Sentinel Event Data

Event Type by Year

1995 – 2015

The Joint Commission

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Sentinel Event

A sentinel event is a patient safety event (not primarily related to the natural course of the patient's illness or underlying condition) that reaches a patient and results in any of the following:

- Death
- Permanent harm
- Severe temporary harm and intervention required to sustain life

The Sentinel Event Policy is available online at:
http://www.jointcommission.org/Sentinel_Event_Policy_and_Procedures/

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Sentinel Event

An event is also considered sentinel if it is one of the following:

- Suicide of any patient receiving care, treatment, and services in a staffed around-the clock care setting or within 72 hours of discharge, including from the hospital's emergency department (ED)
- Unanticipated death of a full-term infant n Discharge of an infant to the wrong family
- Abduction of any patient receiving care, treatment, and services
- Any elopement (that is, unauthorized departure) of a patient from a staffed around the-clock care setting (including the ED), leading to death, permanent harm, or severe temporary harm to the patient

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Sentinel Event

An event is also considered sentinel if it is one of the following:

- Hemolytic transfusion reaction involving administration of blood or blood products having major blood group incompatibilities (ABO, Rh, other blood groups)
- Rape, assault (leading to death, permanent harm, or severe temporary harm), or homicide of any patient receiving care, treatment, and services while on site at the hospital
- Rape, assault (leading to death, permanent harm, or severe temporary harm), or homicide of a staff member, licensed independent practitioner, visitor, or vendor while on site at the hospital
- Invasive procedure, including surgery, on the wrong patient, at the wrong site, or that is the wrong (unintended) procedure

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Sentinel Event

An event is also considered sentinel if it is one of the following:

- Unintended retention of a foreign object in a patient after an invasive procedure, including surgery
- Severe neonatal hyperbilirubinemia (bilirubin >30 milligrams/deciliter)
- Prolonged fluoroscopy with cumulative dose >1,500 rads to a single field or any delivery of radiotherapy to the wrong body region or >25% above the planned radiotherapy dose
- Fire, flame, or unanticipated smoke, heat, or flashes occurring during an episode of patient care
- Any intrapartum (related to the birth process) maternal death or severe maternal morbidity

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Data Limitations

- *The reporting of most sentinel events to The Joint Commission is voluntary and represents only a small proportion of actual events. Therefore, these data are not an epidemiologic data set and no conclusions should be drawn about the actual relative frequency of events or trends in events over time.*

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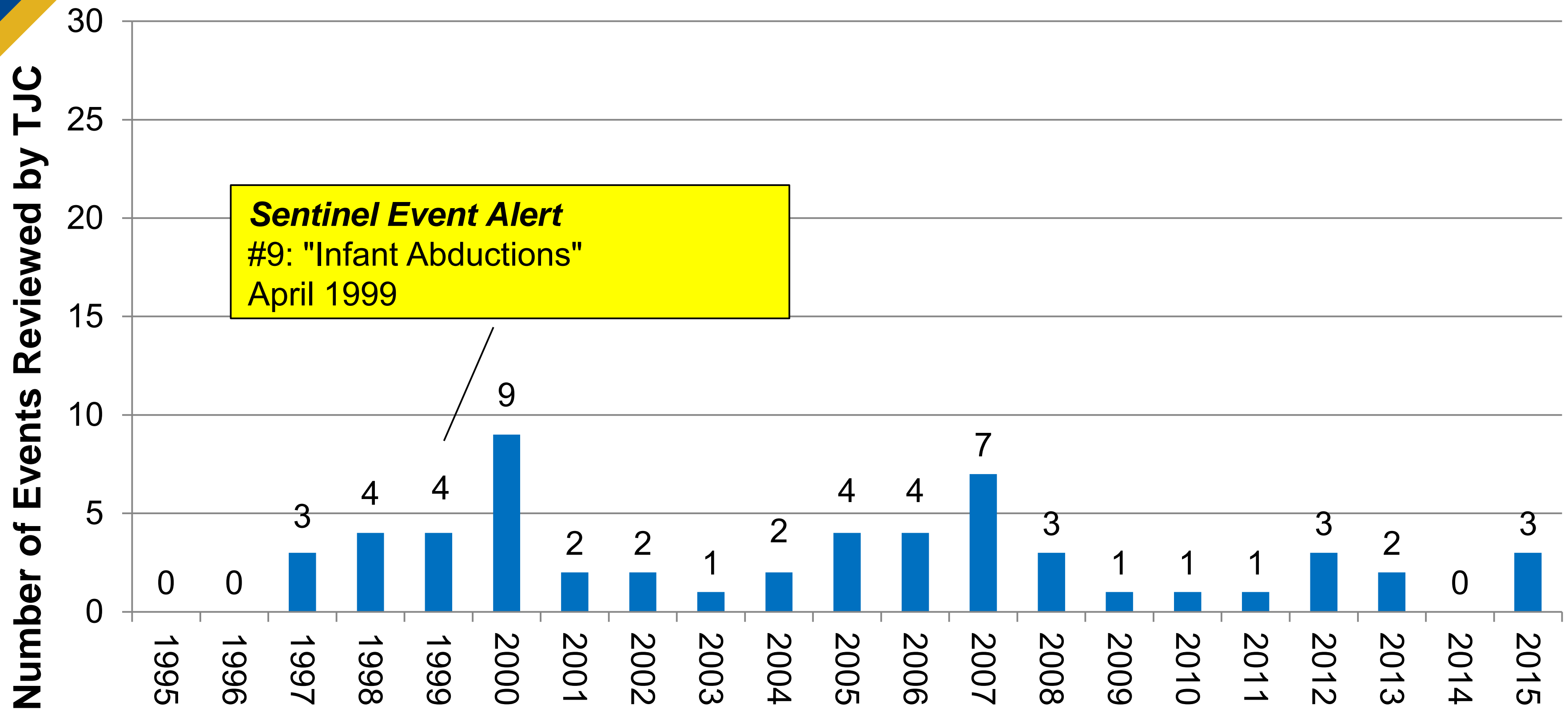
Abduction Events
Reviewed by The Joint Commission

(Of any individual receiving care, treatment or services)



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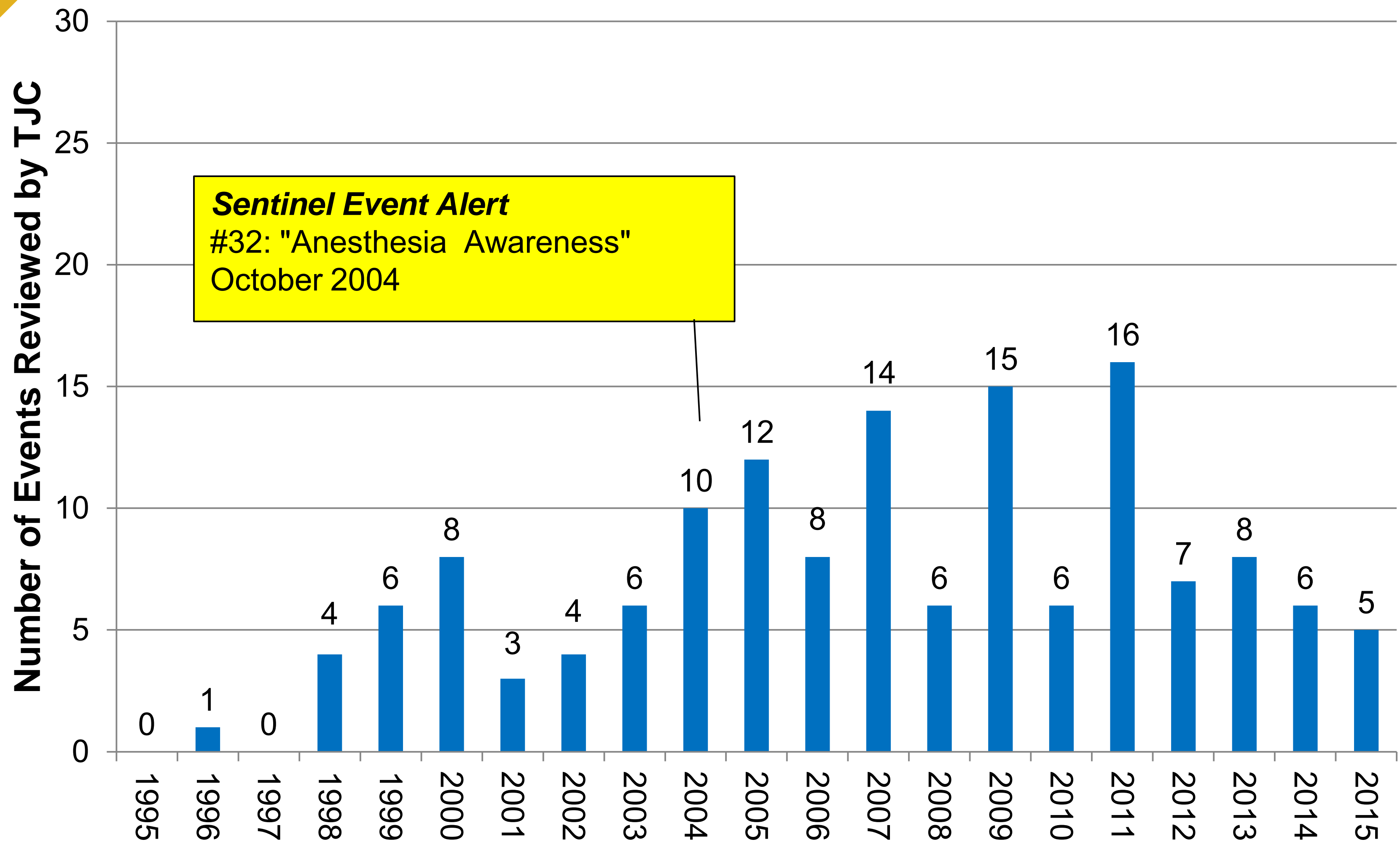
Anesthesia-related Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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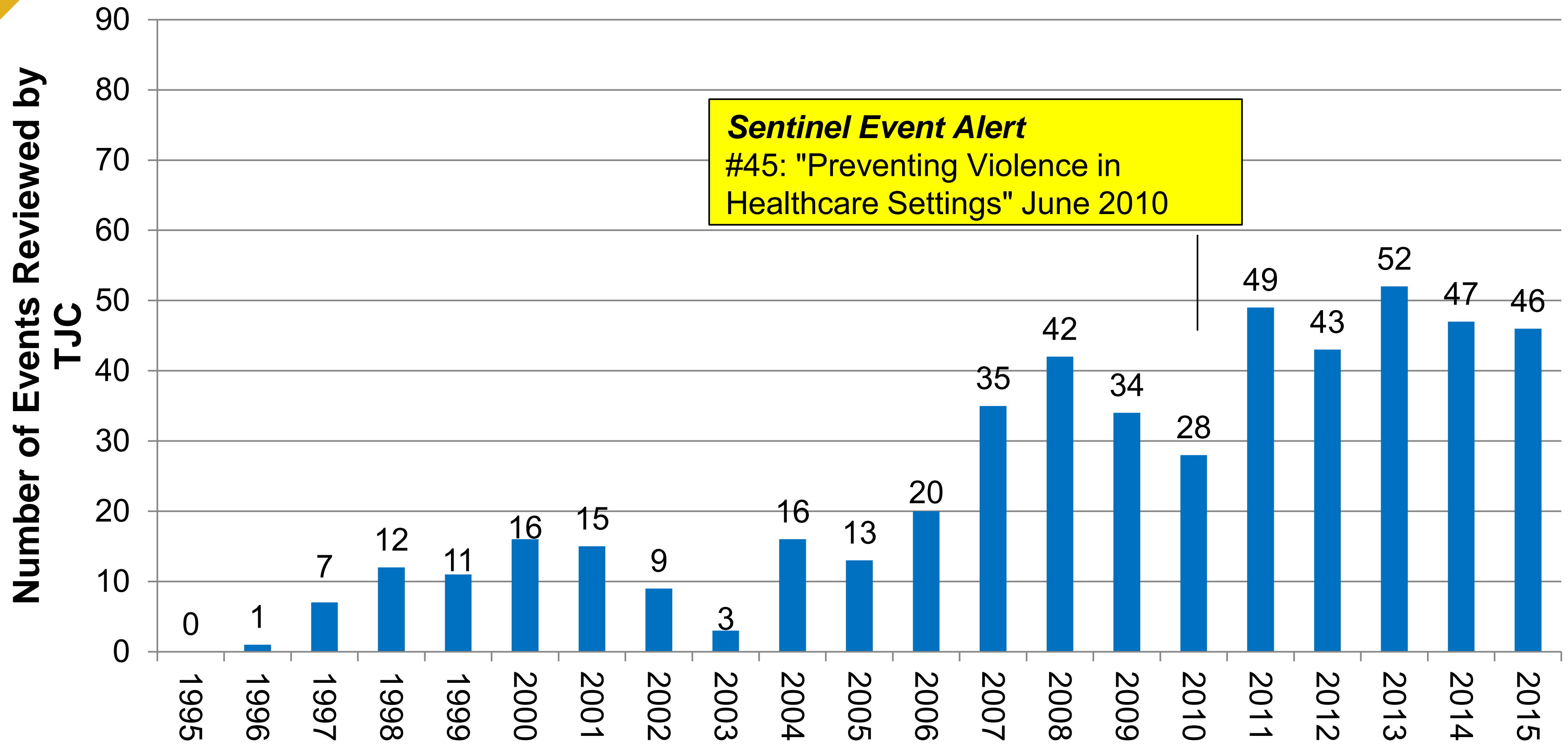
Criminal Events -- Assault/Rape/Homicide Reviewed by The Joint Commission

