

IN THE COMMON PLEAS COURT OF HAMILTON COUNTY, OHIO
CIVIL DIVISION

VICTORIA STAMPER
3420 Reemelin Road
Cincinnati, Ohio 45211

and

STEVE STAMPER
3420 Reemelin Road
Cincinnati, Ohio 45211

Plaintiffs.

vs.

THE CHRIST HOSPITAL
2139 Auburn Avenue
Cincinnati, Ohio 45219

Please also serve:
THE CHRIST HOSPITAL c/o
its statutory agent:
CT Corporation System
1300 East Ninth Street
Cleveland, Ohio 44114

and

MICHAEL R. DRAZNIK, M.D., INC.
2055 Reading Road, Suite 480
Cincinnati, Ohio 45219

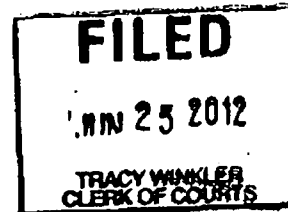
Please also serve:
Michael R. Draznik, M.D.
Statutory Agent for
Michael R. Draznik, M.D., Inc.
2055 Reading Road, Suite 480
Cincinnati, Ohio 45219

and

Case No. A 1205079

Judge: _____

COMPLAINT; WITH
JURY DEMAND
ENDORSED HEREIN



D98150086

A handwritten signature in black ink, consisting of a large, stylized loop followed by a horizontal stroke.

QUEEN CITY SURGICAL
CONSULTANTS, LLC.
7502 State Road, Suite 1180
Cincinnati, Ohio 45255

Please also serve:
Queen City Surgical
Consultants, LLC.
c/o its statutory agent:
Queen City General & Vascular
Surgeons Group, LTD.
7502 State Road, Suite 1180
Cincinnati, Ohio 45255

and

MICHAEL R. DRAZNIK, M.D.
2055 Reading Road, Suite 480
Cincinnati, Ohio 45219

and

ROBERT G. BRADLEY, M.D.
Queen City Surgical Consultants, LLC
Good Samaritan Office
3219 Clifton Avenue, Suite 215
Cincinnati, Ohio 45220

and

CHRISTINE KEUP, M.D.
Medical Sciences Building
231 Albert Sabin Way
Cincinnati, Ohio 45267

and

SZMIN CHEN, M.D.
The Christ Hospital
2139 Auburn Avenue
Cincinnati, Ohio 45219

and

JOHN DOE #1)
Name and address unknown)
Please serve c/o)
The Christ Hospital)
2139 Auburn Avenue)
Cincinnati, Ohio 45219)
and)
JOHN DOE #2)
Name and address unknown)
Please serve c/o)
The Christ Hospital)
2139 Auburn Avenue)
Cincinnati, Ohio 45219,)
and)
JOHN DOE #3)
Name and address unknown)
Please serve c/o)
The Christ Hospital)
2139 Auburn Avenue)
Cincinnati, Ohio 45219,)
and)
JOHN DOE #4)
Name and address unknown)
Please serve c/o)
The Christ Hospital)
2139 Auburn Avenue)
Cincinnati, Ohio 45219,)
JOHN DOE #5)
Name and address unknown)
Please serve c/o)
The Christ Hospital)
2139 Auburn Avenue)
Cincinnati, Ohio 45219,)
Defendants.)

Now comes Plaintiffs, Victoria and Steve Stamper, by and through Counsel and hereby state for their causes of action against defendants as follows:

JURISDICTION AND VENUE

1. Jurisdiction exists in the Court of Common Pleas pursuant to Ohio revised Code Section 2305.01 in as much as this is a civil action in which the amount in controversy exceeds fifteen thousand dollars (\$15,000.00).
2. Venue is proper in Hamilton County pursuant to Civil Rule 3 in as much as the activity giving rise to the claims for relief occurred in Hamilton County, Ohio.

CERTIFICATION OF MERIT

3. This complaint is a medical malpractice negligence action. Pursuant to Civ. R. 10(D)(2), please see the Affidavit of Merit of Mark S. Champman, M.D., herein attached as Exhibit A.

