

<p>Page 1</p> <p>1 IN THE COURT OF COMMON PLEAS 2 OF SUMMIT COUNTY, OHIO 3 ----- 4 CHARLES G. PERE, et al., 5 Plaintiffs, 6 vs Case No. 03-07-3984 7 THE LEDGES OF ROCKYNOL, 8 et al., 9 Defendants. 10 11 ----- 12 DEPOSITION OF KELLY M. PRICE, R.N. 13 FRIDAY, NOVEMBER 14, 2003 14 ----- 15 Deposition of KELLY M. PRICE, R.N., a 16 Witness herein, called by counsel on behalf of 17 the Plaintiff for examination under the statute, 18 taken before me, Cynthia A. Sullivan, a 19 Registered Professional Reporter and Notary 20 Public in and for the State of Ohio, pursuant to 21 agreement of counsel, at the offices of Tipping 22 Co., L.P.A., 525 N. Cleveland-Massillon Road, 23 Akron, Ohio, commencing at 2:05 p.m. on the day 24 and date above set forth. 25 -----</p>	<p>Page 3</p> <p>1 KELLY M. PRICE, R.N., of lawful age, 2 called for examination, as provided by the Ohio 3 Rules of Civil Procedure, being by me first duly 4 sworn, as hereinafter certified, deposed and 5 said as follows: 6 EXAMINATION OF KELLY M. PRICE, R.N. 7 BY MS. TRESL: 8 Q. Hi, Kelly. We met just a little bit 9 ago. Have you ever had your deposition taken 10 before? 11 A. No. 12 Q. I'm going to give you a few 13 guidelines. This should be fairly 14 straightforward, and you should be out of here 15 fairly quickly. 16 For the record, if you're going to 17 answer yes or no, say yes or no rather than nod 18 or shake your head so that Cynthia can get it 19 down on the record. 20 A. Okay. 21 Q. If you don't understand something 22 that I've asked you, will you stop and say you 23 don't understand? 24 A. Yes. 25 Q. If you answer the question, I'm</p>
<p>Page 2</p> <p>1 APPEARANCES: 2 On behalf of the Plaintiffs: 3 Becker & Mishkind, by 4 JACQUELINE D. TRESL, ESQ. 5 The Skylight Office Building 6 Suite 660 7 1220 W. 2nd Street 8 Cleveland, Ohio 44113 9 216-241-2600 10 11 On behalf of the Defendant Rockynol: 12 Tipping Co., L.P.A., by 13 ALISON M. BREAU, ESQ. 14 525 N. Cleveland-Massillon Road 15 Suite 207 16 Akron, Ohio 44333 17 330-670-8400 18 19 On behalf of the Defendant Dr. Amanambu: 20 Buckingham, Doolittle & Burroughs, by 21 BRENDA COEY, ESQ. 22 4518 Fulton Drive, NW 23 P. O. Box 35548 24 Canton, Ohio 44735 25 330-492-8717</p>	<p>Page 4</p> <p>1 going to assume that you understand the 2 question; okay? 3 A. Okay. 4 Q. For the record, would you state your 5 name and address? 6 A. Kelly Price, 3546 Torrey Pines 7 Drive, T-O-R-E-Y, Pines Drive, Fairlawn, 8 44333. 9 Q. I believe you are a registered 10 nurse? 11 A. Correct. 12 Q. Tell me just a little bit about 13 where you went to school and when you graduated. 14 A. I graduated in 1998 from the 15 University of Akron. 16 Q. So you have a Bachelor's of Nursing? 17 A. Yes. 18 Q. Are you BLS certified? 19 A. Yes. 20 Q. Are you ACLS certified? 21 A. No. 22 Q. First of all, your job, are you 23 still at Rockynol? 24 A. Yes. 25 Q. Your job at Rockynol it would look</p>

<p style="text-align: right;">Page 5</p> <p>1 to me is not as a floor nurse; is that correct?</p> <p>2 A. Correct.</p> <p>3 Q. Describe to me your job at Rockynol.</p> <p>4 A. It was as an MDS coordinator.</p> <p>5 Q. You say was. Is that no longer</p> <p>6 correct?</p> <p>7 A. Correct.</p> <p>8 Q. What period of time was your title</p> <p>9 the MDS coordinator?</p> <p>10 A. It was during this period of time</p> <p>11 that Mr. Pere was there, but it was officially</p> <p>12 September of '01 to -- and I don't know the</p> <p>13 approximate transition date. I transitioned</p> <p>14 into a different role the summer of '02. I</p> <p>15 would say roughly July, but I'm not exactly sure</p> <p>16 when.</p> <p>17 Q. Before you describe your duties then</p> <p>18 as MDS coordinator, what did you do prior to</p> <p>19 September of '01?</p> <p>20 A. I was the assistant director of</p> <p>21 nursing at another facility.</p> <p>22 Q. Then you transitioned into a new</p> <p>23 role in approximately the summer of 2002, and</p> <p>24 what would that be?</p> <p>25 A. Assistant director of nursing at</p>	<p style="text-align: right;">Page 7</p> <p>1 now in marketing isn't, you know. But yes, it's</p> <p>2 a little maybe more removed from residents. I'm</p> <p>3 not seeing them in the facility now. I'm seeing</p> <p>4 them in their homes and the environment they are</p> <p>5 in prior to coming into Rockynol.</p> <p>6 Q. Describe your role then as MDS</p> <p>7 coordinator. Tell me what you did and what your</p> <p>8 responsibilities were.</p> <p>9 A. My responsibility was to coordinate</p> <p>10 the plan of care for the residents. My</p> <p>11 responsibility was for the residents. There was</p> <p>12 another MDS coordinator, so I was responsible</p> <p>13 for the first floor residents, their plan of</p> <p>14 care, and then completing the assessment, the</p> <p>15 MDS assessment, and completing the MDS in the</p> <p>16 computer.</p> <p>17 Q. Is this like a one-shot assessment,</p> <p>18 or is this an ongoing involvement that you have?</p> <p>19 A. I'm not sure.</p> <p>20 Q. In other words, I'm assuming from</p> <p>21 what I'm looking at which are the records, and</p> <p>22 we'll get into that more, but I just want to</p> <p>23 understand sort of standing back, it looks to me</p> <p>24 that you see the patient either as he's being</p> <p>25 admitted or very soon after he has been</p>
<p style="text-align: right;">Page 6</p> <p>1 Rockynol.</p> <p>2 Q. Are you currently the assistant</p> <p>3 director of nursing?</p> <p>4 A. (Indicating.) Currently, I'm a</p> <p>5 marketing sales associate.</p> <p>6 Q. That's a no?</p> <p>7 A. That's a no. I'm a marketing sales</p> <p>8 associate at Rockynol.</p> <p>9 Q. So your job there now is to do what?</p> <p>10 A. To make a long story short, my job</p> <p>11 is to basically admit people into independent</p> <p>12 apartments or assisted living.</p> <p>13 Q. So you have moved away from the</p> <p>14 skilled facility --</p> <p>15 A. Yep.</p> <p>16 Q. -- more to the ambulatory residents</p> <p>17 who can do more on their own sort of facility?</p> <p>18 A. Sort of. I don't know that you</p> <p>19 could say it quite like that.</p> <p>20 Q. Well, describe it for me.</p> <p>21 A. I guess I have more of an</p> <p>22 administration role, I guess, and I was doing</p> <p>23 that in The Ledges before, I guess, as the</p> <p>24 assistant director of nursing. It wasn't so</p> <p>25 much direct hands-on care. Likewise, my role</p>	<p style="text-align: right;">Page 8</p> <p>1 admitted. Then you complete this and your role</p> <p>2 is done and you go on to the next patient as</p> <p>3 opposed to you do this and you see them in three</p> <p>4 more days and you see them in three more days</p> <p>5 and you see them in three more days?</p> <p>6 A. If I can speak to Mr. Pere as an</p> <p>7 example --</p> <p>8 Q. Sure. That would be great.</p> <p>9 A. -- he was a Medicare patient, so</p> <p>10 Medicare sets certain guidelines for how often</p> <p>11 you have to complete the assessment.</p> <p>12 Q. So theoretically, you may be</p> <p>13 completing it every three days or every two</p> <p>14 weeks or every two months?</p> <p>15 A. It isn't those time frames, but yes,</p> <p>16 there is a pattern.</p> <p>17 Q. In Mr. Pere's case, do you know the</p> <p>18 next time that he would have been assessed this</p> <p>19 way?</p> <p>20 A. Yes. It would have been called a</p> <p>21 14-day assessment.</p> <p>22 Q. At the time that was your job? Your</p> <p>23 only job was to do these reassessments, to do</p> <p>24 the initial assessment and the reassessment?</p> <p>25 A. Correct.</p>

<p style="text-align: right;">Page 9</p> <p>1 Q. We'll come back to that 2 specifically. Did you have any other duties 3 while you did this? Did this keep you busy full 4 time? This was your responsibility? 5 A. I'm remembering now I did do 6 restorative nursing as well. 7 Q. What is that? 8 A. It's a nursing rehabilitation 9 program, and that is differentiated from like a 10 therapy rehabilitation program. It's nursing 11 where you try to keep the residents as 12 functional as possible so they don't lose their 13 independence. So I worked with the restorative 14 nursing assistants. 15 Q. Were you actually at the bedside, or 16 was this more of an administrative job? 17 A. More of an administrative job. 18 Q. This MDS coordinator was more of an 19 administrative job? 20 A. Yes, but there's contact with the 21 residents and their families. 22 Q. We'll get back to that. Have you 23 ever been disciplined as a nurse? 24 A. No. 25 Q. You have never had any difficulties</p>	<p style="text-align: right;">Page 11</p> <p>1 deposition? 2 A. Correct. 3 Q. How long ago did you do that? 4 A. Probably a week ago. What's today? 5 Friday, yeah. 6 Q. Do you remember Mr. Pere 7 independently of this? If I said to you do you 8 remember him in your own memory other than what 9 you documented, can you remember him? 10 A. Yes, but I don't know what is from 11 looking, you know, from the chart and what would 12 be from what I've heard from other people. I 13 don't know what's independently mine, you know. 14 Q. Well, tell me some of the things -- 15 A. I remember him being tall. I'm sure 16 everybody said that. 17 Q. How tall was he? 18 A. I think 6'3" was maybe the official. 19 I can't remember. 20 MS. BREAUX: Everyone said he was 21 tall. 22 MS. TRESL: I'm trying to determine 23 how tall. 24 A. I think he was slender. I think he 25 was a slender man. So whenever I think someone</p>
<p style="text-align: right;">Page 10</p> <p>1 at Rockynol with disciplinary issues? 2 A. With myself? 3 Q. Yes. 4 A. No, not that I know. 5 Q. In terms of today's deposition, what 6 did you review for today's deposition? 7 A. The care plan that I had done for 8 Mr. Pere. 9 Q. Did you take any notes as you were 10 reviewing this? 11 A. No. 12 Q. Did you bring anything with you 13 today, any notes that you took? 14 A. This wasn't for today, no, just 15 blank pieces of paper. 16 Q. Did you look at his medical records 17 in general terms or just this document? 18 A. I had looked at the medical record 19 back at the facility, but I don't think I looked 20 at anything. I think I just primarily -- and I 21 read the nurse's notes as well, or the nurse's 22 notes that -- I can't think of what else. I had 23 his whole medical record back at the facility 24 that I looked through. 25 Q. You did that to prepare for today's</p>	<p style="text-align: right;">Page 12</p> <p>1 is slender, they appear taller as well. 2 Q. When you say you're not sure but it 3 may have been things that other people have told 4 you, what sorts of things are you thinking about 5 when you say that? 6 A. Nothing specifically, I guess. I'm 7 just trying to think if I can picture him and is 8 it just what I've -- as I've thought about this 9 along the way, that it's just a creation in my 10 mind. I don't know what he looks like. 11 I can tell you he had dark hair, and 12 he may or may not have had dark hair because 13 that's something that I don't know because he 14 wasn't there for very long. 15 Q. When you heard there was a lawsuit 16 from Mr. Pere, did you say to yourself, oh, I 17 remember him, or did you have to do some digging 18 before you remembered him? Did the name stand 19 out, the circumstances, who he was? 20 A. Yes. 21 Q. Why is that? Do you know why? 22 A. Because the morning of his death, I 23 actually was going into work that day, so I had 24 gotten to work like around 11:00 or noon that 25 morning, and I remember hearing.</p>

3 (Pages 9 to 12)

<p style="text-align: right;">Page 13</p> <p>1 Q. We'll come back to that. Other than 2 reviewing the medical records and talking to 3 your attorney, have you talked to anybody about 4 this case in preparing for your deposition 5 today? 6 A. Say that again, please. 7 Q. Other than talking to your attorney, 8 did you talk to anyone else, oh, I'm going to 9 have my deposition taken, or someone told you 10 they were going to have their deposition taken 11 before you came today? 12 A. Yeah. I told my husband. 13 Q. I mean in terms of people at 14 Rockynol. Let me be more specific. 15 A. My supervisor at work now needed to 16 know. 17 Q. Can you tell me what you said to her 18 and what she said back? 19 MS. BREAUX: Objection. You can 20 answer, Kelly. 21 A. I just said that I had to go give a 22 deposition. 23 Q. Did you talk to Dr. Amanambu at all 24 about this case? 25 A. No.</p>	<p style="text-align: right;">Page 15</p> <p>1 you, or is this information that came up to you 2 in your office where you do your MDS's? 3 A. Well, I walk through the main 4 hallway to get to my office, and my office is 5 right near the nurse's station, so it could have 6 been either or. It's all one and the same. 7 Q. Do you recall your reaction when you 8 heard? 9 A. Alarmed because of the suddenness, I 10 believe, of his death. That's probably it. 11 Q. Did you talk to anybody about how 12 this had happened that you recall, what caused 13 him to fall or what caused him to die? 14 A. Say that again. 15 Q. Did you ask anyone what caused this 16 or how this happened? 17 A. What caused this, no. I'm trying to 18 think if we talked about cause. 19 MS. COEY: By cause, you're not 20 talking about medical cause? 21 MS. TRESL: No. 22 A. What are you talking about? 23 Q. Let me just approach it from my own 24 point of view. I would think that this was a 25 big event. Granted, maybe it's not, but to me</p>
<p style="text-align: right;">Page 14</p> <p>1 Q. Did you talk to any of the nurses on 2 the floor about this case? 3 A. Recently? 4 Q. Since his death. 5 A. Yes. 6 Q. Who did you speak to about his 7 death? 8 A. Susan Perrin. 9 Q. Can you tell me about 10 that conversation, what you can remember and 11 when it occurred? 12 MS. BREAUX: Objection. 13 A. We had a conversation that Saturday, 14 the Saturday of his death, that morning when I 15 came into work, but I can't recall what she 16 said. I can't recall the details. 17 Q. We're jumping ahead, but let's since 18 we're on this issue. Tell me how you learned 19 about his death. You came in and what happened? 20 A. I don't remember. Somehow I found 21 out that he had passed. I don't know from whom 22 first. It could have been Susan. It could have 23 been another nurse. As far as who else, I don't 24 know. 25 Q. Were you on the floor when they told</p>	<p style="text-align: right;">Page 16</p> <p>1 it would be if I was a nurse caring for this 2 patient or if I was involved in his care. To me 3 if a patient fell at the end of the bed and 4 died, it would be big news. I would ask a lot 5 of questions. People, we would be talking about 6 it. It just seems to me that people would 7 actually be talking about it. 8 What I'm trying to get from you is 9 that you find out about it, and I'm sure it just 10 wasn't, Mr. Pere died at the foot of his bed, 11 and what did you have for breakfast. 12 A. No. 13 Q. I'm trying to determine did you ask 14 how did this happen, what happened, did someone 15 volunteer, or did someone just say, oh, he died? 16 A. No. 17 Q. That's what I'm trying to get from 18 you in whatever way you want to explain it to 19 me. 20 A. I think it was just that sense of 21 alarm as well. I'm sure we did talk about what 22 happened. Again, I don't remember. I did read 23 the chart, and that is what I am remembering, 24 but I can't say for sure that was what was said 25 because that's all I know today is what I have</p>

