

## **Management of life-threatening asthma in young child (08HDC04311, 31 March 2009)**

*House officer ~ Provincial public hospital ~ Paediatrics ~ Life-threatening asthma ~ Junior doctors ~ Seeking specialist assistance ~ Listening to parents ~ Vicarious liability ~ Right 4(1)*

The family of a 2½-year-old child complained about the care he received after he presented at hospital with a moderately severe exacerbation of asthma. Following initial assessment and treatment at the emergency department, his condition stabilised and he was transferred to the paediatric ward later that afternoon. Initially he improved, but overnight he experienced increasing respiratory distress and suffered a cardiorespiratory arrest at 4.30am. He was resuscitated and transferred to the intensive care unit, where he suffered three further cardiorespiratory arrests. Later that morning, the boy was airlifted to Starship Hospital. After he was stabilised, it became evident that he had suffered severe brain damage. Life support was withdrawn, and he died the following day.

It was held that the paediatric house officer attending the boy overnight breached Right 4(1), as he did not recognise the severity of the boy's condition and failed to respond appropriately. Owing to limited clinical experience, the house officer made an inappropriate decision to downgrade the boy's medication from nebulisers to spacers. Additionally, the house officer should have sought earlier assistance from the on-call paediatrician. When he did so, he omitted to relay key information about the boy's medication.

Junior doctors who accept responsibility for the care of patients should expect to have their actions scrutinised when their patient's care is compromised. Being held accountable for one's actions is the flipside of the privilege of registration as a health professional and accepting responsibility for the care of patients. Accountability goes with the territory, although it must be applied fairly, taking into account any systems factors.

Despite providing collegial support and a good orientation programme for junior paediatric doctors, the DHB had placed the house officer in a position where he was working beyond his depth. Accordingly, the DHB was held vicariously liable for the house officer's breach of the Code.

This case highlights the importance of seeking early assistance from senior medical staff, particularly where the doctor providing care is inexperienced. It also emphasises the importance of paying attention to parental concerns in cases of paediatric patients.