

Aspiration Of Intestinal Contents: Nurses Cleared Of Negligence, Relied Upon Physicians' Orders.

After reviewing the facts in detail the Court of Appeal of California upheld the lower court's dismissal of the family's wrongful death/malpractice lawsuit against the hospital. The court could not find fault with the nurses who took care of the patient and could not assign any degree of responsibility to them for his unfortunate death.

The patient entered the hospital for colostomy-reversal surgery. During the procedure a nasogastric tube was put in which stayed in place while he was in the post-anesthesia recovery unit.

The next day, however, when he was on an acute care unit, the patient himself pulled out the nasogastric tube, according to the court, because it was bothering him.

The patient's nurses promptly called the surgeon. The surgeon told them to leave the tube out. The surgeon came to the unit, examined the patient and continued his order to leave the tube out.

Nursing assessments performed and documented that day indicated the patient denied pain. He was still being medicated for post-surgical pain, was ambulated in the hallway and spent time out of bed in the chair in his room.

The evidence in this case is conclusive. The nurses are not at fault.

The surgeon who had just done the colostomy reversal ordered the nasogastric tube not to be reinserted when the nurses called him right after the patient pulled it out himself.

The surgeon came and saw the patient and reiterated his order not to reinsert the nasogastric tube.

The next day the patient's primary-care physician came and saw him and concurred with the plan to leave the tube out.

When the patient vomited a little that evening, the surgeon was notified.

The next morning he vomited a large amount. The nurses called the house physician and had the patient transferred to the ICU.

He was intubated through a tracheostomy and died three months later.

CALIFORNIA COURT OF APPEAL
September 28, 2005

The next day the patient declined his pain meds, but complained of nausea and got medication for that. Nursing assessments indicated his abdomen was soft and his vital signs were stable. He was ambulated again in the hallway. He was still npo, but the surgeon did allow it and the nurses gave him sips of water sparingly.

His primary-care physician also came in, examined him and concurred that the nasogastric tube should stay out.

Late that evening he complained of nausea and vomited about 50 cc. The nurses gave him Compazine and promptly notified the surgeon.

Early the next morning he vomited a large amount of coffee-ground liquid. The nurses reported it to the house physician. When he started showing signs of respiratory distress the nurses sent him to the ICU where he was intubated through a tracheostomy. He died three months later from Candida septicemia, renal failure and pulmonary vascular compromise.

Family's Nursing Expert's Opinion Is Rejected – Nurses Not At Fault

The court expressly rejected the family's nursing expert's opinion that the nurses deviated from the standard of care by not taking steps to advocate for the nasogastric tube being reinserted after the patient vomited the coffee-ground emesis.

Three times his physicians expressly rejected reinserting the tube. It would only be speculation to say the nurses could have obtained an order for the tube and only speculation to say the tube would have made any difference, the court ruled. **Arquelles v. Seton Medical Center, 2005 WL 2375628 (Cal. App., September 28, 2005).**