MEDICOLEGAL ISSUES FOR RADIOGRAPHERS



ROBERT J. PARELLI

Medicolegal Issues for Radiographers

Second Edition

R. J. Parelli

BOOK TEAM

Pat Swanson Eichhorst Project Editor
Dale Gray Interior Layout
Doug Flint Cover Concept and Design



Copyright © 1994 EASTWIND PUBLISHING

Library of Congress Cataloging-in-Publication Data

Parelli, R. J. (Robert J.)

Medicolegal issues for radiographers / R.J. Parelli. — 2nd ed.

p. cm.

Includes bibliographical references.

ISBN 1-881795-07-1

- 1. Radiologists-Legal status, laws, etc.-United States.
- 2. Radiologic technologists-Legal status, laws, etc.-United

States. 3. Radiologists—Malpractice—United States. 4. Radiologic technologists—Malpractice—United States. I. Title.

[DNLM: WN 33 AA1 P2m 1994]

KF2910.R33P37 1994

344.73'041—dc20

[347.30441]

DNLM/DLC

for Library of Congress

94-5634

Medicolegal Issues for Radiographers

This book is dedicated to my children, Dawne' and Joe

Their love and devotion has been a guiding force to my professional endeavors. Their interest and involvement with helping others will be my legacy.

FOREWORD

As a community college professor for the last fifteen years, I have taught medical law in the health sciences for seven of those years. I have reviewed many books in this discipline.

Professor Parelli's Medicolegal Issues for the Radiographer is one of the better texts that I have read. It is focused on the field of radiologic technology. However, it can be useful to any person working in the area of imaging. The book is extremely relevant to the actual applications of law from the radiologic technologist's perspective. Professor Parelli has integrated tort law, labor law, legal doctrines, ethics, patient rights, risk management, and forensic radiology and centered the vignettes around the radiographer and the radiology department.

Medicolegal Issues for the Radiographer is clear, concise, and informative. Medical law is a course every health care professional should take and to have a text centered on radiologic technology will be helpful to the student and the profession. The book is well written and I would recommend it as a required text for any radiologic technology or imaging program.

Dana Brown-Klein, J.D., M.A. Professor, Health Science Cypress College

PREFACE

Since the first edition of this textbook was published, there has been a striking concern on the part of radiographers to understand and to resolve medicolegal and ethical problems that may be encountered daily.

Malpractice litigation has renewed and increased concerns for self protection as well as patient care. The constant advances in technology have had an impact on the practice, attitudes, and moral values of all who participate in health care. The second edition has been developed to update the first edition of *Medicolegal Issues for Radiographers*.

Society, as well as the radiology science professional, faces unprecedented ethical, legal, and moral dilemmas. Therefore, chapters on licensure, certification, and credentialing as well as health care reform in mammography were developed to address these controversial issues. Concepts on euthanasia and humanistic health care were added to the ethics section.

The vignettes presented in the first edition were exceptionally well received. Readers indicated that this was both an outstanding and unique feature of the textbook. Therefore, 18 more vignettes have been developed to address the radiographer's daily problems in their professional lives.

Information on specific areas of interest have been added to the second edition, including the Equal Employment and Opportunity Act, sexual harassment, Occupational Safety and Health Act, the doctrine of foreseeability, risk management, and liability.

It is hoped that the second edition will serve readers and colleagues in their endeavor to understand medicolegal issues and to reduce any potential legal liability in the practice of radiology science.

Robert J. Parelli, M.A., R.T.(R) Professor Dept. of Radiologic Technology Cypress College

