

My account of what happened that day, August 16, 2017.

I helped the primary nurse check in a patient arriving via ambulance with the chief complaint of intentional Tylenol overdose. The patient, a 24 year old female, arrived alert, oriented, calm, cooperative, tearful and remorseful. I assisted with obtaining vital signs and placing a second IV without incident.

About 30 minutes later the Crisis Intervention Specialist, who had been assessing the patient, came out of the room urgently stating that the patient was pulling out her IV. I was the closest medical personnel so I quickly went into the room. The patient was lying on the stretcher peeling the tape, that held her IV in, off her arm. As I approached the patient I stated “stop, don’t pull out your IV” two or three times. The patient did not respond to my request. She did not tell me she wanted to leave and she was not headed for the door, she was lying on the stretcher. As I reached for the patients arm she lunged at me and bit down on my left lateral wrist and did not let go. As I yelled for security I got her off my wrist by pulling her head back by her ponytail. As I did this she punched me with her right fist, hitting my right jaw. I continued to hold on to her ponytail in an attempt to keep her off of me as she was grabbing my neck. I continued to yell for security. The first person to arrive was an Emergency Department Technician and found that the patient had me in a choke hold. I don’t remember this part, I blacked out. The technician tried to pull the patient off of me, he was unsuccessful and the three of us fell to the ground. The tech injured his back in the process. Security arrived immediately after the technician and were able to pull her off me. The primary nurse arrived and helped me to stand up, she said “Jen, your neck is bleeding” and escorted me to the back to clean up. Security officers were attempting to get control of the patient as I left the room. A security officer sustained multiple puncture wounds on his arm from the patient grabbing him.

I had several areas on my neck that were bleeding and one on my right jaw. I had two puncture wounds with abrasions to my left wrist. The bridge of my nose was painful. I was examined by a Provider and placed on an antibiotic for the bite wound. The patient sustained no injuries.

For the next several days I had consistent, substantial pain to my wrist and neck where my skin had been removed by the patient’s teeth and fingernails. At twenty-three days after I was assaulted the wounds on my wrist had not healed completely and there was still two areas of redness on my neck.

I had been a Registered Nurse for over 16 years at the time, all of which I am proud to say have been in the Emergency Department. I truly love my work, it’s challenging, interesting and fulfilling. Challenging and interesting because the human body is complex and remarkable. It’s never the same. Fulfilling because knowing that I provide compassion, relieve pain, and listen to people that are injured or sick and sometimes scared and alone can make a difference. At times, some people, when they are injured or sick and scared or angry lash out at health care workers. Over 16 years I have developed skills to avoid assault, most importantly talking to the upset person and knowing when to keep my distance. I was really taken off guard by this patient for

two reasons, one, I had already interacted with her and she had been cooperative and appeared sad. Second, when I entered the room and as I approached her she did not say anything, she did not tell me she wanted to leave, she did not tell me she no longer wanted treatment, she did not tell me she was angry, she did not tell me not to touch her. Usually there is some warning that the person is considering physical action by verbal warnings and/or body language. There were no warnings. After 16 years she took me by surprise.

Now, over four years later, the violence we see in the hospital continues to increase exponentially. I have seen nurses, doctors and technicians leave the emergency department at rates I have never seen before, most cite the violence. I have gone to part time for my own mental health. I stay because I really want to believe that measures can be taken to decrease the violence, I still value the work I do.

According to Bureau of Labor Statistics healthcare workers alone suffer 50% of all workplace assaults. This is alarming. According to the Occupational Safety and Health Administration 'no specific diagnosis or type of patient predicts future violence' and there is a perception that violence is tolerated. You can help change this perception. You can take action against the violence that is a healthcare crisis.

Thank you for your time.

Sincerely yours,

Jen Hawes