

## **PUBLIC SUMMARY**

### **Dr. Mariam Youssef (CPSO# 90519)**

#### **1. Disposition**

On July 9, 2015, the Inquiries, Complaints and Reports Committee (“the Committee”) required Dr. Youssef (Family Medicine) to appear before a panel of the Committee to be cautioned with respect to performing timely assessments of patients when called about a change in their condition, following up with investigations, diagnosis and management of septic shock, and informing patients’ most responsible physicians about their condition.

#### **2. Introduction**

A family member of Patient A complained to the College that Dr. Youssef failed to recognize the signs and symptoms of sepsis in Patient A and treat the underlying infection in a timely manner, failed to transfer Patient A to the Intensive Care Unit (ICU), despite Patient A’s meeting the criteria, and allowed Patient A’s Do Not Resuscitate status to influence his treatment, all of which contributed to Patient A’s death

#### **3. Committee Process**

The Family Practice Panel of the Committee, consisting of both public and physician members, met to review the relevant records and documents related to the complaint, as well as College policies and the relevant legislation.

#### **4. Committee’s Analysis**

The Committee decided that the appropriate disposition in this case was to caution Dr. Youssef in person, as it was of the view that Dr. Youssef was not proactive in her management of Patient A. Specifically, Dr. Youssef failed to follow up on Patient A’s blood work. As a result, she failed to recognize early signs of sepsis in Patient A and consequently failed to facilitate Patient A’s transfer to the ICU for urgent treatment. Moreover, Dr. Youssef did not promptly convey Patient A’s blood work results to Patient A’s Most Responsible Physician, which led to Patient A remaining untreated for sepsis for approximately seven to eight hours.

Dr. Youssef informed the Committee that she has reflected significantly on her involvement in Patient A's care and, as a result, has made significant changes to her practice, including participating in a working group to help with early diagnoses of sepsis, in order to optimize patient care. While the Committee acknowledged that it is a positive step, it did not mitigate its concerns about Dr. Youssef's care in this case.