

Examples of Events

Below are some examples of the types of actual or potential events that would be appropriate for reporting. This list is intended to give you an idea of some of the things you might report but it is not exhaustive. The categories are the same as the ones used in the online reporting form so this may help you to decide which category your report fits into.

Documentation	Examination/ Assessment	Treatment/ Management	Accidents/ Equipment/ Infrastructure	Personal practitioner adverse experience
Patient record	Failure to examine	Patient experienced	Patient trip/fall	Untoward advances
incomplete	all relevant areas	post-treatment		from a patient
	connected with	distress	Patient unable to	
Patient record	patient's history and		contact clinic in an	Patient fixation on
illegible	symptoms	Patient experienced post-treatment pain	emergency	practitioner/Stalking
Failure to take a	Incorrect diagnosis		Clinical equipment	Verbal abuse from a
case history		Wrong positioning of	malfunction, e.g.	patient
	Investigation	patient during	treatment couch	
Failure to take	undertaken to	treatment		Aggressive behaviour
notes	detriment of patient,		Failure to use	from a patient
on a new episode	e.g. adverse event	Patient experienced	equipment	
for a returning	following assessment	significant post-	appropriately, e.g.	Violent behaviour
patient		treatment effects, e.g.	ultrasound equipment	from a patient
	Significant pathology	neurological		
Failure to	missed	symptoms	Health and Safety	Patient under the
document			measures inadequate	influence of alcohol
assessments and	Case history	Patient experienced		or recreational drugs
findings	inadequate, missed	permanent harm after	Failure to dispose of	
	secondary condition	treatment	sharps and clinical	Infectious/contagious
Failure to			waste appropriately in	patients, e.g. fungal
document	Failure in referral	Patient experienced	treatment room	infections, scabies,
diagnosis	process	negative effects during		impetigo
		treatment, e.g. rib	Failure to dispose of	
Failure to	Patient not offered	fracture	sharps and clinical	Practitioner safety at
document	gown for		waste appropriately	home visits
prognosis	examination	Suggested medication to patient which had	from practice	Patient personal
Failure to	Patient not satisfied	an adverse effect	Medical emergency	hygiene
document	that they were		inadequately handled	
treatment plan	listened to by their	Suggested exercise(s)		Damage to or loss of
for patient	practitioner	to patient which had	Exposure to blood	practitioner's/clinic's
Dationt wood and	NAin an Australia	an adverse effect	Francisco to boursely!	property
Patient record	Minor/vulnerable		Exposure to harmful	

misplaced	patient not	Advice to patient	substances	Patient forgotten/
	offered/provided	which had an adverse		refusing to pay for
Records	with chaperone	effect		treatment
confused, e.g.				
notes from		Treatment plan not		
wrong patient		modified to take		
used		account of patient		
		preferences or health		
Treated before		needs		
referral notes				
arrived, missed		Slow to refer on		
significant finding		suspicion of		
		pathology/need for		
Failure to gain		different management		
informed consent		approach		
D f				
Breach of		Slow to refer after		
confidentiality		patient did not		
la a la ilita a tananana		respond to treatment		
Inability to access		Did not discontinue		
patient records,		treatment when		
e.g. IT failure or lack of access to				
		appropriate to do so		
paper notes		Patient discharged		
		without arranging		
		future care		
		iuture care		