

Suzanne M. Utke

Senior Counsel

SMUtke@mdwccg.com

Philadelphia – 215.575.2610



Suzanne defends physicians, nurses, and all manner of health care professionals and corporate health care facilities against medical and psychiatric malpractice claims and lawsuits. She also focuses her practice on the defense of behavioral health claims and claims involving medical devices and associated liability. In addition, she represents physicians and physician practice groups in negotiation with health care systems for employment matters and mergers. Suzanne has also handled cases involving peer and credentialing reviews and State Board investigations.

Prior to earning her law degree, Suzanne was a Critical Care Nurse working in clinical settings at some of Philadelphia's most prestigious medical hospitals. She also was a Nursing Administrator for several years, tenured in area hospitals' Intensive Care Units, Emergency Rooms and Obstetric Departments. Suzanne maintains her Nursing license in Pennsylvania and is an active volunteer for the local medical community.

An experienced trial attorney, Suzanne draws from her Nursing background and institutional knowledge of health care systems and operations to guide clients in managing litigation efforts. She has an intimate understanding of the unique issues involved in defending medical professional liability claims and leverages this knowledge to achieve successful results.

Suzanne is rated AV-Preeminent by Martindale-Hubbell, the highest rating for an attorney's professional and ethical competence. Among her numerous professional affiliations, she is a member of the New Jersey Trial Attorneys Association, Philadelphia Association of Defense Counsel, Society of Healthcare Risk Managers (Philadelphia chapter), Defense Research Institute (Medical Liability & Health Care Law, and Drug and Medical Device Committees), and the National Association of Professional Women.

Practices

- Medical Malpractice
- Behavioral Health Risk & Liability
- Catastrophic Medical Injury

Education

- Widener University Delaware Law School (J.D.)
- Saint Joseph's University (MHA)
- Widener University School of Nursing (BSN)
- Thomas Jefferson University College of Nursing (RN)

Admissions

- New Jersey
- Pennsylvania
- U.S. District Court Eastern District of Pennsylvania
- U.S. District Court Eastern District of Michigan
- U.S. District Court Middle District of Pennsylvania
- U.S. Court of Appeals 3rd Circuit
- U.S. Court of Appeals 4th Circuit
- U.S. Court of Appeals 5th Circuit
- Supreme Court of Pennsylvania

Honors & Awards

- Cambridge Who's Who Among Executive and Professional Women in Nursing Healthcare
- National Academy of Jurisprudence – Premier 100
- National Association of Excellence in Jurisprudence: Top 100 - Judicial Appointment – Pennsylvania
- AV® Preeminent™ by Martindale-Hubbell®

Associations & Memberships

- American Association of Critical Care Nurses
- Defense Research Institute, member, Medical Liability and Health Care Law, Drug and Medical Device Committees
- National Association of Female Professionals
- National Association of Professional Women
- New Jersey Trial Attorneys Association
- Philadelphia Area Society of Healthcare Risk Managers
- Philadelphia Association of Defense Counsel
- Trucking Industry Defense Association

CLASSES/SEMINARS TAUGHT

- *Medical Legal Issues for Physicians Assistants*, Thomas Jefferson University School of Physicians Assistants Program, East Falls, PA and Voorhees, NJ campuses, November 10, 2022

SIGNIFICANT REPRESENTATIVE MATTERS

- Received a defense verdict in a binding arbitration, representing a doctor and her practice group in Montgomery County Court of Common Pleas. This was a Wrongful Death / Survival Action alleging malpractice against the primary care physician (PCP) and her practice, as well as numerous other physicians and two hospitals. The plaintiffs' decedent was a 42-year-old female with chronic respiratory problems

including asthma, sinusitis, hypertension, morbid obesity, diabetes and other issues. The doctor was the plaintiff's long-standing PCP and saw the plaintiff three days prior to her emergent admission to the Emergency Department where she was diagnosed with a PE. When the plaintiff was seen by the PCP, she showed no signs of leg swelling, which would be consistent with deep vein thrombosis (DVT). While in the hospital, the plaintiff suffered a massive event which left her pulseless. She was coded without success. The PCP and her practice group were sued for allegations of a failure to diagnose a DVT and/or evolving PE. Suzanne negotiated a transfer from the Civil Trial Attachment in January to Binding Arbitration. After a two-day arbitration, she received a defense verdict. Plaintiff's demand immediately preceding the trial attachment was \$4 million, which included a \$1.3 million future wage loss. No offer was ever extended. (We negotiated a high low with the low being \$30,000.)

