

Problems at Planned Parenthood

Information for Protecting Our Health

Report of the Problems at Planned Parenthood Committee
PDF book version of the New York and New York City pages of the constantly-updated website:

www.problemsatplannedparenthood.org



New York page: www.problemsatplannedparenthood.org/new-york

New York City Page: www.problemsatplannedparenthood.org/new-york-city/

Because the Manhattan center closed in late 2025, it's currently covered in www.problemsatplannedparenthood.org/closed-centers. Since Planned Parenthood always stated they had plans to re-open it in another building, the Manhattan material will be moved back to the New York City page if that happens.

This report organizes problems with a section for each kind of problem. The website instead reports problems by individual centers or groups of centers.

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Part 1

Medical Problems



Section 1



The health department in New York doesn't specify in reports which facility the report applies to. It's the only state that does do inspections but has this lack of clearness in reporting to the public.

This precludes us from knowing which reports apply to Planned Parenthood centers. These two lawsuits aren't quite health violations, but they're also not malpractice suits, so this is the category they best fit.

Simmons

The full 2024 affidavit is at:

www.problemsatplannedparenthood.org/new-york

Affidavit of Simmons, July 16, 2024

Monroe County, Brighton Residents v. Planned Parenthood

Excerpt:

5. I decided that I couldn't wait several weeks for an ultrasound, so I called Planned Parenthood and said I was pregnant and wanted to have an ultrasound. I was asked if I was considering an abortion. I figured that's what I had to say to get an ultrasound quickly, so I told them yes and I got a scheduled appointment much faster than I could get one with my regular doctor.
6. On December 21, 2023, I went to the Planned Parenthood at University Avenue in Rochester. . . I filled out my information on the tablet, including the fact that I have a history of seizures and high blood pressure, as well as the fact that I had pre-eclampsia with one of my babies. No one at the facility offered me any testing for HIV or other STDs. They didn't even take my blood pressure, after I had put down that I have a history of high blood pressure . . .

7. During the ultrasound, the woman wouldn't let me see the ultrasound screen. She kept tilting the screen so that I couldn't see what was going on, even when I asked her if she could turn it so that I could see it . . .
8. After asking me when I thought I had my last period and I said that I wasn't sure, she told me that she thought I was "4 months and some change" along in the pregnancy. I asked her if it was a boy or a girl and she said she couldn't tell me. . I asked her if she saw any defects with the baby because my other child has a club foot, and she told me that she wouldn't be able to tell that from "this kind of ultrasound" . . .
9. I then went to leave and asked her for the ultrasound picture. She got all weird and kept saying it's not really going to show anything . . . I couldn't figure out what was going on, but I had come to get an ultrasound and I wanted the picture so I pushed for it . . .
10. When I looked at it, it was so blurry I couldn't even see anything on it . . .
11. As I left the Planned Parenthood office, I saw some people standing on the sidewalk outside . . . I told them about the appointment, and how I had gone into Planned Parenthood and had an ultrasound, and showed them my ultrasound picture. I asked them what they thought of it. They told me that I could have a free ultrasound right then in the mobile van . . .
12. The woman sonographer in the mobile van was very nice and she had it set up so that I could see the screen at the same time that she was looking at it, which made me feel better right from the start. As soon as I saw the screen come up, I saw a very clear picture of my baby and heard the heartbeat. I also learned that I was about 17 weeks along, and that the baby was a girl! . . .
13. I just couldn't, and still can't, believe the difference in two ultrasounds, done so close in time on the same day.

Thompson

The full 2024 Pre-Action Petition is at:

www.problemsatplannedparenthood.org/new-york-city

On September 27, 2024, our paralegal . . . faxed a copy of our letter and executed authorization for release of the records to the medical records department at Planned Parenthood . . .

On November 5, 2024, [the paralegal] followed up with the medical records department by leaving voicemail messages and a second request was faxed . . . [the paralegal] followed up with the respondent via telephone on numerous occasions, faxed and mailed a third and final request via express mail (FedEx) on November 19, 2024 . . . To date, the respondent has not responded to [the paralegal's] messages or provided the medical records.

Section 2



This section doesn't include deaths, which are listed separately. We include only cases since 2000, and only those where details of the allegations are known.

We use the plaintiff's last name to distinguish the cases, but the plaintiff's full name and the name of individual defendants are redacted in the excerpts on our pages. They are of course available in the official court documents on the Problems at Planned Parenthood website (www.problemsatplannedparenthood.org/new-york)

Albany

Alston

The 2022 Complaint is under Albany:

www.problemsatplannedparenthood.org/new-york



Lawsuit: Capital Region hospitals failed to help woman after botched abortion
by Rachel Silberstein, *The Times Union*, September 29, 2022

Excerpt:

An Albany woman is suing Upper Hudson Planned Parenthood and the Capital Region's largest hospital systems for allegedly neglecting to provide her medical care and guidance after a failed abortion – which she said resulted in weeks of pain, extreme blood loss and, eventually, a premature birth . . .

Alston encountered logistical challenges due to an unstable housing situation and likely racial bias, as studies show that women of color are far more likely (than white women) to experience life-threatening complications in pregnancy and have their medical concerns dismissed by physicians.



Albany woman sues three healthcare providers after botched abortion
by Tessa Bentulan, News *Channel 13*, WNYT, October 5, 2022

Excerpt:

Alston immediately called Upper Hudson Planned Parenthood to schedule an abortion.

“I thought everything done and said,” Alston said. “Days go by. I’m still heavily bleeding, pain in my stomach, just nauseous and just a lot of heavy bleeding.”

Her pregnancy had not terminated.

“Planned Parenthood had no process for checking to make certain that the suction abortion was successful,” said Lewis Oliver, Alston’s attorney.

Oliver said the next few months were agonizing . . .

Her whole ordeal is detailed in a 55-page lawsuit. It claims that just three weeks after her botched abortion, she went to her regular OB-GYN at St. Peter’s because of the continued bleeding and debilitating pain. Another test confirmed she was still pregnant at about 15 weeks. Planned Parenthood told her the bleeding, pain, and a positive test were all normal.



Botched Care and Tired Staff: Planned Parenthood in Crisis
by Katie Benner, *The New York Times*, February 15, 2025

Excerpt:

Alston was leaving her boyfriend when she learned she was eight weeks pregnant. In desperation, she got an abortion at a Planned Parenthood clinic in Albany, N.Y., and moved with her two daughters into a homeless shelter.

But something was clearly wrong. Several weeks after the procedure, she was still bleeding heavily and suffering from painful cramps. She took another home pregnancy test, and when it came back positive, the clinic staff assured her that they had seen the aborted fetus and there was nothing to worry about. It was only after she went to an emergency room that she discovered the problem: The baby was still in her womb.

Twelve weeks after the failed abortion, Ms. Alston went into labor and delivered a baby who quickly died.

Ms. Alston filed a malpractice suit against Upper Hudson Planned Parenthood, one of several complaints about patient care at the New York clinic that women have brought to her lawyer, Louis B. Oliver. “Planned Parenthood provides a very important area of medical care,” Mr. Oliver said. “But I speak out and have sued them because even disadvantaged people deserve good care.”

Hineman

The 2024 Complaint is under Albany:

www.problemsatplannedparenthood.org/new-york

Excerpt:

2. [Plaintiff] had a relatively normal childhood, despite struggling with the effects of her then undiagnosed Asperger’s syndrome. Notably, she never felt any discomfort with her gender or expressed any desire to be a different gender. However, as she entered into her teen years, [she] began dealing with significant mental health issues. [She] began to suffer from anxiety and major depressive disorder, social exclusion disorder, self-harm, and passive suicidal ideation. Despite seeking professional help, her mental health spiraled into a point of crisis.

3. . . . When she told her mental health providers that she was adopting a transgender identity, they unquestioningly “affirmed” this suddenly onset new identity, without conducting appropriate mental health evaluations or offering [her] appropriate psychological counseling. They would eventually encourage her to pursue life-altering cross-sex hormones and even a double-mastectomy of her healthy breasts.

4. [Plaintiff]’s mental health struggles, however, continued to persist and worsen. But convinced that gender transition was the only thing that could fix her, a mere week after switching her identity from agender to transgender male, she went to Upper Hudson Planned Parenthood, where, after a single, roughly thirty-minute visit, she was prescribed life-altering cross-sex hormones . . .

5. As [Plaintiff] continued to pursue her gender transition, she ultimately sought “top surgery,” or an unnecessary removal of her healthy breasts, all the while cheered on by her supposed mental health providers. Settling on the cheapest option she could find, [Plaintiff] had a double mastectomy performed on her. It was almost immediately thereafter that she experienced profound regret and realized that transitioning was not resolving her mental health issues but was in fact worsening them . . .

Parker

The 2018 Complaint is under Albany:

www.problemsatplannedparenthood.org/new-york

Excerpt:

21. At all times mentioned herein, Defendants represented to Plaintiff that the medical care . . . would be safe and did not at any time pertinent thereto disclose or discuss with her the risks, benefits, and/or alternatives to the care or treatment provided . . . including but not limited to the risks, benefits, and/or alternatives of conducting one or more diagnostic tests, evaluations, and/or surgeries, and of the use of a particular implant device . . .

23. Plaintiff would not have consented to the medical care . . . if she had been advised of the risks . . .

24. A reasonably prudent person would not have consented to the medical care . . . if he or she had been presented with the reasonably foreseeable risks . .

26. The aforementioned failure to provide informed consent was a direct and proximate cause of the serious and personal injuries sustained by the Plaintiff.

27. As a direct and proximate result of the foregoing, Plaintiff required further medical care . . . and endured severe pain and suffering.

Bronx

Green

The 2006 Malpractice Complaint is under Bronx:

www.problemsatplannedparenthood.org/new-york-city

Full Court Decision on Motion for Summary Judgment, Filed On - 2/6/2008

Motion by defendants for summary judgment dismissing plaintiff's claims is DENIED in all respects. Plaintiff alleges several departures from accepted medical practice in this malpractice action, including: failure to properly diagnose ectopic pregnancy, based on a sonogram and other factors; failure to hospitalize plaintiff for immediate care; failure to warn or advise plaintiff of the likelihood that she may have an ectopic pregnancy; and failure to treat the ectopic pregnancy at an early enough point so as to have the option of saving plaintiff's fallopian tube. Movants submit an expert's affidavit contending that no malpractice occurred. However, plaintiff responds with an affidavit by her own expert, describing the above alleged departures, and claiming that they constitute malpractice. In movants' reply, they claim that plaintiffs' expert report is conclusory and fails to state the facts on which its claims are based.

