

Nos. 18-1323, 18-1460

IN THE
Supreme Court of the United States

JUNE MEDICAL SERVICES L.L.C., et al.,
Petitioners-Cross-Respondents,

v.

REBEKAH GEE, SECRETARY, LOUISIANA DEPARTMENT
OF HEALTH AND HOSPITALS,
Respondent-Cross-Petitioner.

**On Writ of Certiorari
to the United States Court of Appeals
for the Fifth Circuit**

JOINT APPENDIX

VOLUME IV

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3 JUNE MEDICAL SERVICES, L.L.C., CIVIL ACTION
4 ET AL

5 VERSUS NO. 14-525

6 KATHY KLIEBERT, ET AL HON. JOHN W. DEGRAVELLES

7 JUNE 24, 2015
8 VOLUME III OF VI

9 REDACTED

10 =====
11 BENCH TRIAL
12 HONORABLE JOHN W. DEGRAVELLES
13 =====

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JUNE MEDICAL V. KATHY KLIEBERT 14-CV-525-JWD 06-24-15

THE COURT: GOOD MORNING. PLEASE BE SEATED.

OKAY. WE'RE ABOUT TO START WITH DR. DOE NUMBER 1?

MS. DOUFEKIAS: WE ARE, YOUR HONOR. JUST ONE SMALL HOUSEKEEPING MATTER BEFORE WE DO. YESTERDAY PLAINTIFFS' EXHIBIT 178 WAS ADMITTED INTO EVIDENCE, AND WE WOULD LIKE FOR THAT EXHIBIT TO BE MARKED CONFIDENTIAL.

THE COURT: ANY OBJECTIONS?

MR. JOHNSON: NO OBJECTION, YOUR HONOR.

THE COURT: ALL RIGHT. LET IT BE MARKED CONFIDENTIAL.

AND BEFORE WE GET DR. DOE IN HERE, I KNOW WE'VE HEARD FROM DOCTORS -- DR. DOES 2 AND 3 ON THE STAND, DR. FOUR AND FIVE BY DEPOSITION. AND MAYBE I MISSED IT, BUT IS THERE ANY EVIDENCE -- AND I ASSUME, BECAUSE DR. DOE IS THE LAST WITNESS, WE'RE NOT GOING TO HEAR LIVE FROM DR. DOE 6; RIGHT?

MS. DOUFEKIAS: THAT'S CORRECT, YOUR HONOR.

THE COURT: SO I GUESS MY QUESTION IS, IS THERE GOING TO BE ANY EVIDENCE -- AND THERE MAY ALREADY BE SOME EVIDENCE AND I'VE JUST MISSED IT OR FORGOTTEN IT -- ABOUT WHAT DR. DOE 6'S STATUS IS VIS-A-VIS ADMITTING PRIVILEGES?

MS. DOUFEKIAS: I BELIEVE THERE'S EVIDENCE OF THAT IN THE DEPOSITION DESIGNATIONS AND IN A DECLARATION THAT HE SUBMITTED EARLIER IN THE CASE THAT'S IN EVIDENCE.

1 **THE COURT:** OKAY. ALL RIGHT. THANK YOU.

2 **MR. BROWN:** YOUR HONOR, ONE MORE PIECE OF
3 HOUSEKEEPING, IF I MAY. YESTERDAY WE AGREED ON AN ADDITIONAL
4 JOINT EXHIBIT 190. THIS IS THE E-MAIL I HANDED YOU YESTERDAY,
5 YES. AND WE WANTED TO MOVE THAT INTO EVIDENCE AS WELL. AND
6 THAT'S ALSO A CONFIDENTIAL EXHIBIT.

7 **THE COURT:** ANY OBJECTION TO ITS ADMISSION AS A
8 CONFIDENTIAL EXHIBIT?

9 **MR. JOHNSON:** NO OBJECTION, YOUR HONOR.

10 **THE COURT:** ALL RIGHT. THEN LET IT BE ADMITTED.

11 **MR. DUNCAN:** YOUR HONOR, WITH YOUR PERMISSION, I'M
12 GOING TO ABSENT MYSELF RIGHT NOW TO TALK TO THE WITNESS THAT
13 WE'RE GOING TO PUT ON; IS THAT OKAY?

14 **THE COURT:** OH, THAT'S GREAT. THAT'S FINE.

15 **MR. DUNCAN:** I MEAN NO OFFENSE TO MR. JOHNSON.

16 **THE COURT:** ALL RIGHT. I UNDERSTAND. WE WILL NOT
17 PUT OUT AN ALL-POINTS BULLETIN FOR YOU.

18 OKAY. IF EVERYONE IS READY TO PROCEED WE'LL GET DR.
19 DOE NUMBER 1 IN. AND I ASSUME HE'S IN THE JURY ROOM?

20 **THE CLERK:** YES.

21 **THE COURT:** OKAY. GOOD.

22 HELLO, DOCTOR, COME ON IN. IF YOU COULD STAY RIGHT
23 THERE FOR A MOMENT WHILE MS. CAUSEY COMES AROUND TO SWEAR YOU
24 IN.

25 **(WHEREUPON, DR. DOE NUMBER 1, HAVING BEEN DULY**

1 SWORN, TESTIFIED AS FOLLOWS.)

2 THE COURT: ALL RIGHT, DOCTOR. JUST TAKE A SEAT
3 RIGHT THERE.

4 DIRECT

5 BY MR. BROWN:

6 Q GOOD MORNING, DR. DOE, CAN YOU HEAR ME?

7 A YES.

8 Q DR. DOE, MY NAME IS DAVID BROWN. I'M COUNSEL FOR
9 THE PLAINTIFFS IN THIS MATTER. AND YOU ARE PRECEDING UNDER A
10 PSEUDONYM TODAY; ISN'T THAT RIGHT?

11 A YES.

12 Q COULD YOU SPEAK UP JUST A LITTLE BIT MORE?

13 A YES.

14 Q THE PSEUDONYM YOU'RE USING TODAY IS DR. JOHN DOE
15 NUMBER 1; IS THAT RIGHT?

16 A YES, CORRECT.

17 Q AND IF I REFER TO A DR. JOHN DOE NUMBER 3, DO YOU
18 KNOW WHO THAT IS?

19 A YES.

20 Q ARE YOU A MEDICAL DOCTOR?

21 A YES.

22 Q AND WHERE DO YOU WORK?

23 A I WORK AT HOPE MEDICAL GROUP.

24 Q AND WHERE IS THAT?

25 A IT'S IN SHREVEPORT.

1 Q AND HOW LONG HAVE YOU WORKED AT HOPE MEDICAL GROUP?

2 A APPROXIMATELY, MAYBE, NINE YEARS.

3 Q AND LET ME ASK YOU A BIT ABOUT YOUR EDUCATIONAL

4 BACKGROUND. DO YOU HAVE A BACHELOR'S DEGREE?

5 A YES, I DO.

6 Q AND WHERE IS THAT FROM?

7 A SABA MEDICAL SCHOOL.

8 Q AND IN WHAT FIELD?

9 A IN BIOLOGY.

10 Q AND DO YOU HAVE AN MD?

11 A YES, I DO.

12 Q AND WHERE IS THAT FROM?

13 A IT'S FROM SABA UNIVERSITY.

14 Q AND WHEN DID YOU OBTAIN THAT?

15 A 2004.

16 Q AND HAVE YOU DONE A RESIDENCY?

17 A YES, I HAVE.

18 Q IN WHAT FIELD?

19 A FAMILY MEDICINE.

20 Q AND WHERE WAS THAT?

21 A IN -- AT LSU IN SHREVEPORT.

22 Q AND WHAT WERE THE REQUIREMENTS OF DOING YOUR

23 RESIDENCY?

24 A WELL, IT WAS THREE YEARS, AND I HAD TO ROTATE

25 THROUGH DIFFERENT FIELDS OF MEDICINE, AND WE HAD ELECTIVE

1 MONTHS AND THEN THE CORE CURRICULUM THAT WE HAD TO DO.

2 Q DID YOU ALSO HAVE TO TAKE EXAMS?

3 A YES, I DID.

4 Q DID YOU COMPLETE ALL OF THE REQUIREMENTS OF YOUR
5 RESIDENCY SATISFACTORILY?

6 A YES, I DID.

7 Q AND ARE YOU CURRENTLY LICENSED TO PRACTICE MEDICINE?

8 A YES.

9 Q HERE IN THE STATE OF LOUISIANA?

10 A YES.

11 Q ARE YOU BOARD-CERTIFIED?

12 A YES, I AM.

13 Q AND IN WHAT FIELD ARE YOU BOARD-CERTIFIED?

14 A IN FAMILY MEDICINE AND ADDICTION MEDICINE.

15 Q SO YOU'RE CERTIFIED IN TWO FIELDS; IS THAT RIGHT?

16 A YES, I AM.

17 Q WHY DID YOU GET BOARD-CERTIFIED IN FAMILY MEDICINE?

18 A WELL, I JUST FELT THAT IT WAS -- I MET A HIGHER
19 LEVEL OF KNOWLEDGE BY SITTING FOR THAT EXAM AND STUDYING FOR
20 IT.

21 Q AND WHAT DO YOU HAVE TO DO TO OBTAIN BOARD
22 CERTIFICATION?

23 A A LOT OF STUDYING.

24 Q AND YOU SAT FOR AN EXAM, YOU SAID?

25 A YES.

1 Q AND DID YOU PASS IT?

2 A YES, I DID.

3 Q AND WHAT DID THE EXAM COVER?

4 A EVERY FIELD OF -- THAT I DID IN MY RESIDENCY, PRETTY
5 MUCH. OB, SURGERY, EMERGENCY MEDICINE, GERIATRIC MEDICINE,
6 PEDIATRICS, JUST TO NAME A FEW THAT I CAN REMEMBER OFF THE TOP
7 OF MY HEAD.

8 Q AND WHAT DO YOU HAVE TO -- DO YOU HAVE TO DO
9 ANYTHING ELSE TO MAINTAIN YOUR CERTIFICATION?

10 A YES. EVERY YEAR WE HAVE TO DO A CERTAIN NUMBER OF
11 CONTINUING MEDICAL EDUCATION HOURS AND STAY IN COMPLIANCE WITH
12 THE LAW AND THINGS LIKE THAT.

13 Q AND DO YOU DO THOSE THINGS?

14 A YES, I DO.

15 Q SO YOU'VE MAINTAINED YOUR CERTIFICATION
16 SUCCESSFULLY?

17 A YES.

18 Q AND DO YOU THINK BEING CERTIFIED IN FAMILY MEDICINE
19 HELPS YOU BE A BETTER PRACTITIONER?

20 A I THINK SO.

21 Q WHY DID YOU CHOOSE TO BECOME CERTIFIED IN ADDICTION
22 MEDICINE?

23 A WELL, IT'S A NEW EVOLVING FIELD THAT I HEARD ABOUT
24 PROBABLY SIX YEARS AGO, AND I THINK IT'S AN IMPORTANT FIELD
25 THAT NEEDS TO BE DEVELOPED MORE AND MORE MEDICATIONS AND

1 TREATMENTS ARE IMPORTANT, AND SO I STARTED LOOKING INTO IT,
2 AND I FOUND OUT THAT THERE'S A RESIDENCY PROGRAM STARTING UP
3 IN THE UNITED STATES AND THAT THERE'S AN EXAM CERTIFICATION
4 PROCESS, AND SO I STARTED GOING TO REVIEW COURSES FOR THAT AND
5 STUDYING. AND I SAT FOR THE BOARD EXAM, AND I STARTED SEEING
6 ADDICTION MEDICINE PATIENTS.

7 Q AND HAVE YOU DONE A RESIDENCY IN ADDICTION MEDICINE?

8 A NO. AT THE TIME -- I THINK THE FIRST RESIDENCY
9 PROGRAM WAS MAYBE DEVELOPED JUST A FEW YEARS AGO.

10 Q SO AFTER YOU BECAME A FAMILY MEDICINE SPECIALIST?

11 A YES.

12 Q OKAY. DO YOU RECALL WHAT YEAR YOU TOOK THE
13 CERTIFICATION EXAM IN FAMILY MEDICINE?

14 A IN FAMILY MEDICINE, IT WAS AFTER MY RESIDENCY, SO
15 PROBABLY 2008.

16 Q OKAY. AND YOUR CERTIFICATION IN ADDICTION MEDICINE
17 WAS SUBSEQUENT TO THAT?

18 A YES. THAT'S MORE RECENT. MAYBE THREE OR FOUR YEARS
19 AGO.

20 Q HAVE YOU EVER BEEN SUED FOR MALPRACTICE, DR. DOE?

21 A NO.

22 Q DO YOU HAVE MALPRACTICE INSURANCE?

23 A YES, I DO.

24 Q HAVE YOU EVER HAD ANY KIND OF ACTION TAKEN AGAINST
25 YOU MEDICAL LICENSE?

1 **A** NO.

2 **Q** HAVE YOU EVER BEEN INVESTIGATED BY THE LOUISIANA
3 MEDICAL BOARD?

4 **A** NO, I HAVEN'T.

5 **Q** HAVE YOU EVER BEEN CONTACTED BY THE LOUISIANA
6 MEDICAL BOARD ABOUT ANYTHING?

7 **A** YES, I HAVE.

8 **Q** AND WHAT WAS THAT CONTACT?

9 **A** SEVERAL YEARS AGO, I WAS ASKED TO COME DOWN TO NEW
10 ORLEANS AND MEET WITH THE BOARD.

11 **Q** DID THEY CONTACT YOU BY A LETTER OR PHONE CALL?

12 **A** IT WAS FIRST A LETTER AND THEN THEY ASKED FOR SOME
13 OF MY ADDICTION MEDICINE CHARTS, TO PRODUCE THEM, SO I
14 PHOTOCOPIED THE CHARTS AND SENT THEM IN. AND THEN I BELIEVE
15 AFTER THEY RECEIVED THE CHARTS, I KNOW THERE WAS A PHONE CALL
16 OR TWO, BUT THEY ASKED ME TO COME DOWN AND MEET WITH THE
17 BOARD.

18 **Q** IN NEW ORLEANS?

19 **A** YES.

20 **Q** AND DID YOU DO SO?

21 **A** YES, I DID.

22 **Q** AND WHO WAS AT THE MEETING?

23 **A** FROM WHAT I CAN REMEMBER, IT WAS DR. EISENHOWER AND
24 DR. MOUTON.

25 **Q** AND WHAT TOOK PLACE AT THE MEETING?

1 **A** WELL, FIRST THEY DISCUSSED MY ADDICTION MEDICINE
2 PRACTICE, AND THEY TOLD ME THAT THEY HAD AN EXPERT ADDICTION
3 MEDICINE PHYSICIAN REVIEW MY CHARTS AND THAT EVERYTHING LOOKED
4 GOOD THERE AND THAT I WAS MAINTAINING THE STANDARD OF CARE
5 WITH MY PATIENTS AND IT LOOKED LIKE I WAS DOING A GOOD JOB.
6 AND THEN THEY ASKED TO FOCUS ON HOPE MEDICAL GROUP AND WHAT I
7 DO THERE AND HOW I RECEIVED TRAINING.

8 **Q** SO THEY HAD ASKED YOU BY LETTER ONLY FOR INFORMATION
9 ABOUT YOUR ADDICTION PATIENTS; IS THAT RIGHT?

10 **A** I THINK IN THE LETTER, IF I REMEMBER CORRECTLY, IT
11 WAS ONLY ABOUT MY ADDICTION MEDICINE BECAUSE I REMEMBER THE
12 CHARTS, THE NAMES OF THE PATIENTS. THEY WANTED TO SEE CERTAIN
13 CHARTS; MAYBE FIVE TO TEN CHARTS. AND THEN, I'M NOT SURE IF
14 IT SAID IN THE LETTER THAT THEY WANTED TO DISCUSS HOPE, BUT I
15 KNOW THAT I HAD BROUGHT WITH ME SOME OF MY TRAINING MATERIALS.
16 BECAUSE MAYBE ON THE PHONE DR. EISENHOWER, THAT'S WHO I SPOKE
17 WITH, TOLD ME THAT THEY WERE GOING TO TALK ABOUT THAT AS WELL,
18 SO I WENT PREPARED. SO I KNOW EITHER THROUGH THE LETTER OR
19 VERBALLY I WAS TOLD THAT WE WOULD DISCUSS MY ABORTION
20 TRAINING.

21 **THE COURT:** MR. BROWN, CAN I INTERRUPT FOR JUST A
22 SECOND? YOU SAID STATE MEDICAL BOARD. ARE WE TALKING ABOUT
23 THE BOARD OF MEDICAL EXAMINERS, LOUISIANA STATE BOARD OF
24 MEDICAL EXAMINERS?

25 **MR. BROWN:** YES. I APOLOGIZE.

1 **THE COURT:** THAT'S OKAY. I JUST WANT TO MAKE SURE
2 THE RECORD IS CLEAR.

3 **BY MR. BROWN:**

4 **Q** WELL, I SHOULD PUT THAT QUESTION TO YOU ALSO, DR. 1,
5 ARE WE TALKING ABOUT THE LOUISIANA STATE BOARD OF MEDICAL
6 EXAMINERS?

7 **A** YES, WE ARE.

8 **Q** AND DR. MOUTON AND DR. EISENHOWER ARE MEMBERS OF
9 THAT BOARD; IS THAT RIGHT?

10 **A** YES.

11 **Q** SO THE ONLY DOCUMENTATION THAT YOU WERE ASKED TO
12 PROVIDE BEFORE THE MEETING WAS REGARDING YOUR ADDICTION
13 PATIENTS; IS THAT RIGHT?

14 **A** CORRECT.

15 **Q** BUT AT THE MEETING ITSELF, YOU DISCUSSED BOTH YOUR
16 ADDICTION PATIENTS AND YOUR PRACTICE AT HOPE; IS THAT RIGHT?

17 **A** YES. YES.

18 **Q** AND DID YOU PROVIDE THEM WITH ANY INFORMATION ABOUT
19 YOUR TRAINING TO DO ABORTION PROCEDURES?

20 **A** YES. I SHOWED THEM TRAINING MATERIALS.

21 **Q** AND DID THEY LOOK AT THE TRAINING MATERIALS?

22 **A** YES. THEY JUST LOOKED THROUGH THEM BRIEFLY AT THE
23 MEETING.

24 **Q** COULD YOU LOOK AT A BINDER THAT YOU HAVE IN FRONT OF
25 YOU LABELED "4 OF 4"; "JOINT EXHIBITS 4 OF 4"? DO YOU SEE

1 THAT THERE?

2 A YES.

3 Q COULD YOU OPEN IT UP TO JOINT EXHIBIT 130? AND THIS
4 IS A CONFIDENTIAL EXHIBIT, SO I WON'T ASK YOU TO READ FROM IT,
5 BUT IF YOU COULD JUST LEAF THROUGH IT AND TELL ME WHETHER
6 YOU'VE SEEN IT BEFORE?

7 A IS THIS 1 -- BINDER 4?

8 Q YES.

9 A IT STARTS ON 131.

10 Q SO PROBABLY BINDER 3 IS WHERE YOU'LL FIND IT. I
11 APOLOGIZE. IT SHOULD BE THE LAST EXHIBIT.

12 A YES.

13 Q YOU HAVE EXHIBIT 130 IN FRONT OF YOU THERE, DOCTOR?

14 A YES, I DO.

15 Q AND COULD YOU JUST LEAF THROUGH THE PAGES AND TELL
16 ME WHETHER YOU RECOGNIZE IT?

17 A I DO.

18 Q AND WHAT IS THIS EXHIBIT?

19 A IT LOOKS LIKE THE TRAINING PLAN THAT I STARTED WITH
20 AT HOPE.

21 Q AND IS THIS THE INFORMATION THAT YOU PRESENTED TO
22 THE BOARD OF MEDICAL EXAMINERS?

23 A IT WAS MUCH MORE THAN THIS, BUT -- MAYBE THIS WAS
24 INCLUDED. I JUST KNOW THAT I HAD ALL OF MY DOCUMENTED
25 TRAINING IN THERE, WHICH WAS MORE THAN JUST THESE THREE PAGES.

1 Q SO IS IT -- IT'S A FRONT-AND-BACK EXHIBIT ACTUALLY
2 --

3 A YES, I SEE. BUT I JUST REMEMBER I HAD A STACK OF
4 PAPERS WITH ME, SO...

5 Q OKAY. SO THIS IS A PART OF THE INFORMATION THAT YOU
6 PRESENTED --

7 A I THINK SO.

8 Q -- DOCUMENTING YOUR TRAINING; IS THAT RIGHT?

9 A YES.

10 Q AND DID THEY GIVE YOU ANY FEEDBACK REGARDING THE
11 TRAINING?

12 A FROM WHAT I CAN REMEMBER, BECAUSE THIS WAS PROBABLY
13 FOUR OR FIVE YEARS AGO, THEY SEEMED THAT THEY WERE IMPRESSED
14 WITH THE AMOUNT OF TRAINING AND EVERYTHING THAT I HAD DONE AND
15 DOCUMENTED AND THAT WAS, YOU KNOW, THE FEELING THAT I GOT.

16 Q OKAY. WERE YOU TOLD THAT THIS WAS AN INVESTIGATION?

17 A NO -- WELL, I DON'T KNOW IF IN THE LETTER IT SAID
18 INVESTIGATION, BUT WHEN WE WERE DONE WITH THE MEETING, THEY
19 SAID -- THEY TOLD ME THAT IF I WAS EVER ASKED IF I'D BEEN
20 INVESTIGATED I CAN SAY NO, AND I DON'T HAVE TO PUT IT ON ANY
21 KIND OF LICENSE RENEWAL OR -- BECAUSE, YOU KNOW, THOSE KIND OF
22 QUESTIONS ARE ALWAYS ASKED OR IF I APPLIED AT A HOSPITAL OR,
23 YOU KNOW, IF I'VE EVER BEEN INVESTIGATED, I HAVEN'T BEEN
24 INVESTIGATED.

25 Q AND WERE YOU GIVEN ANY WRITTEN RECORD THAT THIS

1 MEETING HAD TAKEN PLACE?

2 A I DON'T THINK SO.

3 Q HOW DID THE MEETING MAKE YOU FEEL?

4 A WELL -- WELL, IT WAS NERVE-RACKING TO DRIVE TO NEW
5 ORLEANS, SPEND THE NIGHT IN A HOTEL, AND MEET WITH THE BOARD
6 IN THE MORNING AND NOT KNOW EXACTLY WHAT THE AIM OF THE
7 MEETING WAS ABOUT, BUT I DID IT. AND AFTERWARDS I FELT
8 RELIEVED AND -- AND EVERYTHING WAS FINE, BUT IT WAS A LITTLE
9 BIT STRESSFUL, I COULD SAY THAT.

10 Q AND HAVE YOU HAD ANY SUBSEQUENT CONTACTS WITH THE
11 BOARD?

12 A LET ME THINK. WELL, THERE WAS -- POSSIBLY THREE OR
13 FOUR MONTHS AGO, THERE WAS A PATIENT COMPLAINT. I HAD
14 DISCHARGED ONE OF MY ADDICTION MEDICINE PATIENTS FOR BEING
15 NONCOMPLIANT WITH TREATMENT AND MISSING APPOINTMENTS AND I HAD
16 DISCHARGED HER FROM MY PRACTICE, AND SHE FILED A COMPLAINT TO
17 THE BOARD, SO THE BOARD ASKED ME TO RESPOND TO THE PATIENT'S
18 COMPLAINT, WHICH I DID, VIA LETTER, AND THEN I RECEIVED A
19 RESPONSE THAT SAID THAT EVERYTHING SEEMS TO BE FINE AND THAT
20 THAT WAS CLEAR. BUT I THINK THAT'S THE ONLY OTHER CONTACT
21 I'VE HAD WITH THE BOARD.

22 Q THANK YOU, DOCTOR. LET ME GET BACK TO YOUR -- YOUR
23 HISTORY AS A PHYSICIAN. WHAT WAS YOUR FIRST MEDICAL JOB OTHER
24 THAN YOUR RESIDENCY?

25 A I WORKED IN VARIOUS EMERGENCY ROOMS.

1 Q AND WHERE WAS THAT?

2 A PRETTY MUCH ALL IN NORTHERN LOUISIANA, SMALL LITTLE
3 OUTLYING EMERGENCY ROOMS.

4 Q AND DID THEY -- I'M SORRY. WERE YOU WORKING FOR A
5 PARTICULAR EMPLOYER AT THE TIME?

6 A YES, A STAFFING COMPANY.

7 Q AND THAT COMPANY WOULD STAFF YOU AT VARIOUS
8 EMERGENCY ROOMS; IS THAT RIGHT?

9 A YES.

10 Q AND YOU SAID THESE WERE PRIMARILY RURAL?

11 A YES, THEY WERE.

12 Q AND THROUGHOUT NORTHERN LOUISIANA; IS THAT RIGHT?

13 A YES.

14 Q AND HOW LONG DID YOU DO THAT FOR?

15 A APPROXIMATELY A YEAR, A YEAR AND A HALF.

16 Q AND THAT WAS AFTER YOUR RESIDENCY?

17 A YES, IT WAS.

18 Q SO IS IT FAIR TO SAY THAT DURING THAT TIME YOU WERE
19 AN EMERGENCY PHYSICIAN?

20 A YES.

21 Q AND WHAT WERE YOUR RESPONSIBILITIES AS AN
22 EMERGENCY -- EXCUSE ME -- AS AN EMERGENCY PHYSICIAN?

23 A WELL, ANY PATIENT THAT CAME INTO THE EMERGENCY ROOM,
24 I HAD TO ASSESS THEM, TREAT THEM, POSSIBLY ADMIT THEM TO THE
25 HOSPITAL THAT -- EITHER THAT WAS ATTACHED TO THAT EMERGENCY

1 ROOM OR TRANSFER THEM TO ANOTHER HOSPITAL IF THAT HOSPITAL
2 WASN'T BIG ENOUGH OR DIDN'T PROVIDE THE TYPE OF SERVICES THAT
3 THE PATIENT NEEDED, JUST ALL DIFFERENT KINDS OF THINGS THAT
4 WOULD COME INTO AN EMERGENCY ROOM.

5 Q DO YOU RECALL WHAT HOSPITAL OR HOSPITALS THAT YOU
6 TRANSFERRED PATIENTS TO?

7 A I REMEMBER THAT THERE WAS MAYBE ST. FRANCIS IN
8 MONROE, WHICH IS A BIGGER HOSPITAL. I'M PRETTY SURE I
9 TRANSFERRED SOME PATIENTS THERE BECAUSE I WORKED IN NEARBY
10 MONROE, IN RAYVILLE AND SOME OTHER LITTLE TOWNS. AND THEN
11 LSU, I'M SURE I TRANSFERRED SOME TRAUMA TO LSU. THAT'S JUST
12 WHAT I CAN REMEMBER.

13 Q AND THESE WERE FOR THINGS THAT THE RURAL EMERGENCY
14 ROOMS THAT YOU WERE CURRENTLY STAFFED AT COULDN'T HANDLE ON
15 THEIR OWN -- COULDN'T, LET'S SAY, TREAT ON THEIR OWN; IS THAT
16 RIGHT?

17 A YES.

18 Q SO YOU WOULD STABILIZE -- WOULD YOU STABILIZE THE
19 PATIENT BEFORE TRANSFERRING?

20 A OH, YES.

21 Q AND THEN YOU WOULD TRANSFER THEM TO A HOSPITAL LIKE
22 ST. FRANCIS OR LSU SHREVEPORT?

23 A YES.

24 Q AND IF I SAY "UNIVERSITY HEALTH," DO YOU UNDERSTAND
25 WHAT THAT MEANS?

1 **A** YES.

2 **Q** IS THAT THE SAME AS LSU SHREVEPORT?

3 **A** YES, IT IS.

4 **Q** DURING THE TIME YOU WERE AN EMERGENCY PHYSICIAN, DID
5 YOU HAVE ADMITTING PRIVILEGES ANYWHERE?

6 **A** I'M NOT SURE IF -- WHEN I -- WHEN I DID PAPERWORK TO
7 GO TO THE DIFFERENT -- OR TO BE WORKING IN THAT EMERGENCY
8 ROOM, IF THERE WAS POSSIBLY A PAPER THAT SAID, YOU KNOW, THAT
9 I CAN HAVE PRIVILEGES TO ADMIT TO THAT PARTICULAR HOSPITAL
10 THAT BELONGED TO THE EMERGENCY ROOM, BUT I DEFINITELY DIDN'T
11 HAVE PRIVILEGES AT ALL OF THE HOSPITALS AROUND OR THE BIGGER
12 HOSPITALS.

13 **Q** SO, IN OTHER WORDS, YOU DIDN'T HAVE PRIVILEGES AT
14 THE LARGER HOSPITALS THAT YOU WOULD TRANSFER PATIENTS TO?

15 **A** NO.

16 **Q** SO HOW DID THE TRANSFER WORK IN THE ABSENCE OF
17 ADMITTING PRIVILEGES?

18 **A** WELL, USUALLY I WOULD DO ALL OF THE ASSESSMENT AT
19 THE SMALL HOSPITAL, WHATEVER I COULD. LIKE IF THERE WAS
20 X-RAYS OR LAB WORK. AND ONCE I GATHERED ALL OF THE
21 INFORMATION, I WOULD CONTACT THE HOSPITAL AND SPEAK WITH
22 EITHER THE EMERGENCY ROOM PHYSICIAN AT THE BIGGER HOSPITAL, IF
23 IT WAS GOING TO BE A TRANSFER STRAIGHT FROM ER TO ER, OR I
24 WOULD SPEAK TO POSSIBLY THE SURGEON OR WHATEVER DEPARTMENT,
25 WHOEVER WAS THE ATTENDING FOR THAT SPECIFIC AREA OF MEDICINE

1 AND EXPLAIN WHAT I HAD AT THE ER, WHAT THE PATIENT'S DIAGNOSIS
2 WAS.

3 AND ONCE I -- ONCE I TOLD THE PHYSICIAN THIS IS WHAT
4 I BELIEVE THE PATIENT HAS OR NEEDS, THEN THEY WOULD TELL ME,
5 "OKAY. WELL, SEND THEM THROUGH THE EMERGENCY ROOM, OR I'M
6 GOING TO" -- MAYBE THEY WOULD HAVE PAPERWORK, AND THEY WOULD
7 BE LIKE A DIRECT ADMIT TO THE HOSPITAL. SO DIFFERENT
8 HOSPITALS HAVE DIFFERENT WAYS OF ACCEPTING A PATIENT, BUT I
9 WAS ALWAYS TOLD HOW TO -- YOU KNOW, HOW THEY WERE GOING TO
10 ACCEPT THE PATIENT, AND IT WAS NEVER A PROBLEM.

