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3	MICHAEL LEE,)	No. 66963					
4 5	Appellant,)))		Electronically Filed Sep 09 2015 08:35 a.m Tracie K. Lindeman				
6	v.)		Tracie K. Lindeman Clerk of Supreme Cour				
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8	Respondent.)						
9	APPELLANT'S APPENDIX VOLUME IV PAGES 701-930							
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26								
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INDEX MICHAEL LEE Case No. 66963

PAGE NO. Defendant Michael Allan Lee's Disclosure of Documents filed 12/11/2013 196-216 Defendant Michael Allan Lee's Witness Disclosure filed 12/11/2013 192-195 Defendant's Motion in Limine to Exclude Autopsy Photographs filed 06/10/2014....... 263-292 Defendant's Opposition to State's Motion for Production of Discoverable Material filed Defendant's Proposed Jury Instructions Not Used at Trial filed 08/14/2014...... 317-319 Ex Parte Application for Court Approval of Payment of Specific Categories of Anxillary Judgment of Conviction filed 11/10/2014......408-408a Notice of Motion and Motion for Proper and Correct Service filed 10/30/2013 187-191 ///

1	Notice of Motion and Motion in Limine RE: Defendant's Expert (Rundell) and to Found Aspects of the Defense Experts' Opinion filed 01/02/2014	lationa 7-246
2	Notice of Witnesses filed 12/15/2011	4-107
3	Notice Resetting Date and Time of Hearing filed 12/13/2011	096
5	Order Denying Defendant's Motion for Judgment of Acquittal and Order Denying Defendant Motion for New Trial filed 09/16/2014	ndant': 6-387
6 7	Order Denying Defendant's Motion in Limine to Exclude Autopsy Photographs and Denying Defendant's Motion for Dismissal filed 07/10/2014	Orde 1-312
8	Order for Production of Inmate Michael A. Lee, BAC #81950 filed 01/18/2012 154	4-155
8 9	Order for Production of Inmate Michael A. Lee, BAC #81950 filed 03/11/2013 173	3-174
10	Order for Production of Inmate Michael A. Lee, BAC #81950 filed 10/20/2014 406	6-407
	Petition for Writ of Habeas Corpus filed 12/12/2011	3-095
11	Receipt of Copy filed 12/13/2011	097
13	Receipt of Copy filed 06/19/2012	168
13	Receipt of Copy filed 08/20/2014	366
15	Reply to State's Opposition to Motion for Judgment of Acquittal and Motion for New Tria 08/29/2014	al filed 9-385
16	Reply to State's Return to Petition for Writ of Habeas Corpus filed 12/30/2011 122	2-153
17	Reporter's Transcript of Preliminary Hearing heard 11/08/2011	5-059
18	Return to Writ of Habeas Corpus filed 12/22/2011	3-121
19	Second Supplemental Notice of Witnesses filed 07/28/2014	3-316
20	Sentencing Memorandum filed 10/14/2014	3-405
21 22	State's Motion for Production of Discoverable Material Pursuant to NRS 174.245's Reci Discovery Provisions and NRS 174.234 Governing Expert Witness Disclosures filed 01/17	7/2014
23	State's Opposition to Defendant's Motion for Dismissal filed 06/13/2014	
24	State's Opposition to Defendant's Motion for Judgment of Acquittal filed 08/21/2014	
25	State's Opposition to Defendant's Motion for New Trial filed 08/22/2014	
2627	State's Opposition to Defendant's Motion in Limine to Exlcude Autopsy Photographs 306/20/2014	s filed 5-310
28	State's Proposed Jury Instructions Not Used at Trial filed 08/14/2014)-321

1	Stipulation Pursuant to NRS 175.552(2) Waiving Penalty Hearing and Agreeing to Have				
2	Sentence Imposed by Trial Judge filed 08/18/2014				
3	Supplemental Notice of Expert Witnesses filed 01/11/2013				
4	Supplemental Notice of Witnesses filed 01/11/2013				
5	Verdict filed 08/15/2014				
6					
7	<u>TRANSCRIPTS</u>				
8 9	Transcript of Proceedings, Jury Trial—Day One Date of Hrg: 08/04/2014				
10	Transcript of Proceedings,				
11 .	Jury Trial—Day Two Date of Hrg: 08/05/2014				
12	Transcript of Proceedings, Jury Trial—Day Three				
13	Date of Hrg: 08/06/2014				
14	Transcript of Proceedings, Jury Trial—Day Four				
15	Date of Hrg: 08/07/2014				
16 17	Transcript of Proceedings, Jury Trial—Day Five Date of Hrg: 08/09/2014				
18 19	Transcript of Proceedings, Jury Trial—Day Six Date of Hrg: 08/11/2014				
20	Transcript of Proceedings,				
21	Jury Trial—Day Seven 1254-1323				
22	Transcript of Proceedings,				
23	Jury Trial—Day Eight Date of Hrg: 08/15/2014				
24	Recorder's Transcript Jury Trial—Day Nine				
25	Date of Hrg: 08/18/2014				
26	Recorder's Transcript of Proceedings, Calendar Call				
27	Date of Hrg: 01/11/2012				
28	///				
İ					

1	Recorder's Transcript of Proceedings, Calendar Call
2	Date of Hrg: 01/08/2014
3	Recorder's Transcript of Proceedings, Calendar Call
4	Date of Hrg: 07/30/2014
5	Recorder's Transcript of Proceedings,
6	Confirmation of Counsel (Nadia von Magdenko) Date of Hrg: 03/13/2013
7	Recorder's Transcript of Proceedings,
8	Defendant's Motion for Judgment on Acquittal; Defendant's Motion for New Trial Date of Hrg: 09/03/2014
9	Recorder's Transcript of Proceedings,
10	Defendant's Motion in Limine to Exclude Autopsy Photographs; Defendant's Motion for Discoverable Material Pursuant NRS 174.245's
11	Reciprocal Discovery Provisions and NRS 174.234 Governing Witness Disclosures; State's Motion in Limine RE: Defendant's Expert [Rundell] and to Foundational Aspects of the Defense
12	Expert's Opinion Date of Hrg: 06/25/2014
13	Recorder's Transcript of Proceedings,
14	Defendant's Motion in Limine to Exclude Prior Bad Acts of Defendant Date of Hrg: 10/28/2013
15	Recorder's Transcript of Proceedings,
16	Defendant's Motion to Continue Trial Date of Hrg: 07/02/2012
17	Recorder's Transcript of Proceedings,
18	Defendant's Petition for Writ of Habeas Corpus Date of Hrg: 01/30/2012
19	Recorder's Transcript of Proceedings,
20	Further Proceedings; Clarification of Sentence on Count 2 Date of Hrg: 10/27/2014
21	Recorder's Transcript of Proceedings,
22	Sentencing Date of Hrg: 10/20/2014 1377-1379
23	Recorder's Transcript of Proceedings,
24	Sentencing Date of Hrg: 10/21/2014
25	Recorder's Transcript of Proceedings,
26	State's Request: Reset Trial Date Date of Hrg: 03/04/2013
27	Recorder's Transcript of Hearing,
28	Arraignment

just get the injury and then drop dead a few hours later.

What was Michael's demeanor that day? The last day, this Tuesday.

The last day of Brodie's life. Was he beating Arica? Is she going to say that? Was he using drugs that day? Was he drunk?

Question is was this a homicide committed in these four to seven hours prior to death, or was it an accidental death from his ATV accident?

Arica's actually going to testify after Brodie vomits at 1 a.m., she goes into the bathroom and takes his shirt off, turns the light on, and doesn't see any new bruising. Again Brodie says, like he did that previous morning, my head hurts.

That day previously, he wouldn't eat. Was he cranky and screaming because his stomach hurt, or was he cranky and screaming because he was afraid of Mike?

Did she mention to the doctor he was in an ATV accident?

In addition to the surgeon the defense is going to present, Dr. Tiwary, the defense is going to present a pathologist who has the same job in another state as the coroner in this case. His name is Dr. Arden.

Dr. Arden is going to present medical evidence that when a person is injured, the body responds in a certain way in certain time intervals. Prosecution mentioned it: Brodie died of peritonitis, which is inflammation in the stomach area. There are three stages of inflammation that Dr. Arden will testify to.

First responders, this is the acute phase, and they come in on the scene. This happens within minutes and within hours you can see it under a microscope.

Then second is the mop-up crew. Dr. Arden's going to give you the actual technical medical terms. This mop-up crew, they do not come on the scene

until two to three days after the injury. Two to three days minimum after an injury.

And what's special about this mop-up crew is they carry iron with them that you can see under microscope and you can do a special test to see if it's present.

Two to three days. And then iron.

Prosecution's theory, based upon the coroner, is that it was four to seven hours prior to death. Where was Brodie during that time period? He was with Arica. If you go back in time these three hours, he was on the couch. On the couch alone.

There was no additional door blocking Brodie off from her, just the regular bedroom door. And this is an apartment. What kind of walls are in an apartment? If Brodie was beaten to death in the apartment during this time period, would Arica have heard her own son being beaten to death?

Would Brodie have told her Michael just hit me, Michael just beat me up? Arica's going to testify Brodie said his head hurt. If Brodie was able to say his head hurt, would he have been able to say Michael just hit me?

And did Arica tell the detectives at the time about a nanny cam, or is that new for trial?

Why would Arica leave her son with a man she thought was abusing her child? Whether in the car or to go and get milk. Why would she spend the entire weekend with him and drop her son off at her mother's house? Is that a concerned mother?

Brodie was in an ATV accident just days prior to his death. There was no additional bruising when she turned on the lights after he vomited. He had no appetite that day. He peed his pants three times.

Was this an accidental death or was it a homicide? That is what we ask

MR. ALTIG: I'm going to object at this time, Your Honor, as to either her lack of personal knowledge or she's stating things that are hearsay if she's saying this get away stuff.

THE WITNESS: I heard her say get --

MR. STANTON: Well just --

THE WITNESS: Sorry.

MR. ALTIG: Then I would object. It's hearsay.

MR. STANTON: Your Honor, as to the personal knowledge, she's a percipient witness so I don't know how she wouldn't have personal knowledge foundationally. As far as the hearsay, I believe based upon the officer's previous testimony that it would certainly fall under the excited utterance rule.

THE COURT: I agree with the State on both grounds. Objection's overruled. BY MR. STANTON:

Q Go ahead. What did you hear the mother say?

A I heard the mother say, as she was pushing him away (indicating), get away from me.

Q Did you hear the defendant say anything to her during this time period?

A During that time and then when they were sitting on opposite sides -there was a stairwell and she was sitting on one side -- on one side of the door and
he was sitting along the wall, sitted (sic) down on the ground, and he would turn to
her and say Arica, I'm sorry -- trying to get her attention, he -- he would say I'm sorry
and she would say don't even talk to me. And so he kept trying to get her attention,
I'm sorry, and she just didn't want anything to do with him. And that is my
speculation, but from her saying don't even talk to me and get away from me and
turning away from him and turning her whole body against him is what I observed.

-40-

- 1.		
1	Q	Okay.
2	А	it wasn't a lot of that questions that we were asking her.
3	Q	You weren't asking her a lot of questions?
4	. А	I was not.
5	Q	Okay, you did ask her, her name?
6	A	Somewhere we got that we got her name, whether we asked her
7	directly or the paramedics got it.	
8	Q	Okay. So this distraught reaction you said Arica had
9	А	Yes
10	Q	you said on direct examination that she couldn't speak?
11	А	She was having very difficult time speaking.
12	Q	Okay, and who was she trying to speak to?
13	А	Anyone the paramedics that could have been asking her do you want
14	some water	r
15	Q	Okay.
16	A	could have been anybody anybody being just either would have
17	been a	
18	Q	Okay.
19	A	first responder, paramedics or the police.
20	Q	It wasn't you?
21	A	It could have been me at the same time.
22	Q	You don't remember?
23	Α	What's what part of it? There was so much that was going on
24	Q	Before you
25	А	that there was if she wanted water, if she's okay, what's going on
	1.1	The state of the s

-43-

-55-

1	A	I hold on. Okay. To be honest, she may have. I don't remember it.
2	Q	Okay.
3	А	Okay.
4	Q	And you have how many kids?
5	A	I have four.
6	Q	And you have 15 grandchildren?
7	Α	Uh-huh.
8	Q	Is that a yes just for the record? The court recorder can't take down
9	uh-huh. So	o is that a yes?
10	А	It is.
11	Q	Okay.
12	A	I couldn't hear you. That's what I said mmm.
13	Q	Okay. I'll try and speak up.
14	A	Thank you.
15	Q	I apologize. Did any of your children or your grandchildren have any
16	instances v	where you had to take them to the doctor
17	А	Abs
18	Q	because they were bruising too easily?
19	Α	Abs not because they bruised too easily, because they
20	Q	Okay.
21	Α	hurt themselves.
22	Q	But that's not my question.
23	А	No.
24	. Q	So
25	Α	They never went to the doctor because they bruised too easily.
		-57-

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-60-

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educational background and also training in that to perform those functions?

