MEDICAL MALPRACTICE LITIGATION IN SAUDI ARABIA

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ABSTRACT

Medical malpractice is recognized as the infringement of the legal norms relating to the standards of medical care by the healthcare professionals, which in turn causes injury or harm to the patients. The deviation or infringement of the practice in healthcare not only occur due to deliberate actions but also on account of negligence or lack of skills from the end of the respective professionals. Medical malpractice usually results in numerous errors in the diagnosis process, healthcare treatment, aftercare of the patient, and overall health management by the respective healthcare institutes and the professionals. To reduce the possibility and incidences of medical malpractices, various nations implemented laws and regulations. The violations of these laws might lead to serious penalties of the respective offender. It is notable that medical malpractice is claimed under the law and there must be one of the three characteristics relating to the issue (Brennan, 2004; Danzon, 2000). One of malpractice is the infringement of the standard of care that healthcare professionals are ought to provide to the patients. A patient has the right to expect a standard of care from the healthcare professionals. If a patient did not receive the standard of care, he/she has the right to sue the respective healthcare professional. In addition, an individual can only claim it legally if the malpractice is conducted by the negligence of the healthcare professionals, who have actually been harmed or injured. The individual patient needs to provide proof of the fact that he/she would not have witnessed the injury if there were no negligence in the healthcare service. Furthermore, the respective patient also needs to show that he/she had witnessed a significant damage that may be related to his/her health, monetary or other aspects. The lawsuits relating to medical malpractice are highly expensive, as it involves the requirements of various medical experts. Thus, the majority of the individuals do not take legal charges against the healthcare professionals in case the damage is minor (American Board of Professional Liability Attorneys, 2017; Baker, 2011).

Medical malpractice litigation has been prominent in almost all the nations of the world including Saudi Arabia. It can in this context be noted that Saudi Arabia from the last few decades has witnessed significant development in the field of healthcare. There has further been observed a significant development in the skill and knowledge of the healthcare professionals, which has improved the standard of care of the patients. Standard of care in the healthcare centers have also improved due to the development of technology. Thus, it has significantly led to the reduced instances of medical malpractice in the nation. Besides, it is also notable that Saudi Arabia has witnessed significant development in the medical malpractice litigation. The development and strengthening of various laws have also increased the consciousness among the
healthcare professionals to provide standard care to all the patients. Despite the significant development in the healthcare field of Saudi Arabia, there are varied instances of malpractices that cannot be avoided (AlJarallah, & AlRowaiss, 2013; Samarkandi, 2006). The Vision 2030 of Saudi Arabia also suggests overall development apart from the national revenue being collected from oilfields, which include the development of education and healthcare among others. Thus, the development in medical malpractice litigation in Saudi Arabia has aimed to attain its Vision 2030 (Moser, Swain & Alkhabbaz, 2015; Forstenlechner & Rutledge, 2011). Considering this aim of the entire nation and the government specifically, it is an opportunity to evaluate the success of the medical malpractice litigation in Saudi Arabia. To attain this objective of the paper, evidence, and causes of medical malpractice in the nations has been identified and evaluated. Moreover, the current development in the medical malpractice litigation in the nation has also been identified. Besides, the paper also attempts to provide necessary recommendations so that the identified relevant issues of the litigations can be resolved in such a manner that the nation attains a successful healthcare environment in the long run.

Introduction

Evidence of Medical Malpractice in Saudi Arabia

Although Saudi Arabia in the present day context is highly conscious in implementing medical malpractice litigation, it was not as effective few decades earlier. Thus, it had witnessed varied instances of medical malpractices, which had significantly harmed the patients and the society to a greater extent (Mirrer-Singer, 2007). However, in the recent day context, evidence of medical malpractice is also notable in the nation. The report of MML Holdings LLC (2017) in this regard, suggested that the number of complaints and evidence of medical malpractice has increased by 37% from the year 2011 to 2016. The report provided evidence of 2,002 cases of malpractices in the year 2011, which increased to 3,178 in 2016. The report of MML Holdings LLC (2017) also presented the evidence from the Saudi Arabia Legal Health Committees, which registered 4,282 complaints within the five years, i.e. from 2011 to 2016. The report also highlighted that during this period Saudi Arabia Legal Health Committees had issued 557 verdicts that were against the Health Ministry of the nation, while there were 437 judgments made that went against the private hospitals as well. The report of MML Holdings LLC (2017) also mentioned that among the 1,097 medical malpractice verdicts that were evident during the 5 years, a considerable number of those were medical mistakes that account to 408, while 134 cases ere evidenced on the issue of private rights infringement.

