

Alleged Medical Errors Reporting of Autopsied Cases as a Quality Improvement Tool

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Abstract

Information obtained from autopsy is a source of continued learning for which the cases which were brought for autopsy at tertiary care center of eastern Nepal from 1st January 2016 to 31st December 2017 with an allegation of death due to the medical negligence are being reported. Case 1 was filed on a doctor with an allegation of death because of not realizing about ectopic pregnancy in case of post abortion care but the doctor was saved when histopathological examination could not establish a product of conception. Case 2 is with an allegation that the patient could have been saved if specific poison determination would have been done. In this case, legal duty of a doctor to take dying declaration had also not been done. In case 3, patient's request for surgical delivery was not heard and she died during normal delivery. Case 4 died following his gastro-intestinal endoscopic examination.

Conclusion: This research has shown the importance of autopsy in quality improvement of medical practice.

Key Words: Informed Consent, Medical Negligence, Legal Duty

Introduction

A plaintiff that is a patient or patient's relatives needs to prove four components in order to establish a liability of medical negligence allegation on defendant that is a doctor. Medical record must show the existence of the doctor's DUTY to the patient and establish the patient-doctor relationship. A DERELICTION of duty defined by failure to exercise a reasonable degree of care, skill and knowledge must have occurred. The dereliction of duty must be shown to be the DIRECT/ proximate/ underlying cause of DAMAGE in the form of death or injury to a reasonable degree of medical certainty, that is, the injury or death could have been avoided except for the dereliction of duty. When death rather than injury is the endpoint, an essential component of the definition of medical

negligence, direct causation, cannot in most cases be thoroughly examined without information derived from autopsy. Dead bodies are needed to be sent for autopsy not only in legal indications but also in clinical indications in order to find out the actual diagnosis or actual cause of death. Unfortunately, clinical autopsy has become an unusual practice because of informed written consent of deceased's relative, mandatory in clinical autopsy, which will only be possible if the relative is co-operative and supportive. Similarly in some instances, fear to fall in legal complications also becomes a reason for declining state of clinical autopsy and thus, creating a serious obstacle to the pursuit of excellence through uninhibited outcome analysis.^{1,2,3} The cases which were brought for autopsy because of the allegation of medical errors from the deceased's' relatives from 1st January 2016 to 31st December 2017 (with an allegation of death due to the medical

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negligence) are being reported. Informations obtained from the autopsy of these cases and their intellectual analysis not only provide a good guidance to the treating doctors for the future safety of their patient and themselves but also provide an opportunity to the bereaved relatives of the deceased to understand the limitation of the medical field. The time taken by autopsy followed by lab investigations

Case 1

A 26 years old lady died after 22 days of post-abortion care of one month conception following lower abdominal pain for 24 hours. Her autopsy revealed Pelvic cavity with blood and blood clots (fig. 1) and perforation in the left fallopian tube with blackish mass at torn site. The blackish mass was sent for histo-pathological examination suspecting it as a product of conception. The treating doctor was arrested from his clinic and a case of medical negligence was filed on him stating that the lady would have been saved if her ruptured fallopian tube would have been repaired on the very day,

provides enough time to the deceased's relatives for realization of the effort and good intention of the doctor and, this in return, helps in settling their grievance to some extent. Thus, autopsy has both direct and indirect role in re-establishing the faith of the deceased's' relatives on doctors and medical profession. Ethical approval has been taken from the Institutional Review Committee.

she experienced the pain. This would have been possible if the doctor would have considered an ectopic pregnancy in this case and would have warned the lady about its dangerous complication with special emphasis for immediate follow up after any problem (like abdominal pain in this case). Histo-pathological examination of the blackish mass could not establish whether it is a product of conception or not. In this way, it could not be proved that this is a case of ectopic pregnancy and the benefit of doubt goes in the favor of the doctor.



