

Emergency physician reprimanded for providing intravenous anaesthetic to partner



Key messages from the case

Doctors are advised to avoid treating family members and close friends as it can be unsafe and inappropriate. Doing so is also against the recommendations of the Medical Board's Code of Conduct. When a doctor provides care for family members, they can lack objectivity and professional distance, and may fail to provide continuity of care. In addition, they also put colleagues in a difficult position, as this case illustrates.

Details of the decision

Treating family and friends

Dr H was employed as a visiting medical officer and Head of the Emergency Medicine Department at a regional hospital. He attended the emergency department with patient A, his partner, when he was off duty and administered an intravenous dose of propofol to treat her migraine.

Colleagues raised concerns about his care, and the fact that he had provided an intravenous general anaesthetic to a close family member.

Patient A did not have a regular GP, and she had not consulted a GP about her current condition. Dr H also accepted that there were other suitably qualified medical practitioners available to treat patient A in the Emergency Department at the time. Dr H argued that he was performance-managing the doctor on duty and did not trust him to provide appropriate care.

Dr H claimed that he believed the treatment fell within the exceptions for emergencies or isolated settings.

The disciplinary committee that considered the matter concluded that Dr H's conduct breached of the guidelines against self-treatment or treating family members. The situation was not an emergency, nor was it an isolated setting where no other help was available.

Dr H told the committee that since his initial response he had reflected on his actions, read the code of conduct and relevant guidelines and changed his view about the appropriateness of his conduct.

Outcome

The committee found that Dr H's conduct amounted to unsatisfactory professional conduct.

The committee was satisfied that Dr H understood the issues and would not treat family members in future.

Dr H was reprimanded.

Key lessons

Avoid treating anyone with whom you have a close personal relationship, except in an emergency or where there is no other help available.

Ensure you have your own GP and encourage family members to have their own GP who can provide objectivity and continuity of care.

If you do ever need to provide treatment in an emergency situation, document your treatment carefully and refer to another practitioner as soon as possible.

References and further reading

Avant factsheet – [Treating family members, friends or staff](#)

Avant article – [“But it’s just a script”: prescribing requests from family and friends](#)

Medical Council of NSW – [Guideline for self-treatment and treating family members](#)

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