

Placental Abruption: Verdict Upheld.

The patient was thirty-three weeks pregnant when she was involved in a motor vehicle accident. Emergency medical personnel extracted her from her vehicle and transported her to the emergency room at a hospital that did not offer labor and deliver services.

The patient complained of severe abdominal pain. The fetal heart rate was above 160. Hematocrits looked at belatedly showed the mother was possibly bleeding internally.

It took several hours to get her to another hospital where her baby was delivered dead by cesarean.

If a patient comes to a hospital that has an emergency room but does not have obstetrical capability, and the history, signs and symptoms point to placental abruption, there is very short time frame in which to assess the patient and arrange for transfer to a hospital that offers full obstetrical and neonatal services.

COURT OF APPEAL OF LOUISIANA, 2001.

The Court of Appeal of Louisiana accepted testimony from a physician as an expert witness in the field of emergency medicine that it should have taken no more than twenty minutes for the hospital staff to set the wheels in motion to transport this patient by ambulance to a hospital with full obstetrical and neonatal capability.

Severe abdominal pain starting right after blunt trauma to the abdomen of a woman thirty-three weeks pregnant should have been enough to raise a red flag about placental abruption, the court said, especially with an elevated fetal heart rate. **Rebstock v. Hospital Service District No. 1**, 800 So. 2d 435 (La. App., 2001).

Slip And Fall: Visitor's Lawsuit Against Hospital Upheld.

A patient was brought to the hospital by his wife for an outpatient procedure. While waiting for the husband's procedure to be completed the wife decided to walk to the hospital cafeteria to have lunch.

She had never been to this hospital and was unfamiliar with the layout.

She opened a door in a corridor and walked through the doorway. She did not notice a step-down just past the doorway. She fell and twisted her knee and ankle.

She sued the hospital. The Court of Appeals of North Carolina ruled the local county court judge was wrong to dismiss her case.

She was a business patron of the hospital. There was no warning of the step-down. It was reasonable for her to be looking straight ahead rather than down at the floor and not to see or expect the step down, the court ruled. **Barber v. Presbyterian Hospital**, 555 S.E. 2d 303 (N.C. App., 2001).

Nurses Praised, Physician Reprimanded.

The Court of Special Appeals of Maryland upheld a reprimand imposed upon an obstetrician by the State Board for a patient's avoidable death.

In contrast to the physician's negligence, the court praised the nurses' competence. The court record was full of references to the nursing notes, exact times when tests were ordered by the physician, exact times when samples were taken and sent to the lab, exact times when results came back or when someone was sent to get them and exact times when and exactly how the physician was notified. **Gabaldoni v. Board of Physician Quality Assurance**, 785 A. 2d 771 (Md. App., 2001).

Pregnancy Discrimination: Case Dismissed.

Title VII of the Civil Rights Act of 1964 outlawed gender-based discrimination in employment. The US Supreme Court ruled Title VII did not apply to pregnancy until Congress clarified its intention in 1978 with the Pregnancy Discrimination Act.

In a recent case the Court of Appeal of Louisiana had to sift through the evidence carefully, and found that an aide's employer did not discriminate.

It is unlawful pregnancy discrimination for an employer arbitrarily to reduce a patient-care employee's hours just because the employee is pregnant.

When there are conflicting explanations for the employer's motivation in reducing an employee's hours, the employee has the burden of proof.

The employee has to prove discrimination was the motive, or the employer will prevail in court.

COURT OF APPEAL OF LOUISIANA, 2001.

The court accepted testimony from the aide's supervisor that Medicaid cuts made it necessary to reduce the aide's hours. The cuts went into effect at about the same time as she became pregnant, but that was just a coincidence.

The court looked at the aide's relationships with some of her patients. One made her depressed, so she asked for a transfer, and another became very attached to her, which caused friction with other aides that made reassignment necessary.

And for a time the aide's physician had recommended she not work because of morning sickness. **Brittain v. Family Care Services, Inc.**, 801 So. 2d 457 (La. App., 2001).