

UK MDs DOA when it comes to note-taking

Does “DOA” mean “dead on arrival” or “date of admission”? A British doctor mistakenly chose the former when, after misinterpreting a colleague’s notes, he informed a woman’s family that she had died. Cases such as that are one reason why British hospitals want staffers to improve their record-keeping skills to avoid such serious — and potentially litigious — errors.

Bond Solon, a London company that trains expert witnesses, has begun teaching thousands of doctors and nurses to take better notes in order to improve patient care and help reduce medical negligence claims. Last year, the National Health Service’s (NHS) bill for such claims reached £4.4 billion, and NHS lawyers say they are often hampered by sloppy record keeping that failed to document treatment properly.

“Note-taking should be as simple and quick as possible,” says Mark Solon, a solicitor and creative director at Bond Solon, which holds 1-day training seminars for health care professionals. He says a lack of consistency in the use of acronyms such as “DOA” poses a special problem, particularly for the many foreign-born MDs and nurses working for the NHS. (*Medical Abbreviations* says DOA can represent 5 phrases: date of admission, dead on arrival, dominant optic atrophy, driver of automobile and duration of action.) — *Mary Helen Spooner*, West Sussex, UK

Pfizer, Lipitor

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UK considers free in-vitro fertilization

Infertility treatment could be offered for free to couples in the United Kingdom if draft guidelines issued by the National Institute of Clinical Excellence (NICE) are adopted. They propose that in-vitro fertilization (IVF) should be offered to women aged 23 to 39 if they have a diagnosed cause of infertility, or unexplained infertility of 3 or more years’ duration. Those younger than 23 years would also be eligible if there is an absolute indication, such as tubal blockage or prior treatment for cancer. Women 40 or older would not be eligible. At least 3 attempts at fertilization would be covered by the National Health Service (NHS).

The British Fertility Society supports the proposal. “We believe it is important to eliminate the current ‘postcode prescribing’ of fertility treatment,” says Chair Alison Murdoch. (“Postcode prescribing” means that the amount of free treatment a British couple is entitled to receive depends on where they live.)

There is no guarantee that the government will agree to the NICE proposals. With each new IVF cycle costing in the region of \$6500 (£3000), the NHS could face huge bills should the expected demand materialize. And apart from the cost, could the NHS even cope with the demand? Similar government-funded schemes elsewhere in Europe have vastly increased the number of IVF treatments.

In Canada, the cost of infertility treatment is rarely covered by provincial medicare systems. One exception is Ontario, but only patients with bilateral blocked fallopian tubes are eligible. — *Cathel Kerr*, Fife, Scotland