The report of MML Holdings LLC (2017) also provided evidence about the seven cases of errors in medical practice at the University hospitals from 2011 to 2016 in Saudi Arabia. In these seven cases, the verdict went against the medical professionals for their errors in healthcare. It is also evident from the report that during 2011 to 2016, there were 75 verdicts that were against the doctors in military healthcare centers for their professional mistakes. In the same period, there was evidence of 21 verdicts that went against the low ranked staff members for their professional
errors at other healthcare institutions. It is also evident that the defendants in most of these cases were asked to pay compensations for the harm they have caused. The report of MML Holdings LLC (2017) also highlighted the evidence of 2,166 health practitioners from 2011 to 2016 who were charged for committing errors in their healthcare professionals. It is also evident that among the 2,166 health practitioners, 1,726 were expatriates, while the rest 440 were native Saudis. The report also highlighted that among those cases of medical mistakes committed by the health practitioners, 582 expatriates, and 115 Saudis were convicted legally. It is also evident that among those cases of medical mistakes committed by health practitioners, the majority of them were doctors that accounts for 1,915, wherein 611 of them were eventually convicted. Corresponding to the doctors, who were charged with committing medical malpractice, there were 219 instances of malpractice complaints filed against nurses and 32 against technicians (Dent, Harden, & Hunt, 2017; MML Holdings LLC, 2017).

The report of MML Holdings LLC (2017) and Qureshi, Neyaz, Khoja, Magzoub, Haycox, & Walley (2011) provided some other evidence relating to medical malpractice in Saudi Arabia. It highlighted that among the total cases of complaints against health practitioners from 2011 to 2016, the majority of them relates to maternity and childcare, thereby accounting for 303. There were 125 cases of complaints that were related to internal diseases, while 22 of the instances were associated with urological issues. Some of the other frequent cases of medical malpractice were associated with neurological operations, surgery, dental diseases, pediatric diseases, and ENT among others. The report of MML Holdings LLC (2017) also highlighted the evidence of healthcare professionals committing medical malpractice in 2016 that further includes doctors and paramedical staff members. It is hence found that the healthcare professionals were majorly from Egypt that accounts to 278, while 115 were native Saudis. There were 77 Syrian healthcare professionals, 44 of Pakistani origin, 37 from Sudan, and 28 from Jordan, while the others, who were charged with committing medical malpractice, were from Saudi Arabia. Moreover, the report of MML Holdings LLC (2017) highlighted crucial evidence that among the 86,000 doctors, who practiced in Saudi Arabia from 2011 to 2016, 2.2% of them were charged with committing medical malpractice (MML Holdings LLC, 2017).

**Causes of Medical Malpractice in Saudi Arabia**

From the above discussion, it is evident that Saudi Arabia in the recent years has been witnessing frequent instances and a higher level of medical malpractice despite the implementation of the litigation. Thus, it is an opportunity to identify and evaluate the causes of medical malpractice in the nation. In this regard, Jones, Karim & McDonald (2014) suggested that the main cause of medical malpractice in Saudi Arabia is the increasing population. It has further led to the rise in the number of complaints in the nation relating to the errors in medical practices. In this regard, it can be evaluated that the increasing number of the population has increased the possibility of a greater number of people suffering from diseases and injuries. Thus, it subsequently increases the number of patients being admitted to the healthcare institutes in Saudi Arabia. The increased number of patients create a major challenge to the healthcare professionals in Saudi Arabia, thereby providing appropriate health care to the patients (Hyman, & Silver, 2006; Glassman, 2004). In addition, it is also evident from the report of MML
Holdings LLC (2017) that there are a limited number of healthcare professionals in Saudi Arabia, which creates a significant challenge for them in providing appropriate care to the patients. The limited number of Saudi healthcare professionals especially the doctors is evident from the fact that the majority of the professionals are from the neighboring countries such as Egypt, Syria, India, Sudan, and Jordan among others. In addition, it can also be analyzed that the fewer number of Saudi healthcare professionals in the nation highlights the lack of greater skills among them. Thus, the healthcare institutes attempt to hire the healthcare professionals from the neighboring nations. It is also analyzed that the non-native Saudi healthcare professionals stay in the nation for a temporary period. Thus, the nation witnesses a significant shortage in the skilled healthcare professionals in the nation, which in turn causes frequent instances of medical malpractice (MML Holdings LLC, 2017; Whang, Baker, Patel, Luk, & Castro, 2013; Rothschild, Federico, Gandhi, Kaushal, Williams, & Bates, 2002).

