Success for a Complex Orthopaedic Clinical Negligence Claim

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Our client suffered an injury to her right hand. Two days later, she attended her local walk-in centre, where no satisfactory examination was undertaken, and no x-ray was ordered. Our client was discharged home with little advice.

Unfortunately, some days later, our client suffered a second injury to the same hand. On investigation for that injury at the hospital, x-rays were taken, and an old metacarpal fracture from the first injury was noted. By this stage, it was difficult to fix the fracture. Attempts to reduce the fracture failed; unfortunately, surgery was not offered.

Allegations of negligence regarding both the walk-in centre and the hospital trust were made. Early admissions were received in respect of negligence but not in respect of damage caused by the same.

Our client underwent hand therapy, but this did not resolve pain or restriction of movement. Even splinting of the finger at night did not reduce pain or improve movement. By this stage, our client was struggling with grip and strength and suffered from scissoring of her little and index finger of the right hand, which further reduced movement. The injury was adversely affecting our client's day-to-day living. Medical evidence confirmed that some pain and restricted movement would be permanent.

Melanie advanced a detailed claim to the defendants, leading to negotiation settlements and a good resolution for our client.

Melanie says: *"Although the issue of the breach was complicated by the second incident and a catalogue of failures on behalf of the defendants, I was able to push the claim forward swiftly with the help of a very engaged client and a defendant representative who was both reasonable and fair. This was a good result all round."*

Melanie Lidstone-Land is a Senior Associate in our Personal Injury & Medical Negligence team.

Need advice?

If you think you may have been a victim of medical negligence, please contact us for a non-obligation chat to

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