

# Principles of Cybernetics for Coherency Structure of Decision Making in Medical Workflow in Geriatric Medicine



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## Short Communication

The Health care is asking for the modern Geriatric Medicine the intensive clever cooperation of Patients, Nurses, Physicians, so as the Providers of social services in Patient home, efficiency of Pharmaceutical support of availableness of fitted Medicaments, multilateral scientific knowledge's in field rational safety legal decision making in Geriatric care, with more deal of computer support tomorrow, with continual independent supervising the technical, organizational and well timing Health care activities in daily Stream: including cooperation with members of engaged families, perfect continual archiving Health documentation of all geriatric Patients, etc. I am an Expert in State surveillance

in analyze of casual needless mortal illegal cases on typical Workplaces in the hospital nets, in Providers of social long being terminated rehabilitation of Geriatric Patients with often mortal fallen, with often dying after medical mistakes in usage of contraindicated prescriptions of some Medicaments, with often mortal injuring of Patients after frequential fatal technical illegal medical mistakes in processing human Orthopaedy, human Radiology contrary technical Laws for MDD today's, by lack of responsible organizational skills and ordering minimize risks of ex waiting dangerous activities in surgeries, transporting, Diagnostics, etc (Figure 1).



**Figure 1:** The literature: Patient Documentation content in Court Trial in the Regional Court Prague CZ, between the Patient Ing. Antonín Cuc and the Regional Hospital Mladá Boleslav, No 36 C 181/2009 including Court Medical Message from the Knowing Insitute The Central Army Hospital Prague No 36 C 181/2009-123 since the March 27, 2012, including The Judgement No 36 C 181/2009-221 since September 24, 2012. The Directive 93/42/EEC Medical Devices 2004, inforced for all States in European Union.

This types of extremely repeated dangerous situation for geriatric Patients should be more carefully planned by individual fitted Health standard, after more deeper scientific multilateral analyzed serious medical mistakes, well independent described Mass situation by usage of statistic and criminal method with more better next in forced presence medical often mistakes, with more private described responsibilities each of Physicians, with more better archiving and sharing the best experiences in similar hospital with progressive well praxes by „CE“ marking products MDD, with more carefully educated in geriatric care all participants: including Patients, well educated and regularly tested all staff of Physicians, including social staff, there are must be more better availableness technical individual equipment for individual Patient specific safety workflow in private safety locomotion, continual „random independent in forced super visits“ etc.

Maybe you are beginning with mentioned aspects to keep the level “Well being lives for geriatric Patients with long prediction best mental and locomotion standard of clients”. Then I could suggest you to test the random cohort of the Geriatric patients since defined statistic problems, which supervising the databases EHRs - they were dying with Age over 67 in some big Hospital in the year 2016. When you are taken the number of 1150 persons in controlling cohort set, there are your duties to také the same motivation to study of all criminal aspects of causes – so as we are known similar ways from the independent Criminal testing the reasons – why the flying aero plane was falling in Canadian Aerospace surveillance since 2016. I am able to estimate the most often frequential illegal casual criminal probable patient causes: Some of dying geriatric patients had the contraindicative Medicaments parallel, some of Radiologists are with false habits to ignore the explicite mandatory individual Planning each of individual surgeries, some Radiologists didn't understand the technical requirements of in voids of implants by the producer technical conditions to respect biomechanical safety functional constant ability of implants in human body with guarantee technical accuracy of assembling of product

by in forced technical tolerance perfect anchoring of implants, many patients are regularly dying after many repeated in forced parallel radiologic testing with in forced leukemia CLL after more summary radiation of radiologic ionization – namely after more repeated CT of Head, CT abdomen, PET testing of Kidneys, we find always in EHRs to late testing of carcinoma of prostate, there are most frequential to late radiologic testing of lungs after many years, etc. We are namely radiologic continual testing the risk of radiologic staff from radiation, but never the many times repeated radiologic testing of our geriatric patients we are ignoring regularly dangerous patient risks and continually? We are probable medical working with needless extremely patient risk of course.....The increases of entropy in “the Channel of Geriatric Health daily care”, we don't ignore the technical requirements of Medical Devices at least till tomorrow!

Bye! Just I am dying too! - After many technical repeated partial medical processing technical mistakes by false illegal processing by my private Total hip arthroplasty since November 13, 2007 on Hall - but in Czech Medicine and the forsworn Physicians false said by the casual fausse route stem in surgery hall by my Anesthesia too–there are namely usual in Czech Medicine frequential accepted technical illegal mistakes “with official idiotic reinterpretation as post operational patient happened fallen, namely in frame medical understanding LEGE ARTIS BY CZECH WAYS”. Despite the biomechanical false implanting are always explicit full excluded by the mandatory international EU Directive 93/42/EEC Medical Devices acceptable so as in in Czech Republic! I have all criminal technical evidences in the postoperational RTG images! We are only Czech Patients todays with extremal sillent evidenced biophysical true, but the Czech Physicians in Czech Judgements are mostly as Czech Gods with created „independent medical true“ continually in many Court trials, despite synergy of all availableness trivial Physical Principles of Biomechanics and Geometry for all scientists?! It is the World international Scandal and Warning of course for Patients and medical staff!



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