TABLE OF CONTENTS

Preface	x
Chapter 1-Legal Definitions	1
Intentional Torts	
Assault	2
Battery	2
False Imprisonment	
Libel and Slander	
Invasion of Privacy	5
Unintentional Misconduct (Negligence)	5
Duty (Standard of Care)	
Breach of Care	
Cause	
Injury	
Malpractice	
State Liable for False Imprisonment of Patient	
Review Questions	13
Chapter 2-Legal Doctrines	15
Doctrine of Personal Liability	15
Doctrine of Respondeat Superior	16
Simpson vs. Sisters of Charity of Providence in Oregon	16
Surgeon and Hospital Liable for Burn from X-Ray Unit	
Doctrine of Borrowed Servant	21
Doctrine of Res Ipsa Loquitur	23
Doctrine of Res Ipsa Loquitur Ybarra versus Spangard	23
Doctrine of Res Ipsa Loquitur	23 23
Doctrine of Res Ipsa Loquitur	23 23
Doctrine of Res Ipsa Loquitur	23 23 26
Doctrine of Res Ipsa Loquitur	23 23 26 27
Doctrine of Res Ipsa Loquitur Ybarra versus Spangard Res Ipsa Loquitur Instruction Proper in Suit Against Surgeon who Cut Bladder Hospital Patient Awarded \$1,290 for X-Ray Injury Doctrine of Foreseeability Routine Equipment Check	23 26 27 31
Doctrine of Res Ipsa Loquitur Ybarra versus Spangard Res Ipsa Loquitur Instruction Proper in Suit Against Surgeon who Cut Bladder Hospital Patient Awarded \$1,290 for X-Ray Injury Doctrine of Foreseeability Routine Equipment Check "The Snitch Law"	23 26 27 31 31
Doctrine of Res Ipsa Loquitur Ybarra versus Spangard Res Ipsa Loquitur Instruction Proper in Suit Against Surgeon who Cut Bladder Hospital Patient Awarded \$1,290 for X-Ray Injury Doctrine of Foreseeability Routine Equipment Check	23 26 27 31 31
Doctrine of Res Ipsa Loquitur Ybarra versus Spangard Res Ipsa Loquitur Instruction Proper in Suit Against Surgeon who Cut Bladder Hospital Patient Awarded \$1,290 for X-Ray Injury Doctrine of Foreseeability Routine Equipment Check "The Snitch Law"	23 26 27 31 31 35
Doctrine of Res Ipsa Loquitur Ybarra versus Spangard Res Ipsa Loquitur Instruction Proper in Suit Against Surgeon who Cut Bladder Hospital Patient Awarded \$1,290 for X-Ray Injury Doctrine of Foreseeability Routine Equipment Check "The Snitch Law" Review Questions	23 26 27 31 35
Doctrine of Res Ipsa Loquitur Ybarra versus Spangard Res Ipsa Loquitur Instruction Proper in Suit Against Surgeon who Cut Bladder Hospital Patient Awarded \$1,290 for X-Ray Injury Doctrine of Foreseeability Routine Equipment Check "The Snitch Law" Review Questions Chapter 3—Anatomy of a Malpractice Trial	23 26 27 31 31 35 35
Doctrine of Res Ipsa Loquitur Ybarra versus Spangard Res Ipsa Loquitur Instruction Proper in Suit Against Surgeon who Cut Bladder Hospital Patient Awarded \$1,290 for X-Ray Injury Doctrine of Foreseeability Routine Equipment Check "The Snitch Law" Review Questions Chapter 3-Anatomy of a Malpractice Trial Trial Procedure	23 26 27 31 35 35
Doctrine of Res Ipsa Loquitur Ybarra versus Spangard Res Ipsa Loquitur Instruction Proper in Suit Against Surgeon who Cut Bladder Hospital Patient Awarded \$1,290 for X-Ray Injury Doctrine of Foreseeability Routine Equipment Check "The Snitch Law" Review Questions Chapter 3-Anatomy of a Malpractice Trial Trial Procedure Jury Function	23 26 31 35 35 39

Subpoena Deuces Tecum—Subpoena of Record	
Trial Sequence	42
Right of Appeal	43
Courtroom protocol	
Review Questions	46
Chapter 4–Hospital Labor Relations	
Employer Contracts	
Organized Labor Unions	
Unfair Labor Practices	
Fair Labor Standards Act	
Equal Pay Act	
Civil Rights Act of 1991	56
OSHA	
Equal Employment Opportunity Act	57
X-Ray Technician Should Not Have Been	
Terminated by Hospital for Pregnancy	59
State Laws Concerning Labor	61
State Fair Employment Practice Act	62
Fired Worker Can Sue "Understaffed" Hospital	62
State Anti-Injunction Act (Norris-LaGuardia Act)	64
State Workers' Compensation Statute	64
Review Questions	66
Chapter 5-Risk Management and Liability	69
Liability	69
Doctrine of Corporate Negligence	
Responsibility of Professional Staff	
Doctor-Owned Hospital/Clinic Liability	
Good Samaritan Laws	
Duty of Care	
Hospital Liability and Malpractice	75
Injury Reporting and Recording	76
Negligence Found in X-Ray Patient's Fall	
from X-Ray Table	76
Review Questions	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Chapter 6-The Patient's Right to Know	83
Doctrine of Informed Consent	83
Radiologic Procedures Involved in Informed Consent	
Lawsuits	84

