

**Assessment of elderly man who developed septic arthritis
(04HDC17230, 17 January 2006)**

General practitioner ~ Assessment ~ Septic arthritis ~ Documentation ~ Rights 4(1), 4(2)

A 73-year-old man was discharged from a public hospital following a short admission for assessment of long-standing cardiac and renal impairment. While in hospital he scraped his left shin and the injury required dressings. After returning home, the man reported to his family that he had a painful left ankle. He consulted his GP over the following days and, six days later, was admitted to a small rest home/hospital complex for management of pain and nausea. His condition deteriorated and he was transferred back to the public hospital that night. As his condition worsened, he was taken to another public hospital in the early hours of the following day and cared for by the intensive care team. Later that day he was diagnosed with septic arthritis of his left ankle. Despite treatment, his condition continued to deteriorate and he died.

It was held that the man's deterioration was gradual, not sudden, and that it warranted far closer attention by the GP in order to determine its cause. Between his first discharge and his return to hospital, the GP failed to examine the man's left leg and ankle — despite the obvious evidence of the open wound and escalating pain — or consider the possibility that his reported signs and symptoms were indicative of septicaemia. His standard of care and records were well below the level acceptable. In these circumstances, he breached Rights 4(1) and 4(2).

The GP was referred to the Director of Proceedings. The Commissioner also recommended that the Medical Council of New Zealand review the GP's competence.

The Director of Proceedings decided to file proceedings before the Health Practitioners Disciplinary Tribunal. However, after receiving additional information and further reviewing the matter, the Director considered that the public interest had been served by the referral to competence review and decided to withdraw the charge.