

**IN THE PROFESSIONAL CONDUCT COMMITTEE OF THE SRI LANKA MEDICAL
COUNCIL**

In the matter of a disciplinary inquiry
conducted pursuant to the provisions of
the Medical (Disciplinary Procedure)
Regulations, 1990

INQUIRY NO. - PPC 366 / PCC 21

BETWEEN

Mr. Masilamani Uthayakumar

Complainant

AND

Dr. Selvarajah Suganthan [SLMC Reg.
No. 24564]

Respondent

Date of the Disciplinary Order: Saturday, 17th October 2026

Appearance: Ms. Udari Ranathunga, Attorney-at-Law for the Complainant
Mr. Aslam Alaudeen, Attorney-at-Law for the Respondent

Coram: Prof. Jayantha Jayawardena (Chairman) and the Members of the Professional
Conduct Committee of the Sri Lanka Medical Council

DISCIPLINARY ORDER

A. INTRODUCTION

1. This matter comes before the Professional Conduct Committee of the Sri Lanka Medical Council (hereinafter referred to as the “**Committee**”) for the imposition of sentence following the Reserved Decision of the Committee whereby the Respondent, Dr. Selvarajah Suganthan, was unanimously found guilty of all six charges preferred against him.

2. The disciplinary proceedings arose from a complaint made by Mr. Masilamani Uthayakumar, the father of the late Mr. Uthayakumar Vinson, concerning the medical care afforded to his son at the District General Hospital, Kilinochchi, during the period from 20th May 2013 to 21st May 2013. At the material time, the Respondent was functioning as a Medical Officer covering the Out-Patient Department and the Emergency Treatment Unit of the said Hospital.
3. Following the conclusion of the inquiry, the Committee found Charges 1 to 4 proved in respect of the Respondent's failures relating to the clinical assessment of the patient, the recording of material clinical information, the wrongful recording of the patient as having been discharged, and the failure to give proper instructions for the patient's observation. The Committee further found that the cumulative conduct established under those charges brought the medical profession into disrepute and constituted unethical conduct contrary to the applicable professional standards, thereby establishing Charges 5 and 6.
4. Having pronounced its findings, the Committee afforded the Respondent an opportunity, in terms of Regulation 18(4) of the Medical (Disciplinary Procedure) Regulations, 1990, to address the Committee in mitigation and to show cause why action should not be taken against him under section 25(1)(a) of the Medical Ordinance.

B. MATTERS URGED IN MITIGATION

5. At the proceedings held on 29th August 2026, the Respondent was afforded an opportunity to place before the Committee any matters which he wished the Committee to consider in mitigation.
6. The Respondent referred to the evidence of a nursing officer who, according to him, had furnished an affidavit supportive of his position but had not been available to give evidence as she was undergoing training. He further stated that, at the material time, he had been covering both the Out-Patient Department and the Emergency Treatment Unit and maintained that he had seen the patient at the Out-Patient Department and thereafter directed that the patient be placed in the Emergency Treatment Unit.
7. The Respondent further referred to documentation which, according to him, recorded that the patient had gone missing. He maintained that the difficulty concerned the Bed Head Ticket and stated that he had not been able to inform the police following the patient's disappearance.

C. CONSIDERATION OF THE COMMITTEE

8. The Committee has considered the matters placed before it in mitigation. In substance, the Respondent relied on the circumstances in which he was required to cover more than one

clinical area, the role of the nursing staff, and the hospital documentation said to relate to the patient's disappearance. The Committee has given due weight to those matters. However, no plea of guilt, expression of remorse, undertaking as to future conduct, or other personal circumstance bearing independently on sentence was placed before the Committee.

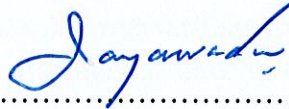
9. The Committee further observes that, under Section 25(1)(a) of the Medical Ordinance (Chapter 105), the Council is empowered, upon a finding of professional misconduct of the nature established in this inquiry, to impose such disciplinary sanction as the circumstances warrant.
10. In considering the appropriate sanction, the Committee has had particular regard to the seriousness of the misconduct proved. The findings were not limited to a single lapse or a mere deficiency in record keeping. Rather, they disclosed a series of connected failures in the assessment and management of the patient, the maintenance of proper clinical records, the supervision and observation of the patient, and the steps required to be taken once the patient was found to be missing.
11. The Committee also takes into account that the Respondent himself accepted during the inquiry that the patient had gone missing from the Emergency Treatment Unit and that the applicable procedure thereafter had not been followed. He further accepted that the patient's disappearance had not been properly recorded and that the matter had not been reported in accordance with the procedure which he acknowledged was applicable. The Committee is mindful that a disciplinary sanction is not imposed for punitive purposes alone. It must also serve to protect patients, uphold the standards expected of registered medical practitioners, deter similar misconduct, and maintain public confidence in the medical profession.
12. In those circumstances, the Committee is not satisfied that the matters relied on in mitigation are sufficient to significantly reduce the Respondent's personal professional responsibility for the failures that have been established.
13. Having regard to the nature and seriousness of the misconduct, the professional duties which were breached, and the need to maintain confidence in the standards of the medical profession, the Committee is of the view that a reprimand, or a short period of suspension, would not adequately reflect the gravity of the conduct proved.

D. ORDER

14. Having considered the attendant circumstances and the aggravating factors presented by the Prosecution through the evidence led at the inquiry, the Committee unanimously makes an Order that, in respect of each of Counts 1 to 6, the Respondent be suspended from the rights,

privileges and immunities conferred upon him by virtue of his registration as a medical practitioner for a period of three (03) years with effect from 17.10.2026.

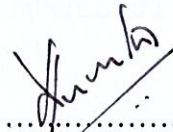
15. The suspensions imposed in respect of Counts 1 to 6 shall run concurrently.
16. **The Respondent is legally bound to comply with the disciplinary order issued by this Committee and this order should be strictly complied with. During the period of suspension of three years with effect from 17.10.2026, the respondent is legally prohibited from engaging in any form of medical practice, whether in the public or private sector, directly or indirectly, whether for remuneration or gratuitously, without obtaining prior written approval of the SLMC. Any non-compliance or deviation from this order will lead to erasure of the name of the respondent practitioner from the SLMC Register.**
17. The Respondent whose license has been suspended will not be automatically reinstated after the suspension period ends. The process generally requires a formal application and review. A written request and a verifying affidavit for reinstatement is mandatory.
18. Furthermore, the Registrar of the Sri Lanka Medical Council is hereby directed to transmit a copy of this disciplinary Order to the Director General of Health Services and the Secretary, Health Services Committee of the Public Service Commission, informing them that pursuant to the provisions of section 25(1)(a) of the Medical Ordinance (Chapter 105), the Respondent Practitioner's license to practice is suspended for a period of three (03) years with effect from 17.10.2026.



Prof. Jayantha Jayawardena
Chairman of the PCC



Prof. Manori Gamage
Member of the PCC



Dr. Chandana Dharmarathne
Member of the PCC



Dr. D.S. Samaraweera
Member of the PCC



Dr. Haritha Aluthge
Member of the PCC