

STATE OF NORTH CAROLINA

IN THE GENERAL COURT OF JUSTICE  
SUPERIOR COURT DIVISION

COUNTY OF MECKLENBURG

**LaChunda Hunter,**

**Plaintiff,**

**v.**

**Novant Health, Inc.,  
Jamnadas Mahidas "Jay" Kothadia,  
Preethi Srinivasakumar, and Pediatrix  
Medical Group of North Carolina, P.C.,  
d/b/a Pediatrix Neonatology of Charlotte,**

**Defendants.**

**COMPLAINT**

**(JURY TRIAL REQUESTED)**

NOW COMES the Plaintiff, LaChunda Hunter, *Pro Se*, complaining of the Defendants, Novant Health, Inc., (hereinafter "Novant" or "hospital"), Dr. Jay Kothadia, Dr. Preethi Srinivasakumar and Pediatrix Medical Group of North Carolina, P.C., d/b/a Pediatrix Neonatology of Charlotte (hereinafter "Pediatrix"), (collectively referred to as the "Defendants") and amends her pleading to allege and say as follows:

**PARTIES & JURISDICTION**

1. The Plaintiff is a citizen and resident of Charlotte, Mecklenburg County, North Carolina.

2. Defendant Novant Health, Inc. is a North Carolina non-profit corporation with its principal office located at 2085 Frontis Plaza Boulevard Winston-Salem, North Carolina and doing business as Novant Health Presbyterian Medical Center located at 200 Hawthorne Lane, Charlotte, North Carolina 28204.

3. Upon information and belief, Defendant Dr. Jay Kothadia is a citizen and resident of Waxhaw, North Carolina and does business in Mecklenburg County, North Carolina.

4. Upon information and belief, Defendant Dr. Preethi Srinivasakumar is a citizen and

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MECKLENBURG COUNTY  
CLERK OF SUPERIOR COURT  
BY: A. Harper

resident of Charlotte, North Carolina and does business in Mecklenburg County.

5. Upon information and belief, Pediatrix is a medical group doing business and providing services on the premises of and in association with Novant Health at 200 Hawthorne Lane, Charlotte, North Carolina.

6. Upon information and belief, during February 2022 and at all times relevant to this action, Defendants Kothadia and Srinivasakumar were employees and/or agents of Defendants Novant and Pediatrix and said Defendants are liable for their actions pursuant to the doctrines of agency and /or Respondeat superior. All alleged conduct of Defendants Kothadia and Srinivasakumar was performed in their roles as agents of Defendants Novant and Pediatrix or in the course and scope of their employment with Defendants Novant and Pediatrix.

7. All conduct alleged in this matter occurred in Charlotte, Mecklenburg County, North Carolina.

8. North Carolina, Mecklenburg County Superior Court Division has jurisdiction over the subject matter of this action.

9. North Carolina, Mecklenburg County Superior Court Division has personal and/ or in rem jurisdiction of all the parties in this action.

10. Mecklenburg County Superior Court is a proper venue for this action.

### **FACTS**

11. In September of 2021, Plaintiff discovered that she was pregnant. Due to Plaintiff's age and prior miscarriages, this came as very welcome and exciting news. Plaintiff and her partner began planning for their much anticipated child. This news was especially meaningful to Plaintiff as she had adopted two children, but had always wanted to give birth to a child.

12. Plaintiff had an uneventful and enjoyable pregnancy. Plaintiff suffered some



swelling and high blood pressure; however, all of the baby's scans and tests were normal. Upon learning that she was having a girl Plaintiff and her partner decided to call the baby "Legacy".

13. Plaintiff, her friends and family considered Legacy to be a miracle gift from God. The family planned a baby shower and had a gender reveal party at an Italian restaurant. Plaintiff shopped for nursery furniture and received numerous baby items from friends and family.

14. On February 11, 2022, Plaintiff sought evaluation at Novant Health Presbyterian Hospital for symptoms of high blood pressure and swelling. Plaintiff was admitted as a patient for evaluation and treatment of these conditions. Her high blood pressure was treated with medication and Plaintiff remained admitted for observation.

