

**Management of woman presenting with chest pain
(05HDC00814, 10 November 2005)**

General practitioner ~ Chest pain ~ X-ray ~ Breathing difficulty ~ Peak flow ~ Accident and medical clinic ~ DVT ~ Pulmonary embolism ~ Record-keeping ~ Chest pain guidelines ~ Policy ~ Vicarious liability ~ Right 4(1)

An 18-year-old woman attended a medical clinic with a two-week history of breathing difficulties, and chest pain over the previous 12 hours. She was seen by a locum general practitioner (GP), who did a peak flow reading, concluded that she had a chest infection, and arranged for a chest X-ray to be performed. He recommended that she return to see him in two days' time with the result of the X-ray.

On return home, the woman spoke to her mother, who was concerned that her daughter had not received the correct care, as she considered that the peak flow reading was of a level that required treatment. Her mother telephoned the clinic and spoke to a nurse, and an ambulance was arranged to take her daughter to the public hospital emergency department.

It was held that the GP did not satisfactorily discharge his duty as he failed to exclude the possibility of a pulmonary embolism, a diagnosis that needed to be ruled out given the woman's clinical presentation. As his assessment was inadequate, and the further investigations he ordered were insufficiently urgent, he failed to provide services with reasonable care and skill, and breached Right 4(1).

While the medical clinic was not responsible for the GP's individual choices regarding the woman's management, it was the clinic's responsibility as his employer to ensure that appropriate systems and policies were in place and accessible to staff. The absence of such a policy made the medical clinic vicariously liable for the GP's breach of the Code.