the offending had undermined public confidence in the profession, that the

finding of impairment was required to maintain public confidence in the profession and uphold professional standards.

7. In terms of seriousness, the 2025 Tribunal considered this to be extremely serious due to the high risk of death or serious injury to other users. The 2025 Tribunal noted that the convictions were serious enough to cross the custody threshold, a suspended sentence having been imposed.

8. Regarding insight and remediation, the 2025 Tribunal was of the view that there was little in the way of insight, particularly in terms of the effect on others' safety, and instead the doctor's reflections focused primarily on the effect of his actions on himself, his career and his family.

9. The 2025 Tribunal found some aggravating factors, and that included a lack of timely insight, the inherent dangerousness and seriousness of the conduct itself, and the potentially fatal consequences.

10. The 2025 Tribunal also found some mitigating factors and those included the doctor's youth at the time of the offending and the time elapsed since, a lack of any regulatory history, positive testimonials, self-referral and the courses undertaken. It concluded that the conduct was remediable.

11. The 2025 Tribunal determined to suspend Dr Rabindran's registration for a period of seven months.

12. The 2025 Tribunal directed a review hearing and suggested that Dr Rabindran provided the following:

- Oral or written evidence from Dr Rabindran to demonstrate insight into why he acted as he did, potential consequences and future intentions;
- Evidence of attendance on any courses Dr Rabindran considers relevant.

Today's Review Hearing

The Evidence

13. The Tribunal has taken into account all the evidence received.

Documentary Evidence

14. The Tribunal received:

- The determinations of the 2025 hearing;
- Various correspondence between Dr Rabindran and the GMC;
- Dr Rabindran reflection statement – dated 18 June 2026.

Witness evidence

15. Dr Rabindran told the Tribunal that, in order to regain his driving licence, he was required to undertake an extended driving test. He explained that this was a 120-minute practical test comprising the same elements as a standard driving test but assessed in greater depth, with particular emphasis on matters such as speed awareness, hazard perception and overall driving awareness.

16. Dr Rabindran stated that the purpose of the extended driving test was to ensure that he had addressed the failings which led to his conviction and had developed greater awareness so that he could drive more safely in the future.

17. He further told the Tribunal that he had continued working until the end of November 2025, immediately prior to the commencement of his suspension.

18. When questioned by the Tribunal about the reasons for his offending, Dr Rabindran stated that he no longer had any excuse for his behaviour. He told the Tribunal that, having had over two years to reflect on the incident and its consequences, he accepted that his actions were simply wrong and that there was no justifiable explanation for what he had done. He explained that, at the time of the previous hearing, he had been in shock, in denial and had lacked insight into his actions. He accepted that alcohol had impaired his judgment and stated that he now recognised that there was no justification for his conduct. He told the Tribunal that he would not repeat such behaviour and accepted that, as a doctor, he owed responsibilities not only to his patients but also to the wider public and to maintaining confidence in the medical profession.

19. Dr Rabindran further told the Tribunal that he now understood the potential consequences of driving whilst under the influence of alcohol. He accepted that his actions had placed other road users at risk of serious injury or death and acknowledged that his previous suggestion that he had felt in control had been wrong. He stated that he now

appreciated that it only takes a moment for events to have catastrophic consequences and accepted that he could have killed someone.

20. When asked how he would respond if faced with a similar situation in the future, Dr Rabindran told the Tribunal that, since regaining his driving licence in January 2026, he had already encountered occasions where he had been invited for drinks after work. He explained that, on those occasions, he had deliberately left his car, travelled home by taxi or public transport, and returned to collect his vehicle the following day. He stated that he had learned from his mistakes and now understood the serious consequences that could arise from driving after consuming alcohol.

21. In relation to remediation, Dr Rabindran told the Tribunal that he had not undertaken any further formal driving courses since the previous hearing. He explained that he had already completed a number of relevant courses, including alcohol awareness, driver awareness, and speed awareness programmes, together with the court's imposed extended driving test. He stated that he believed these, combined with his subsequent reflections, had provided him with sufficient knowledge and understanding.

