

Was it negligence?

Was a surgeon negligent when she attributed intraoperative hematuria to traumatic catheterization and missed an obvious sign of bladder laceration?

Tune in next month for this and other verdicts.

Did maternal pelvic structure cause injury?

The plaintiff infant, whose birth was complicated by shoulder dystocia, was delivered using low forceps. Following birth, the child was found to have a brachial plexus injury and unusual bruising on the chest, back, and arm. She has mild residual loss of strength.

Patient's claim Excessive traction was applied during delivery.

Doctor's defense The shoulder dystocia, which was mild, was relieved with the McRoberts maneuver, and traction was never applied. The mother's pelvic structure and positioning of the fetus caused the child's injuries.

Verdict Illinois defense verdict.

Parents refuse, but oxytocin is given

The plaintiff child was delivered at 42 weeks' gestation by emergency cesarean section and was diagnosed with dystonic cerebral palsy. Despite the parents' objection, the obstetrician had the nurse administer oxytocin during labor. According to hospital rules, the oxytocin should have been discontinued when the mother's contractions became hyperstimulated, but it was not.

Patient's claim The mother's contractions did not require administration of oxytocin under the hospital's rules, and its dosage continued to be increased even when adequate labor was reached. Also, the obstetrician did not see the mother until it was time to perform the cesarean section.

Doctor's defense There was no negligence. The sudden bradycardia in the fetal heart

rate could not have been anticipated.

Verdict \$30.8 million Florida verdict.

Woman with fibroids dies of uterine cancer

A 41-year-old woman visited Dr. A because of abnormal uterine bleeding and infertility. After he diagnosed uterine fibroids, she chose to undergo a myomectomy instead of a hysterectomy. The abnormal bleeding continued and she was diagnosed the following month with a postoperative infection. The infection resolved after treatment with antibiotics. Six months after the surgery, the abnormal bleeding returned with increased volume and a bad odor. The next month, Dr. B performed surgery and diagnosed uterine cancer. The patient was treated for 3 years and then died.

Patient's claim The diagnosis of cancer was delayed. More testing, including a biopsy, should have been done after the myomectomy.

Doctor's defense The patient was treated properly for a postsurgery infection, which is not uncommon, and had healed a month following the surgery. Her condition improved until she developed an aggressive cancer, which was not foreseen.

Verdict New York defense verdict. ■

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