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1 IN THE COURT OF COMMON PLEAS

2 WASHINGTON COUNTY, OHIO

3 - - -

4 MARILYN F. DODD,)

5 Plaintiff,)

6 vs.) CASE NO. 03-PT-24

7 ABDI SEYED GHODSI, M.D.,) JUDGE SUSAN E. BOYER

8 et al.,)

9 Defendants.)

10 - - -

11 Deposition of MICHELLE GRIMM, R.N., a

12 witness herein, called by the Plaintiff for

13 Cross-Examination pursuant to the Ohio Rules of

14 Civil Procedure, taken before me, the

15 undersigned, Anika W. Patrick, a Registered

16 Professional Reporter and Notary Public in and

17 for the State of Ohio, at Marietta Memorial

18 Hospital, 401 Matthew Street, Marietta, Ohio, on

19 Friday, the 24th day of October, 2003,

20 commencing at 9:03 o'clock a.m.

21 - - -

<div>2</div> <div>1 APPEARANCES:</div> <div>2 On Behalf of the Plaintiff:</div> <div>3 BECKER & MISHKIND CO., L.P.A.</div> <div>4 BY: Jacqueline D. Tresl, R.N.</div> <div>5 Attorney at Law</div> <div>6 Skylight Office Tower</div> <div>7 1660 West Second Street, Suite 660</div> <div>8 Cleveland, Ohio 44113</div> <div>9 216/241-2600</div> <div>10 On Behalf of the Defendant Marietta Memorial</div> <div>11 Hospital:</div> <div>12 REMINGER & REMINGER</div> <div>13 BY: Robert V. Kish, Attorney at Law</div> <div>14 Courthouse Square</div> <div>15 505 South High Street</div> <div>16 Columbus, Ohio 43215</div> <div>17 614/461-1311</div> <div>18 On Behalf of the Defendant Abdi Seyed</div> <div>19 Ghodsi, M.D.:</div> <div>20 COLOMBO & STURH CO., L.P.A.</div> <div>21 BY: Karen L. Clouse, Attorney at Law</div> <div>22 933 High Street, Suite 212</div> <div>23 Worthington, Ohio 43085</div> <div>24 614/785-4229</div> <div>25 ---</div>	<div>4</div> <div>1 MICHELLE GRIMM, R.N.,</div> <div>2 of lawful age, a witness herein, having been</div> <div>3 first duly sworn, as hereinafter certified,</div> <div>4 deposed and said as follows:</div> <div>5 CROSS-EXAMINATION</div> <div>6 BY MS. TRESL:</div> <div>7 Q. Michelle, we were introduced earlier, and</div> <div>8 you said that it's okay for me to call you</div> <div>9 Michelle --</div> <div>10 A. Yes.</div> <div>11 Q. -- is that correct? And you may call me</div> <div>12 Jackie, please.</div> <div>13 Have you ever had your deposition taken</div> <div>14 before?</div> <div>15 A. No.</div> <div>16 Q. Okay. I'm just going to tell you a few</div> <div>17 ground rules and then we'll get into the</div> <div>18 questions. As I said, I don't think we'll be</div> <div>19 too long. First of all, you understand that</div> <div>20 you're under oath to tell the truth, yes?</div> <div>21 A. Yes.</div> <div>22 Q. And I ask that you answer my questions if</div> <div>23 they're yes or no questions with "yes" or "no"</div> <div>24 rather than nodding or shaking your head so that</div> <div>25 we have a record. Okay?</div>
<div>3</div> <div>1 INDEX</div> <div>2</div> <div>3</div> <div>4 CROSS-EXAMINATION (By Ms. Tresl) 4</div> <div>5</div> <div>6</div> <div>7</div> <div>8</div> <div>9</div> <div>10</div> <div>11</div> <div>12</div> <div>13</div> <div>14</div> <div>15</div> <div>16</div> <div>17</div> <div>18</div> <div>19</div> <div>20</div> <div>21</div> <div>22</div> <div>23</div> <div>24</div> <div>25</div>	<div>5</div> <div>1 A. Yes.</div> <div>2 Q. If you don't understand my question, will</div> <div>3 you tell me that you don't understand it?</div> <div>4 A. Yes.</div> <div>5 Q. If you answer my question, may I assume</div> <div>6 then that you understand it?</div> <div>7 A. Yes.</div> <div>8 Q. If you need a break, let me know, but as I</div> <div>9 say, it should be fairly short.</div> <div>10 A. All right.</div> <div>11 Q. For the record, would you state your name</div> <div>12 and address, please?</div> <div>13 A. Michelle Grimm. 630 Fourth Street,</div> <div>14 Marietta, Ohio.</div> <div>15 Q. And your profession?</div> <div>16 A. I'm a registered nurse.</div> <div>17 Q. How long have you been a registered nurse?</div> <div>18 A. Twenty-one years.</div> <div>19 Q. Tell me a little bit about what sort of</div> <div>20 school you went to and your employment history</div> <div>21 especially relative to Marietta Memorial.</div> <div>22 A. I graduated from Parkersburg Community</div> <div>23 College in 1982, took my boards the following</div> <div>24 July, and I've been employed by Marietta</div> <div>25 Memorial Hospital since June 1, 1982.</div>

1 Q. And what departments have you worked in?

2 A. Several.

3 Q. Okay.

4 A. I worked on the care unit, the chemical
5 dependency unit initially, and then I worked on
6 a medical surgical floor for probably eight,
7 nine years. And I worked in outpatient surgery
8 on the third floor briefly, got it up and
9 running for the evening shift. Then we opened
10 an observation on that same unit. I kind of did
11 that for a while and then went over to
12 ambulatory surgery. I've been there for three
13 years.

