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Forensic Aspects of Crimes in Medical Activity

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Abstract: Human life and health lie at the root of errors in medical care provided to the population. Reducing these mistakes and improving the quality of the medical care provided, studying and analyzing the mistakes made and implementing measures aimed at preventing them in the future play an important role in preventing possible mistakes in the future. In the activity of the forensic medical examination institutions in Uzbekistan, the forensic medical examinations of the commission related to the activities of medical specialists are important. Cases of professional misconduct related to medical activity are one of the painful points of forensic medicine problems. After all, the deaths related to these cases were given special attention, and during the years of independence, the protection of the population's health was recognized as a priority task of state importance.

Keywords: Medical activity, crime, forensic medical expertise.

In addition to conducting various examinations according to the needs of law enforcement agencies, the forensic examination should develop recommendations for conducting effective measures aimed at preventing various unpleasant situations.

Many studies related to medical activities have been conducted, but a comprehensive analysis of events on the forensic medical examination materials of the commission has not been studied in Uzbekistan. In this regard, the study of the prolongation of the treatment period, the occurrence of disability and death, and the causes of their origin, on the one hand, serves to improve the organization and conduct of this type of forensic examination, and on the other hand, effective measures are taken to prevent such unpleasant situations, is very important in planning.

The fact that the quality of medical care provided to the population is improving day by day is a sign of how much attention is paid to the medical field in our country. However, it is impossible to completely exclude the errors that occur, human life and health are at the root of the errors that occur in medicine. Regarding this issue, sufficient conditions and opportunities have been provided for citizens to receive qualified medical care in our country, and the right of patients to receive qualified and quality medical care is guaranteed.

According to the opinion of most scientists, criminal offenses are mainly divided into crimes and acts. There are also concepts of accident, medical malpractice, and iatrogenicity. Like all areas in society, the activities of medical personnel are defined by laws and other normative documents. In the field of health care, there can be orders, instructions, rules, regulations adopted by the Ministry of Health of the Republic of Uzbekistan as regulatory and legal documents. Based on this, non-fulfilment or improper fulfillment of the requirements set by medical personnel during the implementation of medical activities are called professional offenses (TCKH).

I.V.Davidovsky evaluates the concept of medical malpractice as follows. "Medical error is a conscientious mistake of a doctor in the absence of elements of coldness, inattention or medical carelessness, caused by the imperfection of medical science and its methods, or the atypical course of the disease, or the inadequate preparation of the doctor."

Among the researchers who contributed to the development of forensic medicine, V.V. Tomilin distinguishes between direct and indirect deficiencies in the activities of medical personnel. It is more complicated to assess them if the direct deficiency consists in non-compliance with the obligations. Among these, the quality of medical care is not up to the required level.

When evaluating the quality of medical care, it is recommended to compare the actual and necessary actions of the doctor, taking into account the individual characteristics of the patient, as well as the characteristics of the specific conditions in which medical care is provided.

In recent years, the number of lawsuits filed by citizens against medical workers in the health care system and law enforcement agencies has been slightly increasing. In our country, the health and life of citizens is considered the highest value by the state and is protected by law.

Professional violations of doctors in the field of medicine are important issues not only in our country, but for the entire world health care system. For example, in Italy, about 15,000 doctors are brought to legal liability a year, and about 10 billion euros are paid to patients for medical malpractice. As a result, instead of correcting the malpractice, doctors correct medical documents in accordance with the "defense position". filling is considered preferable.

Researchers have studied the attitude of medical staff towards TYoN in the work of doctors. In particular, according to V. V. Sergeev, O. O. Zakharov, when the survey was conducted, 61 percent of doctors observed cases where patients could appeal to the court. 29% of these cases were resolved without the intervention of forensic authorities, and 23% of cases were found to have been overlooked by patients. Objective factors (late application to medical care, imperfect diagnosis and treatment methods, etc.) as well as subjective reasons were of great importance in the occurrence of such unpleasant situations. At the same time, approximately one-fifth of the surveyed doctors did not consider it important to consistently comply with the requirements of current guidelines, recommendations and orders. A group of foreign researchers studied the mistakes made by doctors and found that 40% of them were errors in laboratory tests, 33% were errors in diagnosis, 27% were errors in anamnesis collection, disorganized records in the medical history, and 3% were related to late referral of the patient.

In order to identify and evaluate defects in the provision of medical services, in addition to the evaluation of diagnostic and treatment procedures by the expert commission at the KSTE, the expediency of using high-risk methods will be decided. Therefore, there is a need to develop criteria for the appropriateness of various dangerous procedures. They are important not only in answering the questions put before the commission of experts, but also in making the right decision by clinicians in complex situations.

