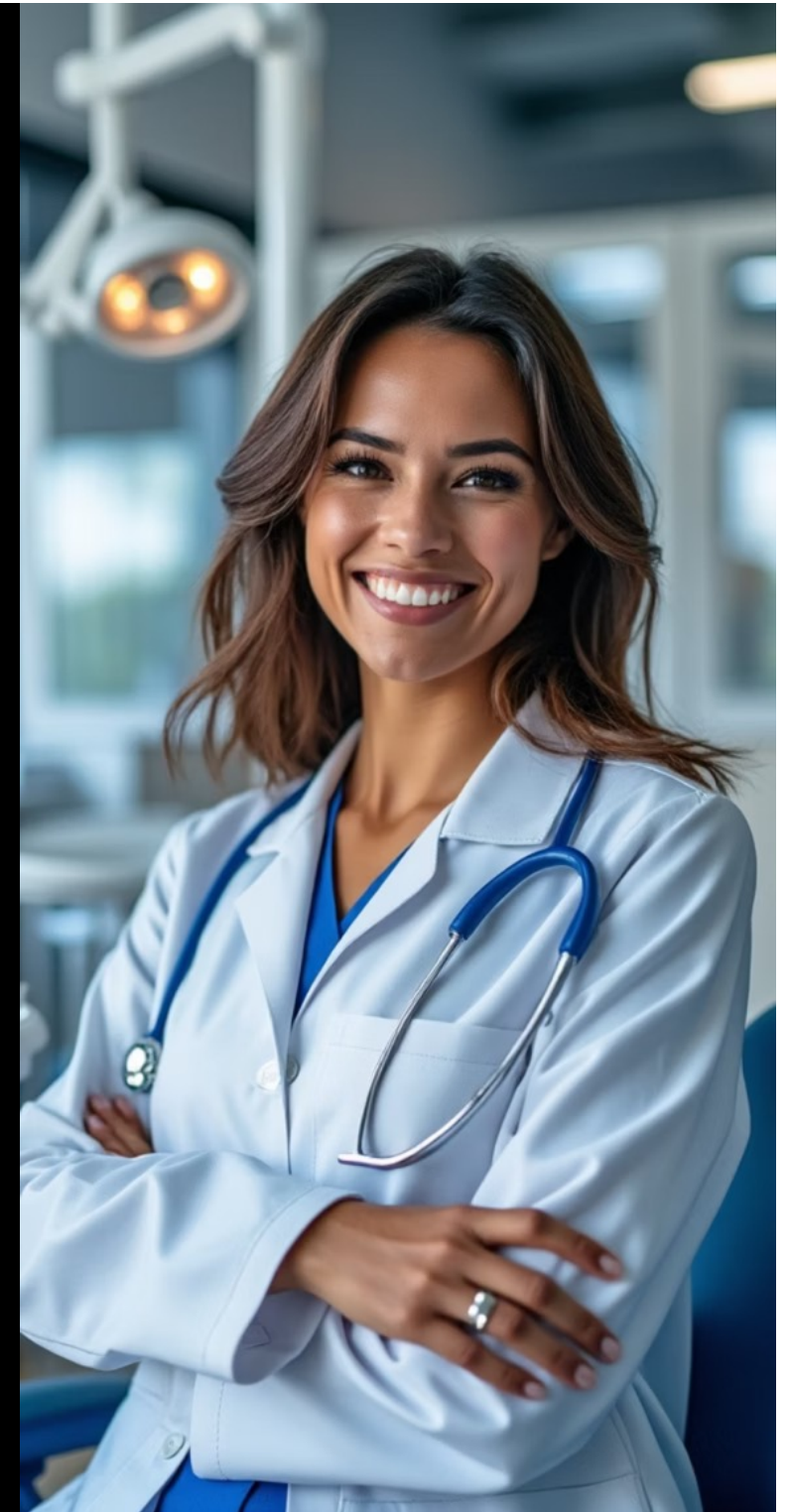


The Assessment of Deficiencies in Medical Care Provision in Legal Medicine

○ Sorin Hostiuc



Domain of Evaluation

- Identification of morbid states that are the result of illicit medical acts, deficiencies, or non-compliance with medical technical standards
- Causal relationship between deficits and consequences
- Elements that can modulate the effect of deficits
- Elements that can break the causal link

Domain of Exclusion

- Medical guilt - Evaluated by judges
- Malpractice - Evaluated by Malpractice Commissions.

