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State of Ohio,)		
County of Cuyahoga.) SS:	1	ELIZABETH HAIT, M.D.
county of only avoid a	2	of lawful age, called by the Plaintiff for
IN THE COURT OF COMMON PLEAS	3	examination pursuant to the Ohio Rules of Civil
JAHMYLL MCDOWELL, a)	4	Procedure, having been first duly sworn, as
minor, by and through)	5	hereinafter certified, was examined and
his natural mother,)	6	testified as follows:
KATRINA HAYDEN, and) KATRINA HAYDEN,) Case No. 476118	7	EXAMINATION OF ELIZABETH HAIT, M.D.
Individually,)	8	BY MR. PESKIN:
) Districté	9 (Q State and spell your last name for the record.
Plaintiff,)		A Hait, H-a-i-t.
vs.)	1	Q Your first name is Elizabeth?
) UNIVERSITY HOSPITALS)		A Elizabeth.
OF CLEVELAND, et al.,)		Q Hait?
)		A Hait, yes.
Defendants.)		Q Dr. Hait, my name is Larry Peskin. We met
THE DEPOSITION OF ELIZABETH HAIT, M.D.	16	briefly before the deposition.
TUESDAY, FEBRUARY 4, 2003	17	Have you ever had your deposition taken
The deposition of ELIZABETH HAIT, M.D.,	18	before?
called by the Defendants for examination pursuant	1	A Never.
to the Ohio Rules of Civil Procedure, taken before me, the undersigned, Tracy E. Nist, a Registered	1	Q Well, it's not terribly complicated. There are
Professional Reporter and Notary Public within and	21	just a few little rules we need to follow.
for the State of Ohio, taken at Rainbow Babies &	22	First of all, it's important that you
Children's Hospital, 11100 Euclid Avenue, Cleveland, Ohic, commencing at 9:04 a.m., the day	23	understand the question I ask you. If for any
and date above set forth.	24	reason my question is unclear or you don't
	25	understand my question, ask me to restate or
	120	diderstand my question, ask me to restate of
APPEARANCES: 2		4
ALL BRIAROND .	IA	
	1	rephrase them. Okay?
	2	A Okay
On behalf of the Plaintiff:	2 3	A Okay. Q It's also important if you verbalize your
Lawrence F. Peskin, Esq.	2 3 4	 A Okay. Q It's also important if you verbalize your responses
Lawrence F. Peskin, Esq. Becker & Mishkind Co., LPA	2 3 4 5	 A Okay. Q It's also important if you verbalize your responses A Okay.
Lawrence F. Peskin, Esq.	2 3 4 5 6	 A Okay. Q It's also important if you verbalize your responses A Okay. Q because Tracy has trouble with gestures and
Lawrence F. Peskin, Esq. Becker & Mishkind Co., LPA Skylight Office Tower - Suite 660	2 3 4 5 6 7	 A Okay. Q It's also important if you verbalize your responses A Okay. Q because Tracy has trouble with gestures and nods.
Lawrence F. Peskin, Esq. Becker & Mishkind Co., LPA Skylight Office Tower - Suite 660 1660 West 2nd Street	2 3 4 5 6 7 8	 A Okay. Q It's also important if you verbalize your responses A Okay. Q because Tracy has trouble with gestures and nods. Also, we both have to try to avoid talking
Lawrence F. Peskin, Esq. Becker & Mishkind Co., LPA Skylight Office Tower - Suite 660 1660 West 2nd Street	2 3 4 5 6 7 8 9	 A Okay. Q It's also important if you verbalize your responses A Okay. Q because Tracy has trouble with gestures and nods. Also, we both have to try to avoid talking at the same time. So do your best to let me
Lawrence F. Peskin, Esq. Becker & Mishkind Co., LPA Skylight Office Tower - Suite 660 1660 West 2nd Street Cleveland, Ohio 44113 On behalf of the Defendants:	2 3 4 5 6 7 8 9 10	 A Okay. Q It's also important if you verbalize your responses A Okay. Q because Tracy has trouble with gestures and nods. Also, we both have to try to avoid talking at the same time. So do your best to let me finish the question before you start an answer,
Lawrence F. Peskin, Esq. Becker & Mishkind Co., LPA Skylight Office Tower - Suite 660 1660 West 2nd Street Cleveland, Ohio 44113	2 3 4 5 6 7 8 9 10 11	 A Okay. Q It's also important if you verbalize your responses A Okay. Q because Tracy has trouble with gestures and nods. Also, we both have to try to avoid talking at the same time. So do your best to let me finish the question before you start an answer, and I'll do my best to let you finish your
Lawrence F. Peskin, Esq. Becker & Mishkind Co., LPA Skylight Office Tower - Suite 660 1660 West 2nd Street Cleveland, Ohio 44113 On behalf of the Defendants: Rita A. Maimbourg, Esq. Arter & Hadden LLP 1100 Huntington Building	2 3 4 5 6 7 8 9 10 11 12	 A Okay. Q It's also important if you verbalize your responses A Okay. Q because Tracy has trouble with gestures and nods. Also, we both have to try to avoid talking at the same time. So do your best to let me finish the question before you start an answer, and I'll do my best to let you finish your answer before I start my next question. Okay?