14 Q. And when you say "ambulatory surgery," what
15 is the bulk of your procedures there?

16 A. We do cataract surgery, endoscopies, hernia
17 surgeries, gallbladders, T&As, tonsils and
18 adenoids, lumps and bumps. Just, you know --

19 Q. And is it fair to say you also do
20 vertebroplasties?

21 A. Yes. Well, we did that day. We do
22 neurosurgeries over there. They use our ORs and
23 the recovery.

24 Q. So do you -- and just to understand the way
25 you answered the question, was it unusual that

1 Q. Okay. Let me ask it this way: Do
2 vertebroplasties tend to go to another area to
3 be recovered?

4 A. I don't know.

5 Q. And maybe I'm using the term incorrectly.
6 Does an observation unit -- is it like a
7 recovery room? Is that sort of the --

8 A. Yes.

9 Q. So the patients come right from the
10 procedure room to your unit?

11 A. Yes.

12 Q. And you recover them, and then they either
13 go home or they go to the floor if they're not
14 stable?

15 A. If they're to be admitted, they will go to
16 the floor.

17 Q. Right. So one of the reasons I ask you --
18 and we'll go more into detail in the record.
19 But on your outpatient record note, when it
20 says, "from PACU in stable condition," to me
21 that should have said "to PACU."

22 A. Okay.

23 Q. And that's why I'm sort of floundering here
24 with words.

25 A. That is the secondary recovery phase.

1 you were having a vertebroplasty, or do you do
2 routinely vertebroplasties?

3 A. That was the first one I had ever taken
4 care of.

5 Q. And how many have you taken care of after
6 that?

7 A. None.

8 Q. So that's the only one. Have your
9 colleagues -- how many nurses work that floor
10 during the day, typically?

11 A. Typically, we have five to six in the
12 pre-post area.

13 Q. I'm going to have to get to these terms,
14 too, because I was a little confused. But
15 before we get to that, have there been other
16 vertebroplasties that have been recovered in the
17 observation unit?

18 A. Not that I'm aware of.

19 Q. So as far as you know today, Mrs. Dodd was
20 the only vertebroplasty that's been recovered on
21 the observation unit?

22 A. That's all I am aware of.

23 Q. Is there any reason why that would be?

24 MR. KISH: Objection.

25 BY MS. TRESL:

1 Q. Okay. Let's talk about that then so that I
2 can understand the terms.

3 A. Okay. In our area --

4 Q. Yes.

5 A. -- the patients come in. We will get the
6 information, assessment information from them,
7 get them prepared to go to surgery. Then they
8 go to surgery, have their procedure, come back
9 to us. In some cases, if it's warranted, they
10 will go through a PACU recovery period.

11 Q. Okay.

12 A. After that recovery period, they enter into
13 the secondary recovery phase.

14 Q. Okay.

15 A. Which is what this is. This would be the
16 phase they would stay in until they went home or
17 went to a room.

18 Q. And is that how you refer to it, secondary
19 and primary? Would the first one be the primary
20 one?

21 A. The PACU phase is just the PACU phase.
22 It's the recovery phase.

23 Q. I see. So looking -- what have you
24 reviewed for today's deposition?

25 A. I looked at my recovery room sheet and I

<p style="text-align: right;">10</p> <p>1 looked at this. (Indicating.)</p> <p>2 Q. And that would be what we're referring to</p> <p>3 here? Because when we read the record, we won't</p> <p>4 know. But that would be the outpatient nursing</p> <p>5 progress record?</p> <p>6 A. Yes.</p> <p>7 Q. Did you review anything else for today's</p> <p>8 deposition?</p> <p>9 A. No.</p> <p>10 Q. Did you review Dr. Ghodsi's deposition?</p> <p>11 A. No.</p> <p>12 Q. Did you talk to anyone other than your</p> <p>13 attorney about today's deposition?</p> <p>14 A. I just said I had to go talk to the</p> <p>15 attorney.</p> <p>16 Q. Did you talk to Dr. Ghodsi about your</p> <p>17 deposition?</p> <p>18 A. No.</p> <p>19 Q. Have you talked to Dr. Ghodsi about this</p> <p>20 case?</p> <p>21 A. No.</p> <p>22 Q. Have you reviewed any policies or</p> <p>23 procedures for today's deposition?</p> <p>24 A. No.</p> <p>25 Q. Let's come back to the language and just do</p>	<p style="text-align: right;">12</p> <p>1 recovery of patients on the observation unit</p> <p>2 apart from that? For example, did you have any</p> <p>3 training in vertebroplasty recovery or</p> <p>4 kyphoplasty recovery?</p> <p>5 A. No.</p> <p>6 Q. And how did you learn then, or how were you</p> <p>7 aware of the way to care for the vertebroplasty</p> <p>8 that you had?</p> <p>9 A. We routinely do neuro checks and check the</p> <p>10 dressings, and the physicians come in and go</p> <p>11 through their neuro checks during the recovery</p> <p>12 period. We take vital signs and observe patient</p> <p>13 reaction. You know, awareness.</p> <p>14 Q. So kind of your routine neurosurgical</p> <p>15 nursing is what you would apply to</p> <p>16 vertebroplasty?</p> <p>17 A. Uh-huh. (Witness nodding head up and</p> <p>18 down.)</p> <p>19 Q. My understanding is, from Mrs. Dodd's</p> <p>20 testimony and from some of the pamphlets that</p> <p>21 I've seen, that vertebroplasty is kind of a new</p> <p>22 thing for Marietta Memorial. It hadn't been</p> <p>23 around for a lot of years. Is that accurate?</p> <p>24 A. I would say yes.</p> <p>25 Q. Do you remember how you were sort of</p>
<p style="text-align: right;">11</p> <p>1 a little bit more about your background.</p> <p>2 Are you BLS certified currently?</p> <p>3 A. Yes.</p> <p>4 Q. How about ACLS?</p> <p>5 A. Yes.</p> <p>6 Q. And are you a member of any affiliations,</p> <p>7 professional affiliations?</p> <p>8 A. No.</p> <p>9 Q. Do you subscribe to any nursing journals?</p> <p>10 A. No.</p> <p>11 Q. Do you have your bachelor's degree?</p> <p>12 A. No.</p> <p>13 Q. And have you -- tell me the kind of</p> <p>14 training that you have to work on this</p> <p>15 observation unit.</p> <p>16 A. I have been through ACLS. I have since</p> <p>17 become an ACLS instructor. I have completed a</p> <p>18 critical care course that the hospital offered</p> <p>19 recently.</p> <p>20 Q. Recent, like in the last two years?</p> <p>21 A. Uh-huh. (Witness nodding head up and</p> <p>22 down.)</p> <p>23 Q. And so you currently instruct ACLS?</p> <p>24 A. Uh-huh.</p> <p>25 Q. And anything specifically related to the</p>	<p style="text-align: right;">13</p> <p>1 introduced to the concept that the hospital was</p> <p>2 going to be doing vertebroplasties, if you were?</p> <p>3 A. No. No.</p> <p>4 Q. Did you know about vertebroplasty before</p> <p>5 the day that you took care of Mrs. Dodd?</p> <p>6 A. No.</p> <p>7 Q. And there was no -- was there any sort of</p> <p>8 in-service the morning of before you took care</p> <p>9 of Mrs. Dodd?</p> <p>10 A. No.</p> <p>11 Q. And did you understand what vertebroplasty</p> <p>12 was when you were taking care of her?</p> <p>13 A. I understand the concept.</p> <p>14 Q. And how did you understand that concept</p> <p>15 when you were taking care of her? What was the</p> <p>16 mechanism by where you --</p> <p>17 A. I understand that they inject cement into</p> <p>18 the bone.</p> <p>19 Q. And how did you come by that knowledge</p> <p>20 before taking care of Mrs. Dodd, or at the same</p> <p>21 time while taking care of Mrs. Dodd?</p> <p>22 A. She told me that she was going to have the</p> <p>23 procedure prior.</p> <p>24 Q. And she explained what it was?</p> <p>25 A. Uh-huh.</p>

