

## PUBLIC NOTIFICATION

# Dr. Inkpen, Peter Clinton

May 26, 2026

Vernon, BC

1. **Nature of action:** The Inquiry Committee of the College of Physicians and Surgeons of BC (CPSBC) conducted an investigation into the conduct of Dr. Peter Clinton Inkpen, pursuant to section 33(1) of the *Health Professions Act, RSBC 1996, c.183 (HPA)*. At the time of this disposition, Dr. Inkpen had ceased to be a CPSBC registrant.

The Inquiry Committee was critical of Dr. Inkpen's conduct as outlined below and has determined to resolve all matters arising from the investigation pursuant to section 37(4) of the *HPA*.

2. **Effective date:** March 30, 2026
3. **Name of registrant:** Dr. Peter Clinton Inkpen
4. **Location of practice:** Vernon, BC
5. **Disposition:** Following the authorization of a disciplinary citation (the "Citation") pursuant to section 37 of the *HPA*, the Inquiry Committee concluded that the following disposition was appropriate:
  - a. Dr. Inkpen will sign Undertakings committing to never apply for reinstatement of his surrendered licence in British Columbia or apply for licensure in any other jurisdiction to practise medicine; and
  - b. CPSBC shall publish Dr. Inkpen's Undertakings and the Citation (appended to this public notification) on the CPSBC website.
6. **Rationale:** In considering an appropriate penalty, the Inquiry Committee noted Dr. Inkpen's admission of guilt to three counts of sexual assault involving one patient and two staff members, and his subsequent incarceration, constituted a serious contravention of the professional and ethical obligations of a CPSBC registrant. In considering that Dr. Inkpen is no longer a CPSBC registrant and had agreed to provide the Undertakings, the Inquiry Committee was satisfied that the disposition of this matter as outlined above was in the public interest.

*The College of Physicians and Surgeons of British Columbia is the licensing and regulatory body for all physicians and surgeons in the province. Governed by provincial legislation, CPSBC's role is to protect the public by establishing, monitoring and enforcing high standards of qualification and ethical practice.*

**Inquiries:**

Communications and Public Affairs

[communications@cpsbc.ca](mailto:communications@cpsbc.ca)

## **UNDERTAKINGS**

I, **DR. PETER INKPEN**, hereby give the following formal Undertakings to the College of Physicians and Surgeons of British Columbia (the "College") effective immediately:

1. I will not reapply for reinstatement of my surrendered license in British Columbia or apply for licensure in any other jurisdiction to practise medicine.
2. I authorize the College, in its sole discretion, to communicate the disposition of this complaint (and any other materials in its possession) to other regulatory and licensing authorities, or any person or body whom the College considers it appropriate to provide notice of these undertakings.
3. I provide my explicit permission for the College to publish the citation, the signed undertaking and a public notification of the outcome of this matter.
4. I agree that these Undertakings will remain in full force and effect until the Inquiry Committee of the College determines that they should be removed.
5. I agree that any breach of these Undertakings may constitute unprofessional conduct and may result in a disciplinary action under the *Health Professions Act*. I further acknowledge that these Undertakings would be admissible at such a disciplinary action.
6. I understand and agree that I have voluntarily entered into these Undertakings with full awareness of my rights and responsibilities and I have had the opportunity to seek independent legal advice with respect to those rights and responsibilities and the consequences of these Undertakings.

**SIGNED**

Dr. Peter Inkpen

**DATE**

March 28, 2026



College of Physicians and Surgeons of British Columbia

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**CITATION TO APPEAR**

**Section 37 of the *Health Professions Act*, RSBC 1996, c. 183**

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To: Dr. Peter Clinton Inkpen  
(via registered mail)

And to his legal counsel:

William Clark  
Harper Grey LLP  
3200 -650 West Georgia Street  
Vancouver, BC V6B 4P7

TAKE NOTICE that the Inquiry Committee of the College of Physicians & Surgeons of British Columbia (the "College") has directed me, the registrar, to issue a Citation under Section 37 of the *Health Professions Act* RSBC 1996, c.183 (*HPA*).

A Discipline Committee Panel will be appointed to conduct a hearing to inquire into your conduct, the circumstances of which are set out in the attached schedule, to determine if your conduct constitutes any matter set out under section 39(1) of the *HPA*.