<p>Page 17</p> <p>1 read in the chart, some of the details. 2 Q. Tell me from what you read and 3 putting everything together what you understand 4 to have happened. 5 A. That he was -- and I don't think 6 that was clear in the chart. I know there was a 7 wheelchair there and there was a bed, so as to 8 which he was sitting in, I'm not sure. He fell 9 to the floor, and there was -- the nurses had 10 seen there was blood on the floor. Let's see, 11 what else? 12 He was sitting, he fell, blood, 13 blood on the floor, 911 was called. The 14 roommate was there. The roommate was there, and 15 I remember the roommate. That's really all. 16 Q. You have no reason to understand 17 whether he tripped, whether he passed out, 18 whether he was hit over the head with a 19 two-by-four? 20 A. No. 21 Q. All you know is that he was found on 22 the floor in a pool of blood? 23 A. That's correct. 24 Q. As the person who is responsible, 25 I'm assuming you are the liaison to Medicare as</p>	<p>Page 19</p> <p>1 days because he's dead? 2 A. You do a discharge, a one-page thing 3 that he died. 4 Q. And send that to Medicare? 5 A. Correct. 6 Q. Is that on the chart? 7 A. Yes. 8 Q. Can you find that for me? 9 A. Sure. 10 Q. This would be here (indicating), and 11 I think most of this stuff is in the back, but 12 just help yourself. 13 A. It's this right here (indicating). 14 Q. What sets it aside? How did you 15 know that? Discharge tracking form for nursing 16 home resident, minimum data sheet, and in the 17 bottom right hand it says MDS 2, September 2002. 18 A. That's right. 19 Q. So after Mr. Pere expired, you 20 filled this out and sent this to Medicare so 21 they would know that he was no longer alive; 22 correct? 23 A. Correct. 24 Q. It does not look like anywhere in 25 here you describe what happened or the cause of</p>
<p>Page 18</p> <p>1 the MDS person? 2 A. I don't understand the question. 3 Q. You filled this out for Medicare, I 4 believe you said -- 5 A. Correct. 6 Q. -- in Mr. Pere's case? 7 A. Correct. 8 Q. I assume then you are like his 9 designated MDS coordinator since you filled this 10 out? 11 A. Right. 12 Q. Do you have any responsibility, any 13 connection to Medicare in terms of what's 14 happened to him at the end of this? 15 A. Do I have any connection with 16 Medicare? 17 Q. Do you have to fill out a form? Do 18 you have to explain to them what happened to 19 their patient? 20 A. No. This is it. 21 Q. This is it? 22 A. (Indicating.) 23 Q. Do you have a form that you fill out 24 since you would have had to reassess him in 14 25 days to say I don't have to reassess him in 14</p>	<p>Page 20</p> <p>1 death or anything. 2 A. No. 3 Q. Do you send a death certificate with 4 this? 5 A. No. 6 Q. So it's just as if he has been 7 discharged and not necessarily expired? 8 A. I'm not sure. It has been a while. 9 You code as to their discharge status, whether 10 they went home as an example, whether they went 11 back to the hospital as another example, and 12 then you just mark deceased. 13 Q. Since that's marked eight, that 14 means that's what happened to him? 15 A. Correct. 16 Q. Thank you. Let's talk about the 17 minimum data sheet just in general. First of 18 all, on this basic assessment tracking form 19 there's a lot of people who have signed. How do 20 you determine who signs this and what their role 21 is? 22 A. The people that sign it are people 23 who have contributed information to the MDS. Do 24 you want me to tell you who? 25 Q. Yes. I would like to know. I would</p>

5 (Pages 17 to 20)

<p style="text-align: right;">Page 21</p> <p>1 like to know what each of those individuals 2 contributed rather than their names. 3 A. Okay. It's a social worker, and 4 they have initialed what sections they are 5 responsible for. It's a social worker, 6 activities director, dietician, and director of 7 rehabilitation. 8 Q. Can we tell from there who 9 contributed to section G? 10 A. Section what? 11 Q. G. 12 A. Yes. That's me. 13 Q. What about -- let me see here. 14 MS. BREAUX: Can we go off the 15 record for a minute? 16 MS. TRESL: Sure. 17 (Discussion off the record.) 18 Q. Section G then, you said you were 19 responsible for that. Section H, how about that 20 section? Who was responsible for that? 21 A. That is me. 22 Q. First of all, other than to document 23 for Medicare, what was the purpose of you doing 24 a minimum data sheet, or is that the only 25 purpose?</p>	<p style="text-align: right;">Page 23</p> <p>1 answer. 2 Q. I'm trying to determine how much of 3 a role in terms of you being the person that's 4 filling it out do you see it as being helpful or 5 relevant or important to the nurses actually 6 caring for the patients on the floor, or is this 7 just something that's for insurance and that's 8 pretty much its role? 9 A. It's both. It serves as guidance on 10 the care, and it is a Medicare requirement, 11 both. 12 Q. So if nurses who are caring for the 13 patient are telling me that this isn't really 14 something they utilize in terms of developing 15 their nursing care plan, that would not be your 16 understanding of its purpose, one of its two 17 purposes? 18 A. Say that again, please. 19 Q. Sure. The nurses who are caring for 20 Mr. Pere, I refer them to this, and I say, well, 21 what about this and what about this, and they 22 say that's not something that we worry about. 23 It's for insurance. It doesn't impact on us. 24 We go on what we see in our assessments. This 25 doesn't count.</p>
<p style="text-align: right;">Page 22</p> <p>1 A. It is for Medicare, but you do 2 assessments for non-Medicare. The purpose is to 3 develop a care plan for each resident. 4 Q. So then the initial duty then is to 5 Medicare, and the secondary but I'm assuming 6 equally important duty -- 7 A. Yeah. I'm sorry I interrupted. I 8 guess not secondary. It is primary. For this 9 one it was a Medicare requirement. However, 10 this was not a comprehensive assessment. 11 You can see at the top it is called 12 a full assessment. The comprehensive would come 13 later, and that is the one that more 14 specifically develops the care plan. 15 Q. So things that appear in here are 16 given how much weight in terms of developing the 17 care plan until the comprehensive care plan can 18 be completed? 19 A. There's no measure. I don't know 20 that I can answer that in terms of quantity. 21 Q. Let me ask you this way. When I've 22 asked the nurses whose depositions I have taken 23 previously, basically this document has no 24 impact on their radar screen whatsoever. 25 MS. BREAUX: Objection. If you can</p>	<p style="text-align: right;">Page 24</p> <p>1 You as the person preparing it, is 2 it your understanding that the data that you're 3 taking time to compile here and put on the 4 record is something that the nurses are to be 5 utilizing and using as they develop their care 6 plan as one tool at their disposal? 7 MS. BREAUX: Objection. You can 8 answer. 9 A. I develop the care plan usually with 10 input from those that I mentioned before, the 11 social worker. 12 Q. Right. 13 A. I'm not sure how to answer that 14 question. 15 Q. Let me just keep reasking it. 16 A. I keep losing the question within 17 all the words. 18 Q. Let me just try and see if we can 19 get to it. Is your responsibility in compiling 20 this -- let's just put Medicare aside. Let's 21 not make that an issue so we don't complicate 22 it. 23 Is this supposed to be the beginning 24 of the care plan for Mr. Pere when he comes in? 25 This is a Bachelor's trained nurse who is</p>

6 (Pages 21 to 24)

<p style="text-align: right;">Page 25</p> <p>1 developing and asking these questions, and this 2 is like, okay, nurses who are caring for him, 3 here's where we start with our care plan? 4 A. Yes. 5 Q. So then looking at it from their 6 point of view, that is something that they can 7 be relying on as they begin to develop their 8 care plan as they get to become more familiar 9 with the patient, yes or no? 10 A. Please, repeat. 11 Q. Sure. 12 (Record read.) 13 A. The nurses don't -- they don't know 14 how to interpret this, if you're talking about 15 the charge nurses, the nurses on the floor, the 16 direct caregivers. They don't use this form. 17 Q. So how then when you say that you're 18 in charge of developing the nursing care plan, 19 how then can that information be something that 20 can be digested, if you will, by the floor 21 nurses? 22 A. We put a care plan into place. 23 Q. Where in the record would I find the 24 care plan that was put into place? 25 A. This was a five-day assessment. The</p>	<p style="text-align: right;">Page 27</p> <p>1 needs care plan at risk for accidents and 2 injury. 3 MS. BREAU: Is this it, Jackie? 4 MS. TRESL: This is it. 5 MS. BREAU: I'm going to state an 6 objection to all questions relating to this 7 document. Go ahead. 8 Q. Who signed this care plan at the 9 bottom? 10 A. That's me. 11 Q. So you prepared this immediate needs 12 care plan? 13 A. Correct. 14 Q. How did you come up with this care 15 plan? What information did you use to fill this 16 out? 17 A. I would use the information that I 18 had at that time, whatever would be from the 19 medical records including hospital records, and 20 in conversation with the direct care staff, 21 their input as well. 22 Q. So when you're filling this out 23 then, I can assume from what you just said that 24 you have reviewed his medical records let's say 25 from before he came to Rockynol if they're</p>
<p style="text-align: right;">Page 26</p> <p>1 full care plan is not completed until the 2 14-day, the comprehensive assessment, when that 3 is done. 4 Q. Go ahead. 5 A. But there are care plans that may be 6 put in place prior to that. It doesn't mean you 7 have to wait for 14 days. A lot of times the 8 social worker may put a care plan on as she sees 9 fit. You have up to 14 days because it changes 10 often. 11 Q. Show me in the record what you would 12 consider to be a care plan that was implemented. 13 A. Sure. Like here is one (indicating) 14 from a social worker. There's one. Here is one 15 on admission. There's the dietician's. These 16 are all care plans (indicating). 17 Q. We'll refer to those then. We went 18 through these yesterday, so let's go through 19 them together. Maybe your counsel can give you 20 a copy because this is all I have. 21 MS. BREAU: What are you referring 22 to? 23 MS. TRESL: Let's start with 24 adjustment to nursing home. Actually, let's 25 just skip that one. Let's go to the immediate</p>	<p style="text-align: right;">Page 28</p> <p>1 available? 2 A. I usually do not have the 3 information before someone comes to Rockynol. 4 Q. Didn't you say you use the medical 5 records information? 6 A. Yes. 7 Q. What medical records information are 8 you referring to then? 9 A. Transfer records from the hospital, 10 any other records that the hospital may send 11 with the person when they are admitted. 12 Q. Under the goals that you filled out 13 on this, can you tell me what you checked? 14 A. The goal would be to be free of 15 falls. 16 Q. Do you have any idea why you checked 17 that? 18 A. That's a goal for everyone. We want 19 to keep them safe and free of falls. 20 Q. So if I looked at almost all the 21 immediate needs care plans that you filled out, 22 most of them would have a check for free of 23 falls? 24 A. That's correct. 25 Q. So there's no special emphasis put</p>

7 (Pages 25 to 28)

<p style="text-align: right;">Page 29</p> <p>1 on someone who has a history of falls or who 2 doesn't have a history of falls, we just don't 3 want anyone to fall? 4 A. The special emphasis is usually 5 included in the interventions, but yes, we do 6 not want anyone to fall. 7 Q. So if we knew that Mr. Pere had 8 fallen 15 times before he came to Rockynol in 9 the two weeks before he came, and we know that 10 for all patients you're checking free of falls 11 or most patients you're checking free of falls, 12 where would we look in this record to see that 13 we knew that Mr. Pere was especially at a high 14 risk of falls because he had a history of 15 falling? 16 MS. BREAUX: Objection. Go ahead. 17 A. Where would you see it? 18 Q. Yes. 19 A. Anywhere on here. 20 Q. Do we see anywhere in here that it's 21 reflected, assuming that I'm correct, that he 22 had a long, long history of falls before he came 23 to Rockynol? Do we see anywhere in your 24 documentation that you were aware of that? 25 A. No.</p>	<p style="text-align: right;">Page 31</p> <p>1 later? 2 MS. BREAUX: Objection. Go ahead. 3 A. Say that again. I apologize. 4 Q. If you have a patient that you're 5 admitting and just hypothetically he has fallen 6 ten times in the last two weeks let's say, is 7 that information that you ascertain when you're 8 doing your MDS and you're compiling your at risk 9 for accidents care plan, or is that something 10 that kind of evolves over the next two, three, 11 four, or five days that you discover? 12 MS. BREAUX: Objection. Go ahead. 13 A. It can be either. It can be found 14 immediately, or it can be something that is 15 learned later from family. 16 Q. So then there's no mechanism whereby 17 when a patient comes in if they have had a lot 18 of falls and a lot of problems with those kinds 19 of issues, there's no mechanism in place where 20 you establish that fairly early on in the 21 admission gathering process? 22 A. There's a fall risk assessment that 23 is done on admission. 24 Q. Let's refer to that then. 25 A. Okay.</p>
<p style="text-align: right;">Page 30</p> <p>1 MS. BREAUX: Objection. 2 A. No. 3 Q. And if you had been aware of that, 4 where would we see that in this care plan? 5 A. Probably in the problems/needs 6 section. 7 Q. What would you have checked had you 8 known that he had a long history of falling? 9 A. I would have written it in, history 10 of falls, just like I did for a diagnosis of 11 Parkinson's disease. 12 Q. Is that something that you typically 13 ask, do you have a history of falling, to his 14 family or to him, or do you just think that 15 maybe you'll find it out as the medical records 16 come? How is that something that you determine? 17 A. It can be -- it usually is found 18 from -- well, it can be found from anywhere, but 19 typically the medical records. 20 Q. If the patient has been falling for 21 the two weeks previous to him coming to you, is 22 that something that you generally know at the 23 time that you are doing your MDS sheet and 24 compiling this care plan, or is that information 25 that you usually get two, three, or five days</p>	<p style="text-align: right;">Page 32</p> <p>1 Q. I think your counsel will provide 2 that to you while I look for it. For the 3 record, this would be the fall risk assessment. 4 At the bottom it has low risk, moderate risk, 5 and high risk, and it says Rockynol Retirement 6 Center up at the top left corner. 7 MS. BREAUX: I'm going to object 8 again. 9 Q. Explain to me how this fits into the 10 answer to my last question. 11 A. What was your last question? 12 MS. TRESL: Would you read my last 13 question and her answer, please? 14 (Record read.) 15 Q. And is this the document that you're 16 referring to? 17 A. This is the document that is 18 completed on admission. 19 Q. This is the document whereby you try 20 and determine if people have had a lot of 21 history of falls; correct? 22 A. Yes. It's one of the ways. 23 Q. If you can, read for me in that 24 first column under the fall history what is 25 checked in terms of his history of falls.</p>

8 (Pages 29 to 32)

