IN THE HIGH COURT OF THE REPUBLIC OF SINGAPORE

[2016] SGHC 266

Suit No 754 of 2012
(Assessment of Damages No 19 of 2015)

Between

Siew Pick Chiang

… *Plaintiff*

And

1. Hyundai Engineering & Construction Co Ltd
2. Hong Realty (Private) Limited

… *Defendants*

JUDGMENT

[Damages] — [Assessment]

[Damages] — [Measure of damages] — [Personal injuries cases]

Version No 1: 27 Oct 2020 (22:40 hrs)

TABLE OF CONTENTS

INTRODUCTION **1**

GENERAL DAMAGES **6**

PAIN AND SUFFERING AND LOSS OF AMENITIES 6

Post Traumatic Stress Disorder *6*

Impairment of memory and cognitive injuries *8*

Head injury and benign positional paroxysmal vertigo *10*

Fibromyalgia *11*

Neck and back injuries, abrasions on face, arms and legs and spondylosis *12*

Other injuries *13*

Loss of marriage prospect *14*

SPECIAL DAMAGES **14**

(A) MEDICAL AND HOSPITAL EXPENSES 14

(B) NON-MEDICAL EXPENSES (EXCLUDING EQUIPMENT AND MOBILITY AIDS) 25

(C) EQUIPMENT AND MOBILITY AIDS 31

POST-TRIAL GENERAL DAMAGES **32**

(A) LOSS OF FUTURE EARNINGS 32

(i) Multiplier *32*

(ii) Multiplicand *33*

(iii) Income tax *34*

(B) FUTURE EXPENSES 34

(i) Multiplier *34*

(ii) Future medical expenses *36*

(iii) Future hospital expenses *41*

(iv) Future transport expenses *46*

(v) Future caregiver expenses for the Plaintiff *46*

(vi) Future caregiver expenses for the Plaintiff's son *49*

(vii) Future expenses for wheelchairs, safety facilities and mobility aids *49*

(a) Wheelchairs 49

(b) Safety facilities and mobility aids 52

INTEREST AND COSTS 52

OBSERVATION 56

ANNEXURE A 57

GENERAL DAMAGES 57

PAIN AND SUFFERING AND LOSS OF AMENITIES 57

ANNEXURE B 58

SPECIAL DAMAGES 58

(A) MEDICAL AND HOSPITAL EXPENSES 58

ANNEXURE C 60

SPECIAL DAMAGES 60

(B) NON-MEDICAL EXPENSES (EXCLUDING EQUIPMENT AND MOBILITY AIDS) 60

ANNEXURE D 61

SPECIAL DAMAGES 61

(C) EQUIPMENT AND MOBILITY AIDS 61

ANNEXURE E 63

Version No 1: 27 Oct 2020 (22:40 hrs)

POST-TRIAL GENERAL DAMAGES 63
(A) LOSS OF FUTURE EARNINGS.....63
(B) FUTURE EXPENSES 63

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Siew Pick Chiang
v
Hyundai Engineering and Construction Co Ltd and another

[2016] SGHC 266

High Court — Suit No 754 of 2012 (Assessment of Damages No 19 of 2015)
Woo Bih Li J
30 June, 2 July 2015; 16, 18, 22 March; 5 April; 14 September; 6 October 2016

1 December 2016 Judgment reserved.

Woo Bih Li J:

Introduction

1 Siew Pick Chiang ("the Plaintiff") was cycling on a public pavement along Pasir Ris Drive 8 on 15 October 2009 when she was struck by a bundle of overhead cables that had fallen down without warning. The cables originated from a nearby work-site for which the first defendant Hyundai Engineering & Construction Co Ltd was the main contractor ("the Defendant").

2 On 7 September 2012, almost 35 months later, the Plaintiff commenced the present action against the Defendant. The developer of the project, Hong Realty (Private) Limited was added later as a second defendant but the Plaintiff eventually elected to proceed against the main contractor only. Hence, I have referred to the main contractor simply as "the Defendant".

Version No 1: 27 Oct 2020 (22:40 hrs)

3 The trial on liability was bifurcated. It was heard by me on 15 and 16 May 2014 after which I decided that the Defendant was 100% liable for the accident. I granted Interlocutory Judgment on that basis on 16 May 2014 with damages to be assessed by me. Interest and costs were also to be decided by me. I also ordered the Defendant to pay the Plaintiff's costs of the action fixed at $20,000 together with reasonable disbursements to be agreed between the parties or fixed by the court and goods and services tax ("GST").

4 The assessment of damages hearing commenced from 30 June 2015 to 2 July 2015. It was adjourned to re-commence from 16 March 2016 and ended on 22 March 2016.

5 The Defendant submitted that special damages are assessed as at the date of the trial or at the date of the assessment of damages hearing. It submitted that 2 July 2015 should be used as the cut-off date since that was the first day of the assessment hearing. I should clarify that the first day of hearing was actually on 30 June 2015 as I indicated above. The introduction of oral evidence started on 2 July 2015. In any event, since the first hearing was effectively over two days only with oral evidence being given on one day and since the assessment hearing was done in two tranches and there was a long interval between the two tranches, I am of the view that a more appropriate step would be to take a date before the second tranche as the cut-off date. Therefore, for the purpose of computing pre-trial damages, I am using 29 February 2016 as a fair and convenient cut-off date.

6 The physical injuries caused directly to the Plaintiff were relatively minor. Her main issue was that she suffered from post-traumatic stress

Version No 1: 27 Oct 2020 (22:40 hrs)

disorder ("PTSD") which was so serious that it gave rise to a litany of medical issues. Consequently, she was admitted 18 or 19 times into Gleneagles Hospital or Mount Elizabeth Hospital for varying periods of time. The last time she was admitted into hospital was on 27 February 2014 at Mount Elizabeth Hospital. She was warded there for more than two years at a stretch and, I understand, still remains warded there. Her psychiatrist, Dr Sim Li Ping (Pauline) ("Dr Sim") said that she is working to try and have the Plaintiff discharged by 31 December 2016. If the Plaintiff is discharged on or about 31 December 2016, she would have remained in hospital for about two years and ten months at one stretch.

7 The Plaintiff claimed around $26m as special and general damages. The pre-trial medical and hospital expenses were about $2.6m. Post-trial, they amounted to about $11m.

8 The second big ticket item was the claim for expenses for hiring part-time caregivers to care for her and for separate caregivers to care for a son born on 19 April 2010 after the accident. She said that she was not able to care for her son. The amount claimed for such caregivers for herself was around $940,000 for pre-trial damages and about $5.1m for post-trial damages. The amount claimed for such caregivers for her son was about $500,000 for pre-trial damages and $1.3m for post-trial damages.

9 The third big ticket item was the claim for loss of earnings pre-trial at $450,000 for 75 months from November 2009 to 29 February 2016 and loss of future earnings at about $1.7m. I should mention that the number of months between November 2009 and 29 February 2016 should be 76 months and not

Version No 1: 27 Oct 2020 (22:40 hrs)

75 months as inadvertently stated by the Plaintiff.[1] The claim would therefore be $456,000.

10 The fourth big ticket item was her claim for taxi fares. For pre-trial taxi fares, she claimed about $53,000. For post-trial taxi fares, she claimed about $1.25m.

11 There were many other expenses claimed and these can be found in some of the annexures to this judgment.

12 In contrast, the Plaintiff's claim for pain and suffering and loss of amenities was about $261,000.

13 The Defendant referred to the overall claim of about $26m as "staggering". It claimed that this was 13 times the highest award of damages by a Singapore court for a personal injury claim and was a figure that should give anyone pause for thought. Yet, the Defendant was rather subdued in its evidence to challenge the Plaintiff's claims.

14 The Plaintiff consulted various medical practitioners but not all executed an affidavit of evidence-in-chief ("AEIC"). For example, there was no AEIC from the following doctors whose fees were included in hospital bills:

(a) Cardiologists (Dr Lim Chun Leng, Michael and Dr Lim Ing Haan);

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[1] Para 15 of Plaintiff's Clarification dated 22/9/16.

Version No 1: 27 Oct 2020 (22:40 hrs)

(b) Respiratory specialists (Dr Chan Tiong Beng, Dr Lo Pau Lin, Constance and Dr Chan Ping Wah, Kenneth);

(c) Ophthalmologists (Dr Yap Soo Keong and Dr Ho Sek Tien); and

(d) Prosthodontists (Dr Neo Tee Khin and Dr Tan Tiat Heng, Edwin).

15 I list out below the names of the doctors and two psychologists and one physiotherapist who executed AEICs to support her claims:

(a) Dr Boey Mee Leng ("Dr Boey"), a Consultant Rheumatologist.

(b) Dr Chew Chou Mei Ling ("Dr Chew Chou"). She is a psychologist and not a medical practitioner.

(c) Dr Chong Yeh Woei ("Dr Chong"), a Senior Consultant Physician (Internal Medicine).

(d) Ms Zena Kang Hong Meng ("Ms Zena Kang"). She is also a psychologist and not a medical practitioner.

(e) Dr Lim Chee Chong, Lionel ("Dr Lionel Lim"). He is a Consultant Psychiatrist.

(f) Dr Lim Ing Ruen. He is a Ear, Nose and Throat surgeon.

(g) Mr Jonathan Lim Tai Kin ("Mr Lim"). He is a physiotherapist.

(h) Dr Sim (as referred to at [6] above). She is a Consultant Psychiatrist.

Version No 1: 27 Oct 2020 (22:40 hrs)

16 In contrast, the Defendant called only one doctor, *ie*, Dr Lim Boon Leng who is a Consultant Psychiatrist practising at Gleneagles Medical Centre under the name of Centre for Psychological Wellness Pte Ltd. I will say more later on the evidence of Dr Lim Boon Leng.

17 I will now address the various items of claims. I will deal with the general damages for pain and suffering and loss of amenities first as that will give an idea of the various medical issues that the Plaintiff was facing. I will then address the claim for special damages, *ie*, pre-trial damages. There are three sub-categories. The first is for pre-trial medical and hospital expenses. The second is for pre-trial non-medical expenses, excluding equipment and mobility aids. The third is for pre-trial equipment and mobility aids. Lastly, I will address the claim for post-trial general damages. There are various sub-categories for these damages which I will elaborate on later. The conclusions on each item of pre-trial expenses or damages will have a bearing on the post-trial damages.

General damages

Pain and suffering and loss of amenities

18 I set out in Annexure A, the various items claimed for general damages for pain and suffering and loss of amenities and the amount claimed by the Plaintiff, the Defendant's response and the court's decision.

Post Traumatic Stress Disorder

19 The Plaintiff supported her claim for $80,000 for PTSD by submitting that the range of awards for severe PTSD under the *Guidelines for the*

Version No 1: 27 Oct 2020 (22:40 hrs)

Assessment of General Damages in Personal Injury Cases 2010 (Academy Publishing, 2010) ("the Guidelines") was between $25,000 and $50,000. As her case of PTSD was even more severe than precedent cases, she should be awarded more than $50,000. Moreover, the Plaintiff submitted that as she had also suffered severe anxiety and panic attack and an extremely severe level of depression, she would be entitled to a separate and additional assessment for this. Under the Guidelines, the range of awards for General Psychiatric Disorders (other than PTSD) was $25,000 to $55,000. Therefore, the Plaintiff submitted that after taking into account these two disorders and the element of overlapping, an award of $80,000 was appropriate.

