National Reporting Isn’t The Answer To Reduce Medical Errors

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In the *Wall Street Journal,* [1] surgeon Dr. Marty Makary discusses the alarming costs of medical errors and offers suggestions to improve the system. In medicine, particularly during the training years of residency and fellowship, young doctors are not given the opportunity or security to report shortcomings of their superiors.

As discussed in the article, all of us have a memory of a particular surgeon or clinician who was not very proficient at his or her specialty but was allowed to continue practice due to perceived national or international academic prestige or reputation. Dr. Makary offers up solutions that he believes will decrease error rates including: publishing hospital scorecards online, installing cameras for peer review, open notes and eliminating the culture of “gagging.”

As part of national training requirements, all teaching hospitals are required to have a regularly scheduled morbidity and mortality (M and M) conference for housestaff. These meetings typically consist of a case presentation by a trainee where the outcome of the hospitalization was sub-optimal and the deficiencies in care are debated and discussed. The focus of the best conferences is always placed on the central question of “what could we have done differently to change the outcome?”

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