

STATE OF FLORIDA
DEPARTMENT OF HEALTH

FILED
DEPARTMENT OF HEALTH
DEPUTY CLERK
CLERK *Vicki R. Keman*
DATE 7/30/02

BOARD: Medicine
CASE NUMBER: 2000-02190
COMPLAINT MADE BY: Presuit (H.D.)
COMPLAINT MADE AGAINST: Nancy Griff
12983 Southern Blvd., #206
Loxahatchee, Florida 33470
DATE OF COMPLAINT: March 27, 2000
INVESTIGATED BY: David A. Dimon
Med. Mal. Inv.
REVIEWED BY: Kim M. Kluck,
Senior Attorney
RECOMMENDATION: Dismiss (4099)

NOTICE OF DISMISSAL/CLOSING ORDER ON RECONSIDERATION

THE COMPLAINT: Complainant alleges that the Subject of the investigation failed to perform a legal obligation and violated an order of the Board of Medicine, in violation of Sections 458.331(1)(t) and (m), Florida Statutes, in that she failed to practice medicine with that level of care, skill, and treatment which is recognized by a reasonably prudent similar physician as being acceptable under similar conditions and failed to maintain adequate medical records.

THE FACTS: On or about December 2, 1997, Patient H.D., a twenty year old female, voluntarily presented to Columbia Hospital with complaints of increasing depression over the past two weeks and suicidal thoughts.

During a psychosocial assessment, Patient H.D. reported to Lee Mentis, a social worker, that she hears voices insider her head, "my own voice", telling her to kill herself or go back to sleep.

Patient H.D. reported to Johanna Guy-Wilson, another social worker, that she was not going to work, was sleeping all day, had low energy levels, had a poor appetite and was feeling hopeless and helpless. Patient H.D. also reported that she was hearing voices which were telling her "good and bad things".

Patient H.D. was admitted to the adult mental health services unit with a provisional diagnosis of severe depression. Upon admission to the unit, Patient H.D. yelled that she didn't want to stay there and wanted to go home and she refused to cooperate with staff members. The Respondent was notified of Patient H.D.'s behavior and ordered that Patient H.D. be moved to the acute unit. Patient H.D. was given Ambien, a hypnotic, and Ativan, an anti-anxiety medication.

On or about December 3, 1997, Patient H.D. stated to one of the nursing staff that she was hearing voices. The risk of suicide greatly increases in a severely depressed individual who is responding to auditory hallucinations. On or about December 3, 1997, Respondent evaluated Patient H.D. at which time Patient H.D. was crying hysterically and stating that she wanted to go home.

The Respondent noted in her psychiatric evaluation that Patient H.D. had a history of cannabis abuse, had passive suicidal thoughts with no plans, and had "no auditory, visual or tactile hallucinations". The Respondent decided that Patient H.D. did not meet the criteria for involuntary commitment and discharged her to the intensive outpatient program.

The Respondent's plan of treatment for Patient H.D. included the following: starting Patient H.D. on Prozac and continuing her on the Ativan; outpatient individual counseling; attendance at narcotics anonymous; attendance at Al-Anon; and family counseling.

On or about December 3, 1997, the Respondent discharged Patient H.D. to home.

On or about December 10, 1997, Patient H.D. committed suicide.

This case initially came before the Probable Cause Panel on December 7, 2001, and an Administrative Complaint was filed on December 12, 2001.

Expert Opinion: The Department expert initially opined that Respondent failed to meet the applicable standard of care in that she failed to document that she reviewed the notes by the medical student and social worker that indicated that his patient was responding to auditory hallucinations. The Department expert additionally opined that if Respondent was aware that this patient was responding to hallucinations she should have maintained the patient in the hospital with an involuntary commitment.


Subsequently, during the Respondent's deposition, she testified that it was her routine to review all intake assessments and evaluations before conducting her psychological evaluation. She also stated that it was her routine to ask the patient about reports of hearing voices and did so in this case. The Department's expert testified in his deposition that if the Respondent did review the reports of hearing voices with the patient, then it would have met the standard of care.

The Department and the Probable Cause Panel have determined that based upon the investigation and the review of this matter that no violation of the practice act could be substantiated. The Panel therefore directs that the case be dismissed.

THE LAW: Pursuant to Section 456.073(4), Florida Statutes, the Department, by and through the Agency for Health Care Administration, pursuant to the provisions of Section 20.43(3), Florida Statutes, finds that there is insufficient evidence to support the prosecution of the allegation that a violation of Chapter 458, Florida Statutes, or the rules promulgated thereunder has occurred.

It is, therefore, ORDERED that this matter should be and the same is hereby DISMISSED.

DONE and ORDERED this 25th day of July, 2002.



Chairperson, Probable Cause Panel
Board of Medicine

KMK

PCP: July 12, 2001

PCP Members: Ashkar, El Sanadi & Beebe