## CASE NO.

IN THE
SUPREME COURT OF NEVADA

HALL PRANGLE \& SCHOONVELD, LLC, MICHAEL PRANGLE, ESQ., KENNETH M. WEBSTER, ESQ. AND JOHN F. BEMIS, ESQ.

Petitioners,
vs.

EIGHTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA, IN AND FOR THE COUNTY OF CLARK,

Respondent, -and-

# MISTY PETERSON, AS SPECIAL ADMINISTRATOR OF THE ESTATE OF JANE DOE, 

Real Party in Interest

District Court Case No.: A-09-595780-C

## PETITIONERS’ APPENDIX TO PETITION FOR EXTRAORDINARY WRIT RELIEF VOLUME XVII of XVII

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## APPENDIX TO PETITION FOR EXTRAORDINARY WRIT RELIEF

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# APPENDIX TO PETITION FOR EXTRAORDINARY WRIT RELIEF 

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## DISTRICT COURT

## CLARK COUNTY, NEVADA

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ESTATE OF JANE DOE, by and )
through its Special ) Case No.
Administrator, Misty
Petersen,
Plaintiff,
vs.
VALLEY HEALTH SYSTEM, LLC, a
Nevada limited liability
company, d/b/a CENTENNIAL HILLSS )
HOSPITAL MEDICAL CENTER; )
UNIVERSAL HEALTH SERVICES, INC., )
a Delaware corporation; AMERICAN
NURSING SERVICES, INC., a )
Louisiana corporation; STEVEN )
DALE FARMER, an individual; DOES )
I through X, inclusive; and ROE )
CORPORATIONS I through X, )
inclusive,
    Defendants.
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DEPOSITION OF CAROL BUTLER
June 19, 2015

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asleep.
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Q I know that, but you can go pick up the phone and call them; right? There's nothing stopping you from doing it?

A Not necessarily. I -- again, they're night shift people. They are home asleep, so --

Q You didn't want to bother their sleeping to ask them about what might have occurred that night? That's what you're telling us?

A Like I said, this was a police investigation.

Q I know. It happened at your hospital where you're the director of nursing. You're in charge of the nurses. So what I'm trying to find out is what you did specifically and what you didn't do. Okay?

A I contacted Amy Bochenek to ask if she had heard anything -- if there were any concerns expressed to her.

Q Okay.
A We did talk to the staff that were on shift. I don't recall if we talked to them at that time or later.

Q Okay. How did you talk to them?
A I -- I don't recall if it was --
Q You were in a conference room. Does

21 might want to talk to her; right?

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that refresh your recollection?
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A -- in person or on the phone. room with them?

A No. I don't. name me some of them?

A I cän't.
Q Did you speak with Ray Sumera?
A I don't recall.
Q Do you know who Ray Sumera was?
A I do know Ray.
Q What was Ray? emergency department. one of the people that you would normally talk to, assuming he was there that night?

A If he was on shift; yes.
A. If she was on shift --
Q) okay.

A -- that day.

Q Do you remember you were in a conference

Q Okay. Who did you speak with? Can you

A Ray was one of our charge nurses in the

Q Okay. And Ray, wouldn't he have been

Q Right. Okay. Margaret Wolfe? You

Q Okay. And so if these people were on
shift, am I correct that you did talk to them? You
believe you talked to them at least?
A I believe so.
Q Okay. And when you talked to them, did
you write notes about that?
A I don't recall.
Q I'm -- I'm trying to figure out how you cannot recall whether or not you took notes from conversations with staff members. How is that possible?

MR. PRANGLE: Objection. Argumentative.
A How many years ago was this?
Q (BY MR. MURDOCK) Oh, so, again, if I asked you five years ago, you might have a better answer; right? Your memory?

A Certainly.
Q So I guess you went home that night; right?

A Eventually, I'm sure I did.
Q Okay. By the way, that entire day, did you ever go look to see if there was a policy and procedure that you should follow?

A I don't recall.
Q That entire day, did you ever go speak with Ms. Cagnina?

1 you can't tell me whether you wrote stuff down or didn't write stuff down?

A If it was something that needed to be documented for later reference, it was put in a document and sent to the quality/risk manager.

Q Okay. So, for example, your conversations with Ray Sumera --

A I would not have written that on my legal pad and thrown it away.

## Q Why not?

A What I would hàve written on my legal pad is call Ämy to arrange a meeting with the staff that were involved, and when that meeting was arranged, I would have checked it off. That would have been thrown away.

Q Okay.
A The contents of the meeting would have been documented and sent to the correct people for permanent record.

Q Okay. Would it have mentioned any names at all?

A On my legal pad?
Q Yeah.
A Only if I wanted to be sure certain people were invited to the meeting.

Q Sure. But, as you sit here today --
A But if the meeting had been documented, the attendees of the meeting would have been in that document.

Q As we sit here today, you can't tell me what you wrote down, what you didn't write down? You can tell me general descriptions of what you believe you wrote down, but you can't tell me exactly what was written down; correct?

A I could tell you absolutely that if I had written anything on a legal pad that was of any consequence to this case or of a confidential nature, it would have gone in the shredder; not the trash.

Q Okay.
A I can also guarantee you that if I needed to document anything for the permanent record, that was done. Not on my legal pad.

Q So it's possible you wrote something down on the legal pad, but you shredded it because it had names on it; right? Am I correct?

A I guess it's possible.
Q Well, isn't it your habit? Your habit -- habit, routine is, basically, to write things down that are important to you, and if it's got names on it, you shred it; right?

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investigation under patient safety; is that correct?
    A Correct.
    Q Okay. Are you back and forth from
Sitka?
    A Yes.
    Q How often?
    A Every other weekend.
    Q Oh, okay, good. Just in case.
    Okay. So you -- do you, by the way,
present at the internal investigation? Is that
something that you did? Was there actual committee
meetings?
    A There was a meeting to review the
incident.
Q Okay. When was it?
A I don't recall.
Q Can you give me an estimate as to when
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it was?
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it was?
A To my recollection, it was within a few
days.
Q Okay. That would have been, I assume, after you spoke with all of the staff who was on duty. that night; is that correct?
A I believe that we had spoken with everyone that was present at that time before that

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meeting.
Q Okay. When you say "everyone that was present," everyone that was present in the E.R. that night on the sixth floor, or what are we talking about?

A I believe we talked to staff in the E.R. and on the sixth floor. If I -- if I remember correctly, there was an allegation that there was inappropriate contact in the E.D. and then again on the sixth floor, and so we wanted to know if anyone had seen or heard anything.

Q And the inappropriate contact in the E.D. was what?

A I don't recall specifically.
Q Was it with Ms. Cagnina, or was it with Ms. Hanna?

A The -- with Ms. Cagnina.
Q Okay. So you would have spoken to all staff in the emergency department from that night; is that correct?

A Myself or Amy Bochenek.
2 Okay. Did you meet with them together?
A I don't recall.
Q Did you ever meet with them with a
lawyer?
A I don't believe so.
and the quality and risk manager at the time --
2 Okay.
A -- if there were people who had knowledge of these incidents or had witnessed anything that had not come forward to raise the red flag, and what I was told was that no, no one had witnessed anything and that no one had knowledge of inappropriate actions on his part.

Q Well, in May of 2008, Ms. Wolfe gave a statement to the Las Vegas Metropolitan Police Department. Are you aware of that?

A I think I became aware of it at some point. Someone informed me of that.

MR. SILVESTRI: Can you read back the question, please? I'm sorry.
(The referred-to question was read by
the reporter.)
MR. SILVESTRI: And the answer?
(The referred-to answer was read by the
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    reporter.)
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Q (BY MR. MURDOCK) When was that?
MR. PRANGLE: Again, he doesn't want to know anything that I told you.

Q (BY MR. MURDOCK) Not in the past couple of weeks, but before the past couple weeks, were you

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    aware of that?
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A I think someone told me after she gave a statement that a statement had been made.

Q Okay. Did you ever talk to her about the statement?

A I don't recall talking to her about the statement.

Q But you knew she had given a statement? It was pretty close to the time that she gave a statement; correct? I mean, she gave it to -- if she gave it on May 30, 2008, would you agree with me that you found out that she gave a statement about the incident, let's say, by August 1, 2008? Would that make sense?

A Probably.
Q Okay. That would make sense; right?
A Yes.
Q It's more likely thán not; correct?
A Correct.
Q Okay. Ms. Wolfe stated in her statement Ray Sumera had told me to watch steve Farmer around her female patients. Do you remember that?

A No. I do not.
Q She said that Ray Sumera was concerned because he was very overly attentive to female patients
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and very anxious to connect them to the monitors and
disconnect -- and disconnect them from the monitors,
which would require him to reach into their clothing.
Are you aware of that?
A No.
Q Okay. You never asked to see the
statement; right?
A No, I did not.
Q But you knew she had made a statement;
right?
A I knew she had made a statement.
Q By August 1 of 2008, you knew she had
made a statement?
A Sure.
(There was a discussion off the record.)
Q (BY MR. MURDOCK) Do you know what a
shift report is?
A Yes.
Q Were there notes taken at shift reports?
A Yes.
Q What happens to those notes? Are they
thrown out?
A Usually, at the end of the shift.
Q They're thrown out?
A Because they are notes simply from one

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pre-huddle?
A There was a handoff between the two charge nurses.

Q That's what it's called? The handoff?
A Uh-huh.
Q Okay. Try and let me finish my question. I know you're anticipating it, but our court reporter -- we're going to try and be kind to her without taking down two of us speaking at the same time.

The statement that -- that Ms. Wolfe gave that somebody told you about -- I mean, they told you she gave a statement to the police; right?
A. eorrect.

Q And it just -- you would ask -- wouldn't you ask your nurses, what did you talk to the police about?

A I asked Amy Bochenek and -- because my concern was, again, did someone know something prior to this. Her response to me was that Margaret had some vague concerns about him being overly attentive to women. And again, I said, okay, who did she tell?

Q Did she tell you she told the police?
A I asked Amy, Did you ever hear about
this prior to this? And she said no.

Q She told you she told the police? Amy
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said that?

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MR. PRANGLE: Amy said Amy told the
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police?

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Q (BY MR. SILVESTRI) Did Amy tell you that Margaret told the police that?

A Amy told me that Margaret had made that statement to her.

Q Oh, to her. Okay. And did she tell you when she had made that statement to Amy?

A It was after Ms. Cagnina had complained and we had already started the police investigation. So -- and that was my question to Ämy was had you ever heard about any of this prior to this? And she said no.

Q Was there some reason you didn't just call Ms. Wolfe in and ask her directly? You're the director of nursing.

A Again, the internal investigation was being handled by -- by risk and quality management.

Q But this was a different investigation, wasn't it? This was concerns that, now, you're hearing that one of your nurses have and you're the director of nursing. Would it not have been appropriate for you
to -- either yourself go to Ms. Wolfe, or call the risk manager and both of you go and talk to Ms. Wolfe?

A I don't know because I don't recall if Ms. Wolfe was involved in the meetings that we were having to -- to investigate or not.

Q Was -- did -- did you ever take
Ms. Bochenek's statement to you to the risk manager?
A I don't recall. I know the risk manager
spoke with Amy directly.
Q That wasn't my question. My question was is Ms. Bochenek comes and tells you that one of your nurses has come and talked to the cops -- excuse me -- has said that a nurse has concerns about Mr. Farmer. Did you take that statement to the risk manager?

A I don't recall.
Q. That wasn't something you would have. written up and sent up the line of command?

A It -- it completely depends on how that information was conveyed to me.

Q Okay. Mr. Murdock asked you some questions about whether you would want to know if a particular nurse or CNA was being overly attentive with respect to female patients. Do you remember that line of questioning?
with. Everything, again, that needed to be recorded.
Q. Would have been put where?

A Was put in the document and given to the risk manager.

Q What was the document titled that you gave her?

MR. PRANGLE: Well, I'm not sure we've established yet she gave anything.

MR. MURDOCK: She just said she gave a document.

MR. PRANGLE: If she did something, that's what she would have done with it. I think she told you a half hour ago, she doesn't remember doing it.

Q (BY MR. MURDOCK) So you don't remember doing anything with any of these people: Ray Sumera, Margaret Wolfe, anybody?

A I know I had conversations with people, but I can't tell you exactly who and I can't tell you the content of that.

Q Of course, if I asked you five years ago, you might have been able to tell me?

A My memory would have been better, yes.
\(Q\) Okay. So -- and had you had conversations with these people, you would have written
their names on a document and then transferred that to the quality and risk people; correct?

A Correct.
Q Okay. When you were at Centennial Hills Hospital, did you keep a calendar?

A Yes.
Q Did Ms. Antoinette keep your calendar?
A Yes, she did.
Q Was it electronic?
A Yes.
Q And on your calendar, did you have, for instance, if you were going to meet with Ray Sumera, would that be on your calendar? If you were going to meet with Ray Sumera at 2:00, would that be on your calendar?

A Potentially.
Q Oh, is it more likely than not that that's what happened?

A Not necessarily. If Ray was -- if Ray made an appointment to come to my office to meet with me, then, yes, it would be on my calendar. If I walked down to the emergency department and had a conversation with Ray, no, it would not be on my calendar.

Q Unless it was on your calendar for you to walk down and see Ray?


\section*{DISTRICT COURT}

CLARK COUNTY, NEVADA

JANE DOE,
Plaintiff,
vs.
CASE NO. 09-A-595780
VALLEY HEALTH SYSTEM LLC, a Nevada limited
liability company, \(\mathrm{d} / \mathrm{b} / \mathrm{a}\)
CENTENNIAL HILLS HOSPITAL
MEDICAL CENTER; UNIVERSAL
HEALTH SERVICES, INC., a
Delaware corporation;
AMERICAN NURSING
SERVICES, INC., a
Louisiana corporation;
STEVEN DALE FARMER, an
individual; DOES I
through X , inclusive; and ROE CORPORATIONS I
through \(X\), inclusive,
Defendants.

\section*{DEPOSITION OF}

RENATO SUMERA, RN

Friday, May 1, 2015
9:30 a.m.

521 S. Third Street
Las Vegas, Nevada

Carol O'Malley, CCR 178, RMR
ESQUIRE
Q. Prior to yesterday had you ever heard Mr. Bemis' name?
A. A while back. I don't know exactly when.
Q. Would it have been right when this incident occurred?
A. I think so, yes.
Q. Okay. Can you tell me the circumstances under which you met Mr. Bemis?
A. The conversation \(I\) don't remember.
Q. Hold on. I'm not asking about the conversation itself. I'm asking you, was it at the hospital?
A. At the hospital.
Q. Was it in a room at the hospital?
A. Yes. In a room at the hospital, yes.
Q. And you said it would have been right around the time of the incident, is that correct?
A. Possibly after the incident, yes. After the incident.
Q. And the incident we're talking about is with Mr. Farmer, is that correct?
A. Yes.
Q. And who was in the room with you besides Mr. Bemis?
A. I don't remember. I really don't remember.
Q. Was there anybody in there?
A. Two more people, but I don't remember who they are.
Q. Were they lawyers?
A. I don't remember.
Q. Was it Ms. Bochenek?
A. No, she wasn't there.
Q. How do you know that?
A. I would know her. I know what she looks like.
Q. So it's two people there who you just didn't know who they were?
A. Yeah.
Q. Is that a yes?
A. That's a yes.
Q. And tell me about the discussion that was had.
A. I don't remember the conversation.
Q. How long was the conversation?
A. Timewise I don't remember.
Q. Can you estimate it for me?
A. Ten minutes.
Q. Do you believe that the conversation took place within days of the arrest of Mr . Farmer, or are we talking months down the line?

MR. BEMIS: I object to form.
THE WITNESS: I don't remember the time, as far as time span. BY MR. MURDOCK:
Q. Is it more likely than not that it occurred within days after the arrest?
A. I don't know exactly, but maybe.
Q. Well, was it more likely than not that that's when it occurred?

MR. BEMIS: I object to form.
THE WITNESS: Yes, sir.
BY MR. MURDOCK:
Q. Okay. By the way, what room was it in at the hospital?
A. Oh, gosh. It might be one of the conference rooms.
Q. Were you seated?
A. Yes, I was.
Q. And do you recall being shown any
documents?
A. No.
Q. Do you recall who spoke?
A. John. John was there.
Q. Right, I know John was there, but you said there were two other people as well.
A. Yeah, but I don't know who they are. I don't remember who they are, and I don't recall the conversation.
Q. Okay. Did someone take a recorded statement of you?
A. I don't think so.
Q. Was there a video camera there?
A. I don't remember a video camera.
Q. Were people taking notes?
A. I don't recall.
Q. Can you describe the other people in the room?
A. No, I can't.
Q. Were they men or women?
A. I don't recall. I want to say one is a female.
Q. How were they dressed?
A. I don't recall.
Q. Did they give you a card?
A. No.
Q. Did they have you sign anything?
A. NO.
Q. Did you ask to sign anything?
A. NO.
Q. And you can't recall anything about the
conversation?
A. That's too long ago.
Q. Did they ask you your name?

MR. BEMIS: I object to form. I'm
going to instruct him not to answer any communication he had after now.

MR. MURDOCK: You weren't his lawyer.
MR. BEMIS: I'm going to object to form and instruct him not to answer.

THE WITNESS: I don't remember the conversation.

MR. MURDOCK: John, you keep
instructing him not to answer. You weren't his lawyer.

MR. BEMIS: I absolutely was.
MR. MURDOCK: No, you were the hospital's lawyer. BY MR. MURDOCK:
Q. Do you understand he's the hospital's lawyer? Do you understand that?
A. Yes.
Q. Do you understand that this man also helped Mr. Farmer? Do you understand that?

MR. BEMIS: I object to form.

BY MR. MURDOCK:
Q. Do you understand that?
A. He's the hospital lawyer.
Q. Do you understand he helped Mx. Farmer as well?

MS. HUETH: I object to form.
Argumentative. Harassing.
THE WITNESS: What's your point?
BY MR. MURDOCK:
Q. Well, my point is, are you going to listen to him? Do you want him to represent you?

MR. BEMIS: I object to form.
MS. HUETH: Objection. Argumentative. BY MR. MURDOCK:
Q. Or do you want your own lawyer?

MR. BEMIS: I'm going to object to
form. He is represented by counsel.
MR. MURDOCK: Do you know what champerty is, John?

MR. BEMIS: I'm not here to answer questions, Rob.

MR. MURDOCK: Yeah, I know that. BY MR. MURDOCK:
Q. Sir, let's go back to the meeting, okay?
A. Okay.

ESQUIRE
Q. First you said to me you didn't remember the conversation. Then your lawyer jumped in afterwards and said, "No, I don't want you to talk about it."

So what's it going to be? Are you going to tell me about the conversations, or are you going to listen to the hospital's lawyer?

MR. BEMIS: I object to form. Argumentative.

MS. HUETH: Objection. Argumentative. Harassing. Asked and answered. BY MR. MURDOCK:
Q. You can answer the question.
A. Again, I do not remember the conversation. I do not remember the other people in the room.
Q. I didn't ask you that, sir.
A. Okay.
Q. All I asked you was, are you going to listen to your lawyer, or are you going to tell me about the conversation? Whatever you remember. If you don't remember, you don't remember.
A. You can ask me.
Q. Okay. Thank you.

MR. BEMIS: No, no, no. I'm going to instruct him not to answer.

\section*{So go ahead. Take your break. \\ (Recess.)}

MR. MURDOCK: Okay. We can go back on. BY MR. MURDOCK:
Q. Sir, during your break did you have any conversations with anybody?
A. I just told John I feel uncomfortable.
Q. And what did John say to you?
A. I'm doing okay.
Q. Okay. You're doing great.

So getting back to where we were, tell me about the conference that was had at the hospital that you believe was more likely than not just a few days after the arrest of Mr. Farmer, between you, Mr. Bemis, and two other individuals.

MR. BEMIS: I'm going object that it calls for attorney-client privilege and instruct him not to answer.

BY MR. MURDOCK:
Q. Are you going to follow Mr. Bemis' instruction?
A. Yes, I am.
Q. Okay. Very good. And I represent to you that you may be coming back here, and I'm not paying for it. So that being said, we can go that route.
Now, sir, you said the meeting was about ten minutes, is that correct?
A. I don't know exactly what time, but approximately ten minutes.
Q. And were any documents shown to you at all?
A. I don't recall any documents.
Q. Did you show any documents to them?
A. I did not show any documents to them.
Q. Were you asked anything about Mr. Farmer? MR. BEMIS: I'm going to object. That calls for attorney-client privilege and I instruct him not to answer.

BY MR. MURDOCK:
Q. Are you going to listen to Mr. Bemis?
A. Yes, I am.
Q. Did you ask why you were called into the meeting?

MR. BEMIS: I'm going to make the same objection and instruct him not to answer. BY MR. MURDOCK:
Q. Are you going to listen to Mr. Bemis?
A. Yes, I am.
Q. How did you get called into the meeting?
A. They called my department while I was at work.
Q. Who is "they?"
A. I don't know who that was on the phone.
Q. Someone called your department?
A. Yeah.
Q. And were you told something about that?
A. They told me there's a meeting -- that some people want to meet you, so I went to that conference room.
Q. To meet you just to say hello? Did you know what the topic was before you even got there?
A. No, I didn't know.
Q. So you had no idea what this was about?
A. No.
Q. And were you nervous?
A. No, I don't think so.
Q. Were you uncomfortable?
A. No.
Q. Who told you that there was a meeting?
A. The person on the phone.
Q. Who was that?
A. I don't know.
Q. What time was the meeting?
A. I don't know.
Q. Was it during your usual shift?
A. During my usual shift, yes.
Q. And what time was your usual shift?
A. I usually start at 9:00-- I'm sorry, at 7:00 p.m. to 7:00 a.m.
Q. Okay. So it was during your usual shift that this meeting took place, correct?
A. I believe so. Again, I don't know what time, but it was when \(I\) was working, yes.
Q. Okay. And since you work between 7:00 p.m. and 7:00 a.m., which is the nightshift, it would have been during that time, correct?
A. Yes, sir.
Q. And did you know about the meeting prior to coming on shift that night?
A. No.
Q. Do you know who Mr. Farmer was?
A. Yes.
Q. Or is. Do you know who Steven Farmer is?
A. I've worked with him a few nights, yeah.
Q. Tell me about Steven.
A. He's a good worker.
Q. A good CNA, right?
A. Yeah.
Q. Always follows instructions?
A. Yes.
Q. And those instructions were given by you,

\section*{TAB 80}

Q. Who is he?
A. He was a CNA that worked at Centennial Hospital at the same time I was there.
Q. What did he look like?
A. Poppa Smurf. Sorry. He had a white beard, white hair, medium stature.
Q. Did you give a statement to the police a couple days -- well, actually it would have been maybe a couple weeks after he was arrested, in 2008?
A. Yes.
Q. Did you lie to the police?
A. No.
Q. Did you make up any stories to tell the police?
A. No.
Q. After y@u spoke with the police, did you speak wi h a body at Centennial Hills Hospital about what you told the police?
A. I don't recall.
Q. Who was your director of nursing at the time? Do you remember?
A. Amy Bochenek.
Q. That's how you pronounce it?
A. (Witness nods.)
Q. Is that a yes?
A. Yes.
Q. Now, do you recall speaking with Amy --
A. Yes.
Q. I'm sorry, let me finish my question.
A. Okay.
Q. The only reason is, she's going to get mad at me.

Do you recall speaking with Amy
about Mr. Farmer?
A. Yes.
Q. Was that before or after he was arrested?
A. It was after, because the situation happened on the same day.
Q. Right. Okay. And you went to Amy to discuss the situation with Ms. Hanna, is that correct?
A. I didn't go directly to Amy, no.
Q. Who did you go to?
A. I went to my charge nurse that was on that shift.
Q. Who was that by the way?
A. Ray Sumera.
Q. Now, Ray testified the other day that he was a relief charge nurse.
A. Uh-huh.
Q. Is that a yes?
A. Yes.
Q. What is a relief charge nurse? MR. BEMIS: I object to form. Go ahead and answer.

WHM WHESS: A relief charge nurse flibls. In when the permanent charge nurse is not available.

BY MR. MURDOCK:
Q. Okay. Why did you go to Ray to talk about that incident?
A. Because that's my chain of command that I would follow.
Q. Have you seen the transcript of the conversation you had with Detective Saunders?
A. Yes.
Q. Do you recall any mistakes in that
transcript?
A. No.
Q. So you went to Ray because of the chain of command. After you went to Ray, did you go to somebody else?
A. Yes.
Q. Is that when you went to Amy?
A. No.
Q. Who did you go to?
A. I spoke with the nurse that \(I\) was giving report to at shift change.
Q. Who was that? Do you remember?
A. Her name is Julie. I don't remember her last name.
Q. And when did you wind up speaking with Amy?
A. Later that day she called me.
Q. So somehow it got back up to her?
A. Yes.
Q. Were you at home at the time?
A. Yes.
Q. And my guess is that you repeated everything you told Ray, correct?
A. Yes.
Q. And also everything you told Julie,

\section*{correct?}
A. Correct.
Q.. D d you lie to them?

\section*{A. No.}
Q. Prior to the day you spoke with Amy and the day you sooke with Julie, and the day you spoke with Ray when the incident with Ms. Hanna occurred, had you ever seoken to anybody before about Mr. Farmer?
A. Yes.
Q. And my understanding is that at some point, I want to say -- I could be wrong, but in the summer of 2009, you were terminated by Centennial, is that correct?
A. Yes.
Q. In between the time you were terminated and the Denise Hanna incident, do you recall having any conversations with anybody at Centennial Hills Hospital regarding Steven Farmer?

MR. BEMIS: Besides what she already testified to?

MR. MURDOCK: Yeah.
THE WITNESS: Again, all the nursing
staff was talking about it, following the case. So I may have. I don't remember any specific conversations with people, but it's possible. BY MR. MURDOCK:
Q. Were you ever called in, for instance by risk management, to discuss what you had witnessed with Mr. Farmer?
A. No.
Q. Did any lawyers ever speak with you regarding Mr. Farmer?
A. No.
Q. When was the first time a lawyer ever spoke
with you regarding Mr. Farmer?
A. When I was subpoenaed for his criminal trial.
Q. And before then no lawyers, like for instance Mr. Bemis -- he never called you?
A. No.
Q. And nobody from risk management had called you?
A. NO.
Q. Now, your discussion with Amy Bochenek -that was after the Denise Hanna incident, correct?
A. Yes.
Q. And you said that occurred that day of the Denise Hanna incident, correct?
A. Correct.
Q. After that day, speaking with Amy Bochenek, did you speak with anybody else regarding Mr. Farmer, in terms of administrators or administration at Centennial Hills Hospital?
A. Not that I can recall.
Q. Okay. When you spo Bochenek, did you tell her that the nursing staff had all been talking about Steven Farmer?
A. I don't recalin.
Q. Is that something that you believe that

\section*{} A. No.
foundation.
BY MR. MURDOCK:
it's more likely than not that you did?
A. I can't recall. I can't answer that.
Q. When Mr. Farmer was arrested, that didn't come as a complete shock or surprise to you, did it?

MS. HALL: Objection. Lack of



BY MR. MURDOCK:
Q. You can go ahead.



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20 BY MR. MURDOCK:

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MR. BEMIS: I object to form.
Q. Now, do you remember Kim's last name?

MR. SILVESTRI: Who?
MS. HALL: Kim.
THE WITNESS: No, I don't. I'm sorry.

ESQUIRE

\section*{TAB 81}


DEPOSITION OF AMY BLASING, MSN, RN
1:00 p.m。
July 28, 2015
Williams \& Associates
1608 Fifth Street, NW
Albuquerque, New Mexico
PURSUANT TO THE RULES OF CIVIL PROCEDURE, this deposition was:

TAKEN BY: MR. ROBERT E。MURDOCK Attorney for the Plaintiffs

REPORTED BY:

Dawn Redwine, RPR, CRI, NM CCR \#165
WILIIAMS \& ASSOCIATES, LLC
1608 Fifth Street, NW Albuquerque, NM 87102 (505) 843-7789
wWW.WilliamsNM.com


WILLIAMS \& ASSOCIATES \(=\) COURT REPORTING SERVICE
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                    A. Not that I recall.
    Q. Okay. In other words, did you give a recorded
    statement to anybody?
A. Not that I recall.
Q: Did you ever give a written statement?
A. Not -- As part of an investigation, I'm not sure if
-- I don't know that I ever wrote anything down.
Q. Okay.
A. I know that we had duscussimon, internal
discussions about the incident, following.
Q. Okay. And who did you have internal discussions;
with?
A. Carol Butler, Quality and Risk.
C. Who was at Quality and Risk?
A. I believe that was Janet Callahan and Yvette Wilson
at the time.
Q. Okay. Any other people that you had discussions
with?
A. Carol and I had discussions with employees after
the incident.
Q. Where did those discussions take place?
A. In the hospital.
Q. I understand that. Where?
A. But I couldn't tell you specifically.
Q. Was it in a conference room?

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        WILLIAMS \& ASSOCIATES -- COURT REPORTING SERVICES
A. I'd be guessing if \(I\) answered. It could've been an office or a conference room.
Q. Was it on the floor?
A. I don't recall.
Q. Okay, Do you believe -- Is it more likely than not that it occurred in an office or a conference room type of setting?
A. That would be more likely.
Q. Okay. And it was you and Carol. Is that correct?
A. To my knowledge, yes.
Q. Was there anybody else there?
A. Not that I recall.
Q. Was there a lawyer there?
A. Not that recaitu .
Q. Okay. Who did you speak with?
A. I remember speaking with Ray Sümera, Karen

Goodhart, Därby Curlee.
Q. Anybody else?
A. Margaret Wolfe later. There may have been more people, but those are the names I recall.
Q. When you s:y "later," how much later?
A. I don't know the timing, but the conversation with Margaret was more specific to additional concerns that she shared, so IMnow it was later for that reason.
Q. Would you agree with me that it would've been

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WILLIAMS \& ASSOCIATES -- COURT REPORTING SERVICE

ESTATE OF JANE DOE vs. VALLEY HEALTH, et al.
within two months of the initial conference you had with Sumera, Goodhart, and Curlee?
A. That sounds right.
Q. Okay. So if the initial conference occurred in late May, could we put an outside date on it of about August 1st? Would you agree with that?
A. That sounds fair. I don't recall the exact date.
Q. Okay. And were there notes taken at that meeting?
A. Not that I recall.
Q. Did you take any notes?
A. Not that I recall.
Q. Did Carol take any notes?
A. Not that I recall.
Q. Were the meetings tape-recorded?
A. No.
Q. Were they video-taped?
A. No.
Q. I'm sorry?
A. NO.
Q. I'm curious. Why didn't you take any notes?
A. I just don't remember taking notes. It doesn't mean that \(I\) didn' \(t\).
Q. Oh, okay. So it's possible you took notes?
A. It was several years ago, so...
Q. I understand. So it's possible you took notes?

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WILLIAMS \& ASSOCIATES \(=\) - COURT REPORTING SERVICE 505-843-7789
A. It's possible, but I don't recall taking them.
Q. Okay. When you're in a meeting-type setting like that, would you agree with me it's more likely than not that you actually took notes?
A. Depends on the situation. If I'm having a conversation with someone, I don't always write anything down.
Q. Okay. This was more -- more than a conversation, though. You were actually investigating what occurred. Right?
A. Investigations were more Risk and Quality.
Q. Okay. So why were you talking to these people?
A. Our conversations, Carol and I, were more about did we miss anything, did the staff know that they could come forward if they felt uncomfortable about anything. Just more kind of follow-up to the concerns that we had become aware of, and making sure that we weren't missing any opportunities.
Q. okay. So you don't know if you took notes or not.
A. Correct.
Q. If you took notes -- let's assume, just for the sake of argument, you did -- where would those notes be today?
A. I don't have any way of knowing that.
Q. Okay. What would you have done with them after the meeting? In other words, did you have a secretary who you would say, you know, "Type these up" --
A. No.
Q. -- or did you have a file, things like that?

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A. I did not.
Q. Okay. Did you have anything at all where you would have put notes?
A. Not formally, no.
Q. What about informally?
A. If I were to take notes on a notepad, it might be something that I used, like, to work with that day.
Q. Okay.
A. But if it wasn't part of any formal investigation or anything that \(I\) was typing up, I don't know where it would end up. I honestly don't recall taking any notes specific to this case.
Q. Okay. So, in other words, it's possible you did. You're just not sure. Is that right?
A. I don't remember taking any.
Q. Okay. So it's more likely than not that you didn't take any.
A. That's correct.
Q. Okay. Do you recall Carol Butler taking any notes at these meetings?
A. I don't.
Q. After the meetings, did you have discussions with Carol about your -- about your meetings with these nurses? A. It's far say thet at I couldn't tell you specifics.

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1 Q. How long afterwards would you have had that
A. Most likely, immediately.
Q. Okay. Now, the Margaret Wolfe meeting took place a couple of months later. Right?
A. I don't know the exact date. I just --
Q. No.
A. - know it was after.
Q. I know.
A. But within a couple of months is fair.
Q. Within a couple of months.
A. Uh-huh.
Q. When dita -- Did you have a discussion with Carol. Margaret had expressed concerns, and we were following up to find - it was new information to us, so we were both following up to get more information and making sure that people knew what the proper channel would be if they had concerns in the future.
Q. In fact, my understanding is that you became aware that a - that Margaret had spoken with the police about the situation. Is that right?

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A. That sounds familiar, but I couldn t tell you
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specifics.

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Q. Right. And as a - as a matter of fact, you became aware, and this was back in -- In between May of 2008 and August of 2008, you became aware that there actually was a police report, where Margaret spoke to the police. Right?
A. I don't remember the specifics.
Q. Well --
A. I became aware that she had shared information. I
don't know that \(I\) had knowledge of the police report or not.
Q. Okay. Did you ever ask for a police report?
A. No.
Q. Have you ever read a police report?
A. Not that I recall.
Q. It's possible you did? You just don't know?
A. I don't recall ever seeing a police report related to this case.
Q. Okay. Well, that's funny, because I understand that you had a meeting with several of the nurses where you actually went over some of the police reports. Do you remember that?
A. I remember meeting with the nurses about how to escalate concerns, but \(I\) don't remember ever having copies of police reports or sharing them.
Q. Okay. Do you remember meeting with a nurse by the WILLIAMS \& ASSOCIATES -- COURT REPORTING SERVICES
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name of Christine Murray?

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A. I don't.
Q. okay.
A. I don't remember who that is.
Q. Margaret Wolfe told the police on May 30th, 2008, that -- about conversations she had with Mr. Ray Sumera. Do you remember that?
A. I remember that, yes.
Q. Okay. Did you ever confirm that with Mr. Sumera?
A. Carol and I, Felieve, spoke to Räy.
Q. And Ray confirmed it, I assume.
A. Ray remembered having a conversation with Margaret, but the content was different.
Q. Okay. Di.d you ever speak to Margaret about that? In other words, did you confront her with that and say, "Well, wait a minute. Ray says you had a different conversation"?
A. I believe that we did, but I don't know the specifics.
Q. Okay. And, of course, did you make a report of it?
A. Report?
Q. Well, she lied to you.
A. I think we --

MR. PRANGLE: Well, that's argumentative.
Q. I don't know. If she lied to you or \(-\infty\) I mean, she told you something that Ray didn't remember.
A. I didn \({ }^{-1} t\) say she said something that Ray didn't remember. I said that the content was different in each of thenr stories.
Q. Okay. So which one was telling the truth?
A. I wouldn't know --
Q. Did you ever determine that?
A. -- that. I wasn't there. I wouldn't know that. I wasn't there.
Q. Did you ever investigate it?
A. We talked to them both, yes.
Q. And tell me about who you talked to and how you talked to them. Tell me about that.
A. What I remember is that we talked to Ray, and Ray remembered having a conversation with Margaret, but it was more about her not being happy that Steven Farmer was doing tasks without being directed to do so, and she wanted to know when someone was doing something for any patient that was in her care, and that she was also concerned about making sure that doors or curtains -- I'm not sure which -- were closed for privacy. And I believe that Ray had a conversation with steve about the privacy piece. Margaret's version was different than that.
Q. What was Margaret's version?
A. Margaret said that she expressed concerns that Steven Farmer seemed to seek out duties with females and was

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overeager and that she felt uncomfortable. I'm using my own words, but that's paraphrasing.
Q. No, I understand.

Margaret also told you that Ray Sumera had come to
her with concerns:
A. I dont know if she told us that or that was the report, I can't remember which, but that was a difference in their stories, as well.
Q. Well, what do you mean, "that wäs the report"?
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What report?

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A. I don \(t\) know iff thate was what she told law enforcement or if that was what she told Carol. We got the story kind of secondhand.
Q. Well, how do you know she told law enforcement if
you never saw the report?
A. It got back to --
Q. How did it get --
A. -- us somehow and --
Q. -- back to you?

MR. PRANGLE: Hold on. Hold on.
A. I can't remember the specifics. MR. PRANGLE: Hold on. Let her --
Q. How did you find out before the report? MR. PRANGLE: -- finish the answer. When that's
done --

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WILLIAMS \& ASSOCIATES .- COURT REPORTING SERVICE
A. I don't remember.
Q. Okay. So, in other words, you testified earlier today you've never seen a report, but now you know about the report.
A. I still haven't seen it.
Q. So tell me when the first time you found out about the report.
A. I couldn't tell you the details. I don't know if Margaret came and to d is or if someone else did, but somehow It got back to us that Margaret had shared concerns with law enforcement. I don't - I don't know that details were shared initially. And then we started talking about it with the team.
Q. Was that before you met with her in between May and August?
A. We became aware of it and then met with her, yes.
Q. Okay. But you -- as you sit here today, you have no idea how you became aware of it?
A. I can't remember. I don't want to guess.
Q. I don't want you to guess. Okay. So you have no idea how you became aware of it, but you actually became aware of the contents of it, as well. Right?
A. I became aware that she shared information. Contents of the police report, those are two different things to me.
Q. Well, you were aware, as you just told me before,

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that Margaret was saying that Ray came to her.
A. When she told the story of how she expressed the concerns, yes.
Q. When did she tell you that?
A. When we met with her and talked to her.
Q. Okay. So let's put it this way. As of August of 2008, you, as the Department of Emergency -- as the head of Department of Emergency Services at Centennial Hills Hospital, you were aware that Margaret Wolfe was alleging that Ray Sumera had come to her and expressed concerns about Ray Sumera. Is that correct?
A. She didn't express concerns about Ray Sumera.
Q. I'm sorry. I'm sorry. Let me restate the question. That was my bad.

In between May and August 1 of 2008, you, as the
department -- as the head of the Department of Emergency Serv ces centennial Hills, became aware that -- through a çar Wolle that Ray Sumera had come to Margaret Wolfe with concemis about Steven Farmer. Is that correct?
A. I don't remember the details enough to say if I heard that directly from her from someone else. What I remember is that Madadet \(h\) expesse co cerns to ray. Who initiated the conversation, I don't know what I was told initially.
Q. Well, you already -- you just testified somehow you WILLIAMS \& ASSOCIATES -- COURT REPORTING SERVICES

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were aware that Margaret stated that Ray told her about Concerns. Right? About Farmer.
A. I remember there being several different versions of the story. one was that --
Q. Okay.
A. - Ray went to Margaret and initiated a
conversation. The other was that Margaret went to Ray and intiated the conversation.
Q. Let's just keep those two for right now. Whatever it is, okay, those two versions, at least.
A. Yes.
Q. You knew those two versions as of August 1, 2008. would you agree with that?
A. At some point within a few --
Q. Is that faim?
A. -- months if we sa Afigust. I-- I can't validate the date, but that sounds fair, yes.
Q. Okay. When was the first time you spoke with counsel about this matter?
A. Cagnina case?
Q. Any. I don't care.
A. I don't \(-\infty\) I don't know that \(I\) could tell you.
Q. Okay. Did you ever investigate -- You said you had two different versions here. Did you have each of them, Mr. Sumera and Ms. Wolfe, write down their respective versions?

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A. We did not have them write them down, to my recollection. We spoke to them each.
Q. Did you take notes from that?
A. Not that I recall.
Q. Okay. Did you ever have them both in a room
together --
A. Not that I recall.
Q. -- where they could say, "Well, wait a minute.
Margaret, I didn't say that" or "Wait a minute, Ray. I didn't
say that"? Did you ever do that?
A. Not that I recall.
Q. Did you ever get to the bottom of the truth?
A. The stories were different.
Q. I know.
A. And they stuck to their stories.
Q. Did you ever get to the bottom of it, though?
A. There wasn't a way to really prove or disprove.
They both had different versions --
Q. Okay.
A. -- of what they remembered.
Q: Okay.
A. So we addressed it by making sure that people knew how to escalate and when to come forward with concerns in the future.
Q. Did you ever put a note into her employee file

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about this incident?
A. Not that I recall.
Q. So you didn't know what happened, you didn't know what version was the correct version, Ray's version or Margaret's version; but, nevertheless, is it safe to say that you believed it was more like the game of telephone, as opposed to someone was lying?

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A. I don't --
Q. Or the other way around. Maybe you thought someone was lying.
A. I personally at the time -- I think that it's easy, when you hear something surprising and horrible, to start looking back and seeing things.
Q. Okay. That doesn't answer my question.
A. I -- I don't know that I would classify it the way that you just said it, no.
Q. So you wouldn't classify it as a lie?
A. I don't know. I can't call something a lie without seeing the truth myself.
Q. Okay. Wouldn't it have been -- Wouldn't it -Strike that.

Wouldn't it have been important to come to a conclusion?
A. If we had proof, that would be easy.
Q. Well, but if Margaret is making up stories, that's
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a terminable offense.
A. I couldn't prove that either of them was telling the truth or not telling the truth.
Q. Right. And $I$ was just going to say, and if Ray is telling stories that aren't true, that's a terminal -m
turna-- -- turnable -- termable -m terminable --
MR. PRANGLE: He can be fired for that.
MR. MURDOCK: Thank you.
MR. PRANGLE: Sure.
MR. MURDOCK: Thanks.
Q. -- offense. Is that correct?
A. It could be, yes.
Q. Okay. But a decision was made just to kind of let
it be and decide, you know what, we're not going to get to the
bottom of it. What we're going to do is we're going to say,
"Look, if you see concerns, report it." And you gave them, you
gave all your staff, ways to make sure -- policies and
procedures to make sure they knew what to do in certain
situations. Is that right? Is that fair?
A. That's fair.
Q. Okay. Now, do you know Crystal Johnson?
A. Yes.
Q. Were you involved at all with bringing on agency
staff?
A. Not directly, no.

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    WILLIAMS \& ASSOCIATES -- COURT REPORTING SERVICES
little background on that.
A. I think that depending on who you ask and what point in time, you'll get a different answer. But at that time, we were still on paper documentation in the Emergency Department, so it was common to chart -- everyone could chart there. But on the inpatient units, they had an electronic system, and the agency staff may or may not, depending on if it was their first day and if they had been trained how. So that's why you might get variations.
Q. Okay. Okay. Oh, that makes sense.
A. They're sitting \(-\infty\)
Q. That makes sense.
A. They're now all on an electronic system. But at the time, we were different in the \(\mathbb{E}\) than in the inpatient units.
Q. So it's not just -- So actually both could be correct --
A. Correct.
Q. -- in that situation.
A. Correct.
Q. When did you have this meeting with Mr. Sumera, Ms. Goodhart, and Ms. -- one of the other nurses?
A. Darby Curlee.
Q. Darby Curlee.
A. In the days following. It would've depended when

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that goes along with the sentinel event, that I'm not allowed to get.

MR。 PRANGLE: The MIDAS?
MS. HALL: The incident report?
MR. MURDOCK: No. Forget it. You guys aren't
helpful。
MR. PRANGLE: I'm not trying to be helpful.
A. I only remember being involved in the state Board notification and the agency notification, myself.
Q. Okay. And that is it. Right?
A. That's all I remember.
Q. And aside from the meeting with Carol Butler and --
A. The discussions we had with staff.
Q. -- the discussions you had with staff, that was it?

That was all that was --
A. That's -- That's what I remember. It doesn't mean that more didn't happen. It just was a long time ago, so I'm doing my best.
Q. Well, I understand that, but here's the thing. Today is my opportunity to find out what you know.
A. Right.
Q. So I don't want to be surprised in November when you come testify and you say to me, "Well, oh, no. Now I remember."
A. I don't think my memory will improve between now
Q. What is the MIDAS system?
A. It's an incident-reporting system.
Q. And if a nurse or staff witnesses an incident, I guess of any kind, they use the MIDAS system. Right?
A. That's what it's for, yes.
Q. Okay. So what kind of incidents go into the MIDAS system?
A. In a genexal sense, any incident that could pose risk or has an unanticipated outcome.
Q. And at orientation before the hospital opened, I assume you instructed staff about the MIDAS system.
A. All of our staff went through a system orientation. I did not conduct that myself.
Q. Oh, okay. So as you sit here today, you can't tell me whether or not staff was aware of the MIDAS system and what needed to be put in there or not. Is that right?
A. That should have been part of their orientation. but I'm not the best person to speak to that, because that was not my area. We had a Clinical Education Department that did onboarding for all employees.
Q. Sure. Okay. Why weren't statements taken, actual written statements taken, of Ray Sumera, Karen Goodhart, and Margaret Wolfe?
A. I don't know. I don't know if statements were taken. I just know that \(I\) don't have any.

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Q. Well, you didn't take any.
A. Correct.
Q. You and Carol Butler didn't take any, as far as you know.
A. Not that \(I\) know of, no. I can't speak for Carol.
Q. But you can speak for yourself.
A. Correct.
Q. And you didn't take any.
A. Correct.
Q. Did Ray Sumera -- With Cagnina, did Ray Sumera put that incident in the MIDAS system?

MR. PRANGLE: I want to just object to foundation as to whether Sumera witnessed anything with Cagnina that would prompt such a report. He was not on the floor.

MR. MURDOCK: I understand.
A. I can't answer that question. I don't know.
Q. Did Margaret Wolfe put anything into the MIDAS
system?
A. I don't -- I don't know.
Q. Did Karen Goodhart?
A. I don't know if anyone did. I don't have that knowledge.
Q. How did you know who to meet with?
A. There were two different topics. The first incident with Cagnina, we knew who the nurse was, which was

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Karen Goodhart. Darby Curlee. Darby Curlee was, I believe, the charge nurse. So we knew who was working.

With the second incident, when we became aware of the other concerns that Margaret expressed, Ray was named in that information, so we talked to the two of them.
Q. You said Ray was named in that information.
A. That Margaret had shared with him.
Q. okay.
A. That was the story that we became aware of.
Q. Well, were there any documents, though, that had that?
A. Not that I know of.
Q. I'm trying to figure out how you became aware of the whole Ray Sumera and Margaret Nolfe drama.
A. And I can't recall. It was so long ago, I don't know if it was a phone call or an in-person. I have no idea how that came back to us. It could have been Margaret herself. I don't know.
Q. And just so I'm clear, after the whole situation, after your discussions with Mr. Sumera and Ms. Wolfe, neither of them was written up. Correct?
A. Not to my knowledge.
Q. You didn't write them up?
A. Not that - No, not that \(I\) know of.
Q. You're the director of the Emergency Services.

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A. Right.
Q. So you would've been the one to write them up.
A. Uh-huh.
Q. Right?
A. I could have been. Not --
Q. okay. But you didn't.
A. \(-\infty\) the only one. Not that I know of no.
Q. Okay. But you didn't specifically. Right?
A. No.
Q. You didn't specifically write up Ms. Wolfe.
A. Right.
Q. Outside of you and Ms. Butler, are you aware of anybody else knowing about the Ray Sumera and Margaret Wolfe discussions?
A. I would think Risk and Quality did, but -MR. PRANGLE: Don't guess.
A. -- but I'm guessing, so never mind. No --
Q. How would you guess that?
A. -- I'm not, because typically that's something that
they would be aware of
Q. How would they be aware of it?
A. Somebody would notify them.
Q. Who?
A. It could be many people.
Q. Did you?

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A. I don't remember.
Q. Did Carol?
A. I couldn't answer that.
Q. Did you do a MIDAS report?
A. I don't recall.
Q. Should you have done a MIDAS report?
A. Somebody should have --
Q. Did you?
A. - if they thought there was risk.

The Margaret-and-Ray incident was tough because it really boiled down to different perceptions of a conversation.
Q. Okay. But, nevertheless, it affected patient care. Right?
A. Not that we identified, no. It was; I have a bad feeling about someone, versus, that's not what she communicated to me. But there was no action that was identified from that incident. To my mo To my memory, that was what the conversations were about. There was no allegation of any wrongdoing. It was, I have a bad feeling. He's putting leads on my patients, which was part of the job. And Ray having a totally different understanding of that exchange.
Q. Actually, let me do this. I'm trying to pull this up. I'm going to have you read the Margaret Wolfe statement. It's PDDISC0162. It's where it starts. Why don't you just take a breeze through that. Take some time. It's 15 pages. I

\section*{WILLIAMS \& ASSOCIATES -- COURT REPORTING SERVICES}
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before?

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A. Today is the first time that I've read it, to my knowledge.
Q. I understand that. Have you ever been shown --
A. Not that I remember.
Q. -- this document before?
A. Not that I remember before now.
Q. Has anybody discussed this document with you?
A. I knew of its existence.
Q. And you knew of its existence prior to \(-\infty\) and \(I\) think we agreed on this before -- August 1, 2008. Is that correct?
A. I knew in that first few months after that Margaret had expressed concexns with the Police Department, yes.
Q. Okay. And you knew of the existence of the voluntary statements. Correct?
A. I think that's fair.
Q. Okay. During that same time frame? Is that correct? Is that fair?
A. Sure.
Q. Okay. Now, the statement goes a little bit further than what you just said before. Do you agree with that? MR. PRANGLE: Objection to the form. Vague.
A. What I was telling you before was what I remember from the conversations with Margaret and Ray, yes.

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\section*{TAB 82}

can think of, like I said, is the older lady that he did the one-to-one sittings with" --
A. Oh, okay.
Q. You said there was a conversation between you and the rest of the nurses about this incident.
A. That would have been as we were standing at the nurses' desk when the yelling was going on, after the nurse walked into the room.
Q. Do you recall how many nurses --
A. Well, there wouldn't have been more than three, because there was never more than four of us. And if she went in the room, that left three.
Q. And did any of you have a conversation with that nurse after the fact?

MR. BEMIS: Calls for speculation. BY MR. MURDOCK:
Q. As far as you know?
A. I have no idea.
Q. You certainly didn't, is that right?
A. I did not, no.
Q. Okay. Outside of hearing the patient yell, "I don't want you by me, get out of here," did you hear her yell anything else?
A. No, I did not.
Q. Do you recall her yelling anything else?
A. No.
Q. So just so I'm clear, when you stated, "So we didn't put any credence into what she was saying," you were talking about when she was yelling, "I don't want you by me, get out of here." Is that right?
A. Yes.
Q. Okay. Now, this occurred on the 6th floor, didn't it?
A. On the 6th floor?
Q. Yeah.
A. I thought it was on the 7th floor.
Q. Well, why don't you keep reading down on 181. Maybe that will refresh your recollection.
A. Okay. Then yes, it was. We got pulled back and forth, so it's easy to not remember exactly what floor you were on every night.
Q. Now, would the drawing that you made as Plaintiff's Exhibit 1 -- would that be different because it was on the 6th floor, as opposed to the 7th?
A. No. They're all exactly the same.
Q. Okay. Now, then the policeman says to you, "Okay. Do you remember what she was in for? What that victim?" Then you state, "I don't know."
A. Right.

ESQUIRE
Q. You're talking about the --
A. Patient.
Q. -- what you termed the little crazy old lady patient, is that correct?
A. The patient, yes.
Q. But that's the patient we're talking about here, right?
A. Yes.
Q. Now, outside of telling the police about this -- what you termed "the little crazy old lady," and the incident with Mr. Farmer -- did you ever tell anybody else about that?
A. No.
Q. After the incident took place, after the arrest, and Ms. Cagnina, things like that, did you ever tell anybody at the hospital about this incident?
A. No.
Q. So the first and only time you ever discussed this patient, the little crazy old lady patient with anyone, would have been with this detective. Is that correct?
A. No. Wait a minute. The director of nursing called me down and we talked about this, too, after I talked to the police. When she got a copy of
this, I talked to her. And that was it.
Q. Who was the director of nursing at the time?
A. I really don't know.
Q. But the director of nursing called you down after she read the statement, is that correct?
A. Yes. She talked to all of us.
Q. What do you mean, she talked to all of you?
A. She talked to all the nurses that were involved in this.
Q. Did you go through the statement with her?
A. She asked me what happened. I told her what I knew. We didn't pick this up and go through it line by line like we are now, but she knew what was -- I mean she had read it.
Q. Did she ask you about the little crazy old lady patient? Was that something you discussed?
A. You know, I'm not sure. She just asked about what I knew. No, I don't believe we did go through that. We went through the other part, because that was what was coming up.
Q. And outside of me asking you about this little crazy old lady patient, and the detective, has anybody else ever asked you about it?
A. No.