AND FURTHER TAKE NOTICE that you are required to attend a hearing at the College, at a date and time which will be established by pre-hearing conference with the Discipline Committee Panel. We anticipate that the hearing will be completed electronically using a platform such as Zoom, but further details will be provided by the Discipline Committee Panel.

If you are unavailable on the dates set for the hearing, you may apply in writing to request a change in the date.

AND FURTHER TAKE NOTICE that section 38(4.1) of the HPA entitles you to an outline of the anticipated evidence from each of the witnesses that will be called and an opportunity to inspect any documentary evidence at least 14 days prior to the hearing. Your rights relating to the hearing can be found in the HPA and the College Bylaws.

AND FURTHER TAKE NOTICE that hearings are open to the public except where the Discipline Committee Panel determines that the proceedings, in whole or in part, should be closed (s. 38(3) of the HPA and s. 4-6(5) of the College Bylaws).

AND FURTHER TAKE NOTICE that at the hearing, legal counsel on behalf of the College will make submissions with respect to the appropriate action to be taken regarding your registration. This action that can be taken includes a reprimand, imposing limits or conditions on your practice, suspension or cancellation of your registration, or imposing a fine, pursuant to section 39(2) of the HPA.

**Non-Appearance by Respondent:** If you fail to appear at the date, time and place (or electronic platform) set for the hearing, the Discipline Hearing Panel is entitled to proceed with the hearing in your absence, pursuant to section 38(5).

The mailing address for the Discipline Hearing Panel for delivery is:

Attention – Discipline Hearing Panel  
College of Physicians and Surgeons of British Columbia  
300 – 669 Howe Street  
Vancouver, B.C., V6C 0B4

**SIGNED**

**DATE**

Heidi M. Oetter, MD  
Registrar

June 9, 2021

## SCHEDULE

### 1.0 Nature of the complaint and the alleged conduct to be inquired into:

#### 1.1 Background

1. At all material times the respondent, Dr. Inkpen, was a registrant in the College's "full-specialty" class, certified in Physical Medicine and Rehabilitation, with a private office in Vernon, British Columbia, and privileges at Vernon Jubilee Hospital ("Vernon Jubilee").
2. In or about March 2018, Dr. Inkpen was consulted at Vernon Jubilee respecting a female patient, [REDACTED] (the "Patient"), who had [REDACTED] [REDACTED] been suffering from acute chronic daily headaches for about six months.
3. Subsequent to the Patient's discharge from Vernon Jubilee, Dr. Inkpen continued to see the Patient regularly to monitor and treat her headaches, which included injections, and further provided services to address acute pain in the Patient's wrists and one hand.

#### 1.2 Invitation to participate in personal study

4. In or about Thursday, November 22, 2018, after regular appointments with the Patient, Dr. Inkpen told the Patient during an appointment that he was working on a research project, for which he wanted a volunteer to work with him. The Patient, wanting to help Dr. Inkpen, asked him to let her know when he was ready to proceed.

#### 1.3 The first meeting

5. On or about Wednesday, November 28, 2018, at or about 1:51 p.m., Dr. Inkpen sent the Patient a text message advising that he was going to move ahead with "that Ultrasound project" and advised that he would text her directly as the administrative staff was not usually involved in "educational endeavours". After advising the Patient that he was going to make ultrasound training and education videos, Dr. Inkpen agreed with the Patient to meet at his office at 3 p.m. that afternoon, so that he could "show you some vids i've done and orient you to my expectations, etc."
6. During their exchange of text messages on November 28, 2018, the Patient had advised Dr. Inkpen about her availability and her schedule, [REDACTED] [REDACTED]
7. The Patient met Dr. Inkpen at his office, which was closed at that time. In the examination room, Dr. Inkpen told the Patient they would start by looking at her stomach and abdominal area, asked her to take off her pants, and gave her a blanket or sheet. Dr. Inkpen applied an ultrasound device to the Patient's upper abdominal area and moved down to her lower abdominal area. Dr. Inkpen then put his hands to the sides of the Patient's underwear and moved it down, without asking for the Patient's consent, below her waist just above her groin area. Dr. Inkpen then applied the ultrasound device to that area, and near the end of the session said that he would have to focus on that more closely, or words to that effect.

