

# ***MARY'S STORY***

A real case demonstrating  
the unfairness of damage caps.

## Mary's Story

*Mary was forced to stay home from work and rely on friends for help with everyday chores after her doctors left a sponge inside of her following surgery. Multiple doctors failed to remove the sponge, even though an X-ray clearly showed it was there.*

Mary had worked hard all of her life. Some days she could feel the stress and strain that the years of waitressing and standing to run a cash register had caused. By the time that she was 53 years old, she had developed lower back pain from the hours upon hours on her feet. Mary needed to stay active. She was single, and her ability to earn a living and take care of herself depended on her ability to be physically active and mobile.

Mary decided to consult an orthopedic surgeon regarding her worsening lower back pain. After she had undergone numerous diagnostic tests, her surgeon recommended that she have surgery performed on her lower back to fuse, and therefore strengthen, two arthritic vertebrae, which were causing her pain. Mary agreed to the surgery. She was worried about taking time off from work, but her surgeon assured her that she would be back to work in no more than eight weeks.

On July 18, Mary entered a local community hospital in the Sunbury area and had the fusion surgery performed. All appeared to go well during the surgery. There were no problems noted in the operative report, and the nurses indicated that all sponge and instrument counts were correct. Following the surgery, however, Mary developed a very high fever, a sign that something was amiss. Blood work, urinalysis and chest X-rays were all normal. Her surgeon was puzzled at the fever, but not overly worried. Her put her on intravenous antibiotics during her few days in the hospital and then discharged her to her home with a prescription for oral antibiotics.

Five days after her discharge, Mary had her first follow-up appointment with her surgeon. She still wasn't feeling particularly well, but her complaints were attributed by her doctor to the fact that she had recently had major surgery. Her physician took X-rays during this visit in order to make sure that the bone graft used was in place and that the fusion was healing. All was well with the area of the surgery, and Mary's doctor told her that she was healing fine. What Mary's doctor did not tell her was that on the X-ray was the clear and visible reason for her fevers—a laparotomy sponge that had not been removed during the surgery.

Over the course of the next three weeks, Mary continued to feel badly. She had persistent fevers and a general feeling of malaise. She complained about her fevers and other symptoms to every health care provider that she saw from physical therapists to her primary care physician to nurses at all of her doctors' offices to her surgeon. No one had an answer for her about the cause of her fevers, although the answer was plainly visible on the X-ray taken at her surgeon's office.

Finally, on August 19, one month after her surgery, Mary could not cope with her constant sickness any longer. She went to the Emergency Department at a regional medical center, complaining of the persistent fever, nausea and vomiting. Several X-rays were taken of Mary's back and abdomen. These X-rays showed

the same thing that had been clearly visible on the X-ray taken by her surgeon three weeks earlier: Mary had a foreign object in her peritoneal cavity. Surgery was scheduled for the following day. That night Mary's temperature spiked up to 103.5°, and she required morphine for her tremendous pain.

On August 20, Mary underwent her second surgery in one month. A laparotomy sponge was removed from her peritoneal cavity and a huge intra-abdominal abscess, caused by the sponge, was drained. Two days later, she underwent another surgery to clean an infection of the area of the incision. Because of the massive infection in her abdomen from the sponge, the abdominal wound could not be closed, and she was discharged from the hospital with a gigantic, open, oozing wound.

The huge wound on Mary's abdomen took months to close. During this time, visiting nurses had to come to her home every day. They packed the wound with sterile, saline-soaked gauze, then came back the next day to pull the gauze from her abdomen, taking with it pus and infectious material, and then re-packing it so the process could begin again. Mary likened this process to a magician pulling scarves from a magic hat, except that in her case the gauze being pulled from her open abdominal wound caused severe pain. She hated the sight of the lengths of bloody gauze slowly being pulled out of her body. She dreaded the visits from the home nurses.

Mary couldn't return to work for months following her multiple surgeries. She couldn't drive. She wasn't allowed outside, lest her open abdominal wound come in contact with another infectious agent. She relied on friends to bring her groceries and get her prescriptions filled. She was lucky to have friends who were also willing to help her clean her house and make some of her meals. She couldn't engage in her favorite hobby—Karaoke singing at a local pub—for months.

Even though the gigantic wound has healed, Mary's ordeal isn't over. She has a large scar across her abdomen where the gaping hole once was. The area is indented and causes her to wince every time that she sees it while bathing or dressing. The area of the scar is also very painful. Her physicians told her that this is because of the way that the nerve endings healed. She must make sure that her pants and skirts don't ride on the scar, and she tries to wear shirts that do not fit tightly across the area. Mary also has daily pain in her abdomen, which her physicians tell her is permanent. The pain makes it hard for her to work full shifts and interferes with her ability to do all of the chores that she must do to take care of herself—shopping, cleaning, laundry, cooking.

Mary has suffered because of the clear negligence of the hospital nursing staff that did not correctly remove and count the sponges used in her surgery. Her condition was made worse by the clear negligence of her orthopedic surgeon who failed to do anything when he saw the retained sponge in her abdomen. Mary paid the price for the negligence of her health care providers—spending months confined to her home with an open, oozing abdominal wound which required painful daily packing. Her physical pain, mental suffering, disfigurement and the loss of her ability to live her life as she wanted were all caused by medical negligence. Why should her recovery for that negligence be arbitrarily limited? Shouldn't she have the right to be fully compensated for all that she has suffered?



***Single and alone, Mary was left to fend for herself for months following a medical mistake that her doctors left unresolved.***



***Mary's X-ray clearly showed a sponge left inside her following surgery. Yet, Mary's doctor did nothing to remove the sponge. He did not even tell her it was there.***



***Mary was left with a gaping, oozing hole in her abdomen due to the infection caused by the sponge left inside of her. The wound needed daily, painful packing and took months to heal.***

