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2	COMMONWEALTH OF MASSACHUSETTS	2
3		3
4	MIDDLESEX SUPERIOR COURT	4
5		5
6	CIVIL ACTION NO	6
7		7
8		8
9		9
10	BO SHANG,	10
11	By his own act of filing,	11
12		12
13	Date: 3/1/2025 Signature:	13
14	Printed Name: Bo Shang	14
15	Address: 10 McCafferty Way	15
16	Burlington, MA 01803	16
17	Phone: 781-999-4101	17
18	Email: bo@shang.software	18
19		19
20	THE EDINBURGH CENTER PACT PROGRAM,	20
21	Defendant.	21
22		22
23		23
24		24
25	COMPLAINT	25
26		26
27	1 PARTIES	27
28		28
29	1.1. Plaintiff, Bo Shang, is an individual residing in Middlesex County, Commonwealth of	29
30	Massachusetts.	30
31		31
32	1.2. Upon information and belief, The Edinburgh Center PACT Program is a healthcare	32
33	provider located in Middlesex County, Commonwealth of Massachusetts, and is	33
34	subject to the laws of the Commonwealth regarding the practice of mental health	34
35	treatment and related services. See G.L. c. 112, § 129A; G.L. c. 111, § 203; see also	35
36	G.L. c. 123, § 1 et seq. Healthcare providers in Massachusetts, including mental	36
		1

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37	health providers, must comply with the standards of professional conduct established	37
38	by boards of registration and applicable statutes, and they may be held liable in tort	38
39	if they deviate from the accepted standard of care. See Santos v. Kim, 429 Mass. 130,	39
40	133 (1999); Kapp v. Ballantine, 380 Mass. 186, 193 (1980); Forlano v. Hughes, 393	40
41	Mass. 502, 505–06 (1984); Felton v. Spiro, 188 Mass. 563, 567–68 (1905); Morgan	41
42	v. Lalumiere, 22 Mass. App. Ct. 262, 265 (1986). Under the doctrine of respondeat	42
43	superior, a facility can be liable for the negligence of its employees acting within the	43
44	scope of employment. See Dias v. Brigham Med. Assocs., Inc., 438 Mass. 317, 319	44
45	n.1 (2002).	45
46		46
47	2 JURISDICTION AND VENUE	47
48		48
49	2.1. This Court has subject matter jurisdiction over this action pursuant to G.L. c. 212,	49
50	§ 4, as the amount in controversy exceeds the jurisdictional threshold of the Superior	50
51	Court, and the claims arise under the laws of the Commonwealth of Massachusetts.	51
52	See Maxwell v. AIG Domestic Claims, Inc., 460 Mass. 91, 99 (2011); G.L. c. 231,	52
53	§ 60B; Mello v. Stop & Shop Cos., 402 Mass. 555, 557 (1988). See also the general	53
54	requirement that medical malpractice claims be brought in the Superior Court. Held	54
55	v. Bail, 28 Mass. App. Ct. 919, 920 (1989).	55
56		56
57	2.2. Venue is proper in Middlesex County under G.L. c. 223, §§ 1, 2, because the cause of	57
58	action arose in Middlesex County and Defendant conducts business and provides	58
59	services in Middlesex County. See Salomon S. v. C., 360 Mass. 795, 796 (1972); see	59
60	also G.L. c. 223, § 5; Dall v. Kaylor, 88 Mass. App. Ct. 1112 (2015) (Rule 1:28	60
61	decision).	61
62		62
63	3 FACTUAL ALLEGATIONS	63
64		64
65	3.1. Plaintiff sought mental health care from Defendant beginning in or around September	65
66	2021. See G.L. c. 123, § 1 et seq.; Toste v. Somerset County Guidance Ctr., 5 Mass.	66
67	App. Ct. 326, 329 (1977).	67
68		68
69	3.2. Between approximately September 2021 and December 2024, Defendant misdiagnosed	69
70	Plaintiff as suffering from schizophrenia. This alleged diagnosis remained on	70
71	Plaintiff's medical records and was relied upon by Defendant's employees and agents	71
72	when determining courses of treatment. See Kapp v. Ballantine, 380 Mass. 186, 193,	72

