

Covenant School of Nursing

Disciplinary Action Summary Assignment

Instructional Module 2

Student Name: Andrea Fabela

Date: 10/30/2024

DAS Assignment # 2

NOTICE OF DISCIPLINARY ACTION – 10/2021

Name of the defendant: Michael Jesse Anderson, RN
633555

License number of the defendant:

Date action was taken against the license: 6/8/2021

Type of action taken against the license: Revoked

Michael Jesse Anderson's had one major unprofessional action could have led to many severe complications while in the clinical setting: revoking his license. The unprofessional action included failing to intervene when the patient's respiratory rate continued to elevate, and oxygen saturation dropped to the 80s during his shift. Michael's poor actions could have resulted in injuring his patient from significant hypoxia complications, which could also lead to confusion, tachycardia, and respiratory distress.

If a patient's oxygen level starts to drop, the first action is to sit up your patient and administer oxygen. As a nurse, you want to take action and help your patient with whatever it is because it is your job, especially if they are low on oxygen. Nurse Michael failed to intervene with their patient when the respiratory was high and oxygen levels were decreasing. Nurse Michael states that he had overslept, which made him late to work, and was in a hurry, causing him not to take the patient's vital signs or pain levels. Nurse Michael also stated that the patient had low oxygen due to exertion, and once back in bed, the oxygen level would go back up. In this situation, it seems like Nurse Michael would rely on the patient to lay in bed and catch

their breath instead of monitoring a complete set of vital signs and assessing for pain. As for the increasing respiratory rate, it could have caused the patient to go under cardiac arrest. The poor decision Nurse Michael decided to make could have led to injuring his patient, creating complications of hypoxia, and causing the patient to have confusion, tachycardia, and respiratory distress. None of these symptoms are what a nurse wants for their patient or the patient for themselves. Oxygen complications can be severely life-threatening. Nurse Michael should have monitored this patient more frequently and attended to assess them more regularly.

In conclusion, Nurse Michael's poor action resulted in his license being revoked, all due to him letting his emotions get to him when they should have been forgotten the moment he walked into the hospital, which could have led to many severe complications, including death towards the patient.

Nurse Michael's action could have easily been avoided. Arriving late to shift due to oversleeping is standard in every job field; it happens; however, being a no-show or not calling in is a completely different story. In Nurse Michael's situation, he still had the correct mindset to care for his patients even though he arrived late to his shift. However, once he entered his unit, the frustration, anger, and stress should have been wiped out of his mind, and his number one priority should be treating his patients. Nurse Michael could have avoided his failure not to have the time to collect complete vital signs from patients by asking the CNA if they had collected them. If not, he could have nicely asked for help from a CNA or another RN since he probably has not done report due to running behind. Vital signs are the first thing required to be done at the beginning of every shift because you need to know what is happening with your patient. In the medical field, all nurses must help each other; no one should struggle alone. Another way this could have been avoided is by checking up on the patient after exertion, even though nurse Michael said it's how the patient feels. Nurse Michael should not have thought of not bothering to check on patient since it's a "normal" feeling for them. Anything can change within minutes. You should always access a low oxygen level with an increased respiratory rate because it can lead to severe complications.

Competencies that were violated were Safety and security, communication, critical thinking, documentation, and professional role.

The RN violated **safety and security** by not having professional interaction with the patient and not acknowledging their signs and symptoms.

Documentation was violated because there was no documentation regarding the patient's morning vital signs or pain. Not only is this for the nurse but the doctor or physician does not have any information regarding their patient and has no idea what the patient is going through.

Communication was violated when the RN did not intervene to communicate with the patient regarding their pain level. The RN should have asked the patient about their pain and location and ranked them on a scale from 1 to 10.

Critical thinking was violated when the RN did not intervene to assess new vital signs after the patient had an exertion. Whether how the patient feels typically after exertion, new vital signs could have avoided many future complications.

Professional Role was violated when the RN did not assess a patient with low oxygen levels and a high respiratory rate when it should have been a priority for the RN.

If I were the first to notice Nurse Michael's unprofessional action, I would assess the patient myself. My first action would be administering the patient under oxygen and taking a complete vital sign set. My job would be to treat the patient and help lower their respiratory status and raise their oxygen level before it can cause more severe complications. After I have treated the patient and noticed improvement with stats, then I would go talk to the RN and remind him how our emotions can affect us when it comes to treating our patients and how it is important to forget about that emotion during our shift and can worry about them after leaving the unit. There is no reason to put our patients at more risk when they already need medical help.