

MEDICAL NEGLIGENCE CLAIMS IN WOMENS HEALTH

A step-by-step guide

How the Women's Health
Negligence Claim Process
Works in the UK



Women’s health negligence claims often arise in circumstances where **symptoms were overlooked, concerns were minimised, or treatment was delayed** because those symptoms were considered “normal”, “hormonal”, or “something women just have to live with”. Many clients come forward only after years of being passed between appointments, or after discovering that earlier intervention could have prevented long-term harm.

This guide explains, in detail, how the women’s health negligence claim process works in England and Wales. It is designed to **answer common questions, remove uncertainty, and explain what happens at each stage of a claim** — from protecting your health, through to settlement and compensation.

Related Services:

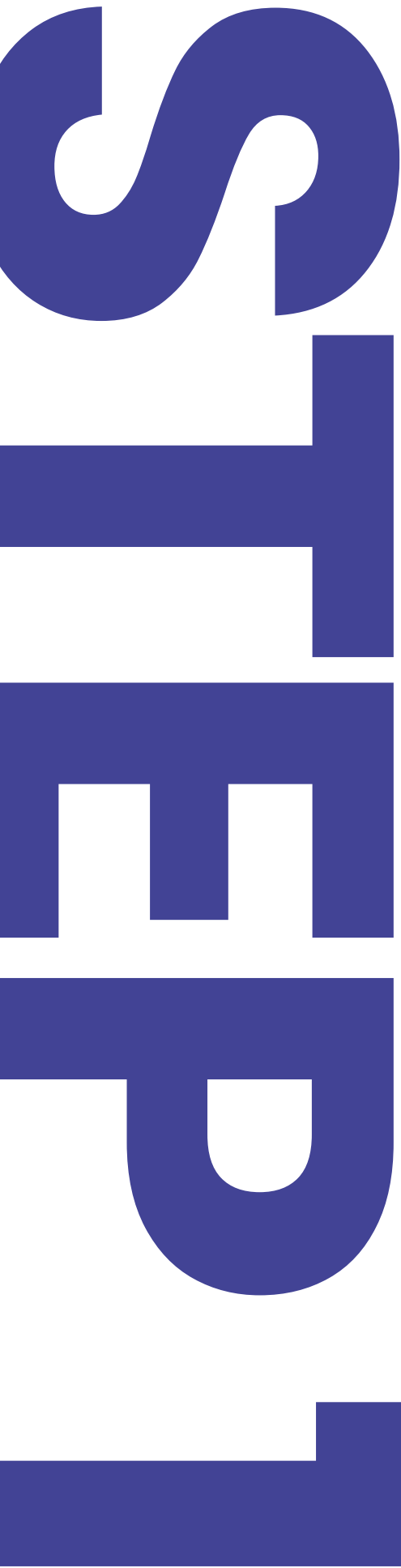
[Endometriosis Negligence Claims](#) | [Surgical Negligence](#) | [Birth Injury Claims](#)

ADDITIONAL FACTORS LEADING TO NEGLIGENCE FOR WOMEN'S HEALTH

Women's health negligence cases often differ from other medical negligence claims because:

- Symptoms are frequently **minimised** or **normalised**
- Diagnosis may be **delayed for years**
- Pain may be attributed to **lifestyle, stress, or hormones**
- Patients may be **reassured** without **proper investigations**
- Records may show repeated **GP** or **hospital** attendances without escalation

These factors mean that many women **do not realise** that their treatment may have been substandard, and that there is a potential medical negligence claim - until a **later diagnosis, emergency admission**, surgery, or second opinion reveals what **should have been done** earlier.




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Protect your
health first (and
create the paper
trail)

If you have symptoms that could indicate serious deterioration, infection, internal bleeding, or complications after surgery, seek medical help immediately.

WHY MEDICAL RECORDS MATTER



Medical negligence claims rely on the contemporaneous records detailing all aspects of your care, including:

- **GP** and **hospital** notes
- **referrals** and **appointment** history
- scans, imaging, and test results
- discharge summaries and follow-up plans
- consent **documentation** and **treatment options** discussed

Even if you are unsure about negligence, prompt medical attention and proper documentation can **protect** both your **health** and your **legal position**.

What
Evidence
Can
Support
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Claim?

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Many people worry that they have “no proof”. But medical negligence claims are often built using evidence that already exists.

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THE GUIDE EXPLAINS HOW EVIDENCE MAY INCLUDE:

This evidence can help establish both what happened and how it affected you – physically, emotionally, and financially.

- Medical records (**GP and hospital**)
- **Letters and referrals** showing repeated attendances or missed escalation
- **Test results and imaging** (including ultrasound, MRI, CT)
- Complaint correspondence (**PALS / NHS complaints**)
- **Witness evidence** from partners or family
- Photographs (e.g., **swelling, bruising, scarring**)
- A personal diary tracking **symptoms, pain, and functional** impact.
- **Receipts and financial losses**, including **private treatment costs**

Stamps

Can You Claim? Understanding Negligence and the Legal Test

A poor medical outcome
does not automatically
mean negligence.