15. On February 13, 2022, underwent an "emergency" cesarean section to deliver baby Legacy. Legacy was admitted to the neonatal intensive care unit "NICU" where she remained in stable condition.

16. On Friday, February 18, 2022, Plaintiff was released from the hospital. Before leaving, Plaintiff visited Legacy in the NICU. Legacy was jaundiced and had an elevated white blood cell count. Her breathing was also being monitored. Although there was no definitive diagnosis, the NICU personnel and Dr. Jay Kothadia speculated that Legacy may have a perforation in her intestine which could be causing or leading to infection. Legacy was to be given antibiotics to prevent or treat any infection while her condition including her hemoglobin levels were monitored. Plaintiff left the hospital believing her baby was in a stable condition.

17. On Saturday, February 19, 2022, Plaintiff visited Legacy at the hospital. Legacy was reported to be responding to antibiotics. Plaintiff was accompanied by her Aunt and Uncle who also visited Legacy. Legacy was not reported to be in any acute distress. Plaintiff received a text from a hospital employee who had visited Legacy and said she was "looking beautiful".



18. At 10:38pm on Saturday, February 19, 2022, Plaintiff received a phone call from the NICU informing her that "Legacy passed". Plaintiff immediately attempted to check Legacy's MYCHART in order to learn what had happened to her daughter. However, Legacy's records had been removed from the hospital's web access or were otherwise unavailable. Plaintiff was shocked and distraught over the loss of her daughter and her inability to learn more information.

19. On Sunday, February 20, 2022, Plaintiff called the NICU at 6:52am, in an attempt to obtain more information about Legacy. When she was unable to reach anyone who offered assistance, Plaintiff traveled to the hospital to see her baby. Upon checking in to the NICU at approximately 7:52am, Plaintiff was told that someone would come and assist her. She was directed to a glass enclosed conference room where she waited. Two of Plaintiff's friends arrived to offer her support and comfort.

20. After waiting approximately one hour, Plaintiff and her friends were directed to a separate small room that appeared to be a storage closet. The windowless and dark room contained two chairs, a cart with a gift bag and balloon and shelves of baby supplies. A nurse brought a baby that she identified as Legacy to this dark, cramped space where Plaintiff and her friends held and cried over her. The baby was wrapped tightly in blankets with only part of her head and face being visible. There were no tubes in her throat, nose or mouth. After returning home, Plaintiff placed two additional calls to the hospital at 10:28am and at 11:25am when she was finally able to provide requested funeral home information for Legacy but received no further information.

21. On Monday, February 21, 2022, Plaintiff began making arrangements for Legacy's funeral services and burial. Plaintiff spoke to her Pastor and with the funeral home. She and her family were in a deep state of grief over the devastating loss of Legacy.

22. On Tuesday, February 22, 2022, at 10:46am, Plaintiff received a call from the





hospital. Plaintiff recognized the number and the voice of the doctor on the phone. Dr. Jay Kothadia, MD asked if this was Ms. Hunter, Legacy's mother. This was common practice for calls from the hospital likely related to the federal Health Insurance Portability & Accountability Act of 1996 (HIPAA) requirements. Dr. Jay Kothadia identified himself to Plaintiff and shared that he was very excited to share Legacy's test results. He spoke in detail about the improvement in Legacy's jaundice, white blood cell count, and breathing levels. He continued and said that things had really turned around and he was happy and "very optimistic" about Legacy's condition. Plaintiff listened to this report in a state of shock. Finally, her work assistant who was listening on speaker called out, "You told her that her baby was dead!" Dr. Jay Kothadia immediately hung up the phone leaving Plaintiff in a state of severe distress and confusion.

23. Plaintiff immediately and desperately began calling the hospital. Plaintiff called the NICU, but no one answered. She called the hospital again and after receiving no answer, she left a message on the answering machine. She finally reached a live person who put her on hold after which the call was disconnected. Plaintiff was overcome by feelings of hope and joy that her baby was still alive.