This latter claim by movants is untrue. While the affidavit of plaintiff's expert arguably could be more expansive, it is not by any means conclusory. The conclusions reached as to the departures claimed are explained and supported. In a "duel of experts," this Court will not choose between them, as this is not the function of a summary judgment motion. There is a factual dispute as to whether plaintiff was told of the possibility of ectopic pregnancy, with

plaintiff denying same. Movants also cannot elicit summary judgment by blaming plaintiff for failure to show up for a follow-up test at movants' facility, because, if (as she claims) she was not informed of the dangers of ectopic pregnancy, she may not have realized the urgency of returning for follow-up. Nothing in the later hospital record shows her to have been personally aware of facing ectopic pregnancy. Also, the basis set forth for plaintiff's claims that the sonogram was mis-read is neither more nor less detailed than the argument set forth by movants' expert defending the reading of such sonogram..

Finally, movants' argument that plaintiff would likely have lost the Fallopian tube in any event is sufficiently countered by plaintiff's expert, who opines that plaintiff, if timely treated (i.e. before the rupture), might have been offered a more "conservative" choice. Under the circumstances, the affidavit of plaintiff's expert is sufficient, and the cases set forth by movants are inapposite, referring as they do to instances of opposing papers which are less probative. This constitutes the Decision and Order of this Court

Hernandez

The 2022 Complaint is under Bronx:

www.problemsatplannedparenthood.org/new-york-city

Excerpt:

3. During her first visit to Planned Parenthood, Plaintiff complained of abnormal bleeding and pain as a result of her pregnancy.

4. Upon administering care, and performing an ultrasound, Defendants recognized that Plaintiff did not currently have a normal intra-uterine pregnancy . . . As Defendants even noted in their medical records, and told Plaintiff, there was a possibility that she was having an ectopic pregnancy . . .

5. Yet . . . Defendants did not perform any further testing to confirm in order to provide the proper treatment. Instead, Defendants simply sent Plaintiff home . . .

6. After Defendants failure to provide adequate medical care, Plaintiff began experiencing even more severe pain and bleeding, causing her to re-visit Defendants' office within two days and multiple more times over the following two weeks. Each time, Plaintiff inquired with Lake about whether she should go to the hospital. And, each time, Lake told her "no, she did not need to at this time."

7. Finally, after over two weeks of severe pain and multiple visits to Defendants' office, another one of Defendant's employees called Plaintiff and told her that she should go to the hospital.

8. Accordingly, Plaintiff immediately went to the hospital, Stony Brook . . . After evaluating her, the doctors determined that one of Plaintiff's fallopian tubes had already ruptured and she was experiencing internal bleeding. Given the potential risks of fatality, Plaintiff was rushed into emergency surgery. Thankfully, the doctors at Stony Brook were able to save her life but she permanently lost one of her fallopian tubes. This places Plaintiff's plans of having more children in the future in jeopardy.

Mitchell

The 2014 Malpractice Complaint is under Bronx:

www.problemsatplannedparenthood.org/new-york-city

Excerpt:

26. That by reason of the foregoing, the plaintiff . . . was severely injured and damaged, rendered sick, sore, lame and disabled, sustained severe nervous shock and mental anguish, great physical pain and emotional upset, some of which injuries are permanent in nature and duration, and plaintiff will be permanently caused to suffer pain, inconvenience and other effects of such injuries; plaintiff incurred and in the future will necessarily incur further health care facility and/or medical expenses in an effort to be cured of said injuries; and plaintiff has suffered and in the future will necessarily suffer additional loss of time and earnings from employment . . .

32 . . . the defendant failed to inform the plaintiff as to the exact nature and extent of plaintiff's condition and failed to inform the plaintiff as to the risks, complications, consequences and danger of the care . . . and further failed to inform the plaintiff as to the possible alternative methods of treatment applicable to the plaintiff's condition.

33. That had the plaintiff known of the foregoing nature and extent of the conditions and risks . . . and had the plaintiff known of the possible alternate methods of treatment applicable to the plaintiff's condition, the plaintiff would have chosen other necessary, required, and alternative methods of treatment so as to have avoided serious injury . . .

West

The 2019 Malpractice Complaint is under Bronx:

www.problemsatplannedparenthood.org/new-york-city

Excerpt:

16. That commencing on or before 2015, and continuing thereafter, the plaintiff . . . had a mass in her right breast for which she sought medical attention from the defendants.

17. That commencing on or before 2015, and continuing thereafter, the plaintiff . . . had a mass in her right [check] breast for which she was not referred for a mammogram, ultrasound or to a breast specialist to evaluate.

18. That on or about 2018 , the plaintiff . . . was diagnosed with advanced stage IV breast cancer in her right breast.

19. That during the period of time that the plaintiff . . . was under the care of the defendants, the defendants failed to timely and properly diagnose her breast cancer utilizing available means at a time when the cancer could have been curable . . .

Brooklyn

Meese

The 2012 Complaint is under Brooklyn:

www.problemsatplannedparenthood.org/new-york-city

Excerpt:

10. That the defendants . . . undertook and agreed to render medical care to the Plaintiff . . . on or about January 7th, 2011 continuing through January 20th, 2012 and for other times prior and subsequent thereto.

11. The defendants . . . were negligent in the care rendered . . .

12. As a result of the foregoing, the plaintiff was rendered sick and disabled, suffered injuries, pain and mental anguish, was compelled to seek medical care, was forced to undergo additional medical procedures/treatment, incurred expenses and was permanently injured and disabled.

Hempstead

Banks

The 2003 Malpractice Complaint is under Hempstead:

www.problemsatplannedparenthood.org/new-york

Excerpt:

20. That the defendants . . . were negligent, careless, reckless and grossly negligent and guilty of malpractice in rendering services for and on behalf of the plaintiff . . . in failing and neglecting to use reasonable care in rendering medical services for and on behalf of said plaintiff; in failing and neglecting to heed plaintiffs condition; in departing from good and accepted medical practice; in performing contra-indicated procedures; in failing to perform indicated procedures; in failing to follow good medical practice; in negligently hiring, training, supervising and instructing their agents, servants and/or employees in the proper care and treatment of said plaintiff; in failing to refer said plaintiff to the appropriate specialists for requisite care and treatment; and in otherwise being careless, reckless, negligent and grossly negligent and guilty of malpractice under the circumstances then and there existing.

21. That solely by reason of the carelessness, negligence, unfaithfulness, unskillfulness, and professional malpractice of the defendants . . . the plaintiff . . . has suffered serious medical complications and sustained serious and severe permanent personal injuries, all without any fault on her part contributing thereto . . .

26. That the defendants, his agents, servants and/or employees failed to inform the plaintiff of the risks, hazards and alternatives connected with the medical, surgical and invasive procedures performed upon said plaintiff.

27. That a reasonable prudent person in plaintiff's position would not have undergone the medical, surgical and invasive procedures performed upon said plaintiff if she had been fully informed of the risks, hazards and alternatives.

28. That as a result of the foregoing, the plaintiff was prevented from making a knowledgeable evaluation with regard thereto, as a consequence of which there was not informed consent given to the medical treatment and multiple invasive procedures performed by the defendants.

Breslin

The 2014 Complaint is under Hempstead:

www.problemsatplannedparenthood.org/new-york

Excerpt:

47. . . . on or about October 3, 2011 through and including May 13, 2013, the defendant Planned Parenthood of Nassau County . . . undertook to and did perform, render and/or provide medical, diagnostic and/or technical examinations, evaluations, care . . . to the plaintiff . . .

49. As a proximate result of the foregoing, the plaintiff . . . was caused to and did suffer and sustain severe and serious personal injuries of a physical, emotional and mental nature; severe and serious conscious pain and suffering, had been rendered sick, sore and lame . . . incurred medical and other expenses, was unable to pursue her usual vocations, and will cause her eventual death.

66. A reasonably prudent person in [Plaintiff's] position would not have consented to the procedures and treatments as undertaken by the defendants . . . and would have instead elected other procedures and/or treatments.

67. As a result . . . were done without [Plaintiff's] informed consent.

Calder

The 2023 Complaint is under Hempstead:

www.problemsatplannedparenthood.org/new-york

Excerpt:

114. On or about April 9, 2022, Plaintiff . . . was admitted to Defendant Planned Parenthood Hempstead . . . [for] signs and symptoms that were consistent with ectopic pregnancy.

115. . . . Defendant Planned Parenthood . . . failed to properly and timely diagnose and treat [Plaintiff's] ectopic pregnancy . . .

121. On or about April 21, 2022 and/or April 22, 2022, [Plaintiff's] ectopic pregnancy resulted in the rupture of and/or loss of utility of her fallopian tube in which the ectopic pregnancy was located.

D'Avanzo

The 2017 Complaint is under Hempstead:

www.problemsatplannedparenthood.org/new-york

Excerpt:

34. Contrary to accepted standards of medical treatment, the defendants . . . Planned Parenthood . . . performed a procedure for the termination of pregnancy, negligently and improperly a dilation and curettage, failed to properly remove the products of conception . . . failed to take steps to ensure that the products of conception had been removed . . . failed to send the biologic material removed . . . for analysis and pathological examination . . . failed to properly examine plaintiff, failed to properly perform repeat examinations; failed to properly perform sonograms on plaintiff; failed to determine that plaintiff had an ectopic pregnancy . . . failed to properly schedule follow-up visits for plaintiff; failed to order and perform appropriate diagnostic and laboratory tests for plaintiff, and were otherwise negligent . . .

DeBrosse

The 2020 Complaint is under Hempstead:

www.problemsatplannedparenthood.org/new-york

Excerpt:

82. The above medical care, diagnosis, treatment and services rendered to Plaintiff . . . were rendered negligently . . . in failing to timely diagnose breast cancer; in failing to order ultrasounds . . . in causing plaintiff to be diagnosed with pathology suspicious for cancer on February 28, 2018; in causing plaintiff to be diagnosed with cancer via biopsy on March 7, 2018; in failing to properly communicate; in failing to properly evaluate and treat her medical condition . . . in failing to document all treatment provided to Plaintiff; in failing to give proper care in allowing adequate time to observe the Plaintiff; in failing to properly diagnose and treat the Plaintiff's true medical condition . . . in misdiagnosing the Plaintiff's condition; in failing to advise the Plaintiff of the risks, hazards and complications attendant to the medical and/or surgical procedures performed; in failing to use and employ the best medical and surgical judgment in the treatment of the Plaintiff herein; in failing to timely refer the Plaintiff for a specialist's opinion and second opinion . . .

83. By reason of the above, Plaintiff . . . has sustained severe injuries, pain, agony, suffering, disability, hospitalization, pain and suffering, surgery, as well as severe conscious pain and suffering.

Evans

The 2005 Malpractice Complaint is under Hempstead:

www.problemsatplannedparenthood.org/new-york

Excerpt:

7. On or about May 3, 2003 defendant Planned Parenthood of Nassau County undertook and did rend medical care . . . to the plaintiff . . .

9. At all times hereinafter mentioned, defendant . . . negligently, careless and recklessly failed to properly test, diagnose, monitor and treat plaintiff which adversely affected the health and well-being of plaintiff . . .

10. . . . plaintiff was caused to sustain serious personal injury by reason of the . . . malpractice and substandard care of the defendant . . .