<p style="text-align: right;">Page 33</p> <p>1 A. Multiple history of falls.</p> <p>2 Q. Does that put him at a heightened</p> <p>3 possibility that he may be at risk for falls?</p> <p>4 A. Yes.</p> <p>5 Q. How is that implemented then into</p> <p>6 your care plan that we were referring to just a</p> <p>7 little bit ago which is the immediate needs care</p> <p>8 plan at risk for accidents and injury?</p> <p>9 A. How does it fall into place?</p> <p>10 Q. Yes. Where in this document that</p> <p>11 you have filled out that you have signed your</p> <p>12 name to is there evidence that you knew that he</p> <p>13 had a multiple history of falls?</p> <p>14 A. There isn't specifically written</p> <p>15 out, but I recognized that there was a need to</p> <p>16 do the care plan, and this was initiated. The</p> <p>17 dates are the same. I couldn't tell you whether</p> <p>18 I did it at the same time as this nurse</p> <p>19 completed that or following the time the nurse</p> <p>20 completed that.</p> <p>21 Q. I guess what I'm looking for is,</p> <p>22 because it's sort of a circular process here,</p> <p>23 for everyone who comes in, more or less the goal</p> <p>24 is to be free of a fall. We don't see here in</p> <p>25 the at risk care plan that you filled out that</p>	<p style="text-align: right;">Page 35</p> <p>1 this way. You get a brand new patient that you</p> <p>2 don't know, he's 85 years old, he's very tall,</p> <p>3 and he has got a multiple history of falls. You</p> <p>4 complete a very in-depth minimum data set, which</p> <p>5 we will go through, but take my word for it and</p> <p>6 we can determine it later, where you repeatedly</p> <p>7 talk about the need for supervision,</p> <p>8 supervision, supervision, twos and threes, twos</p> <p>9 and threes. Perhaps I'm reading it incorrectly,</p> <p>10 but let's just say that that's the argument.</p> <p>11 You're preparing the care plan or</p> <p>12 you're initiating it through these other</p> <p>13 documents that we have talked about. I want to</p> <p>14 know where, in deposing these other nurses who</p> <p>15 cared for him, how that is imparted to them that</p> <p>16 this is a man who may be at a higher risk for</p> <p>17 falls?</p> <p>18 A. Through the care plan would be the</p> <p>19 way because of these problems and needs that I</p> <p>20 have listed here, the orthostatic hypotension,</p> <p>21 et cetera.</p> <p>22 Q. You're telling me to keep a clear</p> <p>23 pathway, furniture locked, keep the needed items</p> <p>24 within reach, remind the patient to use the call</p> <p>25 bell, and to receive PT and OT is a sufficient</p>
<p style="text-align: right;">Page 34</p> <p>1 you note that he has a multiple history of</p> <p>2 falls, so you have referred me to another</p> <p>3 document. Yet you're more or less responsible</p> <p>4 for initiating the care plan?</p> <p>5 A. Correct.</p> <p>6 Q. In a patient who has a multiple</p> <p>7 history of falls, does that put him at a higher</p> <p>8 risk for accidents and injury?</p> <p>9 A. It may or may not. It would -- if</p> <p>10 they had a multiple history of falls, it would</p> <p>11 increase their number on this fall risk</p> <p>12 assessment. However, it could have been any</p> <p>13 reason contributing to the falls prior to the</p> <p>14 hospitalization, and then in the hospitalization</p> <p>15 it could have been corrected.</p> <p>16 Q. Do we know, though, if it was</p> <p>17 corrected? Is there evidence here that someone</p> <p>18 said, oh, he had a multiple history of falls,</p> <p>19 but it has been corrected, and now we don't have</p> <p>20 to worry now that he has been admitted to</p> <p>21 Rockynol?</p> <p>22 MS. BREAUX: Objection. Go ahead.</p> <p>23 A. No. It doesn't say that on here.</p> <p>24 Q. Is that something that is relevant</p> <p>25 in terms of developing -- just think about it</p>	<p style="text-align: right;">Page 36</p> <p>1 safety precaution for a man with a multiple</p> <p>2 history of falls?</p> <p>3 MS. BREAUX: Objection. You can</p> <p>4 answer.</p> <p>5 A. Would you repeat that, please? This</p> <p>6 was on the first day of admission, as I recall.</p> <p>7 (Record read.)</p> <p>8 A. So the assessment period was still</p> <p>9 ongoing, so initially, yes, this would be</p> <p>10 acceptable.</p> <p>11 Q. Following the fall protocol would</p> <p>12 not be acceptable in a man with a multiple</p> <p>13 history of falls? That's a question. It's here</p> <p>14 in the intervention.</p> <p>15 A. Okay.</p> <p>16 Q. Would it have been inappropriate to</p> <p>17 have checked follow fall protocol in a patient</p> <p>18 with a multiple history of falls who is brand</p> <p>19 new to you that you don't know?</p> <p>20 A. It would not have been</p> <p>21 inappropriate.</p> <p>22 Q. Is there a reason why it wasn't</p> <p>23 checked?</p> <p>24 A. Not that I can remember.</p> <p>25 Q. Was there any reason not to have</p>

<p style="text-align: right;">Page 37</p> <p>1 checked it?</p> <p>2 A. Not that I can remember.</p> <p>3 Q. In a patient with a multiple history</p> <p>4 of falls, would that be something that you might</p> <p>5 want to consider, following a fall protocol?</p> <p>6 MS. BREAUX: Objection. Go ahead.</p> <p>7 A. These items are all part of our fall</p> <p>8 protocol.</p> <p>9 Q. So you're telling me that follow</p> <p>10 fall protocol should actually be at the top of</p> <p>11 this list, listed as number one, and all of</p> <p>12 these other items should be A, B, C, D, E, F, G?</p> <p>13 A. No.</p> <p>14 Q. My question to you, Kelly, is first</p> <p>15 of all, what is following a fall protocol? What</p> <p>16 is that?</p> <p>17 A. It's exactly those items that are</p> <p>18 listed, and that could be why I didn't check</p> <p>19 them. The fall protocol varies from facility to</p> <p>20 facility, and this is preprinted where we select</p> <p>21 those that we want to have the staff be aware</p> <p>22 of.</p> <p>23 Q. You want the staff to be aware of</p> <p>24 it. In his case you didn't want the staff to be</p> <p>25 aware of following a toileting plan?</p>	<p style="text-align: right;">Page 39</p> <p>1 A. That's the minimum to be done.</p> <p>2 That's not the standard.</p> <p>3 Q. Can you show me anywhere in this</p> <p>4 record where anyone is reassessing his chance or</p> <p>5 risk for accidents relative to this care plan?</p> <p>6 A. It would be -- it would be the</p> <p>7 nurse's notes.</p> <p>8 Q. Can you show me in the nurse's notes</p> <p>9 where they are reassessing his risk for falls?</p> <p>10 A. Let me -- there would be no -- there</p> <p>11 would be no formal reassessment of falls in</p> <p>12 terms of -- why are you giving me this?</p> <p>13 Q. I'm going to tell you in a moment.</p> <p>14 Are you familiar with that document?</p> <p>15 A. Yes.</p> <p>16 Q. What is that document?</p> <p>17 A. This is a caregiver plan of care.</p> <p>18 Q. Who uses that?</p> <p>19 A. Any of the direct staff. Typically,</p> <p>20 it is written in language that a nursing</p> <p>21 assistant would understand.</p> <p>22 Q. Who puts that together so that the</p> <p>23 nursing assistants can understand it?</p> <p>24 A. It would either be -- it would be</p> <p>25 the supervising nurses. Any LPN or RN can do</p>
<p style="text-align: right;">Page 38</p> <p>1 A. Not at that time.</p> <p>2 Q. You did not want the staff to</p> <p>3 provide visual prompts to ask for help?</p> <p>4 A. No, not at that time.</p> <p>5 Q. You did not want them to use an</p> <p>6 electronic prompt?</p> <p>7 A. That's correct.</p> <p>8 Q. You did not want them to follow the</p> <p>9 fall protocol, whatever is meant by that little</p> <p>10 box?</p> <p>11 A. No.</p> <p>12 Q. It was okay for them to reposition</p> <p>13 the furniture?</p> <p>14 A. On the first day it would have been.</p> <p>15 Q. Show me on the second or third day</p> <p>16 where there's any reassessment on whether some</p> <p>17 of those boxes should have been checked.</p> <p>18 A. Those -- the reassessment would have</p> <p>19 been done with the 14-day assessment.</p> <p>20 Q. So from day one to day 14, no</p> <p>21 interventions are changed unless perhaps the</p> <p>22 patient falls? You just go by what you have</p> <p>23 done on the first day, and you wait 14 days to</p> <p>24 change your interventions where your goal is to</p> <p>25 be free from falls?</p>	<p style="text-align: right;">Page 40</p> <p>1 this.</p> <p>2 Q. Where do they get this information</p> <p>3 so that can be filled out?</p> <p>4 A. From the resident, from the family,</p> <p>5 from the chart.</p> <p>6 Q. So they're asking the resident or</p> <p>7 family the transfer mobility status?</p> <p>8 MS. BREAUX: Objection. Go ahead.</p> <p>9 A. No, no, that's -- there's many ways</p> <p>10 like --</p> <p>11 Q. Well, that's what I'm trying to</p> <p>12 determine from you. I asked you how that's</p> <p>13 filled out, and you said the family, the</p> <p>14 patient, or the chart. I'm asking you</p> <p>15 specifically, transfer mobility status, did they</p> <p>16 learn that from the patient, the chart, or the</p> <p>17 family?</p> <p>18 A. Either from the chart or from</p> <p>19 observation of the resident.</p> <p>20 Q. Would that be initially, or would</p> <p>21 that be as the days go on? Is that something</p> <p>22 that's started the first day, the second day, or</p> <p>23 the third day?</p> <p>24 A. It's typically started at the</p> <p>25 beginning of their stay and can be updated as</p>

<p style="text-align: right;">Page 41</p> <p>1 needed.</p> <p>2 Q. If it were updated, would I see that</p> <p>3 in the record that it was being updated?</p> <p>4 A. Often -- sometimes, yes. Sometimes</p> <p>5 we would date it. Sometimes people just would</p> <p>6 write something in. The nursing staff would</p> <p>7 observe something and write something in.</p> <p>8 Q. Can you look in the record to see if</p> <p>9 that was ever done or if it was updated?</p> <p>10 A. It doesn't look like -- this was</p> <p>11 on -- I don't know. I don't know.</p> <p>12 Q. That's fine.</p> <p>13 A. There's no way of telling whether</p> <p>14 this one was updated other than having a date of</p> <p>15 January 30th.</p> <p>16 Q. Let's go through your minimum data</p> <p>17 sheet. Specifically, I would like to look first</p> <p>18 of all at -- well, let's just go in order of</p> <p>19 what I have highlighted, section C under</p> <p>20 hearing.</p> <p>21 So that I know that I'm reading this</p> <p>22 correctly, when you assessed Mr. Pere in his</p> <p>23 full assessment form, how did you assess his</p> <p>24 hearing?</p> <p>25 A. Hears in special situations only.</p>	<p style="text-align: right;">Page 43</p> <p>1 Q. Would you like the acute care plan?</p> <p>2 Would you like the one that we just looked at?</p> <p>3 Here, you tell me. I mean, you have that.</p> <p>4 A. This was completed on 2-2, so there</p> <p>5 would not be a care plan at that point.</p> <p>6 Q. What was completed on 2-2?</p> <p>7 A. This MDS assessment.</p> <p>8 Q. Okay. So you filled out this at</p> <p>9 risk for accidents and injury on the first day</p> <p>10 before you started the minimum data sheet, or</p> <p>11 did you not complete this? It's dated 1-29.</p> <p>12 A. That's correct.</p> <p>13 Q. So you filled this out two days</p> <p>14 before you completed the minimum data sheet?</p> <p>15 A. Right.</p> <p>16 Q. So at the time that you filled this</p> <p>17 out, you were not aware that he had a hearing</p> <p>18 problem?</p> <p>19 A. I may not have been. I can't</p> <p>20 recall.</p> <p>21 Q. Would that be something that would</p> <p>22 be important in terms of deciding if he was at</p> <p>23 risk for accidents or injury?</p> <p>24 MS. BREAUX: Objection. Go ahead.</p> <p>25 A. Vision seems to be more of a risk</p>
<p style="text-align: right;">Page 42</p> <p>1 Speaker has to adjust tonal quality and speak</p> <p>2 distinctly.</p> <p>3 Q. That says to me, the lay person,</p> <p>4 that he has maybe some hardness of hearing; is</p> <p>5 that correct?</p> <p>6 A. Yes.</p> <p>7 Q. If a person has some hardness of</p> <p>8 hearing and nursing staff are giving him</p> <p>9 instructions, is it possible that he will miss</p> <p>10 some of the verbal messages that he is getting?</p> <p>11 MS. BREAUX: Objection. Go ahead.</p> <p>12 A. It could be possible.</p> <p>13 Q. Do we see anywhere reflected in the</p> <p>14 care plan or in the risk assessments where that</p> <p>15 is documented, that the patient is hard of</p> <p>16 hearing and it may be that he may have some</p> <p>17 special needs relative to that?</p> <p>18 A. In the medical record?</p> <p>19 Q. In the nursing care plan. Since</p> <p>20 you're the one who initiates the nursing care</p> <p>21 plan through your MDS, that's primarily what I'm</p> <p>22 interested in.</p> <p>23 A. I would need to look.</p> <p>24 Q. Please, do.</p> <p>25 A. Could I have something to look at?</p>	<p style="text-align: right;">Page 44</p> <p>1 factor for accidents or injuries, something</p> <p>2 would get in your way that you wouldn't see.</p> <p>3 Q. So you're disagreeing with the care</p> <p>4 plan that puts vision and hearing side by side</p> <p>5 as one of the problems that need to be related</p> <p>6 to the patient?</p> <p>7 A. No. Hearing could be a risk factor</p> <p>8 if -- I don't know -- if someone yelled, hey,</p> <p>9 stop, look where you're going, and they didn't</p> <p>10 hear and kept going.</p> <p>11 Q. It wouldn't be a problem if someone</p> <p>12 were giving you directions on how to sit on the</p> <p>13 side of the bed because you had orthostatic</p> <p>14 hypotension and you were perhaps missing the</p> <p>15 message on your safety and you were standing up</p> <p>16 too quickly, hearing would not be important in</p> <p>17 that scenario?</p> <p>18 MS. BREAUX: Objection. Go ahead.</p> <p>19 A. Yes. It would be.</p> <p>20 Q. You weren't able to determine this</p> <p>21 or didn't have the time to determine it or</p> <p>22 weren't able to follow through to determine it</p> <p>23 when you were putting his immediate needs care</p> <p>24 plan together for him?</p> <p>25 A. I can't recall.</p>

