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$4.29 Million Medical Malpractice Settlement against MetroSouth Medical Center and five physicians

CHICAGO – October 21, 2015 – The surviving children of a 38-year-old woman reached a $4.29 million settlement in a medical malpractice lawsuit against MetroSouth Medical Center and five physicians. The case was set to go to trial on October 21, but settled on Friday afternoon with the hospital and five doctors. John Perconti and Jordan S. Powell of Levin & Perconti represented the family of a woman who died as a result of the doctors failing to recognize and treat a pericardial effusion causing cardiac tamponade.

The client went to the MetroSouth Medical Center emergency room on the morning of February 28, 2010, with complaints of chest pain. She presented with a low blood pressure and a CT scan of her chest revealed a moderate pericardial effusion. This fluid fills the area (pericardial sac) between the heart muscle and outer layer of the heart. She was transferred to the ICU and an echocardiogram was ordered for the following morning to rule out cardiac tamponade, a condition when the fluid around the heart accumulates to the point of compressing the heart and prevents the heart from pumping enough blood to maintain sufficient cardiac output.

Throughout the evening and early morning hours, her condition worsened. Her heart rate increased (tachycardia), she developed mental confusion, and had significant periods of time that the hospital nurse could not obtain her blood pressure, despite being administered three medications to raise her blood pressure. After being in the emergency room for 10 hours and the ICU for 8 hours, the client’s compensatory mechanisms gave out and her condition drastically changed. Dr. Mohammed Asgar ordered a STAT echocardiogram at 5:50 a.m., but this order was not communicated to the on-call cardiologist, Dr. Robert Lichtenberg, or the on-call echo technician. This test was to be performed within an hour. No one followed up on this order and on the morning of March 1, at 7:33 a.m., she went into cardiac arrest and a code blue was called. The regularly scheduled echo technician discovered the order for the test sometime between 7:00 a.m. and 7:30 a.m. and immediately went to her room, but it was too late. While attempting to resuscitate her, an echocardiogram was finally performed and she was diagnosed with a large circumferential pericardial effusion. She never regained a pulse during the code and was pronounced at 8:20 a.m.

“Hospital staff is required to closely monitor patients in the ICU to monitor changes in vital signs and responses to treatment,” noted Perconti. “Our lawsuit alleged that four of the five doctors who were responsible for our client’s care were all negligent in failing to order an immediate echocardiogram. If performed, it would have shown an enlarging effusion and likely cardiac tamponade, and immediate surgical removal of the fluid would have been performed, preventing cardiopulmonary arrest and her death. The ICU nurse caring for our client was trying to manage her condition on her own without
reporting significant changes in her condition to the physicians,” said Perconti. “It is inexplicable to me how the life-saving test was ultimately ordered and due to a total failure to communicate, was not timely performed,” said Perconti.

“This case is a simple example of how important communication is between nurses and doctors. If there was proper communication between the healthcare providers, there is no question that the mistakes in this case would have been avoided,” says Powell. “The doctors and hospital had multiple opportunities to correct their mistakes throughout the night, which would have saved our client’s life. That is one of the true tragedies of this case.”

The lawsuit was filed in 2011 against the hospital, Mohammed Asgar, MD, Zafar Ahmed, MD, Robert Lichtenberg, MD, Richard Harris, MD, and Issac Plamoottil, DO. The client was survived by her two children.

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