- A Yes, I have.
- Q And could you describe first your educational background?
- A Yes. I went to medical school at the University of Connecticut School of Medicine in Connecticut. Then I went on to do a pathology residency program in Hartford Hospital also in Connecticut. I did a surgical pathology residency -- excuse me, fellowship also in Hartford Hospital in Connecticut. Then I went to New Mexico where I did a forensic pathology fellowship. And then I came here to Las Vegas to be employed as a forensic pathologist, and I have a medical license to practice here in the state of Nevada.
 - Q And so you are a licensed physician in this state?
 - A That's correct.
- Q Let me ask you about some terms you just used and if you could explain them in layperson's terms to the ladies and gentlemen of this jury. You mentioned the term pathology. What does pathology mean?
- A Pathology is the study of disease process in the body. An example would be if you had had a skin tag or a lesion on your arm removed or you had a breast lesion or you had a colonoscopy and they took biopsies of those things, they would be sent to a doctor. That doctor is a pathologist who would make a diagnosis of what that lesion is; tell you whether it's benign or malignant or something like that.

Underneath that there are several different types of individuals. One would be a surgical pathologist that I described and also could be a cytologist. For example, when you get a pap smear as a woman or when you have something aspirated, for example, and they give it to a cytologist.

Another example would be what I do as a forensic pathologist where I

specifically look at bodies and perform autopsies.

- Q And the area of forensic pathology I believe you just described is a subspecialization of pathology?
 - A That's correct.
 - Q And what is forensic pathology?
- A Our job is to look at people who have died suddenly or unexpectedly and determine the cause of death and manner of death of that individual.
- Q And is there a medical procedure that assists you in making that determination of cause and manner of death?
- A There are many. Investigation goes into it and that makes us a little unusual in part from other pathologists. None of us work in a vacuum so we always need information to provide us with a background on the individual. And we also perform external examinations on bodies, internal examinations on bodies often called the autopsy, and then we'll do additional testing where we may look under the microscope. We may do radiographs or x-rays, and we may do toxicology or microbiology depending on what the case is and what it calls for.
- Q So an autopsy, the medical procedure that is by that name, is one function out of many that assist people like yourselves, physicians that determine cause and manner of death?
 - A That is correct.
- Q Now, how many autopsies have you been involved in either as a primary attending physician conducting the autopsy or assisting in your background training and experience up until June of 2011?
- A Up until June of 2011, it was probably about 800 cases and then add on about another -- gosh. A good guestimate would be add on another 300 to that.

Q From that date until your testimony here today?

A From my -- from that date till my testimony today, it's probably a total cases that I've done is closer to 1,200 to 1,500. So as I was training, I did anywhere from probably about 250 to 300 plus cases that was during my training. And then after training up until the date you described or the 11th, I did an additional 800 cases. And then since 2011, I've done easily another 400 cases. So I'm somewhere between 1,200 and 1,500 cases.

Q Now you used two terms that I believe in your field of forensic pathology are terms of art. That is cause and manner. I'd like to begin first with cause. Could you explain to what the cause of death means in your field?

A The cause of death can mean many things. It can mean -- myocardial infarction or a heart attack as a common -- it's commonly known. It could be chronic obstructive pulmonary disease like emphysema or asthma. It can also be blunt force injury of head, for example. It could be methadone intoxication. There are a variety of causes of death that may lead someone to die either sudden or unexpectedly.

Q And in your field, what you want to or you (sic) hopeful in determining in your autopsy and your examination and ultimately the report that you prepare is what caused someone's body to stop functioning and cause their death; is that accurate?

A That's accurate.

Q Now what is manner of death?

A There are essentially five manners of death. One of them is natural which we briefly discussed by talking about a myocardial infarction or a heart attack, a natural death. One of them might be accidental like you'd see with someone who

doesn't -- has an overdose, for example, or is involved in a motor vehicle collision. Another would be a suicide as in again you could have someone who took too much medication intentionally, or you can have someone who hung themselves or shot themselves. And the other is homicide where someone has essentially died at the hands of another.

If for some reason we can't fit something into one of those particular categories, there is an undetermined manner of death and that would be an example like if we found a skeletonized remains, you may not be able to tell something that caused their death unless they had something dramatic to their skeleton that occurred.

- So in your world, the world of forensic pathology, in determining manner Q of death, would it be accurate to state that there are four ways you would categorize someone died and there's a fifth or one that's uncategorized?
 - That's correct.
- Now I'd like to talk to you about the date of June 16th, 2011. Did you Q and were you the primary physician assigned to conduct the autopsy of Brodie Aschenbrenner?
 - Yes, I was the primary person and I conducted the autopsy. Α
- Before I get into the contents of the autopsy and that procedure, I just Q want to take a moment to ask you some questions about how it came that you conducted this autopsy versus any other person, the physicians that are employees of the Clark County Coroner's Office. How did that case get assigned to you? Just in a general fashion.
- In general, we have different days that each doctor is on call. Currently there are five doctors, now four actually of -- as of yesterday, four doctors at the

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Are you familiar with Ms. Dahl?

A Yes.

Q And who is she and what role does she play from your perspective in the coroner's office?

A She's one of our investigators. They serve as kind of our eyes and our ears at the scene, and when a body has been found at a scene, they will be called out there to do our investigation, to serve essentially as our eyes and ears. And they'll document the scene, they'll document the body, and then they'll take any photographs, write any information and generate their own report. Usually by the following morning they may or may not have finished their report completely, so they'll put together a little synopsis for us so that we can review it at our morning meeting to have an idea of what the case might entail.

Q And in this particular case, prior to your testimony today, I asked you to select from a large number of photographs that are taken at this autopsy what photographs would you believe assist the jury in understanding your findings as you observed them and as the autopsy took place on the 16th of June; is that accurate?

A Yes.

Q And you've previously reviewed and they have been now marked as State's Exhibit 48 through 76 prior to your testimony today; is that accurate?

A Yes.

MR. STANTON: Your Honor --

BY MR. STANTON:

Q Do those photographs all truly and accurately depict various aspects of your autopsy?

A I assume it's the photographs we discussed and that they would be

-67-

-68-

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discoloration to your skin from the bursting of the blood vessels that are present in that area. And it can be extensive -- it can be towards the superficial level or extensive going towards the deeper level and the layers of the skin.

Q And how about an abraded injury or abrasion? What causes that and how does it appear to you?

A An abrasion is like a scrape. So if you skinned your knee, for example, or bumped it into something rough, that's one way that it can occur. Again, it's a term we use under blunt force injury as an overall heading and we use abrasions and contusions are the types of injuries that can occur -- some of the types of injuries that can occur under blunt force injury.

Q Let me back out on this photograph now to get a frame pointing to you to the contusion injury here. Anatomically, what is underneath the skin of Brodie in the area that I'm pointing right here?

A The ribs are there.

Q Showing you Exhibit 50. Can you tell us, Doctor, what we're looking at there?

A And again -- again we have some more bruises, contusions that are present on his arms. You can see several of them up here on his right arm, also near his elbow and on his right forearm.

Q Now, abraded and contusion injuries, when they are actually inflicted -- abraded, kind of the friction that you're talking about, and contusions, blunt force trauma -- are they immediately visually apparent when they're inflicted on a live person?

A When they occur, you can imagine to yourselves, sometimes you may not even realize it until the next day you might see something that's present there.

Abrasions you tend to be able to see a little quicker and that the skin may be peeled back off of that area that's been injured, but sometimes the contusion, the bruise may not show up for like within the next day is when you might notice it. Sometimes it depends on the severity too, the force at which it's occurred, whether or not you could see it immediately, have it's --have swelling and -- and skin color changes or whether it'll take a little bit of time for that to generate.

Q And when we see a bruise as we see in this photograph, what are we actually seeing? Why is that dark color?

A The dark color that you can start to see are the different changes that can occur in the quality of the bruise. As you noticed probably on yourselves, there's different changes that occur to the bruise from when you first get it to when it passes over a period of time, and that can occur because the body starts to break down the blood that's been released into that bruise into that area and as it breaks it down, it becomes more of a brown color rather then the initial purple color that it can be.

- Q And as we're looking at this bruise in Brodie's right elbow, what we're actually seeing is blood underneath the dura or the skin; is that --
 - A Not dura but underneath the skin.
 - Q The skin.
 - A Yes.
- Q And Exhibit 51. Can you describe what we're looking at and anatomically where we're at in this photograph?
 - A Can you zoom out just a little bit, please?
 - Q Sure.
 - A Just a tad. Okay, thank you.

-71-

Again we're seeing more contusions. This is his right leg. We're looking near his right knee. We can see several of them on the right anterior lower leg as well and up by the right knee as well.

Q Exhibit 52. Can you tell us what we're looking at there?

A This is Brodie's left arm, and you can see again that there are contusions present on his left upper arm. There's a slight circular area over here. That's part of the adhesive from an EKG pad. So that's not a -- not a bruise, that's a circular adhesive from that, but these other ones are contusions and bruises that are present on his left arm.

Q Now, Doctor, in your examination of children, and especially in the examination of Brodie Aschenbrenner, are you concerned when you document these injuries about the location, frequency and severity of the bruises?

A Yes.

Q Why?

A You see a variety of stages in some of these bruises. Some of them are a little browner than they are pink so they've occurred over some period of time, there's been a variety of injuries that have occurred, and the location of them becomes sometimes concerning because it's not often that you'll see the kids have bumps and bruises up on their upper arms or up on their — their thighs, but you may see them on the lower legs or something like that that they bumped into as toddlers. You might not necessarily see them as you see them up on the upper part of their arms or necessarily on their hips.

Q So there's certain parts of the body that you would expect to see bruising on children?

A Yes.

-72-

 Q Exhibit 53. Can you tell us what injuries you noted in this area of his body?

A This is a shot that we use for a couple purposes. You can see that we've placed a white towel around him and then we use our placard. This is what we call our identification shot to be able to look at his face should we need to use it for identification of who he is. Often little kids aren't fingerprinted and so we have to result to taking pictures of them and then putting them into black and white so that we can show them to either a friend of the family or someone for identification. So that's why you see the — the cloth here present in this particular case.

What we can also document then are the injuries that we see here. And in this case we see multiple bruises that are present all scattered around his face, present on his forehead, up near his hairline, in the center of his forehead, around his eye. There's abrasions that are present on his cheeks. There's an abrasion that's below on the bottom part of his lip. There's additional contusions that are present down on the side of his lips. There's another one present on the cheek and a little one that's present over here on the eyebrow. I can keep going. They're present on his eyes, both side of his eyes as well.

- Q And once again, when you denoted both bruising and abrasions, that abrasion is a friction injury --
 - A Correct.
- Q Showing you been marked with -- as State's Exhibit 54. What did you note in this area of Brodie?
- A Again, we can see the side of his face and some of the bruising that we have already identified that's present all the way up into the hairline, present on the cheeks. There's some discoloration present of his ear and then -- we can also see a

they're burst blood vessels that occur. In this case, this looks more like an injury that's occurred to the -- the eye.

- Q Now, based upon my previous questions to you about accidental versus non-accidental injury or injuries that you would consider in a child -- a young man two and a half years of age as being normal type injuries, where does this fall in?
 - A This would be unusual for a child to have a scleral injury.
 - Q And would the same be true about the ripped frenulum?
 - A Yes, it would be unusual.
- Q Exhibit 58. Could you orient us first anatomically where we're looking at Brodie here?

A We're looking at his mouth. And this is his upper lip. And then we've pulled down his lower lip with a forcep and here we could see in the center is the -- his frenulum which attaches his gum to his lower lip. This one's intact and looks good. This is what the other one should look like, but it doesn't.

In addition -- can you clear that, please? Thank you.

You can see some abrasion present of the upper lip. I put a checkmark on either side of it. And then you can see a little bit of contusion that's present of his lower lip as well. So a scrape and a bruise.

Q Exhibit 60. Can you tell us what injuries grossly at this photograph and then we'll go to them individually?

A When we do our procedures in taking photographs at the time of autopsy, you recall that we had one of his entire front and we look at the overall picture, and then this is a picture of his back to be able to demonstrate what he looks like from the back. And from this magnification we can see that there are several injuries that are present scattered across his back, up in his shoulders,

towards the upper mid-back, across the middle of the back and even extending off to the left side.

- Q And Dr. Gavin, do you have an opinion about the location of these injuries regarding my previous questions about normal injuries to children of this age?
 - A This is very unusual.
- Q Like to begin on the back with State's Exhibit 62 and ask you if you can tell anatomically where we are and then could you describe the injury as you observed it and what it meant to you?

A You can see the little crook in his neck up on top and his chin is toward -- turned towards his left shoulder up here. And then you can see his right armpit on this side, so he's on his back and we're looking at his right upper back area. And then there's a slightly patterned injury that's present here. It's a V-shaped abrasion that has smaller abrasions extending out from it in a parallel fashion. We call this a pattern injury because it's not just a simple scrape, it actually shows a shape to it.

- Q And, Doctor, this device here, this ruler, that's placed in there on purpose?
 - A Correct.
 - Q What's the purpose of it?

