

## Error record

**Error** recording and monitoring is an important component of error prevention and **quality** assurance in the **health** sector given the huge impact of medical errors on the well-being of **patients** and the financial loss incurred by health institutions. With this in mind, assessing the effect of reporting errors should be a cause worth pursuing.

Intraoperative errors and their characteristics were prospectively recorded between May 2000 and May 2013 in the neurosurgical practice of the senior author (M.B.). The error pattern observed between May 2000 and August 2006, which has been previously described (Group A), was compared with the error pattern observed between September 2006 and May 2013 (Group B).

A total of 1108 cases in Group A and 974 cases in Group B were surgically treated. A total of 2684 errors were recorded in Group A, while 1892 errors were recorded in Group B. The ratios of cranial to spinal procedures performed in Groups A and B were 3:1 and 10:1, respectively, while the ratios of general to local anesthesia in the two groups were 2:1 and 1.3:1, respectively ( $p < 0.0001$  for both). There was a significantly decreased proportion of cases with error (87% to 83%,  $p < 0.006$ ), mean errors per case (2.4 to 1.9,  $p < 0.0001$ ), proportion of error-related complications (16.7% to 5.5%,  $p < 0.002$ ), and clinical impacts of error (2.7% to 1.0%,  $p < 0.0001$ ) in Group B compared with Group A. Errors in Group B tended to be more preventable than those in Group A (85.8% vs 78.5%,  $p < 0.0001$ ). A significant reduction was also noticed with most types of error. A descending trend in the mean errors per case was demonstrated from the years 2001 to 2012; however, an increased severity of errors (22.6% to 29.5%,  $p < 0.0001$ ) was recorded in Group B compared with Group A.

Data in this study showed that the act of recording errors might alter behaviors, resulting in fewer errors <sup>1)</sup>

<sup>1)</sup>

Oremakinde AA, Bernstein M. A reduction in errors is associated with prospectively recording them. J Neurosurg. 2014 Aug;121(2):297-304. doi: 10.3171/2014.5.JNS132341. Epub 2014 Jun 13. PubMed PMID: 24926649.

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