



Francis A. Howell III

Associate

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Francis Howell represents hospitals, physicians, nurses, and other health care professionals in various medical specialties. His practice focuses on the defense of high-exposure medical malpractice claims. Francis is committed to achieving favorable outcomes for clients, working closely with world-renowned medical experts to develop compelling defenses and demonstrate client adherence to the highest standards of the medical profession.

Before joining Wilson Elser as an associate, Francis was a litigation paralegal and law clerk at the firm. In those roles, he gained valuable experience supporting complex cases from inception through trial, as well as substantial knowledge about case strategy, discovery processes, and courtroom dynamics.

Prior to commencing his legal career, Francis spent several years in sales, operations, and management, where he developed a strong foundation in leadership, operational efficiency, and team development. This diverse background has strengthened Francis' adaptability, problem-solving skills, and attention to detail, qualities he now applies to each legal challenge he undertakes.

Education

- Touro College Jacob D. Fuchsberg Law Center (J.D., 2023)
 - Faculty Achievement Recognition Award for Academic Excellence in Contracts and Torts
 - Executive Board, Cyber Law Society
- State University of New York at Purchase (B.A., 2017)

Services

- Medical Malpractice & Health Care
- Health Care Law

Bar Admissions

- New York

Court Admissions

- New York Appellate Division, Second Department
- U.S. District Court, Southern District of New York
- U.S. District Court, Eastern District of New York

Professional Affiliations

New York State Bar Association

Client Wins

Gallay and Howell Secure Summary Judgment Establishing No Issue of Fact in Medical Malpractice Case

Michael E. Gallay (Partner-White Plains, NY) and Francis A. Howell (Associate-White Plains, NY) obtained summary judgment in the Supreme Court of the State of New York, Westchester County, on behalf of a large hospital system, a pediatric ENT surgeon, and an anesthesiologist. The plaintiffs alleged the improper prescription of oxycodone for pain relief following a tonsillectomy, resulting in the overdose death of the 5-year-old patient five days after the surgery. The summary judgment motion was supported by the expert affirmations of a pediatric ENT, a toxicologist, and a pharmacologist who had done years of research on the effects of oxycodone on pediatric patients. The experts agreed that the medication was prescribed within the standard of care for ENT surgery, the dosage was appropriate, and the post-mortem oxycodone levels indicated the child must have received significantly more than prescribed. In opposition, plaintiffs' counsel submitted only the affirmation of a retired pediatrician who never performed a tonsillectomy, never prescribed oxycodone to a pediatric post-operative patient, and lacked training in pharmacology or toxicology. The court adopted Michael and Francis's reply argument, finding that the plaintiffs' purported expert merely cited out-of-context medical literature, constituting inadmissible hearsay, and failed to demonstrate sufficient knowledge of the applicable standard of care for prescription of oxycodone or pertinent pharmacological factors of pediatric oxycodone use. Accordingly, the court held that Wilson Elser met the burden of demonstrating a prima facie right to summary judgment and that the plaintiff expert's affirmation was insufficient to create an issue of fact.

Karp & Howell Obtain Discontinuance at Trial During Plaintiff's Case-in-Chief

Paul Karp (Partner-New York, NY) and Francis Howell (Associate-White Plains, NY) defended a hospital, treating neurosurgeon, and treating neuro-intensivist (an internationally recognized expert in the field of Neuro Critical Care Medicine) in a case venued in Westchester County Supreme Court that involved claims of pain and suffering as well as wrongful death after the decedent suffered an intracerebral hemorrhage. The plaintiff claimed that the decedent was suffering from life-threatening intracranial pressure, which put her in danger of an imminent brain stem herniation, and that surgery should

have been performed to place an extra-ventricular drain and intracranial pressure monitor. Paul was able to prove through his witnesses that the decedent had significant preexisting cerebral atrophy with enlarged Sulci, which provided the room within her brain to accommodate the edema caused by her severe stroke. Paul's witnesses, using the evidence graphics we created, were able to definitively show that even without the placement of the intracranial pressure monitor, the pressure within her skull was stable and she was never in danger of developing the life-threatening brainstem herniation. Therefore, no surgical intervention, nor the administration of last-ditch effort pharmacological interventions (Hypertonic Saline or Mannitol) to reduce brain edema were warranted. Frank filed a motion in limine to preclude the plaintiff from offering testimony analogous to that of an expert and the motion was granted by the court. After a week of trial, the co-defendant, a skilled nursing center, settled out with the plaintiff. Rather than continue the case, the plaintiff discontinued the action as to the hospital and the two named physicians.

Representative Matters

Obtained grant of summary judgment in medical malpractice case in which plaintiff claimed hospital staff negligently performed a supraclavicular nerve block prior to a right wrist fusion, resulting in permanent injury to her neck, shoulder, and arm.

Obtained voluntary discontinuance after note of issue was filed in medical malpractice suit involving allegations of negligence, including alleged failure to properly diagnose and treat the patient's embolic stroke after he was transferred from a co-defendant's facility.

Obtained dismissal by oral application of medical malpractice matter alleging plaintiff was not provided with sufficient nutrition, resulting in exacerbation of her preexisting dementia.

Obtained voluntary discontinuance of medical malpractice matter alleging negligent interpretation of radiologic imaging and treatment of a femur fracture.

Obtained grant of motion to dismiss medical malpractice suit involving allegations of negligence, including failure to properly diagnose a left wrist fracture, right leg compartment syndrome, and infection in the emergency department.