

SUMMARY

DR. ASAAD I. BAKBAK (CPSO# 63029)

1. Disposition

On August 14, 2017, the Inquiries, Complaints and Reports Committee (the Committee) required Dr. Bakbak (Cardiology and Internal Medicine) to appear before a panel of the Committee to be cautioned regarding his failure to send a patient with a third degree heart block and symptomatic bradycardia with a 10 second pause to the emergency room (ER). The Committee also required Dr. Bakbak to provide a written report, approximately 2-4 pages in length, reviewing the guidelines set out by the Canadian Cardiovascular Society with specific attention on when to consider pacemaker insertion.

2. Introduction

The patient complained to the College that Dr. Bakbak failed to inform her of/treat her for a third degree heart block identified via investigations; failed to advise her to proceed to the emergency room (ER) when discussing the results of the investigations on the telephone; and failed to assess her and manage her symptoms when she attended the ER two days later. The patient also expressed concern that Dr. Bakbak had exhibited a gender-based bias in his treatment of her cardiac issues.

Dr. Bakbak responded that when he initially saw the patient, he ordered immediate investigations, and that when he reviewed the results of the holter monitor with her on the telephone, he told her she had a third degree heart block and advised her to proceed to the ER if her symptoms worsened. He also indicated that he made arrangements for pacemaker implantation by another physician. Furthermore, Dr. Bakbak explained and that when he learned of the patient's ER visit two days later, he attended the ER, admitted her to the intensive care unit (ICU), and arranged for a pacemaker insertion the following day. Finally, Dr.

Bakbak indicated that approximately 50% of his patients are female, and that he endeavours to treat all of his patients equally, regardless of gender.

3. Committee Process

An Internal Medicine 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 carefully reviewed the EKG results that Dr. Bakbak had available during his consultation with the patient (which the patient's family physician had previously ordered), and found that they demonstrated a second degree heart block. The Committee found that these results, combined with the patient's reported symptoms of fatigue and the fact that there was no reversible cause (for example, acute myocardial infarction) of a heart block, should have led Dr. Bakbak to consider sending the patient to the ER that day for a permanent pacemaker.

The Committee was unable to determine exactly what Dr. Bakbak said to the patient when he reviewed the results of her holter monitor with her on the telephone. Regardless, the Committee concluded that Dr. Bakbak certainly should have referred the patient to the ER for immediate permanent pacemaker insertion by the time he received these results (if not before). The Committee felt that Dr. Bakbak's failure to do so was a serious error in management, as it was clear at that point that the patient had a symptomatic third degree heart block with prolonged pauses of 10 seconds, and that in failing to act expeditiously to treat her condition, he exposed the patient to a risk of harm.

With respect to the ER visit leading to the patient's admission, the Committee noted that the record confirms Dr. Bakbak attended and assessed the patient, and that he appropriately arranged her admission to the ICU.

The Committee also concluded that there was no information indicating that any kind of improper bias based on gender existed in this case.