

Covenant School of Nursing

Disciplinary Action Summary Assignment

Instructional Module 2

Student Name: Renya Robertson

Date: 01/23/2025

DAS Assignment # 1

Name of the defendant: Imelda B. Belington, RN

License number of the defendant: 611987

Date action was taken against the license: 08/2/2022

Type of action taken against the license: Revoked

Imelda B. Belington, a registered nurse of the state of Texas, had two formal charges taken against her. These charges occurred on the twelfth through thirteenth days of October in the year 2019. These charges led to her license being revoked in the year of 2022. Imelda B. Belington was taking care of a patient in the Intensive Care Unit and purposefully documented the dose of Fentanyl and Midazolam incorrectly. The first charge states that Belington's patient had part of a twenty-milliliter syringe of Fentanyl hooked up at the beginning of her shift, and that Belington withdrew an additional forty milliliters, but only documented twenty-four milliliters. This charge goes on to state, "...there was not any Fentanyl documented as being administered or wasted on the next shift, leaving the remaining Fentanyl that Respondent removed unaccounted for." The second charge states that Belington failed to accurately document her administration of Midazolam. Belington double documented her administration of Midazolam by, as stated in the charge on pg. 4 through 5, "...two (2) infusions from bag #1 to the antecubital fossa of the patient at 1959 and 2000, and she documented two (2) infusions from bag #2 to the antecubital fossa of the patient at 0359 and 0400." At the end of both these charges the document states, "Respondent's conduct was likely to injure the patients, in that subsequent care givers would rely on her documentation to further medicate the patients, which could result in an overdose." The end statement to these charges leads me to believe that Belington purposefully did not include her administration of Fentanyl and Midazolam correctly for the nurse on the next shift's administration, of the two controlled substances, to overdose the patient.

Belington seems to have been intentionally trying to overdose her patient by abusing her power of medication administration of controlled substances, so in order to prevent this situation I would go further into depth about the importance of having a witness for the waste of said controlled substances. Every single time you use a controlled substance the remainder of what is not administered should be wasted and be seen wasted by a witness, such as another registered nurse. The charges of this case do not go into depth on the matter of her wasting the remainder of what she did or did not use, but it states that the medication was not documented as being administered, nor was there documentation of her wasting it.

Belington violated many of the universal competencies such as Safety and Security, both physical and emotional, Communication, Critical Thinking, Documentation, Human Caring, and Professional Role.

Safety and Security (Physical) was violated when Belington did not practice the 7 Rights for Medication administration by not providing the right dose of medication. I am also assuming she did not explain reason

to her patient for the use of Fentanyl and Midazolam, given that the patient would have been heavily sedated on both drugs and in the Intensive Care Unit.

Safety and Security (Emotional) would be the second one that she violated by not promoting trust and respect, which falls under this universal competency, and by intentionally trying to harm her patient, Belington broke all trust and respect with her patient.

Communication is the third one she violated. Belington would have not correctly taught about medication safety in an honest matter by continuing to use the medication in a harmful way.

Critical Thinking would have also been lacked by Belington due to her decision making and prioritizations on her shift. Belington made the decision to harm her patient and prioritized hiding her misuse of Fentanyl and Midazolam by inaccurately documenting both medications, which are both infractions of nursing.

Documentation is a significant one that was defied. Belington purposefully left out the administration of controlled substances in her documentation, leading the next nurse on shift to administer an amount of the medications that would cause the patient to overdose.

Human Caring was also violated, by Belington not treating her patient with respect and dignity. Had Belington had the respect and dignity for her patient that nurses are required to have, she would not have purposefully tried to harm the patient.

Professional Role was lastly and evidently violated by Belington because she did not manage equipment and supplies efficiently, but rather used them to her disposal of a criminal act.

If I were the nurse to have discovered what Belington had done to the patient, I would act with integrity and honesty by immediately approaching the supervisor with suspicions of the matter. This case does not state whether this patient died due to her actions, but it does state, at the end of each charge, "... subsequent care givers would rely on her documentation to further medicate the patient, which could result in an overdose." So, in the scenario where, I as a nurse, found out about Belington's actions, I would want to act as soon as possible to prevent the patient from overdosing. What Belington did to this patient is not only criminal and unethical, but the absolute opposite of what a nurse should be. As a nurse you are taught to have integrity and treat your patients with the utmost respect and compassion. Belington made an enormous violation by trying to harm her patient, when she should have been helping them.