

Cardiothoracic surgeons

Overview

- Almost 60% of complaints and claims were related to the procedure or surgery.
- Alleged poor surgical performance, skill or competence resulting in injury and complications was the most common reason for claims.
- A poor consent process was another significant concern.
- Experts and/or regulators found that cardiothoracic surgeons met the standard of care in 60% of complaints and claims received.
- Most coronial cases were finalised without conducting an inquest.

Practice points

- Outcomes that don't meet patients' expectations are frequent reasons for claims.
- The consent process should include a discussion to ensure patients understand the potential outcomes, limitations, risks and any possible out-of-pocket costs before undergoing their procedure.
- Document your discussions and ensure you maintain detailed medical records.
- Regularly review and update your surgical techniques to ensure they align with current best practice standards.
- Avant provides support for members involved in coronial investigations. Find out more <u>here</u>.

Incidence and type of matters are based on all matters indemnified by Avant for cardiothoracic surgeons from FY 2020-24. Main issues and assessment of care are based on Avant complaints and claims closed from FY 2019-24. Coronial findings are based on coronial matters closed from FY2020-24.



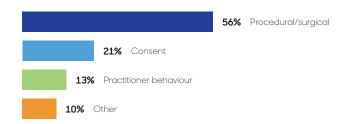
1 in **8***

Avant cardiothoracic surgeon members per year were subject to one or more matters relating to their provision of health care.

Types of medico-legal matters



Main issues in complaints and claims



Procedural/surgical issues

56% of claims relate to procedural/surgical issues. Of these, the most common allegations were:

- Poor surgical performance/skill/competence (e.g. phrenic nerve damage, other injury or complications associated with the procedure) (45%)
- Issues involving the selection or use of a medical device/ prosthesis/fixation (e.g. device-related injury such as bleeding and nerve damage) (17%).

Of the procedures involved in these cases, 69% were cardiovascular (e.g. aortic valve replacement, coronary artery bypass) and 17% involved the lungs.

 $(\% \ \text{of total procedural/surgical issues})$

^{*}Five-year average

Consent

In 21% of claims, the primary issue was a poor consent process. The most common concern was a lack of discussion about the risks associated with the procedure, treatment, or test.

Assessment of the care provided

Experts and/or regulators assessed the care provided in complaints and claims, with the following results:

40%	60%
Below standard	Met the standard

(% of complaints/claims where the assessment of the expected standards on the main factor is known.)

Glossary

- 1. Matters include claims, complaints, coronial cases and other matters such as employment disputes and Medicare.
- 2. Claims refers to claims for money, compensation and civil claims.
- 3. Complaints relates to formal complaints to regulators including Ahpra, HCCC in NSW and OHO in Queensland.
- Employment disputes are matters where Avant defends members against complaints or supports members to resolve employment issues.
- Medicare matters include Medicare investigations and audits.

Coronial

Coronial cases* comprised 31% of overall matters. The most common diagnoses involved in these cases were heart diseases (40%), malignant neoplasm of the bronchus and lung (20%) and vascular diseases (16%).

Most coronial cases were finalised without an inquest.



*Coronial cases in this analysis were cases that were reported to the coroner/"reportable deaths" and had a solicitor appointed.

Medico-legal advice

If you receive a claim or complaint, contact us on 1800 128 268 for expert <u>medico-legal advice</u> on how to respond - available 24/7 in emergencies.

For any queries on this analysis, please contact us at research@avant.org.au



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