8. Dr. Inkpen left the room to allow the Patient to get dressed. Before the Patient had her pants all the way back on, Dr. Inkpen re-entered the room without knocking.

**1.4 Electronic messaging to arrange for the second ultrasound session**

9. On or about Friday, November 30, 2018, at or about 7:10 p.m., Dr. Inkpen sent the following text message to the Patient:

Don't get too drunk with the girls tonight. I'll probably need you functional tomorrow afternoon for a scanning session!

10. The Patient and Dr. Inkpen then proceeded to exchange text messages where
  - a. the Patient advised that she had been taking "3 T3" (meaning three Tylenol 3s) every four hours for pain for four or five days;
  - b. the Patient and Dr. Inkpen had a casual exchange about each of them drinking beer;
  - c. Dr. Inkpen sent two "sticker" graphics, one showing Dr. Inkpen holding a glass of beer, and one showing Dr. Inkpen with the word, "Muahaha!"; and
  - d. Dr. Inkpen advised the patient, among other things, that she should meet him the next day "Probably around 2." He later texted, "2:30" instead.

**1.5 The second meeting**

11. On or about Saturday, December 1, 2018, the Patient met Dr. Inkpen at his office at or around 2:40 p.m. The office was closed at that time.
12. As the Patient was suffering pain from a headache, Dr. Inkpen first treated her for her headache.
13. After treating the Patient for her headache, Dr. Inkpen asked the Patient to get undressed to her underwear, gave her a sheet, and moved in and out of the room to look for a blanket while she was changing.
14. Dr. Inkpen then poured himself a beer and drank it, and offered a beer to the Patient, which the Patient declined at first and then accepted. Dr. Inkpen then poured himself a second beer and drank some of it.
15. The Patient lay down with her lower body facing Dr. Inkpen. He moved the Patient's underwear down, without asking for the Patient's consent. Dr. Inkpen applied gel and the ultrasound instrument on the Patient, below her waist just above her crotch. Dr. Inkpen asked the Patient to lay the other direction, and after the Patient moved, Dr. Inkpen moved the Patient's underwear down, without asking for the Patient's consent.
16. Dr. Inkpen lowered the Patient's underwear again, down on her thighs, without asking for her consent, exposing her entire genital area. Dr. Inkpen then moved the ultrasound instrument to, or immediately next to the Patient's clitoris.
17. The Patient had told Dr. Inkpen that she had to leave by 3:30 p.m. There was a clock in the room. When it reached 3:30 p.m., the Patient immediately said she had to go, or words to that effect.

18. When the Patient told Dr. Inkpen that she had to go, he tried to use a hand towel to wipe gel off the Patient's crotch. The Patient took the hand towel and wiped gel off of her pubic hair. Then she dressed and left.

## 2.0 Relevant professional standards

19. The CMA Code of Ethics and Professionalism (the "Code") articulates the ethical and professional commitments and responsibilities of the medical profession in British Columbia, among other provinces, and provides, *inter alia*, that a physician must,
- a. under Section B, "Never exploit the patient for personal advantage"; and
  - b. under Section C, in the context of the patient-physician relationship, "9. Ensure that any research to which you contribute is evaluated both scientifically and ethically and is approved by a research ethics board that adheres to current standards of practice. *When involved in research, obtain the informed consent of the research participant and advise prospective participants that they have the right to decline to participate or withdraw from the study at any time, without negatively affecting their ongoing care.*" (emphasis added)
20. The Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (2014) (the "TCPS 2") is a joint policy of Canada's three federal research agencies (the Canadian Institutes of Health Research (CIHR), the Natural Sciences and Engineering Research Council of Canada (NSERC), and the Social Sciences and Humanities Research Council of Canada (SSHRC) (the "Agencies")). The TCPS 2 expresses the Agencies' continuing commitment to promote the ethical conduct of research involving humans, informed by leading internal ethics norms. The TCPS 2 provides, *inter alia*,
- a. under Article 3.2, "Researchers shall provide to prospective patients ... full disclosure of all information necessary for making an informed decision to participate in a research project"; and
  - b. under Article 3.12, "Evidence of consent shall be contained either in a signed consent form or in documentation by the researcher of another appropriate means of consent".
21. The College's Practice Standard, "Boundary Violations in the Patient-Physician Relationship" (the "Boundary Standard") provides, *inter alia*,
- a. "It is the physician's responsibility to ensure that appropriate professional boundaries are maintained, regardless of how the patient may behave";
  - b. physician boundary violations include
    - i. sexual violations, including "sexual interactions", and
    - ii. social violations, including "asking patients to join... personal causes";
  - c. "Physicians must never place their interests above those of their patients";
  - d. "Sexual involvement of any kind is unacceptable in the patient-physician relationship"; and