20 On the other hand, the Defendant submitted that there was no separate diagnosis by a psychiatrist of severe anxiety and panic attack and depression. Any mention of such an illness was not made by a psychiatrist. Furthermore, relying on *Lee Mui Yeng v Ng Tong Yoo* [2016] SGHC 46 ("*Lee Mui Yeng*"), the Defendant submitted that it would be incorrect to compartmentalise her psychiatric condition. In that case, the plaintiff was suffering from chronic PTSD and severe major depression disorder ("MDD"). The court considered the PTSD as the primary problem which spawned secondary symptoms of MDD. The court's award of $40,000 there took into account the MDD as well as the PTSD whereas in the present case before me, the Plaintiff suffered from PTSD only. As her PTSD was more severe than the plaintiff's in *Lee Mui Yeng*, the Defendant agreed that the Plaintiff should be entitled to $50,000 but no more.

21 I agree that even if there was a diagnosis of severe anxiety, panic attack and extreme depression, this was part of the larger issue of PTSD.

Version No 1: 27 Oct 2020 (22:40 hrs)

22 In any event, parties agree that the Plaintiff's PTSD is severe. Dr Sim described her case as the worst she had seen.[2] The Plaintiff was admitted into hospital 18 or 19 times although the Defendant did not accept that each and every occasion or the entire duration of each stay was due to the PTSD. On the last occasion she was admitted on 27 February 2014, she remained in hospital for more than two years at a stretch and was still there at the time of the assessment hearing (see [6] above). She was not discharged because of her PTSD and complications arising from her PTSD as I will elaborate below. She could not work and her prognosis was poor. She has a host of medical issues for which she consulted several doctors and many of the issues, although not necessarily all, arose from her PTSD.

23 Therefore, I am of the view that her claim for PTSD is not restricted to the maximum in the range under the Guidelines which are based on precedents which are less severe. I conclude that she is entitled to the $80,000 claimed for her PTSD.

Impairment of memory and cognitive injuries

24 According to a report dated 18 April 2012 by Ms Zena Kang, a consultant psychologist,[3] the Plaintiff's most significant deficits were in respect of her memory, *ie*, in the areas of auditory, visual, immediate and delayed memory and also her working memory and visual processing speed. Her verbal and non-verbal reasoning abilities were classified as average.

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2 Notes of Evidence ("NE") 18/3/16 p 68.

3 Plaintiff's Bundle of Documents ("PBD") pp 44-49.

Version No 1: 27 Oct 2020 (22:40 hrs)

25 The Plaintiff relied on *Teo Ai Ling (by her next friend Chua Wee Bee) v Koh Chai Kwang* [2010] 2 SLR 1037 ("*Teo Ai Ling*") for the impairment of memory and cognitive injuries. In that case, the plaintiff was granted $40,000 but her cognitive injuries included personality change. The Plaintiff submitted that her impairment of her memory and cognitive functions was more serious than in that case and so she suggested $50,000.

26 The Defendant submitted that the plaintiff in *Teo Ai Ling* had her award for cognitive injuries increased from $25,000 to $40,000 by the High Court to take into account her personality change. As this was not applicable to the Plaintiff before me, the court should award her only $25,000 in accordance with other precedents for memory and cognitive impediment such as *Er Hung Boon v Law Shyan En* (DC Suit No 1567 of 1997) - $20,000 awarded and *Ting Heng Mee v Sin Sheng Fresh Fruit Pte Ltd* [2004] SGHC 43 - $25,000 awarded.

27 I note that in the latter case, the plaintiff also had pre and post-accident amnesia.

28 Since the main deficits of the Plaintiff under this sub-heading are in respect of her memory, I agree with the Defendant and I grant the Plaintiff $25,000 for this sub-heading.

Head injury and benign positional paroxysmal vertigo

29 Dr Lim Ing Ruen's report dated 13 August 2012[4] said that the Plaintiff suffered various injuries such as head injury, severe headaches, giddiness and

Version No 1: 27 Oct 2020 (22:40 hrs)

general body pain. Throughout her admission (into hospital) from 15 October 2009 to 18 April 2010, she suffered, *inter alia*, severe giddiness and headaches, head contusion and post traumatic postural vertigo. The Plaintiff also stated that after the accident she was drifting in and out of consciousness. Based on precedents, the Plaintiff claimed $15,000 for head injury including transient loss of consciousness, head contusion, severe headaches and severe giddiness and post-concussion syndrome.

30 The Plaintiff also claimed her vertigo as a distinct injury. She had vestibular dysfunction. The Plaintiff submitted that although there is no decision giving an award for benign positional paroxysmal vertigo, the case of *Goh Choon Seng v Tay Leong Sin* (MC Suit No 22016 of 1998) was of assistance to her. In that case, there was injury involving trauma to the right ear resulting in auricular haematoma and occasional giddiness and vertigo lasting a few seconds. The parties there agreed to $3,500 for this injury. The Plaintiff sought $6,000 for her vestibular dysfunction with vertigo.

31 The total claimed for the two sub-headings was $21,000.

32 The Defendant submitted that the vertigo originates in the head regardless of whether it arises in the brain or in the inner ear. It submitted that the Plaintiff's head injury was less severe than that in *Navitha d/o Amardam v Anthony Dass s/o Sebasthiyan and anor* (DC Suit No 499 of 2002) where the plaintiff was thrown forward and smashed her head against a windscreen when the bus she was travelling on suddenly stopped. The plaintiff suffered from

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[4] PBD pp 50-53.

Version No 1: 27 Oct 2020 (22:40 hrs)

post-concussion syndrome, daily headaches associated with blurring of vision, giddiness, perspiration and occasional nausea. She was awarded $4,000.

33 Thus, the Defendant submitted that an award of $8,000 for the Plaintiff before me would be generous.

34 However, there were other precedents. For example, in *Azmi bin Ahmad v Lee Po Hoon* [2005] SGDC 5, the plaintiff was awarded $10,000 for head injury resulting in headaches, giddiness and mild double vision.

35 I agree with the Defendant that the head injury and vertigo should be considered together. I award the Plaintiff $10,000 for this.

Fibromyalgia

36 The Plaintiff submitted that she was found to have tenderness in all the diagnosis-defining fibromyalgia tender points. The Defendant accepted that the Plaintiff had widespread musculoskeletal pain and this was caused by the physical and emotional trauma she sustained.

37 The Plaintiff referred to *Krishnasamy Rajendra v Jolly Wee Huat Choon* [1992] SGHC 189. In that case, the plaintiff had right cervical neuralgia with fibrositis/fibromyalgia over post right neck, right trapezus and right medical scapular region. The High Court awarded him $10,000. As the Plaintiff before me had more widespread fibromyalgia and the precedent was decided in 1992, the Plaintiff claimed $15,000 for this sub-head. The Defendant was of the view that $10,000 was fair as the fibromyalgia was secondary to her PTSD.

Version No 1: 27 Oct 2020 (22:40 hrs)

38 I am of the view that as the Plaintiff's fibromyalgia was more widespread than the precedent cited and bearing in mind the lapse of time since the above case, $15,000 is to be awarded to the Plaintiff for this sub-head.

Neck and back injuries, abrasions on face, arms and legs and spondylosis

39 The Plaintiff submitted that she had been diagnosed with neck and back strain and she was required to wear a neck collar to stabilise her cervical spine. She alleged that Dr Chong also said that she has thoracic spine spondylosis which was not consistent with her age, effusion in the elbow, bilateral supraspinatus tears and also cervical and lumbar spondylosis. There were abrasions on her face, arms and legs. She claimed $15,000.

40 The Defendant submitted that the Plaintiff did not establish that the tears were caused by the accident.

41 As for effusion or swelling in the elbow, the Defendant submitted that in a report dated 24 September 2014, Dr Boey had said that there was no swelling of any joint or tenderness of joints.

42 As for the neck and back injuries, these were minor as they were reported as neck and back strains.

43 As for the various spondylosis, the Defendant submitted that these were diagnosed five years after the accident and therefore, the Plaintiff had not established that they were caused by the accident. Furthermore, they appeared to be minor as Dr Chong, who made the diagnosis, did not elaborate whether

Version No 1: 27 Oct 2020 (22:40 hrs)

they were mild, moderate or severe and whether surgery was likely. The Defendant suggested $8,000 for the Plaintiff's neck and back injuries.

44 I accept the Defendant's submissions on this sub-head and award $8,000.

Other injuries

45 The Plaintiff claimed separately for a number of other injuries which are found in s/no 7 of Annexure A. She referred to *Shaw Linda Gillian v Chai Kang Wei Samuel* [2009] SGHC 187 ("*Shaw*") in which the High Court awarded $40,000 to the plaintiff who had reduced dexterity, muscular strength, tone and co-ordination. The Plaintiff claimed $80,000. The Plaintiff said she had more medical issues which impacted her more severely than the precedent cited.

46 The Defendant submitted that there was no evidence that Vitamin D deficiency had caused the Plaintiff pain and suffering.

47 As for the Plaintiff's irritable bowel syndrome ("IBS"), the Defendant submitted that this was not mentioned in a 13 August 2012 report by Dr Lim Ing Ruen although it was mentioned in Dr Chong's medical report dated 8 November 2014. It submitted that the causes, symptoms and prognosis of her IBS were not explained.

48 The Defendant submitted that the lack of control of bodily functions, deterioration of immune system, overall stamina and reproductive functions were not substantiated by medical evidence.

Version No 1: 27 Oct 2020 (22:40 hrs)

49 As for the case of *Shaw*, the Defendant submitted that the plaintiff's problems there were considered in the context of her physically demanding job as a physiotherapist and that the pain of the Plaintiff before me was already accounted for in an award for her fibromyalgia.

50 I am of the view that the Vitamin D deficiency was a relatively minor issue. The rest of the issues were substantiated by medical reports but there is some overlap with her PTSD for which I had awarded $80,000. For example, when she is stressed, she does not control her bodily functions well. I also do not think that her fibromyalgia can be said to account for all her other issues. I will allow another $20,000 for this sub-head. This, together with the $80,000 for her PTSD, totals $100,000.

Loss of marriage prospect

51 The Plaintiff's loss of marriage prospect was agreed at $6,000.

Special damages

(A) Medical and hospital expenses

52 I have set out in Annexure B, the Plaintiff's claim for pre-trial medical and hospital expenses, *ie*, up to 29 February 2016. For the pre-trial medical expenses, I have listed the amount claimed by the Plaintiff for each item, the Defendant's response and the court's decision. It is not necessary for me to elaborate where the quantum was accepted by the Defendant. The pre-trial medical expenses listed are in addition to those which are already part of the hospital bills.

Version No 1: 27 Oct 2020 (22:40 hrs)

53 I did not allow the claim for expenses incurred at Centre for Creative Development. These were expenses for treatment by Dr Chew Chou. As mentioned above, she is a psychologist and not a medical practitioner. It is true that the Defendant had dispensed with the cross-examination of Dr Chew Chou. However, this did not necessarily mean that the Defendant had accepted that the treatment by her was necessary or reasonable.

54 The Defendant questioned the need for such treatment by questioning Dr Lionel Lim who was the initial psychiatrist who was treating the Plaintiff before Dr Sim took over. Dr Lionel Lim had recommended that the Plaintiff consult Ms Zena Kang, who is also a psychologist, for a psychological assessment and some treatment. However, he did not recommend Dr Chew Chou. Indeed, he seemed to be unaware, at least initially, that the Plaintiff had consulted Dr Chew Chou. His evidence was that it was open to patients to seek such treatment as they wished. Dr Chew Chou employed a different treatment method from that of Ms Zena Kang. However, Dr Lionel Lim stopped short of asserting that the treatment by Dr Chew Chou was necessary or reasonable in the sense that the Defendant should bear the expenses thereof. The Defendant accepted the Plaintiff's expenses for consulting Ms Zena Kang but not for consulting Dr Chew Chou. In the light of Dr Lionel Lim's evidence, I am of the view that the Plaintiff has not discharged her burden to establish that it was reasonable to seek treatment by Dr Chew Chou and that the expenses for such treatment should be borne by the Defendant.

