

@TEXTHEAD =\$2,959,000 RECOVERY – MEDICAL MALPRACTICE - NEGLIGENT TREATMENT FOR GASTROSCHISIS (ORGANS ON OUTSIDE OF NEWBORN) – MASSIVE CARDIO PULMONARY ARREST – SEVERE BRAIN DAMAGE – WRONGFUL DEATH AT AGE TWO

@COUNTY = Miami-Dade County

@INTRO =

This was a medical malpractice/wrongful death action which arose from the treatment and ultimate death of the infant plaintiff who was born with a congenital condition known as gastroschisis (organs on the outside of the body). The plaintiff alleged that the defendant physicians and hospital failed to appropriately treat the condition resulting in a massive cardio pulmonary arrest, severe brain damage and the ultimate death of the baby girl at age two.

The infant plaintiff was born on March 14, 2011, with gastroschisis; a congenital anomaly where parts of the baby's organs, including intestines or internal organs, are on the outside rather than inside the baby's body. The newborn underwent a serial reduction of her intestines over a period of approximately one week for her internal organs to be put back inside her body. A closure surgery was performed on March 22, 2011, after which the infant plaintiff began to have difficulty breathing.

The plaintiff claimed that the baby's oxygen levels were slowly decompensating over a period of a few days and she became hypoxic and suffered from metabolic and respiratory acidosis. The plaintiff also claimed that the defendants failed to control the child's persistent pulmonary hypertension.

Records showed that on or about March 22, 2011, the infant was placed on a high frequency oscillator ventilator, a type of mechanical ventilation, but the ventilator was not successful in restoring her oxygen saturation levels. The doctors then added cardiac medicine, including Dobutamine and Dopamine, which was also unsuccessful. The plaintiff claimed that the infant's oxygen saturation levels continued to decrease and she became increasingly unstable.

The defendants subsequently began administering nitric oxide, one of the medicines of last resort, according to the plaintiff's claims. At that time the plaintiff contended that the defendants should have contacted another facility to provide what is referred to as "ECMO", extracorporeal membrane oxygenation. The defendant hospital did not have ECMO which is essentially a heart and lung machine for babies.

With ECMO the plaintiff argued that the doctors could have oxygenated the baby's blood allowing her remaining organs to rest and recover. The plaintiff claimed that the defendant hospital failed to make appropriate and timely plans to transfer the baby to a facility that had ECMO.

The plaintiff's timeline showed that, on or about March 23, 2011, the baby began to further decompensate despite the fact that she was on nitric oxide all night. The infant suffered a massive cardio pulmonary arrest on the morning of March 23, 2011. At that time the secondary facility came with a portable ECMO unit, cannulated the baby and transferred her to their facility where she remained for three months.

However, the plaintiff alleged that during the cardio pulmonary arrest the baby was severely and profoundly brain damaged. She lived for two years and then succumbed to her weakened condition and died on June 4, 2013.

The case was settled prior to trial for a total of \$2,959,000.

@TITLEHD = REFERENCE

@EXPERT =

Baby K vs. A Hospital and Doctors. Case number (withheld); Judge (withheld), date of verdict (withheld).

@ATTORNEY =

Attorney for plaintiff: Brett Alan Panter of Panter, Panter & Sampedro, P.A., in Miami, FL.

@TITLEHD = COMMENTARY:

As a result of the infant plaintiff's death in June of 2013, plaintiff's counsel amended the complaint and converted the case from a personal injury medical malpractice action to a wrongful death case.

The medicine involved was rather complicated and depicted a slow downward spiral of the infant's condition. One of the plaintiff's main allegations involved the defendant's failure to make arrangements to have the baby placed on an ECMO machine, a technique for providing oxygen to the heart and lungs. The plaintiff contended that this machine would have made a substantial difference in the baby's chance of survival. This contention seemed to be supported by the fact

that, when the secondary facility finally arrived with a portable ECMO unit, the infant was saved from near death and lived an additional two years.

The plaintiff had retained experts from around the country in several fields of medicine including neonatology and pediatrics, pulmonology, cardiology, nursing, critical care medicine, life care planning and economics.

The only survivor to the baby was her biological mother and settlement was restricted based on Florida's 2003 caps on damages. A settlement agreement, which included strict confidentiality of the defendants and identifying details, enabled the plaintiff to recover \$2,959,000.