<p style="text-align: right;">Page 45</p> <p>1 Q. In your MDS you noted that he had I 2 believe number three, and we can certainly flip 3 over there, but you can take my word for it if 4 you want. 5 Bowel incontinence you marked as a 6 three and bladder incontinence as a three. My 7 section H says that that means that he's 8 frequently incontinent, and based on this MDS, 9 it looks like you assessed that he was 10 frequently incontinent of both bowel and 11 bladder. Would you disagree with that? 12 A. No. 13 Q. Is there a reason why under 14 problems/needs related to at risk for injuries 15 incontinence is not checked? 16 A. Yes, because on the day of 17 admission, it must not have -- it could have not 18 been to my attention. Only after doing my 19 assessment on the 2nd would I have known that. 20 Q. So you're telling me then that as 21 you're compiling your immediate needs care plan, 22 it's not important enough to gather all this 23 kind of data that is related to needs and 24 problems? It's not important to determine if 25 they are hard of hearing or have incontinence</p>	<p style="text-align: right;">Page 47</p> <p>1 Q. You were not working on the day that 2 he came in that you filled out his at risk for 3 accidents immediate needs care plan? 4 A. I believe I was as well. 5 Q. Is there a reason why you didn't 6 fill out the minimum data set on the day that he 7 was admitted? 8 A. Is there a reason that I didn't? 9 Yes, because usually you wait five days to 10 complete it. 11 Q. Okay. So you're telling me that 12 when you admit a patient and you're in charge of 13 preparing your care plan and the goal is to keep 14 them free of falls that you compile this at risk 15 for accidents and injury, and in terms of 16 inquiring about the problems and needs related 17 to these problems that we just discussed, you 18 get what you get when the patient first comes 19 in, and five days later you'll do a more 20 complete screening to determine the level of 21 supervision they need? 22 MS. BREAU: Objection. You can 23 answer. 24 Q. I'm just trying to determine, Kelly, 25 that you have a very lot of old and frail</p>
<p style="text-align: right;">Page 46</p> <p>1 when you're compiling this immediate needs care 2 plan at risk for accidents and injury? 3 A. It is important. It just may not 4 have been available at that time. 5 Q. You had no duty to determine which 6 of those were important considerations in his 7 care plan? 8 A. I mean, there may not have been any 9 documentation to say that he was incontinent at 10 that time. He could have been -- let me go back 11 to this. 12 Frequently incontinent could mean 13 that he was continent on one day and incontinent 14 the next. 15 Q. Is your testimony that you filled 16 this out on February 2nd, 2002? 17 A. What's that? 18 Q. Your MDS. 19 A. Yes. 20 Q. What is the day that Mr. Pere died? 21 A. I believe it was 2-2. 22 Q. So on the day that Mr. Pere died, 23 you were filling out his minimum data set? 24 A. Right, because I was there and 25 working that day.</p>	<p style="text-align: right;">Page 48</p> <p>1 people. 2 A. Uh-huh. 3 Q. There are lots and lots of problems 4 going on. The number one goal for everyone 5 seems to be keeping them free from falls. 6 Things like frequent incontinence and hearing 7 problems, at least from my perspective, are 8 very, very important in terms of patient safety. 9 Now, when I ask you why these things 10 aren't checked, you say, well, you were going to 11 wait five days, the information wasn't available 12 to you, and there's a variety of reasons why you 13 say that. My concern is that this is immediate 14 needs. That means right now in your face this 15 is what this patient needs so he doesn't have a 16 fall. 17 If there are things going on that 18 aren't checked here, can we agree that it's less 19 likely that your care plan is going to reflect 20 interventions that are specific to the problems 21 that that patient experiences? 22 MS. BREAU: Objection. 23 A. Can you repeat the last two 24 sentences? 25 (Record read.)</p>

<p style="text-align: right;">Page 49</p> <p>1 MS. BREAUX: Do you want to rephrase 2 the question? 3 Q. Not a problem. Not a problem. We 4 can be here all day. That's not a problem. 5 First, let me clarify because we've 6 kind of been all over the place. 7 Your testimony now is that this 8 minimum data sheet is not filled out until five 9 days after the patient is there. It's not 10 something that you fill out on the first day. 11 A. Correct. 12 Q. So on the first day when you're in 13 charge of setting up the care plan for the 14 patient, the sheet that you fill out is the 15 immediate needs care plan; is that correct? 16 A. That's correct. 17 Q. Underneath the immediate needs care 18 plan says at risk for accidents and injury; 19 correct? 20 A. Yes. 21 Q. And I believe that we agreed that 22 being free from falls is a goal for all patients 23 and it's very important? 24 A. Yes. 25 Q. So important that I believe you said</p>	<p style="text-align: right;">Page 51</p> <p>1 A. What was the question, is it 2 important? 3 Q. Yes. 4 A. Yes. 5 Q. Why is it important if the patient 6 is incontinent? How does that relate to the 7 risk for accidents or injury? 8 A. How is it important? 9 Q. How does it relate? 10 A. Incontinence relates to falls in 11 terms of being in a hurry, that type of thing. 12 Q. So can we agree that that's an 13 important problem and that if a patient has it 14 in terms of their being at risk for accidents, 15 it should be documented? 16 MS. BREAUX: Objection. Go ahead. 17 A. Yes. 18 Q. Is it documented on this record? 19 A. It is not documented on the 20 immediate needs care plan. 21 Q. Is there anywhere that it's 22 documented that he has frequent incontinence 23 until we get to your minimum data sheet? 24 A. Can I see just this one page? 25 Q. You sure can.</p>
<p style="text-align: right;">Page 50</p> <p>1 that on just about everybody's care plan that 2 box is checked? 3 A. Yes. 4 Q. When I asked you how the special 5 risks of that patient are reflected, you 6 referred me to the interventions? 7 A. Correct. 8 Q. My question is, is it important to 9 know if a patient has significant hearing 10 problems in terms of their risk of falls? 11 A. It is one of the factors that could 12 contribute. 13 Q. Is it important? Is it something 14 that should be documented? 15 MS. BREAUX: Objection. 16 A. Is it important? Is it something 17 that should be documented? It is important. 18 Q. Should it be documented? 19 A. Should it be documented where? 20 Q. Right where your finger is. 21 A. Yes. 22 Q. Is it important if a patient has 23 significant incontinence of bowel and bladder in 24 terms of their at risk for accidents and injury? 25 MS. BREAUX: Objection.</p>	<p style="text-align: right;">Page 52</p> <p>1 A. I don't think I have it, no. 2 Q. So you are looking at the acute care 3 plan, and tell me -- keep looking. 4 A. Additionally, on the acute care plan 5 an intervention is to monitor for risk for 6 falls. 7 Q. So we can agree looking at the 8 record under the acute care plan dated 1-29, 9 which is the day of his admission, that we don't 10 see that there's a problem or a need related to 11 incontinence; correct? 12 A. Correct. 13 Q. We don't see that there's a problem 14 or a need related to hard of hearing; correct? 15 A. Correct. 16 Q. We don't see anywhere in here, and 17 stop me if I'm wrong, that he has a multiple 18 history of falls? 19 A. No. 20 Q. Can we agree that a multiple history 21 of falls until we know whether or not they have 22 been resolved may put him at a higher risk to 23 have falls when he's at Rockynol? 24 MS. BREAUX: Objection. 25 A. It may.</p>

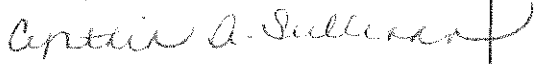
<p style="text-align: right;">Page 53</p> <p>1 Q. Now, let's go back to this, although 2 this probably becomes less important. So all of 3 this that you filled out you filled out after he 4 was dead? 5 A. Yes, with the information, however, 6 accompanying from -- information prior to 2-1. 7 That was my observation period. 8 Q. Where would we find the notes that 9 you put together relative to your observation 10 period? 11 A. The notes? 12 Q. I'm assuming when you say this was 13 compiled during or after an observation period, 14 is there a way that you could remember what you 15 were observing, or do you just remember in your 16 brain and you sit down at your minimum data 17 sheet and just type it out? 18 A. I would get information from the 19 chart or from conversations with the staff. 20 Q. So you're saying then from the 29th 21 until the 2nd you're gleaning things from the 22 chart and from the staff. That he needs a high 23 level of supervision, if I can refer you to G, 24 and H, that he's frequently incontinent, that 25 he's hard of hearing, that overall change in</p>	<p style="text-align: right;">Page 55</p> <p>1 Q. Who entered the information on the 2 computer? 3 A. I did. 4 Q. So we can agree that for this 5 document, at the time it was completed on the 6 computer Mr. Pere was dead; correct? 7 A. Correct. 8 Q. Backing it up, I believe what you're 9 telling me is that the data that you entered 10 after Mr. Pere was dead you had collected from 11 whatever sources from the day of his admission 12 until the day you sat down to prepare this 13 report; correct? 14 A. Correct. 15 Q. So during that observation period, 16 you were observing that he had a level of 17 incontinence of bladder and bowel that you rated 18 as a three. In terms of support for transfer, 19 you gave him twos and threes. In terms of 20 locomotion off the unit, you gave him threes and 21 twos. Toilet use, threes and twos. His overall 22 change in care needs had deteriorated. He needs 23 more support. He's on antidepressants, et 24 cetera, et cetera. 25 My point is that you're recognizing</p>
<p style="text-align: right;">Page 54</p> <p>1 needs has deteriorated, that would be section Q; 2 these are all things that you're determining in 3 your observation period as you prepare to 4 finalize your MDS sheet on the 2nd? Is that 5 correct? Was that a yes? 6 A. It was not an answer yet. 7 Q. Okay. 8 A. Yes. Some things come from the 9 chart. There are different time frames, and 10 many of these questions -- this is an involved 11 process, and it changes all the time, every 12 section. Some of the information is from the 13 time period when the resident is in the 14 facility. 15 Q. The question is, though, and I 16 understand that it's a complicated document and 17 it's a complicated process and human beings are 18 very complicated, but my very simple question 19 is, this document was prepared when Mr. Pere was 20 dead; we can agree on that? Unless you wrote it 21 at 7:00 in the morning on the 2nd, you dated it 22 on the 2nd, and presumably your shift doesn't 23 start until 8:00. 24 A. The information was entered into the 25 computer on the 2nd.</p>	<p style="text-align: right;">Page 56</p> <p>1 -- I mean, in section G, I'm assuming this is G, 2 change in ADL function has deteriorated. So you 3 independently of the nurses caring for Mr. Pere 4 from all of the sources that you're looking at 5 are saying this is a man who needs a lot of 6 supervision, he's deteriorating in many areas, 7 and he is persistently incontinent of bowel and 8 bladder? 9 MS. BREAU: Objection. 10 Q. All I need is a yes or no. I 11 understand it's a complicated process. 12 A. No. That's not what I'm saying. 13 Q. Just to answer my question then, and 14 you can elaborate how you want, is my statement 15 correct that these numbers that you're putting 16 in here are information that you're gathering 17 over a period of time from the first day you met 18 him on the 29th to the day you sat down at your 19 computer on the 2nd and entered it into the 20 computer? 21 A. Yes. 22 Q. So we can agree this is an 23 evolutionary process of assessment that's going 24 on with you from all these sources? 25 A. Yes.</p>

<p style="text-align: right;">Page 57</p> <p>1 Q. We can agree that after Mr. Pere is 2 dead, in looking at your minimum data sheet, 3 this is a man who you determined through these 4 multiple sources of data needed a great deal of 5 supervision in transferring, in ambulating, in 6 bowel and bladder, in deterioration in mood and 7 ability to do activities of daily living? All 8 you need to do is look at your numbers and see 9 what the numbers are and say yes or no. 10 MS. BREAUX: Objection. 11 A. No. 12 Q. Then let's go through them. 13 A. The reason being is you said -- 14 Q. Let's do section G. Perhaps I'm 15 misreading it. Maybe I'm not reading the form 16 correctly. Let's go to toilet use. 17 Now, explain to me when you give a 18 three for self-prep, it looks to me like that is 19 saying he needs extensive assistance, but 20 perhaps I'm reading it incorrectly. 21 A. It is for self-performance, and it's 22 for his performance over the last seven days, 23 and it would be, yes, extensive. 24 Q. For support it looks to me like he 25 needs limited assistance.</p>	<p style="text-align: right;">Page 59</p> <p>1 hearing, deterioration in ADL, who needs 2 significant help in transferring, in toileting, 3 in eating, in dressing, in locomotion, and I'm 4 just asking you if I'm reading that incorrectly. 5 Under bathing we have physical help 6 that he needs. 7 A. Everybody is different. This is the 8 help -- 9 Q. That's not the question. That's not 10 the question, Kelly. 11 A. Okay. 12 Q. The question is, in looking at this 13 document, it looks to me like you are noting 14 that he needs a lot of assistance, that he's 15 deteriorating, not improving, that he is hard of 16 hearing. 17 I understand that everybody is 18 different, but we're only looking at Mr. Pere, 19 and we're only looking at the documents that 20 you've compiled. This doesn't look like a man 21 who is on the mend and who is very independent 22 and doesn't need much assistance. 23 You wrote it. Does this mean that 24 he is very independent and does not need much 25 assistance?</p>
<p style="text-align: right;">Page 58</p> <p>1 A. He would need one-person physical 2 assistance, but he could have needed it once 3 during the last seven days. It is coded for the 4 most support provided over all the shifts during 5 the last seven days. You code it regardless of 6 the resident's self-performance classification. 7 If he required one-person physical 8 assist one time or more in the last seven days, 9 you put section G -- I don't know what letter 10 that would be -- I, toilet use. In the column B 11 you would put a two there. 12 Q. Let's draw your attention to 13 transfer. For support we have him listed as a 14 three. That looks to me like it's a two-person 15 physical assist. Would you agree with that 16 under transfer? 17 A. Yes. 18 Q. We can go through every one of these 19 little boxes if you like because I have all day 20 and all evening, but what I'm trying to say is 21 when I look at this document and review it, your 22 assessment that you did over the course from the 23 29th to the 2nd says to me that the information 24 you're gleaming is that this is a man who needs 25 significant support, has significant issues of</p>	<p style="text-align: right;">Page 60</p> <p>1 A. It does not mean that he is very 2 independent. 3 Q. What does it mean? 4 A. It means that there's a certain 5 level of assistance that in different ADLs that 6 he does need. 7 Q. Can we say that in absence of 8 looking at the acute care plan and all these 9 other things that we've looked at that nowhere 10 is it really reflected that he needs all of this 11 help? 12 I'm asking you. I mean, 13 interventions, we've gone through all the care 14 plans. We've talked about everything in terms 15 of the fall protocols. You're gathering 16 information that says that he needs a lot of 17 help and that he's deteriorating. I don't see 18 that reflected that the nurses knew that. I 19 don't see any change in care plan, I don't see 20 any fall protocols in place, and when I ask them 21 about it, they don't refer to this. So I want 22 to understand. 23 A. Right. This was not evaluated until 24 that, I don't know what day, the fifth day. 25 Q. I don't think it was the fifth day.</p>

<p style="text-align: right;">Page 61</p> <p>1 But even if it was the fifth day, you were 2 gathering that information from somewhere? 3 A. Right. 4 Q. I don't see that the nurses were 5 gathering the same information that you were 6 gathering because there's no change in anything 7 as these things -- no one notes that he's hard 8 of hearing. No one notes that he's confused. 9 No one notes a lot of these issues that we just 10 talked about. 11 Yet when I look at this, this seems 12 to be fairly significant in a man who needs a 13 lot of supervision and a lot of help. 14 A. There's a level of assistance. 15 Q. Is that reflected anywhere in the 16 care plan? If he needs a high level of 17 assistance because he is all these things that 18 we talked about, hard of hearing, incontinent, 19 dizzy, confused, and he has only got a low risk 20 of falls, where is that reassessed so that 21 someone says, hey, maybe he has a moderate risk 22 of falls or maybe -- 23 MS. BREAUX: Objection. 24 Q. -- he has a high risk of falls? 25 Where is that reflected in these care plans?</p>	<p style="text-align: right;">Page 63</p> <p>1 that started at day one that leaves out pretty 2 significant incontinence, hardness of hearing, 3 all the supervision that's needed, the fact that 4 the patient is allowed to ambulate on his own, 5 come and go as the notes reflect, and I'd invite 6 you to read them if you like, there's no 7 disconnect, there's no responsibility for the 8 nurses to know that in fact all these other 9 special needs are going on with him? 10 MS. BREAUX: Objection. 11 Q. It's not significant in the care 12 plan that he has frequent incontinence, that he 13 has hearing problems, that maybe additional 14 interventions might be needed? This document 15 stands on its own until 14 days have passed 16 unless the nurses, I don't know, intervene? 17 A. It may stand alone. 18 Q. And that's acceptable? 19 A. Yes. 20 Q. Why is that acceptable? 21 A. Because it is. Because I did not do 22 this full assessment until the 2nd. 23 Q. I understand that, Kelly. He was 24 dead. I understand that. 25 A. Right.</p>
<p style="text-align: right;">Page 62</p> <p>1 A. It's not. 2 Q. Should it be? 3 MS. BREAUX: Objection. 4 A. Up until the 14th day it could be. 5 Q. Up until the 14th day it doesn't 6 need to be reflected in the care plan? 7 A. No. 8 Q. What is the answer to the question? 9 Should somewhere in the nursing care plan that 10 the nurses are looking at every day, should it 11 be reflected that he needs a high level of care 12 and he's at high risk of falls because of the 13 things we just talked about? 14 MS. BREAUX: Objection. You can 15 answer. 16 A. Yes. 17 Q. Yes, it should be reflected? 18 A. Yes. 19 Q. If it's not reflected, does that 20 fall below what you would expect from nursing 21 care at a nursing home whose number one concern 22 is to keep a patient free from falls? 23 MS. BREAUX: Objection. 24 A. No. It does not fall below. 25 Q. So it's acceptable that a care plan</p>	<p style="text-align: right;">Page 64</p> <p>1 Q. But you were making observations 2 over that period of time compiling this, and I 3 don't see anywhere reflected in these care plans 4 -- what is the point of a care plan? Maybe if 5 we go back to very elemental concepts. What is 6 the point of having a care plan for nursing? 7 A. To coordinate the care. 8 Q. Why are we trying to coordinate the 9 care? 10 A. To give individualized care. 11 Q. Why do we want to give 12 individualized care to a patient like Mr. Pere? 13 A. Because everybody has different 14 needs. 15 Q. What would one of Mr. Pere's needs 16 be? 17 A. That he needs therapy could be one 18 of his needs. 19 Q. How about free of falls since that 20 was the box that was checked on the care plan 21 that we talked about? 22 A. Certainly, that would be a goal of 23 his. 24 Q. Would that have been something that 25 should be reflected on the nurse's care plan</p>

