# Bowel Habits: Court Finds Nursing Care Plan, Assessment, Charting Adequate, No Link To Delayed Diagnosis Of Patient's Colon Cancer.

The resident was admitted to the nursing home at age seventy-nine with medical diagnoses of Alzheimer's disease, depression, cerebral atherosclerosis, senile dementia with delirium and chronic mental syndrome.

Four years later she went to the hospital for abdominal pain. A colonoscopy in the hospital revealed a Stage II colon cancer in the cecal region. She had colon resection surgery and then went back and forth between the hospital and the nursing home. She died fourteen months after the cancer was diagnosed.

The family sued the nursing home for wrongful death, alleging nursing negligence in the lawsuit. The jury believed the nursing home had provided sub-standard nursing care in violation of the state's Nursing Home Residents' Bill of Rights and awarded a verdict of \$65,000 compensatory damages and \$25,000 attorney fees.

The Court of Appeal of Louisiana threw out the jury's verdict.

First, the nursing care the resident received was completely adequate under the circumstances.

Second, assuming the nurses actually did not adequately communicate to the physician that the resident was suffering from constipation, there would be no basis to suspect colon cancer based only on the fact she was constipated without other telltale signs like rectal bleeding, changes in eating habits, changes in behavior, weight loss, abdominal pain, malaise, etc.

## Constipation A Common Problem For Elderly Nursing Home Patients

Due to various age-related factors, constipation is an almost universal problem among elderly nursing home residents. As the court pointed out, in itself constipation is not an illness and it is not realistic for nurses or physicians to take it as a sign of illness unless it is accompanied by other factors.

The legal standard of care for nurses in a nursing home must take into consideration the fact that nursing home residents need to live within the least restrictive environment possible in order to retain their individuality and some personal freedom and preserve their dignity and personal integrity.

For a resident who is semi -independent, even one with Alzheimer's, the goal of care planning is for the resident to take care of as many activities of daily living as possible, including using the restroom by herself as best she can.

For Alzheimer's residents and those with problems with regularity, aides are instructed to remind them and offer assistance every two hours to use the restroom. Aides are permitted only to document bowel movements they personally observe. It is not unusual for bowel movements not to be charted.

Without other telltale signs that staff tend to notice, constipation is not a red flag that a resident may have colon cancer.

COURT OF APPEAL OF LOUISIANA August 20, 2003 Nurses routinely take measures to combat constipation without a physician's order, like encouraging mobility and fluid and fiber intake. Nurses routinely administer stool softeners and laxatives as needed with an order from a physician.

Nursing care plans routinely call for the resident's bowel habits to be monitored and charted. At the same time good nursing practice and legal regulations require residents to be given the utmost practicable privacy and respect for personal independence. That is, they are to go to the bathroom alone whenever possible.

## **Medical Testing Not Indicated**

Although routine CBC testing would reveal anemia and anemia is generally associated with colon and other cancers, it is not customary for nurses to seek routine orders for blood draws just to monitor their patients, or for physicians to order blood draws unless there are more specific signs that blood tests are indicated.

According to the court, it is also not within the scope of nursing practice for nurses routinely to test patients' stools for occult blood without a physician's order, even though that might indicate the beginning stages of colon cancer.

#### **Nursing Documentation**

The court said the primary method nurses communicate with physicians is by careful flow charting and nursing progress notes. The court found the charting of this resident's bowel habits was sporadic at best. However, without a physician's order it is simply not within the scope of nursing practice routinely to follow patients into the bathroom to chart bowel movements or to chart bowel movements that have not been directly observed by the staff charting them.

Even if the nursing staff were carefully documenting her constipation, constipation does not require nursing follow-up for possible colon cancer without other signs. In this case those signs were not first seen by the physicians until <u>after</u> the colonoscopy. <u>Hinson v. The Glen Oak Retirement System</u>, <u>So. 2d</u> <u>\_</u>, 2003 WL 21976413 (La. App., August 20, 2003).

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