THE PARTIES

4. Plaintiff, Victoria Stamper, ("Victoria") is a married 36 year old woman, mother of four children and at all times relevant to this case has been a resident of Hamilton County, Ohio.
5. Plaintiff, Steve Stamper, ("Steve") husband of Victoria Stamper, is a married male and at all times relevant to this case has been a resident of Hamilton County, Ohio.
6. At all times relevant to this case, Defendant, Michael R. Draznik, M.D., ("Defendant Draznik") held himself out to be a licensed physician with specialties in obstetrics and gynecological surgery.
7. At all times relevant to this case, Defendant, Robert G. Bradley, M.D., ("Defendant Bradley") held himself out to be a licensed physician with a specialty in general surgery.
8. At all times relevant to this case, Defendant, Christine Keup, M.D., ("Defendant Keup") was a OB/GYN resident and performed procedures at The Christ Hospital in Hamilton County, Ohio.
9. At all times relevant to this case, Defendant, Szmin Chen, M.D. ("Defendant Chen") was a OB/GYN resident and performed procedures at The Christ Hospital in Hamilton County, Ohio.

10. At all times relevant to this case, Defendants, John Doe #1 and John Doe #2, were licensed physicians with privileges at The Christ Hospital who treated Victoria in July and August of 2011.
11. At all times relevant to this case, defendants, John Doe #3, and John Doe #4, and John Doe #5 were licensed registered nurses, employed by The Christ Hospital and rendered care to Victoria in July and August of 2011.
12. At all times relevant to this case, Defendants, Draznik, Bradley, Keup, Chen, Doe #1, Doe #2, Doe #3, Doe #4, and Doe #5, were employed by or acting on behalf of Defendant, The Christ Hospital ("Defendant Christ"), as set forth in *Clark v. Southview Hosp. & Family Health Ctr.* (1994), 68 Ohio St.3d 435.
13. At all times relevant to this case, Drasnik was also employed by Defendant, Michael R. Drasnik, M.D, Inc., ("Draznik, Inc.")
14. At all times relevant to this case, Bradley was also employed by Defendant, Queen City Surgical consultants, LLC., ("QCSC")
15. At all times relevant to this case, Defendants, Christ, Drasnik, Inc., and QCSC were all Ohio corporations set up to provide medical care and were licensed to do business in the State of Ohio.
16. At all times relevant to this case, Defendants transacted business and performed medical services in Hamilton County, Ohio at 2139 Auburn Avenue, Cincinnati, Ohio 45219.
17. Defendants Christ, Draznik, Inc., and QCSC are responsible for the negligent acts of their employees and their agents as set forth in *Clark v. Southview Hosp. & Family Health Ctr.* (1994), 68 Ohio St.3d 435.

ALLEGATIONS

18. Plaintiffs incorporate the allegations set forth in each and every of the foregoing paragraphs of the Complaint, as if fully rewritten herein.
19. On March 25, 2010, Defendant Draznik, assisted by Defendant Keup, and John Doe #1 performed surgery on Victoria, specifically, a diagnostic laparoscopy, a lysis of adhesions and a laparoscopic right salpingo-oophorectomy at Defendant Christ.
20. In the operative report, dictated by Defendant Drasnik on March 25, 2010, he states, "The tube and ovary were placed into ... it was removed through the right side without difficulty."