- e. physicians “must”, among other things,
    - i. “Clearly explain to the patient the scope and the rationale for any examination, treatment or procedure, and answer any questions the patient may have.”
    - ii. “Give the patient privacy to undress/dress when it is required for the physical examination or procedure.”
    - iii. “Not assist the patient with the adjustment or removal of clothing unless the patient consents.”
    - iv. “Provide the patient with a gown or cloth to drape during the physical examination or procedure if clothing needs to be removed, and only expose the area specifically related to the physical examination or procedure. Frequently both a gown and a drape are required to ensure patient privacy and comfort.”
    - v. “Only touch the patient’s breasts and/or genitals when it is medically necessary.”
22. The College’s Practice Standard, “Physical Examinations and Procedures” (the “Examination Standard”) provides, *inter alia*,
- a. “Except in emergency situations, physicians must always obtain patient consent before proceeding with a physical examination or procedure, which includes clearly explaining the rationale for the physical examination or procedure and what it will involve.”
  - b. Physicians “must”, among other things,
    - i. “7. Give the patient privacy to undress/dress when it is required for the physical examination or procedure.”
    - ii. “8. Not assist the patient with the adjustment or removal of clothing unless the patient consents.”
    - iii. “9. Provide the patient with a gown or cloth to drape during the physical examination or procedure if disrobing is required, and only expose the area specifically related to the physical examination or procedure. Frequently both a gown and a drape are required to ensure patient privacy and comfort.”
    - iv. “10. Only touch the patient’s breasts and/or genitals when it is medically necessary.”

### 3.0 Conduct issues

23. Pursuant to s. 39(1) of the *Health Professions Act* (“HPA”), the Discipline Committee may determine, *inter alia*, that a respondent “(b) has not complied with a standard, limit or condition imposed under this Act,” or “(c) has committed professional misconduct or unprofessional conduct....”

24. The respondent
  - a. engaged in sexual misconduct, and further or alternatively, other professional misconduct, pursuant to s. 39(1)(c) of the HPA; and
  - b. further or alternatively, failed to comply with standards imposed under the HPA, pursuant to s. 39(1)(b) of the HPA.
25. In particular, Dr. Inkpen engaged in sexual misconduct, and/or breached the Boundary Standard, by exposing the Patient's genital area and using an ultrasound instrument to touch a sexual part of her body, specifically her clitoris or an area of her groin immediately next to her clitoris, where that touching was not of a clinical nature and appropriate to a service being provided or to research being conducted.
26. Further or alternatively, Dr. Inkpen engaged in professional misconduct, breached the Code, breached the TCPS 2 and/or breached the Boundary Standard, by having the Patient participate in a personal study without first obtaining her informed consent to, *inter alia*, physical examinations of sexual parts of her body.
27. Further or alternatively, Dr. Inkpen breached the TCPS 2 by failing to appropriately document evidence of the Patient's consent.
28. Further or alternatively, Dr. Inkpen engaged in professional misconduct, breached the Boundary Standard, and/or breached the Examination Standard, by *inter alia*
  - a. failing to maintain professional boundaries by
    - i. engaging in personal communications with the Patient, and/or
    - ii. drinking alcohol with the Patient, during or immediately prior to a physical examination where the Patient was disrobed;
  - b. failing to inquire if the Patient wished to have another person of her choice present during a physician examination, where the Patient would be disrobed;
  - c. failing to explain to the Patient the scope and rationale for the examination;
  - d. twice failing to give the Patient privacy to undress by entering the room while the Patient was still undressing;
  - e. on several occasions, adjusting the Patient's clothing and specifically pulling her underwear down, without the Patient's consent;
  - f. failing to properly drape the Patient and only expose the area specifically related to the examination, and instead exposing the Patient's genital area; and
  - g. touching the Patient's genital area when not medically necessary.