



ETHICAL DIMENSIONS

Medical Error, Adverse Event, or Informed Consent?

Issue #24

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This issue of *Ethical Dimensions* is different from other issues in that it is a follow-up to the Fall 1997 issue, "Risks & Responsibility: Reporting Medical Errors." That issue presented the case of Ben, a twelve year old boy who underwent appendectomy surgery. During the surgery, the surgeon discovered that Ben's appendix was normal. We presented the case and accompanying questions in terms of a medical error and received more mail from our members on this case than any other we have presented in *Ethical Dimensions*. We appreciated your feedback. We continue to learn from you and would like to report what certainly can be understood as an error on our part.

A number of you objected to our characterization of the removed, healthy appendix as a *medical error*. In at least one sense of the phrase, it is a medical error: i.e., the patient submitted to an operation that was not needed. However, it is what would generally be understood as an "avoidable error," under the more general category of "adverse event." The category of adverse events is usually thought to include unavoidable and avoidable errors. If the patient is not asked about allergies to antibiotics and has a reaction, that is an avoidable error; if the patient is asked and has no knowledge of allergies, but has a reaction, that is an unavoidable error. Because many caregivers and patients think of medical error as involving negligence or as at least being theoretically preventable, we were in error in presenting Ben's case in terms of medical error. We should have used the phrase, "adverse event."

Does the case of Ben and his healthy appendix present a problem? As some members pointed out, absolute diagnosis of appendicitis often requires surgery, so surgery is an appropriate medical intervention when appendicitis is suspected. Indeed, approximately 25% of appendectomy surgery results in the finding of a healthy appendix. Given that we know that to be a potential outcome of such a surgery, should such a situation instead be thought of in terms of informed consent? That is, if we know that a likely outcome of such surgery is the finding of a healthy appendix, shouldn't the patient be informed of that so that he/she has all of the information needed before consenting to the surgery? Should the patient understand the surgery through the informed consent process as one not of treatment (at least initially), but of diagnosis?

We thought we might represent the case, taking readers' concerns in mind, with some additional questions.

**(ED.) PLEASE SEE THE PREVIOUS SHEET (Issue 23) FOR THE CASE AND QUESTIONS
"Medical Error, Adverse Event, Or Informed Consent ?"**



**OPINIONS AND FEELINGS ARE FREQUENTLY A PERSONAL TRIUMPH OVER GOOD THINKING
YOU DEFINE REALITY BY WHAT YOU KNOW, WHAT YOU BELIEVE, AND WHAT YOU DO ABOUT IT.**