21. On March 29, 2010, the final pathology report from Victoria's March 25, 2010 surgery noted that although the tubal fimbriae was adherent to the ovary, a definitive length of fallopian tube was not identified. Operative correlation was necessary.
22. Defendant Draznik never obtained operative correlation. In the operative report of the March 25, 2010 surgery, Defendant Draznik never explained or discussed leaving the fallopian tubal remnant left in Victoria's body.
23. It was Victoria's understanding at the time of the March 25, 2010 surgery that Defendant Draznik removed the entire right ovary and entire fallopian tube.
24. On July 24, 2010, Victoria was seen and examined in the Emergency Room at Defendant Christ for complaints of right lower quadrant abdominal pain. Lauriejo Hall, PA ordered a CT Scan of abdomen and Pelvis to rule out appendicitis.
25. The CT Scan of July 24, 2010 noted Victoria was status post a hysterectomy and further noted, *inter alia*, the bladder to be normal, appendix normal, small bowel normal, with no evidence of free fluid or of free intraperitoneal air.
26. On July 24, 2010, Victoria was discharged home from the Emergency Room at Defendant Christ.
27. Between July, 2010 and June, 2011, Victoria battled gastro-intestinal issues and abdominal discomforts.
28. On or about June 19, 2011, Victoria contacted her gastroenterologist, Gail Bongiovanni, M.D., ("Dr. Bongiovanni") and complained of right lower quadrant abdominal pain and diarrhea. Dr. Bongiovanni initiated a course of oral antibiotics.
29. On June 25, 2011, Victoria's symptoms from the previous week progressed to vomiting and increased abdominal pain. Dr. Bongiovanni instructed Plaintiff to go to the Emergency Room at Jewish Hospital, ("Jewish") for further evaluation and treatment.
30. On June 25, 2011, Victoria was admitted to Jewish with worsening abdominal pain, nausea, vomiting, and unable to tolerate oral medications.
31. An abdominal CT scan obtained at Jewish on June 25, 2011 demonstrated the presence of a right-sided tubal remnant that was not removed from Victoria's

- surgery on March 25, 2010 performed by Defendant Draznik, assisted by Defendant Keup.
32. Defendant Draznik and/or Defendant Keup negligently failed to remove the right fallopian tube during Plaintiff's surgery on March 25, 2010.
 33. On July 6, 2011, as Victoria's initial abdominal issues had resolved, she was discharged from Jewish with a plan to follow-up with Defendant Draznik for surgery at Defendant Christ on July 8, 2011.
 34. On July 8, 2011, Victoria was admitted to Defendant Christ for surgery with Defendant Draznik and Defendant Bradley.
 35. On July 8, 2011, Victoria was taken to surgery by Defendants Draznik, Chen, Bradley, and John Doe #2 for the following procedures: diagnostic laparoscopy, exploratory laparotomy, lysis of adhesions, incidental appendectomy and the removal of a right fallopian tubal remnant. Defendant Chen was noted as an assistant to Defendant Draznik.
 36. The surgical pathology report from July 8, 2011, (with respect to the fallopian tube) described the labeled specimen as "right tubal remnant" and stated it appeared as a translucent multiloculated structure that [was] fluid filled with a serous fluid. The pathology report rendered a final diagnosis as a right tubal remnant, dilated segment of fallopian tube.
 37. Under the circumstances and in the wake of Victoria's gastro-intestinal symptoms that had recently resolved from her discharge at Jewish, it was negligent and unnecessary for Defendants Draznik and Bradley to operate on Victoria on July 8, 2011.
 38. Between Victoria's surgery on July 8, 2011 through July 12, 2011, Defendants Draznik, Bradley, and Chen were aware that Victoria became increasingly critically ill with post operative signs and symptoms of peritonitis, including but not limited to, intra-abdominal sepsis, abdominal pain, fever, tachycardia, tachypnea, hypotension, and hypoxemia and failed to appropriately, timely and properly treat Victoria.
 39. On July 9, 2011 at 09:59, Defendant Draznik examined Victoria and noted her to have moderate to severe abdominal pain and a fever.
 40. On the afternoon of July 9, 2011 at 14:47 hours, third year GYN Resident, Amy Collins, M.D., ("Dr. Collins") charted, she was called by the nurse due to Victoria's fever of 101 degrees. Dr. Collins progress note was co-signed by Defendant Draznik

