

Emergency Room: Missed Diagnosis, US Court Finds No Nursing Negligence.

The US District Court for the Middle District of Florida carefully reviewed the nursing and medical care the patient received on the day in question and concluded there was no departure from the standard of care.

History of Lower Back Problems

When the patient arrived at the hospital's emergency department the triage nurse on duty immediately obtained a history from the EMT's who brought her in. The history that the EMT's had obtained from the patient was that she had had chronic back problems for years which were causing her constant pain.

Nonetheless, that morning, although she was in intense pain, she still could move all her extremities and she denied falling, losing consciousness, nausea, vomiting, dizziness, numbness, tingling, recent heavy lifting or recent surgery.

The nurse then began his own assessment, all the while documenting on the hospital's standard form the data he obtained which he would later have in front of him when he had to testify in court.

Nursing Assessment

Patient Not Categorized as Emergent

The patient was not in distress, denied numbness, tingling or weakness, was able to move all her extremities and reported no problems with bowel or bladder incontinence. Her vital signs were basically normal, not consistent with a person in severe distress, although the patient continued to rate her pain as 10/10.

A hospital staff nurse took over responsibility for the patient about two hours later. There was some difficulty obtaining a urine sample, but one was finally obtained. The nurse believed the difficulty was explained by the patient having to urinate into a bedpan while lying flat on her back, an unusual experience for her.

After the physician's exam the staff nurse discharged the patient with instructions to rest, take her medications and to be sure to keep her already-scheduled appointment with her neurologist four days later. **Millard v. US**, 2010 WL 1949639 (M.D. Fla., May 14, 2010).

The patient was misdiagnosed as suffering from a flare-up of chronic lower back pain for which she had been under a physician's care for some time.

In fact, there was an extruded disc in her lower back whose onset probably occurred earlier that morning which was not discovered until a visit to another E.R. two days later.

Cauda equina syndrome resulted from the fact the extruded disc was not caught and operated upon promptly, an outcome the patient's lawsuit alleged was avoidable.

The patient suffered bowel, bladder and sexual dysfunction and sensory and motor nerve damage in both her lower extremities.

However, given the patient's history and presenting signs and symptoms when she arrived in the E.R., the nursing triage assessment, medical exam and nursing care at discharge were all within the standard of care.

The hospital would only be liable to the patient if the patient could prove its employees departed from the applicable standard of care.

UNITED STATES DISTRICT COURT
FLORIDA
May 14, 2010