

Case one – Leg pain

Mrs J was a 75-year-old woman who presented to the Emergency Department (ED) with left knee pain.

Past medical history: nil of note.

Admission care

09.28 h: patient seen by triage nurse.

Patient explained that she had pain in her left knee the previous day, and had a poor night's sleep. She was able to mobilise and was fully weight bearing but walked with a limp. The patient gave a pain score of 10/10 and reported no history of trauma. Bloods ordered: FBC, U&E, CRP, D-dimer.

09.43 h: analgesia provided with two co-codamol 30/500 tablets.

09.48 h: observations checked by healthcare assistant (HCA).

Observations taken, blood pressure of 186/76 mmHg and a temperature of 37.6°C. Patient's pain score was reported as 10/10.

11.12 h: patient seen by emergency nurse practitioner.

Noticed gradual discomfort in right knee over past 2 days, got worse last night and kept her awake overnight. Took paracetamol yesterday which made no difference but codeine and paracetamol in the ED has helped a bit. Denies any falls or injury to knee, no previous knee problems.

On examination (o/e): decreased range of movement and swelling of the right knee, with tenderness along the medial collateral ligament and joint line. Calf soft and non-tender. No abnormality to the right lower leg.

Impression: soft tissue inflammation.

Advice: regular codeine and paracetamol, with a topical anti-inflammatory. Rest the leg with moderate activity for a few days, and to see her general practitioner (GP) if there was increasing pain/redness/heat or reduced mobility.

11.49 h: Discharged by emergency nurse practitioner.

Discharge summary completed – soft tissue injury of the left knee as presenting complaint. No follow-up required.

Subsequent events

Outcome one

Three days later: pain much improved. Contacted GP for laxatives given codeine usage.

Two weeks later: pain resolved. Full recovery

Outcome two

Next day 09.30 h: patient collapses at home, found by husband on the floor in the kitchen.
Ambulance called, pronounced dead at the scene.

Coroners post-mortem performed.

Cause of death:

1a: Pulmonary embolus

1b: Deep vein thrombosis (left leg)