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| Research Method | Pros | Cons |
| Clinicopathologic autopsy studies | * Provide objective pathologic cause of death to compare with clinical diagnosis
 | * Capture only mortality, not morbidity
* Rely on referrals to and acceptance from medical examiners
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| Retrospective chart review based on clinical criteria | * Allow for deep dive into clinical and systems-based issues of misdiagnosis
* Can produce automated electronic triggers and frameworks
 | * Rely on searchable clinical criteria (ex: vitals, laboratories) that may not be clear for complex diagnoses
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| Obstetric simulation and standardized patients | * Identify diagnoses with high error rates their root causes
* Enable real-time feedback for clinicians and broader multidisciplinary teams
 | * Do not provide real-world data on cases or diagnostic error rates
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| Pregnancy-related case reviews (incident reporting and maternal mortality reviews) | * Yield thorough and individualized case reviews
* Can situate diagnostic errors within complex systems
 | * Rely on reporting systems to identify cases for review
* State boards typically review only deaths
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| Malpractice and administrative claims database queries | * Represent large datasets from a variety of hospitals
* Allow for estimating financial impact of diagnostic harm
 | * Include few clinical case details
* Lack information on systems-level issues associated with missed diagnoses
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