55 I allow the Plaintiff's claim for the expenses of Choo Wan Ling Women's Clinic which is a gynaecological practice. The Plaintiff had an ovarian cyst when she was pregnant and was treated then. Subsequently, the

Version No 1: 27 Oct 2020 (22:40 hrs)

problem resurfaced. There was some evidence that this was due to the stress she was encountering, the inference being that this was due to the PTSD. Although that evidence was hearsay evidence of other medical practitioners who had learned of the cause (presumably from the gynaecologist or the Plaintiff), the Defendant did not specifically challenge the validity of such an assertion when it was made. Accordingly, I am of the view that the Plaintiff did not know that the Defendant was not accepting the claim for treating the ovarian cyst. Had the Defendant specifically challenged the evidence, the Plaintiff would have realised that she would have to call the gynaecologist as a witness or to provide a medical report. In any event, this claim was for a small sum of $502.20 which I allow.

56 As for the Plaintiff's claim for expenses incurred at K H Ho Neurology & Medical Clinic, the Defendant had accepted that $19,023.40 was reasonably incurred. However, the Plaintiff had increased the claim for this item to $24,116.60 presumably because of the later cut-off date of 29 February 2016 (see [5] above). Since the Defendant was accepting in principle the treatment by this clinic and in the absence of objection (other than on the cut-off date), I allow the claim for $24,116.60.

57 As for the Plaintiff's claim for expenses incurred at L P Clinic Pte Ltd, this was the practice of Dr Lionel Lim and Dr Sim. The Defendant sought to reduce the amount claimed on the argument that part of the claim was for consultation charges and Dr Sim's consultation charges had already been included in hospital bills. However, the Defendant did not raise this with Dr Sim when she was on the witness stand and so she had no opportunity to address this point. In the circumstances, I am of the view that it is not open to

Version No 1: 27 Oct 2020 (22:40 hrs)

the Defendant to raise the point in closing submissions. The Defendant had more than enough time to go through all the bills before the assessment hearing.

58 As for the Plaintiff's claim for $1,059 for treatment by Ng Tay Meng Gastrointestinal and Liver Clinic Pte Ltd, the Defendant disputed this claim as the Plaintiff was already seeing Dr Ang Cheng Nee Benny from Gastroenterology Clinic Pte Ltd from January 2012 to May 2013. However, this point was not taken up by the Defendant in cross-examination of any medical expert who gave evidence for the Plaintiff, for example, Dr Sim or Dr Chong. I will elaborate later on the role of Dr Sim and Dr Chong. Accordingly, I allow this claim.

59 The claim for the hospital bills was much larger than the claim for outpatient medical expenses. The former expenses were in respect of the expenses incurred at Gleneagles Hospital and Mount Elizabeth Hospital. The bills of the hospitals included the fees of doctors and medicine and ancillaries.

60 The Plaintiff had sent copies of the bills to the Defendant before the assessment hearing. She was obviously claiming all the items in the bills. However, while she did produce AEICs from various medical practitioners, which in turn included numerous medical reports, there was no one single or combined affidavit or report to elaborate as to why she was admitted into hospital each time and why she remained warded in hospital for each duration of her stay. There was also no elaboration to match each and every consultation and treatment with her PTSD. She was simply asking the court to infer that the hospitalisation and every consultation and treatment were all

Version No 1: 27 Oct 2020 (22:40 hrs)

attributable to her PTSD. While it is true that many of her medical issues were attributable to her PTSD, she should have done more to establish that each and every consultation and treatment and the need to be warded in hospital each time and the duration were attributable to her PTSD.

61 On the other hand, as I have said, the Defendant adduced evidence from only one doctor, *ie*, Dr Lim Boon Leng. Furthermore, the Defendant had dispensed with the need to cross-examine some of the Plaintiff's doctors who had executed AEICs at the assessment hearing. The impression given was that the Defendant was limiting its challenge to the various expenses claimed by the Plaintiff to whatever items or areas that were raised in cross-examination.

62 Eventually the Defendant submitted that there should be an 80% discount to the amount claimed in the hospital bills for the following reasons:

(a) The Plaintiff had failed to show that all her hospitalisation expenses had been incurred for medical conditions attributable to the accident or to her PTSD.

(b) The Plaintiff had failed to show that her hospitalisations were necessary or reasonable.

(c) The Plaintiff and her doctors have pursued an unreasonable course of treatment.

(d) The Plaintiff had incurred her hospitalisation expenses unreasonably by refusing to seek treatment at a restructured hospital.

Version No 1: 27 Oct 2020 (22:40 hrs)

(e) The Plaintiff had incurred unnecessary expenses by upgrading herself to a higher class warded.

63 The last point may be easily taken first. It was not disputed that the Plaintiff should stay in a single room in hospital. She was prone to meltdowns and Dr Sim said the therapy for the Plaintiff should be conducted in a single room. Unfortunately the Plaintiff had not only stayed in a single room, she had also stayed in an executive single room or a suite on various occasions. This was not justifiable. Neither of her two primary treating doctors Dr Sim or Dr Chong had recommended an upgrade. Consequently, the Plaintiff restricted her claims to the charges for a single room *per se* and deducted the difference where applicable. The amount she claimed, as stated in Annexure B, reflected the deductions she has already made.

64 I come now to the Defendant's arguments that the Plaintiff should have sought treatment at a restructured hospital and also that the Plaintiff and her doctors had pursued an unreasonable course of treatment.

65 It was not disputed that the Plaintiff's PTSD was very serious. The Plaintiff relied on two psychiatrists from private practice, Dr Lionel Lim and Dr Sim to support the diagnosis and the extent to which she was affected including the alleged need for her to be warded in hospital, especially the last and current time for more than two years at one stretch, as I have mentioned. These two doctors both practised at Mount Elizabeth Medical Centre under the name of LP Clinic Pte Ltd. Dr Lionel Lim was the first psychiatrist who examined and assessed the Plaintiff. Dr Sim (a lady) then took over from Dr Lim at the Plaintiff's request.

Version No 1: 27 Oct 2020 (22:40 hrs)

66 As mentioned above, the Defendant relied solely on the evidence of Dr Lim Boon Leng (see [16] above). Dr Lim Boon Leng did not suggest that the Plaintiff was malingering or that the severity of her PTSD was exaggerated. He did not question why the Plaintiff had to be admitted into hospital so many times or why her last and current stay was longer than two years.

67 His main contribution to the defence was only to suggest, in his AEIC, that the Plaintiff could have been treated at a restructured hospital instead of at a private hospital. His reference to a restructured hospital was to the Institute of Mental Health. Even then, in Dr Lim's supplementary AEIC affirmed on 24 July 2015, he said that "it will not be advisable to transfer her to a restructured hospital in the midst of her stay in Mount Elizabeth Hospital. It will be best to transfer her care to a restructured hospital when she is in a stable condition". Yet, he did not say when the Plaintiff was likely to be in a stable condition. He was also not asked for his views on Dr Sim's evidence that Dr Sim was trying to get the Plaintiff well enough to be discharged from Mount Elizabeth Hospital by 31 December 2016.

68 Dr Lim Boon Leng had only seen the Plaintiff twice for about 45 minutes each time unlike Dr Sim who had seen the Plaintiff multiple times and even almost daily (unless Dr Sim was out of the country)[5] from the last admission into hospital until the time she gave oral evidence in March 2016. At times, Dr Sim would also see the Plaintiff two or three times a day. She was on call 24 hours a day, seven days a week.

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5 NE 18/3/16 pp 67, 78.

Version No 1: 27 Oct 2020 (22:40 hrs)

69 Dr Lim Boon Leng also accepted that it was reasonable for the Plaintiff to go back to see the doctors who were treating her initially.

70 As for Dr Sim, she was of the view that the Plaintiff would not get the attention she needed in a restructured hospital where the workload was very heavy.[6]

71 As mentioned above at [22], Dr Sim described the Plaintiff as the worst case she has seen. Dr Sim even had to spend over two to three weeks to get the Plaintiff into a state to be assessed by Dr Lim Boon Leng. The Plaintiff had meltdowns from time to time and multiple medical issues.[7] For example, the Plaintiff's temperature could go up to 38.4°C. She had frequent urinary tract infection and IBS. She fell down very quickly. Thus, although Dr Sim was conscious of costs, the Plaintiff was not discharged from hospital since February 2014.

72 Other than Dr Sim, the Plaintiff's principal physician appeared to be Dr Chong. Dr Sim described Dr Chong as a general practitioner.[8] Dr Chong is a Senior Consultant Physician (Internal Medicine) practising as an associate under the name of Singapore Medical Specialists Centre ("SMSC") which is a multi-disciplinary practice. He first examined the Plaintiff on 14 November 2011 at his clinic and he has been looking after and treating her since then. He was also referred to as an "internist" by the Defendant. He was working as a

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6 NE 18/3/16 p 64.

7 NE 18/3/16 pp 66, 82, 88.

8 NE 18/3/16 p 63.

Version No 1: 27 Oct 2020 (22:40 hrs)

general practitioner for many years until about 2009 when he joined SMSC and went back to internal medicine.[9] He divided the practice of medicine under two big umbrellas: internal medicine and surgery. Dr Chong said that he looked after all other aspects of the Plaintiff's health and over the last two years (when he gave oral evidence in March 2016), he had seen the Plaintiff every day.

73 Dr Chong did consider whether the Plaintiff should be discharged from hospital since her last admission in February 2014 but Dr Sim was of the view that the Plaintiff should remain in hospital. However, Dr Chong also clarified that there were occasions when Dr Sim wanted to discharge the Plaintiff but other medical issues cropped up that delayed the discharge, for example, the Plaintiff suffered a urinary tract or respiratory infection.[10] This was consistent with Dr Sim's evidence that the Plaintiff had suffered a host of medical problems. Dr Chong also said that the hearings over the last two years added to the Plaintiff's stress.

74 I should also mention that Dr Chong said that as the Plaintiff was testifying via videolink from a hospital, she experienced diarrhoea. This in turn led to a urinary tract infection.[11]

75 In the light of the evidence of Dr Sim and Dr Chong which remained largely unchallenged, I am of the view that it was not open to the Defendant to

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9 NE 22/3/16 p 3.

10 NE 22/3/16 p 16.

11 NE 22/3/16 p 46.

Version No 1: 27 Oct 2020 (22:40 hrs)

argue in its written submissions that the evidence for the Plaintiff's current hospitalisation was unconvincing or that Dr Sim and Dr Chong had been pursuing an unreasonable course of treatment that was no more than a leap of faith. On the contrary, this submission itself appeared to be based on wishful thinking that was unsupported by any relevant evidence.

76 I come now to the Defendant's arguments that the Plaintiff has failed to show that all the expenses incurred in hospitals were attributable to the accident or to her PTSD and that her hospitalisations were necessary or reasonable. These two arguments overlap and may be considered together.

