

Failure By Medical Experts to Detect Massive Aneurysm Results In Death

\$1.75 Million Settlement:

IGNORING CRITICAL MEDICAL INFORMATION RESULTS IN WRONGFUL DEATH

On June 3, 1998, Alan R, a 55-year-old recently-retired VA hospital administrator, awoke at 3:00 a.m. with acute onset of back pain so severe he immediately went to the emergency room. He was discharged from the ER within one hour of his arrival, and sent home with a prescription for painkillers and muscle relaxants. The back pain persisted that morning, and Mr. R went to his primary care physician. Once again, he was sent home with painkillers and muscle relaxants. Two days later, Mr. R called 911 from home and was transferred by ambulance back to the same hospital, where he was diagnosed with a ruptured abdominal aortic aneurysm (AAA). The aneurysm had been the cause of the persistent severe back pain, and was missed by both physicians. The aneurysm was the size of two regulation softballs.

When Mr. R initially went to the emergency room of the hospital, the ER physician's working diagnosis was (1) musculoskeletal back pain, or (2) AAA. Despite the life-threatening nature of AAA, the ER physician did no diagnostic studies to rule out AAA. Instead, the ER physician concluded that Mr. R's back pain was probably musculoskeletal in nature. He prescribed injections of painkillers and muscle relaxants, and discharged Mr. R home, less than one hour after Mr. R's arrival at the ER.

Mr. R's severe back pain persisted, unrelieved, despite the prescription medications from the ER. Mr. R called his family doctor and asked for an appointment. Like the ER physician, Mr. R's family doctor ordered no diagnostic studies, not even an abdominal examination. Mr. R's wife, who was present at her husband's visits to the hospital and to the family physician, testified that the family physician "never laid a hand on my husband." The family doctor concluded that Mr. R's back pain was due to musculoskeletal problems, and he sent Mr. R home with prescriptions for narcotic pain relievers, muscle relaxants, and steroids. Mr. R was instructed to return to the family physician if he did not improve in three days.

Two days later, at approximately 9:00 a.m., paramedics responded to Mr. R's 911 call for help. The paramedics documented a pulsatile abdominal mass, stating in their records "suspected AAA". They immediately transported him to the hospital. Upon arrival, Mr. R was in shock from loss of blood due to the ruptured aneurysm. An ultrasound before emergency surgery showed an aneurysm the size of two regulation softballs. Mr. R's blood loss due to the ruptured aneurysm was so massive that during surgery he required the transfusion of two and one-half times the total blood volume in his body.

Unable to withstand the massive blood loss, and preoperative shock, Mr. R went into cardiac arrest and died immediately after the surgery was completed.

Mr. R had a 35-inch waist. All of the experts, both plaintiff and defense, agreed that the aneurysm found in Mr. R, and documented by the hospital's radiologist, was massive. In addition, all experts testified that the aneurysm was the same size when Mr. R initially presented himself to the hospital, as it was two days later, when he returned to the hospital in an ambulance.

Medical experts for Mr. R testified that there is no way that a competent abdominal examination would not have detected such a huge aneurysm. The ER physician even testified that he would expect to be able to feel something that large upon physical examination. Paramedics detected the same aneurysm that the defendant physicians failed to detect. Experts for the defense failed to offer any explanation as to why an aneurysm of such proportions went undetected in a man with a 35-inch waist. After having the original chart of the family doctor examined by a documents **Continued on page nine.**

"Experts for the defense failed to explain why an aneurysm the size of two softballs in a man with a 35 inch waist went undetected."

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expert, Lance Block and James Gustafson offered uncontested proof that the family doctor destroyed the original record of Mr. R's office visit, and rewrote a fraudulent record after Mr. R died.

Plaintiff's vascular surgery expert, a former director of the vascular surgery division of a major clinic (and an expert providing testimony in prior cases for all of the defense firms), testified that Mr. R would have had a 90% chance of survival if surgery had been performed on him before he lapsed into shock on the morning of June 5.

Alan R served his country in Vietnam, and upon returning home, he continued to serve his country and fellow veterans in the VA hospital system. He and his wife, Rita, worked together in the VA hospital system throughout the United States through 28 years of marriage. For over 20 years, they drove to work, ate lunch, and drove home together every day. They raised a daughter who lives in the same neighborhood, and were looking forward to enjoying retirement and their new grandson when Alan's life was cut short by sub-standard medical care.

After extensive trial preparation, attorneys Lance Block and James Gustafson of Searcy Denney Scarola Barnhart and Shipley, negotiated a settlement in the amount of \$1.75 million. ■