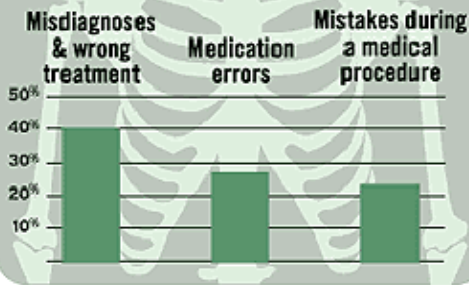




### Medical Mistakes



### Reducing medical errors – an urgent new priority!

An estimated 44,000 to 98,000 people in the U.S. die each year as a result of medical mistakes: mistaken patient identity, medication errors, hospital-born infections, lab errors, unsuccessful surgeries. In fact, medical errors are more deadly than breast cancer, motor vehicle accidents or AIDS. Survivors suffer physical pain, frustration and large financial burdens. The total cost of preventable medical mistakes, including lost wages and extra healthcare expenses, is estimated at 17-29 billion dollars per year.

#### Wall of Silence

In her recent book by this title, Rosemary Gibson reports that historically there has been a reluctance to deal with this issue. Incidents have gone unreported; statistics have not been kept. Physicians and nurses accused of making errors

have been shunned by their peers, left with no support or guidance, and no way to make amends or find closure. Patients and families involved have been abandoned, with no effort made to learn from their experiences. By putting a human face on this problem through real stories, Gibson hopes her book will be a wake-up call, and a catalyst for change.

#### Action at last

In 1999 the Institute of Medicine released a report titled *To Err is Human: Building a Safer Health System*, revealing the staggering dimensions of the problem. The report examines why medical mistakes occur and outlines sweeping changes which are needed. Last year, the Agency for Healthcare Research and Quality released *The National Healthcare Quality Report* and the *National Healthcare Disparities Report*, providing the first complete analyses of the quality of American healthcare and differences in access for groups suffering from seven different clinical conditions. From now on improvements will be consistently measured and monitored, and will be documented in future reports. Healthcare providers are under heavy pressure to participate, and are examining ways to improve quality and cut costs through the use of industry techniques such as GE's Sigma Six. The quest for quality is driving a shift from secrecy to transparency.

Also, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) brought in new patient safety guidelines this year. They provide for accurate patient identification, verified communications, extra precautions for medications with similar names or appearance, patient consultation immediately before surgery, automatic shutoff mechanisms on infusion pumps, testing and maintenance of alarm systems on medical devices, and mandatory hand-washing.

#### Alaska responds

Alaska's Patient Safety Collaborative, founded two years ago, now includes all of the major hospitals, one native health corporation and one private organization. Members have joined forces and meet regularly to discuss problems and share solutions that work.

#### Patients to join the effort

Patients are now encouraged to ask questions and assume an active role as leader of their own healthcare team. The sheer size and complexity of the healthcare system with its specialized personnel, countless new drugs, and high technology means no one person can know it all. Patient involvement is simply healthy self-defense!

#### Resources

20 Tips to Help Prevent Medical Errors. Patient Fact Sheet. AHRQ Publication No. 00-PO38, February 2000. Agency for Healthcare Research and Quality, Rockville, MD. <http://www.ahrq.gov/consumer/20tips.htm>

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Gibson, R. and J.P. Singh (2003). *Wall of Silence: the Untold Story of the Medical Mistakes that Kill Millions of Americans.* Lifeline Press.

Institute of Medicine. (Nov. 1999) *Report Brief. To Err Is Human: Building a Safer Health System.* <http://tinyurl.com/2mcug>

Jech, A. (2000). "Med Errors: A New Approach to Prevention." *Nurseweek.* <http://tinyurl.com/2q6p7>

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