

Medical Errors

SCOPE OF THE PROBLEM

Medical Errors Defined

A medical error is when a part of the medical plan failed or when the plan itself was flawed from the outset. Such errors may occur in these settings:

- Hospitals (in or out patient)
- Clinics
- Physician offices
- Institutions (nursing homes, rehabilitation centers, e.g.)
- Patient's home (homecare, e.g.).

Such errors may involve Rx, procedures, surgery, diagnoses, equipment, lab reports, etc. Such errors escalate as our medical care grows in complexity and the options for care multiply. However, such errors are often the result of simple human communication.

How Widespread is the Problem

Some of the statistics routinely cited give one an idea of the prevalence of medical errors:

- Deaths from medical errors are in the range of 45,000 to 95,000 per year; this makes medical errors the eighth leading cause of death. See *Institute of Medicine Study*, November, 1999.
- The Massachusetts State Board of Registration in Pharmacy estimates that 2.4 million prescriptions are incorrectly filled each year in that state alone.
- As medical errors have proliferated, the public awareness thereof has increased; a high percent (55-60%) of patients fear medical errors; a higher percent believed providers should be more strictly monitored.

NATURE OF THE PROVIDER

Medical errors do not usually correlate with medical malpractice. The reason for medical errors is found within the system itself. Medical errors can be reduced by modifying procedures and protocols:

- Have a pharmacist monitor hospital-administered Rx by making daily rounds.
- Use more detailed and standardized guidelines.
- Use new technologies such as barcodes to double check medications.

Then too, many errors occur that are not subject to control (equipment failures as with a defibrillator or nosocomial infections) or that will occur regardless of the disciplines to avoid them (diagnostic error, wrong blood type transfusion, misinterpretation of doctor's instructions).

PATIENT INVOLVEMENT IN PREVENTING MEDICAL ERRORS

There are numerous ways by which the patient may assist in avoiding medical errors.

- Take an active part in the care.
- Fully inform providers of the patient's medications.
- Fully inform providers of the patient's allergies and adverse reactions.
- Be sure the doctor's Rx prescription is legible.
- Understand the whys and wherefores of medication being taken.
- Double check the pharmacy when the Rx is picked up.
- If in doubt, ask.
- Use a facility that specifies the patient's condition to the extent possible.
- Be alert to any facility uncleanliness.
- Ask the physician what will be the treatment plan when the patient is discharged.
- Be sure terms/extent of surgery are clear to both the patient and the surgeon.
- Having an overall caregiver (family doctor) is helpful.
- Learn as much of one's condition as possible or practical.

PREVENTING MEDICAL ERRORS

Studies are available that show a high percentage of medical errors are preventable. Some of the ways of preventing medical errors include:

- Standardization of procedures and protocols.
- Increased use of technologies (hand-held computers).
- Reduced use of handwriting.
- Clearer Rx labeling.

ERROR REPORTING SYSTEMS

The theory is that only by reporting errors can on knowledge skills rise to the level where something constructive can be done to correct them.

Such reporting systems may be mandatory or voluntary.

Mandatory

These are required by state law and deal with serious health problems (AIDS, rabies, etc.). Their purpose is public health related for the most part.

Voluntary

These are needed to build a body of knowledge and are what the health care profession, for the most part, is operating under today.

State Involvement

Some states demand that medical errors be reported; in states without such laws, the reporting discretion with hospital administration is significant. Because of the risk of litigation, potentially harmful publicity, internal hospital-physician conflicts and additional regulatory audits (either state or federal) there is reluctance to disclose medical errors, mandated or not.

