



BYRNE
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LAW



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Sean P. Byrne defends hospitals, physicians, nurses, and other health care providers in medical malpractice claims and litigation across Virginia. With nearly three decades of trial experience in high-exposure, complex cases in state and federal courts, Sean is one of Virginia's most experienced and accomplished health care defense attorneys.

Sean comes from a family deeply rooted in the law. He is the son of Michael and Susan Byrne, an attorney and a court stenographer. He is also the grandson of Matthew V. Byrne, Jr., who co-founded the Syracuse NY law firm of Byrne, Costello & Pickard, PC, in 1957. Sean is also the grandson of the Honorable Neal P. McCurn, who served as a United States District Court Judge for the Northern District of New York (1979-2014). Judge McCurn's father (Sean's great grandfather) was Justice Francis D. McCurn, who served on the New York Supreme Court, Appellate Division, Fourth Department (1940-1960).

A proud double University of Richmond Spider, Sean earned his undergraduate and law degrees from UR, graduating law school magna cum laude in 1997. After graduation, he was privileged to serve as a Federal Law Clerk for Judge William T. Prince, United States District Court for the Eastern District of Virginia, Norfolk Division.

Trained as a Virginia certified Emergency Medical Technician (EMT-B), Sean brings hands-on medical training to every case. He works to master the clinical, legal, and factual dimensions of each matter, providing clients with practical insight and advice while delivering the strongest possible defense and seeking to achieve the best available outcome.

Sean is the founding partner of Byrne Canaan Law, a health care defense firm built on the belief that healthcare defendants deserve to survive, thrive, and prevail in litigation so they can resume their professional and personal lives with their reputations and confidence intact. The firm's culture reflects Sean's commitment to preparation, transparency, civility, and client-centered advocacy.

Community engagement and pro bono service are important to Sean. He currently serves on the Boards of Directors of both the Richmond Bar Association and Central Virginia Legal Aid Society (CVLAS). CVLAS is a nonprofit organization that provides free civil legal services and preventive legal education to low-income and elderly individuals across central Virginia. Sean previously served on the Virginia State Bar Disciplinary Committee for the Third District from 2013 to 2021, including a term as Third District Chair. He is also a founding board member of the nonprofit Richmond Global Health Alliance (RGHA), where he helped lead multiple service learning trips to Central and South America with teams of undergraduate, medical, and law students working alongside health care professionals.

Sean has been an Adjunct Faculty Member at the University of Richmond for more than twenty-five years, teaching across both the law and undergraduate schools. His courses include Lawyering Skills, Virginia Civil Procedure, Medical Malpractice Litigation, Global Health Service, Health Law, and Trial



Skills. He also frequently lectures in the health care community on legal developments and risk management strategies to help providers avoid, prevent, survive, and prevail in civil litigation. In 2006, Sean developed a first-of-its-kind course that brought practicing physicians into the classroom alongside law students to study medical malpractice litigation together. The course attracted national media coverage from the Associated Press, The New York Times, and The Chronicle of Higher Education.

Sean is licensed in Virginia, Tennessee (inactive), and New York (inactive). He is admitted to practice in the United States District Courts for the Eastern and Western Districts of Virginia, the Fourth Circuit Court of Appeals, and the Supreme Court of the United States.

Outside the office, Sean is the proud father of three grown children. He enjoys athletics and the outdoors. Along the way he completed ten marathons. His hobbies include boating and fishing in New England, live music, and cheering on the Richmond Spiders, the Boston Red Sox, Celtics, Patriots, and Bruins.

REPRESENTATIVE EXPERIENCE

Sean has tried medical malpractice cases to verdict in courtrooms across Virginia for nearly three decades, defending physicians, surgeons, hospitals, and health systems in high-exposure litigation. He has particular depth of experience in cases involving surgical complications, obstetric and neonatal injuries, diagnostic failures, emergency medicine, wrongful death, and health care regulatory and privilege issues. His results include multiple defense verdicts recognized by Virginia Lawyers Weekly as among the year's largest.

Medical Malpractice Defense Verdicts

Sean regularly takes complex medical malpractice cases to trial and obtains defense verdicts for health care providers facing significant exposure. Representative jury trial results include:

- **Defense verdict** for orthopedic surgeon and practice group in wrongful death case alleging failure to diagnose deep vein thrombosis one week before patient died of pulmonary embolism during the early COVID-19 pandemic. Defense proved patient did not have DVT at the time of the office visit and introduced evidence the patient likely died from COVID-related complications. Five days of evidence, unanimous defense verdict. Tried with Anthony S. Cottone. (Fairfax County Circuit Court, 2025)
- **Defense verdict** for orthopedic spine surgeon and practice group in anticoagulation management case. Patient failed to restart blood thinner as instructed after spinal surgery and experienced a pulmonary embolism on post-operative day 24. Plaintiff alleged inadequate discharge instructions. Defense demonstrated the surgeon repeatedly provided appropriate anticoagulation instructions and that the patient, who was under the care of multiple specialists, recovered fully. Six-day trial, unanimous defense verdict. Tried with Anthony S. Cottone. (Fairfax County Circuit Court, 2024)



