

Nurse As Patient's Advocate: No Liability Found For Patient's Death.

The patient came to the emergency room at 5:20 p.m. with severe chest pain and feelings of heaviness, weakness and dizziness.

The physician ordered a cardiology consult and a chest CT scan and started the patient on Heparin.

By the time the CT report arrived in the E.R. at around 10:30 p.m. the only one caring for the patient was the LPN on duty. She did not understand the CT report, so she phoned the RN on duty in the critical care unit and read it to her over the phone.

Once informed of the dire seriousness of the possible aortic dissection indicated by the CT report, the LPN made arrangements to get the patient into the critical care unit.

Then the LPN began making a series of calls and call-backs to the E.R. physician, cardiologists and thoracic surgeons, in the hospital or at home who practiced with outside medical practice groups, all of whom seemed to think it was some other person's, a different service's or another specialty's problem.

The patient coded at 3:42 a.m. and died at 4:06 a.m.

The records contain notations of a long series of calls and follow-up calls by the E.R. LPN to get someone to come in to see her patient and do whatever it was that needed to be done.

CIRCUIT COURT
ETOWAH COUNTY, ALABAMA
February 27, 2009

The jury in the Circuit Court, Etowah County, Alabama returned a defense verdict, despite the testimony of the family's nursing expert that the LPN was inexperienced and should not have been assigned to this patient's care. *Estate of Hamrick v. Ferguson*, 2009 WL 4932521 (Cir. Ct. Etowah Co., Alabama, February 27, 2009).