24. Sometime later on that same day, Plaintiff received a call from Dr. Preethi Srinivasakumar, MD. The call did not come from the usual hospital number or from a number that Plaintiff recognized. Dr. Preethi Srinivasakumar, MD said that she was calling to apologize for making a mistake in her earlier call and that the test results were for a different baby. Plaintiff immediately pointed out that it was Dr. Jay Kothadia, MD who had made the prior call and that the test results reported were completely consistent with the health conditions for which Legacy was being treated. Dr. Preethi Srinivasakumar, MD stated that the wrong telephone number had been placed on the chart and that they were talking about test results for another baby.



25. In a state of shock and despair, Plaintiff informed the doctor that she needed more information and would like to see the baby whose tests were allegedly reported. Dr. Srinivasakumar became defensive and informed Plaintiff that if she came to the hospital, security would be called and she would be arrested. Dr. Srinivasakumar's demeanor became more contentious and defensive as she informed Plaintiff that she needed to get a lawyer. Plaintiff had no further contact with Dr. Preethi Srinivasakumar or Dr. Jay Kothadia.

26. Plaintiff reached out to the hospital for a further understanding and explanation of what happened but received no response. The hospital declined to meet with her or offer any further information. Plaintiff retained legal counsel who contacted Novant's Risk Management Department inquiring about a meeting to discuss the circumstances and any further investigation or explanation. Novant reacted by hiring outside legal counsel.

27. Novant's legal counsel promised to investigate the matter saying that it would take several months. By letter dated March 8, 2022, Novant promised, "We will review this matter and the allegations of your client's claim including getting the case reviewed by a relevant expert witness. This can take some time, sometimes three or more months." Novant never provided further explanation, the results of the investigation or proof that an investigation had even taken place. This conduct continues to cause Plaintiff additional mental distress and suffering.

28. Plaintiff has made numerous requests for an opportunity to meet with representatives of Defendant Novant, in order to learn more details about the error in providing another patient's information to Plaintiff. These requests were made to Defendant Novant, through its medical employees, representatives and its Risk Management Department.

29. As a result of Defendants' conduct Plaintiff was forced to cancel her daughter's scheduled funeral. Further, charting continued on Legacy for almost a week after her "death" including tube removal on February 25, 2022. Plaintiff continues to experience doubts as to whether Legacy is alive or deceased.

30. As a result of Defendants' conduct, Plaintiff suffered severe and debilitating



anxiety, depression, Post Traumatic Stress Disorder and ongoing intrusive thoughts that her baby was still alive. These conditions led to Plaintiff requiring professional treatment and being unable to perform her work obligations for an extended period of time. Plaintiff suffered from difficulty eating, sleeping and calTying on her normal home and work activities. Plaintiff has dreamed of having Legacy returned to her. Plaintiff's emotional distress has led to the aggravation of pre-existing but controlled blood pressure and migraine headache conditions. Plaintiff suffers from stress related neck and shoulder pain. Plaintiff has sought treatment at Atrium Healthcare's Emergency Department for an Acute Stress Reaction.

31. Plaintiff continues to suffer due to unanswered questions about her baby's death and Defendants' lack of empathy, accountability and transparency. Plaintiff sought assistance from the hospital in obtaining medical records and information which had been removed from the MYCHART system. No information or records were provided and Plaintiff was forced to stand in line and pay for these records. The records initially received were incomplete and Plaintiff had to make two return trips in person and multiple calls to Novant's Recordkeeping Department in order to obtain her baby's records. Plaintiff was informed that there was a "hold" on Legacy's records. After all of these requests, Plaintiff spoke to a supervisor and finally obtained the records.

32. Plaintiff has no knowledge as to whether Defendant Novant undertook the promised investigation. Defendant Novant has not provided any further explanation to Plaintiff regarding what happened with the records or any steps taken to ensure that the mistake is not repeated in the future. The Death Certificate for Legacy was requested from Novant, but was never provided.

### **CAUSE OF ACTION 1**

#### **Infliction of Emotional Distress**

33. The facts and allegations contained in the above paragraphs are hereby incorporated by reference as if fully set forth herein.

