

CASE STUDY: Duke Patient Receives Heart/Lung With Wrong Blood Type

<https://www.mdc.edu/medical/Bioethics/Jessica.htm>

You are the Director of PR for Duke Health and faced with the same crisis that exploded at Duke on Feb. 7, 2003. Please answer the following questions:

- 1. When would you have alerted the media that a mistake was made (assuming it was OK with the family). Explain why.**
 - a. As soon as we have gathered enough relevant information, we would alert the media so that it doesn't appear to be a cover up, as it is understood that the media ALWAYS finds out. We would like to put out the information in a timeline that keeps the beats of both local and national news sources in mind.
 - i. The entirety of the Duke Health staff have been asked to refrain from disclosing any information regarding this incident—as well as its investigation—without express approval from the PR team.
 - b. We would say that the physician is on administrative leave pending investigation in order to have time to investigate fully, but still make a statement with what you have before the media does. Additionally, this allows for no other patients to be treated by this physician until the investigation is finished.
- 2. What would you 3 key messages be to the media when you learn a mistake has been made?**
 - a. The Duke Health family is devastated by the mistake that occurred; Jessica's clinical team is doing everything in their power to reverse the impact of the first transplant and get her a new one.
 - b. The standards of care at Duke Health are not reflected by this isolated incident. However, we will be conducting a rigorous review of this case, and our own processes, and will make improvements as needed.
 - c. The physicians associated with this operation have been placed on administrative leave while the internal investigation is underway.
- 3. How would you have handled the flood of media inquiries—press conferences, interviews, posted news releases/statements or a combination? Explain why.**
 - a. One of the first important things to communicate is that Duke Health intends to release relevant information as it becomes available. We would also have our designated “faces” of Duke Health on rotating shifts in order to prevent burn-out. Having each individual prepped with difficult questions would be beneficial.
 - b. Plan: Press conference followed by press release that has answers to some of the questions that were unable to be answered in the conference if possible to answer now. Press conference clip will be linked in the release.
 - i. Keep in mind sound bites *WILL* need to circulate on major media
 - ii. Avoid interviews and putting medical professionals on the floor
- 4. How would you have incorporated social media into your communication plan if the transplant error happened today?**

- a. Do not use social media as the platform to host your statement, but rather to share your statement/press conference after it has been released.
- b. Reiterate what was said in our initial press conference through links and short infographics leading towards a link to the aforementioned press conference.
 - i. Cross-platform post the same information or graphic. (aka do not make a new post for each platform, but rather post the same announcement on each platform since this is more informative than trying to reach a particular demographic)
- c. Do not introduce new information on social media first, but rather only share what we have already announced in a more professional way.