- 1 **Q. So you took care of her then in that**
 2 **initial assessment, phase two? You were her**
 3 **nurse, kind of, the whole time?**
 4 A. No.
 5 **Q. Okay.**
 6 A. I simply recovered her. I did not prepare
 7 her. I came in later, the later shift that day.
 8 **Q. So when you learned about vertebroplasty**
 9 **and the procedure for the first time, was it**
 10 **before the procedure or after the procedure?**
 11 A. Before.
 12 **Q. So you came in late and went and saw her**
 13 **before her procedure but someone else had done**
 14 **the assessment?**
 15 A. No. I did not see her before her procedure
 16 that day. It was prior to her coming to the
 17 hospital.
 18 **Q. I see. And how -- and tell me about that**
 19 **encounter.**
 20 A. It was at a party at her home.
 21 **Q. Really?**
 22 A. Uh-huh.
 23 **Q. How nice. I've heard she used to give**
 24 **wonderful parties.**
 25 A. Uh-huh.

- 1 **Q. And can you just tell me a little bit about**
 2 **that encounter?**
 3 A. She was explaining that she had compression
 4 fractures in her back and was going to have this
 5 procedure done at the first of the year.
 6 **Q. And if I might be nosey, how is it that you**
 7 **happened to be at a party of Mrs. Dodd's?**
 8 A. She's a friend.
 9 **Q. Is she? And about when was the party?**
 10 A. It was a Christmas party, so it was at
 11 Christmastime.
 12 **Q. It was -- then it would be 2000, Christmas**
 13 **of 2000?**
 14 A. (Witness nodding head up and down.)
 15 **Q. And how long did that conversation last**
 16 **where she was explaining to you about the**
 17 **vertebroplasty, just that portion of it?**
 18 A. It was just a brief -- it was just a brief,
 19 you know, encounter.
 20 **Q. And after she told you about the**
 21 **vertebroplasty, was that the last time that you**
 22 **had any education about vertebroplasty until the**
 23 **day that you recovered her?**
 24 A. Yes.
 25 **Q. How often do you work with Dr. Ghodsi?**

- 1 A. Not very often. I can't even give you an
 2 average. He works in our facility, but he
 3 doesn't come down very often. I mean, he
 4 doesn't come here very often. Maybe once a
 5 month, once every -- you know, it's just --
 6 **Q. There's probably not really a whole lot --**
 7 A. I can't -- there's no pattern. I can't
 8 really say how often for sure he comes.
 9 **Q. Had you worked with him before the**
 10 **vertebroplasty?**
 11 A. Yes.
 12 **Q. And you've worked with him since?**
 13 A. Yes.
 14 **Q. And is it maybe because there's not a lot**
 15 **of outpatient neurosurgery procedures?**
 16 A. Yes.
 17 **Q. So that logically, you wouldn't run into**
 18 **him a lot then?**
 19 A. (Witness nodding head up and down.)
 20 **Q. Did you talk to Dr. Ghodsi before the**
 21 **vertebroplasty?**
 22 A. No.
 23 **Q. Did you talk to Dr. Ghodsi after the**
 24 **vertebroplasty?**
 25 A. He came in the room to assess the patient,

- 1 but as far as he and I having conversation, he
 2 just told me what he wanted to do as far as
 3 getting her a room.
 4 **Q. Okay.**
 5 A. We don't chat.
 6 **Q. Did you discuss with your -- with the nurse**
 7 **who assessed Mrs. Dodd before she went in for**
 8 **her vertebroplasty, did you have any**
 9 **conversation with her at any time before -- when**
 10 **Mrs. Dodd came in to the time you sent her to**
 11 **the floor?**
 12 A. I don't even know who assessed her.
 13 **Q. Okay. So the answer --**
 14 A. I don't even remember who assessed her.
 15 **Q. Let's talk a little bit about the record.**
 16 **Okay. I'm looking at the anesthesia record only**
 17 **because I kind of want to understand. And I**
 18 **think I understand now from what you told me,**
 19 **but I don't want to assume. It looks to me**
 20 **anesthesia time finished at 9:20.**
 21 **Oh, you don't have that?**
 22 MR. KISH: I'm sorry. I think
 23 that's one we're missing.
 24 MS. TRESL: Okay. That's fine.
 25 I'll get it for you.

