



The top ten significant incident reports in emergency medicine

Themes identified as the 10 most commonly reported clinically significant incident reports in Emergency Medicine

Dr Emma Redfern, Dr Adrian Boyle, Sam McIntyre

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Clinical incidents reported regarding care provided in the Emergency Department (ED) are submitted to the National Reporting and Learning System. This data is then made available to the Royal College of Emergency Medicine (RCEM) every 6 months. A review of the incident reports has enabled RCEM to identify themes and to develop a safety alert and podcast programme.

Between January and July 2015, 61,449 incidents were reported by EDs or about ED care.

The Top Ten themes of clinically significant incidents:

- 1) Missed serious pathology in elderly patients presenting with abdominal pain
- 2) Missed aortic dissection
- 3) Missed neck of femur fracture - either no X-ray considered when patient has collapsed and fallen due to an obvious medical problem, or X-ray interpreted as normal but occult hip fracture not considered
- 4) Missed cervical spine fracture in elderly patients with falls, often having had a CT head
- 5) Failure to recognise clinical deterioration
 - either in the corridor/queue
 - patient in ED after being referred to the specialty team
 - prior to transfer to ward
- 6) Failure to administer regular medication (e.g. for epilepsy, diabetes and Parkinson's) when the patient is in the ED for prolonged period
- 7) Treatment for hyperkalaemia both prescription and administration
(confusion with prescription for DKA)

- 50 units actrapid in 50mls of 50% dextrose
 - 50 units in 50mls sodium chloride
 - Correct prescription, incorrect preparation
- 8) Failure to recognise stroke symptoms and appropriately escalate for consideration of thrombolysis
 - 9) Administration of penicillin-containing drugs to patients with documented penicillin allergy
 - 10) Failure to acknowledge and act on abnormal test results

By identifying these 10 most commonly reported incidents, RCEM aims to help emergency medicine healthcare professionals improve patient care, improve patient safety and reduce harm.