

C1L3 - Ashley Hay

(0:05 - 1:00)

Hello, welcome back. This is Ashley Hay with Health Tech Academy and we are going to look at some legal aspects of surgical tech and kind of what you need to be aware of professionally and then also for your exam. So a good example of that, you know, we discuss different types of law in health and just law in general and we talk about the differences briefly just between federal and state law.

And I think it's also really important for you just to be aware of what kind of laws exist in the state that you are going to be practising in. Often it'll be the state that you live in. So it's always important to be at least aware of the general scope of practise for whatever state you are going to be practising in.

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So I think stuff like that is helpful for you professionally to be aware of before you start getting some hands-on training. With that being said, there were a lot of basic legal terms that we covered in the module and I think it's important to just not get overwhelmed by them for your exam but know that it is possible that you may have one or two questions related to those types of terms. So I think one, just knowing the examples and just the basic differences, just that a difference exists in federal law versus civil law.

And so an example of that would be like federal law is HIPAA, which we're all pretty familiar with. So that's the Health Insurance Portability and Accountability Act that went into practise in 1996. So that's something at the federal level.

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And then civil law would be something like malpractice. And then with that, some of those basic legal terms, it would be quite surprising if a term like bona fide or certain types of injury law would be on there or like the word deposition, as those are quite legal in focus. So you want to think about what is really like the medical legal, so the medical legal terms that you need to be aware of.

And I think some of the most important ones for that would be knowing things like just common law liability, knowing that there's corporate liability and personal. So if you were facing something in terms of a liability case, a personal liability would be your own obligation. So we give the term as obligation of an individual to to do something or to not do something.

Right. So your own personal liability is the way that you are practising medicine within your hopefully scope for your state. Corporate liability is the obligation of the corporation or organisation, whatever that you're working for to do or not do some sort of action.

So just knowing that there's different types of liability. And that's why as many health care professionals, we are able to get personal liability insurance. Just a quick personal side note, I guess, you know, I have been a nurse for almost 20 years and a lot of different organisations will always say that they offer certain amounts of malpractice insurance or some will offer liability insurance when you take a full time job with those companies.

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But in the health care space, you know, it's always wise and we always encourage other professionals to always get their own personal liability. It's just a little bit of extra coverage, you know, should you need it. Hopefully you never will.

OK, so some other just basic legal terms you might want to do just some quick flashcards for these. I wouldn't go crazy with a bunch of them, but things like the term malpractice is really important. So that's basically any kind of misconduct that results in harm to the patient, even another provider.

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But often, yeah, we see it malpractice definitely as harm to patients, negligence rather. And that is basically if you haven't done something and it was reasonable that you should have. So we have malpractice, negligence.

And then I think some other ones that might be important would be aware of the term standard of care. So that's just basic conduct that's expected by any provider in a medical scenario. All right.

And then the last thing I would recommend that you look into is just basically knowing overall what a tort is, T-O-R-T, as there are a number of kinds of examples and types of torts that are just to generally be aware of what they are. Moving on, there's some facility standards and policies that are quite common and seen across a number of different types of organisations. So often wherever you're practising, we'll have certain policies related to patient care and the type of care that's expected to be administered.

There are policies in administering certain types of medication. A good example of this might be something like for certain types of medication that are restricted in access to certain kinds of healthcare providers, things like certain types of pain medication. They may have a policy that says, okay, we lock this medication away in something like a Pyxis or a locked drawer.

A Pyxis is just really an electronic kind of drawer system that can only be opened with certain providers' names and passwords. And that's basically used to be able to track who is removing the drugs and for what patient. So you may see certain types of drug policies enacted, safe staffing policies.

Hopefully you are at an organisation which has this. Unfortunately, a lot of different states have

different safe ratios for patients to providers. But even if that does not exist in your state or in the setting that you're working with, for example, sometimes certain states will have safe staffing ratios in place for inpatient facilities, but not for outpatient.

I know I have worked in settings like that. So even if you don't have certain state mandated ratios and safe staffing, that doesn't mean that your organisation or hospital cannot have a safe staffing policy in place. So things like that are important to just know and be aware of so that way you make sure that if there are any sort of policies for safe staffing, then you kind of know the proper channels to follow through if you show up one day and there's enough providers.

