

STATE OF MAINE
PENOBSCOT, SS.

SUPERIOR COURT
CIVIL ACTION
DOCKET NO.:

JEFFREY L. QUIMBY and DAWN
QUIMBY,

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Plaintiffs

COMPLAINT

v.

ST. JOSEPH HOSPITAL
and CHRISTIAN ANDERSON, MD

Defendants

NOW COME Plaintiffs Jeffrey Quimby and Dawn Quimby, having been duly sworn, and state as follows for this Complaint.

I. Parties

1. Plaintiffs Jeffery Quimby and Dawn Quimby are residents of Winterport, County of Penobscot, State of Maine. At all relevant times, they have been living together as husband and wife.

2. Defendant St. Joseph Hospital (hereafter Defendant SJH) is a registered Maine corporation that provides health care services in the Bangor, Maine area.

3. Defendant Christian Anderson, M.D. (hereafter Defendant Anderson), is a physician licensed to practice in Maine. At all relevant times, Defendant Anderson was an employee or agent of Defendant SJH acting within the course and scope of his employment or agency.

II. System Failure, Agency, Direct, and Vicarious Liability

4. Like any corporation, Defendant SJH acts through its employees and its agents, including medical doctors, mid-level providers, physical and occupational therapists, dieticians,

technicians, nurses, and other staff and personnel who combine to create a system of health-care delivery to a hospital patient.

5. Some of these hospital staff and personnel are required to document their actions in the patient's medical chart, and therefore can be identified in the chart; others are not required to document their actions, but their participation and involvement in the system of medical care may nonetheless be critical to meeting the standard of reasonable care. All references to Defendant SJH within this Complaint are intended to be inclusive of all employees or agents of the hospital—whether specifically identified in the medical chart or not; or specifically identified by name in this Complaint or not—who participated in and collectively comprised the system of medical care relied upon by Plaintiff while he was admitted to the hospital, and which Plaintiff alleges, through this Complaint, failed to comply with reasonable standards for delivery of medical care in a hospital-based setting.

6. Plaintiff alleges that each and every person involved in the system of medical care upon which he relied while he was at Defendant's hospital was, if not a W-2 employee, an actual or implied agent of the hospital, because each person had authority conferred by the hospital to participate in Plaintiff's medical care while he was at the hospital and Plaintiff reasonably believed and relied upon the belief that Defendant SJH would appropriately select, in both quality and quantity, sufficient personnel with the necessary qualifications, experience, training, and supervision to fulfill his or her role within the system of medical care, such that the system as a whole was safe, met the needs of Plaintiff as a patient and thus complied with the standard of reasonable medical care expected of a hospital, like Defendant SJH.

7. In this Complaint, Plaintiff specifically contends that Defendant SJH was directly negligent based upon the hospital's negligent hiring, training, staffing, supervision, policies,

communication, documentation, medical record-keeping, culture, and systems, as well as vicariously liable for the negligence of each and every one of its personnel whose conduct, either individually or in combination with other personnel, contributed to the failure of such individual(s) and the system to meet the standard of reasonable care to Plaintiff.

III. Factual Background

8. On the evening of September 6, 2020, Plaintiff Jeffery Quimby presented to the emergency department at Defendant SJH with a chief complaint of “vomiting.”

9. Plaintiff Jeffrey Quimby reported that he had been taking Tramadol and that he had tapered his use for a couple of days and ultimately stopped taking it completely 48 hours earlier.

10. Plaintiff Jeffrey Quimby reported that since discontinuing Tramadol he had increasing malaise, shakiness, muscle aches, progressive nausea, and vomiting. He also reported abdominal pain and chest pressure.

11. Plaintiff Jeffrey Quimby remained in the waiting room for more than three hours before he was seen by Defendant Anderson.

12. While Plaintiff Jeffrey Quimby was waiting, he was administered sublingual Zofran.

13. Plaintiff Jeffrey Quimby’s blood pressure was recorded twice in the hospital, and both times it was elevated. At 11:49 pm his blood pressure was 203/81; at 1:06 am on September 7, it was 187/90.

14. Plaintiff Jeffrey Quimby’s weight was recorded as 130 lbs.

15. While at Defendant SJH, Plaintiff Jeffrey Quimby was administered the following new medications:

11:52 pm - Zofran (Ondansetron) 4 mg

12:54 pm - Clonidine (Catapres) 1 mg

12.54 pm - Compazine (Prochlorperazine) 10 mg by IV

12:57 pm - Dicyclomine (Bentyl) 20 mg

16. Plaintiff Jeffrey Quimby was diagnosed with opioid withdrawal.

17. At 1:49 am on September 7, it was noted that Plaintiff Jeffrey Quimby “rings out.”

18. At 2:45 am Plaintiff Jeffrey Quimby was administered packets of Clonidine, Dicyclomine, Promethazine (Phenergan) (25mg tablet) to take with him when he left the hospital.

