



Medical-Error Victimization: The Facts

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What are Medical Errors? [1, 6]

Medical error has been defined as an unintended act (either of omission or commission) or one that does not achieve its intended outcome, the failure of a planned action to be completed as intended (an error of execution), the use of a wrong plan to achieve an aim (an error of planning), or a deviation from the process of care that may or may not cause harm to the patient. Depending on the nature of the medical error, it could be considered medical negligence, medical malpractice, or both. Patient harm from medical error can occur at the individual or system level. In the United States, the patient alleging medical malpractice must generally prove four elements or legal requirements to make out a successful claim, including the existence of a legal duty on the part of the doctor to provide treatment to the patient as well as a breach of this duty by a failure of the treating doctor to adhere to the standards of the profession.

Have you Heard? [2, 4, 5]

- Medical errors are the third-leading cause of death in the U.S., after heart disease and cancer.
- Although the first victims of medical errors are the patients who are harmed and their families, doctors and staff also sustain complex psychological harm when involved in errors that harm patients and are often referred to as second victims.
- Many survivors of medical malpractice do not file claims because they are unable to find attorneys willing to take their cases.

What are the Consequences? [3, 5]

Victims of medical errors more often face various nonphysical problems than others. Care for victims should therefore, besides physical health, also include the assessment and targeting of their problems regarding mental health, work, religion, legal issues, and finance. While studies indicate that 1% of hospital patients are victims of medical negligence, fewer than 2% of these injured patients file claims. In fact, 95% of medical malpractice victims will find it extremely difficult to find legal representation unless their damages are significantly larger than the typical damages for their types of injuries. Thus, the medical liability system seemingly silences many legitimate victims of medical malpractice.

How to Support Survivors? [2, 3]

- Be a wise consumer of health care by demanding quality, cost-effective care for yourself and those you love by:
 - pushing for policies and laws that favor safer care, transparency, and accountability
 - and facilitating a widespread understanding and recognition of the enormous emotional toll second victims endure after involvement in a harmful event.
- In addition to supporting patients and families who are harmed by medical errors, we must also support the practitioners involved in such errors, especially when they meant to do good and now find themselves in a situation where a patient has been harmed by the unintended consequences of their actions.

Resources

Texas

- Texas Health and Human Services -- <https://www.dshs.texas.gov/preventable-adverse-events/pae-reporting>
- Texas Watch -- <https://www.texaswatch.org/patient-safety>
- Texas Medical Association -- [https://www.texmed.org/liability/#:~:text=Call%20\(800\)%200580%2D8558,tmlt.org%20for%20more%20information.](https://www.texmed.org/liability/#:~:text=Call%20(800)%200580%2D8558,tmlt.org%20for%20more%20information.)

National

- National Hospitalized Patient Bill of Rights -- <http://www.patientsafetyamerica.com/legislative-goals/>
- National Coordinating Council for Medication Error Reporting and Prevention -- <https://www.nccmerp.org/>

References

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- [3]Grissinger, M. (2014). Too many abandon the "second victims" of medical errors. *Pharmacy and Therapeutics*, 39(9), 591.
- [4]van der Velden, P. G., Contino, C., Akkermans, A. J., & Das, M. (2020). Victims of medical errors and the problems they face: a prospective comparative study among the Dutch population. *European journal of public health*, 30(6), 1062-1066.
- [5]Shepherd, J. (2014). Uncovering the silent victims of the American medical liability system. *Vand. L. Rev.*, 67, 151.
- [6]Bal, B. S. (2009). An introduction to medical malpractice in the United States. *Clinical orthopaedics and related research*, 467, 339-347.

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Resources

- Texas Abuse Hotline (suspicions of abuse, neglect, and exploitation of children, adults with disabilities, or people 65 +) <https://www.txabusehotline.org/Login/>
800-252-5400
- Texas Council on Family Violence <https://tcfv.org/survivor-resources/>
- Texas Association Against Sexual Assault <https://taasa.org/get-help/>
- National Domestic Violence Hotline 800-799-7233
- National Sexual Assault Hotline 800-656-4673
- National Human Trafficking Hotline 888-373-7888
- Aging and Disability Resource Center 855-937-2372
- Victim Connect Resource Center 855-484-2846
- National Suicide Prevention Lifeline 988