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Lawrence F. Peskin, Esq. Becker & Mishkind Co., LPA Skylight Office Tower - Suite 660 1660 West 2nd Street Cleveland, Ohio 44113 On behalf of the Defendants: Rita A. Maimbourg, Esq. Arter & Hadden LLP 1100 Huntington Building 925 Euclid Avenue	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	 A Okay. Q It's also important if you verbalize your responses A Okay. Q because Tracy has trouble with gestures and nods. Also, we both have to try to avoid talking at the same time. So do your best to let me finish the question before you start an answer, and I'll do my best to let you finish your answer before I start my next question. Okay? A Okay. Q I don't expect we'll be very long, but if you need a break for any reason, that's fine. Just let me know and we'll stop for a bit. Okay? A Okay. Q What's your current address? A It is 30 Severance Circle, Apartment 205. That's Cleveland Heights. Q I'd like to just briefly go over your educational background. Where did you go to undergraduate school?

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1	А	I graduated in 1994.			Our first year we only spend one month, but with	
2	Q	Then did you start medical school right away ?	2		other outpatient clinics as well. So most of	
3	А	I did a master's at Touro College in Dix Hills,	3		our experience is in our second year.	
4		New York.	4	Q	Were you in your second year?	
5	Q	In what?	5		Yes.	
6		Interdisciplinary biomedical sciences.	6	Q	In February of 2001, you were in your second	
7		Would that be an MS then ?	7	-	year?	
, 8		It's an MA, actually.	8	Δ	Yes.	
9		After you finished your master's, did you start	9		So are the two months or so consecutive during	
10	G	medical school right a way?	10	Q.	your second year?	
11	^	Yes.	11	٨	No.	
		Where?	12		Are they a month at a time?	
12			1		Correct.	
13		University of Toronto.	13			
14		When did you start there?	14		So this was one of those two months?	
15	А	My master's was one year so I started there in	15		Correct.	
16		1995.	16		Do you know if this was your first month?	
17		And you graduated in?	17		This was my second month .	
18		1999.	18	Q	So your work would have been supervised, I take	
19	Q	After you graduated, where did you go for your	19		it, then in February of 2001 by some pediatric	
20		post-graduate education?	20		attending?	
21	А	I came straight here to Rainbow Babies and	21	А	Overnight there's no attending . It's just two	
22		Children's Hospital to do my pediatric	22		junior two second-year residents.	
23		residency.	23	Q	In your department, that's it?	
24	Q	You've completed that?	24	А	There's an attending on-call at home .	
25		Yes.	25	Q	Okay.	
		6				8
1		When did you complete your residency ?	1	А	As well as there's the pediatric intensive care	
1 2	А	Just June, June of 2002.	1 2		staff and the adult ER has an attending	
	А				staff and the adult ER has an attending . Is there any requirement that all patients that	
2	A Q	Just June, June of 2002.	2		staff and the adult ER has an attending	
2 3	A Q	Just June, June of 2002. What happened after your residency ?	2 3	Q	staff and the adult ER has an attending . Is there any requirement that all patients that	
2 3 4	A Q	Just June, June of 2002. What happened after your residency ? Currently I'm staff here at the Department of	2 3 4	Q A	staff and the adult ER has an attending . Is there any requirement that all patients that you see also be seen by some attending ?	
2 3 4 5	A Q A	Just June, June of 2002. What happened after your residency ? Currently I'm staff here at the Department of Pediatrics and I'm off to Boston to do	2 3 4 5	Q A	staff and the adult ER has an attending . Is there any requirement that all patients that you see also be seen by some attending ? No, there's no such requirement.	
