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Reinventing The Tradition Of Morbidity And Mortality Conference: Turning Anecdotes Into Databases

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and Darwin Ang, MD, PhD

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2020 Disclosure Slide



- Tandis Soltani, MD
- Nothing To Disclose.

Introduction

- **Problems:**
- Anecdote focus
- Deja vu Moments
- How do we avoid those “seen this before” and “had this complication last year” thoughts?
- **Solution:**
- Morbidity and Mortality Assessment Tool (MMAT)
- **Aims:**
- (1) create a longitudinal systems-based assessment of factors contributing to complications,
- (2) guide prioritization of quality improvement efforts,
- and (3) track progress of residents and systems over time.

Methods

- **Steps:**
- Reviewed presentations from institutional Morbidity and Mortality Conference and malpractice literature.
- Recruited residents for the Morbidity and Mortality Database Committee.
- Identified factors contributing to morbidity and mortality events.
- Created a spreadsheet to record resident-reported events.
- Designed a way to visualize the resident-reported data in a meaningful way.
- Clavien-Dindo Classification was used to grade each complication I-V.

Results

Systems:

Electronic
medical records
Inability to reach
consultants
Nursing Care
Pharmacy Error

Phases of Decision Making:

Preoperatively
Intraoperatively
Postoperatively
Nonoperative
Scenario

Clinical Workflow:

Lack of Knowledge
Negligence
Lack of Follow Up
Equipment failure
Technical Error
Lack of Experience
Lack of Supervision

Interpersonal Communication:

Failure to
communicate with
team members
Failure to
communicate with
other allied health
professionals
Failure to
communicate with
other disciplines of
medicine/surgery
Inadequate or
absent sign out

Conclusion

- Novel approach to Morbidity and Mortality Conference
- Longitudinal follow up using the visual Morbidity and Mortality Assessment Tool
- Impact on education, patient safety, and quality of care
- Increasing engagement and encouraging a culture of safety in an organized fashion.