\section*{TAB 83}
ESTATE OF JANE DOE, )
    Plaintiff, )
vs.
VALLEY HEALTH SYSTEM LLC,
Defendant.
)
CASE NO. A-09-595780
DEPT NO. II
TRANSCRIPT OF
    PROCEEDINGS
BEFORE THE HONORABLE RICHARD F. SCOTTI, DISTRICT COURT JUDGE
DEFENDANTS VALLEY HEALTH SYSTEM LUC d/b/a CENTENNIAL HILLS HOSPITAL MEDICAL CENTER AND UNIVERSAL HEALTH SERVICES, INC'S MOTION FOR RECONSIDERATION OF THIS COURT'S NOVEMBER 4, 2015 ORDER

MONDAY, DECEMBER 7, 2015

APPEARANCES:

For the Plaintiff:

For Steven Farmer:
For American Nursing:

For Centennial Defendants:

ROBERT E. MURDOCK, ESQ. ECKLEY M. KEACH, ESQ.

HEATHER S. HALL, ESQ.
AMANDA J. BROOKHYSER, ESQ. RYAN W. BIGGAR, ESQ.

MICHAEL E. PRANGLE, ESQ. JOHN F. BEMIS, ESQ. DENNIS L. KENNEDY, ESQ. MARK D. HESIAK, ESQ.

RECORDED BY ELSA AMOROSO, COURT RECORDER TRANSCRIBED BY: KARR Reporting, Inc.

LAS VEGAS, NEVADA, MONDAY, DECEMBER 7, 2015, 9:06 A.M.

THE COURT: So this is the time set for the defendant's motion for reconsideration of this Court's November 4, 2015 order in Jane Doe vs. Valley Health, Case No. A595780. So I have read the motion, the opposition, the reply that I received. I got that.

I re-read the Court's order, and I also took a further look at some of the more relevant cases. And in particular I also looked at the Clark County School District Richardson case and the GNLV Service Control case, and generally the other cases cited by the parties. So I'm up to speed, ready to go.

I think one of the primary issues that I see here is did the Court have before it evidence from which it could conclude that Centennial's employees acted intentionally and willfully in withholding material evidence in the case. So that's one of the primary issues in this case.

That being said, please make your appearances, and then we can proceed with argument.

MR. KEACH: Marty Keach and Rob Murdock for the plaintiff, Your Honor.

MR. KENNEDY: Dennis Kennedy and Mark Hesiak for the Centennial defendants. Also present, Mike Prangle and John Bemis .

THE COURT: All right. Very well. All right. So I do have a 10:00 o'clock -- oh, someone else is standing?

MR. BIGGAR: Yes. We're all here.
THE COURT: Sorry.
MR. BIGGAR: Ryan Biggar and Amanda Brookhyser for Defendant American Nursing Services.

MS. HALL: And Heather Hall on behalf of Steven Farmer.

THE COURT: Very well. I do have a 10:00 o'clock hearing on a motion to suppress, so my criminal calendar. And then I have to start right after that with a criminal murder trial. So if you gentlemen could keep your arguments to roughly 20 minutes each side, or take less, that would be the pleasure of this Court. All right. Please proceed.

MR. KENNEDY: I will do that, Your Honor, because I know you're thoroughly prepared and the matter was pretty well briefed on both sides.

THE COURT: Thank you. A lot of material that you both wrote, so thank you for that. It was all helpful.

MR. KENNEDY: As a starting point, as the Court knows, the Court in its order ordered that the monetary sanctions, \$18,000, that had been imposed by the discovery commissioner be imposed again against Centennial, we haven't contested those. I have the two checks here.

\section*{THE COURT: Okay.}

MR. KENNEDY: So I'll give those to counsel.
MR. KEACH: Okay.
THE COURT: All right. The record will reflect that you have provided that to counsel.

MR. KENNEDY: And they'll open it up and look to make sure they're there.

MR. KEACH: Just to see what they look like.
MR. KENNEDY: And that's of course without prejudice to the arguments we make here, because we didn't contest --

THE COURT: Understood.
MR. KENNEDY: We didn't contest that.
THE COURT: It's without prejudice, of course.
MR. KENNEDY: And the Court's right. I mean, there -- the primary issue is, if you go back and look at the record and the evidence, was there sufficient evidence there if you apply what we believe to be the correct standard, the -- call it the corporate knowledge standard. Is there sufficient evidence in the record to find that at least one employee of Centennial had the proper state of mind; that is willful suppression for the purpose of harming the plaintiff.

And as we point out in some detail in the motion, there is no identification of a particular employee having that particular state of mind. And of course, that's required in order to impose the level of sanctions that were imposed here. Lower levels of sanctions, of course, can be imposed
without that finding.
But we think that the cases that we cited Judge Hicks's opinion in, I want to make sure I pronounce the name of the case correctly, Jeanina [phonetic] and the three others say that really is the standard of proof that's required to prove the requisite state of mind. And if we go back through the record itself, that evidence isn't there.

The Court, it appears, aggregated the knowledge of the three nurses and the two other personnel, the director of nursing and the director of the emergency room, to say taking all of that together, I will then take the next step up and make that finding. And as we point out, to impose this level of sanction, that's not sufficient.

There has to be somebody there who actually suppressed evidence and had the proper state of mind to reach this level of sanction, and that evidence just isn't there in the record.

THE COURT: Doesn't the passage of time make it difficult for the plaintiff to present any more evidence than that which they've already presented on the extent of willfulness and culpability of the defendants?

And I'm not saying that there wasn't sufficient evidence. I'm just asking the question wouldn't it have been difficult through the passage of time for them to come up with more, and that would be attributed in part to what the
defendants have admitted, that there was at least negligent culpability by the defendant's attorneys in failing to turn over the relevant material?

MR. KENNEDY: Yeah. And you can't dispute that, that it's more difficult with the passage of time, but nevertheless the burden of proof doesn't change. And that goes more, I think, to the finding of negligence than it does to the finding of willful and intentional conduct. Because there has to be something there to find the willful and intentional conduct.

And the depositions, the depositions ultimately were taken, the time has passed, but there isn't any evidence at all that other than people hearing rumors or having suspicions actually did anything to willfully suppress the evidence. And if you look back at the statements that were given to the police, those tend to confirm that the evidence itself, the evidence that's contained in those statements was as people presented it to be.

In other words, there's no evidence that after the statement's given to the police, that somebody changed their story or did something else. And what you have is you have the lawyers saying, look, we should have disclosed this evidence, we should have said these things, but for reasons of our own shortcomings that didn't happen. And so on the record --

And it is, there's no question, the plaintiff's burden to come forward and make those proofs, and if they can't, the law doesn't allow the Court just to make a leap saying, well, you know, without the passage of time I'm sure somebody could have proved this culpable state of mind. There just isn't any evidence as to that culpable state of mind.

Now, that doesn't mean there's no sanctions. We agree with that, that absent the intentional wrongdoing just for negligence and failure to do what you're required to do under the rule, sanctions can be imposed. But the level of sanctions here can't be imposed without that finding.

THE COURT: Are you suggesting that the requisite culpable state of mind is not simply intent and a willful withholding of documents, but it needs to go beyond that to an actual purposeful state of mind to actually harm the plaintiff?

MR. KENNEDY: Yeah, it does. And here's the reason why. I mean, somebody can intentionally withhold documents, but for what they believe to be a legitimate purpose. And you can say, well, you intentionally withheld that, and the party can say, well, yes, I did and here is my reason, and then of course there's a dispute over the reason.

As opposed to the party in the Johnny Ribeiro case, who created false evidence. Then you can say, well, from the creation of false evidence, you know, it's easy for the court KARR REPORTING, INC.
to conclude that you have the improper state of mind.
THE COURT: Right. And of course, the courts rarely find and juries rarely find direct evidence of a culpable state of mind of purposeful intent to harm another side, and that often has to be derived from circumstantial evidence, including the milieu of evidence that surrounds not only the withholding of the evidence, but all the other surrounding facts and circumstances.

MR. KENNEDY: Exactly right. And that leads me into, in a couple steps, our second point about the notice to the lawyers. In this case, and we point out in the motion, we say, you know, not in so many words, but let's look at these five people, what did they have and what did they know. And in order to find circumstantially that there was a culpable state of mind, you would need some evidence of that, call it motive or reasons for acting.

And each of these persons, I mean, you have three nurses who say, look, I said what I said and I told people what I told them. Okay. And I had heard this and we suspected this [inaudible] and this is exactly what we told the police, the two Murray and Wolf [phonetic] statements to the police. Okay. So and that was done essentially 30 to 60 days after the event in question.

And so those people obviously had no motive to withhold or hide anything, because they were fully forthcoming KARR REPORTING, INC.
with law enforcement. And then we have the third nurse who didn't give a statement, but who simply said, look, here's what I remember and here's what I don't remember. And as we point out, these people, two of the three, Murray and Wolf, left the employ of the hospital in 2010. So it's not as though there's some long-running plan or plot to do something.

I mean, they're gone in 2010, and the discovery continues in the years after that. So to think that they hid something when they had left and had given statements to the police, circumstantially you just can't make that leap. And that then -- these are the people with the percipient knowledge of what happened, and they had told law enforcement what they knew.

And that leads me into my second point, and that is the distinction has to be drawn between the attorneys and the client here as to what was done. There isn't really any evidence in the record that the client employees did anything at all to hide or withhold. In fact, the evidence is quite to the contrary; as I said, the statements to law enforcement. And that brings us to my second point, and that is the conduct of the lawyers.

Now, I know what the lawyers said in the original sanctions hearing, and those were appropriate statements based on the record. But when you look at the client, the client didn't prepare the 16.1 disclosures. I mean, we cited some
stuff in the restatement and the -- and elsewhere saying, look, when stuff like that is prepared by the lawyers, their clients trust the lawyers to do the 16.1, because quite frankly, their clients have no idea what that is.

And so the clients either gave to the lawyers or the lawyers had, from the other case --

THE COURT: You actually argued and admitted that imputation can go from the lawyers to the client.

MR. KENNEDY: But it can't. I take it back. It can go from lawyers to client.

THE COURT: Lawyers to client, but you said it can't go from clients to lawyers.

MR. KENNEDY: That's right.
THE COURT: I think that's what you said.
MR. KENNEDY: Yeah. It can't go from client to lawyer. So when you have the lawyers preparing the disclosures that are made, there is a point where you cross that line and you say it's the lawyer's responsibility at some point to make sure those disclosures are accurate.

And the lawyers in this case said, look, we had the other case, the C case, where we had actually interviewed these witnesses in that case, so we knew. We knew. We had interviewed them, and it was our mistake that they didn't get disclosed.

So in order to find some sort of willful suppression KARR REPORTING, INC.
by the client, by Centennial, it's almost impossible, because those disclosures had been made to the lawyers already about this particular CNA. And at that point it becomes the lawyer's obligations to make the disclosures, the 16.1 disclosures. If there is fault as to the deficiencies in those disclosures, as the lawyer said at the hearing, look, that is our fault, you know, we did that or failed to do that. You can't blame the client for that.

And that brings me to my second point, which is what we call the due process argument, which is in the notice of what was to be covered at the hearing that came out of Discovery Commissioner Bulla's report and recommendations. There's nothing in there that says these lawyers may have violated Rule 3.3, or that's something that the Court should take up. That's not in there.

And so the lawyers came and argued that motion to the Court and the findings then that came out said, well, the lawyers -- that came out from this Court said the lawyers have violated these rules of professional conduct.

THE COURT: Well, I didn't sanction the lawyers.
MR. KENNEDY: Well, you didn't, but you made findings against them.

THE COURT: The conduct of the lawyers is relevant and one of the factors to consider in determining the culpability of its client.

MR. KENNEDY: Exactly right.
THE COURT: But I never imposed sanctions on the lawyers themselves, and so --

MR. KENNEDY: No, you did not. But your final --
THE COURT: But the notice -- and the notice that I issued, I mean, it didn't mention the lawyers by name. But it says, paragraph 6, on the August 3, 2015 notice, "The purpose of the evidentiary hearing shall be to determine, one, if case terminating sanctions are appropriate based on the conduct of failing to disclose witnesses."

I was going to look at who had the duty to disclose and who failed to disclose without focusing at that point in time on whether it was the lawyers or the client, because I didn't know.

MR. KENNEDY: Correct. And ultimately the lawyers were found to have violated 3.3. What I'm saying is this, and if the lawyers were asked and they would agree with me, if the lawyers had realized that their conduct was at issue, if the Court had said, look, you guys are in jeopardy for 3.3 violations, what would have happened -- and we generally allude to this in the motion. What would have happened is those lawyers would have said to the client, you have to get separate counsel, but because our conduct is at issue in this matter, you have to get separate counsel, we have to get separate counsel.

And if that had happened, I can't tell you precisely what would have happened at the hearing in the case, but I do enough of this work to know exactly what would have happened is Centennial's lawyers would have said to Mr. Bemis and Mr. Prangle, hey, the client didn't prepare these 16.1 disclosures; no, the client did not.

In fact, you took all the information you had and you did it; that's right, you know, we did. And the same with the discovery responses that were verified by the client. I mean, the Court pointed that out. But the lawyers prepare those, and of course the client verifies them. But it's -those are all duties that the lawyers undertook.

And that brings us back around to the first point. Under the Young vs. Johnny Ribeiro factors, the Court has to decide, when the court looks and says who actually did these things, yes, the client can be punished for the shortcomings of the lawyers. But under the circumstances, is it fair to punish the client for those?

And our point here is this. In the absence of the showing of the intent of the wrongful state of mind and the purpose to harm the plaintiff, and the lawyer's conduct, which with respect to the items at issue was essentially lawyer conduct and lawyer judgments, re-evaluating the Young vs. Johnny Ribeiro factors, under that evidence and the proper legal standard, which is the one enunciated by Judge Hicks,
the evidence just isn't there to support this level of sanction.

The evidence certainly is there to support a lower level of sanction. And that was our bottom line, which is the dispute and the problem is the evidence that was lost. Well, that evidence is there in those police reports, and those are taken 30 days to 60 days after the events in question. That's the best evidence you're going to get on those points. It may not be as detailed as lawyers would get in depositions, but that's as fresh as that evidence gets.

The Court, if it wants to remedy the harm that occurred, can simply let those police reports come into evidence, and that goes a long way if not all the way toward remedying the problem that occurred here. And so bottom line, applying the -- I just said this, applying the correct legal standard, there's not enough evidence there.

THE COURT: So let me interrupt you for a second on the due process conflict of interest issue. Were you suggesting that if there had been different, let's call it better notice to defense counsel that their conduct would have been under scrutiny, then Centennial would have hired separate counsel, and they would have more aggressively presented its defenses that it did not have the culpable state of mind, that any wrongdoing here was that of its attorneys?

MR. KENNEDY: Yes. No question about that. KARR REPORTING, INC.

THE COURT: But couldn't -- are you then also, aren't you implying by that, that the Court somehow limited the ability of Centennial to put on that evidence? Because I didn't restrict them at the evidentiary hearing.

MR. KENNEDY: No, you didn't. I'm not faulting the Court. I'm not faulting the court. What I'm saying --

THE COURT: I'm trying to find out what would have been different and why.

MR. KENNEDY: Here's what would have been different. And you start from the premise that the Hall Prangle firm would have immediately said, look, we have a conflict, because our -- under 1.7, because our conduct is at issue. And Mr. Prangle, if you asked him right now, would say I'd do what any other good lawyer would do, I would say, yeah, I'm accused of wrongdoing, you have to get separate counsel.

So here's what would happen. Centennial's lawyers, and I'll just put myself in that position, say if I was Centennial's lawyer, the allegations focus on the 16.1 disclosure failures. The analysis then starts with the first question; whose failures are those, lawyer or client? Okay. And it's my view that those are obviously lawyer failures. The client's role is to make sure the lawyer has access to the information.

In this case you have two police statements and you have interviews in the C case, the prior case. The client has KARR REPORTING, INC.
done everything it can do. It's given all that information to the lawyers. There really isn't any other information out there outside of the interviews and the disclosure that, yes, we talked to the police.

So who then prepares the 16.1 disclosures which are found to be deficient in this case? It's the lawyers. That is 100 percent lawyer work, zero percent client work preparing the disclosure documents. The clients from the record have given the information to the lawyers that they should have given, and the lawyers had access to that and the lawyers decided what to disclose and what not to disclose.

The Court however found in its order that Centennial's fault was greater than the lawyer's in the 16.1 disclosures. I don't -- I don't think the record supports that conclusion. The same is true, as I said earlier, with respect to discovery verifications. The lawyers prepare the documents, give them to the client to sign, and the client signs them. I mean, that's how the real world works.

And finally, the argument that was made in pleadings about on what date -- or what date -- at a certain time Centennial had no information leading it to believe that Mr. Farmer would commit this type of an act. That is a brief written by a lawyer saying based on the evidence that I see, here is the position I can take.

But the Court faults the client for that and says, KARR REPORTING, INC.
well, the client is really at fault. Now, if I have Mr. Prangle or Mr. Bemis on cross-examination, I would in a respectful and professional way point out that those are things that the lawyers did, not the client.

And so while the Court did not limit the lawyers in what they were doing, the lawyers didn't do that, and the reason is that the lawyers, when they didn't believe their own conduct was at issue, didn't tell Centennial go get yourself independent counsel, and the lawyers probably would have got themselves independent counsel. In fact, I'm 99 percent sure they would have, because good lawyers do that. And that's the significance there.

As to the lawyers themselves, I suspect that what those lawyers would have done, they would have got independent counsel, and independent counsel would have gone out and retained an expert to give an opinion. If they had been told your conduct is at issue under Rule 3.3, they would have gone and they would have gotten an expert.

And Rule 3.3 didn't get a lot of work and analysis in the case. But Rule \(3.3(a)(1)\) has two parts to it. It says a lawyer won't present false evidence to a tribunal, and that's the part that the Court focused on and said, guys, some of this stuff was incorrect, your recollections about when you got information and who you got it from and when it was disclosed.

But the second part of \(3.3(\mathrm{a})(1)\) says that a lawyer shall correct any misstatements that were made to the tribunal. An expert witness in this case, I am quite sure, would have looked at that and said, you know, that rule has two parts. If you make a -- you shall not make a mistake or a misrepresentation, but if you do, you must immediately correct it.

And what happened in this case? After lunch the lawyers came back -- and just as an aside, everybody who litigates has found themselves in this position, coming back and saying to the judge, boy, this morning I said A, B and C, now I've gone back and looked at these documents, it's actually D, E and F, and I was just mistaken.

That's what these lawyers did here, is they came back after lunch and they said, man, we were certain that this statement was in those materials that we got, and we've looked at it and it's not in there, and both of us absolutely believed that it was there and so we didn't receive it on that date, we got it on another date.

And if there's an expert witness who's going to talk about compliance or noncompliance with Rule 3.3(a)(1), I am certain that that expert witness would have said, yes, they failed to comply with it the morning, or maybe in some briefs that were filed, but then they came back and they corrected it.

And so you can fault them for being mistaken, but you really ought not fault them for trying to perpetrate some sort of a fraud on the Court, because during the effective cross-examination of the plaintiff's lawyers, they said, you know what, it's not there, we thought it was, but it's not there, so now we have to correct that error. So in answer to the Court's question, I think that's what happened.

THE COURT: How can you come in to court on the day of the evidentiary hearing, where the primary purpose of that hearing is to ascertain why a particular affidavit was not disclosed sooner, and still not know when your office obtained that affidavit? Isn't that very, very troubling to you?

MR. KENNEDY: It's troubling, and it's troubling to the lawyers too. I mean, when I read the transcript, I felt for Bemis and Prangle, because they're both saying we thought it was in that packet of stuff we got from Metro, we thought this was in there, it's not in there.

And I will tell you, Your Honor, that if they thought that they could say, and they didn't, but if they thought they could say that and that that would pass everybody by and be accepted, there's no way. Because you have a document, it's objectively verifiable that it's not there, and so you can't say it is and then it isn't.

And yeah, it is troubling. But both the lawyers admitted and said to the Court it was just an error on our
part, we thought it was there. Now, nobody looked for it to confirm that it was there, yeah, that's troubling. But when that's pointed out, they both say we thought it was and it's not. That is very troubling.

But again, two things, or first -- the first is the lawyers said it's a mistake, it's not something we did to try to harm the plaintiff. But secondly --

THE COURT: Could I -- well, go ahead. Go ahead, yes, please.

MR. KENNEDY: To go back, that's lawyer conduct. That sure as heck is not client conduct. It's not something that Centennial can be punished for because its lawyer says, look, I think it was in this packet of materials, and then the lawyer says, you know what, it's not. Now, you cannot attribute that to Centennial, because they didn't have anything whatsoever to do with that. And to their credit, the lawyers said that at the hearing. They said, look, this is us, this is our fault.

So bottom line on the record, on the evidence applying the correct corporate knowledge legal standard, the evidence is not there that Centennial had the requisite state of mind; meaning an intentional withholding for the purpose of harming the plaintiff. Secondly, the lack of notice to the lawyers that their conduct was going to be at issue operated, as I've said, effectively operated to keep those issues from
being fully developed before the Court.
If those issues had been set out and the lawyers had known, the lawyers surely without any question would have told Centennial you have to get separate counsel, and those lawyers would have got separate counsel as well. And I can tell the Court that because I do a lot of work in that area. You just -- good lawyers, and these guys are good lawyers, that's what happens in those situations.

And none of that happened here. I'm not faulting anybody for it. I'm just saying that the way things worked out, that was the effect. And taken together, those two things, I think, really ought to cause the Court to go back, to look at the evidence that was adduced and to enter a lower sanction in the case.

THE COURT: All right. Thank you very much. I appreciate --

MR. KENNEDY: Thank you, Your Honor.
THE COURT: -- your argument and respect your argument and your point of view. Thank you.

Let's hear from Mr. Keach.
MR. KEACH: Thank you, Your Honor.
THE COURT: You may have the same amount of time.
MR. KEACH: Thank you, Your Honor. Your Honor, before I get into the argument I prepared, I want to address two points.

THE COURT: Yes, sir.
MR. KEACH: The first is I'm sure Mr. Kennedy didn't intend to mislead the Court, but the findings of the Court as to the misstatements by Hall Prangle, that finding on page 25 and 26 of the order didn't go to the they didn't disclose the statements in the packet in October 2014. The misstatement was they wrote in a brief that there was no possible way anybody would have known anything.

And they wrote it again in the writ, there's no possible way that anybody could have known anything. Those were the misstatements in light of the fact that Hall Prangle conceded they knew there were statements, at least it knew about the statements at least as of May 2013.

So the conduct that was inappropriate, the misstatements by Hall Prangle was not they didn't -- the part about they -- that they didn't disclose the document in the production. It was that they completely misled the Court and the Supreme Court when they said nobody in the world could have possibly known when they knew. The stuff about the we didn't have it in the file, that just showed that they continued to withhold the two most critical pieces of evidence in the case, which were the statements.

And the second thing I want to address before I get into my prepared argument is Mr . Kennedy repeatedly said and based his argument on the fact that the client, Centennial,
provided all the evidence they had, everything they knew to Hall Prangle. Where is that in the record? What witness said that? That's not in the record. That's what Mr. Kennedy wants to be able to argue so he can shift the blame to the lawyers.

And if in fact that's true, I don't know if it is or not because it's not in the record, nor does the Court know that, but if in fact that's true, it doesn't change the fact that Hall -- that the conduct of the client is -- of the lawyer is imputed to the client. And if Hall Prangle committed malpractice and they were told to do something and they didn't do it, the claim is not reconsideration. The claim is an action, direct action by Centennial against Hall Prangle.

THE COURT: But of course Mr. Kennedy's response to you would be that you have the burden of proof, and there -he would argue, I wouldn't say I agree with him, he would argue that where's the evidence in the record to show that particular Centennial employees had the culpable state of mind, so that we're not solely relying on imputation of culpability from the lawyers. That would be -- that's the real issue as he would frame it then.

MR. KEACH: Well, and where he's mistaken, Your Honor, is on two fronts. First, that's one factor under the Johnny Ribeiro test the Court's to consider. Okay. And the KARR REPORTING, INC.
court lists out in Johnny Ribeiro a whole list of factors, and other factors are such things as, well, what's the prejudice to the plaintiff. And while Mr. Kennedy suggests the only prejudice to us was we didn't get the statements and now we have them, as the Court found and as the evidence adduced at the hearing showed, there's a whole lot more that we lost.

Because all the witnesses, when Margaret Wolf said everybody was talking about it, we lost all those everybodies [sic] and what they knew. And we lost the ability as the, I forgot his name, the other lawyer, the second witness that testified from Hall Prangle, when he said, Yeah, we tried to identify who the victim was in the Murray affidavit and we tried to identify all the stuff, all that was lost.

So it's not just the statements cure it. All the information, what actually happened in that room within the Murray statement, what everybody else was talking about, who all at the hospital knew when Margaret Wolf said everybody was talking about it, all that's lost, because --

THE COURT: I understand. You can move on from that argument.

MR. KEACH: Thank you. Your Honor, facts and legal arguments that could have been raised but were not are waived, and are not appropriate for a motion for reconsideration. Valley Health knows this better, knows this law better than most. One of their lawyers, Mr. Kennedy, tried to get
reconsideration in Bahena v. Goodyear. The Court found there were no grounds for reconsideration, and issued an opinion only to clarify and reiterate the law.

And Mr. Kennedy also knows that in Bahena the court found that the sanction is only striking the answer as to liability and defendant still gets to argue damages. An evidentiary hearing under Young v. Ribeiro is not required, and there's no need to go through the factors such as degree of willfulness. For some unexplained reason, even though Bahena is the seminal case, Valley Health decided not to argue Bahena even after we brought it up in our brief.

Here everything raised in the motion for reconsideration could have been raised at the hearing. The collective knowledge doctrine is just another legal theory regarding the facts detailed in our hearing brief that the Court found to be true. It could have been raised but was not. It's waived.

The same is true of the due process argument. We made clear in our hearing brief that we felt Hall Prangle's conduct violated the rules of professional conduct, specifically Rule 3.3, and detailed the basis for that, which the Court again found to be true.

If Hall Prangle thought this Court needed to do something more as far as putting them on notice, they should have raised the issue. They didn't. That too is waived. And
so it is with all their arguments, Your Honor. They're truly just rearguing the same facts with theories they should have used the first go-around but didn't.

Now, the conflict, this argument has to be abandoned when Hall Prangle represents, still represents Valley Health. It's hard to argue Valley Health would have gotten its own lawyer or Hall Prangle would have gotten its own lawyer if they knew about the conflict when they know everything now, and here's Hall Prangle, no lawyer, and we're talking about conflict and they're signing the same pleadings.

Nobody switched off because of this. They didn't do it then, they haven't done it now. But more importantly, Your Honor, where is the evidence? The only thing you have is Mr. Kennedy's argument. We don't have any evidence. Of course, that's what the court had in its 39 page order, evidence, and that's what the decision was based on, evidence.

Now, they also argued that Rob was dilatory. Of course that argument was abandoned, because as we provided in our opposition, Rob took over 50 depositions and Hall Prangle didn't take one. Now, it's kind of hard -- and then Mr. Prangle conceded in his argument that no one could have known to take the depositions of Murray, Wolf and Sumera about the stuff in those statements before knowing the import of their testimony.

Now, the Metro declarations, not newly discovered. KARR REPORTING, INC.

He was known and disclosed long before the hearing. For some reason they decided not to bring him in.

Reconsider -- this reconsideration is under 2.24(a), not a Rule \(59(\mathrm{e})\) motion, as they want to describe it. AA Primo v. Washington, the case they rely on, stands for the proposition that a post trial motion to amend or reconsider is a Rule 59 motion regardless of what it's called. It doesn't say a motion to reconsider an interlocutory order as a Rule 59 motion.

Likewise Trayl v. Faretta [phonetic] has nothing to do with an EDCR 2.24 motion to reconsider. Rather, points or contentions not raised or passed over in silence in the original hearing cannot be maintained or considered on petition for rehearing. Now, that's the law as stated in Achrem v. Expressway Plaza, 112 Nev. 737. That's undisputed.

The Metro officer's testimony, if relevant, should have been provided at the evidentiary hearing, not now. Further they argue, well, we got in our depositions, and so it's -- but that's just not a viable argument. First, the declaration is not the same as the depositions. They have to -- there was an opportunity to cross-examine.

Second, Mr. Prangle stipulated to the use of depositions in this case to save time and expense. In fact, all of our exhibits were stipulated to. So what did the Metro KARR REPORTING, INC.
officer say? He said generally he would not give the hospital statements. There are three things wrong with that, Your Honor. First, he doesn't say he didn't give the statement to them, just he generally would not. So we don't know if he gave it to them or not in this case.

Second, he doesn't say he didn't give it to anyone else, like Murray or Farmer or Wolf or another hospital witness when he was interviewing them, any one of whom could have given it to Butler. Third, he doesn't say there's no way Butler could have gotten the statements. What we know from Murray, Butler had read and discussed her statement. We also know Butler cannot remember if she had it or not. She doesn't say she didn't. She says she didn't remember.

We know from Bachanek [phonetic] she knew all about Wolf's statement to the police, and all of this was by August 2008. We also know Hall Prangle interviewed Murray, Wolf and Sumera in 2008. Prangle told -- Mr. Prangle told the Court specifically that Hall Prangle met with Wolf in mid June 2008.

Now, here's where it gets good, Your Honor. Now they contend those interviews were only in conjunction with the Cagnina case. Okay. But so what. The information in both cases was the same foreseeability. So what's relevant in Cagnina was relevant in our case. But it's maybe even more interesting, Your Honor, considering Nurse Wolf had nothing to do with Cagnina.

At her deposition Nurse Wolf testified she didn't even know who Cagnina was, and she wasn't her patient. So the only reason, the only reason Hall Prangle would have interviewed Wolf was because Wolf made a statement to the police. Wolf has nothing else to do with the case.

THE COURT: So you're focusing so far on Hall Prangle's knowledge of the existence of a statement and when they knew the statement. But that's not really --

MR. KEACH: I'm going to get there, Your Honor.
THE COURT: -- zeroing in on the issue that was in your brief about how you now attribute that fault to Centennial.

MR. KEACH: Well, Your Honor, first off I wanted to argue stuff that wasn't in the brief, because we're still relying --

THE COURT: Well, that's fine too.
MR. KEACH: We're still relying on that brief.
THE COURT: And I've read everything in the brief, so.

MR. KEACH: And so I do want to do that.
THE COURT: Okay. Go ahead.
MR. KEACH: But Your Honor, it is important that Hall Prangle interviewed Wolf, who made a statement to the police in 2008, and Wolf had nothing to do with Cagnina. So why are they interviewing Wolf? Wolf had one thing to do in KARR REPORTING, INC.
the case. Wolf made a statement to the police, and there's nothing counsel is going to be able to argue to get around that point. They interviewed a witness who only had one piece of relevant testimony; statement to the police, and that's in 2008.

Now, the substance of the Murray, Wolf and Sumera statements and the fact they had given statements was not disclosed to Cagnina's lawyers either. Hall Prangle admitted they were aware staff had given statements to Metro in 2008. Your Honor, it's reasonable to conclude that when they interviewed the witnesses, particularly Wolf, they talked about the statements.

What Valley Health wants this Court to do is ignore its common sense and conclude that even though Hall Prangle knew about the statements when they met Wolf and Murray, they didn't discuss them. Now, that's circumstantial evidence. And of course, we would suggest Valley Health doesn't understand the concept of circumstantial evidence, Your Honor. Obviously we don't have Butler Prangle saying let's hide the evidence. You never have that in the case. We don't have direct evidence of willfulness.

On the contrary, we have circumstantial evidence which was fully detailed by the Court in the factual findings, in Numbers 20 through 85. Your Honor, I can go through and read them. Do you want me to say what evidence we presented?

The Court's already found it. I went back and read the order. I can't say it any better than what the court said in its findings, particularly Numbers 20 through 85. You detail everything that everybody knew and when they knew it and how they knew it. Circumstantial evidence is as good as direct evidence.

But, Your Honor, here's where I disagree with Mr. Kennedy, and that is when he says we have to show a purposeful concealment by Centennial. That's not the law. They cite Richardson, Clark County School District vs. Richardson, Golden Nugget Las Vegas v. Service Control, and Nevada Power v. Fluor [phonetic], all for the proposition that there needs to be a willful intent. Those cases, Your Honor, were brought under 37(b) (2). Our hearing, our motion was brought under 37(c)(1).

C-1 states, A party that without substantial justification fails to disclose information required by Rule 16.1 is not permitted to use as evidence at trial, at a hearing or on any motion or any witness or information not so disclosed. In addition to or in lieu of this sanction, the court on motion and after affording an opportunity to be heard, may impose other appropriate sanctions, and these sanctions may include any of the actions authorized under Rule \(37(\mathrm{~b})(2)(\mathrm{A}),(\mathrm{B})\), and (C).

Well, what's the standard there? The party without KARR REPORTING, INC.
substantial justification fails to disclose information, that's what the rule is. And there has been no justification. And that rule is different, Your Honor, than (b) (2), because 16.1 applies to parties and lawyers. It's not just lawyers. It's parties and lawyers.

And 16(c)(1) says the party without substantial justification. The lawyer didn't do it is not substantial justification, Your Honor, because that's the only argument Mr. Kennedy has; the lawyer didn't do it, therefore it's not substantial justification.

Your Honor, this Court struck Valley Health's answer, but allowed them to argue damages. Now, that's exactly what the court did in Bahena. And I presume the Court looked at Bahena and considered that when it enters its order. Now, there our court made clear that as long as the defendant got to argue damages this was not a case concluding sanction.

So while the hearing was to determine whether case concluding sanctions should be imposed, the court didn't grant case concluding sanctions. Just as Bahena said, finding liability and allowing them to argue damages are not case concluding sanctions. And that's why in Bahena, Your Honor, when that's what the lower court did, they imposed a sanction of finding liability, but allowed them to argue damages.

The court in Bahena said you don't even have to have an evidentiary hearing. You don't even have to go through

Johnny Ribeiro factors. None of that matters. In fact, it's such a lesser standard that we don't even review it under the same standard because it's not a case concluding sanction. Well, that's important, Your Honor. Because if they aren't case concluding sanctions, you don't even go through the factors. What you go through, what you determine is was the appropriate sanction based upon the violations.

Now, what this Court did, to its credit, you did go through the Johnny Ribeiro factors, and you went through each one of them and you went through it in detail, and you detailed it in your order. So when you did that, Your Honor, what Johnny Ribeiro says, the factors the court may properly consider include but are not limited to the degree of willfulness of the offending party. Not whether it was purposeful, not whether the -- that there was a malicious intent, and then it goes through the other factors.

Now, in arguing the collective knowledge doctrine, Valley Health focuses on one of the factors; the degree of willfulness. Young doesn't say sanctions cannot be imposed unless the court finds the conduct was intentional and malicious. Young only says the degree of willfulness of the offending party may be considered.

Every case relied upon by Valley under the collective knowledge doctrine dealt with malicious intent, Your Honor. Valley Health argues this Court could not enter KARR REPORTING, INC.
these case concluding sanctions -- could not enter these non case concluding sanctions unless it found malicious intent. That's not the law. Johnny Ribeiro says all you have to do is consider a degree of willfulness.

Judge Hicks tells us what the collective knowledge doctrine is. Quoting, The collective knowledge doctrine favors liability where corporate agents have different pieces of information, but the corporation was negligent in compiling these pieces of information.

Basically, Your Honor, the collective knowledge doctrine is like baking a cake. You have flour, you have milk, you have sugar, you have eggs. You take each piece, each separate and distinct ingredient, you put them together, bake them, you can have a cake. Without combining them you don't have a cake. If you leave out one, you don't have a cake. Well, that's not what we have here.

We don't have separate pieces the combination of which are needed to show degree of willfulness. If Bachanek was not involved, only Butler, we still have shown corporate culpability. Butler knew of Murray, Wolf and Sumera. The party has a duty to disclose. She did not. She knew they went to the police and made statements. She knew this was in management -- she was in management capacity.

They all interviewed Wolf about the statement, but no one disclosed the existence of the statement. Mr. Bemis
and Mr. Prangle each knew in 2013 about Murray and her statement. And probably, I don't know about Bemis and Mr. Prangle specifically, but somebody at Hall Prangle knew about the statements in 2008, because they said that they knew there were police statements.

The real argument they should have made was that the evidence was cumulative, because we didn't need to show all of this in order to prove it. Because what Bemis knew or what Mr. Prangle knew or what Hall Prangle the lawyer knew, any one of those was sufficient to impose the sanctions that the Court did. What the Court -- what Valley Health is really arguing, the Court should not have made the findings.

Because what they say in the brief is the determinative issue is whether the record contains clear and convincing evidence proving that Centennial willfully intentionally concealed the relevance of Nurses Murray, Wolf and Sumera, the existence of police statements with intent to harm and unfairly prejudice. And what they really want you to do, Your Honor, is just change the factual findings. The findings are true. There's nothing to change. Everything you found was supported.

Your Honor, I want to go on to the due process, and again, that's briefed in our opposition. In the 2011 Third Circuit case relied upon by Valley Health, Adams v. Ford Motor, a lawyer contacted a juror after a trial.

THE COURT: Let me just interrupt you for a second, because I did receive a note that my evidentiary hearing that was scheduled for 10:00 is not going forward, just the DA will need to put a continuance on the record. So we have less pressure to wrap it up. But I wanted Mr. Kennedy to know that he can have -- he's going to have a few minutes on reply of course.

MR. KEACH: Thank you, Your Honor.
THE COURT: Go ahead and proceed.
MR. KEACH: A lawyer in Adams v. Ford Motor Company, a lawyer contacted a juror after a trial. The juror thought the contact was harassing and notified the judge. The judge ordered all the lawyers to come to court the very next day to explain without briefing --

THE COURT: Hold on a second. The marshals look like they're trying to decide what to do over here. Is the defendant present?

THE MARSHAL: Oh, yeah. We're going to take him back, yes.

THE COURT: Okay. He doesn't need to be present for -- is the DA in the back?

UNKNOWN SPEAKER: Yes, Your Honor.
THE COURT: We don't need the defendant present for the continuance, do we?

UNKNOWN SPEAKER: I would agree with that. KARR REPORTING, INC.

THE COURT: All right. So you can go ahead and let him go. Thank you.

Mr. Keach, I apologize for the delay. Continue on focus now.

MR. KEACH: Thank you, Your Honor. The lawyer contacted a juror after trial. The juror thought the contact was harassing and notified the judge. The judge ordered all of the lawyers to come to court the very next day to explain, without briefing or witnesses, after which the judge found the lawyer violated Rule 3.5.

The Third Circuit found a violation of due process because, and I'm quoting, "Colianni had no notice, much less particularized notice about the potential sanctions he faced prior to the judge's order finding that he engaged in misconduct. A review of the hearing transcript makes clear the judge never even hinted that Colianni would be subject to sanctions.
"In addition to the lack of notice, we find that Colianni did not have sufficient opportunity to be heard. Since the judge did not hold an evidentiary hearing, Colianni was not given the chance to present any witnesses to testify on his behalf. Moreover, the judge did not question the juror who complained about his conduct. Accordingly, we find that the district court violated Colianni's due process rights by failing to provide him sufficient notice and an opportunity to
be heard."
Okay. First off, the Court didn't impose a sanction on Mr. Prangle and Mr. Bemis. What the Court did was find -was make factual findings there were misrepresentations. It's at the bottom of page 25 and top of page 26, a couple of your findings. The Court then said, These findings are violations of Rule 3.3. That's not a sanction, first.

Second, unlike, unlike the Ford Motor Company case, the factors relied upon in the Third Circuit are not present here. Here they did have notice. We gave it to them. We filed a Rule 37 motion. We advised the Court of Valley Health's and Hall Prangle's misconduct. We advised the Court and Hall Prangle we were asking the Court to find a Rule 3.3 violation on page 9 of that evidentiary hearing brief, and then proceeded to document the false statements.

Your Honor, in this -- in this motion right now, how am I to know that they are challenging the Court's order based on due process? Because the Court told me that they were challenging on due process? No. Because they filed a motion and say here are the issues that we're presenting we're asking the Court to consider; due process, collective knowledge doctrine.

Well, how does Mr. Prangle and Mr. Bemis know that we're talking about Rule 3.3? Because the Court advised them? No. In our moving papers we let them know we're looking at KARR REPORTING, INC.
3.3 and are advising the Court they violated. And of course we had told them that in two prior occasions, which we detail in our opposition. So when they say they didn't know that 3.3 was an issue, it's just not true. It's just not true.

So they had notice. And unlike Colianni, Hall
Prangle also had an opportunity to be heard, because those -the court found in that Third Circuit case not only did they not have notice, they didn't have an opportunity to be heard. Well, here Hall Prangle had an evidentiary hearing.

Mr. Prangle was listed as a witness when the Court asked the parties to supply names of witnesses. Hall Prangle on behalf of Valley Health was the one witness, Mike Prangle.

But do you recall what happened? After Mr. Bemis went through what he went through, Mr. Prangle said, I'm not going to testify. And I don't blame him. I wouldn't want to go through that either. I wouldn't want to have to tell this Court what really happened. I wouldn't want to have to tell this Court when we knew what we knew under oath. He declined to testify. He declined to call any witnesses. That doesn't mean he didn't have an opportunity to be heard. They did.

Now, the arguments that they would have had lawyers, there's no evidence to that. What the evidence is, is what actually happened. What happened is we're still arguing about the conflict and they still don't have lawyers.

Now, at page 10 of their motion, Valley Health says KARR REPORTING, INC.

Wolf's statement was first disclosed in this matter by plaintiff in March 2015, in its 25th supplement dated March 19, 2015. That's true. What's suggested by that statement but is not true is that Hall Prangle never had the statement until then, when it is a fact that it had it and read it at least as of May 2013.

They interviewed Wolf back in 2008, when she wasn't Cagnina's nurse, and the only reason they talked to her was because of what she told police. Even Mr. Prangle admitted in his closing argument at the hearing they knew of Murray's statement in May or February 2013, and conceded they had Wolf's in May 2013.

He should have disclosed Wolf as soon as he got the statement. And he said, Well, I accept that it was May 2013 we had it. So they're not denying they had it in May 2013. The record is uncontroverted, because Mr. Prangle conceded that we had it as of May 2013.

Mr. Prangle admitted, when he advised the Court in his October 2014 opposition to motions for summary judgment, in that where he said that they absolutely no known prior acts, that the statement was made with full knowledge of the Wolf and Murray statements. And then he repeated that same misrepresentation to the Nevada Supreme Court.

Those were the false and misleading statements in violation of Rule 3.3, exactly as we argue in their brief, and
he admitted it was his decision, not his client's. But now the client wants to blame the lawyer. There's a remedy for that. It's called file a lawsuit for malpractice if that's what you really believe. They selected their own lawyer. We didn't pick him for them.

The problem with this case is, Your Honor, and their problem is this Court heard the witnesses, saw the witnesses, listened to the testimony and considered everything, and when they did that -- and when the Court did that, it made factual findings. And those findings, every one of them are supported in the record and will not be reversed, because they're all true and they can't get around that. And what those findings show is exactly what the Court concluded in its order, and they can't get around that.

The truth is, in my opinion, Valley Health and their lawyers tried to game the system. They bet we would never catch them, and they lost. Who would have ever predicted that Rob would do a FOIA request to the PD's office and get the emails between Hall Prangle and the PDs about the nurses' statements to Metro? Because that's when it all started.

Now, who would have dreamed they did that? They were in control of the evidence. As long as they didn't give it to us, there's no way we're going to get it. But that's how they got caught. This Court heard and saw the testimony, judged the credibility of the witnesses and the lawyers, and
this Court made the findings, none of which are subject to challenge.

These were not case concluding sanctions under Bahena. And a Young v. Ribeiro hearing and analysis was not even required, but you did one, and it cannot and will not be disturbed on review. Valley Health gambled and they lost. Sometimes that happens in Las Vegas.

THE COURT: Thank you, Mr. Keach.
All right. Mr. Kennedy.
MR. KENNEDY: I'll respond to the arguments that Mr. Keach made generally in the order that he made them. First off, with respect to the re-hearing, re-hearing's proper if there's been a manifest misapprehension of fact or an error of law. And what we set out was we said, look, it appears as though the standard that the Court applied was the incorrect standard, the corporate knowledge standard.

And secondly, with respect to the conflict of interest, that didn't actually come up until after the decision that the Court made. With respect to that you're correct. You didn't sanction the lawyers in terms of imposing a monetary sanction against them. What happened was the court found that the lawyers had violated the rules of professional conduct. That in itself is a sanction against the lawyers. It's an adverse finding.

I can go down that road with you and tell you that KARR REPORTING, INC.
now when they renew their malpractice insurance, have you ever been sanctioned by a court, the answer's going to be yes, we were found to have violated Rule 3.3, we didn't have to pay any money or any penalty, but there was a finding against us that we violated the rule of professional conduct. That in itself is a sanction. But that violation was then imputed to the client, so the client suffered the sanction from the lawyer's violation of the rule. So yes, there was a sanction.

Number 2, the remedy. Mr. Keach says, well, the remedy here is malpractice. Well, that's getting a little far down the road. The remedy here is for the court to reconsider what it did and apply the correct legal standard to it, the correct corporate knowledge doctrine, and decide whether or not there was an insufficient notice that the rules of professional conduct would be at issue. So the remedy's not malpractice. The remedy is to go back and reconsider what was done.

Third, again issue is taken with the statements.
Mr. Keach says, well, really the sanction was for the statements that based on the evidence there was no way to know that there was a likelihood that Mr. Farmer would commit this sort of an act. Now, the Court actually faced that issue in the motion for summary judgment, and in footnote 76, on page 20 of our motion the Court addressed that.

And the Court not only didn't sanction Centennial's
lawyers for it, the Court found that that presented a genuine issue of material fact for the jury to decide. So the argument that the sanction was actually imposed for that statement really is not a valid one, because the Court had looked at that and had said that's an issue of fact, whether or not there was sufficient evidence to put Centennial on notice.

Now, Centennial of course arguing that said there's no way we would have known. Well, it was a fact issue, and I doubt the Court intended to sanction Centennial for that conduct.

THE COURT: Of course, when I addressed that issue the first time it was in context of determining if there was a question of fact as to notice on one of the elements of the claims being presented, not on the issue of what weight I should give it in determining the state of willfulness when combined with all the other evidence in the case.

MR. KENNEDY: And I understand that.
THE COURT: So two completely different analyses when I considered that piece of evidence.

MR. KENNEDY: Okay. But we're dealing with the argument there's -- and I'm paraphrasing, there's no way we would have known based on that same quantum of evidence that was there. And so to argue that someone ought to be sanctioned for making an argument off of the evidence, I don't
think that's what the Court did in this case. And the basis for that was, just to encapsulate it, was we didn't know until we received a complaint in the \(C\) case of this sort of conduct.

Yes, some -- there had been discussion among the employees about Farmer being too attentive and that sort of stuff. But that's all that was. There wasn't any notice saying, hey, beware of this guy, he may perpetrate some sort of assault. So there is that question of fact as to whether or not somebody's saying, you know, this guy's a little too attentive rises to the level of notice of a propensity to criminal activity.

Next, the declaration of -- that we put in from the police officer. The Court makes a finding that says it is undisputed that Butler knew about and saw the Murray statement. Now, all Butler said was, look, I don't -- I just do not remember that. Okay. Which is a truthful answer several years later.

And the Court says, well, it's undisputed that Murray had the statement and Butler had seen it. This is the one point where we actually went outside the record and said, wait a minute, that factual finding by the Court is very likely incorrect.

And we went back, and it's Exhibit 4 to the motion, which is the declaration of the Metro officer, and he says, look, we don't give out statements regularly to witnesses, I
was in charge of the case and I have no recollection of doing that, and there's no notation in the file that that was done. And so while Murray says, gee, I think Butler saw that, Butler says I have no recollection of that, and the police officer says it's just not what we would do --

THE COURT: But when I issued my order, I had to go by the record that was before me, and I didn't have anything controverting the Murray statement.

MR. KENNEDY: That's right. And what we have in that case is we went outside and brought evidence in saying, look, that's a clearly mistaken factual finding. And what you had was you had somebody say I think that I had my statement and showed it.

Of course Murray didn't have a copy of the statement and say, look, here it is, I had it, and Butler says, well, I sure don't remember that. And so we went out and got the police officer to say that is extremely unlikely, and we do that to just simply to address the factual finding --

THE COURT: I understand that.
MR. KENNEDY: -- and to say to the Court, in light of the declaration of the police officer, very unlikely that that happened.

And I know the Court said based on the evidence it's undisputed, and we went out and said we think that is clearly a -- in light of that new evidence it's clearly a KARR REPORTING, INC.
misapprehension.
THE COURT: Of course there was other evidence that I considered as well, including Mr. Bemis's representation to the discovery commissioner that he was aware of several police statements as far back as 2009, or that his firm was aware.

MR. KENNEDY: Yeah. And that, of course, I assume that that is correct, they had interviewed witnesses. And he can say, look, we were aware that they had been given to the police, but that's different than having the statements.

THE COURT: I understand, of course. Okay. You can wrap it up, if you would.

MR. KENNEDY: Next, why was Wolf -- I will.
THE COURT: Okay.
MR. KENNEDY: Why was Wolf interviewed? Wolf was working in the emergency room when Patient \(C\) was transferred. And so Wolf had information about Patient C. The argument is that, well, you'd only interview her because of the Doe party. She was interviewed because she was working when Patient C was there.

As to the matter of the willfulness that's required, on page 23 of our motion we quote both the Clark County School District and the GNLV cases, and they say there has to be some degree of willfulness. And willfulness means more than intent. Intent to do an act means doing an act for a purpose. And in this case the purpose has to be to hide evidence, to
interfere with the litigation to harm the plaintiff.
Bahena involved willful acts, not negligent acts. Bahena involved -- the principal wrongdoing was the party who didn't show -- the Goodyear party who didn't show up for his deposition after having been ordered to do so. And we know that if you look at the opinion denying rehearing, Justice Gibbons says, look, this was a case where a guy was ordered to show up for his deposition and didn't show up.

So, you know, the sanctions are all there. That is clearly a willful act designed to interfere with the litigation. It's not an act where somebody makes an error and later comes back and says I had the date wrong or something like that. Somebody who just doesn't show up. And unless the Court has questions, I'm done.

THE COURT: I appreciate your argument. It is very enlightening. And I respectfully appreciate argument from both sides. In a complex and very serious matter such as this, I want to make sure that I fully vetted all the arguments and thought of them carefully, and it's always important to reflect at least overnight on a case like this.

So I'm going to take this under advisement and you'll have a decision very soon. I understand that we have a trial date of January 4, and given the -- given, you know, the urgency of a decision in this, I will have it this week, and my guess would be by Wednesday.

MR. KEACH: Thank you, Your Honor.
MR. KENNEDY: Thank you, Your Honor.
THE COURT: Thank you. Anything -- when do we see you all next? I know you have a lot of motions you've been filing, motions --

MS. BROOKHYSER: The 14th, I believe, Your Honor. We have some MSJs on.

THE COURT: All right. Thank you very much, Counsel.

MR. KENNEDY: Thank you, Your Honor.
MR. KEACH: Your Honor.
THE COURT: Yes, sir.
MR. KEACH: Can \(I\) just address one thing?
THE COURT: We're still on the record. Is it
procedural or substantive?
MR. KEACH: It's procedural, Your Honor.
THE COURT: All right. Mr. Kennedy, Mr. Keach has something to address.

MR. KENNEDY: Okay.
THE COURT: Let's hear what he has.
MR. KEACH: Just something about scheduling, Your
Honor
THE COURT: Yes, sir.
MR. KEACH: The Court late last week sent out an order scheduling the pretrial, I believe it was, for KARR REPORTING, INC.

December 23. Excuse me, the motions in limine for December 23.

THE COURT: Yeah. And that's in part because I have this two week murder trial that starts now, and I'm pretty busy .