1 BY MS. TRESL:

2 **Q. It looks to me like she came to -- and I'm**
3 **assuming "PAR" is you, yes, at 9:30, and her**
4 **anesthesia was over at 9:20; is that correct?**

5 A. Uh-huh.

6 **Q. And it looks from your note -- and I'm**
7 **going to say that she came into the secondary**
8 **PACU then at 10:00?**

9 A. I took her out -- is that my PACU record?

10 No. Under that anesthesia record. Okay. She
11 went from there to there to there.

12 (Indicating.)

13 **Q. I see. So this is the primary, this is the**
14 **first?**

15 A. Uh-huh.

16 **Q. And then this would be the second?**

17 A. Uh-huh.

18 MS. CLOUSE: Can we go off the
19 record for a second?

20 MS. TRESL: Sure.

21 (Thereupon, a discussion was held off
22 the record.)

23 MS. TRESL: Back on the record.

24 BY MS. TRESL:

25 **Q. So let's just -- let me get my bearings**

1 **here. So at 9:30 then, or 9:20, did she enter**
2 **PAR? Maybe I can tell here. 9:20. She comes**
3 **into you at 9:20; is that correct?**

4 A. Yes.

5 **Q. Are you given -- do you physically go in**
6 **and retrieve her on the gurney, or do they bring**
7 **her out to you?**

8 A. They bring them out on the cart.

9 **Q. And does someone talk to you about the**
10 **procedure?**

11 A. The anesthesiologist gives you a report as
12 to what he's given the patient and what he's
13 done, yes.

14 **Q. And in this case, would that have been Hess**
15 **or Cree that gave you that report? Or perhaps**
16 **Cree is not even in the mix. I'm not sure.**

17 A. Ann Hess.

18 **Q. So Ann Hess would have given you a report?**

19 A. Uh-huh.

20 **Q. Let me ask you before you go any further,**
21 **do you remember some of these events apart from**
22 **the record, or is everything that you're telling**
23 **me today based on what you've read in the**
24 **record?**

25 A. I remember some.

1 **Q. Apart from the record?**

2 A. Uh-huh. (Witness nodding head up and
3 down.)

4 **Q. So do you remember then if Ann was the one**
5 **that gave you the report?**

6 A. No.

7 **Q. Do you have any recollection of what the**
8 **report -- what report you got, what was told to**
9 **you?**

10 A. No. I don't remember the actual report.

11 **Q. Do you remember any portion of the report,**
12 **anything that stands out in your memory?**

13 A. No.

14 **Q. And is there anything in your record here**
15 **that would cause you to be able to know what the**
16 **report contained?**

17 A. Vertebroplasty, T12, L1-L2, just what they
18 had done.

19 **Q. So describe it to me. Ann brings Mrs. Dodd**
20 **out to you and she tells you what they've done,**
21 **and then you tell me what you did, what you**
22 **remember or what you typically do.**

23 A. I typically check their dressing, see how
24 they're moving, make sure their respirations and
25 everything -- you know, they're alert, oriented,

1 assess that and airway, dressing, how they're
2 moving, pain. Just, you know, assess their
3 stability.

4 **Q. Are you --**

5 A. Do neuros.

6 **Q. Are you one-on-one with them?**

7 A. Yes.

8 **Q. And do you remember recovering Mrs. Dodd?**

9 A. Yes.

10 **Q. And tell me what you remember specifically**
11 **about Mrs. Dodd.**

12 A. I remember they brought her back. I did an
13 Accu-Chek because I knew she was a diabetic. I
14 checked her dressing. She was able to move in
15 the bed. And she complained of pain. I gave
16 her some Darvocets. And that's all I
17 specifically remember.

18 Dr. Ghodsi came in and he did his neuro
19 assessment and he realized that her, you know,
20 right side -- right foot and right leg were
21 slightly weaker and determined that she would go
22 over to the hospital.

23 **Q. You gave me a lot of stuff there I want to**
24 **ask you about individually.**

25 Were you doing this initial assessment that

1 you talked about in the first phase or the
2 second phase?

3 A. The first. When they brought her. You
4 just automatically do a head to toe.

5 Q. Okay.

6 A. Make sure they're all right.

7 Q. Then did Dr. Ghodsi come to see her and
8 talk to you in the first phase?

9 A. He came to see her and assess her in the
10 first phase, yes. In the recovery room.

11 Q. And do you -- how did you become
12 aware -- what did he tell Mrs. Dodd?

13 A. I don't recall. I recall that he assessed
14 her lower extremity strength and said, you know,
15 "Your right leg is weaker." And I don't
16 remember him telling her anything else of
17 certainty.

18 Q. Did he check her lower leg strength as part
19 of a routine exam, or was there some reason that
20 he checked it?

21 MS. CLOUSE: I'm going to
22 object. I'm not sure the witness would know
23 that.

24 THE WITNESS: The neurologists
25 typically come into the recovery room and check

1 Q. Knowing how --

2 A. She was -- I recall that she was moving
3 well and moving both of her extremities well,
4 and then it wasn't long before he was in. I
5 don't recall whether it was before or after.

6 Q. Did you observe this, though, independently
7 of Dr. Ghodsi coming in to do his exam?

8 A. I can't remember for certain. I wrote it,
9 but I can't remember. Sometimes they get in
10 there right away before you can go through the
11 whole thing.

