



February 9, 2017

**Via Attorney of Record**

Christopher L. Po, M.D.  
1456 Colts Neck Road  
Loris, SC 29569

Dear Dr. Po:

The North Carolina Medical Board (“Board”) has concluded its investigation regarding the professional liability payment paid on your behalf on June 5, 2015. It is the Board’s decision not to commence formal proceedings against your license to practice medicine at this time. However, the Board did vote to issue you this public letter of concern. The Board does not consider a public letter of concern to be a disciplinary action or a limitation or restriction on your license.

The Board is concerned that you may have provided substandard care to Patient A. Patient A was a thirty-one year old male with end-stage renal disease who presented to an Emergency Department (“ED”) with a cough, fever, and acute pain. The initial presumptive diagnosis was sepsis and he was given cefazolin and gentamicin. Patient A’s allergy history was noted to include penicillin and vancomycin. Patient A subsequently underwent two transfers of care. It was indicated during these transfers, by various physicians, that Patient A would require intravenous vancomycin to treat sepsis. Given Patient A’s ambiguous allergy history, the evening hospitalist made the decision to defer to you the decision regarding treatment of Patient A with vancomycin as you had been Patient A’s treating nephrologist in the past. As Patient A’s nephrologist, you were aware he had received vancomycin in the past (both intravenously and intraperitoneally) and had previously developed tachycardia and dyspnea after receiving vancomycin. You stated you had concluded Patient A’s reaction to the most recent exposure to vancomycin was not a true allergic reaction, but rather “red man syndrome” and that Patient A now required vancomycin to successfully treat the sepsis. Within minutes of the start of the vancomycin infusion Patient A developed tachycardia, dyspnea, and ultimately cardiac arrest, from which he could not be revived.

The Board is concerned that your care of Patient A may have failed to conform to the standards of acceptable and prevailing medical practice in North Carolina. The Board urges you to take steps to ensure the conduct giving rise to the Board’s concerns does not happen again. Otherwise, the Board may vote to commence formal disciplinary proceedings against your license to practice medicine. If that happens, this letter may be entered into evidence in determining the appropriate discipline.

Christopher L. Po, M.D.  
February 9, 2017  
Page Two

This letter is a public record within the meaning of Chapter 132 of the North Carolina General Statutes and is subject to public inspection and dissemination as required by that law. It will be reported to the Federation of State Medical Boards; however, it will not be reported to the National Practitioner Data Bank.

Sincerely,

A handwritten signature in cursive script that reads "Eleanor E. Greene, M.D.".

Eleanor E. Greene, M.D.  
President

EEG/MJ/coc

Consent and Waiver

I, Christopher L. Po, M.D. would like to resolve this matter without the need for more formal proceedings and consent to the Board's issuance of a public letter of concern in resolution of my current matter.

Consented to this the 8 day of FEBRUARY, 2017.



Christopher L. Po, M.D.

State of SOUTH CAROLINA

County of HORRY

I, Carol T. Richardson, a Notary Public for the above named County and State, do hereby certify that Christopher L. Po, M.D. personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal

this the 8<sup>th</sup> day of February, 2017.

Carol T. Richardson  
Notary Public

(SEAL)

My Commission Expires: October 15, 2024