A We use these rulers to be able to -- to be able to demonstrate what the measurements would be of that particular injury, and then if we find some object or weapon that may be associated with the scene to see whether or not the dimensions of that object would match up to the dimensions of this particular injury.

Q And when you say a patterned injury as opposed to a generalized contusion or bruise, or abrasion, what does a patterned injury mean to you?

Α	A pattern injury in general means that some object was used to be able
to inflict this	particular injury.

- Q And the dimensions and the locations of those wounds that are patterned are important -- very important to you in noting them and its dimensions?
 - A Correct.
 - Q Exhibit 63. Can you tell us what we're looking at there?
 - A Does it focus?
 - Q I apologize. It does and it's on auto so it -- can you see that?
 - A I can.

Can everyone or no? Okay. Seems like a majority of you can see it so here is his chin down at the bottom towards the right end of the picture. And then it's actually -- I believe it's my hands holding his ear back and there's an abrasion behind his ear. And again I used the L-shaped ruler in case there's something that we can identify that matches up to this particular injury. This doesn't hold a particular pattern to me, but it is an abrasion behind his ear.

- Q You note in your report that this is a pressure abrasion; is that correct?
- A Yes, the top of the skin surface on this wasn't as scraped off as I've seen in other abrasions like the one we saw up on the back, so it reminds me of something that's been applied in a great deal of pressure behind the ear.
- Q Now in your experience -- in particular now my question, Dr. Gavin, is in the area of abused children -- is the location of the ear and a pressure abrasion a common artifact in physical abuse cases that result in death?
- A I don't know if I would call it an artifact as much as an injury that can occur either by perhaps the ear's been grabbed and tugged on or pressed on very hardly -- hard, for example.

Q	And can you describe for those that may not be familiar with that part of
the anatomy	for my following question about the blood flow? How easy is it or
difficult to ca	ause an abrasion or contusion in the earlobe area?

A For any of you have had your ears pierced, you can get quite a bit of blood that's present there, but flowing into the cartilage is a little bit less. So you may not see bleeding from it, but you can get a significant bruising to occur, but it takes a fair amount of pressure to be able to do that.

Q Sixty-five. I believe you've mentioned those previously. Now I'd like to ask you a series of specific questions. From this photograph it appears to be apparent that this is the lower back area of Brodie?

A That's correct.

Q And could you tell us, Doctor, what caused you concern and what you noted about the injuries located near the ruler in this photograph?

A This has abrasion as well as contusion to the pattern that we see here. It has a semicircular pattern to it as well, and then it has another contusion that would be near to it or proximate to it. It reminded me of either a hand or even a foot, but it could be a hand that was gripping onto his lower back and — and causing this level of contusion, as well as abrasions up near where the nails might be.

Q And in the sense of where you said the nails, obviously we have your ruler here for dimensions purposes and then we have these bruises here or the abrasions in this area. How many do we have there?

A There's one, two, three, four, five contusions and four abrasions.

Q And out of the abrasions, the ones that I'm pointing here to the far left, that would be one, two, three and four, correct?

A Correct.

Q	Now, Doctor, can you tell us anatomically what is underneat	th Brodie's
body if we	e were to go into his body at this location going back to front?	
À	In this particular langtions itle a little lower than his kidneys	It's more

A In this particular locations it's a little lower than his kidneys. It's more towards the intestines would be in this area.

Q I apologize for this one, but Doctor, could you tell us -- advise the jury that's it's going to be a graphic photograph. Could you describe to us in 67 what we're looking at anatomically in this case and why is this done?

A Although this seems rather gruesome, the point of it is to show the force at which you can see some of these injuries have occurred and we will cut down the back and pull back the skin to be able to look at the injuries and how they've been inflicted underneath. And this is that area where we saw that patterned injury that was present of his lower back and this is showing you the right side of underneath his skin there.

- Q And for purposes of the anatomical area, this would be generally the area of Brodie's spinal column?
 - A Correct, right down the middle would be the spinal column.
- Q And his ribs would be off to the right of that column and to the left in this area; is that correct?

A Correct. Almost -- almost all of the -- the picture would be almost all ribcage right up until where you start to see the injury underneath the skin.

- Q Now where is the duodenum anatomically in this photograph?
- A It's on the other side and it would be approximately not quite in the center, just a little bit below center.
- Q Once again I apologize. Exhibit 68. And this would be on the left side retracted on the back of Brodie; is that correct?

-79-

A So we first saw these injuries as I retracted it to the other direction and now we see the same injury that we were referring to with the abrasions and the contusions that are present on the left side and they're corresponding to the ones that we saw on the skin on the lower back.

Q Now, Doctor, before I get to the next photograph, I'd like to ask you some questions about the autopsy proceeding that deals with head injuries. You described the external examination of Brodie in photographs that depict his face both of the front and there was also an external examination done on the rear of Brodie's head; is that correct?

A Correct.

Q External. What -- and once again, if you could describe it in a general fashion how is an internal examination of the skull and the brain area performed in general and that with Brodie?

A In general, the way that we do our examination -- we already saw the external evidence in terms of all the bruises and abrasions that are present of the head and then we do similarly to what you had seen in the back in that we cut below the ears and we cut around the back of the scalp and then we start to reflect that scalp forward and backward to be able to look at the subscapular, the stuff underneath the scalp, to look at that amount of injury if it's present at all. And then we can also view the skull at that point to be able to see if there's any injuries we could see on the outside of the skull. After that we will cut into the skull to remove that to be able to examine the brain itself.

Q There are a lot of organs in our body that are very critical organs. Would you agree with that?

A Yes.

Q And the brain is one of them?

A Yes.

Q And there are a number of anatomical devices that we're created with that protect that area of our body; is that accurate?

A Correct.

Q If you could give me a little bit of an anatomy lesson, Dr. Gavin, and tell me if we were to work from the outside of my head towards the brain, what is there there anatomically to protect my brain from brunt -- blunt force trauma?

A We start with the skin that's on the surface to be able to protect the brain. Then we go to -- there's a thin layer that's part of that scalp that -- that's present, the skin, the scalp, and it's called the galeal layer. It's just a thin fibrous layer that sits on the skull itself. The skull being the bone part of it would also protect our brain. Beneath the skull there's something called the dura which is like a thin membrane that holds the brain juice, if you will. It sits in the juice around the brain. And then even on the brain itself there's a tiny thin layer that has all of the blood vessels are present that's called the arachnoid.

Now to help you a little more visually with that -- that's the anatomic stuff. And this is very simplified. I try to explain it as if you took an orange and put it on a stick and you put it inside of a coconut, the coconut is the hard outer layer, the rind around the orange would be the dura, and then sometimes when you peel an orange it has that thin layer that stays on top of the orange, that would be the arachnoid. And then the brain matter would be the pulp and the other stronger fibers that are in it. And so if you move it around inside the head, it's going to rotate in different directions and it's going to bang around inside of the head as well.

Q Now you described -- and I appreciate the assistance of understanding

the anatomy of our head and brain. But you described the orange and you said some brain juice. The fluid that surrounds our brain inside our skull, is that a particular type of fluid also designed to protect our brain?

- A Yes, it's called the cerebral spinal fluid.
- Q And is that like water or is it different from water?

A It's different than water. It's more viscous, if you will. It carries proteins, it carries cells in it, and it can also have blood in it if it's a -- been an injury that's occurred.

Q And it's -- when you say viscous, that is a term that describes the thickness of the water, so the brain fluid is a thicker water or thicker liquid than water itself?

A Correct.

Q I apologize for this. Showing you Exhibit 69. Can you tell us anatomically where we're looking at here and what it meant to you, Doctor?

A This is Brodie's right ear, and if you remember we were talking about the bruise, the abrasion that was behind his ear before and that's what we're looking at here. And then we've peeled back the scalp forward and backward, and as you can see just by looking at the picture, there's a lot of hemorrhage that's present in the subscalpular area.

In addition, you can almost see that there's a thin fibrous layer that we were talking about that's present on the skull itself and that's the galeal layer that's present. Even just looking at this picture, you could see the right side is greater than the left and that the -- we don't really see much blood present on the left side, but there's a predominant amount of blood present on the subscalpular and galeal surface on the right side of the head.

	Q	Doctor, could you tell us, using yourself as an example of Brodie's
head,	where	you anatomically saw this significant hemorrhage? What area of the
brain	on Bro	die are we talking about? Or the skull, I'm sorry.

A The skull itself -- essentially started from his frontal scalp, so the front area of his forehead, extended across the entire right side all the way to the back of his head, and then partially on to the left side correspondingly.

Q Now, Doctor, do you have an opinion as to the mechanism in a sense of what caused this injury, not the device but whether it was blunt force trauma?

A This is blunt force trauma. This is not a sharp force injury. This isn't a gunshot wound. This is not natural. This is blunt force that occurred here to his head.

Q And when you said it's not natural, what is your opinion as it relates to common injuries of a non-accident — or of an accidental nature to children around Brodie's age? Do you typically see this type of injury?

A No.

Q Is this a significant amount of trauma to the skull?

A Yes.

Q What types of incidents have you been involved in, in autopsies where you would see this much trauma inflicted to a skull, child or not?

A Motor vehicle collisions would be an excellent example of where I see this level. You actually can see it in gunshot wounds where you have this kind of hemorrhage that you had occur to a head. I've seen it in stabbings where people have tried to stab at the skull and had injury occur to that subscalpular region.

Q Now when you talk about motor vehicle accidents, are you talking about motor vehicle accidents of such a severe magnitude that the person dies from that

-86-

Q Okay. And what is iron staining and what does it mean to you?

A We use a stain called iron. Basically, as — we were talking earlier that the bruises themselves that you see on your body, the blood ends up being absorbed, and one of the things that it breaks down into is the iron or the hemoglobin that you carry on your red blood cells. So as the red blood cells that cause the hemorrhage break up, you have more and more of that iron buildup and that causes some of that color changes along with the hemoglobin in your skin.

Same is true all over the body and the cells that are responsible for eating up all that extra hemoglobin and the -- that's present are the macrophages. And so when you get the neutrophils first and the macrophages start to come on afterwards, you start to look to see how long they've been there by seeing whether or not they've started to eat up all that iron yet. And you can use a stain that specifically makes the iron show itself underneath a glass slide to be able to see whether it's present.

Q And when you did the iron staining in this case to assist you in formulating the timing of the injury, did you see iron staining?

A I did.

Q And what if -- and we're just sticking to the skull at this point and the injuries we just saw in the last photograph. Did that change or affect your opinion in any way about the timing of the injury?

A The -- no, it didn't in that it looked like it appeared to be around 24 hours of time, give or take.

Q And when you say give or take, what is the -- kind of the time period that we're talking about that you -- the range, if you will, of 24 hours?

A Hours. Not days.

Q Okay. Now I'd like to talk to you about -- or let me just back up for to transition to the next area. Is there -- in your opinion, Doctor, the injuries that we saw to Brodie's head, was there attendant injury to his brain?

A When I observed the brain — let me back up a second. First we look at the outer injury that everyone saw. That's a dramatic amount of injury to have occurred to the child. And I briefly mentioned to you that sometimes if you have so much injury that's occurred and blunt force to the skull, that the brain itself can rattle around in there. And when a brain rattles around inside, there's injury that occurs to that softer tissue that's the brain. In this case, I gave you the analogy of the pulp or the fibrous tissue.

Now, when I opened up the skull, I didn't see any bleeding in and around the brain. But because I knew that I had that demonstrable amount of external injury occurring that it was very likely that I was going to see microscopic injury present to the brain and I thought it best in this case to have the neuropathologist who's done additional study on the brain to be able to look at that, dissect the brain, and then bring back the slides to me to be able to examine them and — and concur what my speculation was, which turned out that there was some damage to the fibrous bands, if you will, that are present in between the brain tissue itself.

Q And, Doctor, is there a phenomenon or a term that you're familiar with by the name of hypoxia?

A Yes.

Q What is hypoxia?

A Hypoxia is a lack of oxygen.

Q And did that occur to Brodie?

-88-

A Yes.

Q And could you explain that?

A There is evidence that the brain was swollen. There is also microscopic evidence that there was some hypoxia present in the brain as well. And you could see some changes even in the heart muscle as a result of hypoxia, a lack of oxygen.

- Q And in this particular case you found that in Brodie?
- A That's correct.
- Q And do you have an opinion, Doctor, as to whether or not we had talked about earlier the cause of death; that is, what it is that causes someone's life to cease. Do you have an opinion about the injury that we just observed and that you've been testifying about I'll refer to it as the head injury of Brodie as to the cause of his death?
 - A Yes, I think it's a significant contributing condition.
- Q And what would be the symptoms, Dr. Gavin, that you would expect to see with Brodie after this injury is inflicted and up until the time that he actually ceases life, his heart stops beating?
- A He could complain of headaches. He could be tired, fatigue, and mostly -- sometimes they lose consciousness depending upon the severity of the damage to the inside of the brain that we were referring to.
- Q Now I'd like to go to the interior examination of Brodie's abdomen, and specifically to the internal examination of his abdomen, and I'm showing you Exhibit Number 70. Could you orient us anatomically where Brodie's head would be and what part of his anatomy we're looking at here?
- A Yes. Brodie's head is up in this region. You can see his ribcage here and then this is down where his penis would be and then just taking an overall view

-89-

of his abdomen at this point in time. His balls are distended and you could see the liver is present here.

