

香港醫務委員會
The Medical Council of Hong Kong

DISCIPLINARY INQUIRY
MEDICAL REGISTRATION ORDINANCE, CAP. 161

Defendant: Dr LEE Lee (李莉醫生) (Reg. No.: M10327)

Date of hearing: 24 April 2025 (Thursday)

Present at the hearing

Council Members/Assessors: Dr CHOI Kin, Gabriel
(Chairperson of the Inquiry Panel)
Prof. CHAN Ka-leung, SBS, JP
Dr LAI Hoi-ching, Jojo
Mr LAI Sze-wai, Alex
Mr LAI Kwan-ho, Raymond

Legal Adviser: Mr Edward SHUM

Defence Solicitor representing the Defendant: Ms Maureen LIU of Messrs. Howse Williams

Legal Officer representing the Secretary: Miss Phoebe YEUNG, Senior Government Counsel (Acting)

1. The charge against the Defendant, Dr LEE Lee, is:

“That she, being a registered medical practitioner, disregarded her professional responsibility to [REDACTED] (“the Patient”), in that she, on or about 7 November 2022, prescribed Augmentin, which belongs to the group of penicillin antibiotics, to the Patient when she knew or ought to have known that the Patient was allergic to penicillin.

In relation to the facts alleged, she has been guilty of misconduct in a professional respect.”

Facts of the case

2. The name of the Defendant has been included in the General Register from 27 September 1995 to the present. Her name has been included in the Specialist Register under the specialty of Obstetrics and Gynaecology since 2 May 2007.
3. Briefly stated, the Patient first consulted the Defendant at the Union Hospital (“UH”) Polyclinic in Tsuen Wan on 31 October 2022 complaining of vaginal pain. According to the medical records obtained from UH, the Defendant made the diagnosis of vulvitis and took a vaginal swab for bacterial culture in order to confirm whether the Patient had an infection. It was specifically noted down in the Progress Note for the consultation on 31 October 2022 that the Patient was “*allergic to penicillin*”.
4. The Laboratory Report issued by the Pathology Department of UH later in the day on 31 October 2022 then showed, amongst others, “[h]eavy growth of *Streptococcus agalactiae*” from bacterial culture of the vaginal swab, which was remarked to be “*susceptible to penicillin*”.
5. According to the Defendant’s submission to the Preliminary Investigation Committee (“PIC”) by her solicitors’ letter dated 15 September 2023:-

“...On 7 November 2022, there was no scheduled consultation with the patient but Dr. Lee was informed of the result of the bacterial culture, which was positive for Group B Streptococcus that is susceptible to Penicillin... Dr. Lee reviewed the sensitivity test results... and she intended to prescribe Augmentin,...to control the infection for the patient as soon as possible.

Having worked at the Polyclinic only for a few sessions by that time, Dr. Lee was not very familiar with the digital prescription system which contains safeguards against drug allergy incidents... Further, Dr. Lee could not prescribe the medicine via the digital prescription system, which required an entry of a consultation on the same date for a prescription to be made. Dr. Lee... issued a separate prescription letter.

Dr. Lee prescribed Augmentin 1g twice a day for 5 days for the patient to be picked up from the Polyclinic...The patient collected the Augmentin tablets on 7 November 2022.”

6. According to the Patient's husband, whose evidence in this respect is not challenged by the Defendant, the Patient took the Augmentin and developed allergic reactions later in the evening of 7 November 2022. The Patient was diagnosed with drug allergy on 8 November 2022 and was treated with injection, oral medication and calamine lotion.
7. The Patient's husband subsequently lodged this complaint against the Defendant with the Secretary of the Medical Council.

Burden and Standard of Proof

8. We bear in mind that the burden of proof is always on the Secretary and the Defendant does not have to prove her innocence. We also bear in mind that the standard of proof for disciplinary proceedings is the preponderance of probability. However, the more serious the act or omission alleged, the more inherently improbable must it be regarded. Therefore, the more inherently improbable it is regarded, the more compelling the evidence is required to prove it on the balance of probabilities.
9. There is no doubt that the allegation against the Defendant here is a serious one. Indeed, it is always a serious matter to accuse a registered medical practitioner of misconduct in a professional respect. Therefore, we need to look at all the evidence and to consider and determine the disciplinary charge against her carefully.

Findings of the Inquiry Panel

10. The Defendant admits the factual particulars of the disciplinary charge against her. It remains however for us to consider all the evidence and determine whether she has been guilty of misconduct in a professional respect.
11. Patients are entitled to, and they often do, rely on doctors to exercise reasonable care and competence in avoiding prescription of drug to which they have a known allergy.

12. The Defendant accepted that she knew or ought to have known that the Patient was allergic to penicillin.
13. In a patient with a reported allergy to a particular drug or class of drugs, the risk of having an allergic reaction after taking the same drug or class of drug would be high. Allergic reaction to drug can also be very serious and potentially life threatening.
14. Augmentin belongs to the group of penicillin antibiotics. Prescription of Augmentin to the Patient, whom the Defendant ought to have known was allergic to penicillin, was inappropriate and unsafe. In our view, if the Defendant had taken adequate note of the Patient's history of allergy, she ought to have considered whether there were safer alternatives than penicillin.
15. In our view, the Defendant's conduct during the subject incident had fallen below the standards expected of registered medical practitioners. Accordingly, we find the Defendant guilty of misconduct in a professional respect as charged.

Sentencing

16. The Defendant has a clear disciplinary record.
17. In line with our published policy, we shall give the Defendant credit in sentencing for her frank admission and full cooperation throughout these disciplinary proceedings.
18. We bear in mind that the primary purpose of a disciplinary order is not to punish the Defendant but to protect the public from persons who are unfit to practise medicine and to maintain public confidence in the medical profession by upholding its high standards and good reputation.

19. We appreciate the Defendant's well intention to prescribe medication for treating the Patient's infection as soon as practicable.
20. We are told in mitigation that the Defendant had taken prompt remedial measures after the subject incident to ensure safe prescription and dispensation of drugs. Since the incident, the Defendant has taken extra caution in reviewing her patients' allergy history. In addition to constantly reminding herself to check with each patient her allergy history at each consultation prior to prescribing medicines, she would ensure that she is familiar with dispensing and prescription system of each clinic with which she works.
21. We accept that the Defendant has learnt her lesson and we appreciate the effort that the Defendant had made after the subject incident. We wish to remind the Defendant that the best prescription and dispensation system still requires the vigilance of those who put it into practice.
22. Taking into consideration the nature and gravity of this case and what we have read and heard in mitigation, we order that the Defendant be reprimanded.

Remark

23. The name of the Defendant is included in the Specialist Register under the specialty of Obstetrics and Gynaecology. We shall leave it to the Education and Accreditation Committee to decide whether anything needs to be done in respect of her specialist registration.

Dr CHOI Kin, Gabriel
Chairperson of the Inquiry Panel
The Medical Council of Hong Kong