

### FEATURED VERDICT

#### Chiropractor

Defense: Woman was advised to immediately seek urgent care

#### Defense Verdict

*Estate of Bengston v. Parish*

Cook County Circuit Court, Ill.

**Plaintiff's Attorney** Sal Indomenico; Sal Indomenico & Associates, P.C.; Chicago

**Defense Attorneys** Thomas L. O'Carroll and Peter A. Walsh; Hinshaw & Culbertson LLP; Chicago

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**NURSE**

Lost Chance of Recovery — Ear, Nose &amp; Throat

**Improper turning caused tube to become dislodged: plaintiff****MEDIATED****SETTLEMENT \$3,000,000**

**CASE** Cydnie R. Craig, as special representative and special administrator of the Estate of Barbara Craig, deceased v. Advocate Health and Hospitals Corporation, d/b/a Advocate Bromenn Medical Center, No. 2012 L 10

**COURT** McLean County Circuit Court, IL

**JUDGE** Paul G. Lawrence

**NEUTRAL(S)** Donald P. O'Connell

**DATE** 11/26/2014

**PLAINTIFF**

**ATTORNEY(S)** John J. Perconti, Levin & Perconti, Chicago, IL  
Jordan S. Powell, Levin & Perconti, Chicago, IL

**DEFENSE**

**ATTORNEY(S)** Patricia J. Barker, Barker & Castro, LLC, Chicago, IL  
Jennifer M. Suttle, Barker & Castro, LLC, Chicago, IL

**FACTS & ALLEGATIONS** On January 15, 2010, plaintiff's decedent Barbara Craig, 35, presented to a local emergency room with complaints of double vision, swollen eyes, weakness, and fatigue. A CT scan of her head was negative, and she was discharged and given instructions to follow up with her primary care physician. The next day, she continued to complain of double vision and also developed paresthesia in both arms. As instructed, she followed up with her primary care physician, and she was admitted to BroMenn Medical Center, in Normal, Ill. She consulted with a neurologist, who she had been treating with for migraine headaches previously. Craig was diagnosed as having an ophthalmologic migraine and Guillain-Barre syndrome. The plan to treat Craig was to prescribe: pain medications, hydration, and constant monitoring.

The next day, on January 17, Craig suddenly became hypoxic with an 80 percent oxygen saturation rate, and stopped breathing. She was intubated, and it was believed that Craig was experiencing COPD or Guillain-Barre syndrome with ascending paralysis causing respiratory distress. An electromyography and spinal tap were performed, which returned with inconclusive results. On January 26, the endotracheal tube was removed, and replaced with a percutaneous tracheostomy tube.

After the tracheostomy, she returned to her hospital room and was reportedly awake, with normal vital signs. On January 27, a nurse entered her room to prepare her for a bed bath. In the process, she allegedly dislodged her tracheostomy tube. This caused a lack of oxygenation, which caused respiratory distress, respiratory failure, and cardiac arrest. A code blue was called, but because of the prolonged code, Craig developed severe acidosis, sustained brain damage, and continued to require vasopressor support to maintain her blood pressure. Several hours later, she again suffered cardiac arrest, and was pronounced dead later that evening.

The estate of Craig sued the hospital, as well as parent company Advocate Health and Hospital Corporation, alleging that the nurse, as an employee of the hospital, was negligent for improperly turning Craig in the preparation for her bed bath.

According to the plaintiff, the nurse improperly turned the decedent for the bed bath, and should have obtained the assistance of another nurse and a respiratory therapist to make sure Craig's tube was properly secured and her airway protected. The nurse also allegedly failed to timely reestablish the airway once the tube became dislodged, and allegedly failed to recognize that air was being pumped into her subcutaneous tissues, as opposed to through her trachea (which resulted in subcutaneous emphysema). According to the plaintiff, this lost airway combined with the nursing staff's inability to properly oxygenate Craig in a timely fashion was the proximate cause for her death.

**INJURIES/DAMAGES** *acidosis; brain damage; cardiac arrest; death; emphysema; respiratory distress; tracheostomy/tracheotomy*

Barbara Craig is survived by her two adult children, ages 24 and 19. Plaintiff's counsel sought a recovery for wrongful death damages on their behalf.

According to plaintiff's counsel, Craig suffered pain from the time of her tracheostomy being dislodged, until the time of her death approximately seven hours later. The medical records reportedly indicated that Craig was responsive to pain, and propofol was thus given to manage her pain. Her face was also very swollen, so much that her eyes were swollen shut.

According to the plaintiff, while the diagnosis of Guillain-Barre syndrome made the prospect of a full recovery uncertain, evidence was presented indicating that 70 percent of the patients diagnosed with the condition experienced either a full recovery or near to a full recovery. These favorable odds were something Craig was deprived of as a result of the nurse's negligence.

**RESULT** The parties entered a mediation, led by Donald O'Connell, of O'Connell Mediation Services, located in Riverside, Ill.

The mediation concluded with a settlement of \$3 million, to be paid by the hospital.