

Surgical prioritisation and care of patient with acute appendicitis (09HDC00836, 4 February 2010)

Provincial public hospital ~ Acute appendicitis ~ Peritonitis ~ Acute surgery ~ Prioritisation ~ Adequacy of information ~ Rights 4(1), 4(3), 6(1)(a), 6(1)(c), 6(1)(g)

A 59-year-old woman complained about the care she received from a public hospital. Upon developing acute abdominal pain and after initial assessment by her GP, she was admitted to hospital early the following morning. She was diagnosed with acute appendicitis, and scheduled for surgery that day.

Numerous delays ensued and the patient did not have surgery until 48 hours after admission. Although a laparoscopic procedure was planned, it was converted to an open procedure after a perforated appendix and localised peritonitis was found. She subsequently endured an extended hospital stay, required intravenous triple antibiotic therapy, and was discharged six days later with a referral for ongoing district nursing help with wound management.

The DHB's own guidelines for prioritising acute patients for surgery were not correctly applied. The patient was not provided with the acute surgery that she needed within a safe timeframe. While she waited for surgery she was not given antibiotics, which may have minimised the risk of further complications. It was held that the DHB breached Rights 4(1) and 4(3) of the Code.

In addition, the patient was not given sufficient information about the delays affecting the acute theatre (including her progress on the acute waiting list), the consequential increased operative risk, or the increased likelihood of conversion of the operation to an open procedure. After her operation the patient was not given an adequate explanation of the surgical findings or the reasons for her extended hospital stay and course of medication. The DHB was found to have breached Rights 6(1)(a), (c) and (g) of the Code.