



Patricia Lacy

Partner

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Patricia Lacy has specialized in medical malpractice defense for more than 26 years, serving physicians, hospitals, medical practices and nursing and rehabilitation facilities. Patricia manages all aspects of pretrial litigation, including discovery, depositions, court conferences and motions, and assists trial attorneys with strategy, trial preparation and support at trial.

Patricia has managed primarily medical malpractice cases, including pleadings, written discovery, fact development and investigation; review and analysis of medical and hospital records; depositions of all parties and preparation and presentation of physicians, nurses, hospital administration and staff for deposition testimony; retention, preparation and presentation of experts for deposition; attendance at court conferences; preparation and argument of motions regarding discovery, venue and summary judgment; negotiation of settlement; trial preparation and assistance with development of trial strategy.

Before joining Wilson Elser, Patricia was a member of the medical malpractice defense team at a highly regarded New York personal injury defense firm.

Education

- Brooklyn Law School (J.D., 1989)
- Baruch College (B.A., *magna cum laude*, 1986)

Bar Admissions

- New York
- Connecticut

Services

- Medical Malpractice & Health Care

Court Admissions

- U.S. District Court, Southern District of New York

Awards & Honors

Selected for inclusion in *The Best Lawyers in America®*, 2026

Client Wins

Grady, Funchion and Lacy Obtain Defense Verdict in Contentious Medical Malpractice Case

White Plains, New York, partners Michael Grady and Patricia Lacy and of counsel Siobhainin Funchion obtained a unanimous defense verdict for the firm's neurologist and medical group clients in a contentious 2 ½-week trial in the Supreme Court of Westchester County. Plaintiff alleged that our client neurologist failed to timely diagnose and treat a subdural hematoma in 42-year-old plaintiff who had fallen and hit his head 19 days earlier while rollerblading without a helmet. Plaintiff further alleged that our client neurologist failed to advise the patient to stop taking Advil/ibuprofen, which resulted in worsening of the subdural hematoma. Finally, plaintiff alleged that our client failed to order STAT imaging when the patient returned three weeks later with complaints that his headaches had worsened the week prior, with continued dizziness and a new complaint of difficulty gaging the floor. Our client ordered an MRI of the brain, but not STAT, which revealed a large subdural hematoma with herniation appreciated, which required a craniotomy the following day. Plaintiff alleged that the delay in diagnosis resulted in significant brain damage, including memory loss and behavioral changes. Mike and Siobhan argued that the client's diagnosis of post-concussion syndrome was appropriate given the mild nature of the initial complaints, normal physical and neurological exams, and plaintiff's delay in seeking medical care. They further contended that not every head injury requires imaging. As to the second appointment, Mike and Siobhan argued that STAT imaging was not warranted as physical and neurological examinations remained within normal limits. They argued that the brain injury at issue was from the concussion, not the hematoma, and through their expert neurosurgeon established that regardless of when the hematoma was diagnosed it would not have changed the ultimate outcome. Notably, plaintiff sustained a second fall four years after the initial fall during the course of litigation, resulting in a subarachnoid hemorrhage and subdural hematomas causing permanent brain damage rendering plaintiff unable to work and requiring 24-hour care. Due to procedural defects in plaintiff's attempt to vacate the Note of Issue two years prior to trial, Siobhan successfully argued to preclude any departures or causation issues related to the second fall and sequelae on the verdict sheet and jury charge. The case involved five experts in the fields of radiology, neurosurgery and neurology and three departure questions on the verdict sheet. The plaintiff's attorney asked the jury to award \$4 million. The jury found unanimously for our clients on all three departure questions.

Grady, Funchion and Lacy Obtain Unanimous Verdict in Favor of Urologist under Claim of Failure to Diagnose

Michael Grady (Partner-White Plains, NY), Siobhainin Funchion (Of Counsel-White Plains, NY) and Patricia Lacy (Of Counsel, Now Partner-White Plains, NY) obtained a unanimous

defense verdict on behalf of their urologist and medical group clients in a two-week trial in the Supreme Court of Westchester County, New York. The plaintiff alleged failure to timely diagnose prostate cancer resulting in the need for a radical prostatectomy and radiation with resulting permanent incontinence and impotence. The cancer was clinically Stage I and pathologically Stage IIIC. Mike and Siobhainin argued that their client appropriately monitored the patient's condition and that no physician could opine within a reasonable degree of medical certainty that an earlier diagnosis would have changed the outcome. The plaintiff, notably, used the expert testimony of a general surgery expert (with a subspecialty in plastic surgery) to establish departures from the standard of care and proximate causation, leading to an interesting and antagonistic cross examination. The plaintiff's attempts to introduce a loss of chance claim were denied upon Siobhainin's oral argument in opposition. The plaintiff asked the jury to award a "reasonable seven-figure" verdict. The jury returned a unanimous defense verdict in 55 minutes.

