

Los Angeles Cedars-Sinai Hospitalists Hit with Decubitus Ulcer Lawsuit

Effective patient care demands a coordinated approach to prevent burnout and manage risks, particularly in addressing hospital-acquired pressure injuries

SANTA BARBARA, CA, UNITED STATES, October 3, 2024 /EINPresswire.com/ -- "Sick patients require constant care. The risks of fatigue and burnout mandate that one person cannot and

- On January 16, 2023, Defendant Nichole Williams, M.D. noted that Plaintiff Kirk
 Martin had an "Impaired Skin Integrity/Wound Coccyx duration 2 days." No preventative care was ordered.
- 43. Despite this diagnosis, no immediate preventative care was ordered. And even though Plaintiff Kirk Martin was developing a pressure injury, he did not receive a wound consultation until January 26, 2023, when his wound was evaluated by Defendant Cynthia Yee, RN, who provided treatment.

Allegations included in Case No. 24STCV00619 filed in the Superior Court of California, County of Los Angeles

should not do it all. To enable the best outcomes and the most sophisticated management, a reliable system of care is needed," asserts Dr. Bruce Gewertz, MD. Department of Surgery Cedars-Sinai Medical Center, Los Angeles.



We are seeing hospitalists deferring care for wounds to nursing staff or nursing wound care specialists. That is a fatal error for patients who suffer hospitalacquired Stage IV decubitus ulcers.""

Greg Vigna, MD, JD

Dr. Greg Vigna, national malpractice attorney, states, "As a retired physician who practices hospital medicine, newly identified pressure injuries require immediate notification by nursing staff to the attending physician, timely physician assessment of the wound, physician investigation of the occurrence with nursing staff to identify how the pressure injury occurred, and coordination of care by all those involved in patient care to reduce the risk of ongoing injury."

Dr. Vigna adds, "When acting as the attending physician, hospitalists are responsible for the initial evaluation of all

surprises that arise during a patient's hospitalization, and a 'Never Event' is such an occurrence that requires the attending physician to act as the Captain of the Ship. When that doesn't occur with hospital-acquired wounds, bad outcomes will continue to happen."

Read Dr. Gewertz's editorial states that the Captain of the Ship model "does not contribute to good patient management": https://jamanetwork.com/journals/jamasurgery/article-abstract/2479436

Allegations included in case number 24STCV00619 filed in the Superior Court of California, County of Los Angeles (see photo).

Dr. Vigna adds, "We are seeing individuals with hospital-acquired deep Stage III and Stage IV decubitus ulcers caused by poor nursing care across the Country. We are also seeing hospitalists who are simply deferring care for hospital-acquired wounds to nursing staff or nursing wound care specialists. That is a fatal error for patients who suffer hospital-acquired Stage IV decubitus ulcers."

<u>Greg Vigna, MD, JD</u>, is a national malpractice attorney and an expert in wound care. He is available for legal consultation for families and patients who have suffered decubitus ulcers due to poor nursing care at hospitals and nursing homes. <u>The Vigna Law Group</u>, along with Ben C. Martin, Esq., of the Martin Law Group, a Dallas Texas national pharmaceutical injury law firm, jointly prosecute hospital and nursing home neglect cases that result in bedsores nationwide.

To learn more, visit the Decubitus Ulcer Help Desk.

Case Number: 24STCV00619

Superior Court of California, County of Los Angeles

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