

Sharp Grossmont Hospital  
5555 Grossmont Center Drive  
La Mesa, CA 91944

Emergency Department  
619 740-4401  
Assessment Sheet

MR # 573214

Account # 81017231

Unit Code: B CRIT-

ICAL.

Name: Flores, Eduardo

AKA: ,

Phone: (619)715-6515

Address: 4541 ACACIA AVE, LA MESA, CA 919416-447

Sex: Male

DOB: 07/10/1954

Age: 53

Order Entered into HIS - CARMEN ENRIQUEZ at 06/25/2008 15:35  
Prepare Patient for Xray - ANNY COBERLY RN at 06/25/2008 15:47  
Obtain Xray - ANNY COBERLY RN at 06/25/2008 16:01  
X-Ray/Result Returned - ANNY COBERLY RN at 06/25/2008 16:54  
Review Results (completion not documented)

Other Orders and Results

06/25/2008 15:26 - EKG - MARC KOBERNICK MD, MD

Verified By: MARC KOBERNICK MD, MD

Order Entered HIS - CARMEN ENRIQUEZ at 06/25/2008 15:30

EKG - ANNY COBERLY RN at 06/25/2008 15:26

EKG Shown to MD - ANNY COBERLY RN at 06/25/2008 15:26

IV Orders and Doc

06/25/2008 15:34 - -SALINE LOCK - MARC KOBERNICK MD, MD

Saline Lock (completion not documented)

Treatments

(none)

Physician Note

(none)

Dictation Reference Numbers

(none)

Chart Body

14:58 06/25/2008 - Arrival Information - DONNA ANDREWS RN

Mode of Arrival: Medic

Mobility: Stretcher

Ambulance: American Med Response Medic 254

14:58 06/25/2008 - Acuity - DONNA ANDREWS RN

Acuity: 2 - Emergent

14:58 06/25/2008 - Change Room - DONNA ANDREWS RN

Change Room: Ambulance 1

14:58 06/25/2008 - Change Room - DIANE DETRO RN

Change Room: B Critical Ambulance

15:00 06/25/2008 - Change Physician - MARC KOBERNICK MD, MD

ER Physician: KOBERNICK MD, MARC -

Resident: UNASSIGNED, -

Prim. Care Provider: UNASSIGNED, -

Responsible Physician: KOBERNICK MD, MARC -

15:03 06/25/2008 - Change Room - ANNY COBERLY RN

Change Room: B Critical Rm 6

15:03 06/25/2008 - Change Nurse - ANNY COBERLY RN

Primary Nurse: COBERLY RN, ANNY

Secondary Nurse: UNASSIGNED

Responsible Nurse: COBERLY RN, ANNY

15:12 06/25/2008 - Receive Patient - ANNY COBERLY RN

Last Name: Flores

First Name: Eduardo

Date of Birth: 07/10/1954

Location: B Critical Rm 6

Chief Complaint: ...chest pain

Initial Triage Acuity: 2 - Emergent

Condition on arrival: Stable

Treatments PTA: Lasix, Oxygen, IV therapy

Documents Received: EMS run sheet

15:13 06/25/2008 - Patient Metrics - ANNY COBERLY RN

Stated weight: 153 lbs

Converted Height:

15:13 06/25/2008 - Medicine - ANNY COBERLY RN

Med: \*NONE

Disposition: Consult PCP

15:13 06/25/2008 - Allergy Information - ANNY COBERLY RN

Allergy: \*No Known Drug Allergies

; Latex Allergy? {No}

15:14 06/25/2008 - Sharp Healthcare Number - REGS

Sharp Healthcare Number: SHC-100501784

15:16 06/25/2008 - Past Medical History - ANNY COBERLY RN

Medical history: Valve Disease

Surgical history: No Surgical History

Social history: \*Pt. denies tobacco use, EtOH use - occasional, \*Pl.

denies drug use

Immunization History: Tetanus unknown

Flu Immunization History: Flu Vaccination UNKNOWN

Pneumonia Immunization History: Pneumonia Vaccination UNKNOWN

Pull forward verified by: COBERLY RN, ANNY

Note: cardiac cath

15:16 06/25/2008 - Vital Signs - ANNY COBERLY RN

Temp: 99 Oral

BP: 122/88

HR: 63

Resp: 16

15:18 06/25/2008 - Vital Signs - ANNY COBERLY RN

Temp: 98.9 Oral

15:16 06/25/2008 - Oximetry - ANNY COBERLY RN

Pulse Oximetry %: 99

Oxygen Therapy: Room Air

15:19 06/25/2008 - Initial Triage Info - ANNY COBERLY RN

Complaint Code: Cardiac/Cardiovascular

Presenting Complaints: Chest pain, Nausea

Chief Complaint: ...chest pain

Initial Triage Acuity: 2 - Emergent

Quick Assessment: -Awake, alert and oriented x 3, -Moves all extremities w/o difficulty, -Mucous membranes pink, -Respirations even and unlabored, -Skin warm and dry to touch, -Speech clear and coherent, BREATHING no respiratory distress, BREATHING speaking complete sentences, NEURO alert & oriented x3, NEURO Loss of Consciousness - denies, PAIN free, PSM intact, SKIN warm & dry

