

Lindsay M. Clancy v. Jennifer A. Tufts, M.D., et al. — Civil Lawsuit (Medical Malpractice)

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CLASSIFICATION: court_filing

ACCESS DATE: 9/5/2026

Lindsay M. Clancy v. Jennifer A. Tufts, M.D., et al. — Civil Lawsuit (Medical Malpractice)

Type: Civil Action — Medical Malpractice / Personal Injury / Loss of Consortium

Case: Civil Action No. 2682CV000081

Court: Norfolk County Superior Court, Massachusetts

Date Filed: January 22, 2026 (eFiled); January 23, 2026 (Docketed)

Amended Complaint Filed: 2026

Plaintiff: Lindsay M. Clancy

Source: [knowyourdrugs.org](https://www.knowyourdrugs.org) (PDF of complaint); [Boston.com](https://www.boston.com); [Boston Globe](https://www.bostonglobe.com); [Fox News](https://www.foxnews.com); [Justice Case Analysis](https://www.justicecaseanalysis.com)

Parties

Plaintiff

- Lindsay M. Clancy ("Lindsay" or "Plaintiff")

Defendants

1. Jennifer A. Tufts, M.D. ("Dr. Tufts") — Psychiatrist
2. Alia Goodheart, M.D. ("Dr. Goodheart") — (Named in some filings)
3. Zobeida M. Diaz, M.D. ("Dr. Diaz") — Psychiatrist at Women & Infants Hospital
4. Rebecca H. Jollotta, C.N.P. ("Nurse Jollotta") — Certified Nurse Practitioner
5. Aster Mental Health Inc. ("Aster") — Mental health practice
6. South Shore Health System, Inc. ("South Shore") — Hospital system
7. McLean Hospital ("McLean") — Psychiatric hospital
8. Women & Infants Hospital of Rhode Island ("Women & Infants") — Hospital

Additional Defendants (Amended Complaint)

- Elizabeth Madva, M.D. — McLean Hospital psychiatrist
- Letisha Dukes — Counselor

Case Summary

This is an action for personal injury and loss of consortium brought by Lindsay M. Clancy arising from the catastrophic failure of multiple medical providers to properly diagnose, treat, and monitor Lindsay's severe postpartum psychiatric condition, despite her repeated, desperate pleas for help and her family's persistent efforts to obtain adequate care.

The complaint alleges that Defendants — Jennifer A. Tufts, M.D., Rebecca H. Jollotta, C.N.P., Aster Mental Health Inc.,

South Shore Health System, Inc., McLean Hospital, and Women & Infants Hospital of Rhode Island — each failed to properly diagnose Lindsay's bipolar disorder with postpartum onset and instead subjected her to a disorganized, uncoordinated course of polypharmacy that exacerbated her condition and precipitated a severe psychotic break.

Counts / Causes of Action

Count I: Negligence / Medical Malpractice

Against: All Defendants

The standard of care required Defendants to:

- Obtain a complete psychiatric history, including detailed inquiry into Lindsay's mood and symptoms during and after her prior pregnancies
- Recognize that Lindsay's severe adverse reaction to Zoloft — characterized by activation, worsening insomnia, and racing thoughts — was a red flag for bipolar disorder
- Diagnose bipolar disorder and prescribe a mood stabilizer rather than continuing antidepressants after a second antidepressant (Prozac) caused similar activation
- Conduct appropriate testing, including blood plasma levels of medication, to determine why Lindsay was having adverse reactions to relatively low doses
- Follow the "start low and go slow" principle when prescribing medications
- Inquire into the content of Lindsay's "intrusive thoughts," which were actually auditory hallucinations
- Coordinate care among themselves and with other treating providers
- Seek collateral information from Lindsay's family members
- Recognize that Lindsay, as a patient with severe postpartum mental health disorders with suicidal ideation, posed a risk of harming not only herself but also her children

Count II: Loss of Parental Consortium

Against: All Defendants

Lindsay Clancy's children (Cora, Dawson, and Callan) lost their mother's companionship, guidance, nurturing, and society as a result of Defendants' negligence. This count is brought on behalf of the children's estates.

Count III: Loss of Spousal Consortium

Against: All Defendants

Patrick Clancy lost his wife's companionship, society, affection, and conjugal fellowship as a result of Defendants' negligence.

