SUMMARY of the Decision of the Inquiries, Complaints and Reports Committee (the Committee)
(Information is available about the complaints process here and about the Committee here)

Dr. Yousef Ahmad Tawfiq Etoom (CPSO #85032)
Paediatric Emergency Medicine
(the Respondent)

INTRODUCTION

The Complainant is the mother of the Patient who was born prematurely and has a complex medical history. The Complainant took the Patient for assessment of concerning respiratory symptoms to a paediatric walk-in clinic where the Respondent was the most responsible physician (MRP) for the Patient's care. After a few hours at the clinic, the Patient was admitted to hospital and later transferred to the Hospital for Sick Children when his condition deteriorated significantly. The Complainant contacted the College of Physicians and Surgeons of Ontario (the College) to express concern about the Respondent's care and conduct.

COMPLAINANT'S CONCERNS

The Complainant is concerned that the Respondent failed to perform a proper assessment or provide appropriate medical care to her medically complex son, the Patient, failed to maintain his privacy and confidentiality, and lacked trustworthiness and altruism during two encounters in 2019.

COMMITTEE'S DECISION

An Internal Medicine Panel of the Committee considered this matter at its meeting of May 11, 2020. The Committee required the Respondent to attend at the College to be cautioned in person with respect to inadequate assessment of a high-risk, fragile patient in the paediatric walk-in clinic setting (including lack of assessment of vital signs, lack of documentation of assessment, allowing the patient to wait four hours in the clinic, and lack of reassessment to ensure stable vital signs before sending the patient for x-rays.) The Committee also issued advice to the Respondent regarding communications in the acute care setting, including the importance of acting respectfully toward patients and their families even under stressful circumstances and maintaining confidentiality during patient care discussions.

COMMITTEE'S ANALYSIS

Failed to perform a proper assessment or provide appropriate medical care to the Patient who is medically complex

The Committee could not determine from the chart whether the Respondent himself examined the Patient while in the clinic or left the examination to the resident. The notes contain documentation from the resident only, and no documentation of vital signs or oxygen saturation levels, which the Committee would have expected. In addition, there is no documentation of further assessment of the Patient before he was sent for x--rays. The Resident did document an assessment of the Patient but only after the child was transferred to the paediatric ward of the adjoining hospital. These shortcomings are concerning given the Respondent's roles as an experienced paediatric ER physician, a supervisor of another physician's post-graduate medical education, and the MRP in the Patient's care. The Committee also noted the Respondent's history of a caution related to clinical care in reaching its decision to caution the Respondent in this case.

Failed to maintain the Patient's privacy and confidentiality

The Committee noted that the Respondent and Complainant had divergent accounts of the manner in which the Respondent conveyed information to the Complainant in the waiting room of the clinic. The Committee also noted, however, that there appear to have been misunderstandings in the Respondent's discussions with the Complainant related to a request to transfer the Patient to hospital. Taking into consideration the totality of issues raised in this complaint with respect to the Respondent's communications, the Committee issued advice regarding the importance of maintaining confidentiality during patient care discussions.

Lacked trustworthiness and altruism

The Committee could not confirm the Complainant's assertion that the Respondent had previously told her not to bring the Patient to the clinic because he was too complex. There was a discussion between the Respondent and Complainant related to the Complainant's request that the Patient be seen by another physician. The Committee felt that the discussion was ill-advised in the circumstances of a parent dealing with an acutely ill child. For this reason, the Committee also issued advice to the Respondent with respect to communications in the acute care setting, including the importance of acting respectfully toward patients and their families even under stressful circumstances.