Significant Neg. Findings: Denies pain at present

Level Of Consciousness: Alert and oriented x 4, Appropriate for age

Patient Feels Safe At Home?: Yes

CC psych/behavioral/sub. abuse?: No

Note: cc midsternal cp x5 days, pt went to Kaiser clinic for eval of his cp, pt states pain increases when he wakes up, pressure pain, to mid sternal chest with rad to left arm. CP relieves with walking. Pt also c/o nausea, denies vomiting, dizziness and SOB. Clinic staff gave pt 162 mg ASA and did 12 lead which they said was abnormal. On medics arrival to clinic, pt was CP free, medics gave nitro-paste only.

15:20 06/25/2008 - IV Documentation - ANNY COBERLY RN

Site: Left Wrist

15:20 06/25/2008 - IV Documentation - ANNY COBERLY RN

Site #: Location 1

Site: Left Wrist

Catheter size: 18g

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**La Mesa, CA 91944**

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**619 740-4401**  
**Assessment Sheet**

MR # 573214  
 ICAL

Account # 81017231

Unit Code: B CRIT.

Name: Flores, Eduardo

AKA:

Phone: (619) 715-6515

Address: 4541 ACACIA AVE, LA MESA, CA 919416447

Sex: Male

DOB: 07/10/1954

Age: 53

Rate: Saline Lock

IV Specifications: IV started prior to arrival

Note: medic iv

15:23 06/25/2008 - Subjective/HPI - ANNY COBERLY RN

Note: per pt, pt states that he was also feeling dizzy x5 days

15:24 06/25/2008 - Primary Survey - ANNY COBERLY RN

Airway: Intact

Breathing: Present

Breath Sounds - Left: Breath sounds - Clear

Breath Sounds - Right: Breath sounds - Clear

Circulation: Pulses present rate, rhythm wnl

Radial - L: Present

Radial - R: Present

Dorsal Pedis - L: Present

Dorsal Pedis - R: Present

Cap refill: Under 2 seconds

RUE Strength: Normal

RLE Strength: Normal

LUE Strength: Normal

LLE Strength: Normal

Exposure: \*Call bell with patient and educated, \*Monitor alarms set and confirmed, Clothing removed, Pt in gown

15:25 06/25/2008 - Cardiovascular - ANNY COBERLY RN

History: patient, EMS

Symptom: chest pressure, nausea, dizziness

Heart sounds: S1 - normal, S2 - normal

Breath Sounds - Left: Breath sounds - Clear

Breath Sounds - Right: Breath sounds - Clear

Note: cc mid sternal cp with red to left arm, pt stating cp increases when lying on his left side. Also c/o nausea, dizziness, denies SOB, and vomiting, neg diaphoresis

Aspirin Administration: Given Prehospital EMS

15:25 06/25/2008 - Pain Assessment - ANNY COBERLY RN

Currently In Pain: No

15:25 06/25/2008 - Nurse Diagnosis - ANNY COBERLY RN

Nurse Diagnosis: Pain

Desired/Expected Outcome: Patient remains free from harm

15:26 06/25/2008 - Supporting Documentation - ANNY COBERLY RN

Ordering Physician: KOBERNICK MD, MARC

Orders: EKG

15:34 06/25/2008 - Supporting Documentation - MARC KOBERNICK MD, MD

Ordering Physician: KOBERNICK MD, MARC

Clinical Indications: Pain

Orders: CBC, CHOLESTEROL-TOTAL, CK, COMP METABOLIC PANEL, TROPONIN, CHEST 1 VIEW PORTABLE

15:34 06/25/2008 - Supporting Documentation - MARC KOBERNICK MD, MD

Ordering Physician: KOBERNICK MD, MARC

Orders: -SALINE LOCK

15:46 06/25/2008 - Vital Signs - ANNY COBERLY RN

BP: 113/78

HR: 57

Resp: 16

15:48 06/25/2008 - Oximetry - ANNY COBERLY RN

Pulse Oximetry %: 99

Oxygen Therapy: Nasal Cannula

Concentration: 2

Units: L/min

15:47 06/25/2008 - Group Orders - ANNY COBERLY RN

Grouped Orders: CBC - Obtain Specimen, CHOLESTEROL-TOTAL - Obtain Specimen, CK - Obtain Specimen, COMP METABOLIC PANEL - Obtain Specimen, TROPONIN - Obtain Specimen