- **Defense verdict** for orthopedic surgeon and practice group after patient suffered vascular injury during spinal fusion procedure. Plaintiff demanded \$2.4 million and alleged negligent screw placement during an oblique lateral interbody fusion (OLIF). Defense presented expert testimony that the surgeon met the standard of care and the vascular injury was a well-recognized risk of the procedure. Jury deliberated approximately one hour and returned a unanimous defense verdict. Tried with W. Davis Powell. (Richmond Circuit Court, 2022)
- **Defense verdict** for obstetrician in birth injury case involving shoulder dystocia and permanent brachial plexus injury with nerve root avulsions. Plaintiff demanded \$2 million. Court excluded plaintiff's biomedical engineer expert in a pretrial ruling, holding that only a medical doctor may render an opinion on the cause of a human injury. Defense established that the physician applied only gentle, appropriate traction during the delivery. Five-day trial, defense verdict. (Prince William County Circuit Court, 2019)
- **Defense verdict** for physician practice group in delayed diagnosis of prostate cancer case. Plaintiff, a prominent business executive, alleged defendant failed to order PSA testing over a four-year period, allowing his cancer to progress to metastatic disease. Defense proved defendant was not serving as the plaintiff's primary care physician and had no duty to perform PSA screening at limited-scope visits. Called five third-party record custodians who introduced evidence impeaching plaintiff's claim about his primary care relationship. Four-day trial, jury deliberated less than 25 minutes. (Henrico County Circuit Court, 2019)
- **Defense verdict** for urologist and employer after robotic-assisted laparoscopic prostatectomy was complicated by a bowel injury. The 59-year-old plaintiff had a complex medical history including prior abdominal surgeries. Plaintiff alleged the surgeon should not have performed the procedure, should have detected a second bowel injury during the operation, and should not have discharged the patient on post-operative day three. Defense proved the patient was an appropriate surgical candidate, the unrecognized injury was undetectable at the time of surgery, and the discharge decision was clinically appropriate. Three-day trial, jury deliberated less than 20 minutes. (Richmond Circuit Court, 2015)
- **Defense verdict** for both emergency physician and hematology consultant in wrongful death case. A 65-year-old patient diagnosed with immune thrombocytopenic purpura (ITP) was treated with IV steroids and discharged, then returned hours later with a fatal intracranial hemorrhage. Plaintiff alleged the physicians should have ordered platelet transfusions, IVIG, and hospital admission. Defense established that steroids were the correct initial therapy, the additional treatments proposed by plaintiff's experts were contraindicated by the patient's medical history, and that even with such treatment the outcome would not have changed. Five-day trial, jury deliberated less than one hour, defense verdict as to both defendants. (Norfolk Circuit Court, 2015)
- **Defense verdict** for obstetrician after stillbirth at approximately 38 weeks gestation. Plaintiff alleged elevated blood pressure readings indicated developing preeclampsia requiring closer



monitoring and earlier delivery. Defense proved the blood pressure elevations were transient and returned to normal on repeat measurement and presented placental pathology evidence that the abruption was not caused by chronic hypertension. Defense also introduced the plaintiff's continued cigarette smoking throughout pregnancy as a contributing cause of the placental abruption. Four-day trial, defense verdict. (2010)

- **Defense verdict** for obstetrician in post-partum hemorrhage case. A 36-year-old patient developed Asherman's Syndrome following an emergency D&C. Plaintiff demanded \$1.7 million. Defense established the procedure was performed correctly and the complication was a recognized risk. Three-day trial, jury deliberated less than 15 minutes. (Virginia Beach Circuit Court, 2005)

Published Opinions and Appellate Advocacy

Sean has been involved in cases resulting in published judicial opinions that have shaped Virginia health care law:

- ***Kone v. Wilson, 272 Va. 59 (2006)***. Successfully argued before the Supreme Court of Virginia that a wrongful death action in a medical malpractice case could not be maintained by an administrator proceeding pro se, because the administrator of an estate acts as a surrogate for the statutory beneficiaries and not in a personal capacity. The Supreme Court affirmed the trial court's dismissal with prejudice, and the opinion became cited precedent in Virginia wrongful death jurisprudence.
- ***Murphy v. Olive, Court of Appeals of Virginia***, Record No. 0865-23-2 (2024). Court of Appeals affirmed summary judgment in favor of all defendants in a medical malpractice case alleging negligent treatment of a chemical burn resulting in bilateral toe amputations. Defense successfully argued that plaintiff could not establish causation as a matter of law after his sole causation expert withdrew and his remaining nurse practitioner experts were statutorily prohibited from providing causation testimony against a defendant health care provider under Virginia Code Section 8.01-401.2(B)(ii). The Court of Appeals rejected all eight of plaintiff's assignments of error, including challenges to discovery rulings, motions to disqualify defense counsel, and evidentiary decisions at the summary judgment hearing. With Anthony S. Cottone. (Originally in Richmond Circuit Court.)
- ***Gray v. Bon Secours Richmond Community Hospital***, Richmond Circuit Court (2006). Successfully argued a motion in limine to restrict the use in litigation of hospital quality assurance materials that the plaintiff had obtained through a Freedom of Information Act request. The court held that the materials' use in the context of a medical malpractice lawsuit was governed by Virginia Code Section 8.01-581.17, Virginia's medical review committee privilege, regardless of the manner in which they were obtained. The court ordered the materials returned to the hospital and barred any further use or disclosure



PUBLICATIONS AND PRESENTATION

- Access to Health Care for the Hearing Impaired,” *For the Defense*, Vol. 44, No. 2, pp. 30–33 (2002).
- “UR Law School Offers Med Mal Class for Healthcare Providers,” *Virginia Medical Law Report*, Vol. 2 (2005).
- “The Patient Safety Quality Improvement Act of 2005,” *Virginia Medical Law Report* (2006).
- “The Medicolegal Aspect of Error in Pathology: A Search of Jury Verdicts and Settlements,” *Archives of Pathology & Laboratory Medicine*, Vol. 131, pp. 615–18 (2007).
- “Annual Survey of Health Care Law,” *University of Richmond Law Review*, Vol. 42, pp. 441–487 (2007)
- “An Informed Practitioner’s Guide to Informed Consent,” *Virginia Medical Law Report*, 5 M.L.R. 81 (2008).
- “Practice Pointer: Deposing the Plaintiff’s Expert,” *Healthcare Liability & Litigation Newsletter*, American Health Lawyers Association, Vol. 12 (2010).
- “Emerging Malpractice Concerns Over Electronic Health Records,” *Virginia Medical Law Report*, Vol. 7, No. 6 (2010).
- “Annual Survey of Medical Malpractice Law,” *University of Richmond Law Review*, Vol. 45, pp. 319–346 (2010).
- “Electronic Health Records: Assessing Best Practices and Anticipating Liability Concerns” (with Neal H. Lewis), *Healthcare Liability & Litigation*, American Health Lawyers Association, Vol. 13, No. 2 (2011).
- “Annual Survey of Health Care Law,” *University of Richmond Law Review*, Vol. 49, pp. 103–135 (2014).
- “Reduce Your Risk of Being Successfully Sued With the Four ‘C’s,”” *Virginia Medical Law Report* (2015).
- “New Malpractice Risks to Watch for Post-COVID-19,” *Medical Economics* (2020).
- “What to Do When the Lawyer Calls” (with Lucien W. Roberts III), *Ramifications* (Richmond Academy of Medicine) (2021).
- “Avoiding Medical Malpractice Suits,” *Contemporary OB/GYN* (2021); reprinted in *Medical Economics* (2022)
- “Statutes and Rules” (Chapter 1), *Medical Malpractice Law in Virginia* (Virginia CLE, 2022).

Speaking Engagements

Sean is a frequent speaker and lecturer on health care legal education, risk management, and litigation avoidance. Representative presentations include Documentation Best Practices, Health Care Legislative and Regulatory Updates, Informed Consent, Advance Medical Directives, Adverse Event Disclosure, Trends in Medical Malpractice Litigation, Social Media and Health Care Liability, and Electronic Medical Records.



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PRACTICES

- Medical Malpractice Defense
- Risk Management
- Long Term Care Defense
- Healthcare Investigations & Enforcement Actions
- Appellate Advocacy

LICENSURE

- Virginia
- Federal Court, Eastern and Western Districts of Virginia
- Fourth Circuit Court of Appeals
- Supreme Court of the United States
- Tennessee (Inactive)
- New York (Inactive)

ACADEMIC CREDENTIALS

- University of Richmond, B.A.
- University of Richmond School of Law, J.D., *magna cum laude*
- Virginia Certified Emergency Medical Technician (2005-2009))

ASSOCIATIONS & PROFESSIONAL MEMBERSHIPS

- Virginia Association of Defense Attorneys
- Defense Research Institute
- Virginia Bar Association
- American Society for Healthcare Risk Management, Virginia Chapter
- Virginia State Bar
- Richmond Bar Association
- Henrico County Bar Association