2 3 4 5 6	A Q A Q	Just June, June of 2002. What happened after your residency ? Currently I'm staff here at the Department of Pediatrics and I'm off to Boston to do fellowship training.	2 3 4 5 6	Q A Q	staff and the adult ER has an attending . Is there any requirement that all patients that you see also be seen by some attending ? No, there's no such requirement. Are you required to make phone contact with	
2 3 4 5 6 7	A Q A Q A	Just June, June of 2002. What happened after your residency ? Currently I'm staff here at the Department of Pediatrics and I'm off to Boston to do fellowship training. When are you leaving ? I'm leaving in May.	2 3 4 5 6 7	Q A Q	staff and the adult ER has an attending . Is there any requirement that all patients that you see also be seen by some attending ? No, there's no such requirement. Are you required to make phone contact with regard to each patient that you see ? No. The attending reviews the chart in the	
2 3 4 5 7 8 9	A Q A Q A	Just June, June of 2002. What happened after your residency ? Currently I'm staff here at the Department of Pediatrics and I'm off to Boston to do fellowship training . When are you leaving ? I'm leaving in May . Explain to me exactly what your position is in	2 3 4 5 6 7 8 9	Q A Q A	staff and the adult ER has an attending . Is there any requirement that all patients that you see also be seen by some attending ? No, there's no such requirement. Are you required to make phone contact with regard to each patient that you see ? No. The attending reviews the chart in the morning.	
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2 3 4 5 6 7 8 9 10 11	A Q A Q A Q	Just June, June of 2002. What happened after your residency ? Currently I'm staff here at the Department of Pediatrics and I'm off to Boston to do fellowship training . When are you leaving ? I'm leaving in May . Explain to me exactly what your position is in Boston. I'm going to Harvard to do pediatric	2 3 4 5 6 7 8 9 10 11	Q A Q A	 staff and the adult ER has an attending . Is there any requirement that all patients that you see also be seen by some attending ? No, there's no such requirement. Are you required to make phone contact with regard to each patient that you see ? No. The attending reviews the chart in the morning. You're here because it's my belief and assumption from looking at the medical record 	
2 3 4 5 6 7 8 9 10 11 12	A Q A Q A Q A	Just June, June of 2002. What happened after your residency ? Currently I'm staff here at the Department of Pediatrics and I'm off to Boston to do fellowship training . When are you leaving ? I'm leaving in May . Explain to me exactly what your position is in Boston. I'm going to Harvard to do pediatric gastroenterology , a three-year training program .	2 3 4 5 6 7 8 9 10 11 12	Q A Q A	 staff and the adult ER has an attending . Is there any requirement that all patients that you see also be seen by some attending ? No, there's no such requirement. Are you required to make phone contact with regard to each patient that you see ? No. The attending reviews the chart in the morning. You're here because it's my belief and assumption from looking at the medical record that you were the emergency department physician 	
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2 3 4 5 6 7 8 9 10 11 12 13 14	A Q A Q A Q A Q	Just June, June of 2002. What happened after your residency ? Currently I'm staff here at the Department of Pediatrics and I'm off to Boston to do fellowship training. When are you leaving ? I'm leaving in May. Explain to me exactly what your position is in Boston. I'm going to Harvard to do pediatric gastroenterology , a three-year training program . So, as we sit here today, that's your intention , to specialize in pediatric gastroenterology ?	2 3 4 5 6 7 8 9 10 11 12 13 14	Q A Q A	 staff and the adult ER has an attending . Is there any requirement that all patients that you see also be seen by some attending ? No, there's no such requirement. Are you required to make phone contact with regard to each patient that you see ? No. The attending reviews the chart in the morning. You're here because it's my belief and assumption from looking at the medical record that you were the emergency department physician who evaluated and treated Jahmyll McDowell on February 8, 2001. 	
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1		two sheets.	1	Q	When you say, "Now was getting puffy," what did
2		MS, MAIMBOURG: It's this note.	2		she tell you about the history of the problems
3		(Indicating.)	3		with his foot?
