

## CHEST DISEASE ASSOCIATES, INC.

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DOC. 20

October 19, 1987

Michael C. Zellers, Esq.  
Arter & Hadden  
1100 Huntington Bldg.  
Cleveland OH 44115

Dear Mr. Zellers:


At your request I have reviewed the hospital records of Mr. Alvester Smith from St. Lukes Hospital involving two separate admissions in October and November of 1984. I have also reviewed the depositions of Dr. Lee and Agnes Sims RN, and a letter from Dr. Robert Rogers to Mr. Kalur dated May 29, 1987. I have been asked specifically by you to comment on the probable causes of death listed by Dr. Rogers in his letter to Mr. Kalur.

Dr. Rogers feels that one of two possibilities occurred leading to Mr. Smith's death: first, that Mr. Smith vomited and aspirated while unattended developing severe respiratory failure which lead to his death, and second: that he sustained an acute myocardial infarction which lead to congestive heart failure and perhaps a fatal arrhythmia. Dr. Rogers goes on to say that the latter seems a more likely sequence of events though it is impossible to substantiate a precise cause without an autopsy.

I would agree with Dr. Rogers that an acute myocardial infarction or even myocardial ischemia could have precipitated heart failure and cardiac arrhythmias in this individual leading to his ultimate demise. I find little evidence to implicate aspiration pneumonia with subsequent respiratory failure as the cause of death. I doubt that Dr. Rogers had the deposition of nurse Sims at the time of his letter, though in her deposition she states the reason for the gap in record keeping between 9:15 and 9:55 was due to the fact that she was in constant attendance with the patient during that period. In fact, by reviewing the records and the nurse's deposition it would appear that the patient was under close supervision through his entire stay in the recovery room. I would think that an aspiration of vomitus significant to cause respiratory failure and death would have been noted and recorded by this nursing professional.

In summary, of the possibilities listed by Dr. Rogers in his letter I feel that the possibility of an acute myocardial infarction or primary cardiac process such as significant ischemia precipitating a life threatening arrhythmia is a far more likely probable cause of death than aspiration pneumonia and subsequent respiratory failure.

Sincerely,

A handwritten signature in cursive script, reading "Ronald J. Bacik" followed by the letters "FCCP".

Ronald J. Bacik, M.D., **FCCP**

RJB/jg

c.c.: file