34. Plaintiff contends that this case arises under common law and duties of ordinary care and is not a medical malpractice case in that Plaintiff was not a patient of Defendants at the



time of the occurrences and Defendants' negligent record keeping and information sharing is the conduct at issue. Defendants were acting in an administrative capacity involving ordinary care not predicated upon the medical duty of care. Further, if this claim is found to be medical malpractice, then Plaintiff has alleged facts establishing wrongdoing under the existing common-law doctrine of *res ipsa loquitur* precluding the need for a Rule 9(j) certification.

35. Based on the facts alleged above, an average juror will be able to infer through common knowledge and experience and without the need for expert testimony that Defendants' conduct in informing the Plaintiff that her daughter was not only alive, but in an improved condition after previously informing her that her baby had died was wrongful. Providing this information to Plaintiff, after previously informing her that her baby was deceased was negligent, grossly negligent and said conduct would foreseeably cause and did cause Plaintiff severe emotional distress.

36. If the trial court should consider this suit to be a claim for medical malpractice, then it is specifically asserted that the medical care and all medical records pertaining to the alleged negligence that are available to the Plaintiff after reasonable inquiry have been reviewed by a person who is reasonably expected to qualify as an expert witness under Rule 702 of the Rules of Evidence and who is willing to testify that the medical care did not comply with the applicable standard of care.

37. The instrumentality causing the injury was in the exclusive control of Defendants in that they had sole possession and control of Legacy's test results, medical records and personal medical information including the contact information for her mother.

38. Defendants had a duty and responsibility to maintain legible, complete, accurate and current medical records on Legacy.

39. Defendants had a duty to properly maintain all information related to a minor patient's guardian or personal representative. This information includes accurate contact information for the personal representative.





40. It was incumbent on Defendants to ensure that Legacy's medical records and notes were chronological and accurate.

41. Maintaining an accurate, timely, current and complete medical record is an essential component of patient care. This includes entering all test results promptly into the record with said results being reviewed and documented by the requesting physician.

42. A patient's medical record is a chronological document that, among other things, assists Defendants in maintaining pertinent and confidential medical information in a way that assures proper communication with third parties.

43. Defendants had an affirmative duty to maintain all medical records and disclosures in accordance with HIPAA.

44. If, as claimed by Defendants, the test results reported to Plaintiff were for a patient other than Legacy, Defendants' conduct constitutes a per se violation of HIPAA.

45. If, as claimed by Defendants, the test results were for a patient other than Legacy, then Defendants violated their duty of care to maintain accurate medical and contact information in Legacy's and some other unknown patient's medical records.

46. Defendants Novant and Pediatrix had an affirmative duty to supervise and train their agents and employees, including Dr. Jay Kothadia and Dr. Preethi Srinivasakumar, in the proper use and understanding of its record management system.

47. Defendants Novant and Pediatrix had an affirmative duty to choose or develop a medical record management system including any electronic system (EHR) that comports with the requirements of HIPAA, North Carolina laws and the directives and positions of the North Carolina Board of Medicine.

48. Defendants owed Plaintiff a duty of care to verify that the test results were accurate, actually Legacy's results and appropriate to release to Plaintiff, as the mother of Legacy. These actions and duties should have been fulfilled before contacting Plaintiff. It was completely foreseeable that providing inaccurate information to the mother of a dead child would cause

1. 在 1949 年 10 月 1 日以前，中国是一个半殖民地半封建国家。在这一时期，中国社会的性质是半殖民地半封建社会，主要矛盾是帝国主义和中华民族的矛盾、封建主义和人民大众的矛盾。因此，中国革命的性质是资产阶级民主革命，任务是反帝反封建。

2. 1949 年 10 月 1 日以后，中国进入了新民主主义社会。这是一个过渡性的社会，它既不是资本主义社会，也不是社会主义社会，而是从资本主义社会向社会主义社会过渡的社会。在这一时期，中国社会的性质是新民主主义社会，主要矛盾是工人阶级和资产阶级的矛盾。因此，中国革命的性质是无产阶级社会主义革命，任务是消灭剥削，实现社会主义。

