



Orthopedic Surgery

A Guide to Common Areas of Risk and How to Address These

	Key Areas for Errors	Strategies to Reduce Errors
<p>Delayed Diagnosis of Complications (Failure to Recognize and Rescue)</p>	<ul style="list-style-type: none"> • Compartment syndrome • Neurovascular compromise • Pulmonary embolism • Infections • Communication failures <ul style="list-style-type: none"> • With nursing and physician extenders • With primary care providers • With other specialists • With patients and their families • Review of images 	<ul style="list-style-type: none"> • Recognize that sedation and long-acting blocks can mask complications • Vital signs are vital • Proper communication with providers (especially pathologists/radiologists) and patients/family can avoid delayed or inappropriate operations • Use closed loop communication to alert any other providers who may need to know about the findings • Personal review of radiology images reduces chances of arriving at/acting upon an incorrect diagnosis • Training/low threshold for consultation when signs/symptoms of primary complications occur
<p>Frequency Reduction and Management of Complications</p>	<ul style="list-style-type: none"> • Informed consent • Appropriate indications • Preoperative evaluation and risk reduction • Acceptable technique • Early recognition of complications • Early reporting of unexpected adverse outcomes to Copic for consideration of communication and resolution program—3Rs Program 	<ul style="list-style-type: none"> • Person performing procedure completes process of detailing risks, alternatives, indications, benefits, and assessment of understanding • Ensure right operation for right patient based on your assessment • Pre-op evaluation is more of an exact science based on risks and co-morbidities of each patient (e.g., DVT & OSA risk, nutritional status, etc.) • Binary thinking of "cleared for surgery" misses important risk reduction considerations • Evaluation based on documentation in operative note, and adherence to perioperative safety behaviors such as timeouts and briefings • Attention to early warning signs and avoidance of cognitive errors such as anchoring bias including a low threshold for seeing patient in person



3Rs Program:
Early intervention and resolution program to preserve relationships

24/7 Risk Management Hotline:
Physician risk managers available for guidance

Education:
Specialty-specific education, on-demand courses, virtual programs, and seminars

Copiscope:
Our newsletter that covers current topics in risk management and patient safety

Online Resource Library:
Clinical guidelines, consent forms, practice management resources, and more