(Rape defined as un-consented sexual contact. One or more of the following must be present to determine reviewability: Any staff witnessed sexual contact; or sufficient clinical evidence or admission by the perpetrator)



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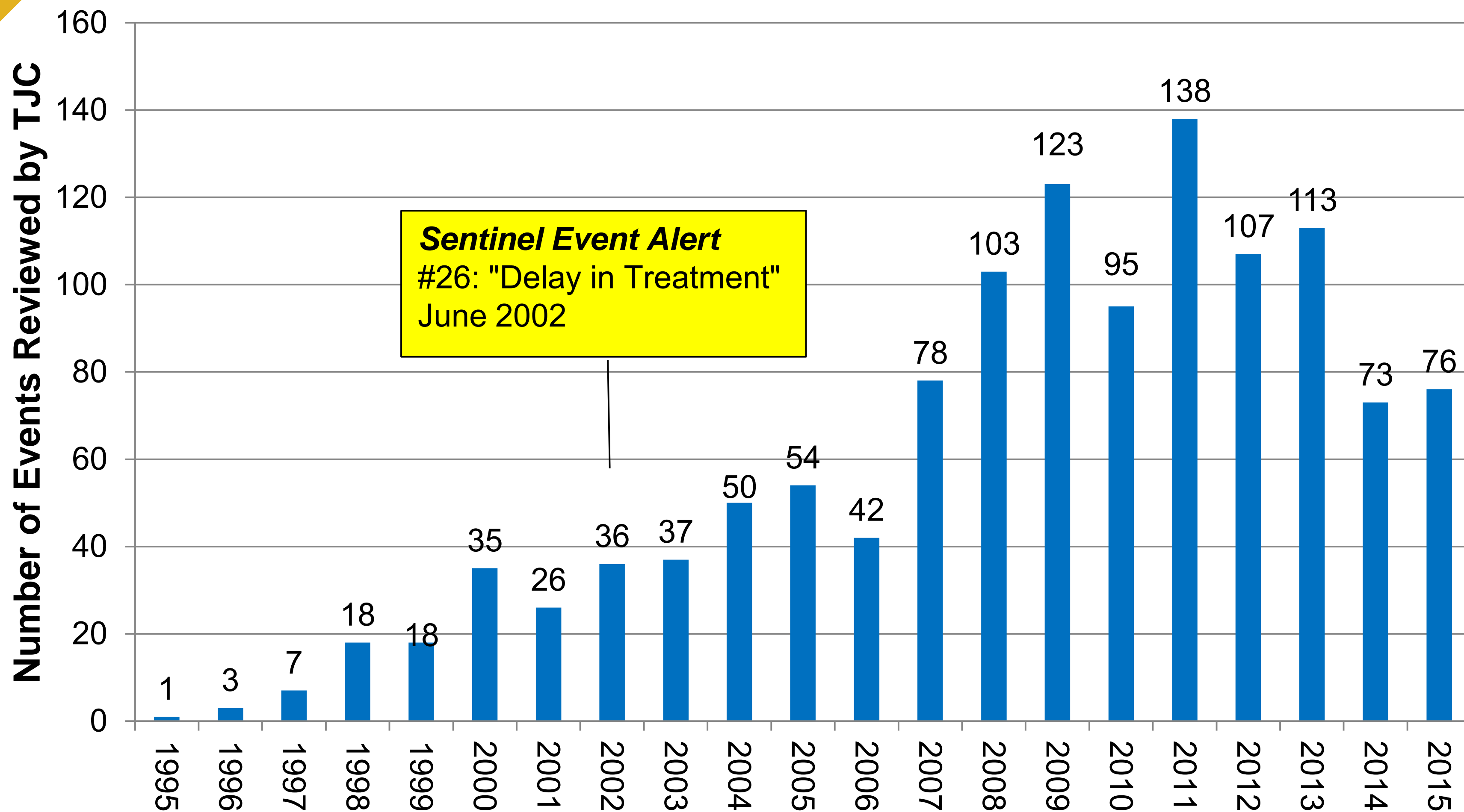
Delay in Treatment Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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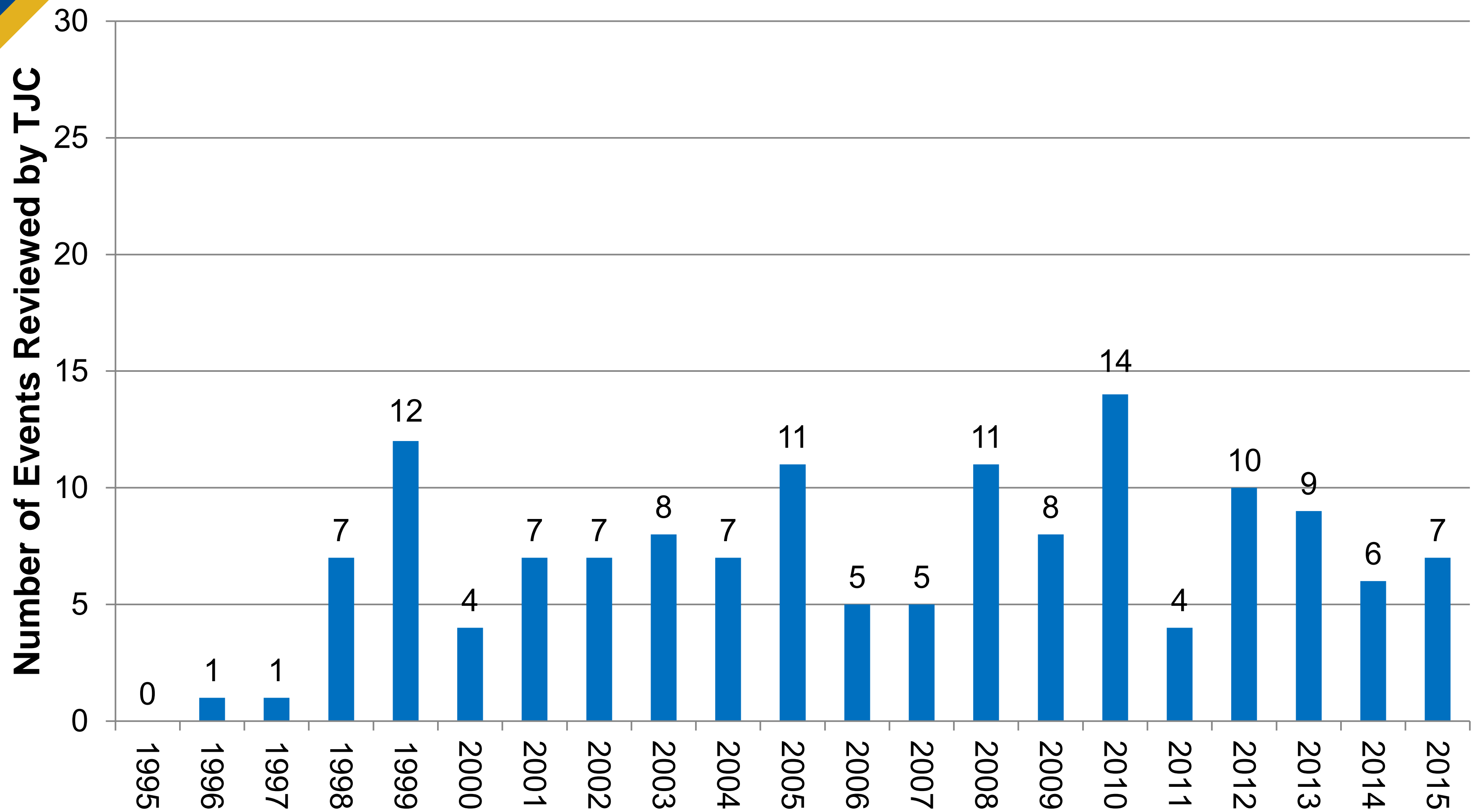
Elopement-related Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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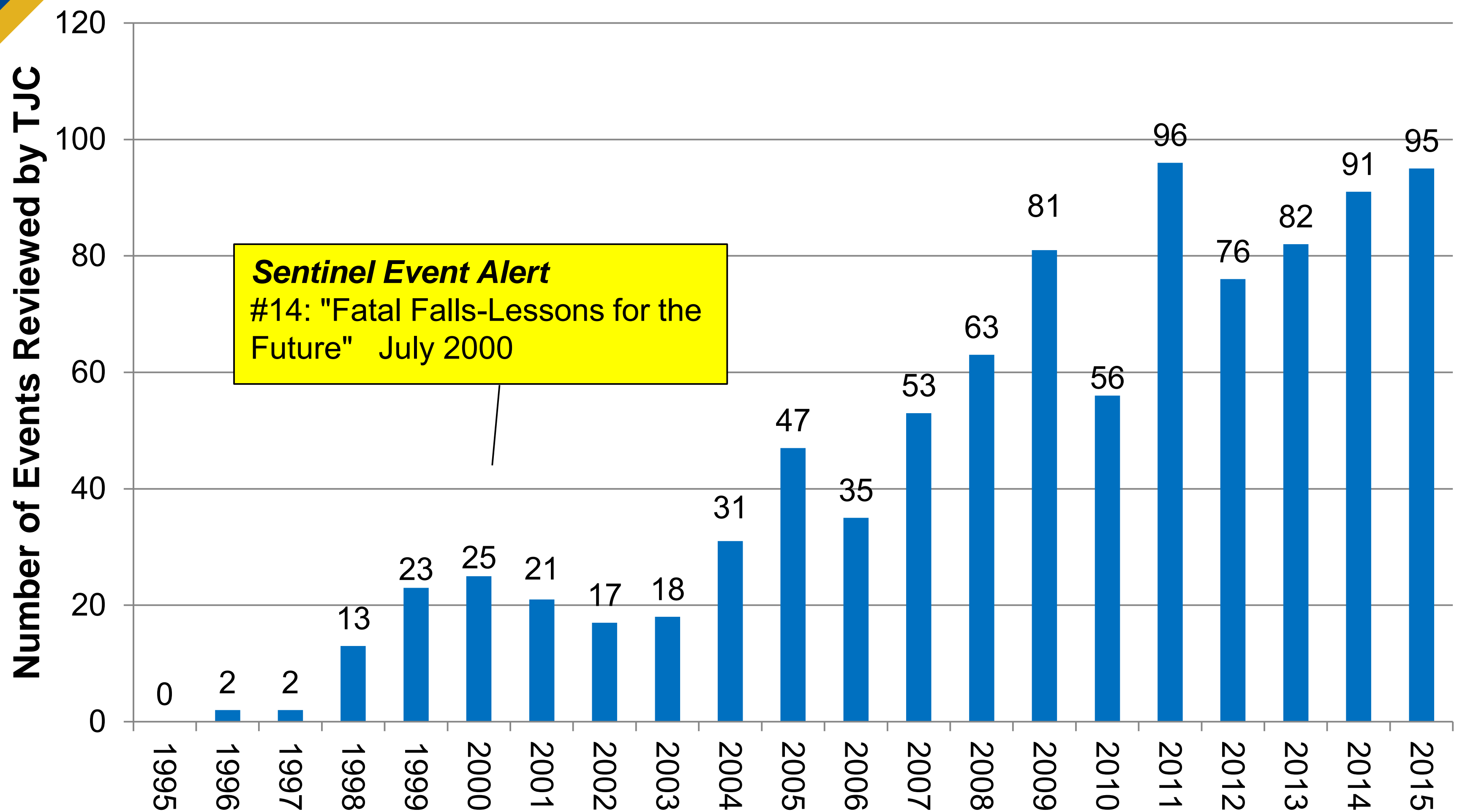
Fall-related Events
Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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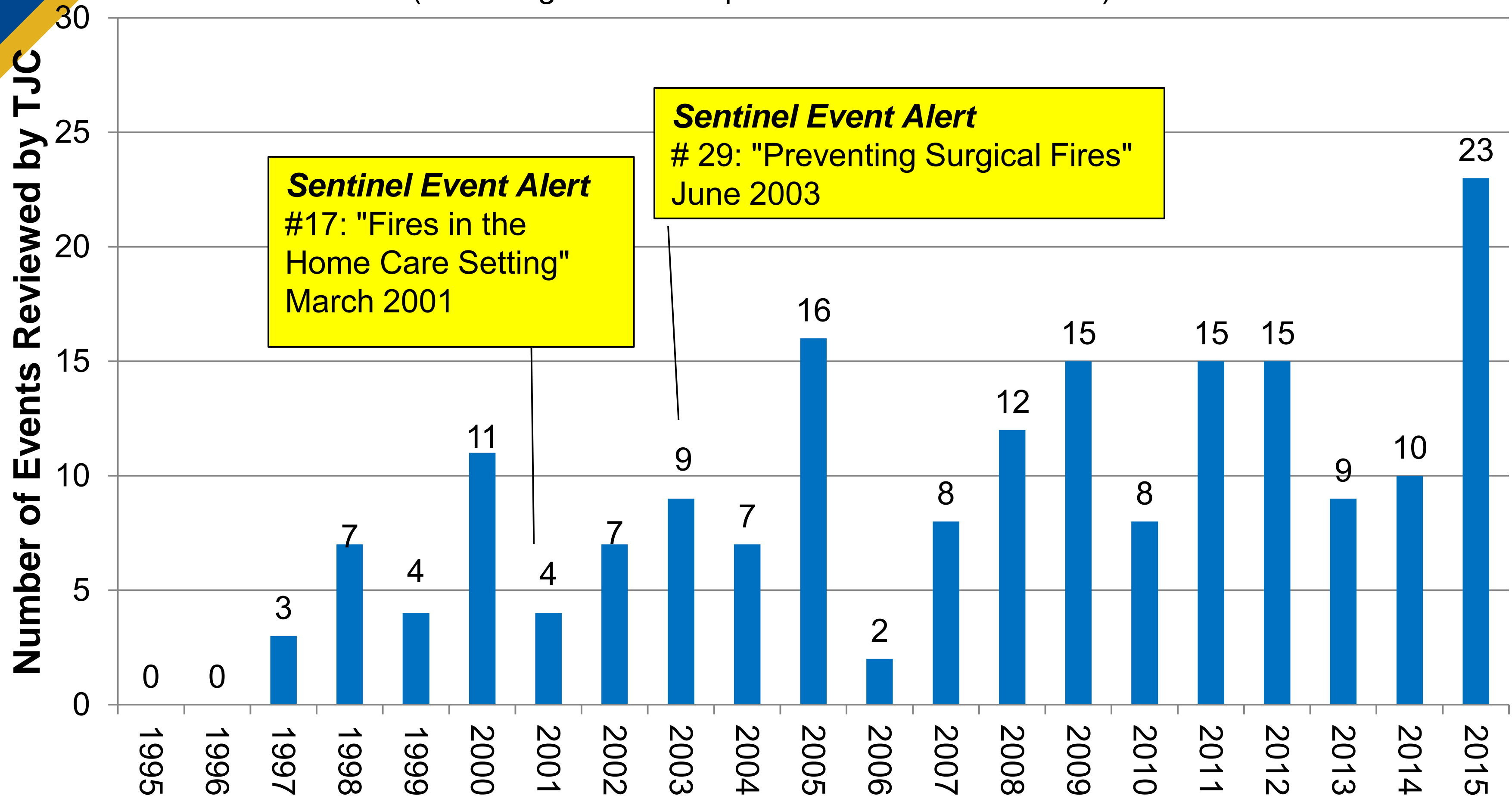
Fire-related Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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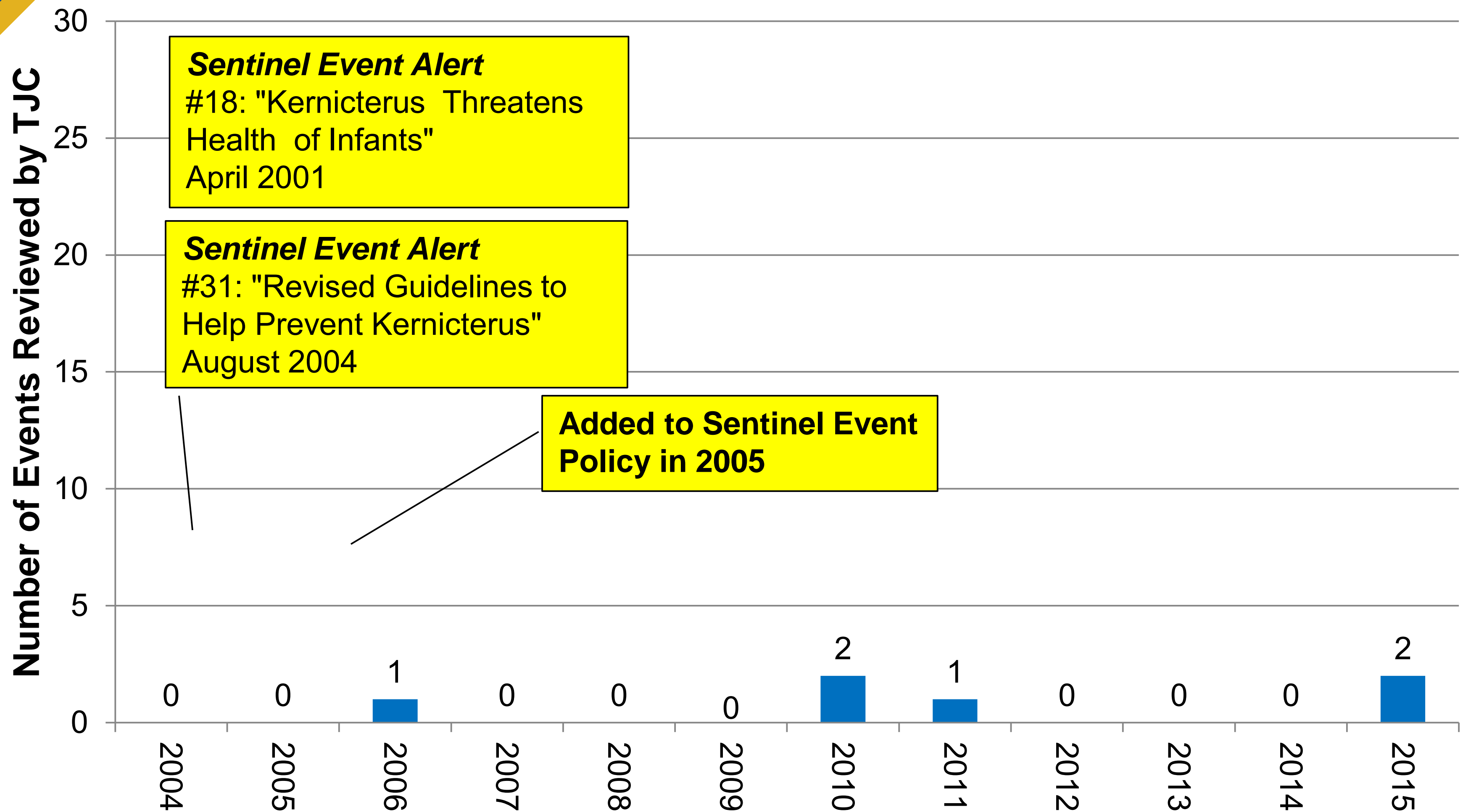
Hyperbilirubinemia Events Reviewed by The Joint Commission

