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UNITED STATES DISTRICT COURT DENVER, COLORADO

SEP 03 2024

JEFFREY P. COLWELL

CLERK

### IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLORADO

Civil Action No.

(To be supplied by the court)

ALONZO MARLOW Plaintiff

٧.

UNITED STATES OF AMERICA

, Defendant(s).

(List each named defendant on a separate line. If you cannot fit the names of all defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Section B. Do not include addresses here.)

#### PRISONER COMPLAINT

#### NOTICE

Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Plaintiff need not send exhibits, affidavits, grievances, witness statements, or any other materials to the Clerk's Office with this complaint.

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#### A. PLAINTIFF INFORMATION

You must notify the court of any changes to your address where case-related papers may be served by filing a notice of change of address. Failure to keep a current address on file with the court may result in dismissal of your case.

ALONZO MARLOW # 32522-007, P.O. Box Key, Florence, CO. 81226 (Name, prisoner identification number, and complete mailing address)

(Other names by which you have been known)

Indicate whether you are a prisoner or other confined person as follows: (check one)

- Pretrial detainee
- \_\_\_\_ Civilly committed detainee
- Immigration detainee
  - Convicted and sentenced state prisoner
- X Convicted and sentenced federal prisoner
  - Other: (Please explain)

#### B. DEFENDANT(S) INFORMATION

Please list the following information for each defendant listed in the caption of the complaint. If more space is needed, use extra paper to provide the information requested. The additional pages regarding defendants should be labeled "B. DEFENDANT(S) INFORMATION."

Defendant 1: UNITED STATES OF AMERICA, (Name, job title, and complete mailing address)

At the time the claim(s) in this complaint arose, was this defendant acting under color of state or federal law? \_\_\_\_ Yes \_\_\_ No (*check one*). Briefly explain:

Defendant I is being sued in his/her \_\_\_\_ individual and/or \_\_\_\_ official capacity.

Defendant 2: (Name, job title, and complete mailing address) At the time the claim(s) in this complaint arose, was this defendant acting under color of state or federal law? \_\_\_\_ Yes \_\_\_\_ No (check one). Briefly explain: Defendant 2 is being sued in his/her \_\_\_\_ individual and/or \_\_\_\_ official capacity. Defendant 3: (Name, job title, and complete mailing address) At the time the claim(s) in this complaint arose, was this defendant acting under color of state or federal law? \_\_\_\_ Yes \_\_\_ No (*check one*). Briefly explain: Defendant 3 is being sued in his/her \_\_\_\_\_ individual and/or \_\_\_\_\_ official capacity.

#### C. JURISDICTION

Indicate the federal legal basis for your claim(s): (check all that apply)

42 U.S.C. § 1983 (state, county, and municipal defendants)

\_\_\_\_\_ Bivens v. Six Unknown Named Agents of Fed. Bureau of Narcotics, 403 U.S. 388 (1971) (federal defendants)

X Other: (please identify) Federal Tort Claims Act 28U.S.C. \$\$ 13460 and 2671-2680.

#### D. STATEMENT OF CLAIM(S)

State clearly and concisely every claim that you are asserting in this action. For each claim, specify the right that allegedly has been violated and state all facts that support your claim, including the date(s) on which the incident(s) occurred, the name(s) of the specific person(s) involved in each claim, and the specific facts that show how each person was involved in each claim. You do not need to cite specific legal cases to support your claim(s). If additional space is needed to describe any claim or to assert additional claims, use extra paper to continue that claim or to assert the additional claim(s). Please indicate that additional paper is attached and label the additional pages regarding the statement of claims as "D. STATEMENT OF CLAIMS."

CLAIM ONE: (See Attachment)

Supporting facts:

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#### E. PREVIOUS LAWSUITS

Have you ever filed a lawsuit, other than this lawsuit, in any federal or state court while you were incarcerated? \_\_\_\_ Yes X No (*check one*).

If your answer is "Yes," complete this section of the form. If you have filed more than one previous lawsuit, use additional paper to provide the requested information for each previous lawsuit. Please indicate that additional paper is attached and label the additional pages regarding previous lawsuits as "E. PREVIOUS LAWSUITS."

Name(s) of defendant(s):

Docket number and court:

Claims raised:

Disposition: (is the case still pending? has it been dismissed?; was relief granted?)

