

## DOCUMENT RESUME

04832 - [B0445336] (Restricted)

[Allegations concerning Inadequate Medical Care at Elmendorf AFB Hospital]. HRD-78-55; B-133142. February 10, 1978. 7 pp.

Report to Rep. Don Young; Sen. Ted Stevens; by Gregory J. Ahart, Director, Human Resources Div.

Issue Area: Health Programs (1200).

Contact: Human Resources Div.

Budget Function: Health: Health Care Services (551).

Organization Concerned: Department of Defense; Department of the Air Force: Elmendorf AFB, AK.

Congressional Relevance: Rep. Don Young; Sen. Ted Stevens.

Allegations were made of inappropriate and inadequate medical treatment and care of Mrs. Yvonne Stafford, Michelle Barnes, and Manuel Abille by the staff of Elmendorf Air Force Hospital in Alaska. The medical advisor concluded that Mrs. Stafford was one of a small number of persons who develop liver damage resulting in liver necrosis and subsequent death. Regardless of the care she received, Mrs. Stafford would have died as there is currently no means available to treat liver necrosis. However, the attending physician was incorrect in prescribing a high protein diet and certain drugs contraindicated in liver disease treatment. At least eight different drugs were dispensed to Michelle Barnes during an 18-day period. The girl was given too many drugs, and she was treated twice in the outpatient department without parental permission although she was not in need of emergency care. Mr. Abille was admitted to the hospital for 30 sessions and 5 days later committed suicide. The hospital is not designed and staffed to provide proper care for suicidal patients, and Abille should have been referred elsewhere. A random sample of patient records indicated that patients at the hospital generally receive appropriate treatment and that the medical staff's qualifications are excellent. However, some of the staff physicians are also engaged in outside employment. (RRS)

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UNITED STATES GENERAL ACCOUNTING OFFICE

WASHINGTON, D.C. 20548

HUMAN RESOURCES  
DIVISION

B-133142

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The Honorable Ted Stevens  
United States Senate

Dear Senator Stevens:

This letter is in response to your September 26, 1977, request to our Office to conduct an inquiry concerning medical services provided to authorized persons at Elmendorf Air Force Base Hospital in Alaska. You enclosed with your letter information prepared by one of your constituents which alleged that inappropriate and inadequate medical treatment and care were rendered by the staff of the Elmendorf Hospital to Mrs. Yvonne Stafford (wife of Lieutenant Colonel Robert Stafford, U.S. Air Force, retired). You requested that we specifically review the care given to Mrs. Stafford while she was a patient at the facility. In addition, you asked that we contact Alaska State Senator W.E. Bradley for information concerning other alleged instances of poor medical treatment provided to servicemen and their dependents at the Elmendorf Hospital.

Representatives of our Office, including our medical advisor, visited Anchorage during the week of November 7, 1977, and met with State Senator Bradley, Mrs. Melva Krogseng, R.N., and Mrs. Ramona Barnes. Our purpose in meeting with these individuals was to discuss further the circumstances involved in the Stafford case and to obtain additional information regarding other alleged instances of poor medical care rendered by the Elmendorf Hospital staff.

Our medical advisor reviewed all treatment records and other relevant medical data concerning Mrs. Stafford. Information was obtained from both Elmendorf and Providence Hospitals in Anchorage. At the Elmendorf Hospital we reviewed:

--several other specific cases in which improper care was alleged;

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(101003)

--a random sampling of medical records from various departments in the hospital;

--the qualifications of the hospital's physicians; and

--the extent to which Elmendorf Hospital physicians are engaged in outside employment.

We met with the commander of the Elmendorf Hospital both during and at the conclusion of our visit to Anchorage to discuss matters pertaining to individual cases and our overall assessment of the care provided at the hospital.

INDIVIDUAL CASES OF  
ALLEGED IMPROPER CARE

The results of our review of alleged instances of poor medical care rendered by the Elmendorf Hospital staff are summarized below.

Mrs. Yvonne Stafford

Mrs. Yvonne Stafford, age 39, was admitted to the hospital on August 6, 1977. Her illness was diagnosed as viral hepatitis. Her condition worsened during her stay and she developed hepatic encephalopathy (confused mental state due to liver damage). Mr. Stafford became dissatisfied with the medical treatment and care being provided to his wife at the hospital, and arranged for her transfer to Providence Hospital on August 15. Mrs. Stafford died at Providence Hospital on August 20, 1977.

