

# 24CV445148

JEANNETTE BURMEISTER vs BELA CHHEDA, MD

CASE INFO PARTIES EVENTS HEARINGS PRINTABLE

THIS IS A PRINTABLE PAGE ONLY. THE LINKS AND DOCUMENTS WILL NOT WORK.

## 24CV445148

Print

JEANNETTE BURMEISTER vs BELA CHHEDA, MD

### Case Information

**Case Type:** Medical Malpractice Unlimited (45)  
**Case Number:** 24CV445148  
**Filing Date:** 8/14/2024  
**Case Status:** Closed/Inactive  
**Court Location:** Civil

### PARTIES

### EVENTS

Show All ▾ entries

Type	First Name	Middle Name	Last Name
Defendant	BELA	VIJAY	CHHEDA
Plaintiff	JEANNETTE		BURMEISTER

Showing 1 to 2 of 2 entries

### Attorneys




Bold Shows Lead Attorney


Show All ▾ entries

Representing	First Name	Middle Name	Last Name
No data available in table			

Showing 0 to 0 of 0 entries

Show All ▾ entries

File Date	File Type	Filed By	Comment	Documents
9/25/2024	Request: Dismissal	JEANNETTE BURMEISTER,	Request for Dismissal (Dismissals)	
8/14/2024	New Filed Case			
8/14/2024	Complaint (Unlimited) (Fee Applies)	JEANNETTE BURMEISTER,	**NO CLN**	
8/14/2024	Summons: Issued/Filed	JEANNETTE BURMEISTER,	Summons (Summons)	

File Date	File Type	Filed By	Comment	Documents
8/14/2024	Civil Case Cover Sheet	JEANNETTE BURMEISTER,	Civil Case Cover Sheet (Comment)	

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

JEANNETTE BURMEISTER

[REDACTED], CA  
Telephone: [REDACTED]  
E-mail: [REDACTED]

Plaintiff, In Propria Persona

E-FILED  
8/14/2024 8:24 AM  
Clerk of Court  
Superior Court of CA,  
County of Santa Clara  
24CV445148  
Reviewed By: M. Bui

SUPERIOR COURT OF THE STATE OF CALIFORNIA  
FOR THE COUNTY OF SANTA CLARA  
UNLIMITED JURISDICTION

JEANNETTE BURMEISTER, an individual,  
Plaintiff,

vs.

BELA VIJAY CHHEDA, M.D., an individual;  
and DOES 1-10, inclusive,  
Defendants.

Case No. 24CV445148

**COMPLAINT FOR DAMAGES**  
**1. Medical Malpractice**  
**2. Medical Battery**

Plaintiff alleges:

1. Plaintiff is ignorant of the true names and capacities of defendants sued herein as DOES 1-10, inclusive, and therefore sues these defendants by such fictitious names. Plaintiff will amend this complaint to allege their true names and capacities when ascertained. (Plaintiff is informed and believes and thereon alleges that each of the fictitiously named defendants is negligently responsible in some manner for the occurrences herein alleged, and that Plaintiff's injuries as herein alleged were proximately caused by the negligence of these defendants.)

1           2. At all times herein mentioned, Defendant BELA VIJAY CHHEDA, M.D. (“CHHEDA”)  
2 was a physician and surgeon licensed to practice medicine and perform surgery under the laws of  
3 the State of California and was engaged in the practice of medicine in Mountain View, California.

4           3. At all times herein mentioned, DOES 1–10, and each of them, were the agents and  
5 employees of Defendant CHHEDA and of their co-defendants, and, in doing the things hereinafter  
6 alleged, were acting in the scope of their agency and employment and with the permission and  
7 consent of Defendant CHHEDA and of their co-defendants.  
8

9           4. On or about May 18, 2023, Plaintiff, accompanied by her husband, engaged Defendant  
10 CHHEDA and her co-defendants to diagnose and treat medical complaints then suffered by  
11 Plaintiff. Pursuant to this engagement, defendants rendered professional services in the diagnosis,  
12 treatment, and care of Plaintiff for her condition. Plaintiff’s husband was present during the entire  
13 appointment.  
14

15           5. For the May 18, 2024 appointment, which lasted approximately 70 minutes, Defendant  
16 CHHEDA charged Plaintiff \$1,500.

17           6. Among other examinations, Defendant CHHEDA insisted on pushing down on  
18 Plaintiff’s head in order to test for Cranial Cervical Instability (CCI) despite the lack of any  
19 indication of CCI in Plaintiff and despite Plaintiff’s clear insistence and objection that she did “not  
20 want to go down the CCI path” as well as firm explanation that she would not consider CCI  
21 surgery except possibly in a life-threatening situation because of the serious risks of the procedure,  
22 among other reasons. Defendant CHHEDA nevertheless continued to insist on this procedure,  
23 ignoring Plaintiff’s objections. At no point was Plaintiff provided any information by Defendant  
24 CHHEDA or her office regarding the invasive nature and the risks of the pushing procedure. Had  
25 Plaintiff been informed of the invasive nature of the procedure and its attendant risks, she would,  
26 under no circumstances, have allowed Defendant CHHEDA to push on her head and would have  
27  
28

1 ended the appointment, which was the only option available to Plaintiff to avoid the procedure  
2 given Defendant CHHEDA's unrelenting insistence on the procedure. Defendant CHHEDA later,  
3 days after the appointment, acknowledged that the push procedure causes many of her patients to  
4 deteriorate.