MR. KEACH: Your Honor, the problem -- and that's a Wednesday. The problem for me is I'm flying out December 22, and I was going to ask the Court is it possible that we could have the hearing on the motions on Monday, perhaps even Monday afternoon, if the Court has a busy calendar Monday morning. But there's no possible way I can be here.

THE COURT: All right. Well, let me hear from Mr. Kennedy, or who else on this side wants to address that?

MR. PRANGLE: That would be the 21st?
MR. KEACH: Yeah. Monday, the 21st.
THE COURT: I mean, I might be able to move it to the 21st.

MR. PRANGLE: I believe I can be here on the 21st, Judge.

MR. KEACH: Thank you, Mr. Prangle.
THE COURT: Well, I didn't make that decision yet. I'm thinking.

MR. KEACH: But I was thanking Mr. Prangle for his concession.

THE COURT: Oh, okay. So let me check with the KARR REPORTING, INC.
clerk. How does Monday look? I know that we expected that trial to roll into the Monday, Tuesday. That's why --

How much time did you anticipate arguing? We have a lot of motions. And what I'll probably do on the motions in limine, most likely I will issue my tentative rulings in writing as to each of those and you'll have those the Friday before, and that would probably greatly shorten the arguments on those. But then we also have some summary judgment motions.

MR. PRANGLE: I know the one that we did Mr. Murdock filed a non-opposition to. So I believe ANS has more meaningful ones.

MS. BROOKHYSER: There's an ANS MSJ, Your Honor, and there's also one that the plaintiff filed.

THE COURT: Do you think we could get through everything in about an hour, hour and a half on Monday?

MS. BROOKHYSER: I believe those motions are being set -- are being heard on the 14th, Your Honor. So the motions in limine hearing doesn't affect that.

THE COURT: Well, it was possible that my JEA was going to move anything that was set for the 14 th, so everything to the 23rd. The 14th is not a good day for us.

Is that correct?
THE CLERK: The 14th still has the summary judgment [inaudible].

THE COURT: What day of the week is the 14 th?
THE CLERK: It's a Monday, Your Honor.
THE COURT: So that's a week from today? Well, all right. You know what. Let's try to keep those set just so we don't have way too much on the 21st. And I guess I'll have to start my trial at 10:30. So you guys will have about an hour and 15 minutes tops on that summary judgment on the 14 th.

All right. And so I will, if there's no strong opposition, I will go ahead and move the hearing on the motions in limine to the 21st. Can we start at 8:30 in the morning?

MR. KEACH: No problem, Your Honor.
MR. PRANGLE: Yes. No problem.
THE COURT: 8:30. All right. That will be the order then. Thank you.

MR. BIGGAR: Your Honor, before we go off the record, as far as the briefing schedule, moving that, moving the hearing date back, we don't have any dates for -- the motions in limine were set on an order shortening time on the 23rd. Now they're back to the 21st. We don't have any briefing schedule for oppositions and replies for those.

THE COURT: Do you all believe that's something you could work out, or do you want me to assign dates?

MS. BROOKHYSER: I think we can work it out, Your Honor. It's just when would you -- I know that --

THE COURT: I would like to have the reply brief at least, the reply briefs at least 24 hours before the hearing. If you can get them a day and a half, that would even be better for me. All right. But I'll guarantee you that I'll read them, because I'll read the other stuff in advance. So at least by -- if the hearing's the 21st --

MR. BIGGAR: That's Monday.
THE COURT: Yeah. Oh, that's Monday, so maybe by Friday. That'll give you the whole weekend. So let's say Friday by 3:00 p.m. Will that work for you guys?

MR. PRANGLE: Yes.
THE COURT: All right. So Friday, 3:00 p.m., reply briefs for any and all matters being heard on the 21st. And the 21st will be any and all matters that were previously set for the 23rd.

MR. KEACH: Thank you, Your Honor.
THE COURT: All right. Thank you.
(Proceeding concluded at 10:25 a.m.)

\section*{CERTIFICATION}

I CERTIFY THAT THE FOREGOING IS A CORRECT TRANSCRIPT FROM THE AUDIO-VISUAL RECORDING OF THE PROCEEDINGS IN THE ABOVE-ENTITLED MATTER.

\section*{AFFIRMATION}

I AFFIRM THAT THIS TRANSCRIPT DOES NOT CONTAIN THE SOCIAL SECURITY OR TAX IDENTIFICATION NUMBER OF ANY PERSON OR ENTITY.


KARR Reporting, Inc.

\section*{CASE NO.}

IN THE
SUPREME COURT OF NEVADA

HALL PRANGLE \& SCHOONVELD, LLC, MICHAEL PRANGLE, ESQ., KENNETH M. WEBSTER, ESQ. AND JOHN F. BEMIS, ESQ.

Petitioners,
vs.

EIGHTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA, IN AND FOR THE COUNTY OF CLARK,

Respondent, -and-

\title{
MISTY PETERSON, AS SPECIAL ADMINISTRATOR OF THE ESTATE OF JANE DOE,
}

Real Party in Interest

District Court Case No.: A-09-595780-C

\title{
PETITIONERS' APPENDIX TO \\ PETITION FOR EXTRAORDINARY WRIT RELIEF VOLUME XVI of XVII
}

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Valley Health System, LLC d/b/a \\
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\hline \begin{tabular}{l} 
Plaintiff's Opposition to Defendant's Valley \\
Health System LLC d/b/a Centennial Hills \\
Hospital Medical Center and Universal \\
Health Services, Inc.'s Motion for \\
Reconsideration of this Court's November \\
4, 2015 Order filed December 2, 2015
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PA1590- \\
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Reply in Support of Motion for \\
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PA1825- \\
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Reply to Defendant Valley Health System, \\
LLC d/b/a Centennial Hills Hospital \\
Medical Center and Universal Health \\
Services, Inc.'s Opposition to Plaintiff's \\
Motion for NRCP 37 Sanctions filed May \\
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PA0490- \\
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Reply to Defendants' Oppositions to \\
Plaintiff's Motion for Summary Judgment \\
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\section*{EXHIBIT "29"}

\section*{EXHIBIT "29"}


PRIVILEGE LOG STEVEN DALE FARMER LVMPD CRIMINAL FILE
\begin{tabular}{|c|c|c|c|}
\hline Document ID No. & Description of Document & Date of Document & Privilege Claimed \\
\hline LVMPD0002 & Communication Center Event Search & 05/16/2008 & Relevance/Privacy. This document contains patient identification information and/or patient family identification information. \\
\hline LVMPD0037 & \begin{tabular}{l}
Centennial Hills ED \\
Admit Log
\end{tabular} & 05/16/2008 & Relevance/Privacy. This document contains patient identification information and/or patient family identification information. \\
\hline LVMPD0038 & Individual Patient Note & 05/16/2008 & Relevance/Privacy. This document contains patient identification information and/or patient family identification information. \\
\hline LVMPD0039 & Admission Assessment & 05/16/2008 & Relevance/Privacy. This document contains patient identification information and/or patient family identification information. \\
\hline LVMPD0040 & Admission Assessment & 05/16/2008 & Relevance/Privacy. This document contains patient identification information and/or patient family identification information. \\
\hline LVMPD0041 & Admission Assessment & 05/16/2008 & Relevance/Privacy. This document contains patient identification information and/or patient family identification information. \\
\hline LVMPD0042 & Admission Assessment & 05/16/2008 & Relevance/Privacy. This document contains patient identification information and/or patient family identification information. \\
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\end{tabular}

\section*{DECLARATION OF RESEARCH ASSISTANT, CUSTODIAN OF RECORDS CONCEKNING LAS VEGAS METROPOLITAN POLICE DEPARTMENT RECORDINGS OF RADIO TRAFFIC (TAPE AND COMPUTERIZED MATERIALS)}

I, Leslie Loretto, hereby declare under the penalty of perjury:
1. That I am an employee of the Las Vegas Metropolitan Police Department, Las Vegas, Nevade and in such capacity, I act as the Custodian of Records for the records and recordings of 9.1-1and 3-1-1 calls made to and radio tapes recorded by the Las Vegas Metropolitan Police Department.
2. That all calls mace to 9.111 are recorded by the Las Vegas Metropolitan Police Department onto DVDs and into computerized records.
3. That I have examined the recordings made by the Las Vegas Metropolitan Police Department and that I have discavered that on May 16,2008 radio traffe was given in reference to an event at 6900 N Durango Dr at or near 0842 hours.
4. That I have made an exact, true, accurate and complete reproduction of the above described radio traffic onto a CD and have printed an exact, true, accurate, and complete reproduction of the computerized information concerning this call. That I have written the Event Number 080516001021 onto that CD. I then sealed that CD into an envelope, attached this declaration and the computerized information concerning that radio traffic to that envelope and wrote my name and the same Event Number on the outside of that envelope.
5. That the original recording of the radio traffic (DVD and computer entries) by the Las Vegas Metropolitan Police Department was made at the time the call was received by the Las Vegas Metropolitan Police Department and that the recording was made by a person with knowledge in the course of a regularly conducted business activity of the Declarant or of the office of the Declarant.
6. That such recording of the radio traffic tramsmitted on the Las Vegas Metropolitan Police Department radio channels are a regular practice of the Las Vegas Metropolitan Police Department and are part of the activities of the Las Vegas Metropolitan Police Department and the recording of the radio traffic are matters observed pursuant to a duty imposed by law. That this is a full, true and correct copy of the original on file with the Las Vegas Metropolitan Police Department, except for information that is privileged and confidential by law.

I declare under penalty of pergury that the foregoing is true and correci.

Executed on: May8.2013
Signature:



\begin{tabular}{|c|c|c|c|}
\hline EVT : LLV080516001021 & TYPE: 426 & PRI & : 1 \\
\hline LOC : CENTENHIML HILLS HOS & BLDO: & APT & : \\
\hline ADDR: 6900 N DURANGO DR & XST : 6801 G DEER SPRINGS RAY & CITY & : LV \\
\hline CADD: ROOM 725--ALT & CNAM: CAGHINA, SCOIT \#3904 & CPHoN & \\
\hline MAP : 0151645 & S/3: \(\times 5\) & SRA & : E205 \\
\hline P/U : \(2 \times 43\) & OFFI: 6549 & OFF2 & : \\
\hline DaTE: 08/05/16 & INIT: 08:42:10 & AREA & : I2 \\
\hline 911 : Y & CHSE: 00:26:07 & DHEF & : 0 \\
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\section*{STATE OF NEVADA}

COUNTY OF CLARK
) ss.

May 8, 2013
AFFIDAVIT:
1; SUSANA S. MCCCURDY, being duly sworn, on oath; depose and say:
That I am the Records Director of official police records maintained by the Las Vegas. Metropolitan Police Department.

That 1 am in receipt of your Order served to us on May 6, 2013, ordering the entire case file regarding Case Number C245739.

That I have provided a copy of a CD containing photographs pertaining to event number 080516-1021, which was provided to me by the Las Vegas Metropolitan Police Department Photo Laboratory:

That the Las Vegas Metropolitan Police Department has redacted privileged private personal information regarding social security numbers in which a reasonable person would have a legitimate expectation of privacy. Therefore, the Las Vegas Metropolitan Police Department objects to the subpoena on the foregoing grounds pursuant to NRCP 45(c)(2)(B).

That I have provided true and correct copies of all responsive documents under my hand and not privileged by law, except as otherwise indicated above, 188 pages in all.

SUBSCRIBED AND SWORN to before me this \(8^{\text {th }}\) day of May, 2013; in the County of Clark, State of Nevada by Susana S. MicCurdy


NOTARY PUBLIC

\section*{Incident Summary}


\section*{Offenses}

Statute Code: SEXA200.366A Enhancers:
Stalute Desc: SEXUALASSAULT
Counts: 1 Statute Sevariby: FELONY

\section*{Persons Involved}

Person: : 0001 MNI: 3082374
Event Association: VICTIM
Name: CAGNINA, ROXANNE MARIE
Height: \(5^{\prime} 3^{4}-5^{\prime} 3^{\circ} \quad\) Weight: \(150-160 \mathrm{lbs}\)
Address: 3717 LOWER SAXON NO. LAS VEGAS, NEVADA 89085
Phone Type 1: RESIDENCE Phone\# 1: (702) 870-5435
Phone Type 2:
Occupation:

Person\#: 0002 MNI: 8603647
Event Association: CONTACT
Name: CAGNINA, SCOTT
Height: \(6^{\prime \prime} \mathbf{1 " ~}^{\prime \prime}\) - \(6^{14}\)
Address: 3717 LOWER SAXON NO. LAS VEGAS, NEVADA 65085
Phone Type 1: RESIDENCE/HON Phone\# 9: (702) 870-6435 Ext 1:
Phone Type z: BUSINESSNOR' Phonat 2: (702) 828-3111 Ext 2:
Occupation: CORRECTIONS OFFICER Employer/School: CCDC
Person\#: 0003
MNI: 8803651
Evant Assaciation: SUSPECT
Name: FARMER, STEVEN DALE
DOB
Height:
Address: ,
Phone Type 1:
Phone Type 2:
Occupation: NURSE

DOB: 07/06/1973

DOB: 07/03/1968
Weight: 230 - 230 lbs

Age: 39-39 Sex: MALE Eyb Color: BLUE

Age: 34-34 Sex: FEMALE Eye Color: GREEN

Race: WHITE/CAUCASIAN Hair Color: RED Sector/beat:
Exi 1:
Ext 2:
Employer/School: UNEMPLOYED

Can JD Suspect: No
Contact Date/Time:
Race: White/caucasian Hair Color: BALD/UNKNOWN
硅 Contact Date/Time:

\section*{Contast DaterTime:}

Age: - Sex: Malk Eye Color:

Ext 1:
Ext 2:
Employerfschool: SectorrBeat:

Can ID Suspect: Ye

Can ID Suspect: No

Rate: WHITEGCAUCASIAN Hair Color: SectoriBeat:

\section*{Narratives}

ENTERED DATETTIME: 5/20/2008 09:35:20
NARRATIVE TYPE: INCIDENT CRIME REPORT
SUBJECT: SEXUALASSAULT
AUTHOR: CASPER, M 6549

THE VICTIM HAS A HISTORY OF SEIZURES AND THIS MORNING WHILEAT HER RESIDENCE SHE SUFFERED ANOTHER EPISODE. SHE HAS A PANIC ALARM AT HOME WHICH SUMMONS HELP. ROXANNE WAS TRANSPORTED TO CENTENNIAL HILLS HOSPITAL.

ROXANNE SAYS THAT WHILE IN THE ELEVATOR A MALE NURSE BEGAN TO STROKE HER LEG IN AN EFFORT TO COMFORT HER. ONCE THEY ARRIVED IN HER ROOM, ROXANNE SAYS THAT THE NURSE STARTED TO FONDLE HER BREASTS, STROKING HER NECK AND HE THEN USED TWO FINGERS TO PENETRATE HER VAGINA.

ROXANNE WAS HEAVILY MEDICATED DURING THE ASSAULT BUT SAYS THAT THE NURSE KEPT TELLING HER TO RELAX AND HE WAS DOING THESE THINGS TO HER RELAX. ROXANNE FURTHER stated that the nurse then said to her as he repeatedly penetrated her with fingers, that he wanted roxanne to "Cum". roxannealso believes that suspect ORALLY ASSAULTED HER AS WELL.

ROXANNE IS NOT SURE HOW LONG THE ASSAULT LASTED BUT SAYS SHE WAS VERY SCARED AND WASN'T SURE WHAT TO DO.

AFTER THE SUSPECT LEFT, SHE CALLED HER HUSBAND, SCOTT AND THEN SAYS SHE CALLED 911. THE SUSPECT RETURNED TO ROXANNE'S ROOM AT 0700, BUT THE NIGHT NURSE WAS IN THE ROOM AT THE TIME. THE SUSPECT AND NIGHT NURSE LEFT THE ROOM TOGETHER.

CONFDENTAL
\begin{tabular}{|c|c|c|}
\hline \begin{tabular}{l}
Las Vegas Metropolitan Police Department Forenstc Laboratory \\
Report of Examination \\
Biology/DNA Detail
\end{tabular} & \multicolumn{2}{|r|}{\begin{tabular}{l}
Distribution Date: \\
JUL 292008
\end{tabular}} \\
\hline \multirow[t]{4}{*}{Roxanne Cagnina (v) Steven Farmer (s)} & Case: & \(080516-1021\) \\
\hline & Agency: & LVMPD \\
\hline & Incident: & Sexual Assault \\
\hline & Requester: & M. Pence \\
\hline
\end{tabular}

The Biology/DNA Detail of the Las Vegas Metropolitan Police Department Forensic Laboratory examined evidence in this case and reports the following results:
\begin{tabular}{|c|c|c|c|c|}
\hline Pkg & Item \# & \begin{tabular}{l}
Lab \\
\#
\end{tabular} & Description & Results \\
\hline \multicolumn{2}{|l|}{\multirow[t]{14}{*}{SAK-Ebbert}} & KP1 & \multicolumn{2}{|l|}{Sexual Assautt Kit - Roxanne Cagnina} \\
\hline & & KP1A & Reference buccal swabs & - full femate profile \\
\hline & & KP1B1 & Vaginal swabs & - Full female profile \\
\hline & & KP1B2 & Cervical swabs & - Full female profile \\
\hline & & \(\mathrm{KP1C1}\) & Face swab & - Full female profile \\
\hline & & KP1C2. & Fingernail scrapings & - Partial ONA profile \\
\hline & & KP1D & Pubic hair brushing & - Not examined \\
\hline & & KP1E & Rectal swabs & - Full female profile \\
\hline & & KP1F1 & Oral swabs & - Full female profile \\
\hline & & KP1F2 & Floss & - DNA typing not performed \\
\hline & & KP1G & Labial swabs & - Full femate profile \\
\hline & & KPIH & Paperwork & - Used for information only \\
\hline & & KPIII & Breast swabs & - Mixture profile \\
\hline & & KP112 & Thigh swabs & - Mixture profile \\
\hline \multirow[t]{4}{*}{8177-1} & \(\frac{1}{2}\) & KP2A & Right hand finger swabs & - Full male profile \\
\hline & 2 & KP2B & Left hand finger swabs & - Full mate proflie \\
\hline & \(\frac{3}{4}\) & KP2C & Right hand fingernail scrapings & - Possible mixture profile \\
\hline & \(\frac{4}{5}\) & KP2D & Left hand fingermail scrapings & - Full mate profile \\
\hline 8177-2 & 5 & KP3 & Reference buecal swabs - Steven Farmer & - Full mase profile \\
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\end{tabular}

\section*{CONCLUSIONS}

Items KP1A, KP1B1, KP1B2, KP1C1, KP1C2, KP1E, KP1F1, KP1G, KP1I1, KP112, KP2A, KP2B, KP2C, KP2D, and KP3 were subjected to PCR amplification at the following STR genetic loci: D8S1179, D21511, D75820, CSF1PO, D3S1358, TH01, D135317, D16S539, D251338, D195433, VWA, TPOX, D18S51, D5S818, and FGA. The sex-determining Amelogenin locus was also examined.

The DNA profiles obtained from the vaginal swabs (KP1B1), cervical swabs (KP1B2), face swabs (KP1C1), rectal swabs (KP1E), oral swabs (KP1F1), and labial swabs (KP1G) are consistent with Roxanne Cagnina (KP1A). Additional alieles below threshold were detected on the face swabs (KP1C1).

Due to limited information, conclusions with regard to the source of the partial DNA profile obtained from the fingernail scrapings (KP1C2) cannot be reached.

The DNA profile obtained from the breast swabs (KP111) is a mixture. The major profile is consistent with Roxanna Cagnina (KP1A). Steven Farmer (KP3) cannot be excluded as a minor DNA contributor. Greater than \(99.99 \%\) of individuals in the population are excluded as possible contributors of DNA to the breast swabs (KP111).
The DNA profile obtained from the thigh swabs (KP132) is a mixture. The major profile is consistent with Roxanna Cagnina (KP1A). Steven Farmer (KP3) cannot be excluded as a minor DNA contributor. Greater than \(99.88 \%\) of individuals in the population are excluded as possible contributors of DNA to the thigh Swabs (KP112).
The DNA profiles obtained from the finger swabs (KP2A and KP2B) and the left hand fingernail scrapings (KP2D) are consistent with Steven Farmer (KP3). Possible additional alleles below threshold were detected on these samples.

The DNA profile obtained from the right hand fingernail scrapings (KP2C) is a possible mixture. The major profile is consistent with Steven Farmer (KP3). Due to limited information, conclusions with regard to possible minor contributors cannot be reached.

1 returned the evidence to the vault.
I declare under penalty of perjury that the foregoing is true and correct.



The Biology/DNA Detail of the Las Vegas Metropolitan Police Department Forensic Laboratory examined evidence in this case and reports the following results:


\section*{CONCLUSIONS}

Items JM-1A, \(\mathbf{~ M}-111, \mathrm{JM}-112\), and \(\mathrm{JM}-2\) were subjected to PCR amplification at the following STR genetic loci; D8S1179, D21S11, D7S820, CSF1PO, D3S1358, THOU, D13S317, D16S539, D251338, D19S433, WA, TPOX, D1BS51, D5S818, and FGA. The sex-determining Amelogenin locus was also, examined.

The full and partial DNA profiles obtained from the breast (JM-1I1) and thigh (JM-112) swabs are consistent with Roxanne Cagnina ( \(\mathrm{M}-1 \mathrm{~A}\) ). There are indications of a mixture in these samples, inducing' a male contributory below the interpretation threshold; however, sufficient data was not obtained for further comparison.
The evidence was returned to the vault.
sortie M. Masselmer
Jute M. Marschner, P\#8806 Forensic Scientist II

Beat llida \#1429.
Administrative Reviewer

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\section*{APPLICATION CURRICULUM VITAE}



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\section*{PERSONAL REFERENCES}

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Admission Date: 05452008 29:21
Med. Record No: 7009528
Visil Number: 8000t13219
Altending Phys: Shuja, Amiz Mo
Residenl Phys: NA

Centennial Hilis Hospital Medical Cenfer Individual Patient Nofe and Any/All Addenda

Patient: DOB:

Gendor. Female Location: 7N Room/Bed: 725:01

MUR Note, performed 05/16/2008 05:44, entered 05/16/2001 05:48 by Murray, RN, Christine.
0445: Pt to floor on stretcher-VSS-heavily sedated-needed assistance to walk to the bathroom. Stated "My headache is still not gone" I told her to sleep and that would help ner HA,

0530: P1 sleeping no \(s / s\) of distress noted at this time-railings have been padded to protect pt from harm

\section*{Cenćenniaj hitize meoicaic Ceníeri}

Performed: 5/1610: 09:50 Stalus: Finished

\section*{Current Hnass}

Information obtained from patienl. Diagnosis: and Seizures/Headaches. Paticnl was not hospinalized in the last 60 days. Palient does not object to a blood transfusion if needed. No history of previous blood transfusion. History of previous anesthesia. Date of previous anesthesia: 02/10/2005. No reaction to anesthesia.
Past Medical/Surgical History
Patient's HEENT past medical history includes headache.

\section*{Reproductive History}

LMP: 04/20/2008. Patient is not pregnanl.

\section*{Psych-Social History}

Patient has not used robacco in the last 12 monhhs. Caregiver has not used tobacco in the last 12 months. Patient denics being threatened or physically hurt in the last 12 months. There is no evidence of abuse and/or neglect.

\section*{Nutrition Hisfory}

Nulrition history assessed and no concems were identified.

\section*{Vaccine Information}

Patient has nol received the infuenza vaccine.
Palient has nol received the pneumonia vaccine.

\section*{Diabutes}

Patient does nol have diabetes.
Vitals on Admission

Patient's stated height is 160 cm ( 5 f 3 in ). Patient's stated weight is 56.7 kg ( 125 ib ).
Oral temperature 98.t F (36.72 C).
Brachial pulse 78 bpm while patient lying.
RR 18.
Patien on room air.
Right Am BP \(110 / 74 \mathrm{mmHg}\). via machine while patient lying.

\section*{Arrival Data}

Patient Arrived onto unit: 05/16/2008 04:45. Arrived via stretcher. Admitted from ED. Emergency contact is Scott; Relation to patient: Friend. Can be reached at (Work). Patient oriented to the following: electrical appliances, visiting hours, bathroom call light, bed operation, smoking policy, phone, call light and dietary services. ID bracelet on. Allergy bracelet not applicable.

\section*{Assistive Devices inventory}

Reporled: 5/1f/08 11:04
Patient (HowpNisin) No.: B00011\$219

\section*{Assistive Devices Inventory (continued)}

No assistive devices at time of admission.

\section*{Advance Directives}

Patient does not have an Advance Directive. Information offered to patient and was refused.

\section*{Braden Risk}

Sensory Perception: No Impairment; Mojsture: Rarely Moist; Activily: Walks Occasionally; Mobility: Slightly Limited; Nutrition: Adequate; Friction/Shearing: No Problem; Braden Risk Score \(=20\). Basic standards of practice were implemenied per hospital policy, based on the Braden Risk Assessment score and clinical judgemen.

\section*{Fall Rish Assessment}

\section*{Fall Risk Score \(=30\).}

History of falling since admission or within the last 3 monihs: No.
Secondary diagnosis noled which could increase risk of a fall: No.
Ambulatery aid: None or on bed rest.
IVISaline Lock present: Yes.
Gail/Transfering: Weak.
Mental status: Oriested to own ability.
Palient is taking 3 or less medications from the following list: Aresthesia within past 48 hours, Anticoagulants, Antidepressants, Benzodiazepines, Laxative/diurelics, Opioids (narcolics), Sedativeshypnolics, Vasodilators.
Slandard (low risk) Fall Prevention Interventions were implemented; based on a score of 25 - 50 oblained using the Fall Assessment and Intervenion policy.

\section*{Poin Initial}

Patient's level of pain is 0 (no pain). Numerical pain scale used to assess patient's pain level. Use of pain scale was explained to patient and/or family.

\section*{Home Medication}

Phenabarb 64.8mgAM///2NilePO, lasi dose prior to admission 05/14/2008; left at home.

\section*{Learning Needs}

Primary language is English. Patient does not have any barriers to learning. Patient does not have cultural restricions. Patient does not have religious restrictions.

\section*{Anticipated Discharge Plan}

Patient lives wilh family. Family relationshipiname: Scot//Friend. Anticipated discharge/transfer io home.
Person who can assisl is Scon \& family ; can be reached al . Retalion to patient: family.

\section*{Education Neads}

Patient exbibits knowledge about health problem/treatment. Patient exhibits knowledge about managing the health problem/treatment. Patient's prefersed leaming methots include 1:1. No factors affect the patient's abitity 10 leam. Plan of Care initiated: yes.

\section*{Spirftual Assessment}

No religious or spiritual concems. Patient does not wish to specify a religious or spiritual preference.

\section*{heent}

Blurred vision bilaterally. Additional HEENT related comments: Blurred vision before seizures,

\section*{NeuromusculoSheletal}

WNL as evidenced by: Alert and oriented to person, place and time. Moves all extremities. Glasgow Coma
Scale assessment not required at this time. GCS: 0 .
Orthopaedic Assessment
Orhopaedic assessment is not indicated for this patient at this time.

\section*{Cardiovascular}

WNL as evidenced by: Pulses regular and palpable. No peripheral edema. Skin warm, dry to touch, color within individual normal limits.

\section*{Respiratory}

WNL as evidenced by: Respirations even and unlabored. Breath sounds clear bilaterally.

\section*{Gastrointestinal}

WNI. as evidenced by: Abdomen sofi, non-lender, bowel sounds active. Last BM dale: 05/16/2008.

\section*{Genitourinary}

WNL as evidenced by: Continent, voids without difficulty or pain. Urine color within individual normal limits.

\section*{intogumsentary}

WNL as evidenced by: Skin integrity intact. Tissues show no evidence of redness, inflammation, rashes, ulcerations or wounds, No surgical tubes/dzains.

\section*{IV information}

Peripheral IV in Righl Forearm. Gauge: 20. Site is patent. Inserred 05/15/2008.

\section*{Functional Assessment}

WNI, as evidenced by: Ability to stand and walk with steady gait. No change in patients usual level of functioning.

\section*{Equipment}

No additional equipment is being used at this time.

\section*{Restraints}

Patient is not in restraints.

\section*{Psych/Knowledge}

Patient's behavior/mood is sedated. Patient is nol at risk for wandering. Additional Psych/Knowledge related comments: Pi sedated co HA-verbaly rambling-needs assistant to the bathroom.
\begin{tabular}{lll} 
& \multicolumn{1}{c}{ Occurrence History for Admission Assexamami } \\
\cline { 2 - 4 } Effective & Status & User \\
\(5 / 16 / 0806: 29\) & Finished & Muray, RN, Christine \\
\(5 / 16 / 0805: 18\) & Unfinished & Murtay, RN, Christine
\end{tabular}

\section*{Reported: 5/48/04 19:04 Patient (MonpNisit) No.: 8000118219}

\section*{Referrals and Notices}

\section*{Standard Notice Information}

No factors affect the patient's ability to leam.
Patient's preferted leaming methods inelude \(1: 1\).

Primary language is English.
Diagnosis: and Seizures/headaches.
Basic standards of praclice were implemented per hospital policy, based on the Braden Risk Assessment score and clinical judgement.

\section*{Belongings: Inventory}

The following belongings were idemified: shirhblouse described as print-green\&red kept at bedside; pants/slacks described as blue jeans kept al bedside; shoes/slippers described as white slipper socks kepl at bedside; underwear described as grey bra-panlies heige kepl at bedside; wallet/purse described as tapestry/black kept at bedside; sumglasses described as while kept al bedside; electronics described as maroon cell phone kept at bedside; no other belongings noted.

\section*{Home Medtcation}

Phenabarb \(64.8 \mathrm{mgAM} / \mathrm{I} 2 \mathrm{NitcPO}\), last dose prior to admission 05/14/2008; left at home.

\section*{Money in Palient's Possession on Arrival}

If moncy was in palient's possession upon arrival, the nurse admitting the patient and a wilness must sign below confirming the amount documented in the Valuables Inventory Section above. (Leave blank if no money in patient's possession on arrival.)
Admiting Nurse Date \& Time Employee Wimess

\section*{Liablity Wafver for Porsonal Balongingewhedications}

The hospital will nol be responsible for valuables that are not considered necessary for the palients activities of daily living such as credit cards, jewelry, and cash that are not checked in with Security.
\begin{tabular}{ll}
\hline Printed name & Relationship to patient \\
\hline Signabure & Dale \& Time
\end{tabular}

\section*{Reported: 5246/08 11:04}

\author{
Via Email H8651@LVMPD.COM \\ U/S Ruth Gorki (for Sgt. Pence) \\ coo Heather Jackson, P8651 \\ Las Vegas Metropolitan Police Department
}

Re: Administrative Subpoena Issued to American Nursing Services, Inc. Our File No.: 018719.PMIS214

Dear Ms. Gorski:
Please find attached documents responsive to the Administrative Subpoena issued to American Nursing Services, Inc. At your convenience, please confinn that the Administrative Subpoena has been satisfied.

Should you have any questions, please do not hesitate to contact the undersigned.
Sincerely yours,
MeGlisehey Stafford, PLLC


Arnica A. Fris
Brandy N. Sheely
Attachments
cc: Ms. Johnette Spellman (via e-mail) (w/attachments)

Anchorapak (907) 34s-3919 Adtanis \((A 1404) 3730353\) Bation Ropety. LA (t)





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\section*{APPLICATION CURRICULUM VITAE}


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1/30/06

\section*{Re: Steve Farmer}

To whom ft may Cones:
I have worked with Steve Farmer at Healdsbung District Hospital. As a Certified Nurses assistant he is one of the best l have ever worked with in my fifteen years of nursing. He does a great job with each and every patient He is kind, compassionate and caring. He is great about reporting appropriate changes of conditions in vital signs, sion conditions and other important issues. He is always well groomed and clean. He works well with Other staff and patients alike. He is efficient and able to complete his work well. He works well within his scope of practice.

I would highly recommend Steve Farmer to ANY facility.
Sincerely,
Colure K. Banda RN
Valerie K. Bender
Registered Nurse
4346 S.R. Road
Casper, Wyoming 82604
(307) 237-2286

21104

Jo them it may enceun.
I have watixi with steve Farmors since the tims he has wovled at Healdobung Dislict. Dteve is alwap punctaral and professionel. A is cars to the potients canmat be beat. Inwer have to werry if my vitals are going to be takes and mpsonted. The patizits are tavned, cleaned and mowth care given withowt liwuing to ask Steve. Dove knows what mildo to be dore and does it mo quesians aslacd. Steve. also gow the ertru mile. for unstance he brought a patient a TV guide because he knew she wowld injoy the TV guide. \(D\) wowld give stave a necomendation anytuixe the is a geat nuisses aid. Stiee is a mimber of the otaft and makus a great part of a tram. always wilung to rulp witn anything-he enfyys learing,

Thaye yow Brighd Muto of 42.3-902 6963

To Whom it May Contra,
I came to the Hialdsburg District Hoipital as a travel nurse in May, 2006. I met Steve Pamper there and bind the privilege to get to know and work with him Steve has a fantastic work ethic. I have observed him consistently meet the patient care goals that have been astigned to him, with compassion for the patients and respect for the nurses and his fellow worker. Steve is a strong asset to our team and would benefit any organization that has a need for his experience in patient care. l've truly enjoyed working with him and wish. him the absolute best.

Sincerely,


Randall L. Inst RN
(586) 260-5074

February 01,2006

Ta whom it may comenrn,

I man writuat that letter of recommendation on behalf of Steven Parker. I have been working with Steven Farmer at Healdsbury District Hospital. I am very pleased with his performmee an a curtifed marring ascithant, Steve is eager and wilting to leno how to improve his shills, he works wall with others and needs little or an supervision. Steve also works very hard to provide excellent cire for the patients he fa astgaed, he geconaplishen tide by
 conditions or concerns he might have for their well-being Steve also metage new ideal to assist in providing better care for his patients. Be completes his dulles mud documentation mecorataly, completely and in a timely manner. 1 would recommend him hiehtiy; 3 tee Poorer would be an suet to any futility be works for!

Sincerely,


Ties Marrufo RN
831-A University Street
Henldeberg, CA 95448
(574) 551-6156

September 9,2006

To Whom It May Concern:
Re: Letter of Recommendation
 whom I have hed tha priviledge of being his oharge murve for the lest seven montha at Ficaldsburg Dictrict Hospital Sabacute unil.
 has echibited tue leadarship in his job. I have come to rdy upon Mr. Fanoer to be my
 Very strenumas end emotional driting milieu, at we have mauly patient's who have suffered rerious heed truamas and arr in a moost volverable state of healith.

Mr. Factoer has thwat been willing to ascist the Regintured Narses and Licenced Vocrtional Nursess in a variaty of tueste, withio his noope of pruction be hay been accoontable, responsible, honest, ruastworthy med dependabie. Fils hmata chility to priontize his datties. and manage his time cos our unit has allowed for hirn to asssirt with training rew C.N.A employees, and aleo morring euployeen.
He is always willing to go that extra mile for the patienn's, their frmilias and staff. His wodk is inpeccuable, and be contimeds lo provide safte, and compasslonate arre to our petient's, and uphold a maner of professionalism is all he does.

Mr. Farmer coatioues to seek new ways to better our exvironteat mand continues to remain teachatle, fo that he has emrolled in the telemedry clastets offered here, 50 that he can expand his horvedge base.

I em saddened that we are losing such a valued member of our teann, here at Fiealdshurg District Hospital. I know Mr. Fammer will be succestiul whereeve he is cuployed and will be an aset to you and your company.

\footnotetext{
Sincery simf
Buitbarn Momstec, LVN
P.O. Box 5671

Santa Rosa, CA 95402-9671
(707) 758-3197
}

\title{
Tregri Haile RN \\ 2039 Bedtord street Sapts Roes, CA 95404, (707) 761-2996 \\ Empil: tueguihnilegcomcast.net
}

05/24/2007

To whom it may concent

\section*{Dear Sir or Madazi:}

1 worked alongelate with Mr. Steve Funser tor the pase 9 womhe it HDH, Healdaburg Dist, Houp., Hesiddurg CA as a Lead Nurre, I was the setior on-site edmitiutator at the fecility whan I was ons dety in addition to pioviding a derect patiene care. As axch J'm alwnys into contact with Mr. Farmer who is out telemetry technicien as well as our CNM.
 department's atfilin smoothy ahways working above and besond call of duly. As a CNA
 and respectifl to his peers. Steve is wry ensogetio ho alwiga nesumea his dutles with interest and vigor. He is ectually one of the best CNAs and Tele Techer I've ever worked with Steve is a great usset to any employer and will make a great addition.

Best regands,
I atn very truly yours



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\hline FERNANDEZ，MV & & & B & B & B & & & 8 & B & B & & & & & & 8 & B & B & & & & & 8 & B & & & & 8 \\
\hline BRECIK，SHANNO & & B & B & & & & 8 & B & B & E & & & & & & & & & B & B & B & B & & & & & E & B \\
\hline STEVENS，DANIE & F & P & P & & & & & & B & & B & & & B & 8 & B & & B & & & & & B & B & B & ！ & & \\
\hline PAGAN，SANDRA & B & B & & B & & & & & & & B & B & & 8 & B & B & B & & & & & & 8 & & & ！ & B & 8 \\
\hline GOODHART，KAR & 9 & B & & & & B & & 8 & & & B & 8 & & e & & 8 & \(B\) & 8 & & & & & & & B & B & B & \\
\hline BROCK，JESSICA & \(!\) & & ！ & & B & B & B & B & & & & \(!\) & B & B & 8 & & & & & B & B & B & B & & ！ & B & \(!\) & \\
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\hline PER DIEM RN＇S & & & & & & & & & & & & & & & & & & & & & & & & & & & & \\
\hline JONES，KAREN & & & & & & & & & & & & & & & & & & & & & & & & & & & & \\
\hline HIGHTOWER．TO & & & & & & & & B & B & & & & & & & & & & & & & \(B\) & & & & & & \\
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\hline UCITECH 7P & & & & & & & & & & & & & & & & & & & & & & & & & & & & \\
\hline MONTGOMERY， 3 & & B & B & 8 & ！ & & & & B & B & B & & & & ！ & B & 8 & B & & & & & & & B & B & 8 & ！ \\
\hline PHILEIN，SHAWN & & & & & B & 回 & B & & & & & 8 & B & B & & & & & B & B & B & 8 & E & B & & & & \\
\hline GOMEZ，J．J． & B & 8 & B & \(!\) & & & & B & B & \(B\) & \(!\) & & & & B & 8 & B & \(!\) & & & & \(!\) & \(B\) & B & B & & & \\
\hline OEGRE，AVA & 8 & & & & & 8 & B & B & & & & & 8 & B & & & & & E & \(B\) & 百 & B & & & & \(B\) & & B \\
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\hline 7P－7A RN＇S & 5 & 5 & 5 & 5 & 5 & 5 & 5 & 6 & 6 & 6 & 6 & 6 & 6 & 6 & 5 & 5 & 5 & 5 & 6 & 6 & 6 & 6 & 5 & 6 & 6 & 6 & 6 & 6 \\
\hline 7P－7A UCITECH & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 2 & 3 & 2 & 2 & 2 & 2 & 1 & 2 \\
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\(C=\) Charge Rn \(P^{P} \rightarrow A\)
\(>=\left(112\right.\) chorge Rn \(7^{A}-A^{A}\)
\(B=7 P-7 A\)

\section*{COWFDENTAL}

Donna Lamonte/Mike McDonald Nevada Power Company Corporate Investigations
Office phone (702) 227-2359
FAX (702) 227-2008

In Response, Please Reply To:

Inv. Ruth Gorski
Serual Assault Section
(702) 828-5676, FAX 828-3073

Greetings;
Our Department is conducting a criminal investigation involving the below listed person(s) anid/ or address(es). Pursuant to NRS 704.201, we are requesting that you conduct a search of your customer records and provide us with the respective name of the customer and address, as applicable.

We request this inquiry be handled in a confidential manner and thank you for your cooperation.

Name: FARMER, STEVEN DALE
DOB: \(\quad 03-16-1952\)
Address: UNKNOWN -REQUESTED
Employment: PLEASE ADVSE IF KNOWN

\section*{Phonet: UNKNOWN- PLEASE PROYIDE ANY YOU HAVE LISTED.}

Cut-In Date:
REQUESTED Cur-Out Date:
REQUESTED

NOTE: We are specifically looking for verification of \(A D D R E S S\), as well as contact phone numbers (home and/or employment).

Sincerely,

By:

\footnotetext{
Please include complete address such as building numiter, apartment number, street, court, avenue, trail, road, etc....If possible, check last known address in the other section.
}

\title{
THE LAS VEGAS METROPOLITAN POLICE DEPARTMENT \\ SENDS GREETINGS TO: \\ AMERICAN NURSING SERVICE ATTN: JOHNETTE SPELLMAN/HR DIR. \\ (INSERT NAME OF PUELIC UTIIITY) \\ CUSTODIAN OF RECORDS
}

FAX \#:
504-210-2975
YOU ARE HEREBY COMMANDED, pursuant to the authority granted a law enforcemen agency in Nevada Revised Statute 704.201, that all and singular business excuses being sel aside, you produce:

A true and accurate copy of your customer records, including the name(s), address(es), social security number(s) and l. date(s) of birth of the person(s) listed as the customer(s) tor the following service address andor phone number: SUBJECT: FARMER, STEVEN DALE, DOB/03-16-1952,
II. All records in your customer file pertaining to the following person(s):

The records shall be delivered on or before the \(1.6^{\text {TH }}\) day of MAY 20 08 , to the Las Vegas Iropolitan Police Department via tax \#: 702-828-3073 to the attention of Det. US R. GORSKI (For SGT. PENCE) Check here it EMERGENCY REQUEST and is needed as soon as possible.

This subpoena is made to further a criminallcivil investigation being conducted by the Las Vegas Metropolitan Police Department. If you have any questions about this subpoena, contact: Det.
\[
\text { SGT. PENCE } \quad \text { al: } \quad \text { 702-828-3421 }
\]

Failure to produce these records may subject you to liability for contempl and for cosis and fees expended in the enforcement of this subpoena. You are requested not to disclose the existence of this subpoena. Any such disclosure coukd obsinuct and impede the investigation being conducled and thereby interfere with the enforcement of the law.
\[
\text { DATED this } 15^{\text {Th }} \text { day of MAY } \quad 2008
\]


\footnotetext{

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CIRCUMSTANCES OF ARREST
On May \(16^{\text {ih }}, 2008\), Detective M, Saunders P\# 6076 and I, Sergeant M. Pence P \(\# 4950\) were contacted by patrol officers reference LVMPD Event \#080516-1021. According to details provided, a patient at Centennial Hills Hospital was reporting that she had been sexually assaulted by a male nurse who moved her from the Emergency Room to her assigned room at the hospital. Details also stated that the assault occurred in room 725. Detectives were advised that the LVMPD was contacted by the victim's husband identified as Scott Cagnina DOB 07/03/1968 who was still wilh the victim at the hospital.

Upon arrival, the victim was identified as Roxanne Cagnina DOB 07/06/1973. A laped interview was conducted with R. Cagnina. The following is a summary of that interview and is not verbatim. Cagnina stated she had been transported to the Emergency Room at Centennial Hills Hospilal due to a seizure. While in the Emergency Room, Cagnina was given Phenyl barbital and Ativan. Sometime around what Cagnina believed was 0300 hours, she was admitted to the hospital and was taken by Farmer (DOB: \(3 / 16 / 52\) ) up to her assigned room ( \(\mathbf{\# 7 2 5}\) ) on the seventh floor. While in the elevator alone, Cagnina realized that Farmer put his hands under her blankets and was rubbing the top of her thigh and legs, moving his hands closer to her groin area. When Cagnina told Farmer to slop all he said was that he was just trying lo relax her so she could go to sleep. Cagnina slated she then propped up her knees to get him to stop or to prevent him from touching her legs. When the elevator doors opened, Farmer slopped touching her and pushed her gurney in to room 725.

When they got in to the room, Farmer closed the door and moved Cagnina from the gurney to her bed. Cagnina said that Farmer began to rub her shoulders and when she told him "that's not necessary", Farmet said he was just trying to relax her and that she should be sleeping. Cagnina became feariful as Farmer again began to rub on her legs and thighs underneath her blanket, sheet and gown. Farmer told Cagnina that everything was okay, and that what he was doing to relax her was considered "procedure". Farmer began to rub her on her face and told her how beautiful she was. Farmer then put his hands underneath Cagnina's gown and began touching/fondling both of her breasts with his hands (Open \(\&\) Gross Lewdness 1 counl). Cagnina again told him to stop but Farmer continued to touch and feel on her breasts. Farmer then slid his hands under her gown and used his fingers to penetrate her vagina. (Sexual,Assaull 1 Count) Cagnina immediately told him to "stop", "Please stop", but Farmer told her to "just relax" and "this will help you go to sleep". Cagnina stated she then froze and did not know what to do. She staled Farmer was using both hands while penetrating her vagina multiple times (Sexual Assault 1 Count). Farmer told her to put her arms over her head and Cagnina complied because she was so afraid and scared. Farmer then went back to teeling and touching her breasts with his hands (Open \& Gross Lewdness 1 count). Farmer again began to penetrate her vagina with his fingers (Sexual Assault 1 Counl). Cagnina slated that she had her cellular phone under her pillow and while Farmer was louching her she attempled to use the camera to take pictures of what Farmer was doing. When she could hear the camera making noises, she stopped after a few attempts fearing that Farmer would hear the camera clicking. Farmer then moved the blankets aside and began to perform oral sex on Cagnina. Cagnina stated
\begin{tabular}{|c|c|c|c|}
\hline ARRESTING OFFICER(\$) & P\# & APPROVED BY & CONNECTING RPTS. (Type or Event Number) \\
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\hline C. JEX & 5597 & & \\
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\end{tabular}
that Farmer used his mouth and tongue on her vagina and she could feel his tongue inside of her (Sexual Assault 1 Count). During the entire assaut, Farmer kept telling her that he was doing this to help her to relax. Farmer told Cagnina that he "had thick fingers" and that he wanled to make her "cum", because it would make her relax and go to sleep. Before leaving, Farmer told Cagnina that he would come back to check on her around 0700 to make sure she was okay. Cagnina stated that she fell asleep because of the medication she was on and woke up at approximately 0630, called her husband Scott Cagnina, vaguely told him what occurred and asked him to come to the hospital. Scott Cagnina told her to contact the Head Nurse and report the incident.

According to Cagnina, sometime around 0700, Farmer walked into her room while another nurse was there. When the other nurse asked Farmer why he was in the room, Farmer toid the nurse that Cagnina was his patient in the Emergency Room and he was just checking on her. Before Farmer left, Cagnina stated that he gave her a threatening look and then walked out. She took his look as a threat to not say anything about what he had done to her. Cagnina then asked to talk to the Head Nurse to report whal had happened. Cagnina also slated that she attempted to call 9-1-1, but hung up as the phone call connected because she was scared and didn't know what to say.

Cagnina gave permission for Detective Saunders to review her cell phone pitures and recent calls. Her cell phone showed two pictures being taken at approximately 0447 and 0450 hours on 05/16/07. Both pictures showed only a black screen. There was a \(9-1-1\) call showing at approximately 0754 hours on 05/16/08.

Detective Saunders made telephone contact with Nurse Goodall, who was working with Farmer in the Emergency Room and attending to Cagnina. Goodall said it seemed like Farmer was gone "quite a long time" when he transported Cagnina from the Emergency Room to room 725. Upon his feturn, Farmer told Goodall he had to help transfer Cagning to her bed because of her condition and then he had to look for an IV sland.

A Sexual Assault examination was conducted by SANE Nurse L. Ebben. According to Ebbert, Cagnina had three (3) crescent shape tearsflacerations between the 5-7 o'clock position of her vagina. These tears are consistent with the assaull as described by Cagnina.

A photo line up was conducted with Cagnina. During this photo line-up, Cagnina positively idenlified Farmer as the nurse who sexually assaulled her. This was witnessed by both myself and Delective Saunders.

Cagnina described that during the incident, Farmer penetrated her vagina at least wite with his fingers and and once with his mouth and tongue. Cagnina also described that Farmer touched and fondled her breasts at least twice and legs at least once during the 15 minutes that the assault lasted.

During the follow up investigation, detectives obtained Farmer's cell phone number. A Pen Register was obtained and signed by the Honorable Judge Alan Ear. The cell phone signal was located at 1841 Leonard. A knock and talk to conducted at that location and the homeowner, Raymond McCormick DOB: 6/08/37, answered the door. McCormick stated he rents a room to Farmer and allowed detectives inside his residence and directed them to Farmer's room. Conlaci was made with Farmer, who was sleeping in his bed. Farmer was arrested and transported to the delective bureau, located at 4750 W . Oakey. An interview was attempted with Farmer, who invoked his right to an attorney.

Due to the fact that Farmer did subject Cagnina to a sexual penetration with his hands, fingers, mouth and tongue, at least 3 limes, against her will and without her consent, he was arrested for Sexual Assault (3 cts). Due to the fact Farmer rubbed and touched Cagnina's breasts and legs at least 3 times, against her will and without her consent, he was arrested for Open and Gross Lewdness ( 3 cts ).


CIREUMSTANCES OF ARREST

On 05/28/08, the viclim identified as Frances Rose DOB 04/08/1964 contacted the LVMPD to identify herself as a person who had been victimized by the suspect Farmer. An interview with Rose was scheduled and completed to gather the information as described by Rose on 05/31/08.
During the interview said the following. That in December 2007, while she was a patient at Neal-Rawson Mental Health Facility she met the suspect Farmer who was employee of the facility. Sometime between the dates of December 25 th and \(27^{\text {th }}, 2007\), she had formed a friendship with him and that they woutd talk at night. One evening while talking, she reached to take a cup of coffee from Farmer. Farmer then grabbed her hand instead and placed it directly on top of his penis on the outside of his clothing. According to Rose, Farmer stated to her," this is what you do to me", as he let go of her hand. Rose immediately pulled away and quickly left the area upsel by what had just occurred. Rose stated that she could feel that Farmer had an erect penis under his clothing when he used her hand to touch himseff. (Open \& Gross Lewdness 1 Count) Rose stated that she did not ieport it because she felt that no one would believe her as she was in a mental health facility. Rose also said that she believed and feared that Farmer would deny the incident and try to get her in trouble or even extend how long she would have to stay, as she was due to be released within a few days.
Rose then saw the news that Farmer had been arrested for other sexual related crimes. It was then she decided to contact the LVMPD.

Rose also stated that what she believed Farmer meant by his comment " his is what you do to me" was that he was inferring that she turns him on in a sexual way, She also said that the way Farmer touched her and made her touch him caused her to feel dirty and scared.

Due to the facts and circumstance, Farmer was then re-booked in to the Clark County Detention Center for 1 count of Open And Gross Lewdness on Rose.
\begin{tabular}{|c|c|c|c|}
\hline ARRESTING OFFICER(3) & P\# & APPROVED EY & CONNECTING RPTS, 〔Type or Event Number) \\
\hline M. Saunders & 6076 & M, Pence P\% 4950 & \\
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CIRCUMSTANCES OF ARREST
That this detective was contacted by the victim identified as Ledahlia Spurlock DOB 01/04/73 who stated that she believes that she had been victimized by the suspect identified as Steven D. Farmer. On 05/31/08, a taped interview was conducted wilh Spurlock who stated the following.

Spurlock staled that on 04/27/08 she was a patient in the Emergency Room at Centennial Hills Hospital. While she was awaiting to be transierred to another facility, she had two of her aunts with her in the room identified as Emestine Smith DOB 03/25/36 and Ada Dotson DOB 07/23/37. At that time, a male nurse came who verbally identified himself as to them Steven Farmer. Spurlock went on to describe the suspect as a white male, 40's to 50's, white hair, and a neatly trimmed white beard and mustache. As Farmer entered, he approached the boltorn edge of the bed as both Smith and Dotson were already standing on either side of Spuriock's bed. According to Spurlock, Farmer grabbed her feet as he stood there talking and began to pull them towards him, specifically his groin area. As she attempted to pull her feet away, Farmer hald on tighter and continued to push his groin against the bottom of her feet as her pulled her feet towards him. Spuriock stated that this went on for several moments and that it made her very uncomiontable and scared. Spurlock attempted to pull her feet away from Farmer several times, but he continued to hold on to and pull her feel back to him and continued to push/pull her feet against his groin / penis. (Open \& Gross Lewdness) She said that his behavior and actions was also witnessed by both of her aunis. After Farmer stopped and left they all three began to talk about what had just occurred. Spurlack then asked both Smith and Dotson to stay with her until she was transferred to the other facility as she was scared of what Farmer may do to her if she was left alone. She was now very concerned as Farmer was her nurse the previous evening when she was admitted. Spuriock said that she was on medications thal made her sleep, and was now feariulthat he may have done something else to her that she was unaware of. Spurlock said that she was unsure whether or not Farmer had an erection while he rubbed her feet against his penis/ groin area, but she fell his attions where sexual in nature for his gratification.

