Research Article

Study On Awareness Of Medical Negligence Among Medical Students

Annie Joseph Verghese[1], Vidyullatha V Shetty[2], Srinivasa Reddy P[3]*, Pramod Kumar GN[4]

[1]Associate Professor, Department of Forensic Medicine and Toxicology, The Oxford Medical College, Hospital and Research Centre, Yadavanahalli, Bengaluru.
[2]Professor and Head, Department of Forensic Medicine and Toxicology, Sri Chamundeshwari Medical College Hospital and Research Institute, Channa Patna.
[3]Professor, Department of Forensic Medicine and Toxicology, Sri Devaraj Urs Medical College, Tamaka, Kolar, Karnataka.
[4]Professor and HOD, Department of Forensic Medicine and Toxicology, Karwar Institute of Medical Sciences, Karwar.
Corresponding Author: Dr Srinivasa Reddy P

Abstract

Background: Medical negligence litigation is increasing in India, reflecting evolving patient awareness and legal accountability in healthcare. Adequate understanding of medicolegal principles among medical students is essential, as they represent future practitioners responsible for maintaining standards of care. Objective: To assess the awareness and understanding of medical negligence and related medicolegal concepts among undergraduate medical students. Materials and Methods: A cross-sectional questionnaire-based study was conducted among 183 medical students. A validated structured questionnaire comprising 12 dichotomous (Yes/No) items assessed awareness of medical negligence, common clinical scenarios, preventive strategies, and specific legal concepts including the Bolam test and crosspathy. Data were analyzed using descriptive statistics. Results: Overall awareness of medical negligence was observed in 61.2% of participants. Understanding of common examples was noted in 69.3%, while 68.3% demonstrated knowledge of preventive strategies. Awareness of the Bolam test was comparatively low (40.2%), whereas awareness of crosspathy was higher (67.8%). Significant gaps were identified in conceptual clarity regarding standard of care, informed consent, and liability without harm. Conclusion: Although a moderate level of awareness exists among medical students, critical deficiencies persist in core medicolegal concepts. Integration of structured medicolegal education into undergraduate curricula is essential to enhance competency, reduce litigation risk, and improve patient safety.

Keywords: Medical negligence, medicolegal awareness, Bolam test, Crosspathy, Medical education

1. Introduction

Black's Law Dictionary defines negligence per se conduct, whether of action or omission, which may declared and treated as negligence without any arguments or proof as to the particular surrounding circumstances, either because it is in violation of statue or valid municipal ordinance or because it is so probably opposed to the dictates of common prudence that it can be without hesitation or doubt that no carful person would have been guilty of it[1]. This principle is used for disputes relating to medical practice and the phenomenon is known as 'medical negligence'.

Medical negligence or malpractice suits, while already common in developed countries, are rising in numbers in India in the recent past. It demonstrates that India is at the cusp of a medical malpractice crisis[2].

The focus of awareness of medical negligence has been targeted on medical professionals; however, today's medical students are tomorrow's medical practitioners. Their awareness and understanding of medical negligence are of paramount importance. Our study investigates the levels of awareness of medical negligence among medical students.

2. Materials and Methods

A cross-sectional survey was conducted among medical students.

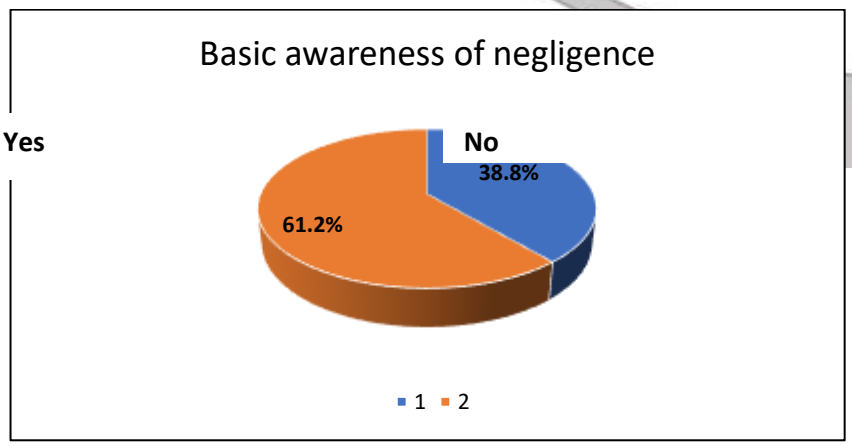
A structured questionnaire containing 12 Yes/No questions was distributed. The questionnaire assessed:

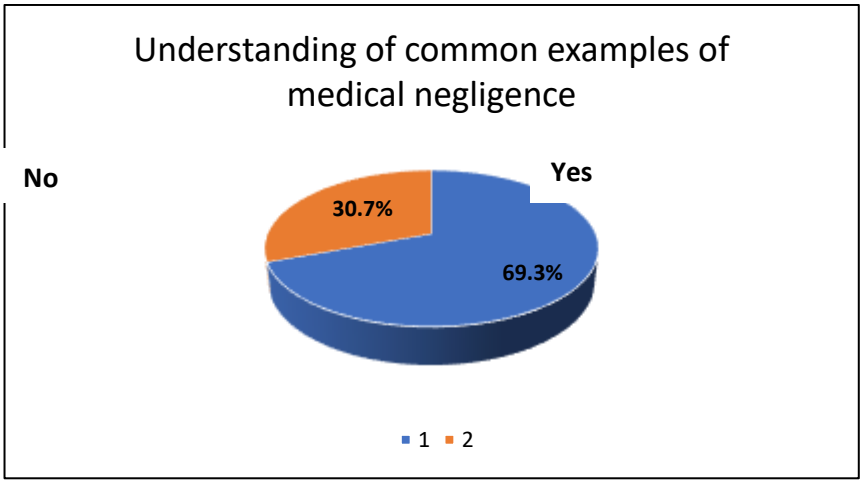
- Basic awareness of medical negligence
- Prevention of malpractice suits
- Understanding of common examples of medical negligence
- Awareness of Bolam test
- Awareness of 'crosspathy'

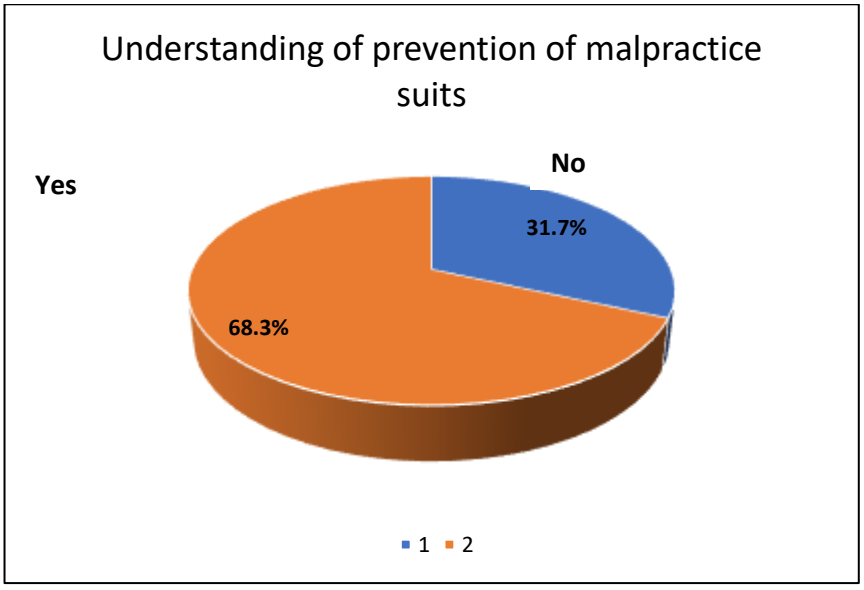
A total of 183 responses were collected and analysed