(Bilirubin > 30 milligrams/deciliter)



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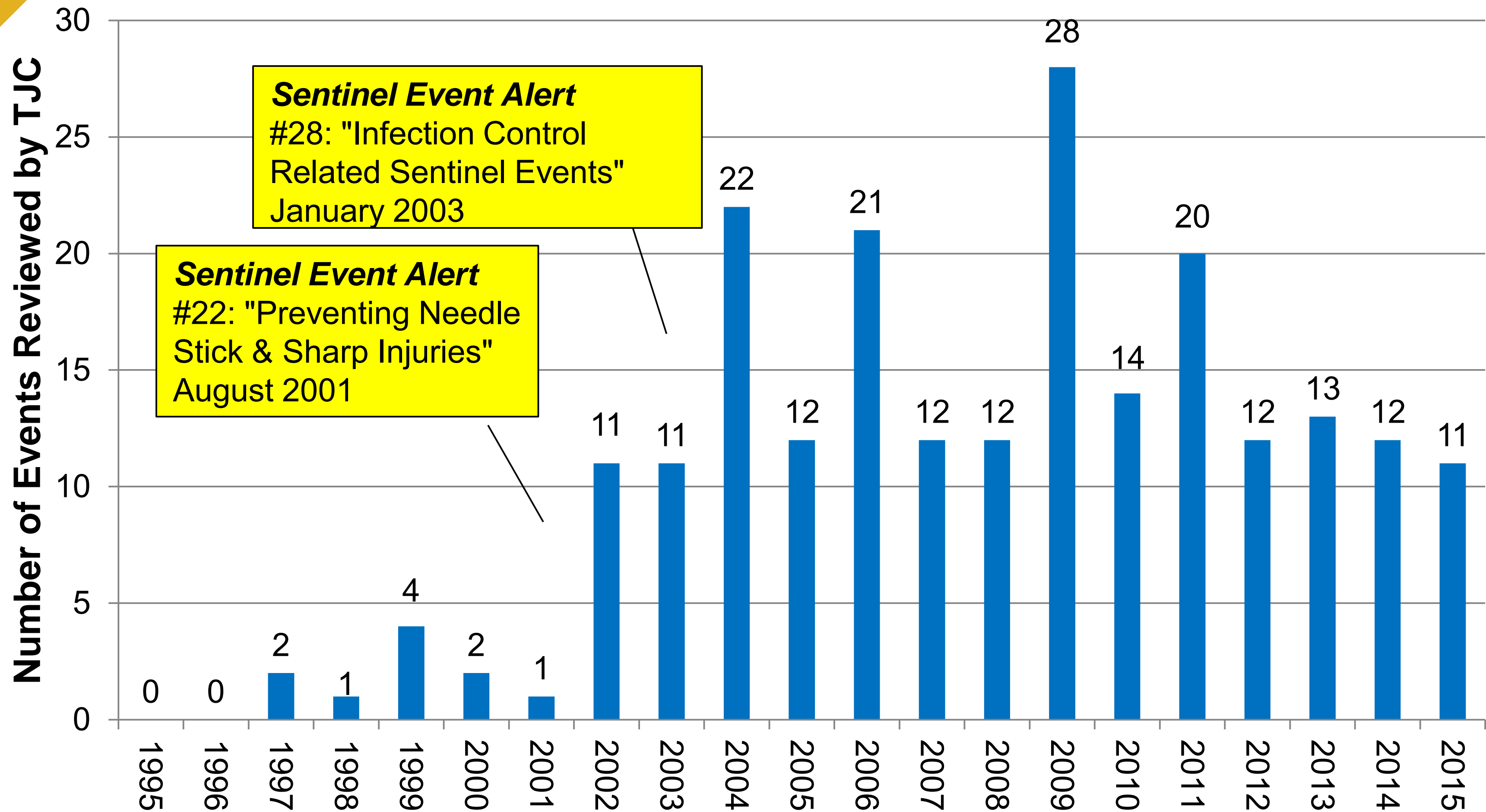
Infection-related Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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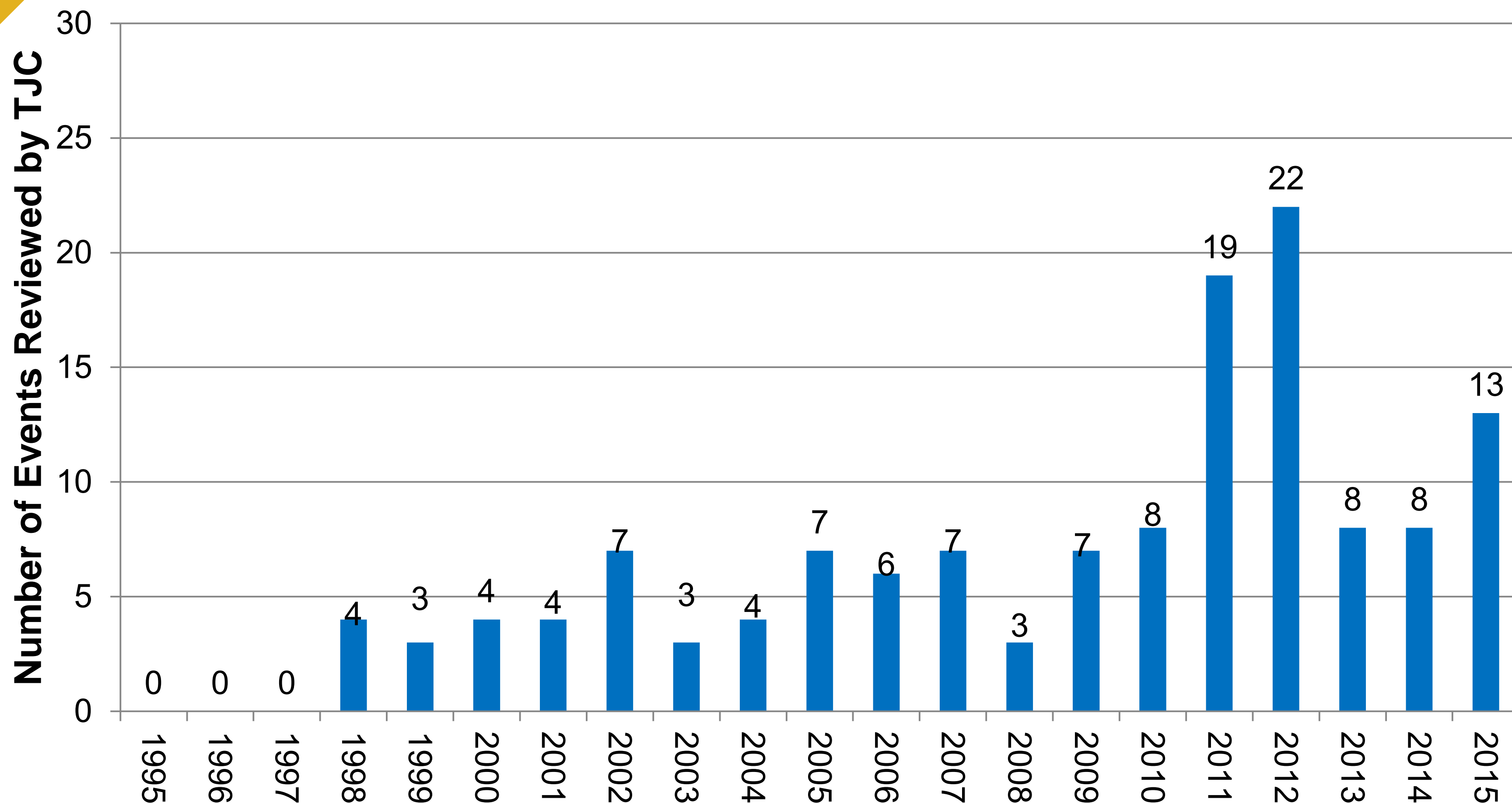
Inpatient Drug Overdose Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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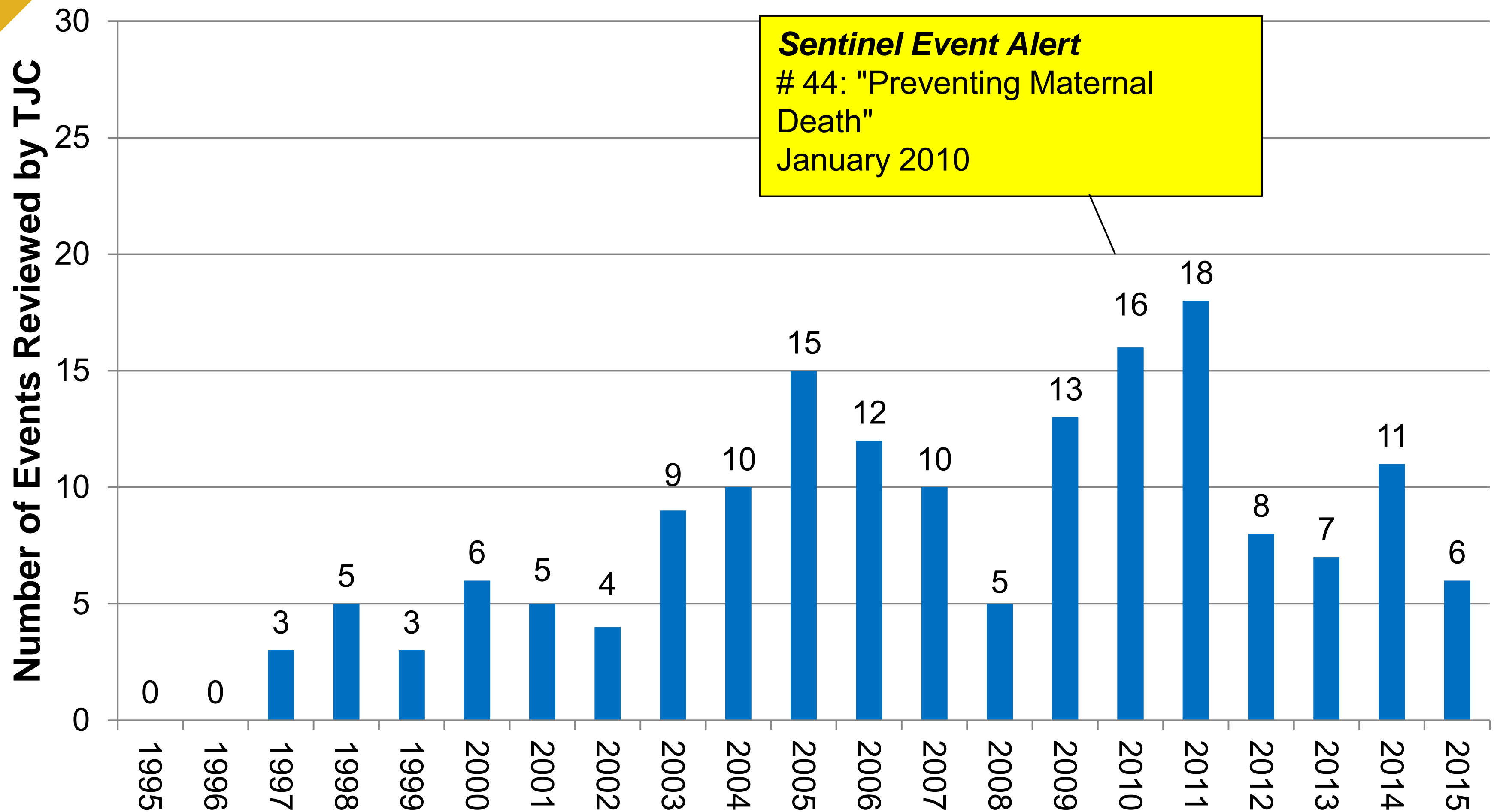
Maternal Events
Reviewed by The Joint Commission