22. Dr Rabindran stated that the greatest change had come through sustained self-reflection. He told the Tribunal that he regularly revisited the Tribunal's previous determination and reflected upon the circumstances of his offending, considering what he should have done differently. He explained that, whilst this process had initially been difficult because he had been in denial, he had gradually developed greater clarity through reflection and meditation. He accepted that what he had done was entirely wrong and could not be justified.

23. When asked whether he had researched any further courses, Dr Rabindran stated that he did not believe additional formal courses would materially improve his insight. Instead, he explained that he had read about and watched accounts, on social media/streaming platforms, from individuals who had experienced similar situations. These included You Tube reels describing the consequences of drink-driving. He told the Tribunal that he found these real-life accounts more beneficial than undertaking further online courses, as they reinforced the seriousness of the consequences of his actions.

24. During questioning by the GMC, Dr Rabindran accepted that the case concerned not only the driving conviction itself but also the poor judgment which led to the offending. He explained that, at the time of the incident, he had been experiencing significant personal stress, including pressures associated with work and his forthcoming wedding. However, he accepted that these matters did not justify his conduct. He acknowledged that he had acted

selfishly, had failed to consider the wider consequences of his actions, and had not appreciated the risks his behaviour posed to others.

25. Dr Rabindran told the Tribunal that, through reflection, he believed he had become a better person both personally and professionally. He stated that he now managed stress differently, including through regular meditation and daily reflection, which allowed him to consider what he had done well, what he could improve, and how he could continue making better decisions in the future. He told the Tribunal that he was determined not to repeat the behaviour and believed that the insight he had now developed was genuine and enduring.

Submissions on Behalf of the GMC

26. On behalf of the GMC, Ms Lucy Chapman submitted that Dr Rabindran had done his best to assist the Tribunal. She submitted that he had answered the Tribunal's questions openly and honestly and had sought to address matters where there had previously been gaps in his evidence.

27. Ms Chapman submitted that Dr Rabindran had been candid in acknowledging that he could have undertaken further reflection, reading and courses, not only in relation to his driving offence itself but also concerning the wider issues of public interest, maintaining trust and confidence in the medical profession, and the responsibilities of doctors. She submitted that he had been honest in explaining that there had been many things going on in his life at the time, that he had been in denial for much of the previous proceedings, and that this demonstrated developing insight which was very much to his credit.

28. Ms Chapman further submitted that Dr Rabindran's witness statement contained frank admissions that he had lacked insight at the previous hearing. However, she submitted that important areas remained outstanding and that his insight and remediation had not yet reached the level required for the GMC to submit that his fitness to practise was no longer impaired.

29. In particular, Ms Chapman submitted that Dr Rabindran had not undertaken sufficient meaningful reflection as to why he had behaved as he did. Whilst he had addressed this issue to some extent during his oral evidence, she submitted that his responses had largely been given spontaneously rather than being the product of considered reflection undertaken beforehand.

30. Ms Chapman submitted that the focus of Dr Rabindran's remediation had been primarily on improving his driving and driving behaviour. Whilst she made no criticism of

those steps, she submitted that there remained wider issues concerning judgment, professional responsibility, and maintaining public trust and confidence which had not yet been fully addressed.

31. Accordingly, she submitted that the Tribunal could not yet be assured that Dr Rabindran's fitness to practise was no longer impaired from the perspective of the wider public interest

Submissions on Behalf of Dr Rabindran

32. On behalf of Dr Rabindran, Mr Ross Cifonelli submitted that Dr Rabindran was now 30 years old and that the incident had occurred when he was 28. He submitted that over two years had passed since the offence and throughout that period there had been no concerns regarding dishonesty or patient safety. He submitted that the central issue before the Tribunal was impairment, and in particular Dr Rabindran's insight and self-awareness.

33. Mr Cifonelli submitted that the regulatory process had been one of personal development and learning. He noted that Dr Rabindran had accepted the facts of his conviction from the outset, had self-referred to the GMC within days of the incident, and had not appealed.

34. Mr Cifonelli submitted that the evidence demonstrated significant personal growth. He submitted that Dr Rabindran's witness statement and oral evidence showed that he had developed insight considerably since the previous hearing, had moved away from his earlier position, and now had a proper understanding of why his behaviour had been wrong.

