

\$350,000 Settlement for Pedestrian Accident

In October 2017, Plaintiff was a pedestrian, in the parking lot located at 94 US Highway 46 West, located in Hackettstown, New Jersey. At the aforesaid time and place, Defendant was the owner and operator of a motor vehicle, which was traveling east on US Highway 46, when he swerved into the westbound lane striking a vehicle head on, then proceeded to drive through the parking lot where Plaintiff was standing, when he struck a second vehicle, then struck Plaintiff.

Plaintiff's right ankle was severely fractured and he was airlifted to the hospital from the scene of accident. The x-ray of his right ankle demonstrated a comminuted fracture with multiple fracture fragments through the fibular shaft. The x-rays of his right tibia and fibula showed fracture of the proximal and distal fibula. He was thereafter referred to an orthopedic surgeon who diagnosed Plaintiff with an open ankle injury involving a fracture of the right lateral malleolus and an open ankle arthrotomy with a large medial laceration. Due to the extensive nature of Plaintiff's injuries, on that same date of the consultation, the surgeon performed an irrigation and debridement of right open ankle fracture dislocation and open treatment of the right syndesmotic disruption, by placing 2 Stryker titanium 3.5mm cortical screws from the VariAx foot and ankle set. During surgery it was noted that Plaintiff's fracture was a high lateral malleolus fracture with significant medial clear space widening. He was thereafter admitted into the hospital for four days. Plaintiff followed up with his orthopedic surgeon postoperatively for eleven weeks. In January 2018 X-rays were taken and it showed a healed fibula fracture. However, there appeared to have been interval widening of the medial clear space that was different from X-Rays taken in his previous visit. Due to the interval change and possible widening of the medial clear space, Plaintiff was ordered another CT scan which revealed anterior subluxation of his fibula within the syndesmosis and that it was not a perfectly congruent articulation. It also confirmed that the medial clear space was widened to a measurement of greater than 5mm. As a result of those findings, Plaintiff was recommended for future reconstructive surgery to reduce the syndesmosis anatomically and restore the ankle mortise. He was to remain non-weight bearing for an additional three weeks. He followed up again in February 2018 and there was no interval worsening of the medial clear space and no interval changes in the hardware placement. He was instructed to be weight bearing at a rate of 25% of his body weight and recommended for

physical therapy for four weeks.

The case settled for \$350,000.00 prior to the scheduling of a trial.