Reasons for dismissal, if dismissed:

Result on appeal, if appealed:

#### F. ADMINISTRATIVE REMEDIES

WARNING: Prisoners must exhaust administrative remedies before filing an action in federal court regarding prison conditions. See 42 U.S.C. § 1997e(a). Your case may be dismissed or judgment entered against you if you have not exhausted administrative remedies.

Is there a formal grievance procedure at the institution in which you are confined?

X Yes No (check one)

Did you exhaust administrative remedies?

X Yes \_\_\_\_ No (check one)

#### G. REQUEST FOR RELIEF

State the relief you are requesting or what you want the court to do. If additional space is needed to identify the relief you are requesting, use extra paper to request relief. Please indicate that additional paper is attached and label the additional pages regarding relief as "G. REQUEST FOR RELIEF."

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#### H. PLAINTIFF'S SIGNATURE

I declare under penalty of perjury that I am the plaintiff in this action, that I have read this complaint, and that the information in this complaint is true and correct. See 28 U.S.C. § 1746; 18 U.S.C. § 1621.

Under Federal Rule of Civil Procedure 11, by signing below, I also certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending or modifying existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

Plaintiff's signature)

(Revised November 2022)

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### D. \_\_\_\_\_STATEMENT OF CLAIMS)

Plaintiff Alonzo Marlow brings this action pursuant to the Federal Tort Claims Act and seek an award of \$400,000.00 from Defendant United States of America, for the negligence, malpractice, wrong cloings, and omissions of its employees, agents, and servants in the course of their employment. Plaintiff alleges as follows:

### INTRODUCTION

1. Plaintiff Alonzo Marlow is a federal prisoner serving a custodial sentence under the care and supervision of the Bureau of Prisons ("BOP"). At all times relevant to claims alleged herein Plaintiff was an immate at the BOP's ADX facility.

2. Defendant United States of America ("United States") is responsible for Managing and operating the BOP. The BOP is the federal government agency within the United States Department of Justice ("DOJ") responsible for administering all federal correctional institutions, including ADX.

3. References to "Defendant", include the United States, when used to identify specific agents and employees of Defendant United States, whom committed acts of negligence, malpractice, wrong doing, and/or omission in the course of their employment.

4. Pursuant to Title 18, U.S.C. 3 4042, "Highe Bureau of Prisons, under the direction of the Attorney General, shall... provide for the safekeeping, care, and subsistence of

all persons charged with or convicted of offenses against the United States ..... "

5. Title 18, U.S.C. § 4042 imposes duty upon Defendant United States, the BOP, and its employees, to provide health care access to immates in its custody. Section 4051 expressly states the BOP "Director shall ensure that all prisoners receive adequate health care."

6. Pursuant to BOP Arogram Statement 6013.01, immates "have the right to report complaints of pain to Etheir] health care provider, have Etheir] pain assessed and managed in a timely and medically acceptable manner, be provided information about pain and pain management, as well as information on the limitations and side effects of pain treatment.

7. Pursuant to BOP Arogram Statement 6031.04, the BOP has a duty to make "Urgent Care services... available at all times, either through on-site providers or community emergency services." "True medical emergencies will be managed at the time staff become aware," pursuant to Florence Complex Supplement FLX 6031.01(3)L.

8. The ADX Admission and Orientation Handbook details inmate patient rights and states in relevant part: EyJou have the right to health care ... EyJou have the right to address any concern regarding your health care to any member of the institution staff... EyJou have the right to receive prescribed medications and treatments in a timely manner....

9. The statutes, program statements, and immate rights described in paragraphs 4 thru 8 place duty upon Defendant United States and its employees, to provide Plaintiff with ready access to competent medical care, and conduct immate health care access in a fashion that permits prisoners complaints to be evaluated in a professional manner that results in timely, responsible, and adequate treatment.

## FACTUAL BACKGROUND

April 28,2022 Negligence and Medical Malpractice

10. ON April 28,2022, Plaintiff was housed at the ADX control unit located in Florence, Colorado. Inmates at the control unit are confined 23 to 24 hours each day in single occupancy cells. Each cell contains a toilet, sink, shower, concrete bed, shelf and stool.

11. On April 28,2022, at or around 3 am, Plaintiff felt a sharp pain in his back after leaving bed to relieve himself. Moments later Plaintiff heard a pop sound before he lost function of his legs and collapsed to the floor.

