12-CA-10

2 FEB 24 MID: 19

February 12, 2012

VIA CERTIFIED MAIL/ RETURN RECEIPT REQUESTED

Stephen B. Sambol, Esquire

Alvarez, Sambol & Winthrop, PA

Re: Plaintiff

Jessica Taylor

D/Occurrence

08/10/12

Dear Mr. Sambol:

Please allow the following to serve as Dr. Jose R. Quintana response to first set of interrogatories served with your Summons on 1/31/12

- Jose R Quintana ,MD
 203 W Bloomindale Ave
 Brandon, Florida 33511
- 2. Jose R Quintana

174 Harris Lake Dr. Lake City, Florida 32055

SS# DOB:

- 3. No
- 4. National Fire and Marine Insurance was in the process of accrediting me for malpractice insurance when this incident happened. I was notified I was not covered.
- 5. Ms. Jessica Taylor presented to All Women Health Ctr. of Orlando requesting a second trimester abortion on 08/12/10. A sonogram was done and she was found to be 18-19 weeks pregnant. She was properly counseled about risks, benefits, high complication rate of up to 50%, on the second trimester procedures, she understood all this very well and wanted to go ahead with the procedure. She signed the appropriate consents before the abortion. She was given 3 doses of Cytotec orally and 4 Dilapan sticks were placed in the cervix. After appropriate dilatation was confirmed she underwent the procedure. There was some difficulty extracting some of the products of conception (POC), I tried to extract them digitally but failed. I decide to bring her back in few days and sent her home with cytotec P.O., antibiotics, pain medication since most of the time patients pass POC's. She was given instructions about post-op complications such as bleeding, infection, abdominal or pelvic pain, fever, ect. I spoke with her father on the day of her procedure and explained all the facts outlined in the above note. She came back on 08/13/10 and a second D & C was done very carefully, small amount of POC's were recovered. She did not have any signs of acute abdomen or fever or excessive pain. O 08/14/10 she was advise to go to the

- 6. The procedure was a routine second trimester abortion. Complications of second trimester abortions are very high: 50%, possibly higher. Mortality and morbidity at 16-20 weeks of pregnancy is 14% (see attached reference)
- 7. Same as above
- 8. AWHC of Orlando, Crystal Adams, Evelyn Cintron and Stephanie Caba as outlined on the law suit
- 9. No
- 10. Same answer as #8
- 11. No
- 12. None
- 13. I will call an expert witness in the future.
- 14. No
- 15. Defendant 09/25/034 Alachua County, Florida. 06/18/06 Columbia County, Florida
- 16. See attached C.V.
- 17. See attached C.V.
- 18. You may inspect my library at a reasonable time
- 19. Refer to question #5 and #6
- 20. I do not have specific numbers
- 21. None other than the chart that has already been provided to you
- 22. Malpractice lawsuits 09/25/03, Alachua County, Yvette Watson, 06/18/06, Columbia County, Juanita Ferrell

DSE R. QUINTANA, MO

VERIFICATION PAGE

Signature of Defendant or agent or representative acting on behalf of Defendant

STATE OF Florida	.)
COUNTY OF Hillsborough	ر (_

BEFORE ME, this day, personally appeared <u>Jose</u> Quotage , who after having been duly cautioned and sworn, deposes and states he/she is the person who executed the foregoing Interrogatories, that he/she has read same and that the answers/responses therein are true and correct, and acknowledged that he/she executed the same as his/her free act and deed and who:

Dated this <u>a0th</u> day of <u>February</u>, 2012

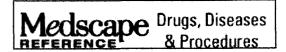


NOTARY PUBLIC - STATE OF FLORIDA

Print: <u>alyssa Milita</u>

State of Florida at Large (Seal)

My Commission expires: 9/15/15



Abortion Complications

Author: Slava V Gaufberg, MD; Chief Editor: Pamela L Dyne, MD more...

Updated: Feb 5, 2010

Epidemiology

Frequency

United States

Frequency of complications depends on gestational age (GA) at the time of miscarriage or abortion and method of abortion. Complication rates according to gestational age at the time of abortion are as follows:

- 8 weeks and under Less than 1%
- 8-12 weeks 1.5-2%
- 12-13 weeks 3-6%
- Second trimester Up to 50%, possibly higher

Mortality/Morbidity

Mortality and morbidity depend on gestational age at the time of miscarriage or abortion. In the United States, mortality rates per 100,000 abortions are as follows: fewer than 8 weeks, 0.5%; 11-12 weeks, 2.2%; 16-20 weeks, 14%; and more than 21 weeks, 18%.

