	Dage 1			Dama 2
1	State of Ohio, Page 1			Page 3
	County of Lake. )	$\begin{vmatrix} 1\\2 \end{vmatrix}$	O B J E C T I O N S	
3	County of Lake. )	$\begin{vmatrix} 2\\ 3 \end{vmatrix}$	CONT.	
4	IN THE COUDT OF COMMON DI EAS			
5	IN THE COURT OF COMMON PLEAS	4	ATTORNEY PAGE-LINE Ms. Vadas 92 - 13	
	Ruth Myers,	5		
6	Plaintiff, )	6		
8	vs. Case No. 01 CV000687		Ms. Vadas         94- 1, 17           Ms. Vadas         97- 3	
9	Faissal Zahrawi, M.D. et al., )	8		
10	Defendants. )	9	Mr. Krause 101-17	
	Derendants. )	lo		
11		11		
12	Deposition of Frederic Dichko M.D. a witness	12		
13	Deposition of Frederic Bishko, M.D., a witness			
	herein, called by the defendants for oral examination,	14		
	pursuant to the Ohio Rules of Civil Procedure, taken			
	before Kris Adorjan, Court Reporter and Notary Public in	16		
	and for the State of Ohio, at University Mednet, 18599	17		
	Lakeshore Boulevard, Euclid, Ohio <b>441</b> 19, on Thursday,	18		
9	January 31, 2002, commencing at 10:44 <b>a.m.</b>	19		
20	•••	20		
11		21		
12		22		
13		23		
!4		24		
25		25		
	Page 2			Page 4
1	I N D E X	1	APPEARANCES:	
2	WITNESS: CROSS	2	On behalf of the Plaintiff Kathym A. Vadas, Esg.	
3	Frederic Bishko, M.D.	3	Becker & Mishkind Skylight Offfice Tower	
4	By Mr. Krause 5	4	1660 West 2nd Street, Suite 660 Cleveland, Ohio 44113	
5		5	216 241-2600	
6	E X H I B I T S	6		
7	Defendants' Marked	7	On behalf of the Defendants:	
8	1 10	8	David Krause, Esq. Reminger & Reminger 113 Saint Clair Avenue	
9		9	Cleveland, Ohio 44113	
0	O B J E C T I O N S	10	216 687-1311	
1	ATTORNEY PAGE-LINE	11		
2	Ms. Vadas 8 - 23	12		
3	Ms. Vadas 9 - 7, 12, 18	13		
4	Ms. Vadas 10-15	14		
5	Ms. Vadas 38 - 11	15		
6	Ms. Vadas 71 - 17	16		
7	Ms. Vadas 72 - 12, 15, 23	17		
8	Ms. Vadas 73 - 25	18		
9	Ms. Vadas 74 - 4, 21	19		
20	Ms. Vadas 75 - 3, 14, 24	20		
!1	Ms. Vadas 77 - 10, 14, 19	21		
!2	Ms. Vadas 78-1	22		
!3	Ms. Vadas 81 - 16, 25	23		
!4	Ms. Vadas 82-4	24		
!5	Ms. Vadas 89 -10	25		
1	ann Mansini The Court Departure			

## Multi-Page™Depo of Frederic Bishko, M.D.Ruth Myers -v- Faissal Zahrawi, M.D. et al

				Ruth Myers -v- Faissal Zahrawi, M.D. et al
	Page 5			Page 7
1	FREDERIC BISHKO, M.D.	1	Q	Doctor, can you describe for me the character of
2	of lawful age, being first duly sworn, as	2		your practice in 1972?
3	hereinafter certified, was examined and testified as	3	A	It was internal medicine and rheumatology.
4	follows:	4	0	Has the nature of your practice changed from 1972?
5	CROSS-EXAMINATION		· ·	Probably more rheumatology.
6 By	y Mr. Krause:		Q	Approximately, what time frame did your practice
7 Q	Doctor, please state and spell your name for the	7		shift to be more focused on rheumatology?
8	record.	8	А	I think it's probably been a continuum.
9 A	Frederic Bishko, B-i-s-h-k-o, M.D.	9	Q	Do you practice any internal medicine anymore?
0 Q	When did you obtain your medical license?	10	A	Yes.
1 A	1965.	11	0	About what percentage of your time is spent
2 Q	I reviewed your original file for the first time	12	×	practicing internal medicine, and give me if you can
3	before we went on the record, and I noted I don't	13		a breakdown.
4	have copies of the correspondence portion of your	14	Α	40.
5	file.	15	0	40/60?
6	I will make a request on the record from			40 internal medicine.
7	plaintiff's counsel to secure a copy of those and	17	0	And 60 rheumatology?
8	forward them to me, and it would be great if we	18	•	60 rheumatology.
9	could copy them before we leave, but that would	19	0	Have any of your medical licenses in either
.0	depend obviously on the office staff.	20	×.	Massachusetts, California or Ohio been suspended
:1	Where did you go to medical school?	21	A	No.
2 A	College of Medicine University of Cincinnati.	22	0	or revoked?
.3 0	Are you licensed in any other states?		· ·	No.
4 À	No.	24	0	Try to wait for me to finish the question.
5 Q	Have you ever been licensed in any other states?	25		Have you ever had your deposition taken
	Page 6			Page 8
1 A	Yes.	1		before?
2 Q		_	А	Yes.
3 A	Massachusetts, California, Ohio.	3	0	On how many occasions?
4 0		-	· ·	I don't remember.
	Ohio.	5	0	More than 10?
60	If you could, just briefly give me a rundown of your			No.
7	work, your professional experience after you			Less than 10?
8	graduated from the University of Cincinnati.		· ·	Yeah. Yes.
9 A	You mean internship, residency?	9	Q	So you know generally how this works?
0 Q	Yes.	10		Yes.
1 A	Internship Mount Sinai Hospital of Cleveland,	11	0	She is going to try to take down everything we say,
2	residency Mount Sinai Hospital of Cleveland,	12	×.	and we will try to get through this.
3	Cleveland VA Hospital, rheumatology, New York	13		If you don't understand a question I ask,
4	University, Bellevue Medical Center.	14		let me know and I will try to rephrase it in a way
5 Q	How about after you left Bellevue, did you enter	15		you can understand it, so we both are talking about
6	private practice?	16		the same thing. Fair enough?
7 A	I went into private practice in Massachusetts for	17	Α	Fine.
8	one year and returned to Cleveland.	18	0	Have you ever been sued before, Doctor?
9 Q		19	•	Yes.
:0 A	I returned to Cleveland and started practice in	20	0	Have you ever been sued by <b>a</b> patient, by a former
:1	1972.	21	·	patient for medical treatment you rendered to them?
:2	MR. KRAUSE: Off the record.	22	А	Yes.
:3	(Discussion off the record.)	23		MS. VADAS: Objection.
:4	MR. KRAUSE: Back on the record.	24	Q	About how long ago was that?
5 By	y Mr. Krause:	25	Α	There was a case three years ago and there were a

	Page 9		Page 11
1	couple of cases last year I believe.	10	When did you first come to treat Ruth Myers, Doctor?
2 Q	Was your deposition taken in any of those cases?	2 A	5-18-94.
1	All,		For what purpose did you see Ruth Myers on thai
	Were they in Lake County or Cuyahoga County?	3 Q 4	for what purpose and you see Ruin Myers on that first visit?
4 Q   S A	Both.	5 A	Arthritis.
6 Q	How were those cases resolved?	6 Q	Rheumatoid arthritis?
7	MS. VADAS: Objection.	-	Yes.
	One case was lost, one case Mednet had the liability		What is rheumatoid arthritis, Doctor?
9	and one case we won.		It's an inflammatory condition of the joints and the
0 Q	Other than those three cases, have you ever been	10	body, primarily the small joints, most prominently,
	sued for medical malpractice before?	11	but also the other joints as well.
2	MS. VADAS: Objection.	12 0	Have you reviewed other documents, other than your
	No.	12 Q	chart, in preparation for your deposition today?
4 Q	In the case that you lost, when you say "lost," was	13 14 A	No.
5	there a jury verdict?	15 0	Did you meet with Miss Vadas prior to your
6 A	There was a jury verdict.	16	deposition today?
7 Q	Do you call the medical issues of that case?	17 A	This morning.
8	MS. VADAS: Objection.	18 Q	Did you talk about the case?
9 A	Sure.		Yes.
0 Q	Excuse me.	10 Q	What did you talk about?
	Yes.	_	We talked about Miss Myers' clinical history, her
2 Q	Identify those for me, please.	22	course.
3 A	There was a noncompliant patient who had diabetes	23 Q	What did you tell her about Miss Myers' clinical
4	who had never been gainfully employed who developed	14	history and course?
5	an ulcer on his foot, and despite my instructions to		It's been fairly benign.
	Page 1(	_	Page 12
1	call immediately if anything happened he did not and	1 Q	About what time did Miss Vadas get here this
2	ended up in the hospital and underwent an	$\begin{array}{c} 1 \\ 2 \end{array}$	•
	ended up in the nospital and under went an		
1 3	amputation		morning? 20 to 10:00 and then we were looking for a room so
3	amputation. He was awarded medical expenses and L guess	3 A	20 to 10:00, and then we were looking for a room so
4	He was awarded medical expenses, and I guess	3 A 4	20 to 10:00, and then we were looking for a room so we had a little downtime.
4 5	He was awarded medical expenses, and I guess it's not legal for the jury to know that someone on	3 A 4 5 Q	20 to 10:00, and then we were looking for a room so we had a little downtime. Prior to your meeting with Miss Vadas, did you
4 5 6	He was awarded medical expenses, and I guess it's not legal for the jury to know that someone on Welfare has no medical expenses, <b>so</b> the recovery is	3 A 4 5 Q 6	20 to 10:00, and then we were looking for a room so we had a little downtime. Prior to your meeting with Miss Vadas, did you substantively review your chart
4 5 6 7	He was awarded medical expenses, and I guess it's not legal for the jury to know that someone on Welfare has no medical expenses, <b>so</b> the recovery is from the State rather than the patient, and the sum	3 A 4 5 Q 6 7 A	20 to 10:00, and then we were looking for a room so we had a little downtime. Prior to your meeting with Miss Vadas, did you substantively review your chart No.
4 5 6 7 8	He was awarded medical expenses, and I guess it's not legal for the jury to know that someone on Welfare has no medical expenses, <b>so</b> the recovery is from the State rather than the patient, and the sum was the total of his medical expenses.	3 A 4 5 Q 6 7 A 8 Q	20 to 10:00, and then we were looking for a room so we had a little downtime. Prior to your meeting with Miss Vadas, did you substantively review your chart No. in preparation for your deposition today?
4 5 6 7	He was awarded medical expenses, and I guess it's not legal for the jury to know that someone on Welfare has no medical expenses, <b>so</b> the recovery is from the State rather than the patient, and the sum was the total of his medical expenses. I take it, despite the fact there was a jury	3 A 4 5 Q 6 7 A 8 Q 9 A	<ul> <li>20 to 10:00, and then we were looking for a room so we had a little downtime.</li> <li>Prior to your meeting with Miss Vadas, did you substantively review your chart No.</li> <li> in preparation for your deposition today?</li> <li>No. Sorry.</li> </ul>
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Page 13Page 131 A No.1 A Yes.2 Q You are aware Dr. Zahrawi is a defendant in this2 Q What specific records did you and Miss Vadas review3 case?3 before your deposition today?4 A I am.2 Q What specific records did you and Miss Vadas review5 Q Do you have an understanding as to Miss Myers'5 Q Of 5-18-94?6 allegations against Dr. Zahrawi?6 A That is correct. I believe we reviewed a couple of7 A From Miss Myers?6 A That is correct.9 A That is correct.9 Q Would those be January 20th of 1998?10 Q What is your understanding?10 A Let me get them as you kind of call them off and I11 A She felt the operation eventuated in an untoward11 can tell you.12 result with which she was not happy, and she felt12 Q My question is simply what records have you reviewed13 the wrong procedure had been performed,12 Q My question is simply what records have you reviewed14 she didn't need the procedure that had been15 Q 2-23-98?16 MS.VADAS: Kathy, can I get on the15 Q 2-23-98?17 mecord, so I can nip a whole section of this16 A I don't have 2-23-98, so we didn't review that.19 maybe even you, that Dr. Bishko will not be called19 Q How about 5-29-98?20 to proffer expert opinions with respect to standard19 Q How about 5-29-98?21 of care and appropriateness of performing the12 Q How about September 11th of 1998?22 A Yes.23 Q Let's go to this 5-18-94 record. Do you have an21 of care and appropriateness of performing the24 Yes.23 MS.VADAS: That is correct. I did24
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Page 14 1 may not hold. You are more than welcome to ask him. 1 A I do not. Page 16
1 may not hold. You are more than welcome to ask him. 1 A I do not.
2 It's not our intention to call him as an 2 Q Based on your review of the medical records, are you
3expert witness in this case.3able to determine for what purpose Miss Myers came
4 MR. KRAUSE: Let's see if we can 4 to your office?
5 simplify things here. 5 A The note states it's a consultation note. I did not
6 Q Do you have a record of seeing Ruth Myers in '91? I 6 state who referred the patient. I assume it was Dr.
7 think I recall a record from you in '91, but I may 7 John Nemunaitis, the physiatrist who had seen
8 be mistaken. 7-27 of '91, I may be wrong. 8 arthritis patients prior to my coming to the Euclid
9 A That's interesting, there is a big gap here from '90 9 clinic.
10 to '94, unless you find something that was out of 10 Q You have a typed note from 5-18-94
11 order.
12 Q Doctor, I believe I have a Mednet phone message from 12 $Q$ and a written note as well?
13 7-27-91, that is not your signature at the bottom of 113 A That is correct.
14 that phone note? 14 Q Whose signature is that on the written note?
15 A I would be glad to look at it. 15 A On the written note?
16 QYou don't have it in your chart?16 QOn 5-18-94.
17 A That is a nurse, that would be her signature. 17 A I don't see a signature.
18 That's my doctor number, but I don't believe that is 18 Q Why don't you look at mine, down here.
19 my signature. 19 A That is my nurse, that is not my note.
20 Q I'm referring, for the record, to a telephone 20 Q That is a nursing note?
21 contact record from University Mednet dated 7-27-91 21 A I can find that, but there is a written note because
<ul> <li>contact record from University Mednet dated 7-27-91</li> <li>a I can find that, but there is a written note because</li> <li>with Ruth Myers listed under the patient name.</li> <li>I regularly take a history and write it down. I down. I down.</li> </ul>
<ul> <li>contact record from University Mednet dated 7-27-91</li> <li>with Ruth Myers listed under the patient name.</li> <li>The next record I have is dated 5-18-94.</li> <li>a physical and then dictate a note, but what you are</li> </ul>
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Ruin	Myers -v- Faissal Zahrawi, M.D. et al	r	
	Page 17		Page 19
1 A	It is. What you were looking at before is just the		That is correct.
2	nurse's entry. It says 5-25		Would that have been part of the history you
3 Q	Would the nurse I'm sorry. Were you done with	3	obtained from Miss Myers?
4	your answer?		Yes.
5 A	5	-	Doctor, what is a palindromic presentation of
6 Q	I see <b>5-18-94.</b> I see what you are saying.	6	arthritis?
7	On the sticker stamp		Migratory.
8 A	That is correct.		What is the significance of a low level positive
9 Q		9	ANA?
0	top of the nursing note it says 5-18-94?	0 A	The significance?
1 A	It says referred by Dr. Kosnosky.		If there is any, if there is not tell me.
2 Q	As per your practice in '94, would your nurse see		I think in this case I had just received I must
3	the patient before you?	3	have had Dr. Wilkie's lab, so it was a matter of
4 A	Yes.	4	reporting what he had. There is no specific
5 Q	Would you review the nurse's findings as contained	5	significance.
6	in her progress note?	-	What is Plaquenil for?
7 A	In her progress note?		To treat, Plaquenil is a drug used to treat malaria
8 Q	In this record, would you have reviewed this record?	8	rheumatoid arthritis and some other diseases.
9 A	Prior to seeing the patient, yes.	9 Q	What is Plaquenil referred for in rheumatoid
10 Q	Doctor, about eight lines down, just tell me if I'm		arthritis?
21	reading this correct, wrists very painful, wants	!1 A	
12	injection, and that injection would be Plaquenil?	!2 Q	What does it do for rheumatoid arthritis?
13 A	No, but there is more there, sir. Tell me.	!3 A	It suppresses the disease activity.
!4 Q	Went to Mentor, it's crossed, there is a line	!4 Q	Does it assist with pain at all? The pain is usually, especially in early cases, due
!5 A			
	Page 18		Page 20
1	through it.	1	to the disease activity. So if it suppresses the
2 Q	Went to Mentor, okay.	2	disease activity it will suppress the mediator of
3 A		3	inflammation and you have less pain.
4	in Euclid, the patient was having painful wrists but	4 Q	Plaquenil is a medication more geared towards
5	went to the wrong office because there is no	5	slowing the onset of disease as opposed to Darvocet
6	subsequent entry in the chart. So that would	6	which is specifically for pain
7	explain why there is no entry, she was supposed to		
8	come but went to the wrong site.	8 Q	is that a fair characterization?
9 Q	We can agree whether this note is 5-18-94 or 5-25,	9 A	Yes.
0	it demonstrates Miss Myers had painful wrists,	0 Q	Are there any harmful side effects of taking
1	plural, at that time?	1	Plaquenil?
2 A	We can agree that's what the note says, yes, but I		Potentially, yes.
3	wasn't there so I don't know.	3 Q	What are they? Probably the most common is there could be high
4 Q	I assume you hire competent nurses to work in your office?	4 A 5	Probably the most common is there could be high toxicity, which is rare when you use the drug in the
5			appropriate dose. You can get nerve damage, muscle
6 A 7	We know that's what the patient complained of to the nurse.	6 7	damage, you can get hair loss, you probably can get
8 Q	What did Miss Vadas ask you about specifically to	8	effects on the blood counts.
9	your typewritten <b>5-18-94</b> note?	8 9 Q	I note in your record it indicates that Miss Myers
	I don't think she asked me anything specific. I	9 Q 10	discontinued Plaquenil after six months, despite the
11 N A	think she just wanted to know if this was the	0 '1	fact she felt it improved and had no problems until
!2	patient encounter.	12	January of this year when she had the onset of joint
13 Q	The first sentence of that note indicates that Miss	!3	discomfort similar to that that she had in 1986, but
!4	Myers had an acute onset of polyarthritis, mainly	!4	in addition had the onset of diffuse aching both
:5	involving her hands in '86?	:5	distal and Proximal in the soft tissue of her body;
1.3			and a solution in the sole tibble of her body,

