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STATE OF MICHIGAN
IN THE CIRCUIT COURT FOR THE COUNTY OF OAKLAND

HOWARD T. LINDEN, as Personal Representative of the ESTATE of HUDSON KATTOUAH, Deceased,

Plaintiff,

v.

Case No. 16-151498 - NH
Hon. Denise Langford Morris

HARBOR OAKS HOSPITAL, an assumed name for PHC OF MICHIGAN INC., LORRAINE JOHNSTON-BUBAN, RN, and SANJEEV S. VENKATARAMAN, M.D., Jointly and Severally,

Defendants.

____ /

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____ /

1st AMENDED COMPLAINT & DEMAND FOR JURY TRIAL PD / SW

Another civil action arising out of the same transaction or occurrence as alleged in this Complaint has previously been filed. That action is Linden v Harbor Oaks Hospital, et al, Case No. 14-1444147-NH, assigned to the Honorable Denise Langford Morris, and the action remains pending.

/s/ Todd J. Weglarz (P48035)

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NOW COMES Plaintiff, HOWARD T. LINDEN, as Personal Representative for the ESTATE of HUDSON KATTOUAH, deceased, by and through his attorneys, FIEGER, FIEGER, KENNEY & HARRINGTON, P.C., and states as his cause of action against the above-named Defendants the following:

1. Plaintiff HOWARD T. LINDEN is the duly appointed Personal Representative of the Estate of HUDSON KATTOUAH, Deceased, having been so appointed by the Probate Court for the County of Macomb.

2. The acts and occurrences which form the basis for this Complaint occurred within the County of Macomb, State of Michigan.

3. The amount in controversy is in excess of Twenty Five Thousand Dollars ($25,000), exclusive of interest, costs, and attorney fees.

4. At all times relevant, Defendant SANJEEV S. VENKATARAMAN, M.D., (hereinafter, “RAMAN”) was a duly licensed physician, specializing in the field of Psychiatry, and conducting business in the County of Macomb, State of Michigan.

5. At all times relevant, Defendant HARBOR OAKS HOSPITAL, an assumed name for PHC of Michigan Inc., (hereinafter “HARBOR OAKS”) was a Massachusetts corporation, which owned, staffed, operated, and supervised the Harbor Oaks Hospital located in the City of New Baltimore, County of Macomb, State of Michigan, and conducted business in the County of Macomb, State of Michigan.

6. At all times relevant, Defendant LORRAINE JOHNSTON-BUBAN, RN (hereinafter “JOHNSTON”), was a licensed and practicing Registered Nurse, conducting business in the County of Macomb, State of Michigan.

7. At all times relevant, Defendants JOHNSTON and RAMAN was/were the apparent,

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implied, and/or express agents and/or employees of Defendant HARBOR OAKS, and was / were acting within the scope and course of his and/or her agency and/or employment therewith when the acts of negligence, gross negligence, and/or wanton and willful misconduct, as more fully described herein, were committed, thereby imposing vicarious liability upon Defendant HARBOR OAKS by reason of the doctrine respondent superior.

8. On August 9, 2013, Hudson Kattouah, a seventeen year old with Asperger's Syndrome and biopolar disorder, presented to Defendant HARBOR OAKS Hospital Facility requesting voluntary admission because he was acutely suicidal.

9. Defendant HARBOR OAKS agreed to accept Hudson for admission after confirming that Hudson's Medicaid Insurance coverage would pay for five days of admission.

10. Following admission, Hudson repeatedly expressed a desire to kill himself to evaluating and treating staff members of Defendant HARBOR OAKS, includings Defendant JOHNSTON and RAMAN.

11. A nursing psychological assessment upon admission on August 9, 2013 documents that Hudson was suicidal, and in response to the question, Hudson responded that he had tried to hang himself.

12. Further, Hudson filled out a Suicide Questionnaire, stating that he had experienced severe suicidal ideations within the past month, and that he had suicidal thoughts lasting about 4-8 hours per day, which were virtually uncontrollable.

13. The social worker social history assessment on August 10, 2013 documents Hudson's previous suicide attempt, and further states that he could be a danger to himself or others.

