Why Malpractice Reform Will Happen, Whether Lawyers Like It Or Not

Wes Fisher, M.D.

A collision is coming.

Scratch that.

The collision is here.

I'm not quite sure how to describe this, but I'll try.

Every day, I look at a computer screen for health care delivery with an increasing number of menu options. I tried counting these menu options once and after scrolling through them, I never reached all of them after counting up to 275 items.

Yes, there are more than that, but suffice it to say, for most of us, that's enough to make my point.

Next, are the data points that confront my eyes every day. Data points from all over and from all sorts of people. Some whose names I recognize (even a few from me), but more importantly, many of whom I don't. Hundreds and hundreds and hundreds of data points, streaming to me every single day.

What are these interrupters?

Many are orders for procedures.

Others are for results.

And phone calls.

And messages.

And patients recently admitted to other services for other procedures just so I know about them.

And patients to be scheduled for a procedure at a later date.

And blood draws.

And EKGs that have been ordered and not "signed."

And EKGs that have been read and not "signed."

And EKG results that were “signed” but returned to my “results” box just to remind me I “signed” them.

And … well, just about anything.

All as part of the Great Medical Health Care Team plan.

But wait, who ordered all of these procedures, tests, results to be sent my way?

Some I did, but far more often, other people did.

Those other people are people who have been ordained capable of ordering those tests by other people. Other people in our big, burgeoning health care system that extends over a larger an larger geographic area with more and more doctors than ever before.

And herein lies the challenge and the best hope for doctors’ liability reform going forward: diffusion of their responsibility.

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