

March 25, Tuesday night

6:00 pm - Dr. Kariya is first to observe emergent situation. Writes "Breathing tenuous, pulse ox down...patient remains tenuous & son remains unrealistic. No new suggestions."

Isn't Dr. Kariya obligated to "suggest" intubation or tracheotomy for the tenuous breathing? Instead, Dr. Kariya disappears.

8:30 pm - Resident called in by me. Spoke with Rabbi Anemer who told him Jewish law mandated intubation. Why did I call resident into the room? Why did resident call Rabbi Anemer? WHY NO INTUBATION?

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**Patient abandonment**

Dr. Kariya finds full-code patient in respiratory distress. He understands he is at odds with family yet fails to honor family's wishes and provide needed life-sustaining treatment or to withhold it as medically ineffective pursuant to Maryland HCDA, hospital policy and medical standard of care; he simply walks away!

3/25 6 PM URGENT BREATHING TENUOUS, ↓ PAX WHEN SON GAVE HIM 100% O2  
ARRIVE 4/26-94 R20-26 BP 129/60 HR 79 PAX 92-94% 2/17/18  
SUTHERLAND RUSHTON MATH @ COR  
BUN 30 WBE 1821 H032 A87241 A27234  
PT REMAINS TENUOUS & SON REMAINS UNREALISTIC  
NO NEW SUGGESTIONS

Dr. Kariya fails to return as my father's condition is worsening. I see a resident entering an elevator and ask for help.

"Contacted Dr Shamim and discussed possibility of intubation. ICU Dr covering & Dr Kariya was also consulted and agrees (At this point will readdress code status due to poor prognosis) Will also keep pt on 100% NRB on suction prn."

- What did these doctors agree to? Was code status readdressed? Who readdressed it?

25 8:30 PM URGENT - MEDICINE & CORN

Dr was called by nursing staff / PT himself to EVAL PT for low Pox. PT's Pox was (83%) on BNC upon entering room, HIS HR (113), BP 120/67 AND RR 36. STAT ABG, PAX OK, NRB PLACED ON PT. PT REMAINS TENUOUS, HIS TACHYCARDIC & MILD.

STAT ABG 7.504 | 32.9 | 58.5 | 93% ON 100% NRB. CONTACTED DR. SHAMIM AND DISCUSSED POSS. OF WITHDRWAL ON CONTINUED ON. KARIYA WAS ALSO CONSULTED, AN AGREED AT THIS POINT WILL READDRESS CODE STATUS (2° TO POOR PROGNOSIS). WILL ALSO KEEP PT ON 100% NRB ON Suction Prn.

This was never stated.

PT'S SON EXPRESSED HE DOES NOT WANT RE-INTUBATION BUT IS BOUND BY STRICT JEWISH LAW. ASKED IF WE CAN SPEAK TO RABBI ANEMER TO RE-ADDRESS CODE STATUS.

This was stated repeatedly, resulting in call to rabbi.

Rabbi Anemer told Dr. Al-Quatami unequivocally that Jewish law required intubation to keep my father alive.

#1672