

Testimony in support of the Pain Patient's Bill of Rights

Phyllis Zorn

On Dec. 26, 2004, I took my daughter, Miranda Zorn, to the emergency room at Hays Medical Center for treatment of what we suspected was strep throat. Diagnosing a viral infection, the attending physician ordered an injection of SoluMedrol to ease Miranda's symptoms.

The injection intended to usher in relief for Miranda instead ushered in the nightmare that brings us to speak to you today. The needle was unsterile and within only a few days an abscess developed that later proved to be a staph aureus infection. The abscess was 8 centimeters across. That is the size of the entire palm of my hand.

On Saturday, Jan. 8, after one return trip to the emergency room and two visits to her physician's office, the abscess began oozing pus. We returned to the emergency room to have the drainage cultured.

On Monday, Jan. 10, Miranda's physician read the preliminary lab results, canceled her appointment with him and scheduled her to see his partner, an infectious disease specialist. Thus the partner took over her treatment for the abscess.

That afternoon, the doctor lanced and drained the abscess. According to his records, he anesthetized only the incision area in preparation for the operation. He did not anesthetize deep tissue. His records note that about 100 cc of pus was drained from the incision. The abscess cavity, which was measured the following day in the first of 18 visits to the hospital's special nursing unit, was 3 ½ centimeters deep, a centimeter long and a half-centimeter wide.

I want to emphasize that **only** the incision area had been anesthetized. Although Miranda felt only pressure as the initial incision was made, when the doctor made a second cut to be able to reach deeper into the abscess, that cut was made without any anesthesia. Also done without anesthesia was the process of repeatedly reaching inside the abscess with his finger to pull out pus and dead tissue.

The process was extremely painful for Miranda, particularly since the area of inflammation was so large. In reaction to the pain, Miranda first complained, then began to cry. She cried throughout the procedure and pleaded with the doctor to make the pain stop. I asked him if there was something more he could do to ease her pain, but he told me there wasn't because the abscess had already been cut open.

It wasn't until months later, in speaking to another doctor for an article about under-treatment of pain and the reasons doctors are overly cautious about treating pain, that the other doctor explained all the options that existed in Miranda's specific circumstances. Those options included additional injections, intravenous pain medications, bringing in an anesthesiologist and taking her to the operating room for general anesthesia if lesser measures were unsuccessful. Twice the doctor being interviewed told me that what happened that day, as well as the following day when Miranda's regular doctor directed the nurse to unpack, clean, measure and repack the wound without administering pain medication (a directive the nurse refused to follow), "did not comply with the standards of care." He further said under-treatment of pain is a disciplinary issue with the Kansas Board of Healing Arts.

I understand completely the threat a staph aureus abscess presents. In 1995, one week before Christmas, my best friend, an otherwise healthy 34-year-old mother of four little girls, died from septicemia brought on by a staph aureus infection.

Knowing the threat Miranda's abscess posed, I comforted her throughout the operation so that she would comply with the procedure. Although there is no doubt in my mind the ordeal was worse for Miranda than it was for me, those of you who are parents will understand the depth of my own agony in watching my child suffer that day. I suppose the ordeal lasted about 10 minutes, but the after-effect was much longer. There was no reason for her to suffer so much.

The doctor noted in his records that "the patient tolerated the procedure well."

I disagree.

I am grateful to the doctor for treating the abscess and I am thankful to have Miranda beside me today, but I have come here in the interest of doing what I can to make sure no one else's child undergoes such a painful procedure without adequate measures taken to relieve the pain.

I thank Representatives Bob Bethell and Jim Morrison for their encouragement to share our story with you, and I thank you for listening to us today. Together we can change scenarios where patients suffer needless pain.