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14. Defendant HARBOR OAKS and its staff, specifically Defendants JOHNSTON and RAMAN, were on notice from the time of Hudson's admission that he was a suicide risk and required supervision and care.

15. Defendant RAMAN, while acting as a board certified psychiatrist and/or Child & Adolescent Psychiatrist, evaluated Hudson on August 12, 2013 and concluded that Hudson appeared to be irritable, appeared to get fairly easily agitated and was somewhat hard to control, appeared paranoid and that his judgment and insight was poor.

16. On August 13, 2013 at 12:20 pm, Hudson was noted as agitated, and started swearing at the staff, and attempted to cut his wrists, as was documented in the nursing notes for that day.

17. On August 14, 2013, Defendant RAMAN ordered Hudson to be discharged from Harbor Oaks Hospital.

18. Hudson told his counselors and staff members, specifically Defendants JOHNSTON and RAMAN, that he did not wish to be discharged, and warned them that he would kill himself if discharged.

19. Amy Kattouah spoke with Defendant JOHNSTON via telephone and refused to allow her son to be discharged from Harbor Oaks Hospital, at which point JOHNSTON threatened to call the State Child Protective Services if Hudson's mother did not remove him from the psychiatric facility.

20. Amy Kattouah drove to Harbor Oaks and arrived at approximately 3:30 pm.

21. Upon her arrival at Harbor Oaks, Amy again expressed her concern with Hudson's discharge to Defendant JOHNSTON, citing his suicidal ideations and poor outward appearance.

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22. Despite the objections of both Amy Kattouah and Hudson Kattouah, Defendant JOHNSTON discharged Hudson on August 14, 2013.

23. Defendant JOHNSTON discharged Hudson without providing any warning to Amy that Hudson was vulnerable and required supervision.

24. Amy and Hudson left Harbor Oaks and arrived home at approximately 4:30 pm.

25. Amy checked on Hudson after approximately 15 minutes, and could not find him. She searched the house and the yard, ultimately finding him hanging by his neck in his closet.

26. EMS was called and Hudson was emergently rushed to St. John Hospital where he was pronounced dead.

27. An autopsy was performed on August 15, 2013 by Deputy Chief Medical Examiner Leigh Hlavaty, M.D. who confirmed the cause of death as suicidal hanging.

28. As a direct and proximate result of the actions and violations of the standard of care described herein, Decedent committed suicide by hanging on August 14, 2013, and suffered a wrongful death, thereby entitling Plaintiff's Decedent's Estate, and the lawful and legal heirs thereof, to recover for injuries and damages as allowed under the Michigan Wrongful Death Act which include, but are not limited to, the following:

a. Reasonable compensation for the pain and suffering incurred by Plaintiff's decedent prior to his death;

b. Loss of society and companionship suffered by members of decedent's estate;

c. All necessary and reasonable medical expenses;

d. Funeral and burial expenses; and

e. Other damages to be discovered throughout the course of discovery.

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COUNT I - NEGLIGENCE
DEFENDANTS RAMAN & HARBOR OAKS

29. Plaintiff hereby restates, realleges, and incorporates by reference each and every allegation set forth above.

30. At all times pertinent to this Complaint, Defendants RAMAN and HARBOR OAKS[1] owed Decedent a duty to maintain the standard of care and treatment of his peers within the professional community of Psychiatrists and/or Child & Adolescent Psychiatrists. The requirements of the standard of care included, but were not limited to, the following:

a. Appreciate that Decedent was at high risk for committing suicide based on his current written and verbalized complaints of suicidal ideation, including the desire to hang himself, past suicide plans involving hanging, along with the fact that he demonstrated continued issues with controlling his anger and impulsivity;

b. Adequately appreciate and plan to reduce Decedent's anger and impulsivity, and assume that Decedent's inability to manage anger and impulsivity could result in an attempted suicide by hanging;

c. Ensure that the patient was discharged with support services for management of his chronic cannabis abuse;

d. Contact the referring professional and discuss the plan to discharge Decedent;

e. Ensure that Decedent would be able to manage his impulsivity and anger and avoid returning to chronic use of cannabis once he returned home;

f. Refrain from discharging Decedent from Harbor Oaks on August 14, 2013, given the fact that that Decedent was at high risk for committing suicide based on his current written and verbalized complaints of suicidal ideation, along with the fact that he demonstrated continued issues with controlling his anger and impulsivity;

g. Other acts and/or omissions to be determined throughout the course of discovery.