5  
6 7. At no point did Plaintiff provide legally cognizable consent for the specific push  
7 procedure Defendant CHHEDA performed, nor were the invasive nature and the risks of that  
8 procedure addressed at all by defendants. The boilerplate "Informed Consent" form (Exhibit A  
9 attached hereto and by reference made a part hereof) that Plaintiff was required to sign in order to  
10 become a patient of defendants does not satisfy the requirements for medical practitioners to  
11 obtain valid consent from their patients. It only addresses treatments, not diagnostic procedures  
12 such as the push procedure. Furthermore, it does not provide any information of any kind with  
13 respect to the invasive nature, risks, possible adverse events, side effects, alternatives, etc. of the  
14 push procedure performed by Defendant CHHEDA. Boilerplate consent forms such as the one  
15 Plaintiff was required by defendants to sign are invalid as they do not address with any specificity  
16 individual patients' specific medical care, including diagnosis, prevention, and treatment. The  
17 Informed Consent form defendants required Plaintiff to sign does address or mention the push  
18 procedure Defendant CHHEDA performed at all.

19  
20  
21 8. Defendant CHHEDA falsely charted that Plaintiff was "okay" after the push procedure  
22 despite Plaintiff's report during and after the procedure that the procedure had been extremely  
23 uncomfortable and despite a nearly immediate strong negative reaction that almost caused Plaintiff  
24 to vomit and/or faint and that required Plaintiff to lie down urgently. Even though Defendant  
25 CHHEDA's notes in Plaintiff's record are extremely detailed in other respects, Defendant  
26 CHHEDA did not record in the May 18, 2023 encounter any of Plaintiff's negative reactions to the  
27 push procedure.  
28

1           9. On May 22, 2023, Plaintiff reported to Defendant CHHEDA that the impact of her CCI  
2 testing (push procedure) was ongoing and “has been dramatic and devastating.” For example,  
3 Plaintiff reported: “This is unlike anything I’ve experienced before. ... This is a whole different  
4 level of debilitation, and I can’t imagine being able to deal with this on an ongoing basis....”

5  
6           10. Plaintiff was desperate and asked Defendant CHHEDA for help treating the damage  
7 and harm that Defendant CHHEDA had caused. After it became apparent to Plaintiff that  
8 Defendant CHHEDA had no intention of providing any treatment of the symptoms and loss of  
9 functional capacity she had caused with her push procedure, Plaintiff requested her medical record  
10 and sent an email to Defendant CHHEDA on May 29, 2023 (Exhibit B attached hereto and by  
11 reference made a part hereof) describing in detail the overall impact of Defendant CHHEDA’s  
12 actions on Plaintiff. As a result, Defendant CHHEDA made illegal, back-dated changes to  
13 Plaintiff’s medical record without indicating that any changes had been made, making it appear as  
14 though the revised record was the original record.

15  
16           11. On information and belief, the purpose of Defendant CHHEDA’s performing of the  
17 push procedure was wanton and willful and designed to further her personal research (unapproved  
18 by an Institutional Review Board and Plaintiff) and/or to result in the referral to a neurosurgeon  
19 with whom she has a close relationship and possibly has a paid referral arrangement—for a very  
20 invasive surgery on Plaintiff’s cervical spine.

21  
22           12. On May 17, 2024 and on May 18, 2024, Plaintiff, through counsel, pursuant to the  
23 provisions of Section 364 of the Code of Civil Procedure, caused to be served on Defendant  
24 CHHEDA notices of Plaintiff’s intention to commence this action. Copies of each notice are  
25 attached hereto as Exhibits C and D, respectively, and made a part hereof.

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

FIRST CAUSE OF ACTION  
(Medical Malpractice)  
(Against All Defendants)

13. Plaintiff incorporates herein by reference, as though set forth in full, paragraphs 1 through 12.

14. From and after the time of the engagement, defendants, and each of them, so negligently failed to exercise the proper degree of knowledge and skill in examining, diagnosing, treating, and caring for Plaintiff that Plaintiff was caused to suffer the injuries and damages hereinafter alleged.

15. As a proximate result of the negligence of Defendant CHHEDA, and each of them, Plaintiff suffered injuries, including exacerbation of the original malady and the need for subsequent remedial treatment, and as a result suffered great physical and emotional pain and suffering.

16. As a proximate result of the negligence of defendants, and each of them, Plaintiff has sustained injury to her health, strength, and activity, all of which injuries have caused, and continue to cause, Plaintiff great mental, physical, and nervous pain and suffering. Plaintiff is informed and believes and thereon alleges that such injuries will result in permanent disability to her. As a result of such injuries, Plaintiff has sustained general damages.

17. As a further proximate result of the negligence of defendants, and each of them, Plaintiff has incurred and will continue to incur medical, hospital, and related expenses, all to her special damage.

SECOND CAUSE OF ACTION  
(Medical Battery)  
(Against Defendant CHHEDA Only)

18. Plaintiff incorporates herein by reference, as though set forth in full, paragraphs 1 through 17.

1 19. Defendant CHHEDA committed medical battery by performing the head-pushing  
2 procedure on Plaintiff.