Hudson Peconic

Dorival

The 2008 Court Order is under Hudson Peconic:

www.problemsatplannedparenthood.org/new-york

Note: This isn't the Complaint, but a court order that deals with a motion from the doctor at the hospital. It explains the content of the lawsuit.

Excerpt:

The medical records of Planned Parenthood reveal that on January 17, 2001, plaintiff presented to the office for an abortion, which was performed. However, after the procedure, plaintiff developed uterine atony and persistent vaginal bleeding which required transfer to a hospital for further treatment . . . The third ultrasound suggested intra-abdominal bleeding. Plaintiff was returned to the operating room where defendant [hospital doctor] performed an exploratory laparotomy and discovered that the uterus was perforated, there was bleeding in the abdominal cavity and the left uterine artery had been transected. The report reveals that it was also necessary to remove the uterus and left ovary in order to prevent loss of the plaintiff's life . . .

Hudson Valley

Bunte

The 2006 Malpractice Complaint is under Hudson Valley:

www.problemsatplannedparenthood.org/new-york

Excerpt:

20. That between June 27th, 2006 and September 7th, 2006, while plaintiff LAUREN BUNTE was a client or customer of defendant Planned Parenthood of the Mid-Hudson Valley, Inc.. and after undergoing a series of testing for sexually transmitted and communicable diseases . . . She was caused to be notified that her testing for gonorrhea and chlamydia, which were reported to her on July 19th, 2006 as being positive, were actually false and inaccurate.

21. That the occurrence as described herein and the results and consequences thereon, were caused by the carelessness, recklessness, negligence of defendants . . . in failing to possess and exercise the requisite learning, skill, knowledge and judgment ordinarily exercised and possessed by reasonably skillful and competent testing services and/or facility, facilities and testing facilities and operators in the locale generally, in failing to take an adequate and proper sterile precautions for testing, in failing to use proper equipment and handling techniques and handle plaintiff's samples with sterile precautions for testing, in ignoring the requirements for sterile and proper handling for testing, in failing to detect the significance of the need to render accurate and reliable results for so sensitive and traumatic reporting of the presence of a sexually transmitted disease, which, in fact, was not present and reported incorrectly . . . and then plaintiff began a medication protocol for a sexually transmitted disease she did not have, which also caused her to lose her relationship with her partner, and to suffer from depression and related clinical signs and symptoms . . .

Kingston

Lombard

The 2012 Malpractice Complaint is under Kingston:

www.problemsatplannedparenthood.org/new-york

Excerpt:

8. Defendant furnished an I.U.D. (Intrauterine Device) to plaintiff representing that it was safe and effective and would not injure or otherwise harm plaintiff . . .

10. On June 29, 2010 . . . an I.U.D. was inserted . . .

11. Following the aforementioned medical procedure . . . plaintiff suffered from numerous symptoms of pain and cramping, irregular menses, anemia and other symptomology caused by and/or related to the aforesaid I.U.D. . . .

13. Before, on and following June 29, 2012 . . . the said I.U.D. was unsafe, defective and otherwise unreasonably dangerous . . .

15. On or about August 17, 2012, while hospitalized . . . the said I.U.D. was found to have penetrated the wall of plaintiff's uterus and had otherwise caused severe pain and additional symptoms . . .

Manhattan

See Section 9 below, because the center is closed. All cases and court documents are at: www.problemsatplannedparenthood.org/closed-centers-malpractice

Massapequa

The 2025 Malpractice Complaint is under Massapequa:

www.problemsatplannedparenthood.org/new-york

Excerpt:

17. That commencing on or about July 29, 2024, the plaintiff was a patient of, and under the care and treatment at a Planned Parenthood clinic . . . for treatment, an IUD removal and IUD insertion/placement.

18. That the defendants . . . were negligent and committed malpractice . . . in failing to timely and properly test, care for, observe, administer to, diagnose and otherwise treat the plaintiff; in failing to treat the plaintiff in accordance with the proper and accepted standards of medical care and treatment; in deviating and departing from the good and accepted standards of medical and surgical care and practice in the manner in which the insertion was performed and in the failure to timely diagnose and treat the conditions and complications that developed; in carelessly and negligently placing an IUD in the body of the plaintiff; in carelessly and negatively perforating the uterus during the IUD procedure; in failing to timely and properly diagnose that the plaintiff was suffering from a perforated uterus; in failing to notice, realize and/or recognize the fact that the uterus had been perforated after the IUD insertion; in failing to examine the plaintiff's uterus pre-insertion; in failing to perform a bimanual exam; in failing to utilize the proper methods and techniques of IUD insertion; in failing to timely and properly diagnose that the plaintiff was suffering from a perforated uterus; in failing to remove the IUD after it had perforated the uterus; in failing to remove the IUD after it had perforated the uterus; in failing to timely and properly request and/or refer the plaintiff to a specialist in the appropriate fields of medicine; that as a e further consequence of the failure to properly insert the IUD, and the failure to properly measure the uterus and recognize an abnormal measurement, the IUD migrated to the pelvis and the plaintiff was required to undergo surgery to remove the malposition device; and in violating the applicable laws, rules, statutes and regulations in such cases made and provided; and the defendants were otherwise careless and negligent and failed to act in a reasonable and acceptable medical manner.

Mount Vernon

Jones

The 2008 Summons is under Mount Vernon:

www.problemsatplannedparenthood.org/new-york

Notice in Summons

. . . testing of a blood sample that was drawn from Ms. Jones by Planned Parenthood on or about September 21, 2005 and erroneously reporting Ms. Jones's blood sample as positive for chlamydia and gonorrhea . . . Planned Parenthood and Shiel breached their duty to Ms. Jones to make and communicate correctly a correct diagnosis by negligently, recklessly and carelessly erroneously diagnosing Ms. Jones with chlamydia and gonorrhea, communicating that erroneous diagnosis of venereal disease to Ms. Jones, to the New York State Department of Health Bureau of Communicable Disease Control and others, placing Ms. Jones on an unnecessary and contraindicated antibiotic regimen that caused serious physical injury to Ms. Jones due to her reaction to the antibiotics . . . and by negligently inflicting emotional distress upon Ms. Jones . . . and upon Ms. Jones's relationship with her husband . . . other family members and friends.

New Rochelle

Baker

The 2019 Poor Person Order PSLR 1101(d) is under New Rochelle:

www.problemsatplannedparenthood.org/new-york

Excerpt handwritten by plaintiff in the form:

10. Briefly stated, the facts of my case are as follows:

Nerve damage, and permanent cervix damage. Painful intercourse, abdominal pain, and vaginal bleeding. Pain and suffering. Discomfort, and delay in work and daily activities.

Gaurielatos

The 2006 Malpractice Complaint is under New Rochelle:

www.problemsatplannedparenthood.org/new-york

Excerpt:

7. That the Defendants . . . departed from proper and accepted medical practices . . . in misdiagnosing plaintiff's condition and in otherwise being careless . . .

8. That as a result of the foregoing the Plaintiff . . . sustained permanent, grave, disabling injuries, and has been physically and mentally disabled . . .

Newburgh

Sampson

The 2018 Complaint is under Newburgh:

www.problemsatplannedparenthood.org/new-york

Excerpt:

30. That at all times hereinafter mentioned, including on or about January 14, 2016 and March 24, 2016, and prior and subsequent thereto, the defendant PLANNED PARENTHOOD OF THE MID-HUDSON VALLEY, INC. d/b/a NEWBURGH HEALTH CENTER . . . was/were negligent, careless, unskillful and committed acts and omissions which constituted medical negligence and medical malpractice in connection with the medical, gynecological and obstetrical care rendered to plaintiff, in the following manner: in deviating from good and accepted medical practices which were prevailing in the community; in failing to undertake and administer proper gynecological and obstetrical care; in failing to properly and adequately diagnose pregnancy; in failing to properly and adequately perform a pregnancy test and in failing to timely act upon same; in failing to timely recognize, heed, appreciate and act upon the plaintiff's complaints, signs and symptoms; in failing to timely recognize, heed, appreciate and act upon signs of pregnancy; in failing to timely refer the plaintiff for prenatal care and diagnostic testing; in failing to undertake and administer proper prenatal care and diagnostic testing and practice; in negligently administering contraindicated medications and/or chemical agents; in administering medications and/or chemical agents in excessive and/or contraindicated dosages; in negligently administering Depo Provera birth control without testing the plaintiff for pregnancy and while plaintiff was pregnant; in failing to obtain and/or arrange for the necessary and indicated specialist consultations; in failing to timely undertake and administer proper examinations and testing; in failing to assign and provide competent medical staff or to supervise its medical staff; and by other negligent acts and/or omissions; and by all of the foregoing did thereby proximately cause the severe injuries and conditions and associated direct complications and pain and suffering sustained and suffered by the plaintiff.

Patchogue

Fitsimmons

The 2021 Amended Complaint is under Patchogue:

www.problemsatplannedparenthood.org/new-york

Excerpt:

Note: This is brought by the administrator of an estate, which is why “decedent” is referred to. However, because there are several defendants and Planned Parenthood is only listed as one of them, and because neither the nature of the medical condition nor how the alleged malpractice led to the death are stated in the Complaint, we are including this under Malpractice Suits and not putting it under Patient Deaths – unless further information shows it’s warranted to put it in the more severe category.

47. On or about July 1, 2014, plaintiff’s decedent presented to defendant PLANNED PARENTHOOD with certain signs, symptoms, and complaints.

48. On and between July 1, 2014 and August 1, 2017, plaintiff’s decedent received regular and continuous medical care and treatment from defendant PLANNED PARENTHOOD for the aforesaid certain signs, symptoms, and complaints . . .

62. As a result of the negligence, malpractice, and wrongdoing of the defendants as aforesaid, and without any fault on the part of plaintiff’s decedent contributing thereto, plaintiff’s decedent was caused to sustain serious, severe, and permanent personal injuries, and has suffered physical pain and mental anguish, and an untimely death.

Queens

Taraskovic

The 2020 Complaint is under Queens:

www.problemsatplannedparenthood.org/new-york

Excerpt:

18. The above medical care . . . were caused by the carelessness and negligence, negligent acts and/or omissions, medical malpractice and surgical malpractice of Defendants . . . in performing a dilatation and curettage despite no uterine pregnancy being seen on ultrasound; in failing to schedule and perform follow up testing . . . in failing to assure proper follow-up knowing that there was questionable indication of intrauterine pregnancy; in failing to schedule and perform HCH level testing within 24-72 hours of the procedure; in failing to properly communicate; in failing to establish a differential diagnosis; in failing to establish a proper differential diagnosis; in failing to diagnose ectopic pregnancy; in failing to treat ectopic pregnancy . . .

Smithtown

Thomas

The 2007 Complaint is under Smithtown:

www.problemsatplannedparenthood.org/new-york

Excerpt:

This is a medical malpractice action wherein the plaintiff . . . alleges that during the performance of a second trimester abortion on April 18, 2009, the defendant, Planned Parenthood Hudson Peconic, Inc., by its staff, negligently perforated her uterus, resulting in her having to undergo an hysterectomy and suffer other permanent injury.