12 Q. But even if he had documented this, would
13 you have followed up and done your own lower
14 extremity exam?

15 A. Oh, yes, yes.

16 Q. Do you remember doing that exam?

17 A. No, I don't.

18 Q. Typically, how would you have done that
19 exam to determine that the right foot was
20 slightly weaker than the left?

21 A. I have them push against my hands, I have
22 them pull up against my hand, you know, hold
23 their hands and have them pull up. You know,
24 I'm checking, making sure they can bend and move
25 and do all those things. She was bending,

1 the neurostatus of their patients.

2 BY MS. TRESL:

3 Q. And that includes lower extremity strength?

4 A. Yes.

5 Q. So your note here where you document that
6 the left -- the right foot, I'm sorry, is
7 slightly weaker than the left, and then it's
8 followed by Dr. Ghodsi, I think that says "in"?

9 A. "VS."

10 Q. Visited?

11 A. My handwriting is appalling sometimes.

12 Q. It's actually beautiful. I don't know who
13 charted this Decadron and Darvocet --

14 A. I did.

15 Q. Oh, it's lovely. Really, it doesn't even
16 look --

17 A. Well --

18 Q. Because you printed, probably?

19 A. That's so you can read it.

20 Q. It's beautiful.

21 So when you charted this right foot is
22 weaker than left, had you already assessed that
23 her right foot was slightly weaker than her left
24 before Dr. Ghodsi came in?

25 A. I don't recall.

1 moving and doing all those things, but I'm not
2 sure if I got to the rest of it before he came
3 in. (Indicating.)

4 Q. And at 10:00 when you document that she's
5 in the secondary recovery room, secondary PACU,
6 and you document again that the right foot is
7 slightly weaker than the left, would that have
8 been an observation that you would have made at
9 10:00, or would that have been something --

10 A. Yes --

11 Q. -- that you might have --

12 A. Yes.

13 Q. Talk to me about that.

14 A. I keep assessing them.

15 Q. So this would be your assessment then, not
16 something that you observed?

17 A. Yes.

18 Q. Dr. Ghodsi -- so it's safe to say that
19 Dr. Ghod- -- may I assume then that Dr. Ghodsi
20 assessed that the right foot was weaker than the
21 left and so did you?

22 A. Yes.

23 Q. Okay. Just a couple of questions. You
24 gave the Decadron after the Darvocet. Was
25 there -- did you have any understanding why you

1 were giving the Decadron, or was it just an
 2 order that you followed?
 3 A. It relieves swelling and inflammation, and
 4 they use it a lot in neuro cases to prevent
 5 swelling of the central nervous system.
 6 Q. Did Dr. Ghodsi talk to you about
 7 specifically why he was giving Decadron to
 8 Mrs. Dodd in this case?
 9 A. No.
 10 Q. Or was it -- did she come --
 11 A. I felt I understood why he wanted the
 12 Decadron given. He said, "Give the Decadron."
 13 Q. So it was written or he told you,
 14 "Michelle, give the Decadron"?
 15 A. Well, I can't -- I'd have to see the
 16 doctor's order, but it could have been a verbal
 17 order.
 18 Q. Do you know if an x-ray was done while she
 19 was in the PACU, or the first or the secondary
 20 PACU?
 21 A. I don't believe an x-ray was done in PACU.
 22 Q. And that would be one or two? When we say
 23 PACU, the whole --
 24 A. One. But, you know, I could be -- you
 25 know, I'm not -- I don't remember if an x-ray

1 was done in PACU, but I would think normally if
 2 one was done, I would have charted that one was
 3 done.
 4 Q. And then can we say there was an x-ray done
 5 in the secondary PACU, the secondary recovery
 6 phase?
 7 A. I don't remember one being done.
 8 Q. And again, had one been done, was that
 9 something you probably would have documented?
 10 A. I would think that I would have.
 11 Q. Did Dr. Ghodsi talk to Mrs. Dodd
 12 about -- what do you -- if anything, do you
 13 remember what Dr. Ghodsi told Mrs. Dodd about
 14 her procedure when he came out and did his
 15 initial assessment?
 16 A. I remember he said, "Your right leg is
 17 weaker." I don't remember conversation. I just
 18 don't.
 19 Q. Did he explain to her why it was weaker?
 20 A. I don't recall.
 21 Q. Do you recall if she asked why it was
 22 weaker?
 23 A. I don't recall.
 24 Q. She had some, I think, Fentanyl, didn't
 25 she? What was her sort -- was she sleepy still,

1 or was she fairly awake?
 2 A. No. She was fairly alert.
 3 Q. But having some amount of pain?
 4 A. Uh-huh. (Witness nodding head up and
 5 down.)
 6 Q. She seemed to understand what was going on
 7 around her, though?
 8 A. Oh, yes.
 9 Q. And when you asked her to do things, she
 10 did them without any difficulty?
 11 A. Yes.
 12 Q. And all you remember from that
 13 conversation, that initial conversation, is
 14 Dr. Ghodsi telling her that the one leg was
 15 weaker than the other?
 16 A. That's all I remember.
 17 Q. Did he come in any time after that, after
 18 that initial visit?
 19 A. I don't recall. I don't think I had her
 20 much longer. No. I don't recall.
 21 Q. If he had come in a second time, is that
 22 something that you would have documented?
 23 A. I would think.
 24 Q. My understanding from Mrs. Dodd's daughter
 25 is that she was in the recovery room longer than

1 Mrs. Dodd's daughter thought she would be. Is
 2 this -- tell me how --
 3 A. This is a typical recovery room time.
 4 Q. Is it?
 5 A. Sometimes they're there longer. A half an
 6 hour is average.
 7 Q. And so she was there --
 8 A. Forty minutes.
 9 Q. Once they were in the secondary, you're
 10 saying then?
 11 A. She went from recovery to secondary.
 12 Q. Right. And so the average for that is
 13 about a half an hour, so she wasn't too much
 14 longer than that?
 15 A. No.
 16 Q. Do you remember if Sherry, Mrs. Dodd's
 17 daughter, came back to see her?
 18 A. I don't recall specifically her coming
 19 back, but she probably did during this phase.
 20 Q. And you then don't remember any
 21 conversations you would have had with her?
 22 A. I remember conversations I've had with her,
 23 but I can't say when they took place.
 24 Q. Okay. We'll get to those in a little bit.
 25 Let me mark that down.

