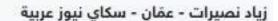




مأساة جديدة في الأردن عنوانها "الأخطاء الطبية"

15 سبتمبر 2021 - 08:00 بتوقیت أبوظبي







لم تكاد تنتهي صدمة الاردنيين بوفاة الطفلة لين أبو حطب، إثر خطأ طبي، حتى تم الكشف أن طفلة أخرى في العمر ذاته توفيت قبل أيام وبالطريقة نفسها.

وتتشابه القصتان كثيراً، ففي كلا الحالتين تم تشخيص الحالة بشكل خاطئ، أدى إلى وفاتهما، كما يقول ذووهما.

وتوفيت الطفلة لين أبو حطب في مستشفى البشير بالعاصمة عمّان، بينما توفيت الطفلة غنى بمستشفى الأميرة رحمة بمحافظة إربد شمالي الأردن.

Case scenario 1

 A 23-year-old medical student was in his last year of medical school. He was asked to perform a procedure he hadn't done before. His mentor was called away from the operating room about an urgent matter and the young student made a mistake, which led to a complication that caused the woman patient to lose her life.

Case scenario 2

• A 30-year-old female patient went through an aggressive chemotherapy session and hysterectomy after she was diagnosed with a rare form of cancer. Later, her oncologist told her she had been mistakenly diagnosed.

- In health care, it is not uncommon that patients are exposed to harmful risks.
- Some risks are predictable and informed consent is obtained.
- Other risks, such as those occurring because of medical errors (ME) are in a sense unpredictable, and an informed consent cannot be obtained.
- An ME is defined as the failure of a planned action to be completed as intended.

Accidental Deaths in the U.S.



Accidental Deaths in the U.S.

An estimated one million people are injured by errors during hospital treatment each year and 120,000 people die as a result of those injuries, according to a study led by Lucian Leape of the Harvard School of Public Health. Here's how that number compares with other causes of accidental death in the United States*.

*SOURCE (for accidental deaths shown in blue): National Safety Council. Data are for 1996. KEWN BURKETT / Inquiror Staff Arist:

43,649 motor vehicle deaths

> 14,986 deaths from falls

3,959 drowning deaths

329 commercial aviation deaths



 When a medical practitioner undertakes the care of a patient, he enters implied contract to treat the patient with reasonable skill and care.

So

There is a commitment by the physician to do his best of care and skills for the benefit of the patient.

Causes:

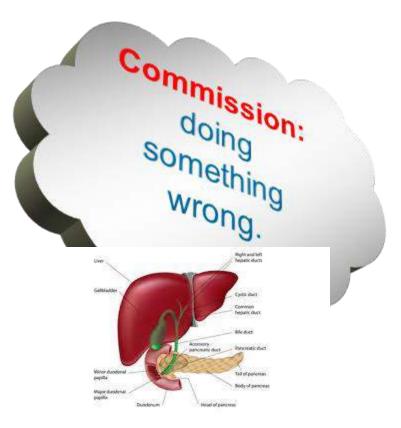
It may be due to:

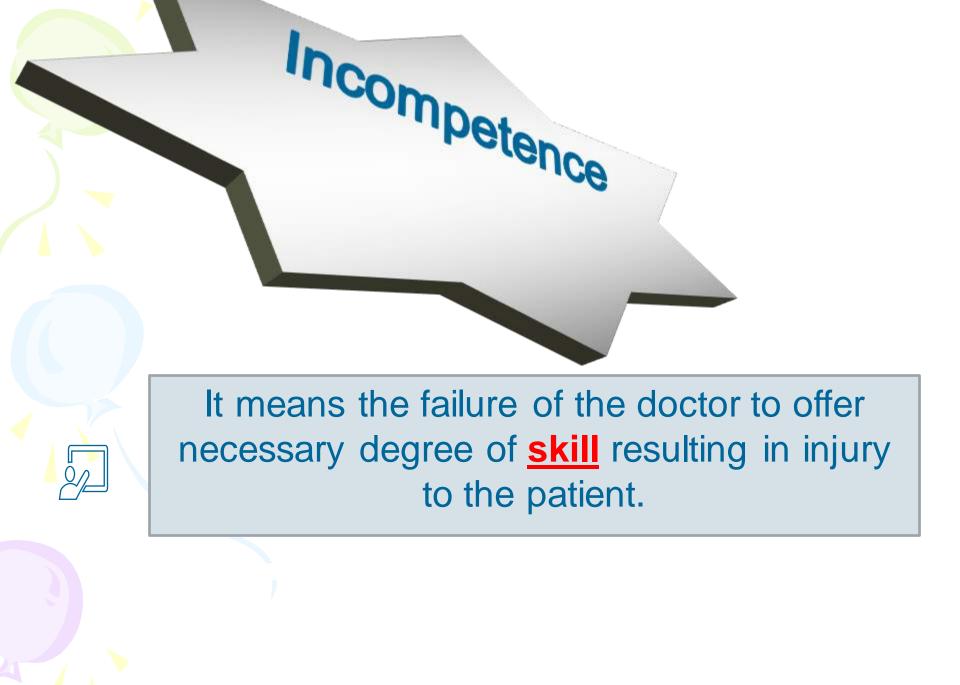
- Negligence: lack of care.
- Incompetence: lack of skill or medical knowledge

