

COURTNI LAWRENCE, a minor, by and  
through her Mother and Next Friend,  
CARTRINA LAWRENCE  
3243 East Pratt Street  
Baltimore, Maryland 21224

*Plaintiff,*

v.

UNIVERSITY OF MARYLAND  
MEDICAL SYSTEM, CORP.

Serve on Resident Agent:

Mary Elizabeth Zorzi  
250 West Pratt Street  
24<sup>th</sup> Floor  
Baltimore, Maryland 21201

and

UNIVERSITY OF MARYLAND  
MEDICAL CENTER, LLC.

Serve on Resident Agent:

University of Maryland  
System Corp.  
250 West Pratt Street  
24<sup>th</sup> Floor  
Baltimore, Maryland 21201

and

UNIVERSITY OF MARYLAND  
OBSTETRICAL AND  
GYNECOLOGICAL ASSOCIATES, P.A.,  
d/b/a THE CENTER FOR  
ADVANCED FETAL CARE

Serve on Resident Agent:

Adrian Bergin  
250 West Pratt Street  
Suite 880  
Baltimore, Maryland 21201

and

IN THE  
CIRCUIT COURT

FOR

BALTIMORE CITY

Case No.:

24-c-20-002817

20 JUN 25 AM 12:32  
CIVIL DIVISION

Case: 24-c-20-002817  
CV File New

RIF-New Case	100.00
Appear Fee	30.00
MLSC	20.00
TOTAL	150.00

Receipt #202000000017  
Cashier: LGC CEBUCIV15  
06/25/20 2:02pm

AHMET ALEXANDER BASCHAT, M.D.  
600 North Wolfe Street  
Nelson 228  
Baltimore, Maryland 21287

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\*  
\*

*Defendants.*

\* \* \* \* \*

**COMPLAINT AND  
DEMAND FOR JURY TRIAL**

Plaintiff, Courtni Lawrence, a minor, by and through her Mother and Next Friend, Cartrina Lawrence, by and through her undersigned counsel, Mary M. Koch, Sarah L. Smith and Wais, Vogelstein, Forman & Offutt, L.L.C. hereby sues the Defendants, University of Maryland Medical System Corporation (“UMMS”), University of Maryland Medical Center, LLC (“UMMC”), University of Maryland Obstetrical & Gynecological Associates, P.A. d/b/a The Center for Advanced Fetal Care (“CAFC”) and Ahmet Alexander Baschat, M.D. (“Dr. Baschat”), and for her cause of action states as follows:

**JURISDICTION AND VENUE**

1. This medical negligence claim is instituted pursuant to Md. Cts. & Jud. Proc. Art. §§3-2A-01-10, for the recovery of damages in excess of Thirty Thousand Dollars (\$30,000.00).
2. Venue is proper in Baltimore City, Maryland.
3. Plaintiff avers that she has satisfied all conditions precedent to the filing of this lawsuit, including the filing of a Statement of Claim, Certificate of Qualified Expert and Report, and Waiver of Arbitration in the Health Care Alternative Dispute Resolution Office of Maryland. Attached hereto and incorporated herein by reference are the Certificate of Qualified Expert and Expert Report of Van Reid Bohman, M.D., and the Order of Transfer from the Health Care Alternative Dispute Resolution Office.

## PARTIES

4. Plaintiff, Courtni Lawrence is a minor residing with her mother, Cartrina Lawrence at 3243 East Pratt Street, Baltimore, Maryland 21224.

5. Defendants UMMS, UMMC and CAFC are and, at all times relevant hereto, were Maryland corporations/companies/associations engaged in the provision of health care services, including the provision of obstetrical care and other medical services, advice and treatment to individuals in need thereof. At all times relevant hereto, Defendant Health Care Providers UMMS, UMMC and CAFC acted directly and/or by and/or through its actual and/or apparent agents, servants and/or employees, including but not limited to Dr. Baschat.

6. At all times relevant hereto, the aforementioned Defendants UMMS, UMMC and CAFC held themselves out to the public as health care providers who would render reasonably competent health care services to those individuals who came under their professional care.

7. Dr. Baschat is, and at all times relevant hereto, was a physician licensed to practice medicine, including obstetrics and gynecology and maternal-fetal medicine, in the State of Maryland. At all times relevant hereto, Dr. Baschat acted as the actual and/or apparent agent and/or employee of Defendants UMMS, UMMC and/or CAFC.