4	А	I'm trying to read his signature. It appears to	4	A	Oh, okay. She was describing that his leg
5		be Dr. Tranz, T-r-a-n-z.	5	••	looked puffy to her before she left, but over
6		MS. MAIMBOURG: I think it's	6		the course of you know, I'm not sure how long
7		Trang, T-r-a-n-g, T. Trang. He was a pediatric	7		- but at home for whatever length of time
		surgery resident.	8		before she came to the emergency room, it seemed
8	D١	/ MR. PESKIN:	9		to be getting worse so she was concerned and
9					
10	Q	Can you explain to me how it was Dr. Trang got	10	~	brought him in.
11		involved in Jahmyll's care?	11	Q	So we're clear: When she told you she was
12	А	Certainly. After I evaluated his foot, I was	12		concerned that his foot or leg was puffy before
13		concerned that there was potentially an	13		they left, did you understand that she meant
14		infection and the surgeons are the experts in	14		before they left University Hospitals?
15		that sort of diagnosis and treatment so I called	15		Yes,
16		for his opinion. He came down to the ER to	16		Yes?
17		evaluate and that's how he was involved.	17	А	That it looked before yeah, that's what I
18	Q	3 1 ,	18		assumed she meant.
19		necessary, from the note, can you tell me what	19	Q	Did she discuss with you her communications or
20		it was that Dr. Trang did?	20		conversations with any people at University
21	А	He took a history, just as I did, just to make	21		Hospitals about Jahmyll's foot before the
22		sure that the information was the same. He	22		discharge?
23		examined his foot and he suggested we do an	23	А	No, not really. She just described to me that
24		x-ray and some blood work and then decided to	24		it was a little puffy before he left and now it
25		admit him overnight, mostly for observation.	25		was much worse and she was concerned about that
			L		
		10			10
4	0	10	4		12
1	Q	So is it fair then to say from your testimony	1	0	so she brought him in.
2	Q	So is it fair then to say from your testimony that it was Dr. Trang's decision to admit	2	Q	so she brought him in. Do you recall her telling you about any
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		13		. E S . Ø	15
1		than it was at the time of the discharge?	1		of her own. We reviewed it in meetings and,
2	А	Yes.	2		obviously, the extent of that is privileged.
3		But that it had been puffy before they left the	3	B١	YMR, PESKIN:
4		hospital. Is that a fair statement?	4	Q	So it was months later that you saw that record?
5	А	She said it was red before they left, it looked	5		Years.
6		completely different when she was in the	6		Months or years later?
7		emergency room. That's, pretty much, what I'll	7		Yes.
8		say.	8		So it wasn't something that would have come to
9	\cap	What else can you recall about your conversation	9	~	the emergency room the next day or the day after
10	S	with Jahmyll's mother about the history of this	10		that you looked at it?
11		problem?	11	Δ	No.
12	۵	Okay	12		So all the information you had about Jahmyll's
13	~	MS. MAIMBOURG: And you can look	13	a	admission, is it fair to say, came from his
14		at your notes.	14		mother?
15	\cap	Yes. Look at your notes, anything that will	15	Δ	Correct.
16	Q	help you recall.	16		And that you included the important parts of
17	۸	The way you phrased it with "conversations" I	17	G	that in your assessment?
18	A	was just getting a medical history from her.	18	Δ	Correct.
19		She just explained to me why he was admitted to	19		Have you told me everything you now recall about
20		the hospital: That he had a Rotavirus	20	С.	your conversations with Jahmyll's mother about
20 21		infection. That he had required IV hydration.	21		the history of Jahmyll's admission and her
		• •	22		observations prior to his discharge?
22 23		That he was, I believe, in the hospital not for very long I don't remember how long she	23	۸	Yes.
		· -	24		Tell me what you did then after you obtained the
24		said and when they were discharged, that it looked red with one or two blisters on it and	24	Q	
25		looked led with one of two bisters of it and	20		history.
		14			16
1		over the course of the evening, it was getting	1	A	So I proceeded to examine his foot and that
1 2		over the course of the evening, it was getting progressively worse and she was concerned.	1 2	Α	So I proceeded to examine his foot and that raised some concerns that it could potentially
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		17			u r u r	19
1		else? It was quite red and warm as well. There	1		contents of the IV?	
		was an area of discoloration surrounded by an	2	Δ	No.	
2		-	2 3		So you were not aware that there was potassium	
3	~	area of redness.		Q	in the IV and that it was not just sugar water?	
4	Q	I'm looking at a document that has a number on	4 r	^	, ,	
5		it. It says P621930 and that's the first page	5	А	I'm sure there was potassium in the IV. He	
6		of the emergency department record.	6		would have needed potassium in his IV, but I	
7		Yes.	7		don't - I mean, I'm not sure. I don't see the	
8		Is all of the handwriting on here yours?	8		actual records, but that does not surprise me	
9	А	On the right-hand side.	9		that there was potassium in the IV.	
