Perioperative Nursing: Court Discusses Standard Of Care.

The circulating nurse is the surgical patient's advocate. The circulating nurse is responsible for the patient's safety while the patient is under his or her care.

The circulating nurse should actively participate in safely positioning and padding the patient, continuously monitor body alignment and tissue integrity based on sound physiological principles and communicate specific needs to the rest of the surgical team.

The fact the anesthesiologist or anesthetist documents "all pressure points checked and padded" does not relieve the circulating nurse from his or own responsibility for accurate and thorough documentation. The type of padding used and the specific sites where it was placed should be documented in the intraoperative nursing notes.

Incomplete intra-operative nursing documentation is a violation of the standards published by the AORN and the ANA.

Those organizations' publications are widely recognized by the courts as authoritative references on the legal standard of care in various nursing settings.

> COURT OF APPEALS OF TEXAS August 3, 2007

The patient sued the hospital for a radial nerve palsy that was allegedly caused by the registered nurse anesthetist's negligence in positioning and padding her arm for gynecological surgery.

The Court of Appeals of Texas dismissed the nurse anesthetist from the case. The court ruled that the nursing experts' reports that were filed in the case, while right on the mark as statements of the standard of care for circulating nurses, were not directly applicable to the nurse anesthetist's role in the operating room.

Importance of Nursing Documentation

An overarching principle reiterated by the court was that nurses have the responsibility not only to provide safe and effective care but also to document concrete facts showing how safe and effective care was provided.

Lack of complete nursing documentation can lead a judge or jury directly to the conclusion that care was not provided or that the care provided was not safe and effective, that is, the nurse was negligent.

IV, Arm Board, Padding, Positioning

The circulating nurse has the responsibility to inspect the patient's IV site visually and, before the patient is placed under anesthesia, to ask the patient if it is causing any discomfort. If the patient reports a problem with the IV the circulating nurse must fully document to whom it was communicated and what was done about it.

When the arm is positioned on the arm board, after the patient is under anesthesia, the circulating nurse must check that the tape is not wrapped around the wrist, which can damage the radial nerve, and, if so, must insist the tape be removed and placed around the middle of the forearm.

The circulating nurse must continuously check the hand and wrist for swelling, a telltale sign the tape is too tight.

The circulating nurse should watch whether the patient is moved during the procedure. The positioning and padding of the entire body at the onset might not be appropriate after the patient is moved. Ledesma v. Shashoua, 2007 WL 2214650 (Tex. App., August 3, 2007).

Legal Eagle Eye Newsletter for the Nursing Profession

September 2007 Page 7