[1] Harbor Oaks liability under this count is being vicarious for the actions and inactions of Defendant Raman.

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31. Notwithstanding said obligations, and in breach thereof, Defendants RAMAN and HARBOR OAKS violated the standard of care applicable in the manner set forth below:

a. Failing to appreciate that Decedent was at high risk for committing suicide based on his current written and verbalized complaints of suicidal ideation, including the desire to hang himself, past suicide plans involving hanging, along with the fact that he demonstrated continued issues with controlling his anger and impulsivity;

b. Failing to adequately appreciate and plan to reduce Decedent's anger and impulsivity, and assume that Decedent's inability to manage anger and impulsivity could result in an attempted suicide by hanging;

c. Failing to ensure that the patient was discharged with support services for management of his chronic cannabis abuse;

d. Failing to contact the referring professional and discuss the plan to discharge Decedent;

e. Failing to ensure that Decedent would be able to manage his impulsivity and anger and avoid returning to chronic use of cannabis once he returned home;

f. Discharging Decedent from Harbor Oaks on August 14, 2013, when Decedent was at high risk for committing suicide based on his current written and verbalized complaints of suicidal ideation, along with the fact that he demonstrated continued issues with controlling his anger and impulsivity;

g. Other acts and/or omissions to be determined throughout the course of discovery.

32. As a direct and proximate result of the aforementioned violations of the standard of care as outlined above, Plaintiff's Decedent, Plaintiff's Decedent's Estate, and the lawful and legal heirs thereof, suffered the injuries and damages as outlined and enumerated above.

WHEREFORE, Plaintiff respectfully requests that this Honorable Court enter judgment against the Defendants in any amount in excess of TWENTY FIVE THOUSAND ($25,000.00) DOLLARS, together with interest, costs and attorney fees, to which the Plaintiff is deemed to be entitled.

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COUNT II – NEGLIGENCE
DEFENDANTS JOHNSTON & HARBOR OAKS

33. Plaintiff hereby restates, realleges, and incorporates by reference each and every allegation set forth above.

34. At all times pertinent to this Complaint, Defendant HARBOR OAKS, and the nursing staff assigned to the care of Decedent, including Defendant JOHNSTON, owed Decedent a duty to maintain the standard of care and treatment of her / their peers within the professional community. The requirements of the standard of care included, but were not limited to, the following:

a. Refrain from discharging Decedent from Harbor Oaks Hospital on August 14, 2013 when it was known he was still a high, acute risk for suicide;

b. Perform an evaluation and assessment of Decedent to rule out suicidal risk;

c. Notify and advise patient's attending psychiatric physician that patient should not be discharged on August 14, 2013, because patient was still a high, acute risk for suicide;

d. Refrain from discharging Decedent from Harbor Oaks Hospital until such time as patient completed all of the documented treatment goals and was no longer a suicide risk;

e. Notify and advise patient's attending physician of the nurses' and treatment staff's daily observations of patient's behaviors, suicidal threats, threats to harm others, attempted suicide and/or self-harm, and lack of progress on any of his treatment goals, all of which rendered patient a continued high, acute, risk for suicide up through the time of patient's discharge on August 14, 2013.

35. Notwithstanding said obligations, and in breach thereof, Defendant HARBOR OAKS and the nursing staff assigned to the care of Decedent, including Defendant JOHNSTON, violated the standard of care applicable to the care and treatment of Decedent by failing to do those things enumerated under ¶ 34 above.

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36. As a direct and proximate result of the aforementioned violations of the standard of care as outlined above, Plaintiff's Decedent, Plaintiff's Decedent's Estate, and the lawful and legal heirs thereof, suffered the injuries and damages as outlined and enumerated above.

