

March 25, Tuesday night

6:00 pm - Dr. Kariya is first to observe emergent situation. He writes, "Breathing tenuous, pulse oximetry down...Patient remains tenuous and son remains unrealistic. No new suggestions."

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

8:30 pm - Previously uninvolved 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 documents irreconcilable difference with family, yet fails to provide needed life-sustaining treatment, or to withhold it as medically ineffective pursuant to [state law](#) and [hospital policy](#). He simply walks away!

3/25 6 PM BREATHING TENUOUS, PAX WHEN SON GAVE HIM 105 CHLRS
ATRIAL HR 108-94 R20-26 BP 129/60 179/79 PAX 92-94 % 3/1.7/1.8
STRIBERD RUGS + RUGS + COR
BUN 30 WBE 18.1 H932 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 plead for help.

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

- What did these doctors agree to?
- Was code status readdressed?
- Who readdressed it?
- What was Israel Neustadter's code status?
- What about intubation for respiratory distress?

25 8:30 PM ICU - MEDICINE & COR
8:30 AM CALLED BY NURSING STAFF / PT HIMSELF TO EVAL PT FOR LOW PAX. PT'S PAX WAS (83%) ON 6LNC UPON ENTERING ROOM, HIS HR (113), BP 120/67 AND RR 36. STAT ABG, PAX 92% NOT OXIDIZED AND 100% NRB PLACED ON PT. PT REMAINS TENUOUS W/ 2 PRN, HS TACHYCARDIC & MILD. STAT ABG 7.504 / 32.9 / 58.5 / 93% ON 100% NRB. CONTACTED DR. SHAMIM AND DISCUSSED POSS. OF WITHDRAWAL ON CONTINUOUS. DR. KARIYA WAS ALSO CONSULTED, AGREED AT THIS POINT WILL READDRESS CODE STATUS (DUE TO POOR PROGNOSIS). WILL ALSO KEEP PT ON 100% NRB AND Suction PRN.

Never "expressed."

Stated repeatedly, resulting in resident's request to call rabbi.

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.

Rabbi Anemer testified he told doctor that Jewish law required intubation to prolong life as much as possible, and it is what my father would want as well. The doctor said he understood.