

## **Role play – Disclosing Medical Error**

Agenda: Read this scenario silently and prepare (2 min.), role play the discussion (5-10 min.), debrief the role play as a group (20 min.)

**Objectives** – After participating in this role play, learners will be able to:

- Describe the emotions experienced by health care professionals and by patients when discussing a medical error
- Disclose errors in compassionate, patient-centered ways, including the effective use of apology where appropriate

### **Instructions for the physician role (Dr. N)**

Setting: Exam room in your office

Scenario: Mr. T, a generally healthy businessman with controlled hypertension, has been your patient for 5 years. He is coming to see you in follow up from an Emergency Department (ED) visit last week, and you added him onto your clinic schedule as the last appointment of the day. He went to the ED for pleuritic chest pains following a cold he caught while traveling in Europe. The ED physician had suspected pulmonary embolism so ordered a chest CT. Fortunately, this was negative for PE; and the physician concluded Mr. Thomas likely had pleurisy associated with a viral respiratory illness. Unfortunately, a suspicious looking 2.7 cm nodule was in the left lower lobe, and that is why Mr. Thomas is coming to see you.

Over lunch you reviewed his chart. There had not been reason previously to image his chest. About 3 years ago you saw him with abdominal pains and ordered an abdominal CT. That study was negative for intra-abdominal processes that would explain his pain, and the pain went away on its own. As you read that report, you discover there was an incidentally seen 1 cm nodule in the left lower lung cuts at the beginning of the CT images; and the radiologist commented that further imaging may be warranted. To your horror, you do not recall noticing that part of the CT report 3 years ago, and there is no documentation in the chart that you were aware of the result, communicated it to the patient, or planned any follow up.

Had you noticed it, you would have either ordered a chest CT then, or you would have referred him to see a pulmonologist for consultation. At this point, the growth and appearance of the nodule is worrisome for cancer. A biopsy will be necessary. If it turns out to be cancer, it will be hard to estimate how much worse his prognosis will be now after a delay in diagnosis.