Jones, Karim & McDonald (2014) also argued that the primary cause of the increasing number of medical malpractice in Saudi Arabia is the lack of a comprehensive reporting system for the issues. They also claimed that the cases of medical malpractice in the nation are ordinarily heard by the judges and there are no jury trials in the Courts. Thus, the legal environment of the nation has been a crucial factor that has caused the rising incidences of medical malpractice (Sharkey, 2005). In addition, AlJarallah & AlRowaiss (2013) conveyed that the medical malpractice in Saudi Arabia is also caused by the medical mismanagement by the healthcare professionals. They claimed that a considerable number of healthcare professionals in the nation are unable to meet the standard of care, which is mainly due to the lack of adequate qualifications and skills (Attaran, Barnes, Curtis, d'Alessandro, Fanello, Galinski,... & Talisuna, 2004).

Current Development in the Medical Malpractice Litigation in Saudi Arabia

From the above discussion, it is apparent that Saudi Arabia has been witnessing a major issue in the medical malpractice. To resolve the issues, the nation has implemented and developed certain medical malpractice litigations. In this regard, Jones, Karim & McDonald (2014) highlighted the standard of care established in the nation by the Law of Practicing Healthcare Professions, which further states that a healthcare professional is liable to “exert due care in line with commonly established professional standards”. Jones, Karim & McDonald (2014) also mentioned about the implementation of criminal and disciplinary liability for the conduct of medical malpractice by the healthcare professionals. In this regard, a healthcare professional is liable to attain punishment of imprisonment and fines up to SAR 100,000 for practicing healthcare treatment without a license. The healthcare professional is also liable for the criminal punishment if he/she provides false information to attain the required license. He/she is also liable for similar punishment in case he/she declines any of the patients or threatens a patient for his/her self-interest. Jones, Karim & McDonald (2014) also stated that a healthcare professional is liable to disciplinary actions if he/she infringes any code of action or medical practice, or even if his/her duty is violated by any means, which in turn may harm a patient. The respective healthcare professional is liable to attain warning, fines, or even termination of the license (Jena, Seabury, Lakdawalla, & Chandra, 2011).
However, prior to Jones, Karim & McDonald (2014), Al-Saeed (2010) and Al-Saeed (2007) mentioned about the three different aspects that are covered by the professional liability of an individual healthcare practitioner, namely the civil, punitive, and disciplinary liabilities, which are applicable to all the healthcare professionals practicing within Saudi Arabia. The civil liability suggests the responsibility of a physician towards the patients when his/her action or the guidelines of the institute has directly caused harm to the respective patients. Punitive liability, in turn, indicates the responsibility of the respective healthcare professionals, when he/she has violated the rules and regulations of medical practice but has not caused any harm to the patients. Moreover, the disciplinary liability arises when the healthcare professionals fail to meet the ethical standards of medical practice along with the professional standards and requirements (Al-Saeed, 2010; Alsaddique, 2004).

In addition, the report of MML Holdings LLC (2017) highlighted the Saudi Arabia Legal System, which suggests that the legal system of the nation is based on the Sharia law. The report suggested that the Sharia law is arguably the most conservative law in the world and is extremely strict about its rules. However, as per the Sharia law of the nation, there is no comprehensive system about the cases of medical malpractice. Nevertheless, the report of MML Holdings LLC (2017) mentioned that under the Sharia Medical Panel, the patients or the victims of medical malpractice can claim for remedies from the respective healthcare professionals, who have caused the issue. The Law of Practicing Healthcare Professions indicates the article 34, which provides the rights to the respective patients to claim for any damage or harm caused due to the medical malpractice by the healthcare professionals. The article 34 of the Law also provides the right to claim for remedies on account of this issue, which has caused organ damage, paralysis, or even death of the patient. The report also highlighted that during the investigation process, the respective expat doctors or healthcare professionals cannot leave the nation. In the present day context, although the case relating to medical malpractice is heard by the judges, it does not involve any jury trials. Nevertheless, the Saudi Arabian Legal System offers the individuals in the case, i.e. either the claimant or the defendant to appeal to the Board of Grievances, if they are not satisfied with the decision from the Sharia Medical Panel. However, the appeal must be made to the Board of Grievances within 60 days after the decision has been notified by the Sharia Medical Panel. In the legal process within the Board of Grievances, completely new proceedings take place regarding the issue and the verdict is not influenced by the decision of the Sharia Medical Panel. In this legal proceeding, the defendants and the claimants can provide new evidence and justifications (MML Holdings LLC, 2017; Kesselheim, Cresswell, Phansalkar, Bates, & Sheikh, 2011).

