

Pressure Sores: Court Case Relates Patient's Death To Sub- Standard Skin

The elderly patient was admitted to long-term care with diagnoses of Alzheimer's, left carotid artery stenosis, non-insulin-dependent diabetes, renal insufficiency, arthritis and osteoarthritis.

New pressure sores started and over the next year progressed to Stage III decubitus ulcers followed by osteomyelitis and a below-the-knee amputation. The patient never fully recovered after the amputation, came down with pneumonia and died.

Nurses in a nursing home must:

Inspect and assess the skin, head to toe, every day, with particular attention to pressure points such as heels, toes, hip and sacrum;

Document new skin changes on the very day they are noted;

Perform a regular and detailed documented skin assessment once a week; and

Treat pressure sores in the early stages as soon as they are discovered.

COURT OF APPEALS OF TEXAS
May 22, 2008

The Court of Appeals of Texas accepted the deceased's family's expert physician's opinions on the standard of care for nurses in long term care. The court went on to concur with the physician's opinion that an untreated or improperly treated pressure sore can be the starting point of a progressive downward spiral leading to the patient's ultimate demise. Arboretum Nursing and Rehab v. Isaacks, 2008 WL 2130446 (Tex. App., May 22, 2008).

Pressure Sores: Court Case Points Out Importance Of Hydration And Nutrition.

According to the Court of Appeals of Texas, when a patient is admitted to long-term care the patient must get a thorough survey of skin integrity and assessment of potential for skin breakdown.

The skin-care care plan should:

Cover the nursing and medical interventions needed to treat existing lesions;

Provide for ongoing reassessment of the skin and of medical issues that could predispose the resident to problems with skin integrity; and

Set goals to promote adequate hydration and good nutrition. San Jacinto Methodist Hosp. v. Bennett, __ S.W. 3d __, 2008 WL 2262082 (Tex. App., May 29, 2008).

Evidence of longstanding substandard care emerged when the patient had to be transferred to the hospital for skin grafts.

The first lab values in the hospital were consistent with prolonged dehydration and malnutrition. Her BUN/creatinine ratio was well above and her albumin and pre-albumin levels were well below the normal ranges.

A nursing home must consistently promote adequate hydration and good nutrition, assess and treat the skin of an immobile elderly resident and pad and position critical areas of the body against further breakdown of skin integrity.

COURT OF APPEALS OF TEXAS
May 29, 2008

Code: Crash Cart Not Stocked, Other Equipment Non- Functional, Patient Dies, Family Sues.

A wrongful-death lawsuit filed in the Superior Court, Essex County, New Jersey, recently resulted in a \$1,300,000 settlement for the family of a sixty-eight year-old patient who died in the hospital four hours after thyroid cancer surgery, one hour after being transferred from intensive care to a med/surg unit.

Defendants named in the lawsuit, besides the hospital, included three staff nurses from the med/surg unit, the hospital's director of nursing, the pharmacy director and the head of central supply.

Equipment, Supplies Missing Equipment Failed

The patient went into respiratory arrest with a blood clot blocking her upper airway. A code was called.

The first thing that went wrong was that the batteries in the laryngoscope on the crash cart were dead and no spare batteries for it had been stocked on the cart.

Next the wall-mounted suction in the patient's room would not work.

The lawsuit also alleged the med/surg nurses hesitated for thirty to forty-five minutes from the time they first saw signs of respiratory difficulty until a code had to be called because the patient had gone into full-blown respiratory arrest.

The Defendants Pointed Their Fingers At Each Other

The hospital was reportedly prepared to defend itself by pointing out it had a policy for extra batteries to be packed with laryngoscopes.

The med/surg staff nurses reportedly were going to argue it was not a nursing responsibility to stock or inspect the crash cart, shifting the blame to the hospital's central supply department.

Nevertheless all the parties joined as defendants joined in paying a substantial settlement. Fregosi v. Clara Maas Medical Ctr., 2008 WL 2189884 (Sup. Ct. Essex Co., New Jersey, May 12, 2008).