#### Multi-Page<sup>™</sup> Depo of Frederic Bishko, M.D. Ruth Myers -v- Faissal Zahrawi, M.D. et al

			Kuul Myels -v- Faissal Zalliawi, Mi.D. et al
	Page 21		Page 23
1	did I read that correctly?	1	Ruth Myers on 5-18-94?
2 A	Yes.	2 A	No, if there is a family history of a particular
3 Q	Was Miss Myers suffering from any of the side	3	disease, sometimes that can be important if a
4	effects you described relating to Plaquenil?	4	patient had a family history of lupus, relatives of
5 A	I don't believe so. The note says she stopped	5	patients who have lupus tend to have positive ANA,
6	because she was worried about the potential	6	so the patient's ANA could be positive just because
7	toxicity.	7	her mom had lupus. The fact someone in the family
8 Q	To your knowledge prior to Miss Myers stopping	8	has had psoriasis could have been important, as some
9	taking her Plaquenil, did she have any evidence of	9	patients characterize rheumatoid arthritis then
0	ophthal	10	develop psoriasis later on.
1 A	Ophthalmologic.	11 Q	What is the difference between rheumatoid arthritis
2 Q	toxicity?	12	and psoriasis?
3 A	No.	13 A	The joints involved tend to be different, the
4 Q	Can we agree, Doctor, back on 5-18-94 the patient	14	pathology is a little different, and often the
5	reported to you if she does any work using her arm,	15	treatment is pretty much the same, but the more you
6	the next day her arm will be much more painful than	16	know about the patient the better care you can offer
7	usual?	17	them.
8 A		18 Q	What joints are typically involved in rheumatoid
9 Q	I notice you had written of interest patient had	19	arthritis?
20	been on Prozac for depression since 8-93, because	20 A	The small joints of the feet and hands earliest to
1!1	Prozac can cause aching, she discontinued it without	21	most prominently, the joints are usually symmetrical
1:2	any alteration to her soft tissue aching. Why is	22	in that if you have one side involved, you usually
13	the fact that she has been on Prozac for depression	23	have both sides involved, and then the joints that
24	of interest?	24	are larger.
25 A	Patients come in to your office with symptoms, and	25 Q	One of those joints that are larger would be the
	Page 22		Page 24
1	if they are on a medication that can cause those	1	distal radioulnar joint?
2	symptoms then one has to question whether the cause	2 A	Could be.
3	of the symptoms are due to one of the medications	3 Q	How many patients with rheumatoid arthritis have you
4	that they are on, if that is a listed side effect of	4	seen over the years, Doctor?
5	that particular medication.	5 A	I don't know, a lot.
6 Q	I note you have in your note she discontinued it	6 Q	More than 1,000?
7	without any alteration in her joint or soft tissue	7 A	More than 1,000? I don't know, but a lot.
8	aching, is that significant, Doctor?	8 Q	Have you ever seen distal radioulnar joints in
9 A	That would indicate Prozac wasn't the cause of her	9	patients with rheumatoid arthritis?
0	aching.	10 A	It's common.
		10 A	It's common.
1 Q	Did you form an opinion as to what was the cause of	10 A 11 Q	Common?
1 Q 2	-		
-	Did you form an opinion as to what was the cause of	11 Q	Common?
2	Did you form an opinion as to what was the cause of her aching?	11 Q 12 A	Common? Yes.
2 3 A	Did you form an opinion as to what was the cause of her aching? This aching was more of a widespread muscular	11 Q 12 A 13 Q	Common? Yes. The end of your visit on 5-18-94, she was placed on
2 3 A 4	Did you form an opinion as to what was the cause of her aching? This aching was more of a widespread muscular aching, and my opinion is in the summary. Would you	11 Q 12 A 13 Q 14	Common? Yes. The end of your visit on 5-18-94, she was placed on Zorprin, 1500 milligrams, twice daily, and she could
2 3 A 4 5	Did you form an opinion as to what was the cause of her aching? This aching was more of a widespread muscular aching, and my opinion is in the summary. Would you want me to read that or do you wish to read it?	11 Q 12 A 13 Q 14 15	Common? Yes. The end of your visit on 5-18-94, she was placed on Zorprin, 1500 milligrams, twice daily, and she could increase the dose to 5 or <b>6</b> tablets daily?
2 3 A 4 5 6 Q	Did you form an opinion as to what was the cause of her aching? This aching was more of a widespread muscular aching, and my opinion is in the summary. Would you want me to read that or do you wish to read it? I can see in the summary this patient has rheumatoid	11 Q 12 A 13 Q 14 15 16 A	Common? Yes. The end of your visit on 5-18-94, she was placed on Zorprin, 1500 milligrams, twice daily, and she could increase the dose to 5 or <i>6</i> tablets daily? Yes.
2 3 A 4 5 6 Q 7	Did you form an opinion as to what was the cause of her aching? This aching was more of a widespread muscular aching, and my opinion is in the summary. Would you want me to read that or do you wish to read it? I can see in the summary this patient has rheumatoid arthritis, are you referring to that section of your	11 Q 12 A 13 Q 14 15 16 A 17 Q	Common? Yes. The end of your visit on 5-18-94, she was placed on Zorprin, 1500 milligrams, twice daily, and she could increase the dose to 5 or <b>6</b> tablets daily? Yes. Is Zorprin a form of aspirin? Yes. It's a more powerful form of aspirin?
2 3 A 4 5 6 Q 7 8	Did you form an opinion as to what was the cause of her aching? This aching was more of a widespread muscular aching, and my opinion is in the summary. Would you want me to read that or do you wish to read it? I can see in the summary this patient has rheumatoid arthritis, are you referring to that section of your note? Yes. And the paragraph that follows that?	11 Q 12 A 13 Q 14 15 16 A 17 Q 18 A	Common? Yes. The end of your visit on 5-18-94, she was placed on Zorprin, 1500 milligrams, twice daily, and she could increase the dose to 5 or <b>6</b> tablets daily? Yes. Is Zorprin a form of aspirin? Yes. It's a more powerful form of aspirin? It's a long-acting aspirin product that has less
2 3 A 4 5 6 Q 7 8 9 A	Did you form an opinion as to what was the cause of her aching? This aching was more of a widespread muscular aching, and my opinion is in the summary. Would you want me to read that or do you wish to read it? I can see in the summary this patient has rheumatoid arthritis, are you referring to that section of your note? Yes.	11 Q 12 A 13 Q 14 15 16 A 17 Q 18 A 19 Q	Common? Yes. The end of your visit on 5-18-94, she was placed on Zorprin, 1500 milligrams, twice daily, and she could increase the dose to 5 or <b>6</b> tablets daily? Yes. Is Zorprin a form of aspirin? Yes. It's a more powerful form of aspirin?
2 3 A 4 5 6 Q 7 8 9 A 20 Q	Did you form an opinion as to what was the cause of her aching? This aching was more of a widespread muscular aching, and my opinion is in the summary. Would you want me to read that or do you wish to read it? I can see in the summary this patient has rheumatoid arthritis, are you referring to that section of your note? Yes. And the paragraph that follows that?	11 Q 12 A 13 Q 14 15 16 A 17 Q 18 A 19 Q 20 A	Common? Yes. The end of your visit on 5-18-94, she was placed on Zorprin, 1500 milligrams, twice daily, and she could increase the dose to 5 or <b>6</b> tablets daily? Yes. Is Zorprin a form of aspirin? Yes. It's a more powerful form of aspirin? It's a long-acting aspirin product that has less
2 3 A 4 5 6 Q 7 8 9 A 20 Q 21 A	Did you form an opinion as to what was the cause of her aching? This aching was more of a widespread muscular aching, and my opinion is in the summary. Would you want me to read that or do you wish to read it? I can see in the summary this patient has rheumatoid arthritis, are you referring to that section of your note? Yes. And the paragraph that follows that? The sentence that follows it, yes.	11 Q 12 A 13 Q 14 15 16 A 17 Q 18 A 19 Q 20 A 21	Common? Yes. The end of your visit on 5-18-94, she was placed on Zorprin, 1500 milligrams, twice daily, and she could increase the dose to 5 or <b>6</b> tablets daily? Yes. Is Zorprin a form of aspirin? Yes. It's a more powerful form of aspirin? It's a long-acting aspirin product that has less gastrointestinal toxicity that is more convenient
2 3 A 4 5 6 Q 7 8 9 A 20 Q 21 A 22 Q	Did you form an opinion as to what was the cause of her aching? This aching was more of a widespread muscular aching, and my opinion is in the summary. Would you want me to read that or do you wish to read it? I can see in the summary this patient has rheumatoid arthritis, are you referring to that section of your note? Yes. And the paragraph that follows that? The sentence that follows it, yes. You also noted in your note the patient's paternal aunts have rheumatoid arthritis and systemic lupus and the patient's mother has psoriasis, were those	11 Q 12 A 13 Q 14 15 16 A 17 Q 18 A 19 Q 20 A 21 22 23 Q	Common? Yes. The end of your visit on 5-18-94, she was placed on Zorprin, 1500 milligrams, twice daily, and she could increase the dose to 5 or <b>6</b> tablets daily? Yes. Is Zorprin a form of aspirin? Yes. It's a more powerful form of aspirin? It's a long-acting aspirin product that has less gastrointestinal toxicity that is more convenient and more easily tolerated.
2 3 A 4 5 6 Q 7 8 9 A 20 Q 21 A 22 Q 23	Did you form an opinion as to what was the cause of her aching? This aching was more of a widespread muscular aching, and my opinion is in the summary. Would you want me to read that or do you wish to read it? I can see in the summary this patient has rheumatoid arthritis, are you referring to that section of your note? Yes. And the paragraph that follows that? The sentence that follows it, yes. You also noted in your note the patient's paternal aunts have rheumatoid arthritis and systemic lupus	11 Q 12 A 13 Q 14 15 16 A 17 Q 18 A 19 Q 20 A 21 22 23 Q	Common? Yes. The end of your visit on 5-18-94, she was placed on Zorprin, 1500 milligrams, twice daily, and she could increase the dose to 5 or <b>6</b> tablets daily? Yes. Is Zorprin a form of aspirin? Yes. It's a more powerful form of aspirin? It's a long-acting aspirin product that has less gastrointestinal toxicity that is more convenient and more easily tolerated. Back in 1994 was Zorprin a prescription medication?

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95 15

Kuth Wiyers - y - Faissal Zahrawi, Wi.D. et al		
Page 25		Page 27
1 visits?	±1	findings?
2 A Yes.	2 A	Yes, which would be the patient's complaints or
3 Q Why did you place her back on Plaquenil?	3	concerns.
4 A I thought she had a fairly mild disease, the	4 Q	Doctor, you indicated that Miss Myers' complaints of
5 Plaquenil had very little risk and that I think	5	this 5-18-94 visit were somewhat muscular in nature?
6 might benefit versus a risk basis. I thought it hac	6 A	Yes.
7 something to offer.	7 Q	How about her wrist pain, was that muscular in
8 Q Did you explain those benefits and risks to Miss	8	nature, Doctor?
9 Myers on that 5-18-94 visit?	9 A	Could you reask the question?
10 A That's my custom.	10 Q	We talked about the wrist pain that was documented
1 Q Is there documentation in the chart that you did so?	1	in the nursing note from this visit.
2 A Not to my knowledge.	12	MS. VADAS: I don't think he
13  Q I take it in weighing the risks and benefits and the	13	testified the nursing note was from this visit.
14concerns Miss Myers had about ophthalmologic	14 A	I'm sorry. Are you talking about
toxicity compared to potential benefits with regard	15 Q	Hold on a second. I want to make sure we are clear.
to the progress of the rheumatoid arthritis, you	16	MS. VADAS: I'm sorry. I thought
determined it would be better for her to be on	17	this was the nursing note.
18 Plaquenil?	18 Q	Doctor, go back to the nursing note for this visit.
<b>19</b> A Yes.	19 A	Wait a minute. I don't believe the nursing note is
20 Q Plaquenil helps assist in stopping the progress of	20	for this visit. The nursing note I thought was the
1 the disease?	21	following week and the patient went to the wrong
22 A Yes.	2!	office, and so I assume she had called my nurse or
23 Q I'm on to your note now, Doctor, your handwritten	23	something and she ended up out there, but there is
?4 note I should say of 5-18-94, and I see a stick	24	no record I saw her on 5-25.
25 figure, Doctor. I reviewed your records and I note	25 Q	So your testimony is this note, and I don't know if
Page 26		Page 28
1 on some of your written records you have an O, it	1	you have a copy of it in your chart, I want to be
2 says see stick figure, what is the significance of	2	fair, if you want to look at my copy.
3 that?	3 A	No, I've got it.
4 A Let me find it for you. The O would indicate	4 Q	This note is actually a record, it says 5-18-94 at
5 warmth.	5	the top and in handwriting?
6 Q The O would indicate what, Doctor?	6 A	Two different dates.
7 A Can we go off the record?	7 Q	Then there is a sticker on it that says 5-25-94?
8 MR. KRAUSE: Off the record.	8 A	The sticker is a computer sticker that generated the
9 (Discussion off the record.)	9	day the patient is supposed to come in. We didn't
0 MR. KRAUSE: Back on the record.	0	see the patient that day. It says went to Mentor,
1 By Mr. Krause:	1	which means went to the wrong office. I never saw
2 Q Doctor, in your record sometimes there is just a	2	her.
3 letter O with a colon next to it. Any information		Do you know why that is crossed out?
4 following that <b>0</b> would be representative of your	4 A	Idonot.
5 objective findings as opposed to your subjective	5 Q	So on 5-18-94, did Miss Myers complain of any
6 findings?	6	problems with her wrist? I'm referring to her
7 A Yes.	7	subjective complaints.
8 Q In your notes for several visits I saw that stick	8 A	No.
9 figure.	9 Q	Objectively, Doctor, did you find any problems with
10 A Yes.	20	Miss Myers' right wrist? Well, we will start with
1 Q Was it your common practice to use the stick figure	!1	either of her wrists.
to document your objective findings with regard to a	!2 A	Joint exam reveals tenderness and swelling of the
23 patient's visit?	!3	right wrist.
!4 A Yes.	!4 Q	Your stick figure has a line on the patient's right
1.5 Q That would be different from the subjective	!5	hand. Do you see several lines drawn through the
Fincun-Mancini The Court Reporters		Page 25 - Page 28

			1		
		Page 29			Page 31
1		joints on her right hand?	1	Q	What are fibrositic tender points?
2	А	I do.	2	А	Fibromyalgic fibrositis is a disease where patients
3	Q	Do you see a line drawn to the joint of her wrist?	3		often complain of widespread muscular aching, which
4	А	I do.	4		Miss Myers did, and the way you make the diagnosis
5	0	Could you identify that joint for me, Doctor?	5		is that there are a number of tender points on the
6	À	Her wrist.	6		body, usually at tendons attachments where patients
7	Q	There seems to be two separate circles. There are	7		are tender and you put pressure on those points.
8	-	two joints in your wrist, correct, Doctor?	8		I was just stating Miss Myers did not
9	A	There are.	9		demonstrate tenderness at any of those 18 tender
10	0	Which circle is that line going to on Miss Myers'	10		points.
11	-	wrist on the stick figure?	11	0	I see you have on your objective stick figure, you
12		That would be the radiocarpal joint.	12	×	have a line drawn, it's on the right wrist. There
13		Which one would be the radioulnar joint?	13		is no line drawn on the left wrist. Tell me which
1	Q A	The other one.	14		joint that goes to. I want to be fair, I don't want
	0	As we look at these stick figures, they are sitting	15		to characterize it for you.
15	-	there with their thumb to the outside away from the	15	٨	Well, quite honestly it kind of looks like it's in
17		body?	17	A	the middle.
		•	1	0	
	А	This would be the radius, the inside one would be the ulna.		Q	If you draw the line to the middle, would that be
19	~		19		any different from drawing the line to a certain
20	Q	The left wrist, Doctor, would that also be the	20		particular joint?
21		radius?	21	A	Yes. There are two joints, but also right in the
22	А	Radiocarpal.	22		middle there patients complain of pain and swelling.
23	Q	Radiocarpal?	23		She might have had inflammation in the middle rather
1 °	А	Yes.	24		than at either edge.
25	Q	I have a second page with a stick figure on it, what	25	Q	Doctor, looking at your 5-18-94 written note, do you
		Page 30			Page 32
1		Page 30 is the purpose of the second stick figure?	1		Page 32 ever indicate in there that Miss Myers' complaints
	А	-	1 2		C
		is the purpose of the second stick figure?	2	А	ever indicate in there that Miss Myers' complaints
2		is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This	2 3		ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that.
2 3 4		is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the	2		ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of
2 3 4 5	A	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page.	2 3 4 5	Q	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist?
2 3 4 5 6	A Q	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page. So this stick figure on the first page	2 3 4 5 6	Q A	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist? No.
2 3 4 5 6 7	A Q A	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page. So this stick figure on the first page It's written what the patient	2 3 4 5 6 7	Q	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist? No. Based on your objective findings, Doctor, can we
2 3 4 5 6 7 8	A Q A	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page. So this stick figure on the first page It's written what the patient Let me get my question out.	2 3 4 5 6 7 8	Q A	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist? No. Based on your objective findings, Doctor, can we agree that you didn't draw that line to her right
2 3 4 5 6 7 8 9	A Q A Q	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page. So this stick figure on the first page It's written what the patient Let me get my question out. The stick figure on the first page of your	2 3 4 5 6 7 8 9	Q A Q	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist? No. Based on your objective findings, Doctor, can we agree that you didn't draw that line to her right wrist for no reason, there is a significance to it?
2 3 4 5 6 7 8 9 0	A Q A Q	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page. So this stick figure on the first page It's written what the patient Let me get my question out. The stick figure on the first page of your written office note from the 5-18-94 visit, that is	2 3 4 5 6 7 8 9 0	Q A Q A	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist? No. Based on your objective findings, Doctor, can we agree that you didn't draw that line to her right wrist for no reason, there is a significance to it? Sure.
2 3 4 5 6 7 8 9 0 1	A Q A Q	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page. So this stick figure on the first page It's written what the patient Let me get my question out. The stick figure on the first page of your written office note from the 5-18-94 visit, that is representative of the subjective complaints of the	2 3 4 5 6 7 8 9 0 1	Q A Q A Q	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist? No. Based on your objective findings, Doctor, can we agree that you didn't draw that line to her right wrist for no reason, there is a significance to it? Sure. What is that significance, Doctor?
2 3 4 5 6 7 8 9 0 1 2	A Q A Q	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page. So this stick figure on the first page It's written what the patient Let me get my question out. The stick figure on the first page of your written office note from the 5-18-94 visit, that is representative of the subjective complaints of the patient?	2 3 4 5 6 7 8 9 0 1 2	Q A Q A Q A	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist? No. Based on your objective findings, Doctor, can we agree that you didn't draw that line to her right wrist for no reason, there is a significance to it? Sure. What is that significance, Doctor? That she had tenderness in the wrist.
2 3 4 5 6 7 8 9 0 1 2 3	A Q A Q A	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page. So this stick figure on the first page It's written what the patient Let me get my question out. The stick figure on the first page of your written office note from the 5-18-94 visit, that is representative of the subjective complaints of the patient? Yes.	2 3 4 5 6 7 8 9 0 1 2 3	Q A Q A Q	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist? No. Based on your objective findings, Doctor, can we agree that you didn't draw that line to her right wrist for no reason, there is a significance to it? Sure. What is that significance, Doctor? That she had tenderness in the wrist. Did you document tenderness in her right wrist in
2 3 4 5 6 7 8 9 0 1 2 3 4	A Q A Q A	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page. So this stick figure on the first page It's written what the patient Let me get my question out. The stick figure on the first page of your written office note from the 5-18-94 visit, that is representative of the subjective complaints of the patient? Yes. The second stick figure in this note, on a separate	2 3 4 5 6 7 8 9 0 1 2 3 4	Q A Q A Q A Q	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist? No. Based on your objective findings, Doctor, can we agree that you didn't draw that line to her right wrist for no reason, there is a significance to it? Sure. What is that significance, Doctor? That she had tenderness in the wrist. Did you document tenderness in her right wrist in your written note?
2 3 4 5 6 7 8 9 0 1 2 3 4 5	A Q A Q A	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page. So this stick figure on the first page It's written what the patient Let me get my question out. The stick figure on the first page of your written office note from the 5-18-94 visit, that is representative of the subjective complaints of the patient? Yes. The second stick figure in this note, on a separate page, is representative of your objective findings,	2 3 4 5 6 7 8 9 0 1 2 3 4 5	Q A Q A Q A	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist? No. Based on your objective findings, Doctor, can we agree that you didn't draw that line to her right wrist for no reason, there is a significance to it? Sure. What is that significance, Doctor? That she had tenderness in the wrist. Did you document tenderness in her right wrist in your written note? If you will look at some of the following office
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2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 0 1 2 3 4 5 6 7 8 9 0 0 1 2 3 4 9 0 0 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 3 4 5 5 6 9 0 0 1 2 3 3 1 2 3 3 1 2 3 3 3 3 3 3 3 3 3 3	A Q A Q A Q A Q	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page. So this stick figure on the first page It's written what the patient Let me get my question out. The stick figure on the first page of your written office note from the 5-18-94 visit, that is representative of the subjective complaints of the patient? Yes. The second stick figure in this note, on a separate page, is representative of your objective findings, correct? Yes, sir. Do you have two stick figures throughout your chart for each visit? No. Is that your writing next to the shoulder on the	2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1	Q A Q A Q A Q A Q A Q A Q A Q	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist? No. Based on your objective findings, Doctor, can we agree that you didn't draw that line to her right wrist for no reason, there is a significance to it? Sure. What is that significance, Doctor? That she had tenderness in the wrist. Did you document tenderness in her right wrist in your written note? If you will look at some of the following office visits We will get to the following office visits. I was going to do you want to go off the record? We will stay on the record. If you would go to any of the preprinted arthritis formsjust keep flipping through there, that is
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2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 9 0 1 2 3 4 5 6 7 7 8 9 0 1 2 3 4 5 6 7 7 8 9 0 1 2 9 0 1 2 9 0 1 2 9 0 1 2 9 0 1 2 9 0 1 2 9 0 1 2 9 0 1 2 9 0 1 2 9 0 1 2 9 0 1 2 3 3 4 5 6 9 0 1 2 3 3 4 5 6 9 0 1 2 3 3 4 5 6 9 0 1 2 3 3 4 5 6 9 0 1 2 3 3 4 5 6 9 0 1 2 3 3 4 5 6 9 0 1 2 3 3 4 5 6 7 7 8 9 0 1 2 3 3 4 5 6 7 7 8 9 0 1 2 3 3 4 5 6 7 7 8 9 0 1 2 3 3 4 5 7 8 9 9 0 1 1 2 3 3 4 5 7 7 8 9 9 0 1 2 3 3 4 5 7 7 8 9 9 0 1 1 2 3 3 4 5 7 7 8 9 9 0 1 1 2 3 3 3 4 5 7 7 8 9 9 1 2 3 3 4 5 7 7 8 9 9 9 1 2 3 3 4 5 7 7 8 9 9 9 1 1 2 3 3 4 5 7 7 8 9 9 9 1 1 2 3 3 1 2 9 9 9 1 1 2 3 3 1 2 9 1 2 9 1 1 2 9 1 1 2 2 3 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	A Q A Q A Q A Q A Q A	is the purpose of the second stick figure? The first page would be what the patient complained of, and the second figure would be the exam. This would be the subjective, the symptoms of the patient, the first page. So this stick figure on the first page It's written what the patient Let me get my question out. The stick figure on the first page of your written office note from the 5-18-94 visit, that is representative of the subjective complaints of the patient? Yes. The second stick figure in this note, on a separate page, is representative of your objective findings, correct? Yes, sir. Do you have two stick figures throughout your chart for each visit? No. Is that your writing next to the shoulder on the second stick figure page?	2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 7 8 9 0 1 2 3 4 5 7 7 8 9 0 1 2 3 4 5 7 7 8 9 0 1 2 3 4 5 7 7 8 9 0 1 2 3 7 8 9 0 1 2 3 4 5 7 7 8 9 0 1 2 3 4 5 7 7 8 9 0 1 2 3 4 5 7 7 8 9 0 1 2 3 4 5 7 7 8 9 0 1 2 3 7 8 9 0 1 2 3 4 5 7 7 8 9 0 1 2 3 4 5 7 7 8 9 0 1 2 3 7 8 9 0 1 2 3 3 4 5 7 7 8 9 0 1 2 3 1 2 3 4 5 7 7 8 9 0 1 2 3 3 4 5 7 7 8 9 0 1 2 3 3 4 5 7 7 8 9 0 7 7 8 9 0 1 2 3 3 4 5 7 7 8 9 0 1 2 3 7 7 8 9 0 1 2 3 3 4 5 7 7 8 9 0 1 7 7 8 9 0 1 2 3 4 5 7 7 8 9 0 1 2 3 4 5 7 8 9 0 1 2 3 4 5 7 8 9 1 2 3 4 5 7 7 8 9 9 1 2 3 7 8 9 9 1 2 3 7 7 8 9 9 11 2 3 7 8 9 9 1 1 2 3 2 3 1 2 1 1 2 1 1 2 3 1 2 1 1 2 1 1 2 1 2	Q A Q A Q A Q A Q A Q A Q A Q	ever indicate in there that Miss Myers' complaints of pain are complaints of pain in her wrist? I don't see that. Do you ever indicate in there that she complains of any loss of function with regard to her right wrist? No. Based on your objective findings, Doctor, can we agree that you didn't draw that line to her right wrist for no reason, there is a significance to it? Sure. What is that significance, Doctor? That she had tenderness in the wrist. Did you document tenderness in her right wrist in your written note? If you will look at some of the following office visits We will get to the following office visits. I was going to do you want to go off the record? We will stay on the record. If you would go to any of the preprinted arthritis formsjust keep flipping through there, that is fine.