15:47 06/25/2008 - Group Orders - ANNY COBERLY RN

Grouped Orders: CHEST 1 VIEW PORTABLE - Prepare Patient for Xray

15:47 06/25/2008 - Reassessment - ANNY COBERLY RN

Other Assessment: Labs drawn at bedside

Note: by lab assistant

16:02 06/25/2008 - Reassessment - ANNY COBERLY RN

Other Assessment: Portable chest x-ray done

16:11 06/25/2008 - Vital Signs - ANNY COBERLY RN

BP: 106/67

HR: 58

Resp: 16

16:11 06/25/2008 - Pain Assessment - ANNY COBERLY RN

Currently In Pain: No

16:11 06/25/2008 - Oximetry - ANNY COBERLY RN

Pulse Oximetry %: 99

Oxygen Therapy: Nasal Cannula

Concentration: 2

Units: L/min

18:13 06/25/2008 - Reassessment - ANNY COBERLY RN



Rounding: Vitals updated, Pain Assessed, Pt/Family Informed About Care Plan, Explained wait time until disposition, Bed lowest position, Hourly Rounding, Siderails up, Call Light Accessible, Patient Comfort Assessed, Patient Rounding Done

Note: pt awake, alert, denies pain, skins p/w/d, SR on the monitor, hr 56

16:58 06/25/2008 - Request call to physician - MARC KOBERNICK MD, MD

Requested by: KOBERNICK MD, MARC

Physician to call: KAISER EPRP

17:00 06/25/2008 - Document call placed - CARMEN ENRIQUEZ

Person making call: ENRIQUEZ, CARMEN

Physician called: KAISER EPRP

Awaiting callback: Yes

17:11 06/25/2008 - Returned call - HOLLY JUDD CLERK

Physician returning call: KAISER EPRP

Call taken by: JUDD CLERK, HOLLY

Note: Dr Armstrong connected to Dr Kobernick

17:12 06/25/2008 - Discharge Diagnosis - MARC KOBERNICK MD, MD

Primary: Chest Pain - cardiac

17:12 06/25/2008 - Disposition - MARC KOBERNICK MD, MD

Disposition: Transfer To Hospital

17:17 06/25/2008 - Vital Signs - ANNY COBERLY RN

BP: 94/58

HR: 68

Resp: 16

17:17 06/25/2008 - Oximetry - ANNY COBERLY RN

Pulse Oximetry %: 100

Oxygen Therapy: Nasal Cannula

Concentration: 2

Units: L/min

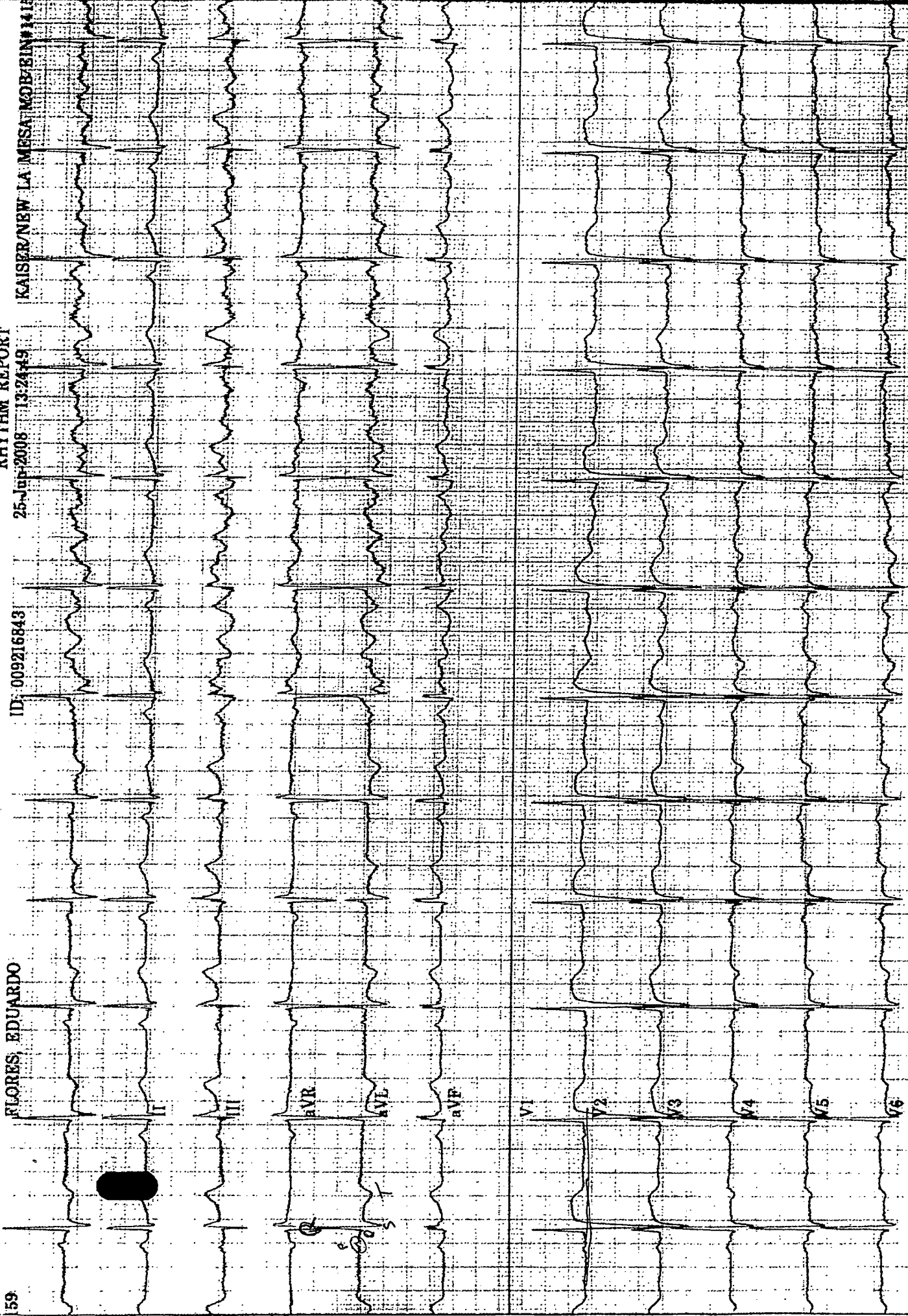
17:17 06/25/2008 - Pain Assessment - ANNY COBERLY RN

Currently In Pain: No

17:18 06/25/2008 - Vital Signs - ANNY COBERLY RN

Temp: 96.6 Oral

18:05 06/25/2008 - Vital Signs - ANNY COBERLY RN



FINAL ADDITIONAL STATEMENTS BY DEFENSE ATTORNEY FRANK HIGLEY AND EDUARDO LORES AT THE HEARING on 02/09/2021

FRANK HIGLEY:

Thank you Justice Huffman, Patrick on behalf of Sharp Grossmont Hospital. I just want to point out that on the court's previous opinion on this matter back in October 2018 it found that the plaintiff was on inquiry notice because he admitted he could've obtained the info necessary to learn about the negligence by reviewing the cardiologist 2014 report, but now that just demonstrated that he was on inquiry notice so the only thing that saves him is that if he can prove tolling under 352 and there's no fraud, there's no concealment, there's no retention of a foreign object so this court directed him very specifically to go back down and instructed him to replead his complaint with three specific areas. Now he tried on March 14, 2019 when he submitted a third amended complaint, after remand and that didn't comply with this court's orders on remand so Judge Taylor gave him leave to amend and find a lawyer and gave him thirty days to file a fourth amended complaint which he did on May 9<sup>th</sup>, 2019 and again after demur the court found that the plaintiff simply did not comply with the instructions that the fourth DCA sent him down with and that is to 1. specify the nature of Sharp's alleged wrongdoing and reach out to him 2. describe the nature of his claim to incapacity in the time period he claims he was incapacitated and 3. tolling his claim was timely under applicable tolling principles. He's had two chances on remand and couldn't do it and he wants a fifth bite of this apple and it just, at some point, it's too much. He keeps saying he has records, he keeps saying he has facts. He keeps saying that he has things that he can show, but he never shows them. So it just seems like just a process that's going to repeat itself until at some point somebody says, "You've had enough chances. You know what we wanted and you've failed to provide that to us." I'm not sure about the accommodation argument that the appellant has put forward, I've never heard that, I'm not sure. He's known since this court ruled on October 31<sup>st</sup>, 2018 what exactly and specifically was expected of him and he had two more shots at it and he was unable to comply. We're not unsympathetic to Mr. Flores. I've gotten to know him a lot over the last five years, but this is just simply, it has to stop at some point and Sharp asserts that this is it.

Judge Huffman:

Okay, Mr. Flores you've got about five minutes if you'd like to respond.