1 Tell me about your conversations with
 2 Mrs. Dodd while you were recovering her.
 3 A. I don't recall a whole lot of conversation.
 4 Q. Did she ask you about why her one leg was
 5 weaker than the other?
 6 A. She could have, but I couldn't have said
 7 for sure.
 8 Q. Do you remember any conversation at all
 9 about the difference in the leg?
 10 A. Just that it was weaker. I remember asking
 11 her if she had diabetic neuropathy in that leg,
 12 and I think she said no.
 13 Q. Now, you describe it as slightly weaker?
 14 A. Uh-huh. (Witness nodding head up and
 15 down.)
 16 Q. And that's -- would you say that the
 17 weakness stayed about the same from the time you
 18 first assessed her to when you transferred her?
 19 A. (Witness nodding head up and down.) Yes.
 20 Q. And did you explain that to the nurse that
 21 you were giving the report to when you
 22 transferred her to 361?
 23 A. I believe so. I believe that's why he
 24 wanted to keep her.
 25 Q. Why do you think that that's why he wanted

1 to keep her?
 2 A. To observe her.
 3 MR. KISH: Objection.
 4 BY MS. TRESL:
 5 Q. Where did you get that information that he
 6 wanted to observe her?
 7 A. Well, she was going to a bed in the
 8 hospital.
 9 Q. I just don't want to interrupt you. You
 10 looked like you were thinking, so I didn't want
 11 to jump in.
 12 A. She was being placed in the hospital, so I
 13 felt he wanted to observe her.
 14 Q. And why did you feel he wanted to observe
 15 her specifically for the leg weakness? Because
 16 I think that's what you said.
 17 MS. CLOUSE: Objection.
 18 BY MS. TRESL:
 19 Q. You can answer.
 20 A. Because I don't think it was an expected
 21 result.
 22 Q. And why did you think that it wasn't an
 23 expected result?
 24 A. Well, he didn't say that, but, I mean, I
 25 just don't think it was the expected result. I

1 don't know what more to say. I don't feel he
 2 was pleased with it.
 3 Q. As far as you know then, he only came in
 4 that one time that you saw him?
 5 A. That is all I can remember.
 6 Q. And it's likely that he would have written
 7 the order to send her to a bed at that time?
 8 A. Yes.
 9 Q. Is that something typically that he would
 10 talk to you or talk to Mrs. Dodd about having
 11 made that decision?
 12 A. Typically.
 13 Q. But you don't recall having that
 14 conversation with him?
 15 MS. CLOUSE: I'm going to object
 16 because I think she said he did talk to
 17 Mrs. Dodd about it.
 18 THE WITNESS: He talked to her
 19 and said her right leg was weaker, and I believe
 20 he said he was going to put her over in the
 21 hospital.
 22 BY MS. TRESL:
 23 Q. But he didn't talk to you about putting her
 24 over to the hospital?
 25 A. He issues orders, I follow them. We don't

1 converse.
 2 Q. Give me a minute here. (Pause.)
 3 Do you know if Dr. Ghodsi went out and
 4 talked to Sherry at all, Mrs. Dodd's daughter,
 5 or any of Mrs. Dodd's family?
 6 A. I don't know for certainty.
 7 Q. Is that something that you would have
 8 documented had you known that he did?
 9 A. I don't think so.
 10 Q. So you give her the Decadron and you call
 11 the report to this nurse, it looks like Breeze
 12 maybe, and you transfer her to 361?
 13 A. Uh-huh. (Witness nodding head up and
 14 down.)
 15 Q. Do you recall what was included in your
 16 report that you called upstairs?
 17 A. I probably would have talk -- I would have
 18 told her, you know, what I had done, how she
 19 looked, you know, what was going on. I would
 20 have told her about the right-sided weakness and
 21 given her her vital signs.
 22 Q. And then you transferred her upstairs, and
 23 that was the last you saw her for that day; is
 24 that correct?
 25 A. Uh-huh.

1 **Q. Or did you go back and visit her?**
 2 A. I don't -- no. (Witness shaking head from
 3 side to side.)
 4 **Q. Did you have any conversation with**
 5 **Dr. Ghodsi as, like, follow-up? "How's**
 6 **Mrs. Dodd doing?" "Is her leg any better?"**
 7 A. No.
 8 **Q. I think that you indicated that you talked**
 9 **to Sherry since then?**
 10 A. I could have -- it could have been
 11 immediately after. I could have run into her in
 12 the hospital, or I could have run into her at
 13 the church bazaar.
 14 **Q. But when you ran into her, you did discuss**
 15 **Mrs. Dodd, correct?**
 16 A. I did not discuss Mrs. Dodd. Family
 17 members discussed it. She just said she
 18 hadn't -- you know, they had not been told that
 19 that was a possibility that there was a leak.
 20 That's all I remember about the conversation
 21 with Sherry, and I don't even remember when that
 22 took place.
 23 **Q. And when you said that they hadn't been**
 24 **told that there was the possibility of a leak,**
 25 **what were they referring to when they said they**