Septic abortion was once the leading cause of maternal death around the world. The condition remains a primary cause of maternal mortality in the developing world, mostly as a result of illegal abortions. According to the World Health Organization, about 68,000 women die each year due to complications from unsafe abortions, with sepsis as the main cause of death.^[1] In the United States in 2005, 7 women reportedly died from complications of legal induced abortion.^[2]

In the United States, mortality from septic abortion rapidly <u>declined</u> after legalization of abortion. Death now occurs in less than 1 per 100,000 abortions. Figures for most European countries are similar to US rates.

The risk of death from septic abortion rises with the progression of gestation.

Contributor Information and Disclosures

Author

Slava V Gaufberg, MD Assistant Professor of Medicine, Harvard Medical School; Director of Transitional Residency Training Program, Cambridge Health Alliance

Slava V Gaufberg, MD is a member of the following medical societies: American College of Emergency Physicians

Disclosure: Nothing to disclose.

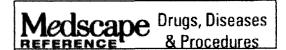
Specialty Editor Board

Roy Alson, MD, PhD, FACEP, FAAEM Associate Professor, Department of Emergency Medicine, Wake Forest University School of Medicine; Medical Director, Forsyth County EMS; Deputy Medical Advisor, North Carolina Office of EMS; Associate Medical Director, North Carolina Baptist AirCare

Roy Alson, MD, PhD, FACEP, FAAEM is a member of the following medical societies: Air Medical Physician Association, American Academy of Emergency Medicine, American College of Emergency Physicians, American

- 9. Hakim-Elahi E, Tovell HM, Burnhill MS. Complications of first-trimester abortion: a report of 170,000 cases. *Obstet Gynecol.* Jul 1990;76(1):129-35. [Medline].
- Lohr PA. Surgical abortion in the second trimester. Reprod Health Matters. May 2008;16(31 Suppl):151-61. [Medline].
- 11. Osazuwa H, Aziken M. Septic abortion: a review of social and demographic characteristics. *Arch Gynecol Obstet*. Feb 2007;275(2):117-9. [Medline].
- 12. Rana A, Pradhan N, Gurung G, Singh M. Induced septic abortion: a major factor in maternal mortality and morbidity. *J Obstet Gynaecol Res.* Feb 2004;30(1):3-8. [Medline].
- 13. Sam C, Hamid MA, Swan N. Pyometra associated with retained products of conception. *Obstet Gynecol.* May 1999;93(5 Pt 2):840. [Medline].
- 14. Shannon C, Brothers LP, Philip NM, Winikoff B. Infection after medical abortion: a review of the literature. *Contraception*. Sep 2004;70(3):183-90. [Medline].
- 15. Shulman SG, Bell CL, Hampf FE. Uterine perforation and small bowel incarceration: sonographic and surgical findings. *Emerg Radiol*. Oct 2006;13(1):43-5. [Medline].
- 16. Stuart GS, Sheffield JS, Hill JB, McIntire DD, McElwee B, Wendel GD. Morbidity that is associated with curettage for the management of spontaneous and induced abortion in women who are infected with HIV. *Am J Obstet Gynecol.* Sep 2004;191(3):993-7. [Medline].
- 17. Stubblefield PG. First and second trimester abortion. In: Nichols DH, ed. *Gynecologic and Obstetric Surgery*. Mosby-Year Book; 1993:1016-1030.
- 18. Stubblefield PG. Pregnancy termination. In: *Obstetrics: Normal and Problem Pregnancies*. 3rd ed. Churchill Livingstone; 1996:1249-1276.
- 19. Stubblefield PG, Grimes DA. Septic abortion. N Engl J Med. Aug 4 1994;331(5):310-4. [Medline].

Medscape Reference © 2011 WebMD, LLC



Abortion Complications

· Author: Slava V Gaufberg, MD; Chief Editor: Pamela L Dyne, MD more...

Updated: Feb 5, 2010

Other Problems to be Considered

Perforated viscus

Acute peritonitis

Contributor Information and Disclosures

Author

Slava V Gaufberg, MD Assistant Professor of Medicine, Harvard Medical School; Director of Transitional Residency Training Program, Cambridge Health Alliance

Slava V Gaufberg, MD is a member of the following medical societies: American College of Emergency Physicians

Disclosure: Nothing to disclose.

Specialty Editor Board

Roy Alson, MD, PhD, FACEP, FAAEM Associate Professor, Department of Emergency Medicine, Wake Forest University School of Medicine; Medical Director, Forsyth County EMS; Deputy Medical Advisor, North Carolina Office of EMS; Associate Medical Director, North Carolina Baptist AirCare

Roy Alson, MD, PhD, FACEP, FAAEM is a member of the following medical societies: Air Medical Physician Association, American Academy of Emergency Medicine, American College of Emergency Physicians, American Medical Association, National Association of EMS Physicians, North Carolina Medical Society, Society for Academic Emergency Medicine, and World Association for Disaster and Emergency Medicine

Disclosure: Nothing to disclose.