Grady, Funchion and Lacy Secure Defense Verdict for Obstetrician and Medical Group

Michael Grady (Partner-White Plains), Siobhainin Funchion (Of Counsel-White Plains) and Patti Lacy (Of Counsel-White Plains) obtained a defense verdict on behalf of obstetrician and medical group clients after a three and a half week jury trial conducted in the Supreme Court of Westchester County. The plaintiff alleged a failure to offer and timely perform a cesarean section and that our client obstetrician failed to obtain informed consent for a vacuum-assisted delivery. The plaintiff alleged that as a result of the vacuum use, the infant sustained right-sided brain injury resulting in focal epilepsy, permanent left-sided hemiparesis and significant cognitive delays. Mike and Siobhan argued that the labor was appropriately managed, and at the point where delivery became urgent, a cesarean section was not indicated, concluding that vacuum-assisted delivery was the safest way for the infant to be delivered. They further argued that the child's damages were not related to a birth injury, but rather were idiopathic epilepsy in nature. The plaintiff's attorney asked the jury to award \$60 million at trial (\$28 million in pain and suffering and \$32 million in economic damages) after presenting evidence to this effect. The jury unanimously found that the client did not depart from the obstetrical standard of care and that a reasonable person in the plaintiff's position would not have declined the vacuum-assisted delivery under the circumstances. The trial included testimony from nine expert witnesses.

Grady Secures Unanimous Defense Verdict for Critical Care Physician and Hospitalist in Wrongful Death Case

Michael Grady (Partner-White Plains, NY) obtained a defense verdict on behalf of two physician clients (Critical Care and Hospitalist) in a three-week jury trial conducted in the Supreme Court of Westchester County. The case involved a 67-year-old who presented to the Emergency Department vomiting blood, weakness and fullness in her abdomen. She was admitted to the ICU under the care of our client for an upper GI bleed. A GI consult attempted but aborted an endoscopy procedure after five minutes as the volume of blood in the esophagus and stomach obfuscated the source of the bleed. A surgery consult ruled out a surgical option given the patient's instability and unknown location of the bleed. Interventional radiology then performed an angiogram and embolized two identified sources of bleeding. The patient coded upon return to the ICU. Life support was removed several hours later, approximately 15 hours from her presentation to the Emergency

Department. There was no autopsy. At trial, plaintiffs' counsel argued that consults were not timely obtained, that a central line should have been placed as the four peripheral lines did not provide sufficient resuscitation with fluids and blood products, causing the patient to bleed out. Expert testimony was provided for both sides during the trial. The demand before trial was \$2.7 million. The jury returned a unanimous defense verdict for both of our physician clients and the hospital within two hours. Mike was ably assisted by Patricia Lacy (Of-Counsel-White Plains) and Kierra Greenwood (Associate-White Plains).

Grady, Lacy and Greenwood Obtain Defense Verdict in Favor of a Neurologist in Suspected Brain Tumor Case

Michael Grady (Partner-White Plains, NY), assisted by Patricia Lacy (Of-Counsel-White Plains, NY) and Kierra Greenwood (Associate-White Plains, NY), obtained a unanimous jury defense verdict in Supreme Court, Westchester County on behalf of a neurologist. The plaintiff was a 51-year-old woman who came to the firm's client with a sudden onset of speech difficulty and right upper extremity weakness. After several tests, a 2.5 cm lesion was revealed consistent with a brain tumor according to the consulting neurosurgeon. The second defendant neurosurgeon recommended a biopsy rather than surgery, and during the procedure, the plaintiff suffered a significant hemorrhagic bleed that left her with severe paralysis on the right side and profound neurologic, speech and cognitive impairment, an unfortunate risk that was explained to the plaintiff prior to the biopsy. The biopsy result was consistent with a TDL, a rare presentation of multiple sclerosis, which would have gone away with time. Mike, Patricia and Kierra argued that the doctors' prioritization of what was thought to be an ominous brain tumor precluded a "wait and see" approach. The demand prior to trial was \$6.5 million. After testimony from two defendant physicians and five experts, the jury returned a unanimous defense verdict for both defendants, though the codefendant paid \$750,000 in a hi low agreement reached with plaintiff during deliberations.