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BSPH congratulates Steven J. Hupp and Madison L. Bear on obtaining a unanimous defense verdict in the Lucas County Court of Common Pleas in favor of an Emergency Medicine Physician this week after a three-week medical malpractice trial.

Plaintiff was a 32-year-old female who presented to the Emergency Department with vaginal bleeding. She was seen by the Defendant-Physician who consulted a OB/GYN Co-Defendant. The OB/GYN prescribed Plaintiff a triple dose of Spintec for seven days to stop the bleeding.

Six days later, Plaintiff presented to the ED via EMS with complaints of nausea, vomiting, abdominal pain, weakness, and bilateral arm pain. EMS performed three EKGs enroute to the ED. All three EKGs were normal with some ST segment elevation in one lead. Upon arrival, Plaintiff was again seen by the Defendant-Physician. She performed a thorough work up which included a physical exam, labs and a CT scan. The Plaintiff reported no chest pain or shortness of breath. The CT findings and lab results concluded that there was a significant infectious process in her small bowel and a UTL. The Defendant-Physician discussed admitting the patient (who only had one kidney) but Plaintiff was comfortable going home.

Twenty-four hours later, Plaintiff woke up with chest pain and shortness of breath. She went to work and then presented to the hospital approximately seven hours after waking up. At this time, she diagnosed with a STEMI due to a thrombus completely occluding her left anterior descending artery. She was immediately sent to the cath lab. Plaintiff was left with a 20% ejection fraction and permanent congestive heart failure (CHF).

At trial Plaintiffs claimed that the Defendant-Physician failed to properly interpret the EKGs and diagnose acute coronary syndrome. Plaintiffs further argued that her presenting signs and symptoms at the second ER visit were consistent with Acute Coronary Syndrome. Plaintiffs experts testified that the standard of care required serial EKGs, serial Troponins, and admission to the hospital with a cardiac consult. Plaintiffs claimed that if she was admitted her STEMI would have been treated much faster and her CHF would have been avoided.

At trial, the defense team established that the Emergency Medicine Physician met the standard of care. Dr. Amal Mattu, a Nationally/Internationally recognized Emergency Medicine expert in EKG interpretation, defended the care of the Defendant-Physician. Dr. Mattu explained to the jury exactly how the EKG did not demonstrate any acute cardiac ischemia. Instead, ST-segment elevation on the EKGs was benign early repolarization, a variant of a normal EKG.

Plaintiffs presented a life care plan at trial totaling \$12.8 million dollars. Plaintiffs' counsel asked the jury to award the cost of the life care plan plus non-economic damages for Plaintiff and her husband. The Jury deliberated for sixty five minutes before reaching an 8-0 defense on the standard of care.

