



Malpractice is lack of reasonable degree of care and skill. It includes all faults in medical practice leading to residual harm or permanent infirmity.

Definitio n

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

So

There is a commitment by the physician to do his best of knowledge 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

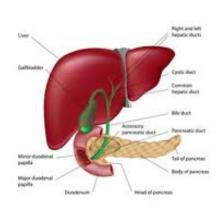
Medical Negligence:

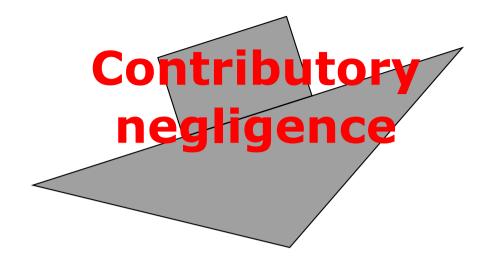
Inadequate standard of medical care given to a patient.

Omission: failure to do something.

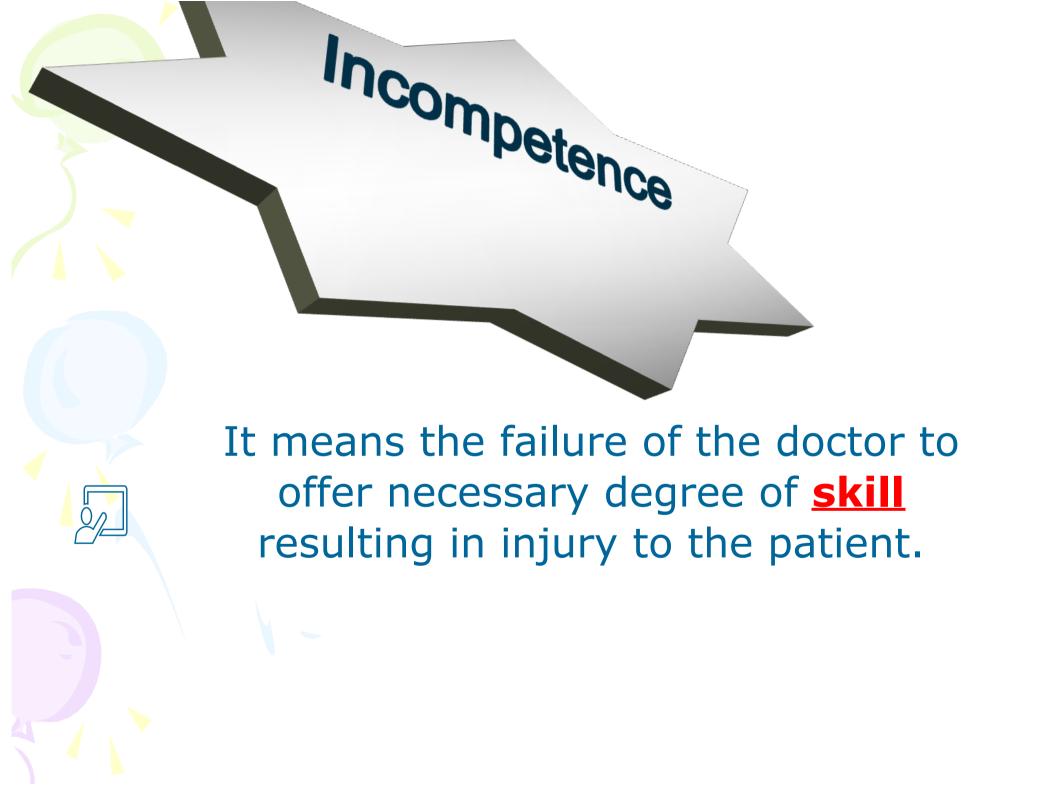
Commission something w







- 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

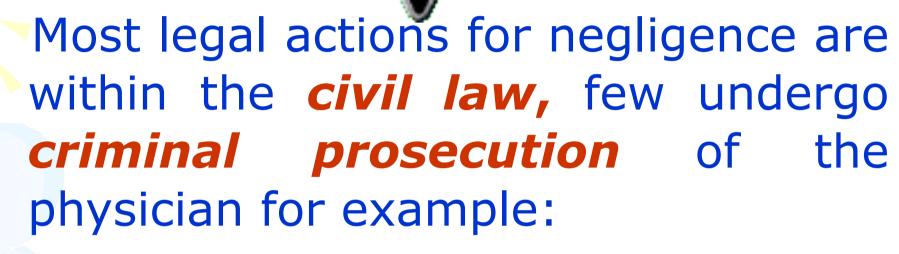
Types of malpractice

Technical faults:

Objectiv mistakes

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.

A general practitioner cannot be considered negligent just because a specialist might have served a patient better.

