

**COURT OF APPEALS OF OHIO**  
**EIGHTH APPELLATE DISTRICT**  
**COUNTY OF CUYAHOGA**

|                                         |   |            |
|-----------------------------------------|---|------------|
| VALERIE LINZIE, ET AL.,                 | : |            |
| Plaintiffs-Appellants,                  | : |            |
| v.                                      | : | No. 115513 |
| CLEVELAND CLINIC<br>FOUNDATION, ET AL., | : |            |
| Defendants-Appellees.                   | : |            |

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**JOURNAL ENTRY AND OPINION**

**JUDGMENT: AFFIRMED**  
**RELEASED AND JOURNALIZED: October 15, 2026**

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Civil Appeal from the Cuyahoga County Court of Common Pleas  
Case No. CV-25-112663

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***Appearances:***

McCarthy, Lebit, Crystal & Liffman Co., LPA, Christian R. Patno and Colin R. Ray, *for appellants*.

Reminger Co., L.P.A., William A. Meadows, Brian D. Sullivan, Frank G. Mazgaj, Brianna M. Prislipsky and Holly Marie Wilson, *for appellees* Children's Hospital Medical Center of Akron, Joel S. Katz, D.O., Paul McPherson, M.D. and Ashleigh Welko, M.D.

Tucker Ellis LLP, Benjamin C. Sasse and Edward E. Taber *for appellees* The Cleveland Clinic Foundation and Benjamin Fortson, M.D.

EILEEN A. GALLAGHER, J.:

{¶ 1} Valerie Linzie and Chad Stertzbach (the “Parents”) appeal the trial court’s granting the motions for judgment on the pleadings filed by the Cleveland Clinic Foundation, the Children’s Hospital Medical Center of Akron and four physicians employed by these two entities (the “Defendants”) in this case. For the following reasons, we affirm the trial court’s judgment.

### **I. Facts and Procedural History**

{¶ 2} On February 25, 2025, the Parents filed a complaint against the Defendants alleging the following:

{¶ 3} On February 25, 2024, the Parents’ child (the “Child”) “presented to Defendants . . . for medical care” and was subjected to a “CT imaging study” of his head. This imaging study was “thereafter improperly and incorrectly interpreted” by the Defendants “as evidencing skull fractures and scalp hematoma that were the result of NAT (Non Accidental Trauma).” The Defendants’ misdiagnosis was “negligent, careless, reckless and deviated from the accepted standards of care . . . .”

{¶ 4} The Defendants “triggered and promulgated” a “child abuse alert and allegation,” which resulted in unnecessary medical care and costs and “an investigation and communication with . . . the Summit County Children Services and the Hudson Police Department.” Because of the child abuse alert and allegation, “policies, procedures and limitations,” including a “Safety Plan,” were put in place, which limited the ability of the Parents to interact with, and care for, the Child.

Furthermore, the Parents allegedly were “required to incur attorney fees and be otherwise damaged.”

**{¶ 5}** On March 11, 2024, two nonparty physicians “determined that the CT film appeared most consistent with accessory parietal sutures” rather than skull fractures and there was no evidence of nonaccidental trauma. Between March 25, 2024 and March 27, 2024, the CT film was reviewed, again, by the Defendants, who confirmed that it was initially “misread” and it evidenced “congenital accessory parietal sutures of an infant which are not related in any way to trauma.”

**{¶ 6}** The Defendants “carelessly, recklessly, in deviation from the accepted standard of care, falsely, and in bad faith . . . knowingly published false statements of fact that [the Child] was physically abused and the victim of nonaccidental trauma . . . .” This inaccurate medical record, which the Defendants refused to correct, was communicated to third parties, which caused damage, such as “severe emotional trauma, attorney fees, the cost of chaperones, damage to their reputation [and] interference with their parental relationship . . . .” Additionally, on April 30, 2024, one of the Defendants filed an addendum “to his prior February 25, 2024 interpretation of the CT film in issue,” which included known false statements.