Ms. Thomas testified that she went to the West Islip Planned Parenthood on about April 15th or 16th 2009 for an abortion of her third pregnancy, had a blood test and applied for health insurance which covers the procedure and a three month period thereafter. She was referred to the Smithtown Planned Parenthood on April 18, 2009, as she was told she was too far along in her pregnancy to take the pill for the abortion at the West Islip Planned Parenthood office. She believed she was about 11 or 12 weeks pregnant. When she arrived at the Smithtown location, she showed the staff her 10 and filled out some paperwork for insurance . . .

She then had a sonogram and was advised that she was about thirteen and a half to fourteen weeks pregnant. Thereafter, she had some blood work performed . . . she went into a room where she was seen by [the doctor] and a nurse who gave her some pills to soften her uterus or cervix . . . She was placed on a table, and an intravenous was started. She then felt [the doctor] insert a "metal thing" into her vagina. When she started to feel a sharp pain, she told the doctor to stop, but he advised her that the procedure was already started and that he could not stop. She testified that shortly after that, the doctor advised her that there was "just a minor complication," and that he was calling Stony Brook Hospital. The next thing she knew, the paramedics were at her side. When they moved her she felt a gush of blood. Upon arrival to Stony Brook University Hospital, she was given a partial hysterectomy . . .

Dorival

From a 2011 court order dismissing another defendant from the case, which is under Smithtown:

www.problemsatplannedparenthood.org/new-york

The medical records of Planned Parenthood reveal that on January 17, 2001, plaintiff presented to the office for an abortion, which was performed. However, after the procedure, plaintiff developed uterine atony and persistent vaginal bleeding which required transfer to a hospital for further treatment.

Spring Valley

Acocella

The 2011 Complaint is under Spring Valley:

www.problemsatplannedparenthood.org/new-york

Excerpt:

23. Defendant . . . was negligent in the care rendered . . . in failing to heed or appreciate the significance of the signs and symptoms exhibited by Plaintiff; in improperly prescribing medication; in improperly administering medication . . . in failing to timely refer Plaintiff to specialists, in failing to take a proper medical history of the Plaintiff; in failing to properly test the Plaintiff prior to prescribing, administering, and/or providing medication the Plaintiff . . .

28. Defendant . . . failed to disclose and/or inform Plaintiff of the risks associated with the medication . . . and of the alternatives thereto and the reasonably foreseeable risks and benefits association therewith as a reasonable medical practitioner under similar circumstances would have disclosed, in a manner permitting said Plaintiff to make a knowledgeable evaluation.

29. A reasonably prudent person in Plaintiff's position who had been fully informed would not have undergone the treatment . . .

West Seneca

Ford

The 2020 Complaint is under West Seneca:

www.problemsatplannedparenthood.org/new-york

18. That upon information and belief, Plaintiff . . . did seek and received medical care, treatment and/or services from Defendants . . . on or about January 11, 2019, at Planned Parenthood - West Seneca Medical Center . . . for care and/or treatment pertaining to her pregnancy . . .

26. That . . . they failed to properly observe, monitor and evaluate Plaintiff . . . despite their awareness that her uterine wall had been pierced during the aforementioned medical procedure and her complaints of extreme pain, discomfort, cramping, heavy bleeding and inability to and/or difficulty walking, dizziness, and nausea thereafter; failed and omitted to timely order or perform studies including but not limited to an ultrasound; failed and omitted to properly treat Plaintiff . . . despite their awareness that her uterine wall had been pierced during the aforementioned medical procedure and her complaints . . . failed and omitted to administer adequate pain control medication during and after the aforementioned medical procedure; failed and omitted to perform proper and timely tests, examinations, procedures, in giving medical care to

the Plaintiff . . . ; failed and omitted to timely transfer Plaintiff . . . to another facility capable of rendering a higher level of care and/or diagnostic imaging; failed to observe and address Plaintiff's continuing complaints . . . and otherwise failed to properly monitor Plaintiff's symptoms and other vital signs . . .

29. As a result of the Defendants' failure to render reasonable care and to meet good and accepted standards of practice in their care, treatment and services . . . Plaintiff . . . sustained severe permanent, personal and emotional injuries, to which the full extent of each is not presently known, including but not limited to . . . damage to her urine wall . . . All injuries claimed and sustained are permanent.

White Plains

Austin

The 2020 Complaint is under White Plains:

www.problemsatplannedparenthood.org/new-york

Excerpt:

FIFTH: Plaintiff . . . was a patient of defendants at various times from on or about March 3, 2020 to on or about March 8, 2020 . . .

EIGHTH: Defendants . . . were negligent and careless in the medical and surgical care and treatment of plaintiff . . .

NINTH: As a result of the aforementioned, plaintiff . . . sustained severe and serious personal injury, conscious pain and suffering, mental anguish, emotional distress, psychological trauma and loss of enjoyment of life, all of a permanent nature . . .

TWELFTH: Defendants failed to inform plaintiff of the risks, hazards and alternatives connected with the treatment rendered, so that an informed consent could be given.

THIRTEENTH: Reasonably prudent persons in plaintiff's position would not have undergone the treatment utilized if fully informed of the risk, hazards and alternatives connected with the treatment.

FOURTEENTH: The failure to adequately and fully inform plaintiff of the risks, hazards and alternatives of the treatment utilized was a proximate cause of plaintiff's injuries.

FIFTEENTH: As a consequence of the foregoing, there was no informed consent to the treatment utilized.

Jane Doe

The 2021 Complaint is under White Plains:

www.problemsatplannedparenthood.org/new-york

Excerpt:

49. On May 4, 2020, Defendant . . . prescribed the two-medication regimen of Mifeprex and misoprostol to terminate Plaintiff's pregnancy.

50. Plaintiff did not sign the required Patient Agreement Form, or any other form.

51. Defendants failed to conduct a physical exam of any type on Plaintiff, let alone a bimanual pelvic exam or abdominal exam.

52. Defendant failed to conduct an ultrasound on Plaintiff.

53. Plaintiff began her regimen of Mifeprex and misoprostol on May 4, 2020.

54. That evening, Plaintiff began experiencing painful cramping and pressure.

55. Plaintiff went into full labor in the early morning hours of May 5, 2020.

56. Plaintiff experienced extreme and painful accelerated changes to her body, including a vaginal laceration or tear, as the delivery progressed.

57. At approximately 3:00 am, while sitting on the toilet, Plaintiff gave birth to a fully formed, stillborn baby boy named J.T.

58. Plaintiff was shocked and traumatized when she saw the lifeless, fully-formed baby in the toilet covered in mucous, blood, and the placenta.

59. The next morning, Plaintiff advised Defendants about the ordeal. Plaintiff described the size of J.T.'s body to the Defendants. She described his size as the length of her forearm, not including his legs. Defendant . . . repeatedly asked whether the body was the size of a fist, but Plaintiff and her mother corrected her.

60. Instead of directing Plaintiff to the nearest emergency room, and despite knowing that J.T. was a fully-formed baby, Defendants directed Plaintiff to bring J.T. across county lines to Dr. [the doctor] at the White Plains Center for examination of both J.T. and herself.

61. At the White Plains Center, [the doctor] performed an ultrasound and physical exam on Plaintiff and also examined J.T.

62. Defendants determined that J.T.'s length and femur size were consistent with that of a thirty-three to thirty-six week old baby.

63. Defendants advised Plaintiff that they would dispose of J.T., further upsetting Plaintiff and her family.

64. Plaintiff, just hours post-partum and in shock, was made to wait for many hours at the White Plains Center.

65. Defendants told Plaintiff not to call law enforcement.

66. Plaintiff refused to allow Defendants to dispose of J.T. and a family member contacted law enforcement authorities for assistance.

67. Defendants made misleading statements to law enforcement, including the indisputably untrue statement that Plaintiff was "examined" and that Plaintiff decided on her own to bring J.T. across county lines.

68. J.T. was taken to the Westchester County Morgue.

69. J.T. was a fully formed and otherwise healthy baby.

70. Plaintiff had no intention of aborting a near-term baby, did not consent to the termination of a near-term baby, and would not have aborted a near-term baby or any baby after her first trimester.

71. An autopsy was performed on J.T. on May 7, 2020.

72. The cause of J.T.'s death was determined to be a "medically induced termination of pregnancy of a 30-week fetus."

73. As a result of Plaintiff's ordeal, she has endured significant stress, trauma, emotional anguish, physical pain, including laceration and an accelerated labor and delivery unaided by medication, lactation, soreness, and bleeding.

Section 3



Dispatch audio recordings are only available for Hempstead. For the rest, paper documents were received through official agencies and pdfs of them are available on the Problems at Planned Parenthood website.

www.problemsatplannedparenthood.org/new-york

Albany

Because the lengthy document for this address includes other offices which might also have called for ambulance services for accidents, asthma, etc., we only include those noted as either "Hemorrhage / Laceration" or a pregnancy hemorrhage.

April 29, 2011
November 18, 2011
April 26, 2012
August 16, 2012
June 15, 2015
October 7, 2015
December 3, 2015
May 14, 2109

Hempstead

March 2, 2023
August 3, 2023
April 25, 2024
November 9, 2024

Manhattan

This center is closed, so we've put the ambulance calls into Section 9 below. This center had 234 calls from 2010 to mid-2019 documented from an official govern source. This works out to an average about one every two weeks.

New Rochelle

November 1, 2001
November 8, 2001
February 22, 2002
December 20, 2007
August 11, 2009
August 27, 2009
September 17, 2009
June 16, 2011
May 9, 2013
December 3, 2015
March 31, 2016
December 5, 2017
June 20, 2017
February 20, 2014
March 4, 2014
March 4, 2015
March 21, 2016
October 30, 2017
March 9, 2019

Poughkeepsie

May 31, 2017
February 1, 2015
May 15, 2015
February 16, 2016

Queens

New York City is on a separate page from the rest of New York:

www.problemsatplannedparenthood.org/new-york-city

May 20, 2017
October 11, 2017
October 13, 2017
June 5, 2018
July 11, 2018
July 24, 2018
August 15, 2018
October 13, 2018
October 26, 2018
November 27, 2018
November 30, 2018
December 29, 2018
February 27, 2019

Schenectady

January 2, 2009
February 26, 2009
December 21, 2010
January 11, 2011
January 16, 2011
February 7, 2011
June 8, 2011
August 14, 2012
August 28, 2012 HEM / LAC POSS DANGEROUS
September 17, 2012
February 23, 2013
June 12, 2014
September 8 2014
April 7, 2015
April 23, 2015
June 4, 2015 HEM / LAC POSS DANGEROUS
March 14, 2016
April 13, 2017
June 21, 2017
March 6, 2018 HEM / LAC / POSS DANGEROUS
June 12, 2018
September 29, 2018
January 25, 2019
March 6, 2019 HEM / LAC / SERIOUS
May 10, 2019
May 22, 2019

Smithtown

January 13, 2010
February 3, 2010
December 18, 2010
August 7, 2013
November 22, 2013
May 1, 2014
August 20, 2014
February 14, 2015
September 25, 2015
October 27, 2015
March 2, 2016
April 23, 2016
July 12, 2016
November 19, 2016
July 5, 2017
December 15, 2017
March 9, 2018
April 14, 2018
May 5, 2018
July 21, 2018
October 8, 2018
November 3, 2018
February 25, 2019
March 13, 2019
March 25, 2019
July 13, 2019

Syracuse

April 14, 2017
August 8, 2017
February 9, 2018
February 27, 2018
May 9, 2018.
July 31, 2018
November 7, 2019
December 6, 2018
January 9, 2019
June 21, 2019

Utica

A response to a freedom of information request included a scribbled note from the Fire Marshall that there had been 19 ambulance runs from 2015 to October 25, 2019, but there was no information on specifics.

