Corrigendum

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Corrigendum to: Serious misdiagnosis-related harms in malpractice claims: The “Big Three” – vascular events, infections, and cancers

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In Table 3 of the original manuscript, the “Big Three % of High Severity” from “Non-claims sources” (final column) was incorrect. Instead of “76.8% (n = 159/207)” (incorrect), it should have read “75.8% (n = 157/207)” (correct).

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Table 3: Big Three disease proportions in the current study based on claims vs. non-claims-based studies.^a

Big Three category/subcategory	Malpractice claims cases (current study, CRICO CBS 2006–2015, n=11,592)	Non-claims sources (physician surveys, primary care and ED triggered chart reviews, ED physician voluntary reports, general autopsies, ICU autopsies) ^b
Big Three % of any severity (n)	61.7% (n=7149/11,592)	58.5% (n=717/1226) ^c
Vascular	17.4% (n=2019)	23.4% (n=287)
Infection	14.3% (n=1660)	19.7% (n=241)
Cancer	29.9% (n=3470)	15.4% (n=189)
Other	38.3% (n=4443)	41.5% (n=509)
Big Three % of high severity (n)	74.1% (n=5469/7379)	75.8% (n=157/207) ^d
Vascular	22.8% (n=1684)	32.9% (n=68)
Infection	13.4% (n=992)	17.4% (n=36)
Cancer	37.9% (n=2793)	25.6% (n=53)
Other	25.9% (n=1910)	24.2% (n=50)
Big Three % of deaths (n)	75.3% (n=2944/3912)	81.2% (n=604/744) ^e
Vascular	30.5% (n=1192)	27.2% (n=202)
Infection	15.4% (n=602)	45.8% (n=341)
Cancer	29.4% (n=1150)	8.2% (n=61) ^b
Other	24.7% (n=968)	18.8% (n=140)

^aAdditional details may be found in Supplementary materials C1/C2, including Tables S11–S12. ^bGeneral autopsies and ICU autopsies are fairly homogeneous with respect to missed Big Three diseases as causes of death (Table S12 – general 73–82%; ICU 78–82%), so are combined here. However, cancers are far less frequent among ICU deaths relative to all (general autopsy) deaths (see Table S12 for details). As a result, the data shown here in Table 3 (which over-represent ICU data relative to general autopsy data) are skewed toward under-representing missed cancers as causes of death. Similarly, they slightly over-represent vascular events and infections. ^cStudies from frontline clinical practice (five studies 2009–2016, n=1226 errors) [4, 26, 28, 41, 42]. ^dStudies from frontline clinical practice (two studies 2009–2012, n=207 errors) [26, 28]. ^eAutopsy studies (45 general and ICU-based studies 1947–2011, n=8377 autopsies; n=744 errors) [7, 8, 12, 13]. There were two multi-year general autopsy studies representing 2144 autopsies and 43 ICU-based studies (30 adult, seven pediatric, six neonatal) representing 6271 autopsies. Only 24 of 30 adult studies reported on the disease breakdown, so the totals here reflect only 39 autopsy studies. CRICO CBS, Controlled Risk Insurance Company Comparative Benchmarking System; ED, emergency department; ICU, intensive care unit.