Q Now, Doctor, there is a portion of your abdominal wall called the duodenum that you found a significant finding during the course of your autopsy. Could you show us in this photograph where the duodenum is located?

A The duodenum is not part of the abdominal wall, but with that said, briefly, the abdominal wall is -- is right here. This is a portion of it. And it kind of has this opaque color that's present here. That is not a normal color. That is due to what we end up talking about here is the intestinal contents that ended up getting loose inside of his abdomen and causing what's called peritonitis, an inflammation of the wall that surrounds all of the organs inside of your abdomen.

- Q And ultimately you opine that what caused -- in conjunction with the head injury that you just testified to, what killed Brodie?
 - A Yes.
 - Q And what was that?
 - A He has a transection of his duodenum that we'll see in a moment.
- Q Now, Doctor, let me ask you first some questions about the duodenum.

 What does a duodenum do in our body? What function does it have?

A When you eat your food, it goes into your mouth and then goes into your esophagus. And then from there it goes into your stomach and your stomach will churn that food around and break it down into smaller bits and then it sends it out into the duodenum which is the first part of your small intestine. So we saw that the intestines were kind of expanded here and the duodenum is just a little bit deeper because it rests behind the stomach. And as the stomach releases the food into the duodenum, the duodenum send -- goes off towards the right side and then

-90-

loops around towards the left.

Q Now, anatomically in my torso, the duodenum from front to back and from side to side, where is it generally anatomically located?

A The duodenum will rest right overlying the spinal cord, so it'll sit -- you'll have in front will be your liver that we just saw. Right to the left of that you'll see your stomach and then below that'll be your duodenum that kind of rides on top of your spinal cord. Between the two would be the pancreas.

Q Now, the function of that within life sustaining activities of our body, would that be a critical area of our body in order to be and maintain life?

A It's not like your brain, but if you have your duodenum torn apart, well then what happens logically is that the food as you put it into your stomach is going to leak out into that cavity that I was just showing to you. It's not going to continue on into your intestines and go out the poop shoot because it can't. It's just not connected anymore. It's like a break in a firehose, if you will.

Q And Exhibit 71. Can you tell us what finding you see in this photograph and why it was important to you?

A Brodie's head is up towards this area. And again, this is the lower part of his body. I've removed the ribcage at this point and I've moved up -- this is his large intestine that I've lifted up to show you the area that's in the back which is where the duodenum is and the mesenteric tissue. There's soft tissue there that contains a lot of vessels in it and you can kind of see those vessels as they extend out into all of your small bowel and they're responsible for getting all the nutrients in. And those vessels themselves kind of meet up in what we call the root, and in that root is also torn as well; the vessels are torn in that area.

Q And we see a darker red color here and also I think you mentioned

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Correct.

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And Exhibit 76 is yet even a close-up of that area you just described; is Q that correct?

Correct. So this is the duodenum itself. My -- part of my forcep is Α inside it and that -- what you're seeing there, that kind of yellowish part, that's where your food goes through. That's where you start to do your digestion. And then my other probe is present in the other half extending down into it and they're not connected to each other.

And, Doctor, do you have an opinion what type of energy was taken -- I Q don't mean levels or anything like that, but how does one get a completely transected duodenum?

This is a significant amount of force. This is like being punched in the Α stomach and then having your duodenum pressed up against the spinal cord such that it ends up tearing. That's the kind of force that you're talking about.

And, Doctor, can you and did you make attempts to time or indicate the Q timing of the injury to Brodie in this regard?

Α Yes, I did.

And is that the same or similar fashion as you described about the Q timing to the head injury?

Yes, the manner in which I did that was similar. Α

And what was the -- what was your conclusion and opinion regarding Q the timing of the dissected duodenum to Brodie?

When you have an injury like this, you're going to have a very quick Α response. If you can imagine any food that may have been present in his stomach or even in his intestines afterwards is now going to go to the place of least resistance. It's going to start coming out into the abdomen. So right away you're

-93-

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going to have those neutrophils I talked about coming out there within minutes to hours. Very quickly you're going to have that inflammatory process and you're going to see a significant amount of damage very quickly there. And then again, within that 24-hour period, you're going to start to see those macrophages I talked to — talked to you about trying to get in there and to chew everything up.

And I remember I was saying to you that when you injure your skin, when you injure your head, and even when you injure your abdomen, the sequence of events is very similar in terms of the way the body tries to protect itself and the timing is similar too. So when you have an event like this where you're just spilling everything into the abdomen, it's very quickly going to respond, the neutrophils are going to respond quickly, and the process of healing is going to be similar in terms of that timing. So although it may start off quickly in that the body says oh my gosh, there's all this food present in my abdomen, you can see those changes occur over a period of time, even up to 24 hours or around 24 hours.

Q And what type of symptoms both as -- let me just stick with a child. If a child had a transected duodenum, how would that child present as far as symptomatology wise?

A They're not going to feel well. They again can really not want to have much of an appetite. They're really not going to want to eat very much. If they do eat, they're probably going to vomit because there's no place for the food to go and the body again reacts so it doesn't want that present there. They may or may not still have bowel movements because remember food is already gone past. So they may still have a bowel movement, but it may not be related to the food that they just ate at that time. They may have pain in their abdomen. They may end up starting to run fevers and they may end up getting lethargic and that can take anywhere

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photographs of Brodie?

A When I looked at his radiographs, I suspected that I saw a fracture of one of his ribs on the left side. And because of the nature of everything that I'm seeing with this case and all the constellation of findings that are present here, again I asked for a consultation on someone who does this everyday all the time and asked for a radiology consult to confirm what I had already seen.

Q And based --

MS. VON MAGDENKO: Your Honor --

Q -- based upon --

THE COURT: Hold on a second.

I'm sorry, is there objection?

MS. VON MAGDENKO: Yeah, we would just object to the introduction of any evidence related to that report that she actually didn't do. She's relying on another expert for her opinion. It's the same objection with the brain consult.

MR. STANTON: Yeah, and Judge, my question and I believe the doctor's answer has to do with the process of the consult that she did and who she consulted with. I did not ask nor do I believe the doctor testified to the results of either this consult or the neuropathologist.

THE COURT: As long as you're not going to ask those questions, the objection's overruled.

BY MR. STANTON:

- Q Doctor, based upon your examination and the procedure that you just described, do you have an opinion about the left eighth rib of Brodie?
 - A Yes, it's fractured.
 - Now when you say fractured, in the ribcage, can you explain what a

-96-

Yes.

Q

	A	No, it did not.
	Q	And do you have any opinion as to whether or not any of those injuries
,	that you d	id observe, were they attributable to what I just descried to you and what
	you obser	ved in the medical records?
	A	The timing is way off, 21 days versus the injuries that we talked about
	that we se	e here at around the time of his death causing his death.
	Q	And you were also aware of an incident involving a trike or a powered
	ATV involv	ring Brodie; is that true?
	А	That's correct.
	Q	And do you have an opinion as to whether or not that incident had
	anything to	do with the cause and manner of Brodie's death?
	A	No, my opinion that did not contribute.
	Q	And why what is that based, Doctor?
	A	The injuries that occurred to him were part of his described as being
	part of a sr	nall abrasion that was present on his head and a small contusion that
	was preser	nt on his head, and nothing to the extent that we've seen and no injury to
	the duoder	num, no injury that would be extensive enough to see that subscalpular
	injury.	
	Q	And in addition you've been provided information once again through
	the normal	investigative procedure, including Mr. (sic) Dahl and the detectives in this
	case about	from Arica Foster, the mother of Brodie, about his behavior and
	activities in	volving head pain, lack of appetite and vomiting leading up to Brodie's
	death. You	were all provided that information, correct?
	Α	Correct.

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-100-

And is that consistent with the opinions that you've expressed in this

- 7

courtroom here today?

A Yes.

MR. STANTON: Pass the witness.

THE COURT: Actually, I think the jury needs to use the restroom real quick. That's fine. So a very quick break for the restroom. So please come back at 25 after. Again you're admonished not to converse amongst yourselves regarding this trial, do not talk about this trial with anyone, do not form or express an opinion on this trial. Please come back at 25 after.

[Off the record at 4:18 p.m.]

[Proceedings resumed at 4:27 p.m.]

[Outside the presence of the jury]

MR. STANTON: Judge, just as a timing matter, this doesn't necessarily need to be on the record, but Dr. Gavin -- I know we're starting tomorrow at 1:00. Dr. Gavin is unavailable until the following Monday after her testimony here today. So I just wanted to let the Court and counsel know.

MS. VON MAGDENKO: Your Honor, I don't think -- I'm not sure that half an hour is going to be enough time for my cross-examination.

THE COURT: Would it be -- would it flow better if you just waited until Monday, or do you want to get started today?

MS. VON MAGDENKO: The problem is that our two experts don't live here and one of them has already booked his flight, through the county actually, to come on Monday. And so I don't know if he's -- and I don't think it makes any sense to have her after when I haven't -- to actually have my experts after her. I mean before her. I'm sorry. Yeah, before her. To have my surgeon before her, I don't think that makes sense, so that's my only concern is that I don't know if he is -- if the county

-101-

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will change his flight and if it will, if he's even available on Tuesday.

THE COURT: How long would she be? Can't we do them both on Monday?

We have four hours. I understand your point but --

MS. VON MAGDENKO: Yeah, yeah, I guess -- yeah, I guess because we have four hours, two hours each, yeah. He's not going to be that long.

THE COURT: Doctor, what time do you leave -- do you leave -- are you gone all day tomorrow?

THE WITNESS: Tomorrow I'm working in the morning an autopsy and then I'm gone by 1:30 in the afternoon. I cut cases in the morning and then I'm gone in the afternoon.

THE COURT: I understand.

THE WITNESS: Yeah.

THE COURT: I'm trying to figure if I could squeeze you in, in the morning. I don't think I can because I have calendar.

MS. VON MAGDENKO: No, that's fine. We -- if -- you know what, you're right. You're right. I -- the surgeon's not going to be that long. We can just do her and the surgeon on Monday.

THE COURT: Yeah, so we'll do -- can you come back Monday at 1:00?

THE WITNESS: Of course.

THE COURT: And then you can call your expert after that. Now, do you want to start your cross now or later so it all kind of flows? It --

MS. VON MAGDENKO: Later.

THE COURT: -- doesn't matter to me.

Mr. Stanton, do you have any objections to that?

MR. STANTON: No, Your Honor.

-102-

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6	DISTRICT COURT				
7	CLARK COUNTY, NEVADA				
8	THE STATE OF NEVADA,				
9	Plaintiff, CASE NO. C277650-1				
10	VS. DEPT. XXIII				
11	MICHAEL LEE,				
12)				
13	Defendant.				
14	BEFORE THE HONORABLE STEFANY MILEY, DISTRICT COURT JUDGE				
15 ⁻	WEDNESDAY, AUGUST 6, 2014				
17					
18	TRANSCRIPT OF PROCEEDINGS JURY TRIAL - DAY 3				
19					
20	APPEARANCES:				
21	For the State: DAVID STANTON, ESQ. Chief District Attorney				
22	JOHN L. GIORDANI, III, ESQ. District Attorney				
23	For the Defendant: NADIA VON MAGDENKO, ESQ.				
24	STEVEN M. ALTIG, ESQ.				
25	RECORDED BY: MARIA GARIBAY, COURT RECORDER				
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INDEX OF WITNESSES

	INDEX OF VALINESSES	
2		PAGE
3	FOR THE STATE:	
4	KAMI BECKWITH	_
5	Direct Examination by Attorney Giordani Cross-Examination by Attorney Von Magdenko	5 25
6	MERRIDEE MOSHIER	
7	Direct Examination by Attorney Stanton Cross-Examination by Attorney Von Magdenko	30 56
8	Redirect Examination by Attorney Stanton	72
9	Recross Examination by Attorney Von Magdenko	73
10	ARICA FOSTER Direct Examination by Attorney Stanton	70
11	Direct Examination by Attorney Stanton Cross-Examination by Attorney Von Magdenko	76 146
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		
- 11		

-2-

INDEX OF EXHIBITS

7			INDEX C	<u>)F EXHIBITS</u>	<u> </u>	
2						<u>PAGE</u>
3	FOR THE STATE:					
4	3 F	hotograph				32
5	6-41 F	Photograph Photographs				79 9
6	41 F	Photograph Calendar				138 28
7	78 F	Photograph				13 146
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[Outside the presence of the jury]

THE COURT: Are all the jurors here?

THE MARSHAL: They are, Judge.

THE COURT: All right, counsel, is there anything we need to address before we bring the jurors back in?

MR. STANTON: Not on behalf of the State, Your Honor.

THE COURT: Okay.

MR. ALTIG: No thank you, Your Honor.

THE COURT: Okay. Bring them in please.