On 06/05/08, I contacted and conducted a taped interview Emestine Smith at her residence. Ernestine said that on the evening of \(04 / 27 / 08\) while she was at Centennial Hills Hospital with her sister Dotson visiting her niece Spurlock who was in the E.R. waiting to be transferred to another facility. While they were all talking a white, male adult nurse came in Spurlock's room and identifiled himself as Steven Farmer. She gave the same description of the suspect as Spurlock.
While Farmer began talking to them, he approached the bottom of Spurfock's bed, and grabbed a hold of her feet and began pulling them towards him. This was inmediately noticeable to Smith who conlinued to watch Farmer's actions with her niece Spurlock. Smith stated that as she watched, she could see Spurlock was visibly upset and trying to pull her feet away from Farmer and it appeared that he was rubbing her feet against his groin / penis area. Smith said that she could see that Farmer would physically pull Spurlock's feet back to
\begin{tabular}{|c|c|c|c|}
\hline ARRESTING OFFICER(S) & P\# & APPROVED BY & CONNECTING RPTS. (Type of Event Number) \\
\hline M. Saunders & 6076 & M. Pence P\# 4950 & \\
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him when she was able to briefly pull them away from Farmer. After several minutes, Farmer let go of Spurlock's feet and left the room. Smith stated that she believes Farmer didn't think that she, Dotson, or aven Spurlack realized what he was doing, but that they all did see and observe the same actions of Farmer. Smith said that she was disgusted by Farmers actions. After Farmer left, Spurlock asked both Smith and Dotson to stay with her because she was scared of Farmer and what he may do if he came back to her room.

On 06/05/08, I aiso contacted and conducted a taped interview with Ada Dotson at her residence. Dotson provided the same date, times and location as Smith did. Dotson also gave a very similar description of the incident as described by both Spurlock and Smith. Dotson stated it was very obvious to her of whal Farmer was doing and that she could clearly see. Farmer rubbing Spurlocks feet against his groin / penis area.(See transcripts for further)

Due to the facts and circumstances, Farmerwas then re-booked into CCDC for another count of Open \& Gross Lewdness for the rubbing of Spurlock's feel against his groin / penis for his sexual gratification as described by the victim Spurlock and both witnesses Smith and Dotson.


CIRCUASTANCES OF ARREST
Detectives were contacted by the PR Lehan who stated that he believed that his girlfriend Shank was also victimized by Farmer while she was a patient at Centernial Hills Hospital back on or about 05/16/08. Both Lehan and Shank gave taped statements providing the following information.

Shank stated that Farmer was transporting her on a gurney from the ER to her assigned room during the evening hours of 05/15/08. While in the elevator alone with Farmer, he made the comment that we should remove the electrodes because they will hurt more later if you wait to remove them. Without Shank consenting, Farmer open the front of her gown all the way down to her waistline exposing her bare breasts and immediately began to remove 2 electrodes, one at the top of each breast. After Farmer removed the first two electrodes, Strank realized that Farmer was now only staring at her exposed breasts and covered herself back up preventing Farmer from touching herfurther. Shank staled that she has had electrodes placed on and removed on her before at this same hospital and has never had a male nurse or any nurse attempt to remove the electrodes without another nurse or person present. She stated that in the past she herself removed the electrodes after being told to do so by her assigned nurse. Farmers actions made Shank very uncomfortable and the believes thal Farmer exposed and touched her more for his personal pleasure than of any medical necessity. (Open \& Gross 1 count)

Lehan stated that earlier in the evening on or about 05/15/OB, he escoried Shank back to her bed in the ER. As she laid down, she immediately went back to sleep due to the medication that she was given. Affer assisting Shank on to the bed, Farmer entered the room and said that he would re-adjust the leads from the EKG machine because they were tangled in the sheets and Shanks' gown. Lehan who is familiar with EKG machines and patient medical practices, watched as Farmer opened Shanks gown exposing her bare breasts and body down to her waistline. Farmer then began to disconnect the leads attached to the electrodes and not from the machine. Lehan believing that this was improper for a mate nurse to do, told Farmer to stop and Lehan covered up Shank with her gown. Lehan then re-attached the leads to the machine and not from the electrode pads as Farmer was trying to do. Lehan slated that he is a Radlological Technologist, and it is very common practice where a female patient is concerned to keep them covered as much as possible and untangle the leads from the machine itself, not from the electrodes that will expose the patient. When Lehan told Farmer that he will do it and covered up Shank, Farmer immediately left and did not returned to the room while Lehan was still there. Lehan believes that Farmer exposed Shank on purpose in order to see Shanks breasts. (Indecent /Obscene Exposure)

Photo line-ups were conducted separately with both Shank and Lehan. Both immediately and positively identified Steven Farmer as the suspect who committed these crimes against Shank.
\begin{tabular}{|c|c|c|c|}
\hline ARRESTING OFFICER(S) & P\# & APPROVED BY & CONNECTING RPTS. (Type or Event Number) \\
\cline { 1 - 2 } M. Saunders & 6076 & M. Pence P\# 4950 & \\
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Farmer is the subject of several ongoing investigations. The facts involved as described by both Shank and Lehan were not known to the public, and are very similar to Farmers method of operandi involved in other crimes now being investigated.

Due to the facts and circumstances, Farmer was re-booked in to the CCDC for one coumt of Open 8 Gross lewdness for the exposure and touching of Shank's breasts while in the elevator alone with her, and one count of Indecent/Obscene exposure for purposefully exposing Shank's breasts as she lay sleeping while in the presence of Lehan.

\title{
LVMPD DETENTION SERVICES DIVISION BOOKING VOUCHER
}

\section*{1D\# 2679879}
\(\qquad\)

NAME: FARMER, STEVEN DALE
DOB: 03/16/1952
SEX: M RACE: W AGE: 56 HGT: \(5{ }^{\prime} 10^{\prime \prime}\) WGT: 200 HAIR: GRY EYES: BLU
POB: MO
AKA: FARMER, STEVEN D
RES ADDR: 1841 LEONARD LV, NV 89108
\(\qquad\)

ARREST: 05/\{6/2008 2215 OFFICER: JEX, CRAIG C. P\#: 5597
BOOKING: 05/17/2008 0012 AGENCY: LAS VEGAS METRO POLICE
\begin{tabular}{|c|c|c|c|c|}
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& \text { ENTERED } \\
& \text { SCOPE } \\
& \text { HiPTRIL }
\end{aligned}
\]} \\
\hline \multicolumn{4}{|l|}{COURT: JUSTICE COURT LV CASE\#.} & \\
\hline \multirow[t]{4}{*}{1} & C05023 & SEXUAL ASSAULT & NRS: 200.366 & \\
\hline & & PCNN: 25053152 PCN SEQ: 00 & & \\
\hline & & TYPE: PROBABLE CAUSE & BAIL STAT: STANDARD BAIL & \\
\hline & & EVENT: 0805161021 AMT: & 10000.00 CITMARR: & \\
\hline \multirow[t]{4}{*}{2} & C05023 & SEXUAL ASSAULT & NRS: 200.366 & \\
\hline & & PCN\%: 25053152 PCN SEQ: 002 & & \\
\hline & & TYPE: PROBABLE CAUSE B & BAIL STAT: STANDARD BAIL & \\
\hline & & EVENT: 0805161021 AMT: & 10000.DO CITNARR: & \\
\hline \multirow[t]{4}{*}{3} & C05023 & SEXUAL ASSAULT & NRS: 200.366 & \\
\hline & & PCN\%: 25053152 PCN SEQ: 003 & & \\
\hline & & TYPE: PROBABLECAUSE B & BAIL STAT: STANDARED BAIL & \\
\hline & & EVENT: 0805161021 AMT: & 10000.00 CITMNARR: & \\
\hline \multirow[t]{4}{*}{4} & C05108 & OPEN AND GROSS LEWDNESS & NRS: 201.2101A & \\
\hline & & PCN\%: 25053152 PCN SEQ: 00 & & \\
\hline & & TVPE: PROBABLE CAUSE & BAIL STAT: STANDARD BAIL & \\
\hline & & EVENT: 0805161021 AMT: & 1000.00 CITANARR: & \\
\hline \multirow[t]{4}{*}{5} & C05108 & OPEN AND GROSS LEWDNESS & NRS: 201.2101A & \\
\hline & & PCNH: 25053152 PCN SEQ: 005 & & \\
\hline & & TYPE: PROBABLECAUSE BA & BAIL STAT: STANDARD BAlL & \\
\hline & & EVENT: 0805161021 AMT: & 1000.00 CITMARR: & \\
\hline \multirow[t]{4}{*}{6} & C05108 & OPEN AND GROSS LEWONESS & NRS: 201.2101A & \\
\hline & & PCN\#: 25053152 PCN SEO: 006 & & \\
\hline & & TYPE: PROBABLE CAUSE BAI & BAIL STAT: STANDARD BAIL & \\
\hline & & EVENT: 0805161021 AMT: & 1000.00 CITANARR: & \\
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D13104S

LIMMPD OETENTION SERVICES DIVISION BOOKING VOUCHER

1D\# 2679879
\(\qquad\)

NAME: FARMER, STEVEN DALE
DOB: 03/16/1952 SEX: M RACE: W AGE: 56 HGT: 5'10" WGT: 200 HAIR: WHI EYES: BLU POE: MO

AKA: FARMER, STEVEN D
RES ADDR: 1841 LEONARD LV, NV 89108

ARREST: 07/1212000 0720 OFFICER: SAUNDERS, MICHAEL R P : 6076
BOOKING: 07/12/2008 0805 AGENCY: LAS VEGAS METRO POLICE
CHG CHARGE LITERAL
COURT: JUSTICE COURT LV CASE当: 0BF13671X
1 CO5023 SEXUAL ASSAULT
NRS: 200.366
PCN\#: 27179313 PCN SEQ: 001
TYPE: ARREST WARRANT BAIL STAT: NON-STANDARD GAIL EVENT: 0805161021 AMT: 10000.00 CITNARR:
2 COg8to OPEN AND GROSS LEWDNESS
NRS: 201.21018
PCNH: 27179313 PCN SEQ: 005
TYPE: ARREST WARRANT BAIL STAT: NON-STANDARD EAIL EVENT: 0805161021 ART: 1000.00 CITMARR:

3 CO9810 OPEN AND GROSS LEWDNESS
NRS: 201.21018
PCN\#: 27179313 PCN SEQ: 004 TYPE: ARREST WARRANT BALL STAT: NON-STANDARD BAIL EVENT: 0805161021 AMT: 1000.00 CITMNARR:

4 C09810 OPEN AND GROSS LEWDNESS NRS: 201.2101B PCN湖: 27179313 PCN SEC: 002 TYPE: ARREST WARRANT BAIL STAT: NON-STANDARO EAIL EVENT: 0805161021 AMT: \(1000.00 \quad\) CIT/WARR:
5 C09810 OPEN AND GROSS LEWDNESS NRS: 201.2101B
PCN\#: 27179313 PCN SEQ: 003
TYPE: ARREST WARRANT BAIL STAT: NON-STANDARD BAIL EVENT: 0805164021 ANT: 1000.00 CITNVARR:

6 CO98t0 OPEN AND GROSS LEWDNESS NRS: 201.2101B
PCN: 27179313 PCN SEQ: 008
TYPE: ARREST WARRANT BAIL STAT: NON-STANDARD BAIL EVENT: 0805161021 AMT: 1000.00 CITMNARR:

3 CO5109 INDECENT OR OBSCENE EXPOSURE PCNH: 27179313 PCN SEQ: 007 TYPE: ARREST WARRANT BAIL STAT: NON-STANDARD BAIL EVENT: 0805161021 ANT: 1000.00 CIThNARR:


C8985R


\section*{STATE OF NEVADA}

The State of Nevada，to any Peace Officer in the County of Clark．Proof having been made before me by Def．Coy By oral statement given under oath，incorporated herein by reference，that there is probable cause to believe that certain evidence，to wit：
1．BuccAl Sw．A日多




and as I am satisfied that there is probable cause to believe that said evidence is located as set forth above and based upon the statement of \(\qquad\) there are sufficient grounds for the issuance of the Search Warrant．

You are hereby commanded to search said premistsivehicle for said property，serving this warrant（Al any hour of the day or night）（Between 7 am and 7 pm ）and if the property is there to seize it and leave a writhen inventory and make a rectum before me within 10 （ten）days．

Dated this 16 day of MAy，， 50 at 1330 o＇clock \(\rho \mathrm{m}\) ．
（Print Judge＇s Name）Wrtitith \(V \supset Y\)
Signed by Deteopive Coy 7a14 acting upon oral authorization of Judge \(\sqrt{ } \supset Y\) Witnessed by

\(\qquad\) －

ENDORSED this \(\qquad\) day of \(\qquad\) ， \(\qquad\) ．

\section*{JUDGE}
\[
243516-13 d 1
\]

RETURN
Page \(\qquad\) 1 of \(\qquad\)
(AMa be mace within) 10 dope of inmuanca of Warrant

The Search and Setzure Warrant authorizing a search and seizure at the following described locations):
\(\qquad\)
\(\qquad\)
\(\qquad\)

\(\qquad\)

The following is an inventory of property taken pursuant to the warrant:
1. Buccal swab
2. Finger Swabs




\section*{CONFIDENTAL}

Las Vegas Metro Prosecutor's Report Oftense 8 al C


COFFDEVI
Las Vegas Metro Prosecutor's Report Offense C of C

\begin{tabular}{|c|c|c|}
\hline TRUE MAME: & DATE OF ARREST: & Time of arRest: \\
STEVEN DALE FARMER & \(5 / 16 / 08\) & 2215 \\
\hline
\end{tabular}

OTHER CHARGES RECOMMENDED FOR CONSIDERATION:

THE UNDERSIGNED MAKES THE FOLLOWING DECLARATIONS SUBJECT TO THE PENALTY FOR PERJURY AND SAYS: That I am a peace officer with the Las Vegas Metropolitan Police Deparment, Clark County, Nevada, being so employed for a period of 13 years.

That I learned the following facts and circumstances which lead me to believe that STEVEN DALE FARMER committed (or was committing) the offerse of Sexual Assaull ( 3 cts ) and Open \& Gross Lewdness ( 3 cts ) at the location of 6900 N. Durango \#725, Las Vegas, NV. 89149.

That the offense occurred at approximately 0445 hours on the 161h day of May, 2008.
On May 16 \({ }^{\text {th }}, 2008\), Detective M. Saunders P\# 6076 and I, Sergeant M. Pence P\# 4950 were contacted by patrol officers reference LVMPD Event\#080516-1021. According to delails provided, a patient at Centennial Hills Hospital was reporting that she had been sexually assaulted by a male nurse who moved her from the Emergency Room to her assigned room at the hospital. Details aiso stated that the assault occurred in room 725 . Detectives were advised that the LVMPD was conlacted by the victim's husband identified as Scot Cagnina DOB 07/03/1968 who was still with the victim at the hospital.

Upon arrival, the victim was identified as Roxanne Cagnina DOB 07/06/1973. A taped interview was conducted with R. Cagnina. The following is a summary of that interview and is not verbatim. Cagnina stated she had been transported to the Emergency Room at Centennial Hills Hospital due to a seizure. While in the Emergency Room, Cagnina was given Phenyl barbital and Alivan. Somelime around what Cagnina believed was 0300 hours, she was admitted to the hospital and was laken by Farmer (DOB: \(3 / 16 / 52\) ) up to her assigned room (\#725) on the seventh floor. While in the elevator alone, Cagnina realized that Farmer put his hands under her blankets and was rubbing the top of her thigh and legs, moving his hands closer to her groin area. When Cagnina told Farmer to stop all he said was that he was just trying to relax her so she could go to sleep. Cagnina stated she then propped up her knees to get him to stop or to prevent him from touching her legs. When the elevator doors opened, Farmer stopped touching her and pushed her gurney in to room 725.

When they gol in to the room, Farmer closed the door and moved Cagnina from the gumey to her bed. Cagnina said that Farmer began to rub her shoulders and when she told him "that's not necessary", Farmer said he was just trying to relax her and that she should be sleeping. Cagnina became fearful as Farmer again began to rub on her legs and thighs undernealh her blanket, sheet and gown. Farmer told Cagnina that everything was okay, and that whal he was doing to relax her was considered "procedure". Farmer began to rub her on her face and told her how beautiful she was. Farmer then put his hands underneath Cagnina's gown and began touchingfondling both of

\section*{LAS VEGAS METROPOLITAN POLICE DEPARTMENT DECLARATION OF ARREST CONTINUATION} Page 2

1D\#:

\author{
EVENT: 0000 16 -1021
}
her breasts with his hands (Open \& Gross Lewdness 1 count). Cagnina again told him to stop but Farmer continued to touch and feel on her breasts. Farmer then slid his hands under her gown and used his fingers to penetrate her vagina. (Sexual,Assaull 1 Count) Cagnina immediately told him to "stop", "Please stop", but Farmer told her to "just relax" and "this will help you go to sleep". Cagnina stated she then froze and did not know what to do. She stated Farmer was using both hands while penetrating her vagina multiple times (Sexual Assauit 1 Count). Farmer told her to put her arms over her head and Cagnina complied because she was \(s 0\) afraid and scared. Farmer then went back to feeling and touching her breasts with his hands (Open \& Gross Lewdness 1 count). Farmer again began to penetrate her vagina with his fingers (Sexual Assault 1 Count). Cagnina stated that she had her cellular phone under her pillow and while Farmer was touching her she attempted to use the camera to take pictures of what Farmer was doing. When she could hear the camera making noises, she stopped after a lew attempts fearing that Farmer would hear the camera clicking. Farmer then moved the blankets aside and began to perform oral sex on Cagnina. Cagnina stated that Farmer used his mouth and tongue on her vagina and she could feel his tongue inside of her (Sexual Assault 1 Count). During the entire assault, Farmer kept telling her that he was doing this to help her to relax. Farmer totd Cagnina that he "had thick fingers" and that he wanted to make her "cum", because it would make her relax and go to sleep. Before leaving, Farmer told Cagnina that he would come back to check on her around 0700 to make sure she was okay. Cagnina stated that she fell asleep because of the medication she was on and woke up at approximately 0630, called her husband Scott Cagnina, vaguety told him what occurred and asked him to come to the hospital. Scott Cagnina told her to contact the Head Nurse and report the incident.

According to Cagnina, sometime around 0700, Farmer walked into her room while another nurse was there. When the other nurse asked Farmer why he was in the room, Farmer told the nurse that Cagnina was his patient in the Emergency Room and he was just checking on her. Before Farmer left, Cagnina stated that he gave her a threatening look and then walked out. She took his look as a threat to not say anything about what he had done to her. Cagnina then asked to talk to the Head Nurse to report what had happened. Cagnina also stated that she attempted to call \(9-1\) 1. but hung up as the phone call connected because she was scared and didn't know what to say.

Cagnina gave permission for Detective Saunders to review her cell phone pictures and recent calls. Her cell phone showed two pictures being taken at approximately 0447 and 0450 hours on \(05 / 16 / 07\). Both pictures showed only a black screen. There was a \(9-1-1\) call showing at approximately 0754 hours on 05/16/08.

Detective Saunders made telephone contact with Nurse Goodall, who was working with Farmer in the Emergency Room and attending to Cagnina. Goodall said it seemed like Farmer was gone "quite a long time" when he transported Cagnina from the Emergency Room to room 725. Upon his return, Farmer told Goodall he had to help transfer Cagnina to her bed because of her condition and then he had to look for an IV stand.

A Sexual Assaull examination was conducted by SANE Nurse L. Ebbert. According to Ebbert, Cagnina had three (3) crescent shape tearsflacerations between the 5-7 o'clock position of her vagina. These tears are consistent with the assault as described by Cagnina.

10\#: \(\qquad\) EVENT: 080516-1021

A photo line up was conducted with Cagnina. During this photo line-up. Cagnina positively identified Farmer as the nurse who sexually assaulted her. This was witnessed by both myself and Detective Saunders.

Cagnina described that during the incident, Farmer penetrated her vagina at least twice with his fingers and and once with his mouth and tongue. Cagnina also described that Farmer touched and fondled her breasts at least twice and legs al least once during the 15 minutes that the assault lasted.

During the follow up investigation, detectives oblained Farmer's cell phone number. A Pen Register was obtained and signed by the Honorable Judge Alan Earl. The cell phone signal was located at 1841 Leonard. A knock and talk to conducted at that location and the homeowner, Raymond McCormick DOB: 6/08/37, answered the doof. McCormick stated he rents a room to Farmer and allowed detectives inside his residence and directed them to Farmer's room. Contact was made with Farmer, who was sleeping in his bed. Farmer was arrested and transported to the detective bureau, located at 4750 W . Oakey. An interview was attempted with Farmer, who invoked his night to an attomey.

Due to the fact that Farmer did subject Cagnina to a sexual penetration with his hands, fingers, mouth and tongue, at least 3 times, against her will and without her consent, he was arrested for Sexual Assault ( 3 cts ). Due to the fact Farmer rubbed and touched Cagnina's breasts and legs at least 3 times, against her will and without her consent, he was arrested for Open and Gross Lewdness (3 cts).

Wherefore, Deciarant prays that a finding be made by a magistrate that probable cause exists to hold said person for preliminary hearing (if charges are a felony or gross misdemeanor) or for trial (if charges are misdemeanor).

Declarant


\section*{CONFDENTILKL}

Operator this is Dee. C. Sex, P45597. I will be conducting one interview reference event \(\# 080516^{-1021}\) The location of the interview is 4750 w. oAken Dale
The person being interviewed is STEVEN TAM MES DOB \(3.16-52\)
Address 1841 lEONARD LVNJ 89108 Phone \# \(707-332,5894\)
Also Present is Der SGT. M. PENCE 4950
Today's Date \(5-16-08\) Start time 2205 End Time 2209

\section*{INVOKES MIRANDA \\ AO Questions}
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\section*{PACKAGE 8177-1}

ITEM \#1 - Two (2) finger swabs - right hand.
ITEM \#2 - Two (2) finger swabs - left hand.
ITEM \#3 - Fingernail scrapings - right hand.
ITEM \$4 - Fingemail scrapings - left hand.

\section*{PACKAGE 8177-2}

ITEM \#5 - One (1) buccal swab kit.
From the right hand of Steven Farmer (DOB 3-16-52).
From the left hand of Steven Farmer (DOB 3-16-52).
From the right hand of Steven Farmer (DOB 3-16-52).
From the left hand of Steven Farmer (DOB 3-16-52).

From Steven Farmer (DOB 3-16-52).


\section*{FORENSIC LABORATORY EXAMINATION REQUEST} CHEMISTRY AND BIOIDNA ANALYSIS


Evdenca/Siandards Submitted:
Buccal Swab(s) forn (names): Steven Farmer

\(\square\) Medical Examinet Kit(s) from (names):
\(X\) Other (describe): Linens
\begin{tabular}{l|l|l|l|l|l|l|}
\hline \(1-3\) & M. Saunders & Hospital Gown, sheet \& blankel & Chock for suspect or victim's DNA \\
\hline & & & & \\
\hline
\end{tabular}

We need the following: Victim \& Suspect's DNA profle; Victim's 5/A kit examined for suspect's DNA; Suspect's oral swabs, finger swabs \& fingemail scrapings examined ior the victim's DNA; Hospital gown, sheel \& blanket checked for vietim \& suspect's DNA
**The SIA consisted of the suspect digitally penetrating the victim \& perform oral sex on the victim. No semen/sperm should be involved.**

Any questions, please call.



Cagnina Roxanne

Latent Prin! Development L Latent Print Comparison

Piease list evidence items under "Evidence To Be Examined".
Please list names and ID\#ts of persons lo be compared.


Search AFIS eligible prints through dalabase(s).
AFIS EntryShoe Print Comparison TJire impression
(List items to be compared below or indicate photos on file.)
\(\qquad\)

I]Hand-writing / Hand-printing Comparison isubmin Exemplars)

IAtterod Documents \({ }^{-r-7}\) Other


\(\square\) Euthet / Cartridgat Cases to Gun Caliber/Sun Make Dotemmination[JFwem Function Tact I Tent Fling ]Seriat Number Restoration \(\qquad\) 
 [Josher (Deacribe holow if necentry)


NOTICE OF DENIAL OF REOUEST CLARK COUNTY DISTRICT ATTORNEY

TO: METROSAU JEX \(\$ 5597\)

DATE: May 19, 2008
YOUR DR\#: 0805161021

DAFILE \#: 08F10344X/TK8

STATE vs.

FARMER, Steven Dale \#2679879
CHARGE: SEE NOTES BELOW

\section*{REASON FOR DENIAL}

CASE APPROYED AS: SEXUAL ASSAURT (3 CTS); O/G LEWDNESS (2 CTS).
AELOTHER CHARGES DENDED.

DISTRICT ATTORNEY
BY: ALEXANDRA C. CHRYSANTHIS/cas
Chief Depuly

DISTRIBUTION: Addressee D.A, SCOPE Metro Jail
name: Caciltha, Roxanne
address: 3717 ?
PHONE NUMBER: 202870.5435

EVENT: \(88 C 514.102 \cdot 1\)
INTERVEWEDBY: M. JA MinES LOCATION: 900 N. Disanige Nav N N .84085

LOCATION: LVN SPITS

DATE \& TIME: \(5 / \mathrm{m} / 0 \mathrm{~g} / \mathrm{H} / \mathrm{LCO}\)
"In a moment I am going to show you a group of photographs. This group of photographs may or may not contain a picture of the person who committed the crime now being investigated. The fact that the photos are being shown to you should not cause you to believe or guess that the guilty person has been caught. You do nat have to identify anyone. It is just as important to free innocent persons from suspicion as it is to identify those who are guilty. Please keep in mind that hair styles, beards, and mustaches are easily changed. Also, photographs do not always depict the true complexion of a person - it may be lighter of darker than shown in the photo. You should pay no attention to any markings or numbers that may appear on the photos. Also. pay no attention to whether the photos are in color or black and white, or any other difference in the type of slype of the photographs. You should study only the person shown in each photograph. Please do not talk to anyone other than Police Officers white viewing the photos. You must make up your own mind and not be influenced by other witnesses, if any. When you have completed viewing all the photos, please tell me whether of not you can make an identification. If you can, tell me in your own words how sure you are of your identification. Please do not indicate in any way to othermitnesses that you have or have not made an identification. Thank you."

STATEMENT:
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LVAPD 104 (REY 5-9e) + HUTOLMTEDNP 12
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EVENT *:
\(080516-1021\)
SLSPECT NAME:

\section*{Steven D. Farmer}

Name

William Southwick
1.
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5.
6.
7.
8.
officer conducting une.up: M. Saunders P\# 6076

REMARKS:
R. Cagnina

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CONFDENTM




Booking record for SOUTHWICK, WILLYAM


Suspect Information
\begin{tabular}{ll} 
Name: & \\
Addresen: \\
SOUTHWICK, WILLIAM \\
Sirth Date: & \\
OSN \#: \\
Drivers License \#: \\
\hline
\end{tabular}


Physical Description
\begin{tabular}{|llll|}
\hline Sex: & Male Hait Color: & Gray \\
Race: & White Halr Length: & Short \\
Eye Color: & Blue Hair Style: & Straight \\
Height: & \(6^{\prime} 0^{\prime \prime}\) & \begin{tabular}{l} 
Mustache; \\
Seard: \\
Sideburns:
\end{tabular} & \begin{tabular}{l} 
Mustache \\
Beard \\
Yes
\end{tabular} \\
Weight: & 225 & Complexion: & Light \\
Clagses: & No & Build: & Medium \\
\hline
\end{tabular}

FOR LAW ENFORCEMENT USE ONLY
Logyrum e 2002 all rigtry resteved. Imagrware Syanms. The.

\section*{Las Vegas Metro Police Department}

Booking record for DRUMM, DANYEL.



FOR LAW ENFORCEMENT USE ONLY
Copryigh ot 2003 all niging reserved. Imagewave Syetems, ine.

Las Vegas Metro Police Department
Booking record for MORELLI, RICHARD JOSEPH

Arrest Information
\begin{tabular}{|llll|}
\hline Transaction Number: & 2022693 & Cs \#: & 0190930 \\
FBis: & & \\
Arrest Date: & State ID; \\
Arrest Officer: & Arst Ofcr P\#: \\
Charge: & & \\
& \\
\hline
\end{tabular}

Suspect Information


Physical Description


FOR LAW ENFORCEMENT USE ONLY Copyright O 2002 An rights reserveo. Imagewire systems. Inc.

\section*{Las Vegas Metro Police Department}

Booking record for WYNR, JOHN
Arrest ininormacion



\title{
LaS VEGAS metropolitan police department PHOTO LINE-UP WITNESS INSTRUCTIONS
}

\section*{EVENT:}

INTERVIEWED BY:
IDDRESS:

\section*{PHONE NUMBER:}

LOCATION:
DATE \& TIME: \(\qquad\)
"In a moment I am going to show you a group of photographs. This group of photographs may or may not contain a picture of the person who committed the crime now being investigated. The fact that the photos are being shown to you should not cause you to believe or guess that the guity person has been caught. You do not have to identily anyone. it is just as important to free innocent persons from suspicion as it is to identify those who are guilty. Please keep in mind that hair styles, beards, and mustaches are easily changed. Also, pholographs do not ahways depict the true complexion of a person - it may be lighter or darker than shown in the photo. You should pay no attention to any markings or numbers that may appear on the pholos. Also, pay no attention to whether the photos are in color or black and white, or any other difference in the type or style of the photographs. You should study only the person shown in each photograph. Please do nol talk to anyone other than Police Officers while viewing the photos. You must make up your own mind and not be influenced by other witnesses, if any. When you have completed viewing all the photos, please tell me whether or nol you can make an identification. If you cen. tell me in your own words how sure you are of your identification. Please do not indicate in any way to other witnesses that you have or have not made an identification. Thank you."

\section*{STATEMENT:}

SIGNED:

DATE \& TME: \(\qquad\) ..
\(\qquad\)
\(\qquad\)
\(\qquad\)

\(\qquad\)

SIGNED:

DATE \& TMME: \(\qquad\)

\section*{OFFICER'S NAME \& PW:}
'VMPD 104 (AEV 5-56) - AUTOMATEONWP?
LVMPD0100
CONFIDENTIM!

\(n\)

CONFDENTIAL


\section*{E0046991 DRIVERS LICENSE} CLASS1: Non-Commercial C CLASS2

\section*{STEVEN DALE FARMER}
\(\begin{array}{ll}\text { ELDRIDGE } & \text { CA } 95431 \\ \text { DOB: 03/1611952 } & \end{array}\)
\(\begin{array}{ll}\text { OOB: } & 03 / 16 / 1952 \\ \text { SEX: } & \text { M }\end{array}\)
HAIR: GRY HEIGHT: 510
HAIR: GRY
EYES: BLU
APP OFFICE: 634
634
ISSUE OFFICE:

APP DATE: \(\quad\) WEIGHT: 210
ISSUE DATE
TYPE APP: \(\quad D\)
DEPARTMENT OF MOTOR
DEPARTMENT OF MOTOR VEHICLES
I hereby certify that the docurnent to which this is aftixed
is a true copy of the records of the Department of Motar
is a true copy of the records of the Department of Molar Vehicles.
Motor Vehicle File Nor
Signed


In accordence with Secrion 1813 CVC , the above emplayes of the
under seal and certify copies of records of this Department. PHOTO OATE: 09/08/2004

PHOTO SEQ H: 4224
TECHNICIAN ID: B7
ENDORS:
DRIVER LICENSEIDEENTIFICATION CARD LAW ENFORCEMENT I'SFORMATION REQUEST

\(\pm\) Fuluc Service Agency
V. RUSH

REASON
Number of Requests: NVESTIGATION
-- TRAK IO \#
-.. Red E: Yellow
\(\cdots\) FAX Only \#
\(\cdots\) FAXMMail
Comments
 R9563 .2804

Pick Up D Mail C- Express Mail
Courier Name
\(\stackrel{-\cdots}{ }:\) : Birthate
-. Address
\(\cdots\) :". status
-... ouno
- 77 Call

Other
COFPDEDTML
Account \#: Physical Address

\begin{abstract}
City and State
\end{abstract}

2

(702) 828-5676



\title{
LAS VEGAS METROPOLITAN POLICE DEPARTMENT MEDIA RELEASE
}

DATE: May 16, 2008
EVENT \#: 080516-1021
FOR IMMEDIATE RELEASE

Sergeant Misty Pence
The Las Vegas Metropolitan Police Department
Crimes Against Youth \& Family Bureau
Sexual Assault Section
(702) 828-3421 or 828-3111

The Las Vegas Metropolitan Police Department is seeking the public's assistance in locating a suspect wanted for questioning in connection with an ongoing sexual assault investigation.

Steven Dale Farmer is a nurse assistant who travels throughout the country to work at various hospitals on a per diem basis. The victim in the case under investigation was a patient al a local hospital where Farmer recently worked.

Farmer is a white male adult, 56 years of age, \(5^{\prime} 10^{\prime \prime}\) tall, approximalely 200 lbs . with grey hair and blue eyes. He was last seen wearing a mustache and a beard. Farmer also uses the last names of "Russnogle" and "Fournier". He was last know to be driving a 1989 Pontiac with California licences plates 5PQC506.

It is believed that Farmer is aware of this investigation and may attempt to alter his appearance by shaving his beard or moustache, or dying his hair.

Anyone with information regarding Farmer's whereabout, his recent stay within the Las Vegas area, or furiher information conceming his vehicle are urged to call the Las Vegas Metropolitan Police Depariment's Sexual Assault Unit at 828.3421 during normal business hours or 828-3111 after hours and ask to speak with a Sexual Assault Detective.

\section*{CONFDENTMS}




\author{
GENERAL \\ Dato Crime Octorred: Ongoing \\ Location of Crime: Linkrown \\ Addutional mionmation about the location of the crime: Unknown \\ Viatin: Unknown \\ How is the caller aware of the crine: Caller saw the information on Chamel 7 News repon OHbers whith knowidelyt: Unknown \\ How enler haord ofout Crime Stoppers: Television, Nowspaper \\ Danger to Tprater : Low
}

Calias stated than the suspect was arrested as a sexual predalor, callar stated that he was assaulting his patients. Calles stmed that they warted to reporl that the suspect might hava olher victims, Callar stated that he glves out business cards to coworkers and patients he acts as a private Santa Claus at Christmas time for kids parties.

\section*{SUSPECT}

Mo: 1 First: Stevan Maddle: Unknown Last:Farmer
Full Mame: Steven Fame:
Altas or Hileknapre: Linknown
Race: White Gender: Male
Heigit: 510 Wafphit: 210Los
age: 60 DOA; Unknown
Expe: Unkrown Halr; Unisnown
SaN: Unknown swT's: Unknown
Facial Hair: Unknown Clotiling: Unknown
Addreap: Unknown Clyy; las Vegas
getempor: NV
Descripilon of Residence: Unknown
Pex Ftranm: Unknown CeH Phone: Unknown
Prior Criminal History: Uniknown
Wetpons: Unknown
Doge/Aminals: Unknown
Gang Aetivity: Unknown
Employer/Work Schedule: Certifed Nurse Assistant, he works for American Nursing 702-638-1200

\section*{END OF REPORI}

The caller had no ferther information at this time.
The caller was advised of your staduslupdate schedule and was tokd to call back if thay oblained any further intormation regarding this tip.
- The times have baen adusted to the redplents mans anne.

SPECIFIC CRIME: SEXUAL ASSAULT, OPEN AND GROSS LEWDNESS
DATE OCCURRED: May 16, 2008
TMAE OCCURRED:
LOCATION OF OCCURRENCE: 6900 North Durango Drive
CITY OF LAS VEGAS
CLARK COUNTY

NAME OF PERSON GIVING STATEMENT: STEVEN FARMER
\begin{tabular}{|c|c|c|c|}
\hline DOB: & 3-16-1952 & SOCIAL SECURITY \#: & \\
\hline RACE: & & SEX: & \\
\hline HEIGHT: & & WEIGHT: & \\
\hline HARR: & & EYES: & \\
\hline \begin{tabular}{l}
WORK \\
SCHEDULE:
\end{tabular} & & DAYS OFF: & \\
\hline HOME
ADDRESS: & 1844 Leonard Las Vegas, Nevada, 89108 & HOME PHONE: & cell phone 707 332-5894 \\
\hline \[
\begin{array}{r}
\text { WORK } \\
\text { ADDRESS: }
\end{array}
\] & & WORK PHONE: & \\
\hline
\end{tabular}

BEST PLACE TO
CONTACT:
BEST TIME TO CONTACT:

The following is the transcription of a tape-recorded interview conducted by DETECTIVE C. JEX, P\#, LVMPD SEXUAL ASSAULT AND ABUSE SECTION, on May \(16^{\text {th }}, 2008\). at 2205 hours.

Operator, this is Detective C. Jex, P Number 5597. I=ll be conducting one interview reference Event Number 080516-1021. The, uh, location of the interview is 4750 West Oakey. Person being interviewed is Steven, S-t-e-v-e-n Farmer, F-a-r-m-e-r. Date of

\title{
Las vegas metropolitan police department VOLUNTARY STATEMENT \\ PAGE 2
}

\section*{CONFDENTLLL}

EVENT \#080516-1021
STATEMENT OF: STEVEN FARMER birth of 3-16-1952. His address is 1841 Leonard, Las Vegas, Nevada. His cell phone number is 707-332-5894. Alsa present is Sergeant M. Pence, P-e-n-c-e, P Number 4950. Today \(=\mathrm{s}\) date \(=\mathrm{s} 5-16-2008\). The starting time is 2205.
Q. All right. \(\qquad\) just a couple things I wanna make sure that I=ve got.

Your date of birth of 3-16 of 1952?
A. Yes, sir.
Q. That=s correct?
A. \(\qquad\) .
Q. Okay. And it=s S-t-e-v-e-n, Farmer?
A. Yes, sir.
Q. Uh, do you have a middle name?
A. Dale.
Q. Dale. D B
A. a-le.
Q. Dale. And F-a-r-m-e-r?
A. Yes, sir.
Q. And the address, 80 E er 1841 Leonard?
A. Yes, sir.
Q. Okay. What B do you know what the ZIP code is there?
A. 89108.

\section*{CONFDENTAL}

\section*{Las vegas metropolitan police department VOLUNTARY STATEMENT}

PAGE 3
EVENT \#080516-1021
STATEMENT OF: STEVEN FARMER
Q. 9108. And your Social Security Number?
A.
\(Q\)
A.
Q.
A.
Q.
A.
Q. And your cell, 707 332-5894?
A. \(\qquad\) . (inaudible)
Q. \(\quad I=m\) sory?
A. Yes.
Q. That=s correct?
A. \(\qquad\) B
Q. Okay. All right. All right. Because of the B because of the investigation, the allegations, everything, \(I=m\) a \(l=m\) going to read you your Miranda Rights. Okay?
A. Okay.

\section*{LAS VEGAS METROPOLITAN POLIGE DEPARTMENT VOLUNTARY STATEMENT}

EVENT \#080516-1021
STATEMENT OF: STEVEN FARMER
Q. You have the right to remain silent. Anything you say can be used against in a court of law. You have the right to the presence of an attorney. If you cannot afford a per B attorney, one will be appointed before questioning. Do you understand these rights?
A. Yeah.
Q. Okay. All right. What I \(B\) what \(B\) what I need from you, Steve, is \(B\) is there \(=s\) B there \(=s\) been an allegation made B
A. \(\qquad\) .
Q. Um, that=s come from where you work.
A. Um-hum.
Q. And, uh Buh, some B an incident that took place, uh, earlier this morning, late last
night B I \(=\mathrm{m}\) not exactly sure when B while you were at work. Okay. You know anything about that? You been notified of anything like that?
A. What do I have to do to get an attorney?
(BY SERGEANT PENCE:)
Q. What \(\mathrm{BI}=\mathrm{m}\) sorry. What was the question?
A. I want to get an attorney.
(BY DETECTIVE JEX:)
Q. \(\qquad\) . So, you don=t wanna talk to me в

\section*{CONFIENTIAL}

\section*{Las VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT PAGE 5}

EVENT \#080516-1021
STATEMENT OF: STEVEN FARMER
A. \(\qquad\) before I answer anything, I want an attorney.
Q. Okay. All right.

Operator, end of interview. Time is 2209.

THIS VOLUNTARY STATEMENT WAS COMPLETED AT 4750 W. OAKEY ON THE \(16^{\text {th }}\) DAY OF MAY, 2008, AT 2209 HOURS.

CJ:tp

CONFDENTAL
LAS VEGAS METROPOLITAN POLICE OEPARTMENT VOLUNTARY STATEMENT

EVENT \#080516-1021
SPECIFIC CRIME: Sexual Assautt, Open and Gross Lewdness
DATE OCCURRED: May 16, 2008
TMAE OCCURRED:
LOCATION OF OCCURRENCE: 6900 North Durango Drive CITY OF LAS VEGAS

CLARK COUNTY

NAME OF PERSON GIVING STATEMENT: ROXANNE CAGNINA
\begin{tabular}{|c|c|c|c|}
\hline DOB: & 7-6-1973 & SOCIAL SECURITY \#: & \\
\hline RACE: & & SEX: & \\
\hline HEIGHT: & & WEIGHT: & \\
\hline HAIR: & & EYES: & \\
\hline \begin{tabular}{l}
WORK \\
SCHEDULE:
\end{tabular} & & DAYS OFF: & \\
\hline \[
\begin{array}{r}
\text { HOME } \\
\text { ADDRESS: }
\end{array}
\] & 3797 Lower Saxon Avenue North Las Vegas, Nevada, 89085 & HOME PHONE: & 702 870-5435 \\
\hline \[
\begin{gathered}
\text { WORK } \\
\text { ADDRESS: }
\end{gathered}
\] & & WORK PHONE: & \\
\hline
\end{tabular}

BEST PLACE TO CONTACT:

BEST TMME TO CONTACT:

The following is the transcription of a tape-recorded interview conducted by DETECTIVE M. SAUNDERS, P\#6076, LVMPD SEXUAL ASSAULT SECTION, on May \(16^{\text {h }}, 2008\), at 1045 hours.

Hello, Operator, this is Detective M. Saunders, S-a-u-n-d-e-f-s, conducting one taped interview reference Event Number 080516-1021. Uh, this interview=s taking place at 6900 North Durango, Las Vegas, Nevada, uh, at the Centennial Hills Hospital, Room 725. Present for this interview, also, is going to be Sergeant M. Pence, P-e-n-c-e, P Number

\title{
LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT \\ PAGE 2
}

EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
4950. Interview \(=\) s taking place on the \(16^{\text {th }}\) of May, 2008, at approximately 1045 hours. Um, person being interviewed, last name is Cagnina, C-a-g-n-l-Ba, first name of Roxanne. Date a birth of, uh, 7-6 of \(>73\), Social Uh, address of seven \(B\) I=m sorry, 3717 Lower Saxon Avenue, North Las Vegas, Nevada, 89085. Has a home number of 870-5435.
Q. Roxanne, is that information I just read to you correct?
A. Yes.
Q. Okay. Uh, Roxanne, we=re here to investigate eh B the allegations that were B were brought up about a B a nurse that was assisting you this morning. Um, from your best recollection, starting with what you remember first B uh, whether comin= out a the ER, whatever it may be, can you tell us the details of what had occurred?
A. He was transporting me to my room, and it was B I think it was around three \(0=\) clock.

And we got into the elevator, and he kept adjusting my blanket.
Q. Okay. Explain B what do you mean he was just B uh, adjusting your blankets.
A. He just kept making sure I was covered and.
Q. Okay.
A. He had plenty a time underneath my cover. I noticed he was rubbin=, like B like, goin \(=\) like this on my leg.

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LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT PAge 3

EVENT \({ }^{2} 080516\)-1021
STATEMENT OF: ROXANNE CAGNINA
Q. On the top a your thigh, closer to your groin or more towards the \(B\)
A. Um, more B
Q. 8 middle a your thigh \(B\)
A. \(B\) to the goin.
Q. Okay.
A. And I kind a fell uncomfortable, so I kind a pulied it down.
Q. Okay. Was there anybody else in the elevator with you?
A. There was another lady in the elevator. Um, I don=t know who.
Q. Did she B would it B could she see what he was doing?
A. I don=t think so. I B
Q. Was she \(\qquad\) (inaudible) B
A. I B I had a lol a covers on me, >cause I had, um, two heated blankets and then my original blanket.
Q. Okay. So, he had his hand underneath the blankets?
A. Underneath and IB
Q. Okay B
A. It think I was sittin = like this, and B
Q. Okay. So, you had your knees propped?
A. Yeah, I had my knees propped. If \(I=m\) not mistaken \(B\)
Q. Um-hum B
A. B and then he kept B he kept rubbin= underneath my thigh.
Q. Um-hum.
A. And he was gettin = closer and closer. And IB
Q. Closer to what?
A. To B to my groin area.
Q. Okay.
A. And \(i\) didn \(=t\) have underwear on. So \(B\)
Q. What were you wearing?
A. I was just wearin= my robe, my в
Q. The hospital robe that B
A. Right B
Q. B they gave you? Okay.
A. So, I kind a pushed my robe down and \(B\) in the hopes that he would get the \(B\) the hint that I was very uncomfortable with that.
Q. Okay. Did you say anything to him about moving his hands or direct anything to the other B
A. Note
Q. B nurse?

\title{
Las Vegas metropolitan police department VOLUNTARY STATEMENT \\ \\ \section*{PAGE 5}
} \\ \\ \section*{PAGE 5}
}

EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
A. Not at that time.
Q. Not al the time. Okay.
A. So, we got in the room, um B um, no one was in here but him and I.
Q. Okay.
A. And B
Q. Hold on real quick. When you were gettin= off the elevator, where=d the other nurse go?
A. I think she went the opposite direction.
Q. Okay. So. she probably went down towards the nurse=s station, and he was the only one that brought you in the room?
A. \(\qquad\) .
Q. Okay. Do you know what time it was you got to the room, by chance?
A. I would guess that, like, it was around three \(0=\) clock.
Q. It was three-ish. Okay.
A. Yeah.
Q. All right. Please continue.
A. Um, so, um, (inaudible voice present in background) he got me in bed, and he started rubbin \(=m e\), started rubbin \(=m y\) shoulders. And \(\operatorname{lgo}\), that \(=s\) not necessary or somethin = like that. And he goes, oh, \(\mathrm{Al}=\mathrm{m}\) just tryin= to relax you. And he actually \(\qquad\) B

LAS YEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT PAGE 6

EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
he actually stated the time to me. He goes, Alt=s three \(0=\) clock. You should be sleepin \(=\), ©

He goes, \(A l=m\) doin = this to relax you.@ And \(I\) just kind a looked at him. And he kind a, like, had this look on his eyes, like a like a scary look, kind a, like, you know \(B\) kind \(a B\)
he kind a feared me I i kind a feared him. \(\mathrm{I}=\mathrm{m}\) sorry.
Q. You kind a what? Imem sorry \(B\)
A. I B I was afraid of him.
Q. Okay.
A. At that point. So B so, as he got me adjusted \(B\) and he goes, AWell, let=s pull out your B your gown from underneath you, >cause it=s harder to turn and twist.@ So, I said, AOkay.(G) So, it=s covered, and he pulled it out. And then that=s when he started to rub the inside a my thigh. And I crossed my legs, like this. And I go, AYou don=t have to do that.(4) And he goes, no, it=s just \(B\) and he goes, Alt=s just to relax you. It=s procedure, and \(\mathrm{it}=\mathrm{s}\) okay. Don=t worry \(\mathrm{I}=\mathrm{m}\) not gonna hurt you.@ I go, ANo need. It=s all right B
Q. And \(B\) and he said it was procedure?
A. Yeah. He said, Altws procedure.,
Q. Okay.

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\section*{LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT PAGE 7}

EVENT 0080516 -1021
STATEMENT OF: ROXANNE CAGNINA
A. And \(B\) and then, um, he started rubbin= my face and to the side a me and tellin= me how beautiful I was. And then I B I got this knot in my gauze like this B I couldn \(=\mathrm{t}\) reach my call button, because it was still up there. So, I got this horrible knot, and I noticed I had my phone under here.
Q.
A. So, at one time I reached underneath, and I had gotten my phone, and I was trying not to let him hear that B the clicking sound.
Q. Um-hum.
A. And I started clicking a couple shots, but I couldn=i hear him, so, I figured, maybe, he can hear him.
Q. Um-hum.
A. So, then, he proceeded goin = B to goin down my legs and inside the inner thigh and then start to penetrate me. And B and that \(=\mathrm{s}\) when I told him, APlease stop. Please stop.@ He goes, Alf you just relax, it=ll help you go to sleep.@
Q. Okay.
A. He goes, AJust relax. It=\| help you go to sleep.@
Q. Okay.
A. And, at that point, I just froze.
Q. Okay. When, um B which hand did he use?

\title{
LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT \\ PAGE 8
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CONFIEEIVIino

EVENT \$080516-1021
STATEMENT OF: ROXANNE CAGNINA
A. Um, I wanna say he used both. My legs B I wanna say he used both.
Q. Okay.
A. And then at one point, he told me, just go ahead and put your hands up like this or somethin= like that. \(\qquad\) B
Q. He wanted you to lif B put your arms buh B
A. Yeah. He goes, put B
Q. B you hand behind your neck?
A. He goes, APull your hair behind your B your neck.@ He goes, AAnd just relax.© He said, AJust relax.© He \(\qquad\) B
Q. So, in the position that your in right now, arms B
A. Yeah B
Q. Arms above your head and hair B
A. Um-hum \(B\)
Q. B pulled up. Okay. Did you do that?
A. I did that.
Q. \(M=k a y\).
A. 1 \(\qquad\) B I, like, it \(\qquad\) I very afraid.
Q. Um-hum.

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LAS VEGAS METROPOLITAN POLICE DEPARTMENT \\ PAGE 9

\section*{VOLUNTARY STATEMENT}
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\section*{VOLUNTARY STATEMENT}
}

\section*{COFPDEVIIrm}

EVENT \#0805 16 - 1021
STATEMENT OF: ROXANNE CAGNINA
A. And then he proceeded to \(\qquad\) \(B\) to rub my face, and I then I took his hands off a my face. And he goes, ANo, no.@ He goes, Alt=s to relax you.@ And he kept B he kept massaging my face.
Q. So, he used the back of his hands?
A. Yeah. \(\qquad\) B at one point, he used the back of his hands. And then he went underneath my gown. And he started tellin= me that I had beautiful breasts. And I B I kept B
Q. And is he B is he touching your breasts at this point?
A. Um-hum. He was touching both of >em. I kept pullin= my blanket up. And he goes, don=t be B AThere \(=s\) nothin= to be ashamed of. There \(=s\) nothin \(=\) to be ashamed of. You have beautiful breasts.@ And I just B I just kept B I believe stayed in this position.
Q. \(M=\) kay. You \(B\) you pulled the \(B\) you pulled the \(B\) the blanket up to your neck?
A. Um-hum B
Q. Uh, is his hands a
A. \(\qquad\) had B
Q. B over the top of the blanket or underneath the blanket?
A. No. They under here the whole time.
Q. They were undemeath the blanket?

\title{
Las vegas metropolitan police department VOLUNTARY STATEMENT PAGE 10
}
A. Unless he was touchin= my face.
Q. \(M=\) kay. And then wuh \(B\) was \(B\) was his \(B\) were \(B\) were his hands also underneath your robe, touching your breasts?
A. Yeah. He was \(\qquad\) B
Q. So, it was skin-to-skin contact B
A. Hmm B
Q. \(\quad B\) is what \(I=m\) asking?
A. He was penetratin = me.
Q. Okay.
A. He в
Q. All right B
A. He \(\qquad\) B penetrate me \(\qquad\) At that point, I just B I just, like, totally grabbed my camera, and I kept tryin= to take pictures. I just, you know, snap, snap, snap, snap.
Q. You were tryin= to take pictures of him?
A. Yeah, I was tryin= to take pictures of him.
Q. Do you still have that phone?
A. Ido.
Q. Did any a the pictures come out?