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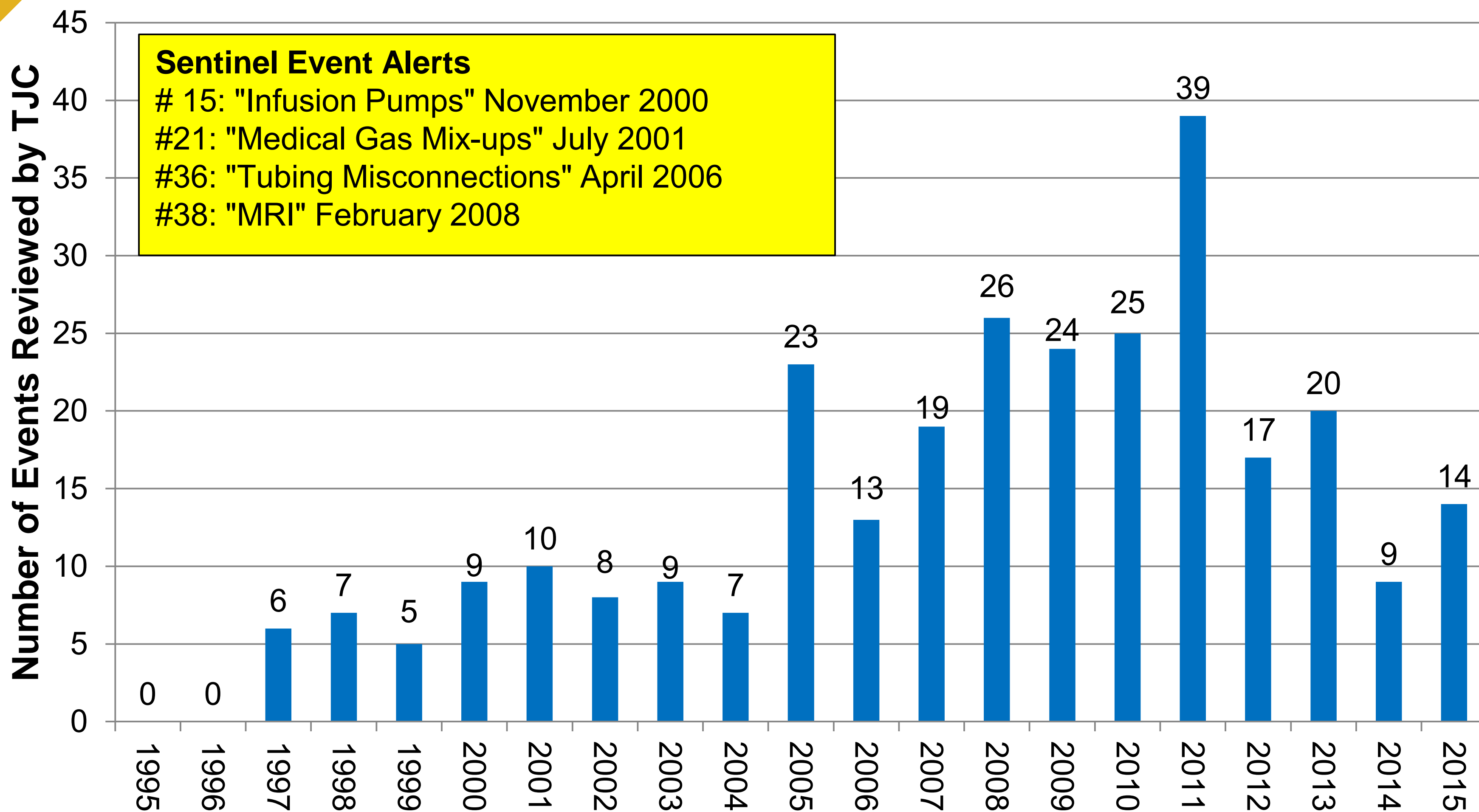
Medical Equipment-related Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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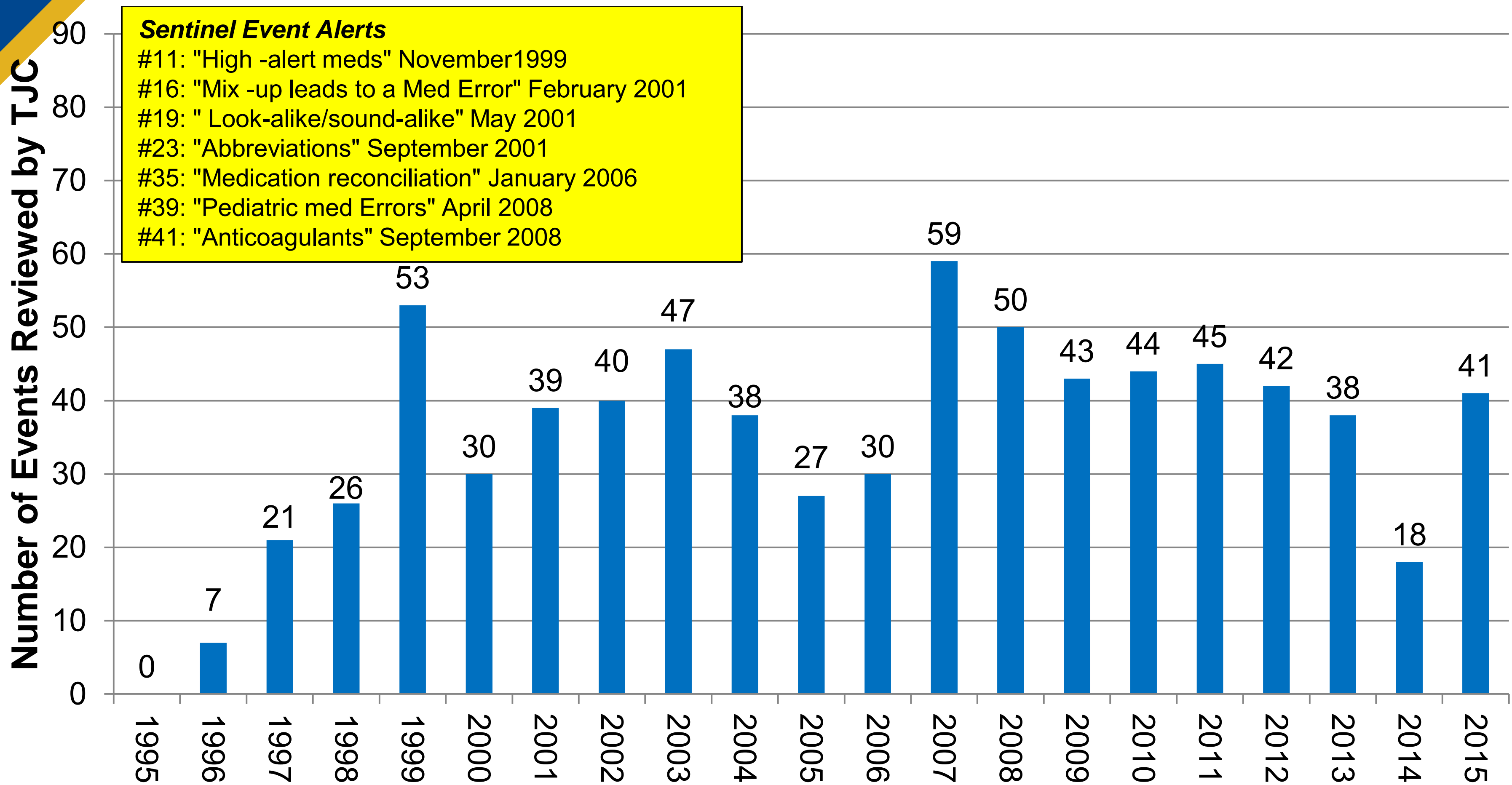
Medication Error Events
Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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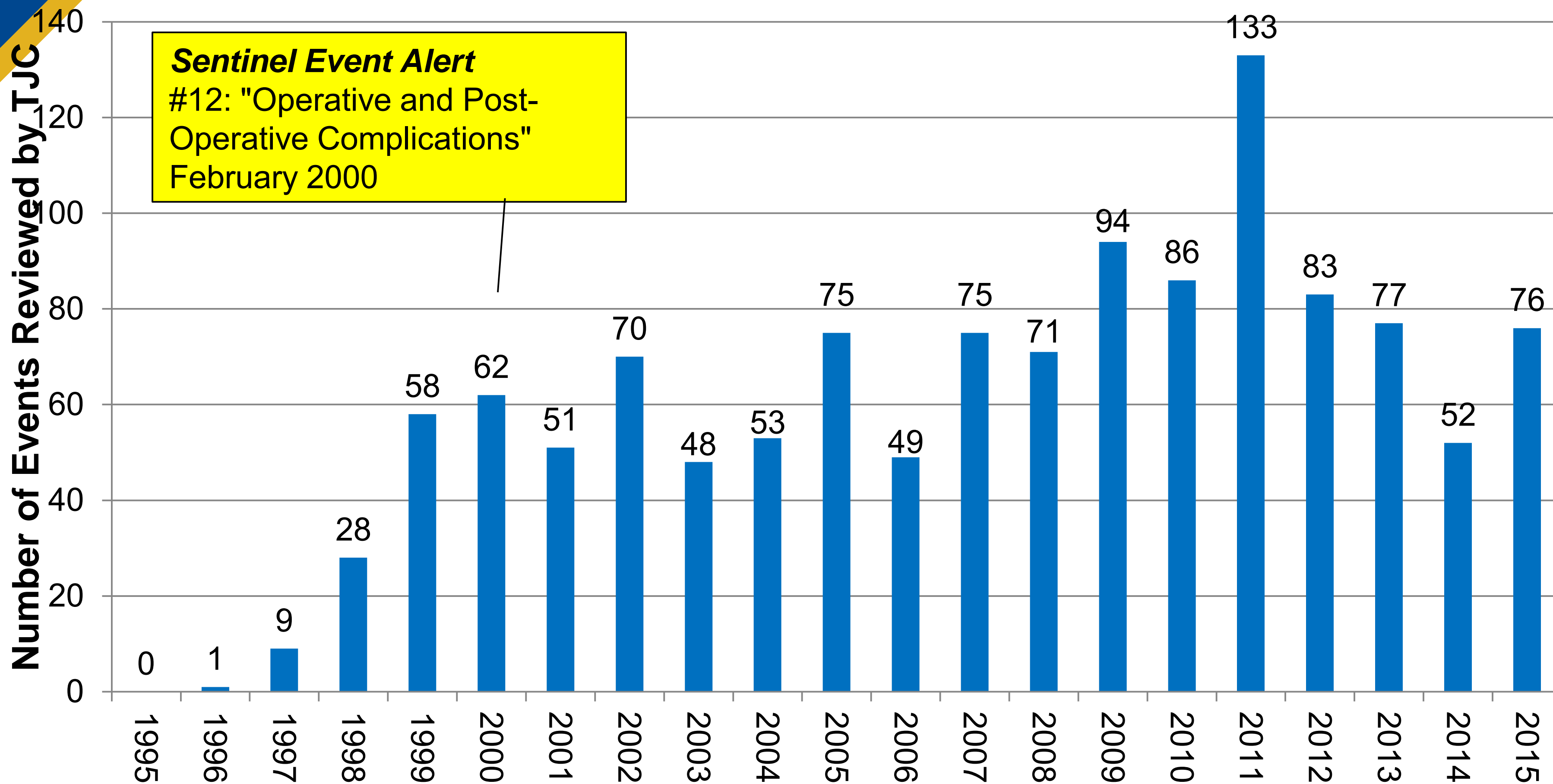
