

Covenant School of Nursing

Disciplinary Action Summary Assignment

Instructional Module 2

Student Name: Haylea Cowart

Date: 01/12/2023

DAS Assignment # 1 (1-4)

Name of the defendant: Shauna Beth Diggs (Carpenter)

License number of the defendant: 679130

Date action was taken against the license: January 20,2009

Type of action taken against the license: Revoked

The defendant had violated a couple of drug diversion violations while employed through Covenant Health System. The first drug diversion the defendant had violated was withdrawing Darvocet from the medication dispensing system for a specific patient. The defendant had not only wrongly dispensed the medication from the Pyxis, she also failed to properly dispose of any extra medication that was pulled after administering the dose of medication. Along with wrongly dispensing, not properly disposing of waste, the defendant had also not documented any of the steps that she had completed while in possession of the medication Darvocet. On top of wrongly handling a medication for a patient the defendant had also pulled medicine out for herself from the pyxis due to "back pain".

The defendant could have followed the 7 rights of medication, specifically documentation, dose, and time. Not only could she have made sure she completed all 7 of her medication rights of administration she also should have disposed of the medication properly as well as asked a fellow RN to be witness to proper disposal of the medication. The patient was in more harm from her use of drugs than the drug given to the patient because while on the drug she was on she was highly likely to miss any signs and symptoms of overdose or allergic reaction to the medication she was giving her patient. Pulling a medication out for yourself from the medication pyxis puts your patients at a greater risk for harm as you are under the influence of a drug which could possibly cause you to miss signs/symptoms a patient is presenting, or possibly make a wrong medication error for the patient themselves. I feel as though if she would have not used the medication that she had used herself, the whole case of lack of documentation, improper waste disposal, and disregarding the pyxis may not have happened. Not only did she put herself and that one patient at risk all her patients in care during the days that she was on that medication were put at risk.

A lot of universal competencies were violated that led to the defendants' license getting revoked. Not only did she disregard the 7 rights of medication administration, but the defendant was also on medications herself that could alter her judgement and ability to care for her patients. The defendant also failed to regard the procedures involved in waste disposal of medications that were set in place of the facility that she worked out. The defendant was suspected of doing these acts to help the

patient at hand with the cost of medications, which in theory is a good human act of kindness. But regarding medicine that is not what you want to do at all to be a good human in your nursing role, she could have easily allowed the patient to overdose or cause serious long-term damage. There are so many things that can go wrong from lack of documentation of medication as well as proper medication administration in general. There are policies set in place for reasons to make sure all your patients stay safe and are taken care of in the best way they possibly can be. The respondents' careless actions of taking medication herself while being in her nurse role violates so many universal competencies. During the use of medication, it can alter her communication skills, professionalism, safety procedures, standard precautions, and critical thinking.

If I was the first nurse that noticed a patient was put in harms way because of actions of a nurse, I would go talk to the charge nurse that is on the floor. I would also ask about the non-appropriate disposal of the medication used by the nurse, or the report of when all she had given the medication to the patient as I had not seen it documented within the system. If I noticed her showing signs of not being able to make sound decisions or care for patients properly due to the medications that she was taking herself would be to ask how she is feeling. I would see if the nurse needed any help with the workload or if she would need some help extra lifting her patients when need be. As she was pregnant and had been complaining of back pain I would offer to help as much as I could given my own workload and patient safety, while also letting the charge nurse know that they may want to watch the respondent and see if they notice anything off. I also would have recommended the respondent seeing a physician if she would have mentioned the back pain to me instead of taking it into her own hands even though she is a nurse. As nurse's we are responsible for people's lives every day and in the words of Mrs. Davis "that is someone's someone and we want to care for them as we would want our someone cared for". Not only are we responsible for keeping our patients safe and give them the best care but also ourselves because if we are not properly taken care of, we can't give someone else our all.