

Cardiac Cath: No Post-Op Nursing Negligence.

After her third cardiac catheterization procedure the patient developed an occlusion of the femoral artery at or near the site of the puncture wound.

She required a bypass graft procedure to restore blood flow to her lower extremity. After that procedure she sued the hospital for medical and nursing negligence.

The Court of Appeals of Kentucky agreed it is a correct statement of the nursing standard of care following cardiac catheterization for the nurses closely to monitor and chart the presence or absence of pulses in the lower extremity on the operative side. However, there was no evidence in this case that the nurses did not do that. The case was dismissed. Slone v. Central Baptist Hosp., 2005 WL 268031 (Ky. App., February 4, 2005).

Distending Fluid: Fluid Uptake Is Physician's Responsibility.

In a professional disciplinary proceeding filed against a physician by the state Department of Health, the New York Supreme Court, Appellate Division, ruled that it is the physician's responsibility, and not the circulating nurse's responsibility, to monitor absorption of distending fluid by the patient and to discontinue the procedure in the interest of patient safety when excess fluid has been absorbed.

The court said specifically that more than one liter difference between glycine distending fluid going in and coming out during a gynecological hysteroscopic procedure is over the limit. The physician must be vigilant and act accordingly. Braick v. Dept. of Health, 786 N.Y.S.2d 599 (N.Y. App., December 9, 2004).

High Fall Risk: Patient Left Alone On Commode, Court Finds Nursing Negligence.

The nurse on duty at 3:15 a.m. who answered the resident's call light and assisted her to the bathroom testified she did not know the resident had been assessed as a high fall risk.

The nurse testified if she had known the resident was a high fall risk it would have been wrong to leave her unattended on the commode, and she would not have done so.

The resident was classified as a high fall risk on admission to the facility, due to multiple medical problems including congestive heart failure and renal failure.

Despite her high-risk classification and a fall-prevention care plan, she did fall three days into her stay at the facility.

The nurse should have known that special precautions were necessary, that is, remaining with the patient to assist her back to her bed.

The nurse should have known it was not appropriate to leave the patient with instructions to ring her call bell when she was ready.

DISTRICT COURT OF APPEAL
OF FLORIDA
January 19, 2005

A nurse left a nursing home resident on the commode in her bathroom with instructions to press her call light for assistance when she was ready to return to bed.

Instead of ringing for assistance the resident tried to go it alone, fell, sustained a closed-head injury and died.

The jury gave \$220,000 verdicts to each of the resident's nine adult children and found the patient herself 5% comparatively negligent and to that small extent responsible for her own injuries.

However, the judge then threw out the verdicts because adult children under Florida law are not entitled to compensation for the deceased's pain and suffering. Although the judge agreed there was nursing negligence, the judge limited the verdict to \$9,000 for post-injury medical, funeral and burial expenses.

The judge also ruled there was no reckless, outrageous or malicious conduct by the nurse to justify punitive damages, which would have benefited the adult children. The Court of Appeal of Florida agreed in all respects.

High Fall Risk

Precautions / Care Plan

This resident was a high fall risk, due to the medical problems with which she was admitted and due to the fact she fell in the nursing home three days into her stay.

The facility's standard care plan for a high-fall-risk patient called for caregivers to stand by while the patient was on the commode, to offer assistance as needed while on the commode and to be present to assist the patient immediately when the patient was ready to return to bed.

A caregiver is required to know and follow the care plan. Even without a care plan a caregiver should know a patient like this is a high fall risk and should not to leave the patient alone and vulnerable on the bathroom commode, the court said. Estate of Williams v. Tandem Health Care of Florida, Inc., ___ So. 2d ___, 2005 WL 94505 (Fla. App., January 19, 2005).