[Pause]

THE MARSHAL: District Court XXIII jury is present.

[Jury in at 1:14 p.m.]

THE COURT: Welcome back, ladies and gentlemen. When we left off yesterday, we had a doctor — let me get her exact name. We had Dr. Gavin on the stand. Because of scheduling issues, we're going to kind of take her a little bit out of order in that we're going to call — the State's going to call some additional — different witnesses at this time and Dr. Gavin will come back on Monday afternoon at the time the defense attorneys will have a chance to speak with Dr. Gavin. So I just wanted to let you know we'll be seeing Dr. Gavin once again.

So the State, if you could call your next witness.

MR. GIORDANI: Kami Beckwith.

[Pause]

THE MARSHAL: Please step up. Please remain standing. Raise your right

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Q So do you call that processing a scene, generally?A Correct.Q Is that the term for it?A Yes.

Q Okay.

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Α	I don't	do any	interviews,	no	arrests.
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Q What type of information do you typically have going into a call? And by that I mean do you have specific information about what potentially went on in order to lead you in your investigation?

A Usually what happens is a Sergeant over the unit that's being called out will contact my supervisor and then the supervisor would direct me to go out and I'm usually briefed on what the call is regarding, why I'm going, but I usually don't have details going in.

- Q I want to draw your specific attention to June 15th of 2011. On that day, did you respond to a scene at 2900 Sunridge Heights?
 - A I did, yes.
 - Q Is that here -- actually in Henderson, Clark County, Nevada?
 - A Correct.
 - Q And did you go to a specific apartment?
 - A Yes, I went to Apartment 1416.
 - Q Okay. What was the nature of the call when you received it?
- A When I got the call, the details I got for this particular case was that it was a child death investigation and that the child had just vomited couple hours prior that night.
 - Q Okay. When you respond to the scene, who is present at the scene?
- A When I got there, everybody was outside the door. Officer Rasmussen was one that was securing the front door and I went in and started doing the photography exactly as it was depicted when I arrived, and then I allowed them to go ahead and go in and begin their search and I would start doing measurements --
 - Q Okay.

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photograph certain things?

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1	A	Correct.
2	Q	Showing you State's 7. What is that?
. 3	Α	That's the entry into the apartment, 1416.
4	Q	As you walk through the door, and I'm showing you State's 8, what is
5	that?	
6	A	That is taken from the dining room looking into the living room.
7	Q	And can you see on your screen there too?
8	∥ A	I do.
9	Q	Is there a TV there on the left?
10	A	I yes.
11	Q	And a couch on the right?
12	A	I'm sorry, could you repeat the question?
13	Q	And a couch on the right?
14	Α	That's correct.
15	Q	State's 9. Is this a close-up of that same couch?
16	A	That's the couch in the living room, yes.
17	Q	What is this in State's 10?
18	Α	And that is taken from the living room looking at the dining room with
19	the kitchen.	
20	Q	Did you actually go into the dining room?
21	A	I did.
22	Q	State's 12. What is that?
23	А	That is the kitchen and that's the fridge that was in there.
24	Q	What's the purpose of taking that photo?
25	А	He had been drinking some blue liquid in a tumbler cup that was found
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786

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-22-

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-28-

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Α Yeah.

Q Is that a toy that your grandson, Brodie, had?

It is. I don't remember which Christmas he received it, but it's the top. Α pecause it was red.

And can you tell me generally speaking, Ms. Moshier, about what Brodie was like as a child into 2011? In particular, the April, May, beginning of June 2011, how did he act and behave?

Brodie was -- first he was a gift. And he'd come in the door yelling Α nana, nana. And he would watch cartoons, he'd crawl up on the couch, he would get out on the quad, he'd do things like dance on my coffee table to The Wiggles. and you'd walk by and he'd be like catch me and he'd just jump, one, two, three ump and you'd catch him. He'd climb up shelves in my refrigerator. He was just --ne was one of those babies that didn't cry that just was loving and generous and aughing all the time.

Q He was active?

Α Always very, very active.

And during the course of your interaction with Brodie, would you say Q hat you interacted -- and now my question is focusing into the timeframe of the year 011 -- on a regular basis with Brodie?

Yes, for guite a while right -- prior to this, for nine months Arica and Α Brodie lived with us. So she worked and we always had Brodes. And then when Arica left and moved out, we kept him at least one weekend night, sometimes two.

Okay, so sometime you said that Brodie and Arica actually lived with Q you and your husband?

From September when he was like nine months old up until the time Α

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1	she moved out with Mike which was I think it was rebluary, March.			
2	Q	Of 2011?		
3	А	Correct.		
4	Q	And when you say the individual by the name of Mike, is that the		
5	defendant, Michael Lee?			
6	А	Yes.		
7	Q	Do you see him in court today?		
8	А	He's sitting there in a black suit with a red tie.		
9	MR.	STANTON: May the record reflect		
10	THE	WITNESS: Right there (indicating).		
11	MR.	STANTON: the identification of the defendant?		
12	THE COURT: It will.			
13	BY MR. STANTON:			
14	Q	Were you familiar in your experience both in your background as a		
15	nurse, as a mother and a grandmother, and your involvement in Brodie's life with the			
16	normal injuries, bruises, abrasions that Brodie would get both as to the number of			
17	them, the location of them, and the severity?			
18	A	Yes, I was.		
19	Q	And you indicated that there was a transition of where Arica and Brodie		
20	lived in February or March of 2011. Sometime earlier, specifically in October of			
21	2010, did it	become known to you that Arica had a new boyfriend and that is the		
22	defendant?			
23	A	Correct.		
24	Q	Were you able to observe the interaction and now we're about the		
25	timeframe of October of 2010 until June of 2011 how Brodie interacted with the			
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When they were first dating, Mike would come over and sit and watch Α TV or hang out, and so Brodie would be there with us and Mike and Arica. Sometimes the three of them would leave and go do various activities. Sometimes they'd be at the house with us. So I was -- I was there. I could see the interaction.

And do you have an opinion based upon what you observed as to Q whether or not there was any change in that behavior; that is, what you observed Brodie interact with the defendant, especially leading up to the month of June of 2011?

Brodie right there at -- towards the end would get upset when Mike picked him up. However, sometimes he would get upset no matter who picked him up. He -- he really loved staying at our house. You know, it was -- we're grandparents, we spoil him, let him do probably things his mother never would, so you know, sometimes he just wanted to say with us, but there were times he did not want to leave with Mike.

And that was different -- noticeably different to you from when the first part of the relationship or the interaction between Brodie and the defendant?

I would say so, yes. Α

Now, I want to direct your attention to about 20 days prior to June 5th of Q 2011.

Α Okay.

Did you become aware of the fact that Arica and Brodie were in a Q fender bender?

Yes. I was -- she called me when they were in the wreck. It was down by the junior high. She was picking up one of my other granddaughters. And I left

-35-

work and went down there, so I actually met her at the car with Brodie directly after the accident.

- Q So where the cars were originally stopped, you went to that location?
- A She had just pulled into the church parking lot. The the junior high as I came down I can't remember the road. My mind is anyway, it was on the left and they had the cars were not that wrecked, so they pulled into the parking lot to the right at the church.
 - Q Now --
 - A And then the cops were coming and the fire department, so --
 - Q And when you were there, did you have an interaction with Brodie?
- A I did. I picked him up and I was walking around with him and -- and somehow he didn't have his shoes -- Brodie and his shoes, they were always missing. I don't know what he did with this shoes, so I had picked him up and took him out where there was some grass and we were playing while this was going on with Arica. They were doing the report. And then John, my brother-in-law, came down and got Brodie and took him back to the house with Lily.
- Q Okay, how much time were you with Brodie physically at the scene, would you estimate?
- A You know, John was at work on the other side of town, so it probably took him, you know, a good 30 minutes to get down -- school's over, traffic's getting busy.
- Q So during this time period you indicated that you actually picked up Brodie and you're carrying him around?
 - A Well the pavement was hot. It was June or whatever month. So --
 - Q So is that a yes that --

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 MR. STANTON: They're not a group. They're not sequential so you'll have to --

MS. VON MAGDENKO: Your Honor, we objected to the witness being shown State's Exhibit 52, 49, 54, 50, 57, 53, 59, 61, 62, and 63. And for -- 63 shows the back of the ear. There's actually no evidence that she actually pulled the ear back during the time she had him.

These were also shown -- all of these photos were shown to the jury before and the re-showing of them we believe just inflames the jury and is focusing on the photos instead of the evidence. He could have simply asked what injuries he had. He could have asked the witness what injuries Brodie had during the weekend when she had him.

Also specifically to photo number 57, this photo shows about an inch or so pulled down with a forcep of the eye. There's no evidence that she actually took a forcep and pulled down that low to see when she was giving the drops that he would have this mark under his lower eyelid.

Also she testified that she brushed Brodie's teeth. Picture number 59 shows the forcep again being pulled up about an inch or two. There's no evidence that when you brush a child's teeth, you -- she didn't testify to it; that you actually pull the top of the lip an inch or two to do that, so therefore she wouldn't have seen this internal type of injury.

Those are our objections, Your Honor.

MR. STANTON: Your Honor, the relevance of these photographs -- there was a pretrial motion filed by the defense and the State responded and the Court has previously ruled as it relates to Dr. Gavin addressing cause and manner and the number of injuries involved in this case.

-50-

As I'm sure the Court is aware, the number of injuries, the location and severity are critical to this jury making the determination -- kind of the crux of this case -- as to whether or not the death of Brodie Aschenbrenner is accidental versus non-accidental. I think not only is it amplified now more after opening statements of yesterday than it was prior to trial when the Court ruled is that at least to the extent I was able to grasp the gravamen of the counsel's opening statement was that they, at least in part, asserted that Brodie's injuries were accidental in nature. I think it was directly attributed to this Power Wheels incident of several weeks before, or several days before.

Thus, the probative value of these photographs become increasingly heightened and what we have here is a nurse of 27 years who bathes this child and examines him from head to toe on Sunday evening and we are now talking about within at least close to 48 hours of the time that Brodie's life stops, let alone when the fatal injuries are delivered, which I think the evidence going to show that occurred at two distinct periods of time.

In addition, Your Honor, to all that -- and I know the Court's not aware of this because it hasn't been probably served on the Court, but in the notice of experts of the defense counsel, they noticed three experts; two physicians, one a forensic pathologist out of those two, and then a biomechanical engineer. My reading of their reports and the opinions expressed in there, at least to a significant degree, attempt to argue and place the aging of these injuries back days and hours prior to what you heard Dr. Gavin express yesterday as it relates to two fundamental injuries; that is, the major and the minor component of the cause of Brodie's death, the head trauma and the acute peritonitis.

Therefore, based upon the defense's own opening statement, the timing

of these injuries, the location, the severity of those injuries in toto and in particular, are directly relevant to the prime issues in this case.

Now as to the objections to 57, the eye, and 59 of the frenulum, counsel's saying that there's no evidence to say that they saw that. I would respectfully disagree. What we have is the testimony of this nurse that she actually brushes his teeth, that she is involved in that physically in doing it besides observing, and the question is did you see any of the trauma? And maybe she can or can't because of how far she saw with her (sic) lip pulled up, but the more operative question is, is whether or not Brodie reacted in any pain when the teeth were brushed.

And the witness -- and I'll leave it for the record as the Court observed Ms. Moshier demonstrating pulling both the right eye and the bottom eyelid open simultaneously to put in the eye drops, but that specific demonstration I think speaks volumes as to whether or not she would have been a percipient witness to a bruise if it existed and was present on that day.

And finally the ear. I would just submit that when you look at the picture of Brodie, both the front of his ear and the back of his ear would be relatively obvious to any person near him based upon his hair length and that it is visual to the naked eye.

MR. ALTIG: Your Honor, if I may just briefly? Thank you.

The State's absolutely right. There was a motion that was filed by the defense, a motion in limine, asking that we prevent certain photographs -- these photographs from coming before the Court. The State argued that they were needed and required because the coroner needed them to describe their testimony. We argued to the Court that we believed that the photographs were much more

prejudicial than they were probative, if anything, but you allowed them to be introduced for purposes of the coroner's testimony.

And here we are a day later and they're being introduced again and shown to the jury again through a different witness. They aren't needed to explain that witness's testimony. They aren't needed for anything that's probative. They're using them for the prejudicial effect on the jury and to bring out the ire of the jury to have an emotional effect on the jury. That's what they're being shown again. They're not being shown for any probative value. You can simply ask the witness did any of these injuries exist at the time you saw Brodie and the witness can say no, they did not. You don't need to -- showing the -- publishing the photographs over and over again.

So we would renew the objection that they're not probative of any fact.

We believe and I actually would believe that the showing of them to this particular witness violates the Court's order with regard to the motion in limine that they could be used and provided to the coroner for explanation of the coroner's testimony.

And actually I think at this point, Your Honor, since that order's been violated, a motion for mistrial may even be needed at this point because the Court's order on the motion in limine to use them only solely for the purpose of the coroner's and to explain the coroner's testimony has been violated. They've been published to the jury again and we can move for a mistrial and would move for a mistrial.