Kuth Myers -v- Faissal Zahrawi, M.D. et al	·····	19-19-19
Page 33		Page 35
1 not really an abbreviation, but tenderness is a	1	distal radioulnar joint are common with rheumatoid
2 little dot, warmth is a circle, swelling is a little	2	arthritis patients, are problems with the other
3 cross, and erythema is like a plus sign.	3	joint in the wrist as common?
4 Q All right.	4 A	Which other joint?
5 A That allows you to characterize what is going on in	5 Q	The one you just identified for me?
6 each joint without writing a lot, and in 1994 this	6 A	The ulnar and carpal joint, yes.
7 was the accepted way of recording <b>a</b> joint <b>exam</b> , and	7 Q	They are just as common?
8 so the dot would be tenderness.	8 A	Yes.
9 Q I have a question on the 7-22-94 visit, while we are	9 Q	We can agree, Doctor, on the 7-22-94 stick figure, I
10 here. This is the stick figure.	10	am going to use the term stick figure, the thumb is
11 A Homologous.	11	in close to the body as opposed to 5-18-94 where the
12 Q It looks to me like a stick figure.	12	thumb is pointing away from the body?
13 A 7-22 did you say?	13 A	Yes.
14 Q Yes.	14 Q	The distal radioulnar joint is the joint on the
15 A You said 7-22?	15	opposite side from where your thumb comes into the
16 Q 7-22-94.	16	wrist?
17 A '94. I thought it was '97.	17 A	That is correct.
18 Q 7-22-94. Did you find it?	18 Q	Miss Myers' next visit with you is the 7-22-94
19 A Yeah.	19	appointment?
20 Q Do you see that stick figure at the bottom?	20 A	No.
21 A I do.	21 Q	You have another visit?
22 Q At the right corner of the page compared to the	22 A	No, I wasn't seeing her at that point.
23 stick figure on your 5-18-94 visit, it looks to me	23 Q	Who saw her?
24 like now we are dealing with the hand flipped over?	24 A	Dr. Park. I didn't see her again for several years.
25 A It's a different homologous, that is how they	25 Q	Is Dr. Park's note part of your chart?
Page 34		Page 36
1 describe that.	1 A	It is.
2 Q So a stick figure is not the correct medically	20	Is it a record that you would review and reflect on
3 accepted term?	3	if Ruth Myers came to you for treatment afterwards
4 A Stick figure works fine.	4	after that visit?
5 Q Am I correct in saying on the 5-18-94 stick figure	5 A	Yes.
6 the thumb is out, and on the stick figure of 7-22-94		That would be your common practice?
7 the thumb is in?	1	Yes.
8 A Yes.		I notice on the July 22nd, 1994 visit with Dr. Park,
9 Q The significance of that is that it's switching the	9	the first line, can you read that for me, Doctor?
10 sides, if you turn the hand, which a little circle	10 A	At the top.
11 is representative of the distal radioulnar joint,	11 0	Yes. cc and then what does it say?
12 correct?		Do you mean began with palindromic rheumatism, '86,
13 A Well, it looks like in the latter ones that there is	13	took Plaquenil six months?
14 a radioulnar joint, I mean, a radiocarpal joint, but	14 0	I think we are looking at different notes, yet
15 it doesn't really look like there is an ulnar carpal	15	again. I'm looking at the first page of that note
16 joint, it's a central circle.	16	and you are looking at the second page, is that it?
17 Q There are two joints in the wrist, and one is the	17 A	Correct.
18 distal	18 Q	There is a page with a half circle on it?
19 A Radiocarpal and radioulnar carpal.	19 A	That is correct.
20  Q Do rheumatoid arthritis patients have problems with	20 Q	Next to CC what does it say?
21 both, are problems with those joints common to	-	Neck and joint pain.
		J I
2 rheumatoid arthritis patients? That's a bad	1	Getting worse?
<ul> <li>2 rheumatoid arthritis patients? That's a bad</li> <li>23 question. I don't know why I can't get it out. Let</li> </ul>	22 Q 23 A	Getting worse? It could be.
23 question. I don't know why I can't get it out. Let	22 Q	It could be.
23 question. I don't know why I can't get it out. Let	22 Q 23 A	-

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#### Multi-Page<sup>™</sup> Depo of Frederic Bishko, M.D. Ruth Myers -v- Faissal Zahrawi, M.D. et al

			Ruth Myers -v- Faissal Zahrawi, M.D. et al
	Page 37		Page 39
1 Q	Well, you would read these notes as part of your	1	of yours?
2	practice. If you can read it for me.	2 A	She was a patient of Mednet's, but Dr. Park was her
3 A	Misunderstood about Methotrexate, has been taking	3	treating rheumatologist. I was not involved in her
4	Methotrexate one tablet three times a week.	4	care, as I remembered, during the period that covers
5	Arthritis slightly better. Waving intermittent knee	5	Dr. Park's notes.
6	swelling, last on Sunday thinks. Left knee swollen,	6 Q	You have Dr. Park's notes in your chart?
7	a.m. stiffness about a couple hours.	7 A	I do, the Clinic chart.
8 Q	Based on the arthritis slightly better, can we agree	8 Q	That is the Mednet Clinic chart?
9	it doesn't say neck and joint pain getting worse or	9 A	That is correct.
0	is that not fair?	10 Q	Do you have an independent chart?
1 A	That's not fair, I don't think we know what that	11 A	I do not.
2	says.	12 Q	What chart would you use if Ruth Myers walked in
3 Q	So if anyone suggested the arthritis was getting	13	here today for an appointment?
4	slightly better and that meant neck and joint pain	14 A	The Clinic chart.
5	getting worse, that would be unfair?	15 Q	The one before we marked as Defendants' Exhibit 1?
6 A	I don't know what that says.	16 A	That is correct.
7 Q	Start with the next page for me, Doctor.	17 Q	-
8 A	Began with palindromic rheumatism '86, took	18	May, i.e., that is more joints involved?
9	Plaquenil six months, restarted on medicine since	19 A	That is correct.
:0	March '94, about 30 percent better overall, slightly	20 Q	Then he lists the joints involved?
'1	better.	21 A	
2	Overall slightly better than last visit, but	22 Q	She, I'm sorry. She lists the joints involved,
13	increased joints since visit in May, that is more	23	doesn't she?
24	joints involved, neck shoulders, wrist, hands worst,	24 A	
115	also around balls of feet. Knees, hips okay.	25 Q	She says neck, shoulders, wrist, hands worst, is
:5		** X	
	Page 38		Page 40
1	Page 38 A.m. stiffness about 4:00. No fever, rash,	1	Page 40 that what it says?
	Page 38 A.m. stiffness about 4:00. No fever, rash, mouth, no photosensitivity, no hair loss. History		Page 40 that what it says? Yes,
1 2 3	Page 38 A.m. stiffness about 4:00. No fever, rash, mouth, no photosensitivity, no hair loss. History of breast implant, '78 bilteral.	1 2 A 3 Q	Page 40 that what it says? Yes, Did Dr. Park conduct an exam of Miss Myers?
1 2	Page 38 A.m. stiffness about 4:00. No fever, rash, mouth, no photosensitivity, no hair loss. History of breast implant, '78 bilteral. Are we going through the rest of it?	1 2 A 3 Q 4 A	Page 40 that what it says? Yes, Did Dr. Park conduct an exam of Miss Myers? Yes.
1 2 3 4 5 Q	Page 38 A.m. stiffness about 4:00. No fever, rash, mouth, no photosensitivity, no hair loss. History of breast implant, '78 bilteral. Are we going through the rest of it? Where did we stop?	1 2 A 3 Q 4 A 5 Q	Page 40 that what it says? Yes, Did Dr. Park conduct an exam of Miss Myers? Yes. Is that reflected in this record?
1 2 3 4 5 Q 6 A	Page 38 A.m. stiffness about 4:00. No fever, rash, mouth, no photosensitivity, no hair loss. History of breast implant, '78 bilteral. Are we going through the rest of it? Where did we stop? Family history.	1 2 A 3 Q 4 A 5 Q 6 A	Page 40 that what it says? Yes, Did Dr. Park conduct an exam of Miss Myers? Yes. Is that reflected in this record? It is.
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Section .

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	Page 41		Page 43
1	joint is.	1	that you can see, other than the typewritten
2 A	At the base of the thumb. So the one big circle i	2	reference next to the stick figure?
3	the	3 A	No.
4 Q	Is the wrist?	4 Q	What was Dr. Park's plan for this patient as
5 A	The whole wrist and it doesn't differentiate between	5	reflected in her record?
6	the different joints within the wrist.	6 A	Start Prednisone 10 milligrams, start Methotrexate 5
7 Q	There are two of them, correct, one is the distal	7	milligrams for two weeks then to 7 and a half weekly
8	radioulnar joint, and the other one is the one I can	8	with appropriate lab tests. Start folic acid 1
9	never remember the name.	9	milligram, which you use to prevent toxicity in
10 A	The ulnar carpal and the radiocarpal yes.	10	patients. Get metacarpal pads for feet and check
11 Q	What is the significance of the <i>S2</i> , T1?	11	hand x-rays today.
12 À	Swollen 2, tender 1.	12 Q	She prescribed Prednisone?
13 0	What does tenderness mean?	13 A	That is correct.
14 À	That it hurts when you press.	14 Q	What does Prednisone do for a rheumatoid arthritis
15 0	There is pain on palpation?	15	patient like Miss Myers?
16 A		16 A	Decreases inflammation.
17 Q	I notice there is no ampersand?	17 Q	I see on the same page, it's next to the elbow on
	I'm sorry.	18	the stick figure, it's actually on the line wrist
19 Q	You said there is a list typewritten for pain,	19	ROM, range of motion, 60. Do you see that, Doctor?
20	swelling, warmth, tenderness?	20 A	I do.
21 A	Correct.	21 Q	What is the significance of that, Doctor?
22 Q	There are symbols next to it, and it looks like the		It doesn't say which wrist, but I assume it means 60
23	ampersand is the symbol for pain; is that correct?		degrees of extension and 60 degrees of flexion.
24 A		24 Q	What is the normal extension, flexion of the wrist?
25 Q	What is the symbol for pain?	25 A	You can get 90 degrees each way.
	Page 42		Page 44
1 A	I think it's just a line through it. I haven't used	10	I have a note that is clearly out of order. I have
$\begin{vmatrix} 1 \\ 2 \end{vmatrix}$	these in really a fairly long time because hospital	2	a 5-7-2001 note next in my book.
3	reviewers change the way they wanted people to	2 3 A	Do you want me to find that?
4	record data.	4 0	No. Let's go to the next note in the time sequence.
5 0		5	What is the next record you have of Miss Myers
6	wrist?	6	coming to Mednet?
	Sure.		I have an undated record.
8 Q	But we can also agree that there is no ampersand.		What is that undated record? Are we looking at the
9	that's what that is called?	9	same thing, Doctor?
10 A		10 A	We are.
	-	11 O	Is that your handwriting, Doctor?
	wrist?	12 A	It is.
13 A		13 0	Can you read that note for me?
4 0	But we can agree the note reflects the $S2$ , T1	13 Q 14 A	Sure. RA, restarted Plaquenil, took Zorprin five
15	reflects pain on palpation, can we not, Doctor?	15	days no help and felt flu like, DC'd, and started
16 A		16	Bayer eight hour aspirin 625 milligrams six a day,
17	tender on palpation.	17	which is no help. On Plaquenil, swelling did not
1 *'			in a no norp, on a negotian, by ching and not
18 0			· · · ·
18 Q	I asked you if tenderness means pain on palpatior	18	progress, although she still had some pain. Left
19	I asked you if tenderness means pain on palpatior and you said yes?	18 19	progress, although she still had some pain. Left wrist is terrible, left wrist tender, swollen.
19 20 A	I asked you if tenderness means pain on palpatior and you said yes? But you said the <i>S2</i> , T1.	18 19 20	progress, although she still had some pain. Left wrist is terrible, left wrist tender, swollen. The plan was second line drugs discussed if
19 20 A 21 Q	I asked you if tenderness means pain on palpatior and you said yes? But you said the <i>S2</i> , T1. They are distinct objective evaluations?	18 19 20 <b>21</b>	progress, although she still had some pain. Left wrist is terrible, left wrist tender, swollen. The plan was second line drugs discussed if Plaquenil not working. Steroids offered, refused.
19 10 A 11 Q 12 A	I asked you if tenderness means pain on palpatior and you said yes? But you said the <i>S2</i> , T1. They are distinct objective evaluations? That's true.	18 19 20 <b>21</b> 22	progress, although she still had some pain. Left wrist is terrible, left wrist tender, swollen. The plan was second line drugs discussed if Plaquenil not working. Steroids offered, refused. Patient requests after Betadine, alcohol prep,
19 20 A 21 Q	I asked you if tenderness means pain on palpatior and you said yes? But you said the <i>S2</i> , T1. They are distinct objective evaluations? That's true. T1 means pain on palpation?	18 19 20 <b>21</b> 22 23	progress, although she still had some pain. Left wrist is terrible, left wrist tender, swollen. The plan was second line drugs discussed if Plaquenil not working. Steroids offered, refused. Patient requests after Betadine, alcohol prep, injected that's great.
19 20 A 21 Q 22 A 23 Q 24 A	I asked you if tenderness means pain on palpatior and you said yes? But you said the <i>S2</i> , T1. They are distinct objective evaluations? That's true. T1 means pain on palpation? That is correct.	18 19 20 <b>21</b> 22 23 24 Q	progress, although she still had some pain. Left wrist is terrible, left wrist tender, swollen. The plan was second line drugs discussed if Plaquenil not working. Steroids offered, refused. Patient requests after Betadine, alcohol prep, injected that's great. What is great?
19 20 A 21 Q 22 A 23 Q 24 A 25 Q	I asked you if tenderness means pain on palpatior and you said yes? But you said the <i>S2</i> , T1. They are distinct objective evaluations? That's true. T1 means pain on palpation?	18 19 20 <b>21</b> 22 23	progress, although she still had some pain. Left wrist is terrible, left wrist tender, swollen. The plan was second line drugs discussed if Plaquenil not working. Steroids offered, refused. Patient requests after Betadine, alcohol prep, injected that's great.

					Ruth Myers -v- Faissal Zahrawi, M.D. et a
		Page 45			Page 47
1		have to assume it was the painful one.	1		Park, so that would have to be while Dr. Park was
2	Q	That would be the left wrist you had mentioned	2		taking care of her.
3		earlier in your note, that's fair to say that?	3	Q	Sometime in that time span Dr. Park was treating her
4	Α	It is. She was also prescribed a left wrist splint.	4		you felt this note was generated?
5		I assume at this point Dr. Park was treating her but	5	А	Yes, sir.
6		she just saw me for whatever reason because the left	6	Q	During her treatment with Dr. Park, she came back to
7		wrist was really bothering her.	7		you for at least a single visit?
8	Q	Is it fair, Doctor, if you discuss in the subjective	s	А	Yes.
9		portion of your note a particular problem that a	9	Q	What does Methotrexate do for a patient with
10		patient is having, and then you discuss solutions	10		rheumatoid arthritis?
11		and you discuss your plan for those subjective	111	А	It decreases and, if you're lucky, arrests the
12		complaints, that your plan would be related to the	12		disease activity.
13		subjective complaints the patient presented with; is	13	0	Is it similar to Plaquenil?
14		that fair?			Is it similar to Plaquenil?
15	А	At times.	15	0	Not chemically.
16	Q	Your plan wouldn't be related to something not	16	À	The desired effect is.
17		mentioned in her subjective complaints, would it?	17	0	Similar of that to Plaquenil?
15	Α	No, but it kind of sounds like there were some what	IS	À	Yes, except it's more effective.
19		if questions,	19	0	How about Darvon?
20		Patients will often come in and say I'm okay	20	À	It's an analgesic.
21		but what if this happens or what if that happens,	21	Q	An analgesic is for pain relief medication?
22		and then you tell them what could be done if things	22	А	For pain.
23		don't go right, but it may not have anything to do	23	Q	I'm on the note in Miss Myers' chart of 8-15-94
24		with what is bothering them at that point.	1		I'm sorry I don't have it.
25		It looks like the main concern was the left	25	Q	You don't have it?
		Page 46	 		Page 4
1		wrist, that was terrible, but the what if's were	1	А	I have got a plain lined page, it says 8-15-94.
2		what if the Plaquenil doesn't help.		Q	The page after that, I have that page too. There
	Q	Okay.	3		the Darvon page and then there is a page after that.
	Ă	Is that clear, would you like me to explain it more?	4	А	
	0	I think it's clear. I'm thinking ahead.	5		Then the next page is you know what, I have
6	×	Is it a fair characterization, Doctor, to	6		8-15-94, these were out of sequence.
7		say that subjectively Miss Myers was not satisfied	7		All right.
8		with the pain medication, with the results of the	8	-	Again, this is a record from Dr. Park,
9		pain medication?	9		correct?
о	Α	Would you care to rephrase that?	10	А	Yes.
1	Q	Is it a fair characterization	11	0	What does the plus sign in a circle mean?
	À	I heard what you said, but the medicine that she was	I	Ă	Where are you?
3		getting wasn't just for pain, that's why I was	13	0	Seven lines down.
4		asking you to rephrase it.	I	Ā	One, two, three, four, five, six, seven, positive
	Q	I see. Whatever the intended purpose of the	15		wrist pain after a full day's work without numbness,
6	~	medication she was on, is it fair to say Miss Myers	16		or without tingling, that's paresthesia.
7		was unsatisfied with her results upon taking them?	17		A couple more lines down, wants to get off MTX
	А		18	×.	Plaquenil?
9	Q	We don't have a date for this record?	I	А	Methotrexate and Plaquenil.
	Ā	We do not.		Q	From your review of Dr. Park's plan, did she have a
	Q	Do you have an independent recollection of what date	21	-	discussion with Miss Myers regarding continuin
:2	z	this visit was?	22		Methotrexate?
	Α	No.	I	А	Would you like me to read it?
24	0	It could have been '94?	I	Q	I would like you to answer the question, but if you
		I assume it was '94 because the follow up was to Dr.	25	-	need to read it to answer my question.
Ľ.,	••	- menter in the street and relief of the to DI.			

Page 49       Page 51         1       A fler a lengthy discussion patient agreeable to continuing Methotrexue at 5 milligram dose for now.       1       same questions at each visit.         2       Q       So that's what this questionmaire is used for, it's to monitor whether there is improvement or whether there is not improvement or the opposite of improvement where the patient is going downhill, as far as the complaints?         4       cues with diff. SOGT SOFT, creatinine today and two dispense right wrist splint.       5         10       O From your review of this note it appears Dr. Park 10.       5         12       Q Yes.       10         13       O The objective findings are noted on the stick figure?       10         14       For the objective findings are noted on the stick figure?       10         15       A that is correct.       10         16       We have the same X over a large circle which she was feeling that day for each visit, correct?       10         17       represents the two joints of the wrist, correct?       10       10         17       stiedd, and now that she is getting a right wrist shist fair.       10       11         2       Mich Matthise splint the complaints were left of the ask of all these sheets	Ruth	Myers -v- Faissal Zahrawi, M.D. et al	·	
2       continuing Methorecute at 5 milligram dase for now.       2       2       So that's what this questionnarie is used for, it's to monitor whether there is not improvement or the opposite of indivision that is not improvement whether there is not improvement or the opposite of indivision or the ison improvement whether there is not improvement or the opposite of indivision or the opposite or indivision or the ison improvement whether there is not improvement or the opposite of indivision or indivision or indivision or ison ison ison indivision or ison ison ison ison ison indivision or ison ison ison ison ison		Page 49		Page 51
3 Q. Keep reading that note. Doctor.       3 to monitor whether there is improvement or whether         4 A CBC with diff, SGOTSGFT, creatinine today and two       4 to monitor whether there is improvement or whether         6 present it doesn't say that, I assume that's at       6 far as the complaints?         7 present does. Add Motria 200 millignams two tables       7 A Yes, sit.         8 p. o. b.i.d. with food. Return in one month,       9 dispense right wrist splint?       0 A Yes.         10 Q. From your review of this note it appears Dr. Part i       0 A Yes.       1 Q Which of the following best describes you today?         12 A Yes.       1 Q Which of the following best describes was adoing over       a period of treatment and Hooked at this form, 1         13 O The objective findings are noted on the stick       1 G Waith food, a question 3 and that would tell me how         16 Q We have the same X over a large circle which       16 seq of low a question 3 and that would tell me how         16 Q We have the same X over a large circle which       16 seq of low a question 3 and that would tell me how         17 A Yes, sith fair to assume, Doctor, as before when       3 of low anter of the record?       1 A Yes.         21 sided, and now that she is getting a right wrist       10 Q That is the intention of this form?       2 List         22 Doctor, on the back of all these sheets       10 Q That is the interion?       2 Q It is dist inforerecor?       1 A It is.      <	1 A	After a lengthy discussion patient agreeable to	1	same questions at each visit.
4 A CoC with diff, SOCT SCT, Creating today and two       4       there is not improvement or the opposite of         5       months to continue Predmisone and Plaquenil at       5         6       present dose. Add Motria 200 milligrams two tablets       7         7       present dose. Add Motria 200 milligrams two tablets       6         9       present wrist splint.       9       Q That would include question number 3 on the         9       gave Miss Myers a right wrist splint?       9       N the objective findings are noted on the stick         14       figure?       10       Which of the following best describes you today?         15       A That is correct.       10       Which of the following best describes you today?         16       Q He objective findings are noted on the stick.       11       Q Uoka a question 3 and that would tell um how         16       We have the same X over a large circle which       17       represents the two joints of the wrist, correct?         17       represents the two joints of the wrist, correct?       17 A 1's a is in he right wrist?       12 A 1's is a short or ague splin the complaint on 8-15-94 about pain in her       12 A 1's is a stort of a questionnaire, right?         2       Max KRAUSE:       Back of a the record?       1 A 1's is stort of a questionnaire, right?       2 A 1's 1's is the raitenet sourd a question anut any wold a note from an office	2	continuing Methotrexate at 5 milligram dose for now.	2 Q	So that's what this questionnaire is used for, it's
4 A Colc with diff, Stort SQTT, Creatinine today and two       4       there is not improvement or the opposite of         5       months to continue Predmisone and Plaquenil at       6         6       present dose. Add Motrin 200 milligrams two tablets       7         7       present dose. Add Motrin 200 milligrams two tablets       8         9       present wrist splint.       9         10       Q From your review of this note it appears Dr. Park       8         11       Q The objective findings are noted on the stick       11       Q         12       A Yes.       13       Q The objective findings are noted on the stick         13       That is correct.       10       Which of the following best describes you today?         14       A Yes.       10       Could compare those with later visits to see hou         15       A That is correct.       14       12       Could compare those with later visits to see hou         14       Sided, and now that she is getting a right wrist?       12       A Yes.       12       A Hat's fair.         12       Mark KAUSE:       Off the record?       2       A Hat's fair.       13       14       It is.         2       Mark KAUSE:       Back on the record?       14       It is.       14       14       1	3 0	Keep reading that note, Doctor.	3	to monitor whether there is improvement or whether
6       present	-	CBC with diff, SGOT SGPT, creatinine today and two	4	
6       present	5	months to continue Prednisone and Plaquenil at	5	improvement where the patient is going downhill, as
7       Present dose. Add Morin 200 milligrams two tablets       7       A       Yes, sir.         8       p. o. b.i.d. with food. Return in one month, dispense right wrist splint.       9       Q       That would include question number 3 on the 9       question number 3 on the 9         10       Q       From your review of this note it appears Dr. Park 10       0       A       Yes.         11       Q       The objective findings are noted on the stick 17       Q       Witch of the following best describes you today?         12       A       Yes.       10       Which of the following best describes you today?         12       A       That's correct.       10       Which of the complaints were left         13       Q       Right A fair.       12       A         14       That's fair.       12       A       That's solin the record?         14       Can we go off the record?       14       It is.       14       It is.         2       Mar. KRAUSE:       Off the record?       14       14       It is.       Page 50         14       Can we go off the record?       14       It is.       14       It is.         2       Mar. KRAUSE:       Off the record?       14       14       It is.         2	6	-	6	
8       p.o.b.i.d. with food. Return in one month,       9       Q       That would include question number 3 on the         9       dispense right wrist splint.       questionmaire, right?       Q       Nat         10       Q From your review of this note it appears Dr. Park       A       Yes.         11       gave Miss Myers a right wrist splint?       12       A Yes.         12       A Yes.       Q       Which of the following best describes you today?         12       A Yes.       Q       Which of the following best describes you today?         13       Q       The objective findings are noted on the stick       13       Q       So if I wanted to see how Miss Myers was doing over         14       figure?       12       A Yes.       12       A Yes.         15       A that is correct.       14       Guid look at question 3 and that would tell me how         16       Q which would indicate swelling.       16       Q locud compare those with later visits to see hou         19       Right. Is it fair to assume, Doctor, a shefore when       15       Q       16       Q That is the intention of this form?         21       sided, and now that she is getting a right wrist?       13       Q I'm getting there, Doctor, 9-19-94.       14       Wait. I'm sorry. Okay, I was out of sequence.	7		7 A	•
9       dispense right wrist splint.       9       questionnaire, right?         10       Q From your review of this note it appears Dr. Park       10       Which of the following best describes you today?         12       A Yes.       10       Which of the following best describes you today?         12       A Yes.       12       A Yes.         13       O The objective findings are noted on the stick figure?       12       A Yes.         14       Gueve the same X over a large circle which frepresents the two joints of the wrist, correct?       17       A Yes.         19       R ight. Is if fair to assume, Doctor, a before when she got a left wrist splint her complaints were left is sided, and now that she is getting a right wrist?       12       A Yes.         12       splint the complaint on 8-15-94 about pain in her sigt fair.       12       A Yes.       12       A Wait. I'm sorry. Okay, I was out of sequence.         15       Q Doctor, on the back of all these sheets       12       14       I is.       12       Mit is.         2       MR, KRAUSE:       Off the record?       14       I is.       19       Page 50         14       A Can we go off the record?       14       I is.       194 refer to a visit two months earlier, do you         3       S by Mr. Krause:       Off the record?       14 <td>8</td> <td>-</td> <td>8 Q</td> <td>That would include question number 3 on the</td>	8	-	8 Q	That would include question number 3 on the
<ul> <li>[10] Q. From your review of this note it appears Dr. Parl 11] gave Miss Myers a right wrist splint?</li> <li>[10] Q. Which of the following best describes you today?</li> <li>[12] A. Yes.</li> <li>[13] Q. The objective findings are noted on the stick 14] figure?</li> <li>[14] A. Yes.</li> <li>[15] A. That is correct.</li> <li>[16] Q. We have the same X over a large circle which 15] represents the two joints of the wrist, correct?</li> <li>[17] A. Yes.</li> <li>[18] A. Yes. which would indicate swelling.</li> <li>[19] Q. Right. Is it fair to assume, Doctor, as before when 15] solided, and now that she is getting a right wrist 16] wrist is in her right wrist?</li> <li>[19] Splint the complaints were left.</li> <li>[10] A. Yes.</li> <li>[11] Q. That is the intention of this form?</li> <li>[12] Q. That is the intention of this form?</li> <li>[12] Q. That is the intention of this form?</li> <li>[12] Q. That is the intention of this form?</li> <li>[12] Q. That is the intention of this form?</li> <li>[13] Q. I'm getting there, Doctor, 9-19-94.</li> <li>[14] A. That's fair.</li> <li>[15] P. Mark. KRAUSE: Back on the record.</li> <li>[16] W. M. KRAUSE: Back on the record.</li> <li>[17] M. KRAUSE: Back on the record.</li> <li>[18] M. K. Krause:</li> <li>[19] Q. It has the patient's subjective evaluation of what [12] U. hey can and can't do?</li> <li>[13] A. Yes.</li> <li>[14] It is a standardized questionnaire, for 15] g. It is us different complaints in determining her 16] treatment?</li> <li>[16] K. The patient.</li> <li>[17] A. It's a standardized questionnaire that evaluates 18] function.</li> <li>[18] Y. Krause:</li> <li>[19] Q. Is its inficant in evaluating what the patient 20] That's why it's there, correct?</li> <li>[19] Q. Is its inficant in evaluating what the patient 21] Q. That's why it's there, correct?</li> <li>[10] A. That's why it's there, correct?</li> <li>[11] A. That's why it's there, correct?</li> <li>[12] Q. That's why it's there, correct?</li> <li>[13] A. That's kin inic and ase</li></ul>	9	dispense right wrist splint.	9	questionnaire, right?
11       gave Miss Myers a right wrist splint?       11       Q       Which of the following best describes you today?         12       A Yes.       12       A Yes.       13       Q       The objective findings are noted on the stick figure?       13       Q       Bo if Wanted to see how Miss Myers was doing over the aperiod of treatment and I looked at this form. I is could contrating over the member of the work correct?       14       A period of treatment and I looked at this form. I is could look at question 3 and that would tell me how she was feeling that day for each visit, correct?         17       represents the two joints of the wrist, correct?       17       A Yes.       19       A ight, Is if air to assume, Doctor, as before when as he got a left wrist splint the complaint on 8-15-94 about pain in her right wrist?       19       A Yes.       19       Q I could compare those with later visits to see hou by she was feeling later?       10       A Yes.         2       Mark fair.       19       Yes.       10       That is the intention of this form?       12       A It is.         2       Doctor, on the back of all these sheets       12       Page 50       1       A It is.       Page 52         1       A Mat KRAUSE:       Dif the record.       14       It is is.       2       Q I looks like there was a note on 7-22-94. Why would a note from an office visit on September 19, 1994 refer to a visit two months earlier, do you       5	10 0	· · · ·	10 A	
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<ul> <li>8-15-94 visit there is sort of a questionnaire, for</li> <li>lack of a better term. Who fills out this</li> <li>questionnaire?</li> <li>A The patient.</li> <li>I Q Is this the patient's subjective evaluation of what</li> <li>they can and can't do?</li> <li>A Yes.</li> <li>I S this used in evaluating the severity of the</li> <li>patient's different complaints in determining her</li> <li>treatment?</li> <li>A It's a standardized questionnaire that evaluates</li> <li>function.</li> <li>Q Is it significant in evaluating what the patient</li> <li>G Is it significant in evaluating what the patient</li> <li>G That's why it's there, correct?</li> <li>A Yes.</li> <li>A Yes.</li> <li>Can we go off the record?</li> <li>MR. KRAUSE: Go off the record.</li> <li>Back on the record.</li> <li>By Mr. Krause:</li> <li>Q Do you see any reference to Miss Myers' rheumatoid</li> <li>arthritis in the handwritten portion of this note,</li> <li>disregarding this stick figure?</li> <li>A No.</li> <li>Q The stick figure we have the thumb pointing towards</li> <li>the body?</li> <li>A Yes.</li> <li>Q That's why it's there, correct?</li> <li>Q We have an X through the big circle representative</li> <li>of the two joints of the wrist?</li> <li>A Or the wrist in total, yes.</li> <li>Q Or the wrist in total.</li> </ul>	-		5	have any idea?
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	23		LS Q	

