

SPSO decision report

Case: 201508885, Highland NHS Board
Sector: health
Subject: clinical treatment / diagnosis
Outcome: some upheld, recommendations

Summary

Miss C attended her GP after injuring her leg in a fall. Her pharmacist thought she might have a deep vein thrombosis (DVT) but after examination she was diagnosed as having a calf strain. However, her pain continued and the next day she attended Raigmore Hospital. She was diagnosed with a soft tissue injury to her lower leg. Over the next few days Miss C made three further visits to the A&E department and on her second visit she was seen by a nurse practitioner. A fracture was diagnosed and she was put in plaster. It was not until after another two visits that serious circulation problems were diagnosed but by this time, Miss C's leg was so affected that it required to be amputated below the knee.

We took independent advice from a consultant in emergency medicine. We found that the diagnosis of a soft tissue injury after the first visit to hospital had been a reasonable one. Miss C had been thoroughly and appropriately examined. The possibility of a DVT had been considered but there was no evidence of this. However, after her second unplanned visit to the emergency department, she should have been seen by a more senior doctor rather than a nurse practitioner. Her subsequent visits should also have been treated more seriously and a senior emergency doctor should have been involved. This did not happen and thus there was delay in diagnosing Miss C's condition. We upheld this aspect of the complaint.

Miss C also complained that the board failed to fully respond to points raised in her complaint and that they provided inaccurate information. The adviser said that he could see no evidence that the correspondence contained incorrect information and was satisfied with the action taken. We did not uphold this aspect of the complaint.

Recommendations

We recommended that the board:

- apologise for the fact when Miss C made further unplanned visits to the emergency department, she was not seen by a more senior emergency doctor; and
- consider the root cause of the delay in diagnosis and the benefits of introducing a system where 'unplanned return' patients to the emergency department are seen by a senior emergency department doctor.