

# DIAGNOSTIC TIPS FROM THE CMPA'S EXPERIENCE

The following tips collected from CMPA's medico-legal case files will help you avoid common problems related to the diagnostic process.

## HISTORY TAKING AND DATA COLLECTION

In a legal action, peer experts will be critical if insufficient information had been obtained from the patient.

- ▶ Have you taken an adequate history of the patient's health condition and provided the patient with the opportunity to express his or her current health concerns?
- ▶ If the patient is unable to provide a history (e.g. language barrier, capacity issue, etc.), have you consulted those who may be able to assist in obtaining the history?
- ▶ Have you adequately assessed any relevant risk factors, including family history, which might help in diagnosis?
- ▶ Are there any "red flag" symptoms?
- ▶ Have you determined what the patient has already done to manage his or her symptoms?
- ▶ If assessing a patient over the telephone, have you obtained sufficient history to be able to provide a professional opinion?
- ▶ Have you read the notes taken by other healthcare professionals (e.g. nurses, paramedics)?
- ▶ Are pertinent medical records, test results, and consultation reports available and have they been reviewed?

## PHYSICAL EXAMINATION

In a legal action, peer experts will be critical if they consider the physical examination to have been cursory given the patient's symptoms.

- ▶ Have you performed an appropriate physical examination?
- ▶ Is it necessary to take the vital signs, and have you accounted for any abnormalities?
- ▶ Have you assessed the patient appropriately for the clinical complaint (e.g. to examine the abdomen of a patient with new onset abdominal pain, the patient is undressed and gowned, lying prone)?

To avoid misunderstanding, explain the reasons for the physical examination, particularly of the genitalia. Consider having a chaperone present for intimate examinations.

## DIFFERENTIAL DIAGNOSIS

Developing a list of possible conditions that might produce a patient's symptoms and signs is an important part of clinical reasoning.

- ▶ If a serious diagnosis comes to mind based on a patient's symptoms, have you considered the likelihood of it and whether it needs to be ruled out by testing or referral?
- ▶ Because many serious disorders are challenging to diagnose, have you considered ruling out the worst case scenario?
- ▶ As a medical student, have you discussed possible diagnoses with your supervisor? (Many supervisors prefer discussing a differential diagnosis prior to having it entered in the medical record by the student.)

## FORMULATING A DIAGNOSIS

Relying solely on the classic features of a disease may be misleading. That's because the clinical presentation of a disease often varies: the symptoms and signs of many conditions are non-specific initially and may require hours, days, or even months to develop.

- ▶ Do you have sufficient understanding of the clinical presentation to offer an opinion on the diagnosis?
- ▶ What other diagnosis could it be? How might the treatment to date have altered the clinical pattern?

(When assuming the transfer of care of a patient, reformulating the differential diagnosis may be prudent, especially if the clinical picture is evolving, the diagnosis is not yet firmly established, or the clinical care to date has not resolved the concern.)

- ▶ If the patient returns with persistent symptoms or fails to respond to the therapy as expected, have you considered starting over with a new evaluation and look at alternative diagnoses?
- ▶ Have you considered using diagnostic decision support tools (sometimes part of electronic health record systems)?
- ▶ Are you distressed by the patient's condition or behaviour? (Allowing yourself to become anxious by a particular case may cloud your judgment and inhibit an accurate diagnosis.)

## ORDERING INVESTIGATIONS

When deciding whether to use an available — albeit limited — healthcare resource, use sound medical judgment and act in your patient's best interests.

- ▶ Are laboratory tests, biopsy, diagnostic imaging, or other investigations indicated?
- ▶ Are you familiar with the current clinical practice guidelines for the investigation of a suspected condition?
- ▶ Have you requested the appropriate investigation? Is the test available in a timely manner? If not, have you considered alternatives and discussed this with the patient?

- ▶ Does your completed diagnostic imaging requisition contain pertinent clinical information to help the radiologist?
- ▶ Does your completed requisition contain the pertinent clinical and specimen information as well as the correct patient identifiers?
- ▶ Is it possible the patient is pregnant? If it is a possibility, has it been ruled out with an appropriately timed pregnancy test? Is the investigation contraindicated in pregnancy? Has the patient been informed of the risks and benefits of the proposed investigation or treatment for herself and the fetus?