Medical Negligence:

Inadequate standard of medical care given to a patient.



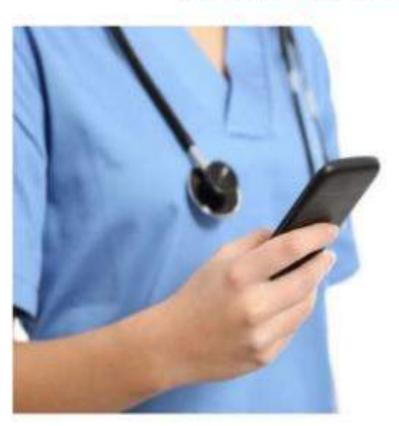






- patient ignores the advice of his doctor
 - might lose his right (partially or totally) to claim damages if harm results

Common Causes of Medical Malpractice



- Distraction
- Fatigue
- Lack of Education and Experience
- Inadequate Attention Given to Individual Patients
- Inaccurate Medical Records

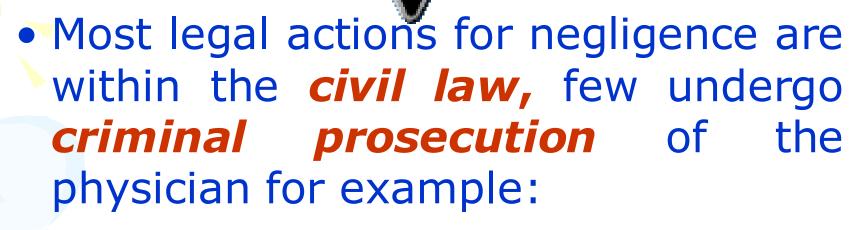
Types of malpractice





physician does not follow the scientific basic rules in his profession for diagnosis and treatment. These may be major or minor faults

When a surgeon **forgets any object** inside a surgical wound e.g. Towel, instrument...etc. all objective mistakes are major malpractice.



- Illegal abortion.
- Death of a patient resulting from gross ignorance or negligence of the physician.

3 basic considerations in proving malpractice:

A mistake
has occurred
by the
physician

A damage or harm happened to the patient.

There is a
causative
relation
between the
mistake
done by the
physician and
the harm
that occurred
to the patient.

The basis of evaluating the malpractice

- 1- The professional level of the physician.
- 2- The severity of the case.
- 3- The time and place of the act.

The act is compared with the attitude taken by an ordinary physician with the same standard, qualification, experience, and circumstances.



The basis of evaluating the malpractice

4- A medical injury may have been caused by any one or more of the medical personnel who have treated the patient.

5- The thing speaks for itself" e.g.

- Foreign bodies and slipping instruments in surgical procedures
- Burns from heating modalities
- Injury to a portion of the patient's body outside the field of treatment

TYPES OF MALPRACTICE

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Anesthetic Malpractice

Surgical Mahmathe

Malpractice in Diagnosis

Malpractice in diagnosis:

To reach a proper diagnosis the physician should:

- Take a careful history
- Examine his patient thoroughly
- Ask for investigations (whether laboratory or radiological)
- Consult colleagues or professors if he is not sure of a diagnosis
- Otherwise he may fall under *malpractice* if he misses a diagnosis due to <u>ignorance by the basic scientific knowledge.</u>
- Liability may be proved when the physician fails to diagnose a condition which would have been diagnosed by a competent practitioner.