Op/Post-op Complication Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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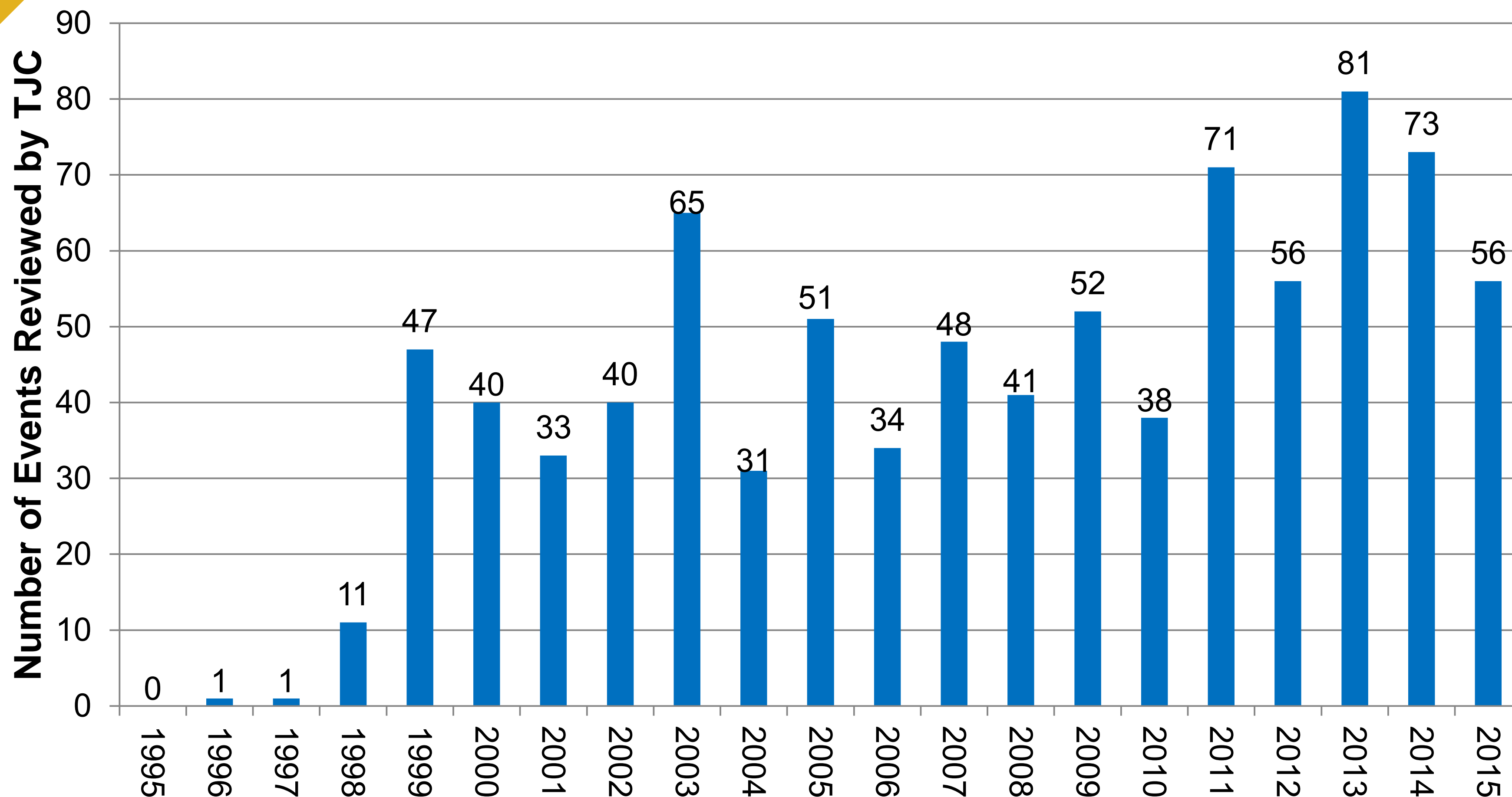
Other Unanticipated Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function--such as: asphyxiation, choking, drowning, found unresponsive)



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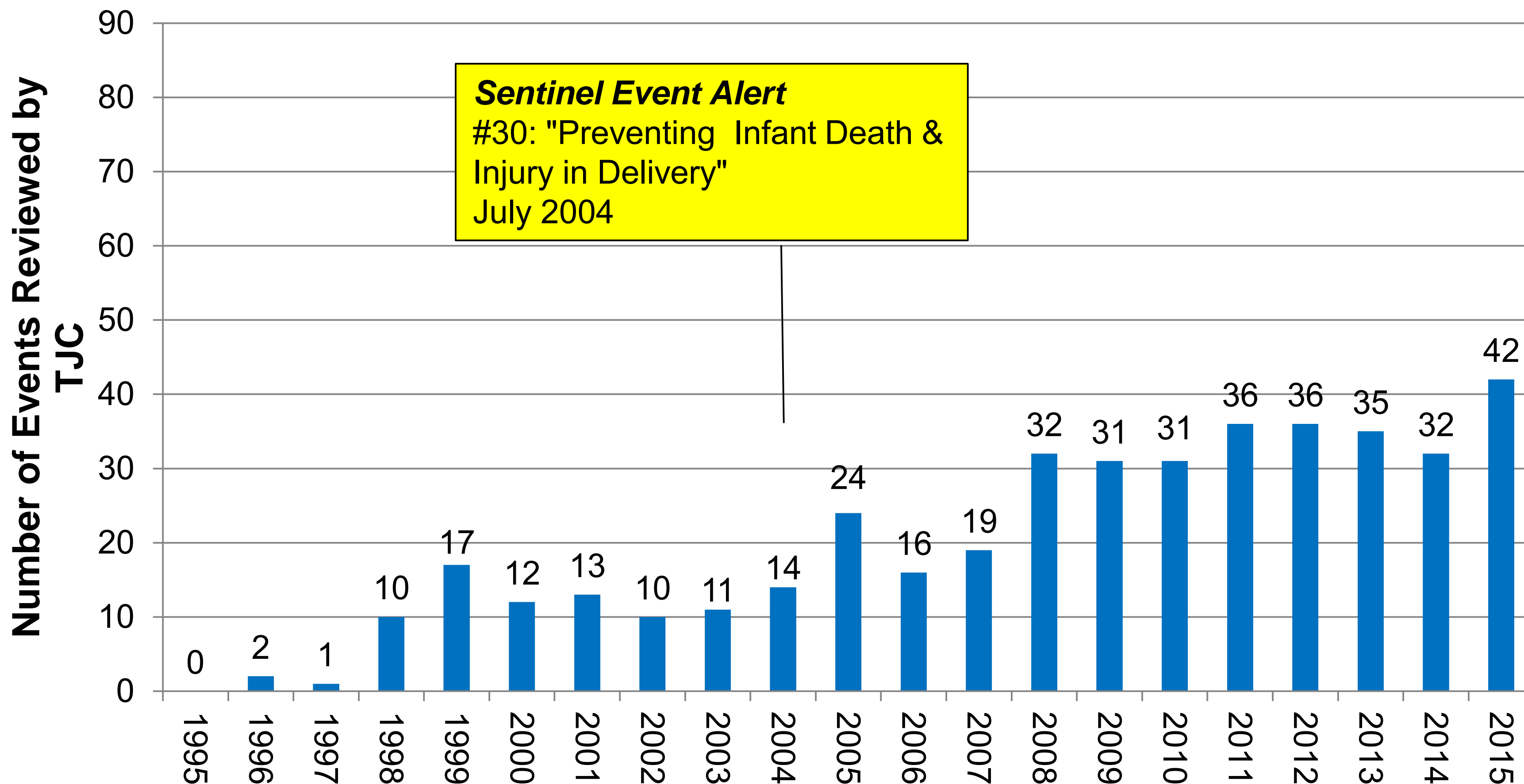
Perinatal Events
Reviewed by The Joint Commission