## FACTS

8. On October 27, 2011, Ms. Lawrence was gravida 3 para 1 when she presented to UMMC for prenatal care at 33 4/7 weeks gestation by last menstrual period and consistent with a 20-week ultrasound according to previous records, per UMMC. Prior to presenting to UMMC, Ms. Lawrence received prenatal care while stationed in Texas with the Army, and was last evaluated on August 1, 2011, per UMMC. Ms. Lawrence had a history of gestational diabetes

mellitus with insulin with her prior pregnancy and smoking. A glucose tolerance test had not been completed.

9. Ms. Lawrence returned to UMMC on November 3, 2011 where she reported fetal movement. Ms. Lawrence was referred to Jocelyn Diabetes Center for nutritional counseling, and instructed to return to the office to pick up a glucometer and supplies.

10. Ms. Lawrence next presented to UMMC on November 10, 2011 where she again reported fetal movement; Ms. Lawrence was instructed to keep her ultrasound appointment for the following day. Probable malpresentation was also noted.

11. On November 11, 2011, Ms. Lawrence presented to the Center for Advanced Fetal Care where an ultrasound was performed by Jianping Xu, R.D.M.S. The ultrasound report indicates that Ms. Lawrence was diagnosed with gestational diabetes and was 35 4/7 weeks according to her last menstrual period. Amniotic fluid was reported as normal, with an amniotic fluid index of 10.3. The estimated fetal weight was reported as normal, and a biophysical profile was scored 8/8. Fetal dopplers were abnormal showing an elevated S/D ratio in the umbilical artery of 8.14, with a resistance index of 0.88, and a pulsatility index of 1.83. Dr. Baschat signed the report, and instructed Ms. Lawrence to follow up in two (2) weeks for assessment of fetal growth, Doppler studies and amniotic fluid volume.

12. Five days later, on November 16, 2011, Ms. Lawrence returned to UMMC for a c-section consult for suspected breech presentation. It was noted that fetal presentation was now vertex. The need for insulin was discussed secondary to fasting sugar of 120 that morning, and Ms. Lawrence was prescribed 40 units of Lantus every 5 hours and 8 units of Aspart with each meal, three times daily. Ms. Lawrence was instructed to return for a follow up on November 18, 2011.

13. Six days after Dr. Baschat reviewed and signed the ultrasound report, on November 17, 2011, Ms. Lawrence presented to UMMC where she reported contractions since about 06:00 that morning, about 10-15 minutes apart and becoming increasingly painful. Continuous fetal heart rate monitoring was initiated at approximately 23:17. A sterile vaginal exam was performed by Dr. Appel at approximately 23:20, who noted that Ms. Lawrence was 2 cm dilated, 50% effaced, and the fetus was at -4 station.

14. At 23:44, Ms. Lawrence was repositioned to her right side, and she was given supplemental oxygen. According to Ms. Lawrence's History and Physical completed by Dr. Appel, the fetal heart rate tracing showed 2 contractions every 10 minutes, with late decelerations that resolved following contractions, while accelerations and good variability were present between contractions. An addendum by Dr. Sylvester, describes the tracing as Category II.

15. At 02:15, episodic late and variable decelerations are noted. At 03:05, Dr. Appel again documents periodic late decelerations, and describes the tracing as Category II; Dr. Appel also notes that a Pitocin stress test will be conducted in order to determine whether the fetus would tolerate labor.

16. At 08:15, a note from a Maternal-Fetal Medicine Fellow describes the tracing as Category II with periodic late decelerations, and vaginal exam unchanged since 03:00, where Ms. Lawrence was noted to be 3 cm dilated, 60% effaced and the fetus was at -2 station.

17. Pitocin was initiated at 1 milliunits/minute at 09:23 a.m., increased to 2 milliunits/minute at 09:39, increased to 3 milliunits/minute at 09:55 and increased to 4 milliunits/minute at 10:11. According to the handwritten nursing notes, at 10:54, Dr. Jain performed a vaginal exam and noted that Ms. Lawrence was 4 cm dilated, 70% effaced and the fetus was at -1 station.

18. Rupture of membranes is recorded at 10:56 with thick meconium and a small amount of amniotic fluid. At 11:12, Pitocin was increased to 4 milliunits/minute, and at 11:15, Dr. Jain categorized the tracing as Category II, noting periodic late decelerations, and minimal variability.

19. At 11:23, a position change is noted, and Pitocin is paused at 11:59. At 12:10 Dr. Malinow and Dr. Montgomery are recorded as being at the bedside; anesthesia documentation from the same time indicates that an urgent c-section was initiated secondary to nonreassuring fetal heart rate tracing, now with decreased variability and meconium, distant from delivery.

