

Covenant School of Nursing
Disciplinary Action Summary Assignment
Instructional Module 2

Student Name: Davy Gomez

Date: 3/31/23

DAS Assignment # 2

Name of the defendant: Cherie Yvette Adams

License number of the defendant: 536967

Date action was taken against the license: 8/15/23

Type of action taken against the license: Warning with stipulations

Use the space below to describe the events which led to the action(s) 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.

Adams withdrew Demerol 25mg from the Pyxis at 0307; However, documented the administration of the medication at 0250. On a second separate account, Adams withdrew the same medication and failed to document the administration completely. Thus, increasing the risk of that patient receiving additional doses resulting to a fatal outcome. On another separate account, Adams withdrew morphine 10 mg for a patient but falsely entered another nurse's name and Pyxis code for the wastage of morphine 8mg at 0249 and 0625.

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.

Adams could have prevented these incidents by consistently following great nursing practices. Adams should have documented every medication administration and properly followed the wastage witness policy.

Identify which universal competencies were violated and explain how.

The competencies violated are safety/security and documentation.

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.

Although Adams could have made these mistakes solely on bad nursing practice habits, I would have questioned the possibility of drug diversion. Drug diversion is not uncommon in the medical field. The fact that each of these medications are apart of the opioid class increases my speculations. If I witnessed these errors I would immediately go to my charge nurse. Diversion isn't a victimless crime; both parties are affected. The patient cannot receive correct doses and can potentially receive doses above the therapeutic interval and cause serious and if not, fatal harm.

