Toxic Megacolon: Settlement Faults Nursing Care.

The elderly patient reportedly spent more than a month in the nursing home and never had a bowel movement.

The patient was admitted to the nursing home with a host of medical diagnoses including chronic renal failure and progressive systemic sclerosis. Reglan and Senokot were prescribed as well as laculose prn.

The patient began to experience vomiting and had hypoactive bowel sounds, began complaining of constipation and her abdomen became distended and firm to the touch. Still she had no bowel movements.

She was finally taken to the emergency room in hypotensive shock. An x-ray showed her colon was distended with stool. During surgery it was discovered the cecum had leaked releasing massive fecal soiling into the entire abdomen. She died several weeks later from sepsis and multiorgan failure.

The family's lawsuit in the Circuit Court, Wayne County, Michigan faulted the nurses for failing to monitor the patient and failing to report obvious signs to the physician. The lawsuit settled for payments of \$12,500 from the physician and \$15,000 from the nursing home, most of which went to the family's attorney. Ridgeway v. Ansari, 2010 WL 5892777 (Cir. Ct. Wayne Co, Michigan, February 4, 2010).

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Neonatal Care: Court Faults Nurses, Not Physician, For Child's Death.

There is no conclusive evidence, extrapolating backward from the Demerol levels found in the infant's blood on autopsy, that the mother received an overdose during her labor or that the physician compounded that overdose by giving more Demerol to the baby for his circumcision.

There is convincing evidence of substandard nursing care once the newborn's condition began to deteriorate, regardless of the underlying physiologic cause for him going into crisis.

Dopamine was ordered to raise his blood pressure, but it was not started for more than an hour.

Bicarbonate was ordered when the child then went into significant acidosis, but that also was not started by the nurses until it was too late.

SUPREME COURT OF MISSISSIPPI March 17, 2011 The newborn began to experience significant problems with respiration and his diastolic blood pressure reportedly dropped to 15.

IV fluid was ordered at 5:00 p.m. but not started until 6:00 p.m. One of the family's medical experts pointed out in his testimony that IV fluid is routinely used in the hospital and is readily available to be started as soon as it is ordered. The expert found no excuse for the delay.

A dopamine drip was ordered at 5:30 p.m. to raise the newborn's blood pressure but the drug not started by the nurses for two hours.

Around 9:45 p.m. blood gases came back showing the child was still in crisis with pH and bicarbonate levels that pointed to acidosis.

No phone call was placed to the physician for more than an hour while the child needed to be started on bicarbonate right away to reverse the acidosis, the family's expert went on to say.

The physician was not called until the child was no longer responsive to deep pain stimuli. The child had been in shock for at least one and one-half hours before orders were obtained to start epinephrine and atropine.

The Supreme Court of Mississippi ruled there were grounds for a lawsuit against the hospital for nursing negligence in the newborn's care despite a lack of conclusive evidence that the mother received an overdose of Demerol during her labor that precipitated the child's crisis in the first place. Patterson v. Tibbs, __ So. 3d __, 2011 WL 909359 (Miss., March 17, 2011).

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