73	402 N.E.2d 463 (1980); N.L. v. Children's Hosp. Boston, 450 Mass. 109, 114 (2007);	73
74	Glicklich v. Spievack, 16 Mass. App. Ct. 488, 492 (1983); Forlano v. Hughes, 393	74
75	Mass. 502, 505-06 (1984); Morgan, 22 Mass. App. Ct. at 265.	75
76		76
77	3.3. As a result of this misdiagnosis, Plaintiff was unable to obtain the necessary and	77
78	appropriate medication for Attention Deficit Hyperactivity Disorder ("ADHD").	78
79	Without proper ADHD medication, Plaintiff's ability to function as a software	79
80	engineer was severely compromised. See Palandjian v. Foster, 446 Mass. 100, 105	80
81	(2006); Vaidyanathan v. Days Inns of Am., Inc., 7 Mass. L. Rptr. 512, 1997 WL	81
82	94544, at *5 (Mass. Super. Ct. 1997); Walsh v. Baxter Healthcare Corp., 62 Mass.	82
83	App. Ct. 853, 855-56 (2005); Glenn v. Aiken, 409 Mass. 699, 706 (1991) (plaintiff	83
84	must show negligence was a substantial factor in bringing about harm).	84
85		85
86	3.4. Plaintiff experienced extended periods of unemployment from September 2021	86
87	through December 2024 directly attributable to the lack of proper ADHD treatment.	87
88	He also endured pain and suffering, mental anguish, and stress due to the incorrect	88
89	diagnosis and the failure to treat his actual condition. See Rodgers v. Boynton, 315	89
90	Mass. 279, 280 (1943); Franklyn v. Peabody, 249 Mass. 478, 482 (1924); Conway v.	90
91	Smerling, 37 Mass. App. Ct. 1, 9 (1994); Goguen v. Taylor, 374 Mass. 152, 160	91
92	(1978); Anderson v. Nat'l Union Fire Ins. Co., 45 Mass. App. Ct. 288, 294 (1998)	92
93	(mental anguish compensable in negligence).	93
94		94
95	3.5. During this same period, Nurse Practitioner Pam Miller, employed or affiliated with	95
96	Defendant, attempted to prescribe a game purportedly authorized by the U.S. Food	96
97	and Drug Administration to address ADHD in children aged eight to seventeen.	97
98	Plaintiff, then age 36, was outside the indicated age range for such therapy. See Harlow	98
99	v. Chin, 405 Mass. 697, 702 (1989); Koch v. Kennedy, 398 Mass. 421, 426 (1986);	99
100	Fearon v. Dermody, 72 Mass. App. Ct. 88, 93 (2008).	100
101		101
102	3.6. The above actions and omissions by Defendant represent a departure from accepted	102
103	standards of mental health care, proximately caused Plaintiff's injuries, and	103
104	contributed to his damages as more fully described below. See Brune v. Belinkoff, 354	104
105	Mass. 102, 109 (1968); Zeller v. Cantu, 395 Mass. 76, 79 (1985); Kelly v. Rossi, 395	105
106	Mass. 659, 662 (1985); Matsuyama v. Birnbaum, 452 Mass. 1, 17-18 (2008); Morgan,	106
107	22 Mass. App. Ct. at 265.	107
108		108

