

## Lithium Toxicity: Court Faults Nurse Practitioner.

The patient's psychiatric nurse practitioner at the community mental health clinic heard reports from persons at the patient's assisted living placement that suggested she was having lithium toxicity.

The nurse practitioner sent the patient to the lab for a blood draw with an express order for a lithium level.

However, the nurse practitioner never followed up by getting and reviewing the lab results or by ordering additional testing, according to the judge in the US District Court for the District of Alaska.

Moreover, according to the judge, by the time she was sent for this blood draw it had been over eight months since her last lithium level check, too long for a patient on lithium to go without a routine lithium level, with or without signs or symptoms of possible toxicity.

The patient went into cardiac arrest and is now on a ventilator, which the Court ruled was the direct result of negligence by the psychiatric nurse practitioner, the staff at the assisted living home and the lab where the patient was sent for her lithium blood draw.

\$1,000,000 in damages were awarded plus future medical expenses. **Liebsack v. US**, 2010 WL 3522342 (D. Alaska, September 2, 2010).

## Fall: Jury Says Nurses Were Not Negligent, No Damages Awarded.

***The family's lawsuit alleged that the patient lay on the floor after she fell until 7:00 a.m. the next morning without being discovered by the hospital's nurses.***

***The hospital chart, however, contained a nurse's note that the patient's son was phoned at 1:05 p.m. and informed that his mother had fallen five minutes earlier at 1:00 p.m. that same afternoon. He was not first notified at 7:00 a.m. the next morning as he insisted in court.***

***The patient did not need a bed alarm, bed side rails or a sitter at her residential placement prior to coming to the hospital.***

***Hospital policy is to order a bedside sitter only when the patient is belligerent, hostile or overly anxious, none of which described this patient.***

CIRCUIT COURT  
OAKLAND COUNTY, MICHIGAN  
September 18, 2009

The ninety year-old Alzheimer's patient had to be brought to the hospital by her son from an adult foster care facility after she began showing signs of a possible stroke, that is, a new facial drop and drooling. She also had a urinary tract infection.

The son told the emergency room staff that his mother had no recent history of falling.

Nevertheless, the first nurse assigned to the patient on the med/surg floor where she was sent made note she was raising the side rails, lowering the bed and providing a call light as fall-risk precautions.

The hospital chart contained nursing documentation that the patient was turned and repositioned every two hours and was checked on frequently between turnings.

Experts testified for the hospital that a bed alarm was not indicated for this patient, and, in any event, would not have prevented her from falling.

Phone records from the hospital corroborated the nursing documentation that a nurse phoned and spoke with the patient's son within minutes after his mother fell. His mother did not lay on the floor in her room all night until 7:00 the next a.m. without being discovered by the nurses.

Despite the fact the patient did fall in her hospital room and did sustain injuries, the jury in the Circuit Court, Oakland County, Michigan reportedly deliberated only forty-five minutes before returning a verdict finding that the patient's nursing care was appropriate in all respects. **Heffernan v. William Beaumont Hosp.**, 2009 WL 6836584 (Cir. Ct. Oakland Co., Michigan, September 18, 2009).

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