

OFFICIAL TRANSCRIPT OF PROCEEDINGS

65
72, 1117

Agency: U.S. Nuclear Regulatory Commission

Title: Incident Investigation Team

Docket No.

INTERVIEW OF: Sarah Ferguson

LOCATION: Indiana, Pennsylvania

DATE: Wednesday, December 9, 1992

PAGES: 1 - 14

Information in this record was deleted
in accordance with the Freedom of Information
Act, exemptions 6
FOIA- 92-612

E/25

ANN RILEY & ASSOCIATES, LTD.

1612 K St. N.W., Suite 300
Washington, D.C. 20006
(202) 293-3950

9403240134 930608
PDR FOIA
BUDNICK92-612 PDR



ADDENDUM/ERRATA SHEET

Page	Line	Correction and Reason for Correction
Fac. Sheet		Name is spelled incorrectly
1		Sara Ferguson
1	6	Sara Ferguson Spelled incorrectly
2	4	Sara Ferguson Spelled incorrectly
2	7	DIBLES Spelled incorrectly Diebolts
2	10	Mrs. DIBLE Spelled incorrectly Diebolt
2	12	Mr. DIBLE Spelled incorrectly Diebolt
2	18	Mrs. DIBLE Spelled incorrectly Diebolt
2	22	Mr. DIBLE Spelled incorrectly Diebolt
3	2	Mr. DIBLE Spelled " " "
3	9	Mrs. DIBLE " " "
4	9	Mr. DIBLE " " "
4	13-14	Should read He has a treatment around his supra pubic catheter, NOT a Rondo supra, subic catheter
4	21	Should read Before they got him up, NOT before they brought him up.
5	22	Mr. DIBLE spelled incorrectly NOT Diebolt
6	13	Mr. DIBLE " " " "
6	21	Mr. DIBLE " " " "
7	16	We normally try to keep her in bed until after breakfast, because she develops a peri-anal pressure area when she is up too long.
8	16	Mrs. Dittie NOT Mrs. Daily
9	20	Report at 7:00 that Mrs. Colgan had passed one of catheters - sentence unclear with word 'she'

UNITED STATES OF AMERICA
NUCLEAR REGULATORY COMMISSION

OFFICE OF INVESTIGATIONS

- - - - -X

In the Matter of: :

INVESTIGATIVE INTERVIEW :

Sarah Ferguson :

(CLOSED) :

- - - - -X

Scenery Hill Manor Nursing Home
100 Lions Health Camp Road
Indiana, Pennsylvania 15707
Wednesday, December 9, 1992

The above-entitled matter commenced at 4:15
o'clock p.m., when were present:

CYNTHIA G. JONES, Section Chief, IMNS
Nuclear Regulatory Commission

ANN RILEY & ASSOCIATES, Ltd.
Court Reporters
1612 K. Street, N.W., Suite 300
Washington, D. C. 20006
(202) 293-3950

P R O C E E D I N G S

1

2

[4:15 p.m.]

3

4

MS. JONES: This is Cynthia Jones. It is 4:15,
and I am at the Nursing Home.

5

If you can just state your name and your --

6

THE INTERVIEWEE: My name is Sarah Ferguson.

7

MS. JONES: And you are an RN?

8

THE INTERVIEWEE: Right.

9

MS. JONES: So for Bedroom 6 with the [REDACTED]

10

what is their normal routine, if you can estimate?

11

THE INTERVIEWEE: Normally they both eat breakfast

12

in their rooms. They are served at seven. [REDACTED] is

13

usually out of bed, and eats at the foot of her bed. [REDACTED]

14

[REDACTED] does not get up until after breakfast.

15

She spends the majority of her morning in her

16

room, mostly in her bed, unless [REDACTED] comes down and gets

17

here for activities, and that isn't until around ten.

18

MS. JONES: And [REDACTED] is the Activities Director?

19

THE INTERVIEWEE: Right.

20

MS. JONES: If [REDACTED] eats at the end of her

21

bed, is she sitting in bed or sitting in a chair?

22

THE INTERVIEWEE: In a chair.

23

MS. JONES: Then that chair would be between the

24

window and her bed, or would it be closer [REDACTED]

25

THE INTERVIEWEE: No, it is at the foot of her

ANN RILEY & ASSOCIATES, Ltd.

Court Reporters

1612 K. Street, N.W., Suite 300

Washington, D. C. 20006

(202) 293-3950

1 bed, so she would be facing her bed.