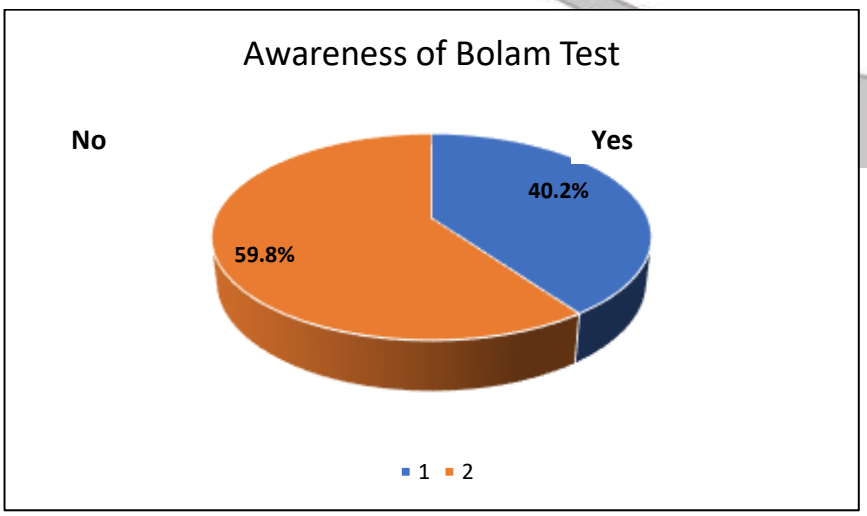
3. Results:

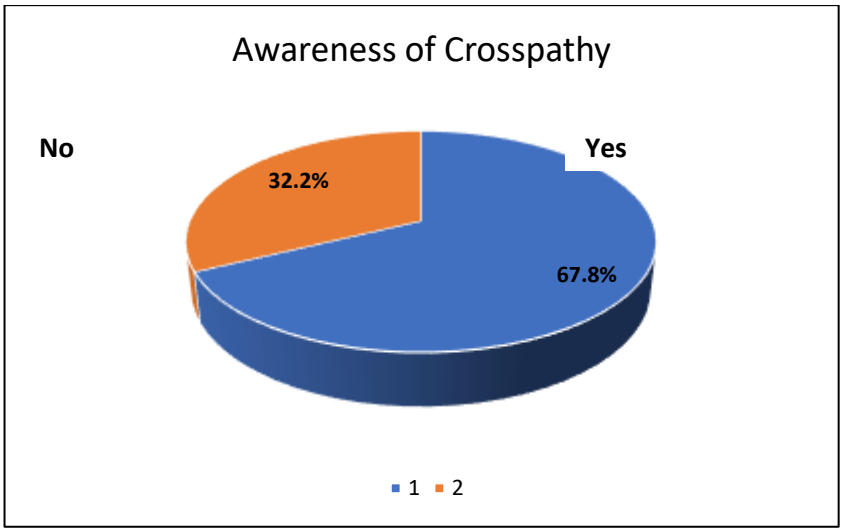
S. No.	Question	Yes	No
1	Have you heard of the Bolam Test used to determine medical negligence?	60.7%	39.3%
2	Is a medical professional negligent if the doctor acts in line with a respectable minority of peer opinion, even if others disagree?	19.7%	80.3%
3	Can failure to diagnose and treat complications of surgery be held to be negligence, even if such complications are not usually expected?	67.8%	32.2%
4	Do errors of judgment imply negligence?	38.8%	61.2%
5	Can not seeking the opinion of an available specialist be held to be an incidence of negligence?	83.1%	16.9%
6	If no damage or injury is caused to the patient, can the doctor still be held as negligent?	29.0%	71.0%
7	Can leaving the patient to the care of a junior doctor, who is not incompetent but has no experience as such (even if such junior doctor performs the surgery without mistakes) be medical negligence?	72.1%	27.9%
8	Is it negligence for a government doctor to refer patients to private x-ray clinics, laboratories and for medicines?	52.5%	47.5%
9	If there is case of negligence filed against a doctor, is it better for the doctor to refuse to answer any questions during the investigation and to reserve all information for the court?	31.7%	68.3%
10	If a medical practitioner takes informed consent from the patient, is he allowed to use speculative, unproven, or experimental interventions in the absence of any credible scientific evidence or professional opinion?	29.0%	71.0%
11	Are you aware of Crosspathy?	50.3%	49.7%
12	Is it breach of duty if a homeopath prescribes allopathic medicines?	85.2%	14.8%


