

SUPERIOR COURT FOR THE DISTRICT OF COLUMBIA
CIVIL DIVISION

KATHERINE MUSGROVE

6840 Knox Lane
Harrison, OH 45030

and

BRANDON MUSGROVE

6840 Knox Lane
Harrison, OH 45030

Plaintiffs,

v.

Civil Action No.

CESARE SANTANGELO, M.D.

4751 Reservoir Road, N.W.
Washington, DC 20007

and

WASHINGTON SURGI-CLINIC, INC.

2112 F Street, N.W., Ste. 400
Washington, D.C. 20037

Serve:

Cesare Santangelo, M.D.,
2112 F St., N.W., Ste. 400
Washington, DC 20037

and

C. PAPRAH, CRNA

2112 F Street, N.W., Ste. 400
Washington, D.C. 20037

Defendants

COMPLAINT

COME NOW the Plaintiffs, by and through undersigned counsel, Catherine D.
Bertram and Bertram Law Group, PLLC, and file this complaint against the Defendants

Cesare Santangelo, M.D., Washington Surgi-Clinic, Inc. and C. Paprah, CRNA for the grounds set forth below:

JURISDICTION AND VENUE

1. The jurisdiction of this Court is founded on D.C. Code § 11-921 as the events and damages set forth herein all occurred in the District of Columbia.

2. Written notice of the allegations and claims was given to the Defendants more than 90 days prior to the filing of this action thus meeting the pre-suit notice requirement set forth in DC Code 28-1602 et seq.

PARTIES

3. Plaintiff Katherine Musgrove is an adult citizen who currently resides in Ohio.

4. Plaintiff Brandon Musgrove is an adult citizen who currently resides in Ohio.

5. At all times relevant to the claims stated herein, Plaintiffs Katherine Musgrove and Brandon Musgrove were married to each other.

6. At all times relevant, Defendant Washington Surgi-Clinic, Inc. was in the business of providing health care services to women through its employees and/or real and/or ostensible agents in the District of Columbia, including Plaintiff Katherine Musgrove.

7. At all times relevant, Defendant Dr. Cesare Santangelo was acting within the course and scope of his employment with Defendant Washington Surgi-Clinic, Inc.

8. At all relevant times, Defendant Dr. Santangelo held himself out as an experienced and competent obstetrician.

9. At all times relevant, Defendant Washington Surgi-Clinic, Inc. held itself out to the public as a health care organization providing health care, and its actual and/or apparent agents, servants and/or employees possessed that degree of skill, expertise, knowledge, and ability ordinarily possessed by reasonably prudent and competent like health care providers in the District of Columbia.

10. Upon further information and belief, C. Paprah, CRNA was an apparent agent and/or actual agent and/or employee of Defendant Washington Surgi-Clinic, Inc. and/or Dr. Santangelo and provided medical services to Plaintiff during the relevant events described herein.

11. Defendants Washington Surgi-Clinic Inc. and Dr. Santangelo are sued both directly and vicariously based on the actions of their actual and/or apparent agents, servants and/or employees.

FACTS

12. Plaintiff Katherine Musgrove contacted the Defendant Washington Surgi-Clinic, Inc., and Dr. Santangelo after she learned from her treating healthcare providers that the fetus had severe congenital defects not compatible with long term survival and that for medical reasons the pregnancy needed to be terminated.

13. Plaintiffs were assured by agents and employees of Defendant Washington Surgi-Clinic, Inc., including Dr. Santangelo and other agents, that Mrs. Musgrove was a safe and appropriate candidate for late term termination of her pregnancy at Defendants' facility and it was promptly scheduled.

14. As a result of Defendants' assurances, Mrs. Musgrove presented to the Washington Surgi Clinic in Washington, D.C. on or about August 15, 2019, for initiation of the elective termination for medical reasons.

15. The termination was performed by Defendant Cesare F. Santangelo, MD and CRNA Paprah.

16. On or about August 15, 2019, Defendant Dr. Santangelo inserted jumbo laminaria sticks to soften Mrs. Musgrove's cervix. Mrs. Musgrove was instructed to return to the Washington Surgi Clinic on August 16, 2019.

17. As instructed by Defendants, Mrs. Musgrove returned to the Washington Surgi Clinic on August 16, 2019. Upon information and belief, extra-large sticks were added, and Mrs. Musgrove was given instructions to return on August 17, 2019.

18. On or about August 17, 2019, Mrs. Musgrove presented to the Washington Surgi Clinic for the elective second trimester termination with Defendants Santangelo and Paprah.

19. Upon information and belief, Defendants determined, or with reasonable certainty should have determined, that the fetus was not alive prior to the procedure.

20. Upon information and belief, Mrs. Musgrove and her husband were not informed of this key fact until after the procedure and they were not given the other reasonable and less risky alternatives given the fetal demise prior to the procedure.

21. Upon information and belief, Mrs. Musgrove was administered conscious sedation by Defendant C. Paprah, CRNA. Plaintiffs are not certain of the spelling of the CRNA's name. The medical records provided to the patient by Defendants are incomplete

and many signatures and entries are illegible despite multiple requests for complete and legible records.

