

Cardiologists (interventional and non-interventional)

Overview

- Most complaints and claims were about issues relating to interventions and procedures, diagnosis and management issues.
- Alleged poor interventional performance, skill or competence resulting in complications were common reasons for claims.
- Delays or errors in diagnosis had a significant impact on patients. Most of these involved issues linked to diagnostic testing and examination.
- Cardiologists met the standard of care in over 70% of complaints and claims against them.

Practice points

- Adverse events during procedures often drive complaints and claims.
- The consent process should involve a discussion so patients understand the potential outcomes, limitations and risks before their procedures.
- Inadequate use of diagnostic tests may contribute to diagnostic error. Ensure thorough testing when indicated to avoid assumptions or omissions.
- Don't miss documenting discussions with your patients, your decision-making rationale and significant negative findings on history and examination.

Incidence and breakdown by type of matter are based on all matters indemnified by Avant for cardiologists from FY2019-23. Underlying themes and assessment of care are based on Avant complaints and claims closed from FY2019-23.

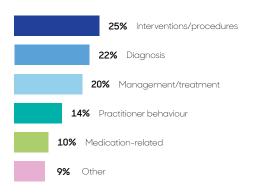


1 in **11***

Avant cardiologist members were subject to a complaint, claim, employment dispute or another type of matter relating to their provision of health care, each year.

*Five-year average

Main issue in complaints and claims



Types of medico-legal matters



The stage of care during which interventional/procedural issues occurred



Pre-intervention e.g. allegations of improper selection of interventional approach

53%

Intra-intervention e.g. allegations of poor interventional performance/skill/competence (resulting in complications such as artery damage), failure, misuse or improper insertion of medical device leading to complications



Post-intervention e.g. allegations of poor followup or management of post-interventional complications.

(% of total interventional/procedural issues)

Diagnosis

Diagnosis-related claims referred to failed or delayed diagnosis or misdiagnosis. 71% of these cases resulted in severe or permanent injury including death.

Most diagnosis-related claims involved allegations related to diagnostic tests and examinations, such as:

- Failure or delay in referring for or performing diagnostic tests (24%)
- Inadequate examination (20%)
- Incorrect interpretation of results (14%).

(% of total diagnosis-related issues)

Management/treatment

67% of claims related to management and treatment were concerns about the ongoing assessment and testing of the patient. Main issues related to:

- Diagnostic tests (37%) e.g. delay/failure to refer for appropriate diagnostic testing, issue with tests requested
- Referrals (17%) e.g. delay or failure to review and refer patient.

(% of total management/treatment issues)

Assessment of the care provided

Experts and/or regulators assessed the care provided and found:

| 29% | 71% |
|---------------|------------------------|
| elow standard | Meets standard of care |

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

Glossary

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- 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.
- Employment disputes are matters where Avant defends members against complaints or supports members to resolve employment issues.
- 5. Medicare matters include Medicare investigations and audits.

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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IMPORTANT: Avant routinely codes information collected in the course of assisting member doctors in medico-legal matters into a standardised, deidentified dataset. This retrospective analysis was conducted using this dataset. The findings represent the experience of these doctors in the period of time specified, which may not reflect the experience of all doctors in Australia. This publication is not comprehensive and does not constitute legal or medical advice. You should seek legal or other professional advice before relying on any content, and practise proper clinical decision-making with regard to the individual circumstances. Persons implementing any recommendations contained in this publication must exercise their own independent skill or judgement or seek appropriate professional advice relevant to their own particular practice. Compliance with any recommendations will not in any way guarantee discharge of the duty of care owed to patients and others coming into contact with the health professional or practice. Avant is not responsible to you or anyone else for any loss suffered in connection with the use of this information. Information is only current at the date initially published. © Avant Mutual Group Limited 2024. Insight-11a Published and current as of: 12/24 (DT-4115)