77 I have already mentioned that the Plaintiff did not provide evidence to establish that each and every treatment and every stay in the hospital was due to the accident or her PTSD. For the last and current stay in hospital, she had been treated by Dr Sim and Dr Chong almost on a daily basis. I have elaborated at [73] as to why the Plaintiff was still not discharged by the time of the assessment hearing. However, although there was one reason or another as to why she was still not discharged, this still did not necessarily mean that every treatment she received during her stay was attributed to the accident or her PTSD. For example, Dr Chong said that the use of an ophthalmologist for the Plaintiff while she was in hospital was probably due to an eye infection and he was not certain that it was caused by the PTSD. Also in submissions, the Defendant queried whether the use of prosthodontists for the Plaintiff's teeth, while she was in hospital, should be attributed to her PTSD. It must also be remembered that she was pregnant till she gave birth to a son on 19 April 2010.

Version No 1: 27 Oct 2020 (22:40 hrs)

78 On the other hand, as I have stated, it was not disputed that the Plaintiff had a host of medical issues arising from her PTSD. Furthermore, it appears that she was in reasonably good health before the accident, *ie*, the contrary was never suggested.

79 Therefore, I am of the view that the Defendant's submission for an 80% deduction was not fair. In view of the state of the evidence before me, I will allow the Plaintiff 80% of the hospital bills. This will also apply to the room rates. The figures mentioned in s/nos 14 and 15 of Annexure B as the court's decisions for this sub-category reflect this percentage.

80 I would mention that I had asked whether Mount Elizabeth hospital was prepared to give a discount on its own charges since the Plaintiff was warded there for a long duration. I was informed by Dr Sim and the Plaintiff's counsel that the hospital was not prepared to do so. Although I gave the hospital an opportunity to address the court as to why it had taken this position, the hospital eventually decided not to avail itself of this opportunity.

(B) Non-medical expenses (excluding equipment and mobility aids)

81 I have set out in Annexure C, the Plaintiff's claims for special damages for non-medical expenses, excluding equipment and mobility aids.

82 The Plaintiff's claim for loss of pre-trial earnings was based on $6000 per month from November 2009 to February 2016, *ie*, 76 months. This works out to $456,000. Although the Defendant disputed the multiplicand, I will allow it for reasons which I will elaborate on later when I deal with the claim for a similar item in the context of post-trial loss of earnings.

Version No 1: 27 Oct 2020 (22:40 hrs)

83 The Plaintiff claimed $52,800 for taxi trips. This was on the basis that she had to take a taxi to see the physiotherapist and to take a taxi to see a doctor. Based on a quotation for taxi charges for a person using a wheelchair, the Plaintiff claimed $55 for one way and therefore $110 per return trip from 21 April 2014 to 29 February 2016. She claimed for 480 trips making a total of $52,800.

84 The Plaintiff was not able to produce a single receipt to support this claim. While I appreciate that a person does not necessarily obtain a receipt for a taxi service, I note that the Plaintiff was claiming for use of a taxi on a regular, if not a daily, basis. She also must have known that she had to provide evidence to support her claim. Indeed, if she had to regularly use a taxi because of a wheelchair, one would have expected her to make arrangements with a taxi company to ensure that she obtained the use of a taxi at the time when she needed one. That arrangement could easily have required the taxi company to provide an invoice or receipt for her payments.

85 There was also no corroborating evidence from anyone else that she had to take a taxi each and every time as claimed. Her mother did not give evidence. According to Dr Sim, the Plaintiff's mother is a highly anxious woman and is her patient as well. Even when the Plaintiff was giving evidence via videolink, her mother vomited. It was the Plaintiff who asked that her mother be spared from giving evidence when the Plaintiff was considering who should give evidence for her.[12] However, while I am sympathetic towards the Plaintiff and her mother, the evidence stopped short of establishing that the

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[12] NE 18/3/2016 pp 128-130.

Version No 1: 27 Oct 2020 (22:40 hrs)

mother was unfit to testify. Indeed for all the Plaintiff's medical problems, she eventually agreed to testify via video-link from the hospital where she was warded with Dr Sim by her side to attend to her in case she had a meltdown. The mother's condition was not said to be as severe as that of the Plaintiff's.

86 In the circumstances, I will not accept the Plaintiff's claim for taxi fare. It might have been that her mother or one of her siblings had fetched her in a car to her destinations. While this may be speculative, the point is that the burden is on her to prove her claim. It is too large a claim to be accepted without more evidence. However, I accept that she should be entitled to some transport expenses. In the absence of more evidence, I allow her $300 per month for 22 months from 21 April 2014 to 29 February 2016 = $6,600.

87 The Plaintiff claimed $6,397 for hiring full-time domestic help to care for her for a short period (which was not clearly specified). However, her main claim was for expenses for part-time caregivers for herself from 2010 to 2012 and from 2013 to 2015 up to 29 February 2016, *ie*, 74 months. The amount claimed for the part-time caregivers was $939,375.

88 While the Plaintiff produced some documentary evidence to support her claim for expenses for the full-time domestic help, the documentary evidence did not add up to $6,397. Furthermore, she did not produce any documentary evidence for the part-time caregivers she actually used. She claimed that no full-time caregiver was prepared to stay on the job and she was bullied by them and eventually had to terminate their employment. She said that many of her documents and receipts were misplaced after she moved out of an apartment which was mortgaged and then eventually sold to pay for

Version No 1: 27 Oct 2020 (22:40 hrs)

her medical, hospital and other expenses. However, she also alleged that she did not obtain receipts for payments for part-time caregivers (see para 50 of her AEIC). Instead, she used a quotation from a service provider to support the rates she was claiming for part-time caregivers. A list of 25 names of caregivers for herself (and for her son) was exhibited in her first AEIC but it was a bare list of names with no other details.

89 I note that before the accident, the Plaintiff and her mother were engaged in a business under the name of Love Care Professional. This was a business providing pre and post natal care services. It also involved the use of part-time staff. Although the Plaintiff claimed that the clients would pay the part-time staff directly, I doubted that this allegation was true. If the clients paid such staff directly, how would the business know whether the staff had received payment and how much each staff had received? Furthermore, there must be some form of record keeping to keep track of payments to the staff whether made directly by the clients or by the business itself. The Plaintiff and her mother must surely be aware of the importance of keeping proper accounting records for the business. I am of the view that the Plaintiff's explanation that the clients would pay the part-time staff directly was untrue. It appeared to be an attempt to support her stand that the business did not obtain receipts from such staff and therefore, likewise she did not obtain receipts from her own part-time caregivers. In any event, the Plaintiff must have been made aware by her solicitors of the need to provide proper documentary evidence for her claims ever since she decided to proceed with litigation. The Plaintiff's failure to provide evidence of alleged payments to part-time caregivers for herself was unsatisfactory. Furthermore, a bare list of names of alleged part-time caregivers did not advance her case any further.

Version No 1: 27 Oct 2020 (22:40 hrs)

90 Again, the omission of her mother to give evidence to support her claim of having to engage such caregivers militated against her.

91 In the circumstances, I do not accept this claim. The question then arises whether the Plaintiff should be entitled to claim, as an alternative, expenses for a full-time domestic help for pre-trial expenses for the period for which she was claiming expenses for part-time caregivers. There was no evidence or submissions by the Plaintiff on this alternative. The Defendant's position on this was unclear. The Defendant's closing submission dated 5 July 2016 submitted, at paras 317 to 325, that no award should be made for pre-trial expenses for any domestic help as no receipt was tendered in evidence. In the same submission, the Defendant accepted, at para 176, that the Plaintiff would require someone to look after her when she is discharged from hospital. However, at paras 181 to 182, the Defendant acknowledged that there was some evidence that the Plaintiff did have a domestic help to help her even while she was in hospital. Then at para 183, the Defendant submitted that it would be more reasonable to award the Plaintiff the cost of hiring a full-time domestic help. So it was not clear to me whether, by acknowledging that there was evidence that the Plaintiff had used a domestic help, the Defendant was in fact accepting that this alternative basis should be allowed for pre-trial expenses.

92 After considering the matter in totality, it seemed to me that the Defendant's acknowledgment that there was evidence about the use of a domestic help for the Plaintiff was not an admission that she should be allowed pre-trial expenses for a full-time domestic help. It was a basis for the

Version No 1: 27 Oct 2020 (22:40 hrs)

Defendant to accept that the Plaintiff should be entitled to such expenses post-trial (and not pre-trial) when she is discharged from hospital.

93 Nevertheless, I am of the view that the Plaintiff should be allowed expenses for a full-time domestic help for the period from 1 November 2009 to 29 February 2016, *ie*, 76 months. She was in such a fragile state that she would have required help other than from her mother or siblings. There was documentary evidence that she employed a full-time domestic help but the evidence did not provide more details like the length of the employment and the total amount paid (see [88] above). As already mentioned, the Plaintiff did not provide any figures in her submissions for pre-trial full-time domestic help for an extended period beyond the $6,397 she had mentioned. While the Defendant also did not provide evidence for such a claim, the Defendant did mention some figures in its submission for a full-time domestic help after the Plaintiff is discharged from hospital. I will elaborate later on those figures. For the time being, it is sufficient for me to say that they come up to a rounded-up sum of $680 per month. The total is $680 x 76 = $51,680.

94 The Plaintiff also said that she was not able to care for her son. She claimed $499,040 for part-time caregivers to care for her son using again a quotation from a service provider to support the rates she was claiming up to 29 February 2016. It was not disputed that the rates she was claiming would be more than if a full-time help were employed. There was no adequate explanation as to why a full-time help was unsuitable. More importantly, again there was no documentary evidence to support the claim that part-time caregivers were in fact engaged to care for her son. Again, her mother did not give evidence to corroborate this claim. Furthermore, there was information

Version No 1: 27 Oct 2020 (22:40 hrs)

from reports from doctors treating her that it was her mother who was taking care of her son. Such information would have been likely derived from the Plaintiff and/or her mother. Hence, the Defendant relied on such information to submit that it was the mother who was taking care of her son and not a caregiver, whether full-time or part-time.

95 The Plaintiff submitted that her mother had taken on a supervisory role for her son but the physical care of her son was another matter. She submitted that her mother was suffering from stress from the constant worry over the Plaintiff and that it was "most unreasonable" for the Defendant to suggest that the Plaintiff's mother care for the child without the assistance of a caregiver. While such an argument might evoke some sympathy from the court, the point is that the Plaintiff has to prove her case with evidence and not just rely on arguments.

96 In the absence of more evidence to support this claim, I am of the view that the Plaintiff has failed to establish her claim for a caregiver for the son, whether on a full-time or part-time basis, and I dismiss it.

(C) Equipment and mobility aids

97 The Plaintiff claimed expenses for four electrical scooters and four electrical wheelchairs (see Annexure D). The Plaintiff claimed that she had to replace some of these which she had damaged. However, there was no separate documentary evidence to support the purchase of any of such items. She said they were included in the hospital bills but the description of the items in the bills which she said were for such expenses was too vague. The description did not specifically state that the items were electrical scooters or

Version No 1: 27 Oct 2020 (22:40 hrs)

wheelchairs. In any event, I have already allowed 80% of the hospital bills so such items would have been included if they were really part of the hospital bills.

98 The Plaintiff had a claim for equipment and mobility aids which comprised 17 items. These items are set out at Annexure D. The Plaintiff said that the items were recommended by the physiotherapist. However, he did not recommend the items in serial numbers 3, 7, 8, 9, 12 and 15. While he did recommend electro pads in serial number 16, he said it was not necessary. As for the batteries mentioned in serial number 17, there was no evidence that they required change every week. Moreover, all these items were supposed to be pre-trial expenses, *ie*, expenses already incurred. Yet the Plaintiff did not produce any receipt for any of the items even though she could produce a quotation from a supplier for various items. While the Plaintiff may not have been careful with the receipts for some items of lower value, the situation was not satisfactory bearing in mind that some of the items claimed cost more than $100 each. I will allow $2,500 only for this sub-category, using a broad-brush approach for items she may have paid for but the receipts were lost.