WHEREFORE, Plaintiff respectfully requests that this Honorable Court enter judgment against the Defendants in any amount in excess of TWENTY FIVE THOUSAND ($25,000.00) DOLLARS, together with interest, costs and attorney fees, to which the Plaintiff is deemed to be entitled.

A JURY TRIAL IS HEREBY DEMANDED

Respectfully submitted,

/s/ Todd J. Weglarz

Todd J. Weglarz (P48035)
Attorneys for Plaintiff
19390 W. Ten Mile Rd.
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tweglarz@fiegerlaw.com

Dated: June 7, 2016

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AFFIDAVIT OF TRACEY CHRISTY, RN

STATE OF MICHIGAN)
) ss
COUNTY OF Oakland)

Tracey Christy, RN, being duly sworn, deposes and says:

1. I am a full time practicing nurse.

2. During the twelve month period preceding the incident forming the basis of Hudson Kattouah's claim, I devoted a majority of my professional time to the active clinical practice of nursing.

3. I have reviewed the Notice of Intent to File Claim regarding patient Hudson Kattouah, as well as the medical records supplied to me by the attorney for the Estate of Hudson Kattouah, concerning the allegations contained in said Notice, including medical records from Harbor Oaks Hospital.

4. The applicable standard of practice or care in this matter is what a nurse of ordinary learning, judgment, or skill, specializing in and/or practicing nursing would or would not do under the same or similar circumstances, which required the Harbor Oaks Hospital nurses assigned to the care and treatment of Hudson Kattouah, including Lorraine Johnston-Buban, RN, to:

a. Refrain from discharging patient Hudson Kattouah from Harbor Oaks Hospital on August 14, 2013 when it was known he was still a high, acute risk for suicide;

b. Perform an evaluation and assessment of Hudson Kattouah to rule out suicidal risk;

c. Notify and advise patient's attending psychiatric physician that patient should not be discharged on August 14, 2013, because patient was still a high, acute risk for suicide;

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d. Refrain from discharging patient Hudson Kattouah from Harbor Oaks Hospital until such time as patient completed all of the documented treatment goals and was no longer a suicide risk;

e. Notify and advise patient's attending physician of the nurses' and treatment staff's daily observations of patient's behaviors, suicidal threats, threats to harm others, attempted suicide and/or self-harm, and lack of progress on any of his treatment goals, all of which rendered patient a continued high, acute, risk for suicide up through the time of patient's discharge on August 14, 2013.

5. That in my opinion, the applicable standard of practice or care in this matter was breached by the Harbor Oaks Hospital nurses assigned to the care and treatment of Hudson Kattouah, including Lorraine Johnston-Buban, RN, by failing to do those things enumerated under ¶ 4 above.

6. That the actions that should have been taken or omitted by the Harbor Oaks Hospital nurses assigned to the care and treatment of Hudson Kattouah, including Lorraine Johnston-Buban, RN, in order to comply with the applicable standard of practice or care include:

a. Refrain from discharging patient Hudson Kattouah from Harbor Oaks Hospital on August 14, 2013 when it was known he was still a high, acute risk for suicide;

b. Perform an evaluation and assessment of Hudson Kattouah to rule out suicidal risk;

c. Notify and advise patient's attending psychiatric physician that patient should not be discharged on August 14, 2013, because patient was still a high, acute risk for suicide;

d. Refrain from discharging patient Hudson Kattouah from Harbor Oaks Hospital until such time as patient completed all of the documented treatment goals and was no longer a suicide risk;

e. Notify and advise patient's attending physician of the nurses' and treatment staff's daily observations of patient's behaviors, suicidal threats, threats to harm others, attempted suicide and/or self-harm, and lack of progress on any

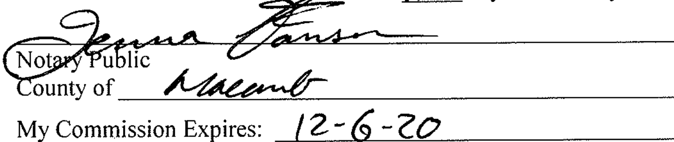
of his treatment goals, all of which rendered patient a continued high, acute, risk for suicide up through the time of patient's discharge on August 14, 2013.

