



**Office of the
Health Complaints
Commissioner
2007**

700-0701004 – Royal Hobart Hospital – Diagnosis of Pancreatic Necrosis

Part 6 Investigation. Finalised September 2007

The Commissioner received a complaint in January 2007 about a former resident (dec) of a group home. The resident was intellectually disabled. The complaint concerned the medical treatment the resident received at the Royal Hobart Hospital. The complaint was made by representatives of the community home. The Commissioner accepted that the representatives of the community home should be entitled to make the complaint under s22 (k) of the *Health Complaints Act 1995* on the basis they had a direct interest in the case. A number of concerns were identified from the complaint, which amongst other things included questions about whether medical staff had exercised due skill in treating the resident.

The resident had been on a waiting list to receive a gall bladder operation for the removal of gallstones for some time and whilst on the waiting list, became ill and subsequently died in hospital. The hospital had initially suspected she had contracted gastroenteritis and proceeded to treat the patient for that condition. Upon the patient's condition further deteriorating, she was subsequently diagnosed as suffering from pancreatic necrosis. By the time a correct diagnosis had been made, the patient was determined to be too ill for surgery to be undertaken and died whilst in hospital.

The Commissioner determined that an investigation should be conducted in relation to several aspects of the complaint, namely the diagnosis of her illness and whether the treating medical staff should have looked for a condition related to her gall bladder condition, rather than supposing that she was suffering from gastroenteritis. During the course of the investigation, several reports concerning the treatment provided to the patient were obtained from the hospital and an opinion in relation to some aspects of the treatment was also obtained from a general surgeon. Further discussions also took place with the community representatives as well as the resident's treating general practitioner during the course of the investigation.

The Commissioner was satisfied at the conclusion of the investigation that given the patient's presenting symptoms, medical staff had undertaken an appropriate clinical investigation for gastroenteritis. The Commissioner also found that had the gall bladder procedure been performed upon the resident's admission, this would have had no bearing on her prognosis because the condition from which she died was a separate condition to the one for which she had been placed on a waiting list.