2 MS. JONES: And [REDACTED] would be sitting in
3 bed?

4 THE INTERVIEWEE: Yes.

5 MS. JONES: And when breakfast is done, how long
6 would that take?

7 THE INTERVIEWEE: They are both slow eaters. It
8 takes them a good half an hour to 45 minutes.

9 MS. JONES: And then once breakfast is done, would
10 Mrs. Diebolt stay in the room?

11 THE INTERVIEWEE: She, most of the time does, but
12 she is very independent. She is ambulatory. She will come
13 out and wander around, if she is hunting for someone or
14 something. She goes to the bathroom independently.

15 MS. JONES: So, if you had to estimate how many
16 hours, say, from nine o'clock until dinnertime or
17 suppertime, whenever that is served, at 5:06, would she be
18 outside of the room?

19 THE INTERVIEWEE: Probably maybe two, two-and-a-
20 half at most.

21 MS. JONES: Then, once she is in the room, would
22 she be sitting in a chair reading, or what would her
23 activities be?

24 THE INTERVIEWEE: Most of the time, she will
25 listen to a radio. She does do some reading, but she

ANN RILEY & ASSOCIATES, Ltd.

Court Reporters
1612 K. Street, N.W., Suite 300
Washington, D. C. 20006
(202) 293-3950

1 usually curls up in a ball at the corner at the top of the
2 bed.

3 MS. JONES: At the top, you mean the closest to
4 the wall?

5 THE INTERVIEWEE: Right.

6 MS. JONES: So her head could be probably pretty
7 close to the headboard?

8 THE INTERVIEWEE: Right.

9 MS. JONES: And then [REDACTED] what would his
10 activities be for the day?

11 THE INTERVIEWEE: He is a total care. So once the
12 girls have him up and he gets in a wheelchair, and we take
13 him out of his room. He has a treatment in the morning, a
14 Rondo supra pubic catheter, and then he is out for lunch,
15 and he usually spends the rest of the afternoon with
16 activities.

17 MS. JONES: How often would the nursing staff or
18 the certified nurse assistants be in the room with him?

19 THE INTERVIEWEE: Once he is up, probably about
20 twice more during that shift. They would reposition him
21 before they brought him up, but he is independent once he is
22 out of his wheelchair, other than emptying his catheter and
23 like that.

24 MS. JONES: When would he get up, or when would
25 you help him into a wheelchair, about what time of the day?

1 THE INTERVIEWEE: Usually around 10:30, between
2 that and 11:00.

3 MS. JONES: And then after 11:00 would his
4 wheelchair be in his room, or he would go somewhere?

5 THE INTERVIEWEE: Most of the time, he is coming
6 out and going down to the dining room because they are
7 always early for meals.

8 MS. JONES: Can he wheel himself?

9 THE INTERVIEWEE: [REDACTED] usually brings him.

10 MS. JONES: And then when would he come back into
11 the room?

12 THE INTERVIEWEE: He may come back in after lunch,
13 not always, and, if so, it probably wouldn't be until after
14 1:00, 1:00-1:15, somewhere right in there.

15 MS. JONES: And when is lunch served?

16 THE INTERVIEWEE: At quarter to twelve.

17 MS. JONES: And would they both be eating in their
18 room?

19 THE INTERVIEWEE: No, they eat their lunch in the
20 dining room, and supper usually.

21 MS. JONES: And supper too, okay.

22 So would [REDACTED] take a nap or anything in the
23 afternoon?

24 THE INTERVIEWEE: No.

25 MS. JONES: He is up all day?

1 THE INTERVIEWEE: Yes.

2 MS. JONES: So in the afternoon, say from 1:00
3 until 6:00 p.m., would he be outside of his room for most of
4 that time, or half that time, or inside?

5 THE INTERVIEWEE: He doesn't have like a daily
6 routine. Some days he would be gone for maybe two hours,
7 including supper. Other days he would spend all the time in
8 his room with the exception of supper.

9 MS. JONES: And then the evening routine, although
10 I know that is not when you are here, what is the normal
11 routine?

12 THE INTERVIEWEE: They eat in the dining room, and
13 usually [REDACTED] is very independent. He will ambulate
14 his own wheelchair around the hall until late, like we are
15 talking after 9:00 usually.

16 MS. JONES: Okay.

17 THE INTERVIEWEE: He visits everyone except [REDACTED]
18 [REDACTED] usually.

19 MS. JONES: He does, okay.

20 THE INTERVIEWEE: Yes, so he is very independent.
21 [REDACTED] usually will go with him part of the time, and
22 when she will go back and go to bed.

23 MS. JONES: So she is in bed by?

24 THE INTERVIEWEE: Seven-thirty or eight, normally.

25 MS. JONES: And does she sleep all the night

1 through?