22. The procedure was started at 1330. Initial blood pressure recorded by CRNA Paprah was 100/64 and a heart rate of 100. Per the anesthesia record, Mrs. Musgrove was in recovery at 1355 with the last vital signs recorded by CRNA Paprah as a blood pressure of 90/46 and heart rate of 100. Ms. Musgrove received 1000 ml of lactated ringers.

23. According to Defendants' records, upon arrival to PACU (post anesthesia care unit) after the procedure, Mrs. Musgrove's vitals were recorded as a blood pressure of 86/59 and a heart rate of 100. Repeated vital signs at 1405 recorded a blood pressure of 94/64 and a heart rate of 95.

24. According to the largely illegible procedure records, Defendant Dr. Santangelo performed a dilation "51 cm #16" and curettage "yes" and a second trimester abortion. No formal procedure report or operative report has been produced despite repeated requests. The limited notes state that the products of conceptions were normal and complete. Uterine contents were 23 weeks. Stereomicroscopic exam noted fetal pars and placental tissue were seen.

25. It was documented at 1430 that Mrs. Musgrove was discharged in stable condition at 1420.

26. However, in reality Mrs. Musgrove was not discharged as was documented but remained at the Washington Surgi Clinic with very troubling symptoms.

27. There is a note entered at an unknown time that stated what is believed to be the following "Been watching pt. for 2 hrs seems stable but repeat HCT 24%. Will send to

hospital for evaluation and possible transfusion and rule out possible uterine perforation. Pt. stable and alert and awake. Do not want her to travel 8 hours by car without being evaluated first." Blood pressures during this time are difficult to read the times and values. The last blood pressure was recorded at 1555 and was 89/60. There are no heart rates, respiratory rates, oxygen saturations documented. Additionally, there are no cardiac monitoring strips or documentation of Mrs. Musgrove's cardiac rhythm.

28. Mrs. Musgrove was transported to George Washington University Hospital by EMS. Per the EMS documentation, they were dispatched for uncontrollable bleeding. Per the EMS narrative, Mrs. Musgrove suffered an episode of hemorrhage after undergoing a termination pregnancy procedure at 23 weeks gestation. Mr. Musgrove reported the reason for the termination was due to health issues for both Mrs. Musgrove and the fetus. Mrs. Musgrove had lost approximately 200 cc of blood and had borderline hypotension. Vital signs at 1630 according to EMS were blood pressure 110/72, heart rate 86, respirations 18, and pulse oximetry 98% and a pain score of 8/10. Mrs. Musgrove was transported as a priority 2 to George Washington University Hospital (GW Hospital) Emergency Department and arrived at 1633. Vital signs were repeated at 1637 and were blood pressure 100/52, heart rate 116, respirations 18, pulse oximetry 98% and pain score 8/10.

29. Upon arrival to GW ED, Mrs. Musgrove is seen in triage at 1645 who noted Mrs. Musgrove had a D & C at 23 weeks, vaginal bleeding, hypotension at the clinic, was given 1 lactated ringers, was alert and oriented x 4, speech was clear and coherent, and she was pale appearing. Vital signs taken by Micaela Oliveros at 1643 were blood pressure

100/52, pulse 116, respirations 14, pulse oximetry 97%, pain score 8/10 located in the bilateral abdomen, was acute and cramping.

30. At 1700, Mrs. Musgrove is evaluated by Caroline Schulman, MD. Dr. Schulman documented that Mrs. Musgrove was treated at the Washington Surgi Clinic for a pregnancy termination, which began at 1300 due to significant fetal deformity. After the procedure there was concern for hypotension and Mrs. Musgrove reported she had lost 200 cc of blood during the procedure. Dr. Schulman reviewed the documentation from the Washington Surgi Clinic and noted systolic blood pressures in the 80's and one liter of lactated ringers was administered. Additionally, Dr. Schulman specifically noted that no Pitocin had been administered to Mrs. Musgrove while at the Washington Surgi Clinic. Mrs. Musgrove reported that she was having suprapubic abdominal pain and she had to change her peri pad once since the procedure.

31. Dr. Schulman's physical examination was positive for Mrs. Musgrove's skin being pale, she was tachycardic, she had blood clots in the vaginal vault for which approximately 100 cc of blood clot was removed, her cervical was grossly closed under speculum exam, and she had a slow ooze of blood vaginally.

32. A CBC was resulted at 1726 and noted Mrs. Musgrove's WBC were elevated at 17.39, and her hemoglobin was 9.4 and hematocrit was 29.3, both low. The CBC was repeated at 1950, and Mrs. Musgrove's hemoglobin was 8.5 and hematocrit was 27.7. Both had decreased since the previous result at 1726.

33. Mrs. Musgrove is reevaluated by Dr. Schulman. Mrs. Musgrove continued to have a slow ooze of blood. OB/GYN was consulted and were at the bedside at 1730.