Count IV: Vicarious Liability / Respondeat Superior

Against: Aster Mental Health Inc., South Shore Health System Inc., McLean Hospital, Women & Infants Hospital of Rhode Island

The individual healthcare providers were acting within the scope of their employment or agency with these institutional Defendants, making the institutions vicariously liable for the negligence of their employees and agents.

Detailed Factual Chronology

Background

- Lindsay Clancy (born August 11, 1990) grew up in Wallingford, Connecticut
- Studied at Quinnipiac University
- Met husband Patrick in 2013; married in 2016
- Settled in Duxbury, Massachusetts
- Worked as labor and delivery nurse at Massachusetts General Hospital (part-time after Cora's birth)

Children

1. Cora Clancy — Born December 4, 2017
2. Dawson Clancy — Born September 30, 2019
3. Callan Clancy — Born May 26, 2022

Post-Callan Treatment Timeline

September 2022

- After Callan's birth, Lindsay took 18 weeks of maternity leave
- Patrick took 12 weeks of paternity leave before returning to work-from-home job
- Family hired a nanny (3 days/week) from September to early December 2022
- Lindsay began seeing Dr. Jennifer Tufts at Aster Mental Health
- Diagnosed with: generalized anxiety disorder and chronic adjustment disorder with depressed mood
- Prescribed Zoloft (sertraline) 25mg, later increased to 50mg

October 2022 — Critical Warning Signs

- After Zoloft dosage increase to 50mg, Lindsay experienced:
 - Did not sleep for 48 hours
 - Racing thoughts
 - Worsening anxiety
 - "Paranoid of getting suicidal thoughts"
- Lindsay promptly reported these symptoms to Dr. Tufts on October 20, 2022
- Rather than recognizing this as a red flag for bipolar disorder, Dr. Tufts simply discontinued the Zoloft and prescribed Ativan and Benadryl for sleep
- Even after tapering these medications, profound insomnia persisted, accompanied by distressing cardiac palpitations

November 2022 — Escalating Crisis

- November 16, 2022: Lindsay's insomnia became so severe she took herself to the South Shore Hospital ER. She reported insomnia, anxiety, and palpitations. The ER doctor prescribed Trazodone for sleep, but it was not effective.
- November 20, 2022: Patrick's mother, a nurse at South Shore Hospital, contacted the South Shore Perinatal Behavioral Health Program seeking additional help. Nurse Practitioner Julie Paul reached out to Lindsay.
- Lindsay reported to Nurse Paul that she was "very frustrated and scared," experiencing "extreme insomnia" averaging only three hours per night, and having racing thoughts.
- November 21, 2022: Nurse Paul prescribed Prozac (fluoxetine).
- After merely four days on Prozac, Lindsay reported that the medication intensified her insomnia. She immediately informed her providers and the Prozac was discontinued.
- This was the second antidepressant that had caused activation and worsening insomnia — a critical red flag for bipolar disorder that the providers failed to recognize.
- November 25, 2022: Nurse Paul prescribed three different medications: Ambien, Remeron, and Klonopin.

December 2022 — Severe Deterioration

- Lindsay's condition continued to deteriorate
- She had lost fifteen pounds in one month
- Had no motivation
- Reported that "It takes all the effort in the world just to breathe"

- Wrote in her journal about suicidal thoughts
- Patrick's family members were brought in to help care for the children

December 2022 — Seroquel Prescribed

- Rebecca H. Jollotta, C.N.P. prescribed Seroquel (quetiapine) after recognizing what the complaint describes as a bipolar presentation
- After beginning Seroquel, Lindsay allegedly developed:
 - Suicidal ideation
 - Intrusive thoughts
 - Emotional numbness
 - Auditory hallucinations
- Lindsay described hearing a voice saying: "I will not be the same. I want to die."

December 2022 — McLean Hospital Admission

- Lindsay was admitted to McLean Hospital (inpatient psychiatric facility)
- Stayed for five days
- Discharged with "limited insight and judgment"
- Returned to the same providers who had been providing inadequate care

January 2023 — Women & Infants Evaluation

- Lindsay was evaluated at Women & Infants Hospital of Rhode Island
- Dr. Zobeida M. Diaz conducted the evaluation
- Lindsay's Edinburgh Postnatal Depression Scale (EPDS) score: 23 — indicating severe depression
- Generalized Anxiety Disorder 7-item (GAD-7) score: 21 — higher than threshold for most severe category
- Despite these severely elevated scores, Dr. Diaz concluded that Lindsay had "no postpartum depression"
- Dr. Diaz rejected a bipolar disorder diagnosis because of "no history of hypomania or psychosis or family history"
- This conclusion was alleged to be negligent because Dr. Diaz failed to obtain an adequate history. Had she properly inquired about Lindsay's early postpartum period, she would have learned of the hypomanic episode that began immediately after delivery.
- Women & Infants recommended medication changes without proper follow-up
- Nurse Jollotta did not return Women & Infants' call to discuss Lindsay's care