A CLAIM TYPICALLY NEEDS TO SHOW:

Not every poor medical outcome is negligence. The legal test focuses on whether care fell below acceptable standards and caused avoidable harm.

Duty of care

A healthcare professional or provider **owed you a duty**

Breach of duty


That duty was **breached** by substandard care

Causation

the breach caused **harm**, or **worsened** your condition

For example, a **delayed diagnosis** may only be negligent if earlier diagnosis would likely have improved the outcome.





COMMON EXAMPLES OF NEGLIGENCE CLAIMS INVOLVING WOMEN'S HEALTH ISSUES

Delayed diagnosis of endometriosis

Symptoms are **dismissed** or **overlooked** for years, allowing the condition to worsen and cause **avoidable pain, damage to surrounding organs** or **fertility issues**.

Misdiagnosis or failure to investigate pelvic pain

Ongoing pelvic pain is **incorrectly attributed** to benign causes or not **properly investigated**, delaying appropriate treatment.

Missed ovarian cysts or torsion

Ovarian cysts or torsion are not identified in time, leading to **severe pain, loss of ovarian function**, or **emergency surgery**.

Surgical errors during gynaecological procedures

Mistakes made during surgery cause **avoidable injury, complications**, or the **need** for further **corrective procedures**.

Complications from delayed referral to specialists

Failure to refer a patient to a gynaecology or oncology specialist results in **progression of disease** or **worsening symptoms**.



Failure to treat infection or recognise deterioration

Signs of infection or clinical decline are missed, leading to **serious complications** such as **sepsis** or **long-term harm**.

Poor consent and failure to explain treatment risks

Patients are not fully informed of risks, alternatives, or outcomes, preventing them from making an **informed decision**.

Pregnancy- and post-natal-related negligence

Errors in antenatal, labour, or post-natal care cause **harm** to the **mother**, **baby**, or **both**.

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Time Limits for Women's Health Negligence Claims

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does not automatically
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TIME LIMITS

In most cases, you must issue court proceedings within **three years** of:

- the **negligent** treatment, or
- the date you **first realised** that negligence may have occurred (the “**date of knowledge**”)

This is particularly important for women’s health cases, because delayed diagnosis is **common** — and many women only learn the **true cause** of their symptoms **years later**.

There are exceptions (for example, for children or those who lack capacity), so it is worth seeking advice even if time has passed.

STEPS

The Claim Process and What to Expect

Our guide breaks down
the claim process step-
by-step

1 Initial consultation

You can speak to a specialist solicitor confidentially. You are **not committing** to a claim by asking for advice.

2 Obtaining medical records

Your solicitor will gather the relevant **GP** and **hospital** records.

3 Expert evidence

Independent medical experts are instructed to assess:

- whether care was **below** standard
- whether harm was **avoidable**
- what should have happened
- your **prognosis** and **future needs**

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Letter of Claim and response

The defendant is formally notified and asked to **admit** or **deny** liability.

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Negotiation and settlement

Most cases settle **without** a trial.

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Expert evidence

If proceedings are issued, most claims still settle before trial. You will be **supported** throughout.

WHAT COMPENSATION CAN COVER

Compensation in women's health negligence claims may include:

- **pain, suffering** and **loss of amenity**
- psychological injury (including **trauma** and **anxiety**)
- **past** and **future** medical treatment
- private treatment costs
- loss of **earnings** and **reduced** earning capacity
- **travel, medication** and **care** expenses
- fertility-related impact (where applicable)

Your solicitor will also assess **future needs** — especially where delays in diagnosis have caused **long-term harm**.





FUNDING: NO WIN NO FEE (CONDITIONAL FEE AGREEMENT)

Many women's health negligence claims can be funded through a **No Win No Fee agreement**, meaning:

- no upfront **legal fees**
- you don't pay legal fees if the claim **does not succeed**
- if successful, there is a capped deduction from compensation

This allows people to **seek justice** without financial pressure.





WHY CHOOSE NJS LAW?



At NJS Law, we act for women who have not received the care they deserve, for example where there has been:

- delayed diagnosis
- **failure** to investigate symptoms
- poor follow-up or referral
- **substandard** treatment planning
- inadequate consent

We **understand** how difficult it can be to pursue a claim when your symptoms were repeatedly dismissed. Our approach is **compassionate, evidence-led**, and focused on achieving **the best long-term outcome** — including **securing compensation** for future treatment and recovery.

FAQS: WOMEN'S HEALTH MEDICAL NEGLIGENCE CLAIMS

What counts as negligence?

Negligence may occur when symptoms are **not investigated properly**, diagnosis is delayed without good reason, treatment falls **below** acceptable standards, or clinicians fail to refer or escalate care — and avoidable harm results.

Can I claim if I was repeatedly reassured?

Yes. Reassurance without proper investigation is a common feature of women's health negligence claims, especially when there are **repeated attendances** and persistent symptoms.

What if I only discovered the problem years later?

You may still be able to claim. The three-year time limit often starts from your "**date of knowledge**" — when you first realised something may have **gone wrong**.

Will I have to go to court?

Most claims settle **without** a trial. Even if proceedings are issued, many cases settle before a final hearing.