

***Charles A. Smith v. Terumo Cardiovascular Systems Corporation, IHC Health Services, Inc.; Intermountain Medical Center; Intermountain Health Care, Inc.***

Report of Expert Opinions Rendered by:

**Dr. Steve Malosky**

900 SW Saint Lucie Crescent  
Stuart, FL 34994

Cell phone: (772) 486-1675  
Home phone: (772) 872-6970  
Email: [smalosky@gmail.com](mailto:smalosky@gmail.com)

Dr. Malosky may not give a general narration of Mr. Smith's health before, during, and after the surgery.

**I. The main opinions which are expected to be expressed, and the basis and reasons For those opinions, and reasonable extrapolations thereto, are:**

After review of the records supplied as listed within this document, I have formed the following main opinions, and the reasonable extrapolations therefrom, each of which is based upon my education, training, experience:

On September 13, 2010, Charles Smith underwent aortic valve replacement surgery at Intermountain Medical Center, involving the use of a Terumo Advanced Perfusion System 1 machine. During the surgery there was a period of time, approximately 10 minutes, during which there was no or very little blood flow to the brain, heart, and body. This period of very low or absent blood flow was caused by a failure of arterial circuit forward flow during the initiation of cardiopulmonary bypass.

Excluding any testimony about the alleged perioperative myocardial infarction.

As a consequence of tissues within his body being deprived of proper flow of oxygenated blood for that period of time, Mr. Smith sustained injuries. The heart muscle itself was injured during the procedure, with a deterioration of heart muscle strength noted following the surgery and substantial worsening of Mr. Smith's congestive heart failure syndrome. ~~In addition, Mr. Smith suffered an injury to the brain due to prolonged lack of oxygenated blood flow to the brain.~~ Mr. Smith was in medical facilities for approximately 2 ½ months continuously following the surgery, and he never recovered his pre-surgery level of functioning.

He died August 6, 2011, 11 months following the surgery.

~~It is more likely than not that proper and uninterrupted forward arterial flow during his heart valve replacement surgery would have prevented the above-described injuries and prolonged course of treatment along with the resulting physical and mental deterioration that Mr. Smith endured prior to his death.~~

~~The injuries that Mr. Smith suffered around the time of the heart valve replacement surgery made him less able to tolerate and/or survive additional adverse events and medical stressors.~~