Watertown

August 3, 2015
February 14, 2017
March 2, 2017
June 7, 2018
October 23, 2018
February 23, 2018

West Seneca

February 20, 2010
March 20, 2010
November 12, 2012
May 23, 2013
February 4, 2014
January 15, 2018

White Plains

May 22, 2010
February 12, 2011
April 24, 2011
May 7, 2011
May 16, 2012
May 18, 2012
July 17, 2012
July 23, 2012
April 19, 2014
April 26, 2014
June 21, 2014
June 27, 2014
August 8, 2015
August 28, 2015
September 5, 2015
November 14, 2015
January 12, 2016
February 20, 2016
July 2, 2016
August 27, 2016
January 13, 2018
February 17, 2018
March 24, 2018
April 28, 2018
January 18, 2019

Section 4



Manhattan

Owens

The full Complaint and settlement document are at:

www.problemsatplannedparenthood.org/closed-centers-patient-deaths

Excerpt:

16. In April, 2009, 17-year-old . . . was a senior in high school in excellent health, looking forward to graduating and attending college in the fall.

17. On the morning of April 11, 2009 [she] went to Defendant Planned Parenthood for a scheduled termination of pregnancy . . .

18. . . . Defendant [doctor] . . . noted in his operative report that the procedure was “uneventful” and that there were no complications.

19. According to Defendant Planned Parenthood’s own records, however, [she] was observed experiencing labored breathing immediately after the procedure ended at 9:20 A.M. Her oxygen saturation levels were also reported to have dropped.

20. Despite [her] apparent deteriorating condition, the Doctor and Nurse Anesthetist and Planned Parenthood failed to properly monitor her or to administer the proper treatment and failed to make timely contact with EMS until 9:43 A.M. In fact, due to the delay in recognizing and treating [her] condition, [she] was not transported to St. Vincent’s Medical Center . . . until 10:05 A.M.

21. Although St. Vincent’s was able to stabilize [her], Defendants’ delay and the resultant hypoxia caused [her] to suffer severe irreversible injury. She required a newrespirator thereafter and was unable to leave the hospital. [She] died at St. Vincent’s five months later on September 8, 2009.

Buchanan

The 2017 Complaint, letter informing of death, and new Complaint are at:

www.problemsatplannedparenthood.org/closed-centers-patient-deaths

Excerpt from original Complaint

29. That the foregoing treatment [on May 12, 2015] and management of the plaintiff . . . by the defendant . . . was performed in a careless, negligent, and improper manner . . . including the failure to properly evaluate or diagnose cervical bleeding and cancer thereby causing the plaintiff . . . to sustain severe injuries and dangers . . .
30. That by reason of the foregoing, the plaintiff . . . was severely injured and damaged, rendered sick, sore, lame and disabled, sustained severe nervous shock and mental anguish, great physical pain and emotional upset, some of which injuries are permanent in nature and duration, and plaintiff will be permanently caused to suffer pain, inconvenience, and other effects of just injuries; plaintiff incurred and in the future will necessarily incur further health care facility and/or medical expenses in an effort to be cured of said injuries; and plaintiff has suffered and in the future will necessarily suffer additional loss of time and earnings from employment . . .

Content of Letter, March 19, 2018

Please be advised that plaintiff . . . died on February 24, 2018. We request that action be marked Stayed. Our Office will commence proceedings to appoint an administrator of the estate.

Excerpt from subsequent Complaint

29. That the foregoing treatment and management of the decedent . . . was performed in a careless, negligent, and improper manner . . . including the failure to properly evaluate or to diagnose cervical bleeding and cancer thereby causing the decedent . . . to sustain severe injuries and damages and death . . .
35. That by reason of the foregoing, the decedent . . . was severely injured and damaged, rendered sick, sore, lame and disabled, sustained severe nervous shock and mental anguish, great physical pain and emotional upset, up to the moment of her death.

Part 2: Non-Medical Problems



Sexual Abuse



Employee Rights



Racism

Section 5



New York City

Epstein Files – FBI Entry

FBI Report of Interviews 01.13.21, Page 5, [EFTA00090339.pdf](#)

The interview took place in New York City, but the location of the Planned Parenthood center is not given. Several victims are mentioned.

Excerpt:

[Redacted] called the office to talk to LESLEY, saying she needed to speak to EPSTEIN as soon as possible because she needed money to get an abortion. [Redacted] said the procedure would cost her \$400. LESLEY was able to get EPSTEIN on the phone right away and EPSTEIN gave [redacted] \$1000 in an envelope. [Redacted] then went to Planned Parenthood . . .

[Redacted] was supposed to go to school in 9th grade but with her mother passing away and her family not around, she could not focus. With "selling her body to an older man" . . .

Rochester

Commissioner's Order Number 7906 is under Rochester:

www.problemsatplannedparenthood.org/new-york

Lizardi

Excerpt:

(a) On or about February 2, 1983, while the Respondent was employed at Planned Parenthood of Rochester . . . the Respondent preformed a gynecological examination on Patient A . . . During this examination, the Respondent without medical purpose:

- (i) Stimulated Patient A's clitoris;
- (ii) Questioned Patient A about her sexual ac tivities; and
- (iii) Told Patient A that she had a pretty face and beautiful eyes, while touching Patient A's breasts.

(b) In or about July 1983, while the Respondent was employed at Planned Parenthood, the Respondent performed a gynecological examination on Patient B. During this examination, the Respondent without medical purpose:

- (i) Suggested to Patient B that she call him anytime she wanted;
- (ii) The Respondent subsequently telephoned Patient B at her home in or about August, 1983 and had sexual relations with her; and
- (iii) Patient B returned to Planned Parenthood in or about September 1983, because of a vaginal infection. During Patient B's examination, the Respondent spoke to Patient B in an obscene, threatening and disparaging manner.

Section 6



See also the Open Letter from Employees in Section 7, Racism.



[A Worker Uprising at Planned Parenthood](#)

Melissa Gira Grant, *The New Republic*, June 18, 2020

Excerpt:

As Covid-19 hit New York, staff at a number of Planned Parenthood health centers found themselves facing two crises at once: keeping health services going and keeping their jobs. As some health centers closed temporarily and shifted to telehealth services, staff also saw their hours cut or positions furloughed. To hear workers describe it, this was not entirely unforeseen. For more than a year, they had pressed management to improve conditions for staff, particularly for Black workers, and for the patients they care for. Some on staff have now decided to take their demands public, “inspired and emboldened by national movements led by Black people holding organizations and institutions accountable and working to dismantle systems of oppression and white supremacy.”



[How an Ousted CEO Built a Culture of 'Covert Racism' and Fear at Planned Parenthood's Largest Affiliate](#)

by Esther Wang, *Jezebel*, June 24, 2020

Excerpt:

[W]hen Laura McQuade, the former head of Planned Parenthood Great Plains, became the new CEO of Planned Parenthood of New York City, Adams quickly felt a shift in the organization's culture. Part of it stemmed from a promotion that required Adams to move from the Brooklyn clinic, which was largely staffed by people of color, to the organization's administrative office—a "largely white space," as she put it. "People of color are at the frontlines, but as you go through the ranks, it becomes whitewashed," Adams said . . .

But Adams pinned most of the blame on McQuade, who instituted what she described as a toxic "mean girl" culture and an environment suffused with "covert racism."

On Tuesday, the board of Planned Parenthood Greater New York announced that they had "parted ways" with McQuade . . . Staff concerns against McQuade included accusations of racism and bullying, as well as charges that she had instituted a revenue-driven, assembly-line approach to PPGNY clinics—one that put patients, and in particular Black and other patients of color, at potential risk.



[As Contract Fight Drags On, Planned Parenthood Workers Say Enough is Enough](#)

1199 Magazine (SEIU union), February 22, 2021

Excerpt:

Frustrated 1199ers at four New York City clinics run by Planned Parenthood of Greater New York (PPGNY) held informational pickets Jan. 7 to demand that management stop dragging their feet and settle a fair contract now.

Workers voted unanimously in August 2019 to join 1199SEIU. And PPGNY's stalling around a contract settlement commenced almost immediately. More recently, PPGNY telegraphed its intransigence by hiring an HR director straight from a union-busting law firm. And as New York City's second wave of COVID-19 hit its peak, PPGNY proposed givebacks on workers' healthcare coverage.

No longer on web.	Planned Parenthood In Crisis: Workers Demand Union! by Joe Maniscalco, LaborPress.org, July 23, 2014
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Excerpt:

No less than eight elected officials from both the New York State Legislature and United States Congress are calling upon Karen Nelson, CEO, Planned Parenthood of Western and Central New York, to honor workers' overwhelming decision to have CWA Local 1168 represent them in future contract negotiations.

So, far, however, Planned Parenthood's leadership is refusing – insisting that an official election must be held.

Roughly 70 percent of the Planned Parenthood workers in Central New York already signed union authorization cards in June. The 60-plus employees working in five Planned Parenthood centers around Central New York, say that management has busted down workers to part-time status, while also stripping them of their job titles, and telling them they must reapply for their positions . . .

Fed up, as many as 10 Planned Parent workers have reportedly left the organization in the last three weeks. Those remaining, say that patients are often double booked, requiring staffers to stay on the job long past regular business hours. At the same time, workers say that post-merger management has callously altered worker schedules with no regard for employees' familial obligations.

DeSouza

The 2021 Complaint and the Appeals Court Decision in favor of plaintiff is at:

www.problemsatplannedparenthood.org/new-york

Excerpt:

The Complaint plausibly alleges facts showing “but-for” causation. There is a close temporal connection of approximately one month between Plaintiff's protected activity and the adverse employment action. Plaintiff sent emails complaining of microaggressions against Jewish people to Walker on October 20 and 28, 2020. Her employment was terminated on November 30, 2020.

	Fired Jewish Planned Parenthood Worker Can Sue for Retaliation by Patrick Dorrian, <i>Bloomberg Law</i> , June 8, 2022
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White Plains



[Planned Parenthood Is Accused of Mistreating Pregnant Employees](#)

by Natalie Kitroeff and Jessica Silver-Greenberg, *The New York Times*, December 20, 2018

Tracy Webber, the former director of clinical services in White Plains, sued the organization for pregnancy discrimination in 2009, saying she had been fired four weeks after giving birth. Planned Parenthood settled for undisclosed terms. . .