Al-Saeed (2010) highlighted more information about the medical malpractice litigation in Saudi Arabia. It further suggested that the litigation process starts only when the patient or his/her relatives complain about the occurrence of medical malpractice by a specific healthcare professional or by a healthcare institute. Al-Saeed (2010) also informed that the complaint about the malpractice is either directed towards the City Government or the Ministry of health in Saudi Arabia. Correspondingly, after the registering the complaint by the respective patient or his/her family members, the interrogation and investigation process begins immediately. However, it is
crucial to note that as per the Law of Saudi Arabia, the patient or the family members must provide necessary prime evidence that would reflect the occurrence of actual harm to the patient. The interrogation and the investigation generally take place with the staff members that are associated with the event or the treatment process. Al-Saeed (2010) stated that the Legal Health Organization (LHO) of the nation after integrating with all the staff members associated with the case along with the patient and his/her family members reviews the documents and medical filing carefully so as to be able to construct actual fact and the cause of the issue that has affected the patient at least to some extent (Al-Saeed, 2010).

In addition to the above context, Al-Saeed (2010) mentioned that after ascertaining the issue to be caused by the respective defendant, the judiciary body decides upon the remedies or the compensation that needs to be provided to the victim. On the other hand, after the conviction of the issue by the respective defendant, the judiciary body also needs to decide the type of punishment and the penalties that he/she is liable to attain. The decision in those two aspects leads to the completion of the judiciary process. Al-Saeed (2010) also informed that the committees of the LHO must comprise at least one judge with background and expertise in the Islamic Shariah law. Moreover, the LHO entails 3 to 4 other judges belonging from the medical background. These judges of medical background can be of varied sectors such as healthcare service, the ministry of health, and university staff members (Al-Saeed, 2010).

Critical Evaluation of the Success of the Medical Malpractice Litigation in Saudi Arabia to Attain Saudi Vision 2030

The above discussion elaborated the current development in the medical malpractice litigation in Saudi Arabia. It is also apparent that the nation possesses a comprehensive law regarding the issue so that the respective offenders get desired punishment and the victim attains justice for the harm witnessed. The medical malpractice litigation within the nation is sole to reduce the possibility of such issues in the future so that it attains its Vision 2030 in a successful manner (Low, 2012). In this regard, it is important to note that the Vision 2030 of the nation reflects its aim to attain development in all aspects of the society. Saudi Arabia in the present day context is highly dependent on its oilfields, which provides a major contribution to the national revenue. However, the nation has the vision of attaining revenue from other sources. Thus, it is crucial from the perspective of the nation to attain development in the medical field (Alomi, 2017; Moser, Swain, & Alkhabbaz, 2015).

However, it can be evaluated from the above discussion that the nation has been witnessing frequent instances of medical malpractice. Thus, it is an opportunity to evaluate the success of the medical malpractice litigation in Saudi Arabia that plays an integral part of its determined Vision 2030. In this regard, it can be critically analyzed that historically, the nation has not been developed in terms of medical treatments and practices. Considering the medical situation of the nation in decades back, it can be evaluated that although in the present day context, there are evidence of medical malpractice, it is significantly better than the past. Thus, it suggests that the instances of medical malpractice are reducing gradually. This, in turn, indicates the success of the medical malpractice litigation in the nation. On a critical note, it can be
counter-argued from the fact presented by the report of MML Holdings LLC (2017), which further suggests that there has been an increase in the instances of medical malpractice from 2011 to 2016 by 37%. This data, therefore, reflects a significant number, which implies a major deterioration in the healthcare practice within the nation. This argument can hence be critically argued by the information that Jones, Karim & McDonald (2014) presented. It, therefore, suggests that within the last few decades, there has been a significant rise in the population of the nation. The increasing number of the population would obviously imply the increase in a number of patients in the nation and the incidence of medical malpractice. Thus equating the value with the increasing population of the nation, it can be critically inferred that the deterioration in the health of people in the nation is not as significant as it should have been. It can again be counter-argued by stating that the nation has not witnessed a major deterioration in the health of people, but it has also not reflected any progress. Thus, it suggests that the litigation has not witnessed any success in reducing medical malpractice in the nation (Jones, Karim & McDonald, 2014; Jena, Seabury, Lakdawalla, & Chandra, 2011).

