Medical Incident Report: Suspected Medical Negligence

Patient Information

- **Patient Name:** Reinhold Wischnewski [redacted]
- **Incident Timeframe:** April 2026

1. Background & Initial Symptoms

Prior to the hospital admissions, the patient experienced neck pain. This was diagnosed and dismissed as arthrosis by the local Health Centre. It is strongly suspected that this pain was already an early indicator of a stroke that was missed.

2. First Hospital Admission (April 1st - April 2nd)

- The Emergency Room (ER) failed to detect a stroke using their standard testing procedures.
- **Retrospective Finding:** It was later revealed that the patient had actually suffered **two strokes**.
- Upon discharge on April 2nd, the patient's basic motor and cognitive functions were still intact; he was able to walk and speak.

3. Second Emergency Room Visit (April 20th)

- **Symptoms at Presentation:** The patient presented at the ER with bladder issues and hearing problems.
- **Attending Physician:** The patient was seen by the exact same doctor who had evaluated and discharged him on April 1st.
- **Failure to Diagnose:** The physician failed to recognize the severe clinical deterioration of the patient. According to observations, within just two weeks, Reinhold's vitality had degraded so significantly that he appeared to have aged ten years.
- **Treatment Provided:** Medical intervention was negligible, limited only to a few undefined blood tests. Only antibiotics were prescribed without further information.
- **Discharge:** The patient was discharged without any further treatment, observation, or follow-up plan.

4. Severe Deterioration Post-Discharge (After April 21th visited by urologist/nurse at home)

Following the premature discharge from the ER on April 20th, the patient's condition worsened drastically and rapidly. The following severe symptoms manifested **after** leaving the hospital

and catheter replacement:

- **Neurological Deficits:** Complete loss of speech (aphasia).
- **Motor Function Loss:** Inability to walk.
- **Paralysis:** Left-sided paralysis affecting the arm and hand.
- **General Health:** Overall extremely poor vitality.
- **Incontinence:** Severe problems with urination and bowel movements.

5. Lack of Support

Currently, the patient and his family have been left entirely without dedicated medical contact persons, case managers, or guidance for follow-up care despite the life-altering deterioration.