

## Legal nurse consulting practice brings medical and legal facts to light using CaseMap® software

### Overview

**Firm:** P.J. West & Associates

**Locations:** Based in Agoura Hills, Calif., this consulting practice has a network of more than 200 specialized nursing professionals located across the United States.

**Industry:** Legal nurse consulting, dialysis and case management, as well as patient and family education.

**Customer Profile:** Since 1980, P.J. West & Associates has been assisting legal counsel in the areas of personal injury, medical malpractice, elder abuse, workers' compensation, product liability, Medicare fraud, insurance billing fraud and risk management.

**Business Need and Solution:** To capture, organize and clearly present pertinent case details and issues, P.J. West & Associates uses CaseMap® fact- and issue-management software along with TextMap® transcript management software and TimeMap® timeline graphing software.

#### Benefits:

- Legal nurse consultants categorize detailed case information and effectively pinpoint breaches in the standard of care to share with counsel and experts.
- This approach saves counsel time and money related to staffing and experts.
- Counsel can make sound decisions and avoid leaving facts or money on the table in settlement situations.

#### Product Summary:

**CaseMap software** brings together the relevant facts, documents, cast of characters and issues of each case—as well as pertinent research—in a centralized repository for improved case assessment and management.

**TextMap** software creates a searchable database of electronic transcripts. Professionals can easily search, summarize, annotate, issue-code and attach notes to important passages of case testimony.

**TimeMap** software transforms case facts into high-quality visual timelines in seconds to add clarity and impact.

The 200+ legal nurse consultants working with P.J. West & Associates (PJWA) provide expert medical consultation to the legal community based on the foundations of ethics, competence and excellence. Their work helps attorneys to:

- Evaluate cases that have a medical component
- Conduct medical legal research
- Review medical records
- Prepare for interrogatories, depositions and trial
- Obtain expert testimony in specialty areas of medicine

#### Business need: well-organized medical records and issues

P.J. West staff members are clinically active experts in their specialties. For example, principal and founder Tricia West, R.N., BSN, MBA/HCM, CHN, LNC, has a special focus on elder and dependent adult abuse, and dialysis. This kind of deep expertise helps legal professionals identify standards of care, determine causation, explore damage issues and make recommendations.

P.J. West works on cases involving medical malpractice, personal injury, sexual assault, elder and dependent adult abuse, Medicare or billing fraud, third-party liability and virtually any kind of aberrant medical billing. Attorneys seeking services from P.J. West may represent an individual, an insurer, a health-care provider or a third-party administrator. The initial request is often for medical record review which includes a root-cause analysis.

“We get cases at different stages,” says West, “but optimally we’re involved as soon as the case comes through the door of the law firm, especially with medical malpractice or personal injury.” From the outset, legal nurse consultants can thoroughly organize information and screen the case for merit, helping both plaintiffs and defendants determine whether or not to invest more time and money in pursuing the litigation.

Calls also come in from hospitals after an adverse medical event. West interviews all staff members and any physicians involved and explores the facts to help determine what happened, how it happened, what can be done to make sure it doesn’t happen again, and how to help the family that may be affected. This approach benefits patients and families, as well as organizations and firms.

In complex cases, the extensive medical records do not always arrive in clear order. To organize them and bring vital issues to light, West and her colleagues have been using CaseMap® fact- and issue-management software for more than a decade.

*“Putting the case file together right away using CaseMap can spare injured parties the pain of a long legal process while saving attorneys time and money. It can also clarify which issues to pursue.”*

–Tricia West,  
Principal and Legal Nurse Consultant  
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### **Organizing medical case facts**

Building an organized case file is essential, says West. “You don’t want to waste a lot of time flipping back and forth between the records to draw conclusions.”

Records from the plaintiff’s side are often “like 52 pick-up” with many items out of order, says West. To remedy the situation, she explains, “We organize the records, create a table of contents and scan everything into sections placed into CaseMap the way a medical record is set up—from birth date and basic personal information to medical components. Then we create a list of issues supporting or denying various case arguments.”