11 Q AND PHYSICALLY HOW DID THE PATIENT THAT YOU
12 TRANSFERRED GET TO THE LARGER HOSPITAL?

13 A WELL, IF THEY WERE VERY STABLE AND THEY HAD A FAMILY
14 MEMBER AND IT WASN'T A REAL TRUE EMERGENCY, THEN, YOU KNOW,
15 THEY COULD DRIVE BY PRIVATE CAR. I REMEMBER SPECIFICALLY AN
16 INCIDENT WHERE, YOU KNOW, I HAD A PATIENT THAT HAD I THINK IT
17 WAS SOME TYPE OF LIKE MAYBE A LIMB INJURY, LIKE A BROKEN ARM
18 OR SOMETHING LIKE THAT, AND THEY WENT TO THE BIGGER HOSPITAL
19 WITH A PRIVATE CAR.

20 OR THEY COULD TAKE THE AMBULANCE IF THEY WERE, YOU
21 KNOW, MORE UNSTABLE OR IF THERE WAS A WORRY THAT THE PATIENT
22 COULD DECOMPENSATE OR I HAVE AIR-LIFTED WITH A HELICOPTER IN A
23 CASE WHERE IT WAS URGENT. AND I THINK THAT WAS TO LSU, IF I
24 REMEMBER CORRECTLY.

25 Q SO DID ONE OF THESE LARGER HOSPITALS, LIKE LSU, EVER

1 REJECT A PATIENT BECAUSE -- REJECT A PATIENT YOU WERE
2 TRANSFERRING TO THEM BECAUSE YOU DIDN'T HAVE PRIVILEGES?

3 A NO.

4 Q AND TO YOUR KNOWLEDGE, WAS SUCH A HOSPITAL EVER
5 UNABLE TO TREAT A PATIENT BECAUSE YOU DIDN'T HAVE PRIVILEGES?

6 A NO.

7 Q DID A PATIENT YOU WERE TRANSFERRING EVER SUFFER HARM
8 BECAUSE YOU DIDN'T HAVE ADMITTING PRIVILEGES?

9 A NO.

10 Q DID YOU EVER SEE AN ABORTION-RELATED EMERGENCY
11 DURING YOUR TIME WORKING AS AN EMERGENCY PHYSICIAN?

12 A NO, I'VE NEVER SEEN THAT.

13 Q WHAT DID YOU DO AFTER YOUR TIME WORKING IN EMERGENCY
14 ROOMS?

15 A WELL, I WAS WORKING AT HOPE AT THE SAME TIME THAT I
16 WAS DOING THE EMERGENCY ROOM WORK AND AS MY TRAINING
17 PROGRESSED AT HOPE, I STARTED WORKING AT HOPE A LITTLE BIT
18 MORE. AND SINCE THE EMERGENCY ROOM WORK WAS USUALLY PRETTY
19 FAR, SO I'D DRIVE LIKE MAYBE 100 MILES OR MORE EVEN AND
20 SPEND -- YOU KNOW, IT COULD BE A 24-HOUR SHIFT, MAYBE A
21 TWO-DAY SHIFT, SO I SLOWLY STARTED BACKING OFF DOING THE
22 EMERGENCY ROOM WORK AND STARTED WORKING MORE AT HOPE.

23 Q AND YOU SAID YOU CURRENTLY STILL WORK AT HOPE?

24 A YES, I DO.

25 Q AND YOU ALSO HAVE AN ADDICTION PRACTICE?

1 **A** YES.

2 **Q** DO YOU HAVE ANY OTHER PRACTICES RIGHT NOW OTHER THAN
3 THOSE TWO?

4 **A** NO.

5 **Q** SO GETTING BACK TO THE HOPE CLINIC, WHAT DO YOU DO
6 THERE?

7 **A** I DO THE 24-HOUR CONSENTS ON -- ONE DAY A WEEK, AND
8 THEN I DO ABORTIONS THREE DAYS A WEEK.

9 **Q** SO ARE YOU THERE, IN TOTAL, FOUR DAYS A WEEK?

10 **A** WELL, ON THURSDAYS I DO THE 24-HOUR CONSENTS AND
11 PROCEDURES, SO I -- I DO BOTH ON ONE DAY. SO I ONLY GO TO
12 HOPE THREE DAYS A WEEK.

13 **Q** AND WHEN YOU SAY "24-HOUR CONSENT," WHAT DO YOU
14 MEAN?

15 **A** WELL, IN THE STATE OF LOUISIANA, EVERY WOMAN THAT IS
16 INTERESTED IN OBTAINING AN ABORTION HAS TO SPEAK WITH A
17 PHYSICIAN AND SIGN A CONSENT FORM. SO I SEE THE PATIENTS THAT
18 COME INTO HOPE FOR THEIR ULTRASOUND AND PREGNANCY TESTS AND
19 EXPLAIN THE PROCEDURE OR ALTERNATIVES TO THE PROCEDURE.

20 **Q** AND IT'S CALLED A 24-HOUR CONSENT BECAUSE IT HAS TO
21 BE DONE 24 HOURS IN ADVANCE?

22 **A** YES. AT LEAST 24 HOURS.

23 **Q** AND THAT HAS TO BE IN-PERSON?

24 **A** YES, IT DOES.

25 **Q** SO THE PATIENT HAS TO MAKE AN ADDITIONAL VISIT TO

1 THE CLINIC BEFORE THE ABORTION, ACCORDING TO THE LAW, TO HAVE
2 AN ABORTION?

3 A YES, THEY DO.

4 Q SO IN TOTAL, A PATIENT HAS TO VISIT AT LEAST TWICE
5 TO HAVE AN ABORTION AT THE CLINIC?

6 A YES.

7 Q AND IS THAT TRUE FOR SURGICAL AND MEDICATION
8 ABORTION?

9 A YES, IT IS.

10 Q HOW MANY TIMES DOES A PATIENT HAVE TO VISIT FOR A
11 MEDICATION ABORTION?

12 A IT'S THE SAME --

13 Q OH, OKAY. SORRY.

14 A -- AT LEAST TWICE.

15 Q AT LEAST TWICE?

16 A YES. THEY COME FOR THE CONSENT AND THEN THEY
17 USUALLY, AFTER THEY HAVE ALL OF THE INFORMATION, THEY'LL
18 SCHEDULE, YOU KNOW, THE NEXT DAY OR A WEEK LATER, OR...

19 Q OKAY. AND DO YOU PROVIDE BOTH MEDICATION AND
20 SURGICAL ABORTION SERVICES?

21 A YES, I DO.

22 Q AND WHEN I SAY "GESTATIONAL AGE," DO YOU
23 UNDERSTAND -- OR CAN YOU TELL ME WHAT YOUR UNDERSTANDING OF
24 THAT TERM IS?

25 A YES. IT'S THE AGE OF THE PREGNANCY FROM THE LAST

1 MENSTRUAL PERIOD.

2 Q OKAY. SO WHAT GESTATIONAL AGE DO YOU PROVIDE
3 MEDICATION ABORTION THROUGH?

4 A UP TO EIGHT WEEKS.

5 Q AND WHAT ABOUT SURGICAL ABORTION?

6 A THIRTEEN WEEKS, SIX DAYS.

7 Q SO IS IT FAIR TO SAY THAT'S THE FIRST TRIMESTER?

8 A YES, IT IS.

9 Q AND WHY DO YOU GO UP TO THAT DATE?

10 A WELL, I BELIEVE IT WAS THE LOUISIANA MEDICAL BOARD
11 OF EXAMINERS THAT PUT THAT CRITERIA, THAT FAMILY MEDICINE
12 PHYSICIANS CANNOT GO PAST THE FIRST TRIMESTER.

13 Q AND WHAT METHOD OF SURGICAL ABORTION DO YOU USE?

14 A SUCTION CURETTAGE.

15 Q DO YOU USE -- SORRY. DOES SUCTION CURETTAGE INVOLVE
16 AN INCISION?

17 A NO, IT DOESN'T.

18 Q DO YOU USE GENERAL ANESTHESIA DURING A SUCTION
19 CURETTAGE?

20 A NO, WE DON'T.

21 Q DO YOU USE ANY KIND OF ANESTHETIC?

22 A JUST A LOCAL ANESTHETIC.

23 Q SO THE PATIENT IS AWAKE DURING THE PROCEDURE?

24 A YES, THEY ARE.

25 Q DO YOU INTERACT WITH THE PATIENT?

1 **A** DEFINITELY.

2 **Q** WHAT SORT OF INTERACTIONS DO YOU HAVE WITH THE
3 PATIENT?

4 **A** WELL, WHEN I GO INTO THE ROOM AND I MEET WITH THE
5 PATIENT, I USUALLY CAN SENSE HOW MUCH INTERACTION THEY WANT OR
6 NEED, SO EVERY PATIENT IS DIFFERENT. BUT I TALK -- I
7 INTRODUCE MYSELF, I TALK TO THEM, I TELL THEM WHAT I'M GOING
8 TO DO, AND IF THEY HAVE ANY QUESTIONS. SO I DEFINITELY HAVE A
9 LOT OF INTERACTION WITH EACH PATIENT.

10 **Q** AND DO YOU INTERACT WITH THEM DURING THE SURGICAL
11 PROCEDURE ITSELF?

12 **A** YES, I DO.

13 **Q** WHAT SORT OF INTERACTIONS THEN?

14 **A** WELL, MOST OF THE PATIENTS WANT TO KNOW EXACTLY
15 WHAT'S GOING TO HAPPEN AND WHAT I'M DOING, SO I TELL THEM STEP
16 BY STEP, YOU KNOW, THIS IS WHAT I'M DOING RIGHT NOW, JUST
17 RELAX OR BREATHE, AND I HELP THEM TRY TO BE CALM AND -- SO,
18 LIKE I SAID, EACH PATIENT IS A LITTLE BIT DIFFERENT.

19 AND SOME PATIENTS, RARELY, DON'T WANT YOU TO SAY
20 ANYTHING. SO IT'S VERY -- YOU KNOW, MENTALLY I THINK IT CAN
21 BE DRAINING BECAUSE I HAVE TO STAY CALM AND MAKE SURE THAT THE
22 PATIENT FEELS AT EASE. SO I TELL THEM EVERYTHING THAT I'M
23 DOING, AND I TELL THEM WHEN I'M DONE. AND SOMETIMES I ASK
24 THEM -- YOU KNOW, BECAUSE SOMETIMES THEY'RE SURPRISED, "OH,
25 THAT'S IT" OR "ARE WE STARTING NOW?" OR "HAVE WE FINISHED?"

1 SO...

2 Q THANK YOU. DO YOU INTERACT WITH PATIENTS AS PART OF
3 THE MEDICAL ABORTION PROCEDURE?

4 A YES. ACTUALLY, THAT'S PROBABLY EVEN MORE
5 EXPLANATION OR TALKING.

6 Q AND WHAT EXPLANATIONS DO YOU PROVIDE?

7 A WELL, PHYSICALLY THERE'S NOT TOO MUCH INVOLVED
8 BECAUSE I ONLY DO A QUICK PELVIC EXAM AND THEN A VAGINAL
9 ULTRASOUND. BUT BEFORE I DO THAT, I INTRODUCE MYSELF, I LOOK
10 THROUGH THEIR CHART, I ASK THEM IF THEY'RE THERE TO GET THE
11 MEDICATION ABORTION AND IF THEY HAVE ANY QUESTIONS BEFORE I
12 START. AND THEN -- SOMETIMES THEY DO.

13 AND THEN AFTER I DO THE PHYSICAL PART, THEN THEY SIT
14 UP, AND I ASK THEM -- OR I TELL THEM THIS PILL, WHAT YOU'RE
15 ABOUT TO TAKE, IS GOING TO DO THIS AND THIS IS WHAT YOU NEED
16 TO EXPECT AND THEN THE NEXT DAY YOU'RE GOING TO DO THIS, AND
17 THESE PRESCRIPTIONS I'M GOING TO GIVE TO YOU ARE TO BE TAKING
18 IN SUCH A WAY. SO I EXPLAIN EVERYTHING ABOUT WHAT THE PILLS
19 DO AND WHAT TO EXPECT AND WHEN IT'S IMPORTANT TO CALL THE
20 CLINIC. AND IF THEY DON'T HAVE ANY OF THESE PROBLEMS, THEN
21 WE'LL JUST EXPECT TO SEE THEM IN THREE WEEKS.

22 Q SO YOU -- I'M SORRY. I INTERRUPTED.

23 A SORRY. BECAUSE ALL OF THE MEDICATION ABORTION
24 PATIENTS ARE REQUIRED TO RETURN TO THE CLINIC IN THREE WEEKS.

25 Q SO YOU SCHEDULE, OR SOMEBODY AT THE CLINIC,

1 SCHEDULES A FOLLOW-UP VISIT THREE WEEKS AFTER THEIR MEDICATION
2 VISIT?

3 A YES. AFTER I'M DONE WITH THE PATIENT, THE PATIENT
4 GOES TO A COUNSELOR AND THE COUNSELOR EXPLAINS EVERYTHING ONE
5 MORE TIME AND THEN GIVES THE PATIENT THE PRESCRIPTIONS THAT
6 I'VE SIGNED AND THEN TELLS THEM THE FOLLOW-UP DATE.

7 Q SO IS IT FAIR TO SAY THAT A MEDICATION ABORTION
8 PATIENT WOULD DO THREE VISITS AT THE CLINIC?

9 A YES.

10 Q AND THE INTERACTIONS THAT YOU WERE DESCRIBING TO THE
11 COURT JUST NOW THAT OCCUR ON THE DAY OF THE ABORTION ITSELF,
12 THOSE ARE ALL THE PATIENT'S SECOND VISIT?

13 A YES.

14 Q SO THE PATIENT'S ALREADY MET WITH A PHYSICIAN AT
15 THAT POINT?

16 A YES. AND SOMETIMES EVEN THEIR THIRD VISIT. I MEAN
17 IT'S HAPPENED WHERE THEY'VE -- MAYBE IF THEY HAD A NEGATIVE
18 ULTRASOUND THE FIRST TIME THAT THEY CAME SO NOTHING WAS SEEN
19 ON THE ULTRASOUND. YOU KNOW, IT'S NOT IMPOSSIBLE THAT THEY
20 CAME IN ONE MORE TIME TO GET ANOTHER ULTRASOUND AND THEN
21 THEY'RE ACTUALLY THERE ON THEIR THIRD VISIT. BECAUSE
22 SOMETIMES I SEE SEPARATE DATES WHEN I'M LOOKING AT THE FIRST
23 ENCOUNTER, THE ULTRASOUND, AND THEN THE DAY THAT THEY'RE
24 THERE.

25 Q AND YOU MENTIONED THAT MEDICATION ABORTION PATIENTS

1 ALSO SPEAK TO A COUNSELOR. DID I GET THAT RIGHT?

2 A YES. THEY SPEAK TO A COUNSELOR THE FIRST DAY THAT
3 THEY'RE THERE FOR THE ULTRASOUND AND URINE PREGNANCY TEST,
4 THEY ALL SPEAK TO A COUNSELOR AND THE PHYSICIAN FOR THE
5 24-HOUR CONSENT, AND THEN THEY ALL, EVEN AFTER SURGICAL OR
6 MEDICATION ABORTION, THEY SEE THE COUNSELOR ONE MORE TIME
7 BEFORE THEY LEAVE THE CLINIC TO ASK, YOU KNOW, IF THEY'RE
8 FEELING OKAY, THEY'RE GIVEN THEIR PRESCRIPTIONS, AND THEY'RE,
9 YOU KNOW, TOLD -- GIVEN LIKE A CHECKLIST, YOU KNOW, IF THERE'S
10 ANY COMPLICATIONS OR ANY PROBLEMS WHO TO CALL, YOU KNOW, CALL
11 THE CLINIC AND HERE'S THE NUMBER. AND JUST -- JUST MORE
12 INFORMATION BEFORE THEY LEAVE.

13 Q AND DO SURGICAL ABORTION PATIENTS VISIT WITH A
14 COUNSELOR BEFORE THEIR PROCEDURE AS WELL?

15 A YES. BEFORE AND AFTER.

16 Q DO YOU PERFORM MORE MEDICATION ABORTIONS OR MORE
17 SURGICAL ABORTIONS?

18 A MORE SURGICAL.

19 Q DO YOU HAVE A SENSE HOW MANY MORE?

20 A WELL, JUST A GUESS WOULD BE PROBABLY 10 PERCENT
21 MEDICATION OR SO, MAYBE 15 PERCENT.

22 Q AND YOU SAID YOU GO TO HOPE CLINIC THREE DAYS A
23 WEEK; IS THAT RIGHT?

24 A YES.

25 Q HOW OFTEN DO YOU SEE PATIENTS IN YOUR ADDICTION

1 PRACTICE?

2 A HOW OFTEN? LIKE HOW MANY DAYS A WEEK OR --

3 Q YES.

4 A WELL, SOME -- I SEE THEM USUALLY TWO TO THREE FULL
5 DAYS AND THEN SOMETIMES I'LL SEE -- SINCE THE TWO PRACTICES
6 ARE VERY CLOSE TOGETHER, I CAN GO BACK AND FORTH, SO I CAN
7 SEE -- IF I'M EXPECTED TO BE AT HOPE, LIKE, LET'S SAY 10:30, I
8 MIGHT SCHEDULE A FEW OF MY ADDICTION PATIENTS AT 8:30 OR 9:00
9 IN THE MORNING AND SEE THEM BEFORE I GO TO HOPE. BECAUSE,
10 LIKE I SAID, IT'S PROBABLY A MILE, THE CLINIC -- THE TWO
11 CLINICS ARE ABOUT A MILE APART, SO IT'S NOT UNCOMMON FOR ME TO
12 GO TO BOTH IN A DAY.

13 Q SO IS IT FAIR TO SAY THAT SOME DAYS -- SOME WEEKS --
14 EXCUSE ME -- YOU WORK A FIVE-DAY WEEK AND SOME WEEKS YOU WORK
15 A SIX-DAY WEEK?

16 A YES, DEFINITELY.

17 Q AND DO YOU LIKE THAT WORK SCHEDULE?

18 A WELL, I LIKE THAT I CAN PUT MY ADDICTION PATIENTS
19 LIKE IF I WANT -- YOU KNOW, USUALLY I'M WORKING MONDAY THROUGH
20 SATURDAY. BUT IF I PLAN IT, THEN I CAN HAVE A MONDAY OFF, SO
21 THEN I MIGHT GET A SUNDAY/MONDAY OFF. THAT'S MAYBE ONCE A
22 MONTH. SO, I MEAN, DO I LIKE WORKING ON SATURDAYS? NOT
23 REALLY, BUT I'VE BEEN DOING IT FOR SO MANY YEARS NOW THAT IT'S
24 ALMOST NORMAL.

25 Q WOULD YOU LIKE TO WORK MORE?

1 **A** PROBABLY NOT.

2 **Q** OKAY. WOULD YOU BE WILLING TO CUT DOWN YOUR
3 ADDICTION PRACTICE TO WORK MORE AT HOPE?

4 **A** I -- I THINK IT'S GOOD THE WAY IT IS. I HAVE A NICE
5 BALANCE, SO I LIKE THE VARIETY THAT I'M NOT JUST DOING ONE OR
6 THE OTHER. I MEAN, I LIKE THE DIFFERENT INTERACTIONS THAT I
7 HAVE WITH MY PATIENTS. I MEAN, I THINK RIGHT NOW MY SCHEDULE,
8 I REALLY LIKE HOW THE BALANCE IS AND I DON'T THINK PHYSICALLY
9 DOING MORE AT HOPE WOULD BE BENEFICIAL FOR MYSELF.

10 IT IS DEFINITELY MORE PHYSICALLY TAXING TO --
11 ALTHOUGH SOMETIMES I DON'T LIKE SITTING AT MY ADDICTION
12 MEDICINE OFFICE FIVE TO EIGHT HOURS IF I -- IF I HAVE A LONG
13 DAY. IT'S JUST SITTING, SITTING. AND AT HOPE, AT LEAST I'M,
14 YOU KNOW, WALKING AND GOING FROM ONE PATIENT TO THE NEXT. SO
15 THERE'S PROS AND CONS TO BOTH, I GUESS.

16 **Q** WOULD YOU BE WILLING TO SPEND LESS TIME WITH YOUR
17 FAMILY TO SPEND MORE TIME WORKING AT HOPE?

18 **A** NOT REALLY. I THINK -- I REALLY ENJOY DOING THINGS
19 OUTSIDE OF THE CLINIC, AND I DON'T -- LIKE I SAID, I MEAN,
20 EVEN RIGHT NOW I DON'T HAVE THAT MUCH FREE TIME, SO... I LIKE
21 GOING TO THE GYM AND DO MY YOGA MAYBE TWICE A WEEK IF I CAN,
22 SO I THINK I HAVE FULL DAYS.

23 **Q** DID YOU TAKE TIME OFF FROM SEEING PATIENTS TO COME
24 HERE TODAY?

25 **A** YES, I DID.

1 Q HOPE HAS SEEN AN INCREASE IN PATIENTS THIS YEAR; IS
2 THAT RIGHT, COMPARED TO PREVIOUS YEARS?

3 A YOU KNOW, I DON'T REALLY KEEP TRACK OF THE NUMBERS,
4 BUT I DEFINITELY THINK THAT -- LIKE, FOR EXAMPLE, THE TUESDAY
5 WORKDAY HAS DEFINITELY INCREASED. SO WHEN I USED TO SEE MAYBE
6 TEN PATIENTS ON A TUESDAY, NOW IT'S CLOSER TO 15 OR SOMETIMES,
7 YOU KNOW, 20 -- 20 SOMETHING WILL SCHEDULE. THEY DON'T ALWAYS
8 SHOW UP ALL OF THEM, BUT I THINK THAT THE NUMBERS HAVE
9 SLIGHTLY INCREASED, YES.

10 Q AND SO HAS YOUR WORKLOAD INCREASED ACCORDINGLY AT
11 HOPE?

12 A YES, I THINK BOTH MY ADDICTION PRACTICE AND HOPE HAS
13 INCREASED IN THE LAST SIX MONTHS OR A YEAR.

14 Q AND WOULD YOU LIKE TO CONTINUE THAT INCREASE?

15 A LIKE I SAID, I THINK RIGHT NOW IS MY LIMIT. I MEAN,
16 I GO HOME EVERY DAY 4:00 OR 5:00 AND, YOU KNOW, JUST TO EVEN
17 GO TO THE MARKET IS, YOU KNOW, SOMETIMES IT'S -- I HAVE TO
18 REALLY SQUEEZE THAT INTO THE WEEK OR SOMETIMES EVERY TWO
19 WEEKS, SO I CAN'T SEE, YOU KNOW, WORKING MORE.

20 Q ARE YOU FAMILIAR WITH BOSSIER CITY MEDICAL SUITE?

21 A YES.

22 Q DO YOU KNOW WHAT SERVICES THEY PROVIDE?

23 A YES.

24 Q AND WHAT SERVICES ARE THOSE?

25 A I BELIEVE THE SAME AS WE DO AT HOPE.

1 **Q** IF BOSSIER CITY MEDICAL SUITE STOPPED PROVIDING
2 ABORTION SERVICES, DO YOU THINK YOU COULD TAKE OVER THEIR
3 ABORTION PATIENTS?

4 **A** WELL, I REALLY DON'T KNOW THEIR NUMBERS AT ALL, SO
5 I -- I MEAN, I CAN'T -- I MEAN, I CAN'T EVEN IMAGINE, YOU
6 KNOW, HOW MANY PATIENTS WE'RE TALKING ABOUT SO, I MEAN, THAT'S
7 KIND OF HARD TO ANSWER. BUT I THINK THAT WE'RE PRETTY BUSY AT
8 HOPE AND WE -- YOU KNOW, THE DAYS THAT WE HAVE PROCEDURES, I
9 MEAN, WE HAVE A FULL WAITING ROOM, WE HAVE THE COUNSELORS AND
10 EVERYBODY -- I MEAN, WE WORK HARD.

11 AND ON OUR FULL DAYS, I MEAN, I CAN'T -- I CAN'T
12 IMAGINE MORE PEOPLE THERE. I MEAN, I GUESS, WE COULD HAVE
13 LONGER DAYS, BUT, LIKE I SAID, WE'RE -- I MEAN, WE'RE THERE
14 PRETTY MUCH TO OUR MAXIMUM, I THINK.

15 **Q** DO YOU KNOW WHAT GESTATIONAL AGE BOSSIER CITY
16 MEDICAL SUITE PROVIDES ABORTIONS UNTIL?

17 **A** I BELIEVE IT'S FURTHER THAN HOPE. MAYBE 20 WEEKS.

18 **Q** IF THE PATIENTS WHO WERE IN THEIR SECOND TRIMESTER
19 THAT BOSSIER CURRENTLY SERVES CAME TO YOU PERSONALLY SEEKING
20 ABORTION SERVICES, WOULD YOU PROVIDE THEM?

21 **A** NO, I COULDN'T.

22 **Q** YOU MENTIONED EARLIER YOUR TRAINING IN ABORTION
23 CARE. DO YOU REMEMBER THAT?

24 **A** YES.

25 **Q** AND WHEN DID THAT TRAINING HAPPEN?

1 A I BELIEVE IT STARTED IN 2008.

2 Q AND JUST GENERALLY, WHAT DID THE TRAINING CONSIST
3 OF?

4 A WELL, IT CONSISTED OF WATCHING THE OTHER PROVIDER DO
5 PROCEDURES, AND I READ A BOOK. I HAD AN ULTRASOUND TRAINING
6 MANUAL, I STUDIED THAT. AND SLOWLY -- SO AS I OBSERVED, I
7 LEARNED ABOUT THE ULTRASOUND AND JUST DIFFERENT THINGS WITH
8 PREGNANCY AND THEN SLOWLY I STARTED DOING ULTRASOUNDS AND --
9 IT WAS A GRADUAL TRAINING PROCESS.

10 Q AND WHEN YOU SAY THE "OTHER PROVIDER," IS THAT
11 DR. DOE NUMBER 3?

12 A YES, IT IS.

13 Q AND HOW LONG DID THE TRAINING LAST?

14 A I BELIEVE EIGHT OR NINE MONTHS.

15 Q SO IT WOULD HAVE ENDED IN -- BEGUN IN 2008 AND
16 CONTINUED INTO 2009?

17 A I THINK SO, YES.

18 Q AND YOU SAID THAT TRAINING WAS DOCUMENTED IN THE
19 EXHIBIT WE LOOKED AT EARLIER?

20 A YES. EVERY PATIENT ENCOUNTER WAS DOCUMENTED.

21 **MR. BROWN:** AND THAT'S EXHIBIT 130 FOR THE RECORD.

22 **BY MR. BROWN:**

23 Q DID YOU DO ANY TRAINING OUTSIDE OF THE CLINIC --
24 OUTSIDE OF HOPE CLINIC?

25 A YES. I WENT TO NEW MEXICO AND TRAINED AT A TEACHING

1 HOSPITAL WHERE THEY INCLUDE ABORTION TRAINING IN THEIR
2 RESIDENCY.

3 Q SO YOU SAID YOU BEGAN PROVIDING PROCEDURES IN 2008.
4 THAT MEANS, I GUESS, YOU'VE BEEN PROVIDING ABORTION CARE FOR
5 SEVEN YEARS AT HOPE CLINIC; IS THAT RIGHT?

6 A APPROXIMATELY, YES.

7 Q AND YOU'VE PROVIDED ABORTION CARE FOR THOUSANDS OF
8 WOMEN; IS THAT CORRECT?

9 A YES.

10 Q DO YOU LIKE IT?

11 A I LOVE MY JOB AT HOPE.

12 Q WHY IS THAT?

13 A WELL, FIRST OF ALL, THE PEOPLE THAT I WORK WITH,
14 IT'S A GREAT ENVIRONMENT. I THINK WE ALL HAVE -- YOU KNOW, WE
15 ALL BELIEVE IN WOMEN'S RIGHTS. WE ENJOY WORKING THERE. WE
16 THINK WE'RE HELPING WOMEN IN ALL AGES AND ALL, YOU KNOW, WALKS
17 OF LIFE, HELPING THEM PURSUE THEIR CAREERS OR WHATEVER IT MAY
18 BE. SO I THINK WE ALL HAVE A PERSONAL GRATIFYING EXPERIENCE
19 WORKING THERE THEN -- SO THAT'S JUST ONE COMPONENT, THE STAFF.

20 AND THEN I THINK -- AND WE ALL -- I MEAN, WE ALL
21 HAVE -- I THINK WE ALL HAVE GREAT ATTITUDES. I MEAN, EVEN THE
22 PATIENTS SAY, "WOW, YOU GUYS ARE SO NICE AND THIS EXPERIENCE,
23 YOU KNOW, YOU MADE IT AS GOOD AS IT CAN BE." I MEAN WE GET A
24 LOT OF FEEDBACK.

25 AND THEN JUST HELPING THE WOMEN. I -- I ENJOY

1 HELPING THEM AND -- AND BEING THERE FOR THEM. AND I THINK
2 THAT THE EMOTIONAL SUPPORT I GIVE THEM JUST BY, YOU KNOW,
3 TALKING TO THEM. IT'S -- YOU KNOW, IT'S KIND OF THERAPEUTIC
4 JUST TO KNOW THAT YOU HELPED SOMEBODY.