- 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

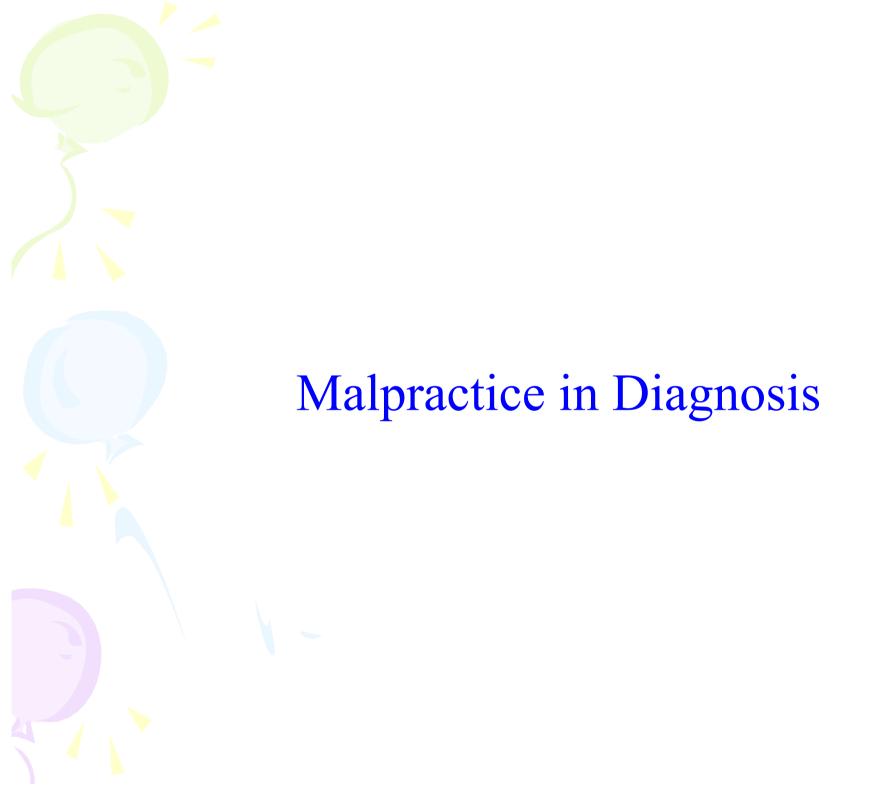


TYPES OF MALPRACTICE

In Diagnosis

Anesthetic Malpractice **In Treatment**

Surgical Malpractice



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.



The **Mistarkes** for treatmenthe 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.



Surgical mistakes:

Surgery needs skill and concentration.

Responsibility of the surgeon lies in the following stages:

Writing the first admission sheet and diagnosis of the case

Stage of preparing for operation (examine, ask for specific investigations, be sure of fitness of patient for operation)

An informed consent (entailing the diagnosis, surgical procedure, anesthesia and expected complications) is signed by the patient except in <u>emergencies</u>

Surgical mistakes:

- 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:

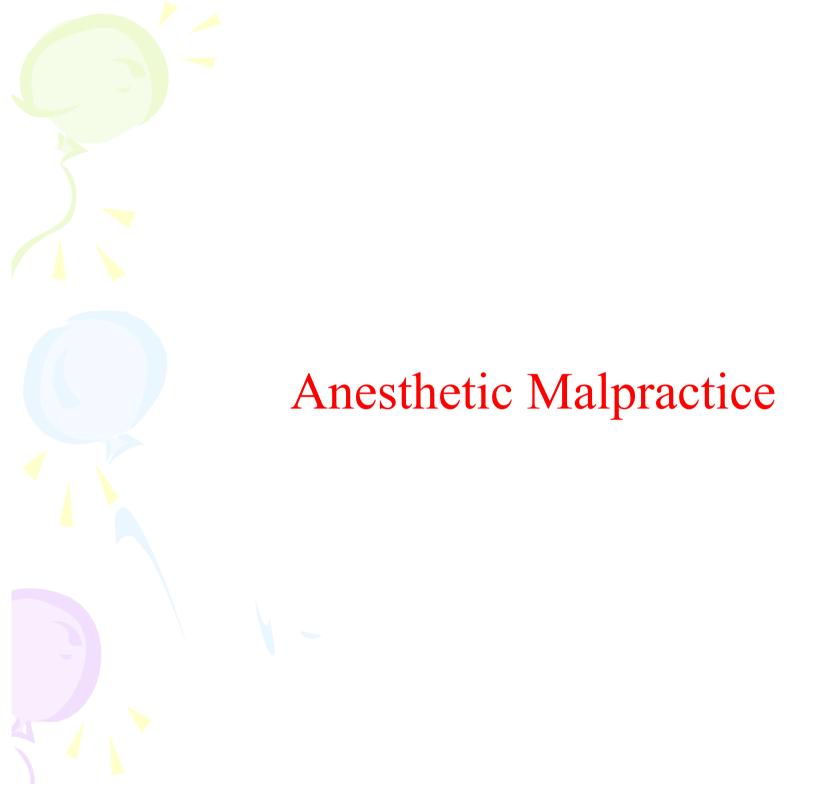
- operating on the wrong patient
- operating on the wrong side: limb, organ...
 etc
- leaving swabs or instruments in the surgical wound

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:

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

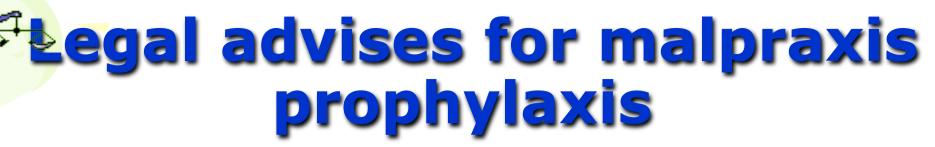
Examples of malpractice include:

- 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

- Never guarantee a cure
- Get the patient's informed consent for all procedures (at least all surgical procedures) When in doubt ask for consultations (consultation protects the patient and protects yourself).
- Do not criticize another practitioner

 Do not fail to provide maximum care in the selection of assistants
- Do not base an important diagnosis on a clinical impression, use available diagnostic aids



Keep up with the advances of medicine. However do not be too advanced and do not experiment on patients

Do 'not, in absence of emergency, perform any surgery without an informed consent

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.