In addition to the above context, it can also be evaluated by the fact that the legal system of Saudi Arabia is largely based on the Sharia Law, which is highly conservative and strict. The law therefore significantly restricts many aspects relating to the patient and the treatment process. The laws of Sharia hence need to be followed by every person in the society, irrespective of the individual being a patient. It can hence be analyzed that Sharia Law adheres to certain guidelines relating to the consumption of food, need for prayers with specific body position in normal days and festive occasions, conduct fasting and wear only dresses that are permitted by the law. The Sharia law also imposes certain restrictions in the medical practices of donating or transplanting organs and permanent contraception along with that of abortion among others. The Sharia law also does not allow embryo experimentation as well as stem cell research, and hence no development can take place in the majority of the domains related to the medical research. Thus, it is apparent that Sharia law is the crucial factor that has led to the failure of medical malpractice litigation in the nation. However, the argument can be criticized by the fact presented by Al-Saeed (2010), which suggests that the litigation process involves the participation of a judge that has the expertise and knowledge in Sharia law. The judge offers verdicts so that the patients and their family members can gain justice. The judge evaluates all the documents and the medical fillings and with the consultation with the other judges from the medical background to provide justice. Thus, it can be analyzed that the verdict provided based on the Sharia law is not biased or against the patients’ well-being (Al-Saeed, 2010).

In addition, it can also be argued by the fact that the Article 34 Law of Practicing Healthcare Professions in Saudi Arabia does provide necessary remedies to the patients and their family members for the losses or harm caused. On the other hand, it is notable that the defendants on account of the conviction are liable to face punishments and monetary fines. The law of the nation also suggests that the healthcare professionals are liable to attain criminal punishment if they have witnessed fraudulence in their license to conduct treatment to patients. Thus, it can be critically evaluated that the litigation and laws relating to medical malpractice are highly effective. However, it can be counter-argued by stating that although the nation has firm
rules regarding litigation of medical malpractice, it also witnessed the increasing cases of the issue. This implies that the law has not been properly implemented, which in turn is causing the issue. Nevertheless, it can again be counter-argued by stating the fact that the law has largely supported patients to complain about the issues, which they are facing. Hence, the instances of reporting have risen over the last few years. Thus, it reflects the success of the medical malpractice litigation. However, it can also be critically argued that the native doctors and other healthcare professionals of the nation are not highly skilled and do not have adequate qualifications. Hence, there is increasing evidence of medical malpractices within the nation. This argument is also supported by the report of MML Holdings LLC (2017), which further stated that as a result of the lack of skilled and qualified native healthcare professionals and the fact that most of the doctors in the nation are from Egypt, Syria, India and other neighboring countries.

In addition, it can be criticized based on the report of MML Holdings LLC (2017), which suggests that the number of verdicts against the healthcare professionals for the medical malpractices witnessed is low as compared to that of the complaints registered. This indicates the failure of medical malpractice litigation in the nation. However, it can also be counter-argued by the fact that the lower ratio of verdicts against the defendants does not imply the failure of the litigation; in fact, it suggests that the law established is not completely in favor or biased towards the claimant. It is hence analyzed that the possibilities of harm witnessed by a patient, for which he/she or his/her family members have registered complaint, might not be caused by any act or breach of duty by the healthcare professionals. There are also possibilities that the patients and their family members might have registered false claims to gain the benefits of remedies. Thus, it cannot be inferred that the medical malpractice litigation in Saudi Arabia is a complete failure (MML Holdings LLC, 2017).

However, it can also be counter-argued by the fact that when the defendant or the claimant is not satisfied with the decision of the Sharia Medical Panel, it can appeal to the Board of Grievance within 60 days after the notification of the verdict. Thus, it can be evaluated that the litigation in Saudi Arabia is highly developed so that justice to every individual prevails. It can further be counter-argued by the evidence provided by AlJarallah & AlRowaiss (2013), that the persistence of mismanagement in the healthcare institutes might have caused medical malpractices. Thus, it also indicates that despite the comprehensive litigation process in Saudi Arabia; it has not been able to completely mitigate the issue of medical malpractices.