12. Severe pain began radiating down the predominativity left side of Plaintiff's lower body and **back**. Plaintiff's buttocks, groin, legs, and feet becan le numb, rendering Plaintiff unable to stand, walk, or reach the emergency distress button located in the cell.

13. Minutes later Plaintiff crawled to the cell sallyport bars, rolled onto his right side, and lay on the floor awaiting officers to make their security rounds.

14. Approximately 20 minutes later officer Stewart observed Plaintiff on the floor in medical distress, and summoned an unknown Lieutenant ("Lt.") officer, whom arrived at Plaintiff's cell about 35 minutes later.

15. Plaintiff advised the Lt. that he was experiencing a medical emergency, was in excruciating pain, numb from the waist down, and unable to stand or walk. The Lt. stated that there was no medical staff at the facility, and further stated that medical staff would come see Plaintiff as soon as they were available.

16. In the above instance, Plaintiff was suffering an acute medical emergence and Defendant United States negligently and carelessly failed to provide Urgent Care services pursuant to BOP policy. Plaintiff's medical emergency was not managed at the time that staff became aware, as required by BOP policy.

17. Defendant United State's negligent delay in providing emergency/urgent medical care appravated Plaintiff's condition and caused more severe injuries.

At or around 11:00 a.m., Defendant Physician Assistant ("PA.") Seroski arrived at Plaintiff's cell, observed Plaintiff lying on the floor in obvious pain and medical distress, and stated, "what's wrong with you get up and come to the bars."

19. In agonizing pain, Plaintiff told P.A. Seroski that: 1) he had experienced a sharp pain in his back before hearing a "pop" and collapsing to the floor; 2) severe pain had radiated down the left side of his back and leg before his entire body below the waist went numb; and 3) he was currently unable to stand or walk.

20. P.A. Seroski told Plaintiff to get up and walk over here, suggesting that Plaintiff was feigning inability to stand or walk. Plaintiff restated that he was unable to stand or walk before crawling to P.A. Seroski at the cell bars.

21. P.A. Seroski asked Plaintiff if he had Ibuprofen, and Plaintiff responded that he was taking Ibuprofen, but it was not working for the pain he felt. P.A. Seroski directed Plaintiff to "take more" (Ibuprofen), and further stated that she would issue Plaintiff Sulindac.

22. Upon information and belief, Sulindac is an anti-inflammatory drug ineffective for treating the degree of injury or pain Plaintiff was suffering, and Sulindac should not be prescibed or taken with Ibuprofen.

23. P.A. Seroski Negligently, carelessly, and wrongfully directed Plaintiff to "take more" Ibuprofen, without first quantifying precisely what "take more" equated to in terms of safe dosage, and further committed medical malpractice by directing Plaintiff to take a dangerous quantity and combination of drugs that she well knew could cause gastrointestinal bleeding, organ damage, or death.

24. Based on Plaintiff's complaints and symptoms on April 28,2022, P.A. Seroski should have recognized that Plaintiff was experiencing more than mere sciatica, and immediately referred Plaintiff to a neurologist or neurosurgeons for diagnostic tests. P.A. Seroski failed to do the above mentioned. 25. On April 28,2022, P.A. Seroski negligently, carelessly, and wrongfully failed to appropriately examine, diagnos, or treat Plaintiff. P.A. Seroski failed to touch the Plaintiff in any way to assess the extent of his injury, or perform the type of testing necessary to determine if Plaintiffs' injury was emergent in nature.

26 P.A. Seroski's Negligence on April 28,2022, breached the standard of care owed Plaintiff, and caused direct injuries to Plaintiff, as well as other injuries resulting from the careless delays in providing urgently needed treatments and/or tests.

27. From April 28,2022 to May 2,2022, Plaintiff's daily activities were substantially altered as Plaintiff was forced to crawl around his cell in excruciating pain. Plaintiff took the Sulindae along with increased doses of Ibuprofen as directed by P.A. Seroski, which caused additional abdominal pain. At every opportunity Plaintiff pleaded with officers for pain relief and medical aid. Plaintiff received neither.

28. On May 2, 2022, at or around 12:00 NOON, housing unit officers directed P.A. Seroski to Plaintiffs cell as a result of Plaintiffs persistent pain and medical distress complaints.