5 Q ARE YOU COMFORTABLE WITH THE QUALITY OF THE ABORTION
6 CARE YOU PROVIDE YOUR PATIENTS?

7 A DEFINITELY. I THINK WE DO A GREAT JOB. THE
8 PATIENTS, FOR THE MOST PART, WHEN WE DO GET FEEDBACK, THEY --
9 THEY SAY THAT THE PROCEDURE WASN'T AS BAD AS THEY EXPECTED.
10 AND I DON'T THINK I'D WORK SOMEWHERE IF I DIDN'T THINK THAT,
11 YOU KNOW, IT WAS CLEAN OR IF THERE WAS SLOPPINESS OR -- I
12 COULDN'T -- I COULDN'T DO THAT.

13 I DON'T HAVE TO WORK AT HOPE. YOU KNOW, I MEAN, I
14 COULD BUILD MY ADDICTION PRACTICE AND -- AND BE DONE WITH IT
15 ALL. NOT THAT IT'S NEVER ENTERED MY MIND, BUT, LIKE I SAID, I
16 JUST ENJOY WORKING AT HOPE AND THE COMRADERY AND -- AND
17 HELPING THE WOMEN. I JUST -- I CAN'T SEE, EVEN IF I MOVED
18 AWAY, THAT I WOULD NEVER DO AN ABORTION AGAIN.

19 Q ARE THE WOMEN YOU SAID YOU'RE HELPING, WELL, WHERE
20 ARE THEY FROM?

21 A THEY'RE FROM ALL OVER. I MEAN MOST OF THEM ARE
22 PROBABLY NORTHERN LOUISIANA, BUT A LOT OF THEM ARE FROM EAST
23 TEXAS, ARKANSAS, SOUTH LOUISIANA. I MEAN, RIGHT AS THE CHART
24 IS OPENED, AND I -- AND I WALK INTO THE ROOM, THEIR
25 DEMOGRAPHIC SHEET IS RIGHT THERE. SO I USUALLY GLANCE AT

1 THEIR AGE AND WHERE THEY'RE COMING FROM JUST TO KNOW HOW FAR
2 THEY ARE. AND, LIKE I SAID, MOST FROM NORTHERN LOUISIANA, I'D
3 SAY, BUT IT'S NOT UNCOMMON TO SEE TEXAS, TEXAS, TEXAS, I
4 MEAN...

5 Q LET'S TURN -- WELL, ABORTION HAS SOME KNOWN RISKS
6 EVEN IN THE FIRST TRIMESTER; ISN'T THAT RIGHT?

7 A YES.

8 Q COULD YOU JUST NAME SOME OF THE RISKS THAT APPLY TO
9 ABORTION IN THE FIRST TRIMESTER?

10 A I GUESS THE FIRST THING I WOULD THINK OF IS
11 BLEEDING, WHICH HAPPENS OCCASIONALLY. IT'S NOT VERY COMMON,
12 BUT, YOU KNOW, MORE BLEEDING THAN EXPECTED. THEN THERE COULD
13 BE INCOMPLETE ABORTION WHERE YOU JUST DON'T REMOVE ALL OF THE
14 TISSUE FROM THE UTERUS, AND THAT CAN BE A PROBLEM.

15 INFECTION, WHICH I DON'T THINK I'VE EVER SEEN. WE
16 GIVE EVERY PATIENT PROPHYLACTIC ANTIBIOTICS, WHICH IS NOT
17 MANDATORY AFTER A PROCEDURE, BUT WE GIVE IT. AND THEN THERE
18 COULD BE A TEAR IN THE CERVIX, THERE COULD BE PERFORATION OF
19 THE UTERUS. THOSE ARE JUST THE THINGS THAT I CAN THINK OF.

20 Q AND YOU SAID THAT THESE THINGS OCCUR OCCASIONALLY,
21 SO -- DID I HEAR THAT RIGHT?

22 A YES, THEY CAN HAPPEN.

23 Q YOU'VE NEVER SEEN AN INFECTION?

24 A WELL, YOU KNOW, WE -- I KNOW THAT THERE'S BEEN CALLS
25 TO THE CLINIC AND THE PATIENT SAID, "OH, I THINK I HAVE A

1 FEVER" OR, YOU KNOW, SO THEY'RE PROBABLY -- YOU KNOW, MAYBE
2 THERE HAS BEEN IF THEY DIDN'T GET THEIR ANTIBIOTIC OR MAYBE
3 THEY NEEDED ANOTHER ANTIBIOTIC, BUT I HAVE NEVER SEEN LIKE
4 ANYBODY COME BACK SCEPTIC OR HAD ANY SERIOUS COMPLICATION,
5 LIKE HAD TO BE ADMITTED FOR IV ANTIBIOTICS OR ANYTHING LIKE
6 THAT SO, NO.

7 Q ARE YOU AWARE OF ANY PATIENT WHO'S HAD TO BE
8 ADMITTED TO A HOSPITAL BECAUSE OF AN INFECTION?

9 A NO.

10 Q AND THE REMAINING PROBLEMS THAT YOU MENTIONED OTHER
11 THAN INFECTION, ARE THEY COMMON?

12 A WELL, JUST OFF THE TOP OF MY HEAD, LIKE MAYBE IN A
13 SIX-MONTH PERIOD THERE MIGHT BE A PATIENT THAT HAS MORE
14 BLEEDING THAT WE HAVE TO GIVE A LITTLE BIT MORE MEDICATION OR
15 MASSAGE THE UTERUS. BUT ALL OF THE BLEEDING INCIDENTS, THEY
16 HAVE BEEN CONTROLLED AT THE CLINIC. YOU KNOW, MAYBE IT TAKES
17 AN HOUR OF LONGER, YOU KNOW, MONITORING THEM, KEEPING THEM
18 LONGER AFTER THE PROCEDURE JUST TO MAKE SURE BECAUSE WE --
19 THAT'S, YOU KNOW -- WE'RE ALWAYS MAKING SURE THAT WE DON'T
20 SEND ANYBODY HOME IF THEY'RE HAVING MORE BLEEDING OR SOMETHING
21 OF CONCERN. WE WANT TO MAKE SURE THAT WHEN THE PERSON WALKS
22 OUT OF THAT CLINIC THAT THEY'RE FINE.

23 Q SO TYPICALLY THE PROBLEMS THAT YOU'VE SEEN PRESENT
24 THEMSELVES IN THE CLINIC HAVE BEEN ABLE TO GET RESOLVED WITHIN
25 THE CLINIC ALSO; IS THAT RIGHT?

1 **A** WELL, A BLEEDING INCIDENT, BUT --

2 **Q** OKAY.

3 **A** -- IF IT WAS LIKE AN INCOMPLETE ABORTION, THAT
4 USUALLY COMES BACK FOR A FOLLOW-UP. SO IF THEY TAKE THEIR
5 PREGNANCY TEST AT HOME IN THREE WEEKS AND IT'S STILL POSITIVE,
6 THEY'LL COME IN. AND SOMETIMES WE CAN JUST GIVE THEM SOME
7 MEDICATION TO MAKE THEIR UTERUS CONTRACT AND THEY PASS THE
8 TISSUE, OR OCCASIONALLY THEY DO HAVE TO HAVE A SECOND SUCTION.

9 **Q** AND THOSE ARE ALSO TREATMENTS THAT YOU CAN PROVIDE
10 IN THE CLINIC?

11 **A** YES.

12 **Q** HAVE YOU EVER HAD A PATIENT AT THE CLINIC WITH A
13 COMPLICATION THAT WASN'T WITHIN YOUR CAPACITY TO ADDRESS
14 THERE?

15 **A** THERE WAS ONE PATIENT THAT I HAD SENT TO -- FOR
16 FURTHER EVALUATION TO DR. DOE 3.

17 **Q** AND THAT'S THE ONLY PATIENT THAT YOU'VE HAD TO
18 TRANSFER TO THE CARE OF ANOTHER DOCTOR FROM THE CLINIC BECAUSE
19 OF A COMPLICATION?

20 **A** YES.

21 **Q** AND WHY DID YOU TRANSFER THE PATIENT TO THE CARE OF
22 DR. DOE NUMBER 3?

23 **A** BECAUSE THE PATIENT WAS COMPLAINING OF ABDOMINAL
24 PAIN, AND I WANTED TO MAKE SURE THAT, YOU KNOW, THERE WASN'T
25 ANYTHING ELSE GOING ON OR THAT SHE -- YOU KNOW, SHE WAS STABLE

1 THERE. BUT I HAD DONE THE PROCEDURE, AND THAT WAS FINE. BUT
2 AFTER THE PROCEDURE, SHE COMPLAINED OF PAIN, AND SO I CALLED
3 THE HOSPITAL AND DR. DOE 3 HAPPENED TO BE ON CALL, AND SO HE
4 TOOK CARE OF THE PATIENT FROM THERE.

5 Q SO DID YOU TRANSFER THE PATIENT TO DR. DOE NUMBER 3
6 SPECIFICALLY BECAUSE HE HAPPENED TO BE ON CALL?

7 A YES. I MEAN, IF IT WASN'T HIM, THERE WAS YOU,
8 KNOW -- I THINK THERE'S MAYBE THREE OR FOUR OTHER PHYSICIANS
9 THERE THAT I KNOW, SO I COULD TALK TO THEM, AND THEY WOULD
10 HAVE TAKEN THE PATIENT FOR FURTHER EVALUATION.

11 Q ARE THE SITUATIONS THAT YOU JUST DESCRIBED, AND I'LL
12 READ THEM TO YOU ONCE AGAIN, BLEEDING, INFECTION, TEAR,
13 PERFORATION, AND INCOMPLETE ABORTION, AS FAR AS SURGICAL
14 ABORTION GOES ARE THOSE THE KINDS OF THINGS YOU WOULD EXPECT
15 TO SEE IN THE CLINIC ON THE DAY OF THE PROCEDURE IN THE EVENT
16 THAT THEY WERE TO OCCUR?

17 A YES. ALL EXCEPT POSSIBLY THE INCOMPLETE ABORTION
18 BECAUSE SOMETIMES YOU DON'T KNOW THAT UNTIL AFTER.

19 Q OKAY. AND IN THAT CASE, YOU WOULD KNOW IT WHEN THE
20 PATIENT CAME BACK TO THE CLINIC; IS THAT RIGHT?

21 A YES.

22 Q AND WHAT ABOUT FOR MEDICATION ABORTION? ARE THE
23 RISKS OF MEDICATION ABORTION THINGS THAT WOULD PRESENT
24 THEMSELVES TYPICALLY IN THE CLINIC OR NOT?

25 A USUALLY AFTER, BECAUSE AT THE CLINIC, THEY JUST

1 SWALLOW ONE PILL, SO YOU DON'T KNOW AT THAT POINT IF IT'S
2 GOING TO WORK OR NOT SO, YOU WOULD ALWAYS FIND OUT AFTER.

3 Q AND YOU SAID EARLIER THAT SOMETHING LIKE MAYBE 85 TO
4 90 PERCENT OF YOUR ABORTION PATIENTS ARE DOING SURGICAL
5 ABORTION; IS THAT RIGHT?

6 A SORRY. REPEAT THE QUESTION.

7 Q WELL, YOU SAID THAT SURGICAL ABORTION IS MUCH MORE
8 COMMON --

9 A YES.

10 Q -- FOR YOU TO PERFORM THAN MEDICATION ABORTION; IS
11 THAT RIGHT?

12 A YES.

13 Q SO OF ALL OF THE COMPLICATIONS THAT YOU'VE JUST
14 DISCUSSED, IS IT FAIR TO SAY THAT YOU WOULD EXPECT TO
15 PERSONALLY SEE MOST OF THEM BEFORE THE PATIENT HAD LEFT THE
16 CLINIC?

17 A YES, DEFINITELY.

18 Q BUT IT'S POSSIBLE THAT A PATIENT COULD HAVE A
19 COMPLICATION SUBSEQUENTLY?

20 A YES. I MEAN, IT'S A POSSIBILITY.

21 Q RIGHT. GIVE ME JUST A MOMENT, DOCTOR. CAN YOU GIVE
22 ME A BALLPARK FIGURE OF HOW MANY ABORTIONS YOU'VE PERFORMED
23 OVER THE COURSE OF YOUR CAREER? IF YOU DON'T KNOW, THAT'S
24 OKAY, BUT I'M JUST ASKING IF YOU COULD.

25 A I THINK IN A MONTH IS PROBABLY 250 TO 300.

1 Q SO --

2 A SO IF YOU DID THE MATH --

3 Q SO IT'S FAIR TO SAY MANY THOUSANDS?

4 A YES.

5 Q AND OF THOSE MANY THOUSANDS, YOU'VE ONLY SEEN ONE
6 PATIENT WHO HAD TO BE TRANSFERRED FROM THE CLINIC TO THE
7 HOSPITAL; IS THAT RIGHT?

8 A YES.

9 Q WHAT DOES THE LAW AT ISSUE IN THIS CASE REQUIRE YOU
10 AS AN ABORTION PROVIDER TO DO?

11 A THE LAW THAT I'M CHALLENGING RIGHT NOW?

12 Q THAT'S RIGHT.

13 A IT REQUIRES ME TO HAVE ADMITTING PRIVILEGES AT A
14 HOSPITAL WITHIN 30 MILES OF HOPE.

15 Q AND DO YOU CURRENTLY HAVE ADMITTING PRIVILEGES?

16 A NO.

17 Q AND YOU SAID YOU'VE ONLY HAD ONE PATIENT THAT YOU
18 SENT TO A HOSPITAL OVER THE COURSE OF THE PAST, WELL, SEVEN
19 YEARS; RIGHT, SINCE YOU STARTED WORKING AT HOPE; IS THAT
20 RIGHT?

21 A YES.

22 Q HAVE YOU EVER HEARD OF A PHYSICIAN TRYING TO OBTAIN
23 ADMITTING PRIVILEGES IF HE OR SHE USES THEM OR WOULD BE
24 EXPECTED TO USE THEM, LET'S SAY, ONCE EVERY SEVEN YEARS?

25 A NO, I'VE NEVER HEARD OF THAT.

1 Q HAVE YOU HAD ADMITTING PRIVILEGES AT ANY POINT
2 DURING THE PAST SEVEN YEARS? SINCE YOU LEFT YOUR ER WORK
3 LET'S SAY.

4 A NO. NO.

5 Q DID YOU EVER TRY TO GET THEM?

6 A YES, I HAVE.

7 Q AND WHEN WAS THAT?

8 A WELL, I BELIEVE I STARTED TRYING TO GET THEM OVER A
9 YEAR AGO.

10 Q SO THIS WAS AFTER THE LAW WAS PASSED?

11 A YES.

12 Q SO BEFORE THE LAW WAS PASSED, DID YOU EVER TRY TO
13 OBTAIN ADMITTING PRIVILEGES?

14 A NO.

15 Q AND DO YOU THINK ADMITTING PRIVILEGES WOULD ENABLE
16 YOU TO BETTER CARE FOR YOUR PATIENTS?

17 A NO.

18 Q WHY IS THAT?

19 A BECAUSE I CARE FOR MY PATIENTS REGARDLESS OF WHETHER
20 I HAVE ADMITTING PRIVILEGES. I MEAN, I DON'T THINK THAT THAT
21 CHANGES THE WAY THAT I TREAT MY PATIENTS OR THE QUALITY OF
22 CARE OR HOW I DO MY PROCEDURES. I MEAN THAT DOESN'T HAVE
23 ANYTHING TO DO WITH IT AT ALL.

24 Q SO YOU SAID YOU TRIED TO GET ADMITTING PRIVILEGES AT
25 A HOSPITAL -- OR YOU TRIED TO GET ADMITTING PRIVILEGES AFTER

1 THE ACT THAT WE'RE CHALLENGING WAS PASSED; IS THAT RIGHT?

2 A YES.

3 Q AND DID YOU TRY TO GET ADMITTING PRIVILEGES WITHIN
4 30 MILES OF HOPE CLINIC?

5 A YES.

6 Q SO LET'S WALK THROUGH THE PROCESS OF DOING THAT, AND
7 I WANT TO START AT THE BEGINNING. WHAT WAS THE FIRST STEP IN
8 THAT PROCESS?

9 A AS FAR AS WHAT HOSPITAL DID I GO TO OR APPROACH
10 OR --

11 Q SURE. IF THAT WAS THE FIRST STEP, WE CAN START
12 THERE.

13 A YEAH. SO I THOUGHT THAT SINCE I HAD SOME -- YOU
14 KNOW, I MEAN, I HAD DONE MY RESIDENCY AT LSU, THAT WAS KIND OF
15 THE FIRST PLACE FOR ME TO GO. I KNOW THE RESIDENCY DIRECTOR
16 OF THE FAMILY MEDICINE DEPARTMENT AND, ACTUALLY, I HAD THOUGHT
17 IN THE LAST COUPLE OF YEARS THAT MAYBE MY FAMILY MEDICINE
18 KNOWLEDGE IS DECLINING BECAUSE I'M NOT PRACTICING FAMILY
19 MEDICINE AND, YOU KNOW, AFTER A CERTAIN NUMBER OF YEARS, YOU
20 HAVE TO REAPPLY TO BE BOARD CERTIFIED AS FAR AS LIKE TAKE THE
21 EXAM AGAIN. AND SO I THOUGHT, WELL, LET ME SEE ABOUT GETTING
22 A JOB AT LSU IN THE CLINIC THAT WOULD KEEP UP MY SKILLS, IT
23 WOULD, YOU KNOW, REFRESH MY ASTHMA, HYPERTENSION, DIABETES,
24 AND ALL OF THOSE THINGS THAT I'M NOT CURRENTLY DEALING WITH
25 AND, YOU KNOW, TEACH MEDICAL STUDENTS, RESIDENTS.

1 SO I THOUGHT, WELL, MAYBE THE BEST WAY TO APPROACH
2 THIS IS TO CONTACT THE FAMILY MEDICINE RESIDENCY DIRECTOR AND
3 JUST HAVE A MEETING WITH HIM, TELL HIM, YOU KNOW, WHAT I'M
4 THINKING, THAT I'D LIKE TO PROVIDE SERVICES THERE OR -- YOU
5 KNOW, MAYBE ONE OR TWO DAYS A WEEK. AND SO I CONTACTED HIS
6 SECRETARY AND I SET UP AN APPOINTMENT TO HAVE AN INTERVIEW OR
7 A MEETING WITH DR. HARPER, WHICH I DID HAVE. AND WE WERE
8 TALKING ABOUT, YOU KNOW WHAT I'VE BEEN DOING FOR THE PAST
9 COUPLE OF YEARS AND -- BECAUSE, YOU KNOW, WE HAD KIND OF
10 BEEN -- I MEAN HE WAS MY DIRECTOR, BUT AT THE SAME TIME, WE
11 WERE KIND OF FRIENDS. SO WE HAD A CHAT. AND HE KNEW ABOUT
12 THE LAW AND HE SAID, "WELL, DR. DOE 1, SO YOU WANT TO GET THIS
13 --

14 **Q** I'M SORRY. DR. DOE, CAN I STOP YOU FOR A SECOND?

15 **A** YES.

16 **Q** YOU'RE PRECEDING UNDER A PSEUDONYM, AND SO IF YOU
17 COULD REFER TO YOURSELF AS DR. DOE NUMBER 1.

18 **MR. BROWN:** AND, YOUR HONOR, I DON'T KNOW IF IT
19 WOULD BE POSSIBLE TO CHANGE THAT REFERENCE IN THE TRANSCRIPT?

20 **THE COURT:** ANY OBJECTION?

21 **MR. JOHNSON:** NO OBJECTION, YOUR HONOR.

22 **THE COURT:** OKAY. THAT WILL BE STRICKEN.

23 **BY MR. BROWN**

24 **Q** I'M SORRY. YOU CAN PROCEED, DR. DOE, BUT DO TRY TO
25 JUST REFER TO YOURSELF AS DR. DOE NUMBER 1.

1 A OKAY. SO, ANYWAY, DR. HARPER AND I HAD A DISCUSSION
2 AND HE WAS VERY HAPPY TO OFFER ME A JOB AND WE TALKED ABOUT,
3 YOU KNOW, POSSIBLY TWO HALF DAYS A WEEK, WHAT I WOULD BE
4 DOING, THEY'RE DOING A LITTLE SPORTS MEDICINE THING AT THE
5 CLINIC AS WELL AND MY ULTRASOUND KNOWLEDGE WOULD BE VERY
6 USEFUL AND MAYBE I COULD GO LEARN HOW TO DO, LIKE, KNEE
7 INJECTIONS, SHOULDER INJECTIONS UNDER ULTRASOUND GUIDANCE.

8 AND SO WE TALKED ABOUT LIKE DIFFERENT IDEAS OF
9 THINGS FOR ME TO EXPAND MY KNOWLEDGE AND TEACH, AND SO I WAS
10 PRETTY EXCITED. AND HE SAID, "YEAH, AND THAT WOULD ALSO, YOU
11 KNOW, TAKE CARE OF THIS ADMITTING PRIVILEGE THING," AND I
12 SAID, "YES. THAT'S GREAT."

13 SO HE TOLD ME TO EXPECT AN APPLICATION SENT FROM HIS
14 SECRETARY WITHIN THE NEXT COUPLE OF WEEKS, AND I LEFT THE
15 INTERVIEW. AND THEN I WAITED IN THE MAIL AND ON MY E-MAIL TO
16 RECEIVE THE APPLICATION AND NOTHING CAME. SO I CALLED BACK A
17 COUPLE WEEKS LATER AND I SAID, "YOU KNOW, I DON'T KNOW, I JUST
18 HAVEN'T RECEIVED ANYTHING."

19 AND DR. HARPER WAS KIND OF DISAPPOINTED TO INFORM ME
20 THAT, YOU KNOW, THEY HAVE LIKE MONTHLY MEETINGS WITH THE
21 STAFF -- THE FAMILY MEDICINE STAFF AND, YOU KNOW, THEY DISCUSS
22 DIFFERENT THINGS THAT THEY'RE GOING TO BE DOING OR CHANGES,
23 WHATEVER, AND SO HE SAID THAT HE MENTIONED AT THE MONTHLY
24 MEETING THAT THEY SHOULD EXPECT ME TO COME WORK THERE IN THE
25 NEXT, YOU KNOW, COUPLE OF MONTHS. AND I GUESS AFTER THE

1 MEETING WAS OVER, THERE WAS SOME OBJECTION FROM CERTAIN STAFF
2 ABOUT ME COMING TO WORK THERE BECAUSE OF WHERE I WORK, AT HOPE
3 MEDICAL, AND SO HE SAID THAT HE COULDN'T OFFER ME THE JOB, OR
4 HE COULDN'T -- HE HAD TO TAKE BACK HIS OFFER AND THAT MAYBE I
5 SHOULD GO TO THE OB DEPARTMENT AND TRY TO SEE ABOUT GETTING
6 WORK THERE.

7 **MR. JOHNSON:** YOUR HONOR, WE WOULD JUST OBJECT THAT
8 THIS IS HEARSAY AND ASK THAT IT BE STRICKEN FROM THE RECORD.

9 **THE WITNESS:** I DON'T KNOW ABOUT THAT.

10 **MR. BROWN:** WELL, YOUR HONOR, THIS IS ADMISSIBLE FOR
11 THE PURPOSE OF DR. DOE'S UNDERSTANDING LEADING TO HER DECISION
12 WHETHER OR NOT TO SEEK ADMITTING PRIVILEGES AT LSU SHREVEPORT.

13 **THE COURT:** I'M GOING TO OVERRULE THE OBJECTION.

14 **BY MR. BROWN:**

15 **Q** DID YOU APPLY -- SO JUST TO COMPLETE THE CIRCLE, DID
16 YOU APPLY TO THE OB/GYN DEPARTMENT?

17 **A** WELL, INFORMALLY, KATHALEEN, THE ADMINISTRATOR AT
18 HOPE, CONTACTED DR. COOPER, WHO IS ONE OF THE RESIDENCY
19 DIRECTORS IN THE OB/GYN DEPARTMENT ABOUT ME -- YOU KNOW,
20 BECAUSE AT LSU YOU HAVE TO BE ON THE STAFF. YOU HAVE TO BE,
21 LIKE, INVITED TO HAVE PRIVILEGES THERE. YOU CAN'T JUST -- YOU
22 HAVE TO BELONG TO A DEPARTMENT BASICALLY.

23 SO KATHALEEN APPROACHED DR. COOPER WHO WE'VE HAD
24 CONTACT WITH BEFORE AND -- BECAUSE I'VE SENT HER ECTOPIC
25 PREGNANCIES FROM THE CLINIC AND I'VE TALKED TO HER AND I KIND

1 OF KNOW HER AS WELL. AND, ANYWAY, DR. COPPER SPOKE WITH THE
2 HEAD OF THE DEPARTMENT, AND IT IS IN AN E-MAIL, AND THEY SAID
3 THAT IT WOULD BE INAPPROPRIATE TO HAVE A FAMILY MEDICINE
4 DOCTOR ON THE OB/GYN STAFF. AND I BELIEVE THAT INAPPROPRIATE
5 WAS THE EXACT WORD IN THE E-MAIL.

6 Q SO ULTIMATELY YOU DIDN'T APPLY TO LSU SHREVEPORT TO
7 OBTAIN ADMITTING PRIVILEGES; IS THAT CORRECT?

8 A NO, I DIDN'T.

9 Q NOW, LSU SHREVEPORT OR UNIVERSITY HEALTH IS,
10 OBVIOUSLY, BY THE NAME, IT'S WITHIN 30 MILES OF SHREVEPORT; IS
11 THAT RIGHT?

12 A WITHIN HOPE.

13 Q WITHIN HOPE, THAT'S RIGHT.

14 A YES. YES.

15 Q HOW DO YOU KNOW WHAT HOSPITALS ARE WITHIN 30 MILES
16 OF HOPE CLINIC?

17 A I BELIEVE KATHALEEN DID THE RESEARCH.

18 Q AND KATHALEEN IS -- WHO IS KATHALEEN?

19 A KATHALEEN'S THE ADMINISTRATOR AT HOPE.

20 Q OKAY. DO YOU RECALL SITTING HERE TODAY WHAT
21 HOSPITALS KATHALEEN DETERMINED WERE WITHIN 30 MILES OF HOPE
22 CLINIC?

23 A YES. I BELIEVE I DO.

24 Q AND WHAT WERE THOSE HOSPITALS?

25 A MINDEN MEDICAL CENTER, NORTH CADDO REGIONAL,

1 WILLIS-KNIGHTON, AND SCHUMPERT OR CHRISTUS SCHUMPERT.

2 Q OKAY. AND ALSO LSU?

3 A LSU.

4 Q YES. AND WILLIS-KNIGHTON HAS MULTIPLE CAMPUSES
5 WITHIN THE SHREVEPORT AREA; IS THAT CORRECT?

6 A YES. IT'S LIKE A SYSTEM OR A NETWORK.

7 Q OKAY. SO IT'S RUN AS A UNITARY SYSTEM BUT IT HAS
8 SORT OF MULTIPLE LOCATIONS; IS THAT RIGHT?

9 A I THINK SO, YES.

10 Q AND IS THAT ALSO TRUE FOR CHRISTUS HOSPITAL?

11 A I BELIEVE THAT -- AS FAR AS I KNOW, THERE'S MAYBE
12 TWO -- OR ONE'S CLOSING DOWN AND NOW THERE WILL BE ONE, OR...

13 Q OKAY. AS FAR AS YOU CAN RECALL, THE PROCESS OF
14 SEEKING PRIVILEGES AT WILLIS-KNIGHTON AND CHRISTUS, WAS THAT
15 SORT OF ONE APPLICATION OR WOULD YOU HAVE TO APPLY TO EACH
16 LOCATION SEPARATELY?

17 A WELL, I THINK IT WAS ONE APPLICA- -- WELL, FOR
18 WILLIS-KNIGHTON, THERE'S THE SHREVEPORT SIDE, I GUESS, ON ONE
19 SIDE OF THE RIVER AND I BELIEVE THERE'S LIKE THREE LOCATIONS
20 OR THREE MAIN HOSPITALS AND THEN THERE'S THE BOSSIER, THE
21 OTHER SIDE OF THE RED RIVER.

22 Q AND DO YOU RECALL WHETHER THE ACTUAL APPLICATION
23 FORM FOR WILLIS-KNIGHTON WAS ONE FORM FOR BOTH OR SEPARATE
24 FORMS?

25 A WELL, I --

1 Q BOTH SIDES OF THE RIVER.

2 A -- THINK THERE WAS LIKE A CHECKBOX AND I CHECKED THE
3 SHREVEPORT SIDE -- OR SHREVEPORT BOX THAT HAD THE THREE
4 DIFFERENT HOSPITALS. SO YOU'RE APPLYING FOR, I GUESS, THE
5 THREE DIFFERENT HOSPITALS BUT, I MEAN, THEY ALL BELONG TO
6 WILLIS-KNIGHTON.

7 Q OKAY. WELL, WE CAN TAKE A LOOK -- WE'LL GET INTO
8 THE CHECKBOXES, DON'T YOU WORRY ABOUT THAT.

9 LET ME JUST START -- WE'VE ALREADY TALKED ABOUT LSU
10 SHREVEPORT. LET ME JUST ASK YOU ABOUT NORTH CADDO. DID YOU
11 APPLY TO THERE?

12 A WELL, WE CALLED, OR KATHALEEN CALLED AND THEY SAID
13 SOMETHING ABOUT THEY COULD ONLY TRANSFER OUTPATIENTS AND THAT
14 THEY -- THEY DID NOT HAVE THE CAPACITY TO ACCEPT TRANSFERS OR
15 SOMETHING LIKE THAT, SO THAT ONE WAS OUT.

