

**Postoperative care of deteriorating
patient following abdominal surgery
(06HDC13334, 30 April 2008)**

Surgeon ~ Senior house officer ~ Private hospital ~ Laparoscopic surgery ~ Responsibility of private hospital ~ Postoperative care ~ Pain relief ~ Deteriorating patient ~ Communication ~ Competence review ~ Credentialling ~ Rights 4(1), 4(5)

A man complained about the postoperative care provided by a private hospital to his wife, who had had abdominal problems in the past. The woman consulted a surgeon, to whom she had been referred on previous occasions, with abdominal pain, nausea and anorexia. In the absence of a definite diagnosis, the surgeon discussed the need for a diagnostic laparoscopy. Accordingly, an exploratory laparoscopy was organised to include a probable appendectomy and a cholecystectomy.

After the surgery, the woman's condition deteriorated. Nursing staff caring for her were concerned about her condition and on several occasions notified the surgeon. Despite emergency surgery and aggressive management from intensive care units in two hospitals, the woman died a few days after the initial surgery.

The private hospital stated that concerns expressed about the surgeon's practice prior to the woman's operation had not reached a level where it was appropriate to take action to restrict his practice.

It was held that the surgeon breached Rights 4(1) and 4(5), as he failed to provide services with reasonable care and skill, and failed to co-operate with the nursing staff to ensure quality and continuity of care. The senior house officer on duty on the night the woman's condition worsened was held to have failed to assess the woman in person when called, and failed to provide services with reasonable care and skill, consequently breaching Right 4(1).

It was held that the private hospital took reasonable actions in the circumstances to credential the surgeon and ensure that he was competent to practise — noting, however, that the Medical Council's competence review process is no substitute for a rigorous credentialling process. Accordingly, the private hospital did not breach the Code.

The surgeon was referred to the Director of Proceedings, who decided not to issue proceedings.