

OF COUNSEL

A quarterly report
to clients
and attorneys.

VOLUME 03
NUMBER 2

Tragic Results for Newborn Due To Hospital Miscommunication

In November 1998, a young mother suspected she was pregnant and sought obstetrical care from Dr. B, who had provided medical care during her first pregnancy. Although she had experienced some difficulty with her prior pregnancy, which necessitated a caesarean delivery, the young mother's pregnancy this time was uneventful. On May 27, 1999, three days after an ultrasound was performed, Dr. B informed the mother that her baby was not in a breech position and that she could be delivered via VBAC (vaginal birth after caesarean).

By the beginning of June, the mother had reached full term and was ready to deliver. On the morning of June 2, she was admitted to Hospital C, where Dr. B induced her labor with the use of a drip Pitocin. The dosage of the drug was increased incrementally throughout the day. An epidural was administered around 3:30 p.m., after which an irregularity began in the baby's heartbeat. Nevertheless, Dr. B continued to increase the dosage of Pitocin, and by 7:00 p.m. the mother was completely dilated. Unfortunately, neither Dr. B nor the nursing staff recognized the irregularity of the baby's heartbeat, a crucial test for fetal distress, despite the fact that the condition was evident on the fetal heart monitor strips used to monitor the yet unborn baby.



*Settlement agreement reached
for more than
\$17 Million*

During the afternoon, Dr. B made at least four attempts to deliver the baby using a vacuum device. The baby was finally delivered at 9:38 p.m. Tragically, she was described as floppy at birth and in need of aggressive resuscitation, including chest compressions and intubation. Baby J was born severely depressed and required significant medical intervention to save her life. Despite aggressive and intensive resuscitative efforts, Baby J was left a permanently and severely brain-injured child who will require virtually every type of interventional therapy, as well as around-the-clock nursing care, for the remainder of her life.

Continued on page four.

*For 25 years, a tradition of...taking Time to Care
...in the profession, in the community.*

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NOTE: The accounts of recent trials, verdicts and settlements contained in this newsletter are intended to illustrate the experience of the firm in a variety of litigation areas. Each case is unique, and the results in one case do not necessarily indicate the quality or value of any other case.

Omitting clients' names and/or defendants' names are the result of requests for anonymity.

Prescription Error Causes Devastating Injuries

Leah Strassman, age 61, had been suffering from a condition called hypothyroidism, and was being treated with a maintenance medication called Cytomel. The medication is a potent synthetic thyroid drug used to treat hypothyroidism, which is also sometimes referred to as "lazy thyroid." The manufacturer of Cytomel produces the medication in tablets of 5, 25, and 50 micrograms. Unfortunately, in December 2002, Ms. Strassman's treating endocrinologist signed a prescription for Ms. Strassman to take five milligrams of Cytomel, twice daily. The prescription was therefore written for one thousand times the correct dosage. Compounding the doctor's error, the pharmacy filled the prescription as written and dispensed the drug to its patient without question.

Ms. Strassman took the erroneous dosage of Cytomel for six days before she suffered what is known as a "thyroid storm." She experienced fevers reaching 108 degrees, slipped for a period of time into a coma, and had multiple

cardiac arrests. She relies upon a ventilator to breathe, she is partially paralyzed, and has permanent heart and brain damage.

*The prescription was written
for one thousand times
the correct dosage.*

On Ms. Strassman's behalf, attorney Elliot Hochman was contacted to investigate the mismanaged medication. In turn, Mr. Hochman referred the case to Harry Shevin at the Searcy Denney firm. Mr. Shevin filed a formal Notice of Intent upon the pharmacy, Schaefer Drugs, and the treating endocrinologist. Negotiations began immediately. Fortunately for Ms. Strassman, the pharmacy and the physician were well insured, and Mr. Shevin was able to collect the total available liability insurance limits of \$3.5 million for her. The money will be used to provide medical care and living assistance for Ms. Strassman, who remains ventilator dependent and in need of constant care.



