

Covenant School of Nursing
Disciplinary Action Summary Assignment
Instructional Module 2

Student Name: Cameron Cloud

Date:4/11/2025

DAS Assignment # 2 _____

Name of the defendant: Melissa Carolyn McCoy, RN

License number of the defendant: RN/802081 LVN/187693

Date(s) and BON decision(s) taken against the license: Probated Suspension 4/8/2021

Type of action(s) imposed to retain or regain licensure, if applicable (ex.: warning with stipulations, etc.)

Nurse McCoy was placed on probated suspension for 2 years and must fulfill these requirements in order to be released from the probation:

Must comply to the Nursing Practices Act, Texas, Rules and Regulations Relating to Nursing Education, Licensure and Practice.

Must complete the Boards online course, "Understanding Board Orders" and submit the verification of completion within 1 year and submit all verification.

Remedial action courses that have to be completed within a year.

- I. Board approved course in Texas nursing jurisprudence and ethics
- II. A board approved course in medication administration
- III. Aboard approved course in physical assessment
- IV. A board approved course in nursing documentation
- V. The course "sharpening critical thinking skills"

Nurse McCoy must also work in a clinical setting for 64 months and must notify present and future employers of the order within 5 days of receipt. Each employer must submit a "notification of employment" form to the board within 10 days of receiving this order and all future employers should send this form within 5 days. Must be under direct supervision for 4 quarters and indirect supervision for the remainder of the probation period. She must have nursing evaluations submitted as well.

- *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 each of them, e.g. drug diversion, HIPAA violation, abandonment, etc.*

On 9/9/2020 Melissa McCoy had multiple occurrences of unprofessional actions that led these disciplinary actions. These actions include failing to administer a Lactulose enema, failed to intervene to expiratory wheezing, failed to administer IV potassium, failed to assess vital signs and/document assessment.

Nurse McCoy did not administer a Lactulose enema ordered for 0700 to the patient that has liver cirrhosis. This could seriously injure the patient by causing a decline in brain function and hinder level of consciousness.

Nurse McCoy failed to administer IV potassium at 0945 as ordered. The patient had a potassium level of 2.9. The patient ended up in the ICU with respiratory distress and low potassium.

Nurse McCoy did not complete and or didn't document vital signs or O2 Sat. This did injure the patient by causing the patient to go into respiratory distress and had altered mental status.

Nurse McCoy did not intervene when the patient had expiratory wheezing at 0800 and wasn't able to take medications due to their mental status being altered at 0900. The RN waited till 0945 to contact the providers. This led to the patient to experience respiratory distress with an O2 level of 88% at 1050. This caused the patient to have to be intubated and on a mechanical ventilator due to her lack of critical thinking and time management.

- *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.*

In this case multiple measures could have been taken to prevent all actions taken against this RN. She should have correctly and accurately done a vital signs assessment and documented all vitals. If she would have done this, she would have known the patient was experiencing wheezing, low O2 status, and altered mental status. She also should have administered all medications that were ordered which would have probably saved most of these actions from being taken against her. She should have quickly intervened when the patient was in respiratory distress by administering O2.

- *Identify ALL universal competencies (4-5) that were violated and explain how in detail to reflect your understanding and importance of the universal competencies.*

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

Safety and security was violated when the RN didn't do a proper physical assessment or vital signs on the patient. She further violated it by not administering medication that was ordered by the physician. She also didn't administer O2 when the patient was experiencing wheezing and trouble breathing.

Critical thinking was violated when the RN did not complete an SBAR or intervene when the patient's O2 was critically low causing the patient to experience respiratory distress. She also didn't assess the patient or administer medication as ordered.

Communication was violated when the RN didn't contact a provider for 45 minutes when the patient had expiratory wheezing and altered mental status. She should have done this immediately.

Documentation was violated when the RN didn't document mental status or respiratory status if she did complete an assessment on the patient.

Professional role was violated when the RN was neglectful in treating this patient. She did not help the patient when their O2 was 88% and didn't perform a correct assessment or VS for them leading to be placed in ICU and on a ventilator.

- *Use the space below to describe what actions you think a prudent nurse would take as the first 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.*

If I was the first person to discover these events, I would first raise the head of the bed and put the patient on O2. Then I would call a charge nurse and extra help for this patient. I would figure out which meds have been administered and since they weren't call a provider to see if these meds should be given now due to the patient's status. I would then report the RN to the board of nursing.