<p style="text-align: right;">Page 65</p> <p>1 because the care plan is about individual needs 2 and continuity of care? 3 A. Repeat that, please. 4 Q. Is that something that should be 5 reflected in the care plan? 6 A. Yes. 7 Q. Is it reflected in the care plan? 8 A. That he be free of falls? 9 Q. The conditions by which he is 10 changing, the hard of hearing, the incontinence, 11 the confusion, anything that's documented in the 12 nursing notes. 13 Is there any place on the nursing 14 care plan where you see this continuity in 15 communicating the observations that you make, 16 and everyone sees he needs lots of supervision 17 and there's a lot of stuff going on with him 18 that might put him at risk for an accident or 19 injury in his immediate care plan? 20 Is there anything that prevented 21 somebody from going back on the 30th or the 1st 22 and checking hearing problems, incontinence? Is 23 there any thought to maybe not repositioning his 24 furniture, maybe providing visual prompts to ask 25 for help in a patient like Mr. Pere?</p>	<p style="text-align: right;">Page 67</p> <p>1 there in the chart. You wouldn't find anything 2 like that because he was deceased. 3 Q. At some point is this information 4 that the nurses know that they're sharing with 5 you, is that something that needs to be changed 6 let's say in terms of his fall assessment risk? 7 Does somebody maybe need to mark checks in his 8 box to check that he has dizziness? 9 MS. BREAU: Objection. 10 A. Would you repeat that? 11 Q. I can say it. That's fine. 12 When I asked the nurses about the 13 care plan, they tell me it's based on what they 14 observe. You tell me that the care plan is 15 initiated when he comes in. Nurses are telling 16 you all kinds of things that help you fill out 17 this minimum data sheet. 18 I don't see anywhere that it's 19 reflected in Mr. Pere's care plan that he's at 20 an increased risk for falls based on the new 21 knowledge that has been unearthed by you through 22 staff, the incontinence, the hard of hearing, 23 the dizziness, and the confusion. 24 All I want to know is as that 25 information unfolded, I believe that we agree</p>
<p style="text-align: right;">Page 66</p> <p>1 Is it like you come in on the first 2 day, this is what's presented, and that's it for 3 14 days unless something big comes up and 4 something changes? 5 A. No. 6 Q. You think that it's okay that the 7 care plan does not reflect these changes that 8 you were observing that you used for your 9 minimum data sheet? 10 MS. BREAU: Objection. 11 Q. That's acceptable nursing care? 12 A. That's not what I'm saying. I did 13 not make these observations -- I think I don't 14 even -- maybe I'm inappropriate in saying this. 15 I did not come in on Saturday, and I don't -- I 16 don't know how to say this. 17 This assessment is representative of 18 what was uncovered in the chart and things that 19 I talked about with staff, so whenever I 20 completed this document on the 2nd -- I mean, 21 the nurses already knew this information. This 22 is what I would have gathered from their 23 documentation. 24 So on the 2nd when this resident is 25 deceased, you wouldn't find what I took from</p>	<p style="text-align: right;">Page 68</p> <p>1 that that puts him at an increased risk for 2 falls. 3 We can go through it again; the 4 hardness of hearing, the incontinence, the 5 dizziness, the confusion. Would you agree that 6 those things put him at an increased risk for 7 falls? 8 A. Yes. 9 Q. Can you agree by looking at the 10 records, and you are welcome to look at my 11 chart, that there is nowhere reflected that 12 someone said, gee, new pieces of the puzzle 13 which are available have become known to us, and 14 maybe we had better rethink that he may be at an 15 increased risk for falls? 16 MS. BREAU: Objection. 17 Q. Apart from this (indicating). This 18 has nothing to do with my question. I'm saying 19 in the care plan for him. You initiated the 20 care plan, you started it, so unfortunately you 21 have to be one of the people that gets 22 questioned about it. 23 Is there anywhere in the records 24 that the observations that you used for this, 25 put this apart (indicating), observations that</p>

<p style="text-align: right;">Page 69</p> <p>1 are readily available because you gleaned them 2 from somewhere, so presumably you said you got 3 them from the nurses, is there anywhere 4 reflected that as people got to know Mr. Pere 5 better that his status as a fall risk, low, 6 moderate, or high, was based on these 7 observations? 8 MS. BREAU: Objection. 9 A. No. 10 Q. Should it have been? 11 A. Should it have been reflected on the 12 fall risk assessment? 13 Q. Somewhere in this medical record 14 should it have been reflected that he may not 15 any longer be a seven as this information became 16 available; his bowel incontinence, his bladder 17 incontinence, his hardness of hearing, his 18 confusion, his history of multiple falls, his 19 dizziness, his vertigo, his syncope? 20 MS. BREAU: Objection. 21 Q. And maybe it's not important, and 22 I'm just off the mark here. 23 A. No. It is important, but that 24 information would be found in the nurse's notes. 25 Q. If I look in the nurse's notes and</p>	<p style="text-align: right;">Page 71</p> <p>1 A. It may or may not. It would on a 2 fall risk assessment. 3 Q. If he had been listed as a moderate 4 risk or high risk, would it have changed the 5 kind of interventions that you checked initially 6 on your acute care plan? 7 In other words, when you filled this 8 out on the 29th, if you would have checked the 9 box confusion, hearing problems, incontinence, 10 and balance problems, because we know he had 11 orthostatic hypotension and we know by 12 definition as a nursing diagnosis orthostatic 13 hypotension gives you balance problems, so if on 14 the day you filled this out, Kelly, you were 15 able to check confusion, hearing problems, 16 balance problems, and incontinence, and you knew 17 the incontinence was both bowel and bladder, 18 would you have checked any additional 19 interventions, or were those interventions 20 sufficient? 21 MS. BREAU: Objection. 22 A. It would depend on how he was -- how 23 he was presenting. Again, without -- I would 24 say it was sufficient. 25 MS. TRESL: No further questions.</p>
<p style="text-align: right;">Page 70</p> <p>1 there's no documentation that he is being 2 reassessed, monitored for risk of falls, to use 3 some of the nurses' language here, if that's not 4 reflected in the nurse's notes, is that 5 something that falls below the standard of care 6 for nursing? 7 MS. BREAU: Objection. 8 A. If it's not reflected in the nurse's 9 notes? 10 Q. Yes. 11 A. It has nothing to do with the 12 standard of care. If something was observed and 13 documented, it would be there. If it wasn't 14 observed and documented, it's not there. 15 Q. If it's observed and documented that 16 he's frequently incontinent, that he's dizzy, 17 he's confused, and his gait is unsteady, et 18 cetera, and it's documented in there -- let's 19 just say it is -- does that increase his risk 20 for falls? 21 MS. BREAU: Objection. 22 A. Yes. 23 Q. Does that make him at a higher risk 24 for falls? 25 MS. BREAU: Objection.</p>	<p style="text-align: right;">Page 72</p> <p>1 MS. COEY: I have no questions. 2 MS. BREAU: We'll read. 3 ----- 4 (Deposition concluded at 3:35 p.m.) 5 (Signature not waived.) 6 ----- 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25</p>

<p>1 AFFIDAVIT</p> <p>2 I have read the foregoing transcript from</p> <p>3 page 1 through 72 and note the following</p> <p>4 corrections:</p> <p>5 PAGE LINE REQUESTED CHANGE</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18 KELLY M. PRICE, R.N.</p> <p>19</p> <p>20 Subscribed and sworn to before me this</p> <p>21 _____ day of _____, 2003.</p> <p>22</p> <p>23</p> <p>24 Notary Public</p> <p>25 My commission expires _____.</p>	<p>Page 73</p>
<p>1 CERTIFICATE</p> <p>2</p> <p>3 State of Ohio,)</p> <p>4) SS:</p> <p>5 County of Cuyahoga.)</p> <p>6</p> <p>7</p> <p>8</p> <p>9 I, Cynthia A. Sullivan, a Notary Public</p> <p>10 within and for the State of Ohio, duly</p> <p>11 commissioned and qualified, do hereby certify</p> <p>12 that the within named KELLY M. PRICE, R.N. was</p> <p>13 by me first duly sworn to testify to the truth,</p> <p>14 the whole truth and nothing but the truth in the</p> <p>15 cause aforesaid; that the testimony as above set</p> <p>16 forth was by me reduced to stenotypy, afterwards</p> <p>17 transcribed, and that the foregoing is a true</p> <p>18 and correct transcription of the testimony.</p> <p>19</p> <p>20 I do further certify that this deposition</p> <p>21 was taken at the time and place specified and</p> <p>22 was completed without adjournment; that I am not</p> <p>23 a relative or attorney for either party or</p> <p>24 otherwise interested in the event of this</p> <p>25 action. I am not, nor is the court reporting</p> <p> firm with which I am affiliated, under a</p> <p> contract as defined in Civil Rule 28(D).</p> <p> IN WITNESS WHEREOF, I have hereunto set my</p> <p> hand and affixed my seal of office at Cleveland,</p> <p> Ohio, on this 24th day of November 2003.</p> <p> </p> <p> Cynthia A. Sullivan, Notary Public</p> <p> Within and for the State of Ohio</p> <p> My commission expires October 6, 2006.</p>	<p>Page 74</p>

