

## Medical Negligence Triage Service

## Free Preliminary Opinion Request Sample

## Confidential

Requestee Name: Jane Doe

Requesting Law Firm: Jane Doe Legal

Plaintiff Name: Emily Smith

**Plaintiff D.O.B:** XX/XX/XX

Ref No: 123456789

We thank you for agreeing to assist with the preliminary assessment of negligence in this case via the Medical Negligence Triage Service offered by MAG.

We take this opportunity to provide the following brief summary of facts:

- 1. In or about 2007, Ms Smith underwent keyhole surgery to her right knee. She was told by the treating specialist she would ultimately require further review with a likelihood of total knee replacement.
- 2. Approximately 9 years later, Ms Smith began consulting Dr (Orthopaedic Surgeon 1). It was recommended that a right total knee replacement occur, and Ms Smith was placed onto the public waiting list.
- 3. On or about 5 September 2017 Ms Smith underwent surgery to her right knee. She remained in hospital until 22 September 2017, despite originally being told the recovery would be quick and she would be discharged within 3 days post operatively. No explanation was offered regarding the prolonged hospital stay.
- 4. Thereafter, and despite receiving significant rehabilitation and physiotherapy, Ms Smith was experiencing significant pain and restriction in her right knee. She was also experiencing nerve related pain post operatively.
- 5. Those issues were raised with Dr (Orthopaedic Surgeon 1), who provided the opinion that the implant / prosthesis had been positioned with a 0.25-degree internal rotation, and was within acceptable margins.
- 6. Ms Smith sought a second opinion and consulted Dr (Orthopaedic Surgeon 2) in that regard. In a report dated 17 September 2018, Dr (Orthopaedic Surgeon 2) notes that "The CT does show internal rotation of the femoral component in relation to the trans epicondylar axis, which I measured to be about 7 degrees, certainly, this could be contributing to Ms Smith's symptoms...".

- 7. The HCCC investigated the issues at the request of our client. However, despite Dr (Orthopaedic Surgeon 2's) initial comments, he later revised his opinion; which later became consistent with Dr (Orthopaedic Surgeon 1's) opinion.
- 8. Ms Smith continued to experience issues with her right knee, and so consulted a third Orthopaedic Surgeon, Dr (Orthopaedic Surgeon 3). In his report of 28 June 2019, Dr (Orthopaedic Surgeon 3) stated "A CT scan had been performed previously. This shows that the femoral component is internally rotated approximately 7 degrees rather than externally rotated to 3 degrees".
- 9. Revision surgery has been suggested; however, Ms Smith is extremely hesitant and reluctant to have such surgery performed given the risks involved and the previous poor outcome.

We seek a liability opinion regarding the surgery performed by Dr (Orthopaedic Surgeon 1).

We request that an informal preliminary assessment occur, before a formal opinion is sought at cost to our client. In that regard, we are in possession of radiological scans which can be provided upon request.

If our client is to incur any charges or fees, please notify us prior to continuing further. We thank you for agreeing to assist, and we look forward to receiving your response.

Yours faithfully,
Jane Doe
Jane Doe Legal