

**Pennine GP Learning Group**

**Minutes of meeting**

**Date: Wednesday 11<sup>th</sup> September 2019**

**Time: 7.30 – 9.30pm (2 hours)**

**Topics: Case Based Discussions:**

**“Persistent Itch and Rash” by Dr Ali Malik**

**“A Case of Multiple errors” by Dr Rukhsana Hussain**

**Members present:** Ibrar Ali, Ainie Chaudhry, Kirti Chaudhari, Etim Essang, Rukhsana Hussain, Chiburuoma Iroegbu, Ali Malik, Don Munyaneza,

1. Dr Malik presented a case of **“Persistent Itch and Rash”**. The history was of an elderly lady who initially presented with only localised itch and 10 months later despite several normal and inconclusive investigations was diagnosed with a serious condition.

The group discussed the case and tried to guess the diagnosis at several points from the evolving information.

Learning points included:

- It is important not to dismiss a patient who has had normal previous investigations but continues to attend the surgery due to symptoms/problems. Sometimes, the diagnosis becomes clearer as time passes.
- Always be polite and listen to the patient. Try to be supportive even if you don't know what is going on. The patient in this case appreciated Dr Malik trying to help by listening and asking advice from relevant specialists and not dismissing her ongoing concerns.
- If a patient is unwell and the tests are inconclusive or negative, ask yourself “am I doing the right test?”
- It is important as a GP not to be overly reassured by normal investigations in the face of objective clinical findings.
- GPs are often the only Practitioners who have a full view of the patient's record and history. This can be the key to diagnosis in complex patients who

have progressive symptoms. The GP can then be an advocate for the patient when referring to other specialists.

2. Dr Hussain presented a case where there were multiple errors made by the clinicians involved. We discussed as a group the thinking errors involved and how we can reduce them.

Learning points from the case included:

- The importance of robust telephone triage pathways
- Importance of paying attention to the clinical history and not relying completely on scoring systems/physiological parameters. These can remain normal despite serious illness.
- Take carer/relative concerns seriously and consider them properly. Defer to the experience of the family in patients with complex conditions and disabilities.
- Importance of being aware that we are all prone to thinking errors.
- Tips to reduce thinking errors:
  - Give yourself thinking time.
  - Ask yourself “what else could it be?”
  - Ask yourself “what’s the worst diagnosis it could be?”
  - Ask “what doesn’t fit?”
  - Ask “Is there a possibility of more than one diagnosis?”
  - Reflective practice and regular feedback.

### **Action Plan**

1. Dr Hussain will upload the presentations and minutes to the website.
2. Next meeting is booked for Tuesday 22<sup>nd</sup> October 2019 and will also be related to case based discussions.