

- 1315 Injectable hydromorphone (2mg/ml) taken from ADC. Dose recorded as 1mg (correct). No record of wastage in ADC (should have been recorded 1mg). Not recorded on MAR. Of note patient was off of the unit at this time.
- 1715 Injectable hydromorphone (2mg/ml) removed from ADC. Dose recorded as 2mg (dose incorrect, order was for 0.5-1mg Q4H PRN). Not recorded on MAR.
- 1800 Ibuprofen order on MAR. Nurse covering for Ms. White's break writes "off unit" and does not administer.
- 1855 Writes in nurses' notes "patient returned from day pass".

January 11, 2021 – Patient X. Z.

- 0745 Oral hydromorphone (1mg) removed from ADC. Correctly administered and recorded on MAR.
- 0830 Injectable hydromorphone (2mg/ml) removed from ADC. Dose recorded as 0.2mg. Ordered dose was 0.5-1mg. No record of wastage in ADC (should have been 1.8mg).
- 1315 Patient receives 2mg oral hydromorphone (by nurse covering). Correctly dispensed, administered and documents on MAR. Patient reports increased pain documented as 8/10 and denies receiving a dose of injectable pain medication that morning.
- 1600 Injectable hydromorphone (2mg/ml) removed from ADC. Dose recorded as 1mg. No record of wastage in ADC (should have been 1mg). Dose recorded on MAR. Patient not due for more medication until 1715 (q4h).

Over the past 3 months I have received several complaints about Ms. White and her nursing practice. I have been advised that Ms. White's assigned patients frequently report to other nursing staff their pain has not been effectively treated during her shift. Ms. White frequently offers to administer narcotics to co-workers' patients, and staff have grown suspicious. It has also been reported to me that she is hard to find while she is on shift. For example, the nurses who work with her have reported that Ms. White regularly "disappears" for extended periods of time; she is often seen coming out of the visitor bathroom on the unit, and leaving the unit for a "smoke break" following PRNs. Ms. White has also been picking up more overtime than any other nurse on the medicine unit, while regularly using sick time.

Once our investigative findings were reviewed with Ms. White, her union steward requested a caucus. The meeting resumed about ten minutes later and the steward indicated the meeting was over; the meeting was adjourned. After the meeting Ms. White was excused from nursing duties and placed on

leave pending the outcome of a medical assessment. The union steward informed us that Ms. White is unwell, and the union plans on working with her to obtain an assessment to determine if she is suffering from a health condition.

Please don't hesitate to contact me if you require further information.

Sincerely,

Ms. Ranjeet Black

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