



MINUTES
QUALITY ASSURANCE / PEER REVIEW COMMITTEE MEETING
IMPERIAL COUNTY JAIL MEDICAL SERVICES

August 24, 2011

Members Present:

- Taylor Fithian, M.D., CFMG
- Linda Corfman, R.N., Program Manager, CFMG
- Mayra Robles, R.N., CFMG
- Madell Landrum, R.N., CFMG
- Lynn Lawrence, CFMG
- Jaime Clayton, Captain, Imperial County Sheriff's Office
- David Tirado, Lieutenant, Imperial County Sheriff's Office
- Robert Cortez, Lieutenant, Imperial County Sheriff's Office
- John Dougan, Sergeant, Imperial County Sheriff's Office
- Luis Estrada, Corporal, Imperial County Sheriff's Office
- Charlie Cleaves, US Marshal Prisoner Medical Program

The minutes of the previous meeting were reviewed.

Old Business:

Today's Agenda

In-Custody Deaths:

There was one in-custody death that occurred. The clinical case was reviewed by Dr. Fithian. The patient's name was Marcia Dau, DOB: 1-31-53. This case involved a woman who was booked into the Imperial County Jail on 7-1-11 at approximately 3:30 a.m. She presented with a history of fibromyalgia, panic attacks, and chronic pain. Pertinent medications reported by the inmate at the time of booking included Valium 10 mg. twice a day and Suboxone 2 mg. a day sublingual. She brought in with her nine Valium and nine Suboxone tablets.

The intake triage screening was done on 7-1-11. The results of that screening are attached to the minutes. She also had a medical history done entitled "Imperial County Sheriff's Department/CFMG" at which time she reported that she may be withdrawing from Suboxone. She also gave a history of fibromyalgia, panic attacks, stiffness and chronic pain.

Doctor's orders reflect the following:

On 7-1-11 she was scheduled for M.D. sick call and placed on Naprosyn and Ultram. She was also placed on Valium 5 mg. twice a day for 3 days, and then to be discontinued, and given Suboxone ½ tablet daily for 5 days.

On 7-5-11 psych/MD evaluation reflects that she was placed on Clonidine, Naprosyn 500 mg. bid, Tylenol 1 gram tid, and Ultram 1000 mg. tid.

On 7-6-11 she was placed on Peridex.

On 7-12-11 she was given Ativan 1 mg. twice a day for 3 days and she was placed in the safety cell for "bizarre and aggressive behavior."

The next doctor's order on 7-17 reflected a request for an MD evaluation and psych evaluation. On 7-17 she was cleared from the safety cell.

On 7-23-11 she was referred to El Centro Regional Medical Center to rule out dehydration.

Progress notes reflect the following:

On 7-5-11 she complained of pain and anxiety. She was alert and oriented x 3. Assessment was chronic pain and panic attacks.

On 7-11-11 "Inmate having seizure." She was hyperventilating and anxious. Her vital signs reflect blood pressure 160/100; respiration 24; temperature 98.4; pulse 92 and 90% O2 saturation.

On 7-12-11 she was brought to medical for evaluation. Her vital signs reflect blood pressure 150/100; respiration 20; pulse 100; O2 saturation 92%. She was described as anxious, hyperventilating, with no auditory or visual hallucinations. She was given Ativan 1 mg. She reported, "I need my Suboxone and Valium." She was placed in the safety cell at that time.

On 7-17-11 she was brought to outpatient housing for urinary incontinence. She reported that her clothes accidentally fell into the toilet. She was given food and water, and took both immediately.

On 7-20-11 the patient was brought to medical by Officer Vargas. She was alert and oriented x 3. She refused to answer questions and was talking to herself. She was placed on sick call and described as stable.

Psych notes reflect the following:

On 7-11-11 she was seen by Dr. Baker. She was described as alert and oriented x 3. No thought disorder. Impression: Fibromyalgia. Refer to Dr. Singh for medical care.

On 7-21-11 her thoughts were scattered. She denied hallucinations. Impression: Drug-induced psychosis. Plan: Treat with Haldol and Cogentin.

Safety Cell logs dated from 7-12 through 7-21-11.

On 7-12-11 she was agitated. Refused to cooperate. Vital signs: BP 148/80; respiratory rate 16.

