SPSO decision report



Case:	201305763, Forth Valley NHS Board
Sector:	health
Subject:	clinical treatment / diagnosis
Outcome:	not upheld, recommendations

Summary

Mr C had an accident at work and injured his shoulder. He was diagnosed with a sprain at A&E in Falkirk and District Royal Infirmary. No x-ray was taken and Mr C was told to see his GP if the pain continued. Mr C was referred to a specialist who suspected that he might have a rotator cuff tear (a tear to one of the tendons that stabilise the shoulder). The specialist arranged for a scan but no tear was found. Some time later, Mr C was referred to another specialist at Forth Valley Royal Hospital who carried out further tests and a second scan. Mr C was diagnosed with impingement syndrome, a condition where the bone and tendons of the shoulder rub together painfully. He was offered surgery and advised that this had a 60 to 70 percent chance of success. During the operation, the surgeon discovered that Mr C had an abnormality in his shoulder where pieces of bone had not fused together when he was a child. There was an unfused fragment of bone about three centimetres long, which the surgeon could not remove without causing damage. Mr C was advised that if his symptoms did not improve after the operation, he would require further surgery to fix the piece of bone using a screw. Although he was still in pain, Mr C decided not to go ahead with another operation. He then complained that an

x-ray or other imaging should have been carried out earlier as this would have highlighted the unfused fragment of bone. He was particularly concerned his surgery went ahead without this being done.

After taking independent advice from two of our medical advisers, we found that normal x-rays would not have shown the unfused piece of bone in Mr C's shoulder, as it would only have been visible on a special view x-ray that would not normally be requested. Although our accident and emergency adviser told us x-rays should have been taken after the accident and a review at the fracture clinic offered if Mr C's pain did not get better, our surgical specialist said that, even if it had been identified, an unfused piece of bone like that would not have been considered to be the cause of his pain and the treatment would have remained the same. This is because unfused fragments of bone in the shoulder do not usually cause any symptoms. Our surgical specialist also told us that

x-rays would not be carried out before such surgery and that scans are commonly used.

We found that Mr C's shoulder should have been x-rayed after his accident but there was no evidence that this would have resulted in an earlier diagnosis of the unfused piece of bone. We also considered it unlikely that an earlier diagnosis would have changed the treatment he received. Although we did not uphold his complaint, we made a recommendation.

Recommendations

We recommended that the board:

• take steps to ensure that A&E staff are made aware of our adviser's comments on x-rays and the offer of review at the fracture clinic in this case.