41. Approximately 10 hours later, on July 10, 2011 at 00:29 hours, Dr. Collins noted she was again called by the nurse due to Victoria's fever of 102.9 degrees with a recorded heart rate of 140 beats per minute. Dr. Collins also noted that Victoria complained of a "strange feeling, like something's not right." Dr. Collins ordered a Computed Tomography Pulmonary Angiogram, ("CTPA") to rule out a pulmonary embolism, ("PE")
42. On July 10, 2011 at 04:50 hours, Rebecca McClurg, RN, ("Nurse McClurg") noted Victoria complained of severe abdominal pain, nausea, and anxiety. Nurse McClurg notified Dr. Gunzenhauser and Dr. Young
43. One hour later, Nurse McClurg, charted Victoria's vital signs as febrile at 99.9, tachycardia at 121, hypotensive at 100/70 and requiring oxygen at 3 liters per minute via a nasal cannula.
44. On July 10, 2011 at 14:40 hours, Defendant Draznik examined Victoria and noted she continued to have complaints of abdominal pain, her abdomen remained distended and tender, and believed Victoria was suffering from an ileus.
45. Later that afternoon, on July 10, 2011 at 14:26 hours, David McKinney, M.D., ("Dr. McKinney"), noted that he had spoke with Defendant Draznik and indicated that Defendant Draznik had seen and evaluated Victoria.
46. On July 10, 2011 at 18:52 hours, third year GYN Resident, Laura Broxterman, M.D., ("Dr. Broxterman") noted she was called by the nurse to examine Victoria due to an episode of sinus tachycardia noted after Victoria got out of bed to use the bathroom. Dr. Broxterman's progress note was co-signed by Defendant Draznik
47. On July 10, 2011 at 19:05 hours, Andrea L. Scott, RN, ("Nurse Scott") noted that Victoria was "very pale" and her oxygen saturation level was down to 91% with a heart rate in the 150's. Nurse Scott notified Dr. McKinney and a stat EKG was obtained which showed Victoria in sinus tachycardia.
48. On July 10, 2011 at 20:22 hours, Olga Mullarkey, RN noted that Victoria was transferred and admitted to the telemetry unit for further cardiac monitoring of the sinus tachycardia rhythm.
49. On July 11, 2011 at 07:42 hours, second year GYN Resident, Szmin Chen, M.D., ("Dr. Chen") noted Victoria was complaining of tachycardia, was short of breath and febrile at 101 degrees.
50. Two hours later, on July 11, 2011 at 09:07 hours, Defendant Draznik examined

Victoria and noted she had a "rough night with fevers, tachycardia, and abdominal pain." At that time, Defendant Draznik indicated he would insert a PICC line, consider the addition of another antibiotic, and planned to discuss with Defendant Bradley the possibility of placing a naso-gastric tube ("NG tube").

51. On July 12, 2011 at 05:28 hours, Lisa Gallagher, RN, ("Nurse Gallagher") noted Victoria was complaining of abdominal pain and was having a difficulty voiding. Nurse Gallagher notified Dr. Springer. At 05:30 hours, Nurse Gallagher recorded Victoria's blood pressure low at 96/59.
52. At 07:10 hours, second year, UC Family Medicine Resident, Sean Boyle, D.O., ("Dr. Boyle") described Victoria's appearance as consistent with sepsis. He charted he discussed his exam with Defendant Bradley and a CT was ordered.
53. On July 12, 2011 at 07:10 hours, Dr. Chen, charted Victoria had a fever of 100.9 degrees and was tachycardic. Dr. Chen also indicated Victoria was complaining of abdominal pain. His abdominal exam revealed Victoria's abdomen to be soft, distended, with hypoactive bowel sounds. Dr. Chen's progress note was co-signed by Defendant Draznik
54. Approximately 30 minutes later, Defendant Bradley, on July 12, 2011 at 07:32 hours, noted, Victoria had some difficulties post op with tachycardia and fevers. His exam revealed Victoria's abdomen was soft, distended, and tender. He charted, "my suspicion is low" but noted he would scan her abdomen to rule out any abscess or leak.
55. At 09:12 hours, Defendant Draznik examined Victoria and noted she was febrile at 102 degrees with a heart rate of 230 beats per minute, and breathing rapidly. Defendant Draznik transferred Victoria to the ICU for ongoing follow-up
56. On July 12, 2011 at 10:27 hours, Nurse Gallagher noted Victoria was febrile at 102 degrees.
57. On July 12, 2011 at 10:27 hours, Gayle Olsen, RN, ("Nurse Olsen") transferred Victoria to the Medical Intensive Care Unit, ("MICU")
58. The CT report from the morning of July 12, 2011, signed at 10:52 hours by Joseph Bernstein, M.D., ("Dr. Bernstein") showed a small amount of free pelvic air, nonspecific dilatation of the small bowel and colon, and postoperative changes in the lower abdominal wall. This was the first abdominal CT obtained since her June 25, 2011 CT at Jewish.
59. An addendum to the CT report by Dr. Bernstein included a finding of a large

loculated fluid collection in Victoria's right upper quadrant. Dr. Bernstein believed this finding was consistent with an intraperitoneal abscess.