Francisco Talavera, PharmD, PhD Adjunct Assistant Professor, University of Nebraska Medical Center College of Pharmacy; Editor-in-Chief, Medscape Drug Reference

Disclosure: Medscape Salary Employment

Mark Zwanger, MD, MBA Assistant Professor, Department of Emergency Medicine, Jefferson Medical College of Thomas Jefferson University

Mark Zwanger, MD, MBA is a member of the following medical societies: American Academy of Emergency Medicine, American College of Emergency Physicians, and American Medical Association

Disclosure: Nothing to disclose.

John D Halamka, MD, MS Associate Professor of Medicine, Harvard Medical School, Beth Israel Deaconess Medical Center; Chief Information Officer, CareGroup Healthcare System and Harvard Medical School; Attending Physician, Division of Emergency Medicine, Beth Israel Deaconess Medical Center

John D Halamka, MD, MS is a member of the following medical societies: American College of Emergency Physicians, American Medical Informatics Association, Phi Beta Kappa, and Society for Academic Emergency Medicine

Disclosure: Nothing to disclose.

Chief Editor

Pamela L Dyne, MD Professor of Clinical Medicine/Emergency Medicine, University of California, Los Angeles, David Geffen School of Medicine; Attending Physician, Department of Emergency Medicine, Olive View-UCLA Medical Center

Pamela L Dyne, MD is a member of the following medical societies: American Academy of Emergency Medicine, American College of Emergency Physicians, and Society for Academic Emergency Medicine

Disclosure: Nothing to disclose.

References

- 1. Saultes TA, Devita D, Heiner JD. The back alley revisited: sepsis after attempted self-induced abortion. West J Emerg Med. Nov 2009;10(4):278-80. [Medline].
- Pazol K, Gamble SB, Parker WY, Cook DA, Zane SB, Hamdan S. Abortion surveillance United States, 2006. MMWR Surveill Summ. Nov 27 2009;58(8):1-35. [Medline].
- 3. McKenna T, O'Brien K. Case report: group B streptococcal bacteremia and sacroiliitis after mid-trimester dilation and evacuation. *J Perinatol*. Sep 2009;29(9):643-5. [Medline].
- Daif JL, Levie M, Chudnoff S, Kaiser B, Shahabi S. Group a Streptococcus causing necrotizing fasciitis and toxic shock syndrome after medical termination of pregnancy. Obstet Gynecol. Feb 2009;113(2 Pt 2):504-6. [Medline].
- 5. Darney PD, ed. Handbook of Office and Ambulatory Gynecologic Surgery. Blackwell Science Inc; 1987:108.
- Finkielman JD, De Feo FD, Heller PG, Afessa B. The clinical course of patients with septic abortion admitted to an intensive care unit. *Intensive Care Med.* Jun 2004;30(6):1097-102. [Medline].
- 7. Grimes DA, Cates W Jr. Deaths from paracervical anesthesia used for first-trimester abortion, 1972-1975. *N Engl J Med.* Dec 16 1976;295(25):1397-9. [Medline].
- 8. Grossman D, Blanchard K, Blumenthal P. Complications after second trimester surgical and medical abortion. *Reprod Health Matters*. May 2008;16(31 Suppl):173-82. [Medline].
- Hakim-Elahi E, Tovell HM, Burnhill MS. Complications of first-trimester abortion: a report of 170,000 cases. Obstet Gynecol. Jul 1990;76(1):129-35. [Medline].
- 10. Lohr PA. Surgical abortion in the second trimester. *Reprod Health Matters*. May 2008;16(31 Suppl):151-61. [Medline].
- 11. Osazuwa H, Aziken M. Septic abortion: a review of social and demographic characteristics. *Arch Gynecol Obstet*. Feb 2007;275(2):117-9. [Medline].
- 12. Rana A, Pradhan N, Gurung G, Singh M. Induced septic abortion: a major factor in maternal mortality and morbidity. *J Obstet Gynaecol Res.* Feb 2004;30(1):3-8. [Medline].
- Sam C, Hamid MA, Swan N. Pyometra associated with retained products of conception. Obstet Gynecol. May 1999;93(5 Pt 2):840. [Medline].
- 14. Shannon C, Brothers LP, Philip NM, Winikoff B. Infection after medical abortion: a review of the literature. *Contraception*. Sep 2004;70(3):183-90. [Medline].