10	Q	On the right hand side?	10	Q	Would the blistering that you observed be	
11	А	Yes. This is all nursing notes on the left-hand	11		something that would be consistent with an IV	
12		side. (Indicating.)	12		infiltrate from an IV that contained potassium ?	
13	Q	So that description of the chief complaint would	13	А	The blisters would definitely be consistent with	
14		have been from a nurse?	14		an IV infiltrate. I'm not sure what the	
15	А	Yes, triage nurse.	15		potassium would or would not contribute to that.	
16		Are you able to read that?	16	Q	If you can turn to the second page.	
17		Yes.	17		MS. MAIMBOURG: What do you	
18		Could you read it into the record ?	18		by, "The second page," her note?	
19		Okay. "Discharge from Rainbow at 8:00 tonight	19	O	Your notes. It's my second page. It's the	
20		for admission for Rotavirus." Oh. And, "Sugar	20	4	right-hand side, I guess, of the one page, at	
21		water IV in the foot. Blister on foot at	21		the top it says 0045.	
22		discharge now swollen and in creased in	22	Δ	Correct.	
		-	23		So now that would have been February 9?	
23	~	blistering." That's the chief complaint.				
24		Can you read the Observation section ?	24		No.	
25	А	"Left leg swollen from knee down, foot swollen,	25	Q	Oh, 0025. 1 see, it didn't take long. It was	
		18				20
1			1		twenty minutes after triage that you saw	20
1		tense, discolored and covered with several	1		twenty minutes after triage that you saw	20
2		tense, discolored and covered with several intact blisters of varying sizes. Cap re fill is	2		Jahmyll.	20
2 3	0	tense, discolored and covered with several intact blisters of varying sizes. Cap re fill is less than two seconds."	2 3		Jahmyll. Can you read your history.	20
2 3 4	Q	tense, discolored and covered with several intact blisters of varying sizes. Cap re fill is less than two seconds." This investigation would have been available to	2 3 4	A	Jahmyll. Can you read your history. Sure. "Eight-month old male, full-term recently	20
2 3 4 5	Q	tense, discolored and covered with several intact blisters of varying sizes. Cap re fill is less than two seconds." This investigation would have been available to you when you did your initial assessment,	2 3 4 5	A	Jahmyll. Can you read your history. Sure. "Eight-month old male, full-term recently in. 8:00 discharge from Rainbow Babies &	20
2 3 4 5 6		tense, discolored and covered with several intact blisters of varying sizes. Cap re fill is less than two seconds." This investigation would have been available to you when you did your initial assessment, correct?	2 3 4 5 6	A	Jahmyll. Can you read your history. Sure. "Eight-month old male, full-term recently in. 8:00 discharge from Rainbow Babies & Children's for Rotavirus de hydration. Now	20
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			21				23
	1 2 3 4 5 6 7 8 9 10 11		21 calf circumference was 16, 17 centimeters. The left calf circumference was 21 centimeters. There was erythema and warmth and an area of black/blue around old IV site with poor color refill. He had good dorsal pulses and there was no crepitus. What orders did you write ? I wrote the orders for the C VC differential, the chemistry, the basic chemistry, the ESR, the coag screen and the typhoid screen in conjunction with the surgeons.	1 2 3 4 5 6 7 8 9 10 11	QA	Well, the whole way a long I was telling her my concerns: That this could just be an IV infiltration, but we had to rule out a serious infection and that's why we had to get the blood work done right away. That was definitely my biggest concern, was ruling out infection because that could spread quickly and that could have serious consequences. Sure. So I explained that to the best of my ability to his mom.	23
	12		I see there was a foot x-rayed also.	12	Q	Do you recall talking to anybody else in	
	13		Yes, and the foot x-ray.	13 14	^	Jahmyll's family, other than his mother? I don't.	
	14 15	Q	All those results would have been reported back to you?	14 15		Do you know if any pictures were taken of	
	16	А	Yes, And I've indicated them on the sheet.	16		Jahmyll's foot while he was in the emergency	
	17		Tell me what, if anything, of significance came	17		department?	
	18		back from the laboratory studies or the x-ray.	18	А	I don't remember at all. I remember she wanted	
	19	А	There were significant negative find ings. The	19		to take a picture of his foot.	
	20		white count was normal. The platelet count was	20		Okay.	
