

CASE INFORMATION SHEET
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COUNTY AND COURT:

Orange County Civil Court

NAME OF CASE:

ADRIAN ACEVEDO, as Personal Representative of the Estate of
WILMARIE ACEVEDO, deceased,

Plaintiff,

v.

ORLANDO REGIONAL HEALTHCARE SYSTEM, INC., d/b/a ARNOLD PALMER
HOSPITAL FOR WOMEN AND CHILDREN,

Defendants

CASE DOCKET NO.: 05-CA-34

JUDGE: John M. Kest

PLAINTIFF(S) ATTORNEY(S)/TRIAL COUNSEL:

Carlos Diez-Arguelles
Maria Tejedor
Diez-Arguelles & Tejedor, P.A.
505 N. Mills Avenue
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DEFENDANT(S) ATTORNEY(S)/TRIAL COUNSEL:

Jennings L. Hurt III
Richard S. Womble
Jeremy T. Palma
Rissman, Barrett, Hurt,
Donahue & McLain, P.A.
201 E. Pine Street, 15th FL
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AGE/SEX/OCCUPATION OF PLAINTIFF OR DECEDENT:

15-year-old female (deceased)

FOR WRONGFUL DEATH CASES, PLEASE GIVE AGE AND RELATIONSHIP OF SURVIVORS:

Adrian Acevedo (father)
Natividad Irrizzary (mother)

DATE, TIME AND PLACE OF ACCIDENT OR OCCURRENCE:

June 13, 2003 to June 20, 2003 - Arnold Palmer Hospital for Women and Children in Orlando

CAUSE OF INJURY:

Decedent was diagnosed in April 2002 with thrombotic thrombocytopenic purpura (TTP), a blood disorder which, if untreated, causes occlusions of blood vessels and potential death. Wilmarie Acevedo was admitted to Arnold Palmer Hospital (APH) and underwent successful plasmapheresis treatment.

On June 13, 2003, Wilmarie Acevedo had a recurrence of her TTP and was admitted to APH for treatment. The treatment was to again consist of plasmapheresis.

If plasmapheresis cannot be given, mortality is inevitable. Approximately 3% of TTP patients develop a severe allergic reaction to the proteins in plasma.

The decedent underwent plasmapheresis on June 13, 2003. She had a significant anaphylactic reaction during the plasma exchange. The plasma exchange was stopped prematurely to save her life.

On June 14, 2003, a second plasma exchange was attempted. The decedent again had a very serious anaphylactic reaction to

proteins in the plasma. That exchange was also stopped to again save her life.

NATURE OF INJURY:

The decedent remained in APH from June 13, 2003 to June 20, 2003, the day of her death. Plasma exchanges were not attempted at any date after June 14, 2003. A chemotherapeutic drug was given to dampen the patient's immune system, but this was unsuccessful as well.

The decedent had low hemoglobin levels throughout the hospital admission. On June 17, 2003, decedent's hemoglobin level fell to 4.1. On June 18, 2003, decedent received a transfusion of packed red blood cells (PRBC). The transfusion increased the hemoglobin level to 6.2.

The decedent's hemoglobin level returned to 4.1 during the early morning hours on June 20, 2003. A second blood transfusion was ordered at 3:10 p.m. on June 20, 2003. At 4:10 p.m., the treating physician gave orders to proceed with the transfusion. The transfusion was started at approximately 5:20 p.m. At 6:50 p.m., the decedent coded. She was pronounced dead at 8:05 p.m.

Plaintiff alleged that Wilmarie Acevedo's death was caused by the failure to adequately monitor and/or treat her low hemoglobin levels. Additionally, Plaintiff alleged that the blood transfusion ordered on June 20, 2003 was not ordered nor started in a timely fashion. Plaintiff claimed that Wilmarie Acevedo died from lack of oxygen perfusing to her organs due to her low hemoglobin. APH, though, proved that the patient never had signs of hypoxia.

APH showed that merely giving blood does not cure TTP; plasmapheresis must be given. The patient was deathly allergic to the treatment that otherwise would have saved her life. The patient died due to occlusion of small vessels in the sinus node of her heart which led to an electrical arrhythmia and resultant cardiac death.

PLAINTIFF'S EXPERT WITNESSES:

Sharron Docherty, RN, Ph.D. (nursing), Duke University

Nurse Docherty testified that the nurses failed to timely draw blood on the morning of June 20, 2003. She also testified that the nurses failed to timely communicate the results of the blood work on that day. Last, Nurse Docherty testified that the nurses failed to timely hang the blood for the transfusion during the afternoon of June 20, 2003.

James Nachman, M.D. (hematology/oncology), University of Chicago

Dr. Nachman testified that two residents failed to timely order a blood transfusion on June 20, 2005. On cross examination, Dr. Nachman conceded that first year residents could not have ordered a blood transfusion for a complex patient like Wilmarie Acevedo without the attending pediatric hematologist/oncologist's approval.

DEFENDANT'S EXPERT WITNESSES:

Tammy Uhl, RN, MSN, CCRN, CCNS (nursing), Duke University

Nurse Uhl testified that the nurses complied with the standard of care on June 20, 2003. Specifically, she testified that the nurses reasonably obtained the blood draw, communicated the results of the blood draw to the physicians and timely started the transfusion once ordered.

James Whitlock, M.D. (pediatric hematology/oncology), The Hospital for Sick Children, Toronto, Ontario

Dr. Whitlock testified that the two residents complied with the standard of care. Dr. Whitlock testified that a first year resident could not order a blood transfusion for a complex patient like Wilmarie Acevedo unless directed to do so by the attending physician.

Joel Moake, M.D. (hematology/oncology), Rice University

Dr. Moake, the world's foremost expert on TTP, testified that the cause of death was due to Wilmarie Acevedo's TTP and not the result of the alleged delay in transfusing the packed red blood cells on June 20, 2003.

CHECK APPROPRIATE SPACE: X Verdict

DATE OF VERDICT:

October 4, 2010

VERDICT:

Defense verdict

COMPARATIVE NEGLIGENCE:

N/A

JUDGMENT:

For Orlando Regional Healthcare System, Inc., d/b/a Arnold Palmer Hospital for Women and Children

DATE OF JUDGMENT:

October 4, 2010

DEFENDANT'S OFFER:

\$25,000

PLAINTIFF'S DEMAND:

Plaintiff asked the jury to award \$4,000,000 during closing argument.

ATTORNEY'S COMMENTS:

Four days prior to trial, Plaintiff settled with the co-defendant treating pediatric hematologist/oncologist physicians. Trial proceeded solely against Arnold Palmer Hospital.

At trial, Plaintiff alleged that two first-year residents and one nurse, all employed by APH, were negligent in causing the decedent's death. Neither the residents nor the nurse had been the focus of the more than five years of litigation prior to trial.

The residents both testified that they could not have made any treatment decisions for a complex patient like Wilmarie Acevedo. In fact, both residents described the tenuous situation that

faced the attending physicians in determining how to treat Wilmarie Acevedo's condition. The jury deliberated for one hour and 26 minutes.

Submitted By: Jennings L. Hurt III **Date:** November 23, 2010
Jeremy T. Palma

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JLH/JTP/psh/kaa