

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF WESTCHESTER

=====X
JEANETTE SANTIAGO,

Plaintiff,

- against -

PETER HON, M.D., and NORTHERN WESTCHESTER
SURGICAL ASSOCIATES, LLP and WESTCHESTER COUNTY
HEALTH CARE CORPORATION,

Defendants.
=====X

Index No.: 54354/2018

SUPPLEMENTAL VERIFIED
BILL OF
PARTICULARS
as to defendant
Westchester County
Healthcare Corporation

Plaintiff, as and for her Supplemental Verified Bill of Particulars, pursuant to the demand of defendant, **WESTCHESTER COUNTY HEALTHCARE CORPORATION**, respectfully alleges:

1. The defendant **WESTCHESTER COUNTY HEALTHCARE CORPORATION**, by its agents, servants, employees, nurses, technicians, physicians assistants and/or physicians,
 - a. Was careless and negligent in causing injury to plaintiff's small bowel during sigmoidectomy for diverticulitis at Westchester County Hospital,
 - b. Caused and contributed to causing iatrogenic small bowel perforations during sigmoidectomy;
 - c. Failed to diagnose, recognize and treat multiple iatrogenic small bowel perforations prior to the conclusion of the sigmoidectomy;
 - d. Performed a negligent sigmoidectomy;
 - e. Failed to order pre-operative and post-operative gastrointestinal consults;
 - f. Failed to confer and consult with plaintiff's treating gastroenterologist prior to performing surgery upon plaintiff;

- g. Failed to timely order and/or perform surgery to repair plaintiff's small bowel perforations;
- h. Improperly delayed surgical intervention to repair plaintiff's small bowel;
- i. Failed to timely recommend surgical intervention to repair plaintiff's small bowel;
- j. Neglected to consider the possibility that plaintiff may be suffering from small bowel perforations;
- k. Failed to refer and/or transfer the plaintiff to physicians or hospitals better equipped to diagnose the plaintiff's condition;
- l. Failed to appreciate the significance of 8 days of severe, unrelenting post-operative abdominal pain requiring multiple doses of analgesics;
- m. Failed to appreciate plaintiff's persistent post-operative nausea requiring anti-emetics;
- n. Failed to appreciate the significance of plaintiff's postoperative tachycardia;
- o. Failed to appreciate plaintiff's post-operative hypotension;
- p. Failed to appreciate a post-operative drop in oxygen saturation;
- q. Failed to appreciate the significance of steadily dropping hemoglobin;
- r. Failed to appreciate a clinical picture of post-operative decline rather than improvement post-operatively;
- s. Failed to appreciate the significance of a decline in renal function;
- t. Failed to appreciate the significance of an elevated post-operative creatinine;

- u. Failed to appreciate the significance of post-operative persistent abdominal pain;
- v. Failed to appreciate the significance of a newly distended abdomen post-operatively;
- w. Failed to appreciate the significance of a post-operative increased heart rate;
- x. Failed to appreciate the significance of post-operative coffee ground emesis;
- y. Failed to appreciate the significance of post-operative dizziness;
- z. Failed to appreciate the significance of the absence of flatus post-operatively;
- aa. Failed to appreciate the significance of decreased oxygen saturation post-operatively;
- bb. Failed to appreciate the significance of decreased urinary output post-operatively;
- cc. Failed to timely perform, order and/or refer the plaintiff for a post-operative abdominal CT scan;
- dd. Failed to recognize that a post-operative abdominal CT would show the plaintiff's injury to her small intestines;
- ee. Failed to order radiological testing in response to post-operative signs and symptoms of small bowel injury;
- ff. Failed to rule in or rule out small bowel injury;
- gg. Failed to properly supervise doctors, nurses, assistants, residents and other medical providers;

- hh. Negligently put an instrument through the mesentery of plaintiff's healthy small bowel during her sigmoidectomy;
- ii. Negligently ripped through plaintiff's healthy colon during her sigmoidectomy;
- jj. Negligently poked holes through plaintiff's healthy intestines during her sigmoidectomy;
- kk. Negligently caused a rent in the mesentery of plaintiff's healthy small bowel during her sigmoidectomy;
- ll. Negligently removed plaintiff's ovary during her sigmoidectomy;
- mm. Negligently performed an oophorectomy;
- nn. Performed an oophorectomy without plaintiff's consent;
- oo. Failed to appreciate the significance of a post-operative elevated white blood cell count;
- pp. Failed to appreciate the significance of midline dressing oozing tan, brown liquid post-operatively;
- qq. Failed to appreciate the significance of a lack of post-operative bowel movements;
- rr. Failed to appreciate the significance of post-operative fever;
- ss. Failed to appreciate the significance of post-operative shortness of breath;
- tt. Failed to appreciate the significance of post-operative incontinence of bowel and bladder;

- uu. Failed to appreciate the significance of post-operative fluid collection in the pelvis;
- vv. Negligently allowed plaintiff to become septic;
- ww. Failed to timely diagnose and treat pelvic abscesses;
- xx. Failed to appreciate the significance of post-operative mental status change;
- yy. Failed to appreciate the significance of post-operative free fluid around the anastomosis;
- zz. Negligently caused small bowel ischemia/infarction;
- aaa. Negligently caused an interloop abscess;
- bbb. Failed to appreciate the significance of post-operative hypovolemia;
- ccc. Failed to check for bowel injury prior to concluding the sigmoidectomy on 9/25/15.

Plaintiff reserves the right to amend or supplement this Verified Bill of Particulars as such information may become available prior to the time of trial.

Dated: New York, New York
June 6, 2019

Yours etc.,

KRAMER, DILLOF, LIVINGSTON & MOORE


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