January 22, 2023 — Two Days Before Killings

- Kyle Carney and wife hosted the Clancys for dinner
- Lindsay appeared "fairly normal, mostly quiet while on her phone"
- Patrick had confided in Kyle about Lindsay's struggles

January 24, 2023 — Day of Killings

- Lindsay Clancy killed her three children by ligature strangulation
- She then jumped from a second-story window, resulting in spinal cord injuries and paralysis from the waist down

Expert Psychiatric Opinions

Dr. Spinelli — Defense Expert Psychiatrist

Evaluation:

- Dr. Spinelli interviewed Lindsay Clancy at a hospital on June 11, 2024
- Spoke with her by telephone for three hours on September 6, 2024
- Interviewed Patrick Clancy, Lindsay's sister Allison Olga, Lindsay's mother Mrs. Musegrove, and Lindsay's

mother-in-law Susan Clancy

Diagnosis:

> Bipolar Disorder I, severe, with psychosis and anxious distress, with postpartum onset

Key Opinions:

1. Lindsay had a baseline bipolar disorder with minimal symptoms after her second childbirth
2. Her symptoms worsened after her third birth when she was prescribed an antidepressant
3. "An antidepressant medication can create manic or hypomanic symptoms and mood instability in one who has a bipolar illness. This is a well-known response for a person with underlying bipolar disorder."
4. The providers "never seemed to communicate with one another" and demonstrated "lack of comprehension regarding the actual severity of her underlying illness"
5. The medical providers failed to adequately communicate the severity of Lindsay's condition or take appropriate action

Prosecution Expert

- Testified to grand jury that the medications found in Clancy's system do not cause psychosis
- No scientific evidence supports that claim at therapeutic levels

Medication History Summary

Medications Prescribed to Lindsay Clancy

| Medication | Type | Prescriber | Outcome |

|||--||

| Zoloft (Sertraline) 25 mg | 50 mg | SSRI Antidepressant | Dr. Tufts | Discontinued

thoughts, activation |

| Ativan (Lorazepam) | Benzodiazepine | Dr. Tufts | Prescribed for sleep after Zoloft discontinued |

| Benadryl | Antihistamine/Sleep aid | Dr. Tufts | Prescribed for sleep |

| Trazodone | Antidepressant/Sleep | ER Doctor (South Shore) | Prescribed November 16; not effective |

| Prozac (Fluoxetine) | SSRI Antidepressant | NP Julie Paul | Discontinued after 4 days — intensified insomnia (second activation event) |

| Ambien (Zolpidem) | Sedative/Hypnotic | NP Julie Paul | Prescribed November 25 |

| Remeron (Mirtazapine) | Antidepressant | NP Julie Paul | Prescribed November 25 |

| Klonopin (Clonazepam) | Benzodiazepine | NP Julie Paul | Prescribed November 25 |

| Seroquel (Quetiapine) | Antipsychotic | NP Rebecca Jollotta | Prescribed; associated with suicidal ideation, intrusive thoughts, auditory hallucinations |

| Amitriptyline | Tricyclic Antidepressant | Various | Found in seized medications |

| Diazepam (Valium) | Benzodiazepine | Various | Two prescriptions found in seized medications |

Polypharmacy Concern

The complaint alleges that Lindsay's clinical course was "significantly complicated by polypharmacy" — the simultaneous use of multiple psychiatric medications from different providers — which allegedly obscured an accurate diagnosis and worsened her symptoms.

