



香港牙醫管理委員會
The Dental Council of Hong Kong

Disciplinary Inquiry under s.18 of DRO

Defendant: Dr HUI Ka-kit 許家傑牙科醫生 (Reg. No. D03737)

Date of hearing: 21 August 2014

1. The Defendant, Dr HUI Ka-kit, is charged that :

“He, being a registered dentist, on or about 28 May 2012, disregarded his professional responsibility to adequately treat and care for his patient [REDACTED] [REDACTED] (“the Patient”), or otherwise neglected his professional duties to her in that, when the Patient had swallowed an endodontic file during treatment he failed to take proper and adequate follow-up action in that he failed to set out the size and shape of the endodontic file in his referral letter for emergency treatment; and that in relation to the facts alleged he has been guilty of unprofessional conduct.”

Facts of the case

2. On 10 May 2012, the patient first consulted the Defendant. At that time, she was 4 years and 5 months old. Dental treatment commenced on the same day. At the 3rd consultation on 28 May 2012, treatment was performed using a metal endodontic file. During treatment, the endodontic file was accidentally dropped and was swallowed by the patient. The Defendant immediately advised the patient’s parents to take the patient by taxi to the Accident and Emergency Department of a nearby hospital for investigation and treatment.
3. The Defendant gave a referral letter to the father for him to show the hospital. The referral letter stated that the patient had swallowed a metal endodontic file and requested that suitable imaging and management be given. The Defendant’s name and mobile telephone number were also prominently set out in the referral letter.
4. The patient was admitted to the hospital on 28 May 2012, and discharged on 30 May 2012. Radiographs of the patient’s thoracic, abdominal and pelvic regions

were taken, and no endodontic file was found by the hospital. Transanal enema was given. The patient was eventually discharged, and no endodontic file was recovered.

Findings of the Council

5. The facts are not disputed, and are admitted by the Defendant.
6. The question for us to consider is whether the referral letter was inadequate in that it did not set out the size and shape of the endodontic file.
7. The purpose of a referral letter is to set out with reasonable clarity the problem which has to be dealt with, so that the person to whom the patient is referred will know what action is required to be taken to deal with the problem. The amount of information required will depend on the complexity of the problem and the urgency of the situation. The paramount consideration is the well-being of the patient and timely resolution of the problem.
8. In the present case, the problem is simple. The referral letter clearly described the swallowed object as “metal endodontic file”. This gave clear information as to the type of imaging required for locating the swallowed object. The Defendant’s mobile telephone number was also provided, so that he could be readily contacted for any further information required.
9. The Legal Officer submitted that it was important for the Defendant to describe the shape and size of the swallowed endodontic file, as the treating doctors not being dentists might not know how an endodontic file looked like. We disagree. Even if the treating doctor did not know what the swallowed endodontic file looked like, a simple internet search would have showed detailed descriptions and clear photographs of endodontic files. If necessary, the treating doctor could simply call the Defendant and ask about the shape and size of the swallowed endodontic file.
10. In any case, metal objects will show up in radiographs. All that was required was for radiographs to be taken, in order to find out whether any metal object was lodged in the patient’s gastrointestinal or respiratory tract. This was duly done at the hospital. Enema was also given, so as to facilitate excretion of the swallowed object.
11. While with hindsight it is easy to counsel for perfection, we must bear in mind that the whole purpose of a referral letter in an emergency situation is to provide essential information for the treating doctor to provide timely management to the patient, instead of writing down every possible detail as if it were a medical report written at leisure.
12. We are of the view that the referral letter in this case gave sufficient information necessary for management of the patient’s problem. The Defendant’s conduct is

not below the standard expected of registered dentists. In the circumstances, we find him not guilty of the charge.

Other remarks

13. In the course of this inquiry, an issue was raised about the sufficiency of the particulars of the charge. We should give some guidance as to the charges in future cases.
14. A disciplinary charge must give sufficient particulars of the allegations against the defendant, so that the defendant can know with reasonable clarity the allegations which he has to meet. It is not sufficient for a charge to state vaguely that the treatment provided by the defendant was improper or inadequate, without indicating in which aspect the treatment was inadequate or improper.
15. In simple terms, the prosecution must nail its colours to the mast. This is necessary for the defendant to prepare for the inquiry, and for the adjudicating tribunal to make a proper determination on the charge in the inquiry.
16. A properly formulated charge will also assist the prosecution, by bringing into clear focus the allegations which have to be proven by evidence at the inquiry. To achieve this, the charge must be carefully scrutinized at an early stage, so that the relevant evidence can be obtained before the inquiry. If it is left until too late, it may be discovered that there is no evidence to prove some aspects of the allegations and adjournment of the inquiry may be required in order to obtain the necessary evidence.



Dr Joseph CHAN, JP
Temporary Chairman,
Dental Council of Hong Kong