Log onto

www.searcylaw.com

for the latest news
and information about
**Searcy Denney Scarola
Barnhart & Shipley.**



Student Drowns During First Open Water Dive...

But Signed Liability Release Exonerates Instructors and Dive Company

In the summer of 2001, Mike Yargates and his brother-in-law, Jack, wanted to get certified to scuba dive. They investigated the local diving community and settled on American Dive Center for their scuba instruction.

Beginning on July 23, 2001, Mike and Jack reported to American Dive Center to begin their course. Over the next few days, they completed both classroom and swimming pool training successfully, thereby allowing them to attend the first two of the four “open water” dives required for certification.

The first ocean dive was scheduled for the morning of July 28. Mike and Jack reported to a beach location for their first two required open water dive training sessions. Upon their arrival, however, they discovered that their regular Instructor was not present. Instead, a new Instructor was there, along with a new Dive Master.

Mike and Jack completed the first scheduled ocean dive that day without incident. All of the students surfaced for a period of time between dives (called a “surface interval”). After practicing various skills on the surface, everyone in the class descended for the second dive. The Instructor arranged the students in a semi-circular pattern and began working with them in pairs. All of the divers had their arms locked.

During this second dive, Mike Yargates suddenly let go of Jack’s hand and went to the surface. He would never be seen alive again. Emergency calls were eventually made, prompting searches by the Marine

Patrol and a Coast Guard helicopter crew. Mike was finally found floating motionless in an area south of the dive site. Resuscitation efforts failed and Mike was pronounced dead upon arrival at the hospital.

An investigation of this tragic event revealed that Mike was having buoyancy problems on his first dive, and that the Dive Master knew it. Those problems continued during the second dive, and likely caused or contributed to Mike’s unexplained ascent. In addition, it was learned that the Dive Master, who is in charge of keeping the class together while the Instructor works with students individually, never saw Mike leave the group and go to the surface. Another diver had to inform the Dive Master that Mike had ascended. The Dive Instructor was also unaware of Mike’s ascent. Eventually the Dive Master surfaced to look for Mike Yargates, but he was nowhere to be found. The Dive Master then returned to the ocean floor and waited while the Instructor finished the training exercises. The class then surfaced,

and that is when Mike was first thought to be missing.

Following her husband’s death, Mrs. Yargates hired Attorney Ed Middlebrooks to investigate the circumstances of the dive. Mr. Middlebrooks, in turn, referred her to Earl Denney and Karen Terry of the Searcy Denney firm. Ms. Terry filed suit against American Dive Center, its Instructors, and the Dive Master. However, the defendants quickly moved for Summary Judgment, citing the release form signed by Mr. Yargates prior to beginning

the class. The document released American Dive Center and its Instructors from liability. Judge Estella Moriarty granted Summary Judgment on behalf of the Instructors and American Dive Center.

Following the Summary Judgment hearing, the only defendant left in the case was the Dive Master, who held a lesser certification than the Instructor. Judge Moriarty tenuously agreed that it remained a jury question as to whether the Dive Master was acting as an agent of American Dive Center or whether he was merely an independent **Continued on page nine.**



