## **SPSO decision report**



Case:	201201263, Forth Valley NHS Board
Sector:	health
Subject:	clinical treatment / diagnosis
Outcome:	not upheld, no recommendations

## Summary

Mrs C complained about the care and treatment the board provided to her son (Master C) after he was admitted to hospital with a perforated appendix. His appendix was removed but he later had to be re-admitted to hospital because of infections, and twice had further unplanned abdominal surgery to release fluid. It was almost a month before he recovered. Mrs C complained that the board failed to diagnose and correct her son's problem; failed to identify a leakage from the stump of the appendix which she felt suggested that the initial surgery had failed; denied her request for the attendance of a surgeon; and failed to provide appropriate nursing care for her son when his condition deteriorated. She also complained that the board did not respond to her complaint appropriately, by failing to answer her question about her son being transferred to a major paediatric surgical centre for treatment.

We took independent advice on this case from one of our medical advisers, who is a paediatric surgeon, and a nursing adviser. Our medical adviser said that the protracted course of events was more likely to be related to the advanced stage of the appendicitis when Master C reached hospital, rather than the care he received there. He explained that the leak was unlikely to have been caused by the initial surgery, but more likely to be associated with the severity of the underlying diagnosis. He was of the view that the board did not unreasonably deny Mrs C's request for a surgeon, that the timing of surgical review was reasonable and the review itself appeared to have been appropriate. Our nursing adviser indicated that staff took appropriate action in response to Mrs C's concerns about her son's deteriorating health and that they requested review as appropriate. We accepted the views of both our advisers.

Although we deemed the board's care and treatment of Master C to be reasonable we did, however, draw their attention to our medical adviser's view that that, given Master C's unplanned further operations, it would be reasonable for the board to discuss his case at a departmental meeting. On the matter of the response to Mrs C's complaint, we considered that the board did answer the question about why they decided to transfer Master C to another hospital and explained why they were unable to continue to treat him where he was.