3 20. As a proximate result of the medical battery by Defendant CHHEDA, Plaintiff suffered  
4 injuries, including exacerbation of the original malady and the need for subsequent remedial  
5 treatment, and as a result suffered great physical and emotional pain and suffering.  
6

7 21. As a proximate result of the medical battery by Defendant CHHEDA, Plaintiff has  
8 sustained injury to her health, strength, and activity, all of which injuries have caused, and  
9 continue to cause, Plaintiff great mental, physical, and nervous pain and suffering. Plaintiff is  
10 informed and believes and thereon alleges that such injuries will result in some permanent  
11 disability to her. As a result of such injuries, Plaintiff has sustained general damages.  
12

13 22. As a further proximate result of the medical battery by Defendant CHHEDA, Plaintiff  
14 has incurred and will continue to incur medical, hospital, and related expenses, all to her special  
15 damage.

16 **WHEREFORE**, Plaintiff prays judgment against defendants, and each of them, as  
17 follows:

- 18 1. For general damages according to proof.
- 19 2. For medical, hospital, and related expenses according to proof.
- 20 3. For punitive damages according to proof.
- 21 4. For costs of suit herein incurred.
- 22 5. For such other and further relief as the Court may deem proper.

23 Dated: August 13, 2024

24  
25  
26   
27 JEANNETTE BURMEISTER  
28 Plaintiff, In Propria Persona



# **EXHIBIT A**

## ***Center for Complex Diseases***

Phone: 650-447-3001 Fax: 650-567-6474  
[clinic@centerforcomplexdiseases.com](mailto:clinic@centerforcomplexdiseases.com)

Bela Chheda MD  
2500 Hospital Drive, Bldg. 4B  
Mountain View, CA 94040

David L. Kaufman MD  
2206 Queen Anne Ave North, Suite 303  
Seattle, WA 98109

### **Informed Consent:**

Center for Complex Diseases provides services rarely found within traditional medical clinics within areas such as Unexplained/Difficult Cases, Chronic Fatigue Syndrome/ME, Mast Cell Activation Syndrome, Immunology, to name a few.

In Medicine our fundamental problem may be a mis guided perspective that healthcare is a binary world in which interventions are either effective or ineffective, appropriate or inappropriate. In truth there are large gray zones in which an intervention is neither clearly effective or clearly ineffective - zones where benefits are unknown or uncertain and value may depend on patients preferences and available alternatives.

Many of the treatments offered at Center for Complex Diseases are considered to be alternative or complementary as compared to those considered conventional. We use an innovative and integral approach to the myriad of complex factors causing chronic disease.

There is no cure or approved treatment for myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS). However, some symptoms can be treated or managed. Treating these symptoms might provide relief for some patients with ME/CFS but not others. Other strategies, like learning new ways to manage activity, can also be helpful.

We use therapies that are supported by extensive observation and anecdotal data collected by many physicians and investigators. However, these therapies have not been proven by double-blind placebo controlled studies. Many of the treatments are also considered to be alternative or complementary. The therapeutic treatments we offer while derived from extensive scientific data implying hypothetical applications to the treatment of specific disease, in large part must be considered investigational.

As with any medication, there is always a risk of an untoward, unpredictable reaction or adverse side effects. Risks/benefits/side effects/and alternatives of medications/treatments (RBA) will be reviewed on ongoing basis, including off label use.

After being duly informed by my physician of my condition, the conventional allopathic treatments and common outcomes, including common adverse events, and the

alternative and/or complementary treatments and common outcomes, including common adverse events, I have exercised my freedom of choice and requested alternative and/or complementary treatments. It is my choice to combine this treatment with conventional treatment. My physician has respected my ability to make my own decisions and has not discouraged me from seeking conventional/allopathic treatment.

If you are unsure of your diagnosis or treatment plan, be sure to discuss this with your doctor and remember that you have the right to obtain a second opinion.

Signature:  \_\_\_\_\_ Print Name: Jeannette Burmeister

# **EXHIBIT B**

From: JEANNETTE BURMEISTER [REDACTED]  
Subject: Neck Injury and Medical-Records Request  
Date: May 29, 2023 at 7:20:38 PM PDT  
To: "Dr. Bela Chheda" <clinic@centerforcomplexdiseases.com>

Dr. Chheda,

I'm sorry, Dr. Chheda, but your reply feels like serious insult to literal injury and is completely unforgivable. Ever since you injured me, you have been concerned only with avoiding liability and have never genuinely tried to address the very serious harm I have experienced at your hands; your last message is another example of this. So, let me try to explain the situation to you as clearly and detailed as I know how.

First of all, pardon my lay-person use of the term *whiplash*. Does it matter what the exact diagnosis is (which I can certainly get for you)? I have reported to you that you caused a neck injury, which was diagnosed by two MDs, and you seem to be concerned only with deflecting blame instead of accepting responsibility and trying to help me. I had no other trauma to my neck, and prior MRIs show no pre-existing neck injury, so nobody has any doubt that your maneuvers caused this. If you suspected a weakness in my neck, why did you take the risk you took at my expense? Saying that what did happen is impossible to have happened is ludicrous. In fact, this is a textbook case of *res ipsa loquitur* regardless of your relentless denial. Simply repeating ad nauseam that you are a "tiny person" or that what you did was, in your opinion, "very, very gentle" or "very minimal" does not change what happened to me, and it certainly does not contribute anything to my getting better.

Despite acknowledging that there was an "initial trigger" as well as the need for the nerves to "recover," you say that nothing you did could have possibly harmed me—in spite of the obvious facts to the contrary—but magical thinking isn't real, you know. The procedure itself was very uncomfortable as I had told you at the time. To compare what you did to a bumpy car ride is, frankly, unhinged. It is also entirely implausible that you would handle a baby's head with the same force because that would, without question, result in injury or worse. You were looking for my body to have a reaction to your testing as a way to diagnose CCI, so it makes no sense at all to claim that you'd use the same force on an infant. Why did you recommend I go to the ER "to see if [I am] having any nerve compressions or shift in anatomy that shows up" if you were as gentle as you would be with a one-year-old baby's head? Anything that would cause an adult nerve compression or a shift in anatomy surely is unsafe for the head of infants.