Many authors emphasize the importance of proper planning and conducting of laboratory and diagnostic activities in the prevention of medical care errors. Medical care cannot be viewed only as a doctor-patient interaction. In addition to detailed information about the doctor who is being held responsible for the correct evaluation of the medical care provided in the KSTEs related to CKD, information about the availability of equipment and drugs of the medical institution, the organization of the treatment-diagnostic process, and the continuity of the activity are also necessary.

According to A.P. Gromov, when complaints about medical care are received, investigative agencies should first conduct an internal investigation and, based on its results, make a decision on initiating a criminal case and appointing an expert. Of course, during the examination, the results of the service inspection should be critically evaluated.

The same phenomenon can be interpreted differently depending on the situation in which the result occurred. A qualified surgeon performed cardiac surgery in the thoracic surgery department, and the patient died as a result. This situation can be considered a medical error or an accident. In the second similar case, an operation was performed in the presence of an unqualified surgeon, which can be viewed and evaluated as negligence or irresponsibility towards the beior. A group of researchers analyzed conflicting cases in the "doctor-patient" system in polyclinics in Volgograd and found that 42 percent of them were related to ethics and deontology issues. 32% of the complaints were related to the provision of medicines.

L.M. Urumbaeva, one of the research scientists, describes the relationship of medical workers to patients as follows, that is, first of all, doctors should fully fulfill their duties to patients and conscientiously approach their life and health.

Yu.D.Sergeev., S.V.Erofeev defines the concept of iatrogeny as follows. Iatrogenicity is the damage to the patient's health in the case of diagnosis, treatment, prevention or rehabilitation procedures directly or indirectly.

According to the special literature, in recent years, various deficiencies in the provision of medical care have been affecting the quality of TYoNs. They can be related to diagnostic, treatment, prevention and healing processes. At the same time, it should be noted that there is no consensus among researchers regarding the concept of TYoN. For example, V.V.Tomilin, Yu.I.Sosedko included in this definition the cases of improper performance of the professional activities of medical personnel that led to unpleasant consequences, V.A. Gulyaev and others included among the TYONs that not only led to unpleasant consequences, but could lead to them. also includes disadvantages.

In recent years, the introduction of health insurance in the health care system has significantly increased the number of patients' claims for compensation for health damage caused by medical care. In such cases, KSTE plays an important role in solving civil liability. Civil liability of medical personnel arises in the following circumstances: illegality of the actions of medical personnel, infliction of material or moral damage, existence of a causal connection between the listed cases, guilt of the person causing the damage.

According to O.Yu. Aleksandrova and others from foreign scientists, the problems of protecting the rights of medical workers and patients, who are subjects of the healthcare system, are increasing rapidly in recent years. As the reason for these situations, the authors cite the increase in legal literacy of citizens, the comparison of the quality of medical care provided by citizens in public and private health care systems, and the formation of a medical insurance system that protects the rights of patients.

In order to prevent such cases, some states of the USA have also adopted "exculpation laws" to encourage doctors to speak openly about their mistakes without hiding them. 52.7% of the KSTEs conducted in the Russian Federation were related to criminal and 39.1% to civil cases. In particular, most of the doctors held responsible (28.1%) were surgeons, (21.1%) obstetriciansgynecologists, (10.6%) anesthesiologists-reanimatologists. It can be seen that, according to the results of the researchers, surgeons, gynecologists and anesthesiologists-reanimatologists are in the leading positions in terms of their indicators among doctors of various specialties in terms of KSTE materials. Proper organization of KSTE, full performance of the tasks assigned to the expertise is an important factor that ensures the quality and effectiveness of the conclusion of the expert commission. In this regard, timely submission of all necessary, including medical, documents to the expert commission is extremely important.

It is also important to improve KSTEs related to cases of professional misconduct of medical personnel. Yu.D.Sergeev analyzed the conclusions of KTSE and determined that in the process of appointing and conducting this type of expertise, procedural (53.2%), organizational (14.1%), methodical (39.8%) and expert (26%) shortcomings were allowed. .

The stages of the conclusion of KSTE should cover the provision of appropriate medical care to the patient, in particular, the correct diagnosis and treatment options. It is also not possible to use the words "accident", "iatrogenic", "doctor's error" in the conclusion, or use the words "guilty", "innocent", which are not within the scope of forensic examination.

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