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SEP 15 2021

NO. 81695-1-I

Washington State
Supreme Court

In the Supreme Court of
the state of Washington

PIL CHIN YUN

Appellant - petitioner

v.

ST. Francis Hospital. ER. PCU
and ERIC NUSSBAUM

Respondent - Defendant

PETITION FOR REVIEW

Brief of petitioner

PIL CHIN YUN

pro se petitioner

30823 18th Ave S. #C20

Federal Way, WA 98003

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(21)

A. Identity of petitioner

I. petitioner pil chin yun pro se personal representative of WOL R. YUN (Decedent), In Washington. Courts "hold pro se parties to the same standards to which it holds attorneys" Edwards v. Le Duc 157 Wn. App. 455 460. 238 P. 3d 1187 (2010)

I. petitioner pil chin yun pro se Son of mother WOL R. YUN (Decedent)
R.C.W 70.02.140 RCW 7.70.065 (a)(iv)
RCW 4.20.060 RCW 4.20.010 (1)

- : Respondent ST. Francis Hospital (Hereinafter) SFT
- : petitioner mother Decedent (Hereinafter) MS. YUN

B. The Questions presented in this case about the Unpublished opinion Court of appeals that the Court Ruled based on Lack of expert testimony.

please, Review "evidence is observable by lay persons and describable without medical training

seen: Harris v. Robert C Groth M.D., Inc.,
p. 5., 99 Wn. 2d 438. 449. 663. p. 2d
113 (1983) (expert testimony may
not be required where the "evidence
is observable by lay persons and
describable without medical training")

see: McLaughlin v. Cooke 112 Wn. 2d 829
837. 774 p. 2d 1171 (1989) ("expert
medical testimony [as to causation]
is not necessary if the questioned
practice of the profession is such a
gross deviation from ordinary care that
a lay person could easily recognize it")

A copy of the Court of appeals Division
one unpublished opinion is in the Appendix
page 3 through page 4

C. Issues presented for Review

(St. Francis Hospital treatment for Ms Yun
fell below the applicable standard of care
and proximately caused Ms Yun injuries
and wrongful death.

See: R.C.W. 7.70.040.

(1) On 8/9/2016 at 13:06 Ms Yun was brought by AMR to the St. Francis Emergency Department Ms Yun was treated in the St. Francis Hospital Emergency Department (SFHED) due to severe stomach pain CP3 Blood work was drawn and sent to the Laboratory for analysis CP5 The results of the blood work analysis indicated a possible local bacterial infection that was unlikely sepsis CP307. While in the SFHED, Ms Yun was treated with chewable aspirin CP5

please review: chewable aspirin for bacterial infection, not for antibiotic? in Emergency Room (even though Lab resulted infection in ER

08/09/2016 14:33)

i) aspirin chewable tablet (116750990)

08/09/16 17:11

ii) aspirin tablet (116750981)

08/09/16 16:53

iii) aspirin chewable tablet (116783875)

08/09/16 18:11

iv) aspirin tablet (116783876)

08/09/16 18:14

v) aspirin suppository 300mg (116783877)

08/09/16 18:18

please, Review: Ms yun 7 Hours No antibiotic
and ignored an infection in St. Francis
Hospital Emergency Room and progressive
Care Unit (p.c.u) and 8 Hours 40 min
No intravenous (IV) fluids in ER. p.c.u
Due to attempt to insert intravenous
line to deliver necessary medications
were unsuccessful C.P.S. I (pil chin yun)
asked nurse (Hospital employee) please,
Use the Veinfinder for my mom.
but, nerser (Joseph s olenginski RN)
Went out the Room. I waited for
nerser to come back with a Veinfinder
but, nerser did not come back.

Even, after 8 Hours 40 min subsequent
x-Rays Supported that attempt to
insert without Ultrasound guidance
a Central line through the neck
was not in Ms yun Vein. but,
rather floating around and the medicine
, IV fluids to an Unknown place,
Even though they known, they didn't
fixed with dishonest.