16 Q OKAY. SO YOU DIDN'T APPLY THERE BECAUSE THAT WAS
17 YOUR UNDERSTANDING?

18 A YES. THEY SAID THAT THEY COULDN'T ACCOMMODATE ANY
19 TYPE OF TRANSFER.

20 Q OKAY. AND YOU MENTIONED, I THINK, MINDEN HOSPITAL;
21 IS THAT RIGHT?

22 A YES.

23 Q DID YOU APPLY TO MINDEN HOSPITAL?

24 A YES, I DID.

25 Q AND DID YOU GET PRIVILEGES THERE?

1 **A** NO.

2 **Q** WHAT DID YOU GET -- YOU KNOW WHAT, LET'S TAKE A LOOK
3 AT EXHIBIT 50 IN THE BINDER. IT SHOULD BE BINDER 1, I THINK,
4 IN FRONT OF YOU, JOINT EXHIBIT 50. IT MAY BE BINDER 2.

5 **THE COURT:** IT'S ONE.

6 **MR. BROWN:** IT'S ONE? OKAY.

7 **BY MR. BROWN:**

8 **Q** AND JUST LET ME KNOW ONCE YOU'VE FOUND THAT.

9 **A** YES, BINDER 1.

10 **Q** EXHIBIT 50?

11 **A** YES.

12 **Q** AND DO YOU RECOGNIZE EXHIBIT 50?

13 **A** YES, I DO.

14 **Q** AND IT'S A LETTER; RIGHT?

15 **A** IT IS.

16 **Q** AND CAN YOU SAY WHO IT'S FROM AND TO?

17 **A** IT IS TO ME FROM THE MINDEN MEDICAL CENTER.

18 **Q** OKAY. AND WHAT'S THE DATE ON IT?

19 **A** IT IS SEPTEMBER 3RD, 2014.

20 **Q** AND YOU RECEIVED THIS LETTER; IS THAT RIGHT?

21 **A** YES.

22 **Q** AND BECAUSE IT'S A CONFIDENTIAL EXHIBIT WE SHOULDN'T
23 READ FROM IT, BUT CAN YOU JUST SAY GENERALLY WHAT IT SAYS?

24 **A** IT THANKS ME FOR MY APPLICATION, AND IT SAYS THAT
25 THEY DO NOT HAVE A NEED FOR A SATELLITE PRIMARY CARE PHYSICIAN

1 AT THIS TIME.

2 Q AND WHAT DO YOU UNDERSTAND THAT TO MEAN?

3 A I DON'T REALLY KNOW WHAT IT MEANS, BUT THAT'S WHAT
4 IT SAYS.

5 Q OKAY. WELL, DO YOU UNDERSTAND IT TO BE A DECISION
6 BASED ON AN EVALUATION OF YOUR QUALIFICATIONS?

7 A NO.

8 Q DO YOU UNDERSTAND IT TO BE A DECISION BASED ON YOUR
9 COMPETENCE AS A PHYSICIAN?

10 A NO.

11 Q SO AFTER RECEIVING THIS LETTER, DID YOU DO ANYTHING
12 FURTHER REGARDING YOUR APPLICATION TO MINDEN?

13 A I DON'T THINK I DID.

14 Q SO LET'S TALK ABOUT CHRISTUS HOSPITAL NEXT. YOU
15 SAID YOU APPLIED TO CHRISTUS; IS THAT CORRECT?

16 A YES.

17 Q YOU CAN PUT BINDER -- THE BINDER YOU HAVE OPEN
18 ASIDE. YOU WON'T NEED IT FOR A WHILE. IF YOU COULD OPEN
19 BINDER 4, PLEASE, AND TAKE A LOOK AT EXHIBIT 132. YOU HAVE IT
20 IN FRONT OF YOU?

21 A YES.

22 Q OKAY. IF YOU WOULDN'T MIND JUST LEAFING THROUGH IT,
23 AND WHEN YOU'VE HAD A CHANCE TO LOOK AT IT, WOULD YOU PLEASE
24 LET ME KNOW WHETHER YOU'RE FAMILIAR WITH THIS EXHIBIT?

25 A YES.

1 Q YOU'VE SEEN IT BEFORE?

2 A YES, I HAVE.

3 Q AND WHAT IS THIS EXHIBIT?

4 A IT IS MY APPLICATION TO CHRISTUS.

5 Q OKAY. AND WOULD YOU PLEASE LOOK AT PAGE 2772, AND
6 LET ME KNOW WHEN YOU'RE THERE?

7 A YES.

8 Q AT THE BOTTOM, THERE'S A DATE THERE, RIGHT?

9 A YES.

10 Q AND WHAT IS THE DATE?

11 A JULY 25TH, 2014.

12 Q OKAY. IS THAT THE DATE THAT YOU APPLIED TO CHRISTUS
13 HOSPITAL?

14 A YES.

15 Q AND IF YOU COULD FLIP FORWARD TO PAGE 2769, PLEASE?
16 LET ME KNOW WHEN YOU'RE THERE.

17 A YES.

18 Q NOW, THIS SHOWS THE CATEGORY OF PRIVILEGES THAT
19 YOU'RE SEEKING; ISN'T THAT RIGHT?

20 A YES.

21 Q AND WHAT IS THE CATEGORY?

22 A IT'S COURTESY.

23 Q AND, AGAIN, WITHOUT READING FROM THE EXHIBIT BECAUSE
24 IT'S CONFIDENTIAL, CAN YOU JUST TELL ME YOUR UNDERSTANDING OF
25 WHETHER COURTESY PRIVILEGES INCLUDES THE ABILITY TO ADMIT

1 PATIENTS?

2 A I BELIEVE SO.

3 Q AND IF YOU COULD FLIP FORWARD A LITTLE FURTHER STILL
4 TO PAGE 2766.

5 A YES.

6 Q THIS PAGE SHOWS THAT YOU WORK AT HOPE MEDICAL GROUP;
7 RIGHT?

8 A YES.

9 Q AND IT ALSO SHOWS THAT YOU HAVE AN ADDICTION
10 PRACTICE; IS THAT RIGHT?

11 A YES.

12 Q DID YOU GET PRIVILEGES AT CHRISTUS HOSPITAL IN
13 RESPONSE TO THIS APPLICATION?

14 A NO.

15 Q DID THEY RESPOND TO YOUR APPLICATION?

16 A I BELIEVE -- I BELIEVE THEY DID.

17 THE COURT: I'M SORRY. I DIDN'T HEAR YOU.

18 THE WITNESS: YES, I BELIEVE THEY DID RESPOND.

19 BY MR. BROWN:

20 Q OKAY. IT WOULD BE HELPFUL IF YOU SORT OF SET THIS
21 BINDER ASIDE BUT KIND OF KEEP IT OPEN IF YOU HAVE ROOM BACK
22 THERE. AND IF YOU WOULDN'T MIND TAKING UP BINDER 2 AND
23 FLIPPING TO EXHIBIT 71. AND LET ME KNOW ONCE YOU'RE THERE.

24 A YES.

25 Q AND IF YOU COULD TURN TO PAGE 1254, PLEASE?

1 **THE COURT:** WHAT'S THE NUMBER, MR. BROWN?

2 **MR. BROWN:** 1254, YOUR HONOR.

3 **A** YES.

4 **BY MR. BROWN:**

5 **Q** AND JUST LET ME -- PLEASE TELL ME WHETHER YOU
6 RECOGNIZE THIS EXHIBIT.

7 **A** YES.

8 **Q** I'M SORRY. THIS SPECIFIC PAGE OF THIS EXHIBIT,
9 1254.

10 **A** YES.

11 **Q** ALL RIGHT. AND IT'S A LETTER; IS THAT RIGHT?

12 **A** YES.

13 **Q** AND WHO IS IT FROM AND TO?

14 **A** IT IS TO ME FROM THE MEDICAL STAFF AT CHRISTUS.

15 **Q** AND WHAT'S THE DATE ON THE LETTER?

16 **A** IT IS AUGUST 25TH, 2014.

17 **Q** AND DID YOU RECEIVE THIS LETTER?

18 **A** YES.

19 **Q** AND IS IT THE RESPONSE THAT CHRISTUS GAVE YOU FROM
20 YOUR JULY 2014 APPLICATION?

21 **A** YES.

22 **Q** AND, AGAIN, BECAUSE THIS IS A CONFIDENTIAL EXHIBIT,
23 WITHOUT READING FROM IT, CAN YOU SAY GENERALLY WHAT THE LETTER
24 SAYS?

25 **A** IT'S BASICALLY ASKING FOR -- IT'S ASKING FOR MORE

1 INFORMATION.

2 Q AND DID YOU PROVIDE MORE INFORMATION IN RESPONSE TO
3 THIS LETTER?

4 A YES, I DID.

5 Q WOULD YOU PLEASE FLIP TO -- I'M SORRY. DOES THE
6 LETTER GRANT YOUR APPLICATION FOR PRIVILEGES?

7 A NO.

8 Q DOES IT DENY YOUR APPLICATION FOR PRIVILEGES?

9 A NO.

10 Q ALL RIGHT. COULD YOU FLIP TO PAGE 1267 OF THE SAME
11 EXHIBIT, PLEASE?

12 A YES.

13 Q AND WOULD YOU LET ME KNOW WHETHER YOU'RE FAMILIAR
14 WITH PAGE 1267?

15 A YES, I AM.

16 Q AND IT'S A LETTER; RIGHT?

17 A IT IS.

18 Q AND WHO IS IT FROM AND TO?

19 A IT IS TO CHRISTUS FROM ME.

20 Q OKAY. SO YOU SENT THIS LETTER?

21 A YES.

22 Q AND WHAT'S THE DATE ON THE LETTER?

23 A SEPTEMBER 17TH, 2014.

24 Q AND IS THIS LETTER IN RESPONSE TO THE AUGUST LETTER
25 THAT YOU GOT FROM CHRISTUS?

1 **A** YES.

2 **Q** AND, AGAIN, BECAUSE THIS IS CONFIDENTIAL, COULD YOU
3 SIMPLY SAY GENERALLY WHAT INFORMATION IS INCLUDED IN THE
4 LETTER?

5 **A** IT'S -- IT'S AN EXPLANATION OF SOME OF THE THINGS
6 THAT I DID AFTER COMPLETING MEDICAL SCHOOL AND WHERE I DID MY
7 RESIDENCY AND WHERE I WORKED AFTER RESIDENCY AND THINGS LIKE
8 THAT.

9 **Q** AND DID YOU PROVIDE THIS INFORMATION IN RESPONSE TO
10 CHRISTUS AUGUST REQUEST FOR MORE INFORMATION?

11 **A** YES.

12 **Q** OKAY. DOES THE LETTER ALSO REFER TO ATTACHMENTS?

13 **A** LET'S SEE. YES.

14 **Q** OKAY. COULD YOU TURN TO EXHIBIT 1 -- I'M SORRY.
15 THE ATTACHMENTS ARE THINGS THAT YOU -- ARE THEY ALSO THINGS
16 THAT YOU PROVIDED IN RESPONSE TO CHRISTUS AUGUST'S 2014
17 REQUEST?

18 **A** YES.

19 **Q** COULD YOU TURN TO EXHIBIT 133 IN THE SAME BINDER,
20 PLEASE?

21 **MR. BROWN:** OH, IT'S A DIFFERENT BINDER?

22 **MR. JOHNSON:** YES.

23 **BY MR. BROWN**

24 **Q** I'M SORRY. IT'S BINDER 4. SO YOU SHOULD HAVE
25 BINDERS KIND OF 2 AND 4 OPEN IN FRONT OF YOU, AND YOU'LL BE

1 GOING BACK AND FORTH BETWEEN THEM. YOU'LL HAVE VERY GOOD ARMS
2 BY THE TIME THIS EXAMINATION IS OVER, NOT THAT YOU DON'T
3 ALREADY.

4 A YES.

5 Q ARE YOU THERE AT 133? IF YOU COULD JUST LEAF
6 THROUGH THIS EXHIBIT FOR A MOMENT AND TELL ME WHETHER YOU'VE
7 SEEN IT BEFORE.

8 A YES, I HAVE.

9 Q AND JUST VERY GENERALLY, BECAUSE THIS IS
10 CONFIDENTIAL, WHAT MATERIAL -- WHAT IS THIS?

11 A IT HAS SOME OF THE THINGS THAT THEY ASKED FOR THAT
12 SAID WERE MISSING FROM MY APPLICATION, SO I FILLED OUT THESE
13 PAPERS THAT -- INFORMATION THAT THEY REQUESTED.

14 Q OKAY. AND ARE THESE SOME OF THE ATTACHMENTS THAT
15 YOU REFERRED TO IN THE LETTER WE JUST READ FROM AT 1267?

16 A YES.

17 Q OKAY. AND WOULD YOU FLIP TO THE NEXT EXHIBIT, 134?

18 A YES.

19 Q AND ARE YOU FAMILIAR WITH THIS EXHIBIT?

20 A YES.

21 Q AND, AGAIN, BECAUSE THIS IS CONFIDENTIAL, WOULD YOU
22 JUST SAY GENERALLY WHAT THIS EXHIBIT IS?

23 A IT IS MY MEDICAL HISTORY FORM THAT THEY ASKED FOR.

24 Q OKAY. SO THIS WAS ALSO PROVIDED IN RESPONSE TO
25 THEIR REQUEST FOR FURTHER INFORMATION?

1 A YES.

2 Q AND WAS IT ALSO ATTACHED TO YOUR SEPTEMBER 2014
3 LETTER?

4 A YES, IT WAS.

5 Q SO YOU CAN SET THAT ASIDE FOR A MOMENT AND GO BACK
6 TO BINDER 2, EXHIBIT 71, AND PLEASE LET ME KNOW ONCE YOU'RE
7 THERE.

8 A YES.

9 Q OKAY. SO LET ME ASK YOU THIS QUESTION BEFORE I TURN
10 TO AN EXHIBIT. AFTER PROVIDING THIS ADDITIONAL INFORMATION
11 THAT WE DISCUSSED IN THE MONTH OF SEPTEMBER 2014, DID CHRISTUS
12 HOSPITAL GRANT YOU ADMITTING PRIVILEGES?

13 A NO.

14 Q DID THEY DENY YOUR APPLICATION FOR ADMITTING
15 PRIVILEGES?

16 A NO.

17 Q COULD YOU PLEASE TURN TO PAGE 1268 IN THIS
18 EXHIBIT 71? LET ME KNOW WHEN YOU'RE THERE.

19 A YES.

20 Q HAVE YOU SEEN THIS EXHIBIT BEFORE?

21 A YES.

22 Q SPECIFICALLY THIS PAGE, 1268?

23 A YES.

24 Q AND IT'S A LETTER; RIGHT?

25 A IT IS.

1 Q AND WHO IS IT FROM AND TO?

2 A IT IS TO ME FROM CHRISTUS.

3 Q AND DID YOU RECEIVE THIS LETTER?

4 A YES.

5 Q AND WHAT'S THE DATE ON IT?

6 A OCTOBER 14TH, 2014.

7 Q OKAY. AND AGAIN, BECAUSE THIS IS A CONFIDENTIAL
8 EXHIBIT, WILL YOU PLEASE SAY GENERALLY WITHOUT READING FROM IT
9 WHAT THIS -- WHAT THIS LETTER SAYS OR WHAT IT'S ABOUT?

10 A BASICALLY IT IS THAT THEY NEED MORE INFORMATION IN
11 SUPPORT OF MY APPLICATION.

12 Q OKAY. DID YOU PROVIDE MORE INFORMATION IN SUPPORT
13 OF YOUR APPLICATION?

14 A I BELIEVE I DID.

15 Q WOULD YOU PLEASE MOVE TO 1273 OF EXHIBIT 71?

16 A YES.

17 Q DO YOU RECOGNIZE PAGE 1273?

18 A YES.

19 Q AND IT'S A LETTER; RIGHT?

20 A IT IS.

21 Q AND WHO IS IT FROM AND TO?

22 A IT IS TO CHRISTUS FROM ME.

23 Q AND WHAT'S THE DATE ON THIS LETTER?

24 A IT'S OCTOBER 20TH, 2014.

25 Q IS THIS YOUR RESPONSE TO YOUR -- TO CHRISTUS'

1 OCTOBER 14TH LETTER TO YOU?

2 A YES.

3 Q AND, AGAIN, WITHOUT READING FROM IT BECAUSE IT'S
4 CONFIDENTIAL, WOULD YOU JUST SAY GENERALLY WHAT THE LETTER
5 COVERS?

6 A YES. IT -- IT HAS AN ATTACHED MEDICAL HISTORY FORM
7 AND INFORMATION THAT THEY ASKED ABOUT WHERE I WORKED. AND
8 THEN IT STATES THAT I WILL GET MY BADGE, WHICH IS SOMETHING
9 THAT THEY ASKED ME TO GO DO.

10 Q OKAY. DID YOU UNDERSTAND WHY YOU WERE BEING ASKED
11 TO GO GET YOUR BADGE?

12 A WELL, I THOUGHT IT WAS A LITTLE STRANGE TO BE ASKED
13 TO GET A BADGE WHEN USUALLY, IN ALL OF MY EXPERIENCE, THAT'S
14 USUALLY THE LAST THING YOU GET ONCE A HOSPITAL ACCEPTS YOU OR
15 YOU HAVE AN INTERVIEW OR THEY SAY THAT, YES, YOU KNOW, WELCOME
16 ABOARD OR WHATEVER, NOW GO GET YOUR BADGE. SO IT WAS A LITTLE
17 STRANGE.

18 Q SO AS OF OCTOBER 2014, YOU HADN'T BEEN TOLD THAT YOU
19 WERE IN; IS THAT RIGHT?

20 A CORRECT.

21 Q YOU HADN'T BEEN TOLD THAT YOU HAD ADMITTING
22 PRIVILEGES; IS THAT RIGHT?

23 A CORRECT.

24 Q AND YOU HADN'T HAD AN INTERVIEW WITH CHRISTUS
25 HOSPITAL; IS THAT CORRECT?

1 **A** NO.

2 **Q** SO IF YOU COULD, PLEASE, TURN TO THE LAST PAGE OF
3 EXHIBIT 71, WHICH IS 1279.

4 **A** YES.

5 **Q** BEFORE I ASK YOU A QUESTION ABOUT IT, LET ME ASK:
6 DID YOU -- DID YOU MAKE AN APPOINTMENT TO GO PICK UP YOUR
7 BADGE?

8 **A** I DIDN'T MAKE AN APPOINTMENT. I ASKED KATHALEEN IF
9 SHE COULD CALL AND FIND OUT IF IT WAS TRUE THAT, YOU KNOW,
10 THEY WERE EXPECTING ME FOR A BADGE. I DIDN'T WANT TO WALK
11 INTO THE HOSPITAL AND JUST SAY, "HEY, I'M HERE FOR MY BADGE."

12 I MEAN, LIKE I SAID, IT JUST FELT KIND OF STRANGE TO
13 ME. I MEAN USUALLY LIKE I REMEMBER, YOU KNOW, BEFORE I
14 STARTED WORKING AS A RESIDENT AT LSU, I MEAN, THERE WAS A LOT
15 OF, YOU KNOW, LIKE ALMOST FINGERPRINTING AND WHATEVER. I MEAN
16 IT WAS JUST LIKE THEY HAD -- YOU WENT THROUGH A LOT OF STEPS
17 TO BE ABLE TO WORK THERE. AND THEN ONCE YOU DID, THAT WAS
18 LIKE MAYBE THE FIRST THING YOU DID ON DAY ONE IS GO GET YOUR
19 BADGE. YOU DON'T --

20 **Q** SO YOU HAD KATHALEEN CALL; IS THAT RIGHT?

21 **A** YES, TO CALL AND SEE. YEAH, WILL YOU, YOU KNOW,
22 CALL THIS DEPARTMENT HERE, WHICH IT'S THE MEDICAL STAFF OFFICE
23 AND THERE'S A PHONE NUMBER, AND PLEASE CALL AND MAKE SURE LIKE
24 MY NAME IS ON THE LIST OR WHATEVER AND MAKE ME AN APPOINTMENT.
25 I REMEMBER EVEN TELLING HER, YOU KNOW, I'M AVAILABLE MONDAY

1 MORNING OR WHATEVER AND JUST SET THE APPOINTMENT SO I CAN GO
2 GET THIS DONE.

3 Q AND WAS THE APPOINTMENT MADE?

4 A KATHALEEN CALLED, BUT THE APPOINTMENT WAS NEVER
5 MADE.

6 Q AND WHAT IS YOUR UNDERSTANDING OF WHY THE
7 APPOINTMENT WAS NEVER MADE?

8 A I BELIEVE THEY REFERRED OR THEY GAVE A PHYSICIAN'S
9 NAME AND NUMBER FOR ME TO CALL, AND IT JUST NEVER -- YOU KNOW,
10 THEY SAID THAT -- I THINK THEY ASKED ME TO CALL SOME OTHER
11 DOCTOR. AND THEN ONCE I CALLED HER, SHE SAID, "OH, WELL, YOU
12 KNOW, THESE AREN'T THE KIND OF PRIVILEGES YOU WANT," OR "WHAT
13 IS IT THAT YOU WANT?"

14 IT WAS A VERY -- LIKE A FIVE-MINUTE PHONE CALL THAT
15 SHE SAID, "I THINK YOU NEED TO APPLY FOR SOME KIND OF A
16 NONSTAFF CAREGIVER TYPE OF APPLICATION." IT WAS A DIFFERENT
17 TYPE OF PRIVILEGES, BUT I BELIEVE THOSE WOULDN'T HAVE MET THE
18 REQUIREMENTS OF ADMITTING PRIVILEGES BECAUSE I DON'T THINK
19 THAT -- IT WAS JUST SOMETHING WEIRD THAT IT DIDN'T MEET THE
20 REQUIREMENTS AND IT WAS SOME KIND OF A NONSTAFF CAREGIVER
21 APPOINTMENT.

22 Q OKAY. WELL, LET'S LOOK AT PAGE 1279 THAT'S IN FRONT
23 OF YOU.

24 A YES.

25 Q DO YOU RECOGNIZE PAGE 1279?

1 A YES.

2 Q AND IT'S A LETTER; IS THAT CORRECT?

3 A YES.

4 Q AND WHO IS IT FROM AND TO?

5 A IT IS TO ME FROM CHRISTUS.

6 Q ALL RIGHT. AND DID YOU RECEIVE THIS LETTER?

7 A YES, I DID.

8 Q AND WHAT'S THE DATE ON IT?

9 A DECEMBER 17TH, 2014.

10 Q AND WITHOUT READING FROM IT, CAN YOU TELL ME
11 GENERALLY WHAT THE LETTER SAYS?

12 A BASICALLY BECAUSE I DIDN'T GO GET MY BADGE, MY
13 APPLICATION IS STILL INCOMPLETE, AND IF I DON'T -- I MEAN I
14 GUESS IF IT REMAINS INCOMPLETE 90 DAYS AFTER RECEIPT, THEN
15 THEY'RE GOING TO WITHDRAW IT.

16 Q OKAY. AND YOU SAID YOU HAD A CONVERSATION WITH
17 SOMEBODY AT CHRISTUS BY TELEPHONE REGARDING YOUR APPLICATION
18 SUBSEQUENT TO RECEIVING -- WAS IT SUBSEQUENT TO RECEIVING THIS
19 LETTER OR WAS IT BEFORE?

20 A I BELIEVE IT WAS AFTER.

21 Q OKAY. AND THIS CONVERSATION INCLUDED A SUGGESTION
22 THAT YOU APPLY TO BE -- FOR A DIFFERENT KIND OF PRIVILEGES; IS
23 THAT CORRECT?

24 A YES.

25 Q COULD YOU TURN TO EXHIBIT 190 IN BINDER 4, JOINT

1 EXHIBIT 190?

2 A YES.

3 Q LET ME KNOW WHEN YOU'RE THERE.

4 A YES.

5 Q YOU'RE THERE? OKAY. I'M SORRY. DO YOU RECOGNIZE

6 EXHIBIT 190?

7 A YES.

8 Q AND IT'S AN E-MAIL; CORRECT?

9 A IT IS.

10 Q AND WHO IS IT FROM AND TO?

11 A IT IS TO KATHALEEN FROM CHRISTUS.

12 Q AND WHAT'S THE DATE ON THE E-MAIL?

13 A JANUARY 8TH, 2015.

14 Q AND GENERALLY, WITHOUT READING FROM IT BECAUSE IT'S

15 A CONFIDENTIAL EXHIBIT, CAN YOU SAY WHAT THIS E-MAIL SAYS?

16 A IT LOOKS LIKE IT'S A -- IT'S A LETTER ASKING THAT

17 I -- OR SAYING THAT MY APPLICATION -- LET'S SEE. LET ME READ

18 IT AGAIN. I GUESS IT'S ABOUT -- MORE ABOUT THIS NONSTAFF

19 CAREGIVER AND HOW TO GO ABOUT GETTING THIS TYPE OF PRIVILEGES.

20 Q AND DID YOU -- THERE'S AN APPLICATION ATTACHED; IS

21 THAT CORRECT?

22 A LET'S SEE.

23 Q IF YOU READ FURTHER IN THE EXHIBIT.

24 A YES.

25 Q AND THAT'S THE APPLICATION FOR NONSTAFF CAREGIVING;

1 IS THAT RIGHT?

2 A YES, I BELIEVE SO.

3 Q AND DID YOU APPLY TO BE A NONSTAFF CAREGIVER AT --
4 I'M SORRY -- AT CHRISTUS HOSPITAL?

5 A I DON'T THINK I DID, BECAUSE THIS WOULD NOT ALLOW ME
6 TO ADMIT PATIENTS. IT SAYS SOMETHING ABOUT OUTPATIENT STATUS
7 ONLY.

8 Q OKAY.

9 A SO I'M NOT SURE EVEN WHAT THAT REALLY MEANS.

10 Q IF YOU COULD MOVE TO THE FIRST PAGE OF THIS EXHIBIT
11 ONCE MORE. THE E-MAIL PART.

12 A YES.

13 Q AND YOU'LL SEE THAT IN ADDITION TO THE FROM AND TO,
14 THERE'S A CC LINE. DO YOU SEE THAT THERE?

15 A YES.

16 Q AND ONE OF THE CCS IS TO AN INDIVIDUAL NAMED MARISA
17 JOHNSON. DO YOU SEE THAT?

18 A YES.

19 Q DO YOU KNOW THAT INDIVIDUAL?

20 A IT COULD BE THE PERSON THAT I CALLED. IF IT'S A --
21 I DON'T KNOW IF SHE'S A PHYSICIAN, BUT THERE WAS A PHYSICIAN
22 THAT I WAS TOLD TO CALL TO FIND OUT MY OTHER OPTIONS.

23 Q OKAY.

24 A I'M NOT SURE IF THAT WAS HER.

25 Q OKAY. YOU CAN PUT THAT ASIDE. SO IS IT YOUR

1 UNDERSTANDING THAT CHRISTUS EVER GRANTED YOU ADMITTING
2 PRIVILEGES?

3 A NO, THEY DIDN'T.

4 Q DID THEY DENY YOUR APPLICATION FOR ADMITTING
5 PRIVILEGES?

6 A I'M NOT SURE IF IT'S --

7 Q OKAY.

8 A -- IF IT'S CALLED DENIAL, BUT...

9 Q OKAY. WELL, DO YOU UNDERSTAND THAT THEY REACHED A
10 DECISION BASED ON AN EVALUATION OF YOUR QUALIFICATIONS?

11 A NO.

12 Q DO YOU UNDERSTAND THAT THEY REACHED A DECISION ON
13 YOUR APPLICATION BASED ON YOUR COMPETENCE AS A PHYSICIAN?

14 A I DON'T THINK SO.

15 Q ARE YOU AWARE OF THE ETHICAL DIRECTIVES FOR CATHOLIC
16 HOSPITALS?

17 A I KNOW THERE IS ONE.

18 Q WELL, JUST TAKE A LOOK AT EXHIBIT 133 AGAIN IN
19 BINDER 4.

20 A YES.

21 Q AND FLIP TO PAGE -- I THINK IT'S THE FIRST PAGE
22 THERE, 2796.

23 A YES.

24 Q AND IN THE SECOND PARAGRAPH THERE, DOES IT REFER TO
25 THIS CODE OF ETHICS FOR CATHOLIC HOSPITALS?

1 A YES.

2 Q AND DO YOU KNOW WHETHER CHRISTUS REQUIRES ITS
3 PHYSICIANS TO ADHERE TO THIS DIRECTIVE?

4 A I THINK SO.

5 Q OKAY. I THINK WE'RE DONE WITH CHRISTUS HOSPITAL.
6 YOU ALSO MENTIONED WILLIS-KNIGHTON, I BELIEVE?

7 A YES.

8 Q DID YOU APPLY FOR ADMITTING PRIVILEGES AT
9 WILLIS-KNIGHTON?

10 A I DID.

11 Q WOULD YOU TURN TO EXHIBIT 53 IN BINDER 1, PLEASE?

12 A FIFTY-THREE?

13 Q THAT'S CORRECT.

14 A YES.

15 Q AND LEAF THROUGH IT A LITTLE BIT IF YOU WOULDN'T
16 MIND AND JUST TELL ME WHETHER YOU'VE SEEN THIS EXHIBIT BEFORE.

17 A YES.

18 Q COULD YOU JUST GIVE ME ONE MOMENT, DOCTOR? I
19 APOLOGIZE FOR THAT INTERRUPTION. YOU SAID YOU'RE FAMILIAR
20 WITH THIS EXHIBIT; IS THAT CORRECT?

21 A YES.

22 Q AND, GENERALLY, BECAUSE THIS IS A CONFIDENTIAL
23 EXHIBIT, SO YOU CAN'T READ FROM IT, CAN YOU TELL ME WHAT THIS
24 EXHIBIT IS?

