

Many studies [report](#) that the most common cause for [malpractice](#) claims is “[diagnostic error](#) including [delayed diagnosis](#)/ [missed diagnosis](#)/ [wrong diagnosis](#)”.

To identify factors associated with severe harm and [mortality](#) in malpractice claims due to delayed/wrong diagnosis, Shahaf et al. reviewed records of malpractice claims against Clalit Health Services due to delayed/failed diagnosis in [2010-2019](#).

The study included 354 claims (60.9% males, median age: 48). [Primary care physicians](#) were involved in a third of cases. The most common correct diagnoses were [cardiovascular disease](#) (21%), [infection](#) (19%) and [cancer](#) (16%). The level of [harm](#) was moderate in 38%, and severe in 24%, while 25% died. In a [multivariable](#) analysis, factors associated with severe harm were age, cancer or a cardiovascular disease, the department involved (pediatrics, internal medicine or primary care were associated with severe harm) and the physician's specialty (neurology/neurosurgery associated with severe harm). Factors associated with [mortality](#) included age, cancer or a cardiovascular disease, involvement of the internal medicine department and the physician's specialty (internal medicine associated with mortality).

About half of [malpractice claims](#) involved delayed/failed diagnosis resulting in severe [harm](#) or [mortality](#). Factors associated with severe harm and mortality include age, the diagnosis and the medical specialty involved.

It is important to be familiar with delayed/failed diagnosis as a major cause of harm in health services and in malpractice claims ¹⁾.

¹⁾

Shahaf P, Imber-Shahar T, Djarasi R, Weistein O, Dreier J. [DIAGNOSTIC ERROR: PREDICTING THE SEVERITY OF HARM]. Harefuah. 2022 Mar;161(3):149-155. Hebrew. PMID: 36259399.

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