## May 2-3, 2022 Negligence/Malpractice

29 P.A. Seroski orrived at Plaintiff's cell about 12:15 p.m. on May 2,2022, and observed Plaintiff lying on the floor in clear medical distress. P.A. Seroski then entered Plaintiff's sallyport with unrestrained anger and demanded that Plaintiff get up and walk to the bars. 30. Plaintiff explained to P.A. Seroski that he was experiencing the worst pain of his life, and that the Sulindac and Ibuprofen increase were having no effect on his pain, which had grown worse. Plaintiff further advised P.A. Seroski that he was experiencing abdominal pain and seeing blood in his stool, unine, and vomit.

31. P.A. Seroski hostilely declared, "aint nothing wrong with your you're just doing this to get pain medication."

32. Plaintiff told P.A. Seroski that he had no history of drug abuse, and no desire to take any kind of medication, unless it was absolutely needed. Plaintiff made it abundantly clear that he was in dire need of help.

33. P.A. Seroski took a unive sample from Plaintiff and angrily stated that she would order a shot. P.A. Seroski further stated that Plaintiff should stop taking Ibuprofer.

34. Prior to May 2,2022, P.A. Seroski negligently and carelessly failed to advise Plaintiff of the medical hazards or ramifications, that were likely to occur as a result of her directing Plaintiff to "take more" Ibuprofen in combination with Sulindac. But for P.A. Seroskis negligence, Plaintiff would not have injured himself by taking dangerous/harmful amounts of Ibuprofen with Sulindac.

35. IN a later BOP Health Services document, P.A. Seroski wrongfully omitted the fact that it was she who directed Plaintiff to take increased dosage of Ibuprofen with Sulindac. 36. On the evening of May 2,2022, medical staff member RN. Huddleston came to Plaintiff's cell and administered a 30 MG: Ketoralac Injection for pain Management. The injection failed to mitigate Plaintiff's pain, and Plaintiff continued his complaints to staff as he suffered in agony.

37. Plaintiff's steadfast complaints of radiating pain, lower body numbress, difficulties univating, ambulation difficulty, and other verbally expressed symptoms, should have alerted Defendants P.A. Seroski and MD. Oba that Plaintiff was experiencing a neurosurgical emergency that should be treated immediately.

38. MD Oba and PA. Seroski each negligently, carelessly, and wrongfully failed to order an immediate MRI, or perform a CT and myelogram on May 2 or May 3, 2002, all of which would have detected Plaintiff's injuries and sources of pain.

39. On the morning of May 3,2022, BOP officers transported Plaintiff to the ADX Heath Services Department via wheelchair. Plaintiff cried in pain as he was transported, and had to be held up by officers as he cried in pain during his x-rays.

40. Several hours later, Plaintiff was taken to the St. Thomas More Hospital Emergency Room ("ER") in sever pain. Plaintiff was examined for flank and abdominal pain. Plaintiff was diagnosed with an acute kidney injury due to devated creatine. Plaintiff's kidney injury was caused by P.A. Seroski's directive to "take more" Ibuprofer in combination with Sulindac. 41. Plaintiff was provided effective pain relief while at the hospital ER, and returned to the ADX with a Giabapentin prescription for pain management.

42. Upon Plaintiff's return to ADX, MD. Oba and P.A. Seroski reviewed the ER providers notes and discharge medications, then negligently refused to provide the Gabapentin pain management medication to Plaintiff as his pain began to return.

H3. M.D. Oba and P.A. Seroski wrongfully gave Plaintiff a Oxcarbazepine tablet prescription instead of Gabapentin prescribed by ER providers. The Oxcarbazepine prescription provided no pain relief, and Plaintiff continued to suffer in agonizing pain.

44. In the days that followed, P.A. Seroski repeatedly observed Plaintiff on the floor of his cell in pain and medical distress. Each time Plaintiff asked for his Gabapentin pain management prescription, P.A. Seroski retorted "you can't have it"

45. From as early as May 5,2022, both M.D. Oba and P.A. Seroski were aware that Plaintiff was suffering from a clisc herniation that, left untreated, could lead to cauda equina syndrome.

46. After becoming aware of Plaintiff's disc herniation injury, M.D. Oba and P.A. Seroski negligently and carelessly failed to take immediate action, and otherwise continued to delay testing or treatment for Plaintiffs injury. Defendant United States breached its duty to mitigate Plaintiff's unlecessary pain and suffering.