25 A IT LOOKS LIKE MY APPLICATION.

1 Q TO WILLIS-KNIGHTON?

2 A YES.

3 Q IF YOU COULD PLEASE TURN TO PAGE 3537, AND LET ME
4 KNOW WHEN YOU'RE THERE.

5 A YES.

6 Q IS THERE A DATE THAT'S ON THIS PAGE?

7 A I DON'T SEE A DATE. OH, TELL ME THE PAGE YOU WANT
8 ME TO LOOK AT AGAIN.

9 Q 3537. I'M SORRY. PAGE 711.

10 A YES.

11 Q THERE'S A DATE ON THAT PAGE?

12 A THERE IS.

13 Q AND WHAT IS THE DATE?

14 A IT'S JUNE 15TH, 2014.

15 Q IS THAT THE DATE OF YOUR APPLICATION TO
16 WILLIS-KNIGHTON HOSPITAL?

17 A YES, IT IS.

18 Q AND IF YOU COULD FLIP TO PAGE 703, PLEASE.

19 A YES.

20 Q AND DOES THIS PAGE INDICATE WHAT KIND OF PRIVILEGES
21 YOU APPLIED FOR?

22 A YES.

23 Q AND WHAT KIND OF PRIVILEGES WAS THAT?

24 A COURTESY.

25 Q AND IS IT YOUR UNDERSTANDING THAT THAT'S -- COURTESY

1 PRIVILEGES AT WILLIS-KNIGHTON WOULD ALLOW YOU TO ADMIT
2 PATIENTS THERE?

3 A YES.

4 Q AND THIS PAGE ALSO INDICATES THAT YOU APPLIED TO
5 HOSPITALS ON THE SHREVEPORT SIDE OF THE RIVER; IS THAT
6 CORRECT?

7 A YES.

8 Q IS IT YOUR UNDERSTANDING THAT APPLYING TO HOSPITALS
9 ON THE BOSSIER SIDE WOULD HAVE INVOLVED USING THIS SAME
10 APPLICATION?

11 A IT LOOKS LIKE IT.

12 Q IS IT YOUR UNDERSTANDING THAT YOUR APPLICATION WOULD
13 HAVE BEEN TREATED ANY DIFFERENTLY IF YOU HAD APPLIED TO
14 BOSSIER IN ADDITION TO OR INSTEAD OF THE SHREVEPORT SIDE?

15 A I DON'T THINK IT WOULD HAVE MADE A DIFFERENCE.

16 Q OKAY. AND WHY DID YOU -- WELL, LET ME ASK YOU THIS
17 FIRST, PAGE -- THIS PAGE THAT WE'RE LOOKING AT CONTAINS THE
18 ADDRESS OF THE HOPE MEDICAL GROUP; IS THAT RIGHT?

19 A YES.

20 Q IT SHOWS YOU WORK THERE?

21 A YES.

22 Q AND IT ALSO SHOWS YOU HAVE AN ADDICTION PRACTICE; IS
23 THAT RIGHT?

24 A YES.

25 Q AND IF YOU COULD TURN TO PAGE 707, PLEASE.

1 **A** YES.

2 **Q** AND DOES THIS PAGE SHOW THE REASON THAT YOU APPLIED
3 TO WILLIS-KNIGHTON? WHAT YOU WERE SEEKING TO DO WITH YOUR
4 PRIVILEGES?

5 **A** YES.

6 **Q** AND, GENERALLY, WHAT DID YOU TELL WILLIS-KNIGHTON
7 THAT YOU WERE SEEKING TO DO WITH YOUR PRIVILEGES?

8 **A** WELL, THE WILLIS-KNIGHTON SYSTEM HAS AN ADDICTION
9 RECOVERY CENTER, WE CALL IT ARC, AND SINCE I CONSIDER MY
10 PRACTICE TO BE -- YOU KNOW, MY PRIMARY PRACTICE IS ADDICTION
11 MEDICINE, I FELT THAT IF I APPLIED AND LET THEM KNOW THAT I
12 HAVE A LARGE ADDICTION PRACTICE AND IT'S A POTENTIAL AREA FROM
13 WHICH I CAN ADMIT PATIENTS TO THEIR REHAB SERVICES. SO I
14 APPLIED MAINLY TO SHOW THAT, HEY, THERE'S POTENTIAL ADMISSIONS
15 HERE FROM MY PRACTICE TO THE ADDICTION RECOVERY CENTER.

16 **Q** SO YOU FEEL THAT IT'S MORE LIKELY THAT YOU WOULD
17 ADMIT AN ADDICTION PATIENT; IS THAT FAIR?

18 **A** DEFINITELY MORE -- MORE LIKELY MORE OFTEN WOULD I
19 HAVE AN UNSTABLE PATIENT FROM MY ADDICTION PRACTICE, YES.

20 **Q** AND DID YOU -- DO YOU THINK IT WOULD BE HELPFUL FOR
21 YOUR ABORTION PATIENTS FOR YOU TO HAVE ADMITTING PRIVILEGES?

22 **A** I DON'T THINK IT WOULD CHANGE THINGS. I DON'T
23 THINK -- I MEAN IT'S NOT GOING TO -- IT'S NOT GOING TO CHANGE
24 THE CARE DEFINITELY.

25 **Q** OKAY. AND WHERE IS -- WELL, LET ME JUST ASK YOU

1 THIS: IS THE ADDICTION CENTER YOU JUST REFERRED TO ON THE
2 BOSSIER SIDE OR ON THE SHREVEPORT SIDE?

3 A SHREVEPORT.

4 Q IS THAT WHY YOU CHOSE TO APPLY TO THE SHREVEPORT
5 SIDE?

6 A YES. AND ALSO, I GUESS, IT'S THREE HOSPITALS SO I
7 FIGURED, YOU KNOW, MORE LIKELY IF THEY THOUGHT -- I MEAN IT'S
8 CLOSER, AND THAT'S JUST WHAT I PICKED.

9 Q CLOSER TO HOPE?

10 A YES. I MEAN IT'S ON THAT SIDE. THEY'RE CLOSER, THE
11 HOSPITALS ARE CLOSER, DEFINITELY THAN THE BOSSIER HOSPITAL.

12 Q AND IN RESPONSE TO THIS APPLICATION, WERE YOU
13 GRANTED PRIVILEGES AT WILLIS-KNIGHTON?

14 A NO.

15 Q DID THEY RESPOND TO YOUR APPLICATION IN SOMEWAY?

16 A I BELIEVE THEY DID, YES.

17 Q WOULD YOU MIND TURNING TO 51, TAB 51, IN THE SAME
18 BINDER?

19 A YES.

20 Q AND WOULD YOU LOOK AT PAGE 508?

21 A YES.

22 Q DO YOU RECOGNIZE PAGE 508?

23 A I DO.

24 Q AND IT'S A LETTER; RIGHT?

25 A IT IS.

1 Q AND WHO IS IT FROM AND TO?

2 A IT IS TO ME FROM WILLIS-KNIGHTON.

3 Q DID YOU RECEIVE THIS LETTER?

4 A YES, I DID.

5 Q AND WHAT'S THE DATE ON IT?

6 A JULY 28TH, 2014.

7 Q OKAY. AND WITHOUT READING FROM IT BECAUSE IT'S
8 CONFIDENTIAL, WOULD YOU SAY GENERALLY WHAT THE LETTER SAYS?

9 A IT BASICALLY SAYS THAT I WOULD HAVE TO -- SINCE I
10 APPLIED FOR PRIVILEGES IN ADDICTION MEDICINE, BUT I HAD NOT
11 DONE A RESIDENCY IN ADDICTION MEDICINE, SO THAT I WOULD HAVE
12 TO RESUBMIT MY APPLICATION UNDER A SPECIALTY THAT I DID A
13 RESIDENCY IN.

14 Q AND YOU SAID ADDICTION MEDICINE IS A NEW SPECIALTY;
15 IS THAT RIGHT?

16 A IT IS.

17 Q DO THEY HAVE RESIDENCY PROGRAMS?

18 A JUST NEW UPCOMING -- LIKE THEY'RE TRYING -- THEY
19 JUST SUBMITTED THE APPLICATION PROCESS TO THE BOARD TO BECOME
20 THEIR OWN SPECIALTY BOARD, SO IT'S IN THE CERTIFICATION
21 PROCESS NOW. AND THEY HAVE TO HAVE A CERTAIN AMOUNT OF
22 RESIDENCIES TO BECOME THEIR OWN SPECIALTY. SO I THINK THE
23 GOAL WAS LIKE 50 RESIDENCY PROGRAMS IN THE YEAR 2015, AND I'M
24 NOT SURE IF THEY QUITE MADE IT THERE YET, BUT...

25 Q SO IT'S IN THE PROCESS OF BECOMING A FORMAL --

1 **A** IT IS.

2 **Q** AND THE NUMBER OF RESIDENCY PROGRAMS IS, WOULD YOU
3 SAY, SMALL BUT GROWING?

4 **A** DEFINITELY.

5 **Q** AND THOSE ARE NEW RESIDENCY PROGRAMS; IS THAT RIGHT?

6 **A** ALL NEW.

7 **Q** SO WOULD YOU EXPECT THAT THE PHYSICIANS CURRENTLY
8 AFFILIATED WITH WILLIS-KNIGHTON'S ADDICTION CENTER HAVE
9 RESIDENCIES -- HAVE DONE RESIDENCIES IN ADDICTION MEDICINE?

10 **A** I DOUBT IT.

11 **Q** DO YOU UNDERSTAND THIS JULY 2014 LETTER FROM
12 WILLIS-KNIGHTON TO BE A DECISION BASED ON EVALUATION OF YOUR
13 COMPETENCE AS A PHYSICIAN?

14 **A** NO.

15 **Q** AFTER RECEIVING THE -- THIS LETTER, DID YOU DO
16 ANYTHING FURTHER REGARDING YOUR APPLICATION TO
17 WILLIS-KNIGHTON?

18 **A** I RESUBMITTED IT ASKING FOR PRIVILEGES IN THE AREA
19 OF FAMILY MEDICINE.

20 **Q** OKAY. COULD YOU TURN TO BINDER 3, EXHIBIT 97,
21 PLEASE? LET ME KNOW WHEN YOU'RE THERE.

22 **A** YES.

23 **Q** TAKE A LOOK AT PAGE -- WELL, GO AHEAD AND LEAF
24 THROUGH THE EXHIBIT AND JUST LET ME KNOW WHETHER YOU'VE SEEN
25 IT BEFORE.

1 A YES.

2 Q AND WITHOUT READING FROM IT, BECAUSE IT'S
3 CONFIDENTIAL, WOULD YOU SAY GENERALLY WHAT THIS EXHIBIT IS?

4 A IT LOOKS LIKE MY APPLICATION -- OR MY RESUBMITTED
5 APPLICATION TO WILLIS-KNIGHTON.

6 Q OKAY. AND WHAT IS THE -- WELL, LOOK AT THE VERY
7 FIRST PAGE, 2069.

8 A YES.

9 Q THAT'S A LETTER; IS THAT RIGHT?

10 A IT IS.

11 Q AND IS THIS -- COULD YOU CALL THIS A COVER LETTER TO
12 YOUR APPLICATION?

13 A YES.

14 Q OKAY. WHAT'S THE DATE ON THE COVER LETTER?

15 A FEBRUARY 26TH, 19 -- 2015.

16 Q IS THAT THE DATE THAT YOU RESUBMITTED YOUR
17 APPLICATION?

18 A YES.

19 Q AND WOULD YOU JUST TAKE A LOOK AT PAGE 2072, PLEASE?

20 A YES.

21 Q DOES THIS PAGE INDICATE WHAT KIND OF PRIVILEGES --
22 WHAT CLASS OF PRIVILEGES YOU'RE SEEKING?

23 A YES.

24 Q WHAT CLASS WAS THAT?

25 A COURTESY.

1 Q OKAY. AND THIS PAGE, AGAIN, INDICATES THAT YOU WORK
2 AT HOPE MEDICAL GROUP; IS THAT CORRECT?

3 A YES.

4 Q AND IT ALSO INDICATES THAT YOU HAVE AN ADDICTION
5 PRACTICE; IS THAT CORRECT?

6 A YES.

7 Q AND IF YOU'D MOVE TO PAGE 2075, MAYBE TWENTY SEVENTY
8 -- YES. I'M SORRY. AT THE VERY BOTTOM, TAKE A LOOK AT THAT.

9 A YES.

10 Q AND THEN WITHOUT READING THAT -- READING IT OUT
11 LOUD, DOES THAT INDICATE WHAT YOU WERE SEEKING PRIVILEGES TO
12 DO?

13 A YES.

14 Q OKAY. AND WHAT WAS THAT?

15 A TO TREAT COMPLICATIONS RELATED TO PREGNANCY
16 TERMINATION.

17 Q OKAY. IN RESPONSE TO THIS RESUBMITTED APPLICATION,
18 DID YOU RECEIVE PRIVILEGES AT WILLIS-KNIGHTON -- I'M SORRY.
19 YES, WILLIS-KNIGHTON?

20 A NO.

21 Q DID THEY RESPOND TO YOUR APPLICATION IN SOMEWAY THAT
22 YOU CAN RECALL?

23 A I DON'T THINK -- I THINK I'M STILL WAITING FOR A
24 RESPONSE.

25 Q OKAY. WELL, DID THEY SEND YOU ANY KIND OF

1 COMMUNICATION RESPONSE TO THIS THAT YOU CAN REMEMBER?

2 A NO, I CAN'T REMEMBER.

3 Q WELL, TAKE A LOOK AT EXHIBIT 128 IN BINDER 4, I
4 BELIEVE IT IS, OR BINDER 3. LET ME KNOW WHEN YOU'RE AT
5 EXHIBIT 128, PLEASE.

6 A OH, YES, I REMEMBER THIS.

7 Q OKAY. SO YOU'VE SEEN EXHIBIT 128 BEFORE?

8 A YES.

9 Q AND IS IT A LETTER?

10 A IT IS.

11 Q AND WHO IS IT FROM AND TO?

12 A IT IS TO ME FROM WILLIS-KNIGHTON.

13 Q AND WHAT'S THE DATE ON THE LETTER?

14 A MARCH 11TH, 2015.

15 Q OKAY. AND, AGAIN, WITHOUT READING FROM IT OUT LOUD
16 BECAUSE IT'S CONFIDENTIAL, WOULD YOU PLEASE SAY GENERALLY WHAT
17 THE LETTER STATES?

18 A IT LOOKS LIKE THEY'RE ASKING FOR DOCUMENTATION OF
19 HOSPITAL ADMISSIONS IN THE LAST 12 MONTHS.

20 Q OKAY. AND DID YOU PROVIDE THEM WITH THAT
21 INFORMATION?

22 A YES, I DID.

23 Q LET'S TAKE A LOOK AT -- I BELIEVE THIS IS MARKED AS
24 PLAINTIFFS' EXHIBIT 145. SO YOU SHOULD HAVE A SEPARATE BINDER
25 UP THERE THAT SAYS SOMETHING LIKE "PLAINTIFFS' EXHIBITS." DO

1 YOU HAVE A BINDER UP THERE THAT SAYS THAT?

2 A LET ME SEE. YES.

3 Q DO YOU SEE A 145 IN THERE?

4 A YES. YES. I MEAN, IT'S A PLAIN PIECE OF PAPER.
5 THERE'S NOTHING...

6 Q WE'LL PROBABLY NEED A MOMENT TO LOCATE THIS EXHIBIT,
7 DOCTOR. I APOLOGIZE, DOCTOR, IT'S ACTUALLY IN THE JOINT
8 EXHIBITS BINDER, BINDER 4. THAT'S WHY YOU HAVE A BLANK PIECE
9 BECAUSE IT ACTUALLY GOT MOVED. AND IT'S EXHIBIT 189.

10 A YES.

11 Q DO YOU RECOGNIZE THE EXHIBIT THAT'S AT 189?

12 A YES.

13 Q IT'S A LETTER; IS THAT CORRECT?

14 A IT IS.

15 Q AND WHO IS IT FROM AND TO?

16 A IT IS TO WILLIS-KNIGHTON FROM ME.

17 Q AND WHAT'S THE DATE ON THIS LETTER?

18 A MARCH 24TH, 2015.

19 Q OKAY. IS THIS THE RESPONSE THAT YOU JUST REFERRED
20 TO?

21 A YES.

22 Q AND IT PROVIDES INFORMATION ABOUT THE -- YOUR
23 HOSPITAL ADMISSIONS FROM THE PAST 12 MONTHS; IS THAT CORRECT?

24 A YES.

25 Q AND WITHOUT READING FROM IT, BECAUSE IT'S

1 CONFIDENTIAL, CAN YOU SAY GENERALLY WHAT YOU SAID ABOUT YOUR
2 HISTORY OF ADMITTING PATIENTS DURING THE LAST 12 MONTHS?

3 A IT SAYS THAT I HAVE NOT ADMITTED ANY PATIENTS TO THE
4 HOSPITAL WITHIN THE LAST 12 MONTHS.

5 Q AND THIS LETTER WAS SENT MARCH 24TH; IS THAT
6 CORRECT?

7 A YES.

8 Q HAVE YOU HEARD ANYTHING FROM WILLIS-KNIGHTON IN
9 RESPONSE TO THIS LETTER?

10 A I DON'T THINK SO.

11 Q SO YOU'VE HAD NO FURTHER CONTACT FROM THEM SINCE
12 THEN; IS THAT RIGHT?

13 A NOT THAT I CAN RECALL.

14 Q SO YOU DON'T -- YOU CAN SET THAT ASIDE, DOCTOR. YOU
15 DON'T CURRENTLY HAVE ADMITTING PRIVILEGES; IS THAT RIGHT?

16 A CORRECT.

17 Q SO IF THE LAW THAT WE'RE CHALLENGING TOOK EFFECT,
18 WOULD YOU CONTINUE TO PROVIDE ABORTIONS?

19 A I DON'T THINK I'D BE ABLE TO.

20 Q SO WOULD YOU STOP PROVIDING ABORTIONS?

21 A YES.

22 Q WHY ARE YOU TESTIFYING UNDER PSEUDONYM AND BEHIND A
23 SCREEN TODAY?

24 A BECAUSE I WORRY ABOUT MY SAFETY.

25 Q AND WHY DO YOU WORRY ABOUT YOUR SAFETY?

1 A BECAUSE OF VIOLENCE TOWARDS ABORTION PROVIDERS IN
2 THE PAST.

3 Q ARE YOU WORRIED THAT THIS VIOLENCE COULD HAPPEN TO
4 YOU?

5 A YES.

6 Q AND WHY IS THAT?

7 A BECAUSE THERE'S CRAZY PEOPLE.

8 Q OKAY. WELL, WHY DO YOU PUT UP WITH CRAZY PEOPLE?
9 WHY DO YOU PUT UP WITH FEAR OF VIOLENCE?

10 A I BELIEVE IN WOMEN'S RIGHTS AND I WANT TO FIGHT FOR
11 WOMEN'S RIGHTS AND I BELIEVE IT'S A WORTHY FIGHT. I THINK ALL
12 WOMEN SHOULD HAVE THE DECISION OF WHAT THEY DO WITH THEIR
13 REPRODUCTIVE SYSTEM, AND I CAN'T -- I CAN'T IMAGINE IF MY
14 DAUGHTERS DIDN'T HAVE A CHOICE AND WERE FORCED TO CONTINUE
15 PREGNANCIES OR, YOU KNOW, JUST NOT HAVE THE CHOICE OF A SAFE
16 ABORTION.

17 Q AND DO YOU PROVIDE WOMEN WITH THE ABILITY TO MAKE
18 THAT CHOICE?

19 A YES. WELL, THEY MAKE THE CHOICE, AND I THINK THAT'S
20 THE MOST DIFFICULT PART, AND I JUST HELP THEM. THAT'S ALL. I
21 MEAN, THEY -- THEY'RE THE ONES THAT MAKE THE BRAVE DECISION.

22 **MR. BROWN:** I HAVE NOTHING FURTHER, YOUR HONOR.

23 **THE COURT:** LET'S SEE. WE'VE BEEN GOING ALMOST TWO
24 HOURS. I THINK IT'S A GOOD TIME TO TAKE A TEN-MINUTE BREAK.

25 **(WHEREUPON COURT WAS IN RECESS.)**

1 **THE COURT:** YOU MAY BE SEATED, DOCTOR.

2 YOU MAY BE SEATED FOLKS.

3 DOCTOR, YOU'RE STILL UNDER OATH.

4 ALL RIGHT. YOU MAY PROCEED, MR. JOHNSON.

5 **MR. JOHNSON:** THANK YOU, YOUR HONOR.

6 CROSS

7 **BY MR. JOHNSON:**

8 **Q** DOCTOR, I'M MIKE JOHNSON. WE MET AT YOUR DEPOSITION
9 BACK IN JANUARY. AND AS YOU MAY REMEMBER, I'M COUNSEL FOR THE
10 STATE -- CO-COUNSEL FOR THE STATE HERE, SO I'LL BE DOING YOUR
11 CROSS-EXAMINATION. I JUST HAVE SOME QUESTIONS FOR YOU
12 BEGINNING WITH THIS MATTER OF THE PRIVILEGES. WE SPOKE ABOUT
13 IT AT GREAT LENGTH HERE IN THE LAST HOUR OR SO, THE PROCESS
14 THAT YOU WENT THROUGH TO OBTAIN VARIOUS PRIVILEGES, OR TO
15 APPLY FOR THOSE.

16 SO, DOCTOR, I WANTED TO START BY ASKING YOU, WHEN
17 DID THAT PROCESS BEGIN? WHEN DID YOU FIRST SUBMIT YOUR
18 APPLICATIONS TO LOCAL HOSPITALS?

19 **A** APPROXIMATELY A YEAR.

20 **Q** WOULD IT HAVE BEEN LAST JUNE, APPROXIMATELY?

21 **A** I THINK SO.

22 **Q** AND YOU TESTIFIED THAT YOU MADE TWO APPLICATIONS,
23 ONE TO WILLIS-KNIGHTON AND ONE TO CHRISTUS SCHUMPERT; IS THAT
24 RIGHT?

25 **A** CORRECT.

1 Q AND IN BOTH OF THOSE APPLICATIONS, YOU APPLIED TO
2 BECOME A MEMBER OF THE COURTESY MEDICAL STAFF; RIGHT?

3 A YES.

4 Q AND AS A MEMBER OF THE COURTESY STAFF, IT WAS YOUR
5 UNDERSTANDING YOU'D BE ABLE TO ADMIT PATIENTS TO EACH
6 HOSPITAL; IS THAT RIGHT?

7 A YES.

8 Q LET'S TALK ABOUT YOUR PRIVILEGES' APPLICATION AT
9 WILLIS-KNIGHTON FIRST. YOUR PRIVILEGES' APPLICATION THERE IS
10 STILL PENDING; IS IT NOT?

11 A I BELIEVE SO. I MEAN I HAVEN'T HEARD EITHER WAY.

12 Q RIGHT. YOU HAVEN'T GOTTEN A FINAL DECISION;
13 CORRECT?

14 A CORRECT.

15 Q SO YOU HAD TO RESUBMIT YOUR APPLICATION AFTER YOU
16 APPLIED THERE THE FIRST TIME; IS THAT RIGHT?

17 A YES.

18 Q AND THAT'S BECAUSE IN YOUR INITIAL APPLICATION YOU
19 HAD APPLIED FOR PRIVILEGES IN ADDICTION MEDICINE; RIGHT?

20 A YES.

21 Q AND IN THAT INITIAL APPLICATION, YOU DIDN'T ASK FOR
22 PRIVILEGES TO CARE FOR YOUR ABORTION-RELATED PATIENTS; RIGHT?

23 A NO.

24 Q AND SO YOU HAD TO RESUBMIT YOUR APPLICATION FOR
25 PRIVILEGES WITH RESPECT TO YOUR ABORTION PRACTICE; ISN'T THAT

1 RIGHT?

2 A YES.

3 Q OKAY. SO CONCERNING YOUR PENDING APPLICATION,
4 WILLIS-KNIGHTON'S ASKED FOR ADDITIONAL INFORMATION CONCERNING
5 YOUR APPLICATION; ISN'T THAT RIGHT?

6 A I BELIEVE SO, MAYBE.

7 Q WELL, LET'S REFRESH YOUR MEMORY, AND WE'LL PULL UP A
8 DOCUMENT.

9 A YES.

10 Q JOINT EXHIBIT 128, IF SOMEONE CAN PUT THAT ON THE
11 SCREEN. IT'S CONFIDENTIAL. JOINT EXHIBIT 128. WE LOOKED AT
12 IT A FEW MOMENTS AGO, BUT I JUST WANTED TO GIVE YOU THE
13 BENEFIT OF HAVING IT IN FRONT OF YOU. SO GIVE US JUST A
14 MOMENT HERE. OKAY. DOCTOR, DO YOU SEE THAT DOCUMENT ON THE
15 SCREEN?

16 A YES.

17 Q SO IF YOU WOULD, LOOK WITH ME AT THE THIRD PARAGRAPH
18 OF THAT PAGE. SO IT SAYS THERE -- I CAN'T QUOTE FROM IT
19 BECAUSE IT'S CONFIDENTIAL CORRESPONDENCE, BUT EFFECTIVELY
20 THEY'RE ACKNOWLEDGING THAT YOU ANSWERED QUESTIONS AND REVEALED
21 TO THE HOSPITAL THAT YOU'RE INVOLVED IN THE PREGNANCY
22 TERMINATION BUSINESS; IS THAT A FAIR SUMMARY? THAT YOU
23 PERFORM PREGNANCY TERMINATIONS; IS THAT RIGHT?

24 A YES.

25 Q AND THE LAST SENTENCE OF THE THIRD PARAGRAPH, IN

1 YOUR OWN WORDS, JUST PARAPHRASE FOR ME WHAT IT IS THEY'RE
2 REQUESTING?

3 A IT ASKS WHAT COMPLICATIONS AM I EXPECTING TO TREAT.

4 Q IS THERE ANY INDICATION IN THIS LETTER REQUESTING
5 FURTHER INFORMATION FROM YOU THAT WILLIS-KNIGHTON HAS ANY
6 PROBLEM WITH YOUR FIELD OF PRACTICE?

7 A I'M NOT SURE.

8 Q WELL, IS THERE ANYTHING IN THAT LETTER THAT SUGGESTS
9 TO YOU THAT THE REVELATION THAT YOU'RE INVOLVED IN PREGNANCY
10 TERMINATIONS IS A PROBLEM FOR THE HOSPITAL?

11 A WELL, POSSIBLY.

12 Q WELL, I'M NOT -- IS THERE ANYTHING IN THIS LETTER
13 THAT WOULD SAY THAT? I MEAN THEY'RE REQUESTING FURTHER
14 INFORMATION ABOUT PARTICULAR COMPLICATIONS; CORRECT?

15 A YES. WELL, IT SAYS CURRENT COMPETENCY RELATED. SO,
16 I MEAN, YOU COULD THINK THAT THEY MAY BE WORRIED. I DON'T --
17 I DON'T KNOW, I MEAN...

18 Q BUT THERE'S NOTHING IN HERE THAT DENIES YOUR
19 APPLICATION ON ANY BASIS RELATED TO YOUR FIELD OF PRACTICE;
20 CORRECT?

21 A NO.

22 Q AND YOU RESPONDED TO THE HOSPITAL'S REQUEST BY
23 PROVIDING ADDITIONAL INFORMATION; RIGHT?

24 A I BELIEVE SO, YES.

25 Q AND YOU SENT THAT IN LATE MARCH OF THIS YEAR; IS

1 THAT RIGHT?

2 A YES.

3 Q AND DO YOU HAVE ANY -- ANY REASON TO BELIEVE THAT
4 THAT ADDITIONAL INFORMATION AND YOUR APPLICATION ARE NOT STILL
5 PENDING BY THE HOSPITAL?

6 A I MEAN I GUESS IT'S PENDING.

7 Q OKAY. SO IT HASN'T BEEN DENIED; RIGHT?

8 A NOT THAT I KNOW OF.

9 Q OKAY. LET'S TURN TO YOUR PRIVILEGES' APPLICATION AT
10 CHRISTUS SCHUMPERT.

11 NOW, YOU APPLIED THERE TO BE A MEMBER OF THE
12 COURTESY MEDICAL STAFF AS WELL; RIGHT?

13 A YES.

14 Q AND BEING A MEMBER OF THE COURTESY STAFF AT CHRISTUS
15 WOULD ALLOW YOU TO ADMIT PATIENTS; CORRECT?

16 A CORRECT.

17 Q IS THAT YOUR UNDERSTANDING?

18 A CORRECT.

19 Q OKAY. NOW, WE LOOKED AT THE SEQUENCE OF DOCUMENTS
20 REGARDING YOUR APPLICATION TO CHRISTUS AND IT SHOWED YOUR
21 APPLICATION FOR PRIVILEGES HAS NOT BEEN REJECTED THERE EITHER;
22 ISN'T THAT RIGHT?

23 A WELL, I THINK IT MIGHT HAVE BEEN THAT THEY SAID
24 SOMETHING ABOUT IF I DON'T GET THE BADGE IT'S WITHDRAWN.

25 Q WELL, LET'S LOOK AT EXACTLY WHAT THEY SAID.

1 A YES.

2 Q IF YOU WOULD, TURN TO BINDER NO. 2 PAGE 1279, THAT'S
3 JOINT EXHIBIT 71. JOINT EXHIBIT 71, PAGE 1279.

4 A YES.

5 Q DO YOU SEE THAT?

6 A YES.

7 Q AND I'M TURNING THERE MYSELF. SO, DOCTOR, WE LOOKED
8 AT THIS EXHIBIT A FEW MOMENTS AGO. IT'S A VERY SHORT LETTER.
9 IT'S CONFIDENTIAL. I CAN'T READ FROM IT. BUT THE, WHAT LOOKS
10 LIKE THE SECOND PARAGRAPH THERE, WHAT DOES IT SAY VERY
11 CLEARLY? DOES IT SAY THAT YOUR APPLICATION HAS BEEN DEEMED
12 WITHDRAWN? I'LL JUST QUOTE THOSE TWO WORDS.

