

Nursing Liability in the Emergency Room

Introduction

The importance of nurses in the health care system cannot be exaggerated, and it is almost impossible to imagine an operational health care facility where there are no nurses. Chitty (2005) hails nurses as the backbone of any hospital area and highlights the progress the field has made from the inception time when Nightingale led a band of untrained women to perform nursing duties to the highly professionalized practices exhibited today. Nurses perform in diverse areas, and their work entails provision of critical health care services, midwifery roles, infection control among others. The Emergency Room is one of the places where the input of nurses is especially crucial; it is also a major contributing factor to the success of ER operations. However, the ER presents one of the areas where nursing mistakes can lead to the dire consequences including death of patients.

In light of the grave nature of nurses' liabilities in the emergency room, a research is strongly recommended to outline the liabilities and, perhaps, come up with preventive measures against negligence and probable disregard of nurses' help. This paper sets out to describe the potential nursing liability issues that are inherent in an emergency room setting. A detailed discussion shall be undertaken to highlight the various consequences that may arise because of a nursing liability issue. A concise description of key steps nurses should take in the ER to minimize liabilities.

Potential Nursing Liability Issues in the ER

Liability issues in nursing come in various forms. ER nurses are taxed for sterilizing the room, and any infection that may befall the patient can be blamed on the nurse. Nurses are also charged with the delivering of doses of medicine to the patient as prescribed by the physician in charge. Any deviation from the recommended dosage

or missing the same can lead to the nurse being charged for neglect. Staunton and Chiarella (2003) state that in a case where the nurse fails to advise the ER doctor on a critical observation, which results in the deteriorating of the patient's condition, the nurse may be deemed to be negligent, thus, leading to legal reprise. In cases where the patient has to be transferred from one bed to another and an accident occurs in the process, nurses usually held responsibility and are deemed negligent as Brooke (2005) elaborates in her research.

From the above-mentioned liability issues, negligence stands out as the most prevalent and costly issue that nurses and the hospital experience. A look at the media highlights the bleak reality in the form of looming threats of litigations that nurses stand prone to, should they be suspected of negligence. A growing of legal firms, offering to sue nurses on patient's behalf, points to the increase of cases of alleged negligence.

Case of Aaron Sibley Vs Borgess Medical Center.

In this case, the plaintiff, Mr. Aaron Sibley sued the Borgess Medical Center where he had been admitted in the ICU (Tammelleo, 2008). Mr. Sibley was admitted to the ER of the hospital after he complained of chest pains. He was later admitted to undergo medical observation unit prior to surgical operations. The plaintiff alleged that he illuminated his call button severally and advised the nurse of his bleeding catheterization site to no avail. The nurse thereafter withheld the information from the attending doctor in the emergency room, thus, delaying proper treatment, which Mr. Sibley felt he could have received immediately, had the nurse been forthcoming with the information.

Mr. Sibley, thus, sued the hospital alleging gross negligence against him. In addition to this claim, he further accused the institute of breach of contract and fraudulence, since he felt that vital information had been concealed by the nurse. Mr.

Sibley's suit was dismissed by the court on the basis that it was a medical malpractice suit as opposed to the negligence case. However, the court did concede that Mr. Sibley was mistaken.

Despite the fact that the court rulings were in favor of the hospital, the nurse's prospects of employment following the suit were endangered not to mention the tarnished image of the hospital. The legal costs incurred in the case were also substantial owing to the long period of time (4 years) that the litigation took. With this in mind, it would be astute to document steps that can help the nurses to minimize any kind of liability in the emergency room.

Key Steps to Minimize Liability in the Emergency Room

Various steps should be undertaken by nurses to reduce their liability and subsequent litigation that may arise. Lyer (2001) contends that the lack of patient education is one of the major causes of patient dissatisfaction with nurses and, hence, arbitrary suing. This status quo can be alleviated by increasing patient's understanding through offering of relevant information they may need, as well as making them feel involved in the proceedings that concern them. Nurses should further ensure that they assess the patient's condition to see if it has altered or deteriorated on each visit.

Keeping of articulate records of patients handling also leads to increase in credibility of the nurse and in cases, where the nurse may be sued, these documents will act as evidence that would be hard to refute. The high demands placed on time and knowledge of ER nurses create an environment, whereby mistakes can easily be made by the overly pressured nurse staff (Lyer, 2001). This is the case when nurses should ensure that they avoid burning themselves out by taking mandatory breaks and ensuring that they are psychologically and physically fit. This can be done through regular exercises and proper diets.

It should be noted that in some cases nurses liability arises as a result of limited information or outright ignorance on the part of the nurse. In such cases supervision by seasoned nurses or doctors can lead to an avoidance of mistakes. Proper delegation of authority also ensures that only qualified personnel are put in charge, thus, further reducing the risk of liability. It has been proposed that hospitals come up with disciplinary actions to instill more care among nurses in the ER. It should, however, be noted that while threat of disciplinary action to the nurse may appear to reduce liability, it may lead to extreme stress levels and may decrease in productivity, as the nurse goes to extreme measures to ensure that she does not do anything that might lead to legal repercussions (Staunton & Chiarella, 2003).

Conclusion

By looking at nursing liability issues in detail, a deeper appreciation of the matter has been developed. This research paper set out to give a detailed description of various kinds of liability issues that nurses in the emergency room are prone to. The various costs that can arise because of nursing liabilities, such as litigation costs, settling fees and bad publicity for the institute, have been outlined. The list of steps that can help to alleviate the issue has been proposed in an attempt to make the liability issues less prevalent.

While disciplinary actions have been proposed as a deterrent to liabilities, opponents of these stringent actions against medical professions argue that they hinder the real work of physicians and nurses, which is saving lives and restoring health. The steps outlined offer a more productive way of ensuring that nurses' liabilities are reduced for the benefit of all parties.

References

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