THE COURT: Okay. Let me just rule -- let me state the basis for allowing the State to show the pictures.

As it's become evident over the course of the trial based upon the questions asked, since there's been questions regarding this four-wheeler injury, that the child was called Bambam, there were several nicknames for him because

 he was always bumping into things, falling and everything else, it's obvious that the position for both sides is all going to come down to timing when did the injuries occur.

It's obviously the State's position that the injuries occurred in a short window of time and closer to the time of death. It's been the defense's position, both based upon the questions asked as well as the statements that were made during openings, that the injuries that ultimately resulted in Brodie's death were actually sooner than that.

The grandmother can help put the timeframe into context. That's why the Court finds it more probative than prejudicial in that she was someone who saw Brodie a couple days before the death occurred. She can put the injuries into context whether or not they did in fact exist at the time she saw him, which was several days before death like the defense seems to allude, or whether the injuries were newer and occurred after she saw him closer to the time the actual death occurred.

As far as the showing of the eye, the ear and the frenulum, you know, Brodie has short hair so I do think that there is appropriate foundation laid that the grandmother in putting lotion on him and just taking care of him and dealing with the face by putting drops into the eyes that that would be an area of the body which would be readily apparent. And again, he is a boy and he had short hair as evidenced in the photographs.

As far as the eye and the frenulum -- I can't -- I'm having difficulties with that word. But anyways, I think there was appropriate foundation laid with respect to that as well in that she had just a couple days prior been looking at the eye, doing things around the eye because the child had conjunctivitis and needed drops in the

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eye, and also that she was active in making sure the child had brushed the teeth.

And the Court also notes that she is a nurse who worked in the area dealing with injuries to individuals.

As far as violating Court's order, the Court finds it did not violate the Court's order. When the photographs were originally showed to me, I mean I only get a brief glimpse of the -- the sides' respective positions at the time of trial and at that point the only person I was aware it would -- they would come up with was the coroner and the Court felt that it was helpful and assistive to the jury for the coroner to have photographs to show what was done exactly and what the coroner believed to be the manner and cause of death and -- but I did not know that the grandmother was also -- you know, the intent was to have the grandmother testify to put the timing in sequence also.

So had I known that, I would not have specifically limited my ruling. My ruling was based upon the information that was provided to me at that time. So the request for a mistrial would likewise be denied.

I'm going to run to the restroom real quick if you --

MR. ALTIG: Thank you.

THE COURT: -- guys need to go.

MR. ALTIG: Yes, please.

MS. VON MAGDENKO: Yes.

THE COURT: And then we'll bring the grandmother in if she's composed.

MR. ALTIG: Thank you.

[Off the record at 2:29 p.m.]

[Proceedings resumed at 2:38 p.m.]

[Outside the presence of the jury]

-55-

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[Witness in at 2:38 p.m.[

1	Α	I read it.		
2	Q	Okay. Has this refreshed your recollection?		
3	Α	Vaguely, yes.		
4	Q	Okay. Isn't it true that you actually told the police not that Brad only		
5	held down	Brodie's hands, but that he had to actually hold down his arms and his		
6	legs; isn't that true?			
7	Α	That's true.		
8	Q	Okay. So what you told the jury was not true?		
9	Α	I remembered part of it. This is three years ago.		
10	Q	Okay, so then we can't rely on your testimony today?		
11	MR. STANTON: Objection; argumentative.			
12	THE COURT: Sustained.			
13.	BY MS. VON MAGDENKO:			
14	Q	You testified earlier that Brodie had an eyeliner type of bruise?		
15	. А	Correct.		
16	Q	That was his left eye?		
17	A	Correct.		
18	Q	Was that on the top or the bottom?		
19	A	It was the bottom lid.		
20	Q	Okay. And do you think Arica saw that bruise?		
21	MR.	STANTON: Objection; speculation.		
22	THE	WITNESS: I don't know what Arica saw.		
23	BY MS. V	ON MAGDENKO:		
24	∥ Q	Did you tell the police whether or not you thought Arica saw that?		
25	MR. STANTON: Once again, speculation, Your Honor, objection.			
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-59-

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-64-

843

1	approached you with a transcript of a statement that you gave.		
2	А	Correct.	
3	Q	Do you recall giving that statement?	
4	Α	I do. Yes.	
5	Q	Do you remember when in time to June 15th I'll put Exhibit 77 up	
6	there for you. Wednesday, June 15th, when you gave the recorded statement that		
7	you just were shown by counsel?		
8	. A	I believe it was June 23rd.	
9	Q	So that would have been a little over a week after the incident?	
10	А	Correct.	
11	Q	You indicated that Brad is your husband and he played a game called	
12	typewriter.		
13	Α	Correct.	
14	Q	Could you explain that game to me?	
15	. А	He was tickling Brodie and he just he'd do typewriter on the chest.	
16	We'd you	know, it was a game and Brodie would laugh and giggle and squirm.	
17	Q	So you anticipated my next question to you is what was Brodie's	
18	response w	then he was the recipient of the typewriter as you just described?	
19	A	He had the most infectious laugh of any baby I've ever seen or heard.	
20	Q	And that's what he would do when typewriter was played on his chest?	
21	A	Just giggle and laugh. It was a deep belly laugh that he had.	
22	Q	Thank you.	
23	MR.	STANTON: Nothing further.	
24	THE	COURT: Anything else before Ms. Moshier's excused?	
25		RECROSS EXAMINATION	
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1	BY MS. VON MAGDENKO:		
2	Q	Is Brad right handed or left handed?	
3	Α	He's right handed, I believe.	
4	Q	Okay. And were you on taking any medications at the time of	
5	Brodie's dea	ath that weekend?	
6	Α	I that's a long time ago. I don't remember.	
7	Q	You don't remember if you were taking any you have a back	
8	problem?		
9	Α	Yes, I do.	
10	Q	And do you take medication for that?	
11	А	Currently, yes.	
12	Q	Okay. And did you back then?	
13	A	We had just moved I I honestly don't remember if if I was taking	
14	medication	then. I could have been.	
15	Q	Okay.	
16	MS.	VON MAGDENKO: Court's indulgence.	
17		[Colloquy between counsel]	
18	BY MS. VO	ON MAGDENKO:	
19	Q	So you don't recall if you were taking Oxycoton (sic) at the time?	
20	A	No, I don't.	
21	Q	Okay. Have you ever taken it?	
22	A	Yes.	
23	∥ Q	Are you taking it currently?	
24	A	Yes.	
25	Q	Okay. When did your back problem start?	
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-75-

1	IHE	WITNESS: Arica Foster, A-r-I-c-a, last name Foster, F-0-s-t-c-1.
2	THE COURT: Whenever you're ready.	
3	MR. STANTON: Thank you, Your Honor.	
4		DIRECT EXAMINATION OF ARICA FOSTER
5	BY MR. STANTON:	
6	Q į	Ms. Foster, as you testify here today, ma'am, how old are you?
7	А	Twenty-six.
8	Q	I want to direct your attention back to December of 2008. In that time
9	period, ma'am, did you give birth to a young boy?	
10	Α	Yes.
11	Q	And what is that young boy's name?
12	A	Brodie Aschenbrenner.
13	THE COURT: Can you	
14	BY MR. STANTON:	
15	Q	I'm sorry, you have to keep your voice up
16	A	Brodie Aschenbrenner.
17	Q	And the father of Brodie is who?
18	Α	Dustin Aschenbrenner.
19	Q	I'm assuming at that time or soon there around there you had a
20	relationship with him?	
21	А	Yes.
22	Q	And did sometime after his birth that relationship dissolve?
23	А	Correct.
24	Q	Did you have custody of Brodie?
25	А	Pretty much, yeah.
		-76-

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babysit Brodie?

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1	just babying him.		
2	Q	That you were babying him?	
. 3	А	Yes.	
4	Q	Did you have more than one discussion with the defendant in that	
5	regard?		
6	А	Yes.	
7	Q	Did you have what some people would consider an argument about	
8	that?		
9	A	Yes.	
10	Q	On more than one occasion?	
11	А	Yes.	
12	Q	What was your perspective about potty training Brodie?	
13	А	No kid every ever went to kindergarten not potty trained, he'd get	
14	there.		
15	Q	You were going to let it time take its course and	
16	· A	Yeah.	
17	Q	be patient?	
18	A	Yeah.	
19	Q	Did you notice a change in the behavior of Brodie around the defendant	
20	in the April, May time period?		
21	A	Yes.	
22	Q	Could you describe that for me?	
23	A	Brodie would cower. He wouldn't want him around him. He'd cry and	
24	run to me.		
25	Q	He would cry and run to you? Is that correct?	
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-90-

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-91-

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1	Α	Yes.	
2	Q	Who related that information back to you?	
3	Α	Michael Lee.	
4	Q	The defendant?	
5	Α	Correct.	
6	Q	And he told you that his sister was upset and that you owed her	
7	money?		
8	Α	Correct.	
9	Q	How much money did you owe?	l
10	А	Like \$160.	
11	Q	What happened or what was your observations about Brodie's bruising	ŀ
12	when the babysitting with Jen Lee ended?		
13	A	It went away.	
14	Q	For how long?	
15	A	Two to three weeks.	
16	Q	At the end of two to three weeks, what happened about what you were	
17	observing	with Brodie?	
18	А	The bruising started again.	
19	Q	And can you describe whether or not the bruising was the same as you	
20	just descri	bed before; that is, the severity, the location, frequency, or was it	
21	different?		
22	A	It just started to slowly appear again. And then it started to get bad	
23	again.		
24	Q	Was it bad in the sense of the severity?	
25	A	Yes.	
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866

1	Α	Yeah.
2	Q	Was your foot on the brake or off the brake?
3	Α	Off the brake.
4	Q	And how far did you roll after being struck?
5	Α	Probably about half a block.
6	Q	Where was Brodie in the vehicle?
7	Α	The back seat on the right-hand passenger side.
8	Q	Was he in a car seat or not a car seat?
9	Α	In a car seat.
10	Q	Was there any damage to the car seat?
11	Α	The Styrofoam popped out.
12	Q	Where did the Styrofoam pop out?
13	А	On the right-hand side of it, the top part.
14	Q	Okay. Was it just a piece of Styrofoam or was it a whole portion of the
15	seat the	Styrofoam backing of the seat?
16	А	It was just the top backing right-hand corner.
17	Q	Did you look at Brodie?
18	A	Yes.
19	Q	Did you talk to Brodie?
20	A	Yes.
21	Q	How did he appear to you?
22	А	Fine.
23	Q	How about yourself?
24	A	I hit my head on the window.
25	Q	The windshield or the side
		-94-

1	Α	On the side window.
2	Q	Did you go to the hospital?
3	Α	Yes.
4	Q	Any injuries at the hospital or treatment?
5	A	No. They just did x-rays. I was fine.
6	Q	You were released that day?
7	·A	Yes.
8	Q	Who took Brodie?
9	А	My mom.
10	Q	Did she come to the scene?
11	Α	Yes.
12	Q	When you got home that night, the night of May 25th, did you examine
13	your son, Brodie?	
14	А	Yes.
15	Q	Were you concerned about him?
16	Α	No.
17	Q	Why?
18	А	Because he was just being his normal playful self.
19	Q	He didn't act any differently?
20	A	No.
21	Q	He wasn't complaining of headaches?
22	А	No.
23	Q	He wasn't vomiting?
24	Α -	No.
25	Q	He had no abdominal pain?
		-95-

(623) 293-0249

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- 11		I I
1	Q	What did you do with the racecar bed?
2	A	I took it apart.
3	Q	Why?
4	Α	Because I I thought he was getting hurt on it.
5	Q	Was there padding on that bed?
6	Α	No.
7.	Q	Did you then change beds for Brodie?
8	Α	Yes.
9	Q	What did you do with the bed that he was now going to be in at your
10	apartment?	
11	Α	The new bed?
12	Q	Yes, ma'am.
13	Α	I put padding around it.
14	Q	You put padding around it? Is that correct?
15	А	Yes.
16	Q	How did you put padding around his new bed?
17	Α	I took his sorry.
18	Q	Take your time. Just relax.
19	A	I took the foam part from his baby crib, the bumper from his old baby
20	crib and I stapled it around the wall where his new mattress was at.	
21	Q	And this is once again the weekend of the 4th into the 5th or the 3rd,
22	4th, and 5th of June, 2011?	
23	Α	Yes.
24	Q	Why did you put the padding around his bed?
25	А	So he wouldn't bump his head on the wall.
		-98-

(623) 293-0249

1	Q	Were you concerned that Brodie turned it off?
2	А	Yeah.
3	Q	Did you ever see him do that?
4	А	No.
5	Q	How about your preference and what you did about the bedroom door
6	to Brodie's	room? Can you tell me about what your preference was in that regard?
7	A	I wanted to keep it open and put the doggy gate up so the dog couldn't
8	get in there.	
9	Q	You had a dog?
10	A	Yeah.
11	Q	And there was a doggy gate to prevent that?
12	Α	Yes.
13	Q	Why did you want Brodie's door open?
14	A ^c	So I can hear him if he got up in the night.
15	Q	And was that a point of contention between you and the defendant?
16	А	Yes.
17	Q	Why?
18	Α	Because he wanted the doors closed.
19	·Q	The defendant did?
20	Α .	Yes.
21	Q	He wanted Brodie's door bedroom door closed?
22	Α	Yes.
23	Q	Did you find that door closed when you woke up in the morning on more
24	than one occasion?	
25	• А	Yes.
		-101-