Ms yun death possible with medication error
(errors involving wrong Route of administration,
WAC 246-320-146(1)12 R.C.W 18.130.180
(4)(14)

Ms Yun Was swollen - Legs, arms, feet.
hands were all severely swollen and
every single needle stick and tiny
holes made by the needle due to looking
for vein in ER. p.c.u. the fluids
leaking and draining out from both arms
and both hands. The fluids may also
accumulated in the legs feet ankles
hands and fingers.

please, Review: Ms Yun suffered a Lung
injury (atelectasis) in p.c.u ST.
Francis Hospital with central line in
the neck was not in Ms Yun vein
DR. Nussbaum provided intubation to Ms
Yun and Endotracheal Tube (ETT)
insert and placed too low. ETT to
Lip 22 cm

Date/Time 8/9/2016 23:05

performed by: Nussbaum Eric B

R. C. W 18. 130. 180 (14)

Authorized by: pothi Reddy SEETHARAM R

R. C. W 18. 130. 180 (14)

DR Nussbaum's Comments: Tube to be moved
back Communicated to DR Girgis.

8/9/2016 23:15 per physician order
ETT pulled back to 20 cm at the Lip.

but, 9 Hours ETT misplaced Caused
Ms Yun had a Lung injured
& atelectasis: Complete or partial
Collapse of Lung or section (lobe)
of a Lung.

DR. Robert Linville x-Ray impression by
Resulted on 08/10/16 08:31 Am.

DR Nussbaum, DR Reddy, DR Girgis
involving intubated (ETT) to MS Yun
in MS Yun Medical Records

However, No one ETT pulled Back
to 20 cm at the Lip

No Doctor only Nurse (RT) and attending
medical student until next day in the
morning DR Haroon x-Ray ordered
"ETT too Low" (Date/Time 8/10/2016
7:47 Am)

Please Review:

Ms Yun blood pressure was Very Low
on 95/36 (08/09/16 15:42)

94/48 (08/09/16 15:36)

87/45 (08/09/16 16:46)

88/49 (08/09/16 18:00)

but, no Vasopressors ordered to MS Yun
in ER, PCU and as well as No
Vasopressors at all until MS Yun passed

away (Ms Yun Death 8/12/2016 6:27 AM)
DR. Peyman Soltani MD at 8/11/2016 4:41 PM
Reports " Even though Before 14 Hours
Ms Yun passed away

" She is hemodynamically much better
today. still requires Vasopressor,
Levophed "

Vasopressors: Contract (tighten) blood
vessels and raise blood pressure

please, Review:

Ms Yun Unknown gastric Cancer
(stomach Cancer) in St. Francis
Hospital. Ms Yun's medical Records
no Cancer test at all and No oral
Contrast material for CT.

A Radiologist (Anna Ellermeier) not
even refer to pathologist and how
to clearly read CT Reports without
oral Contrast material (08/10/16
15:43)

* pathologist (a doctor who specializes
in medical diagnosis)

St. Francis Hospital failure to Radiologic
procedure finding Unknown Gastric
malignancy (stomach Cancer)

St. Francis Hospital failure to diagnosed MS YUN gastric cancer (stomach cancer)

- i) failure to perform a thorough and complete physical examination.
- ii) failure to take a careful and detailed history
- iii) failure to recognize early warning signs and symptoms.
- iv) failure to recommend or offer cancer screening
- v) improper performance or interpretation of radiological or laboratory testing
- vi) failure to refer to appropriate specialists.

St. Francis Hospital absent to following medical procedure (gastric malignancy) to MS YUN

- 1) Biopsy
- 2) molecular testing of the tumor
- 3) Endoscopy
- 4) Endoscopic Ultrasound
- 5) X-Ray
- 6) Barium Swallow
- 7) Computed tomography (CT or CAT) Scan
- 8) MRI
- 9) positron emission tomography (PET) or PET-CT scan

MS YUN on certificate of death 8/12/2016 cause of death probable gastric malignancy was equivalent to failure to diagnosis.