<p>A</p> <p>ability 57:7</p> <p>able 44:20,22 71:15</p> <p>about 4:12 12:4,8 13:3,24 14:2,6,9 14:19 15:11,18,20 15:22 16:5,7,9,21 20:16 21:13,19 23:21,21,22 25:14 34:25 35:7,13 47:16 50:1 60:14 60:21 61:10,18 62:13 64:19,21 65:1 66:19 67:12 68:22</p> <p>above 1:24 74:12</p> <p>absence 60:7</p> <p>acceptable 36:10 36:12 62:25 63:18 63:20 66:11</p> <p>accident 65:18</p> <p>accidents 27:1 31:9 33:8 34:8 39:5 43:9,23 44:1 46:2 47:3,15 49:18 50:24 51:7,14</p> <p>accompanying 53:6</p> <p>ACLS 4:20</p> <p>action 74:17</p> <p>activities 21:6 57:7</p> <p>actually 9:15 12:23 16:7 23:5 26:24 37:10</p> <p>acute 43:1 52:2,4,8 60:8 71:6</p> <p>additional 63:13 71:18</p> <p>Additionally 52:4</p> <p>address 4:5</p> <p>adjournment 74:15</p> <p>adjust 42:1</p> <p>adjustment 26:24</p> <p>ADL 56:2 59:1</p> <p>ADLs 60:5</p> <p>administration 6:22</p> <p>administrative 9:16 9:17,19</p> <p>admission 26:15 31:21,23 32:18 36:6 45:17 52:9 55:11</p> <p>admit 6:11 47:12</p> <p>admitted 7:25 8:1</p>	<p>28:11 34:20 47:7</p> <p>admitting 31:5</p> <p>AFFIDAVIT 73:1</p> <p>affiliated 74:17</p> <p>affixed 74:19</p> <p>aforsaid 74:12</p> <p>after 7:25 19:19 45:18 49:9 53:3 53:13 55:10 57:1</p> <p>afterwards 74:12</p> <p>again 13:6 15:14 16:22 23:18 31:3 32:8 68:3 71:23</p> <p>age 3:1</p> <p>ago 3:9 11:3,4 33:7</p> <p>agree 48:18 51:12 52:7,20 54:20 55:4 56:22 57:1 58:15 67:25 68:5 68:9</p> <p>agreed 49:21</p> <p>agreement 1:21</p> <p>ahead 14:17 26:4 27:7 29:16 31:2 31:12 34:22 37:6 40:8 42:11 43:24 44:18 51:16</p> <p>Akron 1:23 2:16 4:15</p> <p>al 1:4,8</p> <p>alarm 16:21</p> <p>Alarmed 15:9</p> <p>ALISON 2:13</p> <p>alive 19:21</p> <p>allowed 63:4</p> <p>almost 28:20</p> <p>alone 63:17</p> <p>along 12:9</p> <p>already 66:21</p> <p>although 53:1</p> <p>Amanambu 2:19 13:23</p> <p>ambulate 63:4</p> <p>ambulating 57:5</p> <p>ambulatory 6:16</p> <p>another 5:21 7:12 14:23 20:11 34:2</p> <p>answer 3:17,25 13:20 22:20 23:1 24:8,13 32:10,13 36:4 47:23 54:6 56:13 62:8,15</p> <p>antidepressants 55:23</p>	<p>anybody 13:3 15:11</p> <p>anyone 13:8 15:15 29:3,6 39:4</p> <p>anything 10:12,20 20:1 61:6 65:11 65:20 67:1</p> <p>anywhere 19:24 29:19,20,23 30:18 39:3 42:13 51:21 52:16 61:15 64:3 67:18 68:23 69:3</p> <p>apart 68:17,25</p> <p>apartments 6:12</p> <p>apologize 31:3</p> <p>appear 12:1 22:15</p> <p>APPEARANCES 2:1</p> <p>approach 15:23</p> <p>approximate 5:13</p> <p>approximately 5:23</p> <p>areas 56:6</p> <p>argument 35:10</p> <p>around 12:24</p> <p>ascertain 31:7</p> <p>aside 19:14 24:20</p> <p>asked 3:22 22:22 40:12 50:4 67:12</p> <p>asking 25:1 40:6,14 59:4 60:12</p> <p>assess 41:23</p> <p>assessed 8:18 41:22 45:9</p> <p>assessment 7:14,15 7:17 8:11,21,24 20:18 22:10,12 25:25 26:2 31:22 32:3 34:12 36:8 38:19 41:23 43:7 45:19 56:23 58:22 63:22 66:17 67:6 69:12 71:2</p> <p>assessments 22:2 23:24 42:14</p> <p>assist 58:8,15</p> <p>assistance 57:19,25 58:2 59:14,22,25 60:5 61:14,17</p> <p>assistant 5:20,25 6:2,24 39:21</p> <p>assistants 9:14 39:23</p> <p>assisted 6:12</p> <p>associate 6:5,8</p> <p>assume 4:1 18:8</p>	<p>27:23</p> <p>assuming 7:20 17:25 22:5 29:21 53:12 56:1</p> <p>attention 45:18 58:12</p> <p>attorney 13:3,7 74:16</p> <p>available 28:1 46:4 48:11 68:13 69:1 69:16</p> <p>aware 29:24 30:3 37:21,23,25 43:17</p> <p>away 6:13</p> <p>B</p> <p>B 37:12 58:10</p> <p>Bachelor's 4:16 24:25</p> <p>back 7:23 9:1,22 10:19,23 13:1,18 19:11 20:11 46:10 53:1 64:5 65:21</p> <p>Backing 55:8</p> <p>balance 71:10,13 71:16</p> <p>based 45:8 67:13,20 69:6</p> <p>basic 20:18</p> <p>basically 6:11 22:23</p> <p>bathing 59:5</p> <p>became 69:15</p> <p>Becker 2:3</p> <p>become 25:8 68:13</p> <p>becomes 53:2</p> <p>bed 16:3,10 17:7 44:13</p> <p>bedside 9:15</p> <p>before 1:18 3:10 5:17 6:23 12:18 13:11 24:10 27:25 28:3 29:8,9,22 43:10,14 73:20</p> <p>begin 25:7</p> <p>beginning 24:23 40:25</p> <p>behalf 1:16 2:2,11 2:19</p> <p>being 3:3 7:24 11:15 23:3,4 41:3 49:22 51:11,14 57:13 70:1</p> <p>beings 54:17</p>	<p>believe 4:9 15:10 18:4 45:2 46:21 47:4 49:21,25 55:8 67:25</p> <p>bell 35:25</p> <p>below 62:20,24 70:5</p> <p>better 68:14 69:5</p> <p>big 15:25 16:4 66:3</p> <p>bit 3:8 4:12 33:7</p> <p>bladder 45:6,11 50:23 55:17 56:8 57:6 69:16 71:17</p> <p>blank 10:15</p> <p>blood 17:10,12,13 17:22</p> <p>BLS 4:18</p> <p>both 23:9,11 45:10 71:17</p> <p>bottom 19:17 27:9 32:4</p> <p>bowel 45:5,10 50:23 55:17 56:7 57:6 69:16 71:17</p> <p>box 2:23 38:10 50:2 64:20 67:8 71:9</p> <p>boxes 38:17 58:19</p> <p>brain 53:16</p> <p>brand 35:1 36:18</p> <p>breakfast 16:11</p> <p>BREAUX 2:13 11:20 13:19 14:12 21:14 22:25 24:7 26:21 27:3,5 29:16 30:1 31:2 31:12 32:7 34:22 36:3 37:6 40:8 42:11 43:24 44:18 47:22 48:22 49:1 50:15,25 51:16 52:24 56:9 57:10 61:23 62:3,14,23 63:10 66:10 67:9 68:16 69:8,20 70:7,21,25 71:21 72:2</p> <p>BRENDA 2:21</p> <p>bring 10:12</p> <p>Buckingham 2:20</p> <p>Building 2:5</p> <p>Burroughs 2:20</p> <p>busy 9:3</p> <p>C</p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>C 37:12 41:19 call 35:24 called 1:16 3:2 8:20 17:13 22:11 came 13:11 14:15 14:19 15:1 27:25 29:8,9,22 47:2 Canton 2:24 care 6:25 7:10,14 10:7 16:2 22:3,14 22:17,17 23:10,15 24:5,9,24 25:3,8 25:18,22,24 26:1 26:5,8,12,16 27:1 27:8,12,14,20 28:21 30:4,24 31:9 33:6,7,16,25 34:4 35:11,18 39:5,17 42:14,19 42:20 43:1,5 44:3 44:23 45:21 46:1 46:7 47:3,13 48:19 49:13,15,17 50:1 51:20 52:2,4 52:8 55:22 60:8 60:13,19 61:16,25 62:6,9,11,21,25 63:11 64:3,4,6,7,9 64:10,12,20,25 65:1,2,5,7,14,19 66:7,11 67:13,14 67:19 68:19,20 70:5,12 71:6 cared 35:15 caregiver 39:17 caregivers 25:16 caring 16:1 23:6,12 23:19 25:2 56:3 case 1:6 8:17 13:4 13:24 14:2 18:6 37:24 cause 15:18,19,20 19:25 74:12 caused 15:12,13,15 15:17 Center 32:6 certain 8:10 60:4 certainly 45:2 64:22 certificate 20:3 74:1 certified 3:4 4:18 4:20 certify 74:10,14</p>	<p>cetera 35:21 55:24 55:24 70:18 chance 39:4 change 38:24 53:25 55:22 56:2 60:19 61:6 73:5 changed 38:21 67:5 71:4 changes 26:9 54:11 66:4,7 changing 65:10 charge 25:15,18 47:12 49:13 CHARLES 1:4 chart 11:11 16:23 17:1,6 19:6 40:5 40:14,16,18 53:19 53:22 54:9 66:18 67:1 68:11 check 28:22 37:18 67:8 71:15 checked 28:13,16 30:7 32:25 36:17 36:23 37:1 38:17 45:15 48:10,18 50:2 64:20 71:5,8 71:18 checking 29:10,11 65:22 checks 67:7 circular 33:22 circumstances 12:19 Civil 3:3 74:18 clarify 49:5 classification 58:6 clear 17:6 35:22 Cleveland 2:8 74:19 Cleveland-Massil... 1:22 2:14 Co 1:22 2:12 code 20:9 58:5 coded 58:3 COEY 2:21 15:19 72:1 collected 55:10 column 32:24 58:10 come 9:1 13:1 22:12 27:14 30:16 54:8 63:5 66:1,15 comes 24:24 28:3 31:17 33:23 47:18 66:3 67:15</p>	<p>coming 7:5 30:21 commencing 1:23 commission 73:25 74:25 commissioned 74:10 COMMON 1:1 communicating 65:15 compile 24:3 47:14 compiled 53:13 59:20 compiling 24:19 30:24 31:8 45:21 46:1 64:2 complete 8:1,11 35:4 43:11 47:10 47:20 completed 22:18 26:1 32:18 33:19 33:20 43:4,6,14 55:5 66:20 74:15 completing 7:14,15 8:13 complicate 24:21 complicated 54:16 54:17,18 56:11 comprehensive 22:10,12,17 26:2 computer 7:16 54:25 55:2,6 56:19,20 concepts 64:5 concern 48:13 62:21 concluded 72:4 conditions 65:9 confused 61:8,19 70:17 confusion 65:11 67:23 68:5 69:18 71:9,15 connection 18:13 18:15 consider 26:12 37:5 considerations 46:6 contact 9:20 continent 46:13 continuity 65:2,14 contract 74:18 contribute 50:12 contributed 20:23 21:2,9 contributing 34:13</p>	<p>conversation 14:10 14:13 27:20 conversations 53:19 coordinate 7:9 64:7 64:8 coordinator 5:4,9 5:18 7:7,12 9:18 18:9 copy 26:20 corner 32:6 correct 4:11 5:1,2,6 5:7 8:25 11:2 17:23 18:5,7 19:5 19:22,23 20:15 27:13 28:24 29:21 32:21 34:5 38:7 42:5 43:12 49:11 49:15,16,19 50:7 52:11,12,14,15 54:5 55:6,7,13,14 56:15 74:13 corrected 34:15,17 34:19 corrections 73:4 correctly 41:22 57:16 counsel 1:16,21 26:19 32:1 count 23:25 County 1:2 74:5 course 58:22 court 1:1 74:17 creation 12:9 currently 6:2,4 Cuyahoga 74:5 Cynthia 1:18 3:18 74:9,23</p>	<p>day 1:23 12:23 36:6 38:14,15,20,20,23 40:22,22,23 43:9 45:16 46:13,20,22 46:25 47:1,6 49:4 49:10,12 52:9 55:11,12 56:17,18 58:19 60:24,24,25 61:1 62:4,5,10 63:1 66:2 71:14 73:21 74:20 days 8:4,4,5,13 18:25 19:1 26:7,9 30:25 31:11 38:23 40:21 43:13 47:9 47:19 48:11 49:9 57:22 58:3,5,8 63:15 66:3 dead 19:1 53:4 54:20 55:6,10 57:2 63:24 deal 57:4 death 12:22 14:4,7 14:14,19 15:10 20:1,3 deceased 20:12 66:25 67:2 deciding 43:22 Defendant 2:11,19 Defendants 1:9 defined 74:18 definition 71:12 depend 71:22 deposed 3:4 deposing 35:14 deposition 1:12,15 3:9 10:5,6 11:1 13:4,9,10,22 72:4 74:14 depositions 22:22 describe 5:3,17 6:20 7:6 19:25 designated 18:9 details 14:16 17:1 deteriorated 54:1 55:22 56:2 deteriorating 56:6 59:15 60:17 deterioration 57:6 59:1 determine 11:22 16:13 20:20 23:2 30:16 32:20 35:6 40:12 44:20,21,22</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

45:24 46:5 47:20 47:24 determined 57:3 determining 54:2 develop 22:3 24:5,9 25:7 developing 22:16 23:14 25:1,18 34:25 develops 22:14 diagnosis 30:10 71:12 die 15:13 died 16:4,10,15 19:3 46:20,22 dietician 21:6 dietician's 26:15 different 5:14 54:9 59:7,18 60:5 64:13 differentiated 9:9 difficulties 9:25 digested 25:20 digging 12:17 direct 6:25 25:16 27:20 39:19 directions 44:12 director 5:20,25 6:3 6:24 21:6,6 disagree 45:11 disagreeing 44:3 discharge 19:2,15 20:9 discharged 20:7 disciplinary 10:1 disciplined 9:23 disconnect 63:7 discover 31:11 discussed 47:17 Discussion 21:17 disease 30:11 disposal 24:6 distinctly 42:2 dizziness 67:8,23 68:5 69:19 dizzy 61:19 70:16 document 10:17 21:22 22:23 27:7 32:15,17,19 33:10 34:3 39:14,16 54:16,19 55:5 58:21 59:13 63:14 66:20 documentation	29:24 46:9 66:23 70:1 documented 11:9 42:15 50:14,17,18 50:19 51:15,18,19 51:22 65:11 70:13 70:14,15,18 documents 35:13 59:19 doing 6:22 21:23 30:23 31:8 45:18 done 8:2 10:7 26:3 31:23 38:19,23 39:1 41:9 Doolittle 2:20 down 3:19 53:16 55:12 56:18 Dr 2:19 13:23 draw 58:12 dress 59:3 Drive 2:22 4:7,7 duly 3:3 74:9,11 during 5:10 53:13 55:15 58:3,4 duties 5:17 9:2 duty 22:4,6 46:5	evening 58:20 event 15:25 74:16 ever 3:9 9:23 41:9 every 8:13,13,14 54:11 58:18 62:10 everybody 11:16 59:7,17 64:13 everybody's 50:1 everyone 11:20 28:18 33:23 48:4 65:16 everything 17:3 60:14 evidence 33:12 34:17 evolutionary 56:23 evolves 31:10 exactly 5:15 37:17 examination 1:17 3:2,6 example 8:7 20:10 20:11 expect 62:20 experiences 48:21 expired 19:19 20:7 expires 73:25 74:25 explain 16:18 18:18 32:9 57:17 extensive 57:19,23	29:1,2,10,11,14 29:22 30:10 31:18 32:21,25 33:1,3 33:13 34:2,7,10 34:13,18 35:3,17 36:2,13,18 37:4 38:22,25 39:9,11 47:14 48:5 49:22 50:10 51:10 52:6 52:18,21,23 61:20 61:22,24 62:12,22 64:19 65:8 67:20 68:2,7,15 69:18 70:2,5,20,24 familiar 25:8 39:14 families 9:21 family 30:14 31:15 40:4,7,13,17 far 14:23 February 46:16 fell 16:3 17:8,12 few 3:12 fifth 60:24,25 61:1 fill 18:17,23 27:15 47:6 49:10,14 67:16 filled 18:3,9 19:20 28:12,21 33:11,25 40:3,13 43:8,13 43:16 46:15 47:2 49:8 53:3,3 71:7 71:14 filling 23:4 27:22 46:23 finalize 54:4 find 16:9 19:8 25:23 30:15 53:8 66:25 67:1 fine 41:12 67:11 finger 50:20 firm 74:17 first 3:3 4:22 7:13 14:22 20:17 21:22 32:24 36:6 37:14 38:14,23 40:22 41:17 43:9 47:18 49:5,10,12 56:17 66:1 74:11 fit 26:9 fits 32:9 five 30:25 31:11 47:9,19 48:11 49:8 five-day 25:25	flip 45:2 floor 5:1 7:13 14:2 14:25 17:9,10,13 17:22 23:6 25:15 25:20 follow 36:17 37:9 38:8 44:22 following 33:19 36:11 37:5,15,25 73:3 follows 3:5 foot 16:10 foregoing 73:2 74:13 form 18:17,23 19:15 20:18 25:16 41:23 57:15 formal 39:11 forth 1:24 74:12 found 14:20 17:21 30:17,18 31:13 69:24 four 31:11 frail 47:25 frames 8:15 54:9 free 28:14,19,22 29:10,11 33:24 38:25 47:14 48:5 49:22 62:22 64:19 65:8 frequent 48:6 51:22 63:12 frequently 45:8,10 46:12 53:24 70:16 Friday 1:13 11:5 from 4:14 6:13 7:2 7:20 9:9 11:10,11 11:12,12 12:16 14:21 15:23 16:8 16:17 17:2 21:8 24:10 25:5 26:14 27:18,23,25 28:9 30:18,18 31:15 37:19 38:20,25 40:4,4,5,12,16,18 40:18 48:5,7 49:22 53:6,18,19 53:20,21,22 54:8 54:12 55:10,11 56:4,17,24 58:22 61:2 62:20,22 65:21 66:22,25 68:17 69:2,3 73:2 full 9:3 22:12 26:1
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

