

Neurosurgery: Patient's Status Changed, Nurse Failed To Access Chain Of Command.

The hospital had a procedure in place which allowed a patient's nurse to call a "Condition C" to obtain immediate assistance from a physician for a patient whose condition was perceived by the nurse to have become critical.

The hospital also had policies requiring a nurse to access the nursing chain of command when the nurse believed that the patient's safety and wellbeing was being compromised by the attending physician's failure to act.

The state nurse practice law requires a nurse to safeguard the nurse's patient from incompetent practice by another health care provider, specifically by notifying hospital authorities if that occurs.

If the patient's nurse did report to the neurosurgeon that her patient's left pupil had become fixed and dilated, not just that the pupils were unequal, and the neurosurgeon was not willing to come to the hospital, the nurse had to act.

The nurse had an obligation to call for assistance from another physician or her nursing supervisor.

SUPERIOR COURT OF PENNSYLVANIA
March 17, 2010

The twenty-four year-old patient was diagnosed with an aggressive brain tumor which could not be treated any other way than by surgical removal.

The patient's pupils were uneven and the patient was in considerable pain. He was admitted to the neurosurgery service, started on narcotics for pain and anti-seizure medication and scheduled for surgery at 7:30 a.m. the next morning.

During the night the patient was cared for by a relatively inexperienced nurse who had just completed her orientation period. There was no more senior nurse working with her in the neurosurgery unit on the overnight shift.

Left Pupil Fixed and Dilated

The nurse wrote a progress note at 1:00 a.m. that the patient's left pupil was fixed and dilated.

According to the Superior Court of Pennsylvania, the nurse should have recognized a fixed and dilated pupil as a significant change in the patient's neurological status indicative of increasing pressure on the brain from the mass inside the patient's skull, requiring immediate medical assessment and intervention.

The nurse testified she phoned the neurosurgeon at 1:00 a.m. and reported the fixed, dilated pupil. The neurosurgeon testified that the nurse did phone him, but, on the contrary, only to report that the pupils were not equal, which was no change from the previous afternoon.

Nothing further was done for the patient until 6:00 a.m. when both of the patient's pupils were fixed and dilated. The physicians rushed him into surgery but were unable to save his life.

During the surgery it was discovered that he did not have a glioblastoma as was thought the previous afternoon but had a rapidly growing brain abscess.

The immediate cause of death was brainstem herniation from excessive intracranial pressure.

The Superior Court upheld a \$2.5 million award to the family for the night nurse's negligence. ***Rettger v. UPMC***, __ A.2d __, 2010 WL 937277 (Pa. App., March 17, 2010).