Even if I were more vulnerable than any of your other hundreds of patients or even infants in terms of my pre-existing neck health, what difference does it make? In fact, that would have been a reason to treat me more gently than you normally treat patients. You admit that you caused nerve damage ("most trials of medications and supplements for me / cfs [sic] take time to work and dont [sic] help with rapid nerve recovery."), which has also been diagnosed by other physicians after my appointment with you, so obviously you know that you injured my neck causing the nerve damage, and yet you denied it. How dare you! Your lack of logic is surpassed only by your lack of integrity.

I felt extremely sick shortly after the maneuver. The almost immediate (and not at all mild; I don't know how you possibly could have gotten that impression other than your tendency to disregard what patients tell you) impact during the appointment took me completely by surprise. I'm not somebody who asks for

accommodations easily. Instead, I push through if I at all can so as to not inconvenience anybody (something I had shared with you, but maybe you did not understand it?), so when I interrupted you to say that I was feeling awful, I had waited as long as I possibly could and really could no longer tolerate sitting up, and I had no way of processing what you were telling me at that point because I was so very sick after your procedures. In fact, I had been looking around your office to locate the trash can—and found it under your desk right by Ed's feet—because I thought I would throw up, and there is little doubt that I would have had I not lain down immediately. You could have taken my vital signs at that point, which likely would have told the story in terms of the strong reaction of my autonomous nervous system and which was your responsibility given my reaction, but you chose not to; it is anybody's guess why. Ellen will be able to confirm that I had to desperately lie down again on the skinny bench in your waiting area while Ed settled up with her after the appointment.

It is preposterous to insinuate that an acute neck injury is a PEM symptom of ME. I am not sure what's worse: that you have been gaslighting me or that you might be so deep in self-protective mode that you actually believe what you are telling me. Your suggesting that I do not know what a bad ME flare is offensive. I've been sick with ME for over a decade and a half, and I am very familiar with PEM, not just as a patient but also as a patient advocate; whatever you triggered is not PEM or a "multifactorial flare." What I have been experiencing in the last week and a half is not the result of over-exertion because of our appointment. In fact, I recently had two long medical appointments, longer than the one with you, that did not leave me with a neck injury or with much worse health that many days later. Something happened to my neck/cervical spine when you did what you did resulting in a neck injury and attendant dysautonomia symptoms. In all my time of being sick with ME, an acute neck injury has never been a symptom of the disease. It's just not part of the presentation of ME, and the fact that you act as though

it is speaks volumes about your willingness to be untruthful. For you to question my experience in my own body is revealing, despicable, and a huge red flag for other ME patients. Of course, I have been dismissed by physicians before as have all ME patients—which is literally the cornerstone of your lucrative business: the abuse and neglect of ME patients by mainstream medicine, which brings desperate patients to you in droves—but never by somebody who holds herself out to be an expert and asserts to be acutely aware of how sick and vulnerable patients are. On the other hand, at least you are consistent: you did not listen to me before the incident regarding my vulnerability, and you are not listening to me now regarding my very obvious neck injury and desperate need for help with it.

You claim, “I see chronic complex patients and am very familiar with the illnesses you likely suffer from,” and yet, you chose to perform these maneuvers after I reported that I am extremely sick (sicker than ever with ME; the day before our appointment, I was too sick to even make it to your office as you know), that I am under a huge amount of pressure (it was excruciating to work on the motion that was due on Wednesday because of the impact of the neck injury and the resulting dysautonomia symptoms, something you refused to even discuss with me when we talked last Monday), and that I couldn’t afford to take any risk of my health worsening any further. I was unequivocal in stressing the need to be conservative in my care—for example, remember my reluctance to do a lip biopsy to confirm Sjögren’s Syndrome, which you seemed surprised by? There are several medical professionals who can attest to my history of being conservative when it comes to diagnostics and treatments. In light of all that, it is mind-boggling that you subjected me to this risk, which sadly materialized in an injury with lots of ripple effects, particularly since it won’t inform my treatment in any way.

I have been very clear for years, am on record with other physicians, and told you during the appointment before you performed your CCI maneuvers that “I do not want to go down the CCI path” (for



some reason, you had a pronounced negative reaction to my saying that, reflexively invalidating my position) because I would never undergo the surgery to address CCI even if I have it, except possibly in a life-threatening scenario. I'm much too sick for a surgery with such serious risks and major recovery time. In addition, with my autoimmunity, foreign objects in my body are just a bad idea. Moreover, the ME patients who have undergone the surgery do not necessarily seem improved in terms of their ME. Some are worse or have died as a result of the surgery, and some are now also dealing with the fallout from their surgery, including needing numerous repeat surgeries. This surgery is just not something I would consider, and I had told you so. You performed the CCI maneuvers anyway, completely disregarding everything I had said. Given that you have repeatedly said that you did that testing on me in order to try to gauge if CCI is implicated in ME, as opposed to in my case specifically, makes me wonder if you harmed me for some personal research project of yours.

