

STATE OF MAINE  
PORTLAND, SS.

SUPERIOR COURT  
CIVIL ACTION  
DOCKET NO.:

CALYX HEMENWAY, Individually and  
as P/N/F/O HOLDEN HEMENWAY,

Plaintiff,

v.

CENTRAL MAINE MEDICAL CENTER,  
CAITLIN R. SLOAN, CNM, JANICE E.  
LOCKE, CNM, and CENTRAL MAINE  
HEALTHCARE CORPORATION,

Defendants.

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**COMPLAINT AND DEMAND  
FOR JURY TRIAL**

NOW COMES Plaintiff Calyx Hemenway, Individually and on behalf of her son, Holden Hemenway, by and through undersigned counsel, Gideon Asen, LLC, and complains as follows:

**Factual Allegations**

1. Holden Hemenway is a three-and-a-half-year-old boy with a diagnosis of spastic quadriplegia cerebral palsy. It is likely he will never walk or talk normally, will suffer from impaired cognitive and behavior functioning, and will never be able to work or live a normal life.



2. Holden will likely never be able to live independently and will require medical and life care services for the remainder of his life.

3. Until weeks before his due date, Holden was a normal, healthy baby. For the first 36 weeks of her pregnancy, Holden's mother, Calyx Hemenway, had experienced a normal, uneventful pregnancy apart from pain in her right upper abdominal quadrant.

**Defendants' Negligent "Telephone Medicine"**  
**Instead of In-Person Patient Evaluation**

4. However, on December 9, 2022, the Friday before Holden was born—at 36 weeks pregnancy—Calyx called CMMC reporting symptoms of systemic illness, including feeling feverish, shaking, and chills.

5. Calyx also reported that her baby's fetal movements were not as strong as usual. A change in fetal movements is something all pregnant women are advised to monitor and report, because changes in fetal movements are a well-known sign of fetal distress. This is particularly true where mom is experiencing a systemic illness that may be impacting on the health of the fetus. Changes in fetal movement late in the third trimester can be particularly concerning.

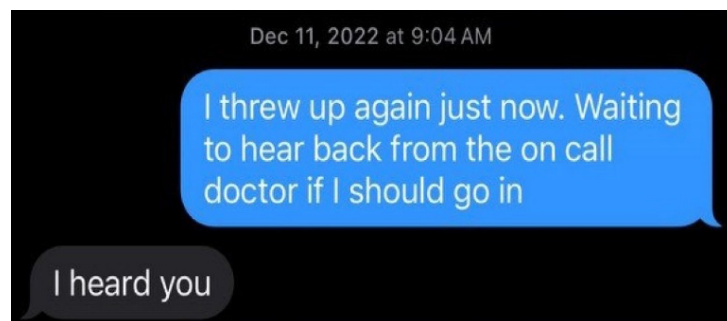
6. Additionally, although the CMMC nurse in the phone call did not elicit the history, Calyx continued to experience pain in her right upper abdominal quadrant in the vicinity of her liver, an additional symptom that—in combination with the other reported symptoms—raises concern for a number of potentially serious medical conditions that jeopardize the health and safety of the mother and child, including preeclampsia, HELLP syndrome, and Acute Fatty Liver of Pregnancy.

7. Calyx asked the nurse if she could "come in and get checked out today."

8. The nurse, in consultation with Calyx’s nurse midwife, Caitlin R. Sloan, CNM, advised Calyx that she did not require in-person evaluation. Rather, they advised Calyx that it would be safe and appropriate to continue to monitor fetal movement at home, and that she should “call back and speak with someone” only “if she notices that baby is not moving as frequently.”

9. Less than 48 hours later, on Sunday, December 11, 2022, Calyx’s condition had worsened. She vomited overnight, and again in the morning. She also noticed that her baby was not moving as frequently.