D. STATEMENT OF THE CASE

The Unpublished opinion Court of appeals that the facts on August 12, 2016 she (MS Yun) passed away due to septic shock and multiorgan system failure. A Copy of the Court of appeals Division one Unpublished opinion is in the Appendix page (1)

MS. Yun Death due to septic shock and other conditions contributing to death because of delayed and malicious treatment
WAC 246-320-010 (20)(a)(b)(c)(21)

MS Yun Total 4 days Hospitalized in SFH
(August 9th 10th 11th 12th 2016)

See: MS Yun's Certificate of Death

Certifier name: DR Ayesha Haroon

Cause of Death: septic shock

Interval: 2-3 days

Date of Death: August 12, 2016

[4 days - (2-3 days) = 1-2 days]

* MS Yun Sepsis (Blood infection) (Septic shock Acquired in St. Francis Hospital

MS Yun admitted in E.R St. Francis Hospital 08/09/2016 13:06

Between 8/9/2016 13:06 to 08/10/16 00:46
(Blood Collected by Lyudmila. RN 8/10/16 0046)

i) Blood Culture x2 (Normal)

ii) DR. Ayesha Haroon medical Reports on
8/11/2016 11:01 AM

" PID: All Culture thus far remain
negative

* Blood Culture are used to detect
the presence of bacteria or fungi
in the blood to identify the type
present, and to guide treatment
testing is used to identify a blood
infection (septicemia) that can
lead to sepsis, a serious and
life-threatening complication.

DR. Alice Gallo De Moraes Reports:
(pulmonary and Critical Care medicine
Mayo clinic, Rochester Minnesota)

" Any kind of infection can trigger sepsis
But, certain infection such as pneumonia
abdominal or kidney infection and infection
that affect the blood, are more likely
to cause sepsis. Hospital staff member
watch patients closely for sepsis
particularly those in the emergency
department and in ICUs.

patients diagnosed with sepsis receive plenty of IV fluids and immediately given antibiotics. Early treatment of sepsis usually with antibiotics and large amount of intravenous fluids (IV) improves chances for survival"

Ms Yun blood pressure was very low on presentation at 94/48 page - 2
Declaration of Curtis Neal, MD

St. Francis Hospital Expert witness (IME) but, no vasopressors at all until Ms Yun passed away.

: Vasopressor (Antihypotensive agent)
✧ The essential step in the management of patient with septic shock is to increase systemic and regional / microcirculatory flow increasing arterial blood pressure (APC) with vasopressors when patient are hypotensive is used to improve the input pressure driving organ perfusion.

The ER care team failed to exercise that degree of care. skill for Ms Yun care in the E.R. PCU St. Francis Hospital

E. ARGUMENT

1) ST. Francis Hospital's hospitalists failed to standard of Care Ms yun death due to Sepsis / septic shock.

i) Not treating the infection and sepsis quickly and properly

ii) Not giving the Ms yun the Right antibiotic (chewable aspirin)

iii) Not giving the Ms yun the fluids properly (wrong Route of administration)

2). Malpositioned intubation to Ms yun (ETT too Low) 9 Hours

3) Subsequent x-ray supported that attempt to insert without Ultrasound guidance a central line through the neck was not in Ms yun Vein but, rather floatation around the medicine. IV fluids to an Unknown place. Even though they known, they didn't fixed with dishonest

Ms. yun death possible with medication error (errors involving wrong Route of administration) WAC 246-320-146 (1) 12 R. C. W 18 130 180 (4) (14)

See: Berger v. Sonneland, 144 Wn. 2d 91
111 (July 2001)

" Medical facts must be proved by expert testimony unless they are observable by laypersons and describable without medical training. For example, physician amputates the wrong limb or pokes a patient in the eye while stitching a wound on the face.

i) Subsequent x-Rays supported that attempt to insert without ultrasound guidance a central line through the neck was not in Ms Yun vein?

ii) a malpositioned intubation that was not corrected for 9 hours Ms Yun suffered a lung injury?

4) St. Francis Hospital Unauthorized Released Ms Yun medical records
Unknow how many pages released
generated on 9/10/2019 1:19 PM
absent: HIPAA Authorization For Disclosure of Health Information & Records.

St. Francis Hospital breached (Wrongful Disclosure Ms Yun's medical records)

R. C W 70.02 205(4)

" A health care provider, or health care facility is not subject to any civil liability for making or not making a use or disclosure in accordance with this section "

Nonetheless. St. Francis Hospital Unauthorized Released without HIPAA Authorization to Hospital Representative and Hospital expert witness (IME) making a use a medical Facts in Defendant St Francis Hospital's motion for Summary Judgment (emphasis in original) RAP 2.3(b)(1)

ix. The Superior Court and Court of appeals Division I, did not affirmed

A Copy of the Court of appeals Division one Unpublished opinion is in the Appendix page 3

" But, We Consider only the issues and evidence the parties called to the trial Court's attention on the motion for summary judgment RAP 9.1.

