

Manitoba Health, Healthy Living & Seniors (MHHLS) supports reporting and learning from patient safety events. The focus of a patient safety review is to closely look at the health care system that surrounds and interacts with those giving and receiving care. The goal is to identify risks to patient safety and recommend the most effective ways to minimize risk and improve the delivery of healthcare.

Patient Safety Learning Advisory

Melanoma Misdiagnosis

Summary:			

A patient was seen in a private clinic with a growth to their skin. A biopsy was performed; the specimen was sent to a private laboratory for analysis.

The laboratory analysis showed that the patient had melanoma (cancer). The patient was referred to a cancer specialist. The cancer surgeon created a treatment plan involving an invasive surgery, standard practice for this diagnosis. The surgery was completed without complications.

The tissues collected at the time of the surgery were reviewed by a pathologist who specialized in skin specimens. During the analysis, the pathologist questioned the diagnosis. The pathologist requested specimens from the original biopsy at the private laboratory for review. Upon review, the pathologist concluded the result from the original biopsy was incorrect. Instead, the pathologist diagnosed the patient with having a deep penetrating nevus (mole).

At a follow-up appointment, the patient was informed by the Surgical Oncologist of the misdiagnosis. The pathologist also indicated that invasive surgery would not have been performed if the misdiagnosis not occurred.

Keywords: Melanoma, Deep Penetrating Nevus, Dermatopathologist				
Device Name (if applicable):				
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Type of Analysis: single event

Topic: Specimen/Laboratory

Findings of the Review

- There is only one dermatopathologist in Manitoba.
- The treatment for deep penetrating nevus is a minor excision under a local anesthetic, much different from the invasive surgery performed.
- The misdiagnosis occurred at a private laboratory. The private laboratory completed their own investigation and provided some internal recommendations to address this case.
- The investigation that the laboratory conducted concurs with the findings in this Critical Incident Review that the correct diagnosis is deep penetrating nevus. The recommended treatment in this case is a conservative excision.

System Learning:

This Critical Incident identifies the need for more specialized physicians, especially in the area of dermatopathology.

It is recommended that the Department of Health consider addressing the needs of pathology to meet the needs of the pathology specimens needing analysis.

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