10. After vomiting, and while still in the bathroom, she placed another call to her OB/GYN office at CMMC. This time, she called the CMMC’s after-hours service, as she had been instructed to do in the previous call if she noted her fetus was not moving as frequently over the weekend. Calyx texted her husband from the bathroom floor while she was waiting for a call back from CMMC:



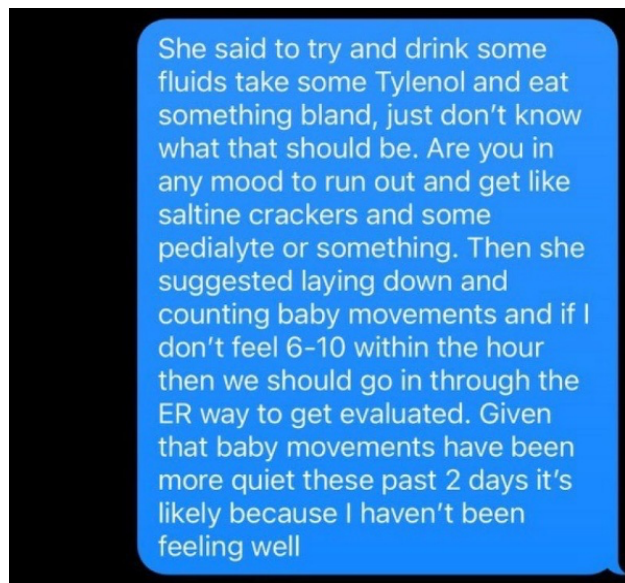
11. Calyx received a call back from a nurse midwife who was on-call and working at the hospital, Janice R. Locke, CNM. Nurse Midwife Locke was not Calyx’s regular nurse midwife and not the nurse midwife consulted in connection with Calyx’s previous call on Friday.

12. Nurse Midwife Locke did not review Calyx’s medical chart and was unaware this was the second time in less than 48 hours that Calyx called with reports of systemic illness and changes in fetal movement.

13. Nurse Midwife Locke was likewise unaware that Calyx's illness had been ongoing and worsening over several days, and that Calyx had been advised to monitor her fetal movements and call back if she noticed the baby's movements were not as frequent. Nurse Midwife Locke was unaware that Calyx's regular nurse midwife, Nurse Midwife Sloan, expected Calyx to be seen and evaluated in-person at the hospital if her condition continued or worsened.

14. As with the last call, the Nurse Midwife Locke advised Calyx that it would be safe and appropriate for her to remain at home without an in-person evaluation, so long as Calyx continued to monitor her fetal movements.

15. After the phone call, Calyx texted her husband to report the advice she was given:



16. Once again, Calyx followed that advice and remained at home, monitoring her fetal movements as directed.

## **The Catastrophic Brain Injury Caused by Negligent Lack of In-Person Evaluation**

17. The following morning, Monday, December 12, 2022, Calyx felt even worse. She decided on her own to go to the emergency department.

18. At the emergency department, doctors ordered a standard set of blood tests and placed a fetal heart monitor. The blood tests were highly abnormal, showing impaired liver and kidney function and dangerously low glucose levels. The fetal heart monitor showed abnormal heart function.

19. Doctors transferred Calyx to the labor and delivery unit and delivered her child by emergency Cesarean section.

20. At birth, Holden was floppy and gasping for air. He was acidotic and had dangerously low blood glucose levels.

21. An MRI study taken four days after birth, on December 16, 2022, revealed a “total brain injury from hypoxia” with damage to both the periphery and central brain stem regions.

22. Based upon the results of Calyx’s blood testing, doctors diagnosed her with a medical condition known to affect pregnant women in the third trimester called Acute Fatty Liver of Pregnancy (AFLP).

23. The treatment for AFLP is delivery. Delivery prevents AFLP from causing additional harm or injury to mom or baby.

24. Had Calyx been seen and evaluated on Friday or Sunday—when she called—standard laboratory testing and fetal heartrate monitoring would have demonstrated AFLP and led to delivery of Holden before Calyx’s AFLP caused his severe, life-altering brain injuries.

25. Had CMMC seen and evaluated Calyx in person in response to her reported symptoms on Friday or Sunday, Holden would have a normal, healthy brain today, rather than a severely damaged brain that has resulted in his diagnosis of spastic quadriplegia cerebral palsy.

### **Parties and Jurisdiction**

12. Plaintiff Calyx Hemenway is a resident of Lewiston, County of Androscoggin, State of Maine and the mother of Holden Hemenway. She brings this action on her own behalf and as parent and next friend of her minor son, Holden Hemenway.

13. Defendant CMMC (“CMMC”) is a Maine corporation that operates a hospital in Lewiston, Maine, and provides healthcare services, including outpatient obstetrical and gynecological care.

14. Defendant Central Maine Healthcare Corporation (“CMHC”) is a Maine corporation that owns, controls, and/or operates CMMC and is responsible for the policies, systems, staffing, and oversight affecting the care at issue.

