

Covenant School of Nursing
Disciplinary Action Summary Assignment
Instructional Module 2

Student Name: Micaela House Date: 01/18/2024 DAS Assignment # __1__

Name of the defendant: JUDY MURRAY

License number of the defendant: 658891

Date action was taken against the license: November 13th, 2019

Type of action taken against the license: License revoked

- *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.*
- *December 19th, 2018, JUDY MURRAY employed as an RN at Houston Healthcare-North, the defendant failed to notify the physician the report she was given at 2200 about the patient's Troponin level that was at 4.26. 0335, nurse was notified that the Troponin level had increased to 11.3. 0410, nurse notified the physician. The rapid response team was called to assess the patient's status. Due to the failure of the nurse's crucial report of the patients Troponin levels, the patient needed a heart catheterization with placement of a stent. The patient was then transferred to the Intensive Care Unit. Due to the nurse's negligence, the patient became more critical. The patient's initial emergency medical care was delayed, which was to prevent any other further complications, and patient's possible life or death.*

- *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.*
 - *Notifying the physician about the high Troponin levels STAT to prevent cardiac arrest*
 - *Notifying the interprofessional care team the nurse worked with that shift to notify the physician if she had a workload to handle and couldn't notify herself*
 - *Nurse should've done proper assessments on her patient, vital signs BP, HR, O2, RR, PAIN, TEMP, auscultate heart sounds, failed to ask patient if he was experiencing any chest pain or discomfort or signs and symptoms of a heart attack*
 - *Double checking blood lab/work on all documentation/charting, ask the lab about the patient's blood work*
 - *Failed to make rounds on patient and their condition*

- *Identify ALL universal competencies that were violated and explain how.*
 - *Critical Thinking – SBAR was not looked at thoroughly or reported correctly in a timely manner*
 - *Critical Thinking – nurse failed to prioritize the tasks/procedures at hand by not reporting the severity of the patient's condition STAT, negligence to patient's status*
 - *Critical Thinking – failed to do proper assessment related to patient's symptoms*
 - *Safety and security (physical) - failed to promote trust, negligence to report*
 - *Communication – failed to narrate or exception charting of findings and report them to the physician or interprofessional team*
 - *Human caring – failed to include patient in their plan of care and spending time with the patient, failed to do rounds on patient*

- *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.*
 - *As a prudent nurse, when a report on the patient was given to me, I would read it carefully and thoroughly and pass it along to the physician of the high Troponin levels as soon as it was stated to me that it was abnormal. I would have done the proper focused assessments pertaining to the patient's conditions such as auscultating heart sounds and lung sounds, vital signs BP, HR, O2, RR, TEMP, PAIN. I would've done frequent rounds on the patient. Check the blood lab work and make sure the interprofessional and I were communicating properly. Re-check blood work often and do the proper interventions ordered to prevent patient going into cardiac arrest. Ask the patient at any opportunity if they were having any discomfort or chest pains. For the patient's safety, make sure they are included in their plan of care and stay with them as much as possible to bring them ease. Communicate thoroughly the situation to the physician and the patient. Keep a very close eye on patient and notify of any changes to the physician and interprofessional team. Re-check blood work or if more labs are ordered, staying on top of vitals, signs and symptoms of the patient.*