	21		normal. His electrolytes were all normal. All	21 22	А	I don't know if any pictures were taken . I	
	22 23		of these were very reassuring that this was not necrotizing fasciitis or any deep tissue	22		don't know the details of the pictures, to be honest.	
	23 24		infection. The foot x-ray I did not write	24	Q	Do you recall any security personnel being	
	25		the results but showed that there was no	25		present in the emergency department at this	
-	*		? ?				21
			22 signs of deep tissue infection	1		time?	24
	1	Q	signs of deep tissue infection .	1	A	time? Yes. I recall I don't know all the de tails	24
	2	Q	signs of deep tissue infection . What else can you recall about your assessment	1 2 3	A	time? Yes. I recall I don't know all the de tails of this, to be honest. He was very sick and I	24
		Q	signs of deep tissue infection .	2	A	Yes. I recall I don't know all the de tails	24
	2 3	Q	signs of deep tissue infection . What else can you recall about your assessment and treatment of Jahmyll, other than what's	2 3	A	Yes. I recall I don't know all the de tails of this, to be honest. He was very sick and I	24
	2 3 4 5 6	А	signs of deep tissue infection . What else can you recall about your assessment and treatment of Jahmyll, other than what's contained in the medical record ? You've already told me you consulted a surgical resident. Yes.	2 3 4 5 6	A	Yes. I recall I don't know all the de tails of this, to be honest. He was very sick and I was worried about his foot, not taking pictures, but she wanted a picture taken. I didn't have a camera with me. I know that security sometimes	
	2 3 4 5 6 7	A Q	signs of deep tissue infection . What else can you recall about your assessment and treatment of Jahmyll, other than what's contained in the medical record ? You've already told me you consulted a surgical resident. Yes. Anything else?	2 3 4 5 6 7	A	Yes. I recall I don't know all the de tails of this, to be honest. He was very sick and I was worried about his foot, not taking pictures, but she wanted a picture taken. I didn't have a camera with me. I know that security sometimes takes pictures for physical abuse cases so I	
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	2 4 5 6 7 8 9 10 11	A Q A	signs of deep tissue infection . What else can you recall about your assessment and treatment of Jahmyll, other than what's contained in the medical record ? You've already told me you consulted a surgical resident. Yes. Anything else? I'm not sure what else ? I'm just trying to find out what, if anything, you recall, other than what you've already told me.	2 3 4 5 6 7 8 9 10 11	Q	Yes. I recall I don't know all the de tails of this, to be honest. He was very sick and I was worried about his foot, not taking pictures, but she wanted a picture taken . I didn't have a camera with me. I know that security sometimes takes pictures for physical abuse cases so I called them. Okay. And I think they only take pictures for abuse	
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	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 9 20 21 22	A Q A Q B Q A	signs of deep tissue infection . What else can you recall about your assessment and treatment of Jahmyll, other than what's contained in the medical record ? You've already told me you consulted a surgical resident. Yes. Anything else? I'm not sure what else? I'm just trying to find out what, if anything, you recall, other than what you've already told me. MS. MAIMBOURG: Regarding? MR. PESKIN: Regarding the MS. MAIMBOURG: Assessment. MR. PESKIN: assessment. MS. MAIMBOURG: Is there anything else you haven't told him? THE WITNESS: Nothing else . Y MR. PESKIN: You already told me that the decision to admit Jahmyll was made by the surgical resident, correct?	2 3 4 5 6 7 8 9 10 11 22 13 14 15 16 17 18 19 20 21 22	Q	Yes. I recall I don't know all the de tails of this, to be honest. He was very sick and I was worried about his foot, not taking pictures, but she wanted a picture taken . I didn't have a camera with me. I know that security sometimes takes pictures for physical abuse cases so I called them. Okay. And I think they only take pictures for abuse cases and because I was not suspicious for abuse, they weren't interested in taking the picture. I was very, very busy at the time because I had another very sick child. I did indicate to the security guard that if she's the mother's child and if she wants the picture, she can have the picture, but that's how I left it. I don't know what happened with it. I really, honestly do not recall what happened with the picture because at the time it really was not important to me. I was really worried about his foot being infected and my	

Deposition of Elizabet	h Hait, M.D., taken on	Tuesday, February 4, 2003	Index Page 7
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			25	anc		27
	1		unless it was for, like, forensic evidence .	1	Q	I just wanted to show you that and ask if you
	2	0	Was that something that you were aware of	2	-	recognize either of those as being a picture
	3		No.	3		that was taken in the emergency room ?
	4		- prior to that?	4	А	No. These were not pictures that were taken in
1	5		No, no. I don't routinely take pictures of my	5	,,	the emergency room.