Tragic Results For Newborn

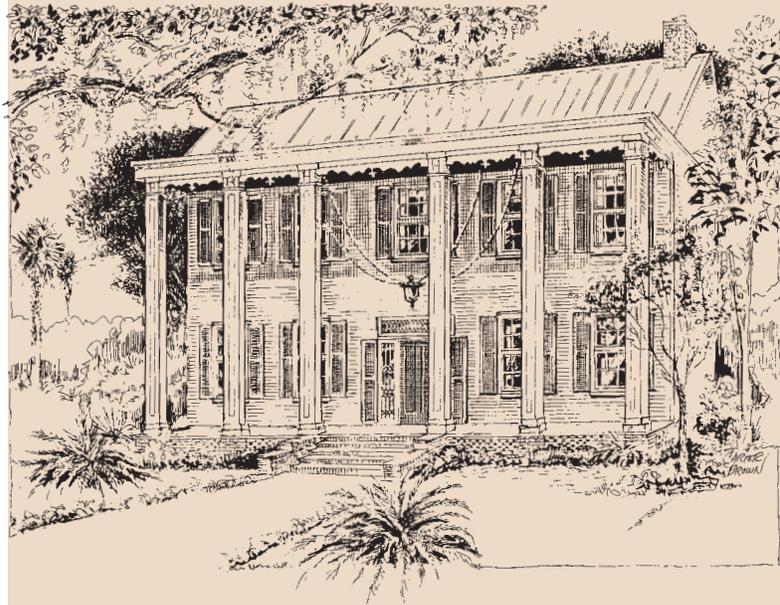
(Continued from page one.) The mother retained attorneys Chris Searcy and Greg Barnhart to investigate the facts and circumstances surrounding her daughter's profound and tragic brain injury. The investigation of the care rendered to the mother during the labor and delivery revealed that the nurses in the delivery room had inaccurately interpreted the fetal heart monitor strips and then reported the erroneous findings of the baby's fetal heart tracings to Dr. B. The doctor then relied upon the incorrect documented and stated information and allowed the labor to continue with continual titration of Pitocin, which caused further risk of harm to the unborn baby. Dr. B later testified that, had she received a correct

assessment of the fetal heart monitor strip, she would have intervened on an emergency basis. She would have discontinued the Pitocin, provided intrauterine resuscitation, and performed a caesarean section if necessary to rescue the baby from the hostile environment that had been created. Further, Dr. B testified that the inaccurate report of the baby's well-being gave her a false sense of assurance of the child's ability to withstand a vaginal delivery with use of a vacuum suction device, rather than undergoing a prompt caesarean section.

Prior to suit being filed, Dr. B's insurance company tendered her policy limits of liability coverage of \$250,000. The hospital and nurses, however, defended the case primarily by blaming Dr. B and by relying on causation defenses. The hospital and nurses also defended the case by challenging the future economic damages claim and by arguing that the baby's profound injuries would yield a significantly shortened life expectancy.

The litigation became further complicated when one of the hospital's liability insurance companies declared bankruptcy while the case was pending. The insurance company was forced into fiscal rehabilitation in the Commonwealth of Pennsylvania, which significantly complicated and delayed the progress of the case.

As a result of the arduous prosecution of this case, Chris Searcy and Greg Barnhart were able to reach a settlement agreement with the hospital for an amount exceeding \$17 million. These funds ensured that Baby J would have intensive therapies and care required for further developmental and other medical needs, thus allowing her to live as full a life as possible.



Historic House to be Future Tallahassee Branch Office

The law firm of Searcy Denney Scarola Barnhart & Shipley will be opening a branch office in Tallahassee. The firm purchased and is currently renovating the "Towle House." The house was built in 1847 by Simon Towle, Tallahassee mayor and state comptroller, and is located in the historic district of Tallahassee. The house was occupied by several different private owners from 1854 until its purchase in 1968, when it was utilized by an interior designer as a studio. The house was sold in 1976 to the Democratic Executive Committee of Florida, which occupied the building until its recent sale to the law firm.

Renovations are anticipated to be completed by the end of summer, allowing the firm to take occupancy of the building and have it operational by this fall. The firm is committed to preserving the structure as an important part of the historic section of Tallahassee. Attorneys Lance Block and Jim Gustafson are in the process of relocating to Tallahassee and will continue to practice there as members of the Searcy Denney Scarola Barnhart & Shipley firm.

Hospital-acquired Infections... Assumed Risk or a Hospital's Hidden Secret?