Post-trial general damages

(A) Loss of future earnings

(i) Multiplier

99 It is undisputed that the Plaintiff will be unlikely to return to the working force. The Plaintiff's date of birth is 23 May 1974. The claim for

Version No 1: 27 Oct 2020 (22:40 hrs)

special damages is up to 29 February 2016. As at 29 February 2016, she is three months shy of 42 years of age.

100 The Plaintiff claimed that she has 30 years remaining of her working life, *ie*, she would have worked till 72 years of age. She claimed a multiplier of 20 years but the precedents she cited did not support a two-third award.

101 The Defendant submitted a multiplier of 12 years without elaborating whether it agreed that the Plaintiff would have worked till 72 years of age. It appears that some of the precedents it cited were based on a retirement age below 72.

102 There was no retirement age for the Plaintiff. I agree that it is reasonable to infer that she would have worked till 72 years of age, subject to the contingencies of life. This worked out to another 30 years. However, based on precedents cited by both sides, the appropriate multiplier is about half after taking into account the benefit of accelerated payment and the contingencies of life. Therefore, I am of the view that the appropriate multiplier is 15 years.

(ii) Multiplicand

103 As for the multiplicand, the Plaintiff submitted that it should be $6,000 per month as at the date of the accident. Since the accident was in October 2009, the Plaintiff based this claim on her income for calendar years 2005 to 2008 which were between $71,335 and $73,650 per year. Hence, she used $72,000 per year working out to $6,000 per month. She excluded the income in 2009 as that was not for a full year.

Version No 1: 27 Oct 2020 (22:40 hrs)

104 The Plaintiff sought an increase of $500 per month for each period of five years and was prepared to deduct 2.5% for income tax.

105 The Defendant submitted that the multiplicand should be $5,153.37 per month. This was because the Defendant used a longer period to calculate the Plaintiff's monthly income, *ie*, 1 January 2003 to 15 October 2009 instead of the Plaintiff's calculation which was based on income from 2005 to 2008. The Defendant included calendar years 2003 and 2004 because the Plaintiff's income for each of those years was $48,000 (which then increased to about $72,000 between 2005 and 2008). The Defendant also included the Plaintiff's income for 2009 which was $42,000 and divided it by 9.5 since the accident occurred on 15 October 2009. This meant that the Plaintiff's income was about $4,421 per month in 2009. Therefore, her income in 2003, 2004 and 2009 reduced the average for the period from 2003 to 15 October 2009 to $5,153.37.

106 I am of the view that the income for 2009 should not be taken into account because the Plaintiff was not asked by the Defendant to explain why the average income was lower than the preceding four years. There might have been some reason why the average income of the business that year was reduced so that the Plaintiff's own income was in turn reduced.

107 I am also of the view that the last four years before 2009, *ie*, from 2005 to 2008 (both years included) are a sufficient period to determine her average income. Accordingly, I accept that her average income was $6,000 per month at the time of the accident.

Version No 1: 27 Oct 2020 (22:40 hrs)

108 However, I do not accept that her income would have increased due to plans to expand the business. Those plans might have succeeded or failed.

(iii) Income tax

109 In addition, as I am not inclined to allow any increase, I will balance this by not taking into account any income tax of 2.5% as was done by Tay Yong Kwang J in *Toh Wai Sie and another v Rajendran s/o G Selamuthu* [2012] SGHC 33.

110 Accordingly, the multiplier is $6,000 per month without any increase in the future and without any deduction for income tax. The total is $6,000 per month x 12 x 15 = $1,080,000. The multiplier and multiplicand are reflected in Annexure E.

(B) Future expenses

(i) Multiplier

111 The Plaintiff's claim for future expenses is also set out in Annexure E. The multiplier for future expenses will usually be higher than for loss of future earnings as a plaintiff would usually be expected to live beyond her working life.

112 The Plaintiff based her calculations for post-trial expenses on the premise that she would live to 85 years of age, *ie*, another 43 years and claimed a multiplier of 25 years.

Version No 1: 27 Oct 2020 (22:40 hrs)

113 The Defendant did not disagree that the average life span of a Singaporean female was 85 years of age. However, in view of the Plaintiff's decreased immunity and overall deterioration of mental and physical health, the Defendant submitted that the court should adopt the lower of the range from precedents between one-third and one-half of the Plaintiff's remaining years of 43 years. The Defendant suggested 15 years but that was because it was working on 85 minus 40 years of age = 45 x 1/3 = 15 years. If the Defendant had worked for another 43 years instead of 45 years, the figure would be about 14.33 years.

114 Based on precedents, the multiplier tends to be half rather than one-third of the remaining years. This appears to be consistent with the multiplier for post-trial loss of future earnings which I have assessed based on half the remaining number of years of the Plaintiff's working life. As for the Defendant's submission about the Plaintiff's lower immunity and deterioration of mental and physical health, there was some merit in this argument as a matter of inference, although no medical evidence was called to substantiate this point. However, instead of taking the remaining years of the Plaintiff and multiplying it by one-third, I think that the correct approach is to deduct, say, five years from the expected life span from 85 to 80 years of age. This means the Plaintiff's remaining years is 80-42 = 38 years. Half of that is 19 years which I will use as the appropriate multiplier unless otherwise stated.

(ii) Future medical expenses

115 As for the future medical expenses, I will not allow the Plaintiff's claim for Dr Chew Chou for the reasons stated above at [53] to [54].

Version No 1: 27 Oct 2020 (22:40 hrs)

116 For the psychiatrist Dr Sim, the Plaintiff claimed $21,540 per year based on:

(a) $10,400 for weekly consultations (*ie*, $200 x 52 weeks);

(b) $ 2,400 per annum for psychotherapy; and

(c) $ 8,740 for medication.

117 The Defendant disputed the cost of medication in its submissions but did not question Dr Sim on this when Dr Sim gave evidence. There was also no challenge on the other items then. I will therefore allow $21,540 per annum for 19 years = $409,260.

118 For the neurologist Dr Ho King Hee, the Defendant accepted the multiplicand of $10,000 per annum. I will therefore allow this item at $10,000 per annum x 19 = $190,000.

119 For the rheumatologist Dr Boey, the Defendant submitted that his treatment would overlap with that of another doctor, Dr Ho King Hee. Also, the internist Dr Chong would be able to address the Plaintiff's vitamin D deficiency. While the latter may be true, the Defendant did not question the need for a rheumatologist when Dr Chong or any other doctor was giving evidence. I will allow this item at $2,000 per annum (as claimed) x 19 = $38,000.

120 For Dr Chong, the Plaintiff claimed $91,000 per annum as follows:

(a)	Twice weekly consultations	$37,000

Version No 1: 27 Oct 2020 (22:40 hrs)

(b)	Pharmacy bills excluding psychiatric and analgesia medication	$30,000
(c)	Periodic scans of the pelvis, joints and spine	$24,000
	Total:	$91,000

121 The Defendant submitted that in Dr Chong's medical report dated 8 November 2014, Dr Chong had said that the Plaintiff will need to see him on a weekly basis and twice a week when her condition is exacerbated. The Defendant also relied on the Plaintiff's medical history with her then principal physician Dr Lim Ing Ruen (from October 2009 to 14 November 2011) and Dr Chong (from 14 November 2011 to February 2014) to submit that the frequency of future consultations with Dr Chong was too frequent. Yet the Defendant did not query Dr Chong on this when Dr Chong was giving evidence. Based on twice weekly consultations, this worked out to say, 105 consultations per annum. The annual estimated consultation fee is $37,000 which works out to $37,000/105. This in turn works out to about $352 per consultation which appears to be rather high if compared with an ordinary outpatient consultation with a general practitioner. Perhaps Dr Chong was mindful that consultation by the Plaintiff would take more time than one by an ordinary patient with common ailments and/or he had included consultations by the Plaintiff if she should be warded in hospital. In any event, the Defendant did not question Dr Chong on his consultation charges. Neither was this point raised in submission. There may have been a good reason for the quantum of his charges. I allow the twice weekly consultations at $37,000 per annum.

Version No 1: 27 Oct 2020 (22:40 hrs)

122 The Defendant submitted that Dr Chong did not provide a list of medication or a breakdown of the costs. However, again, the Defendant did not seek any elaboration from Dr Chong on this even though the Defendant knew of Dr Chong's estimates. Likewise, Dr Chong's estimates for the periodic scans, which appeared excessive, were not questioned in cross-examination. Therefore, I allow these items in full.

123 In summary, I allow the expenses in respect of Dr Chong as follows:

(a)	Consultation	$37,000
(b)	Pharmacy bills excluding psychiatric and analgesia medication	$30,000
(c)	Periodic scans of the pelvis, joints and spine	$24,000
	Total:	$91,000 per annum

124 For the physiotherapist Mr Lim, the Plaintiff claimed $78,000 per year. This is based on five visits per week x two sessions each visit. Mr Lim explained that the Plaintiff's joints stiffen up daily. Thus when he has applied physiotherapy on one day, the joints would stiffen by the next day. In his view, she required daily physiotherapy of two sessions per visit. Yet, the Plaintiff did not go for physiotherapy with him over weekends or when she has an appointment with a doctor which clashes with the timing of her appointment with Mr Lim. Mr Lim had to see other patients on Saturdays and he did not work on Sundays. Even then, if it was necessary for her to go for physiotherapy daily, she would have seen an alternate physiotherapist on Saturdays and Sundays when Mr Lim was not available. The fact that the

Version No 1: 27 Oct 2020 (22:40 hrs)

Plaintiff did not go for physiotherapy over weekends suggested that while it was preferable for her to go for physiotherapy daily, this was not necessary. Accordingly, I am of the view that it would be reasonable for the Defendant to bear such expenses for three times a week which is 60% of the Plaintiff's claim for five times a week. Therefore, I will allow 60% of $78,000 = $46,800 per annum x 19 = $889,200. I will also allow the Plaintiff to claim for two sessions each time so there is no reduction for a single session.

125 I should mention that there is no separate item of claim for Mr Lim's fees for pre-trial damages. This is because his fees were already included in the hospital bills. As I have reduced those bills by 20% across the board, I did not apply a further reduction for Mr Lim's fees for pre-trial damages.

126 The Plaintiff claimed $1,000 per annum for the services of each of the following:

(a) a gastroenterologist;

(b) a gynaecologist; and

(c) an otolaryngologist

127 The Defendant agreed that the Plaintiff's gastroenterological problems were associated with PTSD. However, the Defendant submitted that such problems could be managed by Dr Chong. Again, this was not put to Dr Chong.

128 As for the services of a gynaecologist in respect of possible future complications from an ovarian cyst which I have discussed above under

Version No 1: 27 Oct 2020 (22:40 hrs)

special damages, the Defendant did not advance any further argument beyond saying that it was hearsay evidence. I have addressed this argument at [55] above.

129 As for the services of an otolaryngologist, *ie*, a ear, throat and nose specialist like Dr Lim Ing Ruen, the Defendant submitted that as Dr Chong had testified that the need for such care has been reduced, it can be effectively managed by an internist like Dr Chong. However, I note that Dr Chong did not say that it could be managed by him.