35. Mr Cifonelli further submitted that Dr Rabindran had been driving again for some time following the successful completion of his extended driving test and that there was no indication that he would repeat the offending behaviour.

36. In relation to remediation, Mr Cifonelli acknowledged that criticism had been made regarding the limited number of additional courses undertaken. However, he submitted that the extended driving test itself had been a significant learning exercise and, when considered alongside the other courses completed and Dr Rabindran's continued reflection, it demonstrated meaningful remediation.

37. Mr Cifonelli submitted that, in those circumstances, there was no need for any further regulatory action. He reminded the Tribunal that the previous Tribunal had recognised that the misconduct did not arise in the workplace and submitted that Dr Rabindran's suspension

should now be allowed to come to an end, enabling him to return to medical practice without the need for any further sanction.

The Relevant Legal Principles

38. The Tribunal received and accepted legal advice.

39. The Tribunal reminded itself that, although the previous Tribunal had set out the matters that a future Tribunal might be assisted by, the decision of impairment is a matter for this Tribunal's judgement alone. The Tribunal is aware that it is for the doctor to satisfy it that he would be safe to return to unrestricted practise.

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

41. In reaching its decision, the Tribunal should take into account the three parts of public protection, that is: protecting and promoting the health, safety and wellbeing of the public; promoting and maintaining public confidence in the profession; and promoting and maintaining proper professional standards and conduct.

42. The Tribunal must determine whether the doctor has demonstrated insight, and if so, to what extent. The Tribunal must also determine whether the need to uphold proper professional standards and public confidence in the profession would be undermined if a finding of current impairment were not made.

43. The Tribunal will need to consider whether Dr Rabindran has shown the following:

- What was the last assessment of current and ongoing risk to public protection resulting in the doctor's fitness to practise being found impaired? (Looking back at the previous tribunal's findings).
- What has happened since the last assessment of risk and what impact does this have?
- How has the doctor responded to the previous tribunal's findings?
- Has the risk to public protection requiring restrictive action in response changed and if so, how?

The Tribunal's Determination on Impairment

44. The Tribunal considered the matters relating to Dr Rabindran's Conviction.

What was the last assessment of current and ongoing risk to public protection resulting in Dr Rabindran's fitness to practise being found impaired?

45. The Tribunal had regard to the findings and conclusions of the 2025 Tribunal. It noted that the previous Tribunal's determination on impairment was that Dr Rabindran's conduct had seriously departed from these fundamental tenets of the medical profession.

> *'60. Dr Rabindran did not provide evidence of good insight to the Tribunal. His reflections were focused on his career and other personal concerns. The Tribunal was not presented with evidence that Dr Rabindran fully appreciated the potentially serious consequences of his actions on other road users.*
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> *61. The Tribunal concluded that Dr Rabindran's actions had breached a fundamental tenet of the medical profession, because he had not acted in such a way as to justify his patients' confidence in himself or public trust in doctors; this was in breach of paragraph 81 of GMP. His offences had brought the profession into disrepute.*
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> *62. As Dr Rabindran had demonstrated little insight into the catalysts for his offending and his remediation was limited, the Tribunal was unable to conclude that the risk of similar behaviour in future had been minimised'.*

46. It had considered that the seriousness of the conviction was at the higher end of the spectrum of seriousness. In relation to public protection, the 2025 Tribunal considered the risk to public protection to be high.

What has happened since the last assessment of risk and what impact does this have? and How has Dr Rabindran responded to the 2025 Tribunal's findings?

47. The Tribunal reviewed the evidence it had received in this case, both oral and documentary.

48. The Tribunal considered Dr Rabindran's reflective statement, where he stated:

> *'At the first stage of my hearing in April 2025 I told the Tribunal that I had not been impaired by the alcohol I had drunk. That was wrong, and I should never have said it. It was an unscientific claim and, looking back, a self-serving one.*

Alcohol impairs judgment, reaction time and self-control; that is precisely why there is a legal limit. I now accept, without any reservation, that I was impaired, that the alcohol made me more dangerous than I already was at that speed, and that my attempt to argue otherwise was itself a failure of insight on my part.

…….