Much has been written of late concerning a perceived national epidemic of hospital-acquired, or nosocomial, infections. Many in the medical community preach acceptance of this “known complication,” while perhaps secretly hoping for the next super-drug to be announced to save the day. Other more pragmatic professionals have sounded the alarm, despite it falling at times upon the deaf ears or shackled hands of their colleagues.

Hospital-acquired infections are nothing new. Treatises on hand washing as an effective means of preventing surgical site infections (SSIs) were written as far back as the mid-1800s. In 1958, The American Hospital Association recommended that surveillance programs be established in all hospitals in response to nationwide epidemics of *Staphylococcus Aureus* (staph) infections. Hospital-based infection control nurses and epidemiologists were proposed by the Centers for Disease Control in 1970. Finally, in 1976, the Joint Commission for Accreditation of Healthcare Organizations (JCAHO) published standards of infection prevention and control as a condition for hospital accreditation. Infection control and prevention activities have been shown in studies to reduce common nosocomial infection rates by as much as 32% in subsequent years.

In August 2002, a *Chicago Tribune* report by medical writer Michael Berens identified over 103,000 deaths in the year 2000 from nosocomial infections, of which 75,000 were preventable. Identified causes centered on the lack of appropriate sanitation, from hand washing to housekeeping. No hospital can eradicate infection entirely. What is interesting, however, is that where infection control programs have established focused methods of isolating and investigating each infection, the infection rates have dropped to near zero. It is therefore the challenge of infection control professionals to minimize the occurrence and severity of nosocomial infections.

The National Nosocomial Infection Surveillance System (NNIS) report has been relied upon over time by administrators and infection control officers in hospitals as a guide, and at times as a defense, to their infection rates when challenged. The true incidence of infections in hospitals is

legally protected from disclosure in many states. Therefore, hospitals often pronounce their infection rates as acceptable based upon their falling within the perceived safe range of rates published by NNIS. They cite this as proof of an effective infection control program. This is a misguided and misleading statement. The CDC has consistently stated that the NNIS report does not purport to establish any standard, but rather is a historical report of fact. Given hospitals' reliance upon NNIS, the question asked of late by infection control experts and scholars is why it has become sufficient in an American hospital to be “no worse than anyone else,” which is all that the NNIS report truly provides for. In today's economic climate, some hospitals overlook infection control in the ever-furious search for revenue growth. With no independent policing organization, and JCAHO having recently admitted to inaccurate data due to hospital underreporting, hospitals have not been called to the mat on whether patients are being protected from infection to the best of the hospitals' ability. As more people are injured and killed by a system of hospital care which sees revenue growth as the sole guiding principle, many healthcare consumers are turning to litigation in their efforts to effect change in this trend. Mounting pressure from within the ranks of nurses, epidemiologists, patient advocates, and the patients themselves, seems poised to pierce the veil of secrecy and create a climate where patient safety and care, through proper and diligent infection control, will be restored to the balance sheet, arguably as a financial liability, but certainly as a moral asset.

Searcy Denney Scarola Barnhart & Shipley has practiced in the highly complex and technically sophisticated specialty of litigation involving institutional infection control lapses, as well as in individual cases where infection care was inappropriately or untimely rendered, for over a decade. We are currently handling over 100 cases involving lapses in institutional infection control, and several other cases involving individual incidences of negligence.

String of Errors Leads To Legal Malpractice Settlement

In 1991, Mr. J was involved in a private aircraft accident that rendered him a quadriplegic. At the time of the tragedy, he had been actively employed by Pratt & Whitney as a program manager/engineer for approximately 21 years. After a period of convalescence, Mr. J attempted to return to his position at Pratt & Whitney, but was denied that opportunity. The circumstances of that denial gave rise to a discrimination case against Pratt & Whitney, for which Mr. J sought legal representation.

The United States Department of Labor investigated Mr. J's case and found Pratt & Whitney to be in violation of his rights. The Department of Labor found that Pratt & Whitney should have offered Mr. J the opportunity to resume his job at the same salary, with the same benefits, and with the same opportunity for growth that he would have enjoyed had he not been hurt.

