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ALAMEDA COUNTY

DEC **3 1** 2015

CLERK APTHE SUPERIOR COURT

Attorneys for Defendant UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

> IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA IN AND FOR THE COUNTY OF ALAMEDA - NORTHERN DIVISION:

REPLY IN SUPPORT OF UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND'S DEMURRER TO FIRST CAUSE OF ACTION AND MOTIONS TO STRIKE

PORTIONS OF FIRST AMENDED COMPLAINT; REQUEST FOR JUDICIAL NOTICE

LATASHA NAILAH SPEARS WINKFIELD; MARVIN WINKFIELD: SANDRA CHATMAN and JAHI McMATH, a minor, by and through her Guardian Ad Litem, LATASHA NĀILAH SPEARS WINKFIELD,

Plaintiffs.

FREDERICK S. ROSEN, M.D.; UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND (formerly Children's Hospital & Research Center at Oakland); MILTON McMATH, a nominal defendant, and DOES Date: January 8, 2016 1 THROUGH 100.

Defendants.

Case No. RG15760730

The Honorable Robert B. Freedman

REPLY IN SUPPORT OF UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND'S DEMURRER TO FIRST CAUSE OF ACTION AND MOTIONS TO STRIKE PORTIONS OF FIRST AMENDED COMPLAINT: REQUEST FOR JUDICIAL NOTICE

Time: 11:00 a.m. Dept: 20

Date Complaint Filed: Trial: N/A

Reservation No. R-1686975

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RG15760730: Reply In Support Of UCSF Benloff Children's Hospital Oakland's Demurrer To First Cause Of Action And Motions To Strike Portions of First Amended Complaint, Request For Judicial Notice

200-9734/KAS/828749

TABLE OF CONTENTS

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RG15760730: Reply in Support Of UCSF Benioff Children's Hospital Oakland's Demurrer To First Cause Of Action And Motions To Strike Portions of First Amended Complaint; Request For Judicial Notice

200-9734/KAS/826749

TABLE OF AUTHORITIES

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3	Cases										
4	Dority v. Superior Court (1983) 145 Cal App 3d 273										
5	Estate of Griswolds v. See (2004) 25 Cal. 4th 9041										
6	Nailah Winkfield v. State of California, Case No. 4:15-cv-06042 – KÁW filed in the U.S. District Court for the Northern District of California										
7	Schabarum v. California Legislature (1998) 60 Cal.App.4th 12052										
8	Union Pacific Railroad Company v. Santa Fe Pacific Pipelines, Inc. (2014) 1344										
9											
10	:Štatutės										
11	Code of Civil Procedure §18582										
12	Health and Safety Code §7151.401										
13	Health and Safety Code §71801										
14	Uniform Determination of Death Act										
15											
16	Other Authorities										
17	National Conference of Commissioners on Uniform State Law, 12A U.L.A.										
18	(Masters Ed., 2008) Determination of Death Act pp. 777-779										
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RG15760730: Reply in Support Of UCSF Benioff Children's Hospital Oakland's Demurrer To First Cause Of Action And Motions To Strike Portions of First Amended Complaint; Request For Judicial Notice

A DETERMINATION OF DEATH IS INTENDED TO BE FINAL, FIXED AND PERMANENT, AND MUST BE FINAL TO SERVE ITS INTENDED PURPOSE

Health and Safety Code § 7180 governs the determination of death in California and expressly provides that "An individual who has sustained *irreversible* cessation of all functions of the entire brain ... is dead." Statutes must construed in a manner consistent with the ordinary meaning of the words used, and in a manner that gives effect to their intended purpose. See e.g. <u>Estate of Griswolds v. See</u> (2004) 25 Cal. 4th 904, 910-911. Consistent with its ordinary meaning, death is irreversible and final.

As defendant has previously noted, the determination of death permits medical treatment to be withdrawn (see 1/17/2014 Final Judgment Denying Petition for Medical Treatment, CHO Demurrer Exhibit B), and organs to be removed for transplant (see Health and Safety Code § 7151.40). A declaration of death also permits wills to be probated, insurance proceeds to be distributed, and it permits families to move on. To serve its intended purpose, a determination of death must be final. A provisional determination of death that is not final, fixed and permanent would have no meaning or use.