13 A I BELIEVE SO.

14 Q SO IS IT WITHDRAWN FOR ANY PARTICULAR REASON BASED
15 UPON THIS LETTER?

16 A IT LOOKS LIKE SOMETHING ABOUT THE BADGE.

17 Q RIGHT. SO SOMETHING ABOUT THE BADGE, IT INDICATES
18 THAT YOU DID NOT FULFILL ALL OF THE REQUESTED RESPONSIBILITIES
19 THAT THEY ASKED OF YOU; ISN'T THAT RIGHT?

20 A WELL, I TRIED TO GET THE BADGE, AND I WASN'T ABLE TO
21 GET THE BADGE, SO I CAN'T COMPLETE THE APPLICATION IF I CAN'T
22 GET THE BADGE, BUT THEY'RE NOT LETTING ME GET THE BADGE. SO I
23 DON'T --

24 Q AND EXPLAIN TO ME AGAIN HOW THEY'RE NOT LETTING YOU
25 GET THE BADGE.

1 **A** WELL, WHEN KATHALEEN WAS ASKED TO CALL THE AREA
2 WHERE THE BADGE IS MADE THEY SAID THAT, NO, HE'S NOT TO COME
3 GET THE BADGE, AND THAT'S WHEN I WAS REFERRED TO THAT
4 PHYSICIAN THAT RECOMMENDED THAT I APPLY FOR THE NONSTAFF
5 CAREGIVER.

6 **Q** BUT AFTER KATHALEEN EXPLAINED THIS MESSAGE TO YOU,
7 DID YOU DO ANY FURTHER INQUIRY TO TRY TO FIGURE THIS OUT ON
8 YOUR OWN?

9 **A** WELL, I SPOKE WITH THAT LADY, THAT PHYSICIAN, I'M
10 NOT SURE OF HER NAME, BUT THAT WAS IN RESPONSE -- THAT IS
11 WHERE THEY LED ME AFTER INQUIRING ABOUT THE BADGE.

12 **Q** NOW, YOU TESTIFIED EARLIER THAT YOU WAITED QUITE
13 SOME TIME TO TRY TO OBTAIN THE BADGE; ISN'T THAT RIGHT?

14 **A** YES.

15 **MR. BROWN:** OBJECTION. SORRY.

16 **THE COURT:** WHAT'S THE OBJECTION?

17 **MR. BROWN:** THAT'S NOT HIS TESTIMONY.

18 **THE COURT:** WELL, HE CAN ANSWER IT RIGHT OR WRONG.

19 **A** WELL, I DID WAIT SOME TIME, AND THAT IS PURELY
20 BECAUSE I FELT IT VERY SUSPICIOUS THAT I GO GET A BADGE WHEN I
21 HAD NOT BEEN TOLD THAT, "YES, YOU HAVE PRIVILEGES; COME GET
22 YOUR BADGE." LIKE THE BADGE IS THE LAST THING.

23 **BY MR. JOHNSON:**

24 **Q** IN YOUR OPINION; RIGHT?

25 **A** WELL, IT'S MY OPINION BECAUSE I'VE HAD BADGES AS A

1 MEDICAL STUDENT AT VARIOUS HOSPITALS. I MEAN, I'VE -- SEVERAL
2 HOSPITALS. AND ALSO IN MY RESIDENCY, WE WORK AT DIFFERENT
3 HOSPITALS. LIKE IF YOU'RE DOING A DERMATOLOGY ROTATION AND
4 YOU GO TO A DIFFERENT HOSPITAL AND THEY GIVE YOU A BADGE, THE
5 BADGE IS LIKE YOUR -- THE VERY -- ON THE FIRST DAY OF YOUR
6 APPOINTMENT, USUALLY YOU GO GET YOUR BADGE. THAT'S WHEN
7 EVERYTHING IS SAID AND DONE. YOUR NAME AND YOUR PICTURE IS
8 TAKEN AND YOU GET A BADGE. THEY DON'T JUST GIVE BADGES OUT.

9 Q SO YOU THOUGHT THAT THE INSTRUCTION THEY PROVIDED
10 YOU OR THE REQUEST THAT THEY MADE OF YOU WAS JUST SUSPICIOUS
11 AND SO YOU DECIDED NOT TO DO IT; RIGHT?

12 A I DON'T KNOW ABOUT SUSPICIOUS.

13 Q WELL, THAT'S THE WORD YOU JUST USED; ISN'T IT?

14 A I DON'T KNOW IF I USED THE WORD SUSPICIOUS, BUT...

15 Q IT WAS STRANGE; STRANGE AND UNUSUAL?

16 A IT WAS STRANGE, YES. YES, LIKE I SAID, YOU JUST
17 DON'T GO INTO A HOSPITAL WITHOUT SOME KIND OF EITHER PAPERWORK
18 SAYING, "OKAY, HERE'S MY APPLICATION," OR "HERE'S MY --" OR AN
19 INTERVIEW. SOMETHING. YOU JUST DON'T GO GET A BADGE. I'VE
20 NEVER HEARD OF --

21 Q EVEN WHEN THE HOSPITAL --

22 MR. BROWN: MR. JOHNSON, WOULD YOU PLEASE LET THE
23 WITNESS FINISH?

24 THE COURT: AND I DO THINK YOU NEED TO DO THAT,
25 MR. JOHNSON.

1 GO AHEAD AND FINISH YOUR ANSWER.

2 A LIKE I SAID, I'VE PROBABLY HAD, JUST AN ESTIMATE IN
3 THE LAST 15 YEARS OF PURSUING MY LICENSE AND EVERYTHING,
4 SEVERAL BADGES. I'D JUST SAY MAYBE FIVE OR SIX BADGES AT
5 HOSPITALS, AND THE BADGE IS ALWAYS AFTER YOU'VE BEEN TOLD
6 YOU'RE ACCEPTED OR, YES, YOU CAN WORK AT THE HOSPITAL,
7 WHATEVER IT MAY BE.

8 IT'S USUALLY ON THE FIRST DAY YOU GO TO WORK OR, YOU
9 KNOW, THE -- YOU GO GET THE BADGE. SO I THOUGHT IT'S JUST A
10 LITTLE WEIRD, LET ME SEE. AND I DID LEAVE THAT FOR THE END.
11 AND THEN WHEN WE TRIED TO GO -- BECAUSE I SAID, "OKAY. WELL,
12 THEY WANT ME TO GO GET THE BADGE. LET'S MAKE THE
13 APPOINTMENT." SO I DON'T KNOW WHERE TO GO WHEN I WALK INTO
14 THE HOSPITAL. I DIDN'T WANT TO WALK INTO THE RECEPTION AREA
15 AND SAY, "WHERE DO I GO GET MY BADGE?" IT JUST SOUNDS A
16 LITTLE WEIRD.

17 SO I TOLD KATHALEEN, "PLEASE CALL, FIND OUT EXACTLY
18 WHERE I NEED TO GO. THEY PROBABLY HAVE CERTAIN HOURS OR DAYS
19 THAT THEY TAKE THE PICTURE AND MAKE THE BADGE." AND AS SOON
20 AS I KNOW WHERE I'M GOING AND WHEN TO GO, I'M READY TO GO.

21 **BY MR. JOHNSON:**

22 Q SO TO BE CLEAR, YOU WAITED UNTIL THE VERY END OF THE
23 120-DAY PROCESS, THE WINDOW YOU WERE GIVEN, TO SEEK THE BADGE
24 THAT THEY REQUESTED ALMOST A YEAR EARLIER; IS THAT RIGHT?

25 A I'M NOT SURE OF THE EXACT --

1 **MR. BROWN:** OBJECTION. HE'S ALREADY ANSWERED THIS
2 QUESTION, THIS LINE OF QUESTIONING.

3 **THE COURT:** WAIT, WAIT, WAIT. MR. BROWN, IF YOU
4 WANT TO MAKE AN OBJECTION, MAKE THE OBJECTION, TELL ME WHAT
5 THE OBJECTION IS, AND ADDRESS IT TO ME. OKAY? NOW, WHAT IS
6 YOUR OBJECTION?

7 **MR. BROWN:** MY OBJECTION IS THAT HE'S ALREADY
8 ANSWERED THESE QUESTIONS.

9 **THE COURT:** OKAY. I'LL OVERRULE THE OBJECTION.
10 **BY MR. JOHNSON:**

11 **Q** I'M DONE WITH THIS. I JUST WANT TO MAKE SURE WE'RE
12 CLEAR. IT WAS YOUR CHOICE, BECAUSE YOU FELT IT WAS A STRANGE
13 REQUEST, TO SAVE THIS PART OF YOUR APPLICATION PROCESS FOR THE
14 VERY END. TRUE OR FALSE?

15 **A** TRUE.

16 **Q** SO IF YOU HAD HAD THIS DISCREPANCY OR CONFUSION
17 ABOUT THE BADGE EARLIER IN THE PROCESS, IS IT POSSIBLE THAT
18 YOU MIGHT HAVE BEEN ABLE TO REMEDY THAT CONFUSION?

19 **A** I WAS WAITING FOR AN ACCEPTANCE TO MY APPLICATION --

20 **Q** BECAUSE YOU --

21 **A** -- BEFORE GETTING THE BADGE. THAT'S ALL.

22 **MR. BROWN:** MR. JOHNSON, WOULD YOU PLEASE LET THE
23 WITNESS FINISH?

24 **A** THAT'S ALL. THERE WAS NOTHING --

25 **THE COURT:** WAIT.

1 AGAIN, MR. BROWN, PLEASE RISE, SIR. I'M GOING TO
2 EXPLAIN TO YOU AGAIN. YOU DO NOT ADDRESS YOUR COMMENTS TO
3 YOUR OPPOSING COUNSEL. YOU ADDRESS YOUR COMMENTS TO THE
4 COURT, YOU TELL ME WHAT YOUR OBJECTION IS, AND I WILL RULE ON
5 THAT. OKAY?

6 **MR. BROWN:** YES, YOUR HONOR.

7 **THE COURT:** ALL RIGHT.

8 AND, MR. JOHNSON, PLEASE ALLOW THE WITNESS TO ANSWER
9 BEFORE YOU BEGIN YOUR NEXT QUESTION.

10 **MR. JOHNSON:** YES, YOUR HONOR. I THOUGHT HE WAS
11 FINISHED.

12 **BY MR. JOHNSON:**

13 **Q** DOCTOR, JUST ONE MORE QUESTION. I'M JUST TRYING TO
14 GET CLARITY. I DON'T MEAN TO BADGER YOU ABOUT THIS. BUT I
15 WANT TO MAKE CERTAIN THAT --

16 **THE COURT:** THE HORSE IS BECOMING --

17 **MR. JOHNSON:** IT IS.

18 **THE COURT:** -- VERY BLOODY. IT'S PROBABLY DEAD.

19 **MR. JOHNSON:** ALL RIGHT. IT'S DEAD. I AGREE.

20 **BY MR. JOHNSON:**

21 **Q** DOCTOR, THERE IS A NEWLY PROVIDED LETTER THAT WE
22 LOOKED AT, IT'S JOINT EXHIBIT 190, IF WE COULD PULL THAT UP ON
23 THE SCREEN FOR YOU TO REVIEW AGAIN. YOU WERE ASKED QUESTIONS
24 ABOUT IT A MOMENT AGO. JOINT EXHIBIT 190. AND THIS IS AN
25 E-MAIL DATED JANUARY 8TH OF THIS YEAR FROM SANDEE PHAGAN AT

1 CHRISTUS HEALTH.

2 DOCTOR, DO YOU HAVE IT IN THE BINDER OR ARE YOU
3 WAITING ON THE SCREEN?

4 A I WAS WAITING ON THE SCREEN. I DIDN'T KNOW WHAT
5 BINDER.

6 THE COURT: I WAS WAITING ON THE SCREEN, ALSO.

7 DO YOU NEED US TO PULL IT FROM THE BINDER?

8 BY MR. JOHNSON:

9 Q IT'S JOINT EXHIBIT 190.

10 A WHICH BINDER?

11 Q I WISH I COULD TELL YOU THE NUMBER.

12 MS. JAROSLAW: DOES ANYBODY KNOW THAT?

13 THE CLERK: FOUR.

14 BY MR. JOHNSON:

15 Q FOURTH BINDER. SORRY. THANK YOU.

16 A YES. ONE --

17 Q 190. IT SAYS AT THE BOTTOM PLAINTIFFS' EXHIBIT 171.

18 IN THE BOTTOM RIGHT CORNER.

19 A YES.

20 Q DO YOU HAVE THAT?

21 A YES.

22 Q SO, AGAIN, THAT'S AN E-MAIL THAT WAS SENT TO -- IT
23 SAYS, "GOOD MORNING, KATHALEEN." WHO IS KATHALEEN?

24 A THE ADMINISTRATOR AT HOPE.

25 Q KATHALEEN PITTMAN; IS THAT RIGHT?

1 **A** YES.

2 **Q** AND THIS LOOKS LIKE A FORWARD OF CHRISTUS HOSPITALS'
3 NONSTAFF CAREGIVER APPLICATION; IS THAT RIGHT?

4 **A** YES.

5 **Q** AND IT PURPORTS TO HAVE BEEN REQUESTED BY
6 MS. PITTMAN; IS THAT RIGHT?

7 **MR. JOHNSON:** THIS IS NOT A PRIVILEGED DOCUMENT IS
8 IT, EVERYBODY? I DON'T THINK SO. IT IS? THIS IS A
9 CONFIDENTIAL DOCUMENT.

10 **BY MR. JOHNSON:**

11 **Q** WELL, THE E-MAIL, DOCTOR, JUST SAYS AT THE
12 BEGINNING, WE CAN READ TOGETHER. I WON'T READ IT INTO THE
13 RECORD, BUT IT SUGGESTS THAT MS. PITTMAN AND MS. PHAGAN HAD A
14 DISCUSSION; IS THAT RIGHT?

15 **A** YES.

16 **Q** AND THAT AS A RESULT OF THAT DISCUSSION, MS. PHAGAN
17 WAS REQUESTED TO SEND THIS NONSTAFF CAREGIVER APPLICATION
18 ALONG FOR YOUR PURPOSES; IS THAT RIGHT?

19 **A** IT LOOKS LIKE IT, YES.

20 **Q** NOW, THERE'S NOTHING IN THIS E-MAIL, THIS
21 CORRESPONDENCE, THAT SUGGESTS THAT YOU ARE UNABLE TO SUBMIT A
22 NEW APPLICATION FOR FULL PRIVILEGES, IS THERE?

23 **A** MY UNDERSTANDING IS THE NONSTAFF CAREGIVER DOES NOT
24 HAVE ADMITTING PRIVILEGES.

25 **Q** WE AGREE ON THAT, BUT --

1 A OH, OKAY.

2 Q BUT THE QUESTION IS, THERE'S NOTHING ABOUT -- IN
3 OTHER WORDS, THIS IS A FORWARD OF THIS APPLICATION TO YOU, BUT
4 IT'S NOTHING MORE THAN THAT, IS IT?

5 A YES.

6 Q IS THERE ANYTHING IN THIS CORRESPONDENCE FROM THE
7 HOSPITAL THAT SAYS THIS IS YOUR ONLY AVAILABLE OPTION?

8 A NO. BUT VERBALLY I THINK THAT THEY MADE IT CLEAR
9 THAT THIS WAS MY OPTION.

10 Q DID THEY MAKE THAT CLEAR TO YOU?

11 A WELL, WHEN I SPOKE WITH THE PHYSICIAN, AND, LIKE I
12 SAID, I CAN'T REMEMBER HER NAME, THIS IS WHAT SHE POINTED
13 TOWARDS, AND THERE WAS NO -- I MEAN, MY OTHER COURTESY
14 PRIVILEGES KIND OF -- I MEAN, IT JUST DIDN'T EVEN -- LIKE IT
15 WASN'T AN OPTION OR THEY SAID, "WELL, IT LOOKS LIKE THIS IS
16 WHAT YOU NEED" IS WHAT EXACT-- YOU KNOW, IS WHAT THE
17 CONVERSATION BASICALLY AMOUNTED TO WAS THAT, "THIS IS WHAT YOU
18 CAN APPLY FOR."

19 Q SO YOU TALKED TO A DOCTOR THERE, BUT YOU CAN'T
20 REMEMBER THEIR NAME?

21 A CORRECT.

22 Q WAS THAT -- IT WAS NOT, THEN, WITH THE MEDICAL STAFF
23 COORDINATOR, MS. PHAGAN; CORRECT?

24 A WELL, IT WAS -- MS. PHAGAN GAVE THE DOCTOR'S PHONE
25 NUMBER AND NAME TO KATHALEEN, KATHALEEN GAVE IT TO ME, I

1 CALLED THAT PERSON, AND THEY SAID, "THIS IS WHAT YOU SHOULD
2 APPLY FOR."

3 Q BUT NO ONE INDICATED IN THAT TELEPHONE CONFERENCE,
4 OR CERTAINLY IN ANY WRITTEN CORRESPONDENCE, THAT YOU WERE
5 UNABLE TO SUBMIT A NEW APPLICATION BECAUSE YOUR PREVIOUS ONE
6 WAS DEEMED WITHDRAWN BECAUSE THE TIME LIMIT RAN OUT; IS THAT
7 RIGHT?

8 A I DON'T REALLY UNDERSTAND THE QUESTION.

9 Q YOUR FIRST APPLICATION EXPIRED FOR TIME LIMITS; IS
10 THAT RIGHT?

11 A YES.

12 Q IS THERE -- HAS ANYONE AT CHRISTUS INFORMED YOU THAT
13 YOU ARE UNABLE NOW, BECAUSE OF THE EXPIRATION OF THE FIRST
14 APPLICATION, TO SUBMIT A BRAND-NEW APPLICATION?

15 A NO.

16 Q ALL RIGHT, DOCTOR. THE LAST QUESTION YOU WERE ASKED
17 ABOUT THE CHRISTUS' APPLICATION PERTAINED TO DOCUMENT 133 IN
18 BINDER NO. 4. COULD YOU TURN BACK TO THAT? DOCUMENT 133,
19 BINDER NUMBER 4. IT'S A JOINT EXHIBIT. IT IS CONFIDENTIAL.
20 THE PAGE NUMBER THERE IS 2796.

21 A YES.

22 Q YOU HAVE THAT IN FRONT OF YOU?

23 A YES.

24 Q NOW, THIS IS THE -- THE SUBJECT LINE SAYS, "CHRISTUS
25 HEALTH CODE OF ETHICS"; IS THAT RIGHT?

1 A YES.

2 Q NOW, THE DOCUMENT'S BEEN REDACTED WITH A STAMP THAT
3 SAYS, "DR. DOE NUMBER 1" IN LARGE FONT AT THE BOTTOM LEFT OF
4 THAT PAGE; IS THAT RIGHT?

5 A YES.

6 Q BUT BENEATH THAT STAMP WAS YOUR SIGNATURE AT ONE
7 POINT; IS THAT RIGHT?

8 A YES.

9 Q AND IS THAT YOUR HANDWRITING TO THE RIGHT WHERE IT
10 SAYS THE DATE, 09/17/14?

11 A YES.

12 Q SO YOU READ AND SIGNED THIS DOCUMENT; CORRECT?

13 A YES.

14 Q NOW, THE LAST PARAGRAPH RIGHT ABOVE YOUR SIGNATURE
15 THERE SUGGESTS WHAT YOUR SIGNATURE ON THE DOCUMENT SIGNIFIES;
16 DOES IT NOT?

17 A YES.

18 Q IT SAYS, IN EFFECT, YOU'VE RECEIVED A COPY OF THEIR
19 CODE OF ETHICS; RIGHT?

20 A YES.

21 Q IT SAYS YOU'VE REVIEWED THE CODE OF ETHICS?

22 A YES.

23 Q AND THAT YOU UNDERSTAND AND AGREE TO ABIDE BY IT; IS
24 THAT RIGHT?

25 A YES.

1 Q NOW, YOU GAVE NO INDICATION TO CHRISTUS THAT YOU
2 COULD NOT OR WOULD NOT FULLY COMPLY WITH THEIR RULES AND
3 REGULATIONS, DID YOU?

4 A NO.

5 Q AND NO ONE AT CHRISTUS HAS EVER INDICATED TO YOU
6 THAT THIS COULD SERVE AS ANY BASIS AT ALL FOR THEIR DECISION
7 ON YOUR APPLICATION, HAVE THEY?

8 A NOT THAT I KNOW OF.

9 Q IN FACT, THEY'VE CONTINUED TO EXTEND THEIR WELCOME
10 MAT TO YOU, HAVEN'T THEY?

11 A YES.

12 Q IN FACT, THEY'RE INVITING YOU TO JOIN AT LEAST IN
13 SOME CAPACITY, WHICHEVER ONE -- WHICHEVER APPLICATION YOU WANT
14 TO PRESENT; ISN'T THAT RIGHT?

15 A WELL, I GUESS YOU COULD LOOK AT IT THAT WAY.

16 Q OKAY. MOVING ON TO ANOTHER SUBJECT AREA.
17 COMPLICATIONS WITH REGARD TO THE ABORTION PROCEDURES. NOW,
18 YOU CAN PUT THE EXHIBITS AWAY FOR NOW. CLEAR YOUR SPACE
19 THERE. YOU DO PERFORM -- PERFORM SURGICAL ABORTIONS AT THE
20 HOPE CLINIC; ISN'T THAT RIGHT?

21 A YES.

22 Q AND IS THAT THE PRIMARY AREA OF YOUR PRACTICE; IS
23 THAT A FAIR CHARACTERIZATION OF YOUR TESTIMONY THIS MORNING?

24 A AT HOPE?

25 Q YES, MA'AM.

1 **A** YES.

2 **Q** NOW, BEFORE YOU STARTED WORKING AT HOPE, YOU HAD
3 NEVER BEEN TRAINED TO PERFORM A SURGICAL ABORTION; ISN'T THAT
4 RIGHT?

5 **A** CORRECT.

6 **Q** AND YOU SAID THAT IT WAS DR. DOE NUMBER 3 THAT
7 PROVIDED YOUR PRIMARY TRAINING?

8 **A** CORRECT.

9 **Q** AND YOU WENT TO MEDICAL SCHOOL IN HUNGARY; IS THAT
10 RIGHT?

11 **A** I DID A FEW YEARS IN HUNGARY.

12 **Q** AND THE MEDICAL SCHOOL THAT YOU GRADUATED FROM,
13 WHERE IS THAT?

14 **A** IT'S IN THE NETHERLANDS ANTILLES.

15 **Q** AND YOU'RE BOARD CERTIFIED IN FAMILY MEDICINE AND
16 ADDICTION MEDICINE; IS THAT RIGHT?

17 **A** YES.

18 **Q** AND YOU'RE BOARD CERTIFICATION IN ADDICTION MEDICINE
19 WAS IN 2012?

20 **A** YES.

21 **Q** YOU HAVE NEVER ACTUALLY PRACTICED FAMILY MEDICINE;
22 CORRECT?

23 **A** I'VE NEVER HAD A FAMILY MEDICINE PRACTICE, NO.

24 **Q** OKAY. AND YOU'RE NOT BOARD CERTIFIED IN OB/GYN; IS
25 THAT RIGHT?

1 A NO.

2 Q AND IN MEDICAL SCHOOL, YOU RECEIVED NO TRAINING IN
3 PERFORMING A SURGICAL ABORTION; RIGHT?

4 A NO.

5 Q SO ASIDE FROM SURGICAL ABORTION, THE ONLY OTHER
6 SURGICAL PROCEDURE THAT YOU'VE EVER PERFORMED IS A MINOR SKIN
7 SURGERY; ISN'T THAT RIGHT?

8 A I'D HAVE TO THINK ABOUT THAT BECAUSE I -- I MEAN
9 I'VE -- I'VE ASSISTED ON MANY SURGERIES.

10 Q I'M GOING TO DRAW YOUR ATTENTION TO YOUR DEPOSITION
11 IN THIS MATTER.

12 A YES.

13 Q I'VE GOT A COPY OF IT.

14 **MR. JOHNSON:** CAN I SWITCH TO THE ELMO? IS THAT...

15 **BY MR. JOHNSON:**

16 Q DOCTOR, I'M MERELY GOING TO PUT A PORTION OF IT HERE
17 TO HELP REFRESH YOUR MEMORY BECAUSE I WANT YOUR TESTIMONY TO
18 BE ACCURATE. NOW, DOCTOR, THIS IS A CONDENSED COPY, BUT IF
19 YOU'LL LOOK AT PAGE 19, THIS IS A TRANSCRIPT OF THE DEPOSITION
20 THAT YOU GAVE IN JANUARY.

21 A YES.

22 Q AND I JUST WANT YOU TO TAKE A MOMENT AND READ, IF
23 YOU'LL READ FROM LINES 19 TO 21 --

24 A YES.

25 Q -- AND LET US KNOW IF THAT REFRESHES YOUR MEMORY

1 ABOUT THE QUESTION I JUST ASKED YOU.

2 A YES.

3 Q SO IS IT TRUE THAT YOU TESTIFIED EARLIER THAT ASIDE
4 FROM ABORTION PROCEDURES, THE ONLY OTHER SURGICAL PROCEDURE
5 YOU'VE EVER DONE IS A MINOR SKIN SURGERY?

6 A WELL, THAT'S THE FIRST ONE THAT CAME TO MIND --

7 Q SO THERE ARE OTHERS?

8 A -- BECAUSE WE DO THAT IN THE CLINIC. I MEAN I'VE
9 DONE ENDOMETRIAL BIOPSIES. I'VE DONE -- I'VE DONE MANY
10 DIFFERENT MINOR SURGICAL PROCEDURES, BUT I DON'T HAVE THEM AT
11 THE TIP OF MY TONGUE ALWAYS THINKING ABOUT THEM. BUT, I MEAN,
12 IN MEDICAL SCHOOL AND RESIDENCY, I MEAN, IT'S A -- I MEAN WE
13 DO A LOT OF THINGS.

14 SO, I MEAN, SKIN SURGERY, THAT JUST IS SOMETHING
15 THAT I THOUGHT OF. BUT I'VE DONE MANY OTHER THINGS IN THE
16 O.R. I MEAN I'VE ASSISTED IN C-SECTIONS. I'VE DELIVERED 50
17 BABIES. I'VE -- I MEAN I'VE DONE A LOT OF THINGS. I CAN'T
18 REMEMBER ALL OF THEM. IF I HAD TIME AND COULD SIT DOWN AND
19 THINK OF EVERY SINGLE SURGICAL PROCEDURE -- I'VE ASSISTED ON
20 GALLBLADDERS. I'VE ASSISTED ON LAPAROSCOPIC APPENDECTOMIES.
21 I MEAN, YOU KNOW, I DON'T KNOW WHAT -- WHAT ELSE I CAN SAY.

22 Q AND YOU DON'T -- THAT'S FINE. JUST TRYING TO GET A
23 FEEL FOR THE SCOPE OF YOUR EXPERIENCE. THAT'S HELPFUL, SO WE
24 APPRECIATE THAT. SO YOU WOULD THEN EFFECTIVELY SUPPLEMENT
25 WHAT YOU SAID IN YOUR DEPOSITION; RIGHT? THERE HAVE BEEN

1 MORE, IN OTHER WORDS, THAN JUST MINOR SKIN SURGERY?

2 A YES, DEFINITELY.

3 Q NOW, A SURGICAL ABORTION CARRIES THE RISK OF CERTAIN
4 COMPLICATIONS TO THE PATIENT. YOU'VE ESTABLISHED THAT;
5 CORRECT?

6 A YES.

7 Q I'D LIKE TO READ TO YOU A BRIEF STATEMENT AND SEE IF
8 YOU AGREE WITH HOW IT'S WORDED. IS THAT OKAY?

9 A YES.

10 Q IT SAYS THE FOLLOWING: "IN A FIRST TRIMESTER
11 ABORTION, THE VERIFICATION OF GESTATIONAL AGE, THE USE OF
12 ANESTHESIA, AND THE INTRODUCTION AND THE MANIPULATION OF
13 INSTRUMENTS IN THE PREGNANT UTERUS DO PRESENT RISKS TO
14 PATIENTS SUCH AS PELVIC INFECTION, INCOMPLETE ABORTION, BLOOD
15 CLOTS IN THE UTERUS, HEAVY BLEEDING, CUT OR TORN CERVIX,
16 PERFORATION OF THE UTERUS WALL, ANESTHESIA-RELATED
17 COMPLICATION AND OTHERS." DO YOU AGREE WITH THAT STATEMENT?

18 A YES.

19 Q HERE'S ANOTHER: "SOME OF THE COMPLICATIONS IF THEY
20 OCCUR MAY PRESENT IMMEDIATE LIFE-THREATENING CONDITIONS FOR
21 THE PATIENT AND MAY COMPROMISE FUTURE CHILDBEARING." DO YOU
22 AGREE WITH THAT?

23 A I DON'T KNOW ABOUT IMMEDIATE LIFE-THREATENING. I
24 GUESS ANYTHING IS POSSIBLE, AND IN MEDICINE WE LEARN THAT ON
25 DAY ONE, THAT NEVER SAY NEVER. BUT IN MY EXPERIENCE ABORTION

1 IS A VERY SAFE PROCEDURE, AND I DON'T -- ALTHOUGH I DON'T TAKE
2 IT LIGHTLY, WHAT I DO, I DON'T FEAR THAT MY -- THAT I AM
3 INEXPERIENCED OR THAT I CAN'T -- YOU KNOW, I'VE DONE THOUSANDS
4 OF ABORTIONS AND I FEEL VERY CONFIDENT IN MY SKILLS. SO I
5 DON'T THINK THAT MY PATIENTS LIVES ARE IN DANGER WHEN THEY'RE
6 UNDER MY CARE BY ANY MEANS.

7 Q OKAY. BUT THAT'S NOT EXACTLY THE QUESTION I ASKED
8 YOU; IS IT? YOU AGREE WITH THE STATEMENT AS IT WAS WORDED?
9 YOU DISAGREE -- LET ME SEE IF I CAN CHARACTERIZE YOUR ANSWER
10 CORRECTLY.