130 As for the quantum of $1,000 per annum for the services of each of these three doctors, the Plaintiff relied on her past outpatient bills as stated in her Further Clarification dated 6 October 2016 at paras 16 to 18. However, these bills did not add up to $1,000 per annum for every one of the doctors. Secondly, the bills were spread over various periods many years ago and it was uncertain whether a similar frequency of consultation would apply in future. Accordingly, I will allow $200 per annum for each of these three doctors. This works out to $200 x 19 = $3,800 for each of them.

131 The Plaintiff also initially claimed $1,000 per annum for a respiratory specialist and $1,000 per annum for an ophthalmologist. These two items were dropped at para 51 of the Plaintiff's reply submission dated 2 August 2016 although these claims re-surfaced in the Plaintiff's Further Clarification at para 19. I will not allow the claims for these expenses.

Version No 1: 27 Oct 2020 (22:40 hrs)

(iii) Future hospital expenses

132 The Plaintiff's multiplicand for future hospital expenses was based on an average of her hospital expenses between 3 June 2015 and 3 March 2016. However, such expenses were not confined to hospital (and hospital-related charges) only. They included doctors' fees. Consequently, the Plaintiff claimed:

(a)	Average hospital charges	$34,631.24 per month
(b)	Average of doctors' fees	$37,803.30 per month
	Total:	$72,434.54 per month

133 Some details are set out in the Plaintiff's Clarification of 22 September 2016 at paras 17 to 20. The hospital bills which the Plaintiff relied on to calculate her average expenses were for the following periods:

(a)	3/6/2015 to 6/8/2015	64 days
(b)	6/8/2015 to 6/10/2015	62 days
(c)	6/10/2015 to 21/12/2015	76 days
(d)	24/12/2015 to 2/3/2016	69 days

134 The Plaintiff had divided the bills by nine as they spanned about nine months in order to derive the average monthly bill for hospital charges and for doctors' fees. However, the Plaintiff omitted to take into account the fact that for most of the days, she was staying in an executive room and not an ordinary

Version No 1: 27 Oct 2020 (22:40 hrs)

single room. For example, she was staying in an executive room for the following number of days:

(a)	3/6/2015 to 6/8/2015	54 out of 64 days
(b)	6/8/2015 to 6/10/2015	61 out of 62 days
(c)	6/10/2015 to 21/12/2015	44 out of 76 days
(d)	24/12/2015 to 2/3/2016	69 out of 69 days

135 That is why the hospital charges seemed high. The second reason why the hospital charges seemed high was because much of the medication was dispensed from the hospital. For example, they included Panadol and panadeine tablets which are painkillers, Caltrade D tablets which are calcium tablets with Vitamin D, and Viatril S capsules for glucosamine to mitigate deterioration of joints and ease pain in joints. These need not be dispensed by the hospital. More attention should be paid to reduce such expenses in the future. Thirdly, there were charges for food which I assume were for the Plaintiff's visitors and not the Plaintiff herself as her food should be part of her room charges.

136 The difference between an executive room and an ordinary single room was $400 per day. Over 30 days, this would amount to $12,000 per month. This would reduce the average monthly hospital charge from $34,631.24 to $22,631.24 but I have to bear in mind that she did not use an executive room for every day during the above periods. Even then, after taking into account other expenses which she can save on, I will use $22,500 per month as the average hospital charge, excluding doctor's inpatient charges.

Version No 1: 27 Oct 2020 (22:40 hrs)

137 As for the doctor's inpatient charges, the bulk of it were the fees of Dr Chong. For the periods above, his charges were:

(a)	About $856 per day (after dividing $54,807.33 over 64 days)
(b)	About $660 per day (after dividing $40,905.89 over 62 days)
(c)	About $793 per day (after dividing $41,195 + $19,063.66 over 76 days)
(d)	About $828 per day (after dividing $57,155.76 over 69 days)

138 It was not clear to the court whether the estimate of Dr Chong's fees discussed above at [120] to [123] already made provision for any attendance on the Plaintiff when she is warded in hospital. The estimates of Dr Chong's fees were provided by him (or his office) while the average of the doctor's inpatient charges were lifted and used by the Plaintiff's solicitors from the hospital bills quite possibly without checking with Dr Chong whether there was any overlap. In my view, there was a likelihood of overlap. Otherwise Dr Chong's fees for consultation would appear high as previously mentioned at [121].

139 Secondly, some of the doctors' fees incurred in the above bills might not have been due to the Plaintiff's PTSD as mentioned above.

140 Instead of applying a discount of 20% as I did for the pre-trial damages, I will apply a discount of 40% to also provide for any overlap between the outpatient fees claimed by Dr Chong and those to be charged by him when the Plaintiff is hospitalised. This works out to $37,803.30 x 60% = $22,682 per month.

Version No 1: 27 Oct 2020 (22:40 hrs)

141 Therefore, the average for the hospital charges and medical charges per month is $22,500 + $22,682 = $45,182 per month.

142 As for the multiplier, the Plaintiff did not stick to just one period of 23 years. Instead, she divided her claim for future hospital expenses into two periods:

(a) for the entire period from 3 March 2016 to 31 December 2016; and

(b) for three months of each year for 23 years from 1 January 2017.

143 The Plaintiff's claim for the first of the two periods was because she was still warded at the time of the assessment hearing and Dr Sim did not expect her to be discharged until 31 December 2016. Since I used a cut-off date of 29 February 2016 for pre-trial expenses, the first period should commence from 1 March 2016 and not 3 March 2016.

144 However, the more important question was whether the court should allow the Plaintiff to claim for two periods as stated above or one single period of 19 years, since that was the multiplier that the court was using for other future expenses. The assessment hearing was not concluded until 22 March 2016. Even then, the court subsequently required clarification from the parties on various matters. By the time this judgment is released, it is likely to be close to 31 December 2016. It appears likely from the evidence of Dr Sim that the Plaintiff will stay on in hospital till at least 31 December 2016. In the circumstances, I will allow the Plaintiff to claim the future expenses for this head of claim over two periods:

Version No 1: 27 Oct 2020 (22:40 hrs)

(a) for the entire period from 1 March 2016 to 31 December 2016, *ie*, ten months;

(b) for a certain period of each year for the years from 1 January 2017 but the multiplier may not be 19 years ("the Remainder Period").

145 The next question was whether I should allow the Plaintiff's claim for three months of hospital expenses for each year for the Remainder Period.

146 Although Dr Sim had said in a report dated 3 November 2014 that the Plaintiff would require frequent hospitalisation when she decompensates, Dr Sim did not specify that this was likely to be over three months in a year. Neither did Dr Chong. The estimate of three months in a year was a figure which was not derived from any of the Plaintiff's medical experts.

147 I note that an important trigger causing stress for the Plaintiff was the litigation.[13] Now that the trial was over, there should be less stress for her. Nevertheless, I accept Dr Sim's evidence that it was not just a question of eliminating the triggers. The Plaintiff had to be able to face her triggers.[14] Therefore, it was likely that she would decompensate from time to time and hospitalisation would then be likely.

148 The difficulty was that it was unclear how often the Plaintiff would decompensate and require hospitalisation, even after all the effort put in by

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13 NE 18/3/16 p 92.

14 NE 18/3/16 p 100.

Version No 1: 27 Oct 2020 (22:40 hrs)

Dr Sim. The duration of each future stay in hospital was also unclear. In the circumstances, I will allow the Plaintiff to claim hospital expenses for one month, instead of three months, in each year for the Remainder Period.

149 Therefore, I allow the claim for the ten months from 1 March 2016 to 31 December 2016 but based on an average of $45,182 per month. This works out to $451,820 for ten months.

150 As for the Remainder Period, since it commences from 1 January 2017 and not 1 March 2016, I will use a multiplier of 17 years (instead of 19 years) for this head of claim. At one month of hospitalisation per year, this works out to $45,182 x 17 = $768,094.

151 The total for the two periods is $1,219,914.

(iv) Future transport expenses

152 The Plaintiff claimed future transport expenses on the same formula as the claim for transport expenses as special damages. For the reasons already discussed, I will allow her only $3,600 per annum x 19 = $68,400 for this claim.

(v) Future caregiver expenses for the Plaintiff

153 The Plaintiff's claim for future caregiver expenses for herself was based on the same premise and reasons as her claim for such expenses pre-trial. She was claiming for part-time caregivers based on a quotation she had obtained. I am not persuaded that she cannot enlist the aid of a full-time domestic help. As discussed in the context of pre-trial expenses, the Defendant

Version No 1: 27 Oct 2020 (22:40 hrs)

had agreed that the Plaintiff should be entitled to claim expenses for a full-time domestic help after she is discharged from hospital.

154 However, neither side provided the court with evidence of an estimate of how much a full-time help would cost. Instead, the Defendant mentioned in its written submission, at paras 184 and 185, the case of *AOD (a minor suing by his litigation representative) v AOE* [2014] SGHCR 21 ("*AOD v AOE*") to present the cost of a foreign full-time domestic help. Such was the state of the evidence before me. In that case, the salary was $480 per month and the maid levy was $83.85 per month. The court allowed $80 per month for the cost of the maid's food, medical bills and lodging by referring to *Kwok Seng Fatt Jeremy v Choy Chee Hau* [2003] SGHC 308 at [15]. The court also accepted the plaintiff's claim for contract renewal fee of $300 once in two years, return airfare of $300 which appeared to be for every two years and insurance premium of $321 which also appeared to be for every two years.

155 The court there also accepted that 30 days respite should be allowed so as to avoid burnout for the domestic help and for this, nursing care had to be provided. This was accepted by both sides in that case. However, as no evidence or submission was made for this aspect in the present case before me, I will disregard it.

156 Coming back to the figures which the Defendant raised in submission, it may be that the salary and other expenses for a full-time help has increased since the case of *AOD v AOE*. However, in the absence of evidence, I will use the figures mentioned in that case unless there is some other reason why I should not do so. For example, I would mention that I note that the maid levy

Version No 1: 27 Oct 2020 (22:40 hrs)

in *AOD v AOE* is said to be $83.85 per month. However, it was not clear from the judgment in that case how that sum was derived beyond the fact that the sum was derived from documents of the plaintiff. The ordinary monthly levy may in fact be more. On the other hand, there may be a concessionary rate for persons with disability which could be less than $83.85 per month. In any event, the Plaintiff did not object to the figures suggested by the Defendant in submission if the court were to reject her claim based on rates for part-time caregivers. She was content simply to rest her case on the rates for part-time caregivers without providing evidence for an alternative basis of calculation, *ie*, for a full-time domestic help. Thus, her submission did not address this alternative basis.

157 I would also mention that I am doubtful if there should be a claim for lodging if the help is staying with the Plaintiff but as the Defendant was prepared to include it, I need say no more on this item.

158 In the circumstances, I allow the following:

S/N	Items	Per month
(a)	Salary for full-time domestic help	$480.00
(b)	Levy	$83.85
(c)	Food, medical bills and lodging	$80.00
(d)	Contract renewal fee ($100 averaged for one year)	$8.33
(e)	Return airticket ($150 averaged for one year)	$12.50

Version No 1: 27 Oct 2020 (22:40 hrs)

(f)	Insurance premium ($160.50 averaged for one year)	$13.38
	Total:	$678.06

159 I will round up the above figure of $678.06 to $680 per month. This works out to $8,160 per annum x 19 = $155,040.

(vi) Future caregiver expenses for the Plaintiff's son

160 The Plaintiff's claim for a caregiver for her son in the future is not allowed for the reasons already discussed in the claim for this item as special damages for pre-trial expenses.