34. Mrs. Musgrove is evaluated by Julia Whitley, MD, PGY1 and Whitney Barnes, MD, attending OB/GYN. Dr. Whitley reviewed the Washington Surgi Clinic records. Per Dr. Whitely, Mrs. Musgrove's blood pressures post-procedure in recovery were 80-93/49-64 and her hematocrit had dropped from 32 to 24. Mrs. Musgrove reports to Dr. Whitley 10/10 abdominal pain that worsened with movement, did not improve with narcotics and minimal relief with IV Dilaudid to a pain score of 8/10. Dr. Whitley's physical exam of Mrs. Musgrove was positive for being pale, tachycardic, abdominal tenderness throughout her abdomen, a dilated cervical os, bleeding from the os, and with blood and clots in the vaginal vault.

35. Due to the continued drop in Mrs. Musgrove's hemoglobin and hematocrit, hypotension, tachycardia, and abdominal pain there was concern for uterine perforation. A CT scan was ordered and an additional 1 L of IV fluid bolus was administered.

36. A STAT CT of the abdomen and pelvis was performed. Per the report, there was a small amount of intraperitoneal free air and a small amount of hemoperitoneum within the pelvis, along the paracolic gutters and adjacent to the spleen. A focal defect within the uterine wall in the region of the fundus that was consistent with uterine perforation.

37. Mrs. Musgrove went directly from the CT to pre-op for a diagnostic laparoscopy, possible uterine repair, possible bowel repair, and possible cystoscopy.

38. Per the GW Hospital operative record, Mrs. Musgrove entered the OR at 2124, with the surgery starting at 2211. The surgery performed by Dr. Barnes was a diagnostic laparoscopy, lysis of adhesions, uterine perforation, and cervical laceration

repair. Per the operative report a posterior cervical laceration was present extending from the external os down to the posterior fornix. The laceration was re-approximated with a 2-0 Vicryl running non-locked stitch. The abdomen was then insufflated and a 5 mm Optiview trocar was advanced and found 300 cc of hemoperitoneum, a 6 cm posterior full thickness fundal perforation with active bleeding was found along with a 5 cm area of small bowel ischemia approximately 10 cm proximal to the ileocecal valve with a large rent in the small bowel mesentery at the same location. The full thickness fundal perforation was repaired in 2 layers using 2-0 PDO barbed suture stitch. The uterus was atonic and treated with pitocin, cytotec, methergin (2 doses), and bimanual pressure and massage. At this point the general surgery team took over for the injury to the bowel.

39. Babak Sarani, MD, trauma and critical care surgeon, performed an ileocecectomy due to small bowel ischemia. Per the operative report, Dr. Sarani was consulted intraoperatively to evaluate Mrs. Musgrove's intestine. Upon evaluation Dr. Sarani found a 5 cm area of small bowel ischemia approximately 10 cm proximal to the ileocecal valve with a large full thickness rent of the mesentery to the terminal ileum. Upon inspection the terminal ileum was found to be ischemic, and the decision was made to proceed with an ileocecectomy. The terminal ileum and cecum were excised and a side to side anastomosis was created. The case was turned back over to the GYN service to finish and close the abdomen.

40. Prior to finishing the surgery Mrs. Musgrove's cervix was reexamined and monosol solution applied, her vagina was packed with Kerlex soaked in saline. Dr. Barnes

closed the fascia with 0-Vicryl and the skin was closed with 4-0 Monocryl followed by Dermabond. Mrs. Musgrove's remained intubated and was transferred to the ICU at 0156.

41. Per the pathology report received there was a bowel segment consisting of ileum = 13.0 cm in length x 4.0 cm open diameter, cecum and ascending colon = 7.0 cm in length x 8 cm open diameter; and proximal portion of appendix = 3.2 x 0.5 cm. The ileal serosal surface was 'dusky' red with areas of darker discoloration (6.0 cm from ileal surgical margin) which extends into the mesenteric adipose tissue (demonstrates a 3.0 cm patch of deep-dark red vs. adjacent pale red/pink tissue). Opening the ileum reveals a green tan, friable, well folded mucosa (possibly edematous at proximal to ileocecal valve) with a deep-dark patch of adhered hemorrhage (same distance and length as the aforementioned outer surface discoloration). The pathologic diagnoses were: Segment of small intestine with mucosal ischemia, necrosis, transmural hemorrhage and serositis and segment of colon with mucosal ischemia, necrosis, submucosal hemorrhage, edema and serositis.

42. Mrs. Musgrove is evaluated by Dr. Barnes on August 18, 2019, at 0548. Dr. Barnes noted that the surgery was complicated by dilutional coagulopathy/DIC that was resolved with resuscitation with 3 units PRBC's, 3 units FFP, 1 unit platelets, and 2 gm. of TXA (tranexamic acid). Mrs. Musgrove had no additional bleeding, was extubated, but had continued significant pain 9/10 on her right side. The vaginal packing was removed without evidence of any additional bleeding. Dr. Barnes' plan was to consult pain management for Ketamine and lidocaine infusions. Dr. Barnes noted that the small bowel ischemia was secondary to direct trauma from suction curettage at the time of the D & E. Mrs. Musgrove was to be transferred to intermediate care on this same day.

43. On August 19, 2019, Mrs. Musgrove is evaluated by Ethan Litman, MD, PGY1 with Kathryn Marko, MD, OB attending, due to continued hypoxia while on 2L of oxygen and tachycardia with heart rates from 109 - 128. Mrs. Musgrove was placed on continuous telemetry for cardiac monitoring.

