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CARL

My name is Carlton Jacob. Most people call me Carl. It seems to me that sometime people use the term "pain and suffering" lightly. I am not a complainer but I would like to tell you about my "pain and suffering." From the instant that the nurse injected the Phenergan my arm felt like it was on fire from my elbow down to my fingertips. This burning continued for a couple of weeks. These pictures show what my fingers were like as they were dying. The burning gave way to a horrible electric like pain that shot through my hand. It is indescribable as to how much that hurt. Even with all the pain medication I was given at that time, it was horrendous. The fingertips as they were dying itched ferociously. This continued up until the time of the amputation.

Since the amputation I have what I would describe, as bone pain in my forearm, and in my hand I have what I would describe as nerve pain in the fingers. I also suffer from vasospasms. If I get upset, my hand goes cold and starts to discolor. I am told that this is a sympathetic reaction. I have weaned myself off of all the painkillers because I was afraid of addiction. I also have phantom pain which means I feel pain in the missing fingers as if they were still there. I take an antidepressant medication called amitryptaline.

I feel very strongly that nobody should have to go through what I went through but if they do because of medical negligence, that they are entitled to a jury trial where all things can be taken into account by the jury and that the jury can decide fully what, if anything, the injured person is entitled to by way of compensation. I feel this way because I will never have my fingers back and I trust that a jury will do what is right and fair in my case. I can't imagine living in a democracy and not having the right to bring my case before a jury of my peers.

Thank you for listening to what I have to say.

## CARLTON JACOB

Carlton Jacob was a 31 year old finish carpenter. On June 9, 2001, Carlton went to the emergency room of St. Rose Dominican Hospital complaining of rectal pain. The emergency room doctor asked a nurse to establish an intravenous line and to administer among other drugs, an anti-nausea agent called Phenergan. Carlton and his wife Rachel noticed a great deal of red blood spurting from the "IV" site on his left arm. As soon as the Phenergan was administered Carlton cried out in pain and told the nurse that it felt like someone had poured gasoline on his arm and lit it with a match. The left forearm continued to be painful thereafter and throughout his entire hospitalization. A CT scan revealed an anal abscess and surgery was carried out the next afternoon successfully and without complication.

He was released from the hospital on June 11<sup>th</sup>. The pain to his left forearm continued then worsened and he therefore went back to the emergency room the next morning. His left arm was swollen, burning, his left hand was numb and the fingertips dark blue. The medical records read "possible complication of IV with meds." A vascular surgeon performed an angiogram which revealed a mid forearm occlusion of the ulnar artery. The vascular surgeon concluded that the emergency room nurse, rather than accessing a vein, had accessed an artery and that the injection of Phenergan into the artery caused the occlusion. The vascular surgeon performed two surgeries at St. Rose and then sent Carlton by air ambulance to the University of Utah for further attempts to salvage the limb. Ten days later he returned to Las Vegas and was referred to a hand surgeon. Four of Carlton's fingertips continued to blacken and on July 19, 2001, 40 days after the original injury, the hand surgeon amputated portions of four of Carlton's fingers.

The standard of care of nursing when placing an "IV" line is to confirm that a vein has been accessed as opposed to an artery before administering any drugs. The pulsating red blood from Carlton's "IV" site and his report of extreme burning pain immediately upon administration of the Phenergan should have been a clear indication to the nurse that the line was in an artery not a vein. But, she failed to confirm this and failed to report this to a doctor for immediate intervention. As a result of this nursing negligence, Carlton Jacob will spend the rest of his life with only one fully functioning hand. The pre-amputation pain was no less than excruciating. Post-amputation, he is not only disabled and disfigured, but suffers from Phantom Pain Syndrome twenty-four hours a day.

K 2



K 3



K 4