

SUMMARY

Dr. Thomas Gill (CPSO# 51849)

1. Disposition

On January 5, 2017, the Inquiries, Complaints and Reports Committee (“the Committee”) ordered general practitioner Dr. Gill to appear before a panel of the Committee to be cautioned with respect to his failure to examine a patient who was critically ill.

2. Introduction

A family member of a patient complained to the College about the care that the patient received when he attended the ER with reports of trouble breathing while Dr. Gill was on-call. Specifically, the family member was concerned that Dr. Gill did not attend to see or assess the patient, and rather, provided recommendations to the nurse over the telephone for an increase in acid reflux medication and to suggest to the patient that he try sleeping in a recliner.

Dr. Gill responded that he spoke with the nurse about the patient’s presentation, and based on the information provided, it was his view that the patient’s symptoms were likely related to an exacerbation of acid reflux caused by a recent reduction in his medication dose. Dr. Gill stated that he provided recommendations to the nurse to increase the medication and for the patient to follow up with his family physician. He noted that the record indicates that the patient was satisfied with this advice. Dr. Gill indicated that if he had known that the patient was unhappy with the outcome, he would have attended the hospital to assess him.

3. Committee Process

A 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 it was undisputed that Dr. Gill did not physically assess the patient, and that he was not present in the hospital at any time during the patient's attendance in the ER. Furthermore, the parties agreed that it was the triage nurse who checked the patient's vital signs, and obtained his information about his medical history and the issue/symptoms that had prompted his visit to the ER, and then spoke with Dr. Gill over the telephone.

The Committee pointed out that although Dr. Gill states that he understood that the patient and his family were satisfied with the patient's care, it is clear that they subsequently attended another ER where the patient was diagnosed with and treated for congestive heart failure.

The Committee was troubled by these events, given that the patient had significant risk factors for serious cardiac disease and clearly expressed to the nurse (as was documented in the record) that he was afraid to lie down as he felt he would stop breathing. The nurse's notes in the record revealed very little about the patient's medical history, which included chronic conditions which indicated that he had significant risk factors for serious cardiac disease; and the nurse's notes did not list the patient's many medications. In addition, while Dr. Gill stated that the patient's vital signs were fine, the ER record indicates that his vital signs were not normal.

The Committee was of the view that Dr. Gill made an error in judgment in relying on the nurse's assessment, which provided him with incomplete information upon which to make his decision not to attend to see and assess the patient in person, and not asking questions to ensure he had sufficient information to inform his decision. In the Committee's opinion, it was unreasonable for Dr. Gill to suggest that shortness of breath in this elderly patient with multiple co-morbidities was due to a reduction in his proton-pump inhibitor and an exacerbation of his reflux, and for him to base his opinion and recommendations in this case on limited information provided by the nurse over the telephone.