The Uniform Determination of Death Act was drafted by legal and medical authorities, it reflects accepted biomedical practices, and requires that the determination be made in accordance with accepted medical standards for determining *irreversible* brain death. See UDDA, and National Conference of Commissioners on Uniform State Laws, Prefatory Note ¶ 2, 12A U.L.A. (Masters Ed. 2008), Determination of Death Act pp.777 - 779, CHO Demurrer Exhibit H.

In December, 2013, Dr. Fisher and two other physicians determined that Jahi had suffered irreversible cessation of brain function according to American Academy of Pediatrics' Guidelines. Plaintiffs acknowledged that these Guidelines were the accepted medical standard for determining irreversible brain death in children and stipulated that Dr. Fisher had appropriately conducted the brain death examination according to these

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standards, 1/2/2014 Amended Order Denying the Petition For Medical Treatment at 6:22-7:1, CHO Demurrer Exhibit A. According to the Guidelines, the cessation of brain function was irreversible and permanent as a matter of accepted scientific fact.

Plaintiffs do not fault the findings made by Dr. Fisher. Rather they appear to be contending that even with the proper application, the accepted medical standards are unable to determine when the cessation of brain function is irreversible, and/or that brain death itself should not be used as a basis for determining death. For example, one of plaintiffs experts opines that the standard clinical diagnostic criteria are not as absolutely, 100% reliable as commonly believed. Declaration of Alan Shewmon, M.D. at page 3 ¶ 4. CHO Demurrer Exhibit C6. Dr. De Fina states that person pronounced brain dead was later found to have brain activity when more sensitive tests were used. Declaration of Phillip De Fina Ph.D., CHO Demurrer Exhibit C2.

But Uniform Determination of Death Act, and all the legislatures of all states that have enacted this statute, recognize the use of the loss of brain function as a means of defining death. And the AAP Guidelines are broadly accepted by the medical community as a means of determining whether a cessation of brain function has occurred and whether it is irreversible. It is not up to this Court or a jury in this action to reject these Guidelines and/or the UDDA based on the testimony of a handful of experts who disagree with the Guidelines. Nor is it up to this Court to reweigh the facts and findings underlying the Uniform Determination of Death Act or to decide whether brain death can or should be used as a basis for determining death. See Schabarum v. California Legislature (1998) 60 Cal App 4th 1205, 1219, C.C.P. §1858.

THE HOSPITAL DOES NOT RELY ON THE DEATH CERTIFICATE TO ESTABLISH THAT JAHI LACKS STANDING TO ASSERT A PERSONAL INJURY ACTION

In December, 2013, Jahi was determined to be irreversibly brain dead. For all the reasons discussed above and in the Hospital's moving papers, this determination was

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 intended to be a final determination. It was final before a death certificate was issued, and would arguably be final even if no Certificate had been issued.

The fact that a Death Certificate was issued does however indicates that a determination of death had been made, and that it was considered final under the law. In its ruling, the Court pointed out that the facts in death certificates are subject to rebuttal and explanation. A subsequent dispute however does not change the fact that, upon issuance, a death certificate indicates that a final determination of death has been made. In addition, plaintiffs have still failed to present authority for disputing the fact of death itself as opposed to secondary issues such as time, cause, or manner of death.

Plaintiffs are now addressing the "Death Certificate" issues in yet another forum. The Hospital asks the Court to take judicial notice of *Nailah Winkfield v. State of California*, Case No. 4:15-cv-06042 – KAW filed on December 23, 2015, in the U.S. District Court for the Northern District of California, Federal Complaint, Reply Exhibit A.

111.

THE HOSPITAL DOES NOT CONTEND THAT THE OCTOBER 2014 PROCEEDINGS HAVE PRECLUSIVE EFFECT, BUT COLLATERAL ESTOPPEL DOES APPLY TO THE DECEMBER 2013 PROCEEDINGS

A. THERE WAS NO FINAL RESOLUTION OF THE PETITION FOR RECONSIDERATION OF THE JANUARY 2014 JUDGMENT BECAUSE PLAINTIFE WITHDREW THE PETITION

As plaintiffs point out, there was no final determination of plaintiff's October 2014 Petition to have Judge Grillo reconsider his January 2014 Judgment. In response to the Petition, Judge Grillo again appointed Dr. Paul Fisher as the Court's expert, despite the objections of plaintiffs. 10/6/2014 Order Appointing Dr. Paul Fisher As Court Expert Witness, CHO Demurrer Exhibit D. Dr. Fisher submitted a letter to the Court responding to the issues raised by plaintiff's experts, disputing their findings and conclusions, and explaining why the facts asserted would not change the determination of death. 10/6/2014 Letter Of Paul Fisher, M.D., CHO Demurrer Exhibit E. Plaintiffs moved to continue the hearing on the Petition, but then dropped the matter altogether. 10/8/2014

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Case Management Order Confirming Petitioner's Withdrawal Of Petition for Writ Of Error Coram Nobis at 3:3-10, 4:21-22, CHO Demurrer Exhibit F.

