

Medical Malpractice Risk Assessment in Plastic Surgery

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Abstract

Background: In a society where litigation has become almost conventional, plastic surgeons are particularly vulnerable to malpractice claims as their practices consist of primarily elective procedures and frequently patients with unrealistic expectations. Previous authors evaluated the cumulative risk of being sued by medical specialty and found that physicians performing surgical procedures made up the top five physicians types who faced a malpractice claim annually.¹

Methods: In this study, we expanded the data set of previous studies^{1,2} with characterization of malpractice risk assessment specific to the field of plastic surgery. Data from a medical insurance association from 1985 to 2010 was analyzed for 25 medical specialties.

Results: During this period, 256,225 closed claims were identified, of which 9,312 (3.6%) represented plastic surgery claims. Of the \$16 billion paid for all medical specialties combined, the total indemnity payment for liability claims for plastic surgery procedures was \$297 million (1.86%). Physicians performing these plastic surgery procedures were frequently male (74.5%), between the ages of 35 and 54 (70.1%), and of solo practice settings (62.7%). It is important to note that the physicians performing these plastic surgery procedures were not necessarily all board-certified plastic surgeons. Physicians performing plastic surgery procedures ranked 8th in the number of claims filed and 13th in total amount of indemnity paid, which is 44.1% less than the overall average of other medical specialties. A trend analysis of plastic surgery claims in 5-year intervals demonstrated an initial increase during the 1985-1995 decade, but has since been on a steady decline. The 10 most prevalent medical misadventures in plastic surgery procedures were evaluated; “improper performance of a procedure” was the most common (48.2%). The top procedures named in these claims included those of the skin, nose, eyelid, and breast.

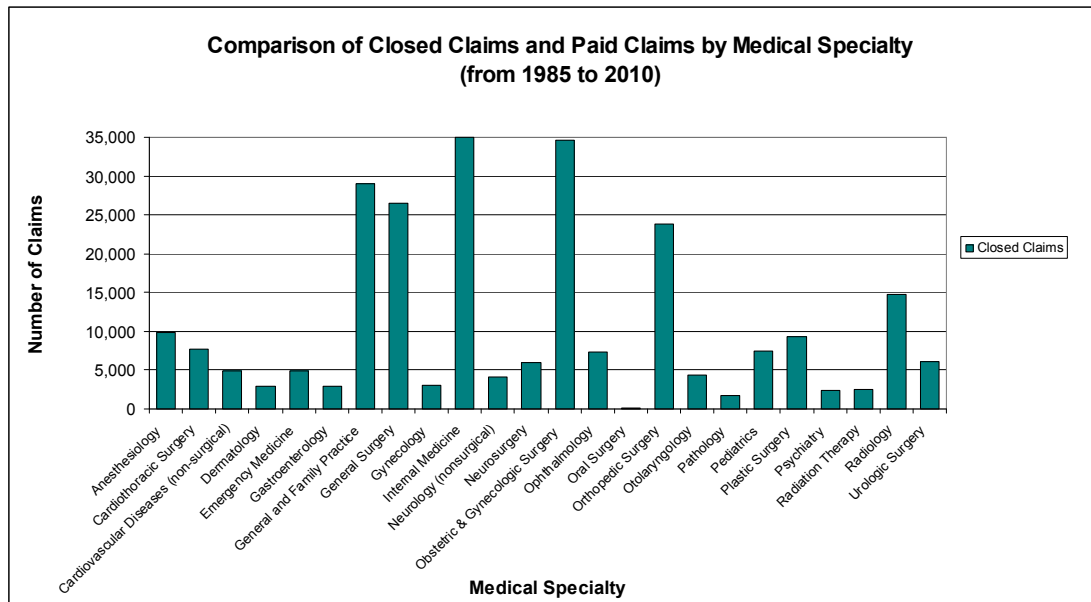


Figure 1. Medical specialties that had the most closed claims from 1985 to 2010 were internal medicine, obstetrics/gynecologic surgery, general and family practice, general surgery, and orthopedic surgery. Plastic surgery ranked 8th in the highest number of closed claims. Among specialties with the fewest number of closed claims were oral surgery, pathology, psychiatry and radiation therapy.

Conclusions: Although claims associated with plastic surgery procedures constitute a small fraction of other specialties, these are still detrimental to the viability of our specialty. Plastic surgeons can protect themselves by properly obtaining informed consent, being familiar with malpractice insurance policies, and continuing to provide the standard of care. Comparisons of procedures performed by board-certified plastic surgeons and non-plastic surgeons will be the focus of our future research assessments.

References

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