## May 12,2022-September 2022 Negligence/Malpractice.

47. On the morning of May 12, 2022, MD. Oba observed Plaintiff lying on the floor of his cell in medical distress and unable to stand or walk. M.D. Oba noted that Plaintiff's condition was unchanged from an earlier May 5, 2022 examination, then arranged Plaintiff's immediate transfer back to the St. Thomas More ER for "acute herniated left L5 disc."

48. M.D. Oba's observation, actions, and notes on May 12,2022, confirm that both P.A. Seroski and M.D. Oba, were aware of the severity and emergent nature of Plaintiff's injuries from at least as early as May 5,2022, and negligently failed to provide adequate medical care.

49. Plaintiff advised ER Providers of his symptoms and unreleniting, then explained that P.A. Seroski and M.D. Oba refused to give him the gabapentin prescribed for pain management.

50. After evaluating Plaintiff, ER Providers suspected a bulging disc and attempted to perform an MRI. Plaintiff was unable to tolerate the pain and the MRI could not be performed. ER Providers were unable to positively determine Plaintiffs injury, and concluded that Plaintiff should be scheduled for an outpatient MRI, so that Plaintiff could be sedated while an MRI was performed.

51. Plaintiff was discharged from the ER with specific directions that he "CONTINUE these medications which have NOT CHANGED," one of which was gabapentin. Plaintiff was further directed to return to the emergency room for worsening or new symptoms," per ER Provider.

52. Upon Plaintiff's return from the ER on May 12, 2022, M.D. Oba and P.A. Seroski Wrongfully refused to provide Plaintiff's Gabapentin pain management medication. Plaintiff was instead given woefully ineffective pain medication that did nothing to abate Plaintiff's pain or suffering.

53. In the following days Plaintiff filed multiple grievance and requests to receive his Gabapentin prescription. Each request was denied or ignored. Plaintiff also repeatedly advised M.D. Oba and P.A. Seroski that he was in extreme pain, and experiencing new symptoms such as loss of bowel control.

54. Defendant United States, M.D. Oba, Nor P.A. Seroski provided any help or effective pain relief for Plaintiff during the events described in paragraphs 52 and 53, and Plaintiff continued to suffer in agonizing pain.

55. In an effort to cut medical expenses, M.D. Oba and Defendant United States wrongfully disregarded ER Providers recommendation for an off site MRI, and instead scheduled Plaintiff for an on site MRI.

56. M.D. Oba and Defendant United States negligently and carelessly scheduled Plaintiff for an on site MRI, with full knowledge that on site MRI does not allow for sedation, which was a necessity for a successful MRI, given the degree of pain Plaintiff. was experiencing.

57. With full knowledge and understanding that Plaintiff was in urgent need of an MRI, from June 5,2022 through July 24,2022, M.D. Oba and Defendant United States negligently fail to perform a successful MRI on Plaintiff.

### October 2022 - November 2022 - December 2022 Negligence

58. On October 12,2002, Plaintiff was provided a successful off site MRI with sedation. M.D. Oba, P.A. Seroski, and Defendant United States negligent delay in scheduling Plaintiff for an off site MRI caused Plaintiff's injury to go undiagnosed, and further caused additional and more severe injuries.

59. On the morning of October 12,2022, with the results of Plaintiff's MRI still pending, New ADX P.A. McClinton almost instantly recognized that Plaintiff was suffering from a disc protrusion. P.A. McClinton immediately requested an urgent neurosurgery consult to avoid further delay in surgical intervention.

60. Plaintiff's October 12,2022 MRI results later revealed that Plaintiff was suffering severe central spinal canal stenosis, severe crowding of the nerves, bilateral facet hypertrophy, annular fissuring, disc bulge, and other serious injuries.

GI. MD. Oba and P.A. Seroski negligently failed to recognize and/or acknowledge Plaintiff's injuries and urgent need for surgical intervention. P.A. McClinton in a matter of minutes recognized what evaded M.D. Oba and P.A. Seroski for Months, then took immediate action.

62. But for the negligent, careless, and incompetent inaction by M.D. Oba and P.A. Seroski, the magnitude of the injuries described in paragraph 60 would not have been as severe, and may not have occurred at all.