Results

Defense Verdict After Five-Day Jury Trial in Medical Malpractice Action Where Initial Demand was \$5 Million

We received a defense verdict in a five-day jury trial in Philadelphia County involving multiple defendants. We defended the medical malpractice claim alleging a violation of HIPAA privacy and an intrusion upon plaintiff's seclusion resulting in his eviction and severe emotional distress. The plaintiff claimed an anonymous email he sent to our client, a social worker, purporting to seek mental health therapy was a "mental health record" and subject to HIPAA privacy laws. When it was discovered that the email was from the same individual stalking and harassing the client's sister who worked at the apartment complex where he lived, our client provided the email to her sister, who then gave it to her employer to support legal action against the plaintiff. The email was used in an eviction proceeding, and the plaintiff claimed that the disclosure of the email violated his privacy rights under HIPAA and that he suffered humiliation and severe emotional distress as a result. The claim involved counts for medical and legal professional negligence, negligence per se, intrusion upon seclusion, conspiracy to commit an intrusion upon seclusion, intentional and negligent infliction of emotional distress, and a plea for punitive damages. The initial demand of \$5 million was reduced to \$125,000 before trial. No offer was made and a unanimous defense verdict was rendered in less than three hours.

Summary Judgment Secured in 10-Year-Old Medical Malpractice Case

We won a very hard-fought motion for summary judgment based on the plaintiff's failure to prosecute in a matter that is now 10 years old. Suzanne won oral argument to dismiss the suit, based on the plaintiff's failure to prosecute his case, by proving both actual prejudice to the client, a psychologist, and an inexcusable seven-year delay in any activity by the plaintiff. This medical malpractice claim was brought in Cumberland County, Pennsylvania, and was related to a psychological evaluation conducted of the plaintiff's three children, whom he physically and psychologically abused for years.

Summary Judgment Motion Granted in a Failure to Diagnose Case

We won a summary judgment motion in a failure to diagnose breast cancer case on behalf of an imaging company. The plaintiff had four mammograms over a four year period, all of which read as negative for abnormalities by four radiologists. At the end of the fourth year, the plaintiff was hospitalized as a result of a fall, during which she was diagnosed with Stage IV metastatic breast cancer. In the resulting lawsuit, our client was named for theories of corporate and vicarious liability. After complex discovery, the motion for summary judgment was finally granted, with prejudice, for our client.

Binding arbitration defense verdict for doctor and practice group.

This was a wrongful death/survival action alleging malpractice against the primary care physician (PCP) and her practice, as well as numerous other physicians and two hospitals in Montgomery County, PA. The plaintiffs' decedent was a 42-year-old female with chronic respiratory problems including asthma, sinusitis, hypertension, morbid obesity, diabetes and other issues. The doctor was the plaintiff's long-standing PCP and saw the plaintiff three days prior to her emergent admission to the Emergency Department where she was diagnosed with a pulmonary embolism (PE). When the plaintiff was seen by the doctor, she showed no signs of leg swelling, which would be consistent with deep vein thrombosis (DVT). While in the hospital, the plaintiff suffered a massive event which left her pulseless. She was coded without success. The PCP and her practice group were sued for allegations of failure to diagnose a DVT and/or evolving PE. We negotiated a transfer from the civil trial attachment in January to binding arbitration. After a two-day arbitration, we received a defense verdict. The plaintiff's demand immediately preceding the trial attachment was \$4 million, which included a \$1.3 million future wage loss. No offer was ever extended.

Thought Leadership

February 25, 2026

From Bedside to Bar