In addition, you did not inform me that there likely will be impact from your CCI maneuvers. You only told me about that afterwards when I reported what had happened to me as a result of them. As I had told you, I've been hanging by a thread for a while. Had I known that there was a risk—any risk at all—I would have never agreed to it. Why did you not tell me that you routinely see patients getting worse from this? If it is not unusual to take weeks to recover from this, as you concede, ("often once the autonomic system flares , [sic] and the nerves are unhappy , [sic] they can take a few weeks to settle down , [sic] and the initial trigger is long gone , [sic] but the nerves take a while to recover."), don't you think you should have given me an opportunity to say, "No, thanks?" (Although during our call, you said "a couple of days" while having said earlier that day, "I have seen that with patients who have alot [sic] of instability, [sic] that they can take a few days to recover..." so your story has been changing quite a bit as you are flailing.) What part of my telling you

that I'm in active complex litigation was so difficult for you to understand? Obviously, I would not have taken any chances given what's at stake in my lawsuit and how sick I have been lately.

Also, it is our daughter's birthday this week (yet another reason for why I would not have taken any risks), and my loss in functional capacity and new/worsened symptoms as a result of your actions will ruin it for her. How will you make this up to her? It sounds like I can forget about even slightly enjoying her summer break with her because it will be over by the time I might come out of this (if I come out of it). This would have consisted of minimal activity even before your injuring me, but now we've lost a week and a half of it already because of you. What if I had planned on going to our daughter's school's graduation ceremony, which takes place in a few days?

My life was so small and hard before you put your hands on me, and you managed to make it smaller and harder. You had no right! It seems clear that you devalue the health of your fragile patients to the point of not being able to fathom that there are times that are particularly challenging and/or important for them, although causing harm should be something that you should strive to avoid at all times. What could possibly make you believe that you have the right to subject very sick and fragile patients to procedures that you admitted—afterwards—are risky without notifying them of the risk beforehand? The arrogance, recklessness, and indifference take my breath away! What you did—without informed consent—amounts to battery.

All these times I reached out to you last week, I was looking for help; it was not about assigning blame. I wasn't even angry at first—until I realized that you chose the gaslighting route. Instead, I was desperate and hopeful that you would want to work with me to try to fix what you had broken, but you have had nothing useful to offer. "Go to the ER, but it will likely not help you" (paraphrasing) is spectacularly

unhelpful and tone-deaf, and it is really just CYA, which is, unfortunately, the path you decided to take with this incident. You have been entirely reactionary about this, not at all proactive. You haven't been checking on me, you haven't been asking if and how my symptoms have been changing, and you haven't given me any viable suggestions that might help me recover because getting an MRI at the ER is obviously out of the question, I had already been stabilizing my neck when you suggested a neck brace and had told you so (again, you did not listen), and it took you days to share the names of the chiropractors you recommend and required follow-up from me. Of course, you also said that the wait time for the chiropractors would be substantial, so it was just another meaningless suggestion. It is also surreal that with your hourly rate you do not even have a physical therapist that you can refer to. In other words, you have shown no genuine effort or ability to make right what you did. The fact that you have no effective intervention to offer is yet another reason you should not have risked harming me. Now that the harm is done, you don't even take the time to spell my name correctly. That's how little effort you have put into trying to help me: you dash off quick, unhelpful, and repetitive replies and move on to paying patients.

Your talking me out of an MRI at least three times by stressing that "[t]he yield would be low" betrays any good intentions you might be claiming. You obviously have been worried about what an MRI would find, so you discouraged me from getting one. This is a very ugly look for a doctor with a vulnerable patient population: making a recommendation that risks further harm to a patient in an effort to avoid liability. Understanding this about you, it makes complete sense then that you yourself did not order an MRI because you have been afraid of what it might show and you would have had to code a neck injury, which you have been so desperately trying to avoid.

You also recommend rest and avoiding exertion as if I'm not resting

as much as possible all the time. I guess I should just give up on my lawsuit, including the hundreds of thousands of dollars I have spent out of pocket on attorneys' fees, not to mention that this lawsuit has been all I have been doing for well over a year at the expense of my health and my spending time with my family, which now may have been all for nothing. The fact that I'm not able to avoid exertion right now, something I had made extremely clear to you during our appointment and again in our phone call on Monday, is precisely one of the reasons why you should have given me an option to decline your dangerous testing. Will you compensate me for the attorneys' fees and the potentially large damages award (involving enhanced damages, such as punitive damages) if I indeed have to throw in the towel on my lawsuit because of the injury you caused and the fallout from it?

Most of your last message is yet again an attempt to protect yourself, which is what you seem primarily concerned about, and, frankly, that is possibly more offensive than performing, without informed consent, a risky procedure on me that caused me significant harm. Your response to my situation is shocking and revealing in terms of your lack of integrity and concern for my health. In hindsight, the fact that your office sent me 18 forms to read and sign before our appointment should have served as a warning. It's obvious that liability is a major fear for you (along with your concern for getting your fees paid up front or immediately after the visit), which puzzled me at first, but it makes perfect sense now.

It is also obvious that you are not at all curious about why your maneuvers caused me harm—which tracks with your apparent obsession with liability—or committed to trying to help me recover. Your complete disinterest in figuring out what happened and trying to help me shows just how much you are derelict in your duty to treat what you caused. Assuming that your self-serving claim is true that my reaction to your testing is unusual and that you have never

even received an email from a patient about this in the past, something that is both irrelevant and remains to be established, why don't you take any interest in what happened to me instead of issuing unsupported blanket denials on a loop? Any responsible doctor would want to know what went wrong in order to help the patient they have harmed and to protect future patients. Not you, though. Will you continue doing these procedures on unsuspecting patients, or will you learn something from this?

