

Preeclampsia: \$22,000,000 Verdict For Patient's Death.

A severe headache brought the patient to the hospital. She was thirty-four years old and nine months pregnant with her first child. She was admitted to the labor and delivery unit.

On arrival in labor and delivery she was examined by a second-year obstetrical resident and assessed by a labor and delivery nurse. The physician and nurse concurred the patient likely had preeclampsia due to her being nine months pregnant and having elevated blood pressure.

Lab tests ordered by the resident physician confirmed the presence of HELLP syndrome (Hemolytic anemia, Elevated Liver enzymes and Low Platelet count).

The patient was then examined by two obstetric physicians. It was agreed that labor should be induced.

No Labetalol Given

The family's lawsuit for wrongful death from malpractice alleged the patient's death was caused by the fact that anti-hypertensive labetalol was not given as mandated by hospital protocols for every pregnant patient with severe hypertension.

During induced labor the patient's blood pressure reportedly spiked to 210/111. That blood pressure reading was obtained just at the moment she became unresponsive.

The baby was delivered by emergency cesarean basically unharmed. The mother was then sent for a CT scan which revealed she had had a brain hemorrhage.

The mother was placed on a ventilator. The ventilator was discontinued four days later and she expired.

The jury in the Circuit Court, Cook County, Illinois awarded the widower and child a total of \$22,000,000 from the hospital, for the resident's and nurse's negligence, and from the medical-practice groups with whom the two obstetricians were associated. **Bentivenga v. Saleh, 2008 WL 539887 (Cir. Ct. Cook Co., Illinois, January 15, 2008).**