A Copy of the order denying petitioner (plaintiff) motion for Reconsideration is in the Appendix 2 through 3

5) St. Francis did not employ Nussbaum.
The record does not indicate if you
ever served Nussbaum with the summons
and complaint. Nevertheless, Nussbaum
is not a party to this appeal. (opinion
affirmed)

A. Copy of the Court of appeals Division
one unpublished opinion is in the Appendix
page 2

but DR Nussbaum malicious treatment
with his Hospital's employ Nurse
to Ms Yun in Emergency Room and
progressive Care Unit (p.c.u)

then DR. Nussbaum Consider able to:
R. C. W 4.16.350 (3)
R. C. W 1A.130.180 (4)

and, Scope of Duty. The hospital's duty
to supervise does not impose a duty
to intervene in the relationship between
the patient and a non-employee
physician. Unless there is "obvious
negligence" by the attending physician.
Alexander, 42 Wn. App. at 241:

Schoening v. Grays Harbor Comm Hosp.
40 Wn App. 331. 335 698p. 2d 593
(1985) (finding an issue of fact as to
whether hospital had met its duty)

See Adamski v. Tacoma Gen. Hosp.
20 Wn App 98. 112 579 p. 2d 970 (1978)
(reversing summary judgment in favor
of hospital where patient had presented
to the emergency room of a hospital and
received care from the doctor "on duty"
and from the hospital's employee nurse):
see also Adcox v. Children's Orthopedic
Hosp., 123 Wn. 2d 15, 36-37 864 p.
2d 921 (1983) (Relying on Adamski)

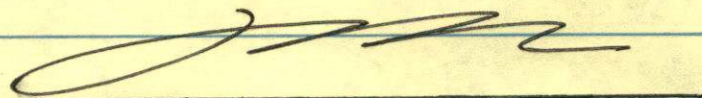
Under the "inherent function" doctrine
a hospital is liable for the conduct of
physicians that are performing inherent
functions of the hospital, including
such services as emergency room care
and radiology. Adamski, at 108-12
Under the doctrine of ostensible agency
a hospital may be held liable for the
malpractice of a physician where the
hospital "holds out" a physician as
an agent of the hospital, regardless of
the physician's actual status with

the hospital, and the patient reasonably relies on this information in forming a belief of the medical care. Adamski at 112-16.

F. CONCLUSION

petitioner Respectfully Requests this Court to accept Review for the Courts Ruled based lack of expert testimony that the Court should give opportunity providing expert testimony for trial date if need it because, petitioner already provided numerous Expert witness name filed to Court within deadline due to the Court issued Case Schedule for trial date.

Respectfully Submitted this 14th
September 2021



Pil chin yun
PRO SE
petitioner

CERTIFICATE OF SERVICE

The undersigned Certified Under penalty of perjury Under the Laws of the state of Washington that on the below date. I Caused to be Served Via U. S Certified mail a true and Correct Copy of this document to:


Ms Amanda K. Thorsvig
Fain Anderson Vanderhoft
Rosendahl O'HALLORAN
Spillane PLLC

1301 A street Suite 900
Tacoma WA 98402

p. 253-328-7800 f 253-272-0386

DATED at Federal Way
WASHINGTON

this 14th day of September
2021


pil chin yun pro se
petitioner

IN THE COURT OF APPEALS OF THE STATE OF WASHINGTON

PIL CHIN YUN,

Appellant,

v.

ST. FRANCIS HOSPITAL,
EMERGENCY ROOM, PROGRESSIVE
CARE UNIT,

Respondent,

ERIC NUSSBAUM,

Defendant.

No. 81695-1-1

DIVISION ONE

UNPUBLISHED OPINION

APPELWICK, J. — Yun appeals the summary dismissal of his medical negligence and wrongful death claims against his mother's healthcare providers. He failed to provide any expert medical testimony to support his claims. We affirm.

FACTS

On August 9, 2016, Phil Yun's 93 year old mother entered the emergency department of St. Francis Hospital in a critically ill and unstable condition. On August 12, 2016, she passed away due to septic shock and multiorgan system failure.

