

# ***OLIVIA' STORY***

A real case demonstrating  
the unfairness of damage caps.

## Olivia's Story

***Olivia's mom had problems delivering her first child. When the time came for her to deliver her second baby, her physicians never looked at her history or monitored the size of the baby. As a result of her doctors' negligence, little Olivia has almost no use of her right arm.***

Olivia is a beautiful little girl, who is the apple of her mother's eye. She is a fun-loving, rambunctious four year old, full of life and energy. Olivia has almost no use of her right arm as a result of medical negligence.

Olivia's mom and dad, Debra and Art, were thrilled to learn that Debra was pregnant with the couple's second child. Despite their happiness, the couple was also apprehensive about the delivery of the baby. A small woman, Debra had experienced a very painful delivery of her son, who had suffered a clavicle fracture during the delivery because of his large size and Debra's small stature. Because of their concerns, Debra returned for pre-natal care and delivery of the new baby to the obstetricians who had delivered her son since they were very familiar with her history.

Unfortunately, Debra's physicians paid little attention to her prior history. Throughout the course of her pregnancy, they failed to consider her as high risk for another shoulder injury birth and did nothing to investigate whether history would repeat itself. They did not monitor the baby's weight with ultrasounds. They did not perform any pelvic measurements to determine if she would be able to deliver vaginally. They did not advise her that her son's birth injury made it more likely that her daughter would also suffer a shoulder injury at birth. They never told her that the standards of good and safe medical practice demanded that she have a caesarean section instead of a vaginal birth.

On March 11th, Debra went into labor and met her obstetrician at a local hospital. She was being managed as a vaginal delivery. During her delivery, her doctor took his first steps of decreasing a shoulder birth injury. He gave her a drug to speed up the delivery in the hopes that Debra's baby's shoulder would not get caught on her pelvic bone. He then decided to speed up the delivery even more by using a vacuum extractor to pull Olivia from Debra. He applied the extractor to the right side of Olivia's body, between her neck and shoulder. Olivia was delivered with great difficulty. She weighed over 9 pounds.

After Olivia had been delivered, the nurses noticed that she was not moving her right arm at all. She was diagnosed with Erb's Palsy. Erb's Palsy is a condition in which the nerves of the brachial plexus are injured. The brachial plexus is a bundle of nerves located on both sides of the body between the neck and the shoulder. These nerves run from the spinal cord down the arm to the hand and wrist, providing motor and sensory function to the arm and hand. Testing showed that Olivia had suffered very serious damage to the right brachial plexus during delivery. The nerve roots controlling hand and arm movement were torn from her spine as she was being delivered. She had no movement of her right arm or wrist, loss of range of motion, loss of reflexes, decreased muscle tone in her shoulder, wrist drop, decreased muscle mass throughout her arm, and an asymmetry of her right arm compared to her left.

In an effort to help Olivia gain some use of her right arm, she was immediately begun on a course of physical therapy. Debra and Art tried to help their daughter move her arm every day, never missing a needed exercise session. Debra even delayed her return to full-time employment so that she could take her daughter to physical therapy visits several times a week. When it became apparent that her injury was not improving with

therapy, Olivia was scheduled for and underwent surgery to repair her nerve injury. She was less than a year old when she underwent the procedure because early surgical intervention offers the most help. After the surgery, she was placed in a "Statue of Liberty" brace, which held her right arm up in the air for weeks. Olivia and her parents were tested by surgery on such a young child, as well as the confinement of the brace. Again, after surgery, Olivia returned to therapy.

While the surgery and her continuing physical therapy have helped her somewhat, Olivia has not and never will fully recover function of her right arm. According to her doctors, she has already experienced all of the improvement that she ever will. She still has the traditional symptoms of Erb's Palsy. She has a right arm that is noticeably shorter than her left. In addition, the muscles of her right arm are atrophied and wasted away, making the size disparity between her arms even more apparent. Her arm is turned inward to her body, again making her physical deformity easily identifiable. Her right shoulder has an abnormal posture as well.

As Olivia gets older, these physical differences will cause her to be the subject of teasing and ridicule. Her self-confidence will suffer. Will she ever feel comfortable posing for pictures? Will she try to hide her arm in her clothes? How will she feel in a bathing suit when she meets her friends at the local pool? How will she clap at a high school football game? How will she shake hands on interviews without embarrassment? Her dad, who dotes on his only daughter, worries constantly about the social problems that his little princess will face when she begins school and moves out of the safe haven of their home.

In addition, she has permanent abnormalities of her motor function. For example, Olivia is unable to lift her arm above her head. How will she hold on to a swing at the playground? How will she wash and style her hair for a date? How many times will she struggle putting on a t-shirt or a pull-over sweater? Her problems with motor function, which are more than just an inability to lift her arm above her head, make doing simple activities very difficult. She will have to learn to tie her shoe with one hand. She will have to lift and pour a heavy milk jug with one arm. She will have difficulty operating buttons and zippers.

Even now, at the age of four, she has difficulties, which make her angry and frustrated. She cannot hold open a book and turn the pages. She struggles to dress her dolls. Her friends are doing ballet, but she cannot lift her right arm above her head to twirl around like them. She cannot catch balls or do tumbles. She is having a hard time learning how to ride a bicycle because she cannot grasp the ride side of the handlebars. Debra and Art work patiently with Olivia to try to help her to do all of the things that she wants, but even they become frustrated, angered and saddened when they watch her struggle with the littlest things.

Olivia faces more surgery. As she grows, she will need more operations to align her muscles and tendons and keep her deformity from worsening. Her doctors also believe that she will need rotator cuff surgery to help her move from the shoulder, as well as a carpal tunnel release to improve her wrist function.

Olivia has a lifetime of hard work ahead of her, just to be able to do the things that most people do with so little effort. Her struggles will never go away. Why should her doctors' lives be made easier with a damage cap?



***Tiny Olivia suffered serious nerve damage during her delivery as a result of negligence during her delivery. Olivia, now age four, has almost no use of her right arm.***









***Even after painful corrective surgery and rehabilitation, Olivia struggles with daily life. She can't open a book or turn pages or catch a ball or do tumbles like her friends can. She now faces additional surgery to prevent her condition from worsening.***