11 MR. BROWN: OBJECTION, YOUR HONOR.

12 THE COURT: LET HIM FINISH THE QUESTION FIRST AND
13 THEN YOU CAN OBJECT.

14 BY MR. JOHNSON:

15 Q CORRECT ME IF I'M WRONG, DOCTOR. ARE YOU SAYING,
16 THEN, THAT YOU AGREE WITH THE STATEMENT BUT FOR THE
17 LIFE-THREATENING CONDITIONS PORTION OF IT?

18 MR. BROWN: OBJECTION.

19 THE COURT: HOLD ON.

20 YES, MR. BROWN?

21 MR. BROWN: HE'S READING FAIRLY LENGTHY STATEMENTS
22 FROM WHAT LOOKS LIKE A DOCUMENT, AND I THINK IT MAY BE HELPFUL
23 TO PUT THE DOCUMENT IN FRONT OF THE WITNESS SO THAT HE CAN
24 ATTEST TO WHETHER HE AGREES WITH THE STATEMENTS OR NOT.

25 MR. JOHNSON: I CAN DO THAT, YOUR HONOR.

1 **THE COURT:** OKAY.

2 **MR. JOHNSON:** I'M READING, ACTUALLY, FROM JOINT
3 EXHIBIT 135.

4 **BY MR. JOHNSON:**

5 **Q** JOINT EXHIBIT 135. WE'RE GOING TO TRY TO GET THAT
6 ON THE SCREEN FOR YOU, DOCTOR. IF YOU HAVE BINDER 4 IN FRONT
7 OF YOU, YOU COULD HAVE A PAPER COPY THERE. SO THIS IS A
8 LETTER, YOU CAN SEE, THAT WAS SENT FROM THE LOUISIANA STATE
9 BOARD OF MEDICAL EXAMINERS AND ADDRESSED TO MS. STEPHANIE
10 TOTI, IT LOOKS LIKE, THE STAFF ATTORNEY FOR THE CENTER FOR
11 REPRODUCTIVE RIGHTS. DO YOU SEE THAT?

12 **A** YES.

13 **Q** AND THE LETTER IS DATED JULY 11TH, 2008?

14 **A** YES.

15 **Q** AND THE PORTION OR THE EXCERPT THAT I WAS JUST
16 READING FOR YOU IS AT THE TOP OF PAGE 2 OF THAT LETTER. DO
17 YOU SEE THAT?

18 **A** YES.

19 **Q** SO THERE'S A CITATION TO WHAT I JUST READ YOU, IT'S
20 A FOOTNOTE, AND IT COMES FROM, IF YOU LOOK DOWN AT THE
21 FOOTNOTE AT THE BOTTOM, THE *2008 CLINICAL POLICY GUIDELINES OF*
22 *THE NATIONAL ABORTION FOUNDATION*; DO YOU SEE THAT?

23 **A** YES.

24 **Q** SO HAVING SEEN THE SOURCE OF THAT QUOTATION, DOES
25 THAT CHANGE YOUR VIEW OF ITS VERACITY, ITS TRUTHFULNESS, OR

1 ACCURACY?

2 A WELL, LIKE I SAID, ANY PROCEDURE HAS RISKS. I MEAN,
3 WALKING DOWN THE STREET HAS A RISK. YOU CAN DIE AT ANY TIME.
4 MAYBE A PERSON COULD HAVE A LIFE-THREATENING CONDITION DURING
5 AN ABORTION THAT THEY COULD HAVE DURING A MINOR SKIN SURGERY.

6 I DON'T THINK THAT HAVING THE ABORTION ITSELF IS
7 THE -- COULD BE THE CAUSE OF THE LIFE-THREATENING -- YOU KNOW,
8 I MEAN, IT COULD BE A HEART PROBLEM THAT CAUSES IT. THEY
9 COULD HAVE A SEIZURE OR -- OR OTHER THINGS. SO I'M NOT --
10 YEAH, I MEAN IT COULD BE -- ANYTHING CAN BE LIFE-THREATENING,
11 SO THAT'S HOW I LOOK AT IT. I DON'T LOOK AT THAT ABORTIONS
12 GENERALLY SPEAKING ARE LIFE-THREATENING.

13 Q OKAY.

14 A COULD SOMETHING HAPPEN? YES, SOMETHING COULD
15 HAPPEN. SOMETHING COULD HAPPEN AT ANY TIME OF OUR LIVES.
16 LIFE IS FRAGILE. OUR BODIES ARE FRAGILE, YOU KNOW. SO
17 SOMEBODY PUT THAT IN THERE. IF I PUT IT -- IF I WAS TO WRITE
18 SOMETHING ABOUT ABORTION, I DON'T THINK THE FIRST THING THAT I
19 WOULD SAY IS THAT IT'S LIFE-THREATENING. IT'S A VERY SAFE
20 PROCEDURE, BUT, YOU KNOW...

21 Q SO YOUR OPINION WOULD DIFFER THAN -- OR YOU WOULD
22 WRITE THIS DIFFERENTLY THAN THE NATIONAL ABORTION FOUNDATION
23 AND THE LOUISIANA STATE BOARD OF MEDICAL EXAMINERS; IS THAT
24 RIGHT?

25 A I'M NOT -- I'M -- YOU KNOW, I'M NOT -- I DON'T KNOW

1 WHAT TO SAY TO THAT. BUT I JUST THINK THAT WHEN I THINK OF
2 ABORTION THE FIRST THING THAT COMES TO MIND IS NOT
3 LIFE-THREATENING. THAT'S ALL.

4 Q OKAY. THE NEXT LINE OF THAT PARAGRAPH AT THE TOP OF
5 PAGE 2 SAYS, "THE RISK OF COMPLICATIONS INCREASES WITH
6 GESTATIONAL AGE." DO YOU AGREE WITH THAT?

7 A YES. BUT THAT DOESN'T MEAN THAT -- YOU KNOW,
8 SOMETIMES THE COMPLICATION COULD BE WITH A FIVE-WEEK
9 PREGNANCY. SO IT DOESN'T NECESSARILY -- BUT, YES, IN GENERAL,
10 GENERALLY SPEAKING, THE FURTHER ALONG THE PREGNANCY THE MORE
11 LIKELY A COMPLICATION COULD OCCUR.

12 Q OKAY. NOW, A POSSIBLE COMPLICATION -- YOU CAN PUT
13 THAT EXHIBIT AWAY FOR THE MOMENT. SO WE'VE ESTABLISHED THAT A
14 SURGICAL ABORTION DOES CARRY THE RISK OF CERTAIN
15 COMPLICATIONS; CORRECT?

16 A CORRECT.

17 Q AND ONE OF THE POSSIBLE COMPLICATIONS, YOU WOULD
18 AGREE, IS HEMORRHAGING; RIGHT?

19 A YES.

20 Q AND I BELIEVE YOU TESTIFIED THAT YOU'VE SEEN A FEW
21 EXAMPLES OF THAT IN YOUR PRACTICE; RIGHT?

22 A YES.

23 Q AND ANOTHER POSSIBLE COMPLICATION IS RETAINED
24 TISSUE; RIGHT?

25 A CORRECT.

1 Q AND YOU'VE SEEN SOME EXAMPLES OF THAT?

2 A CORRECT.

3 Q ANOTHER POSSIBLE COMPLICATION OF ABORTION IS A
4 PERFORATED UTERUS; RIGHT?

5 A CORRECT.

6 Q AND A PERFORATED UTERUS COULD LEAD TO THE PATIENT'S
7 TREATMENT IN A HOSPITAL; CORRECT?

8 A YES.

9 Q AND TREATING THAT PATIENT COULD REQUIRE SURGICAL
10 CORRECTION; IS THAT RIGHT?

11 A MOST PERFORATIONS DO NOT REQUIRE SURGICAL
12 INTERVENTIONS. THEY HEAL ON THEIR OWN, BUT IT IS A
13 POSSIBILITY.

14 Q AND IF IT DID REQUIRE SURGERY TO REPAIR, THAT
15 SURGERY WOULD NEED TO BE DONE BY AN OB/GYN?

16 A YES.

17 Q NOW, YOU, YOURSELF, HAVE PERFORATED A PATIENT'S
18 UTERUS WHILE PERFORMING AN ABORTION; ISN'T THAT RIGHT?

19 A YES.

20 Q AND THAT PERFORATION REQUIRED THE PATIENT TO BE
21 HOSPITALIZED; DID IT NOT?

22 A YES.

23 Q AND IN ORDER TO TREAT THAT PATIENT, AN OB/GYN HAD TO
24 PERFORM LAPAROSCOPIC SURGERY ON HER; ISN'T THAT RIGHT?

25 A YES.

1 Q AND IN YOUR CASE, THE OB/GYN WHO PERFORMED THAT
2 LAPAROSCOPIC SURGERY ON THE PATIENT WAS DR. DOE NUMBER 3;
3 RIGHT?

4 A CORRECT.

5 Q AND DR. DOE NUMBER 3 TREATED THIS PATIENT AT
6 WILLIS-KNIGHTON HOSPITAL; ISN'T THAT RIGHT?

7 A YES.

8 Q AND WILLIS-KNIGHTON IS WITHIN 30 MILES OF HOPE
9 MEDICAL CLINIC WHERE YOU PROVIDE ABORTIONS; RIGHT?

10 A CORRECT.

11 Q AND WHEN HE PERFORMED THAT SURGERY, DR. DOE NUMBER 3
12 HAD ADMITTING PRIVILEGES AT WILLIS-KNIGHTON, DIDN'T HE?

13 A YES.

14 Q AND TO THE BEST OF YOUR KNOWLEDGE, DR. DOE NUMBER 3
15 STILL HAS ADMITTING PRIVILEGES AT WILLIS-KNIGHTON, DOES HE
16 NOT?

17 A YES.

18 Q HOW MANY DAYS PER WEEK DO YOU WORK AT THE CLINIC? I
19 BELIEVE YOU SAID JUST THREE; IS THAT RIGHT?

20 A CORRECT.

21 Q HAVE YOU EVER BEEN ASKED TO WORK MORE THAN THREE
22 DAYS A WEEK AT HOPE CLINIC?

23 A NO.

24 Q AND HAVE YOU EVER REQUESTED TO DO SO?

25 A NO.

1 Q AND THE REASON IS THAT YOU JUST LIKE WORKING THREE
2 DAYS A WEEK; ISN'T THAT RIGHT?

3 A I DON'T JUST WORK THREE DAYS A WEEK. I HAVE ANOTHER
4 PRACTICE, SO...

5 Q WELL, I MEAN, AT THE CLINIC.

6 A I MEAN, THAT'S THE WAY IT'S BEEN, AND I'M
7 COMFORTABLE WITH THAT.

8 Q SO IT'S YOUR CHOICE HOW MUCH OR HOW LITTLE YOU WORK
9 AT THE CLINIC; RIGHT?

10 A WELL, NOT REALLY MY CHOICE. I MEAN, I DON'T BRING
11 THE PATIENTS THERE. WHEN -- YOU KNOW, THE PATIENTS GO TO
12 HOPE, SO I TAKE CARE OF THE PATIENTS THAT GO THERE. IT WAS
13 NEVER MY CHOICE. THEY ASKED ME TO WORK THESE DAYS, AND I
14 AGREED.

15 Q BUT IF YOU WENT TO MS. PITTMAN OR YOU WENT TO
16 DR. DOE NUMBER 3 AND YOU SAID, "YOU KNOW WHAT, I'D LIKE TO
17 WORK MORE OR LESS." DO YOU BELIEVE THEY WOULD HONOR YOUR
18 REQUEST?

19 A I DON'T KNOW BECAUSE I'VE NEVER ASKED.

20 Q AND YOU'VE NEVER ASKED BECAUSE YOU'RE COMFORTABLE
21 WITH YOUR SCHEDULE?

22 A CORRECT.

23 Q DO YOU BELIEVE YOUR SCHEDULE IS AS DEMANDING AS MOST
24 OTHER PHYSICIANS IN OTHER SPECIALTIES?

25 A WELL, IT'S ALL RELATIVE. I MEAN SOME DOCTORS WORK

1 MORE AND SOME WORK LESS.

2 Q WOULD YOU SAY MOST DOCTORS WORK ONLY THREE DAYS A
3 WEEK IN A SETTING LIKE THIS?

4 MR. BROWN: OBJECTION.

5 THE COURT: WHAT IS IT?

6 MR. BROWN: THE WITNESS NEVER SAID THAT HE WORKED
7 THREE DAYS A WEEK.

8 THE COURT: OKAY.

9 MR. JOHNSON: AT THE CLINIC. I'M SORRY. I'LL
10 CLARIFY THE QUESTION.

11 BY MR. JOHNSON:

12 Q LET ME BACK UP, DOCTOR. YOU WORK THREE DAYS A WEEK
13 AT THE HOPE CLINIC AND THEN THE OTHERS YOU DEVOTE TO YOUR
14 ADDICTION PRACTICE; IS THAT RIGHT?

15 A YES.

16 Q SO DO YOU WORK TYPICALLY TWO DAYS A WEEK IN YOUR
17 ADDICTION PRACTICE OR MORE?

18 A I WORK PROBABLY -- I GO TO MY ADDICTION PRACTICE
19 FIVE DAYS A WEEK MOST OF THE TIME. SOME WEEKS, FOUR DAYS A
20 WEEK. SO IT'S EITHER MONDAY TO FRIDAY OR TUESDAY TO FRIDAY.
21 SOMETIMES I TAKE A WEDNESDAY OFF. SO I CAN SCHEDULE MY WEEKS
22 THE WAY I WANT TO. I USUALLY SCHEDULE TWO MONTHS IN ADVANCE,
23 SO I HAVE TO MAKE PLANS. LIKE NOW, IF I WANT TO DO SOMETHING
24 IN AUGUST, I HAVE TO THINK OF IT NOW. BUT, YOU KNOW, I HAVE
25 FLEXIBILITY BECAUSE I DO MY OWN SCHEDULE, BUT I WORK FIVE TO

1 SIX DAYS A WEEK.

2 Q OKAY. NOW, WHEN YOU WERE FIRST HIRED AT HOPE, WERE
3 YOU RECRUITED BY ANYONE PER SE?

4 A NO.

5 Q AND HOW DID YOU FIND OUT ABOUT THE JOB PROSPECT?
6 DID YOU HEAR ABOUT THAT FROM ANOTHER PHYSICIAN?

7 A YES, I HEARD ABOUT IT FROM ANOTHER PHYSICIAN, AND I
8 ALSO MET THE OWNER OF THE CLINIC AT THE TIME.

9 Q NOW, IN THE SEQUENCE OF EVENTS, YOU HEARD ABOUT IT
10 FROM ANOTHER PHYSICIAN AND THEN YOU CALLED AND INQUIRED AND
11 THEN MET MS. PITTMAN; IS THAT WHAT HAPPENED OR WAS IT
12 SOMETHING ELSE?

13 A I BELIEVE I WENT TO ONE OF THE CHRISTMAS PARTIES. I
14 WAS INVITED BY A CO-WORKER. AND SO I MET THE -- MOST OF THE
15 STAFF AT THIS CHRISTMAS PARTY THAT WAS AT A RESTAURANT.

16 Q SO IT'S ACCURATE TO SAY THAT THE HOPE CLINIC DID NOT
17 RECRUIT YOU, MORE ACCURATELY YOU CAME TO THEM; IS THAT RIGHT?

18 A WELL, I DID SUBMIT AN APPLICATION, YES.

19 Q BUT IN OTHER WORDS, THEY DIDN'T CONTACT YOU FIRST,
20 YOU CONTACTED THEM; RIGHT?

21 A YES.

22 Q OKAY. AND DOES THE HOPE CLINIC ENGAGE IN ANY TYPE
23 OF REGULAR RECRUITING EFFORT TO FIND OTHER PHYSICIANS?

24 A NOT THAT I KNOW OF.

25 Q THEY DON'T ADVERTISE IN JOURNALS FOR THESE JOB

1 OPENINGS, DO THEY?

2 A NOT THAT I KNOW OF.

3 Q AND THEY DON'T DO ANY TV, RADIO, OR PRINT
4 ADVERTISING IN THE SHREVEPORT/BOSSIER AREA, DO THEY?

5 A NOT THAT I KNOW OF.

6 Q HOW DO PEOPLE FIND OUT ABOUT THE SERVICES?

7 A I THINK THE PHONE BOOK.

8 Q AND SO BEYOND THE PHONE BOOK, THERE'S NO OTHER --
9 THERE'S NO OTHER ACTIVE EFFORT TO FIND COLLEAGUES TO WORK WITH
10 YOU AND LIGHTEN YOUR SCHEDULE THAT YOU KNOW OF; IS THAT RIGHT?

11 A REPEAT THE QUESTION, PLEASE.

12 Q WHAT I'M TRYING TO GET AT IS, IF YOU FELT THAT YOU
13 WERE OVERWORKED OR IF DR. DOE NUMBER 3 FELT HE HAD TOO MUCH TO
14 DO AT THE CLINIC, WHY ARE -- IS THERE AN EFFORT TO TRY TO FIND
15 AND HIRE ANOTHER DOCTOR AT THIS TIME?

16 A I DON'T KNOW BECAUSE I'M NOT PART OF THAT PROCESS,
17 SO, I MEAN, I CAN'T ANSWER HONESTLY, YOU KNOW, SOMETHING THAT
18 I'M NOT PART OF.

19 Q OKAY. THAT'S FAIR. NOW, WHAT TYPES OF ABORTION
20 PROCEDURES WILL YOU PERFORM? IN OTHER WORDS, WHAT'S THE
21 LATEST GESTATIONAL AGE THAT YOU'LL DO AN ABORTION FOR?

22 A ONLY FIRST TRIMESTER.

23 Q AND THAT'S 13 WEEKS 6 DAYS; IS THAT RIGHT?

24 A CORRECT.

25 Q AND I THINK YOU TESTIFIED EARLIER THAT YOU'RE NOT

1 ALLOWED TO DO PROCEDURES BEYOND THAT POINT?

2 A WELL, I THINK THAT IT WAS THE LOUISIANA MEDICAL
3 BOARD THAT PUT THAT SPECIFICATION. I BELIEVE IT MIGHT HAVE
4 BEEN IN THAT LETTER ADDRESSED TO MS. TOTI.

5 Q WELL, LET'S LOOK AT THAT LETTER, SHALL WE. DO YOU
6 HAVE THAT EXHIBIT BACK IN FRONT OF YOU?

7 A NO, BUT I CAN GET IT.

8 Q IT'S EXHIBIT TAB 135, I THINK. YEAH. I WANT YOU TO
9 JUST TAKE A MOMENT, IF YOU WILL -- IT'S CONFIDENTIAL, SO I
10 CAN'T QUOTE FROM IT. BUT I'D LIKE FOR YOU TO READ THAT
11 LETTER, REFRESH YOUR MEMORY ABOUT IT, AND THEN I WANT TO ASK
12 YOU WHERE IN THAT LETTER IT SAYS WHAT YOU JUST SUGGESTED.

13 A WELL, ON PAGE 2, IN PARAGRAPH NUMBER 1, IT SAYS --
14 IT HAS A NUMBER. IN THERE IT LOOKS LIKE THERE'S SOMETHING
15 THAT SAYS THE BOARD'S OPINION REGARDING THE PHYSICIANS THAT
16 PERFORM ABORTIONS AND WHAT THEY BELIEVE IS ACCEPTABLE LEVEL OF
17 TRAINING AND THAT KIND OF STUFF. SO, I MEAN, IT DOES MENTION
18 THE FIRST TRIMESTER.

19 Q RIGHT. BUT IS THERE A -- DOES IT SAY IN THAT
20 PARAGRAPH THAT YOU MAY ONLY PERFORM ABORTIONS UP TO 13 WEEKS 6
21 DAYS?

22 A WELL, I THINK THAT THAT WAS OUR UNDERSTANDING IN
23 RESPONSE -- YOU KNOW, WITH THIS LETTER, THAT I WASN'T GOING TO
24 DO PROCEDURES PAST FIRST TRIMESTER.

25 Q SO IT WAS YOUR INTERPRETATION OF THIS LETTER THAT

1 THAT WOULD BE YOUR PERSONAL LIMIT ON WHAT YOU COULD DO THEN?

2 A WELL, IT WAS THE BOARD'S OPINION, AND I THINK THAT
3 WE WANTED TO FOLLOW THEIR RECOMMENDATIONS OR WHAT -- YOU KNOW,
4 THEIR GUIDELINES.

5 Q WELL, LET'S TALK ABOUT THEIR GUIDELINES. THE NEXT
6 PARAGRAPH ON THAT SAME PAGE IS NUMBER 2. DO YOU SEE THAT?

7 A YES.

8 Q AND IT SAYS -- I WISH I COULD QUOTE IT TO YOU, BUT
9 YOU CAN READ IT THERE -- IF YOU DON'T HAVE THE CERTIFICATION
10 NOTED ABOVE -- WHICH IS OB/GYN; RIGHT -- IT SAYS YOU COULD
11 STILL BE CONSIDERED TO HAVE SUFFICIENT TRAINING TO PERFORM
12 THESE ABORTIONS IF YOU HAD, FOR EXAMPLE, IT LISTS FAMILY
13 MEDICINE --

14 A YES, CORRECT.

15 Q -- AS ONE OF THE -- DO YOU SEE THAT?

16 A UH-HUH.

17 Q NOW, IT SAYS YOU WOULD HAVE A HEAVIER BURDEN TO BE
18 DEEMED COMPETENT, BUT IT DOES NOT SAY YOU COULD NOT DO IT; IS
19 THAT RIGHT?

20 A I MEAN I'VE NEVER READ INTO THIS LETTER THAT
21 DEEPLY --

22 Q WELL --

23 A -- SO --

24 Q BUT THAT'S THE POINT, THAT'S WHAT I'M TRYING TO SAY,
25 IS THAT YOU TESTIFIED EARLIER THAT IT WAS YOUR UNDERSTANDING

1 THAT THE STATE BOARD OF MEDICAL EXAMINERS LIMITS YOU TO ONLY
2 PROVIDING FIRST TRIMESTER ABORTIONS, AND I'M TRYING TO ASK YOU
3 THE BASIS OF THAT UNDERSTANDING. IF IT'S THIS LETTER AND YOUR
4 INTERPRETATION OF IT, THAT'S OKAY, BUT I WANTED YOU TO EXPLAIN
5 THAT.

6 A WELL, I BELIEVE IT WAS IN THIS LETTER. AND WHEN WE
7 READ IT, THAT'S THE DECISION WE MADE, AND I AGREED TO IT.

8 Q OKAY.

9 A I FELT THAT, YOU KNOW, MOST OF THE PATIENTS ARE
10 FIRST TRIMESTER, SO I DIDN'T FEEL THE NEED TO TRAIN FURTHER
11 OR -- YOU KNOW, I JUST FELT LIKE THAT THAT WAS WHERE WE WOULD
12 STAY -- I --

13 Q I'M SORRY. ARE YOU FINISHED?

14 A YES.

15 Q IT'S HARD BECAUSE YOU'RE BEHIND A SCREEN AND I CAN'T
16 SEE YOU, SO I DON'T MEAN TO INTERRUPT.

17 THE VAST MAJORITY OF THE ABORTIONS PERFORMED AT THE
18 HOPE CLINIC ARE WITHIN THE FIRST TRIMESTER; IS THAT RIGHT?

19 A CORRECT.

20 Q AND WE THROW AROUND THOSE PHRASES BUT, I MEAN, COULD
21 YOU PUT A PERCENTAGE ON IT? I KNOW IT WOULDN'T BE ACCURATE,
22 BUT IN YOUR OPINION, YOUR VIEW, WHAT DOES THAT MEAN, "THE VAST
23 MAJORITY"? ARE WE TALKING 70 PERCENT? 80 PERCENT?

24 A IT WOULD DEFINITELY BE A GUESS --

25 MR. BROWN: OBJECTION.

1 **THE COURT:** I'M SORRY, DOCTOR. HOLD ON.

2 **MR. BROWN:** MR. JOHNSON ASKED THE WITNESS TO
3 SPECULATE. HE SAID HE ASSUMED HE WOULDN'T KNOW THE ANSWER.

4 **THE COURT:** SUSTAINED. SUSTAINED.

5 **BY MR. JOHNSON:**

6 **Q** IS "VAST MAJORITY" YOUR WORD OR MY WORD? WOULD YOU
7 AGREE THAT THAT'S AN ACCURATE SUMMARY?

8 **MR. BROWN:** OBJECTION.

9 **THE COURT:** WHAT'S THE OBJECTION?

10 **MR. BROWN:** HE'S SAYING -- HE'S QUOTING FROM
11 SOMETHING THAT SAYS "VAST MAJORITY," AND IT WOULD BE HELPFUL,
12 AGAIN, TO HAVE WHATEVER HE'S QUOTING FROM IN FRONT OF THE
13 WITNESS.

14 **THE COURT:** I THINK HE'S SUGGESTING THAT THAT'S WHAT
15 HE SAID.

16 **MR. JOHNSON:** I'M TRYING TO CLARIFY THAT.

17 **THE COURT:** I UNDERSTAND, AND SO GO AHEAD.

18 OVERRULED.

19 YOU MAY ASK AND YOU MAY ANSWER; DEPENDING UPON WHAT
20 THE NEXT QUESTION IS.

21 **MR. JOHNSON:** WELL, I THINK IT'S A FAIR ONE.

22 **BY MR. JOHNSON:**

23 **Q** DOCTOR, WHAT I'M TRYING TO GET AT IS, YOUR
24 LIMITATION STILL ALLOWS YOU TO TREAT MOST OR ALL OF THE
25 PATIENTS THAT ARE TREATED AT HOPE CLINIC; IS THAT RIGHT?

1 A DEFINITELY NOT ALL, BUT I WOULD SAY, JUST A GUESS,
2 PROBABLY, MAYBE 70 TO 80 PERCENT. I MEAN -- I MEAN THAT'S
3 JUST A GUESS.

4 Q OKAY.

5 A MAYBE LESS THAN THAT. I DON'T -- I DON'T KNOW.

6 Q ALL RIGHT.

7 A BECAUSE WE ALSO REFER OUT IF THEY'RE PAST -- SO IN
8 THE NUMBER OF PATIENTS THAT JUST COME FOR THE INITIAL, I DON'T
9 KNOW THE NUMBERS. SOME HAVE TO BE SENT TO A CLINIC THAT GOES
10 FURTHER THAN WE DO, SO I'M NOT EVEN THINKING ABOUT THOSE
11 NUMBERS.

12 Q OKAY. I ASKED YOU A MOMENT AGO ABOUT RECRUITING NEW
13 PHYSICIANS, AND I INTENDED TO ASK YOU ONE OTHER QUESTION ABOUT
14 THAT. ARE YOU AWARE OF A CONTRACT THAT EXISTS WITH LSU TO
15 TRAIN RESIDENTS IN THE ABORTION PRACTICE?

16 A YES, I'VE HEARD OF IT.

17 Q IS HOPE INVOLVED IN THAT SOMEHOW?

18 A YES. I BELIEVE THE OB/GYN DEPARTMENT CONTACTED HOPE
19 SO THAT THEY COULD FULFILL THEIR REQUIREMENTS TO CONTINUE
20 THEIR RESIDENCY PROGRAM.

21 Q AND SO WHAT IS YOUR UNDERSTANDING OF THAT
22 RELATIONSHIP? OR WHAT ROLE DOES HOPE HAVE IN THAT? ARE
23 YOU -- HAVE YOU ASSISTED IN THIS PROCESS, TRAINING RESIDENTS?

24 A WELL, THERE HAVE BEEN RESIDENTS, VERY FEW, THAT HAVE
25 COME IN AND I'VE HELPED THEM DO ULTRASOUNDS AND, YOU KNOW,

1 JUST -- THEY'VE OBSERVED ME DOING PROCEDURES. I MEAN, I THINK
2 THERE WAS JUST MAYBE ONE, ONE OR TWO. I THINK THERE WAS JUST
3 A FEW MED STUDENTS, AND I THINK THAT'S A WHOLE DIFFERENT THING
4 THAN THIS CONTRACT THAT YOU'RE TALKING ABOUT. BUT AS FAR AS
5 RESIDENTS, I'M THINKING JUST MAYBE ONE OR TWO.

6 Q IS -- WOULD THE PRIMARY RESPONSIBILITY FOR THAT BE
7 YOURS OR DR. DOE NUMBER 3?

8 A DR. DOE NUMBER 3.

9 Q SO THE CONTRACT THAT WE'RE REFERRING TO, CAN YOU
10 JUST -- MAYBE YOU HAVE, IF THAT'S THE BEST SUMMARY YOU CAN
11 PROVIDE. I'M JUST TRYING TO UNDERSTAND WHAT THAT ALLOWS.
12 WHAT'S THE RELATIONSHIP BETWEEN HOPE AND LSU WITH REGARD TO
13 TRAINING RESIDENTS IN THE ABORTION PRACTICE?

14 A YOU KNOW, I DON'T REALLY KNOW ENOUGH ABOUT IT TO
15 SPEAK CONFIDENTLY ABOUT WHAT'S IN THAT CONTRACT, I REALLY
16 DON'T. I WASN'T PART OF THE DECISION-MAKING ABOUT THAT, AND
17 I'VE NEVER REALLY -- CAN'T SAY THAT I'VE SEEN IT, SO IT'S HARD
18 FOR ME TO TALK ABOUT.

19 ALL I KNOW IS THAT IT WAS THE ACGME, SO THAT'S LIKE
20 THE GUIDELINES THAT ALL RESIDENCIES HAVE TO HAVE, AND IT WAS
21 SOMETHING THAT THE OBSTETRICAL OR ACGME FOR THE OB/GYN
22 RESIDENCY PROGRAM, THEY HAD TO HAVE A WAY TO PERFORM
23 TRAINING -- OR PROVIDE TRAINING TO THE RESIDENTS, AND SO THEY
24 REACHED OUT TO HOPE. I MEAN, THAT'S REALLY ALL I KNOW, AND
25 THAT IT'S LIKE MAYBE A FEW YEAR CONTRACT. AND I DON'T KNOW

1 HOW -- YOU KNOW, I'M JUST TELLING YOU THE LITTLE BIT I KNOW
2 ABOUT IT. THAT'S IT.

3 Q THANK YOU, DOCTOR. THAT'S FINE. DIFFERENT LINE OF
4 QUESTIONING. THE HOPE CLINIC MAINTAINS A POLICIES AND
5 PROCEDURES MANUAL; DOES IT NOT?

