

Brandon Scott v. CCMC Faculty Practice Plan, Inc. Et Al. (AC 40716)

The plaintiff brought the present case forward seeking damages from the defendant for injuries sustained during spinal surgery as a result of the defendant's alleged negligence. The plaintiff alleged the defendant of medical malpractice following a spinal surgery which rendered the plaintiff paralyzed from the waist down. The plaintiff initially underwent surgery to ease chronic severe neuropathic pain. Prior to surgery, the plaintiff's chronic pain caused him to become bedridden, gain roughly 100 pounds, become unable to walk, experience severe anxiety and depression, and develop a dependency on pain killers. The plaintiff was considered to be "totally and permanently disabled." The defendant, a neurosurgeon, recommended a spinal surgery as a last resort to ease the plaintiff's pain. The surgery caused the plaintiff to become paralyzed from the waist down and failed to alleviate the plaintiff's chronic pain.

Following the surgery, a syrinx formed on the plaintiff's spinal cord. Doctors drained the syrinx and surgically implanted a morphine pump into the plaintiff's spine to help alleviate pain and allow the plaintiff to reduce the amount of narcotic pain killers he was consuming. Following this second surgery, the plaintiff's neuropathic pain substantially resolved. The plaintiff filed this action alleging that the defendant breached the applicable standard of care in performing the plaintiff's initial surgery. At trial, the jury found in favor of the defendant and the court rendered judgment in accordance with the jury's verdict. The plaintiff appealed on the ground that the trial court had improperly allowed the defendant to present evidence that the plaintiff's pain was substantially resolved due to the syrinx which developed in his spine as a result of the plaintiff's initial surgery. The defendant presented this evidence in order to reduce damages. The plaintiff also claimed that the trial court gave improper instructions to the jury regarding the syrinx evidence.

The issue presented to the Appellate Court in this appeal is whether the trial court acted improperly in failing to preclude evidence related to the syring. The Appellate Court determined that the trial court acted properly in permitting the evidence and affirmed their decision. In reaching this decision, the Court reasoned that they were “ not required to consider the merits of the plaintiff’s claims as to the trial court’s rulings with respect to the syring evidence because, even if the rulings were improper, they were harmless, as the jury did not reach the issue of damages because it first determined that the defendants had not breached the standard of care.” The Court determined that the evidence regarding the syring was inconsequential to the trial. The Court found that the dominant issue at trial was the defendant’s alleged negligence in performing the initial surgery. Because the jury found the defendant was not negligent and therefore not liable to the plaintiff, evidence presented to reduce damages was not relevant.

The Court further determined that the plaintiff’s argument, that the evidence regarding the syring may have impacted the jury in reaching the conclusion that the defendant had not deviated from the applicable standard of care, was unpersuasive. The Court reasoned that because the plaintiff had not objected to the syring evidence on that basis during trial, they cannot now make such a claim on appeal. The Court found that the syring evidence had no prejudicial impact against the plaintiff. Lastly, the Court determined that it was not “reasonably probable” that the syring evidence affected the jury in reaching their verdict regarding the defendant’s alleged breach of the standard of care.

The Court determined that the trial court acted properly in permitting the syring evidence and affirmed their holding that the defendant was not liable to the plaintiff.