The consultants generally organize CaseMap fact chronologies using most or all of these column headings (depending upon the type of case):

- Date/Time
- Fact Text (verbatim from the medical records without legal nurse consultant comments)
- Source (by file name, including tab number after West and her staff have organized and Bates stamped the medical record)
- Bates Number
- Legal Nurse Consultant Opinion
- Counsel Comments (if counsel does not have CaseMap to add comments personally)
- Evaluation (user rates whether a fact is heavily in favor, against or neutral)
- State Regulations (when applicable, e.g., in elder abuse cases, possibly linked to citations at *lexis.com*<sup>®</sup>)
- Federal Regulations (when applicable and possibly linked to *lexis.com*)
- Material and Status columns, if needed, for drafting or opposing a request for summary judgment

“When entering the information, we need to create each object with some thought,” says West. “It is important that the consultant understand what the attorney needs and how counsel will use the CaseMap file before creating it.” With the correct data and organization, the consultant will be able to provide essential details quickly.

For example, the PJWA consultants can make “lab” an object, include “lab” before every lab test result is entered in the Fact Text, and also make each lab test an object. In that setup, sodium, potassium HCT and HGB would all be objects, as would the word “labs.” The PJWA consultants can take the same approach with “vital signs,” as well as specific vital signs such as blood pressure and pulse. As a result, they can quickly filter on all labs, all vital signs or just a specific result. (See visual examples on page 3.)

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Filter: Linked To Fact Text: "Laboratory"					
Date & Time	Fact Text	Source...	Bates	LNC Opinion	
Tue 05/25/2010	Laboratory: Sodium 135 potassium 6.9 chloride 103, bicarb 10 Blood Urea Nitrogen 101 creatinine 10.68	07H&P	0079	Critical Laboratory result should be called to MD STAT	
Tue 05/25/2010 2:10 p.m. PT	Laboratory: K+ = 6.9 Creatinine 18.68	04. ERDoc	0020	Renal failure indices. Apparently had acute renal failure that resolved.	
Tue 05/25/2010 2:20 p.m. PT	Laboratory: FBS 175 D50W 1 amp Insulin regular 10 U IVP HCO3 1 amp 50 mEq 8.4 %	04. ERDoc	0019		
Tue 05/25/2010 4:20 p.m. PT	Laboratory: Troponin levels 1.0 called from Laboratory.	04. ERDoc	0020		

Filter: Linked To Fact Text: "Blood pressure"						
Date & Time	Fact Text	Bates	Source...	State Regs	LNC Opinion	Linked Issues
Wed 10/08/2008 12:00 a.m. PT	Blood pressure 97/58, pulse 80. Patient feeling OK, will monitor.	174	11TXRecords	R9-10-1003 D.6.g.xiii	Blood pressure still low.	
Wed 10/08/2008 12:00 a.m. PT	Blood pressure 117/56, pulse 82. Rechecked Blood pressure, blood sugar 352, RN	174	11TXRecords		What was done about blood sugar? Nothing documented in	Failure to Document
Wed 10/08/2008 9:30 a.m. PT	Blood pressure 118/57, pulse 78. Eyes closed, resting comfortably.	174	11TXRecords			
Wed 10/08/2008 10:30 a.m. PT	Blood pressure 88/52, pulse 81. Pt Blood pressure low, patient complains of feeling bad.	174	11TXRecords	R9-10-1003 D.6.g.xiii	20 ml of normal saline given? Inaccurate documentation.	Failure to Document A
Wed 10/08/2008 12:00 p.m. PT	Blood pressure 103/56, pulse 80. Eyes closed, resting comfortably.	174	11TXRecords		Minimal assessment. This note was not "noted" until	
Wed 10/08/2008 1:10 p.m. PT	Blood pressure 117/57, pulse 78. No voiced discomfort at this time.	174	11TXRecords			
Wed 10/08/2008 1:30 p.m. PT	Blood pressure 145/67, pulse 80. No voiced discomfort at this time.	174	11TXRecords		This is last note we have from MD prior to fall. The next note	

Filter: Linked To Fact Text: "Stage 3" or Linked To Fact Text: "Braden Scale"				
Date & Time	Fact Text	Source(s)	Bates	
Thu 04/08/2010	Braden Scale: 15 = Mild Risk. Sensory Perception: 3 slightly limited. Moisture: 2 often moist. Activity: 3 walks occasionally. Mobility: 2 very limited. Nutrition: 3 adequate. Friction & shear: 2 potential problem.	48MiscAssmts	730	
Mon 04/12/2010	Braden Scale: 15 = Mild Risk. Sensory Perception: 3 slightly limited. Moisture: 2 often moist. Activity: 3 walks occasionally. Mobility: 2 very limited. Nutrition: 3 adequate. Friction & shear: 2 potential problem.	48MiscAssmts	730	
Fri 04/30/2010 2:25 p.m. PT	Medicine Note: 2 Stage 3 decubitus coccyx, wound care follows, continue duoderm. ....	42MDPrognotes	667	

Filtered laboratory and vital sign results in CaseMap.