In August 2019, Yun filed this wrongful death action claiming that the medical negligence of St. Francis and emergency room physician Dr. Eric

Nussbaum caused his mother's death.¹ During discovery, St. Francis requested the identification of the expert witnesses Yun intended to have testify at trial. It also sought the subject matter on which Yun's experts were expected to testify, a summary of the grounds for each such opinion, and the production of all reports, declarations, or other documents those experts generated relating to this case. Yun did not identify any experts or produce any expert opinions in his discovery responses.

St. Francis moved for summary judgment, arguing that Yun had no experts to support his medical negligence claims and lacked standing as a real party in interest to bring this lawsuit because he was not the personal representative of his mother's estate. The trial court granted summary judgment and dismissed the case. Yun moved for reconsideration, which the court denied.

Yun appeals.²

DISCUSSION

I. Standard of Review

We review summary judgment orders de novo. Hadley v. Maxwell, 144 Wn.2d 306, 310-11, 27 P.3d 600 (2001). Summary judgment is proper when the pleadings, depositions, answers to interrogatories, and admissions on file, together with the affidavits, if any, show that there is no genuine issue of material

¹ St. Francis did not employ Nussbaum. The record does not indicate if Yun ever served Nussbaum with the summons and complaint. Nevertheless, Nussbaum is not a party to this appeal.

² We note that Yun, who appeared pro se before the trial court, maintains this appeal with the assistance of an attorney. In Washington, courts "hold pro se parties to the same standards to which it holds attorneys." Edwards v. Le Duc, 157 Wn. App. 455, 460, 238 P.3d 1187 (2010).

fact and that the moving party is entitled to judgment as a matter of law. CR 56(c); Vallandigham v. Clover Park Sch. Dist. No. 400, 154 Wn.2d 16, 26, 109 P.3d 805 (2005). We consider all facts and reasonable inferences from them in the light most favorable to the nonmoving party. Id. But, we consider only the issues and evidence the parties called to the trial court's attention on the motion for summary judgment. RAP 9.12.

II. Dismissal of Medical Negligence Claim

Chapter 7.70 RCW governs all civil actions based on tort, contract, or otherwise arising from health care. RCW 7.70.010; Berger v. Sonneland, 144 Wn.2d 91, 109, 26 P.3d 257 (2001). The plaintiff in a medical negligence action has the burden of proving that an "injury resulted from the failure of a health care provider to follow the accepted standard of care." RCW 7.70.030(1). To satisfy this burden, RCW 7.70.040 requires the plaintiff to prove the following elements:

(1) The health care provider failed to exercise that degree of care, skill, and learning expected of a reasonably prudent health care provider at that time in the profession or class to which he or she belongs, in the state of Washington, acting in the same or similar circumstances;

(2) Such failure was a proximate cause of the injury complained of

Moreover, the applicable standard of care as well as proximate cause must be established by expert testimony, except in those cases where medical facts are "observable by laypersons and describable without medical training." Berger, 144 Wn.2d at 110-11. But, a layperson generally cannot observe or describe whether a particular medical practice is reasonably prudent. See Harris v. Robert C. Groth, MD, Inc., 99 Wn.2d 438, 449, 663 P.2d 113 (1983).

Here, Yun concedes that he “did not provide a declaration from an expert” and does not dispute that he failed to produce any expert testimony to establish the applicable standard of care or proximate cause to support his claims against St. Francis. Yun opposed summary judgment on the notion that “expert testimony might not be a requirement in Washington if the medical malpractice [sic] lawsuit hinges on ‘Routine’ treatment issues that are within the jury’s common knowledge.” However, he failed to identify any routine treatment that was observable or describable to laypersons without medical training. Consequently, Yun needed to support his claims with expert testimony.

Because Yun did not present any expert testimony, the trial court properly dismissed this action with prejudice against all defendants. There was no error.

We affirm.³

Tappelwick, J.

WE CONCUR:

Coburn, J.

Andrus, A.C.J.

³ Given our disposition of this matter, we do not address Yun’s remaining arguments involving the personal representative of his mother’s estate and standing.

The Honorable Matthew Williams

IN THE SUPERIOR COURT OF THE STATE OF
WASHINGTON IN AND FOR THE COUNTY OF
KING

PZL CHIN YUN,

Plaintiff

- VS -

ST. FRANCIS HOSPITAL ER,
PCU and ERIC NUSSBAUM
Defendants

NO. 19-2-20974-7 KNT

Motion FOR
Reconsideration

pursuant to Civil Rule 59 of the Washington
Rules of Civil procedure.

