



Corradino & Papa, LLC

A Personal Injury Law Firm

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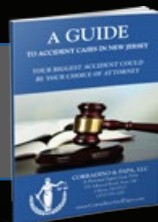
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don't get burned

BY THE STATUTE OF LIMITATIONS

In most states, the time you have to file a claim after you were injured—the Statute of Limitations (SOL)—is generally two years from when you were hurt in an accident (there can be exceptions, though, and your best bet is always to reach out to an experienced personal injury attorney to review the facts of your situation).

Unfortunately, some folks that we speak with are under the mistaken impression that as long as they have initiated conversations with the insurance company, exchanged paperwork, or are actively negotiating with the adjuster, they're in good shape as far as the SOL is concerned. This could not be further from the truth.

Fact is, in order to meet the requirements of the SOL, your injury claim has to be filed in court within the timeframe allowed by the SOL.

Simply getting things rolling and chatting with the insurance adjuster are not enough. Remember, the insurance adjuster is not your friend and is not your buddy. His or her job is to settle your claim for as little money as possible...or to get it thrown out entirely or just make it go away (what better way for that to happen than to have the SOL run out).

To make matters worse, if the SOL does run out, you're out of luck. You can't file to get an extension or get an exception—your opportunity to collect compensation for your injuries is gone.

So, do yourself a favor: if you get injured in an accident and feel you may have a legitimate claim, give our office a call. ■



promising results for BLOOD CANCER PATIENTS

A new experimental treatment has achieved early, notable success in the fight against blood-borne cancers after chemotherapy and bone marrow



transplants have failed. It involves T cells, which are cells that go on seek-and-destroy missions against foreign invaders such as bacteria and viruses. Cancer cells, however, often multiply too quickly and overwhelm T cells. They can also trick T cells into thinking they're a natural part of the body, freeing them to do their damage.

The Fred Hutchinson Cancer Research Center in Seattle has zeroed in on T-cell therapy. T-cell therapy involves withdrawing blood from the patient (the amount of a blood donation), priming the T cells in that blood with synthetic receptors called chimeric antigen receptors, and re-infusing the blood back into the patient. The new T cells are better able to identify blood cancer cells and destroy them more quickly, sparing healthy cells and tissue in the process.

Although the sample size has been small thus far, the results have been stunning. Of 29 participants in a clinical trial who had incurable or constantly relapsing lymphoblastic leukemia, 27 went into complete remission with the new therapy. Results have been extremely promising for those afflicted with non-Hodgkin's lymphoma and chronic lymphocytic leukemia as well.

The development of T-cell therapy is still in the early stages, and the research has yet to be published in a peer-reviewed journal. But the hope is that the therapy will be widely available in 2–3 years. It might also eventually play a role in the fight against solid tumors, such as colon or breast cancer. ■



BACKGROUND ON THE heroin epidemic

Heroin use in the United States has risen dramatically over the past decade—more so in small cities and rural towns than in large metropolitan areas. The “typical” heroin user is an unmarried 18–25-year-old white male without extensive education who earns less than \$20,000 per year. However, heroin's reach stretches across all demographic lines. Since 2010, heroin-overdose deaths have tripled and are double the rate of deaths attributed to cocaine usage.

Heroin is an opiate drug that creates up to 100 times more endorphins—“feel good” hormones—than the body naturally produces. In addition to being potent, heroin is highly addictive, forming a deadly one-two punch.

Several factors converged over the last 20 years to contribute to the current heroin epidemic. Painkiller prescriptions were limited in scope prior to the mid-1990s. However, OxyContin emerged and was heavily marketed to combat a growing “pain epidemic” in the United States. A relatively small group of rogue doctors seized upon the economic opportunity and established “pill mills” throughout the country, which led to a sharp rise in painkiller abuse. A pill mill is an operation in which doctors, clinics, or pharmacies dispense narcotics without a valid medical reason.

Over the past decade, healthcare and government officials have cracked down on pill mills. However, those who were addicted to prescription painkillers soon found heroin to be more accessible and far cheaper—a lethal trend was born.

A coordinated preventive and treatment effort among local, state, and federal agencies; healthcare providers; community outreach; and families, with a special focus on adolescents, will be needed to stem the tide of heroin addiction and deaths. ■

MEMORIAL DAY RECIPE

U.S. Flag No-Bake Cheesecake



INGREDIENTS

Crust

- 1¼ cup graham cracker crumbs
- 1/3 cup melted butter
- 3 tablespoons sugar

Filling

- 1 package cream cheese softened
- 1 can sweet and condensed milk
- ¼ cup lemon juice
- 1-2 teaspoons vanilla
- ½ tub whipped cream – Cool Whip (optional)

INSTRUCTIONS

Crust

1. Combine crust ingredients with fork.
2. Pack gently into pan/dish.
3. Cool in fridge until filling is ready.

Filling

4. Combine all filling ingredients and beat until smooth.
5. Pour into crust and make smooth.
6. Refrigerate for 2 hours to set up.
7. Top with sliced strawberries and blueberries in American flag design.

