FORENSIC CHARACTERISTICS OF MEDICAL CARE ERRORS COMMITTED BY ANESTHESIOLOGISTS-RESUSCITATORS

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ANNOTATION

Every citizen of the Russian Republic of Uzbekistan is guaranteed by the state, as stated in the constitution, the use of qualified medical care. In recent years, great attention has been paid to measures aimed at improving the quality of medical care. In this matter, the commission of forensic medical expertise on the activities of medical personnel has a special place. It should be noted that the analysis of these materials is neglected.

Key words: forensic examination, medical care defects.

Commission of forensic medical expertise s conducted on the activities of anesthesiologists-reanimatologists in forensic medical examination institutions of our republic were obtained. First, a special classification of medical care deficiencies was developed, taking into account the characteristics of the anesthesiologistreanimatologist. In this classification, the types of deficiencies, the reasons for the occurrence of specific defects, the institution of the defect, and the effect of the occurrence of specific defects on the health and life of the patient are distinguished.

A total of 59 Commission of forensic medical expertise related to the activities of an anesthesiologist-reanimatologist were conducted, and 91.5% of them were found to be deficient. A total of 86 Defects in medical cares were identified, and each of them was studied one by one, due to the fact that several defects were allowed in most cases.

Defects in medical care was divided into groups of diagnostic, treatment and other defects based on their essence. According to the results of the analysis, out of 86 Defects in medical care, the leading place were the errors made in diagnostics by anesthesiologists-reanimatologists, which amounted to 35. 28.6% (10) of the identified 40.7% of diagnostic Defects in medical cares were non-detection of the main disease or injury (mainly brain tumor, cerebral blood circulation disorder, acute cardiovascular and respiratory failure) and late diagnosis in 31.4% (11), treatment defects were identified in 36.0% of cases (31), of which In 64.5% (20 cases) it consisted of late admission of the patient to the hospital or anesthesiology-reanimatology department. There were relatively few defects in the appointment, conduct and treatment of medical procedures. 3rd group of defects in 23.3% were mainly related to defects in keeping medical records and transporting patients.

In the legal assessment of shortcomings in the activities of medical personnel, the causes of their occurrence and the degree of impact on the outcome are of great importance. According to the data obtained, 36 of the shortcomings in medical care were associated with subjective reasons, mainly due to the inadequate qualifications of anesthesiologists and resuscitators. Out of 86 Defects in medical cares, 33.7% (29) occurred for reasons unrelated to medical personnel and the medical institution. Most of them were due to late appeal for medical care. In total, organizational reasons were identified in 21 Defects in medical cares, including shortcomings in the organization of the treatment-diagnostic process in the medical institution and the provision of diagnostic tools.

It was found that the shortcomings in the work of anesthesiologists and resuscitators have a serious impact on the health of patients, and in 33.7% (29) of 86 shortcomings, they had a significant impact on the outcome, leading to the death of the patient. In 18.6% of cases, shortcomings in the work of anesthesiologists and resuscitators were the direct cause of the death of patients. According to the conclusions of the commission of forensic medical expertise, shortcomings in the work of anesthesiologists and resuscitators were mainly observed in central district hospitals (30), in the emergency medical care system (22) and in city hospitals (19).

Conclusion:

A general analysis of the shortcomings of the defects in medical care made by anesthesiologists-resuscitators based on the Commission of forensic medical expertise materials in the forensic medical examination institution of our country may be useful in developing measures to improve their activities.

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