I. plaintiff propounds the following this Court
Reconsider its order of May 1, 2020
order Granting Defendant St. Francis Hospital's
motion for Summary Judgment.

I. plaintiff Request that the Court reconsider

Motion For
Reconsideration

- 1 -

PZL CHIN YUN
PRO SE plaintiff
30823 10th Ave SE #201
Federal Way, WA 98003
252 - 128 - 4891

1 the order on CR 56(3) "4. plaintiff's
2 sur-response and supporting declaration
3 and documentation" the Court having
4 reviewed the records on the file April 27, 2020
5

- 6 : Defendant St. Francis Hospital (Hereinafter) SFH
7 : plaintiff mother Decedent (Hereinafter) MS YUN

8 INTRODUCTION

9 I. plaintiff Pil chin yun son of 93 years old mother
10 Wol R YUN (Decedent)

11 I. plaintiff Pil chin yun am competent to testify
12 regarding the facts herein

13 I. plaintiff Pil chin yun PRO SE personal
14 representative and beneficiary of Wol R YUN
15 (Decedent)

16 R.C.W 70.02.140 RCW 7.70.065 (a)(iv)

17 RCW 4.20.060(2) RCW 4.20.010 (1)

18 enclosures: Small Estates affidavit

19 RECONSIDERATION

- 20
21 1. SFH Unauthorized Released MS YUN medical
22 Records Unknown how many pages Released
23 generated on 9/10/19 1:19 PM inconsistent
24 initial authorized Released generated on 5/8/2017
9:06 AM (pages)

Motion For
Reconsideration

- 2 -

PIL CHIN YUN
PRO SE plaintiff
30823 18th AVE SE #C201
Federal Way, WA 98003
253 529 4881

Absence: Authorization to Disclose Medical
Records (HIPAA Form) RCW 70.02.205 (4)
Nonetheless Defendant's IME, attorneys making
a use for their defence Unauthorized Released
MS Yun Medical Records, on 9/10/19 1:19pm.

2. MS Yun Death due to septic shock and other
conditions contributing to death in SFH
because of delayed and malicious treatment.
WAC 246-320-010 (20)(a)(b)(c) (21)

i) enclosures: New evidence: No Blood infection
(No Sepsis, only local bacterial infection
possible showed page 40, 47 of 62 pages)

MS Yun admitted in ER, SFH 08/09/16 13:06
Between 08/09/16 13:06 to 08/10/16 00:46
(Blood collected by Lyudmila, RN 08/10/16 00:46)

ii) Blood Culture x 2 (Normal)

page SFH 000155, SFH 000156, SFH 000157
SFH 000158 SFH 000159

iii) DR. Ayesha Haroon Medical Reports on
8/11/2016 11:01 AM

" & ID: All Culture thus far remain
negative " page SFH 000132

: Blood Culture are used to detect the presence

Motion For
Reconsideration

- 3 -

PZL CHIN YUN
PRO SE plaintiff
30823 18th Ave S #c201
Federal Way, WA 98003
253-529-4891

1 of bacteria or fungi in the blood to identify
2 the type present, and to guide treatment
3 testing is used to identify a blood infection
4 (Septicemia) that can lead to sepsis, a
5 serious and life-threatening complication.

6 DR. Alice Gallo De Moraes Reports:

7 (pulmonary and critical care medicine
8 Mayo Clinic, Rochester Minnesota)

9 "Any kind of infection can trigger sepsis
10 But, certain infections such as pneumonia
11 abdominal or kidney infection, and infection
12 that affect the blood, are more likely
13 to cause sepsis. Hospital staff members
14 watch patients closely for sepsis,
15 particularly those in the emergency department
16 and in ICUs. Patients diagnosed with sepsis
17 receive plenty of IV fluids and immediately
18 given antibiotics. Early treatment of sepsis
19 usually with antibiotics and large amounts
20 of intravenous fluids (IV) improves
21 chances for survival"

22 3. Ms Yun admitted to ER. SFH
23 08/09/2016 at 13:06
24

Motion For
Reconsideration
- 4 -

PIL CHIN YUN
Pro se plaintiff
30823 10th Ave Ste 201
Federal Way, WA 98003
D 253 529 4891

