Prioritizing Patient Safety: Reducing Risk through Closed Claim Analysis

Michael Ragan, DMD, JD, LLM
April 30, 2020 - Burgundy Basin, Pittsford NY

Presented by Fortress Insurance Company & Hosted by Empire Dental Administrators, Inc.

COURSE DESCRIPTION

In this course, closed dental malpractice claims will be analyzed to identify how and when dentists and their staff can implement risk management and ethical principles to enhance patient safety and reduce untoward outcomes. Topics include extractions and implants, patient selection and management considerations for ambulatory anesthesia and HIPAA/HITECH regulations as they relate to an online presence. There are no prerequisites.

OBJECTIVES

- Apply clinical risk management strategies to improve patient safety, mitigate associated risk factors, and reduce untoward outcomes and malpractice claims
- Implement strategies to help prevent failure to diagnose allegations
- Recognize the potential effect technology and applied risk management can have on mitigating and managing nerve injury

MICHAEL R. RAGAN, DMD, JD, LLM

Dr. Michael R. Ragan is an attorney in a Miami, Florida law firm with 25 years of experience as a defense trial attorney. Dr. Ragan received a B.A. from Syracuse University, a D.M.D. from the University of Pennsylvania, School of Dental Medicine, a J.D. from the Georgetown University Law Center, and an L.L.M. in Health Law from Loyola University College of Law. Dr. Ragan has held academic appointments at the University of Pennsylvania, School of Dental Medicine, the University of Florida, College of Dentistry, and the Georgetown University School of Dentistry. Dr. Ragan is presently Adjunct Professor in the Department of Oral and Maxillofacial Surgery at the Nova Southeastern College of Dental Medicine.

Dr. Ragan practiced clinical dentistry for fifteen years and supervised healthcare professional liability claims for seven years within the insurance industry. Dr. Ragan has served on the Fortress Board of Directors and as Chairman of their Claims Committee. Currently, he serves as Medico-legal Consultant for Fortress. Dr. Ragan is a Fellow of the American College of Dentists, the International College of Dentists, and the American College of Legal Medicine. Dr. Ragan has nothing to disclose.

DISCLAIMER: This presentation is dedicated to the education and scholarship of the dental community. It is meant to provide you with information regarding risk management topics. Because federal, state and local law varies by location and situation and changes over time, nothing in this presentation is intended to serve as legal advice or to establish any standard of care. Legal advice, if desired, should be sought from competent counsel in your state. This presentation does not modify the terms and conditions of the Fortress Insurance Company Professional Liability Policy. Please refer to the Fortress National Insurance Company, Professional Liability Policy for these terms and conditions.

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OMSNIC designates this activity for 3 CE credits.
Dental Risk Management
Prioritizing Patient Safety: Reducing Risk through Closed Claim Analysis
Hosted by Empire Dental Administrators, Inc.
& Presented by Fortress Insurance Company

Thursday, April 30, 2020
6:00PM - 9:00PM
Doors Open @ 5:30
Burgundy Basin
1361 Marsh Road, Pittsford, NY 14534

Registration Form

To register, please complete the form below and return by mail or fax to Empire Dental Administrators, Inc.

Registration Deadline: April 15, 2020

Non-Fortress Dentist - $50 each - submit payment at time of registration. Only checks will be accepted.
Fortress Insured and all staff attend free of charge.

MAIL: Empire Dental Administrators, Inc.
255 Woodcliff Dr.
Fairport, NY 14450

FEES: Fortress Policyholders – Free
Non-Fortress Policyholder $50
All staff may attend free of charge

Name (s): (please print) Attach a list of additional attendees if necessary

__________________________________________________________________________
Circle Fortress Policyholder Non-Fortress Staff
__________________________________________________________________________
Circle Fortress Policyholder Non-Fortress Staff
__________________________________________________________________________
Circle Fortress Policyholder Non-Fortress Staff

POLICY NUMBER (IF Policyholder)______________________________________________

Mailing Address: __________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Phone #:_________________ Fax #:_________________ ADA #:______________________

Email Address (for registration confirmation): ________________________________________