

RE: Complaint No. MD00019062

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February 20, 2007

Yinka Windapo, RN, BSN
DHMH Office of Health Care Quality
Spring Grove Center – Bland Bryant Building
55 Wade Avenue
Catonsville, Maryland 21228-4663

Dear Ms. Windapo,

I have some additional documentation that may prove helpful in your investigation of my father treatment at Holy Cross Hospital. This is a copy of their policy concerning consent to withhold or withdraw life-sustaining treatment. I would call your attention to page 5 which states: "Circumstances in which a surrogate has authority to consent to the withholding or withdrawing of treatment are limited to those where the patient has been certified by two physicians as being in a terminal condition, a PVS, or an end state condition by completing the *Physician Certification of Condition* form." There was certainly no such form completed in my father's case, as he was not suffering from any such condition when life-sustaining treatment was withheld.

I look forward to hearing from you pertaining to the investigation, and if you need any more information from me please do not hesitate to ask.

Sincerely,



Alexander H. Neustadter

Encl.