

# The Administrative Assistant's Role in Risk Reduction

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How often do you think podiatric assistants are involved in the patient's decision to file a lawsuit against the podiatrist?

Every Day!

# CASE STUDIES

# Case Study #1

- 60 Male
- Underwent surgical removal of tibial sesamoid
  - Doctor instructed patient to come to office for 1<sup>st</sup> post-op appointment 8 days later.
  - Patient asked to have his dressing changed prior to that date due to scheduling conflict
  - Doctor told patient to come to office in 3 days without an appointment and he would work him in



# Case Study #1 (continued)

- Post-op day 3
  - The patient called the office stating he would not be coming in for a dressing change as he felt too ill to drive due to flu-like symptoms (was not on appointment schedule, but that was day doctor told him to come in)
  - Staff member told him to keep his regularly scheduled appt. on post-op day 8

# Case #1 (continued)

- 4 days later (Post-op day 7)
  - Patient called office requesting an appointment because he thought he had foot infection and he did not feel well
  - Doctor saw patient on emergent basis
  - Left foot grossly infected and pre-gangrenous
  - Admitted to hospital
  - Transmetatarsal amputation of Left foot due to non-salvageable necrotizing fasciitis
- Subsequent Below Knee Amputation

# Allegations

- Failure of office staff to notify doctor of patient's flu-like symptoms
- Failure to treat the patient's post-op infection which should have been apparent to the doctor by the third post-op day



# What are the Issues?

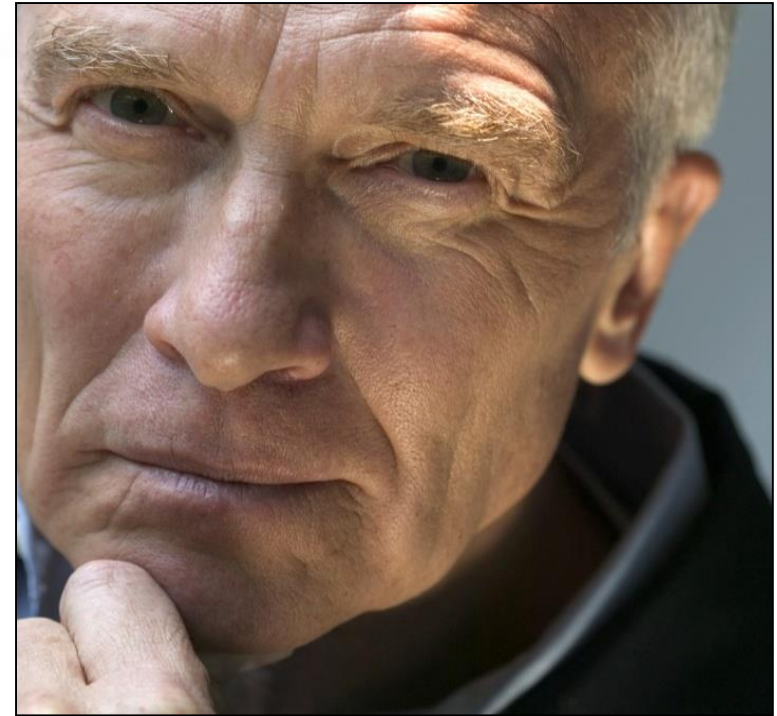
- “Flu-like Symptoms”
- Quality of advice on the phone – how do you adequately assess patients
- Notification of the physician
- Go to the “Emergency Room”
- Documentation

# Outcome

This claim was resolved prior to trial with a payment to the patient.

# Case Study #2

- 60 Male
  - Right ankle arthroscopy
  - Placed in below-knee cast
  - Instructed to return in
  - 1 week for initial post-op appt.
- Post-op Day 1
  - Podiatric assistant called patient to check on him – “doing great”



# Case Study#2 (continued)

- Post-op Day 2
  - Patient's wife called office & spoke to staff member
  - Wife reported patient “felt weird” – foot did not hurt, but his body “felt funny”
  - Wife told staff member she thought husband's symptoms could be related to anesthesia wearing off, but could also be related to a blood clot since her husband's brother died of a blood clot after knee surgery.
  - Staff member told wife that doctor was not in office, but another doctor was present. Could see other doctor or go to Emergency Department
  - Patient opted not to go to the office or the ED

# Case Study #2 (continued)

- Post-op Day 8
  - Patient passed out at home
  - EMS found patient in cardiac arrest – CPR instituted
  - To Emergency Department
    - Noted to have Right lower leg edema
    - Resuscitation unsuccessful
  - Autopsy
    - Cause of death - PE that originated as a DVT in RLE

# Allegations

- Inappropriate advice given by office staff
- Failure to office staff to relay pertinent patient information to the podiatrist

What was the one thing that impacted the defensibility of this case?

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**Absence of Documentation**



# Outcome

This claim was resolved prior to trial with a payment to the patient.

# Case Study #3

- After office hours, thieves came in through the drop ceiling of the office
- The thieves attempted to steal supplies and computers from the office
- Ultimately, they were able to take the laptop of the billing coordinator

# Case Study #3 (Continued)

- The thieves were able to access the data on the laptop (it was neither password protected or encrypted)
- Our policyholder was charged with a HIPAA Security Violation

# HIPAA Privacy Rule

- Privacy Rule
  - Patient PHI may only be used
    - as permitted by HIPAA rules, or
    - With Patient authorization

When was the last time you looked at  
the signed HIPAA form?

Do you look at it every time before you give protected  
health information (in person, on the phone,  
electronically)?

# HIPAA Security Rule

- Passwords and authentication (“access controls”)
- Transmission of ePHI and encryption
- Physical security
- Integrity of ePHI
- Loss of data

Do you have a documented HIPAA Security Policy?

# HIPAA Security Rule

- HHS Mandates that Providers Must Establish Specific Procedures to Govern:
  - Tracking devices containing ePHI
  - Safeguarding devices containing ePHI
  - Encrypting devices containing ePHI
  - Disposing and/or re-using devices that contain ePHI
  - Responding to security incidents
  - Transmission of ePHI

<http://www.hhs.gov/ocr/privacy/hipaa/administrative/securityrule/remotese.pdf>

# Outcome

Physician's Office Subject to and paid a \$50,000 fine for failure to do a HIPAA Risk Analysis and for failure of HIPAA Compliance

# Takeaways

- Staff Training
- Office Policies
- Document competence
- Documentation of every phone call with patients
- HIPAA Privacy and Security – Risk Analysis and Compliance



# Questions

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