63. Days after Plaintiff's MRI, he began to have difficulty urinating and defecating. Plaintiff experienced several accidents wherein he fouled his pants, and was forced to suffer the indignity of being unable to maintain basic self care, because he was not helped. 64. Despite recognition that Plaintiff was in need of immediate surgical attention, Defendant United States carelessly further delayed Plaintiff surgical intervention until November 28,2022. But for Defendant's negligent delay in arranging Plaintiff's decompression surgery, Plaintiff would not have developed additional injuries, including but not limited to, full blown cauda equina syndrome and foot drop.

65. Post surgery on November 28,2022, ADX negligently and carelessly transported back to ADX, before Plaintiff's recovery process and physical therapy was either started or completed. Plaintiff was placed in his ADX cell immobilized, then left to stew in his own unine and excrement until November 30,2022.

66. On the morning of November 30,2022, P.A. McClinton observed Plaintiff in his cell distressed. P.A. McClinton alerted ADX officials to the apparent mix up in Plaintiff return to ADX. P.A. McClinton requested that Plaintiff be returned to St. Francis Medical Center to begin recovery and physical therapy.

67. Upon information and belief, Plaintiff was prematurely returned back to ADX, in a deliberate effort to skirt the cost of Plaintiff's recovery and phsical therapy.

68. On November 30,2022 at Bround 12:00 Noon, Defendant officers Ingram, and Compose placed Plaintiff in body chains, before lifting Plaintiff into a wheel chair. Moments later Lt. Ingram and Compose haphazardly attempted to carry Plaintiff down a flight of stairs while seated in the wheelchair.

69. Lt. Ingram and officer compose negligently and recklessly dropped Plaintiff down the stairs resulting in the loss of consciousness and suture bleeding. Upon

information and belief, the events described in paragraphs 68 and 69 were captured on ADX surveillance cameras.

70. Lt. Ingram and officer Compose had no discretion to attempt a maneuver so dangerous as carrying Plaintiff down a flight of stairs while seated in a wheelchair. There was a readily accessible gurney available, for the specific purpose of moving immobile inmates up or down stairs.

71. On the afternoon of November 30,2022, Plaintiff was transported back to St. Francis Medical Center, and the following day to St. Thomas More Hospital. Plaintiff was returned to ADX on December 18,2022, and was recovering well without any significant problems.

72. On the afternoon of December 20,2022, Plaintiff was transported to the ADX Health Services Department for X-ray. Defendant X-ray Technician Higgins directed officers Gionzalez and Medina to lift Plaintiff from the wheelchair and seat him on the X-ray table.

73. As Plaintiff was being lifted from the wheelchair he immediately expressed his disconifort and warned of impending pain. Plaintiff stated clearly that he did not want to continue with the x-ray.

74. Moments after Plaintiff was seated on the x-ray table, Technician Higgins ignored Plaintiff's protests and carelessly twisted Plaintiff's legs and lower body. **Plaintiff** immediately began to experience numbress in his lower body, combined with a burning/stinging sensation on the right side of his body clown to the feet. 75. Plaintiff told Technician Higgins multiple times that he believed that his back had just been re-injured, and that he needed to see medical staff right away. Plaintiff's pleas and concerns were ignored and he was return to his cell without any medical evaluation or treatment.

76. In the days that followed, Plaintiff began to have bowel and bladder continence issues, in addition to the return of his pre-surgery symptoms. Plaintiff was provided an MRI on January 19,2023, and on February 23,2023 Plaintiff learned that he had a new lumbar disc extrusion at L4-L5 on the right side.

77. Revision decompression and fusion surgery at L4-L5 was recommended on February 23, 2023. Defendant United States negligently delayed Plaintiff surgical intervention until August 9, 2023, causing Plaintiff additional pain, suffering and injury.

78. But for Technician Higgins' Negligent, reckless, and careless actions on December 20, 2022, Plaintiff would not have suffered injuries requiring surgery. Given Post-Operation orders prohibiting any bending, "lifting," or "twisting," a reasonably careful x-ray technician would not have twisted Plaintiff in the Manner described in paragraphs 73 and 74.