r			Kuth Myers -v- Faissal Zahrawi, M.D. et al
	Page 53		Page 55
1	Are there any other joints in the wrist,	1 Q	Some people would?
2	Doctor, other than those two?	2 A	Some people would.
3 A	No.	3 Q	Is it fair to say she benefitted from the medication
4 Q	If you are having a problem with the joints of the	4	with regard to the progression of her rheumatoid
5	wrist, it has to be one or the other of those two	5	arthritis?
6	joints?	6 A	It's hard to tell.
7 A	Yes.	7 Q	1-27-95, Doctor.
8 Q	It says S2, TO next to right wrist?	8 A	Okay.
9 A	Yes.	9 Q	Any discussion of Miss Myers' rheumatoid arthritis?
10 Q	What does that indicate?	110 A	Arthritis about the same.
11 A	Swollen but not tender.	11 0	Anything other than that line?
12 Q	At this point in time do you know if Miss Myers was	112 A	I'm looking. You mean with regard to the patient's
13	still on Methotrexate?	113	symptoms or objective findings as well?
14 A	Yes.	14 0	Anything at all that you see that would be
15 Q	How about Plaquenil?	15	significant to her rheumatoid arthritis.
16 A	You can find what someone is on on the flip side,	116 A	Sure, the first two, MCP joints are swollen, all the
17	the patient writes down what they are on, so it	110 M	proximal phalangeal joints are swollen, that is on
18	would appear she is both on Plaquenil and	118	the right. On the I'm sorry. MCP joints on the
19	Methotrexate.	110	right and left are swollen.
	This sheet has "a lot helpful, some helpful "or	20 Q	You are referring to the stick figure?
20 Q 21	"none helpful," for lack of a better term, how	20 Q 21 A	I am.
22	helpful the medication can be?	21 A 22 Q	
	That is correct.	22 Q 23	<b>Can</b> you go through the written note first, so I have it clear in my mind? I thought I asked it I might
23 A		23 24	it clear in my mind? I thought I asked it, I might not have.
24 Q	Do you know if Miss Myers, other than the times we already discussed, called any of the physicians at	24 25 A	The question was: Was there anything more, other
25	aneady discussed, caned any of the physicians at	125 A	The duestion was: was there anything more, other in
	Page 54		Page 56
1	Page 54 Mednet as reflected in your chart regarding concerns	1	Page 56 than what we talked about, referable to her
	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate?		Page 56 than what we talked about, referable to her arthritis.
1	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know.	1 2 3 Q	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there
1 2	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would	1 2 3 Q	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick
1 2 3 A	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know.	1 2 3 Q	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For
1 2 3 A 4 Q	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records?	1 2 3 Q 4	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick
1 2 3 A 4 Q 5	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94	1 2 3 Q 4 5	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For
1 2 3 A 4 Q 5 6 A	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would.	1 2 3 Q 4 5 6	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis
1 2 3 A 4 Q 5 6 A 7 Q	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at	1 2 3 Q 4 5 6 7	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes.
1 2 3 A 4 Q 5 6 A 7 Q 8	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note,	1 2 3 Q 4 5 6 7 8	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct?
1 2 3 A 4 Q 5 6 A 7 Q 8 9	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at	1 2 3 Q 4 5 6 7 8 9 A	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes.
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1 2 3 A 4 Q 5 6 A 7 Q 8 9 10 11	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at all that references or that you would think is significant to Miss Myers' rheumatoid arthritis?	1 2 3 Q 4 5 6 7 8 9 A 10 Q 11	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes. This was at a time when Miss Myers was on Methotrexate, Plaquenil and Prednisone, as well as
1 2 3 A 4 Q 5 6 A 7 Q 8 9 10 11 12 A	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at all that references or that you would think is significant to Miss Myers' rheumatoid arthritis? Left knee pain resolved with steroid injection,	1 2 3 Q 4 5 6 7 8 9 A 10 Q 11 112	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes. This was at a time when Miss Myers was on Methotrexate, Plaquenil and Prednisone, as well as an analgesic, correct?
1 2 3 A 4 Q 5 6 A 7 Q 8 9 10 11 12 A 13	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at all that references or that you would think is significant to Miss Myers' rheumatoid arthritis? Left knee pain resolved with steroid injection, minimal a.m. stiffness of hands, if at all.	1 2 3 Q 4 5 6 7 8 9 A 10 Q 11 112 113 A 114	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes. This was at a time when Miss Myers was on Methotrexate, Plaquenil and Prednisone, as well as an analgesic, correct? I don't know if she was on <b>an</b> analgesic. She wrote
1 2 3 A 4 Q 5 6 A 7 Q 8 9 10 11 12 A 13 14	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at all that references or that you would think is significant to Miss Myers' rheumatoid arthritis? Left knee pain resolved with steroid injection, minimal a.m. stiffness of hands, if at all. Interested in decrease in Prednisone, concerned	1 2 3 Q 4 5 6 7 8 9 A 10 Q 11 112 113 A 114	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes. This was at a time when Miss Myers was on Methotrexate, Plaquenil and Prednisone, as well as an analgesic, correct? I don't know if she was on <b>an</b> analgesic. She wrote douwn Plaquenil, Methotrexate, Prednisone.
1 2 3 A 4 Q 5 6 A 7 Q 8 9 10 11 12 A 13 14 15	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at all that references or that you would think is significant to Miss Myers' rheumatoid arthritis? Left knee pain resolved with steroid injection, minimal a.m. stiffness of hands, if at all. Interested in decrease in Prednisone, concerned about weight gain, facial swelling, and then down	1 2 3 Q 4 5 6 7 8 9 A 10 Q 11 112 113 A 114 15 Q	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes. This was at a time when Miss Myers was on Methotrexate, Plaquenil and Prednisone, as well as an analgesic, correct? I don't know if she was on <b>an</b> analgesic. She wrote douwn Plaquenil, Methotrexate, Prednisone. Is there any numbing, is there any pain numbing
1 2 3 A 4 Q 5 6 A 7 Q 8 9 10 11 12 A 13 14 15 16	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at all that references or that you would think is significant to Miss Myers' rheumatoid arthritis? Left knee pain resolved with steroid injection, minimal a.m. stiffness of hands, if at all. Interested in decrease in Prednisone, concerned about weight gain, facial swelling, and then down the assessment still active but somewhat better.	1 2 3 Q 4 5 6 7 8 9 A 10 Q 11 112 113 A 114 15 Q 116	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes. This was at a time when Miss Myers was on Methotrexate, Plaquenil and Prednisone, as well as an analgesic, correct? I don't know if she was on <b>an</b> analgesic. She wrote douwn Plaquenil, Methotrexate, Prednisone. Is there any numbing, is there any pain numbing function of Prozac?
1 2 3 A 4 Q 5 6 A 7 Q 8 9 10 11 12 A 13 14 15 16 17 Q	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at all that references or that you would think is significant to Miss Myers' rheumatoid arthritis? Left knee pain resolved with steroid injection, minimal a.m. stiffness of hands, if at all. Interested in decrease in Prednisone, concerned about weight gain, facial swelling, and then down the assessment still active but somewhat better. Miss Myers was concerned about potential side	1 2 3 Q 4 5 6 7 8 9 A 10 Q 11 112 113 A 114 15 Q 116 117 A	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes. This was at a time when Miss Myers was on Methotrexate, Plaquenil and Prednisone, as well as an analgesic, correct? I don't know if she was on <b>an</b> analgesic. She wrote douwn Plaquenil, Methotrexate, Prednisone. Is there any numbing, is there any pain numbing function of Prozac? Not usually for joint pain.
1 2 3 A 4 Q 5 6 A 7 Q 8 9 10 11 12 A 13 14 15 16 17 Q 18	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at all that references or that you would think is significant to Miss Myers' rheumatoid arthritis? Left knee pain resolved with steroid injection, minimal a.m. stiffness of hands, if at all. Interested in decrease in Prednisone, concerned about weight gain, facial swelling, and then down the assessment still active but somewhat better. Miss Myers was concerned about potential side effects of her medication that she was taking for	1 2 3 4 5 6 7 8 9 A 10 Q 11 112 113 A 114 15 Q 116 117 A 18 Q	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes. This was at a time when Miss Myers was on Methotrexate, Plaquenil and Prednisone, as well as an analgesic, correct? I don't know if she was on <b>an</b> analgesic. She wrote douwn Plaquenil, Methotrexate, Prednisone. Is there any numbing, is there any pain numbing function of Prozac? Not usually for joint pain. 4-17-95, Doctor. Look at the questionnaire portion
1 2 3 A 4 Q 5 6 A 7 Q 8 9 10 11 12 A 13 14 15 16 17 Q 18 19	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at all that references or that you would think is significant to Miss Myers' rheumatoid arthritis? Left knee pain resolved with steroid injection, minimal a.m. stiffness of hands, if at all. Interested in decrease in Prednisone, concerned about weight gain, facial swelling, and then down the assessment still active but somewhat better. Miss Myers was concerned about potential side effects of her medication that she was taking for rheumatoid arthritis? Yes.	1 2 3 4 5 6 7 8 9 A 10 Q 11 112 113 A 114 15 Q 116 117 A 18 Q 19	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes. This was at a time when Miss Myers was on Methotrexate, Plaquenil and Prednisone, as well as an analgesic, correct? I don't know if she was on <b>an</b> analgesic. She wrote douwn Plaquenil, Methotrexate, Prednisone. Is there any numbing, is there any pain numbing function of Prozac? Not usually for joint pain. 4-17-95, Doctor. Look at the questionnaire portion of that, Doctor.
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1 2 3 A 4 Q 5 6 A 7 Q 8 9 10 11 12 A 13 14 15 16 17 Q 18 19 20 A 21 Q	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at all that references or that you would think is significant to Miss Myers' rheumatoid arthritis? Left knee pain resolved with steroid injection, minimal a.m. stiffness of hands, if at all. Interested in decrease in Prednisone, concerned about weight gain, facial swelling, and then down the assessment still active but somewhat better. Miss Myers was concerned about potential side effects of her medication that she was taking for rheumatoid arthritis? Yes. Is it fair to say she didn't really like taking the	1 2 3 4 5 6 7 8 9 A 10 Q 11 112 113 A 114 15 Q 16 117 A 18 Q 19 210 A 211 211 211 211 211 211 211	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes. This was at a time when Miss Myers was on Methotrexate, Plaquenil and Prednisone, as well as an analgesic, correct? I don't know if she was on <b>an</b> analgesic. She wrote douwn Plaquenil, Methotrexate, Prednisone. Is there any numbing, is there any pain numbing function of Prozac? Not usually for joint pain. 4-17-95, Doctor. Look at the questionnaire portion of that, Doctor. I'm still looking for the note.
1 2 3 A 4 Q 5 6 A 7 Q 8 9 10 11 12 A 13 14 15 16 17 Q 18 19 20 A 21 Q 22	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at all that references or that you would think is significant to Miss Myers' rheumatoid arthritis? Left knee pain resolved with steroid injection, minimal a.m. stiffness of hands, if at all. Interested in decrease in Prednisone, concerned about weight gain, facial swelling, and then down the assessment still active but somewhat better. Miss Myers was concerned about potential side effects of her medication that she was taking for rheumatoid arthritis? Yes. Is it fair to say she didn't really like taking the medication? Yes.	1 2 3 4 5 6 7 8 9 A 10 Q 11 112 113 A 114 15 Q 116 117 A 18 Q 19 210 A 211 Q	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes. This was at a time when Miss Myers was on Methotrexate, Plaquenil and Prednisone, as well as an analgesic, correct? I don't know if she was on <b>an</b> analgesic. She wrote douwn Plaquenil, Methotrexate, Prednisone. Is there any numbing, is there any pain numbing function of Prozac? Not usually for joint pain. 4-17-95, Doctor. Look at the questionnaire portion of that, Doctor. I'm still looking for the note. I'm sorry. I thought you had it. Do you see the questionnaire portion? I do.
1 2 3 A 4 Q 5 6 A 7 Q 8 9 10 11 12 A 13 14 15 16 17 Q 18 19 20 A 21 Q 22 23 A	Page 54 Mednet as reflected in your chart regarding concerns with her prescription for Methotrexate? I don't know. If the records suggest she did, I take it you would defer to the records? I would. I'm trying to speed things up for you. 11-16 of '94 Doctor, in the written portion of that note, disregarding the stick figure, is there anything at all that references or that you would think is significant to Miss Myers' rheumatoid arthritis? Left knee pain resolved with steroid injection, minimal a.m. stiffness of hands, if at all. Interested in decrease in Prednisone, concerned about weight gain, facial swelling, and then down the assessment still active but somewhat better. Miss Myers was concerned about potential side effects of her medication that she was taking for rheumatoid arthritis? Yes. Is it fair to say she didn't really like taking the medication? Yes. Is it fair to say nobody would?	1 2 3 4 5 6 7 8 9 A 10 Q 11 112 113 A 114 15 Q 116 117 A 18 Q 19 20 A 22 23 A	Page 56 than what we talked about, referable to her arthritis. Other than the arthritis is about the same, is there anything in the written note, disregarding the stick figure, regarding rheumatoid arthritis? For example, I see four lines down from the arthritis about the same line, joints dot, dot, dot, some days totally pain free; is that correct? Yes. This was at a time when Miss Myers was on Methotrexate, Plaquenil and Prednisone, as well as an analgesic, correct? I don't know if she was on <b>an</b> analgesic. She wrote douwn Plaquenil, Methotrexate, Prednisone. Is there any numbing, is there any pain numbing function of Prozac? Not usually for joint pain. 4-17-95, Doctor. Look at the questionnaire portion of that, Doctor. I'm still looking for the note. I'm sorry. I thought you had it. Do you see the questionnaire portion?

