

Pitocin Drip, Hyperstimulation Of The Uterus: Court Holds Nurse Negligent But Not Liable.

The nurse started the pitocin at 11:45 a.m. per the physician's orders. The fetal heart rate stayed in the 130's with no decelerations for the next three hours.

The physician inserted an internal uterine pressure catheter at 2:45 p.m. which quickly showed hyperstimulation of the uterus. The nurse continued the pitocin drip until her shift ended at 3:15 p.m.

The p.m. shift nurse actually increased the pitocin despite evidence of uterine hyperstimulation. The baby was born with hypoxic injuries at approximately 11:00 p.m.

There are three issues necessary for the day-shift nurse to remain as one of the defendants in this case:

A nurse-patient relationship did exist.

Her conduct did fall below the standard of care.

However, there is no evidence her negligence caused the baby to be born with hypoxic ischemic injuries at 11:00 p.m.

APPEALS COURT OF MASSACHUSETTS
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The Appeals Court of Massachusetts accepted expert medical testimony that uterine hyperstimulation is associated with fetal heart-rate deceleration, which is associated with fetal hypoxia. However, there was no cause and effect linking that to the day shift nurse's negligence and she was dismissed. ***Barker v. Yarosz, 2005 WL 1924208 (Mass. App., August 11, 2005).***