(Resulting in death or permanent loss of function--full-term infant 2500g or > and absence of obvious congenital abnormality)



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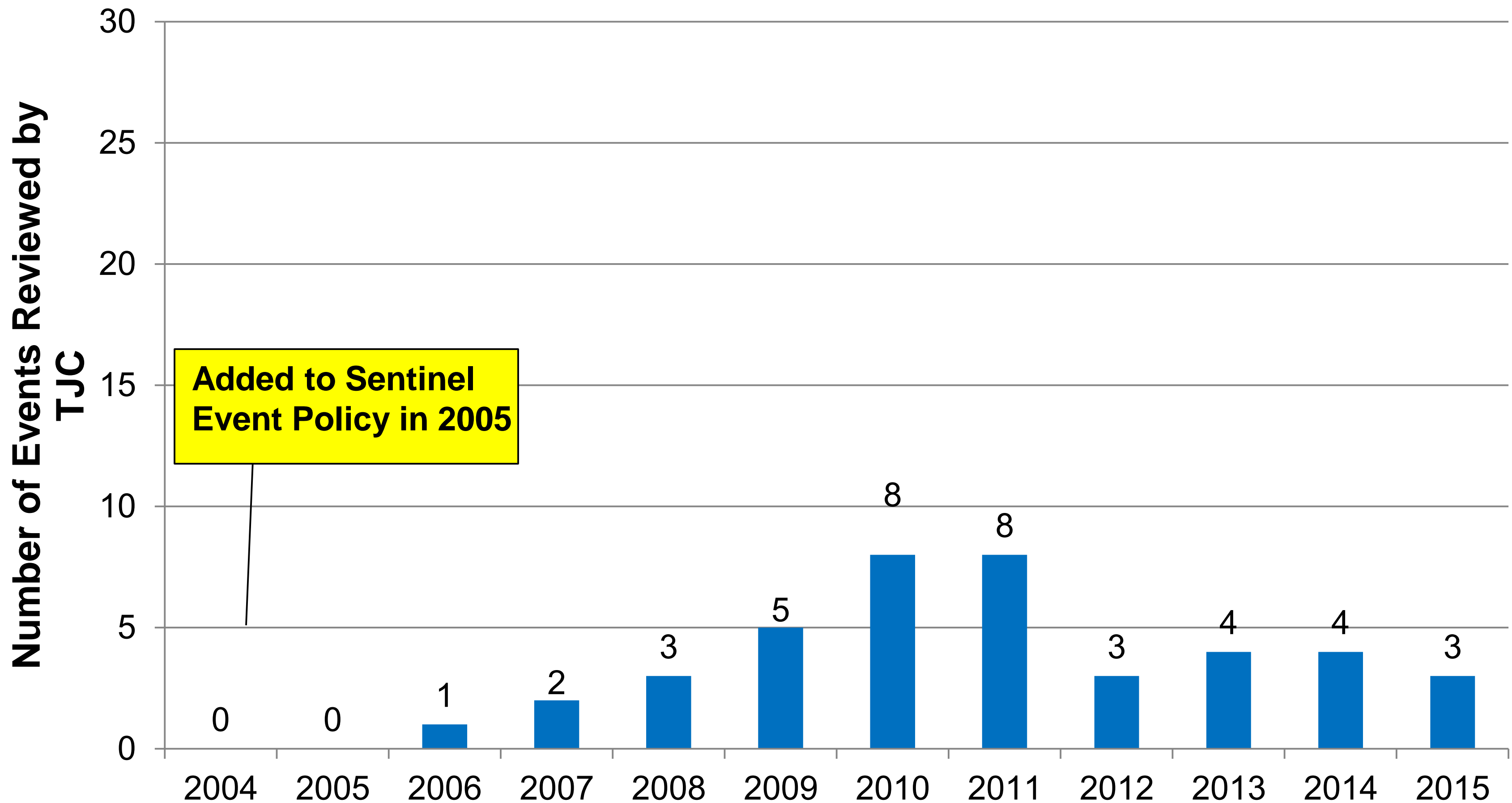
Radiation Overdose Events Reviewed by The Joint Commission

(Cumulative dose > 1500 rads to a single field, or any delivery of radiotherapy to the wrong body region or > 25% above the planned radiotherapy dose)



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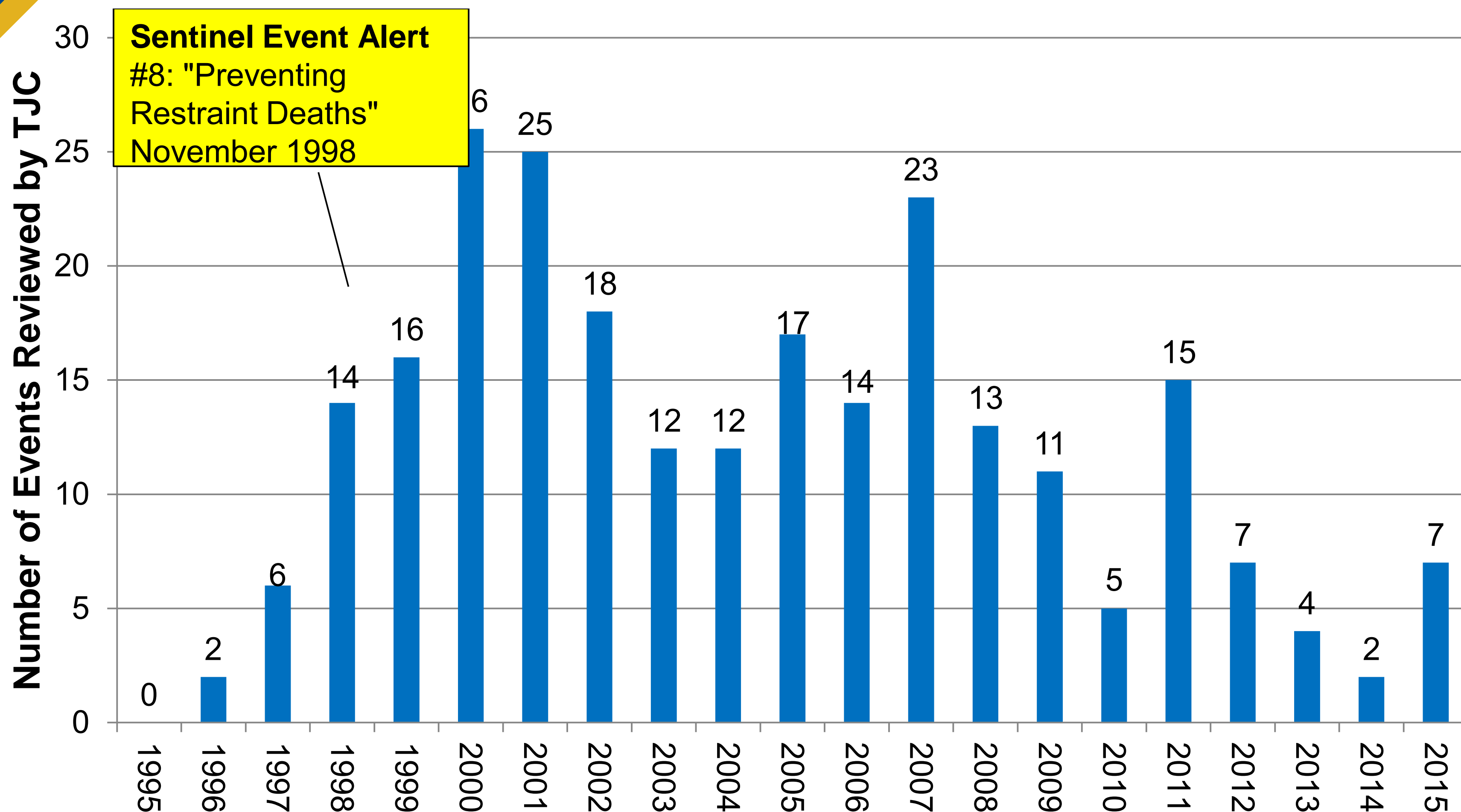
Restraint-related Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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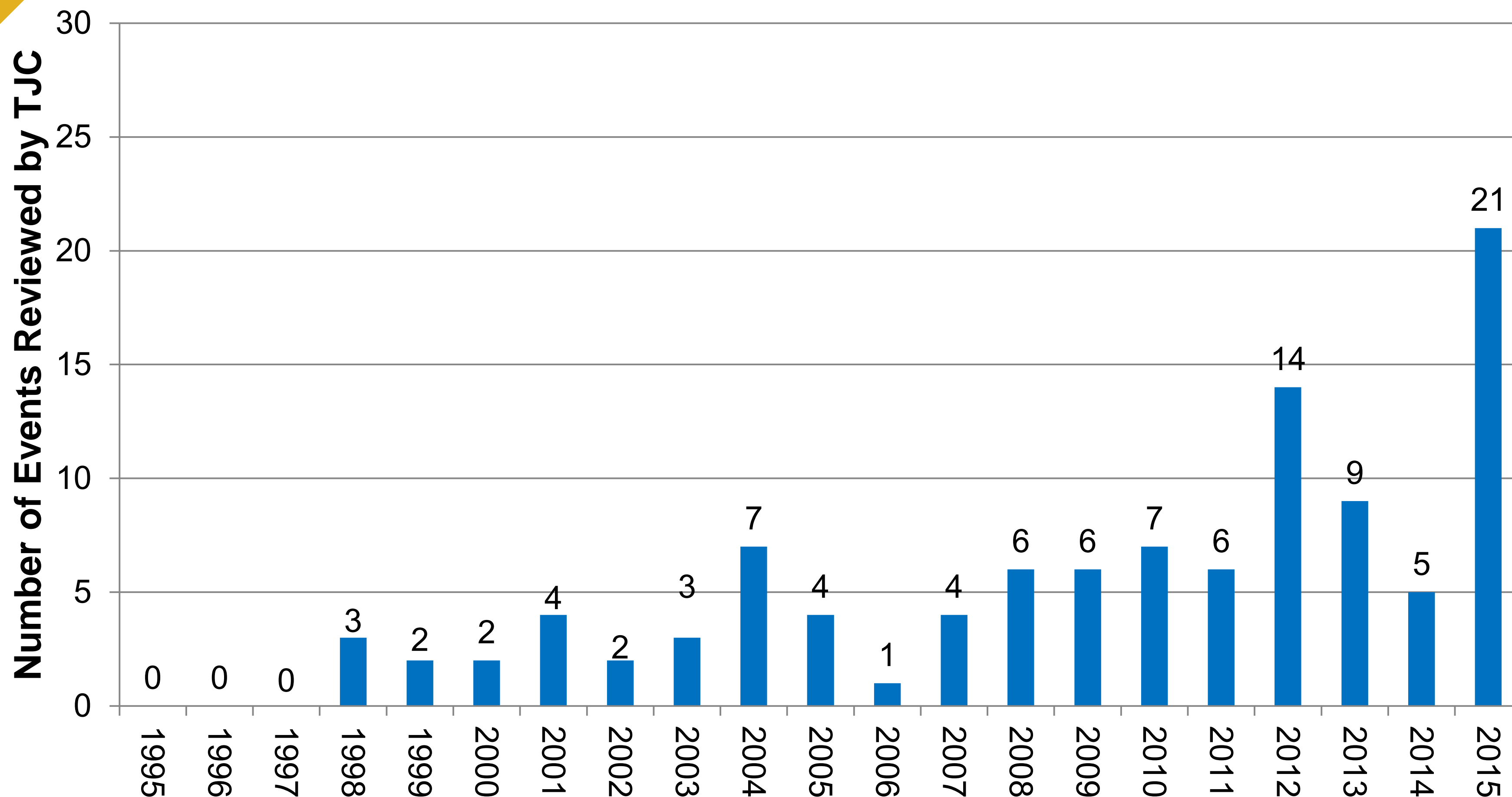
Self-inflicted Injury Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function--not related to suicide)