7. As a direct and proximate result of one or more of the violations of the standards of practice committed by the Harbor Oaks Hospital nurses assigned to the care and treatment of Hudson Kattouah, including Lorraine Johnston-Buban, RN, patient Hudson Kattouah suffered a premature and preventable death by suicide shortly after being prematurely discharged from Defendants' Hospital.

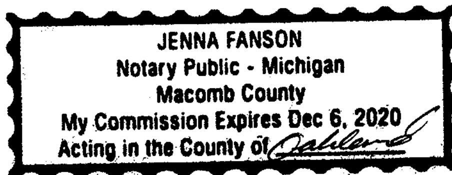
Dated: February 11, 2016

TRACEY CHRISTY, RN

Subscribed and sworn to before me this 11th day of February 11, 2016



Notary Public
County of Macomb
My Commission Expires: 12-6-20



JENNA FANSON
Notary Public - Michigan
Macomb County
My Commission Expires Dec 6, 2020
Acting in the County of Oakland

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STATE OF Tennessee)
) ss.
COUNTY OF Williamson)

AFFIDAVIT OF MERIT – JOHN G. LOONEY, MD.

I John G. Looney, M.D. being first duly sworn, states as follows:

1. I attended the University of Texas Southwestern Medical School, graduating in 1969.

2. I completed a residency in Psychiatry at Timberlawn Psychiatric Center (Texas), between 1970 and 1972.

3. I completed a Fellowship in Child and Adolescent Psychiatry at the University of Michigan between 1974 and 1976.

4. I am a Diplomate of the American Board of Psychiatry and Neurology, Child & Adolescent Psychiatry. March, 1977.

5. I am a Diplomate of the American Board of Adolescent Psychiatry, 1992.

6. I am a Diplomate of the American Board of Psychiatry and Neurology, Addiction Psychiatry, March, 1993, Recertified 2003.

7. I am a Diplomate of the American Association of Suicidology, Forensic Suicidologist, November, 2010.

8. I am a Diplomate of the American Board of Psychiatry and Neurology, Forensic Psychiatry, April, 1998, Recertified 2008.

9. During the three years prior to August 2013, I devoted the majority of my professional time to the active clinical practice of Psychiatric Medicine.

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10. At the request of attorney Caroline M. Whittemore, I have reviewed medical records of Hudson Kattouah as generated by Harbor Oaks Hospital, as well as the autopsy report generated by the Office of the Wayne County Medical Examiner.

11. I have also reviewed the Notice of Intent to File Claim, filed on behalf of Hudson Kattouah, dated January 22, 2014.

12. I affirm that I have personal knowledge of the facts stated in this affidavit.

13. If sworn as a witness, I can testify competently to the facts stated in this affidavit.

14. I have advised attorney Caroline M. Whittemore that I believe reasonable cause exists for the filing of the lawsuit concerning the medical treatment that Hudson Kattouah received. This opinion and the opinions stated below are based upon the information currently available to me. I reserve the right to modify my opinions as additional information becomes available subsequent to the lawsuit of this matter being filed.

15. I am of the opinion that the standard of care applicable to Dr. Ventkataraman, while providing care and treatment to Hudson Kattouah, was that of a reasonably prudent Psychiatrist, with a sub specialty in Child & Adolescent Psychiatry.

16. It is my opinion that the standard of care required the following:

a. Appreciate that the decedent was at high risk for committing suicide based on his current written and verbalized complaints of suicidal ideation, including the desire to hang himself, past suicide plans involving hanging, along with the fact that he demonstrated continued issues with controlling his anger and impulsivity;

b. Adequately appreciate and plan to reduced the decedent's anger and impulsivity, and assume that decedent's inability to manage anger and impulsivity could result in an attempted suicide by hanging;

c. Ensure that the patient was discharged with support services for management of his chronic cannabis abuse.

