



Experienced and Well Structured Motivated Qualified Decision Team by Patented Principles Utility Model S_T_A_R_S, 21532 CZ, 2010



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Editorial

The problem of proper collective decision making in a team that uses multidisciplinary scientific approaches should be based on the reasonable professional and well motivated staffing of the entire team, but they must go through a common initial "run-in" to make clear what decisive phenomena they must be able to recognize to evaluate and how to learn.

from the individual evaluations of the individual team members to come to the joint partial conclusions and to the final interpreting statistic representative conclusions, estimates of statistic parameters with statistic accuracy and statistic defined reliabilities - on the individual monitored phenomena, on the critical illegal situations of the patient Health care, the individual statistical units evaluated ... ie when checking the correct processing in diagnosis, checking the correct processing in choice the right individual treatment by the modern medical knowledges interdisciplinary of Encyklopedic Literature, assessing the illegal consequences of medical errors in diagnosis and in the choice of false individual treatment, evaluating the consequences of fatal unlawful medical errors by the decisions making on the Providers Health care and medical staff by the Health care for patient, the probable development of his/ her status of Health, the growth of fatal patient risks in next time and a biostatic probable enumerable effects on the likely median estimate of shortening the rest of the patient's life for a significant number of years to legal financial satisfactions including the Life assurance for worse mental and Physical Health status, Loss of Patient Lives. We should to understand to the casual history of a few individual Patient tragic growing the fatum to begin with next clever usage the Statistic method to detect similar medical mistakes EX POST, later so as for prevency to repeat medical mistakes EX ANTE.

In Orthopady CZ, you never could take Members in Decision Research Team CZ, because all Orthopedic Patients CZ there are living OR there are heavy injuring OR there are dying only unconditionally „LEGE ARTIS CZ“, by the constant false meaning of all Providers Health care CZ and medical staff CZ, by the constant

false meaning all Knowing Medical Insitutes CZ, by the constant false meaning of Criminal Departments of Police CZ, by the constant false meaning of the all Justice CZ, by the meaning of the Heads of all Penalty Offices CZ – The Patient could be a silent Victim CZ only, without the Human Rights for Life and justified truth verified Criminal evidences by the justified Court trials.

We are living live in the legal State of Czech Republic, where all unnecessarily mutilated or dying orthopedic patients of CZ have no real civil human rights to use forensic technical evidences by Court trials CZ - that they have been silent needless Victims CZ of The Mass repeated illegal fatal medical procedures in orthopadic Diagnostics or Treatments – for example contrary Technician Requirements of implanting Laws EU/CZ for guarancy the legal usage Medical Implants with „CE“ marking by the Technician Requirements of the Directive 93/42/EEC Medical Devices in common Market EU/CZ since April 1, 2004.

Since there are never seen any fatal official medical errors in Czech Orthopedics CZ, it is not real possible or desirable to detect or efficiency to prevent such massive medical orthopadic errors in medical orthopadic workflow, namely we don't solve tragic Fatums of Patient CZ in the Czech Republic, we don't caunt the yearly needless Patient Victims CZ. We are taking the false definition „LEGE ARTIS CZ“ regardless It has covered namely in Mass frequent repeated trivial technical medical fatal errors in Mass Medical processing CZ.

The needless Loss of Orthopedic Patient Life CZ has NONE of financial evaluating. Providers Health care CZ and medical staff are absolute Scot – free for ever – in the secret continual civic war the Physicians CZ contrary Patients CZ with Mass yearly repeated similar Mass Medical errors in the standard medical orthopadic processing. In this my explanatory Article, I am deciding solitaire scientist - ONE MAN CZ ONLY - because the scientic Truth is interesting for US Medicine only, never for CZ Medicine.

Namely I am explaining the next Explanatory Orthopadic Case about false Diagnostics and with false choice the Treatments

Necroses of femoral Head both my legs - as an pensioneer The State investigator of mortal occupational cases of Ministry for Labour and Social Affairs Czech Republic, so as a needless crippled too and just dying orthopaedic Patient LEGE ARTIS CZ too - after to late diagnostics Necroses of Femoral Head with the false choice 3 needless following Treatments of illegal Orthopaedic surgeries THA when there were recommended advanced more carefully and safety recommended NON-surgical treatments in time - by the World Encyclopedic Orthopaedic Literature.

I have unofficial studied the contextual sufficient details of Human Orthopady in Necrosis of Femoral Head, Traumatology functional colapsing of human joints, principles of non-surgical treatments of Necroses femoral Head, The recommended classic arthroplastic light Surgeries to repair Human joints, comparing preferences Method Magnetic resonance and limitis in RTG imaging in Diagnostics of necrosis in Hip joints, Clinic mandatory Planning of standard individual Implanting Total Hip Arthroplasty, usual patient risks of Full Anesthesia, Neurologic transplantation and right timing of neurosurgical reconstruction the Nervus Ischiadici by full plegia in Traumatology cases, the typical complications Surgeries by Patient over Age 65+ by THA, Infects dangerous in Surgery Halls, Infect risks in postoperational orthopaedic implanting, Typical dangerous Hemorrhagic preliminary Infects of Orthopaedic Patients, typical preoperational and postoperational risks and Health complication by set THA with noncemented principles the Hip Artificial joints, rational postoperational transfusions of Blood, prescriptions of Medicaments with risk of chemical mutual interactions, Posttraumatic Shocks on surgeon Halls, typical

fatal mistakes of interpretation in Geometry 3D in Orthopaedic Radiology by THA, Biomechanics and Designing functional sets THA by Producer Tests, Biostatistics analyses THA patient by returning locomotion abilities with modelling optimal possibilities by computer support of modelling, harmonised Laws EU/CZ in fields the Occupational Health and Safety, harmonised European Standards for the paralelly usage of rules the Directive Machinery, Directive 93/42/EEC Medical Devices – Research, Development, finished Testing new product sets THA, Regulation the Usage and State surveillance of usage Orthopaedic Implants THA in common Market EU by Providers Health care, functional colapsing Implants, repairing. Rehabilitation support, Physiatriic supporting praxes for postoperational locomotion abilites of Patient after THA, Statistic Growing Risks of repeated proximal fatal breaking of Femoral bones after repeated THA surgeries by happend fallen. The Duration of safety product lives in sets THA in long being safety patient usage for probable more as 20 years, Carcionomic risks by metallic and micro invasive PVC materials surfaces in frontiers the components of the Artificial joints with surface of cavities of femoral bones, plevis hip sockets, destructions of the functional Technician Quality of mechanical Anchoring of centric placements of components THA in hip bones, Catastrophic preoperational situations „Ad hoc“ on the Surgeon Halls by implanting THA. Yes, I am just simulating personally in this Article - the perfect educated, structured and working decision making Team of experts for usage orthopaedic sampling in Criminal analyses in the primary Dimense: The Statistic Unique entity-with explanation the decision making by my Method S_T_A_R_S, by The Utility model 21532 CZ 2010.



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