109	4 COUNT I - MEDICAL NEGLIGENCE (MEDICAL MALPRACTICE)	109
110		110
111	4.1. Plaintiff restates and re-alleges each and every allegation set forth above as if fully	111
112	set forth herein.	112
113		113
114	4.2. Under Massachusetts law, a medical provider owes a duty to exercise that degree of	114
115	care and skill of the average qualified practitioner in the field. See Brune v. Belinkoff,	115
116	354 Mass. 102, 109 (1968); Kapp v. Ballantine, 380 Mass. 186, 193 (1980). This	116
117	standard of care applies equally to mental health professionals. See Zeller v. Cantu,	117
118	395 Mass. 76, 79 (1985); Blood v. Lea, 403 Mass. 430, 434-35 (1988); Morgan,	118
119	22 Mass. App. Ct. at 265. Liability arises when there is a deviation from this standard	119
120	of care that proximately causes harm to the patient. See Harlow v. Chin, 405 Mass.	120
121	697, 702 (1989); Glicklich v. Spievack, 16 Mass. App. Ct. 488, 492 (1983); Glenn v.	121
122	Aiken, 409 Mass. 699, 706 (1991).	122
123		123
124	4.3. Defendant and its agents and employees owed Plaintiff a duty of reasonable care in	124
125	providing accurate diagnoses and appropriate treatment for his mental health	125
126	condition(s). See Stepakoff v. Kantar, 393 Mass. 836, 841 (1985); Santos v. Kim, 429	126
127	Mass. 130, 133 (1999); Kapp v. Ballantine, 380 Mass. 186, 193 (1980); Fearon,	127
128	72 Mass. App. Ct. 88, 93 (2008).	128
129		129
130	4.4. By misdiagnosing Plaintiff as schizophrenic from September 2021 through December	130
131	2024, and by failing to prescribe or facilitate appropriate ADHD medication,	131
132	Defendant breached its duty to Plaintiff. See Brune, 354 Mass. at 109; Harlow, 405	132
133	Mass. at 702; N.L. v. Children's Hosp. Boston, 450 Mass. 109, 114 (2007); Forlano,	133
134	393 Mass. at 505-06; McGuinness v. Cotter, 412 Mass. 617, 624 (1992) (breach of	134
135	the applicable standard of care).	135
136		136
137	4.5. The improper diagnosis and consequent failure to provide effective ADHD medication	137
138	were the direct and proximate cause of Plaintiff's damages, including unemployment	138
139	and pain and suffering. See Mays v. Babenko, 37 Mass. App. Ct. 495, 498 (1994);	139
140	Doherty v. Hellman, 406 Mass. 330, 333-34 (1989); Kent v. Commonwealth, 437	140
141	Mass. 312, 320 (2002); Glicklich, 16 Mass. App. Ct. at 492; Matsuyama, 452 Mass.	141
142	at 25.	142
143		143
144	4.6. As a foreseeable result of Defendant's negligence, Plaintiff was unable to maintain	144

145	consistent employment, leading to significant financial losses and ongoing mental and	145
146	emotional distress. See Rodgers, 315 Mass. at 280; Conway v. Smerling, 37 Mass. App.	146
147	Ct. 1, 9 (1994); Halley v. Birbiglia, 390 Mass. 540, 546 (1983); Goguen, 374 Mass.	147
148	at 160; Anderson, 45 Mass. App. Ct. at 294.	148
149		149
150	4.7. Pursuant to G.L. c. 231, § 60B, this claim is subject to a medical malpractice tribunal.	150
151	If the tribunal finds that Plaintiff's allegations present a legitimate question of liability,	151
152	the matter shall proceed in this Court. See Denton v. Beth Israel Hosp., 392 Mass. 277,	152
153	279-81 (1984); Little v. Rosenthal, 376 Mass. 573, 575-76 (1978); Faircloth v.	153
154	DiLillo, 33 Mass. App. Ct. 928, 928–29 (1992). The statute of limitations for	154
155	medical malpractice in Massachusetts is generally three years from the date the	155
156	cause of action accrues, subject to the discovery rule. See G.L. c. 260, § 4; Franklin	156
157	v. Albert, 381 Mass. 611, 618 (1980).	157
158		158
159	5 COUNT II – NEGLIGENT INFLICTION OF EMOTIONAL DISTRESS	159
160		160
161	5.1. Plaintiff restates and re-alleges each and every allegation set forth above as if fully	161
162	set forth herein.	162
163		163
164	5.2. Under Massachusetts law, a claim for negligent infliction of emotional distress	164
165	requires the plaintiff to demonstrate (a) negligence, (b) causation, (c) that emotional	165
166	distress was foreseeable, and (d) that the emotional distress was severe. See Payton v.	166
167	Abbott Labs, 386 Mass. 540, 557–58 (1982); Sullivan v. Boston Gas Co., 414 Mass.	167
168	129, 132 (1993); Cohen v. McDonnell Douglas Corp., 389 Mass. 327, 336 (1983).	168
169		169
170	5.3. Defendant's conduct in misdiagnosing Plaintiff's mental health condition and failing	170
171	to provide appropriate treatment fell below the standard of care, constituting	171
172	negligence. See Brune, 354 Mass. at 109; Zeller, 395 Mass. at 79; Miles v. Edward	172
173	O. Tabor, M.D., Inc., 387 Mass. 783, 785-86 (1982); Blood, 403 Mass. at 434-35.	173
174		174
175	5.4. The misdiagnosis and inadequate treatment caused severe and ongoing emotional	175
176	distress to Plaintiff, who struggled without effective treatment and experienced	176
177	significant disruptions to his professional livelihood. See Payton, 386 Mass. at 557-58;	177
178	Cohen, 389 Mass. at 336; O'Connor v. Raymark Indus., Inc., 401 Mass. 586, 591-92	178
179	(1988).	179
180		180

