

Patient Care by Student Nurses Can Result in Liability

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As a student nurse, you probably know all too well that if a patient is injured under your care, you can face allegations of professional negligence if you do not adhere to your standard of care—that of the graduate nurse in the same or similar circumstances in the same or similar community.

The following case illustrates this, and several other legal issues, when a student nurse's conduct allegedly resulted in an injury to her patient.¹

G. D., seventy-nine years old, was admitted to the Cleveland Clinic's psychiatric unit for treatment of depression. She spoke Sicilian as her first language and only limited English.

In addition to the depression, G.D. had difficulty ambulating and transferring, and required an attendant when using her walker. Evaluated as a high risk for falls, her chart indicated this level and also that she was an MRE (motion-related events) risk. While at the Clinic, she had already fallen but was lowered to the floor by the attending nurse without injury.²

On the day of her discharge, G.D. was being cared for by a student nurse. After she used the bathroom with the student nurse's assistance, she lost her balance and fell backward, causing severe bruising to her thorax and the breaking of five or six ribs.

The fall was documented in the nursing notes and in the physicians' notes. A physician examined G.D. and determined she was without pain upon movement, had strength in all extremities, and suffered an abrasion on the right posterior thorax. Ice and lotion were applied to the abrasion. No X-rays were taken by the Clinic nor were the broken ribs diagnosed by the Clinic.

G.D. filed a suit against the Clinic alleging that it negligently provided medical care and treatment while there. She also alleged that the Clinic and/or its agents and/or employees intentionally falsified her medical records or inaccurately reported her condition to avoid liability.³ This latter allegation involved the physician notes.

The student nurse's testimony was that she was aware of G.D.'s high risk for falls and followed the MRE protocol. She also testified that she was instructed to assist G.D. at all times. After the patient was finished in the bathroom, the student nurse stood G.D. up and had her hold on to her walker while she checked the door hinge and positioned the wheelchair, which was at the doorway. It was then she saw G.D. start to fall backwards. The student attempted to get aside of the patient to break her fall, but they both fell down together. The student stayed with the patient and applied ice to her side. She described G.D. as "very pleasant", smiling, and crying intermittently.⁴

The Cleveland Clinic's nurse expert testified that a student nurse at the same level of the student

nurse involved in the case would be qualified to care for a patient like G.D.. She also opined that the nursing care rendered at the Clinic met the appropriate standard of care and that a patient can sustain injuries that are not the result of negligence.

The Plaintiff's nurse expert's testimony mainly dealt with the condition of G.D. after she had fallen and been observed by G.D.'s daughter, granddaughter, and caregiver when they came to take her home. They described G.D. as crying, complaining of pain, and her side was all red. Subsequent to the fall, G.D. required much more care and she was unable to enjoy many of her former interests and activities.

The trial court awarded a verdict in favor of G.D. in the amount of \$25,000.00 on her negligence claim. It found that the physician had not documented his notes accurately and awarded G.D. \$25,000.00 in punitive damages.

The Clinic filed a motion for reconsideration of the verdict which was granted by the appellate court. In addition, the decisions of its earlier post-trial motions for a directed verdict in Clinic's favor that were not granted were also vacated.

The appellate court, carefully considering the testimony in the trial court below and addressing applicable law in Ohio, held that the trial court's decisions not to grant the Clinic directed verdicts in their favor and against G.D. were correct.

In short, the appellate court held that the Clinic could be held liable for a patient injury and a facility's legal standard of care is the same whether due to a student nurse's alleged negligence or due to a licensed professional nurse employee's alleged negligence. The punitive damages award was also upheld by the appellate court.

As a student nurse, then, you must keep in mind that:

1. You can be a named defendant in a lawsuit alleging negligence or, as in this case, your conduct can result in liability for the facility;
2. You carry your own potential liability and that of the facility on your shoulders;
3. Your overall standard of care is what other ordinary, reasonable and prudent graduate nurses would do in the same or similar circumstances in the same or similar community;
4. Knowing the facility policies and procedures when providing care is essential;
5. A thorough knowledge of your patients' care requirements is vital and care and treatment must be provided within those requirements;
6. Documentation of any patient incident must be included in the patient's record and be accurate, complete, and timely;
7. If involved in a trial in any role, testify truthfully and completely concerning your patient care;
8. A nurse expert's testimony is required from both sides when professional negligence is alleged

(in this case, the appellate court held that the circumstances surrounding the fall were within the “common knowledge and experience of jurors”, so the nurse experts’ testimony was not required); and
9. If you believe you are not capable of caring for a particular patient, inform your nursing instructor, preceptor, and nurse manager of the unit so that your patient is not exposed to an unreasonable risk of harm.

FOOTNOTES

1. *Dimora v. Cleveland Clinic Foundation*, 683 N.E. 2d 1175 (1996).
2. *Id.*, at 1177.
3. *Id.*, at 1176.
4. *Id.*, at 1177.

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