As a medical assistant at Planned Parenthood, Ta’Lisa Hairston urged pregnant women to take rest breaks at work, stay hydrated and, please, eat regular meals.

Then she got pregnant and couldn’t follow her own advice.

Last winter, Ms. Hairston told the human-resources department for Planned Parenthood’s clinic in White Plains, N.Y., that her high blood pressure was threatening her pregnancy. She sent the department multiple notes from her nurse recommending that she take frequent breaks.

Managers ignored the notes. They rarely gave her time to rest or to take a lunch break, Ms. Hairston said.

“I had to hold back tears talking to pregnant women, telling them to take care of their pregnancies when I couldn’t take care of mine,” she said . . .

When Ms. Hairston asked for regular breaks, including 30 minutes for lunch, her supervisors brushed her off. Ms. Hairston said she sent multiple notes from her nurse at Full Circle Women’s Health to the regional office’s human resources department, stating that the extra breaks were medically necessary. No one responded, and nothing changed, according to Ms. Hairston and the former human resources manager.

Ms. Hairston’s hands and feet swelled; the clinic’s plastic gloves no longer fit. Her blood pressure got so high that her doctor put her on bed rest when she was seven months pregnant.

She returned to work on strict orders to not work more than six hours a day and to take regular breaks. One day in March, she worked a much longer shift. She soon became so sick that her doctor told her to go back on bed rest. A few days later, on March 23, she went to the hospital. Doctors performed an emergency C-section. She was 34 weeks pregnant.

When she had been on maternity leave for eight of the 12 weeks guaranteed by the Family and Medical Leave Act, Planned Parenthood’s human resources department called her multiple times and urged her to return to work early, Ms. Hairston said. She emailed the department and said she felt “discriminated against.” She resigned in June.

“I didn’t get into the medical field to be treated like this,” she said.

Section 7



General Open Letter: Save PPGNY

	From current and former staffers of Planned Parenthood of Greater New York June 18, 2020
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Excerpt:

Racism and Weaponizing of the Work of Diversity, Equity and Inclusion Against Staff

Planned Parenthood was founded by a racist, white woman. That is a part of history that cannot be changed . . . After years of complaints from staff about issues of systemic racism, pay inequity, and lack of upward mobility for Black staff, highly-paid consultants were brought in three separate times to assess the situation. Each time, employees of color were brutally honest about their experiences, but nothing changed . . .

When diversity and equity are weaponized to make changes that are harmful to staff it diminishes the value of these very important areas of change. We know that Planned Parenthood has a history and a present steeped in white supremacy and we, the staff, are motivated to do the difficult work needed to improve.

Decimation of Institutional Knowledge Due to Unprecedented Rates of Staff Turnover

McQuade's time at PPGNY has been defined by constant staff departures. Under her leadership, 23 members of senior staff have quit or been forced out. Many of these colleagues had 10-20+ years of experience with our affiliate. Others were people hired by McQuade directly to newly created positions who left mere months into their roles. This high amount of turnover has had a destabilizing effect on the organization. The loss of institutional knowledge is so profound as to be detrimental to every aspect of the organization.



[Supplemental Open Letter: On Equity](#)

June 18, 2020

We write this — as a group of both current and former BIPOC (Black, Indigenous, People of Color) employees of Planned Parenthood of Greater New York — to expand on the issues of racism and anti-Blackness in our workplace mentioned in our general open letter to the PPGNY Board . . .

PPGNY, under the leadership of CEO Laura McQuade, has effectively gaslit and silenced their marginalized staff thus creating a toxic work environment. While we stand together as people of color, we also stand firm in our commitment to acknowledge that anti-Blackness is a critical and specific fulcrum of white supremacy.

The PPGNY Senior Leadership team, despite the visual appearance of diversity, has repeatedly weaponized the language of diversity, equity, and inclusion. Rather than using their true definitions, senior leaders and upper management have used these terms to manipulate and silence those with differing opinions and perspectives. They have leveraged identity politics by putting Black and other people of color in positions of leadership who actively participate in harming Black staff and other staff members of color below them.

At this point, PPGNY's attempts to present itself as a diverse workplace have been carefully orchestrated and superficial at best. PPGNY repeatedly tokenizes their Chief Equity and Learning Officer, a Woman of Color who is not of African descent, as the "voice" for BIPOC staff. The decision to hire a non-Black person in this role exemplifies the ways in which white-led organizations use non-Black people as a buffer to actually confront and uproot anti-Blackness within organizations . . .

The class tensions are made clearer when the BIPOC leadership were also complicit in the decisions to furlough/terminate 28% of staff. This included the closing of health centers in the Bronx and Queens, as those areas were being devastated by COVID-19. Additionally furloughed staff, many of which are BIPOC women, remain unclear when they will be called back to work and left with no official information regarding when their health insurance will be terminated.

With multiple attempts by the BIPOC staff to bring these concerns to our supervisors, we continue to be invalidated and marginalized. White and non-Black employees are still given more pay and more advancement opportunities than their Black colleagues. Blanket statements are used to overshadow our grievances, while only exacerbating the problem. Black staff are further disheartened when our white and non-Black colleagues use their privilege to amplify our concerns, and find they, too, are challenged and manipulated into silence.

Joyner

Excerpt:

17. In the fall of 2004, the Diversity Department worked in collaboration with the Human Resources Department to address alarming findings on the Great Places to Work (“GPTW”) Trust Index Survey.

18. The survey revealed that Black and Hispanic staff gave substantially lower ratings than white staff on the survey item, *“People here are treated fairly regardless of their race”* . . . In October of 2004, the HR Department conducted a, “comprehensive statistical analysis to further explore these issues and determine whether there are any significant trends in salaries of PPFA staff based on demographic variables” (“Vickberg Report”) . . .

19. . . . The study found that there are, “disparities in pay,” related to race and ethnicity. The report stated that Staff of Color are paid an average of \$7,000 less than White staff, even when controlling for other factors such as age, tenure, gender and job category or salary grade.

21. In particular, Hispanic staff, and to a lesser degree, Black staff, appear to be underpaid. After controlling for all other factors, Hispanic Staff are paid an average of \$9,000-\$12,000 less than White Staff . . .

23. In the last week of November 2004, Mr. Stokes’ office scheduled a meeting to discuss the report with Ms. Bunch, Ms. Vickberg, and Ms. Joyner, though when the meeting began Ms. Vickberg, the principal author of the report, was asked to wait outside. Ms. Bunch, Ms. Vickberg’s boss, then reported that Beth Otten, General Counsel for PPFA, had asked her to inform the group that the study done by Vickberg was, “not commissioned,” that the findings were, “questionable,” and that all copies of the report that had been prepared and distributed by Vickberg and Bunch should be taken back and given to Otten . . .

28. Ms. Joyner and Mr. Stokes stated that an important potential problem existed and it looked as if the results of the report were being swept under the rug . . .

30. Approximately a month later, the African American Senior Vice Presidents and George Stokes, the Chief Operating Officer, who reviewed and possessed the Vickberg Report received a letter from PPFA’s agents which admonished all persons with knowledge of the study from speaking about it in any context, thereby imposing a “gag” on Joyner and the other senior team members.

31. The letter also demanded that the Vickberg Report be returned or otherwise, “destroyed.”

32. Less than one month after receipt of the “gag” letter, George Stokes was relieved of his duties at PPFA and was replaced by Doug Jackson, a white man . . .

36. Over the course of the next year, Ms. Joyner complained routinely and consistently about PPFA's failure to follow up on evidence of race and ethnic discrimination in pay, outlined in the Vickberg Report.

37. Consequently, she was subjected to a campaign of harassment, isolation and stereotyping by interim senior staff and subjected to hostile opposition to her fulfilling her role as Vice President of Diversity . . .

41. At the meeting, Ms. Joyner learned that the meeting had been called . . . to advise the group that a new compensation study had been done . . .

42. Ms. Otten stated that the new study found no inequity in pay . . . Ms. Otten handed out a letter from Welch Consulting firm that gave no particular data or information on the salary structure at PPFA, other than that the study had used, "the methodologies appropriate in the industry," and no disparities existed . . .

47. Ms. Joyner also stated to the group and Ms. Otten that she had been waiting for some organizational response to the Vickberg findings for more than a year and noted that it was odd that she, the head of the Diversity Department, had only then learned of the study for the first time.

48. . . . Ms. Joyner asked Beth Otten if she could read a copy of the new study report. Ms. Otten sent an email rejecting this request, citing confidentiality concerns.

49. Within one week, Ms. Joyner was called into a meeting . . . and was given a choice of either resigning or being discharged.

50. Indeed, at the time of Ms. Joyner's termination, all senior managers and mid-level professional staff who had proprietary information about the findings of *salary* disparities impacting racial and ethnic minorities in the national organization had lost their positions through terminations and/or forced resignations.

Mitchell

The 2023 Complaint is at:

www.problemsatplannedparenthood.org/new-york-city

Excerpt:

. . . the reality is that Planned Parenthood continues to be run by people who are openly hostile to racial minorities, the disabled, older workers and those who complain about discriminatory practices.

Proof of this reality lies in the lawsuit filed by . . . Moore*, who on October 19, 2022 . . . alleged that Planned Parenthood continued to discriminate against African American employees . . .

Now , [defendant], the Chief Operational Officer and highest ranking African American male in Planned Parenthood of Greater New York's history, is filing this lawsuit alleging that he too has been victimized by race, gender, age and disability in violation of Federal State, and New York City laws. This lawsuit is meant to shine a light on the discriminatory and retaliatory employment practices that permeate the organization and bring justice to Mr. Mitchell for the unrelenting discriminatory practices he had and continues to endure.

Duckett-Holmes

The 2024 Complaint can be found at:

www.problemsatplannedparenthood.org/new-york-city

Excerpt:

21. On or about September 27, 2021, PPGNY hired Plaintiff as Regional Director of Operations . . . based at the Manhattan location . . .

26. Throughout Plaintiff's employment, she was subjected to a continuing pattern and practice of discrimination and hostile work environment based upon her race, color, and gender and in retaliation for complaining about PPGNY's discriminatory actions and other wrongdoing, and for being absent from work due to valid protected leave under the FMLA . . .

28. By way of example, PPGNY required Plaintiff to endure brutal and unsafe working conditions due to her race, color, and gender. Specifically, Plaintiff was forced by her supervisor, . . . to work every single day of the months of October and November 2022 without a day off as a charge nurse.

29. PPGNY's requirements in this regard were clearly discriminatory on these bases, because PPGNY did not require similarly situated white, Caucasian, or male employees to work slave-like hours doing work that was effectively a demotion

30. In or around the end of October 2022, Plaintiff engaged in protected conduct by complaining . . .

32. In fact, in response to Claimant's complaint, PPGNY began a targeted campaign against Claimant in retaliation for this protected conduct, including subjecting her to an increased and disproportionately burdensome workload.

