

**Misdiagnosis of acute heart disease as
gastro-oesophageal reflux
(04HDC11728, 29 November 2005)**

General practitioner ~ Accident and medical clinic ~ Myocardial infarction ~ Gastric pain ~ Atypical chest pain ~ Diagnosis ~ Examination and assessment ~ History-taking ~ Investigations ~ Documentation ~ Vicarious liability ~ Right 4(1)

A man complained about the care provided to his 77-year-old wife by a GP at an accident and medical clinic. The woman presented to the GP with abdominal and epigastric pain. Although the GP considered acute heart disease as a cause of the woman's pain, she ruled it out as a possibility without performing an electrocardiograph (ECG). The woman's condition did not improve over the next 48 hours, and the woman's husband called an ambulance. The ambulance officer put a portable cardiogram on the woman and told her husband that she "had major heart problems" and would need urgent hospitalisation. She was admitted to hospital and died the following day from a myocardial infarction.

It was held that the GP had an obligation to reasonably exclude a cardiac cause for the woman's pain. Although her presentation was atypical, the GP did not take adequate steps to exclude a cardiac cause (ie, ECG and blood tests to check for elevated cardiac enzymes), and breached Right 4(1).

It was also held that the clinic took such steps as were reasonably practicable to prevent the GP's breach of the Code, and was not vicariously liable for the GP's error in this case. The clinic's systems were adequate to support general practitioners in an accident and medical environment.