44. General surgery evaluated Mrs. Musgrove and noted she was having oxygen desaturations to the low 90's while on 2L of oxygen and she was mildly short of breath. Since Mrs. Musgrove had received TXA there was concern for pulmonary embolus (PE). Therefore, a CT angiogram PE protocol was ordered.

45. A CT angiogram of the chest was performed and was negative for pulmonary embolus. What was found were large pleura effusion with associated compressive atelectasis of the lower lobes and interlobular septal thickening, suggesting mild pulmonary interstitial edema.

46. Due to the findings on the CT angiogram, Mrs. Musgrove was given 20 mg of Lasix for her pleural effusions.

47. Mrs. Musgrove was discharged to home on August 22, 2019. Prior to discharge she was evaluated by Dr. Marko who discussed expectations on healing and returning to work and normal activities. Dr. Marko recommended waiting 1 - 1.5 years before trying to conceive. Additionally, with future pregnancies it was advised they be delivered via C-section at 37 weeks due to the risk of uterine rupture and abnormal placentation.

48. On October 2, 2019, Mrs. Musgrove is seen by Dr. Beckwith for routine follow-up. Mrs. Musgrove reported she continues to have vaginal bleeding that was moderate. Additionally, she was seen by general surgery, Dr. Maccarone.

COUNT I
(Plaintiffs' Claims - Medical Negligence)

49. Plaintiffs Katherine Musgrove and Brandon Musgrove, incorporate herein by reference the allegations contained in numbered paragraphs 1 through 48.

50. Plaintiffs further allege that the Defendants had a duty to provide Plaintiff Katherine Musgrove with medical care and treatment consistent with national applicable standards of care under the same or similar circumstances.

51. Plaintiffs further allege that the Defendants, through their agents, servants and/or employees, violated the national standards of care as practiced by reasonably competent practitioners under the same or similar circumstances, and, as a proximate result, the Plaintiff Katherine Musgrove suffered physical injuries, mental anguish, permanent physical deficits, disfigurement, past and future economic losses, past and future medical expenses, and other damages.

52. The breaches of the national standard of care by the Defendants include, but are not limited to:

- a. failure to cancel the procedure and proceed accordingly once it was determined that the fetus was deceased prior to the procedure;

- b. failure to provide plaintiffs with other options prior to the procedure;
- c. failure to properly perform the procedure;
- d. failure to provide informed consent;
- e. failure to timely recognize the injuries caused therein; and
- f. other negligence.

53. The Defendants failed to provide the Plaintiff Katherine Musgrove with medical care and treatment required by the national standard of care under the same or similar circumstances.

54. As a result of the Defendants' negligence, Plaintiff Katherine Musgrove has experienced severe and permanent physical harm, scarring and disfigurement, severe emotional distress, both past and future lost wages, past and future medical bills and will require significant medical care throughout her lifetime.

55. As a result of Defendants' negligence, the Plaintiffs suffered economic damages, physical pain and injury, and severe and enduring negligent infliction of emotional distress caused by her own physical injuries. They will be forced to live with these facts for the rest of their lives.

56. As a direct and proximate result of the aforementioned negligence of the above-named Defendants, the Plaintiffs Katherine Musgrove and Brandon Musgrove sustained pain and suffering, emotional distress and economic damages and assert claims for all other damages allowed by law.

WHEREFORE, Plaintiffs demand judgment against Defendants jointly and severally in the full sum of Twenty Million Dollars (\$20,000,000.00), plus costs and interest.

COUNT II
(Lack of Informed Consent)

57. Plaintiffs incorporate herein by reference the allegations contained in numbered paragraphs 1 through 56.

58. Plaintiff Katherine Musgrove was never informed of the risks and alternatives or the risk of the complications that she sustained. She was also not informed that the fetus died and there were safer alternatives available that she was never offered.

59. Had Plaintiff been informed of the alternatives, and then recognized the risks, she would have elected a different procedure with a different provider and thus would have avoided the severe and permanent injuries and complications.

60. Any reasonable patient would have done the same.

61. The Defendants' failure to provide informed consent was a proximate cause of damages and injuries to Plaintiff Katherine Musgrove.

62. As a result of Defendants' failure to provide timely informed consent, Plaintiff Katherine Musgrove suffered past and future economic damages, severe and permanent physical pain and injury, and severe and enduring emotional distress.

WHEREFORE, Plaintiffs demand judgment against Defendants Washington Surgi-Clinic, Inc. and Cesare Santangelo, M.D., in the full sum of Twenty Million Dollars (\$20,000,000.00), plus costs and interest.

COUNT III
(Plaintiffs' Claim-Negligent Infliction of Emotional Distress)

63. Plaintiff incorporates herein by reference the allegations set forth in numbered paragraphs 1 through 62.

64. In the context of the Defendants' relationship with the Plaintiffs, as healthcare providers who were to be tasked with safely terminating Plaintiff Katherine Musgrove's pregnancy under the applicable standard of care, this involved an especially likely risk of serious emotional distress. The Defendants had an obligation to care for Mrs. Musgrove's emotional well-being.

