ROLE: NURSE IN PIPERACILLIN/TAZOBACTAM (ZOSYN) CASE

BACKGROUND

ALBERT, is a 92 y.o. patient, admitted to the ED from a local skilled nursing facility (SNF) around 1800. He became increasing SOB with yellow-greenish sputum and was febrile to 38.5 with pulse oximetry = 88 yesterday. The SNF staff were concerned about pneumonia and, after receiving permission from the patient's family member, called an ambulance for transport to ED.

ADMISSION STATUS

Admission Status: You helped admit Albert in the ED. It was difficult to examine them because they moaned when uncovered. You helped get a chest x-ray, labs and do an initial assessment. Everything confirmed pneumonia. The physician ordered Zosyn (Piperacillin/Tazobactam) IV every 6 hours. You gave the first dose at 2200 and within 20 minutes Albert experienced an anaphylactic reaction involving flushing, itching, difficulty swallowing, coughing, wheezing, hypotension and dyspnea. With his/her already compromised pulmonary status, Albert needed to be intubated. He responded well to epinephrine.

Albert was to remain on the ventilator for a few hours to protect his airway until the allergic reaction resolved. He was transferred to the ICU around 2330 with orders for additional epinephrine as needed, discontinue piperacillin/tazobactam and start vancomycin and levofloxacin IV.

CURRENT

This morning you called the ICU to check on Albert and learned that he was extubated early this AM. He is currently afebrile, vital signs stable, rash resolving, on some oxygen with pulse oximetry = 97. He is following commands but remains confused to person, place and time. The SNF reported that Albert required assistance with ADLs due to his confusion and general weakness but always recognized his family. His family have visited Albert twice in the ICU but he does not recognize them yet.

When talking with the ICU, you learn that the documentation from the SNF included information about a penicillin allergy. Piperacillin/tazobactam is contra-indicated with penicillin allergies. The ICU nurse also asks if you had noticed the allergy armband. You are stunned. You go up to the ICU to look again at the armbands. You remember glancing at them when you admitted Albert but they were both difficult to read because they had gotten wet numerous times. When you look at them again, you can now read "penicillin". You check Albert's chart and see that he had an incident one-year prior in the SNF when he received oral penicillin and developed hives and abdominal cramping. Albert's last hospitalization was two years prior. You had not noticed this on your initial record review.

SITUATION

Albert's family member is here visiting and would like to talk with the team about the events of the evening and why Albert is in the ICU. The physician and DNP you worked with in the ED yesterday evening are also here.