

CASE INFORMATION SHEET
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COUNTY AND COURT:

Orange County Circuit Court

NAME OF CASE:

PAUL WOODSON,

Plaintiff,

v.

DARLENE GO, M.D.; LOUIS SCALA, M.D.; and FLORIDA CARDIOLOGY,
P.A., a Florida professional association,

Defendants

CASE DOCKET NO.: 07-CA-9909 Div. 39 **JUDGE:** F. Rand Wallis

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

David Best, Esquire
Best Law Firm Florida, P.A.
Post Office Box 3306
Orlando, Florida 32802

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

Richard S. Womble, Esquire and David R. Kuhn, Esquire
Rissman, Barrett, Hurt, Donahue & McLain, P.A.
201 East Pine Street, Suite 1500
Orlando, Florida 32801

AGE/SEX/OCCUPATION OF PLAINTIFF OR DECEDENT:

Paul Woodson is a 52-year old male, formerly employed at a construction company.

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

Not applicable.

DATE, TIME AND PLACE OF ACCIDENT OR OCCURRENCE:

August 22, 2005 at Winter Park Memorial Hospital during a heart catheterization and/or prior to discharge.

CAUSE OF INJURY:

Plaintiff, Paul Woodson, presented to Winter Park Memorial Hospital on August 19, 2005 with complaints of chest pain and a positive family history for cardiac disease. Dr. Darlene Go conducted a stress test and reviewed nuclear imaging studies. She felt that the nuclear imaging studies were suggestive of ischemia. Accordingly, she ordered a heart catheterization.

As Dr. Go was working at a different facility on the following day, Dr. Louis Scala performed the heart catheterization. He discovered that the coronary arteries were open and only mildly suggestive of atherosclerotic disease. There was no reason for further cardiac involvement.

After the procedure, a nurse, Paul Balluff, employed by Winter Park Memorial Hospital, used a closure device called an angio-seal to close the puncture site made in the femoral artery in order to perform the heart catheterization. Plaintiff contended that Mr. Balluff misplaced the closure device by implanting it inside the femoral artery causing an occlusion of the artery.

Once the closure device was installed, Dr. Scala again checked the patient and felt for appropriate pulses in the leg. The doctor's examination was normal and so the patient was taken to the floor where he remained for four hours before he was discharged. Plaintiff contended that Dr. Scala should have gone to the floor shortly before discharge and again examined the patient. Plaintiff contended that had Dr. Scala done so, he would have discovered diminished pulses indicative of the arterial occlusion.

Defendants argued that since there was a normal result for the heart catheterization, the patient was going to follow with his primary care physician for gastro esophageal reflux disease (GERD), and the nurses did not call the doctors from the floor to report any problems with the patient, it was not necessary

for the physician to see the patient. Defendants demonstrated that the standard of care for reasonable cardiologists around the country does not require a pre-discharge examination under the circumstances presented by Mr. Woodson's presentation.

Plaintiff also contended that Dr. Scala should have directly observed the implantation of the closure device and should have investigated Mr. Balluff to make sure he was competent. Defendants demonstrated that Mr. Balluff had installed 87 closure devices without incident. Dr. Scala had worked with Mr. Balluff for five years and had never seen or heard any problem with the quality of his care. Mr. Balluff was also hired and trained by the hospital. Finally, Defendants argued that they did not have legal responsibility for Mr. Balluff.

Plaintiff called Richard Pasquantonio, a colleague of Nurse Balluff. Mr. Pasquantonio told the jury that he had expressed concern about the quality of care rendered by Nurse Balluff to patients. Mr. Pasquantonio had complained to superiors at winter Park Memorial Hospital and to Mr. Balluff. However, Mr. Pasquantonio never communicated his concern to Dr. Scala.

NATURE OF INJURY:

Plaintiff contended that if the arterial occlusion had been discovered earlier, he would have undergone a minor procedure without any residual nerve dysfunction. Instead, Plaintiff claimed, he was not diagnosed with the occlusion until five months had transpired, at which time he underwent a femoral-femoral bypass. During that procedure, nerves were inadvertently injured as a known consequence of the procedure. Plaintiff claimed that the nerve dysfunction resulted in a neuropathy of extreme pain and numbness in the right leg.

Plaintiff claimed that he was unable to work in the construction industry due to his injury. Defendants demonstrated that Mr. Woodson is earning more money now than he ever did in the past.