Author: Amber of Busy Creating Memories. ■

May 2016 – Important Dates

May 3 – National Teacher Day
May 5 – Holocaust Remembrance Day
May 8 – Mother's Day
May 21 – Armed Forces Day
May 30 – Memorial Day

YOU MIGHT WANT TO sleep on it

The Federal Trade Commission (FTC) allows certain types of contracts to be canceled by the consumer within three business days after entering into the contract. This is known as the “cooling-off rule.”

Transactions falling under the banner of the cooling-off rule generally include those that take place at a buyer's home—even if the seller has been invited—or purchases that take place outside the seller's permanent place of business, such as a trade show, a restaurant, a hotel, or a convention center, among other sites.

To be covered by the cooling-off rule, purchases at the buyer's residence must be for \$25 or more. Purchases at the seller's temporary location must be for \$130 or more.

By law, the seller must inform the buyer about their right to cancel the sale within three business days, and issue the buyer a cancellation form and a copy of the contract or receipt.

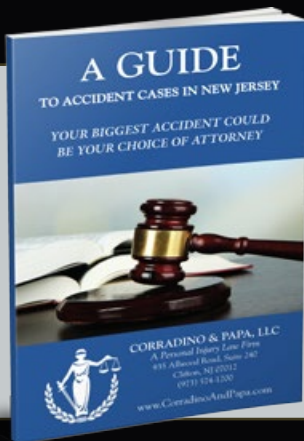
Buyers don't need a reason to cancel the sale, and their time frame to cancel extends until midnight of the third business day following the sale. Saturdays count as business days; Sundays and federal holidays do not.

The cooling-off rule does not come into play for vehicle purchases, even those made at car shows. There is such a common misconception on this matter that many states require auto dealers to specifically notify a buyer that they do not have a right to cancel the contract.

The FTC's cooling-off rule is limited in scope; it is not a get-out-of-jail-free card. If you have any concerns, contact a consumer law attorney for guidance. ■



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FREE BOOK

Get Jack Corradino and Robert Papa's *New Ultimate Guide to Accident Cases in NJ*, written by Jack and RC. It will explain "Why your biggest accident could be your choice of attorney", and what to do in the event you are injured.

Quote of the Month: "Twenty years from now you will be more disappointed by the things that you didn't do than by the ones you did do. So throw off the bowlines. Sail away from the safe harbor. Catch the trade winds in your sails. Explore. Dream. Discover." —Mark Twain

This publication is intended to educate the general public about personal injury, medical malpractice, and other issues. It is for information purposes only and is not intended to be legal advice. Prior to acting on any information contained here, you should seek and retain competent counsel. The information in this newsletter may be freely copied and distributed as long as the newsletter is copied in its entirety.

anesthesia errors

If you or a loved one is planning on having a major surgery, you'll likely research the hospital, the doctors and surgeons who will be involved in your care, and possibly even the surgery itself (if you aren't doing this type of research, you really should, since not all hospitals and surgeons are created equal!).

One critical medical provider you may overlook or forget about is the anesthesiologist. Anesthesiologists are highly trained medical professionals who sedate patients during surgical procedures, ensuring that the patient doesn't feel pain during the procedure or even remember the procedure itself.

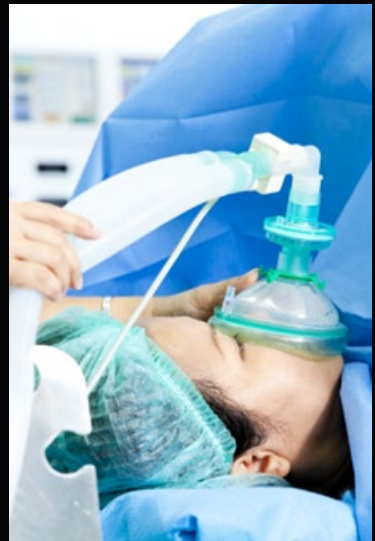
But, as with any part of a medical procedure, mistakes can and do happen when anesthesia is administered.

Some of the most common anesthesiologist mistakes include, but are not limited to:

- Failure to monitor the patient
- Administering too much or too little anesthesia
- Leaving a patient unattended
- Not assessing a patient properly before surgery (this can

include not asking about a patient's prior medical history, not checking on any allergies a patient may have to medications or other items, or not asking if a patient has had anesthesia before and whether the he or she experienced any problems if they did)

- Not controlling the sedation gas flow properly
- Improperly administering oxygen



If you or a loved one suffered serious injuries as a result of a medical procedure or surgery, it can be difficult to determine exactly what went wrong and who was responsible, and medical malpractice cases can be incredibly complex. If you have questions about problems or injuries that arose from a surgery, please call us to make sure your rights are protected. ■