41:23 63:22 Fulton 2:22 function 56:2 functional 9:12 furniture 35:23 38:13 65:24 further 71:25 74:14	gone 60:13 gotten 12:24 graduated 4:13,14 Granted 15:25 great 8:8 57:4 guess 6:21,22,23 12:6 22:8 33:21 guidance 23:9 guidelines 3:13 8:10	high 29:13 32:5 53:22 61:16,24 62:11,12 69:6 71:4 higher 34:7 35:16 52:22 70:23 highlighted 41:19 him 11:8,9,15 12:7 12:17,18 15:13,13 18:14,24,25 20:14 25:2 30:14,21 33:2 34:7 35:15 42:8 44:24 52:22 55:19,20 56:18 58:13 63:9 65:17 65:18 68:1,6,19 70:23 history 29:1,2,14 29:22 30:8,9,13 32:21,24,25 33:1 33:13 34:1,7,10 34:18 35:3 36:2 36:13,18 37:3 52:18,20 69:18 hit 17:18 home 19:16 20:10 26:24 62:21 homes 7:4 hospital 20:11 27:19 28:9,10 hospitalization 34:14,14 human 54:17 hurry 51:11 husband 13:12 hypotension 35:20 44:14 71:11,13 hypothetically 31:5	48:8 49:23,25 50:8,13,16,17,22 51:2,5,8,13 53:2 69:21,23 improving 59:15 inappropriate 36:16,21 66:14 included 29:5 including 27:19 incontinence 45:5,6 45:15,25 48:6 50:23 51:10,22 52:11 55:17 63:2 63:12 65:10,22 67:22 68:4 69:16 69:17 71:9,16,17 incontinent 45:8,10 46:9,12,13 51:6 53:24 56:7 61:18 70:16 incorrectly 35:9 57:20 59:4 increase 34:11 70:19 increased 67:20 68:1,6,15 independence 9:13 independent 6:11 59:21,24 60:2 independently 11:7 11:13 56:3 indicating 6:4 18:22 19:10,13 26:13,16 68:17,25 individual 65:1 individualized 64:10,12 individuals 21:1 information 15:1 20:23 25:19 27:15 27:17 28:3,5,7 30:24 31:7 40:2 48:11 53:5,6,18 54:12,24 55:1 56:16 58:23 60:16 61:2,5 66:21 67:3 67:25 69:15,24 initial 8:24 22:4 initialed 21:4 initially 36:9 40:20 71:5 initiated 33:16 67:15 68:19 initiates 42:20	initiating 34:4 35:12 injuries 44:1 45:14 injury 27:2 33:8 34:8 43:9,23 46:2 47:15 49:18 50:24 51:7 65:19 input 24:10 27:21 inquiring 47:16 instructions 42:9 insurance 23:7,23 interested 42:22 74:16 interpret 25:14 interrupted 22:7 intervene 63:16 intervention 36:14 52:5 interventions 29:5 38:21,24 48:20 50:6 60:13 63:14 71:5,19,19 invite 63:5 involved 16:2 54:10 involvement 7:18 in-depth 35:4 issue 14:18 24:21 issues 10:1 31:19 58:25 61:9 items 35:23 37:7,12 37:17
G G 1:4 21:9,11,18 37:12 53:23 56:1 56:1 57:14 58:9 gait 70:17 gather 45:22 gathered 66:22 gathering 31:21 56:16 60:15 61:2 61:5,6 gave 55:19,20 gee 68:12 general 10:17 20:17 generally 30:22 gets 68:21 getting 42:10 give 3:12 13:21 26:19 57:17 64:10 64:11 given 22:16 gives 71:13 giving 39:12 42:8 44:12 gleaned 69:1 gleaning 53:21 58:24 go 8:2 13:21 21:14 23:24 26:4,18,25 27:7 29:16 31:2 31:12 34:22 35:5 37:6 38:22 40:8 40:21 41:16,18 42:11 43:24 44:18 46:10 51:16 53:1 57:12,16 58:18 63:5 64:5 68:3 goal 28:14,18 33:23 38:24 47:13 48:4 49:22 64:22 goals 28:12 going 3:12,16 4:1 12:23 13:8,10 27:5 32:7 39:13 44:9,10 48:4,10 48:17,19 56:23 63:9 65:17,21	H H 21:19 45:7 53:24 hair 12:11,12 hallway 15:4 hand 19:17 74:19 hands-on 6:25 happen 16:14 happened 14:19 15:12,16 16:14,22 17:4 18:14,18 19:25 20:14 hard 42:15 45:25 52:14 53:25 59:15 61:7,18 65:10 67:22 hardness 42:4,7 63:2 68:4 69:17 having 41:14 64:6 head 3:18 17:18 hear 44:10 heard 11:12 12:15 15:8 hearing 12:25 41:20,24 42:4,8 42:16 43:17 44:4 44:7,16 45:25 48:6 50:9 52:14 53:25 59:1,16 61:8,18 63:2,13 65:10,22 67:22 68:4 69:17 71:9 71:15 Hears 41:25 heightened 33:2 help 19:12 38:3 59:2,5,8 60:11,17 61:13 65:25 67:16 helpful 23:4 her 13:17 32:13 hereinafter 3:4 hereunto 74:19 hey 44:8 61:21 Hi 3:8	I idea 28:16 immediate 26:25 27:11 28:21 33:7 44:23 45:21 46:1 47:3 48:13 49:15 49:17 51:20 65:19 immediately 31:14 impact 22:24 23:23 imparted 35:15 implemented 26:12 33:5 important 22:6 23:5 43:22 44:16 45:22,24 46:3,6	J Jackie 27:3 JACQUELINE 2:4 January 41:15 job 4:22,25 5:3 6:9 6:10 8:22,23 9:16 9:17,19 July 5:15 jumping 14:17 just 3:8 4:12 7:22 10:14,17,20 12:7 12:8,9 13:21 15:23 16:6,9,15 16:20 19:12 20:6 20:12,17 23:7 24:15,18,20 26:25 27:23 29:2 30:10 30:14 31:5 33:6 34:25 35:10 38:22 41:5,18 43:2 46:3 47:17,24 50:1 51:24 53:15,17	

56:13 59:4 61:9 62:13 69:22 70:19	leaves 63:1 Ledges 1:7 6:23 left 32:6 less 33:23 34:3 48:18 53:2 let 13:14 15:23 21:13 22:21 24:15 24:18 39:10 46:10 49:5 letter 58:9 let's 14:17 17:10 20:16 24:20,20 26:18,23,24,25 27:24 31:6,24 35:10 41:16,18 53:1 57:12,14,16 58:12 67:6 70:18 level 47:20 53:23 55:16 60:5 61:14 61:16 62:11 liaison 17:25 like 6:19 7:17 9:9 12:10,24 18:8 19:24 20:25 21:1 25:2 26:13 30:10 40:10 41:10,17 43:1,2 45:9 48:6 57:18,24 58:14,19 59:13,20 63:6 64:12 65:25 66:1 67:2 likely 48:19 Likewise 6:25 limited 57:25 LINE 73:5 list 37:11 listed 35:20 37:11 37:18 58:13 71:3 little 3:8 4:12 7:2 33:7 38:9 58:19 living 6:12 57:7 locked 35:23 locomotion 55:20 59:3 long 6:10 11:3 12:14 29:22,22 30:8 longer 5:5 19:21 69:15 look 4:25 10:16 19:24 29:12 32:2 41:8,10,17 42:23 42:25 44:9 57:8 58:21 59:20 61:11	68:10 69:25 looked 10:18,19,24 28:20 43:2 60:9 looking 7:21 11:11 25:5 33:21 52:2,3 52:7 56:4 57:2 59:12,18,19 60:8 62:10 68:9 looks 7:23 12:10 45:9 57:18,24 58:14 59:13 lose 9:12 losing 24:16 lot 16:4 20:19 26:7 31:17,18 32:20 47:25 56:5 59:14 60:16 61:9,13,13 65:17 lots 48:3,3 65:16 low 32:4 61:19 69:5 LPN 39:25 L.P.A 1:22 2:12	7:12,15,15 9:18 18:1,9 19:17 20:23 30:23 31:8 42:21 43:7 45:1,8 46:18 54:4 MDS's 15:2 mean 13:13 26:6 43:3 46:8,12 56:1 59:23 60:1,3,12 66:20 means 20:14 45:7 48:14 60:4 meant 38:9 measure 22:19 mechanism 31:16 31:19 medical 10:16,18 10:23 13:2 15:20 27:19,24 28:4,7 30:15,19 42:18 69:13 Medicare 8:9,10 17:25 18:3,13,16 19:4,20 21:23 22:1,5,9 23:10 24:20 memory 11:8 mend 59:21 mentioned 24:10 message 44:15 messages 42:10 met 3:8 56:17 might 37:4 63:14 65:18 mind 12:10 mine 11:13 minimum 19:16 20:17 21:24 35:4 39:1 41:16 43:10 43:14 46:23 47:6 49:8 51:23 53:16 57:2 66:9 67:17 minute 21:15 Mishkind 2:3 misreading 57:15 miss 42:9 missing 44:14 mobility 40:7,15 moderate 32:4 61:21 69:6 71:3 moment 39:13 monitor 52:5 monitored 70:2 months 8:14	mood 57:6 more 6:16,17,21 7:2,22 8:4,4,5 9:16,17,18 13:14 22:13 25:8 33:23 34:3 43:25 47:19 55:23 58:8 morning 12:22,25 14:14 54:21 most 19:11 28:22 29:11 58:4 moved 6:13 much 6:25 22:16 23:2,8 59:22,24 multiple 33:1,13 34:1,6,10,18 35:3 36:1,12,18 37:3 52:17,20 57:4 69:18 must 45:17 myself 10:2 N N 1:22 2:14 name 4:5 12:18 33:12 named 74:10 names 21:2 near 15:5 necessarily 20:7 need 33:15 35:7 42:23 44:5 47:21 52:10,14 56:10 57:8 58:1 59:22 59:24 60:6 62:6 67:7 needed 13:15 35:23 41:1 57:4 58:2 63:3,14 needs 27:1,11 28:21 33:7 35:19 42:17 44:23 45:21,23 46:1 47:3,16 48:14,15 49:15,17 51:20 53:22 54:1 55:22,22 56:5 57:19,25 58:24 59:1,6,14 60:10 60:16 61:12,16 62:11 63:9 64:14 64:15,17,18 65:1 65:16 67:5 never 9:25 new 5:22 35:1
--------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>36:19 67:20 68:12 news 16:4 next 8:2,18 31:10 46:14 nod 3:17 non-Medicare 22:2 noon 12:24 Notary 1:19 73:24 74:9,23 note 34:1 73:3 noted 45:1 notes 10:9,13,21,22 39:7,8 53:8,11 61:7,8,9 63:5 65:12 69:24,25 70:4,9 nothing 12:6 68:18 70:11 74:11 noting 59:13 November 1:13 74:20 nowhere 60:9 68:11 number 34:11 37:11 45:2 48:4 62:21 numbers 56:15 57:8,9 nurse 4:10 5:1 9:23 14:23 16:1 24:25 33:18,19 nurses 14:1 17:9 22:22 23:5,12,19 24:4 25:2,13,15 25:15,21 35:14 39:25 56:3 60:18 61:4 62:10 63:8 63:16 66:21 67:4 67:12,15 69:3 70:3 nurse's 10:21,21 15:5 39:7,8 64:25 69:24,25 70:4,8 nursing 4:16 5:21 5:25 6:3,24 9:6,8 9:10,14 19:15 23:15 25:18 26:24 39:20,23 41:6 42:8,19,20 62:9 62:20,21 64:6 65:12,13 66:11 70:6 71:12 NW 2:22</p>	<p>O 2:23 object 32:7 objection 13:19 14:12 22:25 24:7 27:6 29:16 30:1 31:2,12 34:22 36:3 37:6 40:8 42:11 43:24 44:18 47:22 48:22 50:15 50:25 51:16 52:24 56:9 57:10 61:23 62:3,14,23 63:10 66:10 67:9 68:16 69:8,20 70:7,21 70:25 71:21 observation 40:19 53:7,9,13 54:3 55:15 observations 64:1 65:15 66:13 68:24 68:25 69:7 observe 41:7 67:14 observed 70:12,14 70:15 observing 53:15 55:16 66:8 occurred 14:11 October 74:25 off 21:14,17 55:20 69:22 office 2:5 15:2,4,4 74:19 offices 1:21 official 11:18 officially 5:11 often 8:10 26:10 41:4 oh 12:16 13:8 16:15 34:18 Ohio 1:2,20,23 2:8 2:16,24 3:2 74:3 74:9,20,24 okay 3:20 4:2,3 21:3 25:2 31:25 36:15 38:12 43:8 47:11 54:7 59:11 66:6 old 35:2 47:25 once 58:2 one 15:6 22:9,13 23:16 24:6 26:13 26:14,14,25 32:22 37:11 38:20 41:14 42:20 43:2 44:5</p>	<p>46:13 48:4 50:11 51:24 58:8,18 61:7,8,9 62:21 63:1 64:15,17 68:21 one-page 19:2 one-person 58:1,7 one-shot 7:17 ongoing 7:18 36:9 only 8:23 21:24 41:25 45:18 59:18 59:19 61:19 opposed 8:3 order 41:18 orthostatic 35:20 44:13 71:11,12 OT 35:25 other 7:20 9:2 11:8 11:12 12:3 13:1,7 21:22 28:10 35:12 35:14 37:12 41:14 60:9 63:8 71:7 otherwise 74:16 out 3:14 12:19 14:21 16:9 17:17 18:3,10,17,23 19:20 23:4 27:16 27:22 28:12,21 30:15 33:11,15,25 40:3,13 43:8,13 43:17 46:16,23 47:2,6 49:8,10,14 53:3,3,17 63:1 67:16 71:8,14 over 17:18 31:10 45:3 49:6 56:17 57:22 58:4,22 64:2 overall 53:25 55:21 own 6:17 11:8 15:23 63:4,15</p>	<p>23:13 25:9 30:20 31:4,17 34:6 35:1 35:24 36:17 37:3 38:22 40:14,16 42:15 44:6 47:12 47:18 48:8,15,21 49:9,14 50:5,9,22 51:5,13 62:22 63:4 64:12 65:25 patients 23:6 29:10 29:11 49:22 pattern 8:16 people 6:11 11:12 12:3 13:13 16:5,6 20:19,22,22 32:20 41:5 48:1 68:21 69:4 Pere 1:4 5:11 8:6 10:8 11:6 12:16 16:10 19:19 23:20 24:24 29:7,13 41:22 46:20,22 54:19 55:6,10 56:3 57:1 59:18 64:12 65:25 69:4 Pere's 8:17 18:6 64:15 67:19 performance 57:22 perhaps 35:9 38:21 44:14 57:14,20 period 5:8,10 36:8 53:7,10,13 54:3 54:13 55:15 56:17 64:2 Perrin 14:8 persistently 56:7 person 17:24 18:1 23:3 24:1 28:11 42:3,7 perspective 48:7 physical 58:1,7,15 59:5 picture 12:7 pieces 10:15 68:12 Pines 4:6,7 place 25:22,24 26:6 31:19 33:9 49:6 60:20 65:13 74:15 Plaintiff 1:17 Plaintiffs 1:5 2:2 plan 7:10,13 10:7 22:3,14,17,17 23:15 24:6,9,24 25:3,8,18,22,24</p>	<p>26:1,8,12 27:1,8 27:12,15 30:4,24 31:9 33:6,8,16,25 34:4 35:11,18 37:25 39:5,17 42:14,19,21 43:1 43:5 44:4,24 45:21 46:2,7 47:3 47:13 48:19 49:13 49:15,18 50:1 51:20 52:3,4,8 60:8,19 61:16 62:6,9,25 63:12 64:4,6,20,25 65:1 65:5,7,14,19 66:7 67:13,14,19 68:19 68:20 71:6 plans 26:5,16 28:21 60:14 61:25 64:3 PLEAS 1:1 please 13:6 23:18 25:10 32:13 36:5 42:24 65:3 point 15:24 25:6 43:5 55:25 64:4,6 67:3 pool 17:22 possibility 33:3 possible 9:12 42:9 42:12 precaution 36:1 prepare 10:25 54:3 55:12 prepared 27:11 54:19 preparing 13:4 24:1 35:11 47:13 preprinted 37:20 presented 66:2 presenting 71:23 presumably 54:22 69:2 pretty 23:8 63:1 prevented 65:20 previous 30:21 previously 22:23 Price 1:12,15 3:1,6 4:6 73:18 74:10 primarily 10:20 42:21 primary 22:8 prior 5:18 7:5 26:6 34:13 53:6 probably 11:4</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

