Diagnostic Error Review Looks To Improve Patient Safety

Errors related to missed or delayed diagnosis are frequently a cause of patient injury, and therefore an underlying cause of patient safety related events. Autopsy analysis spanning several decades show error rates at four to 50 percent, according to an article released today by the Pennsylvania Patient Safety Authority.

Diagnostic error is a diagnosis that is missed, incorrect, or delayed as detected by a subsequent definitive test or finding. Diagnostic errors are encountered in every specialty and are generally lowest (less than five percent) for certain specialties that rely on visual pattern recognition and interpretation (e.g., radiology, pathology, dermatology).

Error rates in specialties that rely more on data gathering and the combination of different elements for a conclusive diagnosis are higher (10 to 15 percent). “Diagnostic errors are often the first or second leading cause of medical malpractice claims in the United States,” Dr. John Clarke, clinical director of the Pennsylvania Patient Safety Authority said. “They account for twice as many ongoing and settled claims as medication errors.”

Clarke added that studies have also shown that both cognitive errors and system design flaws contribute to diagnostic error. “Communication issues, along with reasoning errors and system breakdowns all contribute to diagnostic errors,” Clarke said. “The Advisory article reviews the common causes of diagnostic error and gives healthcare providers and patients information on how they can decrease the risk of a diagnostic error and thereby increase patient safety.”

One study cited in the article argued that even though doctors are well aware of the possibility of diagnostic error, doctors rarely believe that their own error rates are significant, further compounding the difficulty in analyzing diagnostic error.

For the complete *2010 September Pennsylvania Patient Safety Advisory*, go to www.patientsafetyauthority.org [1]

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