404		
181	5.5. It was reasonably foreseeable that the failure to provide appropriate care and the	181
182	continued misdiagnosis would cause severe emotional distress to an individual seeking	182
183	competent mental health treatment. See Sullivan, 414 Mass. at 137; Aldoupolis v.	183
184	Globe Newspaper Co., 398 Mass. 731, 737 (1986); Mullins v. Pine Manor Coll., 389	184
185	Mass. 47, 51 (1983); Goguen, 374 Mass. at 160.	185
186		186
187	5.6. Plaintiff sustained severe emotional distress, including anxiety, humiliation, and	187
188	depression, as a direct and proximate result of Defendant's negligence. See Sullivan,	188
189	414 Mass. at 137–38; Wyman v. Ayer Properties, LLC, 469 Mass. 64, 75 (2014);	189
190	Rodgers, 315 Mass. at 280; Trudel v. Gagne, 328 Mass. 464, 468 (1952) (mental	190
191	anguish as recoverable harm).	191
192		192
193	6 DAMAGES	193
194		194
195	6.1. As a result of Defendant's negligence, Plaintiff suffered:	195
196		196
197	a. Loss of gainful employment and income from September 2021 through December	197
198	2024;	198
199		199
200	b. Ongoing pain and suffering, mental anguish, and emotional distress;	200
201		201
202	c. Medical expenses related to inappropriate or ineffective treatments and any	202
203	subsequent treatments required to address the misdiagnosis;	203
204		204
205	d. Diminished earning capacity due to the extended disruption in Plaintiff's career,	205
206	given the nature of software engineering employment; and	206
207		207
208	e. Other damages as shall be proven at trial.	208
209		209
210	7 PRAYER FOR RELIEF	210
211		211
212	WHEREFORE, Plaintiff respectfully requests that this Honorable Court:	212
213		213
214	A. Enter judgment in Plaintiff's favor on all counts;	214
215		215
216	B. Award Plaintiff compensatory damages, including but not limited to lost wages, lost	216

217	earning capacity, medical expenses, and pain and suffering, in an amount to be	217
218	determined at trial; see Kapp v. Ballantine, 380 Mass. 186, 193 (1980); G.L. c. 231,	218
219	§ 85K; G.L. c. 231, § 60H; Matsuyama, 452 Mass. at 27;	219
220		220
221	C. Award Plaintiff interest, costs, and attorney's fees as permitted by law; see G.L. c. 231,	221
222	§ 6B; G.L. c. 261, §§ 1 et seq.; Waldman v. American Honda Motor Co., 413 Mass.	222
223	320, 322 (1992);	223
224		224
225	D. Grant such other and further relief as this Court deems just and proper.	225
226		226
227	8 JURY DEMAND	227
228		228
229	Plaintiff hereby demands a trial by jury on all claims so triable pursuant to Mass. R. Civ. P.	229
230	38(b).	230
231		231
232	Respectfully submitted,	232

MA S	Superior Court Middlsex County
EXHIBIT 1:	
Plaintiff Bo is misdiagnosed as schi	zophrenic, for over over 4 years by PACT.

MA Superior Court Middlsex County		
EXHIBIT 2:		
PACT nurse practitioner Pam Miller attempts to prescribe a game, FDA approved for ages 8-17 to treat ADF	HD.	