

GEHLING
v.
ST. GEORGE'S UNIVERSITY SCHOOL OF MEDICINE, LTD.

In the case of *Gehling v. St. George's University School of Medicine, Ltd.*, 705 F.Supp. 761 (E.D.N.Y. 1989), plaintiff Rose Gehling brought this negligence action after her son Earl collapsed and died while participating in a "road race" sponsored by defendant St. George's University School of Medicine (SGU). As described by the federal district court, the facts of the case were as follows:

On April 18, 1982, Earl Gehling ran in a race of approximately 2.5 miles on the island of Grenada, West Indies which began on a public road in front of the "True Blue" campus of the St. George's University Medical School and finished on the "Grand Anse" campus on the same school. Most of the territory covered by the race was on public roads in between the two campuses. The race took place in the late afternoon when the temperature was hot, approximately 80-85 degrees Fahrenheit and the humidity was high. More than one hundred runners participated in the "fun run" including medical students... SGU's business administrator, Gary Sollin, followed the runners in a school vehicle equipped with oxygen and prepared to pick up runners who faltered. Approximately half way through the race, water was available to runners at a spigot alongside the road.

The race itself was a regular SGU event, called either "St. George's University School of Medicine's BiAnnual Road Race" and/or "True Blue Road Race" and it was organized by several students at SGU with SGU's full knowledge and consent. The road race had taken place twice a year for at least two, perhaps three, years prior to the date in question. SGU publicized this bi-annual school race in its annual school newsletter which was part of its regular official publications which was fully controlled and edited by high-level administrators at SGU... The race was organized by Fred Tilden, a medical student. The business manager of SGU, in response to a request by the student organizer, gave some money from the School's student activity funds to pay for T-shirts and trophies for the participants. The student entrants paid an entrance fee.

SGU did not organize, supervise or control the road race. The race was organized, supervised and controlled by students at SGU on their own initiative. No doctor or ambulance or provisions including ice and towels were furnished by SGU at the finish line. However, at the finish line there was water, ice, and towels soaked in cold water provided by the students. In addition, medical students who had been trained as physician assistants were stationed at the finish line.

At the time of the race Gehling was 25 years old, stood 5'10" tall and was approximately 75 pounds overweight. He suffered from high blood pressure, also known as hypertension,... and the left ventricle of his heart was hypertrophied, or enlarged. A person with hypertension which is not being treated is at great risk of developing fatal left ventricular hypertrophy which can lead to a heart attack.

Gehling was athletic, participating in many sports activities including basketball and weight

lifting, and he practiced jogging before the race. These activities were done under similar weather conditions as existed at the time of the race at issue... Gehling had taken, before the race, ephedrine which is an amphetamine-like substance that speeds the heart rate. Gehling, as an advanced medical student, knew or should have known of the potential consequences of ingesting amphetamine-like drugs and that he had borderline hypertension...

The race began about 4 P.M. and ended around 5 P.M. It took Gehling approximately 1/2 hour to finish the race. After he crossed the finish line on the Grand Anse Campus he collapsed and lost control, becoming combative, irrational and refusing the assistance offered him. He fell and then struggled up and fell again. It became necessary to restrain him because of his hysterical behavior. Accordingly, fellow medical students attempted to control him by wrestling him to the ground. He was then moved into shade where ice and wet towels were applied to his body in an attempt to cool him down. In this connection a hose was used and cups of water were also available at a nearby snack bar.

Other participants who found themselves adversely affected by the heat or fatigued by the run dropped out of the race before the finish line or stopped running and just walked the rest of the course. At the finish line, a blood pressure cuff was also available and used. Gehling was attended by several fellow students some of whom had training in emergency medicine... Those in attendance attempted to give Gehling oxygen.

After 15-20 minutes in the shade near the finish line Gehling was carried by several students to the nearby office... in the anatomy laboratory which was air conditioned. Efforts to cool Gehling were continued. Blue ice packs were placed under his arms and in his groin. His blood pressure was taken and those present attempted to give him oxygen. Someone called for an ambulance. Gehling's level of consciousness continued waning and fading until he became fully unconscious.

After approximately 15 to 20 minutes... Gehling was transferred by ambulance to St. George's General Hospital. The ride in the ambulance to the Hospital took 15 minutes. The Hospital is owned and controlled by the government of Grenada... At the Hospital Gehling's treatment included ice packs to bring down his body temperature, valium to control his convulsions, intravenous fluids to cool his body, EKG's to monitor his heart, and, as a last attempt to revive him, epinephrine was injected directly into his heart. Gehling was comatose from shortly after his collapse until his death. Despite this treatment Gehling was declared dead at the Hospital at 12:45 A.M. on April 19, 1982.

In addressing the applicable legal standard of care, the federal district court considered whether guidelines from the American College of Sports Medicine regarding "what medical provisions should be available during races" should be "applicable to the race at issue."

These guidelines apply only to races of at least 10 kilometers (2.6 miles) and therefore not to this race. In a short race of 2.5 miles run in tropical environmental conditions some type of assistance should be provided for the runners at the end of the race, in this instance,

primarily by the students of SGU. The availability of water, ice, oxygen and wet towels at the finish line, coupled with the stationing there of medical students with some emergency training, was sufficient to satisfy the duty of care. In view of the short distance of the race, it was not necessary to have a doctor and special provisions for emergency, such as intravenous capability, at the Grand Anse campus.

As a result, the federal district court concluded that plaintiff Gehling had "failed to meet its burden of proving by a preponderance [greater weight] of the evidence that there was any negligence on the part of SGU in the conduct of the race." Further, the court found that any alleged negligence was not the legal cause the death in this case.

Moreover, even if SGU had a duty to control, monitor or otherwise supervise the race its failure to do so would not be the proximate cause of Gehling's death... Gehling's death was caused by his physical condition - his being overweight, having hypertension, taking ephedrine and his hypertrophied left ventricle - and the circumstances under which the race was run.

ASSUMPTION OF RISK

In addition, the court also considered whether the assumption of risk doctrine relieved SGU of any legal duty under the circumstances of this case. The court defined this doctrine as follows:

The [assumption of risk] doctrine has been divided into several categories but as the term applies to sporting events it involves what commentators call "primary" assumption of risk. Risks in this category are incidental to a relationship of free association between the defendant and the plaintiff in the sense that either party is perfectly free to engage in the activity or not as he wishes. Defendant's duty under such circumstances is a duty to exercise care to make the conditions as safe as they appear to be. If the risks of the activity are fully comprehended or perfectly obvious, plaintiff has consented to them and defendant has performed its duty.

A university which undertakes to be responsible for or to control an athletic event has the duty to exercise reasonable care under the circumstances to prevent injury to those who engage in the athletic event which it controls. Intramural sporting activities involve inherent dangers to participants. The claimant, in electing to play, assumed the dangers of the game... [The defendant] was required only to act reasonably in providing a field of play for claimant... In assessing liability a court may take into account that prior sporting events had taken place at the scenario without incident and also the age of the university students.

Applying these principles to the facts of the case, the court found Gehling had assumed the risks inherent in running the race, including heat stroke.

So here Gehling entered the race voluntarily and assumed the dangers of the race... The decedent, being a 6th semester medical student, is charged with knowledge of his own condition and of the tropical conditions of the Island, and by entering the race he assumed the risk of thermal injury under the circumstances including the risk of suffering heat prostration and/or heat stroke.

The federal district court, therefore, entered judgment in favor of defendant St. George's University School of Medicine.