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	Page 57		Page <b>59</b>
1 A	I would assume that she is not on any medication	1 Q	What is the complaint, Doctor, at the top of the
2 Q	Under question 3, what is her response to "Which of	2	page?
3	the following best describes you today?"	3 A	Bilateral hand pain and swelling.
4 A	"I can hardly do any of the things I want to do."	4 Q	Is she listed on Prednisone and Plaquenil at this
5 Q	Do you recall if she ever checked that box before in	5	time, Doctor?
6	any of the previous visits when she filled out thai	6 A	That's what I was going to point out to you,
7	questionnaire?	7	sometimes they don't want to fill out their medicine
8 A	I don't recall.	8	sheet, and so there is a discordance between what is
9 Q	The written portion of the note there seemed to be	9	written here of what she is on and what she says she
0	some discussion of the flu. I don't want to go into	0	is on, either she didn't tell Dr. Park that she was
1	that, but is there anything written in there	1	still on the Plaquenil in January and Dr. Park said
2	significant to the rheumatoid arthritis, other than	2	increase it and she said yeah, okay and then she
3	the stick figure?	3	didn't do anything, or if she just didn't write down
4 A	Unless aching from head to toe would have anything	4	what she was on and she really was on it.
5	to do with it, that's hard to tell.	5 Q	Do you have any clue as to whether either of those
6 Q	Because people get achy when they have the flu too?	6	scenarios are true?
7 A	That's why I said it would be hard to tell.	7 A	Hopefully, Dr. Park was astute and Miss Myers if she
8 Q	Down to the A/P, the plan portion of the note. Can	8	didn't want to take something was reasonably up
9	you read for me what is after parenthesis 1?	9	front about it, or if she was in fact on the
O A	Increased joint symptoms, probably related to URI,	.0	Plaquenil on this visit, she was on Plaquenil and
1	rule out bacterial infection.	1	Prednisone even though she didn't so state it.
	How about what is after parenthesis <b>2</b> , Doctor?	2 0	Under the A/P portion of this note it says synovitis
	RA exam about the same, is that what you are asking	3	of hands?
4	about?	4 A	Synovitis of hands up since med DC'd on own.
	Yes.	5 0	What does that mean, Doctor?
		~ ~	
	Page 58		Page 60
	Patient reluctant to get on low dose Prednisone.		It means she probably did stop.
$\begin{vmatrix} 2 \\ 2 \end{vmatrix}$	Increased Plaquenil twice a day, add Tylenol Extra	2 Q	11 0
3	Strength three to four times a day. Do you want me	3 A	· 1
4	to read the rest of it?	4	nurse wrote.
5 Q	No, that's fine.		Those medications were designed to help her with the
6	Dr. Park indicates he is going to be	6	prograssion of har rhaumatoid arthritic?
7	in analogin a han Diaguanil?	-	progression of her rheumatoid arthritis?
	increasing her Plaquenil?	7 A	Yes.
8 A	Yes.	7 A 8 Q	Yes. Doctor, now that she is off the medication we have
9 Q	Yes. On the questionnaire that Mrs. Myers filled out, she	7 A 8 Q 9	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of
9 Q 0	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she'	7 A 8 Q 9 0	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we?
9 Q 0 1	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking?	7 A 8 Q 9 0 1 A	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes.
9 Q 0 1 2 A	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking? Correct.	7 A 8 Q 9 0 1 A 2 Q	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did
9 Q 0 1 2 A 3 Q	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking? Correct. She listed previously Plaquenil, Prednisone and	7 A 8 Q 9 0 1 A 2 Q 3	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we?
9 Q 0 1 2 A 3 Q 4	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking? Correct. She listed previously Plaquenil, Prednisone and Methotrexate?	7 A 8 Q 9 0 1 A 2 Q 3 4 A	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we? We did not.
9 Q 0 1 2 A 3 Q 4 5 A	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking? Correct. She listed previously Plaquenil, Prednisone and Methotrexate? This is on January 27th.	7 A 8 Q 9 0 1 A 2 Q 3 4 A 5 Q	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we? We did not. Or the visit before that, Doctor, did we?
9 Q 0 1 2 A 3 Q 4 5 A 6 Q	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking? Correct. She listed previously Plaquenil, Prednisone and Methotrexate? This is on January 27th. On several visits she identified all three of those	7 A 8 Q 9 0 1 A 2 Q 3 4 A 5 Q 6 A	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we? We did not. Or the visit before that, Doctor, did we? We did not.
9 Q 0 1 2 A 3 Q 4 5 A 6 Q 7	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking? Correct. She listed previously Plaquenil, Prednisone and Methotrexate? This is on January 27th. On several visits she identified all three of those medications that she was taking?	7 A 8 Q 9 0 1 A 2 Q 3 4 A 5 Q 6 A 7 Q	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we? We did not. Or the visit before that, Doctor, did we? We did not. Doctor, we are moving to February 28th of '96, do
9 Q 0 1 2 A 3 Q 4 5 A 6 Q 7 8 A	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking? Correct. She listed previously Plaquenil, Prednisone and Methotrexate? This is on January 27th. On several visits she identified all three of those medications that she was taking? That is correct.	7 A 8 Q 9 0 1 A 2 Q 3 4 A 5 Q 6 A 7 Q 8	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we? We did not. Or the visit before that, Doctor, did we? We did not. Doctor, we are moving to February 28th of '96, do you have <b>a</b> note?
9 Q 0 1 2 A 3 Q 4 5 A 6 Q 7 8 A 9 Q	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking? Correct. She listed previously Plaquenil, Prednisone and Methotrexate? This is on January 27th. On several visits she identified all three of those medications that she was taking? That is correct. The purpose of those medications was to assist in	7 A 8 Q 9 0 1 A 2 Q 3 4 A 5 Q 6 A 7 Q 8 9 A	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we? We did not. Or the visit before that, Doctor, did we? We did not. Doctor, we are moving to February 28th of '96, do you have <b>a</b> note? I do.
9 Q 0 1 2 A 3 Q 4 5 A 6 Q 7 8 A 9 Q 0	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking? Correct. She listed previously Plaquenil, Prednisone and Methotrexate? This is on January 27th. On several visits she identified all three of those medications that she was taking? That is correct. The purpose of those medications was to assist in preventing the progression of her rheumatoid	7 A 8 Q 9 0 1 A 2 Q 3 4 A 5 Q 6 A 7 Q 8 9 A 0 Q	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we? We did not. Or the visit before that, Doctor, did we? We did not. Doctor, we are moving to February 28th of '96, do you have <b>a</b> note? I do. Do you have any record of having seen her or anyone
9 Q 0 1 2 A 3 Q 4 5 A 6 Q 7 8 A 9 Q 0 1	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking? Correct. She listed previously Plaquenil, Prednisone and Methotrexate? This is on January 27th. On several visits she identified all three of those medications that she was taking? That is correct. The purpose of those medications was to assist in preventing the progression of her rheumatoid arthritis?	7 A 8 Q 9 0 1 A 2 Q 3 4 A 5 Q 6 A 7 Q 8 9 A 0 Q 1	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we? We did not. Or the visit before that, Doctor, did we? We did not. Doctor, we are moving to February 28th of '96, do you have <b>a</b> note? I do. Do you have any record of having seen her or anyone at Mednet having seen her between <b>6-13</b> of '95 and
9 Q 0 1 2 A 3 Q 4 5 A 6 Q 7 8 A 9 Q 0 1 2 A	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking? Correct. She listed previously Plaquenil, Prednisone and Methotrexate? This is on January 27th. On several visits she identified all three of those medications that she was taking? That is correct. The purpose of those medications was to assist in preventing the progression of her rheumatoid arthritis? Yes.	7 A 8 Q 9 0 1 A 2 Q 3 4 A 5 Q 6 A 7 Q 8 9 A 0 Q 1 2	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we? We did not. Or the visit before that, Doctor, did we? We did not. Doctor, we are moving to February 28th of '96, do you have <b>a</b> note? I do. Do you have any record of having seen her or anyone at Mednet having seen her between <b>6-13</b> of '95 and February 28th of <b>'96</b> ?
9 Q 0 1 2 A 3 Q 4 5 A 6 Q 7 8 A 9 Q 0 1 2 A 3 Q	<ul> <li>Yes.</li> <li>On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking?</li> <li>Correct.</li> <li>She listed previously Plaquenil, Prednisone and Methotrexate?</li> <li>This is on January 27th.</li> <li>On several visits she identified all three of those medications that she was taking?</li> <li>That is correct.</li> <li>The purpose of those medications was to assist in preventing the progression of her rheumatoid arthritis?</li> <li>Yes.</li> <li>6-13-95. Is this your note, Doctor, or is this</li> </ul>	7 A 8 Q 9 0 1 A 2 Q 3 4 A 5 Q 6 A 7 Q 8 9 A 0 Q 1 2 3 A	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we? We did not. Or the visit before that, Doctor, did we? We did not. Doctor, we are moving to February 28th of '96, do you have <b>a</b> note? I do. Do you have any record of having seen her or anyone at Mednet having seen her between <b>6-13</b> of '95 and February 28th of <b>'96</b> ? No.
9 Q 0 1 2 A 3 Q 4 5 A 6 Q 7 8 A 9 Q 0 1 2 A 3 Q 4	Yes. On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking? Correct. She listed previously Plaquenil, Prednisone and Methotrexate? This is on January 27th. On several visits she identified all three of those medications that she was taking? That is correct. The purpose of those medications was to assist in preventing the progression of her rheumatoid arthritis? Yes. <b>6-13-95.</b> Is this your note, Doctor, or is this still Dr. Park?	7 A 8 Q 9 0 1 A 2 Q 3 4 A 5 Q 6 A 7 Q 8 9 A 0 Q 1 2 3 A 4 Q	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we? We did not. Or the visit before that, Doctor, did we? We did not. Doctor, we are moving to February 28th of '96, do you have <b>a</b> note? I do. Do you have any record of having seen her or anyone at Mednet having seen her between <b>6-13</b> of '95 and February 28th of <b>'96</b> ? No. Can you read your note for me?
9 Q 0 1 2 A 3 Q 4 5 A 6 Q 7 8 A 9 Q 0 1 2 A 3 Q 4 5 A 5 A 5 A 5 A 5 A 5 A 6 Q 7 8 A 9 Q 0 1 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A	<ul> <li>Yes.</li> <li>On the questionnaire that Mrs. Myers filled out, she doesn't identify Plaquenil as medication that she' taking?</li> <li>Correct.</li> <li>She listed previously Plaquenil, Prednisone and Methotrexate?</li> <li>This is on January 27th.</li> <li>On several visits she identified all three of those medications that she was taking?</li> <li>That is correct.</li> <li>The purpose of those medications was to assist in preventing the progression of her rheumatoid arthritis?</li> <li>Yes.</li> <li>6-13-95. Is this your note, Doctor, or is this</li> </ul>	7 A 8 Q 9 0 1 A 2 Q 3 4 A 5 Q 6 A 7 Q 8 9 A 0 Q 1 2 3 A 4 Q	Yes. Doctor, now that she is off the medication we have X's on the stick figure, we have X's back on both of the wrist joints, left and right, don't we? Yes. We didn't have those back in the previous visit, did we? We did not. Or the visit before that, Doctor, did we? We did not. Doctor, we are moving to February 28th of '96, do you have <b>a</b> note? I do. Do you have any record of having seen her or anyone at Mednet having seen her between <b>6-13</b> of '95 and February 28th of <b>'96</b> ? No.

 $\cdots \cdots \overset{i'}{\underline{\mathcal{G}}_{i,j}}$ 

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1 Q	Please do.	1		Assessment, depression, October through April, which
2 A	44 year old female last seen '94, followed by Dr.	2		is what people have with seasonal affective
3	Park. Subsequently tried on Methotrexate without	3		disorder.
4	benefit and with alopecia hair loss and nausea, DC'd	4		Do you want me to continue to read?
5	it when on 17.5 milligrams. Currently is on 5	5	Q	Yes.
6	milligrams of Prednisone and it's crossed, doing		À	Cortrosyn stimulation test. CBC diff, platelet,
7	okay, a cross through there is satisfied with	7		urinalysis, ophthalmology, 30 minute PE physical
8	level of function, Baker's cyst on left. Patient	8		exam, to GYN. Paxil dose 20 to 50 milligrams.
9	doesn't want to start anything prior to returning	9		Check on lights, which means there are
0	from Florida in April. Thick yellow green	IO		specific lights with seasonal affective disorder
1	secretions, just quit smoking.	11		use. Then someone else's handwriting, stay on
2 Q	The O represents an abbreviation for objective?	12		Prednisone and recheck.
3 A	That is correct.		Q	Was University Mednet serving the function of a PCP
4 Q	That would contain your objective findings?	14	×	for Miss Myers?
5 A	Yes.	15	А	Do you mean did she get her primary care here?
60	It says see stick figure?	16		Yes.
7 A	It does.		× A	
8 .Q	That was your practice to use a stick figure as		0	I looked through the records and note she received
9	representative of your objective findings in your	19	×	OB/GYN care here?
:0	chart?	20	А	Yes.
11 A	It was.		0	She received care for the flu here?
12 Q	It has RA not doing too badly?	22	À	
:3 A	Yes.	23	Q	If there are records that list you as her primary
4 0	Any mention of her being on medication, whether she	24		care physician, would it be accurate?
15	is or isn't at this 2-28-96 visit?	25	А	I would assume.
	Page 62			Page 64
1 A	She was on Plaquenil, Prednisone.	1	Q	At this 1-22-97 visit Miss Myers is back on
2 Q	She is back on medication now, right?	2	×	Plaquenil and Prednisone, based on her answer to
3 A	This would mean when she came into the office on	3		this questionnaire?
4	February 28th, she was on those medicines.		А	Yes.
5 Q	Is it surprising to you, Doctor, the symptoms of her		0	From the note you just read me, is it fair for me to
6	rheumatoid arthritis would get better after she	6	-	assume she doesn't like to be on Prednisone?
7	resumed taking the medication, namely Plaquenil and	Ŭ		It's fair to say she would like to get off
8	Prednisone?	8	11	Prednisone.
9 A	Not if the medicine was helping, no.		Q	If she liked being on it she wouldn't want to get
0 Q	Do you have any record of University Mednet visits	10	×	off it, correct?
1	for Ruth Myers between 2-28-96 and 1-22-97?		A	Yes.
2 A	No.		0	6-16-97 I have a telephone contact record.
2 A 3 Q	By the way, on 2-28-96, now that Ruth Myers is back	13	•	Would you like to show it to me?
3 Q 4	on her medication, we don't have any X's on the	14		It looks like it's signed by a nurse?
	si not metreation, we don't have any it boll the	L T	•	•
1 . 1	wrist, on the stick figure do we?	15	A	KI9III.
5 6 A	wrist, on the stick figure, do we?	15		0
6 A	No.	16	Q	Is there anything in there with regard to rheumatoid
6 A 7 Q	No. Could you read this note on 1-22-97?	16 17	Q	Is there anything in there with regard to rheumatoid arthritis?
6 A 7 Q 8 A	No. Could you read this note on 1-22-97? Patient not here in one year, was to get PE, which	16 17 18	Q A	Is there anything in there with regard to rheumatoid arthritis? No.
6 A 7 Q 8 A 9	No. Could you read this note on 1-22-97? Patient not here in one year, was to get PE, which is a physical exam. Changed jobs, was too	16 17 18 19	Q A Q	Is there anything in there with regard to rheumatoid arthritis? No. How about in the right column, it says ECN dash?
6 A 7 Q 8 A 9 20	No. Could you read this note on 1-22-97? Patient not here in one year, was to get PE, which is a physical exam. Changed jobs, was too depressed, couldn't tolerate Prozac, is functioning	16 17 18 19 20	Q A	Is there anything in there with regard to rheumatoid arthritis? No. How about in the right column, it says ECN dash? Erythromycin, Erythromycin is an antibiotic, and
6 A 7 Q 8 A 9 !0 !1	No. Could you read this note on 1-22-97? Patient not here in one year, was to get PE, which is a physical exam. Changed jobs, was too depressed, couldn't tolerate Prozac, is functioning fairly well, is satisfied with progress but would	16 17 18 19 20 21	Q A Q A	Is there anything in there with regard to rheumatoid arthritis? No. How about in the right column, it says ECN dash? Erythromycin, Erythromycin is an antibiotic, and Tessalon.
6 A 7 Q 8 A 9 20 21 22	No. Could you read this note on 1-22-97? Patient not here in one year, was to get PE, which is a physical exam. Changed jobs, was too depressed, couldn't tolerate Prozac, is functioning fairly well, is satisfied with progress but would like to get off of Prednisone; and I did this, it	16 17 18 19 20 21 22	Q A Q	Is there anything in there with regard to rheumatoid arthritis? No. How about in the right column, it says ECN dash? Erythromycin, Erythromycin is an antibiotic, and Tessalon. Could they have anything to do with rheumatoid
6 A 7 Q 8 A 9 !0 !1 !2 !3	No. Could you read this note on 1-22-97? Patient not here in one year, was to get PE, which is a physical exam. Changed jobs, was too depressed, couldn't tolerate Prozac, is functioning fairly well, is satisfied with progress but would like to get off of Prednisone; and I did this, it says Beck 24, I assume I did or someone did a Beck	<ul> <li>16</li> <li>17</li> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> </ul>	Q A Q A Q	Is there anything in there with regard to rheumatoid arthritis? No. How about in the right column, it says ECN dash? Erythromycin, Erythromycin is an antibiotic, and Tessalon. Could they have anything to do with rheumatoid arthritis?
6 A 7 Q 8 A 9 9 9 10 11 22	No. Could you read this note on 1-22-97? Patient not here in one year, was to get PE, which is a physical exam. Changed jobs, was too depressed, couldn't tolerate Prozac, is functioning fairly well, is satisfied with progress but would like to get off of Prednisone; and I did this, it	16 17 18 19 20 21 22	Q A Q A Q A	Is there anything in there with regard to rheumatoid arthritis? No. How about in the right column, it says ECN dash? Erythromycin, Erythromycin is an antibiotic, and Tessalon. Could they have anything to do with rheumatoid

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	Page 65	[	Page 67
1	rheumatoid arthritis?	1	know if the patient has it right and to make them be
2 A	Yes.	2	sure of what they are taking.
3 Q	Do you have any other records indicating contact	3	So the nurse may or may not independently
4	between Ruth Myers and Mednet between 1-22-97 and	4	ask the question of what you are taking because it's
5	1-20 of '98?	5	already pre-recorded, some nurses might or some
6 A	No.	6	nurses might not.
7 Q	Other than that phone message?	7	So I think if something is not there, you
8 A	No.	8	can't draw a conclusion that the patient is taking
9 Q	Doctor, is that your note on 1-20-98?	9	or not taking medication for that reason.
0 A	Yes.	0 Q	How many times prior to this visit on 1-20-98 dia
1 Q	Could you please read it?	1	the nurse rely on the subjective questionnaire of
2 A	46 year old female, last seen 1-97, did not return	2	Miss Myers as opposed to listing her current
3	for physical examination, too much money. Just	3	medications on the physician side of the chart?
4	changed health insurance. Cortrosyn stimulation	4 A	I don't know.
5	says <b>4</b> to <b>4</b> , didn't change.	5 Q	
6	Patient is feeling fine. Has noted lump in	6	stick figure, correct?
7	left biceps. Status post left knee arthroscopy.	7 A	Yes.
8	Blood pressure 120/80, doing well. To GYN, 30	8 Q	She doesn't have any X's on her wrist, correct?
9	minute physcial examination, mammogram. Cortrosyn		Correct.
20	stimulation, cholesterol, stool, OB times 3. She	20 Q	That would be consistent with her being on
!1	wanted an HIV test.	21	Prednisone and Plaquenil, I don't think she is on
!2 Q	Under current medications on that handwritten note	12	Methotrexate at this point, but Prednisone and
13	is there anything listed?	23	Plaquenil, correct?
24 A	No.	14 A	Consistent with her feeling well and not having
!5 Q	Is there a questionnaire on the back of that?	!5	demonstrable evidence of disease.
	Page 66		Page 68
1 A	There is.	1 Q	Doctor, we just reviewed the records from 1994 to
2 Q	What is listed there?	2	1998?
3 A	Plaquenil, Prednisone.		Yes, the medications could do that.
4	MR. KRAUSE: I don't have a copy of	4 Q	Is it a fair characterization for me to say that
5	that handwritten note, do you Kathy?	5	from 1994 to 1998 at the times Miss Myers was on her
6	MS. VADAS: No.	6	medications she was getting better, specifically
7	MR. KRAUSE: I mean, her	7	with regard to the pain in her wrists?
8	questionnaire, the portion of the note, I don't have	8 A	Yes.
9	it. The patient questionnaire. Can you mark that and send me a copy of it, please? I can give me one		Is it a fair characterization when she is not taking
	of my millions of little stickies.		her medication the pain in her wrist comes back? It would appear so.
$\begin{vmatrix} 1 \\ 2 \\ 0 \end{vmatrix}$	Doctor, that questionnaire is based on what the	1 A	Is it a fair characterization to say Miss Myers
2 Q 3	patient says they are doing, correct?	2 Q 3	didn't like taking her medication?
4 A	The patient fills it out.	3 4 A	Yes.
	Right. Current medications you would fill out?	5 Q	Is it a fair characterization for me to say Miss
5 Q 6 A	No.	6	Myers on her own decided to terminate taking he
7 Q	Who would fill out current medications on the note	7	medication against the physician's advice?
8	side of this document?	8 A	You know, we
9 A	The nurse. Well, actually, it varies.		I want to make sure I have everything right here.
0 0	Is it safe to say Miss Myers wouldn't be writing on	:0	This is my only chance to talk to you.
11	the note side of the page?	11	The plaintiffs lawyer will call you at trial
	That is correct, either the doctor or nurse would.	12	in this case.
12 A	That is confect, childrine doctor of hurse would.		
2 A 3 Q	Nothing is written next to current medications?	13 A	
			Well, maybe not. Do you remember reading a note from Dr. Park?
:3 Q	Nothing is written next to current medications?	:3 A	Well, maybe not.

See 1 mars

r			Ruth Myers -v- Faissal Zahrawi, M.D. et al
	Page 69		Page 71
1 Q	I'm looking for it. Here we go. 6-13-95 we talked	1 A	No, I think she came in acutely for respiratory
2	about the A/P at the bottom of that?	2	symptoms.
3 A	Let me get there.	30	What is your next visit for Miss Myers to Mednet?
4 Q	I'm sorry, Doctor.	4 A	To me or Mednet? We went over Dr. Convery.
S A	•	5 Q	We are getting to him.
6 Q	The first line we said synovitis of hands increased	-	That would be the next one.
7	since meds, and then what is that?	7 0	May 23rd of '98?
	DC'd on own.	7 Q 8 A	March 23rd.
9 Q	What does that mean, Doctor?	90	March 23rd of 1998. Sorry. Do you have the
10 A	Stopped, discontinued on her own. Yes.	10	typewritten note, Doctor?
10 M	The physician didn't tell her to do that?	1	I do.
-	That is correct.		
	You tell me, when I say physicians making		Do you know why Miss Myers is coming to see Dr.
13 Q 14		13 14 A	Convery on March 23rd?
	recommendations to Miss Myers in this chart, they		
15	are making recommendations that she stay on her mediantion, is that a fair abarratorization?	15 Q	Can you discern why she is coming to see Dr. Conveyy
16	medication; is that a fair characterization?	16	from the content of that note?
17 A		17	MS. VADAS: Objection.
18 Q	Doctor, we were on January 28th of 1998?		Left shoulder pain several months, biceps deformity
19 A	Okay.	19	several months, biceps muscle deformity.
20 Q	Actually, I believe we just finished talking about	20 Q	Is the discussion on the typewritten note in the
2'1	January 20th of '98. Can I take a look at that	21	subjective and the examination and the impression
212	subjective form that Miss Myers fills out, the	22	limited to Miss Myers' left extremity; is that a
213	questionnaire?	23	fair characterization?
	From that date, sure.		Left arm?
25 Q	I don't mean to stand over you.	25 Q	Left upper extremity?
	Page 70		Page 72
1 A	That's okay.	1 A	Yes.
2 Q	Thank you. Doctor, the next visit I have is	2 Q	Are you aware at this time she was seeing Dr.
3	somewhat marked out here. It says 2-23, I'm	3	Zahrawi as well?
4	assuming it's '98. I have a big black line through	4 A	Not unless I would have so stated in a prior note,
5	my copy, maybe you can help me out. Do you see that	5	and I don't think that I the prior note would
6	2-23, 2-23-98, do you have another visit in between	6	have been January 20th, so I would suspect the
7	there?	7	answer would be no.
8 A	That's when she saw Dr. Convery an orthopedist. Go	8 Q	If someone characterized that plan as suggesting
9	to the next page.	9	that Dr. Convery disagreed with Dr. Zahrawi's plan
0 Q	That?	10	to have surgery to do a resection of Miss Myers'
1 A	Yes.	11	right distal ulna, would that be accurate?
	I have it right here, Doctor, I see. Okay. I have	12	MS. VADAS: Objection.
3	a 2-23-98 it looks to me?	13 A	No.
4 A	That is correct.	14 0	If someone did that, would that be misleading?
	The first line of that says PCP: Bishko, who saw her	15	MS. VADAS: Objection.
6	on that date, Doctor, 2-23-98?		I don't know. It wouldn't be accurate.
7 A	I don't know.		Let me read you the question, Doctor.
8 Q	<b>Can</b> you discern the writing, whose writing that is?	18	Someone represented that that note indicated
9 A	No, I can't tell.	19	that Miss Myers' operative treatment with Dr.
	Is there any discussion pertinent to this patient's	20	Zahrawi and the repair in his opinion was not
10 Q 11	rheumatoid arthritis?	20	necessary for the shoulder, would you say that is
1	I would assume this is an acute care type visit for	21	accurate?
10 1	I WOULD ASSULLE UNS IS ALL ACULE CALE LYDE VISIT IOF	44	
	• •	22	MS VADAS: Objection
!3	respiratory symptoms.	23	MS. VADAS: Objection.
!3	• •	23 24 A 25	MS. VADAS: Objection. Yes, for the shoulder. Yes. We were talking about the shoulder?

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1 Q	Correct, that's my point, we are not talking about	1 Q	Had Miss Myers ever gone to Dr. Convery, other thar
2	the right distal ulna, are we?	2	this date?
3 A	We are not.	3	MS. VADAS: Objection.
4 Q	That typewritten note doesn't either?	4 A	I don't see a record of it in the chart.
5 A	It does not.	5 Q	I will represent to you plaintiff's counsel hasn't
6 Q	That typewritten note in the plan Dr. Convery says	6	provided me with any records other than these notes
7	that his recommendation is that her shoulder be	7	from this visit.
8	initially treated nonoperatively?	8 A	That's all I see.
9 A	Yes.	9 Q	I want you to assume that surgery with Dr. Zahrawi
10 <b>O</b>	Do you see Dr. Convery's handwritten note from that	10	was scheduled for March 20th of 1998. I want you to
11	same day?	11	assume further that Miss Myers' insurance company
12 A	I do. I guess I do.	12	indicated that the referral had to go through her
13 0	Do you see Dr. Zahrawi's name in that chart?	13	primary care physician
	I do.	14	MS. VADAS: Objection.
15 0	What is written in the margin next to where it says	15 Q	to get payment.
16	patient, Dr well, can you read that line for me?	16 A	Okay.
	Patient, Dr. Zahrawi, something about coverage,	17 0	Do you want to review Dr. Zahrawi's records?
18	insurance.	18 A	Not especially, unless that's what you want me to
19 0	Is that OP, OP coverage?	19	do.
20 A	-	20 0	I want you to assume those two things.
21	for insurance.	21 A	That is fine.
22 Q	What does it say next to PT, Dr. Zahrawi, what does	22 0	Who would Miss Myers go to to get a sign-off on Dr.
23	Dr. Convery have written on that record in the	23 Q	Zahrawi's procedure?
23	margin?	23	MS. VADAS: Objection.
25	MS. VADAS: Objection.		If you are telling me it has to come from a PCP it
25			
	Page <b>74</b>		Page $\mathcal{T}$
	Someone wrote agree.	1	would be me.
2 Q	Do you have any reason to believe that Dr. Convery	2 Q	Are you an orthopedic surgeon, Doctor?
3	did not write this note?		I am not the orthopedic surgeon, I wouldn't be the
4	MS. VADAS: Objection.	4	one that would sign off on it.
	I was just looking, because the handwriting oh,		You are telling me her insurance company
	okay, two different handwritings. It's probably the	6	mandated her primary care provider put forth a
7	orthopedic technician. This is surmising, I wasn't	7	request for approval for surgery?
8	there. The orthopedic technician wrote the first		Right.
9	part, the exam is by Dr. Convery, but I don't know	9 A	
10	what he is agreeing to, he just wrote agree. I	10	happen.
11	don't know if he was agreeing with the orthopedic		I already went over this, but other than the single
12	tech or Dr. Zahrawi or what.	12	visit to Dr. Convery on 3-23 of '98, you are not
13 Q	That's fine. I want you to assume for me, Doctor,	13	aware of any other visits that mentions in the chart
14	that Miss Myers' surgery with Dr. Zahrawi was	14	of her being treated by Dr. Convery?
15	originally scheduled for March 20, 1998, okay?		I'm not.
16 A	Okay.		Dr. Convery is an orthopedic surgeon, correct?
17 Q	I want you to assume for me that in order to get	1	He is.
18	insurance coverage for that surgery, she had to go	-	Do you have anything you need to add?
	back to har primary care physician Madnat Fair	19 A	No. Can we go off the record for a second?
19	back to her primary care physician, Mednet. Fair		
20	enough?	20	MR. KRAUSE: Sure, Doctor. Off the
	enough? MS. VADAS: Objection.	20 21	record.
20 21 22 A	enough? MS. VADAS: Objection. I am her primary care physician.	20 21 22	record. (Discussion off the record.)
20 21	enough? MS. VADAS: Objection. I am her primary care physician. Dr. Convery was filling in for he you?	20 21 22 23	record. (Discussion off the record.) MR. KRAUSE: Back on the record.
20 21 22 A 23 Q 24 A	enough? MS. VADAS: Objection. I am her primary care physician. Dr. Convery was filling in for he you? No, he's <b>an</b> orthopedic surgeon, so he wouldn't have	20 21 22 23 24 By	record. (Discussion off the record.) MR. KRAUSE: Back on the record. Mr. Krause:
20 21 22 A 23 Q	enough? MS. VADAS: Objection. I am her primary care physician. Dr. Convery was filling in for he you?	20 21 22 23 24 By	record. (Discussion off the record.) MR. KRAUSE: Back on the record.