3. 1956 年 9 月，中国共产党第八次全国代表大会召开，标志着中国正式进入了社会主义社会。在这一时期，中国社会的性质是社会主义社会，主要矛盾是人民日益增长的物质文化需要同落后的社会生产之间的矛盾。因此，中国革命的性质是无产阶级社会主义革命，任务是发展生产力，实现四个现代化。

4. 1978 年 12 月，中国共产党十一届三中全会召开，标志着中国进入了改革开放和社会主义现代化建设新时期。在这一时期，中国社会的性质是社会主义社会，主要矛盾是人民日益增长的物质文化需要同落后的社会生产之间的矛盾。因此，中国革命的性质是无产阶级社会主义革命，任务是发展生产力，实现四个现代化。

5. 1989 年 6 月，中国共产党十三届四中全会召开，标志着中国进入了社会主义市场经济体制。在这一时期，中国社会的性质是社会主义社会，主要矛盾是人民日益增长的物质文化需要同落后的社会生产之间的矛盾。因此，中国革命的性质是无产阶级社会主义革命，任务是发展生产力，实现四个现代化。

6. 1992 年 10 月，中国共产党十四大召开，标志着中国正式确立了社会主义市场经济体制。在这一时期，中国社会的性质是社会主义社会，主要矛盾是人民日益增长的物质文化需要同落后的社会生产之间的矛盾。因此，中国革命的性质是无产阶级社会主义革命，任务是发展生产力，实现四个现代化。

7. 1997 年 9 月，中国共产党十五大召开，标志着中国正式确立了邓小平理论。在这一时期，中国社会的性质是社会主义社会，主要矛盾是人民日益增长的物质文化需要同落后的社会生产之间的矛盾。因此，中国革命的性质是无产阶级社会主义革命，任务是发展生产力，实现四个现代化。

8. 2002 年 11 月，中国共产党十六大召开，标志着中国正式确立了“三个代表”重要思想。在这一时期，中国社会的性质是社会主义社会，主要矛盾是人民日益增长的物质文化需要同落后的社会生产之间的矛盾。因此，中国革命的性质是无产阶级社会主义革命，任务是发展生产力，实现四个现代化。

9. 2007 年 10 月，中国共产党十七大召开，标志着中国正式确立了科学发展观。在这一时期，中国社会的性质是社会主义社会，主要矛盾是人民日益增长的物质文化需要同落后的社会生产之间的矛盾。因此，中国革命的性质是无产阶级社会主义革命，任务是发展生产力，实现四个现代化。

10. 2012 年 11 月，中国共产党十八大召开，标志着中国正式确立了习近平新时代中国特色社会主义思想。在这一时期，中国社会的性质是社会主义社会，主要矛盾是人民日益增长的物质文化需要同落后的社会生产之间的矛盾。因此，中国革命的性质是无产阶级社会主义革命，任务是发展生产力，实现四个现代化。

11. 2017 年 10 月，中国共产党十九大召开，标志着中国正式确立了习近平新时代中国特色社会主义思想。在这一时期，中国社会的性质是社会主义社会，主要矛盾是人民日益增长的物质文化需要同落后的社会生产之间的矛盾。因此，中国革命的性质是无产阶级社会主义革命，任务是发展生产力，实现四个现代化。

12. 2022 年 10 月，中国共产党二十大召开，标志着中国正式确立了习近平新时代中国特色社会主义思想。在这一时期，中国社会的性质是社会主义社会，主要矛盾是人民日益增长的物质文化需要同落后的社会生产之间的矛盾。因此，中国革命的性质是无产阶级社会主义革命，任务是发展生产力，实现四个现代化。

emotional harm.

49. Defendants owed Plaintiff a duty of care to make sure that they confirmed the accuracy of medical information before releasing it to a third party.

50. Defendants owed Plaintiff a duty of care to properly and promptly notate in the records that Legacy was deceased.

51. Defendants owed Plaintiff a duty of care to check Legacy's medical status before providing medical information.

52. Defendants owed Plaintiff a duty of care to identify all test reports by Legacy's name or a unique identifying number.

53. Defendants owed Plaintiff a duty of care to verify the contact information in Legacy's file before making a call to report medical treatment.