60. On July 12, 2011 at 11:40 hours, Katie Mikel, RN, ("Nurse Mikel") summarized Victoria's morning of July 12, 2011 in her note as follows: Victoria was transported to CT Scan with the Nurse at 08:30 hours and arrived back to the floor on 4-South at 09:00 hours. Upon arrival back to her floor, Victoria was noted to have a heart rate of 240, blood pressure 82 over Doppler, skin was clammy was diaphoretic with respirations short and shallow. Defendant Draznik was in the room with Victoria. She received adenosine to correct her high heart rate and then transferred to Medical Intensive Care Unit, ("MICU").
61. Following her transfer to the MICU on July 12, 2011, MICU Physician, Karthik Kanagarajan, M.D., ("Dr. Kanagarajan") charted Victoria "crashed" in the morning with a dangerously high heart rate of 240 beats per minute due to supraventricular tachycardia, ("SVT").
62. Dr. Kanagarajan, described Victoria as critically ill. His exam revealed Victoria had significant abdominal distention, with severe abdominal tenderness. He opined his exam was consistent with a bowel injury, which was also consistent with the findings of the CT scan from the morning of July 12, 2011.
63. On July 12, 2011 at 11:00 hours, Christy L. Vogel, RN noted Victoria was transported from the MICU to the Operating Room, ("OR"), accompanied by a nurse, and transported "on lifepack" with oxygen.
64. On July 12, 2011, 4 days after her bowel injury, Defendants Draznik and Bradley operated again on Victoria, to repair her perforated and leaking sigmoid colon.
65. Both Defendant Draznik and Defendant Bradley, in their respective operative reports, of July 12, 2011, diagnosed Victoria pre and postoperatively with an intra-abdominal bowel perforation. In order to repair the perforated colon, Defendant Draznik and Defendant Bradley had to perform multiple surgical procedures on Victoria, including a partial sigmoid resection, a diverting colostomy, and a Hartman Pouch.
66. Immediately following surgery, on July 12, 2011, Victoria was directly admitted to the Surgical Intensive Care Unit, ("SICU") for ongoing intensive monitoring and care.
67. The negligence by Defendants Draznik and Bradley in failing to recognize and appropriately treat Victoria's perforated bowel for 4-days, led to serious and life threatening complications, including but not limited to, multiple surgeries, procedures, and an extensive hospitalization.

68. Among the consequences of the bowel perforation, Victoria required prolonged sedation and intubation with the use of mechanical ventilator support to survive.
69. Victoria remained critically ill and tenuous for many days, battling fecal peritonitis, septic shock, and acute respiratory distress syndrome, ("ARDS").
70. Finally, on July 20, 2011, Victoria was extubated. However, following the extubation, she had persistent hypoxia and significant shortness of breath. Consequently, Victoria required and continues to still require, wearing a nasal cannula to deliver supplemental oxygen to aid in her breathing and oxygenation.
71. Victoria's fevers persisted. Based on her clinical presentation, examinations, and labs, Victoria was diagnosed with multiple intra-abdominal abscesses.
72. On July 19, 2011, Victoria underwent another surgical procedure: A CT-guided drainage catheter was placed to drain an area of fluid from her left lower abdominal quadrant. The drainage was described as a cavity containing dark blood and foul smelling gas.
73. Two days later, on July 22, 2011, Victoria required a second drainage catheter placed into the right anterior peritoneal area of her abdomen to drain another abscess.
74. Also, on July 22, 2011, Victoria had a third drainage catheter placed into the left anterior peritoneal area of her abdomen to drain another abscess.
75. On July 23, 2011, at 17:24 hours, Sunil Dama, M.D., ("Dr. Dama") noted as a result of Victoria's continued fevers, that he had a "strong clinical suspicion for further un-drained abdominal abscess."
76. On July 24, 2011 at 10:50 hours, Danielle Shoreman, M.D., ("Dr. Shoreman") noted that Victoria's incision sites were all "draining soft brown stool like material." Victoria's fevers persisted.
77. On July, 26, 2011, Victoria started showing some signs of improvement and was transferred out of the SICU to 5-South
78. On July 26, 2011, Victoria was examined by psychiatrist, Hanish Sethi, M.D. ("Dr. Sethi") to assess Victoria's degree of anxiety and depression. Dr. Sethi described Victoria as stressed, anxious, and "overwhelmed with ongoing surgical procedures..." Dr. Sethi opined that Victoria was not a danger to herself but that her anxiety was being poorly managed and only partially treated.