Section 28

Page 77Page 791evidewed these charts as part of your continued1QIs any of your writing contained on this page?2AYes.3QWhere?3QWhere?3QWhere?4ValisSign of your writing contained on this page?3QWhere?5AYes.3QWhere?4Keyrting between J. Farmiloe and patient wants.5AYes.3QWhere?4Keyrting between J. Farmiloe and patient wants.7QThis is in your chart?6ATo start Minocin, despite the fact it will probably7AItia.NYes.69No. VADAS:Objection.9QWhat is the word is coverage?4MS. VADAS:Objection.5AMhon the efficacy.7MS. VADAS:Objection.5AWhen the T ends of the bone don't come together.7GNo. You mean C/O?5AWhen the T ends of the bone don't come together.7MS. VADAS:Objection.7ASurce.8QCan wagere the next word is coverage?9ASurce.9MS. VADAS:Objection.11Surce.79Would it be fair to characterize the ublus a sarce.9ASurce.9NYes.No. Tourmawi's name, right?3Converage for insurance, it here, 'I'm not <t< th=""><th>1</th><th></th><th><u> </u></th><th></th><th></th></t<>	1		<u> </u>		
2       treatment of your patients, correct?       2       A       Yea.         3       Yes.       3       Q       Where?         4       Miss Myers was and is your patient?       3       Q       Where?         4       Miss Myers was and is your patient?       5       Q       What does that say the patient wants.         5       Q       This is in your chart?       6       A       To start Minocin, despite the fact it will probably         7       I is.       0       Or ave agree that's an OP next to Zahrawi on that       8       Q       That word is medicine?         9       0       on you do not know?       1       A       A       Minocin.         9       0       Can we agree the next word is coverage?       3       A       Minocin.         7       MS. VADAS:       Objection.       4       A       tetracycline product used in mild cases of         7       MS. VADAS:       Objection.       5       What is the sublux of joint?       5         6       NO. Your mean C/O?       5       A       When the ficacy.       7         9       MS. VADAS:       Objection.       7       Would it be fair to characterize the sublux a         8       aratit also, VADAS:	1				Page 79
3 A       Yes.       3 Q       Where?         4 Q       Miss Myers was and is your patient?       5 A         5 A       Yes.       5 Where?         6 Q       This is in your chart?       6 A         7 A       It is.       6 A         8 Q       Can we agree that's an OP next to Zahrawi on thai       8 Q         9       line -       0         10 or you do not know?       1       A         2 A       Idoit Kaow.       2         3 A       No. You mean C/O?       5 A         4 No. You mean C/O?       5 A       What is the sublux of joint?         5 A No. You mean C/O?       5 A       What is the sublux of point?         6 No. Doctor. We're not on the same line.       -       -         7 Owold it be fair to characterize the sublux a       a partial dislocation at the joint?         9 MS. VADAS:       Objection.       -         9 That's next to Dr. Zahrawi's name, right?       -       A         1 A       Serge?       -       Outorstime et al. and individual's name?         9 A       Sure.       -       Outorstime et al. and individual's name?         9 A       Sure.       -       Outorstime et al. anort to Dr. Zahrawi's name?         1 A<	1		1	Q	Is any of your writing contained on this page?
4 Q       Miss Myers was and is your patient?       4 A       Everything between J. Farmiloe and patient wants.         5 A       Yes.       0       This is in your chart?       6 A       To start Minocin, despite the fact it will probably         7 A       I is.       0       Miss Myers was and is your patient?       6 A       To start Minocin, despite the fact it will probably         9       0       naw eagree that's an OP next to Zahrawi on that       8 Q       That word is medicine?         9       0       or you do not know?       1 A       A tetracycline product used in mild cases of         1       10       - or you do not know?       4 A       What is that?       1 word is medicine?         9       NS. VADAS:       Objection.       4 What is that sublux of joint?       5 A       When the T ends of the bone don't come together,         7       MS. VADAS:       Objection.       5 A       When the T ends of the bone don't come together,         8       matrial dislocation at the joint?       9 A       Suce.       9 Can you read for me under the subjective portion of         9       MS. VADAS:       Objection.       4 Yes.       9 Can you read for me under the subjective portion of       1 his not?         9       A Sure.       9 KS. VADAS:       Objection.       1 A       1 Terre isn't a	2	· ·	2	А	Yeah.
<ul> <li>5 A Yes.</li> <li>6 Q This is nyour chart?</li> <li>7 A It is.</li> <li>8 Q Can we agree that's an OP next to Zahrawi on thai</li> <li>9 Q Can we agree that's an OP next to Zahrawi on thai</li> <li>9 Q - or you do not know?</li> <li>1 Q - or you do not know?</li> <li>2 A I don't Know.</li> <li>3 A I don't Know.</li> <li>4 A totacycline product used in mild cases of the chart it will probably be of little value, okay with me.</li> <li>9 Q Can we agree the next word is coverage?</li> <li>4 M Socha, WabAS: Objection.</li> <li>9 A No. You mean C/O?</li> <li>9 A Sure.</li> <li>9 Q That's next to Dr. Zahrawi's name, right?</li> <li>9 A Sure.</li> <li>1 A There isn't anything.</li> <li>1 A There isn't anything.</li> <li>1 A There isn't anything.</li> <li>1 A There totay. Doctor, do you have an individual's name?</li></ul>	3 A	Yes.	3	Q	Where?
6 Q       This is in your chart?       6 A       To start Minocin, despite the fact it will probably         7 A       Itis.       0       Ms. VADAS:       Objection.       0       Wat is that?         1 Q       - or you do not know?       1 A       A tetracycline product used in mild cases of         2 A       I don't know.       0       What is that?         3 Q       Can we agree the next word is coverage?       A       A       A tetracycline product used in mild cases of         4 MS. VADAS:       Objection.       0       What is that?       A         7 Coverage here for insurance, is that what       that says, Doctor?       S A       What is the subbux of joint?         8 MS. VADAS:       Objection.       7       Would it be fair to characterize the sublux a         9 MS. VADAS:       Objection.       7       Would it be fair to characterize the sublux a         9 A       Sure.       9       Can you read for me under the subjective portion of         1 us.       4       No. YOU mean C/O?       Partial dislocation at the joint?         9 A       Next to Dr. Zahrawi's name, right?       A       Sure.       9         9 A       Next to Dr. Zahrawi's name?       1 A       There isn't anything.       Page 80         1 A       There isn	4 Q	Miss Myers was and is your patient?	4	А	Everything between J. Farmiloe and patient wants.
7       A       It is.       7       be of little value, okay with me.         8       Q       Can we agree that's an OP next to Zahrawi on that       8       Q       That word is medicine?         9       Ime       A       Minocin.       0       Q       What is that?         0        MS. VADAS:       Objection.       0       Q       What is that?         1        MS. VADAS:       Objection.       0       Q       What is that?         4       MS. VADAS:       Objection.       0       Q       What is that?       Q       What is that?         5       A       No. You mean C/O?       5       A       When the T ends of the bone don't come together, malaigned, usually down.       0       Q       Q       What is the sublux of joint?       5         5       A       NAS. VADAS:       Objection.       0       Q       Can you read for me under the subjective portion of this note?         2       That's next to Dr. Zahrawi's name, right?       3       Yes.       S       G       How about under the objective?         3       Q       Ks. VADAS:       Objection.       1       A       Terre isn't anything.       Yes.         1       A       Sure.	5 A	Yes.	5	Q	What does that say the patient want?
<ul> <li>8 Q Can we agree that's an OP next to Zahrawi on thai</li> <li>9 line</li> <li>9 MS. VADAS: Objection.</li> <li>9 - or you do not know?</li> <li>1 A A tetracycline product used in mild cases of rheumatoid arthritis. I wan't terribly struck with</li> <li>4 Can we agree the next word is coverage?</li> <li>1 A A tetracycline product used in mild cases of rheumatoid arthritis. I wan't terribly struck with</li> <li>9 Can we agree the next word is coverage?</li> <li>1 A A tetracycline product used in mild cases of rheumatoid arthritis. I wan't terribly struck with</li> <li>4 Can we agree the next word is coverage?</li> <li>2 No. You mean C/O?</li> <li>3 No. You mean C/O?</li> <li>4 No. You mean C/O?</li> <li>5 No. You mean C/O?</li> <li>6 No. Doctor. We're not on the same line.</li> <li>7 Coverage for insurance, is that what</li> <li>8 that says. Doctor?</li> <li>9 MS. VADAS: Objection.</li> <li>9 A Sure.</li> <li>9 That's next to Dr. Zahrawi's name, right?</li> <li>2 A Cortrosyn 18 to 27, cholesterol less than 200, concerned r MCP. Questions use of Minocin. Didn't get PE, no insurance. Dr. Zahrawi operating.</li> <li>9 A Sure.</li> <li>9 MS. VADAS: Objection.</li> <li>1 A There isn't anything.</li> <li>2 A Sure.</li> <li>9 A Sure.</li> <li>9 Si ti not next to Dr. Zahrawi's name?</li> <li>1 A There isn't anything.</li> <li>2 A Sure.</li> <li>9 Si to not ext to Dr. Zahrawi's name?</li> <li>4 M tiss.</li> <li>9 Whose name is that?</li> <li>9 Whose name is that?</li> <li>9 A Sure.</li> <li>9 A Sure.</li> <li>9 C At the bottom of the chart it says okay per Bishko.</li> <li>1 and then there is the nurse's signature?</li> <li>2 A That is correct.</li> <li>9 Dose that indicate the nurse wrote this note?</li> <li>9 A Sease I have an andependent recollection of what you discussed?</li> <li>1 A I dial.</li> <li>9 A Because I have a handwritten note. She just wrote</li> <li>1 A I dial.</li> <li>9 A Because I have a handwritten note. She just wrote</li> <li>1 A Tore furging her surgery, do you have any recollection a</li></ul>	6 Q	This is in your chart?	6	A	To start Minocin, despite the fact it will probably
9       line -       9. A Minocin.         0       MS. VADAS: Objection.       9. A Minocin.         1       - or you do not know?       1       A tetracycline product used in mild cases of rheumatoid arthritis, I wasn't terribly struck with 3 the efficacy.         2       A Idon't know.       2       rheumatoid arthritis, I wasn't terribly struck with 3 the efficacy.         4       MS. VADAS: Objection.       4       What is the sublux of joint?         5       No. You mean C/O?       6       What is the sublux of joint?         6       No. Dotor. We're not on the same line.       7       Would it be fair to characterize the sublux a 8 partial dislocation at the joint?         7       MS. VADAS: Objection.       9       A Sure.       9       Q Can you read for me under the subjective portion of 11 his note?         1       sure.       2       Chart's next to Dr. Zahrawi's name, right?       2       A Cortrosyn 18 to 27, cholesterol less than 200, concerned r MCP. Questions use of Minocin. Didn't 28       9         3       Yes.       MS. VADAS: Objection.       2       A Sure.       1       A There isn't anything.       Page 80         1       MS. VADAS: Objection.       2       A sin the past we would refer to the stick figure 3 for your objective findings?       4       Yes.         2       Sure.       2	7 A	It is.	7		be of little value, okay with me.
0       MS. VADAS:       Objection.       0       Q       What is that?         1       Q       - or you do not know?       1       A       A tetracycline product used in mild cases of         2       A       I don't know.       3       Q       Can we agree the next word is coverage?       3       the termatoid antrhitis, I wasn't terribly struck with         3       Q       No. Doctor.       When the Tends of the bone don't come together.         7       No. Doctor. We're not on the same line.       6       malaligned, usually down.         7       Ovorage for insurance, is tould be 'here." I'm not       3       Partial dislocation at the joint?         9       MS. VADAS:       Objection.       9       A         9       MS. VADAS:       Dojection.       9       A         9       MS. VADAS:       Objection.       9       A         1       4       Sure.       0       Can you read for me under the subjective portion of         1       sure.       0       Canyou read for me under the subjective portion of         1       sure.       0       Canyou read for me under the subjective portion of         1       sure.       0       Canyou read for me under the subjective portion of         1       M	8 Q	Can we agree that's an OP next to Zahrawi on thai	8	Q	That word is medicine?
<ul> <li>1 Q - or you do not know?</li> <li>1 A A tetracycline product used in mild cases of 2 nheumatoid arthritis, 1 wasn't terribly struck with the efficacy.</li> <li>4 MS. VADAS: Objection.</li> <li>5 A No. You futedn C/O?</li> <li>6 No. Doctor. We're not on the same line.</li> <li>7 Coverage here for insurance, is that what</li> <li>8 that says, Doctor?</li> <li>9 MS. VADAS: Objection.</li> <li>0 A Coverage for insurance, it could be "here," I'm not 1 sure.</li> <li>2 O That's next to Dr. Zahrawi's name, right?</li> <li>3 A Yes.</li> <li>9 Next to Dr. Zahrawi's name, right?</li> <li>9 A Stree.</li> <li>9 Q Sarre.</li> <li>9 A Sure.</li> <li>9 A I Farmiole.</li> <li>9 A the bottom of the chart it says okay per Bishko, 1 and ther is the nurse's signature?</li> <li>9 A the bottom of the chart it says okay per Bishko, 1 and then there is the nurse's signature?</li> <li>9 A the bottom of the chart it says okay per Bishko, 1 and then there is the nurse's signature?</li> <li>9 A the bottom of the chart it says okay per Bishko, 1 and then there is the nurse's signature?</li> <li>9 A the bottom of the chart it says okay per Bishko, 1 and then there is the nurse's signature?</li> <li>9 A the bottom of the chart it says okay per Bishko, 1 and then there is the nurse's signature?</li> <li>9 A the bottom of the chart it says okay</li></ul>	9	line	9	А	Minocin.
<ul> <li>2 A I don't know.</li> <li>3 Q Can we agree the next word is coverage?</li> <li>4 MS. VADAS: Objection.</li> <li>5 A No. You mean C/O?</li> <li>6 Q No, Doctor. We're not on the same line.</li> <li>7 Coverage here for insurance, is that what</li> <li>8 that says, Doctor?</li> <li>9 MS. VADAS: Objection.</li> <li>9 A Sure.</li> <li>9 Q Next to Dr. Zahrawi's name, right?</li> <li>1 MS. VADAS: Objection.</li> <li>9 NS. VADAS: Objection.</li> <li>9 Q Next to Dr. Zahrawi's name, right?</li> <li>1 MS. VADAS: Objection.</li> <li>9 NS. VADAS: Objection.</li> <li>9 A Sure.</li> <li>9 Obsent at indicate the nurse wrote this note?</li> &lt;</ul>	0	MS. VADAS: Objection.	0	Q	What is that?
<ul> <li>3 Q Can we agree the next word is coverage? MS. VADAS: Objection.</li> <li>4 Q No, Doctor. We're not on the same line. Coverage here for insurance, is that what that says, Doctor?</li> <li>9 MS. VADAS: Objection.</li> <li>9 MS. VADAS: Objection.</li> <li>9 MS. VADAS: Objection.</li> <li>9 MS. VADAS: Objection.</li> <li>9 Q That's next to Dr. Zahrawi's name, right?</li> <li>9 Q That's next to Dr. Zahrawi's name, right?</li> <li>9 MS. VADAS: Objection.</li> <li>9 Q That's next to Dr. Zahrawi's name, right?</li> <li>9 A Stre.</li> <li>9 MS. VADAS: Objection.</li> <li>9 A Stre.</li> <li>9 MS. VADAS: Objection.</li> <li>9 A Stre.</li> <li>9 MS. VADAS: Objection.</li> <li>9 A Stre.</li> <li>9 A Sure.</li> <li>9 Does that indicate the nurse wrote this note?</li> <li>4 A Yes.</li> <li>9 Dos what wa independent recollection of whether</li> <li>9 Dos what wa independent recollection of whether</li> <li>9 A Sure.</li> <li>9 Dos what wa independent recollection of whether</li> <li>9 A Sure.</li> <li>9 Q Dos what wa hadwritten note. Shejust wrote</li> <li>10 A There insih the question.</li> <li>10 Dot.</li> <li>10 Dot.</li> <li>10 Dot.</li> <li>10 Dot.</li> <li>10 Dot.</li> <l< td=""><td>1 Q</td><td> or you do not know?</td><td>1</td><td>Α</td><td>A tetracycline product used in mild cases of</td></l<></ul>	1 Q	or you do not know?	1	Α	A tetracycline product used in mild cases of
<ul> <li>MS. VADAS: Objection.</li> <li>No. You mean C/O?</li> <li>No. Doctor. We're not on the same line.</li> <li>Coverage here for insurance, is that what</li> <li>that says, Doctor?</li> <li>MS. VADAS: Objection.</li> <li>Coverage for insurance, it could be "here," I'm not</li> <li>sure.</li> <li>Q That's next to Dr. Zahrawi's name, right?</li> <li>A Yes.</li> <li>Q Next to Dr. Zahrawi's name, right?</li> <li>A Sure.</li> <li>MS. VADAS: Objection.</li> <li>Q Next to Dr. Zahrawi's name, right?</li> <li>A Sure.</li> <li>MS. VADAS: Objection.</li> <li>Q Next to Dr. Zahrawi's name, right?</li> <li>A Sure.</li> <li>Q Not to to T. Zahrawi's name?</li> <li>A Sure.</li> <li>I MS. VADAS: Objection.</li> <li>Q Sare.</li> <li>Page 78</li> <li>Page 78</li> <li>Page 80</li> <li>I A There isn't anything.</li> <li>Q As in the past we would refer to the stick figure</li> <li>G A the top of chart, it looks like a nurse?</li> <li>A I is.</li> <li>Q Whose name is that?</li> <li>Q As the bottom of the chart it says okay per Bishko, and then there is the nurse's signature?</li> <li>A That is correct.</li> <li>Q Does that indicate the nurse wrote this note?</li> <li>Q As the bottom of the chart it says okay per Bishko, and then there is the nurse's signature?</li> <li>A That is correct.</li> <li>Q Doos have an independent recollection of whether</li> <li>MS Ways on this day?</li> <li>A Icid.</li> <li>A Because I have a handwritten note. She just wrote it, probably when we were done with the patt we surgerly.</li> <li>A Because I have a handwritten note. She just wrote it, probably when we were done with the patt we core done with the patt we core done with the patt were and independent recollection of at all of that?</li> <li>A I couldn't read it for a minute and then I read it.</li> <li>A I Couldn't read it for a minute and then I read it.</li> <li>A I Couldn't read it for a minute and then I read it.</li> <li>A Couldn't read it for a minute and then I read it.</li> <li>A When the the coure commented a discussion with Ruth</li></ul>	2 A	I don't know.	2		rheumatoid arthritis, I wasn't terribly struck with
<ul> <li>5 A No. You mean C/O?</li> <li>6 Q No, Doctor. We're not on the same line.</li> <li>7 Coverage her for insurance, is that what</li> <li>8 that says, Doctor?</li> <li>9 MS. VADAS: Objection.</li> <li>1 Sure.</li> <li>2 Q That's next to Dr. Zahrawi's name, right?</li> <li>3 A Yes.</li> <li>9 a Yes.</li> <li>9 a Sure.</li> <li>1 MS. VADAS: Objection.</li> <li>2 A Sure.</li> <li>2 Q That's next to Dr. Zahrawi's name, right?</li> <li>3 a Yes.</li> <li>9 a Sure.</li> <li>9 Concerned re MCP. Questions use of Minocin. Didn't get PE, no insurance. Dr. Zahrawi operating.</li> <li>5 Q How about under the objective?</li> <li>9 Page 78</li> <li>1 A There isn't anything.</li> <li>2 A Sure.</li> <li>2 Q As in the past we would refer to the stick figure</li> <li>3 a the top of chart, it looks like a nurse?</li> <li>7 A It is.</li> <li>9 Dose that indicate the nurse's signature?</li> <li>1 A That is correct.</li> <li>9 Dose that indicate the nurse's signature?</li> <li>1 A That is correct.</li> <li>9 Dose that indicate the nurse wrote this note?</li> <li>1 A That is correct.</li> <li>9 Dose that indicate the nurse's signature?</li> <li>1 A That is correct.</li> <li>9 Dose that indicate the nurse's signature?</li> <li>1 A That is correct.</li> <li>9 Dose that indicate the nurse wrote this note?</li> <li>1 A That is correct.</li> <li>9 Dose that indicate the nurse wrote this note?</li> <li>1 A That is correct.</li> <li>9 Dose that indicate the nurse wrote this note?</li> <li>1 A I do not.</li> <li>2 Q Doctor, during the 15 minute 4iscussion with Ruth</li> <li>16 Myers regarding her surgery, do you have any recollection of what yes nad prior surgeries</li> <li>10 Poing that 15 minute discussion with Ruth</li> <li>10 On the saw Ruth Myers had prior surgeries</li> <li>10 On this is your writing?</li> <li>14 On her knuckles I believe.</li> <li>12 Q Surgery on her knce?</li> <li>13 A She had arthroscopic surgery.</li> <li>14 Q Have you ever documented a discussion with Ruth</li> </ul>	3 Q	Can we agree the next word is coverage?	3		the efficacy.
5 A No. You mean C/O?       5 A When the T ends of the bone don't come together,         6 Q No. Doctor. We're not on the same line.       6         7 Coverage here for insurance, is that what       8         8 that says, Doctor?       9 A Sure.         9 MS. VADAS: Objection.       9 A Sure.         1 sure.       10 Q Can you read for me under the subjective portion of         2 Q That's next to Dr. Zahrawi's name, right?       2 A Cortrosyn 18 to 27, cholesterol less than 200,         3 A Yes.       22         9 argce?       20 Charts next to Dr. Zahrawi's name, right?         9 argce?       20 How about under the objective?         9 Page 78       Page 78         1 MS. VADAS: Objection.       1 A There isn't anything.         2 A Sure.       2 Q As in the past we would refer to the stick figure         3 Q Is in ton text to Dr. Zahrawi's name?       4 A Sure, an individual's name?       4 A Hand films with Brewerton views, theumatoid         6 at the top of chart, it looks like a nurse?       5 Q How about under your plan?         6 A that is correct.       2 Q Doctor, first, 1 see an individual's name, independent recollection of what you discussed?         1 A It is.       2 Q Doctor, first, 1 see	4	MS. VADAS: Objection.	4	0	What is the sublux of joint?
7Coverage here for insurance, is that what 87QWould it be fair to characterize the sublux a 8 partial dislocation at the joint?9MS. VADAS: Objection.Objection.9ASure.2QThat's next to Dr. Zahrawi's name, right?2ACortrosyn 18 to 27, cholesterol less than 200, concerned re MCP. Questions use of Minocin. Didn't4QNext to Dr. Zahrawi's name, right?2ACortrosyn 18 to 27, cholesterol less than 200, concerned re MCP. Questions use of Minocin. Didn't4QNext to Dr. Zahrawi's name, right?2ACortrosyn 18 to 27, cholesterol less than 200, concerned re MCP. Questions use of Minocin. Didn't4QNext to Dr. Zahrawi's name, right?2ACortrosyn 18 to 27, cholesterol less than 200, concerned re MCP. Questions use of Minocin. Didn't4QNext to Dr. Zahrawi's name, right?3GFace5QFastSecons1AThere isn't anything.6A Sure.2QAs in the past we would refer to the stick figure3QIs in ton text to Dr. Zahrawi's name?4Yes.4A Sure, sure.2QHand films with Brewerton views, rheumatoid7A Itis.Suscussed.15Minute discussion about surgery.8QWhose name is that?9QAs yes.9QAs the bottom of the chart it says okay per Bishko, and then there is the nurse's signature?1A1AIdo no	5 A	No. You mean C/O?	5	À	
<ul> <li>8 that says, Doctor?</li> <li>MS. VADAS: Objection.</li> <li>A Coverage for insurance, it could be "here," I'm not surce.</li> <li>Q That's next to Dr. Zahrawi's name, right?</li> <li>A Yes.</li> <li>Q No. VADAS: Objection.</li> <li>Q Can you read for me under the subjective portion of this note?</li> <li>Q Can you read for me under the subjective portion of this note?</li> <li>Q Can you read for me under the subjective portion of this note?</li> <li>Q Can you read for me under the subjective portion of this note?</li> <li>Q Can you read for me under the subjective portion of this note?</li> <li>Q Can you read for me under the subjective portion of this note?</li> <li>Q A Sure.</li> <li>Q Sure.</li> <li>Page 78</li> <li>MS. VADAS: Objection.</li> <li>Q A Sure.</li> <li>Q Boyotor, first, I see an individual's name at the top of chart, it looks like a nurse?</li> <li>A I t is.</li> <li>Q Whose name is that?</li> <li>Q Dos that indicate the nurse wrote this note?</li> <li>A That is correct.</li> <li>Q Doyou have an independent recollection of what you discussed?</li> <li>A I taid.</li> <li>A Yes.</li> <li>Q Doyou have an independent recollection of whether for you saw Miss Myers on this day?</li> <li>A Idid.</li> <li>Y You did?</li> <li>A Because I have a handwritten note. Shejust wrote it, probably when we were done with the patient it so 29-98 visit?</li> <li>A Controsyn 18 to 27, cholesterol surgery.</li> <li>A She had arthroscopic surgery.</li> </ul>	6 Q	No, Doctor. We're not on the same line.	6		malaligned, usually down.
<ul> <li>MŠ. VADAS: Objection.</li> <li>A Coverage for insurance, it could be "here," I'm not is sure.</li> <li>Q That's next to Dr. Zahrawi's name, right?</li> <li>A Yes.</li> <li>Q Next to Dr. Zahrawi's name, right?</li> <li>A Yes.</li> <li>Q Next to Dr. Zahrawi's name in the margin is the word agree?</li> <li>Page 78</li> <li>MS. VADAS: Objection.</li> <li>Page 78</li> <li>MS. VADAS: Objection.</li> <li>Q A Sure.</li> <li>Q As sure.</li> <li>Q As in the past we would refer to the stick figure for your objective findings?</li> <li>A Sure.</li> <li>Q How about under your plan?</li> <li>A Sure.</li> <li>Q How about under your plan?</li> <li>A Hand films with Brewerton views, rheumatoid a the top of chart, it looks like a nurse?</li> <li>A I ti s.</li> <li>Q Whose name is that?</li> <li>Q Lose that indicate the nurse 's signature?</li> <li>A That is correct.</li> <li>Q Does that indicate the nurse wrote this note?</li> <li>A Yes.</li> <li>Q Does that indicate the nurse wrote this note?</li> <li>A Yes.</li> <li>Q Does that indicate the nurse wrote this note?</li> <li>A Yes.</li> <li>Q Do you have an independent recollection of whether you saw Miss Myers on this day?</li> <li>A I did.</li> <li>A Because I have a handwritten note. She just wrote it, probably when we were done with the patient the subscussed in the question.</li> <li>A Because I have a handwritten note. She just wrote it, probably when we were done with the patient the subscussed in the sust?</li> <li>A Because I have a handwritten note. She just wrote it, probably when we were done with the patient the subscussion with Ruth 16</li> <li>M Because I have a handwritten note. She just wrote it, probably when we were done with the patient the subscussion with Ruth 16</li> <li>A Because I have a talking about 5-29-98?</li> <li>Q Yes, we are.</li> <li>Q Couldn't read it for a minute and then I readi it.</li> <li>A Breake I have a infort a minute and then I readi it.</li> <li>A Breake I have a talk and throscopic surgery.</li> <li>A Chave a documented a di</li></ul>	7	Coverage here for insurance, is that what	7	0	Would it be fair to characterize the sublux a
<ul> <li>MS. VADAS: Objection.</li> <li>A Coverage for insurance, it could be "here," I'm not sure.</li> <li>Q That's next to Dr. Zahrawi's name, right?</li> <li>A Yes.</li> <li>Q Next to Dr. Zahrawi's name in the margin is the word a gree?</li> <li>Q Next to Dr. Zahrawi's name in the margin is the word at the top. Cabravi's name in the margin is the word at the top of chart, it looks like a nurse?</li> <li>A Sure.</li> <li>Q As in the past we would refer to the stick figure for your objective findings?</li> <li>A Sure.</li> <li>Q As in the past we would refer to the stick figure for your objective findings?</li> <li>A Sure.</li> <li>Q How about under your plan?</li> <li>A Sure.</li> <li>Q How about under your plan?</li> <li>A Hand films with Brewerton views, rheumatoid a discussion about surgery.</li> <li>Q As the bottom of the chart it says okay per Bishko, and then there is the nurse's signature?</li> <li>A That is correct.</li> <li>Q Does that indicate the nurse wrote this note?</li> <li>A Yes.</li> <li>Q Does that indicate the nurse wrote this note?</li> <li>A Yes.</li> <li>Q Dos us have an independent recollection of whether you saw Miss Myers on this day?</li> <li>A I did.</li> <li>A Because I have a handwritten note. She just wrote it, probably when we were done with the patient the subscussion with Ruth Because I have a handwritten note. She just wrote it, probably when we were done with the patient the subscussion sub surgers.</li> <li>Q Yes, we are.</li> <li>Q Yes, we are.</li> <li>Q Yes, we are.</li> <li>Q Yes, we are.</li> <li>Q This is your writing?</li> </ul>	8	that says, Doctor?	8	•	partial dislocation at the joint?
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5 A Not at the bottom it's not, it's Miss Farmiloe's. 25 Myers before those surgeries?	3 Q 4 A 5 Q 6 7 A 8 Q 9 A 0 Q 1 2 A 3 Q 4 A 5 Q 6 7 A 8 Q 9 A 00 1 2 Q 3 A	Is it not next to Dr. Zahrawi's name? Sure, sure, sure. 5-29-98, Doctor, first, 1 see an individual's name at the top of chart, it looks like a nurse? It is. Whose name is that? J. Farmiole. At the bottom of the chart it says okay per Bishko, and then there is the nurse's signature? That is correct. Does that indicate the nurse wrote this note? Yes. Do you have <b>an</b> independent recollection of whether you saw Miss Myers on this day? I did. You did? Because I have a handwritten note. She just wrote it, probably when we were done with the patient encounter. We are talking about 5-29-98? Yes, we are. I couldn't read it for a minute and then I read it. This is your writing?	3 4 5 6 7 8 9 0 1 2 3 14 15 16 7 8 19 20 21 22 3	A Q A Q A Q A Q A Q A Q A Q A Q A	for your objective findings? Yes. How about under your plan? Hand films with Brewerton views, rheumatoid arthritis. 30 minute physical, to GYN, minocin discussed. 15 minute discussion about surgery. As you sit here today, Doctor, do you have an independent recollection of what you discussed? I do not. Doctor, during the 15 minute I Let me finish the question. During that 15 minute discussion with Ruth Myers regarding her surgery, do you have any recollection at all of that? None at all. Is it fair to say Ruth Myers had prior surgeries before this 5-29-98 visit? On her knuckles I believe. Surgery on her knee? She had arthroscopic surgery. Have you ever documented a discussion with Ruth