Based on his review, our medical advisor concluded that Mrs. Stafford was one of a small number of persons who, after contracting infectious hepatitis, develop liver damage, which often results in liver necrosis (degeneration of liver cells) and subsequent death of the patient. Currently, there are no means available either to prevent cases of liver necrosis from occurring or to effectively treat these cases once the condition has appeared. Accordingly, we believe that regardless of the treatment that Mrs. Stafford received or could have received at either hospital, she would have died from this disease. We discussed the seriousness of Mrs. Stafford's illness with her attending physician at Providence Hospital who agreed with our medical advisor's conclusion.

Notwithstanding this conclusion, we believe that Mrs. Stafford's attending physician at the Elmendorf Hospital was incorrect in prescribing for her a high protein diet and certain drugs. The diet and several of the prescribed drugs are normally contraindicated in the treatment of liver disease.

On August 15, 1977, while at the hospital, Mrs. Stafford was involved in an unfortunate incident in which she was found by the hospital staff away from her ward and in the hospital parking lot. While this is a regrettable situation, it is not totally unavoidable in a hospital setting unless close, around-the-clock observation is provided to each patient. However, when a person is mentally confused, as was the case with Mrs. Stafford during part of her hospitalization, more attention needs to be paid to this kind of patient than would otherwise be the case.

We brought this matter to the attention of hospital officials who told us that Mrs. Stafford had been transferred to the coronary care unit the previous day so that she could be given closer attention. This action was taken because Mrs. Stafford had previously wandered from her room. The hospital commander informed us that two of his staff were reprimanded for allowing this incident to occur.

An additional allegation concerning the care provided to Mrs. Stafford involved the medical and nursing staffs' indifference to her needs, and the general uncleanliness and poor sanitation in Mrs. Stafford's room. While we could not address these allegations as they related specifically to Mrs. Stafford's hospitalization, we noted during our visit that the general condition of the facility was both clean and pleasant and the staff appeared to be helpful and courteous to the patients.

#### Michelle Barnes

Michelle Barnes is 16 years of age and the daughter of Mrs. Ramona Barnes with whom we met to discuss alleged instances of improper care rendered at the hospital. Mrs. Barnes informed us that too many drugs had been prescribed for her daughter by Elmendorf physicians over a short period of time. She also stated that her daughter had received medical treatment at the facility's outpatient department without parental permission.

Our medical advisor reviewed Michelle's medical treatment records and found at least eight different drugs had been

dispensed to her during an 18-day period. Her initial diagnosis was recorded as bronchitis and possibly some pleurisy. She later complained of some vague abdominal pain and the examining physician indicated that she was quite tense.

We pointed out to the hospital commander that in our opinion, the girl had been given too many drugs and that the hospital's medical staff needed to be constantly alerted to the problems of over-prescription of drugs. We recommended that the medical staff be counseled concerning the need to carefully review patient medical records to prevent further over-prescription of drugs.

Our review of the girl's medical records also disclosed that she was treated in the outpatient department on two occasions without parental permission although she was not in need of emergency care. The hospital commander told us that on at least one of those occasions, hospital staffmembers attempted, without success, to locate the girl's parents in order to obtain permission to treat her.

#### Manuel Abille

Mr. Manuel Abille, 51 years of age, was admitted to the hospital's psychiatric unit suffering from depression. Apparently, the admitting psychiatrist believed that he could quickly bring Mr. Abille's depression under control. However, 5 days after admission, Mr. Abille jumped to his death from a seventh floor window of the hospital. The patient's records contained strong evidence that Mr. Abille was a potential suicide. The hospital is not designed and staffed at the present time to properly care for suicidal-type patients and we believe that instead of admitting this patient to the hospital, the attending psychiatrist should have referred the patient to the nearest State mental institution or similar facility capable of caring for such patients.

The hospital has recently taken certain precautions to prevent a reoccurrence of such an incident. In our opinion, however, the hospital is still not adequately designed or staffed for the treatment of patients with serious suicidal tendencies. Such patients should be referred to a facility that can adequately care for them.