33. Plaintiff suffered a stress-induced medical event as a result of this retaliatory misconduct that necessitated her taking FMLA leave from work on or about March 27, 2023, to about May 22, 2023, when she returned to work.

34. Following her return, and in violation of the FMLA, Plaintiff was placed in a substantively different role than the one she had prior to her job-protected medical leave, a role that would require significantly more stress and responsibility than the role she worked prior to her leave of absence . . .

36. The new responsibilities being hazardous to her health, on June 6, 2023, Plaintiff was constructively terminated effective July 7, 2023 . . .

43. While Plaintiff's employment with PPGNY was a harrowing, traumatic experience, the events complained of herein do not reflect a unique incident, as rudimentary internet research paints a similarly distressing picture of discriminatory abuse and misconduct⁵ by PPGNY⁶ and those occupying the most powerful positions within PPGNY . . .

48. As a result of PPGNY's unlawful and discriminatory actions, Plaintiff has endured unlawful humiliation resulting in extreme emotional distress, severe depression, extreme anxiety, and physical ailments.

Screenshot:

Complaint filed November 12, 2014

Department of Health and Human Services – Office for Civil Rights
Health Information Privacy Complaint

On three separate visits this year, I've been made to feel unwanted in by Planned Parenthood of NY 26 Bleeker Street practice. It seems a negative change in attitudes with the predominantly Black front end staff occurs once my insurance info is looked up. There has been repeated incidences dehumanizing behaviors while having morning appointments bumped to late afternoons/evening. Staff will put more effort into pressuring me to leave the office than to process my paperwork. Opting to stay in the waiting area, I've witnessed Caucasian patients be accommodated immediately with similar circumstances as me. Directors, Supervisors, Doctors and Nurses do NOT respond to complaints on obvious unequal treatment of patients. I have been a patient of this location from 2010-2014. There has not been a problem until this year. Attached are detailed incidences experienced this year with the November 8th appointment change email.

Section 8



Indeed.com is a site that among other things provides a place for employees to give reviews of their employers. Here we offer a sample of such reviews; many more, plus ones from Glassdoor, are on the website.



NY Canandaigua Indeed

2.0
.....



Patient Service Specialist

Patient Service Representative (PSR) (Current Employee) - Canandaigua, NY - September 20, 2017



Indeed Featured review

The most useful review selected by Indeed

Planned Parenthood is a fast paced environment. Multitasking is essential to your success. Currently there is no formal training for this position, it is on the job training which can be challenging.



NY Bronx Indeed

1.0

☆☆☆☆☆

Retaliation by management...

Inventory Control Associate (Former Employee) - Bronx, NY - April 24, 2019

Unprofessional The Bronx location. Management very verbally abusive. Unfair treatment towards people who took disability when they return. Management has favorites among the staff.

✓ Pros

The other 4 boroughs have better communication amongst management & staff.

✗ Cons

Management in the Bronx has a problem with accountability. Have favorites among the staff as well.



NY Buffalo Indeed

2.0

☆☆☆☆☆

If you care about patients, don't work for Planned Parenthood.

PATIENT SERVICE SPECIALIST (Former Employee) - Buffalo, NY - September 9, 2019

If you are willing to turn a blind eye to insurance fraud, health code violations, labor law violations, wage theft, and overhearing your colleagues shame young people for being sexually active or having more than one partner, PPCWNY is the place for you. Don't waste your time.



NY Schenectady Indeed

1.0



I wouldn't trust this company until they get rid of upper management and restructure the entire place as a whole

Victim Services Specialist (Former Employee) - Schenectady, NY - August 13, 2020

I worked there for a few years and Covid really opened my eyes to how horrible this agency treats their employees. They furloughed and laid off staff that have been loyal to the agency for years and treated them like trash. If you want more information, look up the Times Union article. Don't trust PPGNY until there is new upper management and they completely restructure every single department in the agency. Some employees openly discuss their dislike in the BLM movement and you will have no job security.

✓ Pros

None until changes are made.

✗ Cons

Upper Management is untrustworthy.

Section 9 – Manhattan Closed Center

Because the Manhattan Center (formerly named the Margaret Sanger Center) was closed in late 2025, we list its problems separately. Planned Parenthood writings indicate they intend to open the center back up with a new building. Two patient deaths at this center remain in Section 4 on patient deaths rather than being repeated here.



All Court Documents are available at:

www.problemsatplannedparenthood/closed-centers-malpractice

If the center re-opens, they will be moved back to
www.problemsatplannedparenthood/new-york-city

Bracero

Excerpt, 2013 Complaint:

19. That while the plaintiff was a patient of defendants, medical treatment . . . were performed upon plaintiff on or about April 2, 2011, and thereafter to present . . .

22. That the defendants . . . were negligent . . . in the medical, hospital, surgical, pathologic and radiologic and treatment rendered to plaintiff by hospital personnel . . . performed improper procedures upon plaintiff, failed to discern and pursue appropriate follow-up treatment, failed to consider, recommend and utilize other methods . . . and caused and/or allowed plaintiff to develop infections, failed to diagnose, treat, and properly care for same . . .

Brathwaite

Excerpt, 2002 Complaint:

20. That the medical treatment rendered by the defendants . . . constituted medical malpractice in that the defendants failed to properly treat the plaintiff for her pregnancy condition . . . failed to properly perform sonograms; failed to diagnose an ectopic pregnancy . . .

Burton

Excerpt, 2006 Complaint:

78. That on or about the 21st day of September, 2004, the Defendant . . . improperly handled the post-operative care of Plaintiff at PLANNED PARENTHOOD, resulting in injuries, including but not limited to, a uterine perforation, need for surgical intervention, hematoma and a permanent left leg neuropathy.⁴

79. That during all of the procedures and treatment rendered to the Plaintiff, the Defendants departed from acceptable standards of medical care to the Plaintiff.

80. That the Defendants caused Plaintiff to sustain serious injuries, including but not limited to, a uterine perforation, exploratory laparotomy, repair of a uterine perforation, infection, and a lumbosacral plexus neuropathy.

Carmona

Excerpt, 2007 Complaint:

29. Defendant, Planned Parenthood of New York City, prior to granting and renewing of employment and association privileges of physicians, residents, nurses and others involved in the Plaintiff's case, failed to investigate the qualifications, competence, capacity, abilities and capabilities of said staff including but not limited to obtaining the following information: patient grievances, negative health care outcomes, incidents injurious to patients, medical malpractice actions commenced against said persons, including the outcome thereof, any history of investigations commenced against said persons, including the outcome thereof, any history of associations, privileges and/or practice at other institutions, any discontinuation of said associations, employment, privileges and/or practice at other institutions, and any pending professional misconduct proceedings in the State or another State, the substance of the allegations in such proceedings . . .

30. Had defendant . . . reviewed and analyzed the information obtained in a proper manner, employment would not have been granted and/or renewed.

31. By reason of defendant's . . . failure to meet the aforementioned obligation, plaintiff was treated by doctors, nurses, technicians, and others were lacking the requisite skills . . . as a result of which the plaintiff sustained severe injuries and complications . . .

Chin

Excerpt, 2004 Complaint:

6. That on March 27, 2004, while plaintiff was attempting to stand up after undergoing anesthesia . . . she was caused to fall, causing plaintiff to sustain serious personal injury . . .

12. That on March 27, 2004 the defendant . . . negligently and carelessly maintained and said premises in such a haphazard, negligent manner as to cause the same to become and remain in an unsafe, improper and dangerous condition, which consisted of a trap and nuisance as well as a negligent and improper condition of which the defendant had due notice, or by the use of reasonable care and inspection therein, might and should have had due notice

15. That by reason of the aforesaid, plaintiff was rendered sick, sore, lame and disabled, and was unable to attend to her usual duties for a considerable time, required medical aid and attention, suffered grievous physical pain and mental anguish and has been damaged in the sum which exceeds the jurisdictional limits of all lower courts which would otherwise have jurisdiction . . .

Cox

The 2014 Complaint is under Manhattan at:

www.problemsatplannedparenthood.org/new-york-city

Excerpt:

14. The Defendants failed to properly and timely assess, diagnose, and treat an ectopic pregnancy.

15. The Defendants failed to perform, review and interpret proper and timely diagnostic testing, including, but not limited to sonography and laboratory tests.

16. The Defendants failed to properly and timely treat the ectopic pregnancy medically . . .

21. As a result of the Defendants' negligence and malpractice, [Plaintiff] suffered . . . serious, severe, and permanent personal injuries, had and will continue to have severe conscious pain and suffering, had to undergo surgery that in the absence of negligence would have and should have been unnecessary, lost a fallopian tube, damage to reproductive system, suffers a decreased chance of conceiving, carrying and delivering a baby, suffers scar tissues/adhesion formation, abdominal scarring and related injuries, the risk of further scar tissue formation and related injuries, emotional injuries and sustained general and special damages.

Hanna

Excerpt from Complaint:

12. Plaintiff consulted defendants . . . on or about March 15, 2002 for pregnancy

...

14. That on or about March 26, 2002, plaintiff was admitted to NY Downtown Hospital where she was diagnosed with an ectopic pregnancy and was required to undergo an examination under anesthesia, dilation and curettage, diagnostic laparoscopy, right salpingostomy and right salpingectomy.

15. That defendants departed and deviated from good and accepted gynecological and obstetrical practice in the care and treatment rendered to plaintiff and that as a result of the negligent and careless treatment rendered. . . plaintiff sustained serious injury and was required to undergo hospitalization . . .

17. That defendants were negligent and careless in the care and treatment rendered to the plaintiff, in that defendants should have had a heightened sense of the potential for an ectopic pregnancy; defendants should have ordered a sonogram and advised an emergency office visit or referred plaintiff to the emergency room for evaluation; in failing to adequately test and exam plaintiff and diagnose an ectopic or tubal pregnancy; in failing to perform an appropriate blood tests or early sonogram to determine if plaintiff had an ectopic pregnancy; in causing delay and occasioning such delay in diagnosing a tubal pregnancy until it was too late to save the right tube; in failing to render proper prenatal care to the patient; in failing to order a Beta HCG . . . in misdiagnosing plaintiff . . .

Houston

Excerpt, 2011 Complaint:

41. . . . solely as a result of the negligence and malpractice and carelessness of the defendants, and without any negligence on the part of the plaintiff contributing thereto, the plaintiff sustained severe and permanent personal injuries including subsequent surgery, incomplete abortion, scarring, substantial conscious physical pain and suffering, emotional, psychological and mental distress and loss of enjoyment of life.

