

# \$2 Million Settlement for Incompetent Surgeries, Missed Diagnoses, and Delays

## Multiple failures to diagnose and treat Dr. Doe results in permanent, painful, and crippling damage.

In May 2001, John Doe, Ph.D., was suffering from persistent low back pain and sought treatment from Dr. A, an orthopedic surgeon in central Florida. An MRI performed on May 14th revealed a large herniated disc at L2-L3; narrowed thecal sack at L2-L3 and L3-L4; spinal stenosis; and other findings that indicated the source of the pain. From the very beginning of his effort to obtain treatment for his back, through several incompetently-performed surgeries, missed diagnoses, and repeated delays of urgently-needed medical and surgical intervention, Dr. Doe was denied appropriate and acceptable medical care. As a result of the numerous failures to provide proper medical treatment, Dr. Doe is now a paraplegic, in pain, suffering considerable economic loss, and unable to enjoy an active life.

Following the MRI in May, Dr. A began a conservative three-course treatment plan that included three epidural blocks, but there was no improvement. Eventually, surgery was decided as the course of action. On August 21, 2001, Dr. A, assisted by Dr. B, performed a bilateral hemilaminectomy and discectomy at L3-L4 at the local medical center. Dr. Doe remained in the hospital for two days. Two weeks later Dr. Doe visited Dr. A's office complaining of continued pain and clear symptoms that indicated a post-operative wound infection that had not been properly evaluated or treated. He returned to Dr. A's office again on September 13 with the same condition.

On September 24th, with no noticeable progress toward relief of his symptoms, Dr. Doe went to the emergency room of the medical center. Dr. A was notified, but despite evidence of his patient's advancing wound infection, he did not come to the hospital to examine his patient. Instead, Dr. C, an orthopedic resident, assumed Dr. Doe's care and simply admitted the patient. A lumbar spine x-ray revealed a new finding of retrolithesis. The findings in the report should have been reported directly and immediately to the attending physicians, but no record was made of the notifications, nor were further studies recommended. Waiting yet another day, Drs. A and C performed an incision and debridement procedure to clean the wound area. Ineffective medical and surgical management of Dr. Doe's post-operative condition continued, and on September 28, 2001, he was once again discharged from the hospital to return home.

Dr. Doe's symptoms continued with no relief. He visited Dr. A again on October 4th, and again the doctor failed to reach the appropriate diagnosis and intervention neces-

sary for Dr. Doe's proper care. Another MRI was performed on October 9th, and because the new radiology doctors failed to request the earlier images for comparison purposes, the doctors failed to recognize the emergent nature of Dr. Doe's condition. Dr. Doe was finally readmitted to the hospital on October 10th, and another incision and debridement was performed the next day. However, that procedure failed to remove the infection. Dr. A noted in his chart, "He is neurologically intact." As infection continued to damage Dr. Doe's back, a neurosurgical consult was ordered on October 19, and Dr. A was advised to perform corrective surgery immediately. Surgery was performed that day, but the infection had, by this time, advanced so much that Dr. Doe suffered permanent neurological injury and was rendered a paraplegic.

John Doe had accomplished a lot in his life prior to this rather short and very torturous effort to find proper and timely medical care for his back pain. He obtained his doctorate from a university in Florida and spent years as a college professor. Following that career, he built a successful real estate business in central Florida and continued teaching in the county public school system. With his professional life winding comfortably down, he and his wife, Jane, were looking forward to a very active retirement life together. There is no such active retirement now. He is confined to a wheelchair. He has no bowel or bladder functions and still suffers excruciating pain. He has exhausted virtually every option in standard pain management and now requires very high doses of narcotics such as Oxycontin to make it through each day. The couple has spent substantial savings to pay for modifying their home to accommodate his limitations and special needs.

In an effort to find redress and relief for the multiple, persistent, and inexcusable failures of presumably qualified medical personnel to diagnose, respond to, and treat him in a timely and appropriate manner, Dr. Doe asked SDSBS attorneys **Chris Searcy** and **Bill Norton** to represent him. An action was filed in Orange County, Florida, against the several physicians involved and the hospital. Shortly before the case was set for trial, the parties participated in mediation and reached settlement for a total of \$2 million. ■



Suffering from persistent back pain, John Doe, Ph.D., sought medical help. Following a series of missed diagnoses and delays by incompetent medical professionals, including their failure to treat an aggressive infection, Dr. Doe still suffers from pain and is now a paraplegic with permanent neurological injuries. SDSBS attorneys successfully brought an action against the doctors and the hospital.