**Recommendations to Further Improve the Medical Malpractice Litigation in Saudi Arabia**

From the above critical discussion, it can be evaluated that there are certain issues in Saudi Arabia that have contributed in resolving the increasing issue of medical malpractice in Saudi Arabia along with the effectiveness of the litigation process. Thus, it is necessary to provide some of the recommendations so that the issue can be resolved and the nation can attain its Vision 2030 successfully. In this regard, it is recommended based on the information provided by Gundogmus, Erdogan, Sehirati & Kurtas (2005) that the improved communication and higher level of transparency reduce the possibility of mismanagement by the healthcare professionals.
that in turn lowers the chances of medical malpractices. Based on the report of Gundogmus, Erdogan, Sehirati & Kurtas (2005), it is recommended that the healthcare professionals must be well trained and should follow proper guidelines so that the possibility of medical malpractices can be reduced. Similarly, the recommendations given by Deitschel, Buckley, Evans, Fraser, McAbee, & Reynolds (2002) as applicable in the context of Saudi Arabia highlights that the healthcare professionals practicing in Saudi Arabia should be adequately qualified so that the issue of medical malpractices can be removed from the society at least to some extent. Besides, education and awareness to the healthcare professionals and the patients should also be provided regarding the legal norms and litigations relating to medical malpractice so that its implementation is successful. It is also recommended that the litigation process should be completely unbiased and the verdict should be based on testimonies and witnesses. It is also notable that the Sharia law in certain instances is against the medical treatments, which in turn enhances the risks associated with the malpractices. In addition, the report of American Academy of Pediatrics (2002) recommended that the standard of care in the healthcare institute should be evaluated in the litigation process. If the set standard of care is poor in the nation, the healthcare professionals would not be able to cure the patients effectively and there are higher chances of claimants not receiving justice. Thus, it is recommended to the Ministry of Health in the nation to set the standard of care appropriately. The Ministry of Health in the nation should also assess if the healthcare institutes are practicing ethical procedures to treat the patients. Furthermore, it is identified from the report of MML Holdings LLC (2017) that the number of native Saudi healthcare professionals in the nation is low. Thus, it is recommended to the government that they should encourage people to pursue a medical career. The government is also recommended to train and educate the healthcare professionals effectively. Jones, Karim & McDonald (2014) also identified that there is a lack of jury trials in the litigation process pertaining to the medical malpractice cases in Saudi Arabia. Thus, it is recommended that the government should integrate jury trials in the court proceedings so that justice prevails to every individual and the issue medical malpractice reduces (Kesselheim, Cresswell, Phansalkar, Bates, & Sheikh, 2011; Pepper, & Slabbert, 2011; Mello, 2001).

Conclusion

From the overall discussion throughout the paper, it is apparent that Saudi Arabia has been witnessing serious issues of medical malpractice over the last few years. There has been a significant increase in the number of complaints regarding the instances of medical malpractice within Saudi Arabia. It is also notable that among the total complaints in the nation, a considerable number of healthcare professionals are convicted. It is also apparent that the complaints were not only for the native healthcare professionals but also for the expats. There are certain causes of medical malpractice within the nation, which increasing population compared to the total number of healthcare professionals, lack of jury trials, and the mismanagement by the healthcare professionals due to lack of adequate qualification and training. Thus, due to these issues the medical malpractice litigation has not been completely successful in the nation. Despite this, the medical malpractice litigation has witnessed certain development in the recent years, which include the liability of the healthcare professionals to imprisonment, fines,
termination and license among others in case they are found to conduct fraudulence or breach in the duty of standard care, thereby deceiving the patients and their family members. The litigation process involves investigation through interrogation and collection of evidence and medical filings after the complaint has been registered by the claimant. The verdict is provided after considering all the testimonies, arguments of claimants and defendants, along with the consultations with the medical experts in the panel. Thus, it is notable that despite the comprehensive nature of the litigation system in the nation, it is not completely a result of the issues of medical malpractice. Thus, it is recommended that adequate training and education to the healthcare professionals, communication, transparency, consideration of proper guidelines, the setting of the appropriate standard of care, the inclusion of jury trials, and consideration of scientific values rather than religious norms should be integrated into the medical and legal system of the nation. Thus, it would eventually support the nation to attain its Vision 2030 successfully.

References


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