

# Covenant School of Nursing

## Disciplinary Action Summary Assignment

### Instructional Module 2

Student Name: [Raleigh Sullivan](#)

Date: [5/4/2022](#)

DAS Assignment # [1](#)

Name of the defendant: [Selma S. Bemister](#)

License number of the defendant: [667484](#)

Date action was taken against the license: [10/27/2011](#)

Type of action taken against the license: [Voluntary Surrender](#)

Use the space below to describe the events which led to action taken against the license. If multiple charges were in play, be sure and cite them, e.g., drug diversion, HIPAA violation, abandonment, forfeiture on student loans, etc.

1. [Gross Negligence: On March 19, 2004, while working as a travel nurse at Mercy General Hospital, Bemister received a trauma patient in the Emergency Department. According to the paramedics, the patient had been assaulted and was complaining of neck pain and paralysis. Bemister briefly assessed the patient and then proceeded to document that the patient had a score of 14 on the Glasgow Coma Scale, was experiencing neck pain, had blood on her lips and face, and could move all extremities equally but had no sensation in the lower extremities. Another nurse came in later for a comprehensive assessment and documented that the patient had been placed on c-spine precautions, had no movement in the right arm or leg, was exhibiting diminished reflexes, and had redness around her neck that was consistent with strangulation. Later, an X-Ray was performed that confirmed the patient's injury and her condition rapidly became critical. The morning after her admission, the patient had to be intubated and was experiencing signs of respiratory distress which led to her being transferred to another hospital. The charges that led to Selma Bemister's disciplinary action are as follows:](#)
  - a. [Failure to stabilize the patient's spine and investigate the patient's paralysis.](#)
  - b. [Failure to report findings to the ED physician](#)
  - c. [Failure to undress the patient so a comprehensive assessment could be done](#)
  - d. [Failure to monitor airway and respiratory status](#)
2. [Unprofessional Conduct: Bemister's conduct in the description found above was considered unprofessional in addition to negligent.](#)

Use the space below to provide a description of measures you think could have prevented any action being taken against the license and/or would have prevented harm to the patient if harm occurred. Consider which universal competencies were violated.

[Although I am not fully aware of the admissions process in the Emergency Department, I do know that the standard of nursing care in this situation would have been to perform a complete head-to-toe assessment immediately upon admission. This would ensure that a complete care plan can be formed and ensure that the patient is stable and is receiving the necessary treatment. Upon finding that the patient was experiencing](#)

numbness, the necessary protocol (c-spine precautions) should have been followed and the doctor should have been notified in a timely manner. Finally, since it was clear that the patient had been strangled and had other serious traumas, the airway and all other injuries should have been assessed, stabilized, and heavily monitored. I believe that if those precautions had been taken, intubation could have possibly been avoided and the patient might not have deteriorated into critical condition.

Use the space below to describe what action you think a prudent nurse would take as the first to person to discover the event described, in other words, you are the one who discovers the patient has been harmed by the nurse or you have discovered the impairment or criminal activity cited in the disciplinary action.

If I had been the nurse to discover this standard of care, I would have immediately reported it to the charge nurse so that the patient could be delegated to someone else. In this case, I believe there was no time to delay adequate attention or care and confronting Bemister might not have produced a timely response. As an advocate for the patient's safety, I would be more concerned about getting them the attention they need than stepping on toes or getting people fired.