In the October 2014 proceeding, Judge Grillo did note the "changed circumstances" exception to collateral estoppel, but the Petition was withdrawn before this issue could be addressed. The issue was never raised or briefed by the plaintiffs, nor did the defendants have any opportunity to address the issue.

B. THE DETERMINATION OF IRREVERSIBLE CESSATION OF BRAIN FUNCTION UNDER THE MEDICALLY ACCEPTED STANDARD IS BY DEFINITION FIXED AND PERMANENT AND DOES NOT FALL WITHIN THE EXCEPTION TO COLLATERAL ESTOPPEL

Plaintiffs contend that the Court recognized that collateral estoppel does not apply here. But the Court's ruling on the previous demurrer states that "it may or may not be appropriate for the court to make a determination in this regard at the pleading stage," and referring to the record of the December 2013 proceedings, the Court states that it "makes no binding determination as to their preclusive effect."

The changed circumstances exception to collateral estoppel applies *only* when the fact or status at issue is *not* fixed and permanent in nature. <u>Union Pacific Railroad</u> Company v. Santa Fe Pacific Pipelines, Inc. (2014) 231 Cal.App.4th 134, 181. The Defense has found no authority applying the exception to a determination of death.

For all the reasons discussed above, the determination of death under the UDDA and the accepted medical standards is intended to be final both medically and legally. To hold otherwise, a court would have to reject the broadly accepted medical standards for determining *irreversible* cessation of brain function and/or the UDDA which permits the use of irreversible brain death as a basis for making a final determination of death. The cases cited by plaintiffs in support of applying the changed circumstance exception do not pertain to the determination of death, and they not analogous to that determination and the unique factual and policy issues it raises.

C. APPLYING COLLATERAL ESTOPPEL HERE IS NEITHER UNFAIR NOR AGAINST SOUND PUBLIC POLICY

Plaintiffs point to a number of factors to be considered in applying the principles of collateral estoppel, but these considerations do not preclude the application of the doctrine here.

1. The Interests At Stake

The interest at stake in the December 2013 was of the highest order, whether Jahi should be continued on life support or whether life support could be withdrawn. No other interest would be more likely to motivate the court and the parties to fully, fairly, and finally determine whether Jahi was dead.

However, the life support issue has since been resolved. Jahi is continuing on life support in New Jersey. The issue here is simply the amount of damages plaintiffs will be able to recover. Plaintiffs would also rather live in California than in New Jersey, and apparently do not believe this is possible until Jahi is found "not dead" under California law. See Federal Complaint ¶ 230-231, Reply Exhibit A.

In opposition, plaintiffs contend "That Jahi should not be precluded from claiming her life goes on" because it is a matter of human rights and legal rights. But this assumes that Jahi is alive, and to add some perspective, in reality Jahi is not capable of claiming anything. Even if alive, plaintiffs do not present any evidence or even contend that Jahi can in any way comprehend her situation, the meaning of this lawsuit, or the affect it will have on her. The lawsuit is about who will pay for the life support the family wants to continue indefinitely.

2. The Opportunity To Litigate The Death Issue

First, the determination of death is to be made by doctors. As the court in <u>Dority v. Superior Court</u> (1983) 145 Cal. App. 3d 273, 278 recognized, Health and Safety Code § 7180 requires only that the determination be made according to accepted medical standards, and that this is a medical problem not requiring a "rubber stamp" from the courts. Although the court recognized that this process may require intervention by a

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court in some cases, it was not concerned over the expedited nature of these proceedings, ld. at 275-276.

In the present case, the determination of death was made by three physicians, and confirmed by the Court. There is no authority to suggest that plaintiffs in a medical malpractice action are entitled to further litigate these determinations in order to support their case for tort damages.