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#### Multi-Page<sup>TM</sup> Depo of Frederic Bishko, M.D. Ruth Myers -v- Faissal Zahrawi, M.D. et al

	Page 81 Page 81	1	Page 83 side of the 5-29-98 note?
	• •		
	Doctor, what are the symptoms of a subluxoma?		Well, except starting the Minocycline.
	ymptoms, probably pain or limitation of motion.		Anything else?
•	bid Miss Vadas talk to you about this note?		Not on the physician side.
5 A N		5 (	
	Ooctor, let's go back to your objective findings on	6	to say Miss Myers is on Plaquenil or Prednisone
	ne stick figure. Next to the stick figure, the		No.
	ght wrist, what is written there?	8 (	1 5 5
	ubluxoma.	9	out?
x	who wrote that?		Right, because the patient often filled it out the
	ſe.	11	nurse may or may not have put it down.
· ·	hat is an objective finding, correct, Doctor?	12 (	- 1
	is.	13	physician side of this chart; am I right?
	hat subluxoma would be a partial dislocation, most	<b>14</b> A	5
15 co	ommonly associated with pain and loss of function?	15 🤇	
16	MS. VADAS: Objection.	16 A	
	's a subluxoma, it doesn't portend, other than	17 (	
	's an objective finding.	18	form is used to monitor whether the patient's
	ou identified two of the symptoms of a subluxoma as	19	symptoms are getting better or worse?
	ain and loss of range of motion, correct, Doctor?	<b>20</b> A	
21 A Y	es.	21 (	- 5 5
	you have loss of range of motion you would	22 A	Yes.
	robably have loss of function as well, correct,	23 (	When is your next contact with Ruth Myers, Doctor?
24 D	Ooctor?	24 A	September 11th of '98.
25	MS. VADAS: Objection.	25 (	2 Can you read what you have entered into this chart
	Page 82		Page 84
1 A Y	÷	1	on that date?
2Q Is	s it not fair to say loss of range of motion goes	2 A	
	and-in-hand with loss of function?	3 (	
4	MS. VADAS: Objection.		I'm down under Miss Farmiloe's signature.
5 A N	lot necessarily.		Let's stop for a second. Whose writing is that at
	xplain to me why.	6	the top?
	ay in the elbow, what you real really need in the	<b>7</b> A	Probably Miss Farmiloe's, it looks like her
1	bow is this ability to flex the elbow to get it up	8	handwriting.
	your mouth to do things.	9 (	6
10	If you couldn't completely straighten the	10	the information that is contained in Miss Farmiloe's
	bow all the way out, it may not be a lot of	11	writing?
	inctional importance because there is not a lot of		-
1	nings one does in everyday life to necessitate	13	attest to is what I wrote down.
	omplete straightening of the elbow, whereas if you	14 (	
	ost a few degrees of flexion that could be a major	15 A	
	roblem. Does that explain it?	16	decreased Predisone to 1 milligram and had a flare
-	want to be fair. If you need to explain it	17	of her arthritis and patient increased Prednisone to
	urther, I want to give you the ability to do that,	18	5 milligrams again. Patient upset re surgery and
	his isn't like a game.	10	thinks that wrong procedure done. She is depressed.
	lkay.	20	Eye check scheduled. Do you want me to continue?
	s it fair for me to assume that on 5-29-98 you	20	
· ·	bjectively diagnosed Miss Myers with a subluxoma on	22	120 over 80?
UU	er right wrist?	23 A	
23 he	-		
23 he 24 A Y	Ves. s there any medications listed on the physician	24 ( 25	

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		<u> </u>		Ruth Myers -v- Faissal Zanrawi. M.D. et al
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1 A	That's where we are going.	1		right hand she had no pain, no swelling, no warmth,
2 Q	Your objective findings are once again contained in	2		no tenderness and no
3	the stick figure?	3	А	Erythema.
4 A	That is correct.	4	Q	erythema?
5 Q	Is there a single mark on her right upper extremity?	1	À	Yes.
6 A		6	Q	On the questionnaire, Doctor, on that day, do you
7 Q	Are there marks on her left upper extremity?	7	`	note what Miss Myers has checked with regard to her
8 A		8		response to question 3?
-	On her left hand?		A	"I can do most of the things I want to do, but I
10 A	Yes.	10		have some limitations."
11 Q	Doctor, objectively, the fact there are no marks on	11	0	When is your next visit with Miss Myers?
112	the right hand would indicate that Miss Myers was		A	
113	not suffering from pain, am I correct?	1	0	Is there any indication in that record that Miss
113 114 A	Yes.	113	Q	Myers is complaining of pain or loss of range of
	Was not suffering from swelling, correct?	15		motion or loss of function or any problem with her
15 Q	Yes.	110		wrist?
1				No.
17 Q	That her right hand was not warm, correct? Yes.		A	
1			Q	There is no pain?
19 Q	That she did not have tenderness, correct?			
20 A	Yes.	20	Q	No swelling, no warmth, no tenderness and no
21 Q	How about ery I can't pronounce that.	21		erythema?
	Erythema.		A	
-	Did she have that?		Q	Do you know what she has responded in her answer to
24 A		24		question number 3 in her questionnaire on 5-20-99?
25 Q	She didn't fill anything out on the questionnaire	25	A	Same as the last visit.
	Page 86			Page 88
1	that day, did she, Doctor?	1	Q	When is the next time you saw her, Doctor?
2 A	That is correct.	2	А	It would appear 3-28-00.
3 Q	When is the next time you saw Miss Myers, Doctor?	3	Q	Are there any objective findings? I see in this
4 A	January 22 of '99.	4		note you have objective findings written out as
5 Q	Can you read what you entered into the chart?	5		
	Can you read what you entered into the chart.	5		opposed to using the stick figure, correct?
6 A	I can. RA SP, status post, surgery Dr. Zahrawi.		A	
6 A 7	• •	6		opposed to using the stick figure, correct?
	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is	6		opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe
7	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second	6 7 8		opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe her right wrist?
7 8	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is	6 7 8 9	Q	opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe her right wrist?
7 8 9	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check.	6 7 8 9	Q A Q	opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe her right wrist? Limitation of motion right wrist.
7 8 9 10	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left	6 7 8 9 10 11	Q A Q A	opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe her right wrist? Limitation of motion right wrist. Anything else? I don't know. It says with extensor tenosynovitis.
7 8 9 10 11	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint	6 7 8 9 10 11	Q A Q A Q	opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe her right wrist? Limitation of motion right wrist. Anything else?
7 8 9 10 11 12 13	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint tenderness, swelling. Doing well.	6 7 8 9 10 11 12 13	Q A Q A Q A	opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe her right wrist? Limitation of motion right wrist. Anything else? I don't know. It says with extensor tenosynovitis. You wrote that note? I did.
7 8 9 10 11 12 13 14 Q	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint tenderness, swelling. Doing well. Let's go down to that stick figure again, Doctor,	6 7 8 9 10 11 12 13	Q A Q A Q A Q Q	opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe her right wrist? Limitation of motion right wrist. Anything else? I don't know. It says with extensor tenosynovitis. You wrote that note? I did. Do you know what her response to question <b>3</b> was on
7 8 9 10 11 12 13 14 2 15	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint tenderness, swelling. Doing well. Let's go down to that stick figure again, Doctor, that is where well, you have a note under your	6 7 8 9 10 11 12 13 14 15	Q A Q A Q A Q	opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe her right wrist? Limitation of motion right wrist. Anything else? I don't know. It says with extensor tenosynovitis. You wrote that note? I did. Do you know what her response to question <b>3</b> was on the subjective questionnaire?
7 8 9 10 11 12 13 14 2 15 16	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint tenderness, swelling. Doing well. Let's go down to that stick figure again, Doctor, that is where well, you have a note under your objective findings. You have some writing on this	6 7 8 9 10 11 12 13 14 15 16	Q A Q A Q A Q A	opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe her right wrist? Limitation of motion right wrist. Anything else? I don't know. It says with extensor tenosynovitis. You wrote that note? I did. Do you know what her response to question <b>3</b> was on the subjective questionnaire? Same as before.
7 8 9 10 11 12 13 14 Q 15 16 17	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint tenderness, swelling. Doing well. Let's go down to that stick figure again, Doctor, that is where well, you have a note under your objective findings. You have some writing on this note?	6 7 8 9 10 11 12 13 14 15 16 17	Q A Q A Q A Q	opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe her right wrist? Limitation of motion right wrist. Anything else? I don't know. It says with extensor tenosynovitis. You wrote that note? I did. Do you know what her response to question <b>3</b> was on the subjective questionnaire? Same as before. "I can do most of the things I want to do, but I
7 8 9 10 11 12 13 14 Q 15 16 17 18 A	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint tenderness, swelling. Doing well. Let's go down to that stick figure again, Doctor, that is where well, you have a note under your objective findings. You have some writing on this note? Right.	6 7 8 9 10 11 12 13 14 15 16 17 18	Q A Q A Q A Q A Q A Q	opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe her right wrist? Limitation of motion right wrist. Anything else? I don't know. It says with extensor tenosynovitis. You wrote that note? I did. Do you know what her response to question <b>3</b> was on the subjective questionnaire? Same as before. "I can do most of the things I want to do, but I have some limitations"?
7 8 9 10 11 12 13 14 Q 15 16 17 18 A 19 Q	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint tenderness, swelling. Doing well. Let's go down to that stick figure again, Doctor, that is where well, you have a note under your objective findings. You have some writing on this note? Right. You just read that to me?	6 7 8 9 10 11 12 13 14 15 16 17 18 19	Q A Q A Q A Q A Q A Q A	opposed to using the stick figure, correct? Yes. These objective findings, do any of them describe her right wrist? Limitation of motion right wrist. Anything else? I don't know. It says with extensor tenosynovitis. You wrote that note? I did. Do you know what her response to question <b>3</b> was on the subjective questionnaire? Same as before. "I can do most of the things I want to do, but I have some limitations"? Correct.
7 8 9 10 11 12 13 14 Q 15 16 17 18 A 19 Q 20 A	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint tenderness, swelling. Doing well. Let's go down to that stick figure again, Doctor, that is where well, you have a note under your objective findings. You have some writing on this note? Right. You just read that to me? I did.	6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	Q A Q A Q A Q A Q A Q A Q A Q	<ul> <li>opposed to using the stick figure, correct?</li> <li>Yes.</li> <li>These objective findings, do any of them describe her right wrist?</li> <li>Limitation of motion right wrist.</li> <li>Anything else?</li> <li>I don't know. It says with extensor tenosynovitis.</li> <li>You wrote that note?</li> <li>I did.</li> <li>Do you know what her response to question 3 was on the subjective questionnaire?</li> <li>Same as before.</li> <li>"I can do most of the things I want to do, but I have some limitations"?</li> <li>Correct.</li> <li>When was your next visit with her, Doctor?</li> </ul>
7 8 9 10 11 12 13 14 Q 15 16 17 18 A 19 Q 20 A 21 Q	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint tenderness, swelling. Doing well. Let's go down to that stick figure again, Doctor, that is where well, you have a note under your objective findings. You have some writing on this note? Right. You just read that to me? I did. Did you use the stick figure at all for your	6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	Q A Q A Q A Q A Q A Q A Q A	<ul> <li>opposed to using the stick figure, correct?</li> <li>Yes.</li> <li>These objective findings, do any of them describe her right wrist?</li> <li>Limitation of motion right wrist.</li> <li>Anything else?</li> <li>I don't know. It says with extensor tenosynovitis.</li> <li>You wrote that note?</li> <li>I did.</li> <li>Do you know what her response to question 3 was on the subjective questionnaire?</li> <li>Same as before.</li> <li>"I can do most of the things I want to do, but I have some limitations"?</li> <li>Correct.</li> <li>When was your next visit with her, Doctor?</li> <li>1-23-01.</li> </ul>
7 8 9 10 11 12 13 14 Q 15 16 17 18 A 19 Q 20 A 21 Q	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint tenderness, swelling. Doing well. Let's go down to that stick figure again, Doctor, that is where well, you have a note under your objective findings. You have some writing on this note? Right. You just read that to me? I did. Did you use the stick figure at all for your objective finding?	6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	Q A Q A Q A Q A Q A Q A Q A Q	<ul> <li>opposed to using the stick figure, correct?</li> <li>Yes.</li> <li>These objective findings, do any of them describe her right wrist?</li> <li>Limitation of motion right wrist.</li> <li>Anything else?</li> <li>I don't know. It says with extensor tenosynovitis.</li> <li>You wrote that note?</li> <li>I did.</li> <li>Do you know what her response to question 3 was on the subjective questionnaire?</li> <li>Same as before.</li> <li>"I can do most of the things I want to do, but I have some limitations"?</li> <li>Correct.</li> <li>When was your next visit with her, Doctor?</li> <li>1-23-01.</li> <li>In your objective findings is there any reference to</li> </ul>
7 8 9 10 11 12 13 14 Q 15 16 17 18 A 19 Q 20 A 21 Q 22 A	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint tenderness, swelling. Doing well. Let's go down to that stick figure again, Doctor, that is where well, you have a note under your objective findings. You have some writing on this note? Right. You just read that to me? I did. Did you use the stick figure at all for your objective finding? I didn't. I wrote no other joint tenderness,	6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	Q A Q A Q A Q A Q A Q A Q A Q	<ul> <li>opposed to using the stick figure, correct?</li> <li>Yes.</li> <li>These objective findings, do any of them describe her right wrist?</li> <li>Limitation of motion right wrist.</li> <li>Anything else?</li> <li>I don't know. It says with extensor tenosynovitis.</li> <li>You wrote that note?</li> <li>I did.</li> <li>Do you know what her response to question 3 was on the subjective questionnaire?</li> <li>Same as before.</li> <li>"I can do most of the things I want to do, but I have some limitations"?</li> <li>Correct.</li> <li>When was your next visit with her, Doctor?</li> <li>1-23-01.</li> <li>In your objective findings is there any reference to problems in Miss Myers' right knee or right wrist?</li> </ul>
7 8 9 10 11 12 13 14 Q 15 16 17 18 A 19 Q 20 A 21 Q 22 3 A 24	I can. RA SP, status post, surgery Dr. Zahrawi. Under subjective, patient upset with result, is tapering off Prednisone. Says she had second opinion saying she did not need surgery. RA is otherwise stable. Eye check. Objective, blood pressure 110/70. Left second finger tendon sheath nodule, no other joint tenderness, swelling. Doing well. Let's go down to that stick figure again, Doctor, that is where well, you have a note under your objective findings. You have some writing on this note? Right. You just read that to me? I did. Did you use the stick figure at all for your objective finding?	6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	Q A Q A Q A Q A Q A Q A Q A Q A Q A Q A	<ul> <li>opposed to using the stick figure, correct?</li> <li>Yes.</li> <li>These objective findings, do any of them describe her right wrist?</li> <li>Limitation of motion right wrist.</li> <li>Anything else?</li> <li>I don't know. It says with extensor tenosynovitis.</li> <li>You wrote that note?</li> <li>I did.</li> <li>Do you know what her response to question 3 was on the subjective questionnaire?</li> <li>Same as before.</li> <li>"I can do most of the things I want to do, but I have some limitations"?</li> <li>Correct.</li> <li>When was your next visit with her, Doctor?</li> <li>1-23-01.</li> <li>In your objective findings is there any reference to</li> </ul>

