

## SPSO decision report

**Case:** 201306170, A Medical Practice in the Greater Glasgow and Clyde NHS Board area  
**Sector:** health  
**Subject:** clinical treatment / diagnosis  
**Outcome:** upheld, recommendations

### Summary

Mr C's late father (Mr A) attended the medical practice and was seen by a GP who said that he had flu. He went back two days later because he had got worse, and was prescribed antibiotics. The GP told Mr A that if he did not improve he wanted to see him again and would arrange a chest x-ray. Mr A was also told that he not to go back to work.

The following day Mr C's brother visited Mr A and, given his condition, took him to the A&E department of the local hospital. He was admitted and a significant infection or inflammation was diagnosed, the cause of which was unclear at that stage. Later test results suggested that Mr A had bacterial endocarditis (an infection affecting the tissues that line the inside of the heart chambers). Mr A was in hospital for five weeks and was diagnosed with heart valve leakage, which needed surgery. Mr A was then transferred to another hospital where he died shortly after. Mr C felt that the GP's treatment of his father was unreasonable and might have contributed to his death.

We took independent advice from one of our medical advisers, who said that bacterial endocarditis is extremely rare, and most GPs will not diagnose it during their working lives. Accordingly, our adviser would not have expected the GP to diagnose this. They said that that the role of a GP in a patient with a flu-like illness is to take sufficient history and carry out a sufficient examination to exclude the likelihood of a cause other than a viral respiratory tract infection.

We found that there were clear failings in how the GP recorded his consultations with Mr A, which made it impossible to say that the clinical history taken and the examination of Mr A were sufficient. While the GP said he had examined Mr A, the evidence from the medical records did not establish this. Our adviser said that the GP's actions did not meet the standards of good medical practice, in accordance with General Medical Council (GMC) guidance, so we upheld Mr C's complaint about the care and treatment his father received from the practice. We were, however, unable to say whether the GP's actions possibly contributed to Mr A's death.

### Recommendations

We recommended that the practice:

- issue a written apology to Mr C and his family for the failings identified;
- ensure that the GP reflects on his assessment of patients presenting with flu-like illness; and
- ensure that the GP reflects on his clinical record-keeping and improves the information recorded so that it meets the standards of good medical practice in accordance with GMC guidance.