Figure 1: Pelvic cavity with blood and blood clots

Case-2

A 23 years old unmarried female was brought to the hospital in an unconscious state following an ingestion of an unknown poison. She was empirically treated for an organophosphorus poisoning. She regained consciousness and survived for more than 10 days. Autopsy revealed that she was pregnant (fig. 2). Her relatives alleged that she could have been saved if her blood, urine and vomitus would have been

sent to the lab for specific poison determination followed by specific treatment. In this case, legal duty of a doctor to inform the police once she regained the consciousness and to take dying declaration in the presence of two witnesses, if the condition of the victim suddenly turns serious, and there is no time to call a proper authority, had also not seen to be done.



Figure 2: Uterus with product of conception

Case-3

The relatives of a 30 years old female stated that they requested the doctor for surgical delivery of the child despite they were informed about the importance of the normal delivery over surgical delivery in this case but their request were not heard and a normal delivery was attempted. She

died during her normal delivery. She was a mother of three daughters and had a history of three abortions done. Her autopsy revealed abdominal and pelvic cavity filled with blood and ruptured uterus with a female fetus (fig. 3).



Figure 3: Abdominal and pelvic cavity filled with blood and ruptured uterus with a fetus

Case-4

A 58 years old male with a history of alcohol intake for more than 50 years and provisional diagnosis of alcoholic liver disease entered into an unconscious state following seizure attack immediately after completion of his gastrointestinal endoscopic examination done for his abdominal pain. He was resuscitated but could not be saved. His autopsy revealed penetrating wound in the heart with blood clot

in the pericardial space which was produced by the overlying ribs those get fractured during an attempt of resuscitation (fig. 4). The only query of deceased's relatives was: "How can a man just with abdominal pain die with endoscopic examination and why were they not informed prior to the procedure about its lethal complication?"



Figure 4: Penetrating wound in the heart with blood clot in the pericardial space

Discussion

All the practicing doctors need to know and keep in mind that perfection in the practice of medicine is not possible and is neither demanded nor expected from them. Only thing expected from them is their positive intention which will be seen through their continuous effort in learning even from their imperfections, instead of hiding them, for the safety of their patients. Autopsies are a valuable source of information for improvement of patient safety. This has recently been emphasized by the Council of Europe.⁴ This fact is also seen in our autopsy cases in which the Case 1 was legally investigated whereas remaining cases were investigated by making a committee inside the

hospital. The doctor learnt to consider ectopic pregnancy in every post abortion case from autopsy of case-1, importance of specific investigation and legal duties of the doctor in the case of poisoning from autopsy of case-2, and lethal complication of endoscopic examination and need of informed consent even for endoscopic examination from the autopsy of case-4. After the incident of case-4, the doctor has started taking informed consent prior to endoscopic examination. This step will not only prepare the patient and his/her relatives for the rare but lethal complication of the procedure but also prevent the doctor in case of any lethal incident that may happen during the procedure. In case-3, the mother of three daughters might

have undergone three abortions in the desire of a son. This time, the parents were informed that the child in the womb was son but from autopsy, the deceased's relatives came to know that the child was again a daughter. Knowing this fact, they stopped further alleging the doctor. Case 1 was settled because of not establishing product of conception by histo-pathological examination. This finding has been supported by a research done by Hassan DA et al.⁵ where in the majority of cases, based on the autopsy report, the case was settled due to the fact that the causal connection between mistake and death could not be proved without reasonable doubt. To perform an autopsy is, therefore, always in the interest of doctors faced with medical negligence claims. Researchers from 1912⁶ till 2002⁷⁻¹¹ have also documented substantial discrepancies between clinical diagnoses and findings at autopsy. At the same time, US American evaluation of autopsy reports in litigation cases have shown that the doctors sued for medical negligence do not have to fear the autopsy.^{1,2} Thus, all the practicing doctors are advised to counsel the relatives of their patients who died during the treatment where cause of death is not known for clinical autopsy.

Conclusion

This research has shown the importance of autopsy in quality improvement of medical practice for the safety of both patient and medical practitioner through reporting of medical errors. The medical practitioners are recommended to send the dead body of their patients for clinical autopsy. At the same time, forensic experts are recommended to publish such cases to provide an opportunity to other medical practitioners to learn from other's mistakes.

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