15:10 30:5 53:2 problem 43:18 44:11 49:3,3,4 51:13 52:10,13 problems 31:18 35:19 44:5 45:24 47:16,17 48:3,7 48:20 50:10 63:13 65:22 71:9,10,13 71:15,16 problems/needs 30:5 45:14 Procedure 3:3 process 31:21 33:22 54:11,17 56:11,23 Professional 1:19 program 9:9,10 prompt 38:6 prompts 38:3 65:24 protocol 36:11,17 37:5,8,10,15,19 38:9 protocols 60:15,20 provide 32:1 38:3 provided 3:2 58:4 providing 65:24 PT 35:25 Public 1:20 73:24 74:9,23 purpose 21:23,25 22:2 23:16 purposes 23:17 pursuant 1:20 put 24:3,20 25:22 25:24 26:6,8 28:25 33:2 34:7 52:22 53:9 58:9 58:11 65:18 68:6 68:25 puts 39:22 44:4 68:1 putting 17:3 44:23 56:15 puzzle 68:12 p.m 1:23 72:4	51:1 54:15,18 56:13 59:9,10,12 62:8 68:18 questioned 68:22 questions 16:5 25:1 27:6 54:10 71:25 72:1 quickly 3:15 44:16 quite 6:19 <hr/> R radar 22:24 rated 55:17 rather 3:17 21:2 reach 35:24 reaction 15:7 read 10:21 16:22 17:1,2 25:12 32:12,14,23 36:7 48:25 63:6 72:2 73:2 readily 69:1 reading 35:9 41:21 57:15,20 59:4 really 17:15 23:13 60:10 reasking 24:15 reason 17:16 34:13 36:22,25 45:13 47:5,8 57:13 reasons 48:12 reassess 18:24,25 reassessed 61:20 70:2 reassessing 39:4,9 reassessment 8:24 38:16,18 39:11 reassessments 8:23 recall 14:15,16 15:7 15:12 36:6 43:20 44:25 receive 35:25 Recently 14:3 recognized 33:15 recognizing 55:25 record 3:16,19 4:4 10:18,23 21:15,17 24:4 25:12,23 26:11 29:12 32:3 32:14 36:7 39:4 41:3,8 42:18 48:25 51:18 52:8 69:13 records 7:21 10:16	13:2 27:19,19,24 28:5,7,9,10 30:15 30:19 68:10,23 reduced 74:12 refer 23:20 26:17 31:24 53:23 60:21 referred 34:2 50:6 referring 26:21 28:8 32:16 33:6 reflect 48:19 63:5 66:7 reflected 29:21 42:13 50:5 60:10 60:18 61:15,25 62:6,11,17,19 64:3,25 65:5,7 67:19 68:11 69:4 69:11,14 70:4,8 regardless 58:5 registered 1:19 4:9 rehabilitation 9:8 9:10 21:7 relate 51:6,9 related 44:5 45:14 45:23 47:16 52:10 52:14 relates 51:10 relating 27:6 relative 39:5 42:17 53:9 74:16 relevant 23:5 34:24 relying 25:7 remember 11:6,8,9 11:15,19 12:17,25 14:10,20 16:22 17:15 36:24 37:2 53:14,15 remembered 12:18 remembering 9:5 16:23 remind 35:24 removed 7:2 repeat 25:10 36:5 48:23 65:3 67:10 repeatedly 35:6 rephrase 49:1 report 55:13 Reporter 1:19 reporting 74:17 reposition 38:12 repositioning 65:23 representative 66:17 REQUESTED 73:5	required 58:7 requirement 22:9 23:10 resident 19:16 22:3 40:4,6,19 54:13 66:24 residents 6:16 7:2 7:10,11,13 9:11 9:21 resident's 58:6 resolved 52:22 responsibilities 7:8 responsibility 7:9 7:11 9:4 18:12 24:19 63:7 responsible 7:12 17:24 21:5,19,20 34:3 restorative 9:6,13 rethink 68:14 Retirement 32:5 review 10:6 58:21 reviewed 27:24 reviewing 10:10 13:2 right 15:5 18:11 19:13,17,18 24:12 43:15 46:24 48:14 50:20 60:23 61:3 63:25 risk 27:1 29:14 31:8 31:22 32:3,4,4,5 33:3,8,25 34:8,11 35:16 39:5,9 42:14 43:9,23,25 44:7 45:14 46:2 47:2,14 49:18 50:10,24 51:7,14 52:5,22 61:19,21 61:24 62:12 65:18 67:6,20 68:1,6,15 69:5,12 70:2,19 70:23 71:2,4,4 risks 50:5 RN 39:25 Road 1:22 2:14 Rockynol 1:7 2:11 4:23,25 5:3 6:1,8 7:5 10:1 13:14 27:25 28:3 29:8 29:23 32:5 34:21 52:23 role 5:14,23 6:22,25 7:6 8:1 20:20	23:3,8 roommate 17:14,14 17:15 roughly 5:15 Rule 74:18 Rules 3:3 R.N 1:12,15 3:1,6 73:18 74:10 <hr/> S safe 28:19 safety 36:1 44:15 48:8 sales 6:5,7 same 15:6 33:17,18 61:5 sat 55:12 56:18 Saturday 14:13,14 66:15 saying 53:20 56:5 56:12 57:19 66:12 66:14 68:18 says 19:17 32:5 42:3 45:7 49:18 58:23 60:16 61:21 scenario 44:17 school 4:13 screen 22:24 screening 47:20 seal 74:19 second 38:15 40:22 secondary 22:5,8 section 21:9,10,18 21:19,20 30:6 41:19 45:7 54:1 54:12 56:1 57:14 58:9 sections 21:4 see 7:24 8:3,4,5 17:10 21:13 22:11 23:4,24 24:18 29:12,17,20,23 30:4 33:24 41:2,8 42:13 44:2 51:24 52:10,13,16 57:8 60:17,19,19 61:4 64:3 65:14 67:18 seeing 7:3,3 seems 16:6 43:25 48:5 61:11 seen 17:10 sees 26:8 65:16 select 37:20 self-performance
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>57:21 58:6 self-prep 57:18 send 19:4 20:3 28:10 sense 16:20 sent 19:20 sentences 48:24 September 5:12,19 19:17 serves 23:9 set 1:24 35:4 46:23 47:6 74:12,19 sets 8:10 19:14 setting 49:13 seven 57:22 58:3,5 58:8 69:15 shake 3:18 sharing 67:4 sheet 19:16 20:17 21:24 30:23 41:17 43:10,14 49:8,14 51:23 53:17 54:4 57:2 66:9 67:17 shift 54:22 shifts 58:4 short 6:10 show 26:11 38:15 39:3,8 side 44:4,4,13 sign 20:22 Signature 72:5 signed 20:19 27:8 33:11 significant 50:9,23 58:25,25 59:2 61:12 63:2,11 signs 20:20 simple 54:18 since 14:4,17 18:9 18:24 20:13 42:19 64:19 sit 44:12 53:16 sitting 17:8,12 situations 41:25 skilled 6:14 skip 26:25 Skylight 2:5 slender 11:24,25 12:1 social 21:3,5 24:11 26:8,14 some 11:14 12:17 17:1 38:16 42:4,7 42:10,16 54:8,12</p>	<p>67:3 70:3 somebody 65:21 67:7 Somehow 14:20 someone 11:25 13:9 16:14,15 28:3 29:1 34:17 44:8 44:11 61:21 68:12 something 3:21 12:13 23:7,14,22 24:4 25:6,19 30:12,16,22 31:9 31:14 34:24 37:4 40:21 41:6,7,7 42:25 43:21 44:1 49:10 50:13,16 64:24 65:4 66:3,4 67:5 70:5,12 sometimes 41:4,4,5 somewhere 61:2 62:9 69:2,13 soon 7:25 sorry 22:7 sort 6:17,18 7:23 33:22 sorts 12:4 sources 55:11 56:4 56:24 57:4 speak 8:6 14:6 42:1 Speaker 42:1 special 28:25 29:4 41:25 42:17 50:4 63:9 specific 13:14 48:20 specifically 9:2 12:6 22:14 33:14 40:15 41:17 specified 74:15 SS 74:4 staff 27:20 37:21,23 37:24 38:2 39:19 41:6 42:8 53:19 53:22 66:19 67:22 stand 12:18 63:17 standard 39:2 70:5 70:12 standing 7:23 44:15 stands 63:15 start 25:3 26:23 54:23 started 40:22,24 43:10 63:1 68:20 state 1:20 4:4 27:5 74:3,9,24</p>	<p>statement 56:14 station 15:5 status 20:9 40:7,15 69:5 statute 1:17 stay 40:25 stenotypy 74:12 still 4:23 36:8 stop 3:22 44:9 52:17 story 6:10 straightforward 3:14 Street 2:7 stuff 19:11 65:17 Subscribed 73:20 suddenness 15:9 sufficient 35:25 71:20,24 Suite 2:6,15 Sullivan 1:18 74:9 74:23 summer 5:14,23 SUMMIT 1:2 supervising 39:25 supervision 35:7,8 35:8 47:21 53:23 56:6 57:5 61:13 63:3 65:16 supervisor 13:15 support 55:18,23 57:24 58:4,13,25 supposed 24:23 sure 5:15 7:19 8:8 11:15 12:2 16:9 16:21,24 17:8 19:9 20:8 21:16 23:19 24:13 25:11 26:13 51:25 Susan 14:8,22 sworn 3:4 73:20 74:11 syncope 69:19</p>	<p>61:18 62:13 64:21 66:19 talking 13:2,7 15:20,22 16:5,7 25:14 tall 11:15,17,21,23 35:2 taller 12:1 tell 4:12 7:7 11:14 12:11 13:17 14:9 14:18 17:2 20:24 21:8 28:13 33:17 39:13 43:3 52:3 67:13,14 telling 23:13 35:22 37:9 41:13 45:20 47:11 55:9 67:15 ten 31:6 terms 10:5,17 13:13 18:13 22:16,20 23:3,14 32:25 34:25 39:12 43:22 47:15 48:8 50:10 50:24 51:11,14 55:18,19 60:14 67:6 testify 74:11 testimony 46:15 49:7 74:12,13 Thank 20:16 their 6:17 7:4,13 9:12,21 13:10 18:19 20:9,20 21:2 22:24 23:15 24:5,6 25:5,7 27:21 34:11 40:25 50:10,24 51:14 66:22 theoretically 8:12 therapy 9:10 64:17 thing 19:2 51:11 things 11:14 12:3,4 22:15 48:6,9,17 53:21 54:2,8 60:9 61:7,17 62:13 66:18 67:16 68:6 think 10:19,20,22 11:18,24,24,25 12:7 15:18,24 16:20 17:5 19:11 30:14 32:1 34:25 52:1 60:25 66:6 66:13 thinking 12:4</p>	<p>third 38:15 40:23 though 34:16 54:15 thought 12:8 65:23 three 8:3,4,5,13 30:25 31:10 45:2 45:6,6 55:18 57:18 58:14 threes 35:8,9 55:19 55:20,21 through 10:24 15:3 26:18,18 35:5,12 35:18 41:16 42:21 44:22 57:3,12 58:18 60:13 67:21 68:3 73:3 time 5:8,10 8:15,18 8:22 9:4 24:3 27:18 30:23 33:18 33:19 38:1,4 43:16 44:21 46:4 46:10 54:9,11,13 55:5 56:17 58:8 64:2 74:15 times 26:7 29:8 31:6 Tipping 1:21 2:12 title 5:8 today 10:13,14 11:4 13:5,11 16:25 today's 10:5,6,25 together 17:3 26:19 39:22 44:24 53:9 toilet 55:21 57:16 58:10 toileting 37:25 59:2 told 12:3 13:9,12 14:25 tonal 42:1 tool 24:6 top 22:11 32:6 37:10 Torrey 4:6 tracking 19:15 20:18 trained 24:25 transcribed 74:13 transcript 73:2 transcription 74:13 transfer 28:9 40:7 40:15 55:18 58:13 58:16 transferring 57:5 59:2 transition 5:13</p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

transitioned 5:13 5:22 TRESL 2:4 3:7 11:22 15:21 21:16 26:23 27:4 32:12 71:25 tripped 17:17 true 74:13 truth 74:11,11,11 try 9:11 24:18 32:19 trying 11:22 12:7 15:17 16:8,13,17 23:2 40:11 47:24 58:20 64:8 two 8:13,14 23:16 29:9 30:21,25 31:6,10 43:13 48:23 58:11 twos 35:8,8 55:19 55:21,21 two-by-four 17:19 two-person 58:14 type 51:11 53:17 typically 30:12,19 39:19 40:24 T-O-R-R-E-Y 4:7	53:21 54:23 55:12 60:23 62:4,5 63:15,22 updated 40:25 41:2 41:3,9,14 use 25:16 27:15,17 28:4 35:24 38:5 55:21 57:16 58:10 70:2 used 66:8 68:24 uses 39:18 using 24:5 usually 24:9 28:2 29:4 30:17,25 47:9 utilize 23:14 utilizing 24:5	ways 32:22 40:9 week 11:4 weeks 8:14 29:9 30:21 31:6 weight 22:16 welcome 68:10 well 6:20 9:6 10:21 11:14 12:1 15:3 16:21 23:20 27:21 30:18 40:11 41:18 47:4 48:10 went 4:13 20:10,10 26:17 were 7:8 9:15 10:9 13:10 14:25 21:18 29:24 33:6 41:2 43:17 44:12,14,15 44:23 46:6,23 47:1 48:10 53:15 55:16 61:1,4,5 64:1 66:8 71:14 71:19 weren't 44:20,22 we'll 7:22 9:1,22 13:1 26:17 72:2 we're 14:17,18 59:18,19 we've 49:5 60:9,13 60:14 whatsoever 22:24 wheelchair 17:7 WHEREOF 74:19 while 9:3 20:8 32:2 whole 10:23 74:11 Witness 1:16 74:19 word 35:5 45:3 words 7:20 24:17 71:7 work 12:23,24 13:15 14:15 worked 9:13 worker 21:3,5 24:11 26:8,14 working 46:25 47:1 worry 23:22 34:20 wouldn't 44:2,11 66:25 67:1 write 41:6,7 written 30:9 33:14 39:20 wrong 52:17 wrote 54:20 59:23	yeah 11:5 13:12 22:7 years 35:2 yelled 44:8 Yep 6:15 yesterday 26:18	35548 2:23
U	V	Y	0	4
Uh-huh 48:2 uncovered 66:18 under 1:17 28:12 32:24 41:19 45:13 52:8 58:16 59:5 74:17 Underneath 49:17 understand 3:21,23 4:1 7:23 17:3,16 18:2 39:21,23 54:16 56:11 59:17 60:22 63:23,24 understanding 23:16 24:2 unearthed 67:21 unfolded 67:25 unfortunately 68:20 unit 55:20 University 4:15 unless 38:21 54:20 63:16 66:3 unsteady 70:17 until 22:17 26:1 49:8 51:23 52:21	varies 37:19 variety 48:12 verbal 42:10 vertigo 69:19 very 7:25 12:14 35:2,4 47:25 48:8 48:8 49:23 54:18 54:18 59:21,24 60:1 64:5 view 15:24 25:6 vision 43:25 44:4 visual 38:3 65:24 volunteer 16:15 vs 1:6		01 5:12,19 02 5:14 03-07-3984 1:6	44113 2:8 44333 2:16 4:8 44735 2:24 4518 2:22
			1	5
			1 73:3 1st 65:21 1-29 43:11 52:8 11:00 12:24 1220 2:7 14 1:13 18:24,25 26:7,9 38:20,23 63:15 66:3 14th 62:4,5 14-day 8:21 26:2 38:19 15 29:8 1998 4:14	6 74:25 6'3 11:18 660 2:6
			2	7
			2 19:17 2nd 2:7 45:19 46:16 53:21 54:4,21,22 54:25 56:19 58:23 63:22 66:20,24 2-1 53:6 2-2 43:4,6 46:21 2:05 1:23 2002 5:23 19:17 46:16 2003 1:13 73:21 74:20 2006 74:25 207 2:15 216-241-2600 2:9 24th 74:20 28(D) 74:18 29th 53:20 56:18 58:23 71:8	7 00 54:21 72 73:3
			3	8
			3:35 72:4 30th 41:15 65:21 330-492-8717 2:25 330-670-8400 2:17 3546 4:6	8 00 54:23 85 35:2
				9
				911 17:13