

Post-Op Nursing Care: Court Says Standard Of Care Not Followed.

After a vaginal hysterectomy the forty-five year-old patient was taken to the recovery room where she began having difficulties.

She was eventually diagnosed with hemorrhagic shock and returned to the O.R. for surgical repair of the source of her internal bleeding.

She died five hours after this second surgery. The autopsy report stated she died as a result of complications of acute hemorrhagic shock due to post-operative bleeding and morbid obesity with hepatomegaly, severe fatty metamorphosis and early fibrosis.

Opinions of Ob/Gyn

On Nursing Standard of Care

The Court of Appeals of Texas ruled that the family's expert witness, an ob/gyn physician, was qualified to give an opinion on what a hospital's nurses must do but was not qualified to state how a hospital is required to train its nurses, but that was still enough for the lawsuit to go forward.

The physician had worked for many years with nurses and nurse practitioners in the hospital setting caring for surgical ob/gyn patients. It is not always true that an witness must be a nurse in order to be qualified to render an opinion on the nursing standard of care.

The hospital's nurses failed to monitor the blood loss that the patient experienced during surgery and afterward failed to recognize her compromised status in the post-anesthesia recovery room.

The patient continued to receive pressor medication when the medication was contraindicated and should have been stopped and the surgeon who had done the surgery or another surgeon was not contacted until it was too late, the Court said.

If the second surgery had been done promptly, in the patient's expert's opinion, the source of the patient's post-operative bleeding could have been identified and corrected and the patient, more likely than not, would have survived.

The Court's decision did not outline in specific terms the signs that were present in this patient's case or define the precise clinical parameters that indicate specifically when nurses are required to act. Columbia North Hills Hosp. v. Alvarez, 2011 WL 3211239 (Tex. App., July 28, 2011).

The legal standard of care for the hospital and its nursing staff caring for this patient in the post-anesthesia care unit and the critical care unit was to recognize an emergent and critical post-operative bleed and to invoke the chain of command to make sure the patient was returned to surgery in a timely fashion.

Post-operative management of the patient was negligent in that the nurses watched her decline throughout the day without effectively utilizing the chain of command.

They should have communicated the emergency nature of the situation to the surgeon, then quickly gone up the chain of to get senior nursing personnel to the bedside.

The assistant CNO and the nurse case manager eventually came to the patient's room that evening, but they should have been summoned and arrived much sooner.

The surgical nurses were also required by the applicable standard of care to properly evaluate the operative blood loss. These nurses were negligent in that they grossly underestimated loss of approximately 4800 cc's.

COURT OF APPEALS OF TEXAS
July 28, 2011

Medicaid: New Eligibility Standards For 2014.

On August 17, 2011 the US Centers for Medicare and Medicaid Services (CMS) announced proposed new Medicaid eligibility standards that will take effect January 1, 2014.

The new standards are intended to implement the changes enacted by last year's healthcare reform legislation known as the Patient Protection and Affordable Healthcare Act of 2010.

CMS's announcement from the Federal Register is on our website at <http://www.nursinglaw.com/CMS081711.pdf>

FEDERAL REGISTER August 17, 2011
Pages 51148 - 51199

DNR: Patient Was Resuscitated, Family Can Sue.

The Court of Appeal of Louisiana ruled that the family has the right to sue for the fact that the Do Not Resuscitate (DNR) order in their elderly father's medical chart was ignored when he went into cardiac arrest in the hospital.

The patient lingered in the hospital more than two months. The family's lawsuit claimed damages for medical expenses for post-resuscitation care and for the deceased's physical and mental pain and suffering, loss of enjoyment of life and cognitive decline.

The issue for the Court at this point was whether failing to honor a DNR order is medical malpractice which in Louisiana requires the filing of a claim with the State Patient's Compensation Fund and the convening of a medical review panel of physician experts to rule on the case, or is ordinary negligence for which the aggrieved parties can go straight to court.

The Court ruled it is not medical malpractice and gave the family an expedited track to their day in court. Jones v. Ruston Louisiana Hosp. Co., __ So. 3d __, 2011 WL 3477170 (La. App., August 10, 2011).