

## Case Study

A 15-year-old boy presented to an Enhanced Access hub late last year with his mother presenting with a swollen tender testicle. The GP's clinic was overrunning, and the patient was seen approximately 30-40 minutes later than his appointment time. The patient had recently been diagnosed with autism and the additional waiting contributed to some distress and anxiety. During the appointment the patient declined a physical examination despite the GP trying several times. His mother later stated that the additional wait in the waiting room likely contributed to him declining an examination. Not being able to complete an assessment the GP asked the patient and his mother to rebook an appointment and advised them to represent urgently if things were worse. Following two other healthcare contacts the patient presented to the emergency department the following day via 111 advice and, following a testicular ultrasound under the surgical team, was diagnosed with a testicular torsion. The patient's mother subsequently made a complaint to the Leeds GP Confederation Enhanced Access (EA) service about a delay in this diagnosis.

## Key Learning

This was undoubtedly a tough consultation and the lack of examination provided challenges to the GP's ability to make a diagnosis. Following a detailed investigation of this case please see the main learning points below:

- Clinicians to have a high suspicion of testicular torsion in patients presenting with acute testicular pain, particularly in cases where this cannot be confidently ruled out, with a low threshold of referring to secondary care.
- The [NICE CKS](#) guidelines on scrotal pain and swelling states that "A diagnosis of testicular torsion should be considered in any person presenting with acute scrotal pain and/or swelling, before other causes are considered".

## Key Reminders

- It is important to clearly communicate and document a safety net and specific follow up arrangements in consultations where patients present diagnostic uncertainty, or an assessment is not complete.
- A busy unfamiliar environment can be a stressor for people with autism and expression of pain in patients with autism may differ from that of the neurotypical person.
- If clinics are running significantly late it is recommended that waiting patients are kept updated. This may reduce patient frustration or anxiety in the waiting room.
- Practice teams should consider double appointments for patients with extra complexity, language barriers, multiple complaints, or mental health problems.