

Covenant School of Nursing
Disciplinary Summary Action Assignment
Instructional Module Two

Lillian Bagwell

8/23/24

Das Assignment One

Notice of Disciplinary Action 07/2021

Name of Defendant: Melissa Fennell Berry

License Number of Defendant: 581516

Type of Action Taken Against the License: Revoked

The first instance where action was taken against Melissa Berry was in June of 2015. It was stated that Berry incorrectly documented the amount of Novolin-R2 that was given to her patient, the amount that she gave was more than what the physician had ordered. It is then documented that Berry gave an incorrect amount of Dilaudid and Enoxaparin and failed to accurately document the assessments and interventions that she performed on another patient. She then pulled Morphine out from the dispensing system and administered it to another patient who was not the one it was ordered for. In 2017 Berry was evaluated by a psychologist and it was determined that she was not abusing chemicals or was there any factor that would affect the care she was given to patients. The psychologist determined that Berry was fit to care for patients and she went back to work. She then did not administer the prescribed Insulin to a patient and documented it incorrectly. To a different patient she accidentally administered Dilaudid then discontinued it and correctly started morphine, she then incorrectly pulled more medication and documented it incorrectly. She was then required to complete remedial education courses

because of the failure to document medication administration correctly. She did not complete the education courses so she was asked to and was asked to appear in court which she also failed to do. After she did not complete the steps necessary to keep her license in good standing, her license was revoked.

I believe that Berry did not perform the 7 rights of medication admin and did not check the medication three times before she administered it. If she had done these essential steps it could have prevented the medication errors and she would have documented correctly if the medication was administered correctly. However, harm did not occur to any of the patients it very easily could have. Not only were the patients either getting the incorrect dose or not receiving the medication at all, but she was also administering medications to patients that were not prescribed to them. This could have caused many complications for the patient. This also puts other nurses at risk because they would have administered later medications based on what Berry had documented. This could cause excess medication to be administered or interactions with other medications that would not be realized.

Ms. Berry violated many of the universal competencies. She violated the safety and security of her patients by not verifying the orders given by the physician and by not covering all of the 7 rights of the patient. This could have caused physical harm to her patients. She also violated documentation, she incorrectly documented medication administration and the assessments she performed on her patients. This not only could harm her patients but it also interferes with other nurses who are caring for those patients because they have to go off of what she documented was given to the patients. She also did not use critical thinking. She did not use the SBAR to determine what the physician had ordered was correct with what she was giving to her patients and just overall failed to think and act like how a professional nurse should.

I think that a prudent nurse should immediately notify the charge nurse if she sees that medication has been administered incorrectly or has been documented incorrectly. She should then also notify the physicians to guarantee that there was no damage done to the patient and that the correct medication was given to fit the needs of the patient. If a fellow nurse does not report this immediately then they are just as responsible for the harm to that patient as the nurse who is acting in error is. If a nurse notices incorrect practice it is her responsibility to advocate for that patient and correct the other nurse.