

SPSO decision report

Case: 201606980, A Medical Practice in the Tayside NHS Board area
Sector: health
Subject: clinical treatment / diagnosis
Outcome: not upheld, no recommendations

Summary

Mr C complained to us that the medical practice had failed to provide appropriate care and treatment to his wife (Mrs A). He said that Mrs A had been seen by two GPs at the practice within three days with complaints of severe abdominal pain and dehydration, and that she had not taken food or fluids for a week. Mrs A deteriorated and was admitted to hospital where she underwent surgery for a small bowel obstruction. Mr C believed that the GPs at the practice should have realised that his wife was in severe pain and that she should have been admitted to hospital as an emergency.

The practice told us that on initial assessment, taking into account the medical history and examination findings, the GP did not believe there was any indication for a hospital admission at that time. The GP felt it was reasonable to diagnose a possible flare of diverticulitis (a common disease of the digestive system). The GP prescribed appropriate medication and gave advice to contact the out-of-hours service if required. The second GP visit was due to Mrs A not taking her medication due to nausea and the inability to swallow. The GP was inclined to agree with the first diagnosis and decided that Mrs A could be managed at home if she could tolerate her medication. Advice was given to assist taking the medication but that a hospital admission would be considered if Mrs A was unable to comply with the treatment plan.

We took independent medical advice from a GP and concluded that the practice had provided a reasonable level of care. It was felt that at both consultations the GPs had carried out an appropriate history and examination of Mrs A. In particular there was assessment of her abdomen so as to rule out any acute problem necessitating emergency hospital admission. The prescribing appeared to be appropriate and the working diagnosis of a flare-up of pre-existing diverticulitis was not unreasonable. In addition, Mrs A was not showing symptoms or signs which necessitated emergency hospital admission. We did not uphold the complaints.