65. As a result of Defendants' negligence, Plaintiff Mrs. Musgrove suffered extreme physical pain and injury, scarring and disfigurement, and severe enduring emotional distress caused by Plaintiff's own physical experience knowing this could have been avoided. She will have to live with these facts and her disfigurement for the rest of her life.

WHEREFORE, Plaintiffs demand judgment against Defendants, jointly and severally, in the full sum of Twenty Million Dollars (\$20,000,000.00), plus costs and interest.

Count IV
Loss of Consortium – Damage to Marital Relationship

66. Plaintiffs incorporate, by reference, paragraphs 1 through 65 above.

67. Plaintiffs Katherine and Brandon Musgrove are husband and wife and were so at the time of the injuries and wrongful conduct set forth herein.

68. As a result of the negligence of the Defendants, individually, vicariously, jointly, and severally, the Plaintiffs Katherine and Brandon Musgrove have suffered, and will continue to suffer, damage to their marital relationship, loss of household services, and loss of consortium.

WHEREFORE, Plaintiff demands judgment against Defendants, jointly and severally, in the full sum of Five Million Dollars (\$5,000,000.00), plus costs and interest.

JURY DEMAND

Plaintiffs demand a jury of six on all counts.

Respectfully submitted,

By: /s/ Catherine D. Bertram
Catherine Bertram #425052
cbertram@blg-dc.com
Bertram Law Group, PLLC
20 F Street, N.W., 7th Floor
Washington, DC 20001
(202) 803-5800 - phone
(202) 803-6814 - facsimile

Counsel for Plaintiffs



Superior Court of the District of Columbia
CIVIL DIVISION
Civil Actions Branch
500 Indiana Avenue, N.W., Suite 5000 Washington, D.C. 20001
Telephone: (202) 879-1133 Website: www.dccourts.gov

Katherine Musgrove, et al.

Plaintiff

vs.

Case Number _____

Washington Surgi-Clinic, Inc.

Defendant

SUMMONS

To the above named Defendant:

You are hereby summoned and required to serve an Answer to the attached Complaint, either personally or through an attorney, within twenty one (21) days after service of this summons upon you, exclusive of the day of service. If you are being sued as an officer or agency of the United States Government or the District of Columbia Government, you have sixty (60) days after service of this summons to serve your Answer. A copy of the Answer must be mailed to the attorney for the plaintiff who is suing you. The attorney's name and address appear below. If plaintiff has no attorney, a copy of the Answer must be mailed to the plaintiff at the address stated on this Summons.

You are also required to file the original Answer with the Court in Suite 5000 at 500 Indiana Avenue, N.W., between 8:30 a.m. and 5:00 p.m., Mondays through Fridays or between 9:00 a.m. and 12:00 noon on Saturdays. You may file the original Answer with the Court either before you serve a copy of the Answer on the plaintiff or within seven (7) days after you have served the plaintiff. If you fail to file an Answer, judgment by default may be entered against you for the relief demanded in the complaint.

Catherine Bertram #425052

Clerk of the Court

Name of Plaintiff's Attorney

20 F St., NW, 7th Fl

Address

Washington, DC 20001

(202) 803-5800

Telephone

By _____

Deputy Clerk

Date _____

如需翻译, 请打电话 (202) 879-4828

Veuillez appeler au (202) 879-4828 pour une traduction

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번역을 원하 시면, (202) 879-4828 로 전화 주십시오.

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IMPORTANT: IF YOU FAIL TO FILE AN ANSWER WITHIN THE TIME STATED ABOVE, OR IF, AFTER YOU ANSWER, YOU FAIL TO APPEAR AT ANY TIME THE COURT NOTIFIES YOU TO DO SO, A JUDGMENT BY DEFAULT MAY BE ENTERED AGAINST YOU FOR THE MONEY DAMAGES OR OTHER RELIEF DEMANDED IN THE COMPLAINT. IF THIS OCCURS, YOUR WAGES MAY BE ATTACHED OR WITHHELD OR PERSONAL PROPERTY OR REAL ESTATE YOU OWN MAY BE TAKEN AND SOLD TO PAY THE JUDGMENT. IF YOU INTEND TO OPPOSE THIS ACTION, DO NOT FAIL TO ANSWER WITHIN THE REQUIRED TIME.

If you wish to talk to a lawyer and feel that you cannot afford to pay a fee to a lawyer, promptly contact one of the offices of the Legal Aid Society (202-628-1161) or the Neighborhood Legal Services (202-279-5100) for help or come to Suite 5000 at 500 Indiana Avenue, N.W., for more information concerning places where you may ask for such help.

