

Closed Claims Related to Wrong-Site Surgery Illuminate Risk Factors and Interventions



Wrong-site surgeries (WSSs) can cause serious medical and emotional harm, as well as significant financial and legal consequences for patients and healthcare providers. While the incidence of WSS is low, it accounts for 7.9% of sentinel events voluntarily reported to The Joint Commission from 2018 to 2021.



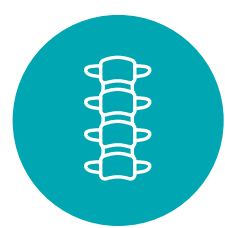
A study featured in the May 2023 issue of *The Joint Commission Journal on Quality and Patient Safety (JQPS)* analyzed a medical malpractice company's closed claims data on WSS to identify risk factors, patterns and other circumstances of WSS with the goal of improving patient safety by identifying interventions to mitigate these risk factors.

The study reviewed 68 WSS closed claim cases from 2013 to 2020. **Researchers found...**

The services most frequently responsible for WSS were...



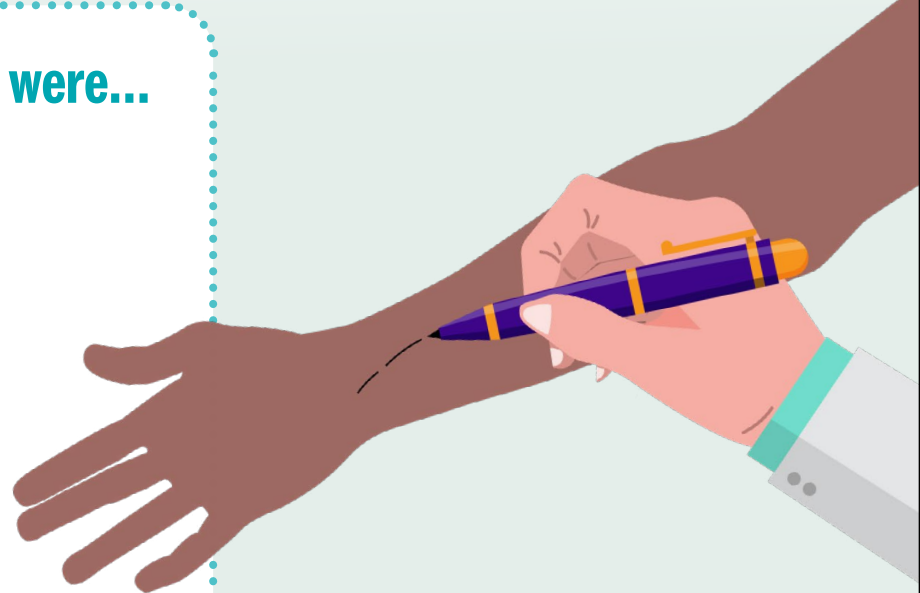
Orthopedic
35.3%



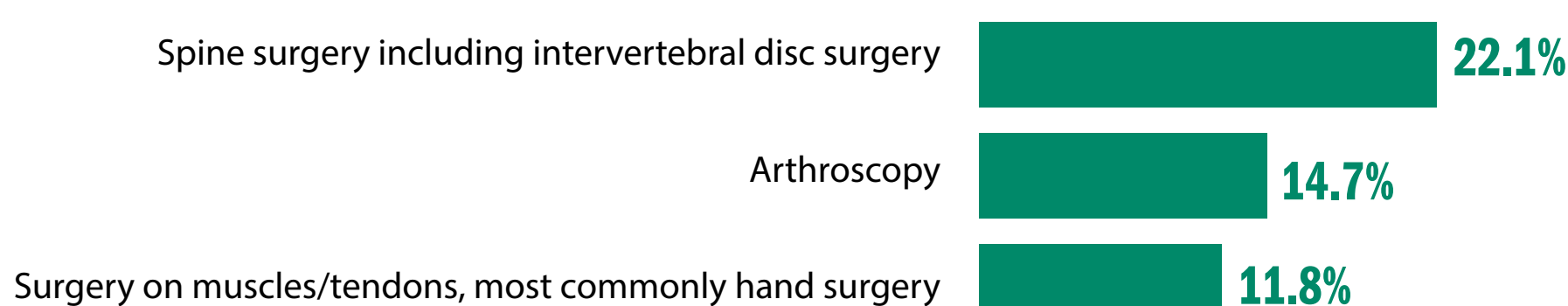
Neurosurgery
22.1%



Urology
8.8%



The most common types of procedures involving WSS were...



Most WSSs caused significant patient harm and the severity of claims was higher in the inpatient setting compared to the ambulatory setting.

Ambulatory Setting 47.1%

In the ambulatory setting, **18.8%** of claims were low severity and **81.2%** were medium severity.

Inpatient Setting 52.9%

In the inpatient setting, **2.8%** of claims were low severity, **63.9%** were medium severity, and **33.3%** were high severity.

The most common alleged injuries related to WSS included...

The need for additional surgery
45.6%

Pain
33.8%

Mobility dysfunction
10.3%

Worsened injury
8.8%

Death
7.4%

Total loss
7.4%

Scarring
7.4%



The top contributing factors to WSS were...

Failure to follow policy/protocol
83.8%

Failure to review medical records
41.2%

Selection/management of surgical treatment
39.7%

Inconsistent documentation
32.4%

Known complication—technical issues
26.5%

Communication among providers
26.5%

The study found that the risk of WSS is increased with spine surgeries and that the leading factor contributing to WSS was the failure to follow policy/protocol. Further research is required to identify effective methods of prevention of these events.

To learn more about this study, visit:

[https://www.jointcommissionjournal.com/article/S1553-7250\(23\)00053-3/fulltext](https://www.jointcommissionjournal.com/article/S1553-7250(23)00053-3/fulltext)