**{¶ 7}** On June 5, 2025, the Defendants filed motions for judgment on the pleadings and, on August 7, 2025, the court granted those motions “pursuant to the immunity statute, R.C. 2151.421.” The Parents appeal raising six assignments of error for our review.

I. The trial court erred in granting judgment on the pleadings to Defendant-Appellee Benjamin Fortson, M.D.

II. The trial court erred in granting judgment on the pleadings to Defendant-Appellee Joel S. Katz, D.O.

III. The trial court erred in granting judgment on the pleadings to Defendant-Appellee Paul McPherson, M.D.

IV. The trial court erred in granting judgment on the pleadings to Defendant-Appellee Ashleigh Welko, M.D.

V. The trial court erred in granting judgment on the pleadings to Defendant-Appellee Cleveland Clinic Foundation.

VI. The trial court erred in granting judgment on the pleadings to Defendant-Appellee Children's Hospital Medical Center of Akron.

**{¶ 8}** We note that, pursuant to App.R. 16(A)(7), an appellant's brief shall include "[a]n argument containing the contentions of the appellant with respect to each assignment of error presented for review and the reasons in support of the contentions . . . ." In this case, the Parents' appellate brief does not comply with this rule. Rather, the Parents' Argument portion of their brief contains the following eight sections (section B through section I), none of which correlate to, or ask this court to sustain, any specific assignment of error:

- Section B — There is no immunity when there is no reasonable cause to suspect child abuse;
- Section C — There was no reasonable cause to suspect child abuse in this case;
- Section D — The alleged defamation that occurred on April 30, 2024, falls under the R.C. 2151.421(H)(1)(b) exception to immunity;

- Section E — The alleged defamation that occurred during February and March 2024, falls under the R.C. 2151.421(H)(1)(b) exception to immunity;
- Section F — “[I]f there is a reversal as to any individual [Defendant], judgment in favor of the employer-[Defendants] must be reversed as well”;
- Section G — The Parents “adequately alleged medical malpractice and defamation” if the Defendants are not immune under R.C. 2151.421;
- Section H — “Even if immunity applies, issues of fact remain regarding obviation of immunity under R.C. 2151.421(H)(1)(a)(ii)”;
- Section I — The “General Assembly’s purposeful amendments to the prior immunity statute evidence clear intent to create liability in limited cases and overruled all of Appellee’s cases.”

**{¶ 9}** We review this case by addressing the arguments set forth in the eight issues raised in sections B through I of the Analysis portion of the Parents’ appellate brief, and out of order when necessary. Due to the nature of the Parents’ appellate brief, we will not address each assignment of error. *See Greenlaw v. United States*, 554 U.S. 237, 243 (2008) (Courts “rely on the parties to frame the issues for decision and assign to courts the role of neutral arbiter of matters the parties present.”); *Epcon Communities Franchising, L.L.C. v. Wilcox Dev. Grp., L.L.C.*, 2024-Ohio-4989, ¶ 15 (“[O]ur judicial system relies on the principle of party presentation, and courts should ordinarily decide cases based on issues raised by the parties.”).

## II. Law

### A. Standard of Review — Judgment on the Pleadings

{¶ 10} We review a trial court’s ruling on a Civ.R. 12(C) motion for judgment on the pleadings “under the same principles that this court would apply in analyzing a motion to dismiss pursuant to Civ.R. 12(B)(6).” *Jordan v. Giant Eagle Supermarket*, 2020-Ohio-5622, ¶ 21 (8th Dist.). We review a trial court’s decision on a Civ.R. 12(B)(6) motion to dismiss under a de novo standard. “A motion to dismiss for failure to state a claim upon which relief can be granted is procedural and tests the sufficiency of the complaint . . . . Under a de novo analysis, we must accept factual allegations of the complaint as true and all reasonable inferences must be drawn in favor of the nonmoving party.” *NorthPoint Properties v. Petticord*, 2008-Ohio-5996, ¶ 11 (8th Dist.). “For a trial court to grant a motion to dismiss for failure to state a claim upon which relief can be granted, it must appear ‘beyond doubt from the complaint that the plaintiff can prove no set of facts entitling her to relief.’” *Graham v. Lakewood*, 2018-Ohio-1850, ¶ 47 (8th Dist.), quoting *Grey v. Walgreen Co.*, 2018-Ohio-6167, ¶ 3 (8th Dist.).