Types of Deficits - By Agent

Commissive (in agendo)

- involve active actions that lead to care deficiencies.

Examples: negligence, incompetence, superficiality

Omissive (in omitendo)

failure to perform necessary procedures/interventions, such as an examination or adequate treatment.

Breach of Professional Duty (in vigilando)

neglecting interprofessional relationships, such as failure to perform a requested consultation or improper supervision of subordinates.



Types of Errors (ECLM Classification)

1. Medical Error
2. True Error
3. Pseudo-error
4. Conscious Error
5. Non-compliance with Professional Conduct Rules
6. Medical Accidents (iatrogenic Injuries)

Types of Errors (By Therapeutic Management Component)

- Consent Errors
 - Violation of proper patient information, lack of informed consent, or consent obtained through pressure or manipulation.
- Diagnostic Errors
 - Error in establishing correct diagnosis, ignoring clinical signs, misinterpretation of investigation results.
- Prognostic Errors
 - Erroneous evaluation of disease evolution, failure to anticipate complications, failure to inform patient about risks.
- Supervision Errors
 - Failure to perform necessary monitoring, lack of patient evolution monitoring, failure to respond promptly to changes in clinical condition.
- Treatment Errors
 - Incorrect choice of treatment, incorrect medication administration, neglecting complications, or incorrect interventions.

Data Collection (Living Person)

1. Collection and Evaluation of Medical Data
2. Assessment of Consultation Necessity
3. Clinical Examination
4. History Correlation
5. Identification of Complications
6. Simulation Assessment
7. Clinical Data Synthesis

Criteria and Evaluation Algorithm

- **1. Comparative Data Evaluation** Medical record data are compared, analyzing treatment evolution and patient condition. For example, radiographs from different periods can be compared to identify significant changes or evolutions.
- **2. Identification of Pathological Aspects** Pathological aspects of interest are identified and classified, from initial to intermediate and final ones. In dentistry, for example, the evolution of cavities, gingival inflammations, or performed treatments are analyzed.
- **3. Effect Quantification** The consequences of care deficits are evaluated, quantifying effects on health status. For example, the degree of tooth damage, impact on masticatory function, or need for subsequent treatments can be assessed.
- **4. Identification of Optimal Medical Conduct** Specialized literature, protocols, and specific guidelines are analyzed to identify optimal medical conduct in the patient's particular case. Individual context, available therapeutic options, and patient's health status are considered.

Criteria and Evaluation Algorithm - Reconstruction of Medical Conduct

- **Reconstruction of Actual Medical Conduct** Real medical actions are chronologically reconstructed, based on medical documents and interviews.
- **Verification of Correctness** Actual conduct is compared with ideal conduct, considering patient specifics and available therapeutic options.
- **Error Identification** Discrepancies between actual and optimal conduct are identified, defining the nature and severity of errors.
- **Ex-Ante Evaluation** Reasons that justified inadequate conduct are analyzed, understanding the physician's context and constraints.
- **Causal Link** A clear and logical connection is established between medical deficiencies and negative consequences for the patient.

Evaluation of Causal Link Probability

- 1. Certain/Quasi-certain** When the causal link is incontestable, without doubts.
- 2. Probable (%)** When the causal link is plausible, but not completely certain.
- 3. Excluded** When the causal link is improbable, without solid support.

Evaluation of Causal Link Probability

- 100% - Certain/Quasi-certain
 - This category applies when the causal link is incontestable, without doubts.
- 50-99% - Probable
 - There is a plausible causal link, but not completely certain, with a probability between 50% and 99%.
- 0-49% - Excluded
 - The causal link is considered improbable, without solid support, with a probability between 0% and 49%.