2 THE INTERVIEWEE: She will get up sometimes a
3 couple of times during the night, but just usually to the
4 bathroom.

5 MS. JONES: And then he would maybe get to bed at
6 ten o'clock?

7 THE INTERVIEWEE: Yes, most nights he is in by ten
8 at the latest.

9 MS. JONES: And let's see if I remember, he is up
10 again at seven for breakfast?

11 THE INTERVIEWEE: He doesn't get up. He gets up
12 after breakfast.

13 MS. JONES: And the patient that is in Room 2,
14 that is [REDACTED]?

15 THE INTERVIEWEE: Right.

16 MS. JONES: What is her daily activities?

17 THE INTERVIEWEE: She normally -- we try to keep
18 her in bed until after breakfast because has like a pressure
19 area from being up. So the girls don't usually get her up
20 until around ten, and then she is up until after lunch, and
21 then we put her back to bed for a couple of hours in the
22 afternoon, and then she is back up for supper.

23 MS. JONES: And she would be in her bed, or just
24 in the bedroom?

25 THE INTERVIEWEE: In her bed.

ANN RILEY & ASSOCIATES, Ltd.

Court Reporters
1612 K. Street, N.W., Suite 300
Washington, D. C. 20006
(202) 293-3950

1 MS. JONES: And then when she gets up for supper,
2 does she eat it in her bedroom?

3 THE INTERVIEWEE: No, she eats in the dining room,
4 both lunch and supper. Breakfast is the only meal she eats
5 in her room.

6 MS. JONES: Is she ambulatory?

7 THE INTERVIEWEE: She is in a wheelchair, but she
8 will not take herself, we have to take her.

9 MS. JONES: And then the evening after dinner?

10 THE INTERVIEWEE: She is usually up probably until
11 like seven or seven-thirty.

12 MS. JONES: And then in bed?

13 THE INTERVIEWEE: Yes.

14 MS. JONES: And then over in Bedroom 9, I think it
15 is, Patients A and B?

16 THE INTERVIEWEE: [REDACTED] is in the first bed.

17 MS. JONES: And what is her daily routine like?

18 THE INTERVIEWEE: She is on a pretty much set
19 routine because of her arthritis. She is in bed until
20 between 11:00 and 11:30 in the morning, and then we have her
21 up for lunch, and she is usually up until about around 1:30,
22 and then she is back in bed, and the girls get her up for
23 supper around 4:30, and put her back to bed about 6:00-
24 6:30, because she doesn't tolerate sitting up for any length
25 of time.

1 MS. JONES: And the person in 9B?

2 THE INTERVIEWEE: That is [REDACTED]

3 MS. JONES: And could you spell the last name?

4 THE INTERVIEWEE: Yes. [REDACTED] She is
5 in bed for breakfast. She is gotten up around 10:30 or
6 11:00, and she also goes back to be in the afternoon for a
7 nap. Most of times the girls will get her back up for
8 supper around 4:00, and she is up for about two hours and
9 then back in bed.

10 MS. JONES: So she is back in bed by what time?

11 THE INTERVIEWEE: Probably, I would say, 7:00 at
12 the latest.

13 MS. JONES: On the morning that the catheter was
14 found by [REDACTED], they explained to
15 me in detail that it had come out a portion, and then it
16 finally fell out.

17 Can you describe what, to your knowledge, happened
18 after that?

19 THE INTERVIEWEE: Sure. [REDACTED] reported in the
20 report at 7:00 that she had passed one of the catheters, and
21 that she had red bagged it and put it in the bio-hazardous
22 waste in the utility room. So I told our maintenance man --
23 they usually empty the bio-hazardous waste from the nights
24 between 7:00 and 7:30 in the morning.

25 I went back to check if he had emptied it yet, and

ANN RILEY & ASSOCIATES, Ltd.

Court Reporters
1612 K. Street, N.W., Suite 300
Washington, D. C. 20006
(202) 293-3950

1 he had not, so I told him to leave it there until I called
2 the Cancer Treatment Center because we didn't have any
3 disposal instructions for those catheters, and she was not
4 supposed to be passing them.

5 So I called them shortly after 8:00 when they
6 opened, and they told me there would be no problem, and just
7 to make sure they went in our bio-hazardous waste, which it
8 already was, so I went back and told Ron to take it out, and
9 that was probably around 8:30.

10 If you had to draw a picture, or if you could draw
11 a picture of how the catheters were placed in the patient,
12 could you remember that?

