

## SPSO decision report

**Case:** 201508687, Greater Glasgow and Clyde NHS Board

**Sector:** health

**Subject:** clinical treatment / diagnosis

**Outcome:** not upheld, no recommendations

### Summary

Mrs C said that she attended Gartnavel General Hospital in 2012 because of a persistent chronic cough. She was told that there were a number of potential causes for this but that a high resolution computerised tomography (HRCT) scan and other tests had been ordered to exclude any structural lung disease, in particular bronchiectasis (a chronic lung condition). The required tests were carried out and reported at clinic in January 2013. At this stage, it appeared that there was no evidence of bronchiectasis.

Mrs C said that she remained unwell and a repeat HRCT was ordered. Following this, she was told in September 2014 that she had bronchiectasis. Mrs C complained to the board that they had failed to diagnose her in early 2013 and that as a consequence she did not receive the required treatment. The board, however, maintained that she had been treated appropriately and that changes occurred in the period after her first HRCT.

We took independent advice from a consultant in respiratory medicine and we found that HRCT scanning was the 'gold standard' to determine whether or not bronchiectasis was present. On the first such scan there was no such evidence of this but this was found to be the case in 2014. While the impact of the diagnosis for Mrs C has been great, we found no evidence to suggest that this was as a consequence of any shortcoming on the part of the board.