54. Defendants were negligent, grossly negligent and breached their duties of care as set forth in Paragraphs 35 through 53.

55. Defendants were otherwise negligent as shall be adduced through discovery.

56. Defendants acted purposefully, wrongfully, negligently and with gross negligence in informing Plaintiff that her baby was alive and in an improved condition after previously informing her that her baby was deceased. This conduct could not have occurred but for the negligence of Defendants.

57. It was reasonably foreseeable that such conduct would cause emotional distress to Plaintiff.

58. Defendants' conduct, as described above, did cause severe emotional distress and physical harm to Plaintiff. Plaintiff suffers extreme depression, anxiety, Post Traumatic Stress Disorder, Sleep Disorder, extreme lethargy, and physical distress, as a result of the actions of the Defendants, jointly and severally.

59. Defendants owed Plaintiff a duty of care to provide timely, accurate and truthful information regarding the condition of her minor daughter.



60. Defendants' conduct in the mishandling, misidentification and erroneous reporting of critical health information was extreme, outrageous, reckless, gross negligence and misconduct, a violation of HIPAA and outside the bounds of decency entitling Plaintiff to an award of punitive damages.

61. The Plaintiff's severe emotional distress has caused her mental and physical harm requiring ongoing professional treatment.

62. The harm to Plaintiff was intended or was the natural outcome of Defendants' wrongful conduct.

63. Defendants made a deliberate choice to engage in risky conduct with regard to handling patients' medical records and information despite knowing the potential for harm to Plaintiff.

64. The actions of Defendants, as alleged herein, actually and proximately caused damages to Plaintiff including but not limited to mental, emotional and physical harm, loss of wage earning capacity, medical and psychological treatment, and other harm as shall be proven at trial.

## **SECOND CAUSE OF ACTION**

### **Negligent Misrepresentation**

65. Plaintiff's previous allegations are hereby re-alleged and incorporated by reference as if fully set forth herein.

66. Defendants had a duty to exercise reasonable care and competence in obtaining and/or communicating with information about Legacy with Plaintiff (her mother) when it was intended and/or expected that Plaintiff would rely on this information.

67. Defendants owed a duty of care to not provide healthcare information to any person not authorized to receive said information pursuant to the Health Insurance Portability & Accountability Act of 1996 (HIPAA).

68. Plaintiff reasonably and actually relied on the information provided to her by

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Defendants.

69. Information provided to Plaintiff was false.

70. Upon information and belief, a reasonable review of Legacy's medical records, tests and Plaintiff's contact information would have prevented the negligent misrepresentations to Plaintiff.

71. Plaintiff's justifiable reliance on Defendants' false statements proximately caused mental, emotional, physical and financial distress to Plaintiff.

72. Defendant Novant Health continues to contact Plaintiff for payment of Legacy's medical bills notwithstanding the fact that Novant neglected to submit those bills to the identified and known medical insurer.

73. Plaintiff is entitled to have and recover a sum in excess of Twenty-Five Thousand Dollars (\$25,000.00) from the Defendants.

#### **PRAYER FOR RELIEF**

Wherefore, Plaintiff respectfully prays unto the Court as follows:

1. That the Plaintiff have and recover of the Defendants, jointly and severally, compensatory damages in a sum in excess of Twenty-Five Thousand Dollars (\$25,000.00);
2. That Plaintiff have and recover of the Defendants, jointly and severally, punitive damages in a sum in excess of Twenty-Five Thousand Dollars (\$25,000.00);
3. That Plaintiff have and recover pre-judgment interest, post-judgment interest and fees and costs as allowed by law;
4. That all issues of fact be tried by a jury of Plaintiff's peers; and
5. That Plaintiff be afforded any further relief as the court deems just and proper.





This the 29<sup>th</sup> day of January, 2026.

/x/

*LaChunda Hunter*  
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1. The first step is to identify the problem.  
 2. The second step is to define the problem.  
 3. The third step is to analyze the problem.  
 4. The fourth step is to develop a solution.  
 5. The fifth step is to implement the solution.