

Illegal Search: Nurses And Physicians Were Assisting The Government.

A US citizen was detained by US customs officers at the airport in Philadelphia after she arrived on a commercial flight from Latin America.

She was suspected of trying to transport drugs into the US inside her body.

She refused to agree to a medical examination for ingested contraband.

Without being allowed to speak with a lawyer as she requested she was handcuffed, shackled and taken to a hospital near the airport.

The officers who accompanied her told hospital personnel she was suspected of "body packing."

The patient refused to allow hospital personnel to examine or treat her. No search warrant was obtained.

Although they knew the patient had refused to be examined or treated and that no search warrant had been obtained, several nurses participated in a body cavity search, obtained urine samples, applied four-point restraints, sedated her for body scans and discussed her medical status with the customs officers.

Although the nurses and physicians at the hospital are private individuals whose employment is not affiliated with the US government, they may have acted in concert with US customs officials to deprive their patient of her Fourth Amendment rights.

UNITED STATES DISTRICT COURT
PENNSYLVANIA
April 18, 2016

The US District Court for the Eastern District of Pennsylvania saw grounds for a lawsuit against the hospital for violation of the patient's Constitutional rights. **Ferguson v. US**, 2016 WL 1555811 (E.D. Penna., April 18, 2016).

Cardiac Catheterization: Court Says Time Is Of The Essence.

The hospital's own consent form for thrombolytic therapy for heart patients expressly advises that, "Time is of the essence," in initiating treatment to prevent or mitigate damage to heart muscle tissue by promptly resolving a coronary blockage.

The patient does not need additional expert testimony to prove that particular point.

When the thrombolytic agent failed to resolve this patient's coronary blockage, prompt catheterization was indicated.

However, critical and inexcusable delay occurred while an attempt was made to bring in staff on a Sunday evening to open the hospital's own cath lab.

The hospital's cath lab tech could not be reached. The nursing supervisor responsible for the cath lab got on the phone with a hospital administrator to debate whether to try to rehire a different cath tech on the spot who had recently quit, all while the patient's coronary blockage remained unresolved.

The patient needed to be transferred on an emergency basis to the nearest facility with an open catheterization lab.

COURT OF APPEAL OF LOUISIANA
April 6, 2016

The patient was taken to the hospital at 4:50 p.m. on a Sunday afternoon when he started having chest pains while working in his yard.

The hospital has a cardiac catheterization lab, but it was closed on Sunday.

The emergency department physician did an EKG which showed the patient was having an acute MI with 100% blockage of the right coronary artery.

The physician phoned an interventional cardiologist. The cardiologist recommended a thrombolytic medication be given immediately and advised the emergency room physician to expect to see within twenty-five minutes whether or not the medication had dissolved the blockage.

The thrombolytic medication did not work. Then for almost two hours a nursing supervisor, the physician, the cardiologist and an administrator tried to open the hospital's own cath lab and get it staffed to perform a procedure on this patient.

The big problem was that the hospital's cath lab technician could not be reached, so the nursing supervisor went back and forth on the phone with an administrator over the issue whether to try to rehire another tech who had recently quit.

An ambulance was finally called to take the patient to another hospital but it took an hour to arrive to pick him up. He did not have his procedure until 10:30 p.m.

Court Upholds Verdict for the Patient

The Court of Appeal of Louisiana agreed with the jury that the hospital and the independent physicians involved in this patient's care were negligent and liable for payment of compensation to the patient.

As to the hospital's nursing supervisor, the Court faulted the inexcusable delay caused by the decision to try to bring in staff to open the hospital's own cath lab rather than immediately arranging for prompt emergency transfer of the patient to the nearest facility where catheterization could be performed right away.

The Court also questioned giving the thrombolytic medication without first getting a go-ahead from the interventional cardiologist who would be the one actually doing the cath procedure if the medication failed. **Benson v. Rapides**, ___ So. 3d ___, 2016 WL 1358485 (La. App., April 6, 2016).