\section*{CONFDENTAL}

FVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
A. No, they didn=t come out.
Q. Okay.
A. I had no flash.
Q. Okay. But it=ill show a time and date, right?
A. Um-hum.
Q. Okay. Um, so, when um \(B\) uh, I wanna verify something really quick. Um, so, he first started rubbing your thigh, then he started rubbing your face. And the he said he needed to move the robe, it would be more comfortable for you. Is that correct?
A. He said that to me, AHere, \(\qquad\) so you=ll be more comfortable when yousre sleepin.@
Q. Okay. I know \(\mathrm{it}=\mathrm{s}\) hard. And \(\mathrm{I}=\mathrm{m} \mathrm{B}\) and \(\mathrm{I}=\mathrm{m}\) sorry to ask, but I just to make sure. Okay. Um, at that point, he started rubbing your thigh. And is that the first time he used his fingers to penetrate your vagina? Did he penetrate your vagina first, or did he rub your breasts first?
A. He в he rubbed my breasts first.
Q. Okay. So, he rubbed your breasts, then he went down and B and penetrated your vagina with B you said, both hands, usin=?
A. Both hands and \(\qquad\) both fingers.

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LaS VEGAS metropolitan police department VOLUNTARY STATEMENT PAGE 12
}

EVENT \$080516-1021
STATEMENT OF: ROXANNE CAGNINA
Q. \(M=k a y\). And then he went back up and started doing what?
A. And then he went right \(\qquad\) he started touchin= me. Uh, he slarted touchin = my face.
Q. And that=s when you pushed his hands away?
A. Hmm, I pushed his hands away.
Q. And is that \(B\)
A. And B
Q. Is that when he told you to raise your hands up?
A. Yeah. He goes B
Q. Okay B
A. B ALift up your hair.@ B
Q. \(\quad M=\) kay B
A. My hair was top. He was liftin= my head up. He goes, \(A Y O u=\|\) be more comfortable if you just leave your hands up there.@
Q. \(M=\) kay. And then ...
A. Um, and then he continued to go down there.
Q. Okay. And he went back down there. Okay.
A. Uh-huh. And he continued to penetrate me. And then, at one point and time, he B he went down there, literally, and started using his tongue.

\title{
LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT \\ PAGE 13
}
Q. Okay. Well, after this, uh B after he used his hand the second time, did he go back up to your breasts first and then?
A. 1 don \(=t\) think so.
Q. You don=t B oh, okay.
A.
Q. So, then you said he went down there, and he a he actually used his B he put his face B
A. Yeah. He \(\qquad\) B
Q. And \(B\) and his tongue on your vagina?
A. He kept lickin = me all \(\qquad\) .
Q. Okay. Was the door open or closed when this was happening?
A. It was closed.
Q. Okay. And did he B was he B what is saying to you why he has his face down there?
A. Nothing. He \(\qquad\) B
Q. Is there B in B do you remember?
A. He just kept tellin= me, ARelax. It=s gonna help you sleep. It=s gonna help you sleep. 8
Q. \(M=\) kay.
A. He was just \(\qquad\) you need to go to sleep. You need get to get some rest.
Q. Did he B uh, was he aware a what medication that you were on?
A. Yes, he was. He \(\qquad\) \(B\) he was \(B\) he \(\qquad\) , um, all the medication you have in your system.
Q. Um-hum.
A. He said, AYou should be asleep by now.@
Q. Okay. Did \(B\) was he the assisting nurse in anything done in the ER Room
A. \(\qquad\) .
Q. Okay. Um, did you ever tell him no or stop?
A. Yes, I did.
Q. At which point?
A. The first time he touched me.
Q. The first time he touched you.
A. \(\qquad\) B
Q. Is this before the penetration B
A. I was \(\qquad\) B
Q. Is this before the pene B

\title{
LAS YEGAS mETROPOLITAN POLICE DEPARTMENT
} VOLUNTARY STATEMENT

\section*{PAGE 15}

EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
A. Before the elevator, I told him, APlease stop. Please stop.@ And I crossed my legs. Uh, I saw B I crossed my legs on many occasions.
Q. M=kay. When B when \(B\) when did you \(B\)
A. And he pulled them apart B
Q. When did you ask him to please stop, at what point? \(I=m\) sorry.
A. Several times.
Q. Several B I \(\qquad\) B several times after the elevator, after you got in the room?
A. Um, after the elevator.
Q. After the elevator. Okay. M=kay. And then what would he say when you=d tell him to stop?
A. Uh, he goes, ANo. Just relax. Relax. It=s gonna help you sleep. ©
Q. Okay.
A. AJust relax. Just relax. It=s gonna help you sleep.@
Q. Okay.
A. And then he said, um, \(A l=m\) gonna back, and I wanna make sure that you \(=\) re doin= okay tomorrow.@ He goes, Al=m gonna come back.@ This the end B I don=t know if it was at the end, but he said at the end, then he goes, Al>m gonna back at

\title{
LAS VEGAS METROPOLITAN POLICE DEPARTMENT
} VOLUNTARY STATEMENT PAGE 16 seven \(0=\) clock in the morning to make sure that yous re okay.@ And I \(\operatorname{I}\) found that kind a odd. So, I B I \(\qquad\) - I woke up B I don=t think I slept at all.
Q. \(\quad M=\) kay. At what \(B\)
A. IB
Q. Okay B
A. And, like, \(\qquad\) B
Q. Do you know what B
A. \(\qquad\) B
0. B time it was that he left? The room?
A. It was \(\qquad\) 15 minutes.
Q. It was about 15 B so, he was in the room with you about 15 B all this occurred over a period of about 15 minutes?
A. Hinm.
Q. Okay. Eh B okay. So, what B what happened after he left?
A. Well, after he left, um, nothing. \(\mid\) B \(\mid\) kept trying \(\mid\) B \(\mid\) B \(\mid\) kept try \(\mid\) tried to call home.
Q. On your cell phone?
A. Um, on B on the regular phone, >cause my batteries went dead. And then after that, um, I kept tryin = not to fall asleep, but I had so much medication in me.
Q. Um-hum. Did you finally fall B
A. That B
Q. B asleep?
A. Ifall B
Q. B
A. I think I fell asleep and then B
Q. Did you actually B were you able to actually call out on the room phone?
A. \(\qquad\) .
Q. No? Okay.
A. No. But first thing in the morning, I called my husband \(B\)
Q. \(\qquad\) B
A. B I think. It must a been six thirty, and I told him. I said, ACan you get here before seven?@ And I don =t know if I went through to detail with him.
Q. Okay.
A. At seven B I said, Al need you here at seven.@ I believe I B I told him what was goin \(=\) on.

Um, and then as soon as the nurse came in, my nurse B
Q. \(\qquad\) B
A. l asked for the nurse that was in charge.

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LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT PAGE 18
}

EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
Q. Um-hum.
A. I said, ACan I please speak to the nurse in charge?@
Q. Um-hum.
A. The main nurse. And she \(=\mathrm{s}\), like, \(\qquad\) B
Q. And what time was that at when this other nurse came in?
A. \(\quad \operatorname{Um} \mathrm{B}\)
Q. Had you called your husband B
A. B they both met here at the same time. It was seven ozclock.
Q. It was a B roughly, seven \(0=\) clock?
A. Um-hum B
Q. Okay.
A. >Cause e well, at seven, seven-twenty. >Cause I was surprised to see him back here.
Q. I=m sorry.
A. And then I called 9-1-1. And I didn=t know what to tell >em, so hung \(B\)
Q. Um-hum B
A. Bup.
Q. Okay. Then B and then you called 9-1-1?
A. \(\qquad\) .

Las vegas metropolitan police department VOLUNTARY STATEMENT

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EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA

\section*{Q. Eh B}
A. I called 9-1-1 B
Q. Um-hum. On your cell or from your room phone?
A. On my cell.
Q. Okay. Um, when he came back to the room, did he say anything?
A. Him and the nurse B he walked in, and then the nurse walked in after him. And the nurse was being kind a suspicious. And she goes, are you \(B\)
Q. Is it the nurse that=s working right now?
A. Uh-huh. She goes, AAre you her husband?@ And he goes, ANo, I was hero B her B her Anurse downstairs.@
Q. Um-hum.
A. He goes, Al was just comin= up here to check on her.@ And she kind a had this look. And I kind a looked at her, kind a like B
Q. Did you say anything to her at that time?
A. He looked at me, and IB and I don=t remember if I said anything. He just kept glarin= at me. And B
Q. Explain glaring. What do you mean by he was glaring at you?
A. Glarin= in a way that I \(B\) that \(\mathrm{I}=\mathrm{d}\) be afraid.
Q. Okay. Making, uh B a threatening manner?

EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
A. \(\qquad\) .
Q. Okay. Like, what do you B what do you think he was implying by glaring at you?
A. Just, like, shut your mouth or something like that.
Q. Okay. Did you tell this nurse that showed up in your room what happened, or did she get the head nurse like you asked?
A. No. lasked her to get the head nurse.
Q. Okay. And then the head nurse came in?
A. \(\qquad\) .
Q. Was that, uh, Vickie? (phonetic)
A. I believe so.
Q. \(M=k a y\). And then you told her what had occurred?
A. Hmm .
Q. Okay. Um, at what time did your husband get here?
A. Um, shortly after he __. He had to drop the kids off. He в he had
\(\qquad\) \(B\) | don=t \(\qquad\) comes on. Um, \(\qquad\) .
Q. Okay.
A. And I said, ABut he=s working downstairs,(©) and he just, AWell, if he shows up,© then B
Q. Um-hum B
A. AThen push the button.@
Q. \(M=k a y\).
A. But I didnst have B reach \(\qquad\) B
Q. \(\qquad\) B
A. So.
Q. I understand. How many individual times B that B would he start and stop B how many times did he touch your breasts?
A. \(\qquad\) last time?
Q. Uh B okay. I mean, like B
A. He B maybe, like, ten or fifteen.
Q. Okay. What B what I mean by that is if he B if he went underneath your top B or even on the outside a your top, if he started feeling your breasts, if he stopped and then
went B starled rubbing your hair, and then went back to rubbing your breasts and then tried to touch you between your legs, and he went back to rubbing your breast. How many times do you think that he actually, individually \(B\)
A. You mean, like here B
Q. How B
A. \(B\) and then \(B\)
Q. B separate times B

\title{
Las vegas metropolitan police department VOLUNTARY STATEMENT PAGE 22
}
A. B here B
Q. Yes. If he \(B\) if he went \(B\)
A. Here and B
Q. B from your breasts to yours yeah, whatever it was?
A. Probably about thirty times.
Q. About 30. M=kay. And how many times did he use his hands to start and stop penetrating that you think?
A. When he=s \(\qquad\) hands. He kept tellin= me that he had big fingers. It Was B AWhat I wanna do is make you come.@
Q. Did he say this while he was usin= his fingers, or while he put his face down there?
A. While he was usin = his fingers.
Q. Do you recall B do you remem B do you feel like he was using both hands, or could you only feel one hand?
A. No. I feel it was with one hand.
Q. You only feel one hand. Okay. And, um, how many times would you say B
A. This was \(\qquad\) .
Q. Um-hum. (Inaudible voice present in background)
A. Like, about nine times.

\title{
LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT
}

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\section*{CONFDENTIAL}

EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
Q. About nine times. Okay. What about with his face? How long B how long was he \(s\) did B do you think performed orally on you for?
A. About five.
Q. For about five minutes, you think?
A. Um, no, about five different times.
Q. Oh, he went down B Okay, about five times. Okay. So, what did he B would he go down and then stop and come up, and then go back down, and then stop and come up, and then go back B or was it just, he would stop briefly and then go back?
A. He was B after he was all finished here B
Q. Um-hum \(B\)
A. B \(\qquad\) that \(=s\) when he went down there.
Q. And he just stayed down there?
A. Um-hum.
Q. Okay. Um, okay. Did he make any other B any B it B now, you B there was information, something about a phone number. What B what, uh B what occurred with a phone number?
A. Well, downstairs, they were в they were wonderful to me.
Q. Um-hum.

\title{
las vegas metropolitan police department
} VOLUNTARY STATEMENT

PAGE 24
EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
A. And then the female nurse B um, you can ask them. I said, can you please give me a phone number B and your B I need B I don=t even think I asked, uh, for a phone numbers. I said, ACan you give me your information? \(1=d\) like to@ ruh B write a ruh B Awrite a letter@ and Ato the corporation@ um, Ato let them know@ that Ahow great you guys have been.@ >Cause down there, he was very professional.
Q. Um-hum.
A. You know, but then I was in a surrounding.
Q. Right. So, did he give you his phone number?
A. He \(\qquad\) .
Q. Okay. Did you get the phone number from the other nurse?
A. Um, I believe so.
Q. Okay. Don=t \(B\) don=t worry about it right \(B\) we \(B\) we can \(B\) we can verify that later. I=ve some B \(\qquad\) B
A. Um, I believe so.
Q. Okay.
A. Um, yeah.
Q. Okay. Have you ever met him before?
A. No.
Q. Never seen him before? Okay.

\title{
LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT PAGE 25
}

\section*{CONFIEETTAL}
A. Um-um.
Q. And, uh, when was the last time you and your husband were sexually active? Has it been in the last 72 hours?
A. Um, yes.
Q. Okay. About how long ago was that?
A. Hmm, probably a week ago.
Q. A week ago. Okay. So, it was longer than 72 hours, longer than three days ago?
A. Yeah.
Q. Okay. Um, would we have any occasion to find any other male DNA or anything on you other than your husband \(=s\) ? Or maybe this guy \(B\)
A. \(\qquad\) find saliva.
Q. You=li think B suhl B okay. And, whin \(B\) will you allow us to have a B a SANE exam done on you? Have a certified nurse come and try to collect evidence?
A. \(\qquad\) .
Q. At any time did he put his penis in you?
A. No.
Q. Anything like that? Okay. Did he ever rub his penis anywhere on your body?
A. \(\qquad\) .
Q. No. Did he lay on top of you or kiss you?
A. No. No. He was really \(\qquad\) about the other nurse comin \(=\) in.
Q. Okay. And while he was doin= B what side of the bed was he standing on?
A. This side.
Q. He was standin= right there?
A. \(\qquad\) .
Q. Okay.
A. Hmm .
Q. And the whole time, his hands were underneath the blankets, hmm, and everything?
A. \(\qquad\) .
Q. Okay. Are these the same blankets?
A. Um-hum.
Q. These are the same blankets?
A. Hmm.
Q. Okay.
A. They haven=t B
Q. \(A n_{B}\)
A. B changed,
Q. And yours B did B do you remember him B did he ever wipe his hands on anything, any blankets, your B your robe or anything?
A. Um B

\section*{CONFDENTIAL} VOLUNTARY STATEMENT PAGE 27

EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
Q. Did he was his hands in the sink, did he do anything like that?
A. I don=t \(\qquad\) .
Q. Okay. And the last lime you saw him was seven o=clock this morning, and then he B after he said he was just comin = to check on you, he up and left and B
A. That=s \(\qquad\) he seen the nurse, he was just, like, \(\qquad\) B
Q. All right. Okay.

Sgt. Pence, do you have any questions?
MP: Uh, I have just a couple a questions.
(BY SERGEANT PENCE:)
Q. Just for clarification purposes, um B I know Detective Saunders asked you, but I want to be positive on your answer. Did he touch your breasts over or under your clothes?
A. Underneath.
Q. Okay. And what position was your bed in this whole time?
A. Um, I think that it was, probably the way it is now.
Q. So, your head was inclined a little bit?
A. Hmm B maybe, a little bit down, >cause I was tryin= to go to sleep.
(BY DETECTIVE SAUNDERS:)
Q. You had a slight incline?
A. Yeah. It=s, like, a little bit more down.

\section*{(BY SERGEANT PENCE:)}
Q. Okay. And, um, he didn=t kiss anywhere else on your body?
A. No.
Q. Okay. Did he penetrate anywhere else on your body other than your vagina?
A. No.
Q. No. Okay. Um, how did he B how did give you his phone number?
A. Downstairs, the nurse B there was a female nurse \(B\)
Q. Um-hum.
A. B and there was him. And I kept tellin= her over an over \(B>\) cause I think she was my head nurse. And I kept tellin = her B her and him. I said, AYou guys are great. I hate to bother you guys, but I=m gonna write a letter of recommendation.ब
Q. \(\qquad\) B
A. You know, tellin= how great you guys are. So, if you guys can give me your information, \(I=d\) love to do that for you.
Q. Okay.
A. I said, Al really do appreciate how well you guys are taking care of me.e.
Q. Okay.
A. So, that=s how \(\qquad\) B
(BY DETECTIVE SAUNDERS:)
Q. Now, was she the one B

MP: How B

MS: I=m sorry, Sergeant Pence B (BY SERGEANT PENCE:)
Q. How did he give it to you, though. I mean you=re a I know you=re a you told him and the other nurse you wanted their information. Did he tell it to you verbally, and you wrote it down? Did he write it down? How did B how did you get his information?
A. Um, I had my purse here at the here at the \(B\) at the whole time.
Q. Uh-huh.
A. And that=s B | pulled out somethin \(=\), and I handed it to him.
Q. Do you know what it was you pulled out?
A. Yeah.
Q. What was it?
A. I pulled out my check book.
Q. Okay. And you asked him to put his information in the checkbook?
A. Yeah. But I noticed, after looking at it, he didn=t put his name on it.
Q. Okay. Did you tell him what information you wanted?

\title{
Las vegas metropolitan police department VOLUNTARY STATEMENT Page 30
}

\section*{CONFIDENTIAL}

EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
A. I just said, well, \(I=d\) like your B you B you nuh B down \(\qquad\) . I=d like your
name, information, stuff, so I can write a letter of recommendation, which I would assume, name, number, nurse. Not even number, really, I would just assume.
\(\qquad\) B
Q. Then you also told this to the other female nurse?
A. Several times, I \(\qquad\) her.
Q. Did you ever get her information?
A. Um, I believe so.
Q. Do you know where you got a where her information is?
A. Um, if I look through my purse, I can probably \(\qquad\) B
Q. That=s okay.

MS: \(\qquad\) B
(BY SERGEANT PENCE:)
Q. We=ll do that later. I just didn=t know if you knew off hand.

MS: Wuh B was this в
(BY SERGEANT PENCE:)
Q. Just hold off on that. We=\| B we=ll get it later.
A. Um, if you find the nurse he was working with and ask her \(B\)
Q. Um-hum.
A. Um, she remember, >cause I kept askin= her several, several times.
Q. Okay. Did you B eh, did you ever hand her the same thing you handed him to get her information?
A. No.
Q. Okay.
A. I think, um a if I=m not mistaken, she wrote it on a separate piece of paper.
Q. And it B the nurse that was working with him downstairs, is that the same nurse that helped transport you up here to this room?
A. No.
Q. A different one?
A. Yeah. She was my B I believe she was my head nurse, and he was a back nurse.
Q. She, being the one you asked for the information?
A. \(\qquad\) .
Q. Okay.
A. And she was B she was the back-up B he was the back-up nurse, and she was the nurse that was assigned to me. (BY DETECTIVE SAUNDERS:)
Q. \(\qquad\) . Who was the nurse that went upstairs with you and \(B\)
A. Hewas.
Q. And then who B who was the other nurse that was B
A. I don=t know a
Q. She was just B
A. 1 \(\qquad\) B
Q. \(B\) another nurse in the ER \(B\)
A. B she was a nurse.
Q. Okay. All right. (BY SERGEANT PENCE:)
Q. Now, do you know his name?
A. Um, if \(I=m\) not mistaken, it=s John. (phonetic)
Q. And why do you think it=s John?
A. Um, because I asked. I asked down there. I go, what B wuh B what B AWhat was your name?@ Like that. And scause I kept callin= him \(\qquad\)
Q. Okay.
A. And he goes, AWhy are you callin= me \(\qquad\) © And \(\qquad\) Idon=t know, you look like a в you like a Scott. Maybe it=s >cause I used to call my husband \(\qquad\) . >Cause he goes, no, it=s John, and he said it laughing. I go, John, it=s not funny. >Cause I was bein= very friendly down there.
Q. Um-hum.

STATEMENT OF: ROXANNE CAGNINA
A. You know. I go talk friendly scause you probably don=t even know my name. And he didn=1 know my name.
Q. Was he wearit = a name tag?
A. Um, no.
Q. Can you describe him for me?
A. All I know is he had white hair. White hair, white beard.
Q. We=re talkin = white-white, like the blankets, or just blonde?
A. White.
(BY DETECTIVE SAUNDERS:)
Q. And how old is he, do you think?
A. I have to say suh B suh B sixty.
(BY SERGEANT PENCE:)
Q. Sixty. And he \(B\) about tall?
A. Hmm, probably about five-seven.
Q. Approximate weight? You know?
A. Hmm, probably, like, 230.
Q. So, he=s a big man?
(BY DETECTIVE SAUNDERS:)
Q. So, he \(=\mathrm{SB}\)
A. \(\mathrm{He}=\mathrm{s}\) \(\qquad\) B

\title{
Las vegas metropolitan police department VOLUNTARY STATEMENT \\ PAGE 34
}

EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
Q. B he=s heavy. He=s heavy but not too tall?
A. Yeah. He=s got, like, a potbelly, but, like B like, B he=s a tall man.
(BY SERGEANT PENCE:)
Q. Facial hair?
A. Um-hum, all white beard.
Q. He have a musiache as well?
A. Um-hum.

MS: Neatly B
(BY SERGEANT PENCE:)
Q. Long beard? short beard?
A. Uh, I think it was short.
(BY DETECTIVE SAUNDERS:)
Q. Trimmed?
A. Um-hum.
(BY SERGEANT PENCE:)
Q. Anything unique about his teeth?
A. I didn=t see that much of \(\qquad\) .

MS: Hmm.
(BY SERGEANT PENCE:)
Q. Did you see any tattoos?

\section*{CONFDENTIAL}

LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT PAGE 35

EVENT \#080516-102 1
STATEMENT OF: ROXANNE CAGNINA
A. \(\qquad\) .
Q. And was he wearing glasses?
A. No. Not that I knew. That I that I know.
(BY DETECTIVE SAUNDERS:)
Q. Okay.
A. I just know that without a doubt, he was my nurse downstairs.
Q. Okay.
A. He was the one who transferred me B
Q. Did \(s\)
A. \(B\) to my bed. And he was, like, \(l=m\) gonna take \(\qquad\) , you know, so.
Q. Did he ever say, you know, he wants to call you later, or he wants lo meet with you later or anything along those lines? Other than coming back at seven \(0=\) clock in the morning to see you?
A. No. He just said, um, when I get off of work, I might stop up here and check in on you at seven, or somethin= like that.
Q. Okay.
(BY SERGEANT PENCE:)
Q. He=s the same one who did \(\qquad\) \(?\)
A. \(\qquad\) .
Q. Okay.

\section*{CONFDENTLAL}

LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT

PAGE 36
EVENT \#080516-1021
STATEMENT OF: ROXANNE CAGNINA
I don=t have anything else.
(BY DETECTIVE SAUNDERS:0
Q. Was \(B\) was that a yes, he=s the same one who did this to you?
A. Definitely, yeah.
Q. Okay. All right.

Operator B
A. My husband walked in shortly B and he just missed him, and he left.
\(\qquad\) .
Q. Okay.

Operator, this will end the interview. The time is 1114 hours on the \(16^{\text {th }}\) of May, 2008. Same people present. Same location.

Thank you.

\section*{CONFIENTHAL}

Las vegas metropolitan police department VOLUNTARY STATEMENT

PAGE 37
EVENT \#080516-1021

\begin{abstract}
THIS VOLUNTARY STATEMENT WAS COMPLETED AT G900 NORTH DURANGO DRIVE, ROOM 725, ON THE 16th DAY OF MAY, 2008, AT 1114 HOURS.
\end{abstract}

MS:tp

LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT

PAGE 1
EVENT \#: 080516-1021
SPECIFIC CRIME: SEXUAL ASSAULT
DATE OCCURRED: TIME OCCURRED:
LOCATION OF OCCURRENCE:
CITY OF LAS VEGAS
CLARK COUNTY

NAME OF PERSON GIVING STATEMENT: LORRAINE WESCOTT
\begin{tabular}{|c|c|c|c|}
\hline DOB: & & SOCIAL SECURITY \#: & \\
\hline RACE: & & SEX: & FEMALE \\
\hline HEIGHT: & & WEIGHT: & \\
\hline HAIR: & & EYES: & \\
\hline WORK SCHEDULE: & & DAYS OFF: & \\
\hline \[
\begin{array}{r}
\text { HOME } \\
\text { ADDRESS: }
\end{array}
\] & 6900 NORTH DURANGO LAS VEGAS, NEVADA 89149 & HOME PHONE: & 702-629-1189 \\
\hline \[
\begin{array}{r}
\text { WORK } \\
\text { ADDRESS: }
\end{array}
\] & & WORK PHONE: & \\
\hline
\end{tabular}

BEST PLACE TO CONTACT:
best time to CONTACT:

The following is the transcription of a tape-recorded interview conducted by DETECTIVE M. SAUNDERS, P\# 06076, LVMPD SEXUAL ASSAULT Detail, on MAY \(29^{\text {TH. }}, 2008\) at 1340 hours.
Q. Hello operator, this is Detective M. Saunders, S-A-U-N-D-E-R-S, P\# 6076, conducting one followup taped interview reference event number 080516-1021.

This interview=s taking place at 6900 North Durango, Las Vegas, Nevada 89149

\section*{CONFIDENTIAL}

LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT PAGE 2

EVENT \#; 080516-1021
STATEMENT OF: LORRAINE WESCOTT
at the Centennial Hills Hospital. Uh, the time is uh, 1340 hours on the \(29^{\text {th }}\) of May, 2008. Present for this interview last name of Westcott, W-E-S-T-C-O-T-T, first name of Lorraine, L-O-R-R-A-I-N-E. Uh, she is the nursing supervisor here at Centennial Hills Hospital. Uh, work phone number here is 629-1189. Is that information I just read true and correct?
A. Um, except you spelled my name wrong.
Q. I=m sorry, how do you spell your name?
A. There \(=\) s no \(T\) in the middle.
Q. Oh, there=s no, there \(=\) s no, no \(T\), it is just Wescott, WBW-E-S-C-O-T-T?
A. Mm-hmm.
O. Okay. W-E-S-C-O-T-T. And \(\mathrm{l}=\mathrm{m}\) here to speak with you about the incident that occurred uh, back on the \(16^{\text {th }}\) of uh, May. Um, were you working on that day?
A. Yes iwas.
Q. Okay. In, in what capacity?
A. I was in a subsupervisor.
Q. Okay. And on that morning were you called up to room 725 in reference to talk to a patient by the name of Roxanne uh, Cagnina?
A. Yes I was.
Q. Okay. Can you tell me what that uh, that conversation consisted of?

\section*{VOLUNTARY STATEMENT}
page 3
EVENT \#: 080516-1023
STATEMENT OF: LORRAINE WESCOTT
A. Um, when I went to the room the um, patient was crying. She reported that she had gone to the emergency room and the nurses last that were just wonderful to her. She didn \(=t\) have their phone numbers. On the elevator, on the way up she stated that the male nurse started adjusting her gown under the blanket. After she got into bed he said he=d be back, be back to check on her. She stated that he returned between 7:00 and 7:30 and started to touch her privates areas. She said that he told her how beautiful she was, touched her breasts. He said not to tell anyone, he=d lose his job. She then stated that he stroked her legs. She said he tried to penetrate her with his fingers, she told him no um, then another person came in and I guess he left. She said she called 9-1-1 but didn=t know what to tell them. Um, I asked her to describe the person, she said that he was an older man, white hairBhair and a beard. Um, he had written his number in her checkbook register so she gave me his number. Obviously I tried to comfort her, reassure her.
Q. Mm-hmm.
A. Um, her husband came in so I didn=t have to have anybody sit with her >cause he stayed with her.
Q. Okay.
A. Um, I obviously notified my superiors.

\title{
LAS VEGAS METROPOLITAN POLICE DEPARTMENT
} VOLUNTARY STATEMENT PACE 4

EVENT \#: 080516-1021
STATEMENT OF: LORRAINE WESCOTT
Q. Mm-hmm.
A. Um...and um, I also called the number that she gave me and Steve Farmer answered the phone.
Q. Okay. And, \(I=m\) sorry, Steve Farmer answered the phone?
A. \(\qquad\) the phone.
Q. Okay. And is that who she alleged uh, did this to her or wasBwasB
A. Well I was just checkingB
Q. Bwas this the nurse?
A. Bon the white hair and the beard andB
Q. Uh-huh.
A. Bthe phone number >cause, you know obviously I needed to knowB
Q. Okay.
A. B \(\qquad\) (Both Talking)
Q. Wheswhen Steve answered the phone what did he say?
A. Um, I identified myself and I saidB
Q. Mm-hmm.
A. Byou know um, is this Steve and he \(=s\) like yeah, \(i t=s\) Steve, you know what do you need and I just told him that I was just checking up on him so.
Q. Okay, you just said you were checking up on him?
A. Right.
Q. Okay. Not to alert any suspicion or anything like that?
A. No, I just needed to know and I was likeB
Q. Right.
A. B \(\qquad\) (Both Talking)
Q. Okay. And she said that that the phone number that you called for Steve, that was given to her by the same man who um, was touching her anB
A. Right.
Q. B \(\qquad\) (Both Talking)
A. He had written his number in her um, check register.
Q. Okay. Do you remember what that phone number was that she gave you?
A. It was area code 707-332-5894.
Q. Okay. And did she \(\qquad\) do you remember did she tell you that he actually penetrated her or that he was attempting to penetrate her? OrB
A. Um, my notes have that he tried.
Q. He tried. Okay. Do you, do you ever remember her saying that he=d actually did?
A. No, that=s the only thing. I wrote downs
Q. No. Okay. Butb

STATEMENT OF:LORRAINE WESCOTT
A. Bexactly what she told me.
Q. Bbut it is what she told you. Now did she say this occurred at what time, what time in the morning was it when it happened?
A. She said he came back between 7:00 and 7:30.
Q. Okay. And \(\qquad\) she=s saying that=s when he started doing the touching?
A. No, she said it started on the elevator the night when he brought her up, around 3:00 in the morning.
Q. Okay. All right. And...did she um...didedid she give you a specific time or dosdo you have um, do you know what time it was that she was brought up from the E.R. to her room, do you have, do you remember what time it was?
A. I never got to check but the patient told me it was around 3:00 a.m.
Q. It was about 3:00 a.m..
A. I never thought to check.
Q. Okay.
A.
Q. Okay. And then after she told then you of course ran il up the, youbyou went to your supervisor=s andBand your superiors and made sure that everyone was, was documented in knowing? Okay. Um, have you ever had a probiemshave you ever met uh, Steve Farmer?
A. Yes, I have.
Q. Okay. And you=ve worked with him in the past?
A. Um, he=s the night shift \(l=m\) the day shift so obviously \(\qquad\) checked in the office, \(I=v e ~ n e v e r ~ w o r k e d ~ w i t h ~ h i m . ~\)
Q. Okay, you=ve just seen him in passing basicallyb
A. ___ (Both Talking)
Q. Bbut you were aware of who he was?
A. Yes.
Q. ___ has there ever been any other complaints against him that you were aware of uh, prior to this incident?
A. No.
Q. No. Okay. Um, all the other nurses get along with him and no problems with him?
A. It seems um, that everyone really, you know enjoyed working with him.
Q. Okay. All right. Um, is there anything else that you can think of that can assist me in my investigation as \(!=m\) following up other leads on Mr. Farmer? Anything that I forgot to ask you that you think might be important?
A. (Pause) Nope, I don=t think so.

\title{
LAS VEGAS METROPOLITAN POLICE DEPARTMENT
}

\section*{CONFDENTAL} VOLUNTARY STATEMENT

Page 8
EVENT \#: 080516-1021
STATEMENT OF: LORRAINE WESCOTT
Q. No. Okay. All right. Operator, this will end the interview, the time is uh, 1345 hours on the \(29^{\text {th }}\) of May, 2008. Same people present. Same location.

THIS VOLUNTARY STATEMENT WAS COMPLETED AT 6900 NORTH DURANGO, LAS VEGAS, NEVADA 89149 ON THE \(29{ }^{\text {TH }}\) DAY OF MAY, 2008 AT 1345 HOURS.

MS:az

SPECIFIC CRIME: SEXUAL ASSAULTI OPEN AND GROSS LEWDNESS
DATE OCCURRED:
TIME OCCURRED:
LOCATION OF OCCURRENCE:

CLARK COUNTY

NAME OF PERSON GIVING STATEMENT: KAREN GOODHART
\begin{tabular}{|r|r|r|r|}
\hline DOB: & & \begin{tabular}{r} 
SOCIAL \\
SECURITY :
\end{tabular} \\
\hline RACE: & & SEX: \\
\hline HEIGHT: & & WEIGHT: & \\
\hline HAIR: & & EYES: & \\
\hline \begin{tabular}{r} 
WORK
\end{tabular} & & DAYS OFF: & \\
\hline SCHEDULE: & & & \\
\hline HOME & & MOME PHONE: & \\
\hline WODRESS: & & & \\
\hline WORK & & & \\
\hline
\end{tabular}

BEST PLACE TO CONTACT:

BEST TIME TO CONTACT:

The following is the transcription of a tape-recorded interview conducted by DETECTIVE SAUNDERS, P\# 6026, LVMPD SEXUAL ASSAULT Detail, on May 30, 2008 at 0651 hours.
Q. Hello operator, this is detective M. Saunders, S-A-U-N-D-E-R-S, uh conducting one taped interview reference event number 080516-1021. Um, this interview is taking place at Centennial Hills Hospital at 6900 North Durango, Las Vegas,

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}

\section*{CONFIOENTIAL} PAGE 2

STATEMENT OF: KAREN GOODHART
Nevada 89149 . The date is the \(30^{\text {th }}\) of May, 2008, at approximately 0651 hours. Present for this interview last name of Goodhart, G-Q-O-D-H-A-R-T, first name of Karen, KAREN. Her date of birth is 07-12 of 59 . She has a work phone number of 629-1211. Is that information true and correct?
A. Correct.
Q. Okay. Is it alright if I call you Karen?
A. Yes.
Q. Okay. Um Karen, I wanted uh direct your attention back to an incident that occurred on the \(16^{\text {th }}\) of May. Um, involving another nurse that you were on shift with by the name, or is he the CNA?
A. CNA, yes.
Q. CNA. Yes, by the name of Steven Farmer, Do you know who \(I=m\) referring to?
A. Correct, yes.
Q. Okay. Um, on the morning in question uh, you=re aware that uh Steven had been arrested for um, for uh sexual assaulting a patient. And that patient uh, her name was Roxanne Cagnina.
A. Right.
Q. Is that correct?
A. Yes.
Q. Okay. Did you have um, were you working with Steven on that morning and also helping give care to Roxanne?
A. I was taking care of Roxanne. Steven came in to transport the patient. He checked in on the patient every now and then. But basically I did the major portion of her care.
Q. Okay. And she came in for \(B\)
A. Seizures.
Q. Seizures. Okay. And she was, I take it she was given more medication while she was here and everything else was \(\qquad\) ?
A. Correct.
Q. Okay. When, do you remember what time it was when Steven actually removed or took her from the ER area up to the seventh floor?
A. No, I would have to look at the chart to refer back to the time that I wrote for the transfer.
Q. Okay.
A. I know that it was before seven A.M.
Q. It was before seven A.M. huh? Okay.
A. I can tell you that much.
Q. Okay. If we needed to look at those charts, are they still available?
A. I believe they would be in Medical Records.

\section*{COVFDEMTAL}

EVENT \#: 080516-1021
STATEMENT OF: KAREN GOODHART
Q. They \(=d\) be at medicalB
A. Bas far as \(\mathrm{l}=\mathrm{m}\), as far as 1 know , iB
Q. Okay. Um, when Mr. Farmer took her upstairs um, how long, how long is an average trip to take somebody from the ER to a room and to come back, on average?
A. I average probably ten to fifteen minutes.
Q. Okay. And on this particular morning, was, how long do you think Mr. Farmer was gone for?
A. It seemed like he was gone for a long period of time, thirty to forty minutes, maybe. Maybe even longer. This is, uh, \(I\), he did not come back down until close to seven \(0=\) clock.
Q. You think it was close to se, okayb
A. Because I had, I know I had set it up somewhere between five-thirty and six-thirty and I sent her up. Like I said for the exact time, I really don=I know.
Q. Okay. And, it just seemed to be quite a while?
A. It, it just seemed to be quite a long time.
Q. Okay.
A. I saidB
Q. Is that unusual?
A. It can be. For the most part, if the patient=s awake and alert and they=re able to move themselves and get to whoever upstairs and into the room, as far as I know from other transports that I have been on here in this facility since, and Inve been watching Peter move these patients up and he=s back down in a flash. It=s like I haven \(=\mathbf{t}\) seen any issues.
Q. How is Mrs. Cagnina=s um, did she have any motor skills that would be able to assist him in helping herself moved from a Gurney to a bed?
A. She would have been very sleepy but her motor skills should have been fine. She did have pain medication prior to going up that would have made her very drowsy.
Q. Okay. Have you ever heard of any allegations or have you ever seen anything that has caused you concern or maybe cause concerning working with Mr. Farmer in the past?
A. No because \(I=\) ve only been, \(I=m\) very new at this facility, so basically that was my first day, first time ever you know, being in his presence.
Q. Okay.
A. I don=t, would not have known him.
Q. Got ya. Um, how=s Mr. Farmer=s um, what was his personality. I mean was he gruff, was he polite, was heb

\section*{PAGE 6}

\section*{CONFIDENTAL}

EVENT \#: 080516-1021
STATEMENT OF: KAREN GOODHART
A. Very polite, very nice gentleman. From what everybody else told me he was very gentle and caring and that=s what I was told. It=s like and very, wanted to make sure he was in there doing his job and let him know if we needed anything.
Q. Okay. So he took her, you think it was some time five-thity, six-ish (both talking) you think. I know it=s been several weeks (both talking).
A. Yeah, really oh I couldn=t even told you that morning what time I sent her up.
Q. Okay. You just remember sending her up and that he was gone and it seemed to be an extended period of time?
A. Correct.
Q. Um, when he came back down, did he say anything?
A. Just that um, she was sleeping, he had to wake her up and it took him a while he needed to find an IV pole and trying to get the nurse into the room.
Q. Okay. And did he say which nurse he was trying to get in to the room?
A. No. Just the, it would have been the primary care nurse for that floor, that shift.
>Cause it still would have been night shift nurses up on the ninth floor, \(\qquad\) floor
\(\qquad\)
Q. Okay. Is that, okay, so nurses are already up there on the floor. Is it, is it uncommon for the nurses for him to have to actually go locate a nurse to let them know that he needed, he needs them in the room?
A. No that would not be uncommon. Most the time you would have to, you=d put the call light on wait.
Q. Mm-hmm.
A. Sometimes if they see you come up, they will be there or whatever but most the time you =d have to get their attention.
Q. Okay.
A. Go find them. And they, you know, they could be in the room. I=m not sure what their nurse to patient ratios are upstairs and how many nurses they have, sob
Q. Okay, um, so when you came back downstairs everything just seemed fine, other than the fact that he was gone, it seemed to be for an extended period?
A. Yeah, right.
Q. Okay. Make any comments to anything?
A. That just, that he had to wake her up and stuff.
Q. Okay.
A. >Cause she was quite comfortable when she went upstairs.
Q. Did um, when did you first hear about the allegations?
A. At, whatever time in the morning you guys called me.
Q. Well, when I first called you and left a message?
A. Yes. Yes.
Q. Okay. So it was ten-thirty, eleven in the morning I think, somewhere in thereB
A. Yeah. That=s B
Q. I left a message. Okay.
A. No actually I had talked to you >cause the phone was at the head of the bed. So, but it was, so somebody called and the phone rang. No I guess it, scause my husband did, I think there was a second call or something.
Q. I think I called your CB, uh I had two different phone numbers for you, I called one (both talking)B
A. One on the cellib
A. Okay. The first. the home phone when you called, that \(=\mathrm{s}\) when.
Q. Okay.
A. Yeah, the cell phone I leave out of the room.
Q. Okay. Did um, have you ever heard or did anybody ever tell you about any other um, inappropriate things that Mr. Farmer=s ever done?
A. No sir.
Q. Ever had any other complaints?
A. No.
Q. Okay. Is there anything else you can think of that might be beneficial to me with my investigation as far as uhb
A. No because it \(=s\) like I didn=t even tet him, like when I had her use the bed side commode and the bedpan, I took care of that because I=m not gonna let a male when I got time to do it.
Q. I understand.
A. So, you know, he wasn=t going in the room except for um, I took her off the monitor and he said that was his job to take her off the monitor. But you know, l, as like well 1 already got it. Like, that \(=s\) what I do.
Q. Right. >Cause you \(=\) re the primary nurse and he=s more the assistant.
A. Just \(\qquad\) for the most-part, they do. They take them off the monitor=s thernselves and roll them upstairs.
Q. Did he seem upsel by that?
A. Yes, maybe it was a little \(\qquad\) that was his job to do that. You know he was, to take care of everything and it \(=\mathrm{s}\) like, \(\mathrm{I}=\mathrm{mB}\)
Q. Okay.
A. \(I=m\) a primary care nurse. I don=t, \(I=m\) not used to anybody doing something else.
Q. Working your patient?
A. Right.
Q. You take care of yours

\title{
LaS vegas metropolitan police department VOLUNTARY STATEMENT PAGE 10
}

CONFDENTAL

EVENT \#: 080516.1021
STATEMENT OF: KAREN GOODHART
A. I take care of my patient.
Q. Got ya. Okay, um, so you found that a little odd that he would be so direct about the IV thing?
A. Maybe a little bit but you know, nothing that I would B
Q. Nothing that, hind sight is twenty-twenty of course, but at the time?
A. At the time, no.
Q. Okay, alright. Um, anything else you can think of?
A. No.
Q. Okay. Operator, this will end the interview. The time is approximately seven \(0=\) clock on the \(30^{\text {th }}\) of May. Same people present. Same location. Thank you.

THIS VOLUNTARY STATEMENT WAS COMPLETED AT 6900 N. DURANGO ON THE \(30^{\text {TH }}\) DAY OF MAY, 2008 AT 0700 HOURS.

MS:Ic

LOCATION OF OCCURRENCE:
CITY DF LAS VEGAS
CLARK COUNTY

NAME OF PERSON GIVING STATEMENT: MURRAY CHRISTINE
\begin{tabular}{|c|c|c|c|}
\hline DOB; & & SOCIAL SECURITY \#: & \\
\hline RACE: & & SEX: & Female \\
\hline HEIGHT: & & WEIGHT: & \\
\hline HAIR: & & EYES: & \\
\hline WORK SCHEDULE: & & DAYS OFF: & \\
\hline HOME ADDRESS: & 3350 N. Durango \#1120 Las Vegas, Nevada 8S149 & HONE PHONE: & 734-624-2755 \\
\hline WORK ADDRESS: & & WORK PHONE: & \\
\hline
\end{tabular}

BEST PLACE TO CONTACT:
best time to CONTACT:

The following is the transcription of a tape-recorded interview conducted by Detective M .
Saunders, P\# 6076, LVMPD Sexual Assault Detail, on 06/13/2008 at 0635 hours.
Q. Good morning, Operator, this is Detective M. Saunders, S-A-U-N-D-E-R-S. A conducting one taped interview reference event number 080516-1021. This interviews taking place at 6900 North Durango Las Vegas, Nevada 89149. VOLUNTARY STATEMENT PAGE 2

EVENT \#:080516-1021
STATEMENT OF: MURRAY, CHRISTINE
Centennial Hills Hospital, sixth floor, um, nurse, nurses supervisors room. A it is approximately 0635 hours on the thirteenth of June, 2008. Present for this interview um, last name of Murray, M-U-R-R-A-Y, first name of Christine, C-H-R-I-S-T-I-N-E. Date of birth of 04-0-or, 04/20/1950, a address of 3350 North Durango Drive \#1, 120 Las Vegas, Nevada 89129. She has a contact phone number of 734- a 624-2755. Is that information true and correct?
A. Um-hum, yes it is.
Q. Okay. And is it alright if I call you Christine or -
A. Chris is fine.
Q. Chris is fine, okay.
A. Um-hum.
Q. Um, Chris, I=m here to speak to you about an ongoing investigation that I have urn, a reference a CNA that a was arrested out of this hospital. Are, are you familiar with what \(\mathrm{I}=\mathrm{m}\) talking about?
A. Yes, lam.
Q. Okay. And do you know the name of that individual?
A. Yes.
Q. That CNA?
A. Steve Farmers.

\title{
LAS VEGAS METROPOLITAN POLICE DEPARTMENT
} VOLUNTARY STATEMENT page 3

CONFDENTIAL

EVENT \#:080516-1021
STATEMENT OF: MURRAY, CHRISTINE
Q. Okay. And I wanna direct your attention back to the sixteenth of May, a 2008. Were you working that night?
A. Yes, I was.
Q. In which capacity were you working?
A. Registered nurse.
Q. Okay.
A. On the seventh floor.
Q. On the seventh floor. And that, that particular morning did you have a patient brought up from the ER by the name of Roxanne Cagnina (phonetic)?
A. Yes, I did.
Q. Okay, and do you remember, by chance, what room number she went into?
A. I believe it was 727.
Q. 727, okay, it could of been 725 ?
A. Yes.
Q. Okay, 725 , okay. Um, when she was brought up, um, can you, can you explain to me the, the details um, of the first time that you had contact with her. As, as best you remember.
A. With her?
Q. Well, yes, we=\|l, we=ll get back to Mr. Farmer.
A. Okay.

LAS VEGAS METROPOLITAN POLICE DEPARTMENT VOLUNTARY STATEMENT PAGE 4

EVENT \#:080516.1021
STATEMENT OF: MURRAY, CHRISTINE
Q. But we just, like what time was she brought up to the floor, that you remember?
A. She came up to the floor about four-wenty. The first that I saw her was when myself and the CNA, Corine, walked in. We had been told that she had, had seizures. So we wanted to a pad the bed rails. We found um, Mr. Farmer, walking her into the bathroom. We said, we would take it from there and he left immediately. And we walked her back, back to the bedroom. Back a, to the bed, after.
Q. Okay. Did she say anything to you after Mr. Farmer left? Did she appear distraught, distressed, anything?
A. She seemed confused. A when somebody has a lot of a drugs in them -
Q. Um-hum.
A. -a like that. Um, she did say, when we were walking her back, from the bathroom to the bed, are, is it all girls here? And we said, yes. And she said, on good, I wanna pull my gown this way so when \(I\) sit down, \(I\) don=t choke myself. Which a lot of people do.
Q. Okay.
A. And so we said, oh yes, it=s all girls here, you go right ahead. And she did and then she got into bed.
Q. Okay. Um, when she was first brought, you say she got in, in about four-twenty. Was that the first time you physically saw her or did you see him like coming off the elevator with her at four-twenty?
A. No, that was the first time I saw her, in her room, was the first time I saw her.
Q. Okay. Saw her, okay. And how did you know that she was a put into her room? She was brought-
A. Because - well, I was standing in another patients room, speaking to the family members.
Q. Um-hum.
A. Mr. Farmer came into the other patients room and told me that the patient he had just brought up and put in a room twenty-five was um, on a lot of drugs, pain killers and such and that she was kinda loopy and that she wouldn=t notice if I didn=t come right over there to see her.
Q. Okay. And is that common? Has he, has he ever -
A. 1 -
Q. - done something like that before?
A. I had never had him do that before.
Q. Okay, and how long would you say, I know you didn=t work directly with him, but how often, a how long have Mr. Farmer - had you seen Mr. Farmer at the hospital?
A. I=d say for at least two months on and off, you know, cause we work different days but \(I=d\) seen him around quite \(a\) bit.
Q. Right. Okay, so he=d been there awhile?
A. Yea.
Q. And that was the first time he ever made a comment to you like that about a -
A. Yes.
Q. -a patient.
A. Yes.
Q. Okay, did you find that odd?
A. I found that strange, first of all, cause their not supposed to just walk into another patients room. You=re nol supposed to walk into a patients room unless you have business in there. And he didn=t have business in there, he could of told that to my charge nurse.
Q. Okay. Um, at um, okay and he told you \(\qquad\) that, that she=s ready, ready to go be seen and then when you went in, um, in the room that=s when you found him about to take her to the bathroom and you guys -
A. He actually was walking her into the bathroom.
Q. Okay. Was she exposed in any way?
A. No.
Q. Okay. Um, and that was at, you said about four-twenty.
A. Um-hum.
Q. Okay.
A. Yes.
Q. And what time, do you, do you recall what time that you annotated on your notes, for arrival?
A. A around a quarter to five.
Q. Okay. And is, would this um, \(1=\mathrm{m}\) gonna show you this paper right here and it=s a - it=s a, looks like nurses notes.
A. Um-hum.
Q. It=s um, given to me by Centennial Hills. It says, 0445 a, patient to floor on stretcher. A vi.., \(\qquad\) -
A. Vital signs stable.
Q. Okay. Heavily sedated, needed assistance to walk to bathroom, stated my headache is still not gone.
A. Um-hum.
Q. Okay. Alright. Now, did she disclose or she say anything to you at that time about anything that a, a might of happened to her or occurred?
A. No.
Q. And did she seem distressed or scared?

EVENT \#:080516-1021
STATEMENT OF: MURRAY, CHRISTINE
A. No, she seemed, the thing that she seemed the most was distress cause her headache. She had come in with a headache, she \(=d\) had it for a couple days. And that was the one thing, she said it doesn=t seem to matter what their, they=re giving me, its s not getting rid of this headache.
Q. Okay. Alright. So, um, you had made a comment to me earlier that a - when you were \(\qquad\) the gur.., the gurney was outside the door .
A. Um-hum.
Q. Can you explain that to me? What, what was the -
A. When he came to me and I finished talking to the patients.
Q. Um-hum.
A. The other patients and a it took me, \(\mathrm{l}=\mathrm{d}\) say, three to five minutes to finish up there and walk around where her room was.
Q. Um-hum.
A. It was on the other side. And I noticed his gurney was still there, which surprised me because our transport people usually bring the person up. Get them into the bed as quickly as possible, and then get back downstairs because we don=t have a lot of transporters and we, their usually called on their walkie talkies, like come on down. We=ve got somebody else to transport. So you usually don=t see a gurney and a trans.., and a transporter hanging around.
Q. Okay.
A. So when we walked in and we saw him, and we said, we would take over from here - a Corrine and \(I\), the CNA. He um, disappeared. He like grabbed the gurney and went.
Q. Okay. Cause normally he did, he wouldn=t of even been there, he would of already -
A. Right, right, he would of gotten her into the bed, handed her the call light, and showed her how to use it, and been gone.
Q. Okay. And was that um, and that was at about, what time do you think, four-twenty?
A. Probably about, yea, around four-twenty.
Q. Okay. Um, lets see, \(\qquad\) . Um, as far as, well, \(\qquad\) well, back to that. Did um, at about seven a.m, did you go and check on the patient again?
A. No, I had been in there around six-thitity. Al was trying to find out if she had had a seizure, I was trying to a anticipate what her - um, her needs were for the next shift when they were coming on.
Q. Yea.
A. If she needed anymore medicine or if she could have anymore medicine. At about six-thirty, she seemed like she was kind of dozing off so, I didn=t wanna interrupt VOLUNTARY STATEMENT

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EVENT \#:080516-1021
STATEMENT OF: MURRAY, CHRISTINE
her. Cause sometimes sleep will get rid of the headache. So, I left her about six-thirty and I, I did not see - I was not looking toward her room.
Q. Okay.
A. The majority of my patients were on the other side.
Q. Okay.
A. So, I really didn=t ch.., I figured she had gone to sleep. We weren=t gonna disturb her.
Q. Okay. Do you ever recall seeing Mr. Farmer back up on the floor, anytime between six-thirty, seven \(0=\) clock?
A. No, I do not.
Q. Okay.
A. But then I wasn=t looking for him.
Q. Did, has any other nurses or anyone else said anything to you that they saw him at about seven \(0=\) clock, standing in her room?
A. No.
Q. Walked in on, \(\qquad\) .
A. Nobody mentioned that to me.
Q. Okay. Um, did-when did you first find out about the allegations of that, the patient Roxanne Cagnina, had against Mr. Farmer?