- 1 i) MS YUN 8 HOURS 40 min No IV fluids
2 in ER PCU
- 3 ii) 7 Hours No antibiotic (even though Lab
4 Resulted infection in ER. 08/09/16 14:33)
- 5 iii) On called DAVID (SWAT nurse) was Unable to
6 put the PICC line. DAVID (SWAT nurse)
7 tried three attempts failed to secure a
8 patent line and gave-up But, Hospital
9 did not provide another nurse or Doctor
10 in ER. PCU (8/9/2016 6:21 PM - 8/9/2016
11 7:11 PM)
- 12 iv) There is No IV on the MS YUN from ER, PCU
- 13 v) ICU nurse attempting to put the I.V with
14 No success (08/09/16 21:15) SFH000534
- 15 vi) DR Nussbaum provided Central line inserted
16 and into misplaced tubing on the right
17 side Uncertain location DR Nussbaum No
18 Ultrasound guidance Using to procedure.
19 Three Radiologists (DR. Peter A ory, DR
20 John H peixotto, DR Robert Linville)
21 indicated misplaced Central line (Uncertain
22 location) but, DR Nussbaum, DR Girgis
23 DR Reddy, medical student (Michael Greer)
24 did not fixed the problems, Nonetheless,
they Continued to Using Central line

Motion For
Reconsideration

- 5 -

PIL CHIN YUN
Pro se plaintiff
30823 10th Ave S #C201
Federal Way, WA 98003

without the fixed.

MS YUN death possible with medication error
(errors involving wrong route of administration)

WAC 246-320-146(1)12 RCW 18.130.180(4)(14)

a) Central line DATE/Time 8/9/2016 9:46 PM
performed by: Nussbaum Eric B (page SFH 000046)
Authorized by: POTHI REDDY SEETHARAM R
(page SFH 000046)

b) see: Declaration of Defendant's Wrongful Acts
December 26, 2019 and,
Declaration of Pil Chin Yun in Support
of Defendant's Wrongful Acts
April 27, 2020

f. DR Nussbaum provided intubation to MS YUN
and Endotracheal Tube (ETT) inserted to
placed too low (ETT to Lip 22 cm page SFH 000047)

Intubation: DATE/Time 8/9/2016 11:05 PM
performed by: Nussbaum Eric B. RCW 18.130.180(4)

Authorized by: POTHI Reddy SEETHARAM R
R.C.W 18.130.180(14)

i) DR Nussbaum's Comments: Tube to be moved
back Communicated to DR. Girgis
(page SFH 000047)

ii) 8/9/2016 23:15 per physician order ETT pulled
back to 20 cm at the lip. (page SFH 000077)

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PIL CHIN YUN
pro se plaintiff
30823 18th Ave S #C201
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252 529 4291

iii) DR Nussbaum, DR Reddy, DR Girgis involving
intubated (ETT) to Ms Yun. However, No one
ETT pulled back to 20 cm at the Lip
Over 9 Hours ETT misplaced caused Ms Yun
had a lung injured (atelectasis)
No attending doctor until next day in the
morning. DR. Ayesha Haroon on 08/10/16 07:47 AM
DR Haroon chest X-Ray ordered "ETT Too low"
(page SFH 000219) However, SFH Nurses (RT)
did not following with physician order ETT
pulled back to 20 cm at the Lip. or failed
to exercise that degree of Care, Skill for Ms
Yun Care in ICU

iv) enclosures: Add New evidence page SFH 000462
(22 cm at the Lip at 08/10/16 05:36)

v) patient status (Ms Yun) paralyzed (RSI)
; Rapid Sequence Intubation (RSI) SFH 000047

DR. Keith A Lafferty MD Reports:

(American Academy of Emergency medicine
American medical Association pennsylvania
medical Society) Background

"Airway management is arguably one of
the most important skills for an emergency
physician to master because failure to
secure an adequate airway can quickly

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1 lead to death or disability Endotracheal intubation
2 Using rapid Sequence intubation (RSI) is the
3 Cornerstone of emergency airway management.
4 The decision to intubate is sometimes difficult
5 clinical experience is required to recognize
6 sign of impending respiratory failure.

7
8 5. Ms Yun Blood pressure (87/45) was very low
9 on presentation in ER but, no Vasopressors
10 (Antihypotensive agent) ordered to Ms Yun
11 in ER. PCU as well as no Vasopressors
12 at all until Ms Yun passed away.

