

## **Misdiagnosed Heart Attack**

Welcome and thank you for joining me. I'm Gerry Oginski a New York Medical malpractice and personal injury trial lawyer practicing law here in the State of New York.

Today's topic is failure to diagnose heart attacks. What are they and why are they important? The failure to recognize a heart attack has significant, dramatic implications for the patient. If a heart attack occurs, it can kill off a good portion of your heart. And if it is not recognized either immediately before it happens or at the time it's happening, the result could be devastating.

Let me tell you about a case I recently handled involving a young man and a failure to diagnose a heart attack. The patient developed chest pain and went to his local emergency room. While in the emergency room they hooked him up to a cardiac monitor, and they drew his blood and did all sorts of tests.

They realized that they needed more time in order to properly evaluate to see whether or not he was, in fact, having a heart attack. The hospital was so concerned that they decided to admit him to the hospital to run more tests. They were going to have him do a stress test. They were going to get an echocardiogram, which is like a sonogram of the heart. They were going to draw blood on a regular basis to see whether or not certain enzyme levels were rising, indicate that he might have a heart attack.

So what went wrong with this patient's care? It wasn't the tests that were ordered. All of those testes were appropriate and it was good medical practice to do that. The problem arose when the doctors were interpreting those particular tests. They were interpreted incorrectly. In fact, the computers were reading abnormalities in these particular tests, but the doctors who were looking at them blew it off and said not a big deal. That's artifact. That's insignificant. We don't care about that. The patient is normal. Everything is fine.

He followed up with his cardiologist a few weeks later and he told him he was still having some chest pain. The cardiologist never bothered to get the testing that was done at the hospital and based upon his own testing realized that the patient was just fine. He told the patient to come back in a month. We'll check you again.

The next month the patient returned, as directed, and again, he had the same time of complaints. You know, I have chest pain. I'm feeling uncomfortable. I don't know what's going on. Again, the doctor pooh-poohed it and said not to worry, all the tests before show that you are fine.

The third time it happened again. He came back to the office made the complaints. The doctor said not to worry about it, you're fine. A few days after the last visit to the cardiologist, the patient developed severe chest pain and difficulty breathing. He called an ambulance and was rushed to his local emergency room, which was exactly the place where he had been taken to earlier, a few months earlier, to be fully evaluated. Once the doctors hooked him up to all the monitors in the emergency room, they recognized he was having a massive heart attack and by that point there was very little they could do to save a good part of his heart.

It turns out over the next few days an additional testing revealed that the patient had three arteries, three major coronary arteries that were severely blocked. He had three blockages. And had this been recognized three or four months earlier, the patient could have had an elective triple bypass surgery, which would have prevented what's knows as ischemia, a cutoff or a lack of blood flow to the heart, what caused him to have this massive heart attack.

A majority of his heart was killed off, as a result of the lack of blood flow to the heart. And because of that this patient suffered every complication known to mankind. So much so, that he ultimately was told that he needed to have a heart transplant. This patient, unfortunately, is physically incapable of doing any type of activity. He gets tired just from walking across the room. He needs assistance to do all types of daily activities. And it's tragic because when we went to investigate and looked back at those medical records, we had doctors and experts in cardiology look at those diagnostic tests and they told us that these were clearly abnormal. And even the computer confirmed that they were abnormal, and the doctors should have recognized this. This was totally preventable. He could have had elective surgery, which would have prevented the heart attack and he would have been just fine. Unfortunately, for this young man and his family he wasn't.

That's it for today's topic on heart attacks and why they're so important to prevent. I'm Gerry Oginski. Thank you for joining me. Have a great day.

Gerry Oginski, an experienced New York medical malpractice, wrongful death and personal injury trial attorney practicing law in Brooklyn, Queens, Bronx, Manhattan, Staten Island, Long Island, Nassau & Suffolk explains.

For more information about these types of cases, go to <u>Gerry's popular website</u>, or call Gerry personally at 516-487-8207 for answers to your questions. He welcomes your call.