\section*{CONFIDENTAL} VOLUNTARY STATEMENT
A. When I woke up the next day and there were a couple messages from you, on my phone, and I called you because of course, the first thing I thought was my daughters, my granddaughter.
Q. Okay.
A. Those were the things I thought because nobody had the courtesy from here, to call and say that something had happened and they had given you my telephone number. Which I was really upset about.
Q. Okay. Youtre -
A. Not that I gave you the number -
Q. Right.
A. -but that they didn=t call me and tell me so 1-
Q. That they didn=1 bother to no..., notify you on -
A. Yea.
Q. -on what was happening.
A. Yea.
Q. Did um, okay. On a - did Ms. um, Cagnina, at any time, make any disclosures to you about anything that Mr. Farmer had done to her?
A. No, she did not.
Q. Okay. Alright. And can, what are - well let me, let me back up. You had made a comment earlier um, that he seemed to be very um, attentive.
A. Um-hum.
Q. Can you, can you go over those details with me. What, what was it that you o..., you observed about um, Mr. Farmer?
A. Well, when he brought a patient up, if they had to have a \(\qquad\) on, he would offer to put the \(\qquad\) on. Which means of course, you know, behind the chest and a they have to go on the rib cages. So of course, on women it=s usually, you have to move the breast to put the, underneath the breast and stuff. He would always say, oh I=il do that for you, you know, and you do what you have to do. He was always very complementary to everybody. He was always willing to do something extra if you wanted to. Very um, you know, just very helpful. He just wouldn \(=1\) -
Q. Did it seem to be more for female patients or any patient?
A. Actually, I think it was more for female patients.
Q. Okay, and when you say he had to put on the to... \(\qquad\) -
A. Um-hum.
Q. how many, how many points of um, these, these leads?
A. There \(=\) s five leads.
Q. There=s five leads.
A. On our portable monitors, \(\qquad\) .
Q. And there=s, so one on basically on top of a, a below the clavicle -
A. Right here.
Q. -above, above the breast.
A. Yea, by the belly area here.
Q. And then two, one under each side of the breast -
A. Right.
Q. -and then one in between the breast.
A. Right.
Q. Okay. And he always seemed more than willing to -
A. Oh, \(I=\| l\) put that on for you, yup.
Q. Did um, as far as his job, um, \(a\) is - where a CNA is concerned, does that normally does, when somebody puts on the \(\qquad\) is that usually conduc.., um, completed by a nurse?
A. No, we do have the CNA=s do that.
Q. \(\qquad\) (inaudible, both talking).
A. So, see that=s not really out of the realm of his responsibilities.
Q. Um-hum.
A. So, nobody thought anything of it.

EVENT \#:080516-1021
STATEMENT OF: MURRAY, CHRISTINE
Q. Okay. Would, does CNA duties change from floor to floor? Like if somebody, like would ER have their own set of, of things that CNA=s can do and things that they can=t as compared to a CNA that was assigned to \(a\), a floor for recovery?
A. I think they would, yes.
Q. Okay.
A. I=m not positive.
Q. Umhum.
A. Because I=ve never worked ER. Um, but I would think they would because that=s the first assessment is to \(\qquad\) first everything that their coming in and their usually pretty serious down there.
Q. Oh, okay. Um, can you think of anything else that I didn=t ask you or I might not be aware of that you feels important, that might assist me in my investigation of something that I need to be made aware of?
A. The only thing I can think of like I said, is the older lady that he did the one to one sittings with.
Q. Um-hum.
A. Which means that the doctor ordered for somebody to be in the room with her at all times. He was in there, on the evening shift, it was dark because he has the lights out. The door was closed. Which usually for a one to one, I, if I had been the
nurse, which I wasn=t. I would want the door open. I wanna see what=s going on. But we did hear her yelling. I don=t want you by me, get outta here. And we thought, she=s a little crazy.
Q. Um-hum.
A. She=s a little crazy, old lady, that=s why she has the sitter.
Q. Um-hum.
A. So we didn=t put any credence into what she was saying.
Q. Okay. Do you remember when that occurred?
A. Idon=t.
Q. Okay. Before or after this incident, that we =re talking about?
A. Before. Before.
Q. Okay. A couple of weeks, couple of days?
A. A it had to be more toward the beginning of when we opened up because it was on the sixth floor here and we didn=t open the seventh floor until about two in a half, three months after we opened. So, obviously, it have to be probably in February or March, something like that.
Q. Okay. Do you remember what she was um, in for, what that victim -
A. I don=t know.
Q. -or \(\qquad\) the patient, \(\qquad\) .
A. Cause I, you know what, I never had her as a patient.
Q. Okay.
A. So.
Q. Um, ever observe or see anything else that just didn=t seem right with you? A anything that Mr. Farmer ever did that was, a out of the scope or realm of his duties or anything else that just appeared - professional. From, from your professional opinion and, and your knowledge of the, the nursing field. Of something that he wasn=t doing that was correct with patients?
A. No. But you know what, I didn=t pay much attention to him.
Q. Okay. Alright. Is there anything else?
A. No.
Q. Okay. Operator, this will end the interview. The time is approximately 0649 hours, on the \(13^{\text {th }}\) of June, 2008. Same people present, same location. Thank you.

THIS VOLUNTARY STATEMENT WAS COMPLETED AT 6900 N. DURANGO ON THE \(13^{\text {th }}\) DAY OF JUNE, 2008 AT 0649 HOURS.

MS:st

Date: October 9, 2012

\section*{Forensic Case Report}

\author{
T0: Las Vegas Metropolitan Police Department Forensic Laboratory \\ Attn: Res. Kimberly Murga \\ 5605 W. Badura Ave, \#120B \\ Las Vegas, NV 89118
}

Offense: Sexual Assault

Case Names:
Steven Dale Farmer - [Suspect]
Roxanne Cagnina - [Victim]

Evidence Received:
\begin{tabular}{|c|c|c|}
\hline Sorenson Item \# & Agency Hem: & Description \\
\hline 1 & ACE \(+08031650-1 \mathrm{D}\) & Vaginal swabs \\
\hline 2 & ACE\#06031650-1F & Labial swaths \\
\hline 3 & ACE\#08031650-1E & Face swabs \\
\hline 4 & ACE\#08031650-1G & Relerence - Roxanne Cagnina \\
\hline 5 & ACE\#08031650-1A & Extract from breast swabs \\
\hline 6 & ACE\#08037650-1B & Extract from thigh swabs \\
\hline 7 & ACE \(+08031650-1 \mathrm{C}\) & Extract from reagent blank \\
\hline 8 & B177-1/1 & Right hand finger swabs from Farmer \\
\hline 9 & 8177-1/2 & Left hend finger swabs from Farmer \\
\hline to & 8177-2/5 & Reference - Steven Farmer \\
\hline
\end{tabular}

\section*{Results Conclusions and Opinions:}

Item 1 (Vaginal swabs):
No Y-STR DNA profile was obtained from this item.

\section*{Itam 2 (Lablal swabs):}

A partial Y-STR DNA profile that is nol suitable for comparison was obtained from this item.

\section*{Item 3 (Face swabs):}

A complete mixture of Y-STR ONA profiles from two contributors was abtained from this itern. The majar Y-STR DNA profite oblained matches the Y-STR DNA profle obtained from Steven Farmer. Steven Farmer and his patemal relatives cannot be excluded as a source of the male DNA identified on this item. The major Y-STR DNA profile obtained was observed 4 times in a population of \(\mathbf{1 3 2 4 8}\) individuals. Applying'the \(95 \%\) upper confidence interval results in a frequency of 0.00068 , which is equivalent to approximately 1 in every 1471 individuals. The minor Y-STR DNA profite is attributable to an unkrown male and is suitable for comparison.

Item 4 (Reference - Roxanne Cagnina):
A complete DNA profle that genetically types as female was cbtained form this item.

Hem 5 (Extract from breast swabs):
A partial Y-STR DNA profile that is nol suitable for comparison was oblained from this item.

\section*{Item \(\mathbf{6}\) (Extract from thigh swabs):}

A partial mixture of Y-STR DNA profites from two contributors was obtained from this item. Due to the inability to provide statistical calculations no comparison can be made at this time.

Item 7 (Extract from reagent blank):
No Y-STR DNA profile was obtained from this item.

Item 8 (Right hand finger swabs from farmer):
A complete DNA profie that matches the DNA profile obtained from Steven Farmer was obtained from this item.

Hem 9 (Left hand finger swabs from Farmer):
A complete DNA profile that matches the DNA profile obtained from Steven Farmer was obtained from this item. Analysis for the presence of additional contribulors was inconclusive.

Item \(\mathbf{t 0}\) (Referonce - Steven Farmer):
A complete DNA profile that genetically types as male was obtained from this item. A complete Y-STR DNA profite was also obtained from this item.

Notes:
Las Vegas Metropolitan Police Department Forensic Laboratory requirements were used in the interpretation of the results, per client request.

All submitted items, slides and DNA extracts generated during the course of examination will be returned to the submitting agency.

Should a suspect (end/or elimination standerds) become available, known reference standards (orallbuccal swabs) should be obtained and submitted to Sorenson Forensies for further comparison.

Inconclusive DNA results indicate that possible allelic activity was observed below the laboraiory's analytical threshold or that portions of the DNA profile appear at such low levels that no conclusions can be drawn as to the source.

The DNA extracted from the items listed above was amplified using the Polymerase Chain Reaction (PCR) and typed at the loci D8S1179, D21S11, D7S820. CSF1PO, D351358, TH01, D13S317, D16S539, D2S1338, D19S433, wWA, TPOX, D18S51, Amelogenin, D5S818, and FGA using the ldendifilert Plus PCR Amplification and STR Typing Kit.

The DNA extracted from the items listed above was amplified using the Polymerase Chain Reaction (PCR) and typed at the loci DYS456, DYS389(1), DYS390, DYS389(II), DYS458; DYS19, DYS385, DYS393, DYS391, DYS439, DYS635, DYS392, GATA H4, DYS437, DYS438, and DYS448 using the Y-filerg PCR Amplification and Y-STR Typing Kit.

The haplotype profile frequencies are calculated using the counting method. The US Y-STR Database located at http:/hww.usystrdatabase.org/ was utilized to determine the profile frequency. The following ethnic classifications were included in this population database; African American, Asian, Caucasian, Hispanic and Native American.

Y-STR profiles within a paternal lineage are typically identical. Thus, any Y-STR DNA profile developed in this case would likely include paternal relatives.

Respectfully submitted,


Emily Jeskie
Forensic DNA Analyst It
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\section*{CASE NO.}
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SUPREME COURT OF NEVADA & Aug 17 2016 08:58 a.m. \\
& Tracie K. Lindeman \\
& Clerkof Supreme Court
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HALL PRANGLE \& SCHOONVELD, LLC, MICHAEL PRANGLE, ESQ., KENNETH M. WEBSTER, ESQ. AND JOHN F. BEMIS, ESQ.

Petitioners,
vs.

\section*{EIGHTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA, IN AND FOR THE COUNTY OF CLARK,}

Respondent, -and-

\title{
MISTY PETERSON, AS SPECIAL ADMINISTRATOR OF THE ESTATE OF JANE DOE,
}

Real Party in Interest

District Court Case No.: A-09-595780-C

\title{
PETITIONERS' APPENDIX TO \\ PETITION FOR EXTRAORDINARY WRIT RELIEF \\ VOLUME XV of XVII
}

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KWEBSTER@HPSLAW.cOM JBEMIS@HPSLAW.COM

\section*{APPENDIX TO PETITION FOR EXTRAORDINARY WRIT RELIEF}

\section*{VOLUME XV of XVII}

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& \hline \text { PA0344- } \\
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\begin{aligned}
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\begin{array}{|l|}
\hline \text { PA2250- } \\
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\] \\
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\] \\
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& \text { PA2263- } \\
& \text { PA2269 }
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Re: Liability and Joinder to Defendant \\
Steven Dale Farmer's Limited Opposition \\
filed October 14, 2014
\end{tabular} & I & 6 & \begin{tabular}{l} 
PA0099- \\
PA0112
\end{tabular} \\
\hline \begin{tabular}{l} 
Plaintiff's Exhibit 19 - Petitioners Valley \\
Health System, LLC, d/b/a Centennial Hills \\
Medical Center's and Universal Health \\
Services, Inc.'s Petition for Writ of \\
Mandamus and/or Writ of Prohibition filed \\
April 29, 2015
\end{tabular} & III & 11 & \begin{tabular}{l} 
PA0363- \\
PA0406
\end{tabular} \\
\hline \begin{tabular}{l} 
Plaintiff's Exhibit 20 - Rule 3.3 Candor \\
Toward Tribunal
\end{tabular} & XIV & 69 & PA2857 \\
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\hline Plaintiff's Exhibit 21 - Recorder's Transcript of Proceedings - Plaintiff's Motion for NRCP 37 Sanctions Against Valley Health System LLC d/b/a Centennial Hills Hospital Medical Center and Universal Health Services filed August 4, 2015 & IV & 17 & \[
\begin{aligned}
& \text { PA0581- } \\
& \text { PA0601 }
\end{aligned}
\] \\
\hline Plaintiff's Exhibit 22 - Deposition Transcript of Christine Murray dated January 8, 2015 & XV & 70 & \[
\begin{aligned}
& \text { PA2858- } \\
& \text { PA2880 }
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\] \\
\hline \begin{tabular}{l}
Plaintiff's Exhibit 23 - Deposition \\
Transcript of Sajit Pullarkat dated August 7, 2015
\end{tabular} & XV & 71 & \[
\begin{aligned}
& \text { PA2881- } \\
& \text { PA2896 }
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\] \\
\hline \begin{tabular}{l}
Plaintiff's Exhibit 24 - Deposition \\
Transcript of PMK of Centennial Hills Hospital (Sajit Pullarkat) dated August 7, 2015
\end{tabular} & XV & 72 & \[
\begin{aligned}
& \text { PA2897- } \\
& \text { PA2908 }
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\] \\
\hline Plaintiff's Exhibit 25 - Deposition Transcript of Janet Calliham dated August 18, 2015 & XV & 73 & \[
\begin{aligned}
& \text { PA2909- } \\
& \text { PA2964 }
\end{aligned}
\] \\
\hline \begin{tabular}{l}
Plaintiff's Exhibit 26 - Deposition \\
Transcript of Margaret Wolfe, RN dated May 5, 2015
\end{tabular} & XV & 74 & \[
\begin{aligned}
& \hline \text { PA2965- } \\
& \text { PA2984 }
\end{aligned}
\] \\
\hline Plaintiff's Exhibit 27 - Defendant Valley Health System, LLC’s Responses to Plaintiff's Eleventh Set of Interrogatories dated June 12, 2015 & XV & 75 & \[
\begin{aligned}
& \text { PA2985- } \\
& \text { PA2989 }
\end{aligned}
\] \\
\hline Plaintiff's Exhibit 28 - Defendant Valley Health System, LLC’s Responses to Plaintiff's Tenth Set of Interrogatories dated June 10, 2015 & XV & 76 & \[
\begin{aligned}
& \text { PA2990- } \\
& \text { PA2993 }
\end{aligned}
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Metropolitan Police Department's Criminal \\
file of Steven Dale Farmer bates labeled
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LVMPD00001-LVMPD00190 with \\
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Valley Health System, LLC d/b/a \\
Centennial Hills Hospital Medical Center's \\
Seventh Supplement to Its Initial Early Case \\
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\hline \begin{tabular}{l} 
Plaintiff's Exhibit 30 - Excerpts of \\
Deposition of Carol Butler dated June 9, \\
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Plaintiff's Exhibit 32 - Excerpts of \\
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\hline Plaintiff's Exhibit List from Vault & X & 34 & \begin{tabular}{l} 
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Plaintiff's Motion for NRCP 37 Sanctions \\
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\end{tabular} & IX & 26 & \begin{tabular}{l} 
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Reply to Defendant Valley Health System, \\
LLC d/b/a Centennial Hills Hospital \\
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21, 2015
\end{tabular} & III & 15 & \begin{tabular}{l} 
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\end{tabular} & II & 8 & \begin{tabular}{l} 
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\end{tabular} & VI \& & 22 & \begin{tabular}{l} 
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Transcript of Proceedings - Defendant \\
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Hills Hospital Medical Center and Universal \\
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\end{tabular} & XVII & 83 & \begin{tabular}{l} 
PA3252- \\
PA3305
\end{tabular} \\
\hline
\end{tabular}



\begin{tabular}{|c|c|c|c|}
\hline & A. Yes. Page 9 & & go to North Carolina. Page 11 \\
\hline 2 & Q. Where did you work before Montevista? & 2 & Q. Were you asked to leave North Vista? \\
\hline 3 & A. I worked at Kindred. & 3 & A. It was kind of like they wanted me to, so I \\
\hline 4 & Q. Is that a rehab place? & 4 & gave them a letter of resignation. \\
\hline 5 & A. That's rehabilitation and long-term care. & 5 & Q. Were you asked to resign, as opposed to \\
\hline 6 & Q. Which Kindred did you work at? & 6 & being fired? \\
\hline 7 & A. It's been sold now, but it was on Maryland & 7 & A. Yes. \\
\hline 8 & Parkway right off of Karen. & 8 & Q. Was it one of those kinds of situations? \\
\hline 9 & Q. And what did you do there? & 9 & A. Uh-huh. \\
\hline 10 & A. I was a charge nurse. & 10 & Q. Is that a yes? \\
\hline 11 & Q. And how long did you work there? & 11 & A. Yes. \\
\hline 12 & A. I believe about almost two years. & 12 & Q. What was the confrontation about, in \\
\hline 13 & Q. And where did you work before Kindred? & 13 & general? \\
\hline 14 & A. I was in North Carolina. & 14 & A. It's kind of detailed. My patient had a \\
\hline 15 & Q. What did you do in North Carolina? & 15 & sister who he claimed was a nurse. I was trying to \\
\hline 16 & A. I was a wound care nurse at a & 16 & explain something to him. I asked the sister to \\
\hline 17 & rehabilitation center. & & explain it to him, and he told me I was being rude to \\
\hline 18 & Q. Why did you leave Kindred? & 18 & his sister. \\
\hline 19 & A. Kindred? It was too far to drive. & 19 & Q. Then I guess it kind of escalated, would be \\
\hline 20 & Q. Okay. You left on your own? & & my guess? \\
\hline 21 & A. Uh-huh. & 21 & A. No, he just got really mad. Well, he was \\
\hline 22 & Q. Is that a yes? & 22 & coming out of an alcoholic situation, and some other \\
\hline 23 & A. Yes. & 23 & stuff, and just, you know -- \\
\hline 24 & Q. How long were you living in North Carolina? & 24 & Q. Okay. \\
\hline 25 & A. About a year and a half. & 25 & A. I really shouldn't discuss that. I mean \\
\hline & Page 10 & & Q. Wall I'm 12 \\
\hline 1 & Q. Did you work at the same place? & & Q. Well, I'm not asking for names. \\
\hline 2 & A. Yes. & 2 & A. Okay. Well, all right. So the family \\
\hline 3 & Q. That entire time? & & didn't like it, so they said something about it, so \\
\hline 4 & A. Uh-huh. & & then I got called into the office. \\
\hline 5 & Q. Is that a yes? & 5 & Q. Who was your supervisor at the time? Do \\
\hline 6 & A. Yes. & & you remember? \\
\hline 7 & Q. And what was the name of the place? & 7 & A. Sue. I don't remember her last name. \\
\hline 8 & A. I can't remember. I really can't. & 8 & Q. Is that the person whose office you went \\
\hline 9 & Q. Okay. And why did you leave North & & to? \\
\hline 10 & Carolina? & 10 & A. Yes. \\
\hline 11 & A. Well, I went to North Carolina because my & 11 & Q. And that's when it was kind of decided that \\
\hline 12 & sister lives there, and she was going through a & 12 & you would resign, as opposed to being fired? \\
\hline 13 & divorce. Her children were in college, she was by & 13 & A. Uh-huh. \\
\hline 14 & herself on this farm, and she wanted somebody there. & 14 & Q. Is that a yes? \\
\hline 15 & So when she got things straightened around I decided & 15 & A. Yes. \\
\hline 16 & to come back because my children live here. & 16 & Q. Prior to North Vista where were you at? \\
\hline 17 & Q. Where did you work before North Carolina? & 17 & A. I was at Centennial Hills. \\
\hline 18 & A. North Vista Hospital. & 18 & Q. When did you start working at Centennial \\
\hline 19 & Q. And what did you do there? & 19 & Hills? \\
\hline 20 & A. I was a staff nurse. & 20 & A. When it opened. I believe it was January \\
\hline 21 & Q. How long did you work at North Vista? & & of 2007 or 2008. \\
\hline 22 & A. A year and a half. & 22 & Q. You're not sure which? \\
\hline 23 & Q. And why did you leave North Vista? & 23 & A. I'm not sure which. \\
\hline 24 & A. Actually I had a confrontation with a & 24 & Q. But nevertheless, when it opened, right? \\
\hline & family, and so I thought it was better to leave and & 25 & A. Yes. \\
\hline
\end{tabular}
1 Q. I guess the people who start working there Page 13
2 first say "they opened it." Were you one of those
people that opened the hospital?
A. Yes, I was.
Q. Okay. And what did you do there at
Centennial?
A. I worked on the joint replacement as a staff nurse.
Q. And what do you mean, you worked on the joint replacement?
A. Joint replacement was for hips, knees, shoulders.
Q. Was there a specific area of the hospital that was set aside for that?
A. Yes. The 7th floor.
Q. And were you only working with joint replacement patients?
A. No. You never just work with one. I mean if there's an empty bed and they need a med-surg bed, they throw the med-surg patient in there. So you do both.
Q. And do you recall how many beds the 7th floor was, approximately?
A. 20, on the one-half. There was two halves. This was the only half that was open. This one was
Page 14
not.
Q. Did they call it like north and south, or east and west, or something like that?
A. Yes, they did. I think it was north and south.
Q. So the north was open, the south was closed?
A. Yes.
Q. Okay. Was there a time that the south opened up while you were working there?
A. Not while I was there, no.
Q. And my understanding is you left the
hospital after working there about six months, seven months, or something like that?
A. No.
Q. How long did you work there?
A. I was there a little over a year.
Q. Okay. So on the 7th floor there was about 20 beds that were open, is that correct, while you were working there?
A. Yes.
Q. And do you recall how many nurses were working per shift, approximately?
A. Four.
Q. And when I say "nurses," I'm talking about
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RNs, for the most part.
A. Yes.
Q. You're an RN, right?
A. Yes.
Q. What were the duties of an RN at Centennial
Hills back in -- well, when it opened?
MR. SILVESTRI: Objection. Overbroad.
MR. BEMIS: I object to form. She's
not a 30(b)6 witness.
To the extent that you do know,
you can answer it.
BY MR. MURDOCK:
Q. Well, let me put it this way.
What do you believe your duties
were back in 2008, or when the hospital opened?
A. You would assess your patient. You would
give them their medications. You would do any wound
care that was ordered by the doctor. And usually you
would check on a patient between one and two hours,
to check for pain medication, or to make sure that
they were okay. Plus you do your charting. That's
it.
Q. When you say "give meds," would you also
check IVs, things like that?
A. Yes.
RNs, for the most part.
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Q. When you say "give meds," would you also check IVs, things like that?
A. Yes.

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Q. Were some of your patients hooked up to -is it called telemetry?
A. Yes.
Q. And is that like an EKG type thing?
A. Yes.
Q. And would you set the patient up for their telemetry or EKG stuff?

MR. BEMIS: I object to form. It calls
for speculation. Go ahead and answer, if you know.
THE WITNESS: It would depend. They could come up from ER with it on. The doctor could order it after they had been there for awhile, and you would have to put it on. It would just depend. It was always different.
BY MR. MURDOCK:
Q. Sure. But if the doctor ordered it and you needed to put it on, is that something you, as an RN, would do?
A. Yes.
Q. Would anybody else be allowed to do that on the floor?
A. They shouldn't.
Q. Okay.
A. That doesn't mean they didn't.
Q. When you say "they" shouldn't, who are we

\section*{Page 17}
talking about?
A. Well, I mean --
Q. In general.
A. There are nursing students that might be on
the floor, that could offer to do that.
Q. What about CNAs?
A. I would never let a CNA do that, no.
Q. Why not?
A. Because it's not within their scope of practice.
Q. What does that mean?
A. That means they're not trained to do it appropriately.
Q. What does "scope of practice" mean?
A. It means like I can't order a drug for a person, because it's not in my scope of practice. That's the doctors.
Q. Sure. But you're certainly aware that CNAs -- or at least some CNAs did attach the telemetry leads at Centennial Hills?
A. That would be if the nurse allowed it.
Q. Sure. And I know you never did.
A. No.
Q. That's what you said. But were you aware that some did?
A. Yes.
Q. So what do you believe was within the scope of practice for CNAs?

MR. BEMIS: I object to form. Outside
the scope of her knowledge.
MR. SILVESTRI: I'm just going to
object to overbroad.
MR. MURDOCK: Let me rephrase the
question a little bit.
Q. Would you ever order CNAs to do things, as part of your job?
A. Yes.
Q. What would you order them to do? What type of things would you order them to do?
A. Help me turn a patient. Put a patient on or off a bedpan. Take patient water. Walk by a patient's room and see if they were okay. Give a patient a bath. Help take food trays to a patient, and feed a patient, if the patient needed assistance.
Q. You said one thing that kind of piqued my curiosity a little bit.

You said the CNA could walk by a patient's room to see if the patient was okay?
A. Uh-huh.
sure that they're still in their bed. That's all
that you would ask a CNA to do.
Q. But a CNA could also give the patient a bath?
A. Yes.
Q. The CNA could put a patient on and off a bedpan?
A. Absolutely.
Q. What does that mean?
A. What do you mean?
Q. I know it sounds like a stupid question, but what I'm asking is, how does one go about putting someone on and off a bedpan?
A. You roll the patient over, you slide the bedpan under, you roll the patient back, you put the head up a little bit. Then you give them their call light, so when they're done you can come back and roll them back, take it off, clean them up, and then

Page 20
roll them back to their position.
Q. What do you mean by "clean up?"
A. Wash them.
Q. Where?
A. On their backside.
Q. Anus?
A. Yes.
Q. Vagina?
A. Yeah.
Q. Or penis?
A. Wherever is dirty.
Q. So that's something the CNA was certainly
allowed to do, right?
A. Absolutely.
Q. Now, prior to working at Centennial, where
did you work?
A. St. Rose.
Q. How long did you work there?
A. A year and a half.
Q. Why did you leave St. Rose?
A. Because when I signed up with St. Rose they
were building the southwest campus, and they told me that I would be able to go there.

I was living in Centennial Hills,
I was driving all the way over to Henderson. I was
there a year and a half, and every time I put in for a transfer they said they didn't have a spot. So when Centennial Hills was opening, I went there.
Q. Sure. Now, how long have you been a nurse?
A. Eleven years.
Q. What did you do before you were a nurse?
A. I owned a store.
Q. What kind of store?
A. A small grocery and party store.
Q. Where?
A. Detroit.
Q. How long did you own the store?
A. Six years.
Q. I assume you went to school to be a nurse?
A. Yes.
Q. Where did you go to school?
A. Henry Ford Community College.
Q. And how long did that take?
A. About three and a half years.
Q. Did you do that while you were running your store?
A. No. I did that while I was a CNA.
Q. So you were a CNA before you were a nurse?
A. Yes.
Q. And where were you a CNA?
A. A lot of different places.
Q. Can you give me the city?
A. Detroit.
Q. Detroit?
A. Uh-huh.
Q. And did the job of a CNA in Detroit differ much from the job of a CNA here in Las Vegas?

MR. BEMIS: I object to form.
THE WITNESS: No.

\section*{BY MR. MURDOCK:}
Q. The same things? Washing the patients after they go on and off the bedpan, things like that?
A. Yes.
Q. What did you do before you had the party store?
A. I was a housewife.
Q. For how long?
A. I don't know. About 12 years.
Q. Are you married?
A. Not anymore.
Q. Divorced?
A. Yes.
Q. For how long?
A. 22 years.
Q. You said you have children?
A. Yes.
Q. What do they do?
A. I have a son in Florida who is a manager for Office Max.
Q. Okay.
A. I have a daughter who lives here.
Q. What does she do?
A. She's a sales event manager for Three

Square. I have another daughter who is going to school for a human resources degree.
Q. She's here in Nevada, too?
A. Yes.
Q. She goes to UNLV?
A. Yes.
Q. When you applied to Centennial Hills to work there, how did you do that?
A. I went online and filled out the application, and I got a call to come in for an interview.
Q. How did you know they were looking for people?
A. It was in the newspaper.
Q. And did it say go to a certain website online, or something like that?
A. Well, I knew they were building the
hospital. I wanted to see if they were still hiring people, because it was close.
Q. Sure. So when you went online, were you applying to Centennial Hills specifically or --
A. Yes.
Q. Let me just finish my question.
A. Oh, okay.
Q. -- or was it through the Valley Health

System? Do you remember?
A. No. I believe it was Centennial Hills specifically.
Q. Do you remember seeing the letters UHS on the application?
A. No, I don't remember.
Q. Would it surprise you to learn that it was?
A. No.
Q. So you applied at Centennial Hills, you
went online, and I guess they ask you questions about your past, and names, and all that kind of stuff?
A. Yes.
Q. And did they then call you in for like an
interview, or something like that?
A. Yes, they did.
Q. Do you remember who interviewed you?
A. No, I do not.
Q. And after the interview were you offered a
A. Yes, I was.
Q. Or during the interview?
A. Yes.
Q. Was it during?
A. No, it was after. I got a call.
Q. And did they offer you the job as a staff
nurse, a charge nurse? What did they offer you the job as?
A. Staff nurse.
Q. And did they tell you where you would be working?
A. On the 7th floor.
Q. And is that where you wanted to work?
A. Yes. That was what I was familiar with.
Q. That kind of population?
A. Yes.
Q. And you certainly didn't mind working with med-surg patients either?
A. No.
Q. So you got this job. Did you go through an orientation?
A. Yes, we did.
Q. You said, "Yes, we did." Who is "we?"
A. Well, all of us.
Q. Was it an orientation for everybody?
A. Yes.
Q. How many people?
A. Probably about 20 to 25 .
Q. All nurses?
A. Yes. Because the hospital wasn't open yet.
Q. Do you recall when this was? In other
words, if you started working in the hospital
sometime in February, would it have been like a month earlier, or something like that?
A. Yes. It was in January of that year.
Q. That's when the orientation was?
A. Yes.
Q. Whatever year it opened, right?
A. Yes.
Q. Okay. So at the orientation were you given
like an orientation packet?
A. Yes.
Q. What was in that packet, if you remember?
A. A description of the job, what you were
expected to do, your benefits, what was available,
how much they cost, your pay schedule. What the
hospital stood for, what their -- what's that
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called -- creed, or whatever it was.
Q. What was the creed?
A. I don't remember.
Q. Okay. So you got this packet of stuff. Do you remember who paid you, by the way?
A. Who paid me?
Q. Yeah. Was it Centennial Hills? Was it

Valley Health System, UHS?
A. I really don't remember. I had it direct deposited, got my stub, and I don't know.
Q. Were you allowed to keep those materials?
A. Yes.
Q. At some point did you throw them out?
A. I assume, yes.
Q. And how long did the orientation last?
A. It lasted about a week and a half.
Q. After that week and a half did the hospital open?
A. No. It didn't open for about another week.
Q. So you kind of like had a week's vacation in between?
A. Yes.
Q. Okay. And then the hospital opened, right?
A. Yes.
Q. Now, the day the hospital opened, was there all of a sudden an influx of hundreds of patients?
A. No.
Q. How did that work?
A. They came in through the ER -- some of
them. Some of them were brought in by doctors, sent by doctors.
Q. And let me kind of interrupt you just for a second, and I apologize.

You said you were working on like the joint replacement floor, and were there certain doctors who would admit to that floor?
A. Yes.
Q. Who were they?
A. There was a Dr. Swan, I believe. God, I can't even remember their names. I really don't remember their names.
Q. Okay. And I guess over time you met not just the nurses who you were working with, but also CNAs, orderlies?
A. Yes.
Q. Food service workers, thing like that, right?
A. Yes.
Q. Was there ever a time when you first opened
where they got everybody together the hospital Page 29 nurses, CNAs, everybody, like in one big room and had a talk, or anything like that?
A. No.
Q. So on your first day at Centennial, 1 assume you got to the hospital, you parked, right?
A. Yes.
Q. My assumption is -- and tell me if I'm
wrong -- that they have a special parking area for employees?
A. Yes.
Q. And when you go to that area, how do you get into that parking area?
A. It was open.
Q. It was open. Okay. Did you have a sticker on your car?
A. Yes.
Q. What did that sticker say? Do you remember?
A. It just was a number, and that I was a

Centennial Hills employee.
Q. Were you given a badge?
A. Yes.
Q. And what was on the badge? Do you remember?
A. Your name, what your position was, and then there was an encoded strip on the back, and a picture.
Q. Now, when you first started working there, did the hospital have people working there from agencies?
A. Yes, they did.
Q. And were those RNs as well?
A. Yes.
Q. And what else besides RNs? CNAs?
A. CNAs, yes. That's all I would know. I
wouldn't know about kitchen staff or whatever. All I
know is the nurses and the CNAs.
Q. Do you know where the CNAs would park, the agency CNAs?
A. They all parked where we parked, was my assumption. I don't know.
Q. Okay. Did you have a special area where you would walk into the hospital, as an employee?
A. Yes.
Q. Where would you walk in?
A. In the back. There was a specific door.
Q. What did it say on it? Do you remember?
A. It didn't say anything. It was just -- you were told in orientation that was where you came in.
Q. Was there a time clock there?
A. No.
Q. Did you have to clock in?
A. Yes.
Q. Where was the time clock?
A. Up by the elevators on each floor.
Q. So in other words, when you first started
working at the hospital, you would walk in, you'd park in the employee parking, you'd walk through the
special door, and then you would go upstairs I guess
to the 7th floor, and that's where you would check
in. Is that right?
A. Yes.
Q. And how would you clock in?
A. You would swipe your badge.
Q. What I'm getting at is, it wasn't one of those old-fashioned time clock cards where you have to pull out your name and then clock in?
A. No.
Q. It was all done with this badge, right?
A. Yes.
Q. So you'd just slide it through, right?
A. Yes.
Q. How would you know if an employee -- or if a CNA or an RN was an agency RN, or not?
A. By their badge.
Q. What would the badge say?
A. Well, their badge would be the one provided them by their agency, so it would have the agency's name on it.
Q. Wouldn't it also have the name of the hospital on it?
A. No.
Q. How would you know that they actually
belonged at the facility?
A. Who would come in and work there if they weren't getting paid to work there?
Q. Okay. Now, did you ever meet a CNA by the name of Steven Farmer?
A. No.
Q. You never met him?
A. No, I did not.
Q. Did you ever hear about a CNA by the name of Steven Farmer?
A. The only time I heard was when the allegations came up.
Q. Okay. What is a "sitter?"
A. If a doctor writes an order that a person
needs to have someone sitting there to watch them, due to altered mental status or for some other
\begin{tabular}{|l|l|}
\hline 1 & problem, then you have a CNA or a nurse sitting in \\
23 \\
2 & the room right by the bed watching the patient. \\
3 & Q. Is it kind of like a private CNA or a \\
4 & private nurse? \\
5 & A. It can be a regular CNA or a regular nurse. \\
6 & Whoever is available. \\
7 & Q. Okay. And were there occasions while you \\
8 & were working at Centennial Hills that there were \\
9 & sitters with patients? \\
10 & A. Yes. \\
11 & Q. And as a matter of fact, Steven Farmer was \\
12 & a sitter with a patient, is that correct? \\
13 & A. Yes. \\
14 & MR. SILVESTRI: I move to strike. \\
15 & Lacks foundation. \\
16 & BY MR. MURDOCK: \\
17 & Q. Are you aware that Steven Farmer was \\
18 & assigned to be a sitter with a patient? \\
19 & MR. SILVESTRI: Objection. Lacks \\
20 & foundation. \\
21 & MR. BEMIS: You can go ahead and \\
22 & answer. \\
23 & THE WITNESS: After the fact. \\
24 & BY MR. MURDOCK: \\
25 & Q. After what fact? \\
\hline 1 & A. That he sat. \\
2 & Q. Was that on the 7th floor? \\
3 & A. Yes. \\
4 & Q. And my understanding is that Mr. Farmer was \\
5 & sitting with a patient sometime around February or \\
6 & early March at Centennial Hills when you were on \\
7 & duty, is that correct? \\
8 & A. Yes. \\
9 & Q. And at some point while Mr. Farmer was \\
10 & sitting with the patient, you heard some screams \\
11 & coming from that room. Is that correct? \\
12 & MR. SILVESTRI: I'm going to object. \\
13 & Lacks foundation. \\
14 & MS. HALL: Join. \\
15 & THE WITNESS: It wasn't screams like \\
16 & terrorized, or anything like that. \\
17 & It was somebody who was irritated. \\
18 & Like when you're screaming and somebody wakes you up \\
19 & and you're like, "Leave me alone. Get out of here." \\
20 & That kind of thing. \\
21 & BY MR. MURDOCK: \\
22 & Q. Where was this room, as opposed to where \\
23 & you were when you heard this activity? \\
24 & A. Okay. You have the nurses' station, which \\
25 & is a square. The room was here. I was standing over \\
\hline
\end{tabular}
problem, then you have a CNA or a nurse sitting in the room right by the bed watching the patient.
Q. Is it kind of like a private CNA or a private nurse?
A. It can be a regular CNA or a regular nurse.

Whoever is available.
Q. Okay. And were there occasions while you
were working at Centennial Hills that there were
sitters with patients?
A. Yes.
Q. And as a matter of fact, Steven Farmer was
a sitter with a patient, is that correct?
MR. SILVESTRI: I move to strike.
Lacks foundation.
BY MR. MURDOCK:
Q. Are you aware that Steven Farmer was assigned to be a sitter with a patient? MR. SILVESTRI: Objection. Lacks
foundation.
MR. BEMIS: You can go ahead and
answer.
THE WITNESS: After the fact.
Q. After what fact?
A. That he sat.
Q. Was that on the 7th floor?
A. Yes.
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sitting with a patient sometime around February or
early March at Centennial Hills when you were on
duty, is that correct?
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THE WITNESS: It wasn't screams like
terrorized, or anything like that.
It was somebody who was irritated.
Like when you're screaming and somebody wakes you up
and you're like, "Leave me alone. Get out of here."
Br MUR
Q. Where was this room, as opposed to where
you were when you heard this activity?
A. Okay. You have the nurses' station, which is a square. The room was here. I was standing over
there.
Q. Okay. Unfortunately that's not helpful, so let's see if we can't kind of figure this out here.
A. Okay.
Q. Let's do it this way first.

I'm going to turn you into an
artist right now, so if you could draw the nurses'
station and the room where the screaming was, that would be great.
A. This would be the nurses' station. This would be the room over here. I was standing over here.
Q. Okay. So let's mark a few things on there.
A. Okay.
Q. First of all, where you put the circle
where you said you were standing, could you write in "standing here?"
A. Okay.
Q. And where you marked the room, could you
put the room? Just put the word "room."
A. (Complying.)
Q. I assume you don't know the room number?
A. No.
Q. So basically it was on the other side of the nurses' station, is that correct?

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A. Yes.
Q. So you were on the other side of the nurses' station when you heard this -- let's say "commotion." Would you agree with that?
A. Yes.

MR. MURDOCK: We'll mark this as
Plaintiff's Exhibit 1.
(Plaintiff's Exhibit 1 marked.)
MR. BEMIS: I'm just going to place an
objection that it's not to scale, obviously.
MR. MURDOCK: Of course not. If it
was, I'd be amazed.
BY MR. MURDOCK:
Q. Nevertheless, so you hear the commotion, and at that point do you see Mr. Farmer come out of the room?
A. No.
Q. Okay. What did you do when you heard the commotion?
A. I looked up. I looked over there. The
nurse for that room was approaching the room, so I didn't do anything.
Q. Do you recall who the nurse was?
A. No, I do not.
Q. And after the nurse approached the room and
you looked up, what occurred then?
A. I saw her go into the room. I didn't hear any more commotion. I went back to my job.
Q. Was the door closed to the room?
A. The door was not closed tight, no.
Q. I didn't ask you that. Was the door closed?

MR. SILVESTRI: Objection. Vague.
THE WITNESS: It was halfway open. I
mean you could see into the room. That's how I knew
he was sitting there.
BY MR. MURDOCK:
Q. Was it dark?
A. The light over the bed was on.
Q. Okay. Do you remember speaking to the police?
A. Yes.

MR. MURDOCK: Let's mark this as
Plaintiff's 2.
(Plaintiff's Exhibit 2 marked.)
BY MR. MURDOCK:
Q. Ma'am, l'm showing you what's been marked as Plaintiff's Exhibit 2. Have you ever seen this document before?
A. Yes.
Q. When did you last see this document?
A. Actually I saw it this afternoon.
Q. How did you see it this afternoon?
A. I was reviewing it before I came here.
Q. How did you get it?

MR. BEMIS: Objection. That's all privileged.

MR. MURDOCK: Do you represent her?
MR. BEMIS: Yes, I do. I sent you the correspondence.

MR. MURDOCK: Well, I know you sent me correspondence, but have you been retained as her counsel, or are you just representing her as an employee of the hospital?

MR. BEMIS: As an employee of the
hospital.
MR. MURDOCK: So l'll ask my question
again.
BY MR. MURDOCK:
Q. Did you have a conversation with Mr. Bemis about this document?
A. Yes.
Q. When?
A. Before I came here.
Q. Did Mr. Bemis give you this document?
A. Yes.
Q. Had you ever seen this document before Mr.
Bemis showed it to you?
A. Yes, I did.
Q. When did you see this document.
A. I saw it before I went into court on the
case in the beginning of this. Cagnina, or whatever
her name is.

MR. BEMIS: Let's not say any patient
names.
THE WITNESS: Okay. The former
patient.
BY MR. MURDOCK:
Q. Did you meet with the District Attorney's office in this matter?
A. In the former one?
Q. in the criminal case.
A. Yes.
Q. Was Mr. Bemis there as well?
A. No.
Q. Outside of the District Attorney's office, was anybody else there?
A. No.
Q. Have you ever retained Mr. Bemis in this matter?
A. No.
Q. You spoke with the police about the other matter, is that correct?
A. Yes.
Q. And you gave a recorded statement, is that correct?
A. Yes.
Q. Prior to giving the recorded statement, did you have a conversation with the police?
A. No.
Q. Did you ever tell them about any incidents with Mr. Farmer, before you gave the recorded statement?
A. No.
Q. Now, did you tell the police that

Mr. Farmer seemed more attentive to female patients than male patients?
A. I said that was the way I observed some of his behavior.
Q. I understand that. Okay.

And could you explain that for us?
A. Just that, as I said in here, that he offered to do things for a female patient -- offered to the nurse.
Q. Like what?


\begin{tabular}{|c|c|}
\hline & Your answer is, "The only thing I Page 49 \\
\hline 2 & can think of, like I said, is the older lady that he \\
\hline & did the one-to-one sittings with." Do you see that? \\
\hline 4 & A. Yes, I do. \\
\hline 5 & Q. Now, what did you mean when you said, "like \\
\hline & I said?" Had you told him about this before? \\
\hline 7 & A. No. \\
\hline 8 & Q. So why did you say "like I said?" \\
\hline 9 & A. I have no idea. \\
\hline 10 & Q. Did you tell somebody else about that? \\
\hline 11 & A. We had talked about it between ourselves \\
\hline 12 & the night it happened, yes. \\
\hline 13 & Q. Who did you talk about it with? \\
\hline 14 & A. The other nurses. \\
\hline 15 & Q. Do you recall any names? \\
\hline 16 & A. No. \\
\hline 17 & Q. And you were talking about this incident \\
\hline 18 & with the sitting? \\
\hline 19 & A. Yes. \\
\hline 20 & Q. And your next answer states, "Which means \\
\hline 21 & that the doctor ordered for somebody to be in the \\
\hline 22 & room with her at all times." Do you see that? \\
\hline 23 & A. Yes, I do. \\
\hline 24 & Q. Then you state, "He was in there on the \\
\hline 25 & evening shift. It was dark, because he had the \\
\hline & Page 50 \\
\hline & lights out." Did I read that correctly? \\
\hline 2 & A. Yes. \\
\hline 3 & Q. "The door was closed." Did I read that \\
\hline 4 & correctly? \\
\hline 5 & A. Yes. \\
\hline 6 & Q. So did you tell the police he was in there \\
\hline & on the evening shift, and it was dark because he had \\
\hline & the lights out? \\
\hline 9 & A. Yes. \\
\hline 10 & Q. Did you tell the police the door was \\
\hline & closed? \\
\hline 12 & A. Well, obviously I did. \\
\hline 13 & Q. Okay. Then you state, "Which usually for a \\
\hline & one-to-one, if I had been the nurse, which I wasn't, \\
\hline & I would want the door open. I want to see what's \\
\hline & going on." Did I read that correctly? \\
\hline 17 & A. Yes. \\
\hline 18 & Q. Did you tell the police that? \\
\hline 19 & A. Yes. \\
\hline 20 & Q. Then you stated, "But we did hear her \\
\hline & yelling." \\
\hline 22 & A. Yes. \\
\hline 23 & Q. Do you see that? \\
\hline 24 & A. Uh-huh. \\
\hline 25 & Q. Is that a yes? \\
\hline
\end{tabular}

or not she actually was being assaulted?
A. I didn't have to. Her nurse went in there to see what was going on.
Q. And you never asked the nurse what happened, right?
A. That's not my business.
Q. Okay. Now, did the nurse go into the room?
A. Yes, she did.
Q. If you can, could you describe the nurse
for us?
A. No. I don't remember who the nurse was.
Q. So you can't tell me what she looked like,
or he looked like in any way?
A. No.
Q. Was it a "he" or a "she?"
A. I believe it was a woman, but I'm not positive.
Q. And when you got together, as you said before, all the nurses, when this all came up, when the criminal case came up and you had this
discussion -- you said you talked about this issue
with the sitter. Do you remember that?
A. No.
Q. Well, you said before, when we talked about the sentence here where it says, "The only thing I
can think of, like I said, is the older lady that he did the one-to-one sittings with" --
A. Oh, okay.
Q. You said there was a conversation between you and the rest of the nurses about this incident.
A. That would have been as we were standing at the nurses' desk when the yelling was going on, after the nurse walked into the room.
Q. Do you recall how many nurses --
A. Well, there wouldn't have been more than three, because there was never more than four of us.
And if she went in the room, that left three.
Q. And did any of you have a conversation with that nurse after the fact?

MR. BEMIS: Calls for speculation.
BY MR. MURDOCK:
Q. As far as you know?
A. I have no idea.
Q. You certainly didn't, is that right?
A. I did not, no.
Q. Okay. Outside of hearing the patient yell,
"I don't want you by me, get out of here," did you
hear her yell anything else?
A. No, I did not.
Q. Do you recall her yelling anything else?
3 we didn't put any credence into what she was saying,"
you were talking about when she was yelling, "I don't
want you by me, get out of here." Is that right?
A. Yes.
Q. Okay. Now, this occurred on the 6th floor, didn't it?
A. On the 6th floor?
Q. Yeah.
A. I thought it was on the 7th floor.
Q. Well, why don't you keep reading down on 181. Maybe that will refresh your recollection.
A. Okay. Then yes, it was. We got pulled back and forth, so it's easy to not remember exactly what floor you were on every night.
Q. Now, would the drawing that you made as

Plaintiff's Exhibit 1 --would that be different because it was on the 6th floor, as opposed to the 7th?
A. No. They're all exactly the same.
Q. Okay. Now, then the policeman says to you,
"Okay. Do you remember what she was in for? What that victim?" Then you state, "I don't know."
A. Right.

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A. No.
Q. So just so l'm clear, when you stated, "So
we didn't put any credence into what she was saying,"
you were talking about when she was yelling, "I don't
want you by me, get out of here." Is that right?
Q. You're talking about the --
A. Patient.
Q. - what you termed the little crazy old lady patient, is that correct?
A. The patient, yes.
Q. But that's the patient we're talking about
here, right?
A. Yes.
Q. Now, outside of telling the police about
this -- what you termed "the little crazy old lady,"
and the incident with Mr. Farmer -- did you ever tell anybody else about that?
A. No.
Q. After the incident took place, after the
arrest, and Ms. Cagnina, things like that, did you ever tell anybody at the hospital about this incident?
A. No.
Q. So the first and only time you ever
discussed this patient, the little crazy old lady
patient with anyone, would have been with this detective. Is that correct?
A. No. Wait a minute. The director of nursing called me down and we talked about this, too, after I talked to the police. When she got a copy of
this, I talked to her. And that was it.
Q. Who was the director of nursing at the time?
A. I really don't know.
Q. But the director of nursing called you down after she read the statement, is that correct?
A. Yes. She talked to all of us.
Q. What do you mean, she talked to all of you?
A. She talked to all the nurses that were involved in this.
Q. Did you go through the statement with her?
A. She asked me what happened. I told her what I knew. We didn't pick this up and go through it line by line like we are now, but she knew what was -- I mean she had read it.
Q. Did she ask you about the little crazy old lady patient? Was that something you discussed?
A. You know, I'm not sure. She just asked about what I knew. No, I don't believe we did go through that. We went through the other part, because that was what was coming up.
Q. And outside of me asking you about this little crazy old lady patient, and the detective, has anybody else ever asked you about it?
A. No.

MR. MURDOCK: I don't think I have any
further questions at this time.

\section*{EXAMINATION}

BY MR. SILVESTRI:
Q. Ms. Murray, name is Jim Silvestri. I
represent American Nursing Services. I have just a
couple of follow-up questions for you, if you don't mind.
A. Sure.
Q. When you worked at Centennial Hills

Hospital, did CNAs, certified nursing assistants -did they operate independently of the registered nurses?
A. You mean have their own duties that they did?
Q. Without being told.
A. Yes.
Q. What kind of duties did they have that they
would not need instruction from an RN on, or a doctor on, to perform?
A. Answering lights, walking patients to the bathroom, helping patients clean up if they had become nauseous or if they had an accident. Helping them change their clothes, bringing them stuff they
needed.
Q. So if they went into a room to help
somebody clean up who had thrown up, or maybe went to
the bathroom, typically the light would come on and a
CNA would know to go in there?
MR. MURDOCK: Objection. Speculation.
Go ahead.
THE WITNESS: Yes.
BY MR. SILVESTRI:
Q. Did the CNAs typically just go on random checks and see that people had thrown up or soiled themselves?
A. Not really. Usually you're so busy with the lights you don't have a chance to.
Q. Let me ask you, when you were asked about a sitter, you used the term - - and I don't know if it was a term of art -- altered mental state or mental status.
A. Yes.
Q. Can you just tell me generally what you mean by "altered mental status?"
A. That means a patient who is not thinking clearly enough, to where they can harm themselves, pull tubes out, pull IVs out, pull blood out, whatever. And they can only have a one-on-one with a
doctor's order saying they are not thinking clearly
enough, so that they need to have somebody sitting
there with them.
Q. Did you work with Steven Farmer personally?
A. No.
Q. You were asked about application of telemetry leads.
A. Yes.
Q. And correct me if I'm wrong - and I don't mean to be insensitive about this, or overly invasive -- but a woman that is more endowed is more likely to have her breast arranged such that the telemetry lead can be placed under near the ribcage?
A. Yes.
Q. Do you place telemetry leads on the nipple of the breast?
A. No.
Q. Have you ever done that?
A. No.
Q. Is there any reason to do that, that you're
aware of?
A. No.
Q. Are you aware of any nurses at Centennial

Hills Hospital ever being instructed to digitally penetrate a female patient?

Page 65
MR. MURDOCK: Objection. Go ahead.
THE WITNESS: The only time you would have to -- that would be rectally, and that's only if they're impacted.
BY MR. SILVESTRI:
Q. "Impacted" meaning they're not having a bowel movement?
A. Right.
Q. Have you ever instructed a CNA to digitally penetrate a female patient?
A. No. They're not allowed to do that -CNAs.
Q. Are they allowed to digitally penetrate the vagina?
A. No.
Q. You were being asked questions about this statement that you gave to the police that's in front of you, Exhibit 2.
A. Yes.
Q. Do you recall whether you had an informal interview with that police officer, before you were asked to give a recorded statement? Like, "Can we put this now on tape?"
A. He came in and introduced himself, and then he said, "We're going to put this on tape."

