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Preeclampsia: Nurse's Actions Praised, Physician Faulted For Patient's Stroke.

n a case recently handed down by the Superior Court of New Jersey, Appellate Division, the hospital had its own pre-printed form checklist developed by the department of obstetric medicine, which gave the telltale signs of severe preeclampsia as blood pressure greater than 160/110 or proteinuria greater than 2+ after twenty-six weeks gestation.

A mother came to the hospital in advanced labor. The labor and delivery nurse first had the patient weighed, for comparison with her last pre-natal-visit weight. Then she noted a blood pressure of 170/120. The nurse turned the patient on her left side, and got a blood pressure of 186/118. The nurse noted the patient's reflexes were plus two and that she had large amounts of edema in both legs.

The resident physician on duty himself made note of massive pitting lower extremity edema on both sides with abnormal deep tendon reflexes.

When the patient's obstetrician arrived, the nurse reported her findings. The nurse expressly asked the physician if he wanted to check the mother's urine for protein and suggested he order magnesium sulfate to try to reduce the mother's blood pressure.



The nurse weighed the patient, got blood pressures with her on her right and left sides and noted large accumulations of edema in her legs and that her reflexes were plus two.

The nurse reported her findings to the physician and suggested he check the urine for protein and order magnesium sulfate.

SUPERIOR COURT OF NEW JERSEY, APPELLATE DIVISION, 1997. The court made note that the physician refused to do either of these things. The baby was delivered a short time later. Four hours after delivery, another nurse found the patient with her right arm dangling uncontrollably off the bed. She had had a hypertension-related cerebrovascular accident which seriously and permanently affected the entire right side of her body.

The labor and delivery nurse and the resident physician were added as defendants in the lawsuit, but later dismissed from the case. The obstetrician was left to face a \$1,422,155.69 civil negligence verdict alone.

According to the court, the labor and delivery nurse's assessment was right on the mark. Preeclampsia is a fairly common and dangerous condition in late pregnancy, characterized by elevated blood pressure, excessive weight gain and fluid accumulation in the lower extremities and proteinuria.

This patient had gained a lot of weight after her last office visit. The court said this should have worried the obstetrician. Beyond weighing the patient on admission, the court did not say it was required of the labor and delivery nurse to review the patient's pre-natal office records. <u>Nguyen vs. Tama</u>, 688 A. 2d 1103 (N.J. Super., 1997).

Inside this month's issue ...

May 1997

Labor And Delivery - Sexual Harassment - Workers' Compensation Nursing Home Admission Policies - Alternative Practitioners Medicare/Medicaid Manuals - Q A/Suspicious Patterns Patient Struck By Orthopedic Bed Hardware - Patient Abuse/Enema Disability Discrimination/Back Injury - Visitor Falls From Chair Mental Health/Discharge/Readmission - Patient's Death Threats Emergency Room Nursing Assessment - Employment Bias Claims Narcotics Diversion And Abuse/Definition Of A Current Drug User.

New Subscriptions: Page 4