79. On July 27, 2011, Victoria underwent an abdominal incision debridement, and wound packing by the Colorectal Surgery team. Jeffrey Sutton, M.D., ("Dr. Sutton") noted the wound was packed with Kerlix and that the underlying granulation tissue was pink with some feculent material observed.
80. On July 29, 2011, a "wound vac" was placed inside Victoria's open abdominal wound. (The wound vac therapy continued for the remainder of her hospitalization and at home following her discharge).
81. On August 8, 2011, Victoria was examined by neurology for ongoing complaints of left lower extremity weakness since the days following her extubation. Marvin H. Rorick, M.D., opined that as a result of Victoria's lengthy intubation and sedation, she developed weakness in her left lower extremity, which is likely is a chronic compressive neuropathy, and may never fully improve.
82. Additionally, between July 12, 2011 and July 20, 2011, while in the SICU, Registered Nurses, John Doe #3, and John Doe #4, and John Doe #5 damaged Victoria's brachial plexus nerve while securing medical restraints to Victoria's bed. As a result of the injury, Victoria has lost significant gross motor strength and use of her left upper extremity; her dominant arm and hand.
83. On August 30, 2011 Victoria was discharge from Defendant Christ after nearly a two-month hospitalization.

FIRST CAUSE OF ACTION

MEDICAL MALPRACTICE - NEGLIGENCE

84. Plaintiffs incorporate the allegations set forth in each and every of the foregoing paragraphs of the Complaint, as if fully rewritten herein.
85. As a direct and proximate result of Defendants commissions and omissions of negligence towards Victoria, she has had to undergo multiple additional surgeries, will need further surgeries in the future, continues to necessitate the use a colostomy bag, has sustained recurrent infections, organ damage, lung and nerve damage and requires the assistance home care, home oxygen therapy; and must now use a catheter to drain her bladder and she has difficulty voiding on her own, and uses the aid of a "walker" at times for ambulation.
86. She has been forced to seek additional medical treatment, endured great pain and suffering, loss of enjoyment of life, and suffered both temporary and permanent disabilities and bodily scars and a colostomy. Her injuries are permanent and progressive, resulting in future pain and suffering and loss of enjoyment of life.

87. As a direct and proximate result of defendants' negligence, Victoria has incurred medical, living, and child-care expenses conservatively believed to be in excess of \$500,000.00 and she will continue to incur additional medical and living expenses, the amount of which cannot be determined at the time of the filing of this complaint.
88. Plaintiffs, collectively, state the caps and "Tort Reform" provisions of R.C. 2323.43 do not apply and, if found to apply, are unconstitutional for the reason that they deny any injured plaintiff equal protection of the law, call for discrimination in award against the poor or non-working, call for discrimination against minorities of race or sex, violate the separation of powers doctrine, and are in violation of the Ohio Supreme Court holding in *State ex rel Ohio Academy of Trial Lawyers v. Sheward* (1999), 86 Ohio St.3d 451, 715 N.E.2d 1062.

