

## Fall: Patient Not Restrained, Court Does Not Fault Nurses.

When the patient, a seventy-six year-old man, was admitted to the hospital a nurse conducted a nursing assessment.

According to the hospital policy, an appropriate admission nursing assessment includes assessing the patient's medications, orthopedic diseases, neurological status and other medical conditions.

The nurse determined the patient was a high fall risk, 8 on a scale of 1 to 10. The nurse decided to initiate the hospital's fall prevention plan and that meant putting up the bed rails and placing restraints on the patient without physician's orders.

Hospital policy, however, did require a nurse who initiated restraints on a patient for fall prevention to notify a physician or physician's assistant within one hour.

### No Orders

#### Nurses Removed Restraints

The next day another nurse, seeing that no orders for restraints had been received, removed the restraints.

Soon the patient was getting up out of bed on his own. His nursing neuro assessment was not normal, that is, he was showing signs of dementia and confusion. His O<sub>2</sub> was low and his heartbeat was irregular.

The physician was notified by phone but declined to order restraints.

Later that evening the patient was found on the floor with a closed-head injury. He was transferred to a university hospital where he died a few weeks later.

The Court of Appeals of North Carolina ruled the family needed to find a medical expert and sue the physician for medical malpractice over the decision not to restrain the patient for his own safety.

A nurse can and must initiate restraints on an emergency basis if the nurse's assessment so indicates, but a nurse cannot continue restraints without a physician's order. Sturgill v. Ashe Memorial Hosp., \_\_\_ S.E. 2d \_\_\_, 2007 WL 3254411 (N.C. App., November 6, 2007).