### B. Reporting Child Abuse or Neglect Under R.C. 2151.421

#### 1. Mandatory Reporters

{¶ 11} Pursuant to R.C. 2151.421(A)(1)(a) and (b), no healthcare professional who

knows, or has reasonable cause to suspect based on facts that would cause a reasonable person in a similar position to suspect, that a child . . . has suffered or faces a threat of suffering any physical or mental wound, injury, disability, or condition of a nature that reasonably

indicates abuse or neglect of the child shall fail to immediately report that knowledge or reasonable cause to suspect to the entity or persons specified in this division.

**{¶ 12}** Pursuant to R.C. 2151.421(O)(2), healthcare professionals include physicians. In other words, in this case, the Defendant physicians are mandatory reporters of child abuse if they know or reasonably suspect that child abuse occurred.

## **2. Immunity**

**{¶ 13}** Pursuant to R.C. 2151.421(H)(1)(a), healthcare professionals and hospitals “shall be immune from any civil or criminal liability for injury . . . or loss . . . as a result of” the following conduct concerning reporting child abuse:

- (i) Participating in the making of reports . . .;
- (ii) Participating in medical examinations, tests, or procedures under division (D) of this section;
- (iii) Providing information used in a report . . .; [and]
- (iv) Participating in a judicial proceeding resulting from a report . . . .

**{¶ 14}** R.C. 2151.421(D) states, in part, that any person who is a mandatory reporter of child abuse may, “if medically necessary for the purpose of diagnosing or treating injuries that are suspected to have occurred as a result of child abuse or child neglect, perform or cause to be performed radiological examinations and any other medical examinations of, and tests or procedures on, the child.” As stated above, R.C. 2151.421(H)(1)(a)(ii) affords healthcare professionals immunity for medical examinations, tests or procedures that fall under Section (D).

### **3. Exception to Immunity**

{¶ 15} R.C. 2151.421(H)(1)(b) states that “[i]mmunity under division (H)(1)(a)(ii) . . . shall not apply when a health care provider has deviated from the standard of care applicable to the provider’s profession” regarding medical treatment rendered pursuant to R.C. 2151.421(D). In simpler terms, and as applicable to this case, mandatory reporters of child abuse are immune from liability for reasonably reporting child abuse unless they commit medical malpractice in performing “medically necessary diagnostic or treatment care of the child as a result of the abuse.”

### **4. Public Policy**

{¶ 16} In *Walters v. Enrichment Ctr.*, 133 Ohio App.3d 66, 73 (8th Dist. 1999), this court set forth the public policy rationale behind R.C. 2151.421’s general grant of immunity to mandatory reporters of child abuse:

[I]t is clear that the societal benefits of preventing child abuse outweigh the individual harm which might arise from the filing of an occasional false report. The grant of immunity . . . for those persons reporting under the mandatory provisions of R.C. 2151.421(A) similarly promotes the public policy goal of protecting children from physical and mental abuse by ensuring that those persons who are required by law to report such abuse are not deterred from this duty by the daunting prospect of expensive and time consuming litigation.

## **III. Analysis**

### **A. Reasonable Cause to Suspect Child Abuse**

{¶ 17} We now address the issues raised in sections B and C of the Argument portion of the Parents’ appellate brief. According to the Parents, they alleged in their complaint that “there was never reasonable cause to report suspected child abuse to

anyone,” therefore, the Defendants “were mere voluntary reporters . . . [and] there is no immunity at all . . . .”