And then also just general some health and safety policies. These may be things like operating room protocols or cleaning procedures after certain types of infectious patients have been in a room. Just a bunch of things like that.

Also, sometimes organisations are looking to maintain a certain accreditation for their hospital or facility. So they try to adjust and meet certain standards and policies and implement them ahead of time. So those are a few things to just be aware of there.

And I would also just be sure that you review rights to practise and what's required for that. So documentation, definitely you're going to have to provide validation of your eligibility and your certificate. So it could be showing documentation of your licensure, which is issued by state.

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Your registration, for example, like all nurses have to register with their particular nursing board for their state. If you have a certification or a specific degree, all of those documents are required to practise. Another really important aspect of healthcare to be aware of in terms of legal and healthcare issues are knowing about incidents that may occur in the healthcare setting.

So knowing the difference between what we call a near miss versus an adverse event or even a sentinel event. And they basically will just increase in varying degrees of what kind of harm either was done or could have been done to such patients. So a near miss is often something like the wrong drug was ordered and sent up by the pharmacy and retrieved by the nurse.

But when she went to the bedside, she actually caught the issue and did not administer it to the patient. So that would be something like a near miss. Had it been given, it could have been really catastrophic.

But it didn't happen. And then examples of an adverse event or even something worse where it can lead to serious harm or death even. Loss of limb or life is generally seen as a huge event.

So just knowing kind of the varying degrees and then of course just knowing that there's some incident reporting and what that involves. So just be sure that you're reviewing those for your exam but also for you professionally and you know how to report incidents in whatever health

care setting you are working in. All right.

Well, I think we'll just move on quickly to some last little bits that I think are pretty important. So medical records and documents or documentation. Any questions that arise on your exam regarding documentation.

You know, always if you can document in real time, that's always ideal. And making sure that your documentation is always completed before you leave your shift is imperative. So a few different types of documentation or medical documents to be aware of.

Informed consent, definitely. There's often questions related to informed consent. As a surgical tech, it's unlikely, you know, that you'll be highly involved in getting informed consent.

Maintain, you know, obtaining it from the patient. But you do need to know that informed consent is what it is. So it's the right for patients to be informed about any sort of invasive procedures and requires a signed consent.

So traditionally, a provider, a physician, or a nurse will obtain the informed consent. Knowing also that there's records kept during surgery, that would be the intraoperative record, the anaesthesia record, and then, of course, patient charges. These are also in the patient record as well.

And that's used to track things like supplies used and insurance charges. Looking at advanced healthcare directives or a DNR, those are very important to know what those are, as they will very much influence your care for patients. So an advanced healthcare directive.

This is a document that basically specifies medical care preferences should a patient become incapacitated. So many of you may have advanced healthcare directives yourself. It is not anything that's difficult to get.

You should be able to go to any of your healthcare providers and ask for this to be done. And in this, you can basically, ahead of time, let them know what your wishes should be if something would happen to you and you were unable to let your needs be known. So for example, if you were to fall ill and be in incapacitated or in a coma, would you want something like a feeding tube? Would you want different kinds of measures basically taken to keep you alive? And those choices are very different for every individual.

So if your patient does have an advanced healthcare directive on file, it should always be made known kind of on the banner. So the top kind of portion of the electronic healthcare record. When you pull up your patient, there's typically a little symbol or some text that will let you know that they have a advanced healthcare directive.

And then also power of attorney, important to know. This is basically when a patient assigns another person, also known as a proxy, to be able to make medical treatment decisions for them, which gives them legal authority to act on the patient's behalf. Also a DNR, which is

known as a do not resuscitate.

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That's incredibly important to know and should always be hold to you and to the provider who is following you. Whenever we're giving a report about patients, these kinds of documents are really important to know that they're on file for this patient. Like I said, it does change the course of your care.

(15:06 - 15:30)

Okay. So yeah, we talked about some different kinds of consent and hopefully you were able to dig into this module a little bit more and read up on your ebook. But hopefully you found my little terms here, ones that are really important to point out, a little bit helpful in your study techniques.

All right. Until next time.