Case Study: Improper management of medication, failure to monitor medication related blood levels

Indemnity Payment: $0
Legal Expenses: $65,000

Summary

Note: There were multiple co-defendants in this claim who are not discussed in this scenario. Monetary amounts represent only the payments made on behalf of the nurse practitioner. Any amounts paid on behalf of the co-defendants are not available. While there may have been errors/negligent acts on the part of other defendants, the case, comments, and recommendations are limited to the actions of the defendant; the nurse practitioner.

The patient was a 37 year-old female with a past medical history of chronic pain related to chronic sinusitis and multiple sinus surgeries, anxiety, panic attacks, sleep difficulty, depression, and opioid abuse. Her chronic pain was being managed by her otorhinolaryngologist and infectious disease practitioner due to the retirement of her pain management physician. The physicians referred the patient to the defendant nurse practitioner for pain management because they had received letters from the patient’s medical insurance provider warning them about the patient’s prescriptive habits and potential opioid and methadone abuse. The referring physicians neither shared the warning letter with the defendant nurse practitioner nor made her aware that the patient had been obtaining duplicate prescriptions from multiple medical providers.

On the day of the consultation, the defendant nurse practitioner obtained and documented a thorough list of the patient’s prescription use and past and current medical history. A urine analysis was performed to inquire about the patient’s methadone level which was noted as appropriate for the patient’s height and weight and reflected that patient was taking methadone within the normal range. The defendant nurse practitioner did not observe any "red flags" which would have required further investigation before prescribing methadone and had the benefit of a drug screen that was done on the patient three weeks prior to the consultation.

The defendant nurse practitioner prescribed the patient Methadone for the next 28 days and had the patient acknowledge a narcotics and medication regimen compliance agreement.

The patient was found dead 15 days after her consultation with the defendant nurse practitioner and the autopsy revealed the cause of death was methadone toxicity.

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Resolution

The plaintiff's expert opinions from various nurse practitioners were critical of the defendant nurse practitioner prescribing of methadone for the patient due to her recent history of opioid abuse.

Defense expert opinions found that the nurse practitioner's actions at the time of the consultation were within the standard of care. The methadone toxicity levels and opioid level led the medical examiner and subsequent experts to the opinion that the patient may have ingested methadone received from another source besides the pain management clinic.

There were several co-defendants in the case, including the referring physicians and several local pharmacies. Given the positive expert opinions, a motion for summary judgment was filed on behalf of the defendant nurse practitioner and granted.

Risk Management Comments

The nurse practitioner made very detailed entries in the patient's medical record about the patient's use of the opiate prescription and the fact that the patient was instructed and educated on only utilizing the prescriptions provided by the pain management clinic. The insured contacted the referring physicians for copies of the medical records, but did not receive them prior to the patient's appointment.

Risk Management Recommendations

- Obtain a thorough and accurate history prior to providing patient with treatment or medications.
- Prescribe medication in compliance with state nurse practice act, state prescriptive authority, authority for nurse practitioners, and employer policies and protocols.
- Educate and document patients regarding their responsibilities for adhering to medication and treatment regiments, including lifestyle modifications as well as the risk of noncompliance.
- Remain current regarding clinical practice, medication, treatment and equipment utilized for the diagnosis and treatment of acute and chronic illnesses and conditions related to my clinical specialty.

Guide to Sample Risk Management Plan

Risk Management is an integral part of a healthcare professional's standard business practice. Risk Management activities include identifying and evaluating risks, followed by implementing the most advantageous methods of reducing or eliminating these risks — a good Risk Management Plan will help you perform these steps quickly and easily!

Visit www.nso.com/riskplan to access the Risk Management Plan created by NSO and CNA. We encourage you to use this as a guide to develop your own Risk Management Plan to meet the specific needs of your healthcare practice.