

Covenant School of Nursing
Disciplinary Action Summary Assignment
Instructional Module 2

Student Name: Madison Brown

Date: 10/1/2021

DAS Assignment # 1

Name of the defendant: Sherry Calder

License number of the defendant: 619553

Date action was taken against the license: 05/14/2019

Type of action taken against the license: Warning with Stipulations, deferred

On May 1, 2018, Calder discharged a patient who had low blood pressure and a low heart rate after failing to notify the physician. The physician had orders to start a bolus of Lactated Ringers which the nurse failed to administer prior to discharging this patient. The nurse claimed the blood pressure cuff was malfunctioning due to the fact the patient was not experiencing any symptoms related to the low blood pressure. She also confirmed doing many assessments on the patient who also was a registered nurse. The patient informed Calder that her blood pressure was normally low. The CRNA also stated "she did not see any reason to keep the patient if the patient was mentating appropriately and asymptomatic." This gave Calder the impression that it was okay to discharge the patient.

I think the nurse did a good job doing assessments on the patient to ensure nothing was wrong after getting a low blood pressure reading. We are not informed of the patient's blood pressure reading, so how low is low? Was the patients blood pressure that low during the entire stay at the hospital? If the nurse had a reason to doubt the accuracy of the blood pressure cuff, she should have obtained a new cuff and/or taken a manual blood pressure. The report does not inform us if the blood pressure and pulse rate were taken by a machine or manually which would influence the situation. Either way, the nurse should have contacted the physician especially because she was not going to give the bolus the physician had ordered. I also think it was wrong to go off the CRNA's word for patient discharge. The physician should have a say in when the patient gets to leave the hospital. There was a big communication error during this situation, and I don't believe the nurse maintained a professional role by discharging a patient without the confirmation of the physician.

I understand the nurse's thought process for discharging this patient. However, if I were the first person who came across this situation taking place, I would politely ask the nurse for more details about the situation, and I would encourage her to talk to the physician before making any decisions.