1 weren't told that there was --
 2 A. Cement.
 3 **Q. And was that about the vertebroplasty then**
 4 **she was referring to?**
 5 A. Uh-huh. Yes.
 6 **Q. And what -- do you remember what you said**
 7 **when she said that to you?**
 8 A. I doubt I said very much committal. I
 9 don't remember exactly what I said.
 10 **Q. Do you remember what Sherry said to you**
 11 **that led up to the part about "we didn't know**
 12 **that there was a possibility of a leak"?**
 13 A. I may have said, "How's your mom doing?" I
 14 don't know. I don't remember anything that -- I
 15 don't even know when it took place.
 16 **Q. That was my next question. Do you know if**
 17 **it was relatively, like, within the next month**
 18 **or two, or was it, like, three weeks ago?**
 19 A. Oh, it wouldn't have been three weeks ago.
 20 I haven't seen them for a while. It would have
 21 probably been shortly after the procedure.
 22 **Q. Days, weeks, but not months and months?**
 23 A. It could -- well, it could have been.
 24 **Q. Do you have an estimate, more likely than**
 25 **not, when you think it might have been?**

1 A. It could have been shortly after the
 2 procedure. I may have seen her out and about in
 3 the hospital, but I am not sure.
 4 **Q. And have you talked to Sherry -- now, you**
 5 **said you haven't talked to her in a while. Did**
 6 **you have any other conversations about her mom**
 7 **after that conversation?**
 8 A. Not about the procedure, no. It would
 9 be -- I mean, I would see her at the church
 10 bazaar and converse back and forth, and I may
 11 say, you know, "How's your mother" or whatever,
 12 but nothing --
 13 **Q. And what does she say when you ask her**
 14 **that?**
 15 A. I can't remember a specific conversation.
 16 She would probably just tell me how she's doing.
 17 **Q. Do you know how she's doing now?**
 18 A. Now?
 19 **Q. Well, when you were having these**
 20 **conversations.**
 21 A. Well, it's a very small town and she's a
 22 family friend, so -- you know, I heard that she
 23 had gone to nursing home for rehabilitation and
 24 that she's home, and I've seen her since at
 25 church.

1 **Q. So tell me about -- that was my next**
 2 **question then about your encounters with**
 3 **Mrs. Dodd. So you have seen her as a friend**
 4 **since her --**
 5 A. As an acquaintance, you know, out and
 6 about.
 7 **Q. And what have you observed when you've seen**
 8 **her out and about?**
 9 A. I think the last time I saw her she may
 10 have been using a cane, but I wouldn't swear to
 11 it.
 12 **Q. She was walking then or sitting?**
 13 A. I think it was at the church bazaar a year
 14 ago. They do both. I was in the kitchen. It's
 15 just kind of a "hey, howdy."
 16 **Q. And did you ask her how she was doing when**
 17 **you --**
 18 A. I can't recall. I usually ask everyone how
 19 they're doing. You know, it's just -- I don't
 20 mean to appear so vague, it's just I have a lot
 21 of dealings with a lot of people and I -- a lot
 22 of them are very superficial. You know, just,
 23 "Hi, how are you" and "how are you doing?"
 24 **Q. Are you a member of the same church then?**
 25 A. Yes.

- 1 **Q. It is Episcopalian, right?**
 2 A. Yes. But lest you misunderstand, I only
 3 show up once a year to work the church bazaar.
 4 I'm not a goer.
 5 **Q. Why do you only show up for the bazaar?**
 6 A. Because that's the only time I'm willing to
 7 go. I just go to spend time and work in the
 8 kitchen because my mother's the chairman of the
 9 committee.
 10 **Q. Did you know if Mrs. Dodd was very active**
 11 **in the church?**
 12 A. She also was the chairman of that committee
 13 at one point, and my mother took it over from
 14 her. What can I -- you know, it's just a small
 15 town.
 16 **Q. And do you know why your mom took it over**
 17 **from her?**
 18 A. It was difficult when her back was -- you
 19 know, with the compression fracture, she just
 20 couldn't work it like she -- you know, it's hard
 21 work. It's backbreaking work. Her back was
 22 already not in good shape.
 23 **Q. When did your mom take over that position?**
 24 **Do you know the year?**
 25 A. No. I think she's done it the last two.

- 1 **Q. The last two?**
 2 A. Uh-huh.
 3 **Q. So maybe 2001 then? Would that --**
 4 A. I think they worked together on it before
 5 then.
 6 **Q. So she was kind of handing the torch over**
 7 **slowly?**
 8 A. She recruited my mom to help her, too.
 9 **Q. Did she?**
 10 A. You have to understand church ladies.
 11 **Q. Let me see. Did you report to Dr. Ghodsi?**
 12 **You probably don't remember, and I think we've**
 13 **hit this, but let's just hit it another way.**
 14 **Did you talk to Dr. Ghodsi, that you remember,**
 15 **about Mrs. Dodd's leg being weaker than the**
 16 **other?**
 17 A. He was in the room.
 18 **Q. Right.**
 19 A. We were in the room together.
 20 **Q. But when she got moved over at 10:00, did**
 21 **you talk to him at any time about the right leg**
 22 **being weaker than the left?**
 23 A. I don't recall. You mean after I moved her
 24 over?
 25 **Q. Exactly.**

- 1 A. No.
 2 **Q. And did you talk to anyone, that you**
 3 **remember, once you moved her over about the leg**
 4 **being weaker?**
 5 A. Well, the nurses that I work with, we
 6 discussed why she was -- you know, that she was
 7 going over to the main building. But we may
 8 have discussed it in a discussion way, gossipy
 9 way or, you know --
 10 **Q. Do you remember anything that you discussed**
 11 **about why she was going over to the floor rather**
 12 **than home?**
 13 A. Yes, but not to whom. I mean, the right
 14 leg weakness, I -- you know, I'm sure we
 15 discussed that.
 16 **Q. And was there any discussion as to why the**
 17 **leg was weaker, the one leg was weaker than the**
 18 **other?**
 19 A. No.
 20 **Q. Did you have any --**
 21 A. I don't believe so.
 22 **Q. Did you have any understanding of why the**
 23 **right leg was weaker than the other?**
 24 A. I don't remember if I did at that time or
 25 not.