	6	~``	patients in the ER.	6		MS. MAIMBOURG: Those are dated
	7	0	Let me understand that.	7		the next day, 2/9.
	8	S.	You didn't have a camera, obviously ?	8		THE WITNESS: Oh, yes.
	9	۸	No.	9	Δ	It even looks different than it looked . It's
	10		To your recollection, Jahmyll's mother didn't	10	Л	very red here and it was more dusky. Maybe the
	11	Q	have a camera?	11		blisters had popped here. I don't know.
	12	Δ	l assume not because she was asking.	12		(Indicating.)
	12		She was asking about getting a picture taken .	13		MS. MAIMBOURG: Don't guess.
	14	Q	You called security and you called them	14		There's no question. He's just asking you if
	15		because, at least at some level, sometimes they	15		those were the ones that were taken .
	16		take pictures?	16	А	
	17	^	They've come for me for rape kits, for physical	17	~	ER honestly looked like a haze . You couldn't
	18	A	abuse cases. That's the only camera I knew	18		even make anything out.
	19		abuse cases. That's the only camera r thew about and I felt, you know, if she wants a	19	\cap	It was a poor-quality picture, to your
	20		picture, she's entitled to a picture.	20	G.	recollection?
	20 21	0	So when they came down I don't want to put	20	٨	Yes.
	22	Q	words in your mouth but, as I understand your	22		And I think you were saying that these pictures,
	22		testimony, it sounds like somebody from security	23	Q	which are dated 2/9, wouldn't even be a fair
	24 24		made it clear to you that the purpose of taking	24		representation of what his foot looked like at
	24 25		pictures were for abuse cases and rape cases and	25		the time you saw it.
	<u> </u>		pictures were for abuse cuses and rupe cuses and			•
1			26			28
	1		they didn't generally take them under these			Correct.
	2		circumstances.	2		It's different?
	3		Is that a fair statement?	3		It looks different there.
	4		Correct.	4	Q	Okay.
	5	Q	And you had some sort of conversation, if you	5		Were you ever asked to provide a written
	6		can recall, with the security personnel saying	6		statement about your treatment of Jahmyll
	7		basically, "If she wants a picture, go ahead and	7		McDowell, other than what's contained in the
	8		take a picture?"	8		medical record?
	9	А	I said, "I don't see why you can't take a	9		No.
	10		picture."	10	Q	Did you keep any notes independently of your
	11		Right.	11		encounter with Jahmyll?
	12	А	* •	12		No.
	13		seeing a Polaroid that came out very poorly .	13	Q	Do you recall expressing any concern to
	14		Like, you couldn't even make out that it was a	14		Jahmyll's mother about the care that had been
	15		person so someone took a picture. You know, you	15		provided to Jahmyll during his hospitalization ?
	16		really couldn't make anything out on this	16	A	No. I needed to know what it looked like before
	17		Polaroid so I assumed the security guard took	17		he left, and I was very reassured that it did
	18		the picture. I honestly don't recall who took	18		not look the way it looked when he showed up in
	19		it. I do recall there being a terrible-quality	19		the emergency room, but I did not get into the
	20		picture. You couldn't even make out that it was	20		care because I wasn't there. I don't know what
	21		a human being or what it was, but that's all I	21		kind of care he got before he arrived to the
1	22	~	remember about this photograph business.	22	~	emergency room.
	23		You didn't take the picture, obviously, then ?	23	ري ري	Do you recall saying anything to Jahmyll's
	24 25	А	I certainly did not take a picture of the child .	24		mother about your belief that he shouldn't have
	25		I was very busy that night.	1 40		been discharged
				1		

1	А	No.	COUNTY OF
2	Q	with a foot in the condition that she	
3		described?	
4	А	No, no. IVs infiltrate quite frequently so I	and for t
5		wasn't surprised that it had infiltrated a	qualified
6		little bit. I would have been surprised if he	M.D., was
7		had been discharged with his foot looking the	the whole
8		way it had.	cause afo
9		And, again, that's why I needed her to	her was b
10		describe to me what it looked like before, just	of said w
11		so I could get a time-line of the progress of	computer/
12		the swelling and, you know, to get an inkling of	and corre
13		what went on in the hospital. But, as I said, I	her as af
14		was worried that he was infected and that was my	Ĭď
15		primary concern.	taken at
16	Q	Other than the tests and x-rays that we've	caption s
17	~	already discussed, did you prescribe any sort of	not a rel
18		intervention for the infiltrate?	party, or
19	А	I'm not sure what you mean.	action.
