

SPSO decision report

Case: 201706364, Ayrshire and Arran NHS Board
Sector: health
Subject: clinical treatment / diagnosis
Decision: upheld, recommendations

Summary

Mr C was admitted to University Hospital Crosshouse with pain in his side, where he received scans and tests. He was discharged three days later with a diagnosis of non-specific abdominal pain. Mr C was admitted to hospital again a number of months later when he was diagnosed with acute appendicitis (inflammation of the appendix). Mr C complained that there was a failure to diagnose the appendicitis on his first admission.

We took independent advice from a surgeon. We found that there were clear symptoms that Mr C had appendicitis on his first admission. We found that, at a minimum, Mr C should have been alerted to the possibility of appendicitis and made aware of the symptoms to look out for. We upheld this aspect of Mr C's complaint.

Mr C also complained that the board did not provide a reasonable response to his complaint. We found that the response from the board failed to reasonably acknowledge that Mr C had symptoms of appendicitis on his first admission. We also considered that the board's complaint response failed to reasonably explain why Mr C was given a different diagnosis and why no follow-up appointment was arranged. We upheld this aspect of the complaint.

Recommendations

What we asked the organisation to do in this case:

- Apologise to Mr C for failing to diagnose appendicitis; failing to explain why they did not consider a diagnosis of appendicitis was appropriate or issue Mr C with a follow-up appointment; and for stating that Mr C's symptoms on his first admission were not indicative of appendicitis when they were indicative of appendicitis.

What we said should change to put things right in future:

- Feed back the findings of this investigation in a supportive way to the relevant clinical staff and identify how and why the failure occurred, taking into account any supervisory arrangements.
- Where imaging and blood tests indicate appendicitis but the board consider that the clinical picture does not support this, then the patient must be advised of the reasons why the clinical picture does not support this and a follow-up appointment should be arranged to review the patient.

We have asked the organisation to provide us with evidence that they have implemented the recommendations we have made on this case by the deadline we set.