**{¶ 18}** As stated previously, R.C. 2151.421(A)(1)(a) states, in part, that “no healthcare professional who . . . has reasonable cause to suspect based on facts that would cause a reasonable person in a similar position to suspect, that a child” was abused “shall fail to immediately report that . . . reasonable cause to suspect” child abuse to the proper authorities.

**{¶ 19}** Our review of the complaint in this case does not support the Parents’ argument. First, the words “reasonable,” “suspect” and “suspected” are not in the Parents’ complaint. Neither is the word “unreasonable” for that matter. The Parents’ appellate brief states that the complaint “alleges in numerous places (¶ 11, 13, 14) that there was never any reasonable cause to report suspected child abuse.” However, our reading of these paragraphs does not show that the complaint alleges this.

**{¶ 20}** In paragraph 11, the Parents allege that, on March 11, 2024, a nonparty physician reviewed the Child’s CT scan and determined that it was “consistent with accessory parietal sutures” and “not consistent with bilateral fractures.” Another nonparty doctor “noted there was ‘(n)o evidence of nonaccidental trauma as questioned previously.’” Nowhere in paragraph 11 is there an allegation that the Defendants did not have reasonable cause to suspect child abuse.

**{¶ 21}** Paragraphs 13 and 14 concern allegations of defamation and make no mention of whether there was a reasonable suspicion of child abuse.

**{¶ 22}** As the *Walters*’ Court noted, the public policy behind R.C. 2151.421 is that the benefits of preventing child abuse outweigh the dangers of false reporting. *See also Kraynak v. Youngstown City School Dist. Bd. of Edn.*, 2008-Ohio-2618, ¶ 20 (“R.C. 2151.421 does not state that a person must review the totality of the circumstances” before reporting reasonably suspected child abuse.); *Dunkle v. Children’s Hosp. Med. Ctr. of Akron*, 2013-Ohio-5555, ¶ 11 (9th Dist.) (“Mandatory reporters must report suspected child abuse and are entitled to absolute immunity from liability for their participation in the making of a report of abuse.”). The Parents’ complaint alleges that the Defendants reported what they “improperly and incorrectly” suspected to be, but allegedly turned out not to be, child abuse, as required by the statute.

**{¶ 23}** Additionally, the Parents argue that, without reasonable cause to suspect child abuse, the healthcare providers were somehow transformed from mandatory reporters of child abuse to voluntary reporters of child abuse. Specifically, the Parents’ brief states as follows: “Under division (B), any person may become a voluntary reporter of child abuse if their report is made in good faith.” A plain reading of R.C. 2151.421(B) shows that any person not identified in section (A), which applies to mandatory reporters, may report child abuse if they reasonably suspect it. There is no mention of “good faith” in section (B), and there is no mention of healthcare providers morphing from mandatory reporters to voluntary reporters.

**{¶ 24}** Accepting all factual allegations in the complaint as true and drawing all reasonable inferences in favor of the Parents, as we must under Civ.R. 12(C), we find that the Parents’ complaint does not sufficiently plead that the Defendants did not have reasonable cause to suspect child abuse. The arguments contained in sections B and C of the Argument section of the Parents’ appellate brief are without merit.

**B. The Defendants are Immune From Liability Regarding Defamation Claims**

**{¶ 25}** The issues raised in sections D and E of the Argument portion of the Parents’ appellate brief relate to the Parents’ allegations that certain actions by the Defendants fell below the accepted standard of care and should be considered as “engaging in behavior covered by Division D.” The Parents further argue that, under R.C. 2151.421(H)(1)(b), “if [the Defendants] deviated from the standard of care with such acts and omissions, there is no immunity.”