Mr. J first sought representation with Law Firm A, which unfortunately failed to timely file a claim under the Florida Civil Rights Act. This error eventually proved fatal to Mr. J's Florida Civil Rights Act claim.

In July 1996, Mr. J terminated Law Firm A and hired Law Firm B to pursue both the Americans with

Disabilities Act and the Florida Civil Rights Act claims. Law Firm B filed a complaint on November 18, 1996, against Pratt & Whitney, but failed to get the required "Right to Sue" letter prior to filing the Complaint. The Court dismissed the lawsuit.

After the case was dismissed, Law Firm B obtained the "Right to Sue" letter and then re-filed essentially the same complaint it had filed previously. The judge, however, dismissed the case a second and final time. Law Firm B appealed the decision to the 11th Circuit Court of Appeals, but the appellate court agreed with the trial court and the case came to an end. As a consequence, Mr. J's claims under the Florida Civil Rights Act and the Americans with Disabilities Act were forever lost. He therefore received no compensation whatsoever, all due to legal negligence.

Given his significant physical disability, Mr. J is not suited for most forms of employment. However, he was unharmed mentally and therefore remained suited for the highly intellectual job that he previously and capably performed at Pratt & Whitney. Having lost his job at Pratt & Whitney, he became essentially unemployable at only 52 years of age. Had Pratt & Whitney followed the law and made the accommodations owed to him following his convalescence, Mr. J could have returned to work in April 1993.

Following the decision rendered by the appellate court, Mr. J sought representation from Karen Terry of the Searcy Denney law firm to pursue a legal malpractice action against all of his prior attorneys. Damages were sought for the losses in income suffered by Mr. J due to his denied return to the workplace, and also for his intangible damages, such as pain and suffering, mental anguish, and loss of the ability to enjoy his life.

After 18 months of litigation, Ms. Terry settled Mr. J's claims against Law Firm A and Law Firm B. Negotiations were hampered by Law Firm A's insurance carrier, which asserted a coverage defense very late in the litigation process based on Law Firm A's late reporting of the committed malpractice. Nevertheless, the claims against those two firms were settled for a combined total of \$675,000.



Decisions...Decisions...Decisions...

Gunshot Victim Receives Settlement Despite Unpaid Insurance Premium

Alexander Musgrove, a Bahamian citizen, was visiting relatives in Palm Beach County in October of 1997. During his stay, he ate lunch at Chef G's Restaurant, which was located in a strip shopping center in West Palm Beach. He was accompanied by several family members. While at the restaurant, Alex and his brother were robbed and shot in the bathroom by an unidentified person.

Alex was rushed as an emergency trauma patient to St. Mary's Hospital and immediately admitted. He was diagnosed with penetrating injuries to the left abdomen and left flank. An exploratory surgery revealed a bullet lodged in his body, causing an obvious spinal cord injury. Alex could not move his left leg and both of his feet were numb. He remained in St. Mary's Hospital for over two weeks.

After completing his medical care, Alex was left with serious, permanent, and disabling injuries. Alex's treating physician assigned him a 40% permanent functional impairment. Alex requires the use of a cane to ambulate and can only walk short distances. He experiences severe muscle spasm and pain in his toes. Alex, who worked as an executive chef prior to the shooting, has been unable to work since the accident. He has also had a great deal of difficulty caring for his son, Avery, who was just a toddler when this incident occurred.

Alex Musgrove hired attorneys Earl Denney and Karen Terry to investigate the circumstances of the shooting. Suit was eventually filed

against the restaurant owner, as well as the shopping center where the shooting occurred, based on the lack of security provided to patrons. The presiding judge, however, ruled that the shopping center had no responsibility for what had occurred inside the restaurant.