Malpractice in diagnosis

- Sometimes missed diagnosis or mistake in reaching exact diagnosis is due to:
- inexperience
- the disease being in its early stage.

MYSCICE III TEAMER

Mistakes of treatment:

The physician is free in choosing the method of treating his patient as long as he is using scientific basis agreed upon by physicians. The physician is sued for malpractice of treatment in the following conditions:

- If he prescribed a wrong drug
- If he was not accurate in the dose of the drug in relation to the patient's age, sensitivity or body build.

Surgal Malyacute

Surgical mistakes:

- Surgery needs skill and concentration.

 Responsibility of the surgeon lies in the following stages:
- 1. Writing the first admission sheet and diagnosis of the case
- 2. Stage of preparing for operation (examine, ask for specific investigations, be sure of fitness of patient for operation)
- 3. An informed consent (entailing the diagnosis, surgical procedure, anesthesia and expected complications) is signed by the patient except in emergencies

Surgical mistakes:

- 4. A surgical <u>report</u> should be filled including every detail, and any problem at the time of the operation should be mentioned
- 5. The surgeon should do an operation <u>only</u> in his specialty
- 6. He is responsible for <u>sterilization</u> of the surgical wound

- 7- In operations the surgeon is responsible for the actions of his team while acting under his immediate supervision (nurses and assistants).
- 8- Responsibility of the hospital authorities lies in the **selection of nurses**
- 9- The responsibility for *anesthesia* belongs to the anesthetist not the surgeon.

Examples of surgical malpractice:

- **⊠**operating on the wrong patient

Examples of orthopedic malpractice:

- ✓ Missed fractures
- ▼ Tissue damage from over tight plaster

Examples of obstetrician malpractice:

- □ Criminal abortion and complicated therapeutic abortion
- Birth injuries
- Brain damage of newborn due to hypoxia from prolonged labor
- Hysterectomy without being sure of the diagnosis(pregnancy in an old women diagnosed as a mass in the uterus and doing hysterectomy)

Anesthetic Malpractice

Anesthetic malpractice:

• The anesthetist is responsible for: preoperative preparation of the patient, anesthesia during the operation, and follow up in recovery.

Examples of malpractice include:

- Brain damage from allowing hypoxia to occur
- Neurological damage from spinal or epidural injections
- ⊗ Incorrect or excessive anesthetic agent
- Allowing awareness of pain during anesthesia



Legal advises for malpraxis prophylaxis

- 1. Never guarantee a cure
- 2. Get the patient's informed consent for all procedures (at least all surgical procedures)
- 3. When in doubt ask for consultations (consultation protects the patient and protects yourself).
- 4.Do not fail to provide maximum care in the selection of assistants
- 5.Do not base an important diagnosis on a clinical impression, use available diagnostic aids



- 7. Keep up with the advances of medicine. However do not be too advanced and do not experiment on patients
- 8.Do not, in absence of emergency, perform any surgery without an informed consent
- 9.Good housekeeping: keep good medical records, full and accurate. Keep results of all tests performed on the patient.
- Records are "witnesses whose memories never die".
 In the defense of malpractice suits, bad records hurt as much as good records help.

Case 1

- For the first case, which is about Barack, the student who made a mistake:
- 1. The senior should not have left the student alone and he should have told him to wait for him to return.
- 2. The student should have not have continued by himself; he should have called another senior.
- 3. We should educate our students to know their limitations, in both knowledge and skills.
- 4. We should disclose any case immediately to the higher authorities for compensation.
- 5. The family of a patient should be informed immediately and according to law they should be compensated.

Case 2

- 1. We should support the patient's right for compensation and an apology.
- 2. We should explain what happened.
- 3. There was a problem with the diagnosis, so the physician and the lab specialist should re-check the result again and again before they take any action with the patient.
- 4. According to the law, the physician should be questioned about this case.

