

Alzheimer's: Patient's Death Tied To Caregivers' Negligence.

The Court of Appeals of Texas accepted the family's medical expert's report as the foundation for the family's wrongful-death lawsuit against the treating physician and the nursing facility where the deceased resided just before her death.

Before being transferred to the nursing facility the elderly patient had been hospitalized for treatment of a hip fracture.

Risperdal Prescribed for Alzheimer's Dementia

In the nursing facility the patient's treating physician prescribed the anti-psychotic Risperdal for her dementia.

Risperdal is a psychotropic medication with known, published side effects which the court described in non-medical jargon as restlessness or a need to keep moving.

The patient's family was asked and refused to sign off on consent forms allowing the physician to prescribe Risperdal for the patient's Alzheimer's, but treatment with Risperdal went ahead anyway.

Agitated Patient

Pulled Out Gastrostomy Tube

The patient had a gastrostomy feeding tube. She began to experience bouts of agitation and began pulling at the gastrostomy tube.

While nothing was being done to address her agitation she pulled the tube out altogether.

Gastrostomy Tube Improperly Re-inserted

The nurses re-inserted the patient's gastrostomy tube incorrectly, without medical supervision or medical follow-up. That allowed infusion of nutrient supplements into the peritoneum. That, in turn, resulted in an abscess which required numerous surgeries in the hospital.

Eventually the patient passed away. Mesenteric artery thrombosis was listed on the death certificate as the cause of death.

Patient's Death Tied to Series of Errors and Omissions

Negligence, by law, does not have to be tied to just one specific event leading directly to just one specific outcome.

The court was willing to accept a complex series of errors and omissions as the legal cause of this patient's tragic death.

An anti-psychotic with the potential to increase restlessness and agitation may not have been appropriate for management of Alzheimer's dementia.

The family's express wish to decline to consent to use of an anti-psychotic medication should not have been ignored.

A demented patient's agitation has to be addressed, especially when the patient has a gastrostomy tube.

Re-insertion of a gastrostomy tube into the stomach has to be verified by nursing or medical personnel who have the competence to make such an assessment before infusion of nutrition is resumed. **Patel v. Williams**, __ S.W. 3d __, 2007 WL 3286800 (Tex. App., November 6, 2007).

Aspiration Pneumonia: Hospital Did Not Check Dietary Orders.

An elderly nursing-home resident was found non-responsive and not breathing in her room at the hospital where she had gone from the nursing home for minor elective shoulder surgery.

She was taken to the hospital ICU, was intubated and a large volume of stomach contents was suctioned from her lungs before she died.

Hospital Did Not Check Dietary Orders at the Nursing Home

The Court of Appeals of Texas linked her death to failure by the hospital medical and nursing staff to check with the nursing staff at the nursing home to see if she had any special dietary orders.

In this case the patient had been on a mechanical diet in the nursing home. Due to poor dental health and trouble chewing and swallowing, for which she was competently assessed in the nursing home, all of her solid food had to be pureed.

No Dietary Consult in the Hospital

Alternatively, the medical and nursing staff at the hospital could have thought to get an assessment of the patient's dietary needs at some time before she was advanced beyond the liquids she was given in post-anesthesia recovery, rather than just assuming a regular hospital diet was appropriate for her, the court pointed out. **Palafox v. Silvey**, __ S.W. 3d __, 2007 WL 3225512 (Tex. App., November 1, 2007).

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