SPSO decision report

201904200, Tayside NHS Board
Health
Clinical treatment / diagnosis
not upheld, no recommendations

Summary

C complained that they were unreasonably diagnosed with bicuspid aortic valve (a type of abnormality in the aortic valve in the heart where the valve has only two small parts (leaflets), instead of the normal three). C was diagnosed with bicuspid aortic valve by the board and as a consequence, made significant changes to their life and retired early. C was later given a different diagnosis (when they were under the care of a different NHS board) and took the view that the diagnosis given previously was, therefore, incorrect.

We took independent clinical advice from a consultant general cardiologist (specialist in diseases and abnormalities of the heart) and a consultant cardiologist with particular experience in the reading of echocardiograms (a scan used to look at the heart and nearby blood vessels). We found that C had been diagnosed previously with bicuspid aortic valve when they were resident in Wales. Relevant information was passed to C's new GP when they moved to Scotland who made a referral to Perth Royal Infirmary for continued follow-up. A further echocardiogram was performed at that time, which was reasonable and appropriate. We confirmed that although interpretation of C's echocardiogram was not necessarily straightforward because of calcification (a build-up of calcium in body tissue) and the fact that C was not echogenic ('echogram-friendly'), the conclusions reached (of bicuspid aortic valve) and reported to C at the time were entirely reasonable in the circumstances.

While C's diagnosis had since been amended, this did not mean that the diagnosis given by the board was an unreasonable one. We noted that it was not unusual for diagnoses to be amended. Therefore, we did not uphold C's complaint.

