

Neonatal Intensive Care: Bacteria Infiltrate IV Line Leading To Sepsis, Thromboembolic Stroke.

The infant was born at thirty-three weeks gestation, the third of triplets. She weighed 1,715 gm. Her Apgars were 7 at one minute and 9 at five minutes.

In the neonatal intensive care unit an IV was started in her right arm. Some time between eighteen hours and two days later skin breakdown led to an open wound at the IV site.

The lesion allowed opportunistic bacteria, Enterobacter and Enterococcus faecalis, to enter the blood stream, which led to systemic sepsis and thromboembolic stroke.

The stroke left the infant with left hemiplegic cerebral palsy.

The family's lawsuit in the Superior Court, Riverside County, California faulted the nursing care in the neonatal intensive care unit.

The check-boxes on the nursing flow sheets in the NICU were consistently checked for regular inspections of the newborn's IV site by her nurses.

However, the NICU nurses' testimony in their pretrial depositions revealed a wide range of variability in their understanding of just what was required of them when they inspected a newborn's peripheral IV site.

SUPERIOR COURT
RIVERSIDE COUNTY, CALIFORNIA
November 18, 2009

The chart showed all the check-boxes had been checked on the intensive-care nursing flow sheets for regular IV site inspections.

However, when the infant's NICU nurses were later called in one by one to testify in their depositions for the legal case it came to light that there was little common ground among them as to their understanding of what exactly was required of them by hospital policies and procedures when inspecting a newborn infant's peripheral IV.

The mother was reportedly prepared to testify she was not aware of any such inspections ever being done.

The hospital agreed to pay a pre-trial settlement of \$1,000,000 on the recommendation of a court-appointed mediator. ***Jones v. Tenet Healthcare, 2009 WL 5818427 (Sup. Ct. Riverside Co., California, November 18, 2009).***