We discussed our review of these cases with the commander of the hospital and we stressed the importance of professional education and counseling of staff physicians in an effort to alleviate some of the problems we identified. The commander agreed to initiate steps to provide the necessary counseling.

OTHER ASPECTS OF ELMENDORF  
HOSPITAL REVIEW

The results of our review of a random sample of patient records, qualifications of physicians, and extent of Elmendorf Hospital physicians engaged in outside employment are discussed below.

Review of random sample  
of patient records

Our medical advisor reviewed about 90 patient medical records selected at random from several of the hospital's major medical services and from its outpatient department. His purpose in reviewing these records was to ascertain whether on an overall basis the care provided by the hospital appeared to be reasonable or whether questions should be raised concerning some of the diagnostic procedures followed by the hospital and, more particularly, the treatment rendered to its patients. Based on this review, we believe that generally patients are receiving appropriate treatment at the facility.

During our medical advisor's review, he noted two instances where the results of pap smear tests indicated some form of positive findings but further verification of such findings was delayed. In one case the patient was told to come back to the hospital in 8 to 12 weeks to have the test repeated and in the other case, the patient was given an appointment 3 weeks after the positive findings were known.

Since the primary purpose of a pap smear is to identify cancer of the cervix at an early date, we believe the hospital should schedule these patients for further evaluation as soon as possible. We suggested to the hospital commander that suspicious findings of this nature should be followed up within a week, if possible, to determine the facts one way or another. The hospital commander agreed and stated that this matter would be raised during meetings with his medical staff.

Qualifications of physicians

Our review of the credentials of physicians at the hospital showed that the qualifications of the medical staff are generally excellent. However, we identified one instance in which a physician's records were insufficient with respect

to suitable references from hospitals at which he had worked previously. Further investigation revealed that this same physician was denied privileges in his specialty at Providence Hospital. In view of these facts, we questioned the hospital commander as to whether an appropriate review of this physician's credentials was made prior to placing him on the staff of the hospital. We also inquired as to why a more concerted effort was not made to seek additional information concerning this physician's work at other hospitals.

The hospital commander replied that additional efforts were made to obtain more information regarding the quality of this physician's work. In spite of these efforts, no previous employer was willing to provide in writing more detailed information regarding the physician's work. The hospital commander also stated that since this physician's prior employers were unwilling to document their comments, he questioned whether their verbal opinions would be of legal value.

While there might be a question concerning the legal value of such references, we believe that the hospital should have obtained this information to assist its credentials committee in considering whether or not to approve his application for employment at the hospital.

#### Extent of physicians' engagement in outside employment

At the time of our visit, 8 of the 40 physicians employed at the hospital were engaged in outside employment and one application for such privilege was awaiting action. We reviewed the files of physicians who were engaged in such employment. We found that each physician had obtained the documentation required by Air Force regulations to engage in off-duty civilian employment. Also, in each case, proper documentation was obtained from the outside employing agencies as to their need for the Elmendorf physician's services. In addition, contact had been made with the local medical society to be sure that the employment of Elmendorf physicians did not constitute an unacceptable intrusion on the practices of private physicians in the Anchorage area. We also noted that in no case is an Elmendorf physician permitted to exceed 16 hours of outside duty per week and it is clearly stated and understood that civilian employment will be performed outside of duty hours and will not, in any way, interfere with the physician's responsibilities at the hospital.

Based on our review of hospital files regarding patient complaints and our discussions with the hospital staff, we discussed with the hospital commander the case of a physician who was approved for off-duty civilian employment but whose performance at the hospital was sometimes criticized. We suggested that future consideration be given to denying such privilege to physicians whose performance is below normal until the hospital's management concludes that the physician's performance at the hospital has improved to a desirable level where outside duties would not have any adverse effect upon the physician's service at the hospital. The commander agreed to consider our suggestion when he decides whether to approve future requests for outside employment.

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At the conclusion of our visit, we discussed our review results with State Senator Bradley who indicated his satisfaction with our efforts. We also discussed the results of our inquiry at Elmendorf Hospital with responsible officials in the Office of the Air Force Surgeon General in Washington, D.C., who agreed with our findings.

We trust that this letter satisfactorily responds to your concerns regarding the medical care being rendered at the Elmendorf Hospital.

Sincerely yours,

  
Gregory J. Ahart  
Director