20		MS, MAIMBOURG: Yes or no.	IN
21	Q	Any medication or any	hand and
22		No.	Ohio, on
23	Q	Had you ever treated an IV infiltrate prior to	
24		February 8, 2001?	
25	А	Yes, but in a different context.	
		30	THE STATE
1	Q	Tell me about that. What's your familiarity	COUNTY OF
2		with treating IV infiltrates?	
3	А	I've had many patients who have come in for IV	Ве
4		and rehydration, or for whatever reason, and if	state and
5		it's infiltrated we take the IV out. Sometimes	above-nam
6		if it's badly infiltrated I mean, you take	that she
7		the IV out and you, maybe, put some compresses	the same
8		on for a short period of time. That's about it.	testimony
9	Q	Are there any medications you're familiar with	41
10		that could be used to treat an IV infiltrate?	affixed n
11	A	In the pediatric unit we've used Wydase, but I	
12	~	don't like using that.	
13		Why not?	
14		I'm just not comfortable using that.	
15	Q	Is there a particular reason why you're	
16		uncomfortable using it?	
17	А	Because it's an acid and I'm not exactly sure	My Commis
18		how it works, but it doesn't always work and I	
* ^			
19		would just prefer to take out the IV and put	
20		would just prefer to take out the IV and put another one in.	
20 21		would just prefer to take out the IV and put another one in. MR. PESKIN: I don't have any	
20 21 22		would just prefer to take out the IV and put another one in. MR. PESKIN: I don't have any other questions.	
20 21		would just prefer to take out the IV and put another one in. MR. PESKIN: I don't have any	ten

was adjourned at 9:39 a.m.)

THE STATE OF OHIO, CUYAHOGA.

I, Tracy E. Nist, a Notary Public within he State of Ohio, duly commissioned and , do hereby certify that ELIZABETH HAIT, first duly sworn to testify the truth. truth and nothing but the truth in the resaid; that the testimony then given by w me reduced to stenotypy in the presence vitness, afterwards transcribed on a printer, and that the foregoing is a true ect transcript of the testimony so given by oresaid.

SS:

to further certify that this deposition was the time and place in the foregoing specified. I do further certify that I am ative, counsel or attorney of either otherwise interested in the event of this

WITNESS WHEREOF, I have hereunto set my affixed my seal of office at Cleveland, this 14th day of February, 2003.

> Tracy E. Nist, Notary Public within and for the State of Ohio My Commission expires 1/26/2008.

THE STATE OF) SS: COUNTY OF)
Before me, a Notary Public in and for said
state and county, personally appeared the
above-named ELIZABETH HAIT, M.D., who acknowledged
that she did sign the foregoing transcript and that
the same is a true and correct transcript of the
testimony so given.
IN TESTIMONY WHEREOF, I have hereunto
affixed my name and official seal at
this day of
, 2003.
ELIZABETH HAIT, M.D.
Notary Public
My Commission expires:

а 1	30:25	n	Chief
		8	17:13 17:23
'Swelling 20:9	Ability 23:10	Babies 1:18 5:21 6:21 20:5	Child 24:14 24:16 26:24
0	Able	Background	Children's
Execution and the second	17:16 24:25	4:22	1:19 5:22 6:21 20:6
0025 19:25	Above-named 32:6	Badly 30:6	Circle 4:19
0045	Abuse	Basic	Circumference
19:21	24:7 24:10 24:12 25:18 25:25	21:9	21:1 21:2
1	Acid 30:17	Becker 2:4	Circumstances 26:2
1/26/2008	Acknowledged	Behalf	Čivil
31:25 1100	32:6	2:2 2:7	1:15 3:3
2:9	Action 31:19	Belief 8:10 28:24	Clear 11:11 12:24 20:19 20:20 25:24
11100 1∶19	Actual	Best	Cleveland
14th	19:8 Address	4:9 4:11 23:10 Biggest	1:9 1:20 2:5 2:10 4:20 31:21 Clinics
31:22	4:18	23:6	
16 21:1	Adjourned	Bilaterally	Co
1660	30:25 Admission	20:21 Biomedical	2:4 Coaq
2:5	Admission 14:4 14:18 15:13 15:21 17:20	5:6	21:10
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