

Fall: Brain-Injury Patient Left Alone On Commode.

The thirty-nine year-old patient had been treated with emergency surgery for a right-side brain abscess that was causing brain-stem herniation.

The surgery had involved resection, that is, removal of a major portion of the right side of her brain, leaving significant left-sided paralysis, speech impairment, blindness in both eyes and a host of other neurological problems.

The patient needed a comprehensive program of assistance with all major activities of daily living and was transferred to a nursing home.

In the nursing home she was left alone on the commode in the middle of the night. She fell and struck her head.

She was examined by the nursing home's medical director. He found nothing wrong. A few days later, however, the patient was rushed to the E.R. with a new subdural hematoma from the fall which now compounds the problems she had before.

Her lawsuit against the nursing home in the Circuit Court, Dane County, Wisconsin settled for \$500,000. Harrison v. Meriter Health Services, 2007 WL 4976341 (Cir. Ct. Dane Co., Wisconsin, July 1, 2007).

Fall: Dementia Patient Left Alone.

A private-duty sitter hired by the family to sit through the night with a ninety year-old in a nursing home left the bedside only momentarily to dispose of trash after cleaning up his diarrhea.

The bed rails reportedly were left down. The patient got up, fell, hit his head and soon died from a subdural hematoma. The jury in the Circuit Court, Palm Beach County, Florida awarded unspecified damages from the sitter's agency. Dubin v. United Nursing Services, 2007 WL 4954007 (Cir. Ct. Palm Beach Co., Florida, December 7, 2007).

Preeclampsia: \$22,000,000 Verdict For Patient's Death.

A severe headache brought the patient to the hospital. She was thirty-four years old and nine months pregnant with her first child. She was admitted to the labor and delivery unit.

On arrival in labor and delivery she was examined by a second-year obstetrical resident and assessed by a labor and delivery nurse. The physician and nurse concurred the patient likely had preeclampsia due to her being nine months pregnant and having elevated blood pressure.

Lab tests ordered by the resident physician confirmed the presence of HELLP syndrome (Hemolytic anemia, Elevated Liver enzymes and Low Platelet count).

The patient was then examined by two obstetric physicians. It was agreed that labor should be induced.

No Labetalol Given

The family's lawsuit for wrongful death from malpractice alleged the patient's death was caused by the fact that anti-hypertensive labetalol was not given as mandated by hospital protocols for every pregnant patient with severe hypertension.

During induced labor the patient's blood pressure reportedly spiked to 210/111. That blood pressure reading was obtained just at the moment she became unresponsive.

The baby was delivered by emergency cesarean basically unharmed. The mother was then sent for a CT scan which revealed she had had a brain hemorrhage.

The mother was placed on a ventilator. The ventilator was discontinued four days later and she expired.

The jury in the Circuit Court, Cook County, Illinois awarded the widower and child a total of \$22,000,000 from the hospital, for the resident's and nurse's negligence, and from the medical-practice groups with whom the two obstetricians were associated. Bentivenga v. Saleh, 2008 WL 539887 (Cir. Ct. Cook Co., Illinois, January 15, 2008).

Stroke: Nurses Did Not Report Patient's Status To Physician.

The patient passed out at home and was taken to the E.R. by ambulance.

The E.R. doctor called in a neurologist, who was not able to rule out a cerebrovascular event *versus* a seizure and had the patient admitted to a med/surg floor.

After some bedside x-rays were done a nurse tried but was unable to rouse the patient with a deep sternal rub. The nurse just made a notation in the chart and did not notify the physician.

Over the next ten hours there was no record of any communication between the nurses and the physicians as to the patient's changing neurological status even though he was having difficulty moving his limbs, complained of right-side numbness, could not lift his right arm and could not squeeze with his right hand. The physician was not notified until the patient was unable to swallow, almost twelve hours after he had arrived on the med/surg floor.

The next morning the neurologist made a diagnosis of stroke.

The jury in the District Court, Boulder County, Colorado awarded \$1,000,000, 90% from the hospital and 10% from the neurologist. Rademacher v. Katuna, 2007 WL 4925066 (Dist. Ct. Boulder Co., Colorado, May 24, 2007).

No Consent: Patient Can Sue.

The pre-operative medical and nursing notes explained the planned surgical procedure in elaborate detail and the fact that the risks, benefits and possible complications were communicated to the patient.

The US District Court for the District of Minnesota, however, agreed with the patient there was no record of the patient ever having agreed to undergo the procedure. Studnicka v. Pinheiro, 2008 WL 611605 (D. Minn., March 5, 2008).