Failure to Record Vital Signs Masks Clues to Deadly Infection Costing Toddler's Life

On Saturday evening, February 8, 2003, LJ, a 13-monthold Florida toddler, began running a fever. He was also coughing and very congested. The next day, Sunday, his fever continued and his mother noticed that his heart rate had increased and he was breathing rapidly. Alarmed that something was seriously wrong with LJ, his mother made the decision to take him to the nearest hospital emergency room rather than wait another day or so to see the family pediatrician. LJ was fussy and obviously not feeling well, but was able to be consoled by his mother. The hospital's diagnosis at that time was an upper respiratory infection.

LJ continued to suffer from the fever, coughing, and congestion for several days. Noting that he was constantly sleepy and beginning to have difficulty bearing weight on his right leg. LJ's mother took him to the family pediatrician for another examination on the morning of February 12th. Incredibly, the pediatrician failed to record LJ's basic vital signs during the examination, including heart and respiratory rates. Late that evening, with LJ still suffering lethargy and high fever, the family raced the toddler back to the hospital emergency room seeking further medical help. At the emergency room, medical staff began reducing LJ's fever, but failed, as had the pediatrician, to take repeat vital signs after the fever decreased. In the early morning hours of February 13th, the family returned home again.

Medical records and experts later determined that LJ had been suffering from viral myocarditis, an inflammation of the heart muscle which can be caused by a variety of infections and conditions. The virus invades the heart muscle causing a local inflammation. After the initial infection subsides, the body's immune system continues to

Due to the failure of medical personnel to take and record the basic vital signs of a sick toddler brought to them repeatedly for examination, viral myocarditis was not diagnosed and treated. The child died as a result of this failure.



Toddler LJ held by his sister.

Key elements required to make the appropriate diagnosis of this condition are detailed vital signs including heart and respiratory rates. A clue to the presence of myocarditis is an elevated heart and respiratory rate when the fever is no longer present. Due to the failure of medical personnel to take and record the most basic vital signs of the child, myocarditis had remained undiagnosed and untreated until it took LJ's life.

inflict damage to the heart muscle. Key elements required to make the appropriate diagnosis of this condition are detailed vital signs including heart and respiratory rates. A clue to the presence of myocarditis is an elevated heart and respiratory rate when the fever is no longer present.

On February 16, 2003, LJ was taken to the emergency room again, still suffering and considerably weaker. After waiting several hours to be treated by emergency room personnel, LJ was finally taken in for an examination. It was, by then, too late. Before examination or treatment could be performed, LJ died in his mother's arms.

Due to the failure of medical personnel to take and record the most basic vital signs of the child, myocarditis had remained undiagnosed and untreated until it took LJ's life. In the aftermath of this tragedy, LJ's family asked SDSBS attorney Darryl Lewis to represent them in an action against the medical providers involved in LJ's care. After considerable time and effort, including a summary jury trial process, a confidential settlement was reached on behalf of LJ's family.

