

## Mid-Forceps Delivery: Court Refuses To Blame Nurses Who Did Not Oppose Doctor's Decision.

The ob/gyn physician went ahead with a mid-forceps delivery to expedite the birth rather than allowing labor to continue in favor of a vaginal delivery.

At the time the baby was at a plus-two station, i.e., the head was not yet visible during contractions.

The ob/gyn used the forceps to rotate the baby 180° and then to extract the baby. The baby suffered a paralyzing cervical spine injury.

The Court of Appeals of North Carolina ruled that the hospital was not liable in the baby's malpractice lawsuit for the nurses' not disobeying the physician and not taking steps to have the physician's decision to go ahead with mid-forceps delivery overruled through the nursing chain of command.

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***A nurse is not liable in a civil lawsuit for failing to disobey a doctor's order unless the doctor's order was obviously negligent.***

***The duty to disobey the doctor, and to activate the nursing chain of command to have the doctor's decision overruled, does not extend to situations where there is a difference of medical opinion between the nurse and the doctor.***

COURT OF APPEALS OF  
NORTH CAROLINA  
July 19, 2005

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According to the court, the decision to proceed with a mid-forceps delivery is a complex medical judgment based on balancing the risks of using the forceps versus the risk of compromising the fetus's oxygenation status by delaying delivery.

It is only when a physician's decision is obviously wrong and will obviously lead to direct and immediate harm to the patient that the nurse faces liability herself or himself if she or he does not challenge the doctor's decision and then activate the nursing chain of command to have the decision overruled by higher medical authority within the hospital. This was not such a situation, the court said. 20/20 hindsight is not the legal standard. Daniels v. Durham Co. Hosp., 615 S.E. 2d 60 (N.C. App., July 19, 2005).