See reverse side for Spanish translation

Vea al dorso la traducción al español



TRIBUNAL SUPERIOR DEL DISTRITO DE COLUMBIA

DIVISIÓN CIVIL

Sección de Acciones Civiles

500 Indiana Avenue, N.W., Suite 5000, Washington, D.C. 20001

Teléfono: (202) 879-1133 Sitio web: www.dccourts.gov

_____ Demandante
contra _____

Número de Caso: _____

_____ Demandado

CITATORIO

Al susodicho Demandado:

Por la presente se le cita a comparecer y se le requiere entregar una Contestación a la Demanda adjunta, sea en persona o por medio de un abogado, en el plazo de veintiún (21) días contados después que usted haya recibido este citatorio, excluyendo el día mismo de la entrega del citatorio. Si usted está siendo demandado en calidad de oficial o agente del Gobierno de los Estados Unidos de Norteamérica o del Gobierno del Distrito de Columbia, tiene usted sesenta (60) días, contados después que usted haya recibido este citatorio, para entregar su Contestación. Tiene que enviarle por correo una copia de su Contestación al abogado de la parte demandante. El nombre y dirección del abogado aparecen al final de este documento. Si el demandado no tiene abogado, tiene que enviarle al demandante una copia de la Contestación por correo a la dirección que aparece en este Citatorio.

A usted también se le requiere presentar la Contestación original al Tribunal en la Oficina 5000, sito en 500 Indiana Avenue, N.W., entre las 8:30 a.m. y 5:00 p.m., de lunes a viernes o entre las 9:00 a.m. y las 12:00 del mediodía los sábados. Usted puede presentar la Contestación original ante el Juez ya sea antes que usted le entregue al demandante una copia de la Contestación o en el plazo de siete (7) días de haberle hecho la entrega al demandante. Si usted incumple con presentar una Contestación, podría dictarse un fallo en rebeldía contra usted para que se haga efectivo el desagravio que se busca en la demanda.

SECRETARIO DEL TRIBUNAL

Nombre del abogado del Demandante _____

Por: _____ Subsecretario

Dirección _____

Fecha _____

Teléfono _____

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IMPORTANTE: SI USTED INCUMPLE CON PRESENTAR UNA CONTESTACIÓN EN EL PLAZO ANTES MENCIONADO O, SI LUEGO DE CONTESTAR, USTED NO COMPARECE CUANDO LE AVISE EL JUZGADO, PODRÍA DICTARSE UN FALLO EN REBELDÍA CONTRA USTED PARA QUE SE LE COBRE LOS DAÑOS Y PERJUICIOS U OTRO DESAGRAVIO QUE SE BUSQUE EN LA DEMANDA. SI ESTO OCURRE, PODRÍA RETENÉRSELE SUS INGRESOS, O PODRÍA TOMÁRSELE SUS BIENES PERSONALES O BIENES RAÍCES Y SER VENDIDOS PARA PAGAR EL FALLO. SI USTED PRETENDE Oponerse a esta acción, NO DEJE DE CONTESTAR LA DEMANDA DENTRO DEL PLAZO EXIGIDO.

Si desea conversar con un abogado y le parece que no puede pagarle a uno, llame pronto a una de nuestras oficinas del Legal Aid Society (202-628-1161) o el Neighborhood Legal Services (202-279-5100) para pedir ayuda o venga a la Oficina 5000 del 500 Indiana Avenue, N.W., para informarse sobre otros lugares donde puede pedir ayuda al respecto.

Vea al dorso el original en inglés

See reverse side for English original



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Catherine Bertram #425052

Clerk of the Court

Name of Plaintiff's Attorney

20 F St., NW, 7th Fl

Address

Washington, DC 20001

(202) 803-5800

Telephone

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የአማርኛ ትርጉም ለማግኘት (202) 879-4828 ይደውሉ

IMPORTANT: IF YOU FAIL TO FILE AN ANSWER WITHIN THE TIME STATED ABOVE, OR IF, AFTER YOU ANSWER, YOU FAIL TO APPEAR AT ANY TIME THE COURT NOTIFIES YOU TO DO SO, A JUDGMENT BY DEFAULT MAY BE ENTERED AGAINST YOU FOR THE MONEY DAMAGES OR OTHER RELIEF DEMANDED IN THE COMPLAINT. IF THIS OCCURS, YOUR WAGES MAY BE ATTACHED OR WITHHELD OR PERSONAL PROPERTY OR REAL ESTATE YOU OWN MAY BE TAKEN AND SOLD TO PAY THE JUDGMENT. IF YOU INTEND TO OPPOSE THIS ACTION, DO NOT FAIL TO ANSWER WITHIN THE REQUIRED TIME.

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See reverse side for Spanish translation

Vea al dorso la traducción al español



TRIBUNAL SUPERIOR DEL DISTRITO DE COLUMBIA

DIVISIÓN CIVIL

Sección de Acciones Civiles

500 Indiana Avenue, N.W., Suite 5000, Washington, D.C. 20001

Teléfono: (202) 879-1133 Sitio web: www.dccourts.gov

_____ Demandante
contra _____

Numero de Caso: _____

_____ Demandado

CITATORIO

Al susodicho Demandado:

Por la presente se le cita a comparecer y se le requiere entregar una Contestación a la Demanda adjunta, sea en persona o por medio de un abogado, en el plazo de veintiún (21) días contados después que usted haya recibido este citatorio, excluyendo el día mismo de la entrega del citatorio. Si usted está siendo demandado en calidad de oficial o agente del Gobierno de los Estados Unidos de Norteamérica o del Gobierno del Distrito de Columbia, tiene usted sesenta (60) días, contados después que usted haya recibido este citatorio, para entregar su Contestación. Tiene que enviarle por correo una copia de su Contestación al abogado de la parte demandante. El nombre y dirección del abogado aparecen al final de este documento. Si el demandado no tiene abogado, tiene que enviarle al demandante una copia de la Contestación por correo a la dirección que aparece en este Citatorio.

