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VIA MAIL: Office of Health Care Quality, Senator Roger Manno  
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Office of Health Care Quality  
Spring Grove Center - Bland Bryant Building  
55 Wade Avenue  
Catonsville, Maryland 21228-4663

To Whom It May Concern:

This is to respectfully request that you reopen your investigation into my father's death at Holy Cross Hospital.

In the [final days of my father's hospitalization](#), he was, in effect, euthanized against both his wishes and mine, by the obvious withholding of treatment that was clearly needed. For reasons unknown, your agency has refused to investigate this central issue that I brought to your attention, instead choosing to cite the hospital with [paperwork deficiencies](#). I ask that you please reconsider.

Background: The day before my father died, attending physician Dr. Shahid Shamim, documented in his progress notes that my father was in acute respiratory distress, that he discussed the matter with me, that he called pulmonologist Dr. Kariya and that he ordered an ICU consult. The [death summary](#) written by Dr. Nawaz (the admitting & attending physician) adds detail, informing that Drs. Shamim and Kariya had a long conversation with me for further management because "the patient needed intubation at the time." It concludes by stating that I decided not to intubate my father, that my wishes were honored and that my father died the next day.

I took vigorous exception to the above, describing in my [complaint](#) to your agency the undocumented presence of pulmonologist Dr. Jay Weiner, who in fact *refused* my impassioned plea for intubation, telling me that my father was "dead the day he got here" before walking away together with Dr. Shamim. To reiterate: the essence of my complaint - the Alpha and Omega of what I came to you about in December of 2006, was the abandonment of my father by his attending physician, Dr. Shahid Shamim, and by the undocumented pulmonologist he called in for an emergency consult, Dr. Jay Weiner.

It would take another year-and-a-half to prove, but I did provide you with concrete proof of Dr. Shamim's abandonment of my father, in the form of Dr. Shamim's own [sworn testimony](#) that your agency accepted for review. Dr. Shamim had a very clear and unequivocal recollection of the events in question, testifying under oath to the following:

- He was my father's attending physician and he understood my father's code status to be "full code," requiring intubation.
- My father was "recovering well," his condition steadily improving, and the plan of care on March 25, 2003 was for discharge to rehabilitation.
- He found my father to be in critical condition on March 26, 2003. He determined that the central, life-or-death issue was whether my father needed intubation, and he called in pulmonologist Dr. Jay Weiner for an emergency consult.
- He did not discuss the question of intubation or code status with me.
- He ordered tests at Dr. Weiner's behest and turned care of my father completely over to Dr. Weiner.
- He left the hospital without any knowledge of, or involvement in, the urgent treatment decisions that needed to be made, even though he was the attending physician.

Dr. Shamim's notations in the medical chart make no mention whatsoever of his handing over the care of my father to Dr. Weiner, yet he remembers doing so clearly and unequivocally. Dr. Shamim's testimony matches and confirms what I have been conveying to you all along.

For perhaps the first time in your agency's history, you now have in your possession very clear and convincing evidence that a physician's actions - and the events that actually transpired, are totally at odds with the medical record entries. The obvious questions that come to mind:

- How could Dr. Shamim fail to document his handoff of my critically ill father to Dr. Weiner, and the treatment decisions that were made?
- How could Dr. Weiner fail to document his presence and his accepting of responsibility for my father's care and the crucial decisions that needed to be made?
- If Dr. Shamim turned my father's care over to a "nonexistent" doctor Weiner when my father was deteriorating and when life-and-death decisions needed to be made, who was making those decisions?
- Where is the hospital in this scenario? There are no nursing notes of substance for the entire day in question.
- Does a hospital have any obligation to ensure continuity of care and that a degrading, full-code patient gets treated?

One needs no investigative expertise to understand that answers are needed, and that a failure to get the answers or to even ask the questions is tantamount to a cover-up.

I implore you to please conduct a new and serious investigation, taking the above into consideration and holding the bad actors accountable. Posthumous respect for my father and future deterrence mandate no less.

Sincerely,

  
Alexander H. Neustadter