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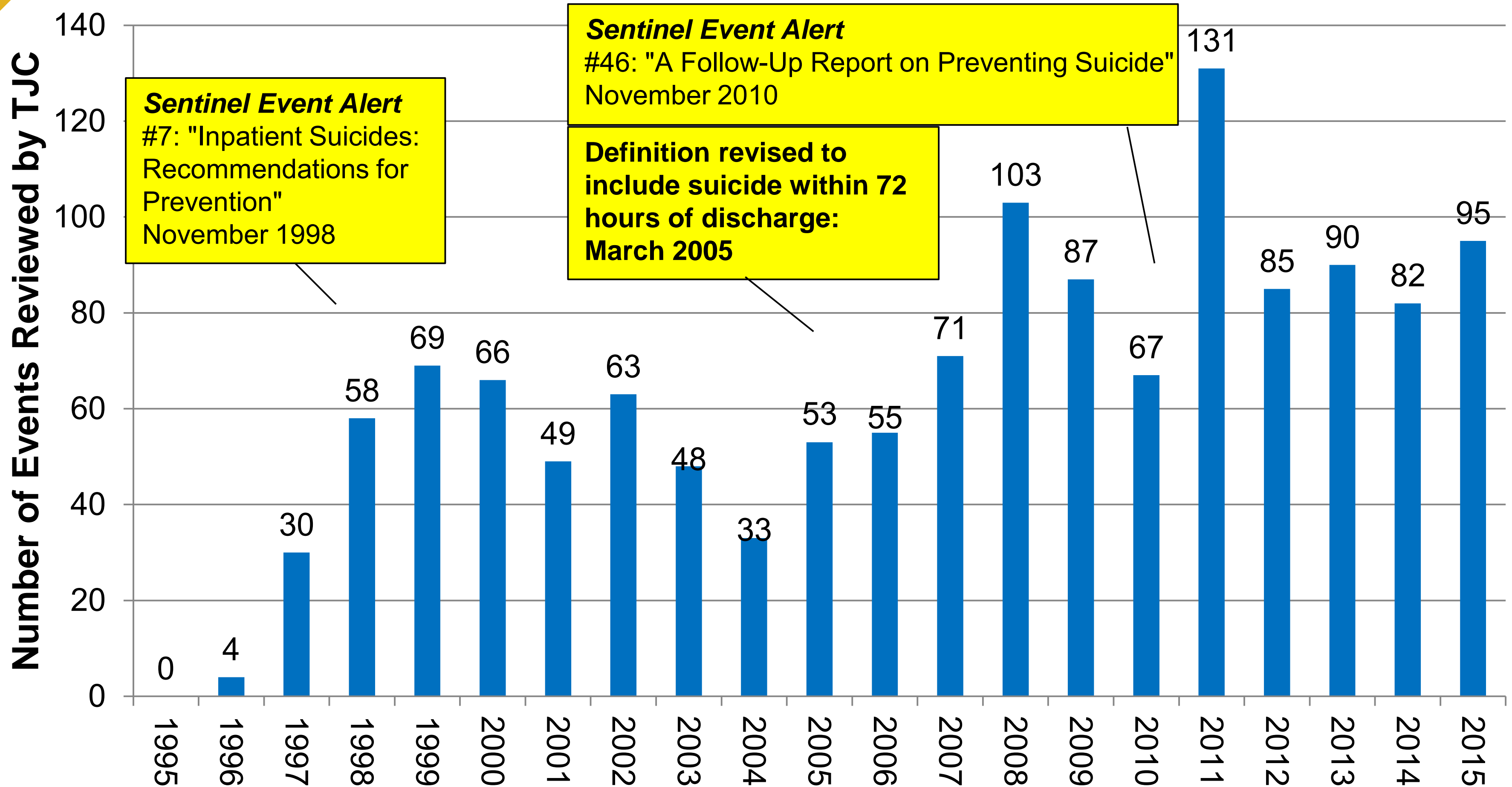
Suicide Events
Reviewed by The Joint Commission

(Of any individual receiving care, treatment or services in a staffed around-the-clock care setting or within 72 hours of discharge)



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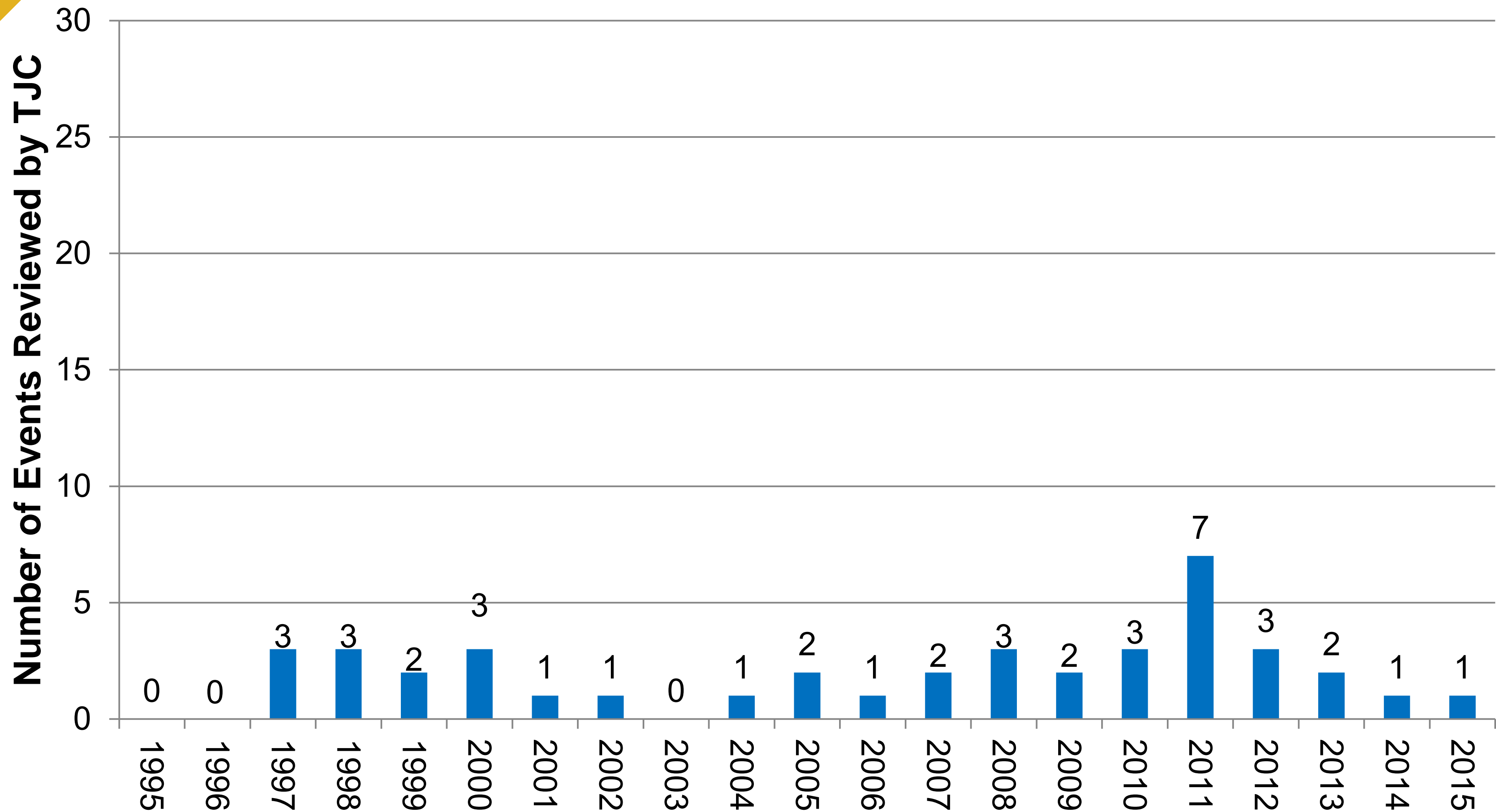
Transfer-related Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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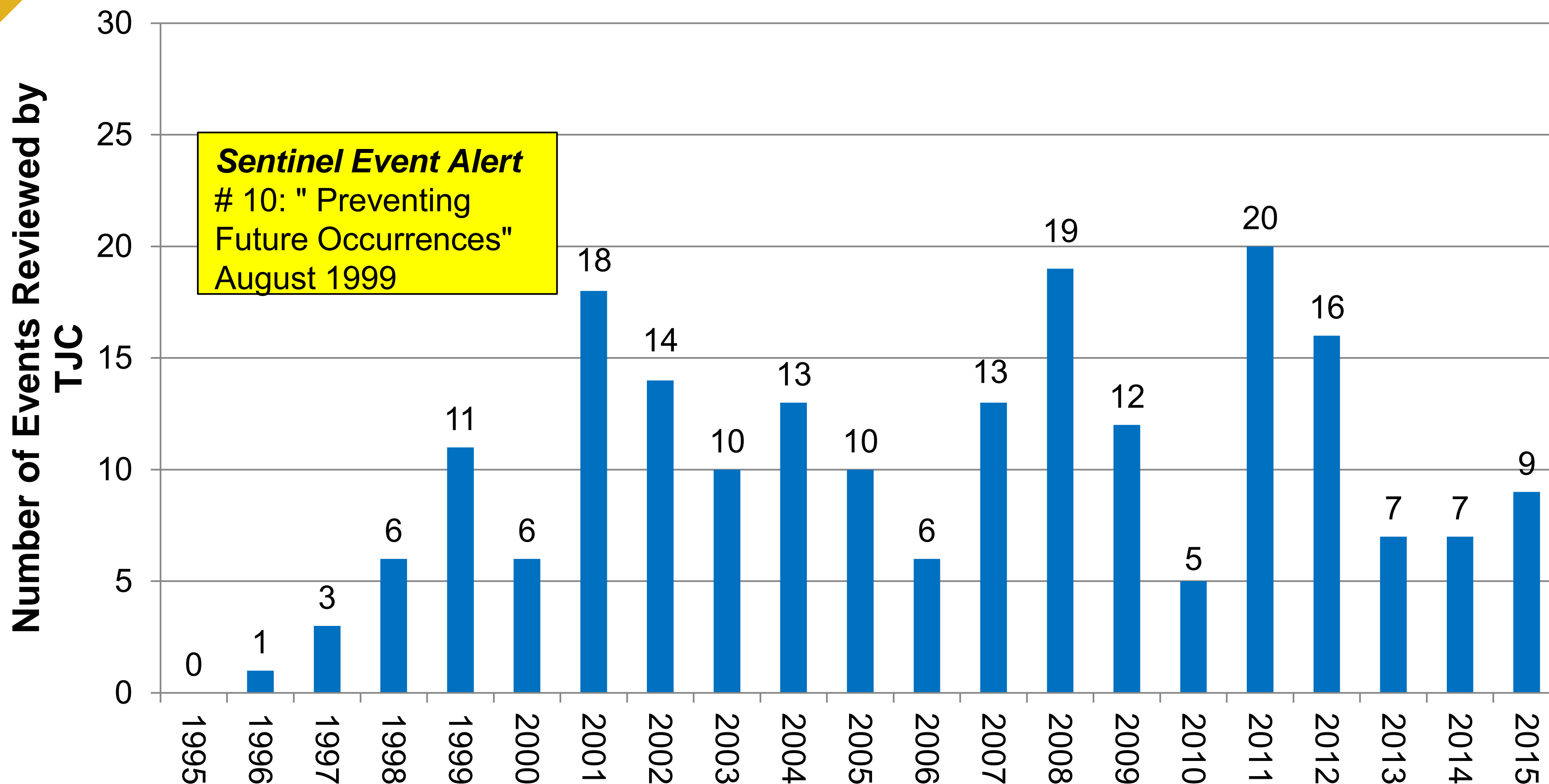
Transfusion-related Events Reviewed by The Joint Commission