Moreover, the December 2013 proceeding was not informal. Motions and Petitions were filed, opposition briefs were submitted, an independent expert was appointed by the Court, hearings were held, medical records were admitted, the doctors: who made the brain death determinations submitted declarations and testified before the Court, the law was analyzed and applied, objections were made and ruled on, and formal orders and a final judgment were issued. 1/2/2014 Amended Order Denying the Petition For Medical Treatment at 2:7-21, CHO Demurrer Exhibit A: 1/17/2014 Final Judgment Denying Petition for Medical Treatment, CHO Demurrer Exhibit B. In addition, plaintiffs withdrew their request to offer the testimony of their expert. Dr. Paul Bryne with the Court noting that it appeared that there was some question as to whether he would qualify given his religious and philosophical approach to the definition of death. 11/2/2014 Amended Order Denying the Petition For Medical Treatment at 14:3-15, CHO Demurrer Exhibit A. Although appeal was not taken, appellate review was available.

Finally, plaintiffs had another opportunity to more fully litigate the death issue in October 2014 when it submitted the Declarations of Philip De Fina, Ph.D., Calixto Machado, M.D., Charles J. Prestigiacoma, M.D., Elena B. Labkovsky, Ph.D., and Alan Shewmon, M.D. in support of its Petition asking Judge Grillo to reconsider the January 2014 Judgment, CHO Demurrer Exhibit C 1-6.

But they elected to drop that Petition, deciding instead to re-litigate these same issues in the present tort action, and have now raised the issues again in federal court in what appears to be little more than attempts to find a more favorable forum. The new federal complaint will require the court to answer the same question: Is Jahi legally dead

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under California law. The federal complaint appears to be based on the testimony of the same physicians and the same facts submitted in the October 2014 proceedings, which are also now before this Court. Not only are plaintiffs seeking yet another forum in which to litigate the death issue, they have not named CHO or any of the physicians named in the medical malpractice action, apparently attempting to resolve this matter without opposition from these clearly interested parties. Federal Complaint, Reply Exhibit A.

The death issue has been fully litigated. Neither law nor equity entitle plaintiff to litigate this issue further.

3. The Burden of Proof

Disparate burdens of proof do not weigh against the application of collateral estoppel here. In the December 2013 proceeding Judge Grillo concluded that the Hospital must prove death by clear and convincing evidence. 1/2/2014 Amended Order Denying the Petition For Medical at 16:9-22, CHO Demurrer Exhibit A. In the prior action, defendants, not plaintiff, had the burden to prove death and it was a high burden.

4. Sound Public Policy

A determination of death that is not final and permanent serves no purpose. The public policy interests at stake in maintaining the integrity and finality of the medical and judicial determination of death far outweighs a plaintiff's desire to maximize monetary damages in a tort action. Neither law nor equity requires setting aside the principles of collateral estoppel and the interests they serve in this case.

The medical community has already addressed question of whether Jahi is still alive, and broadly accepted medical science has determined that she is not. The American Academy of Pediatrics' Guidelines were developed by a task force that included the Society of Critical Care Medicine (section on Critical Care and section on Neurology), the American Academy of Pediatrics, and the Child Neurology Society, and are broadly accepted by the medical community as the standard for determining irreversible brain death in children. 10/6/2014 Letter of Paul Fisher M.D., Exhibit D at 1¶3, 4, and 16-18. If plaintiffs and their experts disagree, they must address their

concerns on these issues to the medical community that approved the medical standards for determining irreversible brain death, and the legislatures that enacted the Uniform Determination of Death Act. As a matter of sound public policy, these are not matters appropriately determined on a case by case basis by courts or juries in individual tort actions.

A final determination of death was made according to the accepted medical standards and confirmed by the Court. The principles of collateral estoppel apply and preclude the re-litigation of this issue here.

IV.

CONCLUSION

Jahi is legally dead under California law. There are no grounds for re-litigating this issue. Jahi does not therefore have standing to assert a personal injury cause of action. The demurrer to the first cause of action should be sustained. The conditional phrase "In the event that it is determined that Jahi succumbed to the injuries caused by the negligence of the defendants" (FAC at 13:27) improperly ignores the determination of death and contemplates a re-litigation of this issue, and it should be stricken.

Dated: December 31, 2015

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Attorneys for Defendant UCSF BENIOFF CHILDREN'S

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