\$150,000 Settlement for Dog Bite

In December 2017 Plaintiff went outside to the rear patio of her home where she discovered a dog on her patio with Defendant running after him across Plaintiff's backyard.

While Plaintiff was on her patio, the dog suddenly and unexpectedly, jumped onto Plaintiff at which point Defendant was able to retrieve him and began to bring him back towards their adjacent home. As Plaintiff turned around to walk back into her house, Defendant lost control of the dog who ran directly towards Plaintiff, attacked her, and violently bit her upper thighs bilaterally. The dog bites left gaping open wounds causing Plaintiff to bleed excessively with immense pain. Defendant was able to pull the dog away and return him to her home.

Plaintiff was taken via ambulance to the hospital. She was bleeding profusely from her thighs bilaterally and immediately underwent a consultation by infectious disease physician. The wounds were cleaned, drained, and packed with antibiotic treatment. She was required to ultimately undergo fifteen (15) separate IV antibiotic infusions. Her open wounds were re-approximated via numerous sutures by a plastic surgeon. Over the course of the next several weeks, Plaintiff discovered the open wounds on the medial aspect of her right posterior thigh were healing with painful, residual firm mass that were tender to touch.

A few days later Plaintiff returned to the hospital for increasing complaints of pain, swelling and redness to the back of her legs. She was directed to undergo a CT scan to her right lower extremity. This test revealed a focal collection within the subcutaneous soft tissues along the posterior medial aspect of the right thigh, measuring $1.3 \times 2.2 \times 4.4$, suggestive of hematoma vs. abscess with associated air locules. Plaintiff consulted with an infectious disease doctor and it was noted that Plaintiff was suffering from increasing right thigh pain with an inability to walk or sit. Based on the examination, the doctor revealed that she suffered three (3) puncture wounds with raised deformities and bruising, measuring 10×10 centimeters.

In January 2018, she consulted plastic surgeon and he noted that she was suffering from a painful firm mass appearing to be infected or necrotic phlegmon. He recommended surgery to treat this condition and also recommended in the interim that she undergo a right thigh CT scan. The right thigh CT revealed a $3.6 \times 1.0 \times 4.3$ cm fluid collection with mild peripheral enhancement and associated soft tissue induration in the posteromedial distal right thigh at the site of recent dog bite suggestive of abscess formation.

Plaintiff underwent surgery which consisted of resection of skin and subcutaneous tissue containing chronic inflammation, fat necrosis, and recent hemorrhage including, but not limited to, right thigh ligament measuring 5.25-5 cm in greatest dimension, 1.0-2.5 cm in thickness; 2 irregular, ulcerated and partially healed lesions, ranging from 0.4-1.0 cm in greatest dimension, and deep tissue sectioning $2.5 \times 1.7 \times 0.5$ cm hemorrhagic cavity. She was examined post-operatively by treating physician and ultimately discharged. Plaintiff presently suffer from extensive permanent, scarring and disfigurement in or around her right thigh. The case settled \$150,000.00, prior to the scheduling of a trial.

No experts retained as of the time of settlement.

No lost wage claim asserted. No defenses with respect to liability or damages.