13 6. SFH DR Anna Ellermeier (Radiologist)
14 initially improper diagnosed to Ms Yun
15 Gastric malignancy (stomach cancer)

16 SFH No medical documents cancer tests to
17 supporting diagnosed Gastric malignancy.

18 DR Anna Ellermeier (Radiologist) did not refer
19 to pathologist in SFH

20 A. pathologist is a doctor who specializes
21 in interpreting laboratory test and
22 evaluation cells, tissues and organs to
23 diagnose disease (cancer)

24
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PIL CHIN YUN
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1 MS YUN on Certificate of death August 12. 2016
2 Cause of death probable Gastric Malignancy
3 Was equivalent to failure to Diagnosis.

4 see: Declaration of Defendant's Wrongful Acts
5 page 20 (21-24), page 21 (2-23) page 22
6 (1-23) page 23 (1-23) page 24 (1-24)
7 page 25 (1-8) December 26. 2019

8 7. Defendant's I ME DR. Curtis Veal MD alleged
9 that: MR YUN'S Complaint. I Saw No
10 evidence of any medication errors. route
11 of administration errors, or negligently
12 placed endotracheal tube or Central line.
13 Additionally, because MS YUN was Critically
14 ill and Unstable vis-a-vis respiratory failure
15 and septic shock further investigation as to
16 what was certainly incurable gastric cancer
17 would not have been indicated or appropriate
18 and was absolutely not Required by the
19 standard of Care

20 Declaration of CURTIS Veal MD page 4 (22-25)
21 page 5 (1-2) See: Rule ER 602

22 Expert Testimony Not Always Necessary
23 or Conclusive

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PIL CHIN YUN
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1 The expert testimony might not be a requirement
2 in Washington if the medical malpractice lawsuit
3 hinges on "Routine" treatment issues that
4 are within the jury's Common Knowledge.

5 by David Goguen J.D

6 University of San Francisco School of Law
7 Legal editor at Nolo
8

9 In limited Circumstance, the general Rule
10 requiring expert testimony is not applied
11 Miller V Jacoby, 145 Wn. 2d 65. 7273. 33p.
12 3d 68 (2001) (expert testimony not Required
13 when medical facts are observable by a
14 layperson's sense and describable without
15 medical training):

16 McLaughlin V Cooke, 112 Wn. 2d 829. 837. 774p
17 2d 1171 (1989) ("expert medical testimony
18 [as to Causation] is not necessary if the
19 questioned practice of the profession is such
20 a gross deviation from ordinary care that
21 a lay person could easily recognize it")
22 Ripley V. Lanzer. 152 Wn. App. 286. 324 215p,
23 3d 1020 (2009)
24

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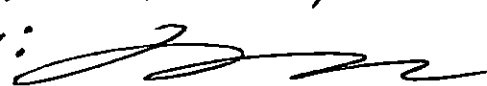
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CONCLUSION

This Court has the statutory power to Reconsider A prior order and Modify Amend or Revoke The order AT best, they have created issues of fact their motion must be denied.

DATED this ____ day of
May 2020

Judge Matthew Williams

presented by
By: 
PIL CHIN YUN
plaintiff PRO SE

Motion For
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PIL CHIN Yun
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CERTIFICATE OF SERVICE


The undersigned certified under penalty of perjury under the laws of the state of Washington that on the below date I caused to be served via U.S. Certified mail a true and correct copy of this document to:

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Fain Anderson Vanderhoff
Rosendahl O'HALLORAN
SPILLANE PLLC

1301 A street Suite 900
Tacoma WA 98402
P 253-328-7800 F 253-272-0386

DATED at Federal Way
WASHINGTON

this 11th day of May 2020


PIL CHIN YUN pro se plaintiff

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Washington State Supreme Court

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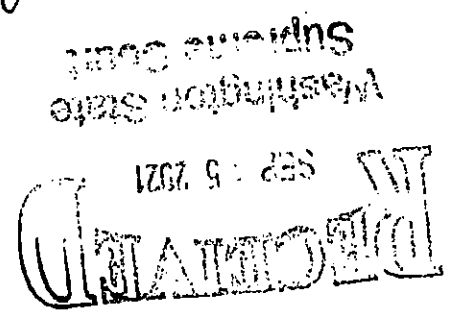
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