

SUMMARY

Dr. Emmanuel Kanetos (CPSO# 81021)

1. Disposition

On March 17, 2016, the Inquiries, Complaints and Reports Committee (“the Committee”) required Dr. Kanetos to appear before a panel of the Committee to be cautioned with respect to differential diagnosis, assessment, and management of children with persistent tachycardia.

2. Introduction

A family member of a patient complained to the College that Dr. Kanetos discharged the patient home from the emergency room despite the fact that her symptoms had not improved; failed to do an electrocardiogram (ECG) despite the patient’s change in heart rate; and failed to diagnose the underlying cardiac problem that ultimately resulted in the patient’s untimely death.

Dr. Kanetos stated that he reviewed her vital signs and noted a referral letter from a walk-in clinic, indicating that the patient was constipated, lethargic and vomiting, and asking to rule out volvulus or obstruction. He reviewed the patient’s symptoms and the patient’s family member informed him that the patient had had five episodes of vomiting the previous day, but that there was no blood in the vomit, and that she had been urinating less but had no respiratory symptoms or fever.

Dr. Kanetos indicated that when he examined the patient he explained to the patient’s family member that the patient would need investigations regarding her hydration and ordered an intravenous and requested blood work, a urine specimen and x-ray. During the course of the patient’s stay her condition improved and she was alert and active. He informed the patient’s family member about the results of the investigation and said that the patient likely had a viral infection and as her condition had improved she could be discharged.

Dr. Kanetos indicated that he suggested a follow up appointment with the pediatric clinic, gave the patient a prescription for Lactulose and advised the family member to continue hydration. He had no further involvement in the patient’s care after she was discharged from hospital and was unaware of any significant or concerning changes in the patient’s heart rate.

Dr. Kanetos stated that no one voiced any concerns regarding chest pain or shortness of breath and that the patient's respiratory rate and oxygen levels were well within the normal range. An ECG was therefore not performed. In this case, the patient did not have any symptoms suggestive of congestive heart failure.

3. Committee Process

A Family Practice Panel of the Committee, consisting of public and physician members, met to review the relevant records and documents related to the complaint. The Committee always has before it applicable legislation and regulations, along with policies that the College has developed, which reflect the College's professional expectations for physicians practising in Ontario. Current versions of these documents are available on the College's website at www.cpso.on.ca, under the heading "Policies & Publications."

4. Committee's Analysis

The Committee noted that Dr. Kanetos clearly failed to pay attention to the patient's vital signs. Specifically, the patient's heart rate remained at about the 90th percentile despite the fact that intravenous fluids were being administered to her. The acceptance of oral fluid does not necessarily indicate the resolution of a medical illness.

Dr. Kanetos should have been aware of this and furthermore should have considered cardiac causes in a patient with persistent tachycardia; he should have placed the patient on a cardiac monitor after failed resuscitation, and then he should have ordered an ECG, which may have shown ST-T wave changes (which represents cardiac pathology as either "normal" or "variant").

In the Committee's view, this case exemplifies inappropriate ER care; it is unacceptable to discharge a patient with abnormal, unexplained vital signs, especially after failed therapy. The Committee also noted that the patient's vital signs were not checked in the last four hours she was in the emergency room, though her heart rate was 148 beats per minute at 12:56 p.m.