13 THE INTERVIEWEE: You mean which one was missing?

14 MS. JONES: Yes.

15 THE INTERVIEWEE: It would be the top one of the
16 four she had left.

17 MS. JONES: The top one was missing of the four
18 she had left. So, if I --

19 I guess if this is the bottom, and if this is like
20 her stomach area here, can you draw where they would be?

21 THE INTERVIEWEE: They were in her rectum, and
22 they were sutured, and they were just like in a line. They
23 were really close. She had five, but I wasn't here the day
24 that she came back, because I had been on vacation. When I
25 came back, she had four, and then the top one was passed.

ANN RILEY & ASSOCIATES, Ltd.

Court Reporters
1612 K. Street, N.W., Suite 300
Washington, D. C. 20006
(202) 293-3950

1 MS. JONES: The one that the doctor had taken out,
2 do you know which one that would have been?

3 THE INTERVIEWEE: I believe it was the one that
4 was clear at the very top. I am not positive, though.

5 MS. JONES: That's fine, because I think everyone
6 thus far has said the top one was the one that was missing.

7 Have you used any or had patients with catheters
8 here before?

9 THE INTERVIEWEE: No, not of that type.

10 MS. JONES: And have you used catheters in a
11 previous position?

12 THE INTERVIEWEE: No.

13 MS. JONES: Is it not -- we are trying to get an
14 idea if you had received any specific instructions on what
15 to do with the catheters if there was as problem?

16 THE INTERVIEWEE: No. When she came back, [REDACTED]
17 [REDACTED] had called them because we got really not very
18 specific instructions other than how to clean her after she
19 had voided. We were to syringe her off with warm soapy
20 water, rinse her, and to pat her dry. That was really the
21 only instruction that they had given us other than to be
22 careful in moving her.

23 The only really reason that I had even called them
24 was the fact that I didn't know if there was any specific
25 thing we should do with the catheter, if they wanted it back

ANN RILEY & ASSOCIATES, Ltd.

Court Reporters
1612 K. Street, N.W., Suite 300
Washington, D. C. 20006
(202) 293-3950

1 for some reason, or whatever.

2 MS. JONES: Do you remember who you talked to?

3 THE INTERVIEWEE: No. Somebody asked me that, and
4 I don't know.

5 MS. JONES: Was it a male or female?

6 THE INTERVIEWEE: It was female, and she had
7 checked with someone because she put me on hold because I
8 said to her, I am just verifying if we should do anything
9 special for disposal, and she apparently conferred with
10 someone and then came back and told me no. Whether it was
11 the secretary or who, I don't know. She didn't give me her
12 name herself.

13 MS. JONES: And you had your blood sample taken
14 already?

15 THE INTERVIEWEE: Yes.

16 MS. JONES: And have you gotten your results back?

17 THE INTERVIEWEE: Yes. In fact, they were making
18 jokes about [REDACTED] and I because of our age, and we
19 were absolutely perfectly normal.

20 MS. JONES: Good.

21 I guess just one last question, in your opinion,
22 before Mid had gone in for the treatment at the Cancer
23 Center, would you say that she was able to get around, or
24 was she ambulatory, what kind of assistance did she need,
25 did she come outside of her room and do activities?

ANN RILEY & ASSOCIATES, Ltd.

Court Reporters
1612 K. Street, N.W., Suite 300
Washington, D. C. 20006
(202) 293-3950

1 THE INTERVIEWEE: She came outside of her room,
2 but usually only for therapy. Once and a while she would
3 come around and have a cigarette because she had been a
4 smoker, and once and a while she would crave nicotine, but
5 she wouldn't stay out for any length of time. She had a
6 very hard time this time. We have had her several times
7 before, and she was much weaker, and when she had finally
8 decided to have this done, she was kind of all the time
9 resting and conserving her strength because she wasn't sure
10 how she was going to tolerate it.

11 MS. JONES: Do you know if she was up the weekend
12 before she went in for the treatment?

13 THE INTERVIEWEE: I don't know that for sure.

14 MS. JONES: Would it be in the nurse's notes if
15 she was walking around?

16 THE INTERVIEWEE: No.

17 MS. JONES: And, I guess, in your opinion, what
18 was the feeling of the staff after the patient had died, did
19 it seem unusual or expected?

20 THE INTERVIEWEE: I think everyone expected it.
21 She was a very positive individual until this last time, and
22 when they told her she had a malignancy in her lung also,
23 then she became very depressed and withdrawn, and maybe that
24 is why we didn't pick up on all the physical symptoms
25 because mentally she had absolutely given up. She was just

ANN RILEY & ASSOCIATES, Ltd.

Court Reporters
1612 K. Street, N.W., Suite 300
Washington, D. C. 20006
(202) 293-3950

1 ready to die, and she did.

2 MS. JONES: It is now 4:30, and that is the close
3 of the interview.

4 [Whereupon, at 4:30 p.m., the interview was
5 concluded.]

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25