Basic awareness of negligence
Yes
No
38.8%
61.2%
1
2


Understanding of common examples of medical negligence
No
Yes
30.7%
69.3%
1
2


Understanding of prevention of malpractice suits
Yes
No
31.7%
68.3%
1
2





1. Basic awareness of medical negligence was reported by 61.2% of participants, while 38.8% were unaware.
2. 69.3% demonstrated an understanding of common examples of medical negligence whereas 30.7% did not.
3. Regarding preventive measures for malpractice suits, 68.3% displayed an understanding of the issue, while 31.7% did not.
4. Awareness of Bolam Test was at less than half at 40.2% while that of 'Crosspathy' was higher at 67.8%.

4. Discussion

The present study demonstrates a moderate level of awareness of medical negligence among medical students, with approximately two-thirds of participants showing basic understanding. This finding is encouraging but highlights significant gaps in deeper medicolegal knowledge[1].

Compared to the study by Sudharshan and Magendrann, where awareness levels were below 50%[2], our findings suggest a gradual improvement, possibly due to increased exposure to medicolegal issues in contemporary medical education. However, consistent with the observations of Reddy and Abhinandana, comprehensive understanding of legal principles remains inadequate[3].

Notably, awareness of the Bolam Test, a cornerstone in determining standard of care, was low (40.2%)[4], indicating insufficient emphasis on legal doctrines during undergraduate training. In contrast, awareness of Crosspathy was relatively higher (67.8%)[5], likely reflecting increased public and regulatory discourse in India.

The findings also reveal misconceptions regarding informed consent, liability without harm, and error of judgment, which are critical in real-world clinical practice[6]. Such gaps may predispose future practitioners to litigation risks[7].

The rising trend of medical negligence claims in India necessitates early sensitization of medical students to legal

responsibilities[8]. However, overemphasis on litigation risk may contribute to defensive medicine, leading to unnecessary investigations and increased healthcare costs[9].
Therefore, a balanced approach incorporating both legal awareness and ethical clinical practice is essential[10].

5. Conclusion:

The study reveals that while baseline awareness of medical negligence exists among medical students, critical deficiencies in core legal concepts persist. Strengthening undergraduate medical curricula through structured medicolegal education, case-based learning, and interdisciplinary teaching is imperative. Early sensitization can promote ethical practice, reduce medico-legal conflicts, and ultimately enhance patient safety.

Ethical Clearance
Yet to obtain from the Central Ethics Committee.
Conflict of Interest
Nil
Funding
No financial support was received.

References:

1. Singh P, Aggarwal AN, Bansal M. Awareness of medical negligence among undergraduate medical students in India. J Forensic Leg Med. 2021;78:102102.
2. Sudharshan S, Magendrann J. Knowledge and awareness of medical negligence among medical students: A cross-sectional study. Natl J Physiol Pharm Pharmacol. 2019;9(5):456–460.
3. Reddy SP, Abhinandana K. Awareness of medicolegal issues among medical students and practitioners: A comparative study. Indian J Forensic Med Toxicol. 2020;14(3):120–125.
4. Bolam v Friern Hospital Management Committee. [1957] 1 WLR 582 (UK).
5. Kumar R, Gupta S. Crosspathy practice in India: Legal and ethical perspectives. Indian J Med Ethics. 2022;7(2):145–149.
6. Beauchamp TL, Childress JF. Principles of Biomedical Ethics. 8th ed. New York: Oxford University Press; 2019.
7. Kachalia A, Mello MM, Studdert DM. Studying medical error disclosure and liability. N Engl J Med. 2020;382:157–165.
8. Bhatia K, Singh A. Rising trend of medical negligence litigation in India: A review. J Indian Acad Forensic Med. 2023;45(1):12–16.
9. Studdert DM, Mello MM, Sage WM. Defensive medicine among high-risk specialist physicians. JAMA. 2005;293(21):2609–2617.
10. Gupta R, Sinha A. Teaching medical law and ethics in undergraduate curriculum: Need of the hour. Indian J Med Ethics. 2021;6(3):180–184.