

LEGAL EAGLE EYE NEWSLETTER

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For the Nursing Profession

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Hospital Emergency Room Care: Court Finds No Nursing Negligence, Dismisses Lawsuit.

The patient arrived by ambulance in the hospital's emergency department.

He had been injured by being hit in the back of the head by a softball while running from third base to home during a game. The information obtained by the paramedics was that when struck he fell face-first to the ground and briefly lost consciousness.

Prompt Nursing Triage

A nurse triaged the patient in the hallway of the emergency department twelve minutes after arrival. The patient was still on the paramedics' longboard and was still wearing a C-collar.

The triage nurse documented that he was alert and oriented and his vital signs were within normal limits.

He complained of pain in the back of his head, tingling in his right arm and nausea. He was given medication for nausea ten minutes later.

A physician saw him a few minutes after that and ordered a CT, which showed left parietal acute epidural hematoma and a depressed skull fracture. The physician obtained a consult from a neurosurgeon.

The E.R. nurses continued to monitor the patient's condition which remained basically unchanged for almost four hours after he first arrived in the emergency department.



The E.R. nurses and other non-physician staff at the hospital properly triaged the patient, monitored and reassessed his condition during the night, recognized signs of significant changes in his condition, communicated those changes to the physician and promptly carried out all physicians' orders while he was under their care.

CALIFORNIA COURT OF APPEAL
May 16, 2012

Close Monitoring By E.R. Nurses

At 2:40 a.m. an E.R. nurse placed a call to the neurosurgeon to get him back to the bedside because the patient had become confused, his pupils were unequal and he might have been having a seizure. The neurosurgeon intubated him and medication was started.

The physicians wanted to transfer him to a tertiary trauma facility. However, at 3:15 a.m. it was not possible to arrange immediate transport via air ambulance and the delay involved in ground transport was deemed unacceptable, so hematoma evacuation surgery was done there at the same hospital and he was sent to the ICU afterward.

No Nursing Negligence Standard of Care Was Met

The California Court of Appeal accepted the testimony of the hospital's expert, a physician board-certified in emergency medicine, that there was no failure by the hospital's nurses or other non-physician personnel to assess the patient, to monitor and reassess the patient on an ongoing basis during the night, to recognize the signs of significant changes in his condition, to communicate those changes to the physician and all physicians' orders were carried out in a timely fashion. **Kunkel v. Universal Health Services**, 2012 WL 1726936 (Cal. App., May 16, 2012).

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