DID THE NURSES' NEGLIGENCE CAUSE THE PLAINTIFF'S QUADRIPLEGIA?

written by Nancy Brent | November 4, 2025

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Facts of the Case

The male patient's car accident resulted in a spinal cord injury. He was taken to a hospital via ambulance for treatment and an odontoid screw was placed to treat his spinal cord injury.

The patient was discharged home and was told to return for a follow-up appointment in two weeks.

Shortly after his discharge, the patient experienced "increased pain in his neck and sudden numbness in his extremities." He called 911 and was taken back to the hospital's ED via ambulance.

The numbness was noted in all his extremities by the ED triage nurse. The pain in his neck and back pain increased to a level of 9 out of ten, and a CT scan showed that the screw had shifted from its original placement.

A few hours after his admission in the ED, a nurse noted the patient's neck pain increased to a level of ten out of ten. She did not, however, report this change to another health care team member.

After an initial neurological assessment, a PA admitted the patient to the Neuro ICU and ordered hourly neurological evaluations and an MRI.

He was again assessed by a nurse in the ICU who noted that the patient only had "flicker of muscle" movement in his extremities. This finding was not reported to anyone else on the healthcare team.

Hourly neurological evaluations were conducted during which the patient's condition continued to deteriorate, including a *total loss* of movement in his extremities. Later, the patient suffered "respiratory distress, required endotracheal intubation and mechanical ventilation."

The next day the patient was transferred to another hospital where he underwent emergency surgery and was later transferred to a rehabilitation hospital.

Patient Files Lawsuit

The lawsuit against the nurses, the medical center, the physicians, and the PA alleged professional negligence related to his treatment of spinal cord injuries that resulted in his quadriplegia.

The physicians and the PA were dismissed from the lawsuit, resulting in all the nurse defendants and the medical center.

Among other allegations, he alleged that the nurses:

- Provided medical and nursing care and treatment below the <u>standard of care</u> in the community, thus increasing the risk of harm to him
- Failed to properly evaluate his during his initial presentation to the ED
- Failed to communicate his condition to other appropriate health team members
- Permitted his spinal cord injury to progress to quadriplegia

The patient's nurse expert testified as to the applicable standard of care and a physician testified as to the link between the failure to uphold the standard of care and the cause of his injuries.

The nurses moved for <u>Summary Judgment</u>, alleging that the patient had not offered expert testimony establishing a causal relationship between the nurses alleged professional negligence and his injuries. The patient alleged his experts had met their burden of proof.

Decision of the Court

The Court reviewed the testimony of the experts and concluded that the nurse expert did meet the state requirement that governs a deviation from the standard of care. As a result, the patient's nurse expert testimony supported the nurses deviation from the standard of care when they provided care to the patient.

However, the Court opined, the physician expert's testimony did not support that the nurses' breaches of their standard of care proximately cause the patient's quadriplegia, emphasizing that the physician's testimony as to this matter was "speculative."

<u>Guidelines of This Case for Your Nursing Practice</u>

This case illustrates once again the importance of <u>expert witness testimony</u> in granting a verdict in one's favor. Although the patient's nurse expert witness' testimony supported a breach of the nurses standard of care when they provided care to the patient, the physician's testimony did not support a connection between that breach and the patient's guadriplegia.

A second emphasis of this case is the pivotal role communication among and between the health care team has. A recent <u>study</u> illustrates this importance.

As a nurse in whatever role, you have an obligation to notify others on the team when a change in the patient's condition occurs.

This communication duty includes not only notification to others but also documenting in detail to whom you notified, the time notified, the response of the health team member(s), interventions initiated due to the change, and the patient's response.

Note, too, that the physicians and the PA were named as defendants in the suit but were dismissed as defendants, leaving only the nurses and the medical center (under the theory of *respondeat superior*, most likely) as defendants.

There is rarely one defendant named in a lawsuit alleging professional negligence. As a result, you may be named as one of several defendants. Being able to obtain a dismissal from that lawsuit due to no negligence on your part is possible, but the facts of your conduct surrounding the basis of the lawsuit and the patient's injury will be essential to successfully being dismissed from the suit.

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