19. The manufacturers of these drugs list the indications, side effects, instructions, and warnings of the medications administered to Plaintiff Jeffrey Quimby, including the following:

a. **Clonidine** (Catapres) is a medication that lowers blood pressure and is used to treat a variety of conditions including high blood pressure, attention deficit disorder, and others. One of the most common reported side effects is “drowsiness.” Clonidine can also impair thinking. The patient instructions listed by the manufacturer on the label and packet insert include the following warning: “**Patients who engage in potentially hazardous activities, such as operating machinery or driving, should be advised of a possible sedative effect of clonidine.**”

b. **Compazine** (Prochlorperazine) is an antipsychotic medicine that is used to treat anxiety and schizophrenia. It can also be prescribed to treat severe nausea and vomiting. Common side effects include headache, dizziness, and drowsiness.

c. **Dicyclomine** (Bentyl) is an anticholinergic/antispasmodic medication used to treat irritable bowel syndrome by relaxing the muscles in the stomach and intestines. Common side effects of Dicyclomine include dizziness, drowsiness, lightheadedness, weakness, and blurred vision, among others. The manufacturer’s “Information for

Patients” includes the following warning: “**BENTYL may produce drowsiness or blurred vision. The patient should be warned not to engage in activities requiring mental alertness, such as operating a motor vehicle or other machinery or to perform hazardous work while taking this drug.**”

d. **Promethazine** (Phenergan) is in a group of drugs called phenothiazines. It has sedative and antiemetic effects. The manufacturer warns that Phenergan “**may impair the mental and/or physical abilities required for the performance of potentially hazardous tasks, such as driving a vehicle or operating machinery.**”

20. After 2:45 am, Defendant SJH discharged Plaintiff Jeffrey Quimby. In connection with the discharge and during his time in the ED, Defendant SJH provided no warnings or instructions relating to the safety of Plaintiff Jeffrey Quimby operating a motor vehicle, considering (i) the hour of the day, (ii) Plaintiff Jeffrey Quimby’s recent history of opioid withdrawal and associated symptoms, and (iii) the multiple sedative medications administered and dispensed by the hospital.

21. The medication instructions Plaintiff Jeffrey Quimby was given were that he could take 1 Phenergan every four hours for nausea or vomiting. The discharge instructions provided that the Phenergan was for nausea and restlessness.

22. Plaintiff Jeffrey Quimby signed the discharge papers and left the hospital at approximately 2:48 am.

23. Plaintiff Jeffrey Quimby, who remained nauseous, took one of the Phenergan tablets.

24. Plaintiff Jeffrey Quimby got into his car and began to drive toward his home in Winterport.

25. At some time between approximately 3:02 and 3:06 am on September 7, 2020, while driving home from the hospital, Plaintiff Jeffrey Quimby fell asleep at the wheel, went off the road, and struck a telephone pole.

26. As a result of the crash, Plaintiff Jeffrey Quimby suffered injuries to his spine, which have left him a quadriplegic.

COUNT I: MEDICAL NEGLIGENCE

27. Plaintiffs re-allege the preceding allegations.

28. Defendant Anderson and Defendant SJH owed a duty to Plaintiff Jeffrey Quimby to provide medical care, treatment, and advice consistent with safe and reasonable standards of medical, nursing, and hospital care.

29. For the reasons stated above, the care provided by Defendant Anderson and Defendant SJH was unreasonable and deviated from the safe and acceptable standards of medical, nursing, and hospital care.

30. Defendants' negligence is a direct and proximate cause of catastrophic harm and injury, including permanent and irreparable spinal cord injury, quadriplegia, lower and upper extremity paralysis, lack of bowel and bladder function, the need for a tracheostomy tube, decubitus ulcers, severe emotional distress, loss of enjoyment of life and other related harm. Plaintiff Jeffrey Quimby will require skilled nursing, personal care, and other life care for the remainder of his lifetime.

COUNT II: LOSS OF CONSORTIUM

31. Plaintiffs re-allege the preceding allegations.

32. As a result of the negligence and harm detailed above, Plaintiff Dawn Quimby has suffered loss of consortium.

DAMAGES

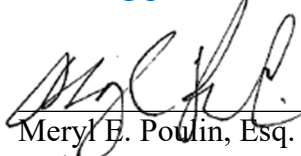
WHEREFORE, Plaintiffs request judgment in their favor for compensatory damages, together with costs, interest, attorney fees, and such other and further relief as this Court finds just and appropriate.

Dated: 06-15-2022



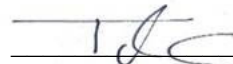
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