How important is CaseMap to organizing complex cases? Says West, “CaseMap makes it possible to categorize specific, detailed information about the case and pinpoint breaches in the standard of care more quickly and effectively than other approaches using a simple word processing document or spreadsheet. ... I think it’s invaluable.”

### Advocating for the standard of care

“Once the facts are in CaseMap, it all unfolds,” says West. “We can provide vast amounts of specific information to counsel almost instantly.” For example, to identify how often a condition has been assessed, how often a patient received medication or how a decubitus was reported, the West consultant can filter on the “short name” for that item and provide the information in a CaseMap sub-report.

Then West performs careful analysis to uncover errors and patterns leading to the issues at hand. P.J. West standards call for examination of each case by at least two nurses, often sharing the CaseMap case file from different cities. This provides counsel with at least a second if not a third pair of eyes critically analyzing the case from a medical fact standpoint. The attorneys are not charged for this extra evaluation as it is a quality check standard of P.J. West. During this process, the nurses also brainstorm strategies and scenarios that West can then share with counsel.

*“Our job is to make sure the attorney knows everything that happened. You can’t do a case justice without having a case chronology. You don’t want to miss anything. And you want the attorney to have all of the pertinent facts to best argue the case.”*

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In reviewing data, West and PJWA staff keep in mind factors like standard of care, possible breaches of that standard, damages/injury to the patient, liability and causation.

For example, personal injury cases involve investigation of prior issues with preexisting injuries, medications, physical therapy or anything that would affect the injury—even if that treatment is not a direct result of the accident central to the case. Once this information is put into the CaseMap chronology, it becomes clear if and how a preexisting injury was a factor.

With medical malpractice, PJWA consultants look for evidence of a handoff communication problem, chain of command issue or other breach in the standard of care. (See issues outline below.) They track visits and filter the data to see if needed doctor visits or nurse assessments occurred in a timely manner.

When a serious medical error occurs, “it is usually a cascade of events—typically at least three—that have gone wrong, causing a significant poor outcome,” says West. For example, in dialysis, if a needle inadvertently is dislodged, it is more likely to result in severe adverse consequences if equipment didn’t have properly calibrated and functioning internal monitors, staff was not sufficient in number or not properly monitoring patients *and* the facility’s own policies and procedures were not followed.

The PJWA staff can also see evidence of errors related to surgery, wound care, diagnostic procedures and more by using a CaseMap object spreadsheet and case chronology. CaseMap also enables them to create custom sub-reports on portions of a chronology to focus on interrelated facts.

Case Shortcuts	Issues
<b>Favorites</b> <ul style="list-style-type: none"> <li>Facts (129)</li> <li>All Objects (323)</li> <li>Persons (6)</li> <li>Documents (111)</li> <li>Issues (51)</li> </ul> <b>All Shortcuts</b> <ul style="list-style-type: none"> <li>Case Data <ul style="list-style-type: none"> <li>Facts (129)</li> </ul> </li> <li>Objects <ul style="list-style-type: none"> <li>All Objects (323)</li> <li>Persons (6)</li> <li>Organizations (6)</li> <li>Documents (111)</li> <li>Other Physical Evidence</li> <li>Events (16)</li> <li>Places (1)</li> <li>Pleadings (0)</li> <li>Proceedings (0)</li> <li>Other Discovery (0)</li> </ul> </li> </ul>	<b>Full Name</b> <ul style="list-style-type: none"> <li>1.1.3.1 Failure to provide adequate nutritional intervention</li> <li>1.1.3.2 Improper monitoring of weight loss</li> <li>2 Skin Assessment and Intervention <ul style="list-style-type: none"> <li>2.1 Braden Scale Miscalculated or Not done</li> </ul> </li> <li>3 Lab <ul style="list-style-type: none"> <li>3.1 Albumin and Prealbumin levels</li> <li>3.2 Failure to timely and appropriately monitor abnormal lab</li> <li>3.3 Failure to timely and appropriately intervene re: abnormal lab</li> <li>3.4 Hemoglobin and Hematocrit <ul style="list-style-type: none"> <li>3.4.1 Anemia not managed</li> </ul> </li> </ul> </li> <li>4 Opinions <ul style="list-style-type: none"> <li>4.1 Failure to Perform Licensed Assessment as Required</li> </ul> </li> <li>5 Care Plan <ul style="list-style-type: none"> <li>5.1 Failure to develop and maintain care plan</li> <li>5.2 Failure to follow care plan</li> </ul> </li> <li>6 Failure to adequately train, knowledgeable and competent staff</li> <li>7 Failure to Provide Entire Medical Record</li> <li>8 Policies and Procedures <ul style="list-style-type: none"> <li>8.1 Failure to Follow Established Atlantic P&amp;P</li> </ul> </li> <li>9 Intake and Output <ul style="list-style-type: none"> <li>9.1 Failure to Monitor I&amp;L per SOC and SNE protocol</li> </ul> </li> </ul>