6 A I BELIEVE SO, YES.

7 Q AND HAVE YOU EVER BEEN SUPPLIED WITH A COPY OF THAT?

8 A I'VE SEEN CERTAIN PARTS OF IT. I DON'T KNOW IF I
9 HAVE ONE AT HOME.

10 Q HAVE YOU READ AND REVIEWED IT RECENTLY?

11 A NO.

12 Q IN THE LAST FIVE YEARS?

13 A I'M SURE THAT I'VE REVIEWED PARTS OF IT.

14 Q CONTAINED IN THAT POLICIES AND PROCEDURES MANUAL, I
15 WOULD IMAGINE THAT THERE ARE SOME POLICIES AND PROCEDURES THAT
16 PERTAIN TO PATIENT SAFETY; IS THAT RIGHT?

17 A YES. I'M SURE I FOLLOW THOSE PROCEDURES AND I DON'T
18 EVEN KNOW THAT I'M FOLLOWING A PROCEDURE, YOU KNOW, IT'S JUST
19 WHAT WE DO OR WHAT I DO.

20 Q WELL, DO YOU RECALL EVER REVIEWING THOSE POLICIES
21 AND PROCEDURES?

22 A I'M SURE I HAVE AT SOME POINT OR THEY WERE REVIEWED
23 WITH ME OR -- YES.

24 Q DO YOU THINK IT'S IMPORTANT FOR AN ABORTION CLINIC
25 OR FOR ANY HEALTHCARE PRACTICE TO HAVE A POLICIES AND

1 PROCEDURES MANUAL FOR STAFF?

2 A I'M SURE THERE'S SOME KIND OF BENEFIT TO THAT.

3 Q WELL, LET ME ASK YOU SPECIFICALLY. IN YOUR POLICIES
4 AND PROCEDURES MANUAL, DO YOU KNOW IF THERE'S A SECTION OR A
5 PART OF THAT THAT DEALS WITH INFECTION CONTROL POLICIES OR
6 PROCEDURES?

7 A I'VE HEARD OF SUCH.

8 Q BUT YOU'VE NEVER SEEN OR REVIEWED IT YOURSELF?

9 A I CAN'T -- I CAN'T SAY. I DON'T REMEMBER.

10 Q ARE YOU INVOLVED IN THE TRAINING OF YOUR STAFF AT
11 THE CLINIC IN ANY WAY?

12 A I HAVE DONE A FEW PRESENTATIONS OR, YOU KNOW, TALKS
13 TO THE STAFF, YES, ABOUT MEDICATIONS THAT WE GIVE AND -- I
14 MEAN, THAT'S JUST WHAT COMES -- THE LATEST ONE THAT I REMEMBER
15 GIVING A TALK ON.

16 Q ARE THE STAFF AT HOPE CLINIC RESPONSIBLE FOR HAVING
17 A WORKING KNOWLEDGE OF YOUR POLICIES AND PROCEDURES?

18 A I BELIEVE THEY ARE.

19 Q BUT YOU'VE NOT REVIEWED THEM YOURSELF, AT LEAST
20 RECENTLY?

21 A LIKE I SAID, I DO THINGS THAT ARE PROBABLY PART OF
22 THE PROCEDURE MANUAL, BUT I DON'T KNOW THAT IT'S PART OF THE
23 PROCEDURE MANUAL. IT'S JUST ONCE YOU START -- ONCE YOU'VE
24 BEEN WORKING SOMEWHERE FOR A LONG TIME, THESE ARE THE WAYS --
25 THIS IS HOW WE DO THINGS. SO WHETHER IT'S WRITTEN IN A

1 MANUAL, I CAN'T REMEMBER DIFFERENT, YOU KNOW --

2 Q OKAY. THAT'S FINE. YOU TESTIFIED EARLIER THAT YOU
3 WORKED IN A NUMBER OF EMERGENCY ROOMS IN RURAL HOSPITALS; IS
4 THAT RIGHT?

5 A CORRECT.

6 Q AND I HAVE THE LIST, AND TELL ME IF IT'S INCORRECT,
7 BUT ARCADIA, MANSFIELD, RAYVILLE, AND OLLA, LOUISIANA; IS THAT
8 RIGHT?

9 A YES.

10 Q WERE THERE ANY OTHERS BESIDES THOSE FOUR?

11 A I THINK I DID SOME IN SPRING -- SPRING HILL OR
12 SOMETHING LIKE THAT. SPRING HILL, I BELIEVE.

13 Q IT'S A BEAUTIFUL TOWN UP THERE.

14 NOW, THESE ARE ALL SMALL RURAL TOWNS; RIGHT?

15 A YES. MOSTLY, YES.

16 Q AND THESE HOSPITALS WERE SMALL RURAL HOSPITALS, I
17 GUESS; CORRECT?

18 A YES.

19 Q BUT EACH OF THEM HAD AN ACTIVE ER?

20 A YES. SOME MORE ACTIVE THAN OTHERS.

21 Q AND NONE OF THOSE HOSPITALS WERE WITHIN A 30-MILE
22 RADIUS OF AN ABORTION CLINIC; RIGHT?

23 A I DON'T KNOW. I NEVER RESEARCHED THAT.

24 Q WELL, HOW FAR OF A DRIVE -- WHAT'S THE CLOSEST OF
25 ARCADIA, MANSFIELD, RAYVILLE, OLLA, AND SPRING HILL, WHICH WAS

1 THE CLOSEST TO SHREVEPORT?

2 A I'D HAVE TO GUESS. PROBABLY MANSFIELD.

3 Q AND ABOUT HOW FAR -- HOW FAR WOULD MANSFIELD BE FROM
4 SHREVEPORT, DO YOU KNOW?

5 A ABOUT AN HOUR DRIVE, MAYBE.

6 Q SO IF YOU HAD TO DRIVE AN HOUR TO GET THERE, WOULD
7 THAT SUGGEST TO YOU THAT IT'S FURTHER THAN 30 MILES FROM THE
8 HOPE CLINIC?

9 A YES.

10 Q AND FURTHER THAN 30 MILES FROM THE ABORTION CLINIC
11 IN BOSSIER?

12 A CORRECT.

13 Q NOW, IS THERE ANY OTHER ABORTION CLINIC IN THAT
14 VICINITY, THAT REGION OF THE STATE?

15 A NOT THAT I KNOW OF.

16 Q SO IT'S FAIR TO SAY, THEN, THAT EACH OF THOSE ERS,
17 THOSE HOSPITALS, ARE BEYOND 30 MILES OF ABORTION CLINICS IN
18 SHREVEPORT/BOSSIER?

19 A YES.

20 Q AND YOU TESTIFIED YOU NEVER SAW AN ABORTION-RELATED
21 EMERGENCY IN AN ER IN ANY OF THOSE THAT YOU WORKED; IS THAT
22 RIGHT?

23 A CORRECT.

24 Q DIFFERENT SUBJECT MATTER. MS. PITTMAN TESTIFIED
25 YESTERDAY, I THINK IT WAS, THAT THE HOPE CLINIC COULD SERVE AS

1 MANY AS 60 PATIENTS -- OR DO AS MANY AS 60 PATIENT PROCEDURES
2 IN A DAY IF THE DEMAND EXISTED AND SHE SCHEDULED IT CAREFULLY.
3 DO YOU HAVE ANY REASON TO BELIEVE SHE'S WRONG?

4 A I MEAN, I COULD READ INTO THE QUESTION AND SAY ARE
5 YOU SAYING FIVE DAYS A WEEK, SIX DAYS A WEEK, THE THREE DAYS
6 THAT WE HAVE? HOW -- I MEAN --

7 Q WELL, WE WERE -- I WAS ASKING HIM --

8 A CONSISTENTLY? I DON'T THINK CONSISTENTLY. 60
9 PATIENTS IS AN AWFUL LOT OF PATIENTS.

10 Q IT IS AN AWFUL LOT OF PATIENTS, YOU SAID?

11 A OH, YES.

12 Q SO YOU DON'T BELIEVE THAT AT YOUR CURRENT CAPACITY
13 THAT YOU COULD SUSTAIN THAT NUMBER ON A REGULAR BASIS?

14 A ON A DAILY BASIS, NO.

15 Q IF YOU HIRED AN ADDITIONAL PHYSICIAN, WOULD YOU --
16 MIGHT YOU BE ABLE TO HANDLE THAT VOLUME?

17 A PERHAPS.

18 Q NOW, AT THE HOPE CLINIC, THERE ARE TWO OTHER
19 PHYSICIANS WHO ASSIST WITH PATIENT COUNSELING AND OBTAINING
20 THE CONSENTS; IS THAT RIGHT?

21 A YES.

22 Q AND THEY'RE BOTH RETIRED? OR IS ONE OF THEM
23 RETIRED?

24 A I DON'T KNOW IF HE'S RETIRED.

25 Q I MEAN, IN OTHER WORDS, THEY'RE NOT IN AN ACTIVE

1 MEDICAL PRACTICE OUTSIDE OF HOPE CLINIC?

2 A WELL, ONE DOES WORK AT UNIVERSITY HEALTH, AND THE
3 OTHER ONE, I BELIEVE, ONLY WORKS AT HOPE, YES.

4 Q AND SO FOR BOTH OF THOSE PHYSICIANS, THEIR ONLY
5 INVOLVEMENT AT HOPE IS TO DO THE COUNSELING AND THE CONSENTS?
6 IN OTHER WORDS, THEY DON'T PROVIDE THE PROCEDURES THEMSELVES?

7 A CORRECT.

8 Q BUT YOU DO SOME OF THE COUNSELING STILL; IS THAT
9 RIGHT?

10 A YES.

11 Q ON AT LEAST ONE DAY A WEEK?

12 A YES.

13 Q AND IS IT ABOUT HALF OF YOUR DAY THAT'S DEVOTED TO
14 THAT?

15 A YOU KNOW, A FEW HOURS. DEPENDS ON HOW MANY PATIENTS
16 ARE COMING IN THAT DAY. IT COULD BE TEN PATIENTS, MAYBE 20 AT
17 THE MOST. I MEAN NOT AT THE MOST, BUT, I MEAN, THAT WOULD BE
18 A BUSY CONSENT DAY IF IT WAS 20.

19 Q SO DOES DR. DOE NUMBER 3 DO PATIENT COUNSELING AT
20 ALL OR IS HE STRICTLY PROCEDURES?

21 A HE DOESN'T DO ANY OF THE CONSENTS UNLESS IT'S, YOU
22 KNOW -- IF HE HAPPENED TO BE THERE OR IF -- YOU KNOW, YOU
23 COULD ACTUALLY DO A CONSENT AT YOUR OFFICE, SO MAYBE HE'S DONE
24 A CONSENT AT HIS OFFICE IN BOSSIER. I DON'T KNOW.

25 Q BUT ON A REGULAR BASIS --

1 A NO.

2 Q -- A TYPICAL --

3 A NO.

4 Q SO THERE'S THREE PHYSICIANS AT THE HOPE CLINIC THAT
5 HANDLE THE CONSENTS; IS THAT RIGHT?

6 A CORRECT.

7 Q YOU AND THE TWO OTHERS THAT WE JUST DISCUSSED?

8 A CORRECT.

9 Q OKAY. ON A TYPICAL BASIS; RIGHT?

10 A YES.

11 Q SO THE QUESTION IS, IS IT POSSIBLE THAT YOU COULD BE
12 SCHEDULED SO THAT YOU DO ONLY PROCEDURES AND THE OTHER TWO
13 AVAILABLE PHYSICIANS HANDLE ALL OF THE CONSENTS AND THE
14 COUNSELING?

15 A YES.

16 Q AND IF THAT WERE THE CASE, THEN YOU COULD PERFORM A
17 HIGHER VOLUME OF ABORTION PROCEDURES; RIGHT?

18 A YES.

19 Q AND IS THERE ANY REASON THAT YOU DON'T DO THAT? IS
20 IT BY CHOICE? BY YOUR OWN CHOICE?

21 A I'VE NEVER BEEN ASKED TO MAKE THAT DECISION, SO, I
22 MEAN, IT'S NEVER COME UP THAT I DON'T DO MY CONSENT DAY. I
23 MEAN IT'S -- I JUST -- I DON'T --

24 Q BUT YOU'RE NOT REQUIRED TO HAVE A CONSENT DAY --

25 A NO.

1 **Q** -- TO -- OKAY. BECAUSE DR. DOE NUMBER 3 DOESN'T;
2 CORRECT?

3 **A** NO -- YES, CORRECT. I MEAN...

4 **Q** SO IF THE VOLUME AND THE DEMAND WERE THERE AT YOUR
5 CLINIC --

6 **A** YES.

7 **Q** -- YOU COULD DO MORE ABORTIONS THAN YOU CURRENTLY
8 DO; IS THAT RIGHT?

9 **A** CORRECT.

10 **MR. JOHNSON:** NO FURTHER QUESTIONS.

11 **THE COURT:** THANK YOU.

12 REDIRECT?

13 **REDIRECT**

14 **BY MR. BROWN:**

15 **Q** DR. DOE, THIS IS DAVID BROWN AGAIN. I JUST HAVE A
16 FEW QUESTIONS FOR YOU. DID YOU PERSONALLY HAVE A CONVERSATION
17 WITH A PHYSICIAN AT CHRISTUS HOSPITAL IN JANUARY OF 2006?

18 **A** I DON'T REMEMBER THE MONTH, BUT I DID HAVE A BRIEF
19 CONVERSATION OVER THE PHONE WITH A PHYSICIAN FROM CHRISTUS,
20 YES.

21 **Q** AND WAS IT YOUR UNDERSTANDING AFTER THE CALL WAS
22 OVER THAT -- THAT CHRISTUS WAS OFFERING -- WAS INFORMING YOU
23 THAT THE NONSTAFF CAREGIVER OPTION WAS THE APPROPRIATE OPTION
24 FOR YOU TO PURSUE?

25 **A** YES.

1 Q COULD YOU PLEASE TURN TO TAB 133 IN BINDER, I
2 BELIEVE IT'S FOUR?

3 A YES.

4 Q YOU RECALL THAT MR. JOHNSON ASKED YOU A FEW
5 QUESTIONS ABOUT THIS?

6 A YES.

7 Q AND THAT'S YOUR SIGNATURE THERE; IS THAT CORRECT?

8 A CORRECT.

9 Q IS IT YOUR UNDERSTANDING THAT WILLIS-KNIGHTON WOULD
10 HAVE PROCESSED YOUR APPLICATION FOR ADMITTING PRIVILEGES IF
11 YOU HADN'T SIGNED THAT PAGE?

12 A CHRISTUS; CORRECT?

13 Q I'M SORRY. CHRISTUS. I APOLOGIZE.

14 A YES. I MEAN, I BELIEVE THIS WAS ONE OF THEIR THINGS
15 THAT THEY WANTED ME TO SIGN.

16 Q OKAY. IN A -- LET'S SEE. OH, ONE MOMENT, PLEASE,
17 DOCTOR. COULD YOU TURN TO EXHIBIT 135?

18 A YES.

19 Q AND LET ME KNOW WHEN YOU'RE THERE.

20 A I'M HERE.

21 Q YOU WERE JUST ASKED ABOUT THIS LETTER BY
22 MR. JOHNSON; IS THAT RIGHT?

23 A CORRECT.

24 Q AND THIS IS A LETTER FROM THE LOUISIANA STATE BOARD
25 OF MEDICAL EXAMINERS; ISN'T THAT RIGHT?

1 A CORRECT.

2 Q AND IT'S ADDRESSED TO THE CENTER FOR REPRODUCTIVE
3 RIGHTS; IS THAT CORRECT?

4 A YES.

5 Q AND THE CENTER FOR REPRODUCTIVE RIGHTS ARE HOPE
6 CLINIC'S LAWYERS; ISN'T THAT RIGHT?

7 A YES.

8 Q NOW, IF YOU LOOK AT THE BOTTOM OF THE FIRST PAGE --

9 A YES.

10 Q -- AT THE VERY FIRST SENTENCE OF THAT LAST
11 PARAGRAPH --

12 A YES.

13 Q -- IT SAYS THERE THAT, "THE BOARD RECOGNIZES THAT
14 MOST FIRST TRIMESTER ABORTIONS ARE PERFORMED WITHOUT SERIOUS
15 COMPLICATIONS"; IS THAT CORRECT?

16 A YES.

17 Q DO YOU AGREE WITH THAT STATEMENT?

18 A YES.

19 Q AND IF YOU FLIP TO THE NEXT PAGE, 2805, AND LOOK
20 DOWN TO PARAGRAPH 2, THE ONE THAT'S NUMBERED 2 THERE.

21 A YES.

22 Q IF YOU LOOK IN THE -- THERE'S SORT OF A BIG SENTENCE
23 IN THE MIDDLE, AND THAT SENTENCE ENDS -- IT BASICALLY SAYS
24 THAT, "A PHYSICIAN WHO'S DONE A RESIDENCY IN" -- NOW I'M
25 QUOTING -- "FAMILY MEDICINE AND HAS OBTAINED EDUCATIONAL AND

1 CLINICAL TRAINING IN PERFORMING ABORTIONS WHERE HE OR SHE HAS
2 DEMONSTRATED THE KNOWLEDGE, SKILLS, AND ABILITY REQUIRED TO
3 PERFORM THE PROCEDURES, UNQUOTE, MAY DO FIRST TRIMESTER
4 ABORTIONS." IS THAT A FAIR READING OF THAT PARAGRAPH?

5 A YES.

6 Q SO IT'S YOUR UNDERSTANDING THAT THAT'S THE OPINION
7 OF THE -- IS IT YOUR UNDERSTANDING THAT THAT IS THE OPINION OF
8 THE LOUISIANA STATE BOARD OF MEDICAL EXAMINERS?

9 A YES.

10 Q AND THEN IT SAYS, "SUCH A PHYSICIAN SHOULD BE ABLE
11 TO PROVIDE DOCUMENTATION RELATING TO THIS TRAINING AND
12 DEMONSTRATION OF COMPETENCE." DID I READ THAT CORRECTLY?

13 A YES.

14 Q HAVE YOU PRESENTED SUCH DOCUMENTATION TO THE BOARD
15 OF MEDICAL EXAMINERS?

16 A YES, I HAVE.

17 Q AND IF YOU GO TO THE NEXT PAGE, ON PAGE 2806,
18 THERE'S A PARAGRAPH NUMBERED 4. DO YOU SEE THAT?

19 A YES.

20 Q AND IF YOU LOOK AT THE LAST SENTENCE, IT BEGINS, "SO
21 WHILE A PHYSICIAN WHO PERFORMS MEDICAL ABORTIONS NEED NOT
22 POSSES COMPETENCE IN PERFORMING THE PROCEDURES OF SURGICAL
23 ABORTION." DID I READ THAT CORRECTLY?

24 A YES.

25 Q SO DO YOU UNDERSTAND IT'S THE LOUISIANA STATE BOARD

1 OF MEDICAL EXAMINER'S OPINION THAT A PHYSICIAN WHO PROVIDES
2 MEDICATION ABORTIONS NEED NOT POSSES COMPETENCE IN PERFORMING
3 THE PROCEDURES OF SURGICAL ABORTION?

4 A IT SEEMS SO.

5 Q YOU CAN PUT THAT LETTER ASIDE, DOCTOR. YOU WERE
6 ASKED ABOUT TRANSFERRING PATIENTS TO THE CARE OF DR. DOE 3; DO
7 YOU REMEMBER THOSE QUESTIONS?

8 A YES.

9 Q AND DO YOU HAVE AN AGREEMENT WITH DR. DOE 3 TO DO
10 THAT?

11 A YES.

12 Q AND IS IT IN WRITING?

13 A YES.

14 Q AND DOES THAT AGREEMENT ENSURE THAT EVERY ABORTION
15 PATIENT OF YOURS WHO NEEDS SURGICAL CARE CAN GET IT?

16 A YES.

17 Q AND IS THAT TRUE EVEN THOUGH YOU PERSONALLY DON'T
18 HAVE ADMITTING PRIVILEGES AT ANY HOSPITAL?

19 A YES.

20 Q NOW, IF YOU DON'T HAVE PRIVILEGES, YOU TESTIFIED
21 EARLIER YOU WOULD STOP PROVIDING ABORTION CARE IF THE LAW TOOK
22 EFFECT; IS THAT RIGHT?

23 A YES.

24 Q SO IF THAT WERE THE CASE, WOULD IT MATTER HOW MANY
25 HOURS A WEEK YOU WERE WILLING TO WORK PROVIDING ABORTIONS?

1 A NO.

2 Q THE NUMBER OF ABORTIONS YOU WOULD PROVIDE WOULD
3 STILL BE ZERO; IS THAT FAIR?

4 A YES.

5 Q YOU WERE ASKED A FEW QUESTIONS ABOUT THE POLICIES
6 AND PROCEDURES MANUAL OF -- MANUALS OF HOPE CLINIC, AND IF I
7 RECALL CORRECTLY, YOU TESTIFIED THAT THERE ARE SOME; IS THAT
8 FAIR?

9 A YES.

10 Q AND DO THEY COVER AREAS THAT YOU'RE NOT RESPONSIBLE
11 FOR?

12 A YES, SOME OF THE AREAS.

13 Q IN PARTICULAR, IS IT YOUR RESPONSIBILITY TO OVERSEE
14 THE IMPLEMENTATION OF HOPE CLINIC'S INFECTION CONTROL POLICY?

15 A NO.

16 Q IF YOU REVIEWED A PROCEDURE OR POLICY AND THEN IT
17 NEVER CHANGED, WOULD YOU EVER NEED TO READ IT AGAIN?

18 A NO.

19 Q IF YOU -- LET ME WITHDRAW THAT QUESTION. IT'S THE
20 PRACTICE OF HOPE MEDICAL CLINIC TO TELL WOMEN WHO IS
21 EXPERIENCING AN EMERGENCY -- WELL, LET ME ASK YOU THIS: DO
22 YOU GIVE INSTRUCTIONS TO PATIENTS REGARDING WHAT TO DO IF
23 THEY'RE EXPERIENCING AN EMERGENCY AFTER THEY LEAVE THE CLINIC?

24 A WELL, IN THE CASE OF MEDICATION ABORTION, I
25 DEFINITELY DISCUSS WITH EACH PATIENT IF THEY EXPERIENCE HEAVY

1 BLEEDING TO CALL US OR, YOU KNOW, DIFFERENT THINGS WITH --
2 BECAUSE THOSE PATIENTS AREN'T MEDICATED, SO THEY'RE NOT UNDER
3 ANY KIND OF MEDICATION.

4 WHEREAS SURGICAL PATIENTS DO RECEIVE VALIUM. AND I
5 DON'T TALK TO THEM ABOUT THOSE THINGS, BUT THEY ARE -- THE
6 COUNSELOR TALKS TO THEM A LITTLE WHILE AFTER THE PROCEDURE,
7 MAYBE 30 MINUTES, AND THEY ARE ALSO GIVEN A SHEET OF, YOU
8 KNOW, ALL OF THE THINGS THEY NEED TO PAY ATTENTION TO OR DO OR
9 NOT TO DO AND -- SO EVERYTHING'S REVIEWED WITH THEM.

10 THE PATIENTS ALL -- YOU KNOW, THEY ALSO GET ALL OF
11 THIS INFORMATION THE FIRST DAY THAT THEY COME INTO THE CLINIC.
12 SO I THINK THAT WE GO OVER THESE THINGS SEVERAL TIMES BEFORE
13 THEY LEAVE.

14 Q IF A PATIENT HAS A MEDICAL EMERGENCY SUBSEQUENT TO
15 LEAVING THE CLINIC THAT COULDN'T BE TREATED IN THE CLINIC,
16 WHAT WOULD YOU TELL THEM TO DO?

17 A WELL, IF IT WAS A REAL EMERGENCY, TO GO TO THEIR
18 CLOSEST EMERGENCY ROOM. IF IT WAS SOMETHING THAT COULD WAIT
19 AND THEY NEED FURTHER EVALUATION, THEY SHOULD COME BACK TO US
20 AT HOPE AND WE CAN DO A FOLLOW-UP ON THEM. SO IT REALLY
21 DEPENDS ON THE SITUATION.

22 Q SO IF A PATIENT WERE FOLLOWING YOUR RECOMMENDATION
23 FOR WHAT YOU'VE TERMED, "A REAL EMERGENCY," THEN SHE WOULD GO
24 TO THE NEAREST EMERGENCY ROOM; IS THAT FAIR?

25 A YES.

1 Q OKAY. AND DO YOU HAVE PATIENTS WHO COME FROM THE
2 SMALL TOWNS THAT YOU USED TO WORK AT AS AN EMERGENCY PHYSICIAN
3 TO OBTAIN ABORTIONS AT HOPE CLINIC?

4 A I'M SURE SOME COME FROM SMALL TOWNS.

5 Q AND IF THEY WERE TO GO BACK TO THEIR SMALL TOWN AND
6 HAVE WHAT YOU CALL A REAL EMERGENCY AND THEY WERE FOLLOWING
7 HOPE CLINIC'S ADVICE, THEY WOULD GO TO THE ER IN THOSE TOWNS;
8 IS THAT FAIR?

9 A YES.

10 Q AND YOU SAID YOU WERE AN EMERGENCY PHYSICIAN --
11 WELL, AFTER YOUR RESIDENCY; IS THAT RIGHT?

12 A CORRECT.

13 Q SO MORE THAN -- IN THE LAST DECADE SOME TIME; IS
14 THAT RIGHT?

15 A YES.

16 Q DO YOU KNOW WHERE THE ABORTION CLINICS IN LOUISIANA
17 WERE LOCATED IN THE LAST DECADE AS OPPOSED TO NOW?

18 A I'M NOT QUITE UNDERSTANDING THE QUESTION.

19 Q YOU KNOW WHAT, THAT'S FINE. IT WAS A LOUSY
20 QUESTION. I THINK I HAVE -- OH, JUST ONE MORE QUESTION.

21 IS IT YOUR UNDERSTANDING THAT THE LOUISIANA STATE
22 BOARD OF MEDICAL EXAMINERS DESIRES THAT SOMEONE WITH YOUR
23 TRAINING AND QUALIFICATIONS DO ONLY FIRST TRIMESTER ABORTIONS?

24 A YES, THAT'S MY UNDERSTANDING.

25 MR. BROWN: THANK YOU. I HAVE NOTHING FURTHER.

1 AND Y'ALL ARE ABOUT THE TASK OF, YOU KNOW, GOING THROUGH THE
2 TRANSCRIPT AND WRITING BRIEFS, I STILL WOULD LIKE TO SEE THAT.

3 AND IF -- IT OCCURRED TO ME ALSO THAT THERE MIGHT BE
4 SOMETHING THAT WOULD COME UP, I HATE TO EVEN THINK ABOUT THIS,
5 BUT THAT'S WHAT WE DO -- IF YOU HAD AN E-MAIL OR SOMETHING
6 THAT GAVE RISE TO THE NEED FOR SOME ADDITIONAL TESTIMONY, THEN
7 I WOULD WANT AT LEAST TO GIVE THE PARTIES THE RIGHT TO ASK FOR
8 THAT. BUT -- IT'S JUST SORT OF A MOVING TARGET FOR THE COURT
9 IS THE PROBLEM. AND SO IN ANY EVENT, WE'LL TALK ABOUT THAT AT
10 THE END OF THE TRIAL, BUT I JUST WANTED TO MENTION THAT.

11 THE OTHER THING BEING, OF COURSE, THE ISSUE OF THE
12 EXHIBITS AND MAKING SURE THAT WE HAVE THE EXHIBIT NUMBERS
13 CORRECT AND HOPEFULLY ALL IN A FORM THAT IT'LL BE EASY FOR ME
14 AND MY CLERK AND THE COURT OF APPEAL EVENTUALLY TO, YOU KNOW,
15 FIGURE OUT WHAT EXHIBIT'S BEING TALKED ABOUT AT A GIVEN POINT
16 IN THE TRIAL.

17 **MS. DOUFEKIAS:** YOUR HONOR, I ACTUALLY SPOKE WITH
18 MS. CAUSEY DURING THE BREAK, AND I THINK WE UNDERSTAND WHAT WE
19 NEED TO MAKE SURE IS DONE, AND WE ARE IN THE PROCESS OF DOING
20 THAT. BUT I APPRECIATE YOUR COMMENTS AND IT IS A CONCERN OF
21 OURS AS WELL, AND WE'LL MAKE SURE THE COURT HAS EVERYTHING IT
22 NEEDS.

23 **THE COURT:** GREAT. THANK YOU SO MUCH.

24 OKAY.

25 **MR. DUNCAN:** THANK YOU, YOUR HONOR. THE DEFENSE

1 GOING TO TAKE DR. MARIER TOMORROW --

2 THE COURT: OKAY. THIS IS DR. MARIER NEXT?

3 MR. DUNCAN: -- MORNING AND THEN SOLANKY AFTER HIM.

4 THE COURT: OKAY. GREAT.

5 WELL, THEN ANY BUSINESS WE CAN TAKE UP BEFORE WE
6 ADJOURN FOR THE AFTERNOON?

7 OKAY. HEARING NONE, THEN WE WILL SEE YOU TOMORROW
8 AT 8:30.

9 (WHEREUPON COURT WAS RECESSED.)

10 C E R T I F I C A T E

11 I CERTIFY THAT THE FOREGOING IS A CORRECT TRANSCRIPT
12 FROM THE RECORD OF THE PROCEEDINGS IN THE ABOVE-ENTITLED
13 NUMBERED MATTER.

14 S:/ GINA DELATTE-RICHARD

15 GINA DELATTE-RICHARD, CCR

16 OFFICIAL COURT REPORTER

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