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Q. So no informal discussion before?
A. No.
Q. And then you were being asked some
questions on page 178, and that's the Bates stamp at the bottom, and you were being asked questions about whether Mr. Farmer was helpful or not, offering to help the nurses with whom he worked.
A. Uh-huh.
Q. And I believe your testimony in questioning
from Mr. Murdock was that you overheard him offer to
another nurse to apply the telemetry leads to a
female patient.
A. Yes.
Q. And I have that you heard that one time?
A. Yes.
Q. But you didn't see it happen?
A. No, I did not.
Q. Is that the only time you heard Mr. Farmer make such an offer to another nurse?
A. Yes.
Q. And then this statement that you made where it said, "He would always say, 'Oh, l'll" -- and they've got a little equal sign where there should be an apostrophe, right? "I'll do that for you, you know, and you do what you have to do."'
A. Yes.
Q. Was that comment made by you with respect to him just being helpful in a general way?
A. Yes.
Q. Do you recall specifically other occasions
where Mr. Farmer told another nurse that he would be helpful to a female patient?
A. I know that he had offered to walk somebody into the bathroom, instead of waiting for the nurse to do it.
Q. Okay.
A. The thing is that running around, you just would hear different things. Like you would hear -not just him, but other CNAs, "I can do that for you," and they do it. What exactly they were, I don't know. It wasn't to me. It was to somebody else.
Q. You don't recall the names of some of these people to whom other CNAs were talking or anything?
A. No.
Q. Was there ever a situation where -- or was
it the situation that you felt Mr. Farmer was suspicious?
A. No.
Q. You didn't report him to anybody, did you?

Page 68
A. No, I did not.
Q. If I understand you correctly, you say that
you witnessed one time where he offered to place
telemetry leads on a female patient, and you
witnessed one time where he offered to take somebody
to the bathroom?
A. Yes.
Q. Was that a female?
A. Yes.
Q. Do you recall any other specific instances where he made such an offer to help a female patient?
A. No.
Q. Does a CNA typically apply telemetry leads
without being instructed to do so by a nurse?
MR. MURDOCK: Objection. Speculation.
THE WITNESS: Most of the nurses do
that.
BY MR. SILVESTRI:
Q. Okay. In the situations though that you
witnessed, where a nurse would allow a CNA to perform
that function, has that nurse instructed the CNA to do that?
A. Well, I don't really know, but I would
assume -- just an assumption -- that she would ask
him if they knew what they were doing, first of all.

And if not, then she could show him, if she wanted to. If not, she could just put it on herself. It's much easier.
Q. Are telemetry leads applied only under doctors' orders?
A. Yes.
Q. So you, as a nurse -- can you order that?
A. No.
Q. Can a CNA order that?
A. No.
Q. At a minimum there would have to be a doctor's order?
A. Yes.
Q. You were also then asked questions about this incident on the 6th floor, the woman for whom Mr. Farmer was sitting.
A. Yes.
Q. I didn't quite understand. I think you
said -- I wrote this down, that you said you found out after the fact that Farmer was a sitter.
A. Yes.
Q. So when did you find out that Mr. Farmer was a sitter in this room for this elderly woman?
A. After she was yelling, and then you could see in the door that he stood up and walked over --
kind of like wase like 70 trying to find out what she was yelling about.
Q. So when you say found out after the fact, it was after this yelling that you heard?
A. Yes.
Q. And as I understand it, the yelling was
related to her saying, "I don't want you by me, get out of here?"
A. Yes.
Q. You mention in your statement that the door was closed. Did it appear to be completely closed?
A. No.
Q. It was not completely open?
A. No.
Q. Is that a fair statement?
A. Yes.
Q. Because otherwise it probably would have been difficult to hear what she was saying?
A. Yes.
Q. Especially given the fact that you were on the other side of the hallway?
A. Yes.
Q. You also indicated in the statement that it was dark, but you told us today that you recall a light being on over the bed?
A. Okay.
Q. Hopefully I won't go over anything you've already been asked, and I think I just have a few questions for you.

MR. MURDOCK: And just for the record,
I'm going to object to any questions you're asking,
unless they have something to do with damages or
comparative fault.
MS. HALL: You can object to whatever
you like. I'm still going to ask the questions, but
you're welcome to object to whatever you'd like to object to.

MR. MURDOCK: I'm not so sure about that, okay?

MS. HALL: Well, we're here for Jane
Doe. We're not here for this little lady on the 6th
floor, so l'm entitled to ask the questions that I
have. If you find something objectionable, feel free to object.

MR. MURDOCK: Okay. You've lost liability, so the only question you're here for is damages, okay?

So unless you can tell me your questions relate somehow to damages, I don't know why

BY MS. HALL:
Q. Nurse Murray, in your mind is there a difference between a yell and a scream?
A. Yes.

MR. MURDOCK: Objection.
BY MS. HALL:
Q. Earlier you described what you heard coming from the lady's room on the 6th floor as a "yell," correct?
A. Yes.
Q. I think earlier you also described it as you said she sounded irritated?
A. Yes.
Q. Did you believe she sounded frightened or scared in any way?

MR. MURDOCK: Objection. Speculation.
Go ahead.
THE WITNESS: No. Just like she was irritated that she's being woke up or -- you know, when you're sleeping and you're being told to wake up. Like, "Leave me alone." That type of yelling. BY MS. HALL:
Q. And I think a moment ago when Mr. Silvestri was questioning you, you answered that you saw Mr. Farmer stand up and go over to the bed after the

Page 76
yelling started.
A. Yeah. That's when I saw him. That's how I knew he was the sitter.
Q. So the yelling started first, and then you saw him walk to the bed?
A. Yes.

MS. HALL: Thank you. I have no further questions.

MR. MURDOCK: I move to strike all that. Go ahead.

MR. BEMIS: I don't have any questions.

\section*{FURTHER EXAMINATION}

\section*{BY MR. MURDOCK:}
Q. Let me just go through some of this. Now, you didn't see what Mr. Farmer did before the yelling came from the patient, is that correct?
A. That's correct.
Q. So you have no idea what Mr. Farmer was
doing before the yelling began, is that correct?
A. That's correct.
Q. Now, apparently you think there's a
difference between "yelling" and "screaming." Is that correct?
\begin{tabular}{|c|c|}
\hline \multicolumn{2}{|r|}{A. Yes, I do. Page 77} \\
\hline 2 & Q. Now, in terms of "yelling," you overheard \\
\hline 3 & this "yelling" from -- how many feet away is that, \\
\hline & approximately? As we talked about it on Plaintiff's \\
\hline 5 & Exhibit 1, how far away were you? 10 feet? The \\
\hline 6 & length of this table here? What are we talking \\
\hline 7 & about? The length of this table is about 20 feet. \\
\hline 8 & A. Okay. The length of the table. \\
\hline 9 & Q. So about 20 feet away? \\
\hline 10 & A. Uh-huh. \\
\hline 11 & Q. So you were able to hear with the door at \\
\hline 12 & least partially closed, you admitted today -- \\
\hline 13 & A. Yes. \\
\hline 14 & Q. -- you were able to hear somebody yelling, \\
\hline 15 & "I don't want you by me. Get out of here." Right? \\
\hline 16 & A. Yes. \\
\hline 17 & Q. And again, you had no idea what Farmer was \\
\hline 18 & doing before the yelling started, right? \\
\hline 19 & MS. HALL: Objection. Form. \\
\hline 20 & MR. BEMIS: Form. \\
\hline 21 & THE WITNESS: That's right. \\
\hline 22 & BY MR. MURDOCK: \\
\hline 23 & Q. You have no idea whether he was waking her \\
\hline & up, not waking her up, whether she was waking up, \\
\hline & whether she had been up, or anything like that, \\
\hline & Page 78 \\
\hline & right? \\
\hline 2 & MS. HALL.: Objection. Form. \\
\hline 3 & Foundation. \\
\hline 4 & MR. BEMIS: Join. \\
\hline 5 & THE WITNESS: Right. \\
\hline 6 & BY MR. MURDOCK: \\
\hline 7 & Q. When you stated that you thought the crazy \\
\hline 8 & old lady, as you phrased it, might have an altered \\
\hline 9 & mental state -- you don't have any idea about that. \\
\hline 10 & You don't have any personal knowledge as to whether \\
\hline & or not she was in an altered mental state, do you? \\
\hline 12 & A. She would not have had a one-to-one sitter \\
\hline & by order of a doctor if she was in a clear mind, so \\
\hline & obviously she was in an altered mental status. \\
\hline 15 & Q. So in other words, every person who has a \\
\hline 16 & one-to-one is in an altered mental state, is that \\
\hline 17 & correct? \\
\hline 18 & A. Yes. \\
\hline 19 & Q. Oh, okay. They don't have one-to-ones for \\
\hline 20 & any other reasons? \\
\hline 21 & A. If they're clear-minded they're not going \\
\hline 22 & to pull things out, so no. \\
\hline 23 & Q. Okay. So just so I'm clear, the only \\
\hline & reason -- the only reason -- a patient would have a \\
\hline & one-to-one would be because that patient has an \\
\hline
\end{tabular}
to Metro back in 2008, you told the detective he would always do this. Is that right?
A. Yes.
Q. Do you think your memory was better about this incident back in 2008 than it is today in 2015?

MR. BEMIS: Objection. Form.
Speculation.
THE WITNESS: No. I hardly ever worked with this man, and the "always" is the two times that I worked with him that I knew that he did this.
BY MR. MURDOCK:
Q. But you didn't tell the policeman "two
times." You told him "always," right?
A. Well, that was always to me.
Q. Okay. And of course then you told the
policeman that he was more helpful to female patients
than to male patients, right?
A. In my experience.
Q. Is that just the two patients we're talking
about, or were there more?
A. That's the two patients I know of.
Q. So out of all the patients you saw at

Centennial Hills Hospital, first you used the word
"always," second you tell the policeman, well, you
think he was more helpful to female patients, because
Page 82
you saw him twice. Is that correct?
MS. HALL: Form.
THE WITNESS: That was the patients
that I saw him be helpful with.
BY MR. MURDOCK:
Q. Two female patients.
A. Because we very rarely worked together, yes.
Q. Now, let's talk about the statement a little bit more -- about the telemetry leads.

As you go down the statement it
states, "Okay. And when you say he had to put on the two (blank)" -- you say, "Uh-huh." Question: "How many -- how many points of, um, these leads?" And your answer, "There's five leads."
A. Yes.
Q. Question: "There's five leads?" Answer: "On our portable monitors," and there's a blank, correct?
A. Yes.
Q. Did I read that correctly?
A. Yes.
Q. Then you state, "And there's -- so one basically on top of a, below the clavicle." And your answer is: "Right here." The detective says,
"Above, above the breast?" Your answer is: "Yeah, by the belly area here."

So I guess you're showing him
where the telemetry is, correct?
A. Yes.
Q. Which is basically what you showed us here today, right?
A. Yes.
Q. And then the detective states, "And then two, one under each side of the breast?" Your answer
is: "Right." And the detective states, "And then
one in between the breast?" Your answer is, "Right."
Then the detective says, "Okay,
and he always seemed more than willing to" -- and
then you state, "Oh, I'll put that on for you, yup."
That's what you told the
policeman, right?
A. Yes.
Q. But you're telling us here today that "always" relates to two people.
A. Yes.
Q. But you didn't tell the policeman anything about two. The word "two" isn't in there, is it?
A. No.
Q. Before your shifts did you meet with the

Page 84
other nurses who had the shift before?
A. Yes.

MR. BEMIS: You're speaking at
Centennial, correct?
MR. MURDOCK: At Centennial. I'm
sorry.
BY MR. MURDOCK:
Q. And what is that called?
A. Report.
Q. Report. Would the CNAs be in on report?
A. No.
Q. And the CNAs would answer call lights?
A. Yes.
Q. But the CNAs could also enter in rooms
without the call light being on, right?
A. Yes.
Q. To check on the patients, right?
A. Yes.
Q. And you said before you've never instructed a CNA to digitally penetrate a vagina, right?
A. No.
Q. Have you ever instructed a CNA to wash a vagina?
A. Yes. That's part of a bath.
Q. Have you ever instructed a CNA to clean
\begin{tabular}{|c|c|}
\hline & someone's anus after they've defecated? Page 85 \\
\hline 2 & A. Yes. \\
\hline 3 & Q. And you said yourself you don't instruct \\
\hline 4 & CNAs to put on telemetry leads, but you are aware \\
\hline 5 & that that does occur, correct? \\
\hline 6 & A. Yes. \\
\hline 7 & Q. And you said that putting on a telemetry \\
\hline 8 & lead, you don't need to -- or you don't put a \\
\hline 9 & telemetry lead on a nipple, right? \\
\hline 10 & A. No. \\
\hline 11 & Q. Now, when you're moving the breast of a \\
\hline 12 & woman, is it possible to touch the nipple when you're \\
\hline 13 & moving that breast? \\
\hline 14 & MR. BEMIS: I object to form. \\
\hline 15 & THE WITNESS: It depends on how you do \\
\hline 16 & it. If you just go like this with this side of your \\
\hline 17 & hand and slide it up, no. \\
\hline 18 & BY MR. MURDOCK: \\
\hline 19 & Q. Right, if you do it that way? \\
\hline 20 & A. Yes. \\
\hline 21 & Q. But there are other ways that you could \\
\hline 22 & lift the breast and move the breast and be touching \\
\hline 23 & the nipple, correct? \\
\hline 24 & A. I'm sure there could be. \\
\hline 25 & Q. When you were at Centennial Hills, did you \\
\hline & Page 86 \\
\hline 1 & ever write an incident report? \\
\hline 2 & A. No. \\
\hline 3 & Q. About anything? \\
\hline 4 & A. No. \\
\hline 5 & Q. Did you know how to draft an incident \\
\hline 6 & report? \\
\hline 7 & A. Yes. \\
\hline 8 & Q. How would you have gone about drafting an \\
\hline 9 & incident report? \\
\hline 10 & A. You follow the form. \\
\hline 11 & Q. How do you get that form? \\
\hline 12 & A. You get it from your supervisor or your \\
\hline 13 & charge nurse. \\
\hline 14 & Q. Okay. \\
\hline 15 & MR. MURDOCK: I have nothing further at \\
\hline 16 & this time. \\
\hline 17 & \\
\hline 18 & FURTHER EXAMINATION \\
\hline 19 & BY MR. SILVESTRI: \\
\hline 20 & Q. One thing we didn't ask about, did CNAs put \\
\hline 21 & catheters into patients? \\
\hline 22 & A. No. \\
\hline 23 & Q. Including female patients? \\
\hline 24 & A. No, they did not. \\
\hline 25 & Q. And I'm talking about at Centennial Hills. \\
\hline
\end{tabular}
e's anus after they've defecated?
Q. And you said yourself you don't instruct

CNAs to put on telemetry leads, but you are aware at that does occur, correct?
A. Yes.
Q. And you said that putting on a telemetry
lead, you don't need to -- or you don't put a
elemetry lead on a nipple, right?
A. No.
Q. Now, when you're moving the breast of a
woman, is it possible to touch the nipple when you're
MR. BEMIS: I object to form.
THE WITNESS: It depends on how you do
it. If you just go like this with this side of your
hand and slide it up, no.
Q. Right, if you do it that way?
A. Yes.
Q. But there are other ways that you could
lift the breast and move the breast and be touching
he nipple, correct?
A. I'm sure there could be.
Q. When you were at Centennial Hills, did you

Page 86
A. No.
Q. About anything?
A. No.
Q. Did you know how to draft an incident
A. Yes.
Q. How would you have gone about drafting an
A. You follow the form.
Q. How do you get that form?
A. You get it from your supervisor or your

Q Okay.
MR. MURDOCK: I have nothing further at

\section*{FURTHER EXAMINATION}
Q. One thing we didn't ask about, did CNAs put catheters into patients?
A. No.
A. No, they did not.
Q. And I'm talking about at Centennial Hills.

MR. SILVESTRI: Yes.

\section*{FURTHER EXAMINATION}

\section*{BY MR. MURDOCK:}
Q. The catheters -- you said CNAs don't put in catheters, correct?
A. No, they do not.
Q. Do they ever fix them when they're out of position?
A. No, they do not.
Q. Okay.

\section*{FURTHER EXAMINATION}

\section*{BY MR. SILVESTRI:}
Q. When applying these telemetry leads -whether you're a nurse, Doctor, CNA, or some other person applying leads -- are you aware of anybody who does so where they then fondle the breast and the
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nipple?

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MR. MURDOCK: Objection. Speculation.
THE WITNESS: I have no idea what they do when they put them on.
BY MR. SILVESTRI:
Q. Well, I mean have you ever fondled a female patient?
A. No. I use the side of my arm. I slide the breast up and put it down like that.

MR. SILVESTRI: I have nothing further.
MS. HALL: I have nothing further.
MR. BEMIS: No questions.
MR. MURDOCK: I guess you're done. Oh, you know what? Two things.

What is your telephone number?
THE WITNESS: (702) 743-7043.
MR. MURDOCK: What is your address?
THE WITNESS: 9051 -- oh, God. I just
drew a blank. It starts with an "E."
MR. BEMIS: Is it on your ID?
THE WITNESS: No, it's not. I haven't got it changed yet. I just moved there recently.

Echelon Point Drive, unit 1006,
Las Vegas, Nevada, 89149.
MR. MURDOCK: You have the right to

\section*{review this deposition. You can make any changes to} your answers that you so desire.

I caution you that I or any other counsel in this matter can comment on the fact that you made changes, and that may affect your credibility. Knowing that, you still have a right to review the deposition and make any changes.

If you want to do so, you need to let the court reporter know and she can make arrangements for you to review the deposition and sign. Otherwise you can waive it. It's up to you -and your counsel, I guess.

THE WITNESS: I'll waive it.
(The deposition concluded at 3:05 p.m.)
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17
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19
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21
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23
24



\begin{tabular}{|cc}
\hline 1 & Deposition of Sajit Pullarkat \\
2 & August 7,2015 \\
3 & (Prior to the commencement of the deposition, \\
4 & all of the parties present agreed to waive \\
5 & statements by the court reporter, pursuant to \\
6 & Rule 30(b)(4) of NRCP.) \\
7 & \\
8 & SAJIT PULLARKAT, \\
9 & having been first duly sworn, testified as follows: \\
10 & EXAMINATION \\
11 & BY MR. MURDOCK: \\
12 & W. Would you please state your name for the \\
13 & Q. \\
14 & record? \\
15 & A. Sajit, S-a-j-i-t, Pullarkat, \\
16 & P-u-li-a-r-k-a-t. \\
17 & Q. Mr. Pullarkat, we're going to be taking \\
18 & your deposition basically twice. There may be some \\
19 & rollover between questions and whatnot. We'll work \\
20 & through that. \\
21 & The first part of the deposition \\
22 & is going to be your individual deposition in this \\
23 & case. The second part is where you're being \\
24 & presented on behalf of Centennial Hills Hospital as \\
25 & the person most knowledgeable regarding various
\end{tabular}

\section*{subjects. Do you understand that?}
A. Yes.
Q. Right now we're going to start with your individual deposition. Okay?
A. Okay.
Q. Have you ever been deposed before?
A. Yes.
Q. On how many occasions?
A. Once.
Q. When was that?
A. Probably about 10 years ago.
Q. What kind of case?
A. It was another hospital case.
Q. Here in town?
A. No.
Q. Where?
A. California.
Q. Was it for any hospital related to UHS?
A. No.
Q. You are currently a CEO, is that correct?
A. Yes.
Q. And you are the CEO of what?
A. Centennial Hills Hospital Medical Center.
Q. And who are you employed by?
A. UHS. Universal Health Services.
Q. You are not employed by Valley Health

Systems, is that correct?
A. That's correct.
Q. My understanding is that you were not the

CEO of Centennial Hills Hospital back in 2008, is that correct?
A. That is correct.
Q. My understanding is Mr. Stockton was, correct?
A. Yes. MR. MURDOCK: Off the record. (Discussion off the record.)
BY MR. MURDOCK:
Q. What is a COO? What does that mean?
A. COO is chief operations officer.
Q. And that was back in 2008, correct?
A. Yes.
Q. You were the COO of Centennial Hills Hospital?
A. Yes.
Q. And as COO of Centennial Hills Hospital

Medical Center you were also employed by Universal
Health Services, is that correct?
A. That's correct.
Q. My understanding is -- and this is a new
term I've learned -. that the C-Suite is all UHS personnel, is that correct?
A. That is correct.
Q. It was back then in 2008, and it is now, right?
A. Yes.
Q. What did the chief operations officer do back in 2008?
A. The COO is responsible for general operations within the hospital. They can get involved with construction projects, expansions, development, operating of support and ancillary departments. Those sorts of activities.
Q. If I were to ask you, for example, on a typical day back in 2008 where nothing out of the ordinary occurred at the hospital, what would you do?
A. It could go a number of different ways, but certainly meetings with key department leaders across the hospital.

For typical COOs that is
departments like radiology, rehabilitation services, those types of departments that we would interact with. Meeting with those department leaders to see how we can continue to perform better, look at opportunities for growth, development, as well as
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meeting with physicians for opportunities for growth
and development. And then looking at strategic
opportunities to actually build out the facility.
Q. Would you meet with the rest of the
C-Suites at all?
A. Yes.
Q. Would you have, for example -- maybe not a daily meeting, but a weekly meeting with the C-Suites?
A. I can't remember. It was either weekly or biweekly.
Q. Okay. Where would that meeting take place?
A. Within the administrative offices.
Q. In other words, was there a conference room
there? Did you just meet in one room? Did you go out to lunch?
A. It was a conference room within the administrative area.
Q. And who would meet either weekly or biweekly?
A. All members of the C-Suite, being the CEO, CNO, CFO, COO and AA, which is associate administrator.
Q. Who was the associate administrator back in 2008, specifically May of 2008, if you know?

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A. That was Karen Follis.
Q. I assume you were involved with the
construction of the hospital?
A. Yes.
Q. And there were some pro formas, I assume, prior to the construction starting?
A. Yes.
Q. My understanding is that the hospital opened in January, correct?
A. Yes.
Q. And my understanding is that when the
hospital opened, in terms of community response,
there was a large community response to the hospital, right?

MR. BEMIS: I object to form. Go ahead and answer.

MR. MURDOCK: That was a bad question.
Let me rephrase it.
BY MR. MURDOCK:
Q. There was an influx of patients. Would you agree with that?
A. I guess define "influx of patients."
Q. Well, it filled up pretty fast?
A. It didn't fill up really fast. At opening
we had over 170 beds, so it really didn't fill up
upon opening.
Q. But at opening you had 170 beds, and when did it start filling up?

\section*{MR. BEMIS: I object to form}

\section*{BY MR. MURDOCK:}
Q. I don't mean when it was 169 beds, but when did it start getting busier than you had expected?
A. I honestly don't recall exactly from that perspective.
Q. Did it take six months to kind of get off the ground, and all of a sudden that's when you started seeing those 170 beds fill up?
A. No. I mean we haven't filled up 170 beds until recently.
Q. What was the expectation when you opened, in terms of the number of beds being filled?
A. That I don't know. I don't recall.
Q. Could you give me an estimate?
A. I honestly couldn't off the top of my head.
Q. Do you know what an estimate is, as opposed to a guess?
A. Yes, I do.
Q. But you can't give me one?
A. It would really be hard to estimate.
Q. Well, did you open with 170 beds?
recall.
        MS. HALL: I'm sorry, what did you say?
        THE WITNESS: To the best of my
knowledge, that's what I recall.
BY MR. MURDOCK:
Q. How many beds do you have now?
A. 190 .
Q. My understanding is that in January, when
you opened up, there was only the sixth floor, seventh floor, and I thought ICU. Would I be correct in that?
A. No, it had the sixth, seventh and eighth floors, and critical care, on top of women's services.
Q. So if you know that, couldn't you estimate for me the number of beds you opened with?
A. Well, the number of beds we opened with -like I said, it was around 170.
Q. Well, let me ask you. Maybe it's my stupidity.

If you just opened with six, seven
and eight, and critical care, ICU, does that equal 170 beds?
A. All those floors with women's services,
yes.
Q. Oh, okay. When you opened, did you have enough staff to open?
A. I would say so.
Q. Was it always the intention of Centennial Hills Hospital to use agency staff?

MR. BEMIS: I object to form. Go ahead and answer.

THE WITNESS: I think just like the other 5,000 hospitals across the country, there are various times where hospitals need additional support and they will certainly use agency or other resources.
BY MR. MURDOCK:
Q. I don't care about the other 4,999 hospitals. All I care about is the one hospital.

So what I'm asking is, was it
always the idea to use agency staff?
A. It was never the intention, but again, there are periods of times where either you need to recruit more staff to help out, or you have seasonal spikes in terms of volumes that may hit that may require additional support.
Q. Okay. But you had opened up -- not you yourself, but UHS had opened up numerous hospitals
here in the city. You kind of knew about the flux, I would assume.
A. To a certain extent. Still hospital lines are very hard to predict.
Q. But you know, if McDonald's opens up a McDonald's and they run out of hamburgers, they close down until they get more hamburgers, right? I mean that makes sense.

So guess the obvious question is, if you filled up and you didn't have enough of your staff, why did you go out and hire agency staff? Why didn't you just hire more staff or close down until you got more staff?
A. As a hospital, we obviously recruit through various sources. Sometimes they work, sometimes they don't.

In those cases that they don't, or developing newer staff that come onboard that need to be oriented, those are times where you would use supplemental staffing such as agency.
Q. Okay. Well, as COO did you have any input in the agencies that were going to be used?
A. Not specifically.
Q. Did you know agency were going to be used, as COO ?
A. Yes, we were alerted when an agency was going to be used.
Q. Did you have to approve it?
A. No.
Q. How were you made aware that agencies were going to be used?
A. Agency usage was normally reported through the chief nursing officer at the time.
Q. Now, do you remember the date that Centennial Hills opened?
A. It was in January. I believe it was the 20th.
Q. Let's just make that assumption that's when it opened.

The hospital opened on January 20,
2008. In less than a month Mr. Farmer was being used
as an agency CNA. You're aware of that, right?
A. Yes.
Q. Did you have anything to do with Mr. Farmer being allowed to work at the hospital?
A. No.
Q. Did you go through an orientation at the hospital?
A. Did I go through an orientation at the hospital?
Q. Yeah.
A. Yes.
Q. Who did your orientation?
A. I had to go through another hospital before ours had opened up.
Q. Maybe you misunderstood my question before.

Did you go through an orientation
at Centennial Hills Hospital?
A. I can't remember if I did a separate one.
Q. At your C-Suite meetings did someone take notes?
A. There was not necessarily a recorder.

There was no minutes, per se.
Q. Okay.
A. But the CEO typically ran those meetings.
Q. Was there an agenda?
A. Yes.
Q. And how did you find out about the agenda?
A. There would be discussions either prior to or on that particular day.
Q. Is that something that would be emailed to
you or something like that?
A. It varied. It could be just discussions
within the administrative suite as to what was important to talk about.

\section*{BY MR. MURDOCK:}
Q. That you can think of?
A. I don't know.
Q. For instance, was there a murder at the hospital?
A. No.
Q. Was there a terrorist attack at the hospital?
A. No.
Q. Was there another sexual assault at the hospital?
A. No.
Q. Since May 16, 2008 to this day, has there ever been a sexual assault discussed at a C-Suite meeting?
A. I honestly can't recall.
Q. The typical C-Suite meeting, a typical one -- what is discussed?
A. Key items. Equipment, growth, development, key needs across the organization, quality, patient satisfaction, those kinds of things.
Q. And would you agree with me pretty much at every C-Suite meeting these are discussed? I mean maybe some more than others, but pretty much those are the categories?

Page 20
A. Pretty much, yes.
Q. Are the financials discussed?
A. Not so much. It's more those items I discussed.
Q. But within these items, equipment, growth, development -- and especially growth and development -- that's certainly financial?
A. There's certainly an aspect to it, yes.
Q. If quality and patient satisfaction were a part of these categories, wouldn't you agree with me it's more likely than not that the incident regarding Steven Farmer was discussed at these meetings? MR. BEMIS: Objection to form. Calls for speculation.

THE WITNESS: Like I said before, I can't recall.
BY MR. MURDOCK:
Q. I'm just trying to figure out why you can't recall this. I mean unless it's so common to have sexual assaults at your hospital, l'm trying to figure out how you would not remember that. MR. BEMIS: Objection to form.
Argumentative.
BY MR. MURDOCK:
Q. Can you give me any rationale for that?
\begin{tabular}{|lc|}
\hline 1 & A. I just can't recall. \\
2 & Q. Okay. But of course, the good thing is we \\
3 & don't have to rely on memories because you would take \\
4 & notes, and you watched other people take notes, \\
5 & right? \\
6 & A. (Witness nods.) \\
7 & Q. Is that a yes? \\
8 & A. Yes. \\
9 & Q. So l could go take a look at your notes \\
10 & from back in let's say May of 2008, and we could find \\
11 & out whether or not the Farmer incidents were \\
12 & discussed at the C-Suite meetings, correct? \\
13 & A. Correct. \\
14 & Q. I could also go look at the agendas, right? \\
15 & A. Correct. \\
16 & Q. Where are your notes? \\
17 & A. Most of them were tabulated on paper, and \\
18 & then they were typically followed up with \\
19 & individuals, based upon what needed to happen. \\
20 & Q. Okay. I don't understand. You said "notes \\
21 & are tabulate." What does that mean? \\
22 & A. I'm sorry, most of my notes are on paper, \\
23 & as the tablet that's in front of you. It would be \\
24 & recorded on something like that. \\
25 & Q. So you would have a legal pad or something \\
\hline
\end{tabular}
can't remember. Is there any other way I could find out what was discussed at those meetings, if anything was discussed regarding Farmer or the incidents?
A. I'm not sure. I'm really not sure.
Q. When was the first time you met with
counsel regarding this matter? The first time.
A. I know a lot of the initial meetings were with the former CEO, Kevin Stockton. So a lot of the initial meetings were with him, from a legal perspective.

MR. BROOKHYSER: I'm sorry, can you
speak up a little louder? I'm having a hard time hearing.

THE WITNESS: I'm sorry. A lot of the initial meetings were with the present CEO at the time, Kevin Stockton.
BY MR. MURDOCK:
Q. How do you know that?
A. Just based upon interactions and where the detail would typically be delegated to.
Q. Were you present during those meetings?
A. No.
Q. I'm sorry?
A. No.
Q. When was the first time you became aware
that counsel had been assigned to this matter for UHS?
A. I don't remember exactly when.
Q. If the incident occurred on May 16th, 15th, or whatever it is, and it was reported within five days up to your server for risk management -- I forget what it's called, Star Enterprise, or Enterprise or something -- and then you would get back an assignment of counsel, would you agree with me that you would have known that a counsel was assigned to this matter within let's say at least 30 days of the incident? Is that reasonable?
A. Possibly.
Q. Would it be reasonable to say two weeks?
A. I don't know.
Q. You don't know if it's reasonable?
A. It could be. I just can't recall exactly.
Q. Do you have a calendar?
A. Ido.
Q. Did you ever meet with counsel?
A. Not initially, no.
Q. When was the first time you met with counsel?
A. My first meetings with counsel didn't happen until recently.
Q. Okay. So your first meetings with counsel -- when you say "recently," within a year, let's say?
A. Yes.
Q. Within six months?
A. Yes.
Q. Within three months?
A. Probably six.
Q. Somewhere between three and six months.

Would you agree with that?
A. Yes.
Q. That's reasonable, right?
A. (Witness nods.)
Q. Is that a yes?
A. Yes.
Q. That was your first meeting with counsel, but certainly you're aware that counsel was involved in this from way early on?
A. Correct.
Q. What is the document destruction policy at

UHS?
A. I don't know what you're referring to specifically.
Q. Well, when can you destroy documents?

Seven years, five years? What are we talking about
Page 26
here? What do you do at UHS?
A. I don't know the specifics on it. I know
for patient files and patient records, there are differences between that and --
Q. No, I'm not asking about that. I'm asking
about your documents. There's a policy in place, I
would assume at UHS, for document destruction.
A. I'm not aware what the policy states on document destruction.
Q. You're the CEO of the hospital, right?
A. Yes.
Q. And on today's date you can't tell me what the document destruction policy is regarding your notes?

MR. BEMIS: I object to form.
Argumentative.
THE WITNESS: No.
BY MR. MURDOCK:
Q. Why did you throw these notes out?

MR. BEMIS: I object to form. Asked and answered. Go ahead.

THE WITNESS: Like I said before, once
items are completed or followed up on, the task was
essentially considered completed, finished.

\section*{BY MR. MURDOCK:}
Q. Did you have tasks at all with regard to the Steven Farmer issues? In other words, in terms of investigation, in terms of getting meetings together, anything?
A. Yes.
Q. What were your tasks regarding Steven

\section*{Farmer?}
A. I was initially notified via our security
department of the incident, and from that point met
with getting together with the other leaders of the organization.

Number one, obviously report the
incident; and number two, get our committees together, that being the patient safety committee and perform a root cause analysis.
Q. So just so I'm clear, so your job, when you were immediately notified -- and you were immediately notified about the incident the day of the incident, correct?
A. Yes.
Q. Within minutes of security being notified you were notified, correct?
A. Right.
Q. So you were aware within minutes, right?

Page 28
A. Yes.
Q. Did you ever instruct security to go maybe talk to the other patients in the hospital to find out if they had any interactions or negative interactions with this rapist?

MR. BEMIS: I object to form.
THE WITNESS: No.
BY MR. MURDOCK:
Q. Why not?
A. For me, security was more about reviewing the details of the incident, what happened, and taking the next appropriate steps.
Q. But you had other patients in the hospital, right?
A. Correct.
Q. You had other patients I assume you knew who had dealings with Mr. Farmer, one way or the other, right?
A. Correct.
Q. He was a CNA at your hospital, right?
A. Yes.
Q. So you knew because he was a CNA at your hospital that he had patient contact at your hospital, right?
A. Yes.
    component to actually do that, to actually go around
    the hospital and patients to find out if anybody else
    had a problem. Is that correct?
        MR. BEMIS: 1 object to form.
    Misstates testimony.
    THE WITNESS: That's what I recall.
BY MR. MURDOCK:
Q. You recall that I'm correct?
A. That's what I recall.
Q. I just want to make sure we're on the same
page, that you're recalling what I just said, which
is it was your expectation that whoever was in charge
of the nursing investigation would have gone around
to the patients in the hospital to find out if indeed
Farmer had done anything wrong to any other patients. is that correct?

MR. BEMIS: I object to form.
Misstates testimony. Go ahead and answer.
THE WITNESS: Correct.
BY MR. MURDOCK:
Q. Okay. Thank you.

When you were notified by
security, where were you?
A. I don't remember specifically where I was at the time.
Q. I don't mean -. that's not a "where were you when Kennedy was shot" type of thing. That's not what I was asking.

What I was really asking is, in
other words, were you in the hospital? Were you at
home? Things like that.
A. I don't recall.
Q. Let's put it this way.

Within 24 hours after you were
notified of this incident did you do a Midas report?
A. I did not do a Midas report, but a Midas report I know was being filed.
Q. That's not what I asked you. I just asked you if you did one.
A. I did not.
Q. Why not?
A. Our processes already had established that my report was being inputted.
Q. Well, I don't understand.

Then is a Midas report -- is there just one report? Only one person can do one for an incident?
A. No, it doesn't have to be just one, but it's certainly initiated by one.
Q. Well, why didn't you do one immediately when you found out about the incident?

MR. BEMIS: I object to form. Asked and answered. Go ahead.

THE WITNESS: Again, the process for a
Midas report is that someone initiates the process.

> My understanding is that was being
done already, so there was no need to be cupilicative at that juncture.
BY MR. MURDOCK:
Q. At some point in time between 2008 and today, I assume you found out that other people
besides Roxanne Cagnina were alleging that Mr. Farmer
had sexually assaulted them at Centennial Hills
Hospital, is that correct?
A. I had heard the allegations, yes.
Q. We're here today about one, right?
A. Yes.
Q. You know that, right?
A. Yes.
Q. You know why we're here today?
A. I know why we're here.
Q. When did you find out about -- let's take

Marsha Petersen. When did you find out about this case?
A. I honestly don't recall.
Q. Well, did you find out in 2009, 2008? What
are we talking about here?
A. I don't specifically recall.
Q. Can you give me an estimate? What's your
best estimate of when you found out that Marsha

Petersen was sexually assaulted by Steven Farmer while she was at Centennial Hills Hospital?
A. I don't know.
Q. You can't give me an estimate?
A. No.
Q. Now, let's try and narrow this down a little bit.

When did you become aware of this lawsuit that we're here for in this case?
A. I don't know. Maybe a year. I'm not sure.
Q. If I told you that this lawsuit was filed basically within a year -- maybe a little more, I
can't remember, maybe a little bit more, maybe a
little less -- let's say in 2009. The incident
occurred in 2008; this lawsuit was filed sometime in 2009.

Would that be reasonable?
A. That would be reasonable.
Q. So would it be reasonable for you to tell me that you found out about the lawsuit right around the time it was filed and served? Within a short time? Wouldn't you agree with that?
A. Within a short time.
Q. So when you found out about this lawsuit, did you know that this lawsult was alleging that

Steven Farmer, when he was working at Centennial
Hills Hospital, sexually assaulted Jane Doe? That's the person here, Marsha Petersen.

Did you know that?
A. Yes.
Q. When you found that out, did you do a Midas report?
A. No.
Q. Why not?
A. I didn't feel it necessary that finding out that initiates a Midas report.
Q. When so you find out about an event, whether it's 24 hours after the event or five years afterwards, don't you have a duty to go do that Midas report?

MR. BEMIS: I object to form.
Argumentative.
THE WITNESS: Midas reports are typically done when there is an identified incident within the hospital campus. Those are when those are performed.
BY MR. MURDOCK:
Q. So let me see if I understand this.

The CEO of Centennial Hills
Hospital finds out about an incident where a former
patient is alleging that she was sexually assaulted
by someone who was working at Centennial Hills
Hospital in 2008 -- you find out in 2009, but you
don't believe you have a duty to do a Midas report at
that point. Is that correct?
A. That's correct.
Q. Okay. So you get this call from security, and you said that --I think I got this right, maybe I got it wrong, I'm not trying to do anything here -but you said you were immediately notified by the security department, and then from that point you started meeting with other leaders of the organization?
A. Correct.
Q. And you met with other leaders of the organization regarding the Steven Farmer incident, right?
A. Correct.
Q. Who did you meet with?
A. It was a multitude of leaders across the organization. C-Suite, regulatory risk.
Q. Is regulatory risk the same thing, or is that separate?
A. I think at the time it was the same, I believe.
Q. Who was regulatory risk? Was that Janet Callahan?
A. Yes.
Q. Did C-Suite have a meeting, or were you just on the phone from one to the next to the next to the next?
A. We talked together initially to report the incident out formally, and then to begin the process of getting together a patient safety committee and perform the RCA.
Q. When you say you got together initially to report the incident out, who was that going to? When you say you were going to report the incident out, what is that talking about?
A. That's reporting the incident to the state.
Q. And how was that going to be done?
A. Basically we're self-reporting the incident, so --
Q. Did you make a phone call? How did that work?
A. I didn't witness the detail.
Q. What was the decision of the committee? How were you going to do it?
A. The CEO was on technically on that.
Q. Was he to call them, write them? What was
the deal?
A. I assume call, and certainly in partnership with the regulatory risk folks.
Q. And who at the State of Nevada did you
call? Who was that supposed to be?
A. I did not contact, so I don't know.
Q. I know you didn't, but who would you call?

You said you had it reported to the state. You don't call Brian Sandoval and say, "Hey, we've got a problem here."
A. Whoever the head of the state department was at the time.
Q. The state department of what?
A. Of health.
Q. That's who you called, the State Department of Health?
A. Yes.
Q. Is that what its actual title is, State

Department of Health? Is that part of like the Division of Business and Industry or --
A. I'm not positive on the exact title.
Q. If someone came to you today and said,
"Hey, we've got a sexual assault, we've got to report it," who would you call up?
A. I believe it is State Department of Health,
but I'm not positive on the exact articulation of the titling there.
Q. Okay. And why would you tell them?
A. It was certainly an incident that happened
on our campus that was serious, so we wanted to report that out as it was necessary.
Q. When the C-Suite got together to decide what to do, outside of the C-Suite, was somebody on the phone, for instance, from King of Prussia?
A. I don't recall.
Q. When I say King of Prussia, you know what I'm talking about?
A. Yes.
Q. UHS main, right?
A. I don't recall that specifically.
Q. You're not saying it didn't occur, you're
just saying you're not sure?
A. I'm not sure.
Q. But at the very least it was the C-Suite.

Did you talk about how this was
going to be dealt with in the press? I'm sure you
figured it would get out to the press, right?
A. I don't remember specific conversations
about the press components.
Q. Did somebody draft a press release?
A. I honestly don't remember.
Q. Okay. Well, so the C-Suite got together
and you had to report the incident to the state, and
that's what you did, right?
A. Yes.
Q. So that meeting lasted like 30 seconds, because all you did was say, "Hey, go report it to the state?"
A. It was pretty quick.
Q. How long did you talk? A minute, 30 seconds?
A. No, it was probably a little longer than that.
Q. How long?
A. Maybe 10,20 minutes.
Q. Did you take notes from that meeting?
A. I probably did, yes.
Q. And where are those notes today?
A. I probably don't have them at this juncture.
Q. Why not?
A. Again, most of the notes were to follow up on items or just to figure out what the next steps were. So the next steps were to go to an RCA, so we went to an RCA.

\section*{Q. What's an RCA?}
A. Root cause analysis. The next step was to go to the patient safety committee, so we went to the patient safety committee. So there was no need to keep that note necessarily.
Q. Well, we'll see about that.

But in terms of a 10 to 20-minute
meeting, I'm sure everybody got something assigned to
them. Wouldn't that be correct?
MR. BEMIS: I object to form. Calls
for speculation.
BY MR. MURDOCK:
Q. Maybe not everybody, but jobs were given out?
A. I don't recall specifics. Certainly the call to the state was definitely first and foremost.
Q. Okay. And then you said that you all figured you needed to get together to do the root cause analysis. Anything else?
A. Root cause analysis, patient safety committee to make sure it was fully discussed, reviewed, investigated, and to identify any opportunities for improvement obviously.
Q. Okay. Were any improvement ideas identified?
\begin{tabular}{|cc|}
\hline 1 & MR. BEMIS: Are we talking about Page 41 \\
2 & results of the patient safety meeting, investigation \\
3 & of RCAs or -. \\
4 & MR. MURDOCK: Well, let me ask it this \\
5 & way. \\
6 & BY MR. MURDOCK: \\
7 & Q. As a result of this incident were any \\
8 & policies and procedures changed? \\
9 & A. I'm trying to think. I'm not positive. \\
10 & Q. Can you think about some ideas that might \\
11 & have? What are you thinking of here? \\
12 & A. I don't think so, but l'm not positive. \\
13 & Q. In your 10 to 20-minute meeting that the \\
14 & C-Suite had, did anybody ask, "Why was this guy \\
15 & working here?" \\
16 & A. Again, I don't remember the specifics of \\
17 & the conversation. \\
18 & Q. Did anybody ask, "How did this guy get to \\
19 & work here?" \\
20 & A. I'm not sure. \\
21 & Q. Did you pull his file for the C-Suite \\
22 & meeting, so you all would have something to kind of \\
23 & know who this guy was? \\
24 & A. I don't recall that being pulled for the \\
25 & meeting.
\end{tabular}
Q. Were any documents given out at the meeting to everybody? His picture, his badge, anything?
A. I don't recall a picture or the badge. I know that the security report was there.
Q. Okay. Good. So the security report was there.

But did anybody bring up the
question of, "How did this guy get to work in our hospital?"
A. I don't know. I'm trying to remember. I can't recall specifically. Like I said, it was a very quick meeting.
Q. 10 to 20 minutes.
A. State calls were important, following up
with the regulatory processes were important, the security report was there. I just can't remember the specifics you're looking for.
Q. I'm just trying to figure out, did somebody ask, "Hey, what was this guy doing here? How did this guy get into our hospital?" Was that question even asked?

MR. BEMIS: I object to form. Asked and answered.

MR. MURDOCK: Well, it was asked, but it wasn't answered.

BY MR. MURDOCK:
Q. Go ahead.
A. I just don't remember specifics.
Q. Of course your notes might have the
specifics on them, the ones you wrote, right?
MR. BEMIS: I object to form.
Argumentative.
THE WITNESS: They could have.
BY MR. MURDOCK:
Q. So did anybody at the meeting bring up maybe calling American Nursing Services?
A. I don't know if it had gotten that far at that point.
Q. Did you know that Mr. Farmer was an agency worker at that point in time?
A. We found out certainly.
Q. No, at that meeting.
A. At that meeting?
Q. At the initial C-Suite meeting.
A. I believe it was.
Q. And did anybody bring up, "Hey, let's call ANS to find out what this guy's background is," et cetera?
A. (No response.)
Q. In other words, did Stockton -- Stockton I

Page 44
assume was rurining the meeting, correct?
A. Correct.
Q. Did Stockton say, "Hey, let's get ANS on the horn here and find out what happened? Did that occur at all?
A. I know he was identified. I know the security report was there. I know he was identified as an agency person. I know the state call was made:
I know that -- I believe it was HR nurses that were going to look into the background of Mr. Farmer.
Q. How do you know that?
A. Because they're nursing and obviously they're integrally involved.
Q. But you specifically said just now, "I knew HR nursing was going to look into the background."
How do you know that?
A. Because they were there at the meeting.
Q. Who was there?
A. The CNO and HR.
Q. Okay. I didn't know HR was there. Who is HR?
A. Human resources.
Q. No, I know that, but who was there
representing HR?
A. I can't recall the name. It was the HR
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director at the time.
Q. But Carol Butler was the CNO, right?
A. That's correct.
Q. She's the chief nursing office, and it was
her job, she was going to be looking into the
background of Mr. Farmer, right?
A. Yes.
Q. And she was to do that on behalf of the
C-Suite, right?
A. Correct.
Q. And I assume she was going to get back to
you at some point in time, is that correct, with her
investigation?
A. She was going to follow up, yes.
MR. BEMIS: I object to form, anything
related to patient safety.
MR. MURDOCK: Well, wait a minute.
We're not talking about patient safety. He didn't
say she was part of patient safety. He said HR
nursing was going to look into it.
BY MR. MURDOCK:
Q. Let me ask the question.
Was that part of the patient
safety committee, that was going to look into the
background of Mr. Farmer? Or was that just HR

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nursing? We're going to go pull his file and look
into it?"
    A. HR and nursing investigating was certainly
part of the patient safety meetings.
    Q. Oh, are they part of the patient safety
committee?
    A. They were there, yes.
    Q. But are they officially a part of it?
    A. The CNO and the HRA or HR director would
participate when necessary.
    Q. So that was part of patient safety then.
Is that what you're telling me?
A. Yes.
Q. Did you personally ever find out how

Mr. Farmer came to work at your hospital when you were the COO?
A. The pieces I knew or was alerted to was he came to us through an agency.
Q. Right.
A. And I also think, as you had mentioned
before, he was a CNA that came onboard. So I did know those pieces.
Q. You're aware that agency workers, when they come to your hospital there's certain required documents they must have.
A. Yes.
Q. Health forms, right? That's one of the things?
A. (Witness nods.)
Q. Right?
A. Yes.
Q. Referrals, references from the last job, right?
A. Yes.
Q. Did you ever find out whether or not he actually had references from his last job in the file?
A. I know we looked at his file.

MR. BEMIS: With respect to your
personal knowledge, not as to the other part of your deposition.

THE WITNESS: I wouldn't know.
BY MR. MURDOCK:
Q. I'm sorry?
A. I wouldn't know until we look at the personnel file.
Q. Well, did you ever look at the personnel file yourself? I'm talking within let's say a year of this happening. Not getting ready for this deposition today, within a year of this happening.

> Did you find out, "Hey, we never
got references for this guy, and he should never have been working at our hospital?"
A. I didn't look at the specifics of the personnel file, no.
Q. Okay. So in other words, before you were prepped to become the person most knowledgeable that we're going to be discussing in a little bit on
various subjects, you were unaware that Mr. Farmer was missing documents from his personnel file, correct?
A. That's correct.
Q. Did you ever meet with Amy Bochenek regarding this matter?
A. No.
Q. Do you know who Amy Bochenek is?
A. Yes.
Q. I think I'm pronouncing it right.
A. Yes.
Q. You never met with her?
A. No.
Q. Outside of the first meeting with the

C-Suite, did you ever meet with Carol Butler in this matter?

MR. BEMIS: You mean outside of the
\begin{tabular}{|c|c|}
\hline & patient safety meeting and the RCA? Page 49 \\
\hline 2 & MR. MURDOCK: Yeah. \\
\hline 3 & THE WITNESS: No. \\
\hline 4 & BY MR, MURDOCK: \\
\hline 5 & Q. Are you part of the patient safety \\
\hline & committee? \\
\hline 7 & A. Yes. \\
\hline 8 & Q. Are you part of the root cause analysis \\
\hline & committee? I guess that's what they call it. \\
\hline 10 & A. Yes. \\
\hline 11 & Q. Okay. Let me ask you this. \\
\hline 12 & Without telling me specifically \\
\hline 13 & what's in the root cause analysis, I assume you've \\
\hline 14 & seen the root cause analysis. is that correct? \\
\hline 15 & A. Yes. \\
\hline 16 & Q. Who drafted the root cause analysis? \\
\hline 17 & A. I believe it was our quality risk, but I'm \\
\hline 18 & not positive. \\
\hline 19 & Q. Is that Ms. Callahan? \\
\hline 20 & A. I believe so. \\
\hline 21 & Q. And Ms. Callahan left at some point and \\
\hline 22 & Evette Wilson came in, right? \\
\hline 23 & A. Yes. \\
\hline 24 & Q. Ms. Callahan, was she a UHS employee? \\
\hline 25 & A. No, she was a Centennial Hills Hospital \\
\hline & employee. Page 50 \\
\hline 2 & Q. Evette Wilson, was she a UHS employee? \\
\hline 3 & A. No, she was a Centennial Hills employee. \\
\hline 4 & Q. Okay. So let me see if I have this clear. \\
\hline 5 & There was a root cause analysis \\
\hline & drafted? \\
\hline & A. (Witness nods.) \\
\hline & Q. Is that a yes? \\
\hline 9 & A. Yes. \\
\hline 10 & Q. That root cause analysis was drafted by \\
\hline & Centennial Hills Hospital employees, correct? \\
\hline 12 & A. Yes. \\
\hline 13 & Q. And that root cause analysis was shared \\
\hline & from Centennial Hills Hospital employees with UHS of \\
\hline & Delaware, Inc. employees, is that correct? \\
\hline 16 & A. That's correct. \\
\hline 17 & Q. You would agree with me, wouldn't you, that \\
\hline & UHS of Delaware, Inc. is a separate entity than \\
\hline & Valley Health Systems, Inc., or LLC, or whatever it \\
\hline & \\
\hline 21 & MR. BEMIS: I object. Calls for a \\
\hline & legal conclusion. \\
\hline 23 & BY MR. MURDOCK: \\
\hline & Q. I would expect the COO and CEO to know \\
\hline & that, but -- \\
\hline
\end{tabular}
A. It's a separate component.
Q. It's a separate entity?
A. Correct.
Q. Different tax IDs?
A. Yes.
Q. Is there a policy and procedure regarding root cause analyses at Centennial Hills Hospital? In other words, how they're drafted, who drafts them, things like that?
A. I believe there is.
Q. And does that policy and procedure state that the root cause analysis, which is done by
Centennial Hills Hospital employees, will be shared with UHS of Delaware, Inc. employees?
A. I don't know if it necessarily delineates it out to that extent.
Q. Do you know who owns Valley Health System?
A. In terms of?
Q. Well, does UHS own it?
A. That's my understanding.
Q. Is Valley Health System a subsidiary of UHS of Delaware, or is it a subsidiary of UHS, Inc., or any other million entities that UHS may have? MR. BEMIS: I object to form. It calls for a legal conclusion.

MR. MURDOCK: I'm asking the CEO. I
assume the CEO would know that.
THE WITNESS: I honestly don't know.
BY MR. MURDOCK:
Q. The CEO of the hospital does not know. Is that what you're tell me?
A. Yes.
Q. Okay. Do you know who Margaret Wolfe is?
A. No.
Q. Do you know who Ray Sumera is?
A. No.
Q. Do you know who Christine Murray is?
A. No.
Q. When did you become CEO of the hospital?
A. It was 2010 or '11.
Q. Have you reviewed this case at all since
you became CEO? I'm not asking you for contents or discussions between counsel, but have you reviewed: anything about this case?