## August, 2023 - September 2024 Negligence

79. After Plaintiff's August 9,2023 L4-5 decompression and fusion surgery, Plaintiff completed physical therapy and began having significant improvement in the neurologic symptoms he was having in his lower extremities. Plaintiff was return to ADX on August 25. 80. On September 11, 2023, Defendant Officer Repshire wrongfully ordered Plaintiff to cell rotate, which required Plaintiff to bend, lift, and move personal property to another cell. Plaintiff advised officer Repshire that he had just undergone major back surgery, and per Post-Operation orders, was prohibited from "bending," lifting," or "twisting." Officer Repshire Neglected to check Plaintiff's medical duty status, and instead carelessly ordered Plaintiff to cell rotate or face disciplinary action.

81. Minutes after Plaintiff began packing his property Plaintiff felt a sharp pain in his back. Seconds later Plaintiff's legs got week and he fell to the floor. Plaintiff's right leg, foot, buttocks, and private area went numb as both feet began to swell. Plaintiff pleaded with officer Repshire to call the medical staff for help.

82. A Lieutenant officer came to the housing unit a short time later and cancelled Plaintiffs cell rotation due to the New injury that he had just incurred, and because of Plaintiffs post-operation restrictions. Plaintiff was not seen or evaluated by medical staff to assess the severity of his new injury, and no treatment or medical care was provided.

83. On October 6,2023, Physician Douglas Crowther from the Orthopedic Centers of Colorado recommended that an MRI be ordered to evaluate Plaintiff's September 11,2023 injury. On March 7,2024, Plaintiff was informed that MRI results revealed an L3-4 herniation. Plaintiff's L3-4 herniation would not have occurred but for officer Repshire's reckless and negligent actions. 84. As of September 2024, Defendant United States has negligently failed to provide surgical intervention for the injuries Plaintiff sustained on September 11, 2023.

85. As a direct and proximate result of the events alleged herein and the negligent and wrongful acts or omissions to act, Plaintiff suffered sever physical and emotional injuries, including, but not limited to, extensive meurologic and lumbar injuries, foot drop, emotional distress, and permanent bowel, bladder, and sexual dysfunction.

86. Also as a direct and proximate result of the events alleged herein and the Negligent and wrongful acts or omissions to act, Plaintiff sustained damages, including but not limited to, extreme pain and suffering, mental anguish, disability, and loss of capacity of the enjoyment of life to be experienced in the future.

## CLAIM FOR RELIEF

87. Plaintiff incorporates paragraphs I thru 86 as though they were stated fully herein.

88. The events as alleged in paragraphs I thru 86 and the resultant injuries and damages to Plaintiff were caused by the careless, negligent, and wrongful acts or omissions to act of the United States of America, through its agents, servants, and employees, acting within the scope of their employment, in that, among other things, were charged with providing care, safekeeping, and subsistence to Plaintiff:

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3. Negligently and carelessly failed to exercise their best judgment, and otherwise recklessly deviated from their duty and responsibility. To prioritize the handling of Plaintift's injuries and provide a reasonably adequate standard of medical care.

b. Negligently and carelessly failed to conduct timely adequate examinations, and inquire into essential facts that were necessary to make a professional judgment.

C. Negligently and carelessly failed to initiate diagnostic tests, or immediately order an MRI and refer Plaintiff to a neurologist or neurosurgeon, when the cause of Plaintiff's back injury and pain could not be determined.

d. Negligently and carelessly delayed medical care and/or treatment, and routinely delayed medical care and/or treatment, and routinely delayed medication while he suffered in pain.

e. Negligently and carelessly directed plaintiff to consume a harmful quantity and combination of ineffective pain medication, while later refusing to provide Plaintiff effective pain management medication prescribed by Hospital Medical Providers.

F. Negligently and carelessly failed to make ungent medical care services available to the Plaintiff at relevant times, either through on-side providers or community emergency services. b. Negligently and carelessly failed to adhere to BOP Policy or safety protocols, and use the proper apparatus for moving the then wheelchair bound Plaintiff down a flight of stairs.

J. Negligently and carelessly ordered Plaintiff to pack and move personal \_\_\_\_\_\_\_ \_\_\_\_\_property inspite of post-operation orders specifying that Plaintiff not do \_\_\_\_\_\_\_ \_\_\_\_\_\_any bending or lifting.

K. Defendants, by their above actions, failed to follow statutes, policy statements, rules, handbooks, and generally accepted medical standards. Had they done so, Plaintiff would not have suffered the injuries, pain, damages, or suffering as alleged.

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