SECOND CAUSE OF ACTION

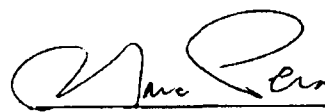
LOSS OF CONSORTIUM OF SPOUSE

89. Plaintiffs incorporate the allegations set forth in each and every of the foregoing paragraphs of the Complaint, as if fully rewritten herein.
90. Victoria was injured due to Defendants' negligence in providing medical and surgical care and treatment.
91. As a result of the acts of Defendants negligence, Victoria sustained permanent, disfiguring, and debilitating injuries.
92. Consequently, as a result of Victoria's injuries, her husband, Plaintiff Steve Stamper was/is unable to share the same activities and experiences with his wife, which they previously shared and/or anticipated sharing.
93. As a direct and proximate result of the negligence of the Defendants, Steve has suffered mental anguish over the trauma related to his wife, Victoria's medical and surgical treatment and diagnosis.
94. Because of Victoria's injuries, Steve has sustained a loss of consortium in the husband and wife relationship and will continue so.

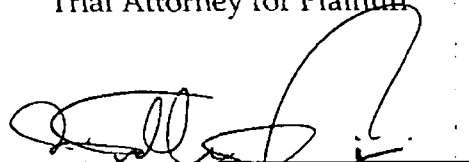
WHEREFORE, plaintiff demands judgment against all the defendants, jointly and severally, in an amount in excess of \$25,000, plus court costs, and any other relief to which she is entitled on the premises herein.

Respectfully submitted,

THE PERA LAW FIRM,
A subsidiary of Agee Clymer
Mitchell & Laret, LPA

 (with authorization)

Marc G. Pera (0069231)
810 Sycamore, Second Floor
Cincinnati, Ohio 45202
Phone: (513) 338-1878
Fax: (513) 338-1828
E-Mail: mpera@ageeclymer.com
Trial Attorney for Plaintiff



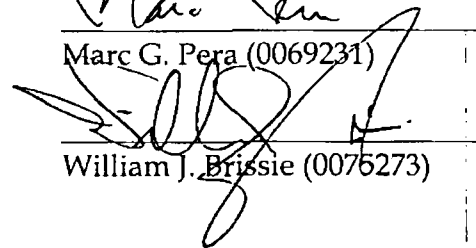
William J. Brissie (0075273)
BRISSIE LAW OFFICES
2300 Montana Ave., Ste 235
Cincinnati, Ohio 45211
T (513) 389-1100
F (513) 297-9273
E wbrissie@brissielawoffices.com

JURY DEMAND

Plaintiffs hereby demand a trial by jury in the within action.

 with authorization

Marc G. Pera (0069231)



William J. Brissie (0075273)

IN THE COURT OF COMMON PLEAS
HAMILTON COUNTY, OHIO

VICTORIA STAMPER, et. al.

PLAINTIFFS.

V.

MICHAEL R. DRAZNIK, M.D., et. al.

DEFENDANTS

CASE NO. _____

JUDGE: _____

AFFIDAVIT OF MERIT

MARK S. CHAPMAN, M.D., Affiant, being first duly sworn and cautioned,
states the following to be true and correct:

1. I submit this Affidavit of Merit in accordance with Ohio Civ. R. 10(D)(2)(a).
2. I am licensed to practice medicine by the State of Ohio.
3. I devote more than 50% of my professional time to the active clinical practice of obstetrics and gynecology or to its instruction in an accredited school.
4. I have reviewed the medical records from The Christ Hospital, Jewish Hospital and the Office Records of Michael R. Draznik, M.D. concerning the allegations contained in the Plaintiff's complaint.
5. I am familiar with the applicable standards of care in this case.
6. In my opinion, the standards of care were breached by the Defendants and such breach proximately caused Victoria Stamper's injuries.

FURTHER AFFIANT SAYETH NOT


Mark S. Chapman, M.D., Affiant

Sworn to before me and subscribed in my presence, at Mayfield Heights Ohio
on this the 21st day of June, 2012.


NOTARY PUBLIC

MY COMMISSION EXPIRES: _____

Michael L. Behnke
Notary Public, State of Ohio, Cuy. Cty.
My commission expires Aug. 21, 2015