I cannot change the fact that my insight arrived late. What I can say is that insight which comes late is still real, and that the months since November 2025 have allowed mine to settle and deepen rather than fade. Being unable to work as a doctor has made me confront, every day, what I put at risk and why. I no longer think of this as something that happened to me. I did it — to myself, and very nearly to others.

…….

If I am permitted to return to practice, I will not put myself in this position again. I will not drink and drive. I will not speed, or to treat the rules of the road as though they do not apply to me, and I have ordered my life so that those things do not happen. I will continue to reflect on this episode rather than try to forget it, and I will undertake any further course, supervision or condition that the Tribunal considers appropriate.'

49. The Tribunal was satisfied that Dr Rabindran had fully accepted the findings of the 2025 Tribunal and acknowledged the seriousness of his wrongdoing. It noted that, whereas at the 2025 hearing he had denied that his fitness to practise was impaired, he now accepted that his conduct had fallen seriously below the standards expected of a registered medical practitioner.

50. The Tribunal was satisfied that Dr Rabindran had undertaken a genuine journey of reflection during his period of suspension. It accepted that he now recognised not only the seriousness of his actions but also their wider impact, including the potential risk to members of the public and the damage his behaviour had caused to the reputation of the medical profession.

51. The Tribunal also took into account that Dr Rabindran had completed his period of disqualification, successfully regained his driving licence through the extended driving test process, and had since resumed driving without any further issues. It considered these matters, together with his oral evidence and reflective material, demonstrated a significant development in his insight and self-awareness since the previous hearing.

How has the doctor responded to the 2025 Tribunal's findings?

52. It was clear to the Tribunal that Dr Rabindran had carefully considered the findings of the 2025 Tribunal. The Tribunal was satisfied that he now understands the seriousness of his conviction, the impact of his conduct on public confidence in the profession, and the responsibilities placed upon him as a registered medical practitioner. It found that Dr Rabindran had demonstrated genuine, meaningful remorse and had offered a sincere apology for his conduct.

53. The Tribunal assessed the quality of Dr Rabindran's remediation in relation to his conviction and considered that he had taken significant steps to address the concerns identified by the previous Tribunal. It noted that he had completed relevant courses, including Alcohol Use Disorders, Driver Awareness: Speed, and Drugs & Alcohol Awareness, although did note that these courses were undertaken prior to the suspension. Notwithstanding that, the Tribunal were of the view that they would have assisted Dr Rabindran, together with the retaking of his driving test, which he did during the suspension period. The Tribunal accepted Dr Rabindran's evidence that he had supplemented this learning by watching real-life accounts of similar incidents, which he considered had provided greater insight than undertaking additional courses alone. It also noted that he had adopted strategies to improve his wellbeing and decision-making, including regular meditation and learning martial arts as mechanisms to manage stress and develop self-awareness. The Tribunal was of the view that self-awareness can have an effective impact upon insight and remediation; that is it not only courses that can have impact upon insight and remediation.

54. The Tribunal considered that Dr Rabindran had responded positively to the findings of the 2025 Tribunal and had made substantial progress in developing both his insight and remediation. It determined that the progress he had demonstrated had significantly reduced the level of risk identified at the previous hearing and had a substantial impact on its assessment of his current fitness to practise

Has the risk to public protection requiring restrictive action in response changed and if so, how?

55. The Tribunal determined that Dr Rabindran has reflected fully on his conviction. It considered that his reflections were genuine, sincere and meaningful. It was satisfied that there was nothing further that Dr Rabindran could reasonably have provided to the Tribunal to demonstrate that he has remediated the conviction.

56. The Tribunal was satisfied that Dr Rabindran has also demonstrated sufficient insight into the impact of his offending on the reputation of the profession. The Tribunal determined that Dr Rabindran has developed effective safeguards and put in place a series of measures to avoid future repetition of his previous conduct.

57. The Tribunal concluded, based on the evidence before it, that the risk of repetition identified in this case had significantly reduced, such that there is now no current risk to any of the three limbs of public protection requiring further restrictive action in response. The Tribunal therefore concluded that Dr Rabindran's fitness to practise is no longer impaired by reason of his conviction.