

Patients of surgeons with unprofessional behavior more likely to suffer complications

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Patients of surgeons with higher numbers of reports from co-workers about unprofessional behavior are significantly more likely to experience complications during or after their operations, researchers from



Vanderbilt University Medical Center (VUMC) reported today in *JAMA Surgery*.

"Surgical teams require every team member to perform at their highest level. We were interested in understanding whether surgeons' unprofessional behaviors might undermine culture, threaten teamwork, and potentially increase risk for adverse outcomes of care," said the study's corresponding author, William O. Cooper, MD, MPH, vice president for Patient and Professional Advocacy at VUMC.

Cooper, the Cornelius Vanderbilt Professor of Pediatrics and Health Policy at Vanderbilt University, was lead author of a previous study that found that recording and analyzing patient and family reports about rude and disrespectful behavior can identify surgeons with higher rates of surgical site infections and other avoidable adverse outcomes.

In the current study, the researchers conducted a retrospective cohort study of outcome data from two academic medical centers that participate in the National Surgical Quality Improvement Program. The cohort included more than 13,600 <u>adult patients</u> who underwent operations by 202 surgeons between 2012 and 2016.

Reported unprofessional behaviors included poor or unsafe practices in the <u>operating room</u>, communicating disrespectfully with co-workers, or not following through on expected professional responsibilities, such as signing verbal orders.

Compared with patients whose surgeons had no reports, those whose surgeons were reported for unprofessional behavior in the 36 months before their operations were more likely to have wound infections and other complications including pneumonia, blood clots, renal failure, stroke and heart attack.



Patients whose surgeons had one to three reports of unprofessional behavior were at 18% higher estimated risk of experiencing complications, and those whose surgeons had four or more reports were at nearly 32% higher estimated risk compared to patients whose surgeons had no reports.

There was no difference, however, between study groups in the percentage of patients who died, required a second operation or who were readmitted to the hospital within 30 days of their first operation.

A greater percentage of surgeons who had no reports of unprofessional conduct were women, suggesting that female surgeons were less likely than their male counterparts to generate co-worker concerns.

"This study provides additional evidence of the important association between unprofessional behaviors and team performance by directly measuring patient outcomes," the researchers concluded.

"It's really about common sense," said Gerald Hickson, MD, the Joseph C. Ross Professor of Medical Education and Administration, professor of Pediatrics and the study's senior author. "If someone is disrespectful to you, how willing are you to share information or ask for advice or help from that individual?

"Unprofessional behavior modeled by the team leads reduces the effectiveness of the team," Hickson said.

Poor behavior can be modified. "Future work should assess whether improved interactions with patients, families and co-workers by surgeons who receive interventions for patterns of <u>unprofessional behavior</u> are also associated with improved surgical outcomes for their <u>patients</u>," the researchers concluded.



More information: William O. Cooper et al, Association of Coworker Reports About Unprofessional Behavior by Surgeons With Surgical Complications in Their Patients, *JAMA Surgery* (2019). <u>DOI:</u> <u>10.1001/jamasurg.2019.1738</u>

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