On 7-13-11 she was "upset over Court issues."

On 7-14-11 she denied symptoms of DT's. She refused meds. BP 148/96; pulse 90; respiratory rate 18.

On 7-20-11 she was described as bizarre behavior. She refused vital signs.

On 7-20-11 she was described as calm and cooperative and patient stated, "I don't want to talk to anyone."

On 7-21-11 she was eating and drinking.

On 7-23-11 at nine o'clock the patient was found unresponsive and was taken to El Centro Regional Medical Center. Rule out dehydration.

Action/Discussion: The preliminary autopsy showed the patient to have atherosclerotic heart disease, and cause of death being natural. Toxicology is pending.

Upon discussion it appears that the patient was probably going through benzodiazepine withdrawal.

Further action will depend upon (1) Toxicology and final autopsy report; (2) Patient was transferred to El Centro Regional Medical Center by van rather than emergency transportation, which was felt to be inappropriate in retrospect; the nurse who sent the inmate by van will meet with our program manager; (3) an in-service was recommended for benzodiazepine withdrawal; (4) recommendation for in-service on acute psychotic states, delirium v. other causes of psychotic behavior.



MINUTES
QUALITY ASSURANCE / PEER REVIEW COMMITTEE MEETING
IMPERIAL COUNTY JAIL MEDICAL SERVICES

March 14, 2012

Members Present:

- Taylor Fithian, M.D., CFMG
- William Hall, Sergeant, Imperial County Sheriff's Office
- Sergeant Dail, Imperial County Sheriff's Officer
- Delores Hernandez, CFMG
- Darren Smith, ECRMC, QA
- Daniel Moreno, ECRMC, Dept. of Emergency Medicine
- Susana Martinez, R.N., Director Emergency Services, ECRMC
- Linda Corfman, R.N., Program Manager, CFMG
- Mayra Robles, R.N., CFMG
- Madell Landrum, R.N., CFMG
- P. Singh, M.D., Onsite Medical Director, CFMG
- Jaime Clayton, Captain, Imperial County Sheriff's Office
- David Tirado, Lieutenant, Imperial County Sheriff's Office
- Robert Cortez, Lieutenant, Imperial County Sheriff's Office
- Charlotte Clunn, Imperial County Public Health Department

The minutes of the previous meeting were reviewed.

Old Business:

1. Follow-up – In-Custody Death – Marcia Dau, DOB: 1-31-53

This is a case that we reviewed clinically at our last Quality Assurance meeting on August 24, 2011. In summary, this was a lady who was booked into jail on 7-1-11 with a diagnosis of fibromyalgia, panic disorder and chronic pain syndrome. Medications at the time of booking included benzodiazepines and Suboxone.

During her incarceration she was in and out of the safety cell. She was treated with a variety of medications including Naprosyn, Ultram, Valium, Ativan, Clonidine, Haldol and Suboxone. **On 7-23-11 she was found unresponsive.** She was taken by van to El Centro Regional Medical Center to rule out dehydration.

At the time of our last meeting toxicology was pending. At the conclusion of our last meeting a number of recommendations were made. **(1) This patient should not have been**

transferred to the hospital by van but by ambulance. (2) An inservice on benzodiazepine withdrawal was requested. (3) Recommendation for an inservice on acute psychotic states vs. delirium. (4) Review of toxicology and final autopsy. Of the four recommendations, the nurses involved in the transfer request have met with the program manager. An inservice on benzodiazepine addiction and withdrawal was accomplished. An inservice on acute psychotic states and delirium was also accomplished. A review of toxicology and the final autopsy report will be done at this meeting.

Today's Agenda

In-Custody Deaths:

Follow-up / In-Custody Death, Marcia Dau

In review of the final autopsy and toxicology, the cause of death was atherosclerotic cardiovascular disease, and other causes included acute multiple drug intoxication. According to the findings of the toxicology, levels of medication individually or separately were not in the toxic or lethal range. However, the forensic pathologist thought the combination of these medications may have contributed to the death of this patient. Dr. Fithian spoke with the pathologist and had some concerns about the findings, but the pathologist felt that this was probably the case. The toxicology reports are attached to the minutes.