

THE CORRECTIONAL NURSE

Inspiring

Professional Correctional Nursing Practice

February 2022

Our Inspiration this month is a quote from Mother Teresa about the impact of words, and I have always believed that words are powerful, not only when spoken, but when written. As healthcare professionals, we must be diligent to use non-stigmatizing and non-biased language in our health record documentation. I recently reviewed the documentation of a patient encounter in a health record that clearly conveyed the personal opinion of health staff member about the patient and his presenting complaint.

Please read the following:

"Patient is a 38-year-old black male who came to the medical unit via wheelchair after he allegedly had a seizure and fell off the top bunk. He is an opiate and benzodiazepine addict, long term, with at least four failed rehab attempts in the last two years. He supposedly had a seizure and rolled off the top bunk and is now demanding pain medication. He admits to trying to get "anything" (drug) from his cellmates to help with the detox, but "no one had anything" that could help. Right now, he has only mild symptoms that are not even bad enough to warrant the comfort medication available under the protocol. He is drug seeking and nothing will be ordered at this time per the provider. Mr. Jones was very angry when he left the medical unit."

There was no physical assessment done, and no plan and no patient education documented.

As the next health professional to see the patient in clinic, do you have preconceived opinions about the patient after reading this entry in the health record? Did you make a judgment about the complaint for which he is being seen today, continued abdominal pain, even before you completed your evaluation? Could you potentially miss a very serious condition because of this?

How could the encounter have been documented in a more neutral, non-stigmatizing manner? Consider this...

"38 year-old male arrives to the medical unit via wheelchair after reported seizure and fall from the top bunk. History includes substance use disorder (last use reported as three days ago on day of arrest). COWS and CIWA scores indicate mild withdrawal. Patient requests medication for pain at this time.

[The physical examination is done and thoroughly documented, including vital signs measured, heart, lung, abdomen, neurological and body assessment for signs and symptoms of trauma. All evaluations are within expected parameters. There are no signs and symptoms of trauma.]

Plan: continue to monitor patient per the COWS and CIWA protocols; Tylenol per Withdrawal Protocol PRN for discomfort; encourage hydration; low bunk profile.

Patient education: Patient instructed in the usual/expected course of detoxification; reassurance provided; immediately report any further seizure activity to officers/medical staff for further evaluation and return to clinic; return to clinic as needed. Patient verbalized understanding of all.

Patient ambulated without difficulty back to housing unit."

In the second example, facts are presented without words that reflect the author's personal feelings and which could present a biased picture of the patient to other healthcare professionals.

**I will admit that I changed the scenario at the end slightly, because I do believe that if the patient had been given an appropriate examination and patient education, the anger exhibited in the first encounter would not occur in the second.

Research conducted by [Yasgur](#) and [Goddu, et al](#) indicates that the use of stigmatizing and biased language in a health record resulted in a reduced level of pain medication being prescribed for patients, and in general, conveyed the health professional's attitude towards the patient. If the attitude was negative, which it often was, the potential for stigma and disparate care was increased.

We will be exploring this topic in more detail at CorrectionalNurse.Net. For now, in your practice, I encourage you to always check your words. Are they unbiased? Do they convey the facts in a neutral way, and do they convey the situation without extraneous information unrelated to the current encounter?

Newsworthy Notes

[The National Commission on Correctional Health Care](#) will hold its Spring Conference on April 9-12, 2022 in Atlanta. The members of the Nursing Advisory Council have been asked to present their 4-part webinar series, How to Achieve Success as a Correctional Nurse Manager, originally held during the month of August 2021, as a pre-conference session on Sunday April 10th. [Get all the information on the NCCHC website](#). We invite you to join us!

The [American Jail Association](#) is holding its national conference in Long Beach, CA on May 21-25, 2022.

The American Correctional Nurses Association is busy planning activities for 2022, including six accredited continuing education offerings. Check out the [website](#).

Remember that you can find our past Newsletters on the CorrectionalNurse.Net website in the Newsletter Archive.

Thanks for all you do, and Be Safe!!

CorrectionalNurse.Net

This month at [CorrectionalNurse.Net](#) our clinical discussion will include Ectoparasites. Our professional practice discussion will include Patient Education and Strategies to Avoid Bias in Documentation.

As always, announcements for new blog posts will be posted on our FaceBook pages and on Instagram.

Please [FOLLOW US](#) and check back often to ensure that you get notification of new posts!

VISIT CORRECTIONALNURSE.NET NOW

Correctional Nurse Educator

Our 50% off featured class this month at [The Correctional Nurse Educator](#) is **Dental Concepts for the Correctional Nurse**. I hope that you enjoy it!

Remember that The Correctional Nurse will work with your group to provide accredited continuing education classes at a discounted and affordable cost.

VISIT THE CORRECTIONAL NURSE EDUCATOR NOW

Nursing Behind the Wall

This month at [Nursing Behind the Wall](#), you will meet Mr. Diaz, who has a painful rash.

VISIT NURSING BEHIND THE WALL NOW

In closing, I appreciate you taking the time to read this newsletter, and I hope that you will find our sites interesting and educational. Our profession of Correctional Nursing is unique and sometimes challenging, but always very important to our patients. The impact we make is far-reaching, even if it is not always evident as we care for our patients. I have ALWAYS been proud to say that I am a Correctional Nurse – I hope that you are as well!

Lori

Inspiration

KIND WORDS
CAN BE SHORT AND EASY
TO SPEAK, BUT THEIR ECHOS
ARE TRULY ENDLESS

Mother Teresa

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