A usted también se le requiere presentar la Contestación original al Tribunal en la Oficina 5000, sito en 500 Indiana Avenue, N.W., entre las 8:30 a.m. y 5:00 p.m., de lunes a viernes o entre las 9:00 a.m. y las 12:00 del mediodía los sábados. Usted puede presentar la Contestación original ante el Juez ya sea antes que usted le entregue al demandante una copia de la Contestación o en el plazo de siete (7) días de haberle hecho la entrega al demandante. Si usted incumple con presentar una Contestación, podría dictarse un fallo en rebeldía contra usted para que se haga efectivo el desagravio que se busca en la demanda.

SECRETARIO DEL TRIBUNAL

Nombre del abogado del Demandante _____

Por: _____ Subsecretario

Dirección _____

Fecha _____

Teléfono _____

如需翻译, 请打电话 (202) 879-4828

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Vea al dorso el original en inglés
See reverse side for English original



Superior Court of the District of Columbia
CIVIL DIVISION
Civil Actions Branch
500 Indiana Avenue, N.W., Suite 5000 Washington, D.C. 20001
Telephone: (202) 879-1133 Website: www.dccourts.gov

Katherine Musgrove, et al.

Plaintiff

vs.

Case Number _____

C. Paprah, CRNA

Defendant

SUMMONS

To the above named Defendant:

You are hereby summoned and required to serve an Answer to the attached Complaint, either personally or through an attorney, within twenty one (21) days after service of this summons upon you, exclusive of the day of service. If you are being sued as an officer or agency of the United States Government or the District of Columbia Government, you have sixty (60) days after service of this summons to serve your Answer. A copy of the Answer must be mailed to the attorney for the plaintiff who is suing you. The attorney's name and address appear below. If plaintiff has no attorney, a copy of the Answer must be mailed to the plaintiff at the address stated on this Summons.

You are also required to file the original Answer with the Court in Suite 5000 at 500 Indiana Avenue, N.W., between 8:30 a.m. and 5:00 p.m., Mondays through Fridays or between 9:00 a.m. and 12:00 noon on Saturdays. You may file the original Answer with the Court either before you serve a copy of the Answer on the plaintiff or within seven (7) days after you have served the plaintiff. If you fail to file an Answer, judgment by default may be entered against you for the relief demanded in the complaint.

Catherine Bertram #425052

Clerk of the Court

Name of Plaintiff's Attorney

20 F St., NW, 7th Fl

Address

Washington, DC 20001

(202) 803-5800

Telephone

By _____

Deputy Clerk

Date _____

如需翻译, 请打电话 (202) 879-4828

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contra _____

Número de Caso: _____

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Por: _____
Subsecretario

Dirección

Fecha _____

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Superior Court of the District of Columbia

CIVIL DIVISION- CIVIL ACTIONS BRANCH INFORMATION SHEET

Katherine Musgrove, et al.

Case Number: _____

vs

Date: August 1, 2022

Cesare Santangelo, M.D.

☐ One of the defendants is being sued
in their official capacity.

Name: <i>(Please Print)</i> Catherine D. Bertram		Relationship to Lawsuit <input checked="" type="checkbox"/> Attorney for Plaintiff <input type="checkbox"/> Self (Pro Se) <input type="checkbox"/> Other: _____
Firm Name: Bertram Law Group		
Telephone No.: 202-803-5800	Six digit Unified Bar No.: 425052	

TYPE OF CASE: ☐ Non-Jury ☒ 6 Person Jury ☐ 12 Person Jury
Demand: \$ 65,000,000.00 Other: _____

PENDING CASE(S) RELATED TO THE ACTION BEING FILED

Case No.: _____ Judge: _____ Calendar #: _____

Case No.: _____ Judge: _____ Calendar#: _____

NATURE OF SUIT: *(Check One Box Only)*

A. CONTRACTS

- | | |
|--|---|
| <input type="checkbox"/> 01 Breach of Contract | <input type="checkbox"/> 07 Personal Property |
| <input type="checkbox"/> 02 Breach of Warranty | <input type="checkbox"/> 09 Real Property-Real Estate |
| <input type="checkbox"/> 06 Negotiable Instrument | <input type="checkbox"/> 12 Specific Performance |
| <input type="checkbox"/> 15 Special Education Fees | <input type="checkbox"/> 13 Employment Discrimination |
| <input type="checkbox"/> 10 Mortgage Foreclosure | |

COLLECTION CASES

- | |
|---|
| <input type="checkbox"/> 14 Under \$25,000 Pltf. Grants Consent |
| <input type="checkbox"/> 16 Under \$25,000 Consent Denied |
| <input type="checkbox"/> 17 OVER \$25,000 Pltf. Grants Consent |
| <input type="checkbox"/> 18 OVER \$25,000 Consent Denied |