Preparation of an Informed Consent Verification of Informed Consent	~~
Verification of Informed Consent	85
	85
Legality of Informed Consents	
Rescinding Consent	
Who May Consent	88
Spouse's Consent	
Minor's Consent	
Patient Can Sue for Failure to Obtain Her	
Informed Consent	89
Postscript to Vignettes 12 and 13	
Review Questions	
Review Questions	
Chapter 7-Ethics	95
Distinction Between Morals, Ethics, and Law	95
Code of Ethics of the American Society of	
Radiologic Technologists	96
Principles 1-3	
Principles 4-10	
Euthanasia	
Humanistic Health Care	
Review Questions	
20002002	
Chapter 8-Patient's Bill of Rights	105
Chapter 8-Patient's Bill of Rights	
Review Questions	
Review Questions	113
Review Questions  Chapter 9–Radiology Service in the Hospital	113
Review Questions  Chapter 9–Radiology Service in the Hospital  The Joint Commission on the Accreditation of Hea	113
Review Questions  Chapter 9–Radiology Service in the Hospital  The Joint Commission on the Accreditation of Hea Care Organizations	113115 lth115
Review Questions  Chapter 9–Radiology Service in the Hospital  The Joint Commission on the Accreditation of Hea Care Organizations  Policies and Procedures	113115 lth115
Review Questions  Chapter 9–Radiology Service in the Hospital  The Joint Commission on the Accreditation of Hea Care Organizations  Policies and Procedures  Requesting Radiologic Service	113115 lth115116
Review Questions  Chapter 9–Radiology Service in the Hospital  The Joint Commission on the Accreditation of Hea Care Organizations  Policies and Procedures  Requesting Radiologic Service  Procedures Manual	113115 lth115116117
Review Questions  Chapter 9–Radiology Service in the Hospital  The Joint Commission on the Accreditation of Hea Care Organizations  Policies and Procedures  Requesting Radiologic Service  Procedures Manual  Radiology Reports/Medical Records	113115 lth116117
Review Questions  Chapter 9–Radiology Service in the Hospital  The Joint Commission on the Accreditation of Hea Care Organizations  Policies and Procedures  Requesting Radiologic Service  Procedures Manual  Radiology Reports/Medical Records  Medicolegal Use of Radiographs	113115116117117117
Review Questions  Chapter 9–Radiology Service in the Hospital  The Joint Commission on the Accreditation of Hea Care Organizations  Policies and Procedures  Requesting Radiologic Service  Procedures Manual  Radiology Reports/Medical Records  Medicolegal Use of Radiographs  Ownership of Radiographs	113115116117117117120
Review Questions  Chapter 9–Radiology Service in the Hospital  The Joint Commission on the Accreditation of Hea Care Organizations Policies and Procedures Requesting Radiologic Service Procedures Manual Radiology Reports/Medical Records Medicolegal Use of Radiographs Ownership of Radiographs Policy of Ownership	113115 lth115117117117120120
Review Questions  Chapter 9–Radiology Service in the Hospital  The Joint Commission on the Accreditation of Hea Care Organizations  Policies and Procedures	113115 lth115117117117120120120
Review Questions  Chapter 9–Radiology Service in the Hospital	113115 lth115116117117120120120121
Review Questions  Chapter 9–Radiology Service in the Hospital  The Joint Commission on the Accreditation of Hea Care Organizations Policies and Procedures Requesting Radiologic Service Procedures Manual Radiology Reports/Medical Records Medicolegal Use of Radiographs Ownership of Radiographs Policy of Ownership Retention of Radiographic Films Radiologic Films Used as Evidence Marking Films for Identification	113115 lth116117117120120120121
Review Questions  Chapter 9–Radiology Service in the Hospital	113115 lth116117117120120120121121