Old Dominion Insurance Company insured Chef G's, but denied coverage for this incident based on the fact that Lloyd Grant, the owner of the restaurant, allegedly paid his premium with a bad check. However, Old Dominion had reinstated the restaurant's policy when the check was delivered, and coverage remained in effect until a denial was issued after the shooting.

Experts hired by the plaintiff testified that Old Dominion treated Mr. Grant as if he had insurance coverage, and therefore had a duty to provide that coverage along with a legal defense. The plaintiff's goal was to demonstrate that Old Dominion wrongfully denied coverage to Mr. Grant, which in turn denied Mr. Musgrove the opportunity to recover monetary damages for his injuries. The plaintiff took the position that Old Dominion abandoned its insured. Mr. Musgrove then entered into a settlement agreement with Chef G's and Mr. Grant for \$1,000,000. The defendants, who believed they had the insurance company to blame for failing to indemnify them, then assigned their cause of action against Old Dominion, for its wrongful denial of coverage, to the plaintiff.

Old Dominion never relented on its insurance coverage defense, but eventually agreed to a settlement with Ms. Terry and Mr. Denney on the eve of trial for the sum of \$600,000.

High Speed Impact Causes Spinal Fracture

On May 2, 2001, Trudy Mae Capehart was traveling in her Ford Crown Victoria on her way to work in Dade City, Florida. Trudy Mae had worked as a cook for the Pasco County Juvenile Detention Center for over 10 years, and enjoyed the small-town atmosphere of Dade City. A passenger in her own vehicle, she was traveling down one of the rolling hills in Dade City when the driver stopped for a broken-down vehicle in the roadway. A few moments later, Trudy Mae noticed a large truck approaching from behind at a high rate of speed. Trudy Mae could only brace herself, as there was no way to avoid the crash.

The driver of the Ford F250 truck that struck Trudy Mae's stopped vehicle, whose name was Mr. Mooney, was traveling at almost 50 miles per hour prior to impact. Trudy Mae's car was crushed to the back windshield and her seat broke upon impact, propelling her backward. The jaws-of-life were utilized to extract her, and she was then airlifted to Tampa General Hospital. Among other injuries, Trudy Mae suffered a compression fracture to her thoracic spine as a result of the crash.

Trudy Mae retained Attorneys Sia Baker and Darryl Lewis to prosecute her claim against Mr. Mooney. The defendants vigorously argued that Trudy Mae's pre-existing injuries were the cause of her pain, and denied responsibility for her damages. However, the plaintiff's experts demonstrated that Trudy Mae's injury was a direct result of the crash. Trudy Mae's case settled days before trial for \$200,000.

Kidney Transplant Patient Dies from Exposure to Tuberculosis

A diabetic since childhood, John Doe was forced to give up his career in 1994 due to complications from his medical condition. In 1996, his diabetes led to kidney failure, and he was forced to go on dialysis. Renal care specialists who were associated with a hospital's transplant unit recommended that Mr. Doe be evaluated for a kidney transplant. Following an extensive workup, the transplant unit determined that John Doe would in fact be a good transplant candidate. Kidney transplants are frequently more successful when a kidney is donated from a living donor, and the hospital's transplant unit determined that John Doe's brother was an appropriate donor match.

The hospital's transplant unit performed transplant surgery in Febru-

ary 1997. During his hospitalization, John Doe was exposed to another transplant patient who was infected with tuberculosis. Hospital personnel negligently concluded, however, that this other patient did not have tuberculosis and removed him from respiratory isolation, making other hospital patients and staff vulnerable to infection. Transplant patients are frequently placed on powerful medicines, which impair the body's immune system and ability to fight infection. These medicines are supposed to help prevent the body from rejecting the transplanted organ. In the case of John Doe, however, this left him more vulnerable to the hospital-based exposure to tuberculosis.

Even after several hospital employees tested positive for tuberculosis, the hospital's transplant unit failed to contact John Doe and advise him that he was at risk for tuberculosis.