(Hemolytic transfusion reaction involving administration of blood or blood products having major blood group incompatibilities)



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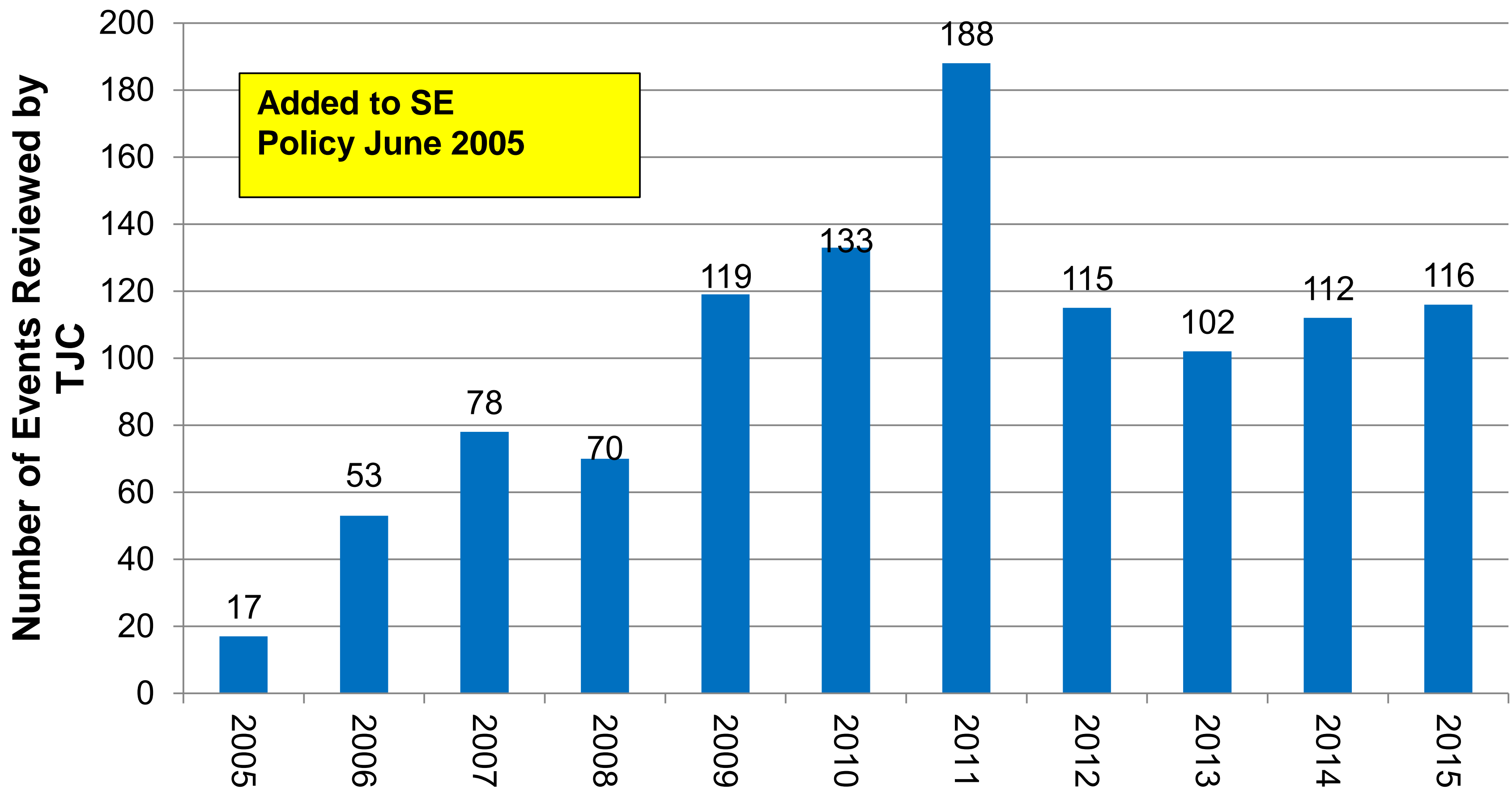
Unintended Retention of Foreign Object Events Reviewed by The Joint Commission



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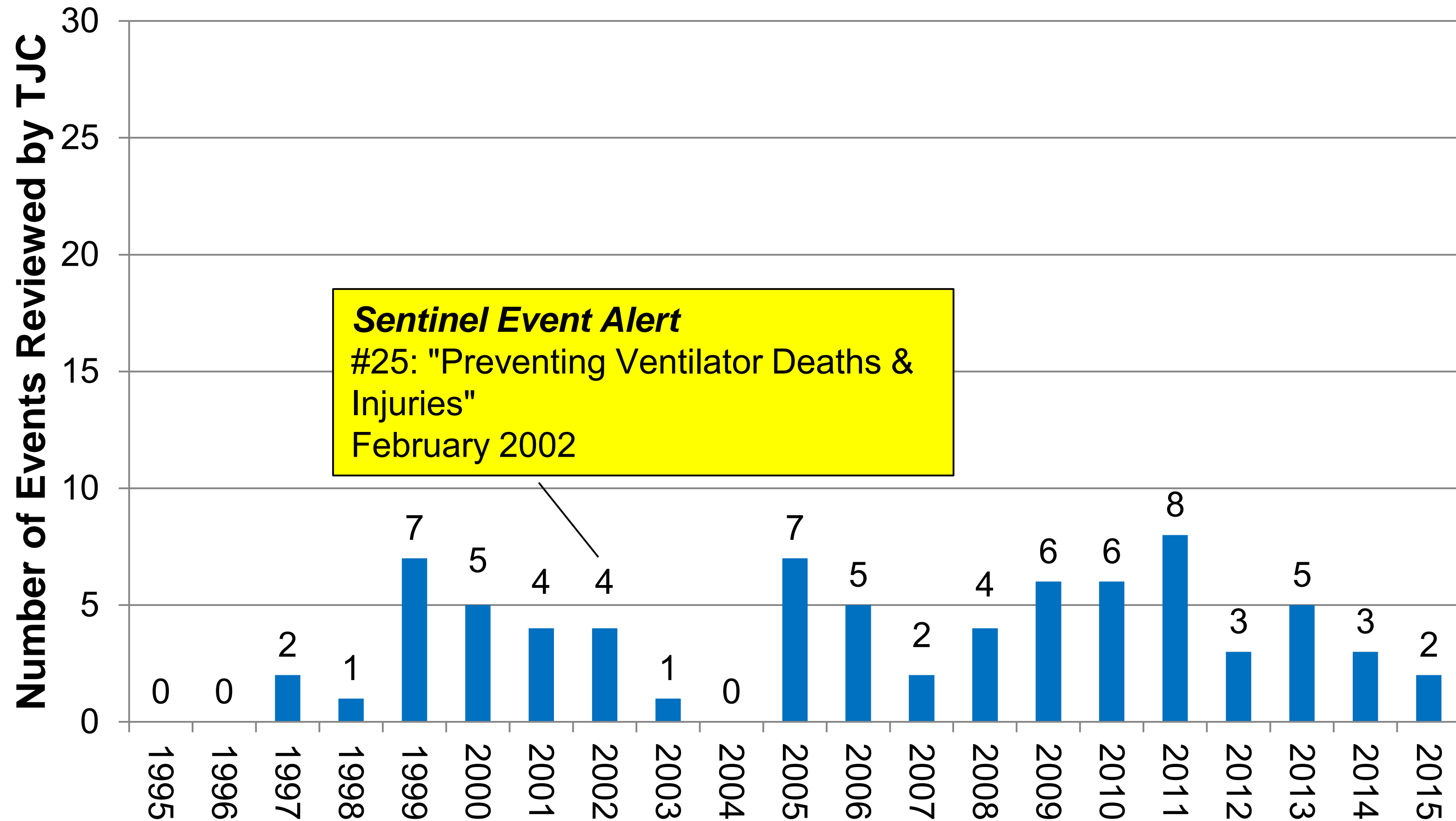
Ventilator-related Events Reviewed by The Joint Commission

(Resulting in death or permanent loss of function)



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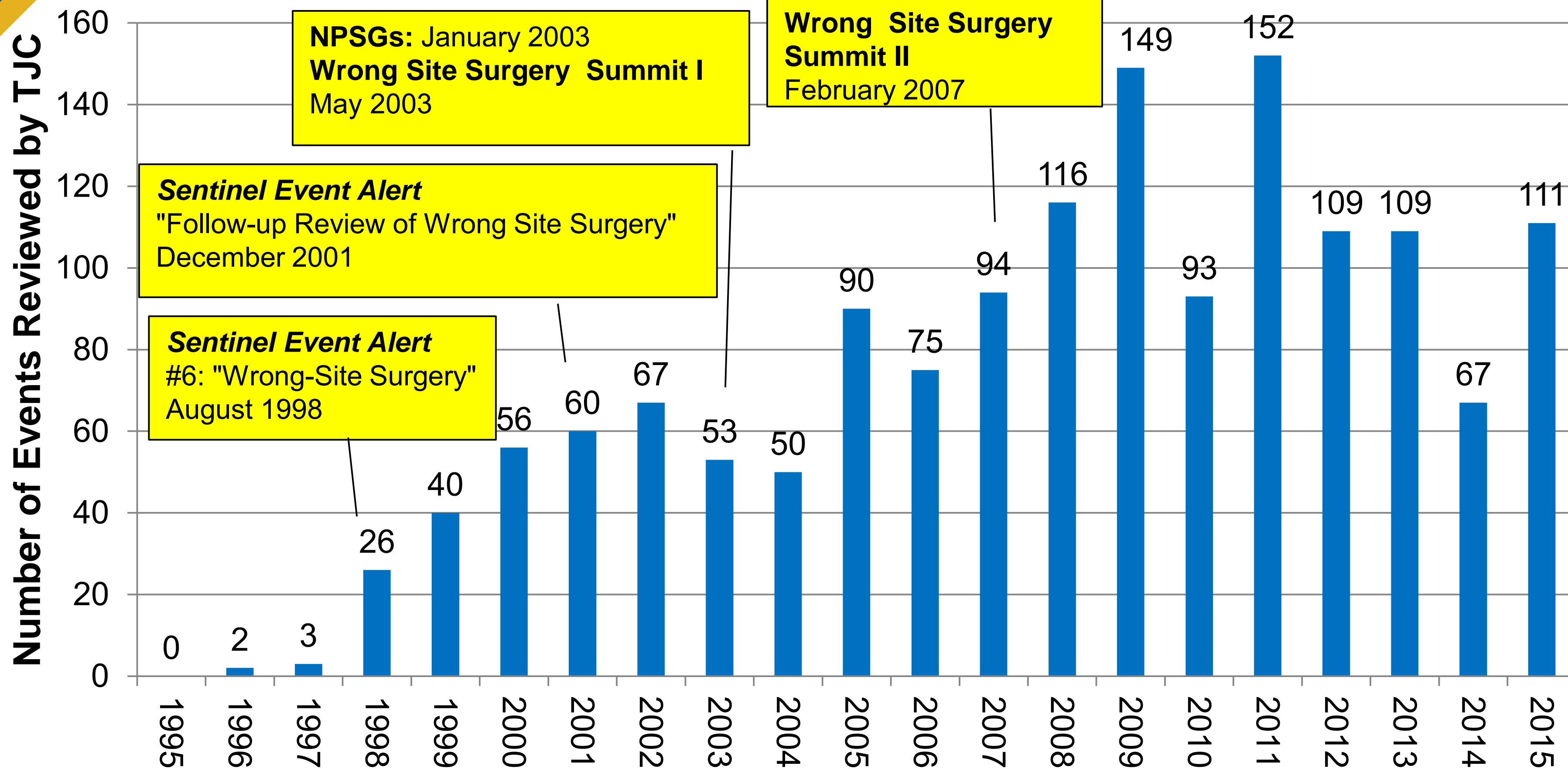
Wrong-patient, Wrong-site, Wrong-procedure Events Reviewed by The Joint Commission

(Regardless of the magnitude of the procedure)



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