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On behalf of Dr. Shaknovsky and the Shaknovsky family, his legal defense team would submit the following statement to news media and the public regarding his current criminal charges as we vigorously challenge the false and sensationalized criminal allegations against him:

Dr. Thomas Shaknovsky is--and has always been a conscientious physician and citizen, as well as an army veteran, a devoted husband and father. He has always cared about every patient and every surgery he has ever performed. He has done so in service to his country in the military, and he has also visited third-world countries as a medical missionary, donating his time and finances to provide medical care and supplies to hundreds of individuals, many of them children. As a surgeon, he has had thousands of successful surgical results and has saved numerous lives during his career.

Specifically, Dr. Shaknovsky, the military veteran, currently holds the rank of Lieutenant Colonel in the U.S. Army Reserves. He enlisted in the United States Army while still in high school and, following the terrorist attacks of September 11, chose to dedicate his life to military service. Over the course of 24 years, he has honorably served his country through multiple deployments, most recently during a combat deployment to Iraq in support of Operation Inherent Resolve in 2022.

As a physician, Dr. Shaknovsky has always placed patient care above all else, often sacrificing personal and family time in service to his patients. He has always felt that his work as a surgeon was as much as ministry to other as it was his profession. He has performed countless surgical procedures pro bono for uninsured individuals in an effort to spare them from overwhelming medical expenses. Beyond his medical practice, he remains active in his church and regularly participates in volunteer and humanitarian missions. Most recently, in 2024, he personally funded and organized a medical mission to Costa Rica to provide care to underserved and underprivileged communities.

Unfortunately, Dr. Shaknovsky became involved in an emergency medical procedure that forever altered, not only his life, but the life of his patient. Despite efforts to save a critically ill patient under extraordinarily difficult circumstances, the patient tragically passed away. This heartbreaking outcome has since been further amplified through a public social media campaign conducted by counsel for the patient's family.

That being said, it is unfortunate that certain individuals have taken advantage of a complicated surgical procedure and have tried to characterize it in an overly simplistic and ridiculous manner, in an attempt, not only to maximize monetary recovery and destroy Dr. Shaknovsky's medical career, but to threaten his very liberty. These same actors have opportunistically utilized social media to weaponize their claims to their greatest extent.

Since the public has only been exposed to one side of this story with all inferences taken to the extreme negative, it would be expected that the general rhetoric would result in unfairness since the right to open discussion through free speech is not possible for both sides equally simply because the Defendant happens to be a physician.

However, many critical aspects of this case that have been portrayed and propagated through social media are simply not true according to available evidence. We would submit that it is categorically improper for any party related to this matter to propagate an embellished narrative relating to the allegations of this case that do not coincide with the established medical evidence or the chronology of medical events that occurred prior to the patient's initial cardiac arrest, clinical death, and later, pronounced death.

We would further submit that Dr. Shaknovsky would only suggest surgery if a patient had a medical condition that he believed could be alleviated through surgery. Although some surgeries can be considered "routine," complications can always arise, notwithstanding a physician's high level of education and training, standard of care, and surgical expertise.

When complications occur, especially relating to excessive bleeding, all efforts are directed to control blood loss. If, however, a patient enters cardiac arrest and does not respond to resuscitation efforts, that patient is considered clinically dead, but might not be officially pronounced dead until well after all other conceivable life-saving attempts are completely exhausted.

It is also important to note that in the event a surgeon elects to remove an organ, the device used for such is specifically designed to stop the blood exsanguination because it utilizes technology that cuts and seals off blood vessels simultaneously. The utilization of such a device would be employed to mitigate blood loss, not to create additional blood loss. That is why the removal of an organ would rarely, if ever, create additional blood loss.

It may sound far more interesting or dramatic to attribute or characterize this situation as "doctor -patient homicide due to wrong organ removal" but that would not be a correct assessment of the facts in total. In the reality of a surgical practice, if that were true, then for example, all liver transplant surgeries would have much higher mortality rates. If, however, during a liver transplant surgery (or any type of cardio-thoracic or abdominal surgery for that matter) complications arise which lead to profound blood loss, then a poor outcome is possible.

If it is determined that the cause of death of a patient is exsanguination (blood loss), it is probably not related to the acute removal a particular organ, but a separate and independent complication that arose during surgery. And if an organ was removed after blood exsanguination and cardiac arrest, it would not automatically be related to the cause of death of the patient. It should also be noted that excessive blood accumulation at the surgical site can dramatically impair visualization.

Chronology and causation are very important to understand when assessing medical situations. While it is easy to judge and assign blame to physicians when a surgery ends poorly, everyone carries the responsibility to be thoughtful, not to assign blame or judgment without a complete understanding of the situation from all sides, especially those who propagate only certain bits of information intended to be consumed by the public by and through news and social media for the highest number of clicks.

Dr. Shaknovsky has the right to resolve these allegations fairly so that he may be fully exonerated in all respects. He has the Constitutional right to a fair trial, free of witness or jury intimidation. This is especially true since this is a case of first impression which carries the possibility of setting a dangerous precedent whereby a physician becomes a criminal defendant charged with a serious felony such as manslaughter, presumably because his patient died during what turned out to be a complicated surgical operation which was intended to alleviate an acute medical condition and thereby improve his physical health.

For that reason alone, even notwithstanding the specific facts of this case, he does not deserve to be charged with criminal offense. As such, we will continue to advocate for Dr. Shaknovsky's full and complete exoneration in all respects.

Sincerely,

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Managing Partner
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