

Shoulder Dystocia: Nurse Midwife Faulted, Failed To Consider Patient's Past History.

The US District Court for the Middle District of Georgia awarded the child \$5.7 million and the parents an additional \$389,000 after the baby was born with a brachial plexus injury due to shoulder dystocia encountered during her delivery.

The now four year-old child has had multiple shoulder surgeries which have not corrected her permanent disability.

Nurse Midwife Ruled at Fault Failed to Review Obstetric History

During two of the three prior births shoulder dystocia had complicated the deliveries.

For this pregnancy the nurse midwife, as well as the obstetrician, failed to review the patient's past obstetric history. That review would have alerted the mother's caregivers that shoulder dystocia was most likely going to be an issue.

This nurse midwife actually wrote the progress notes for the two prior complicated deliveries. She cared for the mother prenatally and was present for the deliveries of all her other children, this one being the fourth.

However, the nurse midwife apparently had no personal recollection of having cared for the mother before this pregnancy and delivery.

The nurse midwife was also faulted for failing to arrive at a correct estimate of the fetal weight and to take that into account in planning how the delivery should be approached.

During the vaginal delivery, when shoulder dystocia was encountered, the nurse midwife and the obstetrician were faulted by the mother's medical experts for using excessive force to extract the baby with a vacuum extractor, after the fetal heart rate slowed abnormally and the McRoberts maneuver and suprapubic pressure failed to move the delivery forward.

According to the mother's medical experts, cesarean delivery would have been the safer way to proceed, rather than inducing labor with Pitocin and Cervidil, given the mother's history. That alternative should have been recommended to the mother. **Coleman v. US**, 2016 WL 4161106 (M.D. Ga., August 5, 2016).

Neither the nurse midwife or the obstetrician reviewed the mother's medical history before this delivery.

The nurse midwife was actually present during the mother's three previous deliveries in which shoulder dystocia occurred in two.

Even though she herself had documented that aspect of the mother's obstetric history, the nurse midwife did not remember that shoulder dystocia occurred during either delivery.

With a previous patient or a new one a nurse midwife should always review the mother's obstetric history at her prenatal clinic visits.

Further, a nurse midwife must take into account the expected weight of the fetus, in conjunction with the obstetric history and other relevant data.

According to the mother's medical experts, a cesarean would have been the safer way to proceed this time.

When shoulder dystocia was encountered during this delivery, it was below the standard of care for the nurse midwife and the physician to continue with vacuum extraction after less drastic measures failed.

UNITED STATES DISTRICT COURT
GEORGIA
August 5, 2016

Labor & Delivery: Nurses Negligent, But Not Liable.

Her physician told the mother twenty-eight weeks pregnant with twins to go to the emergency room. She was leaking pinkish fluid and had premature labor contractions. She was transferred the next day to another hospital better able to handle high-risk obstetric cases.

The obstetrician believed she was not ready. He sent her to the antepartum unit and ordered fetal monitoring q 12 hour nursing shift.

The mother kept requesting pads from the nurses for her leakage. However, during the night of her second day she could not get a nurse for more than three hours.

A nurse who finally came in called the obstetrician who did an ultrasound that revealed one of the twins was deceased.

There is no explanation other than nursing negligence for the glaring lack of nursing documentation between 2:15 a.m. and 5:20 a.m., the very time the patient testified she needed a nurse but could not get one to come to the bedside.

However, there is no cause-and-effect link between the nurses' negligence and the death of one of the twins, or the mother's emotional distress over that unfortunate outcome.

CALIFORNIA COURT OF APPEAL
August 17, 2016

The California Court of Appeal ruled the nurses were negligent for basically ignoring the patient for more than three hours. However, that was not a factor in the demise of the one twin.

Nor did the nurses fail to report any assessment data that might have led the obstetrician to resume continuous fetal monitoring that might have meant a difference in the outcome. **Alkins v. Loma**, 2016 WL 4379356 (Cal. App., August 17, 2016).