

LEGAL EAGLE EYE NEWSLETTER

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For the Nursing Profession

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EMTALA: E.R. Staff Did Not Follow Hospital's Screening Process, Lawsuit Goes Forward.

A young woman in labor left the emergency department at the hospital and went to another hospital after it appeared to her that the emergency department staff were unwilling to treat her.

At the second hospital, after a considerable wait in the emergency department, she gave birth to a stillborn child.

The US District Court for the District of Nevada saw grounds for a lawsuit for violation of the patient's rights under the US Emergency Medical Treatment and Active Labor Act (EMTALA).

Full Admission Paperwork Required Before Being Seen

The E.R. front desk at the first hospital apparently told the patient she had to complete all of her admitting paperwork before she could be seen by anyone, even the triage nurse.

That went contrary to the hospital's standard Quick Patient Identification process and it gave this patient the subjective impression that the hospital was not willing to treat her.

Hospital's Standard Procedure

Quick Patient Identification Process

The hospital's standard procedure was for the emergency room front desk to notify the triage nurse immediately of any new patient arriving in the emergency department.



A medical screening examination is adequate for purposes of the EMTALA if it is the same as the care that is routinely offered to other patients presenting with the same or similar symptoms.

If a particular patient's case is handled differently than other patients' cases are handled and the patient suffers, the patient can sue.

UNITED STATES DISTRICT COURT
NEVADA

February 4, 2011

All emergency department patients were required to be evaluated by the triage nurse and examined by the emergency department physician before being formally admitted to the emergency department.

Just the most basic information, referred to as the Quick Patient Identification, was allowed to be obtained before the patient was seen and treated, and only if time permitted.

That information included only the patient's name, address, phone number, social security number, date of birth and chief complaint.

Basic information could be obtained from a person who accompanied the patient if the patient needed to be taken in directly for treatment.

Only after the patient had been cleared by the physician was the admitting department to be informed of the patient's presence so that the formal admission process could be started.

In this case the hospital violated this patient's rights under the EMTALA by handling her case quite differently than the way other patients' cases were routinely handled, that is, assuming the hospital followed its standard operating procedures with its other emergency room patients. ***Abney v. Univ. Med. Ctr.***, 2011 WL 468349 (D. Nev., February 4, 2011).

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