By the way, our experience with you during the appointment really does call into question your claim to know the disease. From what I can tell, you are reasonably knowledgeable about the science around ME, but you seem unable to translate that knowledge into understanding the impact of the disease on patients. When we asked for a chair for me to put my feet on (for which I would have taken my shoes off, of course, as I had in your waiting room before the appointment), you brought a low footstool. If you knew anything about ME patients with dysautonomia, you'd know that the relief from using such a footstool is minimal whereas the relief from using a chair to allow the legs to be totally elevated is meaningful. And your talking in an extremely quiet voice requiring me to constantly ask you to repeat yourself was surreal and exhausting; let me assure that I do not have any hearing issues. At times, I had no idea what you were saying (and charging me \$20 a minute for), but I was too sick to constantly ask you what you had said. You acknowledged that you were aware of the issue of your talking quietly but did nothing to remedy it by speaking up, causing more impact from the appointment than was necessary. You also seemed totally unfamiliar with the fact that ME can and does cause dyslexia, which is bizarre. The fact that you think that I would be physically able to go to the ER, especially given your insistence that the likelihood of that being helpful in any way would be slim, or to see a chiropractor two or three times a week for several weeks is stunning.

Of course, your not understanding that an assault on the body of a very sick ME patient, unlike with otherwise healthy people, might have cascading and potentially lasting effects is the most troubling here. Your repetitious false assurances that what happened to me could not have been the result of your actions in essence means that you do not understand how ME manifests for patients, which makes me highly concerned for your other patients. It is hard to fathom that you, claiming to be an expert in the field and charging a highly unusual premium, have so little understanding of the impact of the disease on human bodies that you put me in danger in order to satisfy your personal curiosity about CCI. Even if you did not cause any permanent structural injury, something that only the future will tell, it is cruel to make a very sick patient intentionally sicker without any warning whatsoever. It is also illegal.

When vulnerable patients seek your help and pay an obscene amount for the privilege, the very least they should be able to expect is not to walk out of your office worse than when they walked in. Certainly neck injuries should be something nobody should have to worry about. It's absurd. The fact that you show no remorse whatsoever is sickening.

I didn't have an inch of ground to lose when I came to see you, and I had made you aware of that. Seeking care from you was a Hail Mary. I had so much hope, which you managed to shatter in just one appointment, and I trusted you. Let me repeat, I TRUSTED YOU. I didn't at all brace myself when you pushed my head down, which might have protected me somewhat. I have a child who depends on me. Did you consider that at all when you proceeded to throw caution to the wind, ignore what I had told you, and cavalierly perform a pointless and risky procedure on me without asking for informed permission?

Based on our past exchanges, I have little hope that you are capable

of this, but try to put your self-interest and self-serving denial aside for a moment and place yourself in my shoes—or the shoes of our 12-year old daughter. How would it feel to you if you or one of your loved ones had been gratuitously and arrogantly harmed the way you harmed me and then indecently gaslit by the person responsible, who was ethically obligated to do no harm, just because she cannot tolerate reality and seems paralyzed with fear and preoccupied with attempts to protect herself? Had you tried to help in earnest me after harming me, we would be in a completely different place.

I can only hope, unreasonable as that hope might be, that you will refrain from harming others so that at least something good will come out of this. I beseech you to do better, much better, with others because the patient population you see is much more fragile than you seem to have grasped so far. Unless you accept what you have done and reevaluate your approach, you will continue to be a danger to patients.

Jeannette

1000



**CARLETON L. BRIGGS**

LAW OFFICES OF CARLETON L. BRIGGS

740 FOURTH STREET, SUITE 202

SANTA ROSA, CALIFORNIA 95404-4421

TELEPHONE: (707) 523-2251

FACSIMILE: (707) 523-2253

E-MAIL: clbriggs@sonic.net

LOS ANGELES AREA OFFICE  
433 NORTH CAMDEN DRIVE, SUITE 600  
BEVERLY HILLS, CALIFORNIA 90210-4410

LAS VEGAS OFFICE  
745 OAKMONT AVENUE #1009  
LAS VEGAS, NEVADA 89109-0253

3411 HILLCREST AVENUE  
SEBASTOPOL, CALIFORNIA 95472-9790  
TELEPHONE: (707) 874-2482  
CELL: [REDACTED]

May 17, 2024

Dr. Bela Vijay Chheda  
2490 Hospital Drive, Suite 209  
Mountain View, CA 94040

**NOTICE OF INTENTION TO COMMENCE ACTION  
AGAINST HEALTH CARE PROVIDER PER CODE CIV. PROC. § 364**

Dear Dr. Chheda:

This letter shall serve as notice, in accordance with Section 364 of the Code of Civil Procedure, that Jeannette Burmeister will file suit against you for damages resulting from the personal injury of her. The legal basis of this action will be the negligent failure to properly diagnose and treat Ms. Burmeister for Myalgic Encephalomyelitis.

Ms. Burmeister will allege and provide the following losses and injuries as a proximate result of the aforementioned professional negligence:

Plaintiff Jeannette Burmeister is a Menlo Park, California resident. She has been disabled since 2006 and has been in poor health with a number of complex chronic diseases, including Myalgic Encephalomyelitis ("ME"), a serious neurological and immunological illness. On May 18, 2023, Plaintiff, in the presence of her husband Edward D. Burmeister, had a new-patient appointment with Dr. Bela Vijay Chheda, infectious-disease specialist at 2490 Hospital Drive, Suite 209, Mountain View, CA 94040, who sees patients with complex chronic diseases, including ME.