**{¶ 26}** As stated previously, R.C. 2151.421(D) authorizes mandatory reporters to perform medical examinations, tests and procedures, if necessary, to diagnose or treat “injuries that are suspected to have occurred as a result of child abuse . . . .” R.C. 2151.421(H)(1)(a)(ii) states that healthcare providers “shall be immune from any civil or criminal liability” for injuries resulting from “[p]articipating in medical examinations, tests, or procedures under division (D) of this section . . . .” R.C. 2151.421(H)(1)(b) creates an exception to R.C. 2151.421(H)(1)(a)(ii) immunity “when a health care provider has deviated from the standard of care applicable to the provider’s profession.”

**{¶ 27}** According to the Parents’ complaint, the Defendants’ acts at issue are as follows: In February and March 2024, the Defendants “knowingly published false statements of fact that [the Child] was physically abused” and on April 30, 2024, the Defendants filed an addendum to the “interpretation of [the Child’s] CT film in issue,” which included false statements.

**{¶ 28}** Upon review, we find that these acts are not “behavior covered by Division D” of R.C. 2151.421. Rather, these acts contemplate defamation. They do not concern medical examinations, tests or procedures. No reasonable reading of R.C. 2151.421(D) would leave a reader of the opinion that defamation falls under this section, because it expressly lists the acts covered as “medical examinations, tests or procedures.” Additionally, sections D and E of the Argument portion of the Parents’ appellate brief cite no case law to support the Parents’ proposition. Accordingly, we find that the immunity exception in R.C. 2151.421(H)(1)(b) does not apply to defamation claims.

**{¶ 29}** Accepting all factual allegations in the complaint as true and drawing all reasonable inferences in favor of the Parents, as we must under Civ.R. 12(C), we find that the Parents can prove no set of facts entitling them to relief for defamation. The Parents’ arguments in sections D and E of the Argument portion of their appellate brief are without merit.

### **C. R.C. 2151.421(H)(1)(a)(ii) Exception to Immunity**

**{¶ 30}** This section of our opinion addresses the issues raised in section H of the Argument portion of the Parents’ appellate brief. The Parents argue that “[e]ven

if immunity applies, issues of fact remain regarding obviation of immunity under R.C. 2151.421(H)(1)(a)(ii).” We note that whether there are issues of fact has nothing to do with our standard of review concerning a motion for judgment on the pleadings. Indeed, Civ.R. 12(C) requires us to accept all factual allegations in the complaint as true.

**{¶ 31}** Nonetheless, in their appellate brief, the Parents state that the Defendants “conducted additional medical examinations and deviated from the applicable standard of care” and they “can prove a set of facts evidencing that any further examination or involvement deviated from the standard of care.” The Parents argue on appeal that this conduct falls under the R.C. 2151.421(H)(1)(b) exception to immunity. The problem with this argument is that the complaint does not allege that the Defendants “conducted additional medical examinations and deviated from the applicable standard of care.” The Parents do not identify, in their complaint or in their appellate brief, an alleged instance of medical malpractice that occurred during additional medical examinations conducted by the Defendants. Furthermore, the Parents do not cite any case law in this section of their brief to support their argument.

**{¶ 32}** Our review of the complaint shows the Parents did not allege that an initial misdiagnosis, which triggered the mandatory reporting of child abuse, falls under R.C. 2151.421(D)’s umbrella of “medical examinations of, and tests or procedures on, the child . . . if medically necessary for the purpose of diagnosing or treating injuries that are suspected to have occurred as a result of child abuse . . . .”

Rather, the Parents argue on appeal that the Defendants deviated from the standard of care in additional acts that “only came *after* statutory reporting occurred.” (Emphasis in original.)

**{¶ 33}** Our review of the complaint shows that the Parents alleged “multiple other unnecessary imaging and medical cost and care occurred.” Assuming without deciding that multiple and unnecessary, yet unidentified, additional acts fall under R.C. 2151.421(D), there is no allegation of medical malpractice or a deviation from the standard of care regarding these acts. Additionally, there is no allegation in the complaint that the Defendants even provided this additional medical care. The medical malpractice allegations found in the Parents’ complaint are limited to the following: the Child’s “CT imaging study” was “improperly and incorrectly interpreted.” According to the complaint, the CT imaging study was the catalyst for the child abuse report. It was not conducted as a result of suspected child abuse.