1	ride his Power Wheel.	
2	Q	And could Brodie ride a Power Wheel?
3	Α	Yes.
4	Q	Did he like doing it?
5	Α	Yeah.
6	Q	What did he do that day that you observed?
7	Α	He hit the curb.
8	Q.	The curb of on the street?
9	Α	Yeah.
10	Q	Did he fall off of it?
11	Α	Yes.
12	. Q	Where did he strike, if anything, on his body?
13	A	His cheek.
14	Q	Can you tell me and show me where on his cheek? And what side of
15	his face it w	ould have been on?
16	Α	I can't remember which side, but it was just a tiny little bruise
17	(indicating)	on his cheek.
18	Q	Okay. You're indicating in kind of the fleshy portion of the jowls of some
19	of Brodie	's face?
20	Α	Yes.
21	Q	How did Brodie react when he fell off the Power Wheel?
22	А	He just jumped back up.
23	Q	Was that typical Brodie? Is that a yes?
24	A	Yes.
25	Q	That evening or from that incident till you put Brodie to bed that night of
		-105-

1	June 6th	or June 9th, I apologize, did you see any change in Brodie's behavior?
2	Α	No.
3	Q	Did he ever have or express to you abdominal pain?
4	Α	No.
5	Q	Did he ever have a loss of appetite?
6	. А	No.
7	Q	Did he ever vomit?
8	Α	No.
9	Q	Did he ever complain to you about his head hurting?
10	Α	No.
11	Q	Did he ever say to you that I'm tired or want to go to bed in a
12	non-normal time period, not naps or evening?	
13	A	No.
14	Q	Was there anything about Brodie's behavior on Thursday, June 9th, that
15	caused you	ı concern?
16	A	No.
17	Q	Was there anything that caused you concern about his behavior on the
18	10th of Jur	e regarding that incident and the description of injuries I just described to
19	you?	
20	A	No.
21	Q	On the 11th, that weekend prior to his death, Brodie went where on
22	Friday or S	Saturday?
23	A	My mom's.
24	Q	Going back to Friday, the 10th of June
25	A	Okay.
		-106-

1	Q	did you notice anything about Brodie the following morning when he
2	woke up?	
3	Α	Yes.
4	Q	What did you notice?
5	Α	His eyes were goopy.
6	Q	Did you talk to your mom?
7	А	Yes.
8	Q	As a result of that discussion with your mother, did you take Brodie to
9	the physici	an's office?
10	Α	Yes.
11	Q	What physicians?
12	Α	ABC Pediatrics
13	Q	Was he diagnosed with a medical condition that day?
14	А	Yes.
15	Q	What was it?
16	A	Pinkeye.
17	Q	Did you get medication for him?
18	A	Yes.
19	Q	What type of medication did you have?
20	A	Eye drops.
21	Q	Do you recall how many times a day you had to put eye drops in
22	Brodie's e	yes?
23	A	No.
24	Q	Was it more than once a day?
25	Α	I can't remember.
		-107-

1	Q	But that was the medicine that was required of Brodie and pinkeye?	
2	Α	Yes.	İ
3	Q	Did you put it in both eyes?	
4	Α	Yes.	
5	Q	Do you recall how Brodie reacted when you put the medicine in his	
6	eyes?		
7	Α	Yeah. Yes.	l
8	Q	Now	
9	Α	Yeah, he got angry. He did not like it.	
10	Q	Did it appear that Brodie was in pain when that occurred?	
11	А	He just didn't like it.	
12	Q	Did you ever mention to Dr. Sirsy, this staff or anybody at ABC	
13	Pediatrics	on Friday the incident with the Power Wheel?	
14	А	No.	
15	Q	Ma'am, why not?	
16.	A	Because he didn't complain of anything.	
17	Q	It wasn't of concern enough for you to mention to the doctors?	
18	A	No.	
19	Q	I'd like to direct your attention now to the morning of Saturday, June	
20	11th.		
21	A	Okay.	
22	Q	Do you remember when Brodie woke up that morning whether or not	٠
23	the clothing	ng that you put him in the night before was different?	
24	A	I don't remember.	
25	Q	Do you remember whether or not he was in his underwear not his	
		-108-	or
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10180 W. Altadena Drive, Casa Grande, AZ 85194

-113-

il		· · · · · · · · · · · · · · · · · · ·
1	Q	Do you recall indicating to detectives that he had two pinpoint bruises
2	on his forehead?	
3	A	That
4	Q.	That evening.
5	Α	I don't remember.
6	Q	Okay. Let me go to the morning of June 13th, Monday morning.
7	Α	Okay.
8	Q	How did Brodie behave when he got up Monday morning?
9	A	He was fine. He didn't
10	Q	What
11	A	Sorry.
12	Q	Go ahead.
13	A	He didn't want Mike to be around him.
14	Q	The defendant?
15	Α	Yes.
16	Q	Was that obvious to you?
17	Α	Yes.
18	Q	In what way?
19	Α	He
20	Q	How did Brodie react?
21	∥ A	He just ran away from him.
22	∥ Q	He'd run away from the defendant? Is that a yes?
23	A	Yes.
24	Q	Do you recall what you did Monday morning as far as activities outside
25	your apar	tment? Did you go somewhere?
		-115-

- 11		
1	Α	Yes.
2	Q	Where did you go?
3	Α	To the swimming pool.
4	Q	And was anybody else with you when you were at the swimming pool
5	on Monday	June 13th?
6	Α	Yes.
7	Q	Who was there?
8	А	Jennifer Lee, her two boys and the defendant.
9	Q	And did you see Brodie swimming that day?
10	Α	Yes.
11	Q	How was Brodie acting when he was swimming that day?
12	Α	He was fine.
13	Q	Did you notice his body, did you observe it while he was swimming?
14	Α	Yes.
15	Q	How was he clothed?
16	А	In swim shorts.
17	Q	Did he have anything on the upper part of his body?
18	A	No.
19	Q	Did he have something that normally he would swim with, float devices?
20	A	No, because they wouldn't let him have it at that pool.
21	∭ Q	That pool didn't permit it?
22	A	Yes.
23	Q	So what was how did that change, if anything, what you did or how
24	you obser	ved Brodie when he was at the pool?
25	A	He was just in his swim shorts and we stayed on the really shallow end.
		-116-
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GAL FRIDAY REPORTING & TRANSCRIPTION

-120-

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1	A	Yes
2	Q	What did he eat?
3	Α	Pancakes.
4	Q	Pancakes? Keep your voice up
5	А	Sorry Pancakes.
6	Q	And did he have anything to drink?
7	Α	Yes.
8	Q	Did there come a time that morning where you made plans, the family
9	in your apaı	tment, to go somewhere that day?
10	А	Yes.
11	Q	Where did you plan to go?
12	A	The Mandalay Bay Shark Reef.
13	Q	And did you dress Jodie to go there?
14	Α	Brodie.
15	Q	Brodie, I'm sorry.
16	A	Yes.
17	Q	And what did Brodie say, if anything, while you were dressing him?
18	A	That his head hurt.
19	Q	What were you doing about dressing him when he told you his head
20	hurt?	
21	A	Putting his t-shirt on.
22	Q	Did the defendant say anything to you about taking Brodie outside into
23	the public t	hat morning before you left your apartment?
24	A	Yes. Yes.
25	Q	What did he say?
		-122-

1	Α	Danny Fico.
2	Q	Danny Fico, the defendant's best friend?
3	Α	Yes.
4	Q	Did he say anything to you?
5	Α	Yes.
6	Q	What did he say?
7	A	He commented on the bruises.
8		ALTIG: I'm going to object. It's hearsay.
9	MR.	STANTON: Judge, it's not offered for the truth of the matter.
10	THE	COURT: Overruled.
11	BY MR. S	TANTON:
12	Q	Go ahead. What did he say?
13	А	He had a lot more bruises.
14	Q	Danny Fico said that?
15	Α	Yeah.
16	Q	He commented about Brodie's condition, the bruising on his face?
17	A	Yes.
18	Q	Could you see any other bruises besides bruises on Brodie's face when
19	you broug	tht him in the convenience store?
20	A	No.
21	Q	Did you leave and go to the Shark Reef?
22	Α	Yes.
23	Q	Do you remember what time you arrived at the Shark Reef?
24	A	No.
25	Q	Was it in the morning, noon or afternoon?
		-124-
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1	Q	Where?
2	Α	Circus Circus.
3	Q	Why'd you go there?
4	Α	Just to have an outing
5	Q	Did you go someplace inside the Circus Circus to eat?
6	Α	Yes.
7	Q	Where was that?
8	Α	McDonald's.
9	Q	Was Brodie hungry at McDonald's?
10	А	He just ate some French fries.
11	Q	Was that normal for him?
12	Α	Yeah.
13	Q	Was there anything unusual about his behavior at McDonald's or did an
14	event take	place at McDonald's?
15	А	Yes.
16	Q	What was that?
17	А	He wet through his pull-up.
18	Q	And what kind of pull-up did you have on him?
19	Α	A swimmer one.
20	Q	And when you first observed that, do you remember where you were
21	physically	? What store or location?
22	A	I'm sorry, what?
23	Q	Do you remember where you were when you discovered that he had
24	wet himse	elf?
25	A	Yes, in McDonald's.
	\	-126-
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1	Q	What was the defendant's reaction when you discovered he had wet
2	himself?	
3	Α	He was annoyed.
4	Q	Did he express that to you verbally?
5	Α	Yes.
6	Q	What was he annoyed about?
7	MR.	ALTIG: I'm going to object lack of foundation, lack of personal
8	_	and speculation.
9	MR.	STANTON: Well, it's not speculation if she's a percipient witness and
10	hears the c	lefendant tell him why he's annoyed which is
11	MR.	ALTIG: Then lack of foundation. We haven't gotten there yet.
12	MR.	STANTON: She's standing right next to him at McDonald's.
13	THE COURT: I'm going to overrule it.	
14	BY MR. STANTON:	
15	Q	You can go ahead and answer the question.
16	A	Now I'm confused and forgot what the question
17	Q	Okay.
18	A	I'm sorry.
19	Q	You said the defendant was annoyed.
20	A	Yes.
21	Q	Did he express that to you?
22	∥ A	Yes.
23	∥ Q	How did he express it to you? What did he say?
24	∥ A	He was frustrated. He said he should be potty trained, why did he just
25	pee all ov	er?
		-127-
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1	Α	Yes.
2	Q	You said the defendant said that you're leaving. Was he normal
3	behavior or	was he acting differently when he said we're leaving?
4	Α	Just angry, annoyed.
5	Q	When you got to the car, what did you do with Brodie about his
6	clothing?	
7	Α	Changed him.
8	Q	Did you put anything on Brodie along his groin area?
9	Α	Yes.
10	Q	What did you put on?
11	A	A pink pull-up.
12	.Q	Why did you do that?
13	, A	Because his pull-up was sopping wet.
14	Q	Okay. And is that the did you have any pull-ups to put on him at that
15	point?	
16	A	I had one in my trunk for my niece.
17	Q	Okay. So it happened to be pink?
18	Α	Yeah.
19	Q	How did Brodie respond when you put that on?
20	A	He was excited that he could wear Lily's pink pull-up.
21	∥ Q	And where did you put Brodie in the car when you left the Shark Reef?
22	A	In his car seat
23	/ Q	Is that what type of car were you driving?
24	Α	Ford Focus.
25	Q	And where was Brodie physically in the car?
		-129-
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1	Α	The center seat in the back.
2	Q	Was he in his car seat?
3	Α	Yes.
4	Q	Was it the same car seat that was involved in the incident 20 days
5	prior?	
6	Α	No.
7	Q	Different car seat?
8	Α	Yes.
9	Q	Where did you go after you left the Shark Reef?
10	А	To the hair salon.
11	Q	On the way from the Shark Reef to the hair salon, did Brodie fall
12	asleep?	
13	Α	Yes.
14	Q	Why did you go to the hair salon?
15	Α	Because they had overcharged me for my hair the day the day
16	before.	
17	Q	So you went to pick up that money?
18	A	Correct.
19	Q	And how did you leave the car based upon Brodie being asleep? Did
20	you do any	thing different when you got out of the car?
21	A	I just I didn't slam the door, I just tried to shut it quietly so he wouldn't
22	wake up.	
23	Q	Did you go in the store?
24	A	Yes.
25	Q	How long were you in the store?
		-130-
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- 11		
1	Α	Maybe 5, 10 minutes.
2	Q	When you returned and you opened the door to your car, can you tell
3	us what you	observed and what was going on inside the car when you got back?
4	A	Brodie was screaming.
5	Q	When you say screaming
6	Α	He was
7	Q	was that loud?
8	Α	Yeah, he was upset. He was crying.
9	Q	And did you ask the defendant what had happened?
10	А	Yes.
11	Q	What did he tell you?
12	A	That he got mad when I got out of the car he woke up.
13	Q	Where did you go after that?
14	Α	The bank.
15	Q	That was for something that the defendant had to do there?
16	Α	Yes.
17	Q	And then you went to someplace else. Where did you go?
18	A	Best Buy.
19	Q	As you walked into Best Buy, was there an incident with Brodie?
20	A	Yes.
21	Q	Can you describe that for me?
22	A	He didn't want to walk. He wanted me to carry him.
23	Q	Was that unusual?
24	A	Yeah.
25	Q	And what happened as far as carrying Brodie? Did that was there a
		-131-

