

# LEGAL EAGLE EYE NEWSLETTER

February 1997

*For the Nursing Profession*

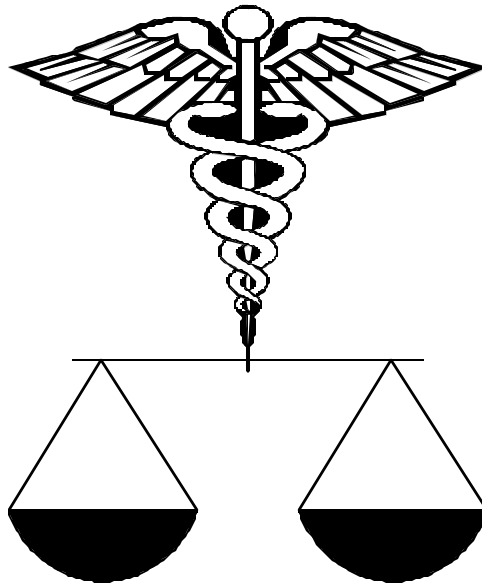
Volume 5 Number 2

## Nursing Malpractice: Call Button Out Of Reach, Patient Injured Falling Out Of Bed.

**T**here were double-barreled allegations of nursing malpractice in a case recently decided by the Superior Court of New Jersey.

Given the patient's condition, his nurse should not have left him alone for thirty minutes, the court ruled. On top of that, his call button was not within his reach. When he started choking on mucus, he tried to reach his call button, but fell out of bed, fractured his hip and sustained head trauma. He was found on the floor lying in his own urine and feces. The physician who found him suctioned copious amounts of mucous fluid, according to the court record.

The patient had just come to a med/surg unit with a trache tube after fifteen days in the ICU for trauma from a motor vehicle accident. His temperature rose to 101.4° and his BP shot up to 210/100. The physician ordered blood gases, nitro paste and constant monitoring. Because the physician had ordered it, and a nurse had acknowledged the orders in the patient's chart, the patient should have been closely monitored by a nurse, the court said. The nurse saw to the blood gases, gave the patient his medications, suctioned his trache tube, but then left him alone in his private room for about thirty minutes.



***This patient on a med/surg unit had a trache tube and was choking on mucus. He could not speak, so he reached for his call button. The call button was not within his reach. He fell out of bed, broke his hip and sustained head trauma.***

***The jury awarded him \$1.5 million and \$160,000 to his wife, for nursing malpractice.***

SUPERIOR COURT OF NEW JERSEY, 1996.

Each side called a nurse to testify in court as an expert witnesses regarding the nursing standard of care for this patient. The consensus of the experts, the court ruled, was that this patient, fresh out of the ICU with serious trauma, without the ability to communicate verbally, with recently-elevated vital signs indicating that his medical condition was not stable, was a high-risk patient.

This patient did not require the continuous physical presence of a nurse in his room, the court believed, but he had to be very closely monitored by his nurse until his medical condition stabilized. It was negligent for the nurse to leave him alone for thirty minutes.

It also fell below the standard of care and was negligent for the nurse not to have placed the patient's call bell within his easy reach, the court ruled. The nurse's professional negligence or malpractice in this regard caused him to fall out of bed reaching for his call bell, and to sustain additional serious injuries which sent him back to the ICU. This is not to say that this patient's nurse should have left it to the patient to summon help when he needed it.

The verdict against the nurse and the hospital for more than \$1.6 million was upheld. **Adams vs. Cooper Hospital, 684 A. 2d 506 (N.J. Super., 1996).**

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