**{¶ 34}** Accepting all factual allegations in the complaint as true and drawing all reasonable inferences in favor of the Parents, under Civ.R. 12(C), we find that the complaint does not sufficiently allege any conduct that falls under R.C. 2151.421(D) and (H)(1)(b). This means no exception to the general immunity found in R.C. 2151.421(H)((1)(a) was triggered, and the Defendants are immune from liability under the statute. Therefore, the Parents’ arguments under section (H) of the Argument section of their appellate brief are without merit.

#### **D. Sections F and G of the Argument Portion of the Parents' Appellate Brief**

**{¶ 35}** In section F, the Parents argue that “if there is a reversal as to any individual, judgment in favor of the employer-Appellees must be reversed as well.” In Section G, the Parents argue that if there is a finding of no immunity, the complaint adequately alleges medical malpractice and defamation. Because the Parents failed to show why this case should be reversed and because the Defendants are immune from liability, there is no merit to the Parents’ arguments in these two sections of their appellate brief.

#### **E. Section I of the Argument Portion of the Parents' Appellate Brief**

**{¶ 36}** In section I, the Parents argue that the 2017 amendments to R.C. 2151.421 “overrule all of [the Defendants’] cases” cited in their appellate briefs. We note that the Defendants’ appellate briefs were not filed at the time the Parents made this argument. Rather, the Parents based this notion on cases they “anticipated” the Defendants would cite. The Parents do not cite any legal authority to support this argument, nor do they identify or explain the 2017 amendments to R.C. 2151.421 to which they refer. This is in violation of App.R. 16(A)(7), which states that the appellant’s brief “shall include . . . the reasons in support of the contentions, with citations to the authorities [and] statutes . . . on which [the] appellant relies.” This court has held that an “appellate court may disregard an assignment of error pursuant to App.R. 12(A)(2) if an appellant fails to cite any legal authority in support

of an argument as required by App.R. 16(A)(7).” *State v. Carman*, 2008-Ohio-4368, ¶ 31 (8th Dist.). Therefore, we disregard this section of the Parents’ appellate brief.

#### **IV. Conclusion**

**{¶ 37}** It is abundantly clear that the General Assembly afforded mandatory reporters’ immunity from liability for reporting child abuse when it enacted R.C. 2151.421. *See, e.g., Gersper v. Ashtabula Cty. Children Servs. Bd.*, 59 Ohio St.3d 127, 130 (1991) (“The General Assembly enacted [R.C. 2151.421] to encourage those who know or suspect that a child has fallen victim to abuse or neglect to report the incident to the proper authorities and/or participate in the judicial proceedings to secure the child’s safety without fear of being exposed to civil or criminal liability.”)

**{¶ 38}** Under the plain language of the statute, no exception to immunity applies to the allegations set forth in the Parents’ complaint. Additionally, the finding of an exception to immunity in this case would undermine the public policy behind the statute. Healthcare providers would fear reporting child abuse unless they were absolutely certain the abuse occurred. That level of certainty is not required under the statute. Knowledge of child abuse or a reasonable suspicion of child abuse triggers mandatory reporting under the statute.

**{¶ 39}** On appeal, the Parents fail to show reversible error in the trial court’s granting the Defendants’ motions for judgment on the pleadings. Accordingly, all of the Parents’ assignments of error are overruled.

**{¶ 40}** Judgment affirmed.

It is ordered that appellees recover from appellants costs herein taxed.

The court finds there were reasonable grounds for this appeal.

It is ordered that a special mandate issue out of this court directing the common pleas court to carry this judgment into execution.

A certified copy of this entry shall constitute the mandate pursuant to Rule 27 of the Rules of Appellate Procedure.

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EILEEN A. GALLAGHER, JUDGE

SEAN C. GALLAGHER, P.J., and  
ANITA LASTER MAYS, J., CONCUR