20. The operative report of Dr. Barber indicates that the decision to move towards delivery was made given a nonreassuring fetal heart rate tracing. Delivery is recorded at 12:35. Apgars were recorded as 3 and 9 at one and five minutes respectively. Initial arterial cord gas revealed a pH of 7.17 and base excess of -4.1; venous pH was 7.24 with base excess of -3.9. Meconium was noted on her nail beds and in her secretions.

21. Courtni was transferred to the Neonatal Intensive Care Unit ("NICU") where she was treated for ischemic stroke, oral/motor dysfunction, respiratory distress syndrome, and meconium aspiration syndrome.

22. Today, Courtni suffers from brain damage, global developmental delay and other damage.

23. Had the Defendant Health Care Providers complied with the standard of care, Courtni Lawrence would be a normal child today.

**Count I**  
**(Medical Malpractice)**

24. Plaintiff repeats, re-alleges, adopts and incorporates by reference the above paragraphs of this Statement of Claim as if fully set forth herein.

25. In their care and treatment of Courtni and Cartrina Lawrence, the Defendant Health Care Providers, acting directly and/or by and/or through their actual and/or apparent agents, servants, and/or employees, including but not limited to, Dr. Baschat, owed to Plaintiff the duty to exercise that degree of care and skill which a reasonably competent hospital, obstetrician, and/or similar health care provider would have exercised under the same or similar circumstances.

26. The Defendant Health Care Providers, acting directly and/or by and/or through their actual and/or apparent agents, servants, and/or employees, including, but not limited to, Dr. Baschat, breached the aforesaid duty of care to Courtni and Cartrina Lawrence, and were negligent by:

- a. Failing to properly consider Ms. Lawrence's pertinent medical history on November 11, 2011, including, history of smoking, gestational diabetes and abnormal Dopplers;
- b. Failing to order more diligent fetal assessment and testing, including but not limited to, twice weekly biophysical profiles with a nonstress test;
- c. Failing to appropriately treat Ms. Lawrence and her unborn baby;
- d. Failing to safely treat Ms. Lawrence and her unborn baby;
- e. Failing to establish a reasonable and prudent plan of care consistent with Ms. Lawrence's signs, symptoms, and presentation;
- f. Failing to timely diagnose abnormalities of umbilical blood flow that are known to result in harm to a fetus; and
- g. Failing to timely and safely deliver Courtni Lawrence.

27. The Defendant Health Care Providers' violations of the standard of care and failure to order more diligent fetal assessment and testing prevented the identification of findings that would have prompted continuous fetal monitoring and/or delivery prior to November 18, 2011.

28. As a direct and proximate result of the above-mentioned deviations from the applicable standards of care by Defendant Health Care Providers, Courtni Lawrence suffered and/or will suffer the following permanent injuries, among others:

- a. Acquired brain injury;
- b. Ecephalomalacia;
- c. Respiratory distress;
- d. Brain damage;
- e. Meconium aspiration;
- f. Developmental delay;
- g. Cognitive and mental impairment;
- h. Neurological disabilities;
- i. Physical impairment;
- j. Significant conscious pain and suffering;
- k. Emotional distress;
- l. She is and will be permanently dependent upon others for his care;
- m. She has and will continue to undergo serious and painful medical procedures;
- n. She has and will continue to incur significant medical and other care expenses for which she and her parents are incapable of paying;
- o. Her earning capacity has been severely diminished; and
- p. Other injuries and damages

WHEREFORE Plaintiff brings this action against all of the Defendants, jointly and severally, and seeks damages that will adequately and fairly compensate her, plus costs, and such other and further relief as may be deemed appropriate.



Respectfully submitted,

WAIS, VOGELSTEIN, FORMAN & OFFUTT, LLC



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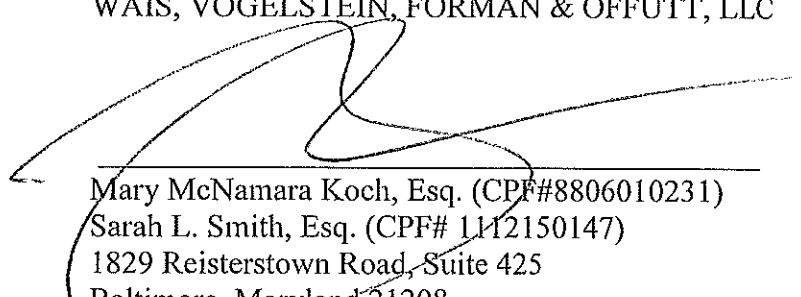
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*Attorneys for Plaintiff*

**DEMAND FOR JURY TRIAL**

The Plaintiff, by and through her undersigned attorneys, hereby demand a trial by jury on all issues raised herein.

Respectfully submitted,

WAIS, VOGELSTEIN, FORMAN & OFFUTT, LLC



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