- 1 **Q. Do you now understand why?**
 2 A. Yes.
 3 **Q. And what is your understanding now?**
 4 A. That there was a cement leak.
 5 **Q. Anything else?**
 6 A. No.
 7 **Q. And who did you get that information from,**
 8 **if you remember?**
 9 A. I don't remember.
 10 **Q. Could it have been Dr. Ghodsi?**
 11 A. I doubt it. I don't see him and don't
 12 discuss with him --
 13 **Q. Was this the first vertebroplasty that you**
 14 **knew of when you were discussing her with your**
 15 **colleagues that any of them had been involved**
 16 **in?**
 17 A. Yes.
 18 **Q. Did anyone have any -- was there any**
 19 **discussion about could this be this, could that**
 20 **be that? I mean, was it a bit of a curiosity**
 21 **because it was a new procedure?**
 22 A. I don't think so. I mean, they -- we would
 23 have understood that that would not be the
 24 desired result, but I don't think so.
 25 **Q. What was her level of -- was she able to**

1 roll?
 2 A. Oh, yes. She was -- yes, she was moving,
 3 rolling, bending her knees. She was moving in
 4 the bed, yes.
 5 Q. And there was no reason that she shouldn't
 6 have been or couldn't have been? That was
 7 allowed?
 8 A. Oh, yeah.
 9 Q. So she had no deficits that you observed
 10 other than the leg weakness?
 11 A. Right.
 12 Q. Is there anything that we haven't -- that I
 13 haven't asked you about that you remember that I
 14 haven't brought up today?
 15 A. I'm so anxious, I don't --
 16 Q. You're doing a great job. You wouldn't
 17 know it.
 18 A. I can't think of anything.
 19 Q. Have you talked to, let's say, your head
 20 nurse or your department about vertebroplasties
 21 in general since Mrs. Dodd's procedure?
 22 A. No.
 23 Q. Is there a policy or a procedure on your
 24 unit relative to the care of the recovery of
 25 vertebroplasty patients?

1 A. I'm not aware of one.
 2 Q. And is it my understanding that as far as
 3 you know, there's been no other vertebroplasties
 4 done that you've recovered on your floor?
 5 A. As far as I'm aware of, no.
 6 Q. Did your head nurse ask you about your
 7 deposition today in terms of your care of
 8 Mrs. Dodd?
 9 MR. KISH: Objection. You can
 10 go ahead and answer.
 11 THE WITNESS: No.
 12 BY MS. TRESL:
 13 Q. Let me have about two minutes just to make
 14 sure I haven't missed anything and I think we're
 15 done.
 16 A. Okay.
 17 Q. And I thank you for your time.
 18 (Thereupon, a discussion was held off
 19 the record.)
 20 MS. TRESL: Back on the record.
 21 BY MS. TRESL:
 22 Q. I even hate to ask these questions, but I
 23 have to for the record.
 24 Have you ever been involved in a lawsuit
 25 before?

1 A. No.
 2 Q. And have you ever, for any reason, had any
 3 disciplinary action taken relative to nursing?
 4 A. No.
 5 MR. KISH: Objection.
 6 BY MS. TRESL:
 7 Q. I figured you'd say that.
 8 Do you think that there's anything that
 9 Mrs. Dodd did or didn't do that contributed to
 10 the fact that she has the deficit that she has
 11 now?
 12 MR. KISH: Objection. I'm not
 13 sure she's qualified to answer that.
 14 THE WITNESS: I don't understand.
 15 BY MS. TRESL:
 16 Q. While you were recovering her, was there
 17 anything Mrs. Dodd didn't do that contributed to
 18 the fact that her legs were not equally strong?
 19 A. No.
 20 Q. Okay. And did Sherry or Mrs. Dodd ever
 21 talk to you about -- let's do one at a time. In
 22 the times that you've seen Sherry in the
 23 community, has she ever talked to you about
 24 Dr. Ghodsi?
 25 A. No.

1 Q. And what about Mrs. Dodd?
 2 A. No.
 3 Q. Okay. I think we're done and I thank you
 4 very much.
 5 A. Thank you.
 6 MR. KISH: You have the right
 7 to read the deposition transcript when it comes
 8 back, but just tell her you'll waive.
 9 THE WITNESS: I waive.
 10 (Thereupon, the M. Grimm deposition
 11 was concluded at 9:53 o'clock a.m.)
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1 C E R T I F I C A T E

2 STATE OF OHIO,)

3) SS:

4 SUMMIT COUNTY,)

5 I, Anika W. Patrick, a Registered
6 Professional Reporter and Notary Public within
7 and for the State of Ohio, duly commissioned and
8 qualified, do hereby certify that the within
9 named witness, MICHELLE GRIMM, was by me first
10 duly sworn to testify the truth, the whole truth
11 and nothing but the truth in the cause
12 aforesaid; that the testimony then given by her
13 was by me reduced to Stenotypy in the presence
14 of said witness, afterwards prepared and
15 produced by means of Computer-Aided
16 Transcription and that the foregoing is a true
17 and correct transcription of the testimony so
18 given by her as aforesaid.

19 I do further certify that this deposition
20 was taken at the time and place in the foregoing
21 caption specified, and was completed without
22 adjournment.

23 I do further certify that I am not a
24 relative, employee of or attorney for any party
25 or counsel, or otherwise financially interested
26 in this action.

27 I do further certify that I am not, nor is
28 the court reporting firm with which I am
29 affiliated, under a contract as defined in Civil
30 Rule 28(D).

31 IN WITNESS WHEREOF, I have hereunto set my
32 hand and affixed my seal of office at Akron,
33 Ohio on this 28th day of October, 2003.

34 _____
35 Anika W. Patrick, RPR36 My commission expires March 13, 2005.
37 ---

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