


2016

## Case No. 14 - PPR0M

New York Law School

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PPROM

Mother was a 34 G3 P1 Kell sensitized. This was recognized by general ob/gyn Dr. X and patient was referred to MFM (Dr. Y) at 12 and 16 weeks. Dr. Y recommended appropriate course of action (typing of dad to determine zygosity, amnio to determine if fetus at risk and follow up MCA titers and anatomy scan). Patient refused amnio (scheduled at 18 + weeks) and did not keep appointment with MFM for MCA dopplers at 19 weeks, nor did she ever get an anatomy sonogram. The MFM appointment nor sonogram /MCA dopplers were never rescheduled. Patient then transferred her care to Dr. Z at 23 weeks and was seen once at 27 weeks without her records, albeit Dr. Z called Dr. Y and the patient did tell them she was Kell sensitized but they did not do a sonogram although they may have assumed she was being followed by the MFM. At 27 + weeks (3 days later) she presented to Labor and delivery with decreased fetal movement and PPRM. Fetus was grossly hydropic and underwent 6 transfusions - delivered at 34 weeks secondary to PPRM with fetal ascites and infant did extremely poorly with global developmental delay and is ventilator and G-tube feeding dependent. Plaintiff alleges that there was poor communication, that Dr. X failed to implement recommendations of the MFM and failed to order the 16-20 week survey. Allegation is basically that had the MFM's recommendations been followed, the infant would have done well.