## CLAIM REPORTING GUIDELINES

The following should be reported to Physicians Insurance:

- Unexpected brain damage following any treatment or procedures
- Any surgical procedure performed on the wrong patient or at the wrong site
- Cardiac arrest in the operating or recovery room resulting in unexpected death, brain damage or other serious injury to the patient.
- Suicide attempt resulting in death or serious injury to the patient
- Misdiagnosis in the Emergency Department resulting in death or permanent serious injury to the patient. Death within 48 hours following discharge from the Emergency Department.
- Anesthesia complications resulting in coma, death, paralysis or other serious injury
- Unexpected amputation due to poor outcome of any treatment or procedure
- Second or third degree burns as a result of any treatment or procedure
- Unexpected return to surgery during the same admission regardless of reason
- Obstetrical occurrences:
  - o Maternal or neonatal death
  - o Infants with five minute Appars less than 6
  - Infants born at less than 34 weeks gestation in hospitals without NICUs or neonatology coverage
  - Infants born at greater than 34 weeks gestation transferred to any NICU
  - o Term infants that experience seizures before discharge

- Unexpected patient death
  - Death occurring from slip or fall, medication error, equipment failure
  - Following usually non-fatal procedure, i.e., cholecystectomy in 30 year-old healthy person
- Incidents resulting in impaired patient/visitor functioning or injury
  - o Slips/falls resulting in fracture, sprain, head injury, etc.
  - o Transfusion error/serious reaction, i.e. wrong type of blood infused, given to the wrong patient
  - Major IV therapy errors, i.e., wrong rate resulting in overloading/under infused, tissue/vein damage, wrong solution
- Major biomedical device failure/damage resulting in injury or having the potential for injury to a patient or visitor. This is also important for compliance with the Safe Medical Devices Act.
- Equipment or supply defect or damage resulting in injury to a patient. SMDA reporting requirement as well.
- Neurological deficit not present on admission. (Exception: transitory deficit resolved by the time of discharge.)
- Organ or system failure not present on admission. (Exception: patient admitted in critical condition or terminal condition)
- Patient or family says that they will sue
- Receipt of demand letter from patient or attorney
- Request for records by an attorney, unless you know it regards a situation not directly involving your medical care, such as a patient involved in a motor vehicle accident or Workers' Compensation claim.
- Lawsuit
- Demands for compensations, lawsuits or Equal Employment Opportunity Commission (EEOC) notices from current or former employees
- State Medical Board Investigations
- Privacy Breeches