## **SPSO decision report**



Case:	201507463, Lothian NHS Board
Sector:	health
Subject:	clinical treatment / diagnosis
Outcome:	some upheld, recommendations

## Summary

Mr C complained that he sustained damage around his knee after surgery at the Royal Infirmary of Edinburgh. He also raised a concern that, after reporting pain and clicking in his knee some years later, a neurophysiologist (a medical professional specialised in the function of the nervous system) at the Western General Hospital should have referred him for nerve conduction tests (studies to check for abnormalities in the nerves). Mr C also complained that an orthopaedic surgeon at St John's Hospital did not refer him in a timely manner to physiotherapy and to the orthopaedic surgeon who had carried out his original surgery. Mr C was dissatisfied with the lack of communication in relation to his care and with the board's handling of his complaint.

We took independent advice from two consultant medical advisers, one specialised in orthopaedic surgery and the other in neurophysiology. We found no evidence that Mr C's surgery at the Royal Infirmary of Edinburgh was unreasonable although the consent procedure fell below a reasonable standard. We agreed that nerve conduction tests would not have provided anything further in the management of Mr C's care some years after the surgery and that this was evident when such tests were carried out and no abnormality was found. We did not consider that the orthopaedic surgeon had delayed unreasonably in referring Mr C to physiotherapy or to the surgeon who had carried out the knee surgery. Whilst we concluded that communication with Mr C about his care appeared reasonable overall, we upheld Mr C's complaint that the board failed to adhere to his request for electronic communication during their investigation of his complaint, and we made recommendations to the board.

## Recommendations

We recommended that the board:

- ensure that their current consent forms prompt the clinician to record that the advantages and risks of surgery have been discussed with the patient;
- apologise to Mr C for failing to adhere to his request for electronic communication;
- review the wording of their electronic information consent form to ensure that it is not contradictory; and
- take steps to ensure that patients' requests for electronic communication are properly logged and acted upon.