



HASSARD
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PROFESSIONAL EXPERIENCE:

HASSARD BONNINGTON LLP, San Francisco, CA
Managing Partner 2018 - Present
Partner, 2014-2018
Associate, 1997-2006, 2012-2014

ONYX OPTICS, INC., Dublin, CA
President, 2006-2012

THE GOLDMAN LAW FIRM, San Francisco, CA
Associate, 1995-1997

Ms. Meissner is admitted to practice before all state and federal courts in the State of California. Since joining the firm in 1997, Ms. Meissner has successfully defended physicians, hospitals and other healthcare professionals throughout all stages of civil litigation and administrative matters. A large portion of her practice involves the defense of licensed medical physicians, either in pending medical malpractice cases, hospital peer review hearings, or disciplinary actions before licensing and accreditation boards. Ms. Meissner has defended hospitals on numerous complex issues including Legionnaire's Disease, wrongful birth/wrongful life cases (failure to diagnose cystic fibrosis/failure to diagnose birth defects, failure to diagnose sickle cell anemia), psychiatric issues (5150 holds and claims of improper early release from hold leading to suicide/attempted suicide) EMTALA claims, ERISA liens (and detailed analysis of Master Plans to determine whether a plan falls within ERISA) and obtained innumerable dismissals of cases through hard-fought motions for summary judgment, motions to dismiss and demurrers.

TRIAL EXPERIENCE:

2013 - Complex Litigation Probate Dispute: Bench trial in San Mateo County that spanned August through October of 2013. The case to date remains unresolved with ongoing post-trial motions and likely appeals by both sides. The case involved a complex probate dispute amongst family members including allegations of undue influence, financial elder abuse, and breach of fiduciary duty. The trial lasted approximately seven weeks. **Second chair with handling of numerous witnesses at trial**

2013 - Severely Brain Injured Child: Defense verdict on behalf of hospital and nursing defendants involving allegations of medical negligence in the management of a neonatal intensive care unit patient. **Second chair**

2017 - Brachial Plexus Injury: 12-0 defense verdict on behalf of individual physician. The case involved a nurse who underwent her eighth shoulder surgery to repair long-standing shoulder difficulties. The defendant anesthesiologist placed a nerve block so the patient could undergo immediate physical therapy following surgery. Following the surgery, she suffered injury to the brachial plexus nerve branch. She claimed it was caused by the block placed by the anesthesiologist. The trial lasted approximately three weeks. **Co-chair with handling of all causation and damages experts**

2018 – Alleged Delayed Diagnosis of Stroke: Defense verdict on behalf of hospital. Plaintiff alleged defendant hospital, and specifically nurses, failed to timely diagnose his aphasic stroke due to racial bias and a presumption he could not speak English. The hospital argued care and treatment by nurses, including telemetry nurse and transport nurse, was reasonable and within the standard of care. Further, any alleged delay did not cause plaintiff any harm. He was not a candidate for tPA because he had very recently undergone a second bypass surgery and could have suffered a fatal bleeding event. The trial lasted approximately two weeks. **First chair with handling of all witnesses**

2019 – Alleged Negligent Intubation Leading to Death: Settled during jury selection. Plaintiff alleged her husband, who presented with severe flu symptoms, was negligently intubated, leading to his death. This case had numerous co-defendants and was complicated with allegations of alcohol abuse by one of the physicians. Pre-trial motions initially bifurcated the trial with issues surround negligent retention and intoxication claims set for the second phase of trial. Inexplicable rulings after the start of trial to allow the alcohol issues to be presented during the first phase of trial (medical malpractice only) forced the parties to mediation. The physician and his group covered the bulk of the settlement with nominal settlements from telemedicine group (represented by HB) and hospital. The trial lasted approximately one week before resolution. **Co-chair – handled pre-trial motions and early jury selection**

2021 - Alleged Delay in Diagnosis of Brain Tumor: 12-0 defense verdict during Phase I of trial based on a statute of limitations defense. Plaintiff alleged he was not aware of the connection between his recurrent brain tumor and defendant neurologist's care and treatment. This case was one where I had to "parachute in" to a trial already in progress due to trial counsel's health crisis. **Co-chair – handled witnesses, including cross-examination of plaintiff, cross-examination of primary treating physician, successful oral motions in limine to exclude key plaintiff witnesses**

NOTABLE CASES:

MM v. The Regents – Premises Liability/Design Defect: Patient alleged she slipped and fell while a patient on the maternity ward due to a defective design. **Complex motion for summary judgment granted based on governmental immunities – 2021**

PL v. The Regents – Alleged Delay in Transfer of Stroke Patient: Patient was taken to a local hospital for signs of a stroke. The case was filed in federal court including allegations of violation of EMTALA, medical malpractice, NIED, dependent adult abuse, wrongful death and intentional misconduct. Contested motion to dismiss was granted in its entirety, ending the case. **Lead attorney handling all aspects of case through dismissal – 2021.**

KRB v. SHC – Wrongful Life/Wrongful Birth Case: Plaintiffs alleged negligent genetic counseling failed to identify that plaintiff child's parents were both sickle cell anemia carriers. Plaintiff child was born with sickle cell anemia. Discovery revealed plaintiff mother's knowledge of her status as a carrier of sickle cell anemia. Thereafter, the case resolved for nuisance value. **Lead attorney handling all aspects of case through resolution – 2020.**

AS v. SH - Wrongful Life/Wrongful Birth Case: Plaintiff alleged defendant lab failed to identify the genetic marker for cystic fibrosis during prenatal testing, resulting in the birth of a child with severe cystic fibrosis. Plaintiff required very costly medication for life, had significant care needs and a relatively long life expectancy given advances in treatment for cystic fibrosis. Initial demand for \$50 million. Experts were disclosed, key depositions taken and case was resolved for an amount in the low seven figures, a significant victory for the defense. **Lead attorney handling all aspects of case through resolution – 2020.**

CM v. SH - Wrongful Death – Failure to Diagnose Malaria: Plaintiff alleged defendant hospital and physician failed to diagnose malaria, leading to his discharge from the emergency department and death. Plaintiff sought and obtained a significant settlement from the treating emergency physician and proceeded with the case against the hospital. Days before trial, the case settled for nuisance value. **Lead attorney handling all aspects of case through resolution – 2019.**

GS v. SH - Severely Brain-Injured Child: Plaintiff mom and plaintiff child alleged medical negligence related to care and treatment plaintiff child received in the NICU. Plaintiff child had a PICC line placed for nutrition and medication administration. The PICC line migrated and caused a pericardial effusion. Plaintiff child's heart stopped and he underwent a prolonged resuscitation until the pericardial effusion was identified and tapped. Plaintiff mom was brought up to the NICU while the code was in process and brought an NIED claim. The NIED claim was eliminated with a motion for summary adjudication. The plaintiff child had profound neurological injuries but also a significantly long life expectancy. A favorable settlement was reached following development of causation arguments related to placental pathology. **Lead attorney handling all aspects of case through resolution – 2019.**

EG v. The Regents: Plaintiff alleged negligent attempted placement of an epidural catheter prior to hernia surgery, leading to an epidural hematoma and lower extremity paralysis. Plaintiff was a high wage earner with no ability to work and a significant remaining work-life expectancy. Prior to trial, the case was presented to two mock juries, with opening statements, a few witness presentations and closing arguments presented to the mock juries. Expert depositions were underway when plaintiff passed away from unrelated causes. **Co-lead attorney handling causation and damages experts – 2018.**

EDUCATION:

University of California Hastings College of the Law, J.D. 1995

University of California Santa Barbara, B.A 1992