

Monitoring, assessment and investigation of pain (14HDC00121, 24 June 2015)

District health board ~ Public hospital ~ Compartment syndrome ~ Monitoring ~ Pain assessment ~ Rights 4(1), 4(3)

A 29-year-old man was admitted to a public hospital following an accident in which he sustained a midshaft fracture of his right tibia and fibula. The following day he underwent surgical intramedullary (IM) nailing of his right tibia, and his leg was placed in a plaster cast.

In the days following surgery it became apparent that his pain was not being managed, and increasing levels of narcotic analgesia were required. The man's postoperative course was of gradually increasing pain with increasing analgesic demands, restlessness, and urine retention. However, the cause of his increasing pain and distress was not identified until the third day following surgery when a diagnosis of compartment syndrome was made.

It was held that the man's pain assessment and monitoring, most notably by the registered nurses responsible for his care, was below accepted standards. The man was not provided with services in a manner consistent with his needs and, accordingly, the DHB breached Right 4(3).

It was also held that there were insufficient efforts by the orthopaedics team to investigate the cause of the man's pain. This failure led to a delay in diagnosing his compartment syndrome. It was found that the DHB was responsible for this failure by multiple staff. Accordingly, the DHB failed to provide services to the man with reasonable care and skill and breached Right 4(1).