

## Man Dies After Emergency Personnels' Errors

On June 26, 2000, Bradley Towse was 23-years-old. He had a history of prescription medication abuse, but had made a recent decision to quit. To ease his withdrawals and assist his efforts at cessation, Mr. Towse visited his doctor who prescribed methadone. The doctor told him to take 10-12 pills as a starting dose.

That evening, Mr. Towse attended a pool tournament with his stepfather. As the night wore on, Mr. Towse became more and more lethargic. An ambulance was called. The paramedics administered narcan, a methadone antagonist that immediately reversed Mr. Towse's symptoms. He was taken to the defendant Palm Beach Gardens Medical Center's emergency room for evaluation and treatment.

An emergency physician and nurse, both of whom testified they had no knowledge or experience treating methadone overdose, attended him. Fortunately, Palm Beach Gardens Medical Center subscribes to Micromedex, a well-known drug information computer database program. The hospital's emergency room policy and procedure manual, in a section called Suspected Drug Overdose, directs physicians and nurses to the Micromedex program. Both the emergency room physician and nurse knew of Micromedex, but were not familiar with the hospital's

policy. Neither referred to Micromedex for information about methadone overdose despite its ready availability in the emergency room. This turned out to be very unfortunate, since Micromedex advises that patients suspected of methadone overdose, should be admitted to ICU for intense observation. Neither the doctor nor the nurse knew methadone is a very powerful, long lasting medication that can cause life-threatening symptoms for two full days.

The hospital's overdose policy also referred physicians to Poison Control, providing a toll-free, 24-hour phone number. Since the doctor and nurse were unfamiliar with the policy, they did not know that professional advice regarding a methadone overdose was only a phone call away. Surprisingly, the hospital's own expert headed South Florida's Poison Control Center. When asked during deposition what advice he would offer under similar circumstances, he stated that admission and close observation were mandated.

Instead of recommending ICU admission and administering narcan, Mr. Towse was discharged four hours after arriving at the emergency room. His mother took him home and put him to bed next to her. Several hours later, she awoke to find him dead. An autopsy revealed that Mr. Towse's death resulted from methadone overdose. All experts, including the emergency room physician admitted that Mr. Towse's death was preventable.

Mr. Towse's mother retained attorney Cal Warriner to handle her case. Mr. Warriner elicited testimony from the emergency room physician that she was negligent and her negligence caused Mr. Towse's death. She said Mr. Towse should have never been sent home and should have been admitted. The doctor testified that she did call the hospital pharmacist to inquire about methadone, but was given an inadequate response to her inquiry. She further stated that she was not told of several important nursing observations documented by the attending nurse.

Mr. Warriner enlisted the assistance of Chris Searcy to try the case. As trial approached, ongoing negotiations and the family's desire to gain closure, resulted in resolution of the case for an undisclosed sum. The family hoped to send a message to the hospital through this litigation, ensuring that no other son, daughter, father, or loved one would suffer a fate as unnecessary and tragic as did Mr. Towse. ■



# Decisions...Decisions...Decisions...