Negligence paper

Health & Medicine, Hospital



Negligence Paper Ann Fairvalley University of Phoenix HCS/ 478 Negligence Paper Imagine waking up in the recovery room from being sedated for a procedure in which one of your limbs has been amputated. While in recovery you are in and out of consciousness. Finally after being in recovery for 2 hours you are taken to a step down unit to recover and receive teaching and therapy. After getting settled into bed you gets the guts to throw back you sheets and take a look where there was once a left leg.

To your horror your left leg is there and your right leg is not! " The Joint Commission considers wrong site surgery to be a sentinel events which is defined as " an unexpected occurrence involving death or serious physical or psychological injury, or the risk thereof. Serious injury specifically includes loss of limb or function" (Dillon. 2008.). " This was an all too familiar of a situation for one Mr. Joseph Benson a 62-year-old diabetic with circulation problems that required a leg amputation.

In this paper I plan to explore the legal implications in regards to the differences between negligence, gross negligence and malpractice. I will also explore some rational as to why union problems and/ornursingshortages could have been the cause of this disaster. Lastly I will describe the importance of documentation in regards to potential negligence as if I was the nurse involved with Mr. Benson's care. I will briefly describe my ethical principles, which would guide this practice and how I would document the case to satisfy ethical and legal requirements. Negligence as defined by Black's Law Dictionary (1979) and the Joint Commission on Accreditation of Healthcare Organizations (JCAHO, 2002) is the "failureto use such care as a reasonably prudent and careful person would use under similar

circumstances. " It is the predominant theory of liability in medical malpractice litigation (King, 1986) (Weld. Garmon. Bibb. 2009.). " During my experience as a surgical nurse working in Obstetrics we used checklists and timeouts to make sure that we followed hospital protocols during our procedures.

The checklists were in place to make sure procedures and paperwork was completed in an orderly and prudent manner. We could not continue onto the next step in the checklists until it was crosschecked by another licensed nurse or physician. This was put in place to ensure the patient's well being and safety was addressed at each step in the checklist. Each one of the JACHO accredited hospitals has a similar checklist in place to ensure the patient's wellbeing and safety. By having timeouts and checklists this could possibly prevent negligence. Gross negligence means, " reckless indifference to or a deliberate disregard of the whole body of stockholders" or actions which are " without the bounds of Reason (Sharfman. 2006.). " One example of gross negligence would be giving a patient a higher dose of a narcotic instead of wasting the unused portion in order to keep the patient guiet and sleeping during a hectic shift. This nurse would have made a conscious decision to heavily sedate her patient againstdoctor's orders, which would constitute gross negligence on the part of this nurse in this situation. In the case of Mr.

Benson I think the physician could have been found guilty of gross negligence. If the doctor in this case would have followed timeouts and checklists the wrong procedure could have been avoided. " Barron's Law Dictionary (1991) defines malpractice as a professional's improper or immoral conduct in the performance of duties, either intentionally, through carelessness, or through ignorance (Weld. Garmon. Bibb. 2009.). " The physician in this case could also be found guilty of malpractice. His neglect of professional duty comes in question as to the welfare of Mr.

Benson. Did the physician show a lapse of judgment in his conduct during the time prior to the actual surgery by not following the procedures and protocols? It was not documented in the article as to the physician's demeanor or conduct during the actual procedure. I do not have a written account of the scrub nurses or other Operating Room staff testimony as to what actually happened in this Operating Room. It would be speculation on my part to assume the worst of the physician without having all the details before me. I choose to agree with the patient. Mr. Benson was orrified at the outcome of his procedure. I would not matter to me whether the Neighborhood Hospital had nursing shortages or problems with the unions all I would be concerned with is how could this happen and what is the hospital going to do about this mishap. I would contact an attorney who specializes in Malpractice litigation and see what my options were as far as litigation against the hospital and also the physician. I would research about sentinel events and JACHO regulations which could further my case against the hospital and physicians who were involved.

It is very important to document each and every step and to narrate in written form what happens while the patients are under your care. In the day-to-day world of nursing we have a saying "If it wasn't documented it never happened." I have never forgotten these words. It made a resounding impression on my professional nursing practice. Good, bad or ugly I document what actually happens during my shift and my care of my patients. At times, this includes having to document physicians demeanors, actions or lack of.

I have had to document that I made several attempts to reach a physician by phone and left messages on his answering service and voicemails in which he did not return phone calls in a timely manner. It can be very frustrating as a professional nurse when this situation occurs as you are put in a place in which you are against a rock and a hard place. Nonetheless, you have to document to protect yourself and your patients. In conclusion I have defined negligence, gross negligence and malpractice. I have given personal stories of how these terms applied to what I have seen in my professional nursingcareer.

I agreed with Mr. Benson and his position and did not agree with the rationale of the Neighborhood Hospital for the injustice, which happened to Mr. Benson. Lastly I described the importance of documentation in the role of a nursing professional. I would hope that the next time I need a surgery or a minor procedure that I can trust my hospital and the staff to perform as they should, this would include following hospital procedure and protocols as well as follow there professional standards correctly.

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