

# Medical malpractice claims

This case study involves a nurse working in an emergency department (ED).

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# the patient was triaged

- ❑ *vital signs were stable*
- ❑ *a poor historian*
- ❑ *“hurting all over”*
- ❑ *was located approximately 20 feet from the nurses’ station, but not in direct view of the station.*



- the patient was confused, uncooperative and incontinent.
- elderly male at risk for falls:

1. side rails up,
2. place call bell within reach of patient,
3. maintain bed in low position,
4. and consider patient placement close to nursing station.

# Two hours later

- evaluated by the ED practitioner
- was restless
- ordered a sedation medication



- patient to the bathroom, noting that he was able to walk independently, but had an unsteady gait

- The results of the diagnostic tests(CT scan) were reported as negative

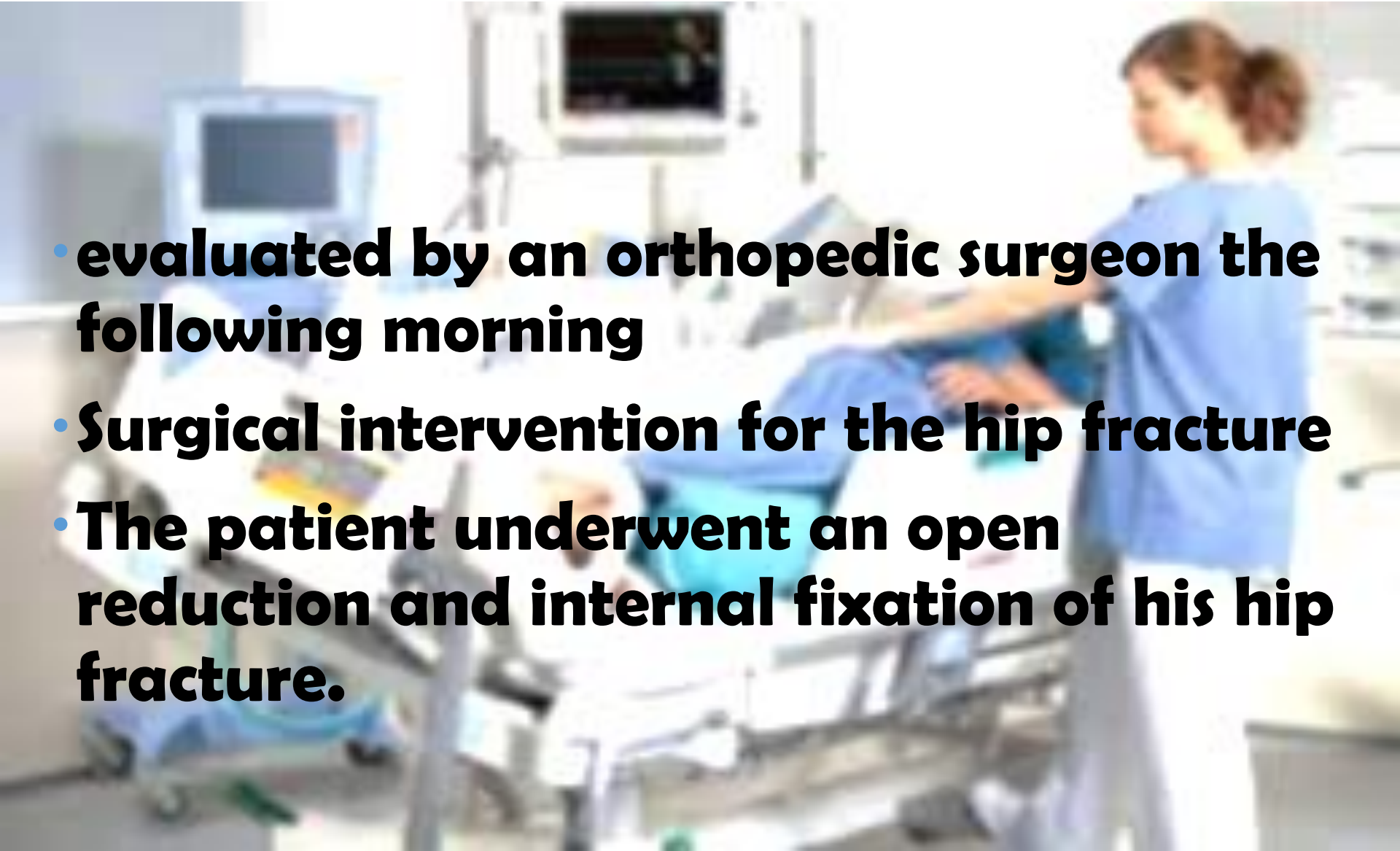


# Thirty minutes later

- patient yelling, laying on the floor on his right side
- was assessed by the ED practitioner
- applied a cervical collar to the patient's neck
- placed him on a backboard and then lifted him to a stretcher
- pain in his right hip, and his right leg was noted to be shortened and internally rotated
- **diagnostic tests, and the hip x-rays results confirmed a fractured right hip**
- the patient was moved to a bed closer to the nursing station



# admitted to the hospital

- **evaluated by an orthopedic surgeon the following morning**
  - **Surgical intervention for the hip fracture**
  - **The patient underwent an open reduction and internal fixation of his hip fracture.**
- 



# Post-operatively

**Pneumonia**

**antibiotic therapy**

**lengthened his hospitalization**

**activity level is now limited to a wheelchair**



# Risk Management Recommendations:

- ❖ ***Know the organization's policies and procedures related to clinical practices and documentation.*** Unfamiliarity to established policies and protocols is not a defense, especially if a clinician has acknowledged receiving education on such policies and protocols.
- ❖ ***Maintain thorough, accurate and timely patient assessment and monitoring,*** which are core nursing functions.
- ❖ For patients assessed as a fall- risk, ***implement fall prevention interventions in accordance with department protocols.***
- ❖ ***Invoke the chain of command when necessary to focus attention on the patient's status.*** Nurses are the patient's advocate, ensuring that the patient receives appropriate care when needed.
- ❖ ***Contact the risk management department, or the legal department of your organization*** regarding patient or practice issues.





**THANK YOU**