Chapter 10-Licensure, Certification, and	
Credentialing	127
Licensure	129
Limited Licensure	
Certification	
Review Questions	
ne ne ne ne gassas il	
Chapter 11-Health Care Reform and	
Mammography	137
Some Mammograms May be Faulty	
Review Questions	144
Chapter 12-Forensic Radiology	145
Determining Cause of Death	
Imaging Techniques	
Battered Child Syndrome	
*	
Appendix A Situations	153
Appendix B True and False Items	167
Appendix C Glossary of Terms	
Appendix D Answers to Review Questions	
Appendix E Answers to True and False Items	183
References	185
Vignettes	
1-Assault and Battery	4
2-Libel, Slander, Invasion of Privacy	
3-Personal Liability	
4-Leaving Patient Unattended	
5-Negligence Found in X-Ray Patient's Fall from Table	
6-Defective X-Ray Equiment	32
7-New Trial for Patient's Suit Against Surgeon	44
8-Staffing	53
9-Sexual Harassment	60
10-Worker's Compensation Case	63
11-Poor Patient Care Causes Back Injury	
12-Improper Communication Situation	79
13-Informed Consent	
14-Informed Consent Situation	
15-Intoxicated Radiologist	100
16-Experimental Radiotherapy	102

17-Invasion of Privacy Situation	108
18-Right of Privacy Situation	110
19-Review Patient History	118
20-Department Policy Situation Employee Relations	123
21-References	132
22-Insurance Situation	153
23-Teaching Environment Situation	157
24-Protecting Personal Property	159
25–Search and Seizure	

### **Legal Definitions**

Radiographers complete the work assigned each day without thinking about situations that could result in legal actions against them or against the health facility where they work. As consumers become more aware of the standards of care that they should receive and become cognizant about seeking legal compensation when they do not receive an acceptable standard of care, radiographers must become knowledgeable about the legal definitions of the standard of care.

The law that governs the relationships between individuals is known as the civil law. The type of law that governs the rights between individuals in noncriminal actions are called torts. Torts are not easy to define, but a basic distinction is that they are violations of civil, as opposed to criminal, law. Tort law is personal injury law. The act may be malicious and intentional or it may be the result of negligence and disregard for the rights of others. Torts include those conditions whereby the law allows for compensation to be paid an individual when that individual is damaged or injured by another. There are two types of torts, those resulting from intentional action and those resulting from unintentional action.

### **Intentional Torts**

There are several situations in which a tort action can be taken against the health professional because of some action that was deliberately taken. Intentional tort includes:

- ▼ civil assault
- civil battery

2 Chapter 1

- ▼ false imprisonment
- ▼ libel and slander
- invasion of privacy.

### Assault

Performing or threatening to perform intentional injury or bodily harm to another by administration of:

- ▼ poison
- ▼ anesthetics
- narcotics
- willful and wrongful blows with weapons or other instruments.¹

Assault is defined as the threat of touching in an injurious way. If the patient feels threatened and is caused to believe that he or she will be touched in a harmful manner there may be justification for a charge of assault. To avoid this it is absolutely essential that the radiographer explains what is going to happen and reassures the patient in any situation where the threat of harm may be an issue. Never use threats in an effort to gain the patient's cooperation. This statement applies when working with children as well as with adults.² A tort of civil assault can be filed if a patient is apprehensive of injury by the imprudent conduct of the radiographer. If found guilty, the radiographer could be held liable or responsible to provide financial compensation to the patient for damages that may have resulted from any apprehension.³

### Battery

Battery consists of touching a person without permission. Again, a clear explanation of what is to be done is essential. If the patient refuses to be touched, that wish must be respected. Actually, battery implies that the touch is a willful act to harm or provoke, but even the most well-intentioned touch may fall into this category if it has been expressly forbidden by the patient. This should not prevent the radiographer from placing a reassuring hand on the patient's shoulder, as long as the

patient has not forbidden it, when there is no intent to harm or to invade the patient's privacy. On the other hand, a radiograph taken against the patient's will, or on the wrong patient, could be construed as battery. This emphasizes the need for consistently double checking patient identification.⁴ If a patient has refused a particular hypodermic injection and the nurse approaches the patient and attempts to administer the medication, it would be an assault. If the nurse administers the hypodermic injection, it would be a battery. The battery is the assault carried out or completed. Therefore, the patient must be conscious for an assault to occur. An unconscious patient may be the victim of a battery.