42. Upon information and belief, all injuries are permanent.

Jordan

Excerpt, 2015 Complaint:

28. Among other things, the defendants were careless and negligent in the medical care and treatment rendered to plaintiff . . . in failing to properly screen and test . . . in failing to adequately and/or completely perform a dilation and curettage and/or dilation and evacuation . . . in failing to sound the uterus in such a manner as to identify uterine size and position the sharp curette as to so avoid application of injudicious force . . . in utilizing a curette in an improper fashion; in failing to perform a bimanual examination

under anesthesia; in failing to determine cervical dilation; in failing to determine uterine fundal position; in failing to determine uterine size . . . in improperly inserting laminaria; in proceeding with the termination of pregnancy procedure despite concern for uterine perforation . . . in transecting the cervix from the uterus; in traumatically injuring plaintiff's uterus; in perforating/lacerating plaintiff's uterus . . . in failing to properly, thoroughly and/or adequately anesthetize and/or sedate the plaintiff; in failing to diagnose the true extent and nature of said post-operative condition . . . in failing to prescribe appropriate medications; in failing to perform requisite tests and studies . . . in failing to properly read and interpret the results of those tests which were taken . . . in improperly retaining unqualified and unskilled physicians, nurses, and personnel . . .

29. As a result of the carelessness and negligence of the defendant, plaintiff . . . was caused to sustain severe and permanent personal injuries including rupture, perforation and laceration of the plaintiff's internal organs and blood vessels, including uterus and right uterine artery; was caused to have her uterus nearly completely transected from the cervix; was caused to undergo a diagnostic laparoscopy, exploratory laparotomy, supracervical hysterectomy, bilateral salpingectomy, removal of hematoma and small bowel exploration; hemoperitoneum; was caused to sustain otherwise unnecessary abdominal scarring; was caused to be rendered infertile; was caused to require a prolonged hospitalization stay; was caused to suffer a severe loss of energy and weight; was caused to undergo otherwise unnecessary surgical procedures; was caused to suffer pain, mental anguish, emotional distress, embarrassment and anxiety . . . was caused to be confined to home, hospital and bed . . . and this plaintiff was otherwise damaged, all of which damages and injuries are permanent in nature and continuing into the future.

McClendon

Excerpt, 2003 Complaint:

8. Defendants . . . committed acts of medical malpractice in connection with the care and treatment rendered to [Plaintiff] . . . in failing to diagnose Plaintiff's true condition, in failing to properly treat her condition, in failing to perform necessary treatment, in negligently, carelessly and recklessly managing her medical care . . .

9. As a result of the foregoing, [Plaintiff] has suffered severe and permanent personal injuries, has experienced pain and suffering, emotional and psychic trauma, mental anguish, loss of enjoyment of life, has suffered permanent hearing loss and has incurred otherwise unnecessary expenses and future financial injury.

Pusey

The 2017 Complaint is under Manhattan at:

www.problemsatplannedparenthood.org/new-york-city

Excerpt:

15. That the defendants PLANNED PARENTHOOD . . . were negligent and committed malpractice in performing surgery in a negligent manner; in negligently perforating the uterus; in negligently lacerating, traumatizing and injuring the left uterine artery; in negligently causing massive hemorrhage and shock; in rendering negligent post-operative monitoring, care and treatment; in failing to exercise proper supervision . . .

16. That by reason of the foregoing, the plaintiff was proximately caused to sustain severe and permanent personal injuries, pain, suffering loss of enjoyment of life, mental anguish, cosmetic disfigurement, economic and pecuniary damages.

Richards

Excerpt, 2005 Complaint:

13. That on or about April 8, 2004, plaintiff was admitted to SUNY Downstate Medical Center where she was diagnosed with a right ruptured ectopic pregnancy and was required to undergo a diagnostic laparoscopy, exploratory laparotomy, evacuation of hematoma, right partial salpingectomy, and lysis of adhesions.

14. That defendants departed and deviated from good and accepted gynecological and obstetrical practice in the care and treatment rendered to plaintiff and that as a result of the negligent and careless treatment rendered to the plaintiff, plaintiff sustained serious injury and was required to undergo hospitalization and procedure and, upon information and belief, further hospitalizations and procedures may be required . . .

16. That defendants were negligent and careless . . . in failing to adequately test and exam plaintiff and diagnose an ectopic or tubal pregnancy . . .

17. By reason of the foregoing, plaintiff sustained severe and serious personal injuries; was caused to suffer severe physical pain and mental anguish as a result thereof; and many of the injuries are of a permanent and lasting nature; that plaintiff was confined to bed and home and hospital as a result thereof; and was incapacitated from attending to her usual duties and activities.

Ruiz

Excerpt, 2012 Complaint:

16. As a result of the foregoing, the Plaintiff . . . has suffered serious and severe permanent personal injuries, including but not limited to conscious pain and suffering, loss of enjoyment of life, uterine perforation, hemorrhage, exploratory laparotomy and other injuries.

Thompson

Excerpt from Complaint:

11. That at all times mentioned herein defendants . . . were negligent in failing to follow good and accepted medical and surgical practices . . . in failing to properly consult the plaintiff's chart and/or medical records; in failing to properly diagnose plaintiff's condition; in failing to timely and properly perform surgeries . . . in negligently perforating plaintiff's uterine; in failing to use the proper surgical tools; in failing to properly examine plaintiff, especially plaintiff's uterus . . .

12. That as a result . . . plaintiff was caused to sustain severe and permanent personal injuries including uterine injuries, bowel injuries, nerve injuries, pain and suffering, medical expenses, loss of enjoyment of life, pain and suffering and other damages.

Vanderhyden

Excerpt, 2007 Complaint:

117. On or about April 12, 2006 and February 3, 2007, while the plaintiff was a patient at the medical facilities of the defendant, Planned Parenthood of New York City . . . the plaintiff was seriously and permanently injured . . .

131. By reason of the aforesaid, the plaintiff. . . was caused to suffer and sustain severe and permanent serious personal injuries, severe and serious pain, suffering, and mental anguish, the plaintiff . . . has been caused to expend and become obligated to expend sums of money for medical services and related expenses, and has thereby been injured and damaged as against these defendants.



Because this center is closed, its documents can be found at

problemsatplannedparenthood.org/closed-centers-911-calls

If the center re-opens, they will be moved back to

www.problemsatplannedparenthood/new-york-city

2010

January 9, 2010
January 28, 2010
March 10, 2010
March 12, 2010
March 26, 2010
April 8, 2010
April 29, 2010
May 4, 2010
May 6, 2010
May 27, 2010
June 29, 2010
October 7, 2010
October 9, 2010
October 14, 2010
November 6, 2010
December 29, 2010

2011

January 29, 2011
February 24, 2011
March 2, 2011
March 10, 2011
April 8, 2011
June 3, 2011
July 1, 2011
July 22, 2011
July 27, 2011
September 1, 2011
September 13, 2011
September 14, 2011
September 16, 2011
September 20, 2011
September 24, 2011
October 4, 2011
December 17, 2011

2012

January 13, 2012
January 20, 2012
January 21, 2012 (two calls)
January 28, 2012
February 3, 2012
February 16, 2012
March 23, 2012
April 9, 2012
April 25, 2012
May 2, 2012
May 19, 2012
May 19, 2012
June 2, 2012
June 9, 2012
June 19, 2012
June 21, 2012
June 22, 2012
June 23, 2012
June 27, 2012
July 3, 2012
July 5, 2012
July 27, 2012 (two calls)
October 26, 2012
November 9, 2012
December 1, 2012

2013

January 3, 2013
February 1, 2013
February 21, 2013
March 7, 2013
May 1, 2013
May 4, 2013
April 10, 2013
April 24, 2013
May 11, 2013
May 23, 2013
June 20, 2013
June 29, 2013
July 3, 2013
August 3, 2013
August 7, 2013
August 30, 2013
September 18, 2013
September 19, 2013 (two times)
September 26, 2013
October 29, 2013
December 12, 2013

2014

January 4, 2014
January 10, 2014
January 12, 2014
February 19, 2014
March 8, 2014
March 14, 2014
March 25, 2014
March 29, 2014
June 18, 2014
June 26, 2014 (two times)
June 27, 2014
July 1, 2014
July 26, 2014
August 7, 2014
August 14, 2014
September 4, 2014 (two times)
September 10, 2014
October 10, 2014
October 18, 2014
November 7, 2014
November 8, 2014
December 3, 2014
December 5, 2014
December 13, 2014

2015

January 13, 2015
January 16, 2015
February 7, 2015
March 28, 2015
May 9, 2015
April 11, 2015
April 14, 2015
April 21, 2015
June 2, 2015
June 5, 2015
June 11, 2015 (three times)
October 11, 2015
May 11, 2015
October 11, 2015
October 14, 2015
November 13, 2015
November 21, 2015
December 4, 2015
December 11, 2015
December 19, 2015

2016

January 8, 2016
February 2, 2016
February 25, 2016
March 1, 2016
March 20, 2016 (three times)
March 24, 2016
April 4, 2016 (two times)
April 18, 2016
April 19, 2016
April 26, 2016
May 6, 2016
May 7, 2016
June 8, 2016
June 17, 2016
June 21, 2016
July 23, 2016 (two times)
September 15, 2016
September 22, 2016
September 28, 2016
October 13, 2016
October 28, 2016
November 4, 2016 (two times)
November 11, 2016
November 30, 2016
December 10, 2016
December 14, 2016

2017

January 12, 2017 (two times)
January 13, 2017
January 18, 2017
January 25, 2017
February 4, 2017 (two times)
February 9, 2017
February 15, 2017
March 3, 2017
March 8, 2017
March 21, 2017
March 23, 2017
March 29, 2017
April 12, 2017
April 21, 2017
April 28, 2017
May 10, 2017
May 13, 2017
May 24, 2017
May 25, 2017
July 5, 2017
July 7, 2017
July 19, 2017

August 18, 2017
September 27, 2017
September 29, 2017
October 4, 2017
October 7, 2017
October 19, 2017
November 17, 2017
December 2, 2017
December 29, 2017

2018

January 26, 2018
February 15, 2018
March 30, 2018
April 3, 2018
April 5, 2018
April 6, 2018
May 15, 2018
May 18, 2018
June 12, 2018
June 29, 2018
July 7, 2016
July 20, 2018
May 18, 2018
August 1, 2018
August 15, 2018
August 30, 2018
September 5, 2018
October 18, 2018
October 25, 2018
November 8, 2018
November 29, 2018
December 4, 2018 (two times)
December 6, 2018
December 12, 2018
December 14, 2018
December 20, 2018

2019

January 2, 2019
January 9, 2019
January 10, 2019
January 15, 2019
January 16, 2019
January 17, 2019
February 15, 2019
February 16, 2019
February 23, 2019
March 6, 2019
March 21, 2019
March 27, 2019

Final Points

Articles of special interest for all states:

	Botched Care and Tired Staff: Planned Parenthood in Crisis by Katie Benner, <i>The New York Times</i> , February 15, 2025
	You scheduled an abortion. Planned Parenthood's website could tell Facebook. The organization left marketing trackers running on its scheduling pages by Tatum Hunter, <i>The Washington Post</i> , June 29, 2022

Compilation of reviews on specific topics:

	Reviews Report - Medical Dangers
	Reviews Report - Racism
	Reviews Report - Employee Rights
	Reviews Report - Financial Ethics