(vii) Future expenses for wheelchairs, safety facilities and mobility aids

(a) Wheelchairs

161 The Plaintiff claimed $115,880 being her expenses for an aluminium foldable light weight wheelchair and related items as follows:

S/N	**Items**	**Amount**
1	Aluminium foldable light weight wheelchair (requires change every 3 years) ($3,200 x 8 years)	$25,600
2	Jay 2 deep contour cushion (requires change every 2 years) ($600 x 12 years)	$ 7,200
3	E-Fix E35 24" 7.5AH (requires change every 3 years)	$57,600

Version No 1: 27 Oct 2020 (22:40 hrs)

	($$7,200 x 8 years)	
4	Attendant control for E35 ($885 x 8 years)	$ 7,080
5	Additional spare battery (litium) (requires change every 1 year) ($800 x 23 years)	$18,400
	Total:	$115,880

162 The Defendant submitted that the Plaintiff should be allowed to claim the cost of a manual wheelchair instead of an electrical one. The average cost for a manual wheelchair was about $2,333 as compared with $12,085 (see items 1, 3, 4 and 5 of the table above) claimed for an electrical one. The Defendant gave two reasons for a manual wheelchair. First, the Plaintiff had claimed that she had damaged three electrical wheelchairs (and four electrical scooters) before the assessment hearing, even when she had the aid of a helper. Therefore, she should use a manual wheelchair. Secondly, there was a reference in one medical report from Dr Ho King Hee dated 18 September 2014 which mentioned that the Plaintiff had used an un-motorized wheelchair because she did not feel safe using a motorized wheelchair. Furthermore, the Plaintiff's physiotherapist said that she goes for her physiotherapy using a manual wheelchair. However, I would add that the physiotherapist did go on to say that the Plaintiff also has a motorised one, otherwise she cannot move at all when she is alone. The physiotherapist also said that the Plaintiff is rather heavy. As the Plaintiff is not claiming for two wheelchairs, I will allow the Plaintiff's claim for an electrical wheelchair and the contour cushion as well which were recommended by the physiotherapist. I will also have to consider the durability of the items as mentioned in a quotation from a supplier. The

Version No 1: 27 Oct 2020 (22:40 hrs)

estimated duration for the wheelchair (see s/nos 1 and 3 in the table above) is three to five years. I will use a duration of five years. The estimated duration for the cushion (see s/no 2) is two to three years. I will use three years. There is no indicative duration for s/no 4. The estimated duration of the litium battery is one to two years. I will use two years. Therefore, I allow the claim as follows:

S/N	**Items**	**Amount**
1	Aluminium foldable light weight wheelchair (based on every five years over 19 years) ($3,200 x 3.8 years)	$12,160
2	Jay 2 deep contour cushion (based on every three years over 19 years) ($600 x 6.3 years)	$3,780
3	E-Fix E35 24" 7.5AH (based on every five years over 19 years) ($$7,200 x 3.8 years)	$27,360
4	Attendant control for E35	$885
5	Additional spare battery (litium) (based on every two years over 19 years) ($800 x 9.5 years)	$7,600
	Total:	$51,785

Version No 1: 27 Oct 2020 (22:40 hrs)

(b) Safety facilities and mobility aids

163 The Plaintiff claimed the future costs of various safety facilities and mobility aids as listed in para 235 of her written submissions dated 11 July 2016. I will allow the items where recommended by the physiotherapist. The durability of each of such items is also to be taken into account. The Plaintiff sought to use the minimum period of durability (estimated by a supplier) to increase her claim amounts. I have used the maximum period instead. Details are set out in Annexure E.

Interest and costs

164 The total of the general and special damages, including post-trial general damages, exceeds $8.6 million. The Plaintiff claimed interest at 5.33% per annum for general and special damages from the date of the writ to date of judgment. The Defendant referred to *Quek Yen Fei Kenneth v Yeo Chye Huat* [2016] 3 SLR 1106 ("*Quek Yen Fei*") where Tay J had awarded interest as follows:

(a) 5.33% per annum for general damages for pain and suffering from the date of the writ to the date of judgment;

(b) 2.67% per annum for special damages from the date of accident to the date of judgment; and

(c) no interest on other items of general damages (*ie*, loss of future earnings and future expenses).

165 Before me, the Defendant submitted that the interest rate should be 2.67% per annum and to run from the date of the writ (7 September 2012) to

Version No 1: 27 Oct 2020 (22:40 hrs)

the date of judgment for general damages for pain and suffering and the same interest rate from the date of first assessment of damages hearing to date of judgment for special damages; with no interest on other items of general damages.

166 However, upon reading the judgment in *Quek Yen Fei*, I note that the interest rates were agreed by the parties. Also, the defendant there had agreed to the interest for special damages to run from the date of the accident as claimed by the plaintiff. The only dispute was when the interest for general damages was to run.

167 In the present case before me, there was no agreement between the parties on the interest rate. The Plaintiff was claiming 5.33% per annum for all the damages while the Defendant was proposing 2.67%. However, the Plaintiff was content to ask for the interest rate to run from the date of the writ of summons, *ie*, 7 September 2012, almost 35 months after the date of the accident on 15 October 2009 and not from the date of the accident.

168 I will allow the Plaintiff interest as follows:

(a) On special damages at the rate of 3% per annum from the date of the writ to the date just before judgment.

(b) On general damages for pain and suffering and loss of marriage prospect at the rate of 3% per annum from the date of the writ to the date just before judgment.

(c) On post-trial general damages, no pre-hearing interest.

Version No 1: 27 Oct 2020 (22:40 hrs)

169 The statutory rate of 5.33% per annum will apply on all the damages from the date of judgment to date of payment.

170 As the Defendant has made some interim payments to the Plaintiff, such payments are to be taken into account for the purpose of calculating interest. The parties are to agree on this, failing which the court will determine how they are to be taken into account.

171 On costs, the Plaintiff submitted that the assessment hearing was fixed for a total of nine hearing days although only five days were used. Following costs guidelines, the Plaintiff claimed $15,000 per day for the entire nine days with disbursements and GST to be agreed or taxed. Based on this formula, the Plaintiff should have claimed $135,000. Instead, her written submissions at para 246 claimed $111,000. Perhaps this was due to an error. The Plaintiff submitted that a tariff fixed at $15,000 per day of scheduled hearing (whether utilised or not) was appropriate bearing in mind the following:

(a) there was a total of ten expert medical witnesses;

(b) the numerous medical reports and documents to be considered by parties;

(c) the complexity of the nature of the claims involved;

(d) the interlocutory applications made for leave for the plaintiff to be allowed to make use of video conferencing facilities at the hearing of the assessment of damages;

Version No 1: 27 Oct 2020 (22:40 hrs)

(e) the numerous attendances and co-ordination made with the High Court registry and a total of three different vendors for the provision of video conferencing facilities; and

(f) there was an interval of nine months between the two tranches of assessment hearing dates necessitating additional work done to review, refresh and to prepare for the second tranche of hearing.

172 The Defendant submitted that only four hearing dates were used. At $16,000 per day, this would amount to $64,000 with disbursements and GST to be agreed or fixed by the court.

173 I agree that only four hearing days were used. However, this was because the Defendant eventually agreed to dispense with cross-examination of some of the Plaintiff's doctors. Also, the Defendant's cross-examination was not as comprehensive as it should have been and consequently, various items were either not explored at all or not explored in greater depth as would have been anticipated. I agree that the present claim was complex in nature with many heads of claim, much more than seen before. The four days of hearing does not accurately reflect the getting-up that was done before the hearing and the submissions involved. The quantum claimed was the highest the court has seen for personal injuries although I have allowed only a portion of the claim.

174 In my view, even at $135,000, such a figure would not be excessive at all. I will allow the Plaintiff $135,000 as costs with disbursements and GST to be agreed between the parties or fixed by the court.

Version No 1: 27 Oct 2020 (22:40 hrs)

Observation

175 It has been very difficult for the court to assess the damages for the Plaintiff especially in the context of future expenses. I had asked the parties to consider if a panel of doctors should be set up to review her condition from time to time so as to obtain a better assessment of her future needs. However, nothing was achieved from this suggestion. It was also unclear whether future reviews would cause more stress to the Plaintiff than a patient with only physical infirmities.

Woo Bih Li
Judge

Chong Pik Wah (Wong Thomas & Leong) for the plaintiff;
Michael Eu Hai Meng (United Legal Alliance LLC) for the first defendant.

Version No 1: 27 Oct 2020 (22:40 hrs)

Annexure A

General Damages

Pain and suffering and loss of amenities

S/N	Pain & Suffering and Loss of Amenities	Plaintiff	Defendant	Court
1	Post Traumatic Stress Disorder	$ 80,000	$ 50,000	$ 80,000
2	Impairment of memory and cognitive injuries	$ 50,000	$ 25,000	$ 25,000
3	Head injury	$ 15,000 }	$ 8,000	$ 10,000
4	Benign positional paroxysmal vertigo	$ 6,000 }		
5	Fibromyalgia	$ 15,000	$ 10,000	$ 15,000
6	Neck and back injuries, abrasions on face, arms and legs and spondylosis	$ 15,000	$ 8,000	$ 8,000
7	Other injuries: • Vitamin D deficiency • Irritable bowel syndrome • Lack of control of bodily functions, urine and faecal incontinence • Depressed immunity, deterioration of immune digestive and neurological systems • Deterioration of physical functions, muscular strength and coordination • Chronic fatigue and deterioration of overall stamina • Dysfunctional uterine bleeding and ovarian cyst	$ 80,000	Nil	$ 20,000
8	Loss of marriage prospect	$ 6,000	$ 6,000	$ 6,000
	Sub-total:	**$267,000**	**$107,000**	**$164,000**

Version No 1: 27 Oct 2020 (22:40 hrs)

Annexure B

Special Damages

(A) Medical and Hospital Expenses

S/N	Items	Plaintiff	Defendant	Court
1	Arthritis + Rheumatism Clinic Pte Ltd/Elim Arthritis + Rheumatism Clinic	$655.20	Silent	$ 655.20
2	Boey Mee Leng Rheumatology & Medical Clinic Pte Ltd	$5,661.90	$5,661.90	$5,661.90
3	Centre for Creative Development	$64,732.00	Disputed	Nil
4	Choo Wan Ling Women's Clinic	$502.20	Disputed	$502.20
5	Counselling Assessment & Therapy Services	$400.00	$400.00	$400.00
6	Gastroenterology Clinic Pte Ltd	$3,084.30	$3,084.30	$3,084.30
7	K H Ho Neurology & Medical Clinic	$24,116.60	$19,023.40	$24,116.60
8	Lim Ing Ruen ENT Clinic	Nil	Nil	Nil
9	L P Clinic Pte Ltd	$82,990.95	$60,669.15	$82,990.95
10	Ng Tay Meng Gastrointestinal and Liver Clinic Pte Ltd	$ 1,059.00	Disputed	$1,059.00
11	Orthopaedics International/ Neurolosurgery International	$171.20	Silent	$171.20
12	Physio & Therapy Lodge Group Pte Ltd	Nil	Nil	Nil

Version No 1: 27 Oct 2020 (22:40 hrs)

S/N	Items	Plaintiff	Defendant	Court
13	Singapore Medical Specialist Centre	$46,775.86	$46,775.86	$46,775.86
14	Gleneagles Hospital (original claim - $347,010.39)	$318,960.34	Disputed	$ 255,168.27
15	Mount Elizabeth Hospital (a) original claim - $2,337,212.49 (b) reduced to $2,081,961.29 after deduction of some room charges. (c) to deduct another $472.52 and $856 as per paras 5 to 9 of Plaintiff's further clarification dated 6/10/2016.	$2,080,632.77	Disputed	$1,664,506.22
	Sub-total:	**$2,629,742.32**	**$135,614.61**	**$2,085,091.70**