There are certain circumstances where an individual committing battery will not be liable for the battery. These are situations in which the conduct is said to be privileged. (For example, a radiographer restraining a patient who is obviously about to strike or injure other patients and/or himself/herself.) The action of the radiographer to protect other patients and their interests outweighs the damage that may be sustained by restraining the patient and his interest.⁵

### False Imprisonment

False imprisonment is the intentional confinement without authorization by one who physically constricts a person using force, threat of force, or confining clothing or structures.⁶ This becomes an issue when the patient wishes to leave and is not allowed to do so. Inappropriate use of physical restraints may also constitute false imprisonment. The confinement must be intentional and without legal justification. Freedom from unlawful restraint is a right protected by law. If the patient is improperly restrained the law allows redress in the form of damages for this tort. The proof of all the elements of false imprisonment must be established in order to support that an illegal act was done. In situations where patients are a danger to themselves or to others, the patient may be restrained. A situation where false imprisonment may arise is when a radiographer uses a brat-board to restrain a child, and does not tell the parents the reason for the restraints.7

Chapter 1

## Vignette 1 Assault and Battery

A student and a staff radiographer were asked to perform an intravenous pyelogram on a 58-year-old woman with hypertension. The staff radiographer, who was the department clown, ordered the student technologist to load two 50 cc syringes, one with contrast media, the other syringe with isopropyl alcohol. The staff radiographer left the x-ray suite, leaving the student with the patient. The radiologist came into the room and grabbed one of the syringes without checking the empty contrast media vial. The radiologist injected the patient. Upon completion of the injection, the patient immediately became comatose. The patient was sent to the Intensive Care Unit. Blood chemistry, which was later ordered, indicated that the patient had a high concentration of alcohol in her blood. The radiologist was notified of the blood chemistry report by the patient's attending physician. The radiologist questioned both the staff radiographer and the student. The student told the radiologist that he was ordered to load two syringes, one with contrast media and the other with isopropyl alcohol.

Who would be held liable for assault and/or battery?

### Answer

In any radiologic technology program the student is under the guidance and direction of the radiology department personnel. The staff radiographer could be held liable for assault on the patient and the radiologist could be held liable for battery. The radiologist failed to check the contents of the syringe by asking the student which had contrast media or by checking the empty vial for the type of contrast and amount of concentration. The student would not be held liable because he was directed by the staff radiographer to load the two syringes with two different types of liquid. However, it is important to note that students

should not be naive with regard to the types of contrast media used for certain radiographic procedures. The student should have told the radiologist the contents of both syringes prior to injection.

### Libel and Slander

Libel is written defamation of character. Oral defamation is termed slander. These are torts that affect the reputation and good name of another. The basic element of the tort of defamation is that the oral or written communication is made to a person other than the one defamed. The law does recognize certain relationships that require an individual to be allowed to speak without fear of being sued for defamation of character. For example, radiology department supervisors who must evaluate employees or give references regarding an employee's work have a qualified privilege.⁸

Radiographers can protect themselves from this civil tort by using caution when conversing within the hearing distance of patients.⁹

### **Invasion of Privacy**

Invasion of privacy charges may result when confidentiality of information has not been maintained or when the patient's body has been improperly and unnecessarily exposed or touched. Protection of the patient's modesty is vitally important when performing radiographic procedures.

### Unintentional Misconduct (Negligence)

Whenever a radiographer unintentionally causes injury to a patient it may be determined that a negligent act has been committed. Negligence refers to the neglect or omission of reasonable care or caution. The standard of reasonable care is based upon the "doctrine of the reasonably prudent man." This standard requires that a person perform as any reason-