During the appointment, Dr. Chheda said that she wanted to test Plaintiff for Cranio-Cervical Instability ("CCI"), which has become a fad in the chronic-complex-disease community. Plaintiff responded, "I do not want to go down the CCI path" and explained that she had had no issues with her neck, i.e., that there was no reason to believe that Plaintiff had CCI, and that Plaintiff would not consider undergoing surgery to fuse the bones between her skull and her spine, a dangerous surgery, to address CCI. Plaintiff had been on record with her other medical providers, her friends and family members as well as with the wider ME community as a patient advocate, stating that she considered the surgery generally unsafe and unnecessary for many ME patients. She had watched in horror as other patients underwent the CCI surgery, with at least one ME patient passing away as a result of the surgery. CCI surgery is not the standard of care to treat ME patients, and any therapeutic effect for ME patients is highly dubious.

Dr. Bela Vijay Chheda

May 17, 2024

Page 2

When Plaintiff declined the CCI testing, Dr. Chheda became angry, saying that this test was required if she was going to treat Plaintiff because Dr. Chheda wanted to determine if CCI was implicated in Plaintiff's ME.

There are very few ME specialists, and practically all have long patient waiting lists. Desperate for a chance of improved health and having placed a lot of hope in becoming a patient of Dr. Chheda, Plaintiff reluctantly allowed Dr. Chheda to proceed. Dr. Chheda did not mention that the procedure she was about perform would carry any risks. Had Plaintiff known that there was any risk, she would not have let Dr. Chheda proceed.

Dr. Chheda proceeded by standing behind Plaintiff, who was sitting upright in a chair, and pulling on Plaintiff's head. She then pushed down on Plaintiff's head, pushing the head into Plaintiff's upper body. At no point did Dr. Chheda explain any potential side effects or risks from the procedure. These procedures are not the standard of care for CCI testing or any other test relevant to ME or Plaintiff's other health issues. The standard of care for CCI testing is an upright MRI.

The pushing down on Plaintiff's head was immediately very uncomfortable for Plaintiff, which Plaintiff told Dr. Chheda. Within minutes, Plaintiff became violently sick. She was very clammy and felt as though she would vomit and pass out. She also became extremely weak, could no longer sit, and had to urgently lie down. Dr. Chheda did not take Plaintiff's vital signs at that time or any later time during the appointment. After the appointment, while Plaintiff's husband settled up with Dr. Chheda's receptionist in the lobby, Plaintiff was unable to stand or sit and had to lie down on a narrow bench on the wall of the lobby.

In the aftermath of the appointment, Plaintiff has suffered from:

- \* alternating chills and sweating episodes
- \* sweaty palms and feet
- \* nausea
- \* dizziness, almost fell a few times
- \* unusual weakness in extremities
- \* numbness in arms and hands
- \* neck and upper-back pain
- \* a feeling as if cervical spine is compressed
- \* feeling as if head too heavy for her neck muscles
- \* neck feeling unstable
- \* headaches
- \* a general (and new) feeling of being extremely unwell that is different from baseline
- \* cognitive impairment that is worse than baseline

Dr. Bela Vijay Chheda

May 17, 2024

Page 3

Plaintiff's blood pressure, which before the procedure had been well controlled with a beta blocker, was as high as 157/96 while resting in a horizontal position. Her heart rate was also significantly elevated compared to her baseline.

Plaintiff was forced to spend months in a horizontal position, including during Telehealth appointments. When she was upright, she had to use a neck brace to stabilize her neck.

The impact of what Dr. Chheda did has been dramatic and devastating. It has further impacted Plaintiff's health, which was very poor to begin with. Plaintiff continues to suffer from neck pain and weakness, making it very difficult to sleep or be upright. It is difficult for her to hold her head up without the support of a neck brace.

Other ongoing symptoms, especially when upright:

- \* nausea
- \* dizziness
- \* numbness in arms and hands
- \* a feeling as if cervical spine is compressed
- \* feeling as if head too heavy for her neck muscles
- \* neck feeling unstable
- \* cognitive impairment that is worse than baseline

What Plaintiff has been experiencing as the result of Dr. Chheda's procedure is an entirely different level of debilitation.

Dr. Chheda charged Plaintiff \$1,500 for the 75-minute appointment.

Very truly yours,



Carleton L. Briggs  
Attorney for Jeannette Burmeister

cc: Client

2024

**CARLETON L. BRIGGS**

LAW OFFICES OF CARLETON L. BRIGGS

740 FOURTH STREET, SUITE 202

SANTA ROSA, CALIFORNIA 95404-4421

TELEPHONE: (707) 523-2251

FACSIMILE: (707) 523-2253

E-MAIL: clbriggs@sonic.net

LOS ANGELES AREA OFFICE  
433 NORTH CAMDEN DRIVE, SUITE 600  
BEVERLY HILLS, CALIFORNIA 90210-4410

LAS VEGAS OFFICE  
745 OAKMONT AVENUE #1009  
LAS VEGAS, NEVADA 89109-0253

3411 HILLCREST AVENUE  
SEBASTOPOL, CALIFORNIA 95472-9790  
TELEPHONE: (707) 831-2482  
CELL: [REDACTED]

May 18, 2024

Dr. Bela Vijay Chheda  
Center for Complex Diseases  
2500 Hospital Drive, Suite 4b  
Mountain View, CA 94040

**NOTICE OF INTENTION TO COMMENCE ACTION  
AGAINST HEALTH CARE PROVIDER PER CODE CIV. PROC. § 364**

Dear Dr. Chheda:

This letter shall serve as notice, in accordance with Section 364 of the Code of Civil Procedure, that Jeannette Burmeister will file suit against you for damages resulting from the personal injury of her. The legal basis of this action will be the negligent failure to properly diagnose and treat Ms. Burmeister for Myalgic Encephalomyelitis.