In April 1997, John Doe fell ill and was readmitted to the hospital, in-

fectured with the disease. By that time, the hospital had absolute confirmation that there had been a tuberculosis outbreak in its facility, but still failed to diagnose John Doe's tuberculosis for ten more days. During those days, precious treatment time was lost. By the time the diagnosis was made, medicines to treat the disease were no longer effective.

John Doe died from tuberculosis in the hospital in May 1997. He was 32 years old. His widow brought suit against the hospital, alleging that the hospital had failed to protect Mr. Doe from the tuberculosis exposure, failed to notify him after the exposure was known, and failed to timely treat him with appropriate medicines. According to an expert retained by David Sales, who represented Mrs. Doe, John Doe had an excellent chance of living several more years with the transplanted kidney had he not developed tuberculosis. The case was recently settled for a confidential sum.

Reception Held for Prudential Case Clients and Lawyers

A celebration reception was held at the home of Anita and Jack Scarola on February 28, 2003. Clients and lawyers celebrated the successful conclusion to their 5-year litigation with Prudential Insurance Company of America.



Student Drowns During First Open Water Dive

Continued from page three. contractor of the shop. Unfortunately, the facts of the case, and the law that applied to it, were not favorable to Mrs. Yargates, and the case was eventually settled for a nominal sum.

This case demonstrates the power of a liability waiver signed by anyone choosing to become a certified scuba diver under PADI, which is the most prominent scuba-certifying agency in America. PADI implements standard release language for all scuba students. The releases, if properly executed, are virtually airtight in excusing the dive shop and its Instructors from liability, regardless of how egregiously negligent the instruction and/or supervision might have been.

This case demonstrates the power of a liability waiver.

Any consumer seeking to obtain a sport-diver's scuba certification, whether through PADI or any other certifying agency, must read the release language very carefully. In doing so, be aware that by signing the release you are more than likely waiving your right to seek legal recourse in the event that any negligent conduct on the part of the dive shop or its Instructors causes you injury or death. Nevertheless, anyone who suffers loss, injury, or death due to negligent scuba diving instruction should promptly seek legal counsel to have the circumstances of the case, along with any such release language, closely reviewed.

Accolades



Greg Barnhart

Greg Barnhart spoke at The Academy of Florida Trial Lawyers' 2003 Seminar "Proving Damages." He spoke on the topic "Maximizing Damages from Beginning to End."

Greg enjoys public speaking. His speeches are well received by legislators, lobbyists, consumer groups and other trial attorneys as his "after speech ratings" attest.

Harry Shevin

Harry Shevin has been elected to the Board of Directors of the Palm Beach County Trial Lawyers Association.



Sean Domnick and Darryl Lewis

Sean Domnick and Darryl Lewis have become Shareholders at Searcy Denney Scarola Barnhart & Shipley.

Greg Barnhart & Jack Scarola

Greg Barnhart and Jack Scarola recently celebrated their 25th anniversary with the firm.



Taking... Time to Care



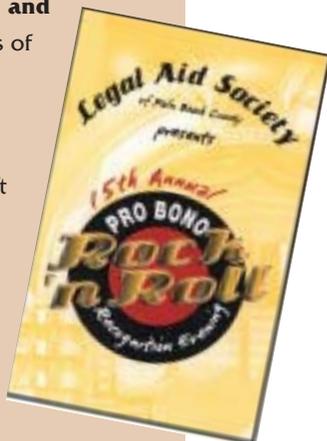
Firm Rallies Against Tort Reform

Searcy Denney Scarola Barnhart & Shipley employees have been participating in rallies regarding "tort reform/medical malpractice reform." These rallies have been held to let consumers know that any "tort reform caps" will not correct the problem of rising insurance rates for doctors -- what is needed to resolve the problem is INSURANCE REFORM.



Legal Aid Society

Pictured above, l. to r., are **Keith James, Kari Shipley, Elaine Johnson James, and John Shipley**, co-chairs of the Legal Aid Society's 15th Annual Pro Bono Event this year. They recently attended a Gift Gathering Gala in Palm Beach Gardens to benefit the event's silent auction.