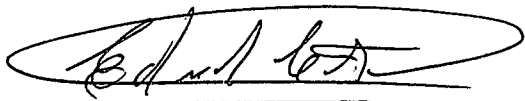
Eduardo Flores:

Okay, on the respondent brief of Mr. Higley he said on Page one, he said, he continued to mislead this court. Dr. Hoagland noted that he recommended that Flores be transferred to Kaiser to perform a catheterization. That's not true. The catheterization was done at Sharp. That's not true. Then he continued lying to the court that Mr. Flores left medical facility against medical advice. No, that's not true. I signed a paper refusing a surgery and they sent me to another hospital against my will, so Mr. Higley, I explained to him what happened to me. I'm going to be honest with you. Now I know because like he said it's been five years, now I know what happened. Dr. Covernick, he's an independent doctor,

10

but he was working for Sharp Grossmont Hospital. Sharp Grossmont Hospital has to look at whatever he's been doing. He modified the records, that's the real truth, he modified the records. He did it the way that he wanted and Sharp Grossmont was trying to cover up, that's why in December when I said that I wanted to get my records they called security on me. They called security and they denied to give me those records. And there are no records no more, you go and request the records and this is still in litigation and there are no records, they destroyed it. That's why I asked Mr. Higley and Sharp Grossmont to understand that point that's it's not that I have something against these doctors. I respect that. It's the way they did it.

I declare under penalty of perjury that the above is true and correct dialogue that was spoken during the hearing and taken from the actual video.

A handwritten signature in black ink, appearing to read 'Eduardo Flores', enclosed within a large, horizontal oval shape.

Eduardo Flores

A small, handwritten mark or symbol, possibly a stylized 'e' or a checkmark, located in the lower-left area of the page.

①  
**From:** Eduardo Flores <edfloliger@gmail.com>

**Sent:** Tuesday, February 23, 2021 11:39 AM

**To:** Patrick Higle <phigle@ldrlaw.com>

**Subject:** Re: Flores vs sharp grossmont

Good morning mr. Higley I would like to talk to you regarding and we can settle and anyway the case

②  
On Mon, Mar 8, 2021, 10:44 AM Patrick Higle <phigle@ldrlaw.com> wrote:

Hello Eduardo,

Good morning. My client, Sharp Grossmont Hospital, believes it has done nothing wrong, and as such, it is unwilling to pay any settlement money in this matter. I understand this may be upsetting to you, and I apologize for that. It is my job to relay such messages.

Patrick

④  
is to settle this by asking for a settlement for the damage that they have caused me. Ask the CEOs of Sharp Grossmont with all due respect to do an investigation with the people who were present on 06/25/2008 or with all respect you do it yourself to find out the truth. If I am lying then I want to be accused and get the authorities to get involved so they can press charges on me.

Thank you

3

----- Forwarded message -----

From: **Eduardo Flores** <edfloliger@gmail.com>

Date: Mon, Mar 8, 2021, 2:51 PM

Subject: Re: Flores vs sharp grossmont

To: Patrick Hagle <phagle@ldrlaw.com>

Good afternoon Mr. Patrick,

I want to get to the point with my evidence.

Look CT 00171 Volume 1 of 2.

Time 15:26 supporting documents.

Anny Coberly RN

Ordering physician Kobernick MD Marc ordered EKG. They never gave me the report.

Same CT 00171

Time 15:47 Anny Coberly RN

Chest 1 view portable prepare patient for x ray.

Other assessment plans draw at bedside and catheterization was done minutes before the EKG. CT 00194, Dr. Hoagland commented "HISTORY OF PRESENT ILLNESS" also commented "there is no definite history of a heart attack. On CT 00195 DIAGNOSTIC TEST DISCUSSION, he commented " I suspect all he had done was an ECG."

I think Dr. Hoagland at that time didn't want to contradict his colleagues or the records of the EKG. They hid it from him or ignored it.

I know that you are a good person at heart before being a lawyer. Don't believe me. Ask the nurse Anny Coberly or the Dr. Cobernack or anyone that es present that day of 06/25/2008.

CT 00160 Rhythm Report from Kaiser. 06/25/2008 page 1 of 5 CT 00165 CT00166 where I indicate with clarity the heart attack. Sharp Grossmont has good cardiologist. They can interpret the rhythm report.

I know that Kaiser isn't affiliated with Grossmont. There's only a difference of 20 minutes when the first EKG was taken.

The damage is already done. I am a person who is retarded. The Dr. Silva when she did the analysis of me she told me that I am worse than a child of 7 years of age with retardation. My intentions are not to accuse the hospital for what they did, the employees. What I want

3