- 11			
1	Α	Yes.	
2	Q	How was Brodie acting once you got into the store?	
3	A	He just tired. He didn't want to walk.	
4	Q	He didn't want to walk?	
5	Α	No.	
6	Q	Did you carry him at times while you were in the store?	
7	A	Yes.	
8	Q	Did there come a time inside Best Buy when Brodie wanted to get a	
9	movie?		
10	Α	Yes.	
11	Q	Did you tell Brodie that if he did something you would get him that	
12	movie?		
13	А	Yes.	
14	Q	What did you tell Brodie he had to do to get that movie?	
15	A	Be nice to Mike. They had to get along.	
16	Q	Did there come a time inside Best Buy when Brodie didn't do that?	
17	A	Yes.	
18	Q	Can you describe that for me?	
19	Α	Mike went to walk up and Brodie got angry and told him no, no, no. So	
20	I had to put his movie back.		
21	Q	You had to put what?	
22	Α	His movie back.	
23	Q	He was throwing a fit when the defendant came up to him?	
24	A	Yes.	
25	Q	When you got home, where did you put Brodie inside your apartment?	
	11	The same of the sa	

- 11		
1	Α	I put him in his bedroom.
2	Q	Did you put turn
3	Α	With his
4	Q	Go ahead. I'm sorry.
5	Α	With his cup and I turned his Bob the Builder on his
6	Q	Bob the Builder, what's that?
7	Α	A movie.
8	Q	So Brodie's in his room and he's watching a movie?
9	Α	Yes.
10	Q	How is he behaving when he's at home from what you observed?
41	А	Better.
12	Q	Did you cook dinner that evening?
13	A	Yes.
14	Q	What did you cook for dinner?
15	Α	I made lasagna.
16	Q	Was Brodie hungry at dinnertime?
17	A	He wouldn't really eat. He he wouldn't really eat.
18	Q	How did you feed Brodie that night?
19	A	I spoon fed him.
20	Q	Spoon fed him? Is that yes?
21	A	Yes.
22	Q	Was that normal for you to spoon feed Brodie for evening meals or any
23	meals?	
24	A	Not usually.
25	;	He ate some lasagna?
		-134-

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store.	
Q	Did he answer your phone call?
Α	No.
Q	Did there come a time on your way home when you're almost at home
where the o	defendant calls you?
Α	Yes.
Q	What did he say to you when you picked up the phone?
Α	I think I had to call him back.
Q	Okay.
А	I didn't hear it.
Q	And when you called him back, what was the defendant's comment to
you?	
A	can't remember the exact words.
Q	Was he upset?
А	Yes.
Q	And did you tell him that you're almost home and that it took 56
minutes?	
A ,	Yes.
Q	When you got home, did you put the groceries away?
∥ A	Yes.
∥ Q	What's the defendant doing?
A	Sitting on the couch
Q	What did you do after you put your groceries away?
A	Took a bath.
Q	Do you remember observing the door to your son's room?
	-139-
	Q A Q where the c A Q A Q you? A Q minutes? A Q A Q A Q A A Q A A A A A A A A A A

		Í
1	Α	Yes.
2	Q	What condition was the door to your son's room when you came home
3	that night?	
4	А	Shut.
5	Q	Shut?
6	Α	Yes.
7	Q	Completely shut closed?
8	A	Yes.
9	Q	Was the dog door or dog gate up?
10	A	No.
11	Q	Did you go to sleep in your bed that night?
12	A	Yes.
13	Q	Did the defendant?
14	A	Yes.
15	Q	Do you remember what time you went to bed?
16	∥ A	No.
17	Q	Do you remember waking up that night into the early morning hours?
18	A -	Yes.
19	Q	Do you remember what time of morning or evening it was?
20	A	One a.m.
21	Q	This would be now 1 a.m. on January 15th, Wednesday?
22	A	Yes.
23	Q	When you woke up, was the defendant in your bed?
24	A	No.
25	Q	After you noticed that, did you then see the defendant?
		-140-
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1	Α	Yes.
2	Q	What was he doing?
3	Α	Walking in the bedroom.
4	Q	What, if anything, did he say to you?
5	Α	That he went to use the bathroom Brodie's bathroom and it stinks.
6	He thinks he	e threw up.
7	Q	Was it normal for the defendant to use, as you refer to, Brodie's
8	bathroom, t	he bathroom outside your master bedroom?
9	Α	No.
10	Q	His normal behavior when he used the bathroom was to use the master
11	bathroom?	
12	А	Yes.
13	Q	Did you go into the bathroom? His bathroom? Brodie's bathroom?
14	Α	I went to Brodie's room.
15	Q	Okay. And what did you see about Brodie when you went into his
16	room?	
17	A	He was full of vomit. He was full of vomit.
18	Q	Could you smell it?
19	A	Yes.
20	Q	Okay. What did you do after you saw Brodie in that condition?
21	А	I walked him to his bathroom.
22	Q	What did you do inside the bathroom?
23	Α .	He threw up again. And then I just quickly wiped him off.
24	Q	When you say you wiped him off, what did you wipe him off with?
25	A	A washrag.
		-141-

- 11		
1	Q	You're in the bathroom?
2	Α	Yes.
3	Q	Was the light on?
4	Α	I yeah.
5	Q	Did you see any injuries to Brodie at that time?
6	Α	Just the ones that I'd seen before.
7	Q	Okay. Did you notice any new injuries?
8	Α	No.
9	Q	Did you take a long time to examine Brodie?
10	Α	No.
11	Q	Did you dress him again?
12	А	No.
13	Q	What did you put him in?
14	Α	He was just he was just in his diaper
15	Q	Where did you bring Brodie?
16	A	To the couch in the living room.
17	Q	Was it light or dark in the living room?
18	Α	Dark.
19	Q	What did you do with Brodie when you got him in the living room?
20	A	I put a towel down and laid him on the couch.
21	Q	And what, if anything, were you and Brodie doing on the couch?
22	A	I just leaned over and give him a kiss and I laid next to him for a
23	second.	a de la licacional
24	Q	Did there come a time where you soon thereafter that you believed
25	Brodie wa	as asleep?
		-142-

1	A	Yes, almost immediately.
2	Q	Did he complain about anything, the condition of his head, when you
3	were	
4	Α	Yeah, he told me his head hurt. Momma head his head hurt.
5	Q	After Brodie fell asleep, did you leave the television on for him?
6	Α	Yes.
7	Q	Was that normal for you to do with Brodie to help him fall asleep?
8	А	Yes.
9	Q	Did you go back into your bedroom into your bed?
10	Α	Yes.
11	Q	What, if anything, did the defendant say to you when you got back into
12	your bed?	
13	A	Why did you just leave the TV on?
14	Q	Was that a concern of the defendant?
15	A	Yes.
16	Q	Why?
17	A	Because the power bill was higher that month.
18	Q	How much was your power bill that month?
19	A	A little bit over a hundred dollars.
20	Q	So what did you do when he said that?
21	Α	I got up and went and turned the TV in the living room off.
22	Q	What was the next time you remember after you going back into bed
23	i'm assum	ning that you fell asleep?
24	Α	Yes.
25	Q	Do you remember anything occurring or the next time that you
		-143-
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1	remember s	remember something occurring in your bedroom? What was that?		
2	Α	The defendant carried Brodie in a fuzzy blanket to lay him next to me.	İ	
3	Q	Do you remember what time that was?		
4	 A	The sun wasn't up yet.		
5	Q	It was still dark?		
6	A	Yes.		
7	Q	Do you have any knowledge or did you look at a clock at all about what		
8	time it was	?		
9	Α	No.		
10	Q	Did anything unusual occur about Brodie being in the bed with you at		
11	that time?			
12	A	He wasn't usually in my I can't breathe.		
13	Q	Let me rephrase the question to you, Arica. Was there anything		
14	unusual th	at occurred from the time the defendant came in with Brodie until you		
15	woke up again sometime later that morning?			
16	Α	Huh-uh.		
17	Q	Is that a no?		
18	A	No. I can't remember. No.		
19	Q	Nothing unusual happened?		
20	A	No, he just laid him next to me.		
21	Q	Now, you woke up sometime after that?		
22	:	Yes.		
23	9 Q	Was the time approximately 8:50 in the morning?		
24	•	Yes.		
2	5	What did you first notice about Brodie when you woke up that final		
		-144-	HATE S	
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1	Α	If he was running.
2	Q	Is that a yes just
3	Α	Yes.
4	Q	Okay. Was it suggested to you that if his balance didn't approve that
5	you should	take him to see a neurologist?
6	Α	By the ENT.
7	Q	Is that a yes?
8	A	Yes.
9	Q	Would the dog knock Brodie down?
10	Α	Yes.
11	Q	Would Brodie use his bicycle to get things?
12	A	Yes.
13		[Colloquy between counsel]
14	∭ MS.	VON MAGDENKO: Court's indulgence.
15		[Colloquy between counsel]
16	BY MS. V	ON MAGDENKO:
17	Q	And you said that you started noticing a lot of bruising when Jennifer
18	Lee starte	ed babysitting.
19	A	Yes.
20	Q	And how old were her children? At that time.
21	A	A couple years older than Brodie.
22	Q	And were they male or female?
23	A	Male.
24	Q	Okay. And were they calm children or were they rowdy, rambunctious?
25		Rambunctious.
		-152-
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- 11			
1	Q	And the bruising started up again?	
2	A	Couple weeks later.	
3	Q	Would Michael babysit Brodie?	
4	A	On Mondays.	
5	Q	Because you worked four to eight?	
6	Α	Yes.	
7	Q	And isn't it true that Brodie would actually wake up with bruising on his	
8	forehead?		[
9	Α	Yes.	
10	∥ a	When Brodie was on his four-wheeler, he tried to jump a curb?	
11	А	Yes.	
12	Q	Was he trying to jump down or up?	
13	A	He was trying to go up the curb.	
14	Q	Trying to go up the curb. And he fell forward?	
15	A	No.	
16	Q	He didn't? How did he fall?	
17	·	Side off sideways.	
18	3 ∥ Q	Which side?	i
19	∍ A	Left.	
2	l I		
2	1 police o	n June 6 June 17th, rather, 2011?	
2	2 A		
2	23 G		
2	il .	IS. VON MAGDENKO: Court's indulgence.	
2	25 ∥BY MS	VON MAGDENKO:	
		-155-	
	Someone contractions	GAL FRIDAY REPORTING & TRANSCRIPTION 10180 W. Altadena Drive, Casa Grande, AZ 85194 (623) 293-0249	
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-156-

MS. VON MAGDENKO: Thank you.

[Proceedings concluded at 4:58 p.m.]

ATTEST: I hereby certify that I have truly and correctly transcribed the audio/visual proceedings in the above-entitled case to the best of my ability.

Tracy a Legenheimen

Tracy A. Gegenheimer, CER-282, CET-282 Court Recorder/Transcriber

-157-

IN THE SUPREME COURT OF THE STATE OF NEVADA 1 2 No. 66963 MICHAEL LEE, 3 4 Appellant, 5 vi. 6 THE STATE OF NEVADA, 7 Respondent. 8 9 APPELLANT'S APPENDIX VOLUME IV PAGES 701-930 STEVEN B. WOLFSON 10 PHILIP J. KOHN Clark County District Attorney 200 Lewis Avenue, 3rd Floor Clark County Public Defender 11 309 South Third Street Las Vegas, Nevada 89155 Las Vegas, Nevada 89155-2610 12 ADAM LAXALT Attorney for Appellant Attorney General 100 North Carson Street 13 Carson City, Nevada 89701-4717 14 (702) 687-3538 Counsel for Respondent 15 **CERTIFICATE OF SERVICE** 16 I hereby certify that this document was filed electronically with the Nevada 17 , 2015. Electronic Service of the Supreme Court on the Cath day of 18 foregoing document shall be made in accordance with the Master Service List as follows: 19 HOWARD S. BROOKS CATHERINE CORTEZ MASTO 20 KEDRIC A BASSETT STEVEN S. OWENS 21 I further certify that I served a copy of this document by mailing a true and 22 correct copy thereof, postage pre-paid, addressed to: 23 MICHAEL A LEE 24 NDOC # 81950 c/o HIGH DESERT STATE PRISON 25 PO Box 650 26 Indian Springs, NV 89000 27 BY_ 28 County Public Defender's Office