15. Defendant Caitlin R. Sloan, CNM, is a resident of Freeport, County of Cumberland, State of Maine.

16. Defendant Janice E. Locke, CNM, is a resident of Portland, County of Cumberland, State of Maine.

17. Jurisdiction is proper pursuant to 14 M.R.S. § 105.

18. Venue is proper in Cumberland County pursuant to 14 M.R.S. § 501.

### **System Failure, Agency, Direct and Vicarious Liability**

19. Like any corporation, CMMC and CMHC act through their employees and agents, including medical doctors, mid-level providers, certified nurse midwives, nurses, technicians, medical assistants, information technology professionals and other staff who combine to create a system of health-care delivery to a patient.

20. Some of these CMMC and CMHC staff are required to document their actions in the patient's medical chart and therefore can be identified in the chart; others are not required to document their actions, but their participation and involvement in the system of medical care may nonetheless be critical to meeting the standard of reasonable care. All references to CMMC and/or CMHC within this Complaint are intended to be inclusive of all employees or agents of CMMC and/or CMHC—whether specifically identified in the medical chart or not; or specifically identified by name in this Complaint or not—who participated in and collectively comprised the system of medical care relied upon by Plaintiff for medical care, and which Plaintiff alleges, through this Complaint, failed to comply with reasonable standards for delivery of medical care.

21. Plaintiff alleges that each and every person involved in the system of medical care upon which she relied was, if not an “employee,” then was an actual or implied agent of CMMC and/or CMHC, because each such person had authority conferred by CMMC and/or CMHC to represent it in providing medical care to Plaintiff Calyx Hemenway, and Plaintiff reasonably believed and relied upon the belief that CMMC and/or CMHC would appropriately select, in both quality and quantity, sufficient personnel with the necessary qualifications, experience and training and provide the necessary level of training, supervision, oversight and support to enable each individual to properly fulfill his or her role within the system of medical care, such that the

system as a whole was safe, met the needs of Plaintiff as a patient and thus complied with the standard of reasonable medical care expected of a medical provider like CMMC and CMHC.

22. In this Complaint, Plaintiff specifically contends that CMMC and CMHC were both directly negligent based upon their negligent hiring, training, staffing, supervision, policies, communication, documentation, medical record-keeping, culture and systems, as well as vicariously liable for the negligence of each and every one of its personnel whose conduct, either individually or in combination with other personnel, contributed to the failure of the CMMC and/or CMHC medical care system to meet the standard of reasonable care.

**COUNT I – MEDICAL MALPRACTICE**  
**(Against all Defendants)**

27. Plaintiffs incorporate all preceding paragraphs.

28. Defendants owed Plaintiff a duty to exercise the degree of skill, care, and learning expected of reasonably prudent providers of obstetrics and gynecology.

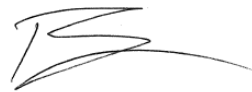
29. Defendants failed to meet the standard of care for reasons including but not limited to the following:

- a. declining Plaintiff's request for an in-person medical examination when she called on December 9, 2022;
- b. advising Plaintiff that it was safe and appropriate for her to remain rather than advising her of the importance of coming promptly to the hospital for in-person evaluation when she called on December 11, 2022;
- c. attempting to manage a high-risk obstetrical presentation by telephone rather than in-person medical examination;
- d. failing to develop policies, train staff, and supervise and enforce appropriate policies, practices and procedures for triaging and managing potential high-risk issues of pregnancy; and
- e. failing to develop policies, train staff, and supervise and enforce appropriate policies, practices and procedures for proper medical record review, medical record documentation and provider communication.

30. As a direct and proximate result of Defendants' deviation from standards of reasonable medical care, Plaintiff's AFLP condition remained undiagnosed and untreated, resulting in injuries and harm to herself and catastrophic and preventable brain injuries to her minor child, Holden.

WHEREFORE, Plaintiff seeks judgment in her favor along with compensatory damages for all of her harms and losses, including her own medical expenses, physical suffering and emotional injuries, as well as injuries to her minor child, Holden Hemenway, including his permanent brain injury, pain, suffering, emotional distress, loss of enjoyment of life, medical and lifecare expenses, loss of earnings and earning capacity, together with attorneys' fees, interest, costs, and such other and further relief as this Court deems just and equitable.

Date: March 18, 2026



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