B. PROPERTY TORTS

- | | | |
|---|---|--|
| <input type="checkbox"/> 01 Automobile | <input type="checkbox"/> 03 Destruction of Private Property | <input type="checkbox"/> 05 Trespass |
| <input type="checkbox"/> 02 Conversion | <input type="checkbox"/> 04 Property Damage | <input type="checkbox"/> 06 Traffic Adjudication |
| <input type="checkbox"/> 07 Shoplifting, D.C. Code § 27-102 (a) | | |

C. PERSONAL TORTS

- | | | |
|---|---|--|
| <input type="checkbox"/> 01 Abuse of Process | <input type="checkbox"/> 09 Harassment | <input type="checkbox"/> 17 Personal Injury- (Not Automobile, Not Malpractice) |
| <input type="checkbox"/> 02 Alienation of Affection | <input type="checkbox"/> 10 Invasion of Privacy | <input type="checkbox"/> 18 Wrongful Death (Not Malpractice) |
| <input type="checkbox"/> 03 Assault and Battery | <input type="checkbox"/> 11 Libel and Slander | <input type="checkbox"/> 19 Wrongful Eviction |
| <input type="checkbox"/> 04 Automobile- Personal Injury | <input type="checkbox"/> 12 Malicious Interference | <input type="checkbox"/> 20 Friendly Suit |
| <input type="checkbox"/> 05 Deceit (Misrepresentation) | <input type="checkbox"/> 13 Malicious Prosecution | <input type="checkbox"/> 21 Asbestos |
| <input type="checkbox"/> 06 False Accusation | <input type="checkbox"/> 14 Malpractice Legal | <input type="checkbox"/> 22 Toxic/Mass Torts |
| <input type="checkbox"/> 07 False Arrest | <input checked="" type="checkbox"/> 15 Malpractice Medical (Including Wrongful Death) | <input type="checkbox"/> 23 Tobacco |
| <input type="checkbox"/> 08 Fraud | <input type="checkbox"/> 16 Negligence- (Not Automobile, Not Malpractice) | <input type="checkbox"/> 24 Lead Paint |

SEE REVERSE SIDE AND CHECK HERE ☐ IF USED

Information Sheet, Continued

C. OTHERS

- | | | |
|---|---|--|
| <input type="checkbox"/> 01 Accounting | <input type="checkbox"/> 10 T.R.O./ Injunction | <input type="checkbox"/> 25 Liens: Tax/Water Consent Granted |
| <input type="checkbox"/> 02 Att. Before Judgment | <input type="checkbox"/> 11 Writ of Replevin | <input type="checkbox"/> 26 Insurance/ Subrogation |
| <input type="checkbox"/> 04 Condemnation (Emin. Domain) | <input type="checkbox"/> 12 Enforce Mechanics Lien | Under \$25,000 Consent Denied |
| <input type="checkbox"/> 05 Ejectment | <input type="checkbox"/> 16 Declaratory Judgment | <input type="checkbox"/> 27 Insurance/ Subrogation |
| <input type="checkbox"/> 07 Insurance/Subrogation | <input type="checkbox"/> 17 Merit Personnel Act (OEA) | Over \$25,000 Pltf. Grants Consent |
| Under \$25,000 Pltf. | (D.C. Code Title 1, Chapter 6) | <input type="checkbox"/> 28 Motion to Confirm Arbitration |
| Grants Consent | <input type="checkbox"/> 18 Product Liability | Award (Collection Cases Only) |
| <input type="checkbox"/> 08 Quiet Title | <input type="checkbox"/> 24 Application to Confirm, Modify, | <input type="checkbox"/> 29 Merit Personnel Act (OHR) |
| <input type="checkbox"/> 09 Special Writ/Warrants | Vacate Arbitration Award | <input type="checkbox"/> 30 Liens: Tax/ Water Consent Denied |
| (DC Code § 11-941) | (DC Code § 16-4401) | <input type="checkbox"/> 31 Housing Code Regulations |
| | | <input type="checkbox"/> 32 Qui Tam |
| | | <input type="checkbox"/> 33 Whistleblower |
| | | <input type="checkbox"/> 34 Insurance/Subrogation |
| | | Over \$25,000 Consent Denied |

II.

- | | | |
|---|---|--|
| <input type="checkbox"/> 03 Change of Name | <input type="checkbox"/> 15 Libel of Information | <input type="checkbox"/> 21 Petition for Subpoena |
| <input type="checkbox"/> 06 Foreign Judgment | <input type="checkbox"/> 19 Enter Administrative Order as | [Rule 28-I (b)] |
| <input type="checkbox"/> 13 Correction of Birth Certificate | Judgment [D.C. Code § | <input type="checkbox"/> 22 Release Mechanics Lien |
| <input type="checkbox"/> 14 Correction of Marriage | 2-1802.03 (h) or 32-1519 (a)] | <input type="checkbox"/> 23 Rule 27(a) (1) |
| Certificate | <input type="checkbox"/> 20 Master Meter (D.C. Code § | (Perpetuate Testimony) |
| | 42-3301, et seq.) | <input type="checkbox"/> 24 Petition for Structured Settlement |
| | | <input type="checkbox"/> 25 Petition for Liquidation |

Catherine Bertram

Attorney's Signature

08/01/2022

Date