*This issues outline in CaseMap makes medical omissions and errors readily evident.*

*“Using CaseMap to share case facts with experts saves counsel many thousands of dollars in physician expert time and makes it unnecessary for physicians and other experts to recreate the same wheel over and over.”*

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“CaseMap chronologies help us make sure everything that should be done is being noted,” says West. “Our job is to make sure the attorney knows everything that happened. You can’t do a case justice without having a case chronology. You don’t want to miss anything. And you want the attorney to have all of the pertinent facts to best argue the case.”

After performing initial case analysis, PJWA sends counsel printed medical records—organized and Bates stamped—plus the case file, an electronic chronology and a custom report created using the CaseMap ReportBooks feature. This includes a list of deposition questions on the CaseMap Questions page.

In the future, as health-care legislation requires all medical facilities to maintain electronic records, CaseMap may have an even larger role, she said. Attorneys will serve themselves well by requesting electronic records by section so that the medical records received can be appropriately categorized in a logical sequence. That includes asking for physician orders, progress notes, care plans, nursing notes, radiology, labs, etc., by section. Then, CaseMap can facilitate the needed organization.

## Timelines, testimony and motions

### Visual timelines for court

If a polished visual timeline is needed for presentation, PJWA can easily send filtered data from CaseMap to TimeMap in a click and generate professional visuals based on case facts. These timelines are easily used in trial as visual exhibits to the jury.

### Expert witness information

The way CaseMap helps identify breaches in the standard of care becomes the basis for expert opinions, says West. Since only verbatim information from the medical record is put into the Fact Text column, a report can be run for all experts on the case. The Legal Nurse Consultant Opinion and Counsel Comments columns can be hidden on the CaseMap spreadsheet so that other expert witnesses can view the data objectively.

Says West, “Using CaseMap to share case facts with experts saves counsel many thousands of dollars in physician expert time and makes it unnecessary for physicians and other experts to recreate the same wheel over and over.”

Since P.J. West Bates stamps all of the records—and CaseMap Bates and Source columns are included with the Fact Text document—everyone is truly on the “same page” when discussing the case, West says.

In addition to the entire ReportBook, PJWA runs sub-reports, depending upon the type of case. In a case involving decubitus wounds, sub-reports would be run specifically on decubitus stages 2, 3 and 4, treatment for the wounds and wound assessment. Since all of these key words would have been made an “object,” the report is populated and updated automatically.

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## Depositions

When depositions are involved, the consultants load the transcripts into TextMap software, highlight key points and set up a Source Quote in CaseMap. On the Question page of CaseMap, they can pose deposition questions and specify a due date for answers, the person assigned and how critical follow-up answers are. If attending the deposition as a consultant, West brings a laptop with the CaseMap file and can assist counsel with follow-up questions, as requested.

## Motions for summary judgment

CaseMap also provides the majority of data required to write a Motion for Summary Judgment or answer and oppose summary judgment. Says West, “The summary judgment tools in CaseMap save the firm time and money while decreasing the chances of inadvertently omitting important facts. As an expert, I find these tools also greatly assist in the deposition process.”

## Savings and a strategic advantage

“After we set up a major case in CaseMap, there are huge savings,” says West. “CaseMap allows me to provide additional information and details to counsel quickly. It saves the firm from having someone go through the labor-intensive process of looking at records again and again to find specific information. It also helps ensure that counsel does not ‘leave facts or money on the table’ in settlement situations.”

## About LexisNexis

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