- 15. Shulman SG, Bell CL, Hampf FE. Uterine perforation and small bowel incarceration: sonographic and surgical findings. *Emerg Radiol*. Oct 2006;13(1):43-5. [Medline].
- 16. Stuart GS, Sheffield JS, Hill JB, McIntire DD, McElwee B, Wendel GD. Morbidity that is associated with curettage for the management of spontaneous and induced abortion in women who are infected with HIV. *Am J Obstet Gynecol*. Sep 2004;191(3):993-7. [Medline].
- 17. Stubblefield PG. First and second trimester abortion. In: Nichols DH, ed. *Gynecologic and Obstetric Surgery*. Mosby-Year Book; 1993:1016-1030.
- 18. Stubblefield PG. Pregnancy termination. In: *Obstetrics: Normal and Problem Pregnancies*. 3rd ed. Churchill Livingstone; 1996:1249-1276.
- 19. Stubblefield PG, Grimes DA. Septic abortion. N Engl J Med. Aug 4 1994;331(5):310-4. [Medline].

Medscape Reference © 2011 WebMD, LLC

CURRICULUM VITAE JOSE R QUINTANA MD

12620 CATAMARAN PLACE TAMPA FL 33618 (813) 361-0009 MARRIED

EMPLOYMENT

MEDIWEIGHT LOSS CLINIC 203 W BLOOMINGDALE AVENUE, BRANDON FL 33511 PHONE (813) 654-1110 SEPTEMBER 2008- PRESENT

ALL WOMENS HEALTH CENTER 431 MAITLAND AVE ALTAMONTE SPRINGS, FL 32701 727-442-0445 SEPTEMBER 2008-PRESENT

TAMPA OBSTETRICS
505 OAK FIELD DRIVE
BRANDON, FL 33511
PHONE: (813) 684-7084
SEPTEMBER 2005-SEPTEMBER 2008

FAITH CLINIC WOMEN'S HEALTH CENTER 4244 S UNIVERSITY BLVD JACKSONVILLE, FL PHONE: (904) 360-6000 JANUARY 2005-MAY 2005

QUINTANA OB/GYN SERVICES. PA
PRIVATE PRACTICE IN GAINESVILLE AND LAKE CITY
1717 SW NEWLAND WAY
LAKE CITY, FL 32025
1995-2001

SANTA FE MEDICAL SERVICES 2818 NW 13 ST, SUITE 201 GAINESVILLE. FL 32609 1993-1995

TRAINING

RESIDENCY: ERLANGER MEDICAL CENTER, UNIVERSITY OF TENNESSEE. OBSTETRIC AND GYNECOLOGY, CHATTANOOGA, TN 1991-1993

INTERSHIP AND RESIDENCY: HUBBARD HOSPITAL, MEHARRY MEDICAL COLLEGE. OBSTETRICS AND GYNECOLOGY, NASHVILLE, TN 1989-1991

MEDICAL SCHOOL

UNIVERSIDAD NACIONAL AUTONOMA DE NICARAGUA (UNAN), LEON NICARAGUA
MARCH 1969-OCTOBER 1977
RURAL SERVICE: HEALTH DEPARTMENT, ZELAYA COUNTY, 1977-1978
PRE MEDICAL COLLEGE EDUCATION IS INCLUDED INTO EIGHT YEARS OF MEDICAL SCHOOL
POST GRADUATE RESIDENCY OBSTETRIC AND GYNECOLOGY: UNAN AFFILIATED HOSPITAL SYSTEM, MANAGUA
NICARAGUA, 1978-1981

CERTIFICATION

BOARD ELEGIBLE IN OBSTETRICS AND GYNECOLOGY

LICENSE

ACTIVE- FLORIDA

PROFESSIONAL COMMITTEES

CHAIRMAN, RESOURCE MANAGEMENT COMMITTEE MEMBER OF THE QUALITY ASSURANCE COMMITTEE LAKE MEDICAL CENTER, LAKE CITY, FLORIDA 2003-2004

CHAIRMAN OF THE BOARD OF NORTH FLORIDA SEXUAL ASSAULT CENTER LAKE CITY, FLORIDA 1997-2002

MEMBER OF HOSPITAL CREDENTIALING COMMITTEE LAKE SHORE HOSPITAL, LAKE CITY, FLORIDA 1994-1995

MEMBER OF PERINATAL MEDICINE COMMITTEE LAKE SHORE HOSPITAL, LAKE CITY, FLORIDA 1993-1994

PROFESSIONAL PUBLICATIONS

PELVIC LAPAROSCOPY: CLINICAL RESEARCH AND PERFORMANCES OF 250 CASES, UNIVERSIDAD AUTONOMA OF NICARAGUA, LEON NICARAGUA (1977)

CERVICAL INCOMPETENCE CASE REVIEW: CERCLAGE OVERVIEW, MEHARRY MEDICAL COLLEGE. NASHVILLE. TENNESSEE. (1990)