Plaintiff also claimed a lack of sexual function due to his injury. Defendants demonstrated the nerves that were damaged in the femoral-femoral bypass would not innervate the Plaintiff's sexual organs. Moreover, Plaintiff had not complained of lack of sexual function to his physicians in the years since the surgery nor had any physician diagnosed sexual dysfunction, whatever the etiology.

PLAINTIFF'S EXPERT WITNESSES:

John Markis, M.D.
Cardiologist
Boston, Massachusetts

Dr. Markis testified that the allegedly misplaced angio-seal was the cause of the arterial occlusion.

Jay Schapira, M.D.
Cardiologist
Los Angeles, California

Dr. Schipira testified that Dr. Go and Dr. Scala deviated from the standard of care by failing to examine the patient on the floor prior to discharge.

Brad Johnson, M.D.
Vascular Surgery
Tampa, Florida

Dr. Johnson testified that the cause of the occlusion was the allegedly misplaced angio-seal, although on cross examination he admitted that he had not read most of the hospital chart and when shown pertinent provisions of the chart agreed that the findings showed that there was no occlusion present due to the angio-seal.

DEFENDANT'S EXPERT WITNESSES:

Louis Guzman, M.D.
Cardiology
Jacksonville, Florida

Dr. Guzman explained that it was reasonable and appropriate for the physicians not to see the patient on the floor immediately prior to discharge under the circumstances presented by this case.

David Rollins, M.D.
Vascular Surgery
Cleveland, Ohio

Dr. Rollins demonstrated that the cause of the occlusion was not the angio-seal, but rather an inadvertent dissection of the artery which occurred during the heart catheterization.

CHECK APPROPRIATE SPACE: XX Verdict

DATE OF VERDICT:

April 10, 2013

VERDICT:

Defense

COMPARATIVE NEGLIGENCE:

Not applicable.

JUDGMENT:

Pending.

DATE OF JUDGMENT:

Pending.

DEFENDANT'S OFFER:

Zero

PLAINTIFF'S DEMAND:

\$500,000

ATTORNEY'S COMMENTS:

Plaintiff first filed suit against the Veterans Administration in Federal Court under the Federal Tort Claims Act alleging improper delay in diagnosis of the occlusion. Dr. Scala, Dr. Go and their group were not defendants. While the Federal Court found that there was a negligent delay, it found that there was no causation as the treatment for the occlusion would have been the same when the patient first saw the VA on September 8, 2005, as it was when the VA discovered the occlusion in January 2006.

Plaintiff then filed suit against Dr. Scala, Dr. Go, their group and Winter Park Memorial Hospital in state court. Plaintiff settled his claim against Winter Park Memorial Hospital for a confidential amount.

It was readily apparent to the jury that Mr. Woodson claimed that all of the doctors and nurses at Winter Park Memorial Hospital and some of the doctors at the VA were wrong and untruthful in their charting. He claimed that prior to discharge his pain was 100 on a scale of 0 to 10. However, the nurses consistently charted that the patient had no complaints of pain and also had good pulses.

Following discharge, Mr. Woodson did not seek medical treatment for 17 days, a fact consistent with a patient who did not have excruciating pain as he later claimed. Further, Plaintiff had been requested by his physicians to follow up with the Veterans Administration in one week after discharge for further care. Plaintiff did not do so.

Plaintiff claimed that he was in great pain and unable to travel to the VA and that the VA discouraged walk in patients. However, Defendants demonstrated that on August 31, 2005, Plaintiff was seen at the VA for vision blurriness, as a walk in patient, a considerable time before he visited the VA on September 8, 2005 complaining of leg pain.

Further, Defendants discovered and proved that Mr. Woodson failed to file income tax returns in 2009, 2010 and 2011. Defendant was able to coax Mr. Woodson into "explaining" that he felt that the charges by the VA for medical care were excessive, but that he was still obligated to pay a co-pay for his care and he had not done so. Mr. Woodson did not file income tax returns because he did not want the federal government and thus the VA to discover that he was entitled to a tax refund because the VA would then be able to deduct the amount of the co-pay from the tax refund.

At the end of the state court trial against Drs. Scala and Go, the trial court granted a directed verdict on Plaintiff's claim of medical expenses and loss of earning capacity as there was no evidence of the amounts of those economic damages. The trial court also granted a partial directed verdict on Plaintiff's claim of sexual dysfunction as no physician ever diagnosed sexual dysfunction, much less related the supposed sexual dysfunction to the femoral-femoral bypass.

Submitted By: Richard S. Womble
David R. Kuhn

Date: April 12, 2013

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