"1000 Friends of Florida" Reception

Attorney **Greg Barnhart**, a Board Member of "1000 Friends of Florida," hosted a reception on April 3, 2003. The reception was held to introduce "1000 Friends of Florida" to business and corporate leaders in Palm Beach County. "1000 Friends of Florida" is a statewide nonprofit organization whose mission is to protect and improve Florida's quality of life by advocating and working towards responsible planning for the state's growth. Planners, attorneys, and community activists work to protect natural areas, fight urban sprawl, promote sensible development patterns, and provide affordable housing.

Please visit their website for additional information
www.1000friendsofflorida.org



Above, pictured left to right: Chris Searcy, Deborah Kann Schwarzberg, Laura Norman, and Jack Scarola, at the Melanoma event.

Melanoma Foundation “Rainbow Awards”

On March 31, 2003, Chris Searcy and Jack Scarola accepted the Melanoma Foundation’s “Rainbow Award” on behalf of the law firm. The award was given to acknowledge the firm’s support and contribution to the valuable programs offered by the Melanoma Foundation.

Melanoma Foundation “Run for Cover”

The Richard David Kann Melanoma Foundation held its third annual “Run for Cover” 5K run/walk for skin cancer awareness. Over 400 area residents participated in the event and over 200 took advantage of the free skin cancer screenings provided by local dermatologists. Of these 200, more than half indicated they had never been checked for skin cancer by a dermatologist or other doctor. Recommendations for biopsies or suspicious spots or moles and/or treatment for pre-cancerous actinic keratosis were made to more than 60 of those screened. Four cases of suspected melanoma were referred for follow up.

Skin cancer is almost 100% preventable and curable if detected and treated early. Statistics show that more than half of all new cancer cases are skin cancer -- affecting more than one million people in the United States each year. Florida has the second highest rate of skin cancer cases in the country.

Please visit their website for additional information:

www.melanomafoundation.com



Links’ “25th Annual White Rose Luncheon”

Searcy Denney Scarola Barnhart & Shipley was a sponsor of The Links’ “25th Annual White Rose Luncheon.” The luncheon is the organization’s annual scholarship benefit created to provide college scholarships to students of the arts.

Rosalyn Sia Baker, an Associate with the law firm, is a member of The Links and served on the White Rose Luncheon Committee.

Below, pictured left to right: Ethel E. Isaacs, Jackie Haygood, Keynote Speaker Patricia Russell-McCloud, Sia Baker, Chapter President Hon. Sheree Cunningham, and Rosalyn Baker.



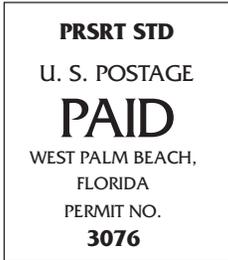
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The Balance of Justice...

...means Justice for ALL.

Lady Justice stands blindfolded, holding a sword in one hand and balanced scales in the other.

The blindfold symbolizes equality.

The sword represents the strength of our justice system.

The balanced scales illustrate that the court begins with no preconceived notions.

We are facing a crisis in tort law... a crisis that could weaken the principles upon which our justice system is based.

So called "Tort Reform" would result in...

Removing the blindfold on Lady Justice, so she becomes biased by what she sees, leaving victims without equal rights before the court.

Dulling her sword - "Tort Reform" would diminish victims' rights by weakening our laws, leaving lawmakers prone to pressure from special interest groups with monetary/political clout.

Unbalancing her scales - "Tort Reform" would drastically tilt the scales with the weight of arbitrary damage caps (**before** any evidence was heard) resulting in **imbalanced and unfair** applications of justice.

**Support efforts to preserve Justice for all.
Support the fight against "Tort Reform".**



The public
must have
access to
Justice in our
court system...
"an inherent right."