

There's An Emergency While I'm On Vacation: What Do I Do?

CLINICAL CASE

Dr. Cabello, a radiologist, with 25 years of experience, is traveling on a domestic commercial flight with his family for a vacation. While waiting at the airport he has a bite to eat and 2 beers. Before boarding the plane, he decides to take 5mg of diazepam to ease his anxiety about flying. He intends to sleep for the majority of the flight. About an hour into the flight, with approximately thirty minutes til landing, he is awakened by an announcement from the cabin crew over the intercom requesting the presence of a doctor, with no further information. Dr. Cabello thinks that, on the one hand, his speciality is not directly related to handling medical emergencies, and that , moreover, he is not in the best condition at the moment to provide medical assistance. He tells himself, “surely, there is another doctor on board who would be more useful”.

A few minutes later, the crew again makes an announcement requesting a doctor over the intercom. His children, seated in front of him, encourage him to volunteer to assist with whatever the emergency may be. Dr. Cabello replies that there are surely other doctors on board who haven't come forward yet, but will likely do so now. Again, a minute later, another announcement is made urgently requesting a doctor or healthcare professional because a passenger lost consciousness. Dr. Cabello begins to think that he should go and help, as it appears that there may not be any other physicians or medical personnel on the flight. At the same time, he hesitates because he is not up to date on managing medical emergencies, or cardiopulmonary resuscitation. Additionally, he feels somewhat impaired by the alcohol and benzodiazepine. Faced with this dilemma, he contemplates whether he should assist the patient or not.

ETHICAL ANALYSIS OF THE CASE

Dr. Cabello doubts whether he has the knowledge and expertise to treat the unconscious passenger and therefore is trying to avoid causing harm. He believes it would be better for the passenger to be treated by another physician or even a clinical nurse. He assumes this would be the most prudent course of action, especially given that he does not feel fully capable at the moment due to his possible minor impairment. However, if no other physician is available his assistance, even if not optimal, could still be beneficial, as the patient may not receive help otherwise.

The main conflict here arises between the duty to provide assistance and the radiologist's own concern that he does not feel fully capable of caring for the patient. Alongside this ethical dilemma, it should be noted that failure to render assistance is addressed in both the Criminal Code and the Medical Code Of Ethics. Both establish the obligation for physicians to volunteer when medical assistance is requested outside their professional settings. Nevertheless, situations may arise in which the physician does not feel adequately prepared to assist the patient, and fears a fatal outcome, or

has concerns about potential legal liability, such as the possibility of a malpractice claim arising from their actions. Some physicians also question whether their professional liability insurance would cover an intervention carried out outside their usual scope of practice.

POSSIBLE COURSES OF ACTION

Don't tell anyone he's a doctor. Ask his wife and children to not say anything. Avoid attending to the patient at all costs.

Assist the patient. Request that the crew bring all available medical resources (first-aid kit, defibrillator, possibility of intubation, medication, etc.) Then ask them to make another announcement requesting the presence of any healthcare professional, especially a nurse.

Perform an initial assessment of the patient. Check vital signs and level of consciousness, and determine whether he feels capable of carrying out any of the necessary procedures the patient requires.

If he doesn't feel capable of treating the passenger, explain that he is not a practicing physician and therefore cannot provide assistance.

If he doesn't feel able to provide care to the passenger, ask whether the cockpit crew can contact medical assistance that could provide guidance.

Even if he doesn't feel comfortable treating the passenger, he should appear confident and conceal his limitations so that it doesn't seem like he doesn't know what to do. Perform maneuvers with the patient and give the impression that he is "doing something" regardless of if he knows what should be done.

If he considers the situation to be serious, request that an ambulance be arranged to meet the passenger upon landing.

RECOMMENDED COURSES OF ACTION

Dr. Cabello should go to the affected passenger and assess their condition (vital signs, consciousness, etc.), while also gathering information about the medical resources available on board the aircraft. He should attempt to compile the passenger's medical history from family members (background, medication, etc.).

You must use all means at your disposal to assist the passenger based on your knowledge. You must provide assistance and medical attention according to your abilities, without being reckless. You should remain at their side, performing the procedures you feel qualified to perform and accompany them at all times.

At the same time, request for the airline staff, to request for any other healthcare professionals on board to identify themselves, especially nurses so that they may be called to assist in caring for the patient.

If you don't feel qualified to treat the passenger on your own, try contacting a doctor on the ground to guide you through any treatment.

If necessary, (depending on the severity of the patient's condition) request that an ambulance be waiting upon landing.

After your vacation, sign up for a course on attending to out-of-hospital emergencies and urgent care.

DISCUSSION

The code of Medical Ethics establishes that physicians must volunteer in the event of an emergency, using the resources available to provide assistance. It affirms the moral obligation to attend to any

patient in need and not to abandon a person at risk. This obligation becomes particularly significant when there is a serious threat to the patient's health or life.

All physicians, regardless of specialty are expected to be capable of providing initial emergency care; therefore it is important to remain up to date in the management of urgent situations. If a physician does not feel fully prepared to manage an emergency, they should seek assistance from other individuals or contact emergency medical services. While a physician working in intensive care has differing capabilities to those working in a laboratory this does not exempt them from assisting in a medical emergency. They should do everything reasonably within their ability to help the patient and remain with them at all times. Failure to do so, not only goes against their professional and ethical duty to respond to an emergency but could also result in criminal liability for failure to render assistance; this requires that there be a clear and serious danger to the patient, that the physician be aware of this situation, and that assistance could be provided without risk to the physician or to others.

Emergency care must remain consistent with the ethical principle of nonmaleficence. Physicians must avoid performing acts merely for the sake of doing something. Interventions should be limited to those known to benefit the patient, and avoid any actions that could cause additional harm. The ethical obligation to provide assistance does not require technical excellence, but rather an intervention that is proportionate to the physician's abilities and the resources available.

Sgd.: ASISA-Lavinia Bioethics and Health Law Committee
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