#### Depo of Frederic Bishko, M.D. Ruth Myers -v- Faissal Zahrawi, M.D. et al Multi-Page<sup>™</sup>

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1	right wrist, and by "problems," by your use of the	1 A	5 8
2	word, would that encompass pain, swelling,	2 Q	Take your time.
3	tenderness, warmth, and erythema?	3 A	No reference.
4 A	Problems would be anything she complained about. I	4 Q	This is important, Doctor, can you go to the
5	can't imagine a patient would say 1 have swelling	5	correspondence section of your file?
6	tenderness, erythema and warmth in my right wrist,	6	I don't have the records. Do you mind if I
7	so it would be something that bothered them.	7	look over your shoulder? I am going to identify
8 Q	It would be reasonable for them to say they had	8	these for the record as part of Defendants' Exhibit
9	problems, wouldn't it, Doctor?	9	1.
0	MS. VADAS: Objection.	10	I see a letter of June 8, '88 enclosing
1 A	That would be reasonable.	11	medical reports from Dr. Howard Tucker and from
2 Q	Do you see what Miss Myers' response was on response	12	Malcolm Brahms to a lawyer; is that correct, Doctor?
3	to number 3 on the questionnaire?	13 A	That is Mr. Henderson, a lawyer.
4 A	The same as before. I can do most of the things, et	14 Q	What does that say on the letterhead, Shane & Shane,
5	cetera.	15	Attorneys at law?
	Doctor, did you see her on 5-7-2001 or is it Dr.		That's what it says.
7	Roter?	17 Q	So you received medical reports from Dr. Howard
8 A	It's Dr. Roter.	18	Tucker from the plaintiff's lawyer?
9 Q	Do you see any reference to right wrist problems as	19 A	Dr. Nemunaitis did, I assume. I am not sure. I
0	we have been using the term in this deposition?	20	wasn't in the picture then.
	At that point in time you mean?	21 Q	This would be part of the Mednet chart?
2 Q	At that point in time, correct. You are looking a	22 A	Yes, if there was a GYN consult or an eye consult or
3	the written note. You have the written note?	23 I	whatever it would be in the chart.
-	I do.	24 Q	But, Doctor, in making decisions regarding the
5 0	Do you see any evidence of right wrist problems:	24 Q 25	treatment of this patient, you would refer to the
	Do you see any evidence of fight wrist problems.		treatment of this patient, you would refer to the
	Page 90		Page 92
1 A	No.	1	records in the Mednet chart that had been there
1 A 2 Q	No. The typewritten note from Dr. Roter, do you have twc	2	records in the Mednet chart that had been there prior to you treating her?
1 A	No. The typewritten note from Dr. Roter, do you have two pages of that? I only have one page. I have the		records in the Mednet chart that had been there prior to you treating her? If it was germane, yes.
1 A 2 Q	No. The typewritten note from Dr. Roter, do you have two pages of that? I only have one page. I have the A/P portion. I don't have the top part.	2 3 A 4 Q	records in the Mednet chart that had been there prior to you treating her? If it was germane, yes. The Mednet chart contains a report of June 6, 1998
1 A 2 Q 3	No. The typewritten note from Dr. Roter, do you have two pages of that? I only have one page. I have the A/P portion. I don't have the top part. MS. VADAS: Do you have a sticky? I	2 3 A 4 Q 5	records in the Mednet chart that had been there prior to you treating her? If it was germane, yes. The Mednet chart contains a report of June 6, 1998 authored by Howard Tucker?
1 A 2 Q 3 4 5 6	No. The typewritten note from Dr. Roter, do you have two pages of that? I only have one page. I have the A/P portion. I don't have the top part. MS. VADAS: Do you have a sticky? I will send it to you.	2 3 A 4 Q 5	records in the Mednet chart that had been there prior to you treating her? If it was germane, yes. The Mednet chart contains a report of June 6, 1998
1 A 2 Q 3 4 5	No. The typewritten note from Dr. Roter, do you have twc pages of that? I only have one page. I have the A/P portion. I don't have the top part. MS. VADAS: Do you have a sticky? I will send it to you. MR. KRAUSE: I would like a copy of	2 3 A 4 Q 5 6 A 7 Q	records in the Mednet chart that had been there prior to you treating her? If it was germane, yes. The Mednet chart contains a report of June 6, 1998 authored by Howard Tucker? Yes. Do you know Dr. Tucker?
1 A 2 Q 3 4 5 6	No. The typewritten note from Dr. Roter, do you have two pages of that? I only have one page. I have the A/P portion. I don't have the top part. MS. VADAS: Do you have a sticky? I will send it to you. MR. KRAUSE: I would like a copy of that.	2 3 A 4 Q 5 6 A 7 Q	records in the Mednet chart that had been there prior to you treating her? If it was germane, yes. The Mednet chart contains a report of June 6, 1998 authored by Howard Tucker? Yes.
1 A 2 Q 3 4 5 6 7	No. The typewritten note from Dr. Roter, do you have two pages of that? I only have one page. I have the A/P portion. I don't have the top part. MS. VADAS: Do you have a sticky? I will send it to you. MR. KRAUSE: I would like a copy of that. Is there any description of right wrist pain that is	2 3 A 4 Q 5 6 A 7 Q 8 A	records in the Mednet chart that had been there prior to you treating her? If it was germane, yes. The Mednet chart contains a report of June 6, 1998 authored by Howard Tucker? Yes. Do you know Dr. Tucker?
1 A 2 Q 3 4 5 6 7 8 9 Q 0	No. The typewritten note from Dr. Roter, do you have twc pages of that? I only have one page. I have the A/P portion. I don't have the top part. MS. VADAS: Do you have a sticky? I will send it to you. MR. KRAUSE: I would like a copy of that. Is there any description of right wrist pain that is subjective or objective in that typewritten note?	2 3 A 4 Q 5 6 A 7 Q 8 A 9 Q 0	records in the Mednet chart that had been there prior to you treating her? If it was germane, yes. The Mednet chart contains a report of June 6, 1998 authored by Howard Tucker? Yes. Do you know Dr. Tucker? Ido. It also contains a bill from Dr. Tucker, does it not?
1 A 2 Q 3 4 5 6 7 8 9 Q	No. The typewritten note from Dr. Roter, do you have twc pages of that? I only have one page. I have the A/P portion. I don't have the top part. MS. VADAS: Do you have a sticky? I will send it to you. MR. KRAUSE: I would like a copy of that. Is there any description of right wrist pain that is subjective or objective in that typewritten note? No.	2 3 A 4 Q 5 6 A 7 Q 8 A 9 Q 0	records in the Mednet chart that had been there prior to you treating her? If it was germane, yes. The Mednet chart contains a report of June 6, 1998 authored by Howard Tucker? Yes. Do you know Dr. Tucker? Ido. It also contains a bill from Dr. Tucker, does it not? Yes.
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1 A 2 Q 3 4 5 6 7 8 9 Q 0 1 A 2 Q 3 4 A 5 Q 6 7 A 8 Q 9 0 A 1 2	No. The typewritten note from Dr. Roter, do you have twc pages of that? I only have one page. I have the A/P portion. I don't have the top part. MS. VADAS: Do you have a sticky? I will send it to you. MR. KRAUSE: I would like a copy of that. Is there any description of right wrist pain that is subjective or objective in that typewritten note? No. 7-19-01, Doctor, is this an appointment where you saw Miss Myers? That is correct, Next to the objective findings you only have the BP written; is that correct? No. I'm sorry. Sorry, I didn't mean to do that. Read for me your objective findings from the visit. Blood pressure 100/70. Right knee popliteal cyst and cyst laterally. Good quads, knee not tender and nothing else going on essentially in the other	2 3 A 4 Q 5 6 A 7 Q 8 A 9 Q 0 1 A 2 Q 3 4 A 5 Q 6 7 A 8 Q 9 A 20 Q 21 A 22 Q 23	records in the Mednet chart that had been there prior to you treating her? If it was germane, yes. The Mednet chart contains a report of June 6, 1998 authored by Howard Tucker? Yes. Do you know Dr. Tucker? Ido. It also contains a bill from Dr. Tucker, does it not? Yes. <b>\$525?</b> MS. VADAS: Objection. Yes. It also contains a letter of May 6, 1988 to Michael Djordjevic at Jacobson, Maynard, Tuschman & Kalur? Yes. That is signed by Dr. Brahms, is it not? Yes. Have you ever read this letter before, Doctor? I don't know that I have. I have a letter, I think it looks like another

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#### **Multi-Page**<sup>™</sup> Depo of Frederic Bishko, M.D. Ruth Myers -v- Faissal Zahrawi, M.D. et al

						Ruth Myers -v- Faissal Zahrawi, M.D. et al
			Page 93			Page 95
	1	Q	Now, I have a letter authored by Ruth Myers,		Q	That was to Dr. Park, correct?
	2	-	correct, Doctor?	2	А	That is correct.
	3	А	Yes.	3	0	Dr. Park treated Miss Myers for the rheumatoid
	4	Q	There is no date that I can see on it. Can you see	1	×	arthritis?
	5		a date on that?		А	That's correct.
	6	А	No, sir.	6	Q	This letter of May 14, 1987 is signed from?
	7	Q	Doctor, would you read for me, it's about five		À	
	8	•	paragraphs down, read the sentence that Miss Myers	8		patient.
1999 1997	9		wrote.		Q	Does it say anything about rheumatoid arthritis in
	10		MS. VADAS: Objection.	10	Ľ	there?
	11	А	"I realize that some day my wrists, hands, and	11	А	I am pleased to report that the Westergren
	12		fingers will be so bad that I probably will not be	12		sedimentation rate obtained on April 27, 1987 were
~~.	13		able to work at all."	13		normal. Please, continue the Clinoril 200
340). 19		Q	And this sentence at the end of this page.	14		milligrams per day. The normal Westergren
	15		"But even a person without the pain and limited	15		sedimentation rate suggests to me that some of your
	16		ability of rheumatoid would find it difficult to do	16		pain is due to muscular stiffness and poor sleep
2	17		what he is expecting of me."	17		called fibrositis.
	18	0	Doctor, what does this sentence say right here?	18	0	Is there anything else in there related to
2 2	19	×	MS. VADAS: Objection.	19	×	rheumatoid arthritis?
		A	Can we go off the record? Do you want me to go		Δ	No.
	21		through all this stuff?	21	11	THE WITNESS: I have patients coming
	22		MR. KRAUSE: Off the record.	22		in, and if there are patients out there I want to be
	23		(Discussion off the record.)	23		able to have my nurse give them a reliable
	-	Bv	Mr. Krause:	23		indication of how long they are going to have to
		•	Can you read this sentence for me, Doctor?	25		wait. How long do you think it would be?
635 116-11-1	25	Q			·····	
			Page 94	I .		Page 96
	1		MS. VADAS: Objection.	1		MR. KRAUSE: We can go off the
		A	In addition to this, could you please let me know if	2		record.
	3		there is any other medication that will reduce the	3		(Discussion off the record.)
	4	_	pain and stiffness in my wrists. Forget Tylenol		р	MR. KRAUSE: Back on the record.
			Keep going.		•	Mr. Krause:
		А	it is useless, and the Ibuprofen makes me swell		Q	I see a letter from the Cleveland Clinic to Ruth
	7		all over. I would even consider surgery to remove	7		Trexler, that was her name before it went to Myers.
	8		the garbage in the affected area that is left by the	-	A	I understand.
	9		rheumatoid. The inability to move my hands that			It's the same Ruth Myers' chart?
	10		used to get better in a few hours now can last all	1		I understand, I'm assuming that's correct.
	11		day and sometimes several days, depending on	11	-	September 29, 1986 is the date of that letter?
	12		weather, stress, and activity.	12		Yes.
1	13	0	Do you want me to continue?	13	Q	It appears to discuss rheumatoid arthritis. Doctor,
		Q	Yes.	14		can you just verify for me that that letter is
		A	This probably sounds overreacting	15		germane to Miss Myers' rheumatoid arthritis
		Q	Read the rest of that letter.	16		condition?
	17		MS. VADAS: Objection.	17		Yes.
	18	A	to you or to someone who has arthritis in the	18	~	That's a letter from Dr. Wilke?
	19		larger joints, but without the use of your hands		A	Yes.
	20		life is getting to be virtually impossible. The	20	~	That's GYN.
	21		pain alone lasts so long it makes your entire	1	Q	There is also a letter from February 3rd, 1988 from
	22		feeling miserable, and I know that the arthritis is in much price much the $C_{1,2}$ such that $C_{1,2}$ such that $C_{1,2}$ is the second se	22		Dr. Nemunaitis to an attorney Louis G. Henderson,
	23		in my spine, mostly the C- $5/6$ and 7 vertebrae. I	Į.		remember we ran into his name earlier, and that
	24		wake up with a stiff neck five days out of seven.	24		letter is dated February <b>3</b> of 1988, correct?
-	25		Thanks again, Ruth.	25	A	Yes.

#### Multi-Page<sup>TM</sup> Depo of Frederic Bishko, M.D. Ruth Myers -v- Faissal Zahrawi, M.D. et al ſ

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		Page 9'		Page 99
1	Q	This is a letter from Mr. Henderson to Dr.	1	arthritis?
2	2	Nemunaitis, January 27th of 1988?	2 A	Yes.
3	3	MS. VADAS: Objection.	3 Q	I have a letter to you, Doctor, with a questionnaire
4	4 Q	Correct?	4	from a federal agency, the Social Security agency
5	5 A	Yes.	5	regarding a disability claim for Miss Myers; is that
6	5 Q	Is it not a letter?	6	correct?
7	7 A	Yes. I said yes.	7 A	Yes.
8	3 Q	Here is a letter to Michael Shane from Dr.	8 Q	I'm reading the second sentence. The disability is
9	Ð	Nemunaitis, dated April 23rd, 1986, correct?	9	alleged due to rheumatoid arthritis and depressioi
10	) A	Yes.	10	with an onset of 5-1-94?
11	Q	The authorization is signed by Ruth Trexler allowing	11 A	Yes.
12	2	the law firm of Shane & Shane to get her medica	12 Q	Do you have any recollection
13	3	records?	13 A	I do not.
14	4 A	Yes.	14 Q	of filling out any questionnaires or responding
15	5 Q	Here is a letter from Dr. Lee to Howard Bernstein	15	to any requests relative to that disability claim?
16	5	that is dated November 15th, 1976; is that correct?	16 A	That wasn't filled out.
17	7 A	Yes.	17 Q	It includes a form, but it appears nothing else wa
18	3 Q	There is a letter from Michael Shane to Dr.	18	filled out on it, correct?
19	9	Nemunaitis dated March 18th, 1986?	19 A	Correct.
20	) A	Yes.	20 Q	There is an authorization signed by Ruth Myers dated
21	Q	There is a letter from Howard Bernstein to Dr. Lee	21	7-22-94 with your name at the top, your name is
22	2	dated October 28th, 1976?	22	written at the top, I'm not saying you wrote it,
23	8 A	Yes.	23	signed by Ruth Myers giving authorization for Social
24	4 Q	There is a letter from Howard Berstein to the	24	Security to obtain your medical records?
25	5	Records Room at the Euclid Clinic that is dated	25 A	Yes.
		Page 91		Page 100
1	1	October 28, 1976?	1 Q	Here is another letter from the Bureau of Disability
2	2 A	Yes.	2	regarding the disability claim Miss Myers was
3	3 Q	There is an accident report, an Ohio traffic	3	filing; is that correct?
4	-	accident report in here, isn't there, Doctor?	4 A	Yes.
5	5 A	If that's what it is, I will accept that.	5 Q	That letter is dated July 26, 1994, correct?
6	5 Q	The report number is 120985-977; is that correct	6 A	Yes.
7	7	Doctor?	7 Q	It requests all your medical records?
8	3 A	Yes.	S A	Yes.
9	) Q	That is several pages long?	9 Q	There is another letter dated actually, it might
lC	) A	It is.	10	be a copy, July 26, 1994?
1	Q	There is another request for records, I can't ever	11 A	Yes.
2	2	read that, the affidavit for the hospital report in	12 Q	I think it was the same.
3	3	there, Doctor?	13	This form is actually filled out, Doctor?
4	↓ A	Okay.	14 A	Yes, for depression.
5	5 Q	October 8th of 1976; is that correct?	15 Q	For depression, right. This is a mental impairment
6	5 A	Yes.	16	form.
17	' Q	There is a letter to Miss Myers dated April 22nd	17 A	That's not my handwriting.
8	3	1994 from Dr. Kosnosky; is that correct?	18 Q	I understand that, Doctor. I'm not contending that
9	A	Yes.	19	it is. What is this note, Doctor, is this just a
20	) Q	It asks Miss Myers to use this letter as a reference	20	record of all her appointments?
21		point for making an appointment with Dr. Bishko whe	21 A	It would appear that's what it is.
1:2	2	is a rheumatologist?	22 Q	All right, Doctor. Do you have any recollection
13	8 A		23	other than the facts we discussed
24	Q	Does this appear to be a letter to send Miss Myers	24 A	I do not.
1	-			

			Kuin Myers -v- Faissai Zanrawi, M.D. et al
L.	Page 101		Page 103
1	relevant to the issue of her rheumatoid arthritis?	1	I have read the foregoing transcript from page 1
2 A	I do not.	2	through page 102 and note the following corrections:
3 Q	Have you been asked to testify at trial in this	3	
4	matter?	4	PAGE LINE REQUESTED CHANGE
5 A	Yes.	5	
6 Q	You indicated you might not be testifying at trial	6	
7	earlier?	7	
	I said I didn't want to due to the fact that I would	8	
9	have to cancel days of patients, and when I'm only	9	
10	here two days a week and on reasonably short notice	10	
11	it impacts patient care.	11	
12	MR. KRAUSE: Understood, Doctor. I	112	
13	believe that's all I have for you, other than to	113	
14	thank you for your time. I appreciate it.	14	
15	THE WITNESS: Thank you.	15	
16	MS. VADAS: Dr. Bishko	116	
17	MR. KRAUSE: Let me put an objection	117	
18	on the record, Kathy.	118	
19	MS. VADAS: I'm not going to ask him	19	
20	any questions.	20	Frederic Bishko, M.D.
21	MR. KRAUSE: You're not?	21	Subscribed and sworn to before me thisday
22	MS. VADAS: Dr. Bishko, I'm not	22	of,2002.
23	going to ask you any questions at this time. You	23	
24	have to get back to your patients. If we try to	24	Notary Public
25	schedule you for trial and you are unable, would you	25	My commission expires:
			Page 104
1	Page 102	1	State of Ohio,
1	Page 102 be willing to be videotaped for trial?	1	State of Ohio, SS: CERTIFICATE
2	Page 102 be willing to be videotaped for trial? THE WITNESS: Yeah, I guess.	2	State of Ohio,       )         State of Ohio,       )         Ss: CERTIFICATE         County of Cuyahoga.       )
2 3	Page 102 be willing to be videotaped for trial? THE WITNESS: Yeah, I guess. MS. VADAS: I understand. Thank you	1 2 3	State of Ohio,       } SS: CERTIFICATE         County of Cuyahoga.       )         I, Kris Adorjan, Court Reporter and Notary Public in
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Depo of Frederic Bishko,	
Ruth Myers -y- Faissal Zathrawi, M.D. et a	]

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<b>'</b> 86[3]	18:25	36:12	16[1]	2:23		28 [1]	98:1			00.4
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<b>'91</b> [3]	14:6	14:7	<b>17.5</b> <sup>[1]</sup>	61:5		2nd [1]	4:4		69:1	38:25
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'96[2]	60:1 <b>7</b>	60:22	52:3			88:14	89:13	96:24	660 [1] 4:4	4.40
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1-27-95		55:7	2-23 [2]	70:3	70:6	4:00 [1]	38:1		-8-	
1-97[1]	65:12		2-23-98		15:15				8[2] 2:12	91:10
1-98[1]	84:15		15:16 70:16	70:6	70:13		-5-		$-\frac{812}{8-15-94[5]}$	47:23
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February 12,2002

Mr. David Krause Rerninger & Reminger Suite 700 113 St. Clair Building Cleveland, OH 44114

> In re: Ruth Myers -v- Faissal Zahrawi, M.D., et al. Case No. 01 CV 000687

Dear Mr. Krause:

Enclosed please find the corrected transcript pages from the deposition of

Frederic Bishko, M.D., taken in the above-captioned matter. We apologize for any

inconvenience this may have caused you.

Please feel free Io contact us if we can be of any further assistance to you.

Thank you for your courtesies.

Very truly yours,

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	r	
1	A	Not to my knowledge.
2	Q	Doctor, what are the symptoms of a sublux ulna?
3	A	Symptoms, probably pain or limitation of motion.
4	Q	Did Miss Vadas talk to you about this note?
5	A	NO.
6	Q	Doctor, let's go back to your objective findings on
7		the stick figure. Next to the stick figure, the
8		right wrist, what is written there?
9	А	Sublux ulna.
10	Q	Who wrote that?
11	А	Me.
12	Q	That is an objective finding, correct, Doctor?
13	A	It is.
14	Q	That sublux ulna would be a partial dislocation, most
15		commonly associated with pain and loss of function?
16		MS. VADAS: Objection.
17	A	It's a sublux ulna, it doesn't portend, other than
18		it's an objective finding.
19	Q	You identified two of the symptoms of a sublux ulna as
20		pain and loss of range of motion, correct, Doctor?
21	A	Yes.
22	Q	If you have loss of range of motion you would
23		probably have loss of function as well, correct,
24		Doctor?
25		MS. VADAS: Objection.
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1	A	Yes.
2	Q	Is it not fair to say loss of range of motion goes
3		hand-in-hand with loss of function?
4		MS. VADAS: Objection
5	A	Not necessarily.
6	Q	Explain to me why.
7	A	Say in the elbow, what you real really need in the
8		elbow is this ability to flex the elbow to get it up
9		to your mouth to do things.
10		If you couldn't completely straighten the
11		elbow all the way out, it may not be a lot of
12		functional importance because there is not a lot of
13		things one does in everyday life to necessitate
14		complete straightening of the elbow, whereas if you
15		lost a few degrees of flexion that could be a major
16		problem. Does that explain it?
17	3	I want to be fair. If you need to explain it
18		further, I want to give you the ability to do that,
19		this isn't like a game.
20	4	Okay.
21	2	Is it fair for me to assume that on 5-29-98 you
22		objectively diagnosed Miss Myers with a sublux ulna on
23		her right wrist?
24	Ť	Yes.
25	ίĴ	Is there any medications listed on the physician

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