

LEGAL EAGLE EYE NEWSLETTER

June 2007

For the Nursing Profession

Volume 15 Number 6

Gentamicin Toxicity: Patient Ruled Entitled To Large Verdict For Medication Mix Up.

The seventy-five year-old patient developed a methicillin-resistant Staph aureus infection in the hospital following knee replacement surgery.

Her physician got a creatinine clearance test which showed her kidneys were functioning normally. After weighing the potential for harm from the infection versus the potential side effects from the medication, the physician decided to include gentamicin in her antibiotic treatment regimen.

Given its significant potential for toxicity to the kidneys, the course of the gentamicin was to be very short and was to be discontinued prior to her transfer to a nursing home. Her discharge antibiotics would be IV vancomycin and oral rifampin.

Discharge Orders Mixed Up

There was no question about the negligence of the hospital nurse who did the paperwork for the transfer to the nursing home. The hospital discharge nurse misread the chart and failed to see that the gentamicin had been discontinued.

The hospital discharge nurse did note that the nursing home physician was to contact a named infectious disease specialist to visit the patient and take over management of her antibiotic treatment.



The jury awarded the patient \$3.2 million.

The patient is entitled to a new trial to assess the true amount to which she is entitled in all fairness.

The judge at the first trial erroneously excluded a physician from testifying that her future medical expenses could exceed \$3.2 million, the sum awarded by the jury.

APPELLATE COURT OF ILLINOIS

May 4, 2007

Nurses Did Not Question Orders

At the nursing home the nurses accepted at face value the order to continue the gentamicin on an indefinite basis. The nursing home attending physician also did not think to question what appeared to be the hospital physician's order.

The Appellate Court of Illinois laid blame on the hospital discharge nurse, the nursing home nursing staff and the nursing home physician.

The nursing home staff nurses, in the court's opinion, should not have accepted without question and without investigation an order to continue a medication with high potential for life-threatening side effects.

In the nursing home the patient began having trouble urinating. The attending physician ordered a creatinine test and that came back abnormal. The gentamicin was continued for several more days even though the patient was having trouble urinating and her creatinine tests were coming back abnormal. They believed the gentamicin was necessary for the MRSA infection.

The nursing home did not stop the gentamicin until the patient had gone into irreversible renal failure.

The court ruled the patient's need for life-long dialysis for renal failure was a direct result of her caregivers' negligence.

Kunz v. Little Co. of Mary Hosp., ___ N.E. 2d ___, 2007 WL 1309558 (Ill. App., May 4, 2007).

Inside this month's issue ...

June 2007

New Subscriptions

See Page 3

Homicidal Threats/Psychiatric Nurse's Duty To Warn Victim
Gentamicin/Nephrotoxic Reaction - Combative Patient/Restraint
Corticosteroids/GI Bleeding/Nursing Documentation
Patient Transport/Wheelchair - Fall From Bed/Bed Rails
Breech Birth/Nurse's Prenatal Care - Post-Angiogram Care/Stroke
Living Will/Nursing Home Ignored Patient's Wishes
IV Sites Not Changed/Infection - Family And Medical Leave Act
Patient's Falls/Care Plan/Ambulation - Sexual Harassment