Version No 1: 27 Oct 2020 (22:40 hrs)

Annexure C

Special Damages

(B) Non-Medical Expenses (excluding equipment and mobility aids)

S/N	Items	Plaintiff	Defendant	Court
1	Pre-trial loss of earnings from November 2009 to February 2016 (76 months) x $6,000 per month	$456,000.00	$391,656.12	$456,000.00
2	Taxi for 480 trips at $110 per trip from 21/4/2014	$ 52,800.00	Nil	$ 6,600.00
3	Full-time domestic help for Plaintiff	$ 6,397.00 for unidentified period	Nil	$ 51,680.00 for 76 months
4	Part-time caregiver for Plaintiff $246,375 (from 2010, 2011 and 2012) $693,000 (from 2013 to 29/2/2016)	$ 939,375 for 74 months		
5	Part-time caregiver for Plaintiff's son	$499,040.00	Nil	Nil
	Sub-total:	**$1,953,612.00**	**$391,656.12**	**$514,280.00**

Version No 1: 27 Oct 2020 (22:40 hrs)

Annexure D

Special Damages

(C) Equipment and mobility aids

S/N	Items	Plaintiff	Defendant	Court
1	(a) Electric scooter purchased from Gleneagles Hospital (b) Electric wheelchair purchased from Gleneagles Hospital (c) Electric scooter purchased from Mount Elizabeth Hospital	$ 4,849.88 $13,636.50 $ 4,018.70	Nil	Already allowed under hospital expenses

S/N	Items	Amount claimed
2	Intelect NMES Standard (requires change every 1 year) ($345 x 3 sets)	$1,035.00
3	Magnetic Heating Pad (requires change every 1.5 year) ($135 x 3 sets)	$405.00
4	Uroplast 3-ply Face Mask (1 box per week) ($5.50 x 52 boxes x 5 years)	$1,430.00
5	Decpac Portable Ramp 0.9m (requires change every 1 year)	$1,150.00
6	E'cencel Cold/Hot Pack- Large (requires change every 1 year) ($96 x 5 years)	$480.00
7	E'cencel Cold/Hot Pack-Small (requires change every 1 year) ($76 x 5 years)	$380.00
8	Tena Super Adult L size (requires 5 bags per month) ($40.70 x 5 x 12 x 5 years)	$12,210.00

Version No 1: 27 Oct 2020 (22:40 hrs)

9	Hospice Wet Wipes (requires 1.5 packs per week) ($3.40 x 1.5 x 52 x 5 years)	$1,326.00
10	Tena Wash Glove (requires 1.3 packs per month) ($25.50 x 1.3 x 12 x 5 years)	$1,989.00
11	Rebotec Go-on Walking Frame (requires change every 1 year) ($180 x 5 years)	$900.00
12	Rising Quad Cane (requires change every 1 year) ($48 x 5 years)	$240.00
13	Comfycare Underpad (requires 8 packs per month) ($4.20 x 8 x 12 x 5 years)	$2,016.00
14	Full Lumbar Roll (requires change every 1 year) ($96 x 5 years)	$480.00
15	Cervical Roll (requires change every 1 year) ($96 x 5 years)	$480.00
16	Valaprotect Sheet (requires 1 sheet per day) ($1.60 x 365 x 5 years)	$2,920.00
17	Electro pads for Intelect NMES Standard (requires change every 2 weeks) ($41.62 x 26 x 5 years)	$5,410.60
18	Energizer battery for intellect NMES Standard (requires change every 1 week) ($6.25 x 52 x 5 years)	$1,625.00
	Total:	$34,476.60
	Sub-total: (Lump sum allowed by the court)	**$2,500**

Version No 1: 27 Oct 2020 (22:40 hrs)

Annexure E

Post-Trial General Damages

(A) Loss of Future Earnings

S/N	Items	Plaintiff	Defendant	Court
(i)	Multiplier	20 years	12 years	15 years
(ii)	Multiplicand	$6,000 per month + $500 increase every 5 years	$5,153.37 per month with no increase	$6,000 per month with no increase and no tax
(iii)	Income tax	2.5%	2.5%	Nil
			Subtotal:	**$1,080,000**

(B) Future Expenses

(i)	Multipier	23 years	15 years	19 years
(ii)	Future medical expenses			
(a)	Dr Chew Chou Mei Ling (psychologist)	$ 30,000 per annum	Nil	Nil
(b)	Dr Sim Li Ping (psychiatrist)	$ 21,540 per annum	Disputed	$21,540 p/a x 19 = $409,260
(c)	Dr Ho King Hee (neurologist)	$ 10,000 per annum	$10,000 per annum	$10,000 p/a x 19 = $190,000
(d)	Dr Boey Mee Ling (rheumatologist)	$ 2,000 per annum	Disputed	$ 2,000 p/a x 19 = $38,000
(e)	Dr Chong Yeh Woei (internist)	$ 91,000 per annum	Disputed	$91,000 p/a x 19 = 1,729,000

Version No 1: 27 Oct 2020 (22:40 hrs)

S/N	Items	Plaintiff	Defendant	Court
(f)	Jonathan Lim (physiotherapist)	$ 78,000 per annum	Disputed	$46,800 p/a x 19 = $889,200
(g)	Gastroenterologist	$ 1,000 per annum	Silent	$200 p/a x 19 = $3,800
(h)	Gynaecologist	$ 1,000 per annum	Disputed	$200 p/a x 19 = $3,800
(i)	Otolaryngologist	$ 1,000 per annum	Silent	$200 p/a x 19 = $3,800
(j)	Respiratory specialist and Ophthalmologist	Claims withdrawn	NA	Nil
			Sub-total:	**$3,266,860**
(iii)	Future hospital expenses			
(a)	Claim for hospital expenses from 3 March to 31 December 2016	$ 34,631.24 per month for hospital expenses (excluding doctors'fees) $ 37,803.30 per month for doctors' fees	Disputed	(a) $45,182 per month for ten months from 1 March 2016 to 31 December 2016 = $451,820
(b)	Claim for hospital expenses thereafter (for 3 months each year from 1 January 2017 for 23 years)			(b) $45,182 per month per year for 17 years = $768,094

Version No 1: 27 Oct 2020 (22:40 hrs)

S/N	Items	Plaintiff	Defendant	Court
(iv)	Future transport expenses: • to attend physiotherapy sessions (at $110 per trip x 5 x 52 weeks) • to attend outpatient medical appointments (at $110 per trip x 4.5 x 52 weeks)	$ 28,600 per annum} } } $ 25,740 per annum} }	} } Disputed } } }	$3,600 p/a x 19 = $68,400
(v)	Future caregiver expenses for the Plaintiff	$221,572 per annum	About $8,136 per annum	$8,160 p/a x 19 = $155,040
(vi)	Future caregiver expenses for the Plaintiff's son	$162,240 per annum	Nil	Nil
			Sub-total:	**$1,443,354**
(vii)	Future expenses for wheelchairs, safety facilities and mobility aids			
(a)	Aluminium foldable light weight wheelchair and related items	$115,880	Disputed	$51,785.00
(b)	Safety facilities and mobility aids			
1	Intelect NMES Standard ($345 per unit) Portable electrotherapy neuromuscular electrical stimulate Durability – 1 to 2 years Based on every 2 years over 19 years, I allow $345 x 9.5			$3,277.50
2	Electro pads for Intelect NMES Standard (s/no 26 of Plaintiff's claim) Plaintiff claims $41.62 per unit once every 2 weeks but the unit price and the frequency of change are both not supported by evidence. I allow $41.62 for once a year. So the total will be $41.62 x 19			$ 790.78

Version No 1: 27 Oct 2020 (22:40 hrs)

3	Energizer battery for Intelect NMES Standard (s/no 27 of Plaintiff's claim) Plaintiff claims $6.25 per unit once every week but the unit price and the frequency of change are both not supported by evidence. The reference in the supplier's quotation merely refers to a 9-volt battery without elaboration. I allow $6.25 for once a year. So the total will be $6.25 x 19	$ 118.75
4	Magnetic Heating Pad ($135 per unit) Durability – 1.5 to 2 years Based on every 2 years over 19 years, I allow $135 x 9.5	$1,282.50
5	Nizza Shower Chair – Rebotec ($199 per unit) Durability – 2 to 3 years Based on every 3 years over 19 years, I allow $199 x 6.33	$1,259.67
6	Stainless Steel Grab Bars – 18" ($26 per unit x 2) Durability – 2 to 3 years Based on every 3 years over 19 years, I allow $52 x 6.33	$ 329.16
7	Stainless Steel Grab Bars – 24" ($30 per unit x 3) Durability – 2 to 3 years Based on every 3 years over 19 years, I allow $90 x 6.33	$ 569.70
8	Stainless Steel Grab Bars – 36" ($45 per unit x 3) Durability – 2 to 3 years Based on every 3 years over 19 years, I allow $135 x 6.33	$ 854.55
9	Stainless Steel Foldaway Grab Bars 30" ($128 per unit) Durability – 2 to 3 years Based on every 3 years over 19 years, I allow $128 x 6.33	$ 810.24
10	Self-propel Deluxe Padded Commode ($880 per unit) Durability – 2 to 3 years Based on every 3 years over 19 years, I allow $880 x 6.33	$5,570.40

Version No 1: 27 Oct 2020 (22:40 hrs)

11	Uroplast 3-ply Face Mask	Disallowed
12	Decpac Portable Ramp 0.9m ($1,150 per unit) Durability – 3 years Based on every 3 years over 19 years, I allow $1,150 x 6.33	$7,279.50
13	Aluminium Wedge Ramp 10cm height ($148 per unit) Durability – 2 to 3 years Based on every 3 years over 19 years, I allow $148 x 6.33	$ 936.84
14	E'cencel Cold/Hot Pack – Large ($48 per unit x 2) Durability – 1 to 2 years Based on every 2 years over 19 years, I allow $96 x 9.5	$ 912.00
15	E'cencel Cold/Hot Pack – Small ($38 per unit x 2) Durability – 1 to 2 years Based on every 2 years over 19 years, I allow $76 x 9.5	$ 722.00
16	Tena Super Adult L size	Disallowed
17	Hospice Wet Wipe	Disallowed
18	Tena Wash Glove	Disallowed
19	Rebotec Go-on Walking Frame ($180 per unit) Durability – 1 year I allow $180 x 19	$ 3,420.00
20	Rising Quad Cane ($48 per unit) Durability – 1 year I allow $48 x 19	$ 912.00
21	Geriatic Electric Reclining (JBS 181-8B) (Physiotherapist recommended it but said not really necessary)	Disallowed

Version No 1: 27 Oct 2020 (22:40 hrs)

22	Kcare Overbed Table ($299 per unit) Durability – 2 to 3 years Based on every 3 years over 19 years, I allow $299 x 6.33	$ 1,892.67
23	Comfycare Underpad	Disallowed
24	Full Lumbar Roll ($48 per unit x 2) Durability -1 year I allow $96 x 19	$ 1,824.00
25	Cervical Roll ($48 per unit x 2) Durability – 1 year I allow $96 x 19	$ 1,824.00
26	Valaprotect Sheet	Disallowed
27	Neckpro Cervical Traction ($300 per unit) Durability – 1 to 2 years Based on every 2 years over 19 years, I allow $300 x 9.5	$ 2,850.00
	Sub-total:	**$ 89,221.26**
	Grand Total	**$8,645,306.96**

Version No 1: 27 Oct 2020 (22:40 hrs)