Ms. Burmeister will allege and provide the following losses and injuries as a proximate result of the aforementioned professional negligence:

Plaintiff Jeannette Burmeister is a Menlo Park, California resident. She has been disabled since 2006 and has been in poor health with a number of complex chronic diseases, including Myalgic Encephalomyelitis ("ME"), a serious neurological and immunological illness. On May 18, 2023, Plaintiff, in the presence of her husband Edward D. Burmeister, had a new-patient appointment with Dr. Bela Vijay Chheda, infectious-disease specialist at 2490 Hospital Drive, Suite 209, Mountain View, CA 94040, who sees patients with complex chronic diseases, including ME.

During the appointment, Dr. Chheda said that she wanted to test Plaintiff for Cranio-Cervical Instability ("CCI"), which has become a fad in the chronic-complex-disease community. Plaintiff responded, "I do not want to go down the CCI path" and explained that she had had no issues with her neck, i.e., that there was no reason to believe that Plaintiff had CCI, and that Plaintiff would not consider undergoing surgery to fuse the bones between her skull and her spine, a dangerous surgery, to address CCI. Plaintiff had been on record with her other medical providers, her friends and family members as well as with the wider ME community as a patient advocate, stating that she considered the surgery generally unsafe and unnecessary for many ME patients. She had watched in horror as other patients underwent the CCI surgery, with at least one ME patient passing away as a result of the surgery. CCI surgery is not the standard of care to treat ME patients, and any therapeutic effect for ME patients is highly dubious.

Dr. Bela Vijay Chheda  
May 18, 2024  
Page 2

When Plaintiff declined the CCI testing, Dr. Chheda became angry, saying that this test was required if she was going to treat Plaintiff because Dr. Chheda wanted to determine if CCI was implicated in Plaintiff's ME.

There are very few ME specialists, and practically all have long patient waiting lists. Desperate for a chance of improved health and having placed a lot of hope in becoming a patient of Dr. Chheda, Plaintiff reluctantly allowed Dr. Chheda to proceed. Dr. Chheda did not mention that the procedure she was about perform would carry any risks. Had Plaintiff known that there was any risk, she would not have let Dr. Chheda proceed.

Dr. Chheda proceeded by standing behind Plaintiff, who was sitting upright in a chair, and pulling on Plaintiff's head. She then pushed down on Plaintiff's head, pushing the head into Plaintiff's upper body. At no point did Dr. Chheda explain any potential side effects or risks from the procedure. These procedures are not the standard of care for CCI testing or any other test relevant to ME or Plaintiff's other health issues. The standard of care for CCI testing is an upright MRI.

The pushing down on Plaintiff's head was immediately very uncomfortable for Plaintiff, which Plaintiff told Dr. Chheda. Within minutes, Plaintiff became violently sick. She was very clammy and felt as though she would vomit and pass out. She also became extremely weak, could no longer sit, and had to urgently lie down. Dr. Chheda did not take Plaintiff's vital signs at that time or any later time during the appointment. After the appointment, while Plaintiff's husband settled up with Dr. Chheda's receptionist in the lobby, Plaintiff was unable to stand or sit and had to lie down on a narrow bench on the wall of the lobby.

In the aftermath of the appointment, Plaintiff has suffered from:

- \* alternating chills and sweating episodes
- \* sweaty palms and feet
- \* nausea
- \* dizziness, almost fell a few times
- \* unusual weakness in extremities
- \* numbness in arms and hands
- \* neck and upper-back pain
- \* a feeling as if cervical spine is compressed
- \* feeling as if head too heavy for her neck muscles
- \* neck feeling unstable
- \* headaches
- \* a general (and new) feeling of being extremely unwell that is different from baseline
- \* cognitive impairment that is worse than baseline

Dr. Bela Vijay Chheda

May 18, 2024

Page 3

Plaintiff's blood pressure, which before the procedure had been well controlled with a beta blocker, was as high as 157/96 while resting in a horizontal position. Her heart rate was also significantly elevated compared to her baseline.

Plaintiff was forced to spend months in a horizontal position, including during Telehealth appointments. When she was upright, she had to use a neck brace to stabilize her neck.

The impact of what Dr. Chheda did has been dramatic and devastating. It has further impacted Plaintiff's health, which was very poor to begin with. Plaintiff continues to suffer from neck pain and weakness, making it very difficult to sleep or be upright. It is difficult for her to hold her head up without the support of a neck brace.

Other ongoing symptoms, especially when upright:

- \* nausea
- \* dizziness
- \* numbness in arms and hands
- \* a feeling as if cervical spine is compressed
- \* feeling as if head too heavy for her neck muscles
- \* neck feeling unstable
- \* cognitive impairment that is worse than baseline

What Plaintiff has been experiencing as the result of Dr. Chheda's procedure is an entirely different level of debilitation.

Dr. Chheda charged Plaintiff \$1,500 for the 75-minute appointment.

Very truly yours,



Carleton L. Briggs  
Attorney for Jeannette Burmeister

cc: Client