Alleged Failures of Care

Failure to Diagnose Bipolar Disorder

- Two antidepressants (Zoloft and Prozac) caused activation and worsening insomnia — classic red flags for bipolar disorder
- Providers continued prescribing antidepressants instead of switching to mood stabilizers
- Dr. Diaz at Women & Infants dismissed bipolar diagnosis despite severely elevated depression and anxiety scores

Failure to Recognize Psychotic Symptoms

- Lindsay reported "intrusive thoughts" to providers
- Providers failed to inquire into the content of these thoughts
- Had they done so, they would have recognized auditory command hallucinations — a psychotic symptom
- The hallucinations were actually commands telling her to kill her children and herself

Failure to Coordinate Care

- Multiple providers treated Lindsay without communicating with each other
- Nurse Jollotta did not return Women & Infants' call to discuss Lindsay's care
- No provider obtained a complete psychiatric history including inquiry into hypomanic episodes after prior deliveries

Failure to Obtain Adequate History

- No provider adequately inquired about Lindsay's mood and symptoms during and after her prior pregnancies
- Had they done so, they would have learned of hypomanic episodes following her second and third deliveries — critical indicators of bipolar disorder, postpartum onset

Inadequate Inpatient Care (McLean Hospital)

- McLean Hospital provided only five days of inpatient care
- Lindsay was discharged with "limited insight and judgment"
- She was returned to the same providers who had been providing inadequate care
- The standard of care required McLean to properly evaluate her condition and ensure appropriate discharge planning

Failure to Recognize Risk to Children

- Lindsay, as a patient with severe postpartum mental health disorders with suicidal ideation, posed a risk of harming not only herself but also her children
- Defendants knew or should have known of this danger
- The standard of care required recognition of the risk of postpartum psychosis and potential harm to children

Damages Sought

The complaint seeks damages for:

1. Personal injuries suffered by Lindsay Clancy as a result of Defendants' negligence
2. Loss of parental consortium — the children's loss of their mother's companionship
3. Loss of spousal consortium — Patrick Clancy's loss of his wife's companionship
4. Medical expenses — past and future
5. Pain and suffering — past and future
6. Emotional distress
7. Lost wages and earning capacity
8. Punitive damages (if applicable)

Patrick Clancy's Separate Civil Lawsuit

In addition to Lindsay's lawsuit, Patrick Clancy filed a separate civil lawsuit on behalf of the estates of the couple's three children — Cora, Dawson, and Callan — alleging that Lindsay's psychiatric providers failed to properly recognize and treat her rapidly deteriorating mental condition. This lawsuit remains open.

Procedural History

| Date | Event |

||-

| January 22, 2026 | Lindsay Clancy's civil complaint eFiled |

| January 23, 2026 | Docketed in Norfolk County Superior Court |

| 2026 | Amended complaint filed adding additional defendants (Dr. Elizabeth Madva, Letisha Dukes) |

| Ongoing | Litigation continues; Dr. Madva filed opposition to amended complaint |

Key Legal Arguments

Plaintiff's Position

- Lindsay Clancy did everything a mother in her situation could do: she recognized something was wrong, sought treatment, went to emergency rooms, called crisis hotlines, admitted herself to hospitals, took prescribed medications, communicated worsening symptoms, and told providers the medications were making her worse
- Her husband advocated for her; her family drove from out of state to help
- Despite all of this, the medical system failed her completely
- The Defendants' collective failures more likely than not caused the injuries alleged

Defense Position (Anticipated)

- Providers acted within the standard of care
- Lindsay's condition was complex and difficult to diagnose
- She did not accurately report all symptoms to providers
- The outcome was tragic but not the result of medical negligence
- Bipolar disorder with postpartum onset is difficult to diagnose even with complete information

Significance

This civil lawsuit is significant because:

1. It foreshadows the criminal defense: The medication failures and misdiagnosis allegations in the civil case directly support the criminal defense theory that Clancy was not legally responsible for her actions due to severe mental illness exacerbated by medical negligence.
2. It establishes a timeline of deterioration: The detailed chronology shows a rapid and severe decline in mental health over approximately four months, with multiple missed opportunities for intervention.
3. It raises questions about psychiatric care: The case highlights systemic issues in postpartum mental health care, including failure to recognize bipolar disorder, polypharmacy risks, and communication breakdowns between providers.
4. It addresses the "antidepressant activation" phenomenon: The complaint specifically alleges that two antidepressants

causing activation should have been recognized as warning signs of bipolar disorder — a critical medical-legal issue.

5. It seeks accountability from multiple providers: The lawsuit targets individual providers and institutions, raising questions about systemic failures in the mental health care system.

Note: This document compiles information from the civil complaint filed in Norfolk County Superior Court (Case No. 2682CV000081), as reported by Boston.com, Boston Globe, Fox News, and Justice Case Analysis. The complaint PDF was accessed from knowyourdrugs.org and other sources. Some details are synthesized from multiple news reports covering the civil litigation.