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d. Contact the referring professional and discuss the plan to discharge the decedent.

e. Ensure that the decedent would be able to manage his impulsivity and anger and avoid returning to chronic use of cannabis once he returned home.

f. Refrain from discharging the decedent from Harbor Oaks on August 14, 2013, given the fact that that the decedent was at high risk for committing suicide based on his current written and verbalized complaints of suicidal ideation, along with the fact that he demonstrated continued issues with controlling his anger and impulsivity.

17. It is my opinion that the standard of care was violated for the following reasons:

a. Dr. Ventkataraman failed to appreciate that the decedent was at high risk for committing suicide based on his current written and verbalized complaints of suicidal ideation, including the desire to hang himself, past suicide plans involving hanging, along with the fact that he demonstrated continued issues with controlling his anger and impulsivity;

b. Dr. Ventkataraman failed to adequately appreciate and plan to reduced the decedent's anger and impulsivity, and assume that decedent's inability to manage anger and impulsivity could result in an attempted suicide by hanging;

c. Dr. Ventkataraman failed to ensure that the patient was discharged with support services for management of his chronic cannabis abuse.

d. Dr. Ventkataraman failed to contact the referring professional and discuss the plan to discharge the decedent.

e. Dr. Ventkataraman failed to ensure that the decedent would be able to manage his impulsivity and anger and avoid returning to chronic use of canabbis once he returned home.

f. Dr. Ventkataraman discharged the decedent from Harbor Oaks on August 14, 2013, when the decedent was at high risk for committing suicide based on his current written and verbalized complaints of suicidal ideation, along with the fact that he demonstrated continued issues with controlling his anger and impulsivity.

18. In order to comply with the standard of care, Dr. Ventkataraman should have performed the following acts:

a. Appreciated that the decedent was at high risk for committing suicide based on his current written and verbalized complaints of suicidal ideation, including the desire to hang himself, past suicide plans involving hanging, along with the fact that he demonstrated continued issues with controlling his anger and impulsivity;

b. Adequately appreciated and planned to reduced the decedent's anger and impulsivity, and assumed that decedent's inability to manage anger and impulsivity could result in an attempted suicide by hanging;

c. Ensured that the patient was discharged with support services for management of his chronic cannabis abuse.

d. Contacted the referring professional and discussed the plan to discharge the decedent.

e. Ensured that the decedent would be able to manage his impulsivity and anger and avoid returning to chronic use of cannabis once he returned home.

f. Refrained from discharging the decedent from Harbor Oaks on August 14, 2013, given the fact that that the decedent was at high risk for committing suicide based on his current written and verbalized complaints of suicidal ideation, along with the fact that he demonstrated continued issues with controlling his anger and impulsivity.

19. It is further my opinion that as a result of the violations of the standard of care as outlined above, Hudson Kattouah was discharged to his home environment with only his mother, in a mental state that did not allow the decedent to adequately manage his anger, impulsiveness and suicidal ideation in a constructive manner that would allow him to avoid acting on these negative feelings in an adverse way, such as by committing suicide by hanging.

20. To a reasonable degree of medical probability, more likely than not, had Dr. Venkataraman complied with the applicable standard of care in the manner set forth above, the decedent's suicide would have been averted and the decedent would have had a good long-term prognosis.

21. Further affiant sayeth naught.

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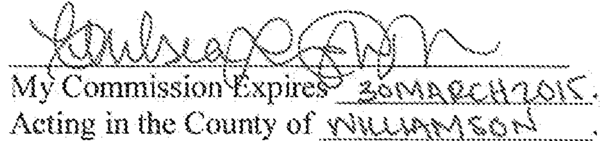
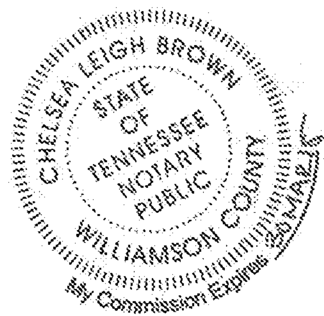
John G. Looney, M.D.

Subscribed and sworn to before me

this 11 day of NOVEMBER, 2014





My Commission Expires 30 MARCH 2015.
Acting in the County of WILLIAMSON.

Personally known X or Produced Identification ___
Type of Identification Produced ___________

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