MR. SILVESTRI: That includes with
counsel?
MR. MURDOCK: Yeah, it does.
THE WITNESS: Well, counsel, certainly.
BY MR. MURDOCK:
Q. What have you reviewed?
\begin{tabular}{|cc|}
\hline 1 & MR. BEMIS: You're talking about Page 53 \\
2 & outside of preparation for this afternoon? \\
3 & MR. MURDOCK: Oh, yeah, outside of \\
4 & preparation for this afternoon. \\
5 & THE WITNESS: Nothing with legal \\
6 & counsel outside of this afternoon's preparation. \\
7 & BY MR. MURDOCK: \\
8 & Q. And my understanding from your answers \\
9 & before is you really had nothing to do with this case \\
10 & at all in terms of meeting with counsel, until you \\
11 & started getting prepared for this deposition. Is \\
12 & that right? \\
13 & A. That's correct. \\
14 & Q. Or for the next deposition, is that \\
15 & correct? \\
16 & A. Correct. \\
17 & \(\quad\) MR. MURDOCK: Let's take a break for a \\
18 & minute. \\
19 & (Recess.) \\
20 & BY MR. MURDOCK: \\
21 & Q. Outside of the safety committee and the \\
22 & root cause analysis committee, and besides what we're \\
23 & going to talk about in the other deposition, do you \\
24 & have any other knowledge at all regarding Mr. Farmer? \\
25 & What he was doing at the hospital, the incidents,
\end{tabular}
anything?
A. No. We've covered those areas.
Q. Okay. When you found out about Marsha Petersen and her allegations in this lawsuit, what did you do, if anything?
A. This lawsuit honestly came to my attention more recently, just in terms of my own involvement with it. My initial components were my own preparation, and so forth.
Q. But you said earlier that you became aware of this, of Marsha Petersen and her allegations, within a year. Remember we put that time limit on it?
A. (Witness nods.)
Q. Is that a yes?
A. Yes.
Q. So when you found out, in other words, did
you have another C -Suite meeting regarding Marsha
Petersen this time, as opposed to Roxanne Cagnina?
A. I don't recall specifically.
Q. Was the state notified again?
A. I don't believe so.
Q. Why not?
A. The reason being is that we had obviously performed an RCA and done the safety patient
committee already involving the first incident.
Q. Right.
A. Based upon that being a similar allegation, we did not feel there was a need for an additional report or a similar action.
Q. But wouldn't you want to know what happened in that case?
A. Yes. But I mean in terms of the reporting itself, that's the reasoning why.
Q. Well, wait a minute. The whole point of the reporting is to see if you can identify things that went wrong, or went right, whatever it was, and specifically wrong, so you don't do them again, right? That's basically the reason, correct?
A. (Witness nods.)
Q. Is that a yes?
A. Yes.
Q. Okay. So since this was a different situation, different time and different patient, wouldn't you want to know how that happened?
A. Like I said before, I don't believe we did any individual state reporting on this. I don't remember if there was any additional RCAs or patient safety committees as a result of that.
Q. What about Denise Hanna?
A. I don't know.
Q. Do you know who Denise Hanna is?
A. No.
Q. Do you know that Denise Hanna alleged that there was an assault of some type between her and Mr. Farmer?
A. No.
Q. How many women are you aware of who alleged that Mr. Farmer assaulted them in some way? I'm using that term "assault" loosely, but --

MR. BEMIS: And you're specifying at
Centennial Hills Hospital and not elsewhere, right?
MR. MURDOCK: Yes.
THE WITNESS: Two or three.
BY MR. MURDOCK:
Q. Two or three?
A. Yeah.
Q. I'm just trying to think in my mind here.

See if I'm right, because I don't want to misstate your testimony.

The COO, the chief operations
officer of the hospital, who then in 2010 or 2011
became the CEO of the hospital, and who is currently
the CEO of the hospital -- as you sit here today you
can't tell me specifically how many women at



\section*{TAB 72}
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individual; DOES I
ROE CORPORATIONS I
through \(X\), inclusive,
                        Defendants.
            DEPOSITION OF SAJIT PULLARKAT

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CENTENNIAL HILLS HOSPITAL
MEDICAL CENTER; UNIVERSAL
HEALTH SERVICES, INC., a
Delaware corporation;
AMERICAN NURSING
SERVICES, INC., a
Louisiana coxporation;
through \(X\), inclusive; and
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\begin{tabular}{ll} 
\\
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\end{tabular}
9
10
11
\begin{tabular}{|c|c|}
\hline 1 & Deposition of Sajit Pullarkat Page 5 \\
\hline 2 & August 7, 2015 \\
\hline 3 & (Prior to the commencement of the deposition, \\
\hline 4 & all of the parties present agreed to waive \\
\hline 5 & statements by the court reporter, pursuant to \\
\hline 6 & Rule 30(b)(4) of NRCP.) \\
\hline \multicolumn{2}{|l|}{7} \\
\hline 8 & SAJIT PULLARKAT, \\
\hline 9 & having been first duly sworn, testified as follows: \\
\hline \multicolumn{2}{|l|}{10} \\
\hline 11 & EXAMINATION \\
\hline \multicolumn{2}{|l|}{12 BY MR. MURDOCK:} \\
\hline 13 & Q. Would you please state your name for the \\
\hline 14 & record? \\
\hline 15 & A. Sajit Pullarkat. \\
\hline 16 & Q. Mr. Pullarkat, we just took your deposition \\
\hline 17 & personally. Now we're going to take your deposition \\
\hline \multicolumn{2}{|l|}{\multirow[t]{2}{*}{18 because you're being presented as the person most 19 knowledgeable regarding certain subjects.}} \\
\hline & \\
\hline \multicolumn{2}{|r|}{You're aware of that, correct?} \\
\hline \multicolumn{2}{|l|}{21} \\
\hline 22 & Q. So now you're talking not personally. \\
\hline \multicolumn{2}{|l|}{23 You're talking as if I had Centennial Hills Hospital} \\
\hline \multicolumn{2}{|l|}{24} \\
\hline \multicolumn{2}{|l|}{25 Do you understand that?} \\
\hline & A. Yes. Page 6 \\
\hline \multicolumn{2}{|l|}{\multirow[t]{2}{*}{2 Q. There are nine areas that were going to}} \\
\hline & \\
\hline \multicolumn{2}{|l|}{4 A. Okay.} \\
\hline \multirow[t]{2}{*}{5} & Q. Some of them overlap. I'm going to try \\
\hline & 6 very hard to stick to one area, and then go to the \\
\hline \multirow[t]{2}{*}{7} & next. They may overlap in some ways, so l apologize \\
\hline & 8 in adva \\
\hline \multicolumn{2}{|l|}{9 I'm not trying to do that for any} \\
\hline \multicolumn{2}{|l|}{10 it just flows that way. Okay?} \\
\hline 1 & A. Sure. \\
\hline 1 & Q. And if you get confused on anything, just \\
\hline \multicolumn{2}{|l|}{13 let me know.} \\
\hline 1 & A. Okay. \\
\hline 15 & Q. The first area of inquiry is, "Dates, times \\
\hline 16 & and places worked by Steven Farmer at Centennial \\
\hline \multirow[t]{2}{*}{17} & Hills Hospital Medical Center." Okay? \\
\hline & A. (Witness nods.) \\
\hline 19 & Q. So let's talk about that. \\
\hline 20 & First of all, Steven Farmer worked \\
\hline 21 & at Centennial Hills Hospital Medical Center, correct? \\
\hline 22 & A. Correct. \\
\hline 23 & Q. I believe he began working there \\
\hline 24 & February 18, 2008. Am I correct? \\
\hline 25 & And I know you're looking at some \\
\hline
\end{tabular}
documents there. If you would just do me a favor,
and when you get to the document you are relying upon, if you would let me know -- there's a Bates stamp on that document generally. If you would let me know what number that document is, I think we would all be happy. Okay?
A. Sure. Right now I'm looking at the -- I guess what is termed the accounting log, that we traditionally utilize for tracking agency. So I'm looking at -- I believe it's CHH-00372. Based off of that, it looks like February 18, 2008.
Q. Could you tell me, did he always work the nightshift every time he worked there?
A. I'd have to look at the records to confirm. It looks like they're all the nightshift.
Q. Okay. I'm showing you a document on the screen right now. It is called STAFF-00001. Okay? Now, I have zoomed in -- I can zoom in a little bit more.

What is this document? Do you know? Do you need it to come out a little bit, or can you see it?
A. Let me see. It looks like the same thing as this one. It looks to be the same document that I was just referring to, which is the accounting log
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for agency -- that they use to track agency

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Q. If you look at the screen again and look at - I think it's \(6 / 14 / 2008\).

MR. BEMIS: Objection.
BY MR. MURDOCK:
Q. I'm sorry. It looks like the first line
that's got a box around Steven Farmer. It's hard to tell.

MR. BEMIS: That copy looks bad. It's 5/14.

MR. MURDOCK: It's \(5 / 14\). All right.
This is the best copy l've got, so --
MR. SILVESTRI: What is the Bates
stamp?
MR. BEMIS: STAFF-0001.
BY MR. MURDOCK:
Q. It appears as though this document is some kind of billing document or accounting document regarding Steven Farmer's work at Centennial Hills Hospital, is that correct?
A. My understanding is that these documents are from our accounting department, for tracking purposes.
Q. Okay. And so it looks like on May 14, 2008

Farmer did some time in the ER, and then some time on
the sixth floor. Would that be correct?
A. Yeah. It looks like he did spend time in two different units.
Q. Okay. Do you know what each category is on this document?
A. Yes.
Q. Why don't we go across, and just stick with the first date. You say it's May 14, 2008?
A. Right.
Q. Okay. By the way, is the next date \(6 / 15\), or is there two for 6/14?
A. There's two for \(5 / 14\).
Q. Okay. So it's got the name "Steven

Farmer."
A. Correct.
Q. So you've got the date, you've got the name
"Steven Farmer." Then you've got something --
A. Yeah, that's the position. So for "CN,"
that means CNA.
Q. Okay. Then there's a box that looks like it says "No?"
A. That's "No." It's indicating whether the
person is a traveler or an agency. So he was agency, so the answer is "No."
Q. Okay. Then I don't know what it has. Is
that a box with the hours that he worked?
A. The number 2 that you see in the three
boxes there -- that indicates the shift. If it's a 1
it's an a.m. shift, if it's a 2 it's a p.m. shift.
Q. Oh, okay. So these boxes would indicate
that he was working on the p.m. shift on May 14,
2008, correct?
A. Yes.
Q. By the way, what's the shift time?
A. Typically it's 7:00 to 7:00.
Q. So that would be 7:00 p.m. to 7:00 a.m., correct?
A. Yes.
Q. Then it's got I guess the location of where
he was assigned to work, is that correct?
A. Yeah. That four digit number is a call
center, so it does designate which department he was assigned to or worked at.
Q. And for the life of me I cannot read those numbers. Are they different?
A. They are two different numbers, yes.
Q. What's the difference?
A. One is the ER, and one I believe is the sixth floor.
Q. So why are they written in, if you've
already got the code for them?
MR. BEMIS: On this document that was disclosed to you, that was written in by hospital staff provided to counsel to disclose, because the call centers are not self-explanatory.

MR. MURDOCK: Oh, so we would know what it is.

MR. BEMIS: Correct. So I was just
trying to be nice to counsel.
MR. MURDOCK: That was nice.
MR. BEMIS: The call centers are not
self-explanatory.
MR. MURDOCK: I appreciate that. So
that's good.
BY MR. MURDOCK:
Q. Then you go across and you've got something that says "21." Do you see that?
A. Yes.
Q. What is that for?
A. That is the rate.
Q. 21 bucks an hour?
A. That's the payment rate.
Q. So you were paying American Nursing

Services \$21 an hour for Mr. Farmer's services, is that correct?
A. That's correct.
Q. The next box is what?
A. The next box is "Hours worked."
Q. And it appears as though -- is it two hours
where he was working in the ER that day?
A. Yes.
Q. And then it looks like 9.5 hours where he's working on the sixth floor?
A. That's correct.
Q. And then there's an emply box. Do you see that?
A. Yes.
Q. What is supposed to be in the empty box, if anything?
A. I think that was if they did weekends.
Q. And it says "No?"
A. Yeah. That "No" is for the weekends.
Q. And then there's another empty box?
A. That's if they had overtime.
Q. So he didn't have overtime.

Then I assume it's got the agency
name, and it's American Nursing Services, so it's got
"American," right?
A. Correct.
Q. And there's another empty box. Do you see
1 that?
2 \(\quad\) A. Yes. \(\quad\) Page 13
that?
A. Yes. anything?
A. It looks like it's an invoice number.
Q. But there's nothing there?
A. There's nothing there.
Q. And then it looks like -- I don't know what
that is. Some kind of numbers.
On, that's the total amount
A. Probably. I don't have that on mine.
Q. Well, one is 42 . So he worked two hours.
A. Yes.
Q. Okay. And so that number that's above the

42 would be whatever 21 times 9.5 is. Would that be
reasonable?
A. Yes.
Q. Is there another box there? It looks like it's cut off.
A. I don't have one on my sheet showing that
Q. Well, do you see what I'm showing right
A. Yeah.
Q. Do you know what that is?
A. No.
Q. Okay. So on the evening shift on May 14,
which would be May 14 and May 15, Mr. Farmer would
have worked two hours in the ER, and then he would
have been moved up to the sixth floor. Is that
correct?
A. Yes.
Q. And he would have worked nine and a half hours, according to this document, on the sixth floor. Is that correct?
A. Yes.
Q. Back in 2008 did agency staff have the ability to enter things into the medical records, the computer chart?

MR. BEMIS: I object.
MR. SILVESTRI: Objection. Foundation.
MR. MURDOCK: You're right. I'll fix
that up. Let me just ask the question this way.
BY MR. MURDOCK:
Q. Do you know where on the sixth floor he
worked on May 14, 2008?
A. No.
Q. Do you know if he was assigned to any
specific rooms on May 14 -- the nightshift of May 14,

\section*{2008?}
A. I do not.
Q. Do you know what he was assigned to do on May 14, 2008 ?

MR. BEMIS: Outside of being a CNA?
MR. MURDOCK: Well, outside of
anything. I don't know.
BY MR. MURDOCK:
Q. Do you know if he was assigned to do anything on May 14, 2008?

MR. BEMIS: I object. That's outside
the scope of his designation.
THE WITNESS: I don't. I don't know what he was particularly assigned to do.
BY MR. MURDOCK:
Q. Do you know if he was particularly assigned to room 614?
A. I don't know.
Q. You don't know one way or the other?
A. I don't.
Q. Okay. Do you know if he worked room 614 that night?

MR. SILVESTRI: Objection. Lacks
foundation.
MR. BEMIS: I object to form. Go ahead
```

and answer.

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THE WITNESS: I don't.
BY MR. MURDOCK:
Q. Do you know if he worked on the sixth floor that night?
A. Based on the accounting record, yes.
Q. Okay. So at the very least we know he was assigned to be on the sixth floor, and that's where he worked. Is that correct?
A. Correct.
Q. But outside of anything else more specific than that, you don't know?
A. Correct.
Q. Okay. Did Mr. Farmer ever work as a sitter at Centennial Hills Hospital?
A. Let's see.
Q. And what document are you looking at to
find that out?
A. \(\mathrm{CHH}-00318,19\) and 20.
Q. I'm sorry, what numbers?
A. 318,319 and 320.

MR. BEMIS: The registry document, is that right?

THE WITNESS: Yeah.
So to answer your question, he was
assigned to be a sitter -- let's see. What day is

\section*{age 17}
that? On the 25th.
BY MR. MURDOCK:
Q. Of what?
A. It's April. That's the only day I see on the VHS registry pages.
Q. Okay. Does this VHS registry go back to February 18, 2008?
A. This is coming off of a daily scheduling system called One Staff. We don't have that system in place anymore. We migrated to a different scheduling system since that time.
Q. Okay. I'm trying to find out, beginning February 18, 2008 through May 16, 2008, when
Mr. Farmer was a sitter. And based on the documents
that you're looking at, they only go back to 4/13/2008.
A. These are the only pages we were able to pull from the files.
Q. So it's safe to say you can't tell me when he was a sitter, is that correct?
A. The only one I can tell you is that one day I mentioned before, based upon the designation codes here.
Q. That was April 25?
A. Yes.
Q. Outside of looking at this VHS registry,
have you looked at any other documents to find out when he worked as a sitter?
A. This would have been the primary source to find that out. The only other document l've had was the accounting component, which doesn't specify that.
Q. Well, yeah. But at least you would know if he worked in the ER, he was probably not a sitter.
Would that be correct?
A. That would be correct.
Q. So looking back on whatever registry you want to look at that you've got in front of you, can you tell me, based on that, when he was assigned to any other floors?
A. He was assigned to the sixth floor on February 18th and 19th.

MR. SILVESTRI: Tell us what you're reading from.

THE WITNESS: I'm sorry. It's
CHH-000372.
MR. MURDOCK: Why don't you just tell
me. I don't want to keep going back and forth.
MR. BEMIS: The 18th and 19th are the seventh floor. 207 is seventh. 810 is the ER, which
would be the 20 th and 21 st.
THE WITNESS: 22nd and 24th and 27th
would be the sixth.
MR. BEMIS: Those are February.
MR. MURDOCK: Okay. What about March?
THE WITNESS: March 1st is the sixth,
March 2nd is sixth, March 5th is seventh, March 6th is sixth, March 11th, 12th and 15th are sixth.
BY MR. MURDOCK:
Q. What about April?
A. March 21st is sixth, March 25th is sixth, and March 29th is seventh. March 30th is seventh. April 3rd is sixth, April 4th is sixth, April 5 th is sixth, April 6th is sixth. I'm not sure what that code is. And April 10th is sixth.
Q. Anything else?
A. Yes. Continuing on with April, April 25th is sixth, April 22nd is sixth.

And then May 14th was that split shift that you displayed earlier. So part of it in the ER, part of it on the sixth floor.

I believe that's it.
Q. Are there any other split shifts that are denoted on these records? Specifically you're looking at \(\mathrm{CHH}-372\), et cetera.
A. There's one split shift on 369 between the sixth floor and the ER. And that's it.
Q. What date was that, the one on 369 ?
A. That was the 3rd of April.
Q. How long did he work on the sixth floor that day, on April 3, 2008?
A. Three hours.
Q. How long did he work in the ER that day?
A. Nine.
Q. From the documents you have in front of you, are you able to tell which was first, the ER or the sixth floor that day?
A. I'm not sure which one would be first.
Q. Are you able to tell me, aside from the places that he was assigned, the sixth floor or the ER or the seventh floor, exactly what his tasks assigned were on those dates?

MR. BEMIS: I object to form. Outside of the scope of this witness' designation.

MR. MURDOCK: Let me restate that. BY MR. MURDOCK:
Q. Are you able to tell me specifically what rooms he worked at on those dates?
A. No, I wouldn't be able to tell you that.
Q. Okay. Let's move on to the "Investigation
of Farmer by Centennial Hills before and during work
at Centennial Hills." We sort of started to get into
that in the last deposition, so let me kind of
backtrack a little bit.
Farmer came on, and certain
documents are required before an agency staft is
allowed to work in the hospital. Is that correct?
A. That is correct.
Q. And those documents, for example, are the
assigned job description. That's one of those
documents that's required, right?
A. Yes.
Q. A skills competency checklist. That's
required, right?
A. Correct.
Q. All the various certifications. That's
required. You've got to have those before you're
allowed to work at the hospital, right?
A. Yes.
Q. An application is required, right?
A. Yes.
Q. References are required, right?
A. Yes.
Q. And the references that are required -- at
least one needs to be from the last job worked at,
of Farmer by Centennial Hills before and during work
at Centennial Hills." We sort of started to get into
that in the last deposition, so let me kind of
    Farmer came on, and certain
documents are required before an agency staff is
llowed to work in the hospital. Is that correct?
    A. That is correct.
    Q. And those documents, for example, are the
    assigned job description. That's one of those
    cuments that's required, right?
        A. Yes.
        Q. A skills competency checklist. That's
        A.
        A. Correct.
        Q. All the various certifications. That's
    required. You've got to have those before you're
    A. Yes.
    Q. An application is required, right?
    A. Yes.
    A. Yes.
    least one needs to be from the last job worked at,
right?
    A. Typically.
    Q. Well, yeah. If you didn't work at all, I
assume you don't have a reference, right?
    A. Right.
    Q. But if you worked, it would be from the
last job you worked at, right?
    A. Right.
    Q. Okay. And it was required that Centennial
Hills Hospital have those references, including the
last job worked, before he was allowed to work at the
hospital, right?
A. Yes.
Q. Do you know who Crystal Johnson is?
A. No.
Q. Have you ever read her deposition in this case?
A. No.
Q. I'm sorry?
A. No.
Q. Crystal Johnson testified that she was the staffing person for Mr. Farmer's file, and Crystal Johnson testified that she never got the references. Are you aware of that?
A. After reviewing the documentation, I can
definitely see that the references are not in the file.
Q. Okay.
A. I mean it is circled on here, "Need,"
although it's signed off. Usually the sign off is to
indicate it's completed, but it does say "Need" on
here. But after a review of the file, we were not able to find the references.
Q. So would you agree with me that if there were no references in the file, it the references were not provided to you by ANS or by Mr. Farmer, he should not have been working at the hospital? Is that correct?
A. There are requirements certainly, but references don't typically detail out a person's ability to do the job.
Q. That's not what I asked you.

There's certain requirements to work at Centennial Hills Hospital, right?
A. Correct.
Q. You have them, right?
A. Yes.
Q. Nurses have them, correct?
A. Yes.
Q. Janitors have them, right?
A. Yes.
Q. And one of those things is these references, right?
A. Yes.
Q. Without them that individual is not allowed to work in the hospital, correct?
A. Correct.
Q. Okay. So why was Mr. Farmer working at Centennial Hills Hospital on May 14, 2008?
A. I don't know. I mean honestly going back and looking at the application, it certainly shows the references were not completed; but again, I don't have an answer for that.
Q. Okay. One of the ways people who work at Centennial Hills Hospital are investigated by the hospital is by looking at those references, right?
A. Yes.
Q. So if Centennial Hills Hospital did not have those references that were required of Mr . Farmer, wouldn't you agree with me that
Centennial Hills Hospital did not properly investigate Mr. Farmer before allowing him to work at the hospital?

MR. BEMIS: I object to form. Calls for a legal conclusion. Incomplete hypothetical.

BY MR. MURDOCK:
Page 25
Q. You can answer the question.
A. In a complete check the references should have been in place.
Q. Let's just answer my question. We know they should have been there, okay?

My question was very specific
though, because my question was talking about the
references are part of your investigation of
Mr . Farmer before allowing him to be at the hospital, right?
A. Correct.
Q. But if the hospital didn't require those references, didn't have those references of Mr. Farmer, but still allowed him to work at the hospital, wouldn't you agree with me that the hospital did not properly investigate Mr. Farmer before allowing him to work at the hospital?

MR. BEMIS: Same objections.
BY MR. MURDOCK:
Q. You can go ahead.
A. We didn't get the references, so it's not a complete file.
Q. That's not what I asked you.

MR. MURDOCK: Would you please repeat
the question, Carol?
(The following question was read:)
"But if the hospital didn't require those references, didn't have those references of Mr. Farmer, but still allowed him to work at the hospital, wouldn't you agree with me that the hospital did not properly investigate Mr. Farmer before allowing him to work at the hospital?" MR. BEMIS: Same objection.
THE WITNESS: Yes.
BY MR. MURDOCK:
Q. Thank you.

The next subject is the VHS
registry of Steven Farmer. We already talked about that, right?

MR. BEMIS: We did.
BY MR. MURDOCK:
Q. The VHS, just so l'm aware, that's \(\mathrm{CHHO} 0-318\) through -- it looks like 321. That's those documents you said from One Staff?
A. Yes.
Q. And these are the only ones you could pull off, right?
A. Correct.
Q. Because you don't use it anymore?
A. Correct.
Q. Did you go back and check again, in preparation for this deposition, whether or not you could actually pull off more?
A. Yes. I know our staffing coordinator tried to pull it up, but it's no longer on the server anymore, so --
Q. Okay. Let's go on to the next one then. Kronos Log. What is Kronos?
A. It's our timekeeping system.
Q. Is there a Kronos Log for Mr. Farmer?
A. That I don't know. The only files I have are the registry and the accounting component.
Q. Did you do anything to find out if there was a Kronos Log?
A. I was looking into it, but I never got a complete answer on that.

MR. BEMIS: Can we take a break for a second?

MR. MURDOCK: Yeah, why don't you take a break.
(Recess.)
BY MR. MURDOCK:
Q. We already talked about the agency payroll spreadsheet, is that correct?

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A. That's correct.
Q. That's 366 to 372 ?
A. Yes.
Q. Okay. Does that have on there where

Mr. Farmer was working?
A. By department.
Q. And that's what we talked about before.

That's how we figured out that on May 14, 2008, from the 7:00 p.m. to 7:00 a.m. shift he was working two hours in the ER, and then nine and a half hours on the sixth floor. Is that correct?
A. That's correct.
Q. Okay. Let's move on to paragraph 23 of the Notice. It's the 2012 deficiencies. I'm not going to get into all the deficiencies. That wasn't the point of that.

Nevertheless, there were
deficiencies found by the state, is that correct?
A. That's correct.
Q. And one of those deficiencies that was
found is that there was no policy in place at
Centennial Hills Hospital regarding staff-on-patient abuse, is that correct?
A. There was modifications that needed to be made to the policy. The specific incident that
started the state investigation was an account of verbal abuse. So as a result of the investigation they made changes to accommodate an additional abuse policy and modifications to our grievance policy.
Q. Okay. But was there a specific policy back in 2008 on staff/patient abuse? In other words, what to do if you witnessed it, who to notify, things like that?

MR. BEMIS: I object that it's outside his designation. But go ahead and answer.

MR. MURDOCK: Well, it goes along with this. That's all.

THE WITNESS: I'm not sure.
BY MR. MURDOCK:
Q. And the reason l ask -- and l'm not trying to be a smart guy -- the deficiencies state that there was no policy regarding staff-on-patient abuse. I recognize that that's from a verbal abuse issue.

But nevertheless, my understanding is that the state interviewed -- I don't know, a bunch of employees - they went through it, and the problem was nobody really knew what to do. I guess some people did, some people didn't, and that's why the state wanted an actual -- kind of like a notification tree as to what to do. Is that correct?
A. That's correct.
Q. So would I be safe to say that back in 2008
there was no policy on staff/patient abuse in terms
of those things, in terms of notifications, things
like that?
A. In terms of the policy we added, obviously that wouldn't have been in place at that time, in 2008.
Q. There is a policy now though, right?
A. Correct.
Q. So now if I'm a staff member and I see some
sort of staff-on-patient abuse, I can go look at the policies and procedures and they tell me exactly who to notify, what to do, and things like that. Right?
A. That's correct.
Q. Okay. But back in 2008 there was no such policy, correct?
A. It wasn't specified, yes.
Q. For example, if a nurse became concerned that a person working at Centennial Hills Hospital was very overly attentive of female patients, and very anxious to connect them to the monitors and disconnect them from the monitors, which would require reaching into their clothing, there was no policy in place at Centennial Hills Hospital that

1 would direct that person as to who to inform and what
to do about it. Is that correct?
MR. BEMIS: I object to form.
Incomplete hypothetical. Go ahead and answer.
THE WITNESS: Policy detail -- we do
have a policy regarding chain of command, whenever
there are issues or concerns, regardiess of what it
happens to be. And those are certainly in place.
BY MR. MURDOCK:
Q. Absolutely. But I'm just talking
specifically about this sort of thing, which is
staff-on-patient abuse. Right?
MR. BEMIS: I object to form.
BY MR. MURDOCK:
Q. I mean you'd agree that's what I basically just read, right?

MR. BEMIS: | object to form.
THE WITNESS: (Witness nods.)

\section*{BY MR. MURDOCK:}
Q. You have to answer verbally.
A. Yes.
Q. So what I'm getting at is, back in 2008 if
this nurse found out that another nurse was concerned because someone working at Centennial Hills Hospital was very overly attentive with female patients, and

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very anxious to connect them to the monitors and disconnect them from the monitors, which required them to reach into their clothing, there was no policy specifically set forth and notification tree as to what that nurse was supposed to do about it in terms of policies and procedures, specifically relating to staff-on-patient abuse at Centennial Hills Hospital in 2008. Is that correct?

MR. BEMIS: I object to form.
THE WITNESS: That policy did not exist at that time, yes.
BY MR. MURDOCK:
Q. So I'm correct, right?
A. Yes.
Q. Thank you.

If a nurse observed a male sitter
in a female patient's room with the lights out and the door closed, and that same nurse hears yelling coming from that room -- yelling such as, "I don't want you by me, get out of here" -- there was no policy in place at Centennial Hills Hospital back in 2008 to tell that nurse specifically what to do about that situation. Is that correct?

MR. BEMIS: Form. Foundation.
incomplete hypothetical.

MS. HALL: Join. Incomplete hypothetical.

THE WITNESS: I'm sorry, repeat the question?

MR. MURDOCK: Are you kidding me?
MS. HALL: Do you want it read back?
MR. MURDOCK: No.
BY MR. MURDOCK:
Q. I want you to listen to the following hypothetical.

The nurse on the floor, sixth or
seventh floor probably -- let's just say sixth or
seventh floor back in 2008. There's a sitter in one
of the patient rooms, okay? It's a male sitter with a female patient.

The nurse observes that the lights
are out in the room, the door is closed, and then
coming from that room she hears yelling, "I don't
want you by me. Get out of here."
Was there a policy in place at
Centennial Hills Hospital back in 2008 that would direct her as to what to do about that situation?

MR. BEMIS: Form. Foundation.
Incomplete hypothetical. Outside the scope of his
designation.
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MS. HALL: Join.
MR. BEMIS: Please answer.
THE WITNESS: To me that would be
dictated by chain of command policies.
BY MR. MURDOCK:
Q. Okay.
A. You don't need to have a specific abuse policy to know when there's inappropriate conditions occurring.
Q. But the state came in in 2012 and mandated you to have a policy, despite the fact you've got these chain of command policies. So the State of Nevada seemed to think you ought to have one, right?
A. Agreed.
Q. And you changed the policies in order to
have one, right?
A. Yes.
Q. So going backwards, back to 2008 when you didn't have one, there was no policy for this nurse that we just talked about, to go look at and tell her what to do about this sort of staff-on-patient abuse, or possible staff-on-patient abuse. Is that correct? MR. BEMIS: Asked and answered. THE WITNESS: No specific abuse policy. BY MR. MURDOCK:
MS. HALL: Join.
THE WITNESS: To me that

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\section*{Page 37} about the Kronos question that you asked previously? MR. MURDOCK: Oh, yeah.
MR. BEMIS: Just ask him whether Kronos
applies to Centennial Hills staff or --
MR. MURDOCK: Ill ask him. Let me
just go back for a second.
BY MR. MURDOCK:
Q. First of all, let's go backwards in time for a second. What is Kronos?
A. Kronos is our payroll management system. MR. SILVESTRI: It's what? THE WITNESS: It's our payroll management system. So it's basically how our staff badge in and badge out.
BY MR. MURDOCK:
Q. Okay. That's what I thought it was, and you just changed it on me with that payroll thing.
A. It encompasses that component, so --
Q. Okay. Did Kronos apply to agency staff members?
A. It did not. It was only for in-house employees.
Q. So in other words, these agency staff personnel didn't get a badge from Kronos, right?

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A. That's correct.
Q. Was Kronos even in use in 2008?
A. Yes.
Q. Where did Mr. Farmer get his badge, if he didn't get it through Kronos?
A. He wouldn't get a badge with Kronos access.

He would get a hospital badge without that component on it.
Q. And if you didn't have Kronos access, would you be able to access anywhere in the hospital, or were you limited in certain circumstances?
A. Depending upon where the employee worked, from a skill level and otherwise, they would be granted access.
Q. So for example, Mr. Farmer was a CNA.

Where did his badge allow him to go?
A. Well, based upon the detail, it was obviously the ER, sixth floor, seventh floor areas.
Q. Let me ask you this, because maybe I can now understand this.

That badge that Mr. Farmer had -does that open the door to certain areas? For example, the ER. Does it open the ER, to get back there?
A. Today it would. I honestly don't remember
back in 2008 if the doors were card accessed.
Q. So when you say it allowed him to go back there, maybe you can explain that to me. Because I'm a little confused.
A. Today as people get hospital badges, based upon the area they work, they get granted access.
Q. Right.
A. Today the various areas of the hospital have badge access to them. So the card would be built in with that access, based upon where the individual practiced or worked.

So if they were in the ER, they
would have access to the ER, because those doors are badge accessed.
Q. How did those doors work back in 2008 though?
A. That's whal I don't know -- if those doors
were badge accessed at that time. I would have to go back and check.
Q. In other words, was Farmer allowed anywhere in the hospital with his badge?
A. Like I said, I don't know. I don't know all the areas that were under control at that time, in terms of access control. So \(/\) couldn't clearly give you an answer on that.
Q. Okay.

MR. MURDOCK: Jim?
MR. SILVESTRI: I do have some
questions.

\section*{EXAMINATION}

BY MR. SILVESTRI:
Q. It's my understanding that you're identified as what we call the Rule \(30(b) 6\) witness for Centennial Hills Hospital for category number 11, which is the use of Steven Farmer as a sitter.

MR. BEMIS: No, he's not.
MR. MURDOCK: He's not, no.
MR. SILVESTRI: Who is? That's coming
up?
MR. BEMIS: Yeah. Not today. MR. MURDOCK: Jim, let me tell you,
just so you know, the square ones are his. I should have given you a copy of that.

MR. SILVESTRI: Okay.
BY MR. SILVESTRI:
Q. So just so l'm clear, you are not the witness for number 26, which is, "All tasks assigned to Steven Farmer by Centennial Hills from May 14, 2008 to May 16, 2008?





\section*{DISTRICT COURT}

CLARK COUNTY, NEVADA
JANE DOE,
Plaintiff,
vs.
CASE NO. 09-A-595780
VALLEY HEALTH SYSTEM LLC, a Nevada limited
liability company, d/b/a CENTENNIAL HILLS HOSPITAL
MEDICAL CENTER; UNIVERSAL HEALTH SERVICES, INC., a
Delaware corporation;
AMERICAN NURSING
SERVICES, INC., a Louisiana corporation;
STEVEN DALE FARMER, an individual; DOES I through \(X\), inclusive; and ROE CORPORATIONS I through \(X\), inclusive, Defendants.
\(\qquad\)

DEPOSITION OF JANET CALLIHAM

Tuesday, August 18, 2015
1:30 p.m.

Page 1


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3 WITNESS: Janet Calliham
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## INDEX TO EXHIBITS

1 Universal Health Services Risk Management Worksheet 23

## EXAMINATION PAGE

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Rule 30(b)(4) of NRCP.)

JANET CALLIHAM,
having been first duly sworn, testified as follows:

BY MR. MURDOCK:
Q. Would you state your name for the record?
A. Janet Calliham.
Q. Janet, how do you spell your last name?
A. C-a-1-l-i-h-a-m.
Q. So you're Janet Calliham?
A. (Witness nods.)
Q. Is that a yes?
A. Yes.
Q. Have you ever had your deposition taken
before?
A. In my career, you mean?
Q. Yes.
A. Yes.
A. A couple.
Q. When was the last time you had your deposition taken?
A. I don't remember.
Q. You know you have a duty to tell the truth?
A. Yes.
Q. You know the law of perjury applies here as it does in a court of law?
A. Yes, it does.
Q. My understanding is that you are retired?
A. Yes.
Q. When did you retire?
A. This time I retired in April.
Q. That tells me you retired before, and then you unretired?
A. Yes.
Q. So you retired in April of 2015?
A. Uh-huh.
Q. Is that a yes?
A. Yes.
Q. And before then where did you work, right before then?
A. Right before then I retired from a hospital called Progressive Hospital.
Q. Where is that?
A. It was on Flamingo and Mcleod.
Q. What kind of place is that?
A. It's a long-term acute care. It's been sold and does not exist anymore.
Q. Okay.
A. It was sold at the end of April.
Q. Who owned it?
A. It was a stand-alone facility. It was not a corporate entity.
Q. Okay. And before you worked there where did you work?
A. I worked for Kindred Healthcare.
Q. Where at?
A. Part of it was at the Vegas facilities. I was the area director for quality over the three Vegas hospitals.

Then I went back to work for the region office and did a little traveling around to the hospitals in Southern California.
Q. Kindred?
A. Yes.
Q. How long were you at Kindred?
A. This time it was probably about three years.
Q. Which tells me you worked there before?
A. Yes.
Q. I want to stay with this for a little bit.

So you worked there for three years. Where did you work before Kindred?
A. Actually that was my first retirement.
Q. And that would have been around 2012 or so, 2011?
A. Yes. I was retired for about seven or eight months of ' 12.
Q. Where did you work prior to retiring in 2012, the immediate job?
A. Prior to?
Q. Yeah.
A. I was working at Kindred.
Q. Oh, okay. So you were working at Kindred, then you retired, and then you went back to Kindred?

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A. No. I worked at Kindred, retired, worked at Progressive, re-retired.
Q. Right. What I'm saying is, before you retired in 2012, where did you work before then?
A. I was working at Kindred from 2008 to 2012. Actually it would be 2011 technically. It would be December of '11.
Q. And my understanding is that you worked
there, and I think sometime in the summer of 2008 you moved to Kindred?
A. It was fall, I think. Early fall maybe of '08 that I went back to Kindred.

MR. VOGEL: Rob, can we go off the record?
(Discussion off the record.)
(Ms. Hall joined the deposition telephonically.) BY MR. MURDOCK:
Q. So sometime in the late summer or early fall of 2008 you went to work for Kindred, correct?
A. Yes.
Q. And prior to working for Kindred in 2008 Page 10 you worked at Centennial Hills, is that correct?
A. Yes.
Q. What did you do at Centennial Hills?
A. I was the administrative director for quality outcomes.
Q. When did you start that job?
A. Summer of '07. I think June.
Q. And between let's say June of '07, if that's when you started, sometime in the summer of '07, and January 20, 2008, what were you doing? Because the hospital wasn't opened yet.
A. Helping to get my areas of responsibility
ready to open.
Q. What were your areas of responsibility?
A. Quality, risk, infection control, medical staff office.
Q. What is "quality?"
A. It's looking at the processes and outcomes of care provided to patients.
Q. How do you do that?
A. Well, there's a lot off ways in which you Page 11 look at that, from setting up a plan, or how it's to be done; what are the roles and the responsibilities of each department director, how they will report their data. You teach them how to evaluate it, how to take actions.
Q. Is it safe to say that when you're looking at quality, that would be an after the fact issue, as opposed to before the fact? In other words, you're reviewing data?
A. Yes. Yes.
Q. In terms of "risk," tell me what that's all about.
A. It's very similar. You set up the processes, what the managers are responsible to do, and how do they report a concern if it arises.
Q. But aren't you also looking out for things
that could occur?
A. That's what your policy is each department manager is supposed to set up for their area.
Q. And how do they set that up? Is that in terms of a policy or procedure?

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A. (Witness nods.)
Q. Is that a yes?
A. Yes.
Q. But for instance, I've heard "risk" described -- not in the hospital context, but like in the hotel context, where risk management would walk around the hotel looking for things that might hurt someone. For instance, a carpet that's not level, or something like that.

Is that something that would be part of your job as risk, something similar?
A. There could be components of that, where I would walk around and look.

But each manager has to
determine -- for instance, your carpet example you gave me. That would be the director of plan ops. That would be part of his job, looking at plan operations, things that would be a potential risk to patients or staff.
Q. And I guess one of the procedures -- well,

1 do you work with the head of the departments to
create these policies and procedures?
A. The departments set their own policies and procedures up. If there is a component that relates to Joint Commission accreditation standards or the CMS conditions of participation, they may ask me to take a look at it or provide them a copy of the most current of those, so that they can ensure their policy is in full compliance with those.
Q. Infection control. I know what that is. What is the medical staff office? I don't understand that.
A. That has to do with the credentialing and privileging of physicians, nurse practitioners, and physician assistants.
Q. So that's what you did basically from the summer of 2007 until the hospital opened in January of '08, correct?
A. Yes.
Q. You were setting up all these processes and procedures and policies, things like that?
A. If it pertained to my area, yes.
Q. Right. And then when the hospital opened, what did you do then?
A. We started putting those processes in Page 14
place, setting up our meetings, having the people start monitoring and turning in the reports of their data.

My biggest role in that first few weeks was to work with the state when they came in and see that they had the policies, procedures; medical records, if they wanted to look at them. Whatever the state wanted to look at. It was to see that whoever had the document they wanted, they brought it in and reviewed it with the state. I coordinated that process with them.
Q. Okay. When incidents would occur at the hospital -- for example, let's say a slip and fall -somebody slips and falls on some water somewhere in the hospital. Would you be involved in that?
A. If it was a patient.
Q. Okay.
A. Not an employee.
Q. Okay. Because worker's comp would not be part of your area, right?
A. Right.
Q. What if it was a visitor?
A. Yes.
Q. That would be part of your area?
A. Yes.
Q. What would that fall under? "Risk?"
A. Yes.
Q. Let me just stick with the slip and fall type thing. It's easier for a few minutes. Assuming there was some kind of slip and fall or whatever, how would you go about investigating that?
A. The manager of the area where the patient fell -- there is a form they would complete.

They would investigate it, complete the documentation, review it with me, let me know if they needed to do something different. If it had been preventable, what could they do to prevent it, and then they would provide the document to me.
Q. What's the document?
A. It would be a -- every hospital has some kind of form or something.
Q. What was the form back at Centennial Hills?
A. I don't remember which form they had.
Q. Did they have a form, or did they have a system called Midas? Do you remember that?
A. Yeah, they had a Midas system. I don't remember what all went into it.
Q. Okay. And would you keep your own file about that? For example, the slip and fall would
happen. Would you keep your notes and things like that in a file?
A. If it went into the computer, my notes would probably be in the computer.
Q. Okay.
A. If it were notes for me to say, "Follow up on this or check on that," it might be in the paper file.
Q. Back in May of 2008 there was an incident involving Steven Farmer. Do you remember that?
A. A little bit.
Q. Tell me what you remember. Let's start with that.
A. I remember being contacted to come talk with a patient. When I was talking with the patient, her concerns were of inappropriate touching. That immediately made this a police matter.

I remember having security come to stay outside the door, checking with nursing to make sure that the nurse taking care of the patient that day was a female, and $I$ made the request of only female caregivers for the remainder of the patient's stay. I notified the CEO of the facility, and I notified the police.

When the police arrived at the building I escorted them up to the patient's room and I waited at the nurses' station until the police were done, in case I needed to facilitate anything, if I could assist in any way.
Q. Is that it?
A. I went and made some notes, and at some point later in that day we had a conference call. Beyond that, that's about it.
Q. Okay. Where did you make these notes?

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A. Upon discussion with my attorney and able to review them, I made them on a piece of paper.
Q. I'm sorry, what was the first part of that?
A. Upon discussion with my attorney and reviewing documents, they were on a piece of paper.
Q. I don't understand that first part, "upon discussion with your attorney."

MR. PRANGLE: She talked to me.
THE WITNESS: On discussion with my
attorney.
BY MR. MURDOCK:
Q. In 2008?
A. No. This morning.
Q. Oh.

MR. PRANGLE: I think she's telling you
that after talking to me, she remembered.

MR. MURDOCK: Oh, okay.
THE WITNESS: I didn't remember what I
had done with my notes.
BY MR. MURDOCK:
Q. Okay. Where are those notes today?

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have them?
Mr. PRANGLE: Because they relate solely to Cagnina.

Janet, is it correct all your
notes were specific to the patient Cagnina?
THE WITNESS: Yes. They were my notes reminding me of things I needed to do. BY MR. MURDOCK:
Q. What did you need to do?
A. Well, I wanted to make sure that the department managers remind their staff if a patient expresses discomfort with a caregiver, to not have that caregiver take care of them anymore.
Q. That was in the note?
A. Yeah. It was things like that to follow up on.
Q. Okay. So what does that have to do with Cagnina herself? That's just a general statement,
A. Right, but those are things that you do after an event. You re-educate staff.
Q. Well, you said "re-educate." That assumes staff is educated, correct?
A. The people that are hired are experienced people.
Q. Well, were staff educated in that?
A. I would not know what they were educated in prior to being hired at Centennial Hills.
Q. So the notes that you wrote don't specifically say "re-educate staff," do they?
A. I'd have to go back and look at them.
Q. When was the last time you saw them?
A. This morning.
Q. So you reviewed those in preparation for your deposition today, is that correct?
A. (Witness nods.)
Q. Is that yes?
A. Yes, But I don't remember the exact word. It could have been "remind staff," "educate" -MR. MURDOCK: I think I'm entitled to the notes.

MR. PRANGLE: And I'm going to disagree, because this was an event that happened two Page 21
days after Mrs. Doe's event, and it was things -- I guess in my possession, and maybe we can take it up with the Discovery Commissioner or someone else. And this was solely related to Cagnina. It had nothing to do with Doe.

MR. MURDOCK: But it goes to notice. It goes to foreseeability -- the whole thing about education and everything.

MR. PRANGLE: Well, if another event happened two days after that, they would do the same thing.

MR. MURDOCK: Yeah, but it's the same thing.

MR. PRANGLE: I will respectfully disagree.

MR. MURDOCK: Okay. I'm going to keep the deposition open, because I mean that's just not right. Now I understand the issue. Okay. BY MR. MURDOCK:
Q. So what else did your notes say?
A. To also make sure that the managers Page 22
remember to tell their staff if they felt uncomfortable with the patient, to reassign them to a different patient.

To remind them that any time a
patient voices discomfort and wished to talk to somebody, to get the right person in there to talk with them immediately.

If they make any allegation of anything, to remind them to notify their supervisor immediately so they will notify the right person.
Q. Was there an issue that someone wasn't notified?
A. No.
Q. So I don't understand why you're re-educating about things that didn't happen.
A. Because that's what we do in quality and risk. We remind everybody of the things that they need to do as part of their job responsibilities when an event of any kind occurs.
Q. Okay.
A. That's just what we do. It's part of our Page 23

18 job.
Q. Okay. You said you had a conference call?
A. Yes.
Q. Who did you have a conference call with?
A. Kevin called somebody in legal and risk, and Kevin, myself, Carol -- and I don't remember if there was even anybody else in the room.
Q. Okay. And tell me about the phone call.
A. It was to relate the incident that occurred; that we had notified the police.
Q. Okay. So it was like a one-minute phone call?
A. I don't remember that. I don't remember.
Q. Did you take notes?
A. No.
Q. As a result of that conference did you do anything?
A. Just followed up on whatever was on my notes.
Q. Which notes?
A. That I had made after I talked with the Page 24 patient.
Q. And how did you follow up on that? How did you do that?
A. I picked up the piece of paper and I looked to make sure, "Let's have a department managers' meeting, let's talk to the managers," and that kind of thing.
Q. So there was a department managers' meeting after this, is that correct?
A. At some point.
Q. When was it?
A. I don't remember.
Q. Was it days after? Was it weeks after? What are we talking about here?
A. I don't remember. I could only speculate.

I don't remember.
Q. So you had a department managers' meeting. Who was there?
A. I assume department managers.
Q. Was there an agenda?
A. I don't know.

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Q. Did you pass out anything?
A. I don't remember.
Q. In terms of in writing, did you give them anything?
A. I didn't. I don't remember giving out anything.
Q. Okay. So you had the conference call. You had this department managers' meeting at some point. Did you meet with any of the staff involved in the Roxanne Cagnina matter?
A. No.
Q. Did you meet with Christine Murray?
A. I don't know who Christine is.
Q. Do you remember having a meeting where you were present, Carol Butler was present, and Amy Bochenek was present, where you met several people
involved with the incident with Mr. Farmer?
A. No, I don't remember.
Q. Okay.

MR. MURDOCK: Let's mark this.
(Plaintiff's Exhibit 1 marked.)
Page 26 correct?

BY MR. MURDOCK:
Q. I assume one of your jobs was to review the Midas system when there were incidents, is that
A. Yes.
Q. Let me show you what's been marked as Plaintiff's Exhibit 1 . Have you ever seen that document before?

MR. VOGEL: What is that?
MR. PRANGLE: It's the Midas report.
THE WITNESS: Yes, this is the report
they showed me.
BY MR. MURDOCK:
Q. So you saw that this morning?
A. I saw it last week.
Q. You saw it last week. And you saw that I assume within days of the incident with Mr. Farmer,
A. I don't remember.
Q. Well, wouldn't that have been part of your

1 job, to review the Midas report?
Page 27
A. Yes, sir.
Q. And wouldn't you have done it within days?

MR. PRANGLE: Do you remember, or did
you have a custom?
THE WITNESS: I reviewed them, but I couldn't tell you when I reviewed this. I don't remember seeing this. I'm sure I probably did. It's seven years ago.

BY MR. MURDOCK:
Q. I understand. Nevertheless, it was part of your job to review these reports, correct?
A. Yes.
Q. How often did you review them? Did you review Midas reports on a daily basis, weekly basis, monthly basis? What are we talking about here?
A. Every day or two probably.
Q. Okay. So is it fair to say that this was put in -- I believe it was the 16th?
A. Yes.
Q. That you probably reviewed it within a couple days? Is that fair?
A. Probably.
Q. Okay. And look at the witnesses down on the second page. There's a couple witnesses listed, Page 28
is that correct?
A. It says "Employees." "Witness Data."

Okay. "Employees." Yes, there's three people listed.
Q. One of the people is Christine Murray, is that correct?
A. Yes.
Q. So Christine Murray was a witness who would have been identified on the Midas report that would have been within days of the incident, is that correct?
A. Yes. This says she was a witness to it.
Q. And is it your testimony that you never spoke with the witnesses?
A. I don't remember speaking with either one of those. The director of nursing and the CNO would be the ones who would speak with the nurses.
Q. But that's something that would have occurred, right?
A. I'm assuming it would have.
Q. There's also another name on there.

There's Lorraine Wescott. Do you see that?
A. Uh-huh.
Q. Is that a yes?
A. Yes.
Q. And then there's somebody else. Do you see that?
A. Beverly Bartley Lewis.
Q. Who is that?
A. I don't know.
Q. Do you have any idea who she is?
A. No, I do not.
Q. Did you investigate the incident at all in terms of risk?
A. When an issue is a legal issue, a police issue, as this became, no, we are usually coordinators of the process for the police, the attorneys, and stuff like that. We do not get involved in interviewing people and stuff like that.
Q. You're aware though, of course, that Carol Butler interviewed some people, right?
A. As the CNO she may have, yes.
Q. She certainly may have interviewed some of the witnesses?
A. She could have.
Q. Would that be part of her job?

MR. PRANGLE: Objection. Foundation.
THE WITNESS: Huh?
MR. PRANGLE: I just made an objection for the record. If you know the answer, you can give
it.
THE WITNESS: I don't know who she
interviewed.
BY MR. MURDOCK:
Q. No, I understand that, but wouldn't as part of her job be interviewing those witnesses?

MR. PRANGLE: Same objection.
THE WITNESS: It could be a "yes" or
"no" answer to that.
BY MR. MURDOCK:
Q. Just to your knowledge.
A. Because this was a police issue, if she interviewed it would be done under the direction of Page 31

7 me a description of who they are? Short, heavy,
8 tall?

9
back seat coordinator role in this.
Q. Who were you coordinating for?
A. Our attorneys.
Q. Who was that?
A. I don't remember who they were.
Q. Can you give me an example? Can you give
A. Sir, it's been seven years ago. No, I
our attorneys. They may have wanted to interview; they may have asked her to talk with them. I don't know. I do not remember after seven years who told who to do what. I wrote changes, when it's a police and legal issue.
Q. Sure. But of course you might have that in your notes?

MR. PRANGLE: Might have what?
BY MR. MURDOCK:
Q. As to who instructed you to do $X$ or $Y$ or $Z$, right?
A. I don't remember. My role took more of a Page 32

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don't remember at all.
Q. Were you involved in the root cause analysis?
A. Probably.
Q. That's a document that you would have reviewed, wouldn't you have?
A. In this particular situation the root cause was handled by another person in the company.
Q. Who is that?
A. Ann Savin.
Q. Who is Ann Savin?
A. I don't remember Ann's title, but she was over all of the facilities as far as quality and risk.
Q. Who does she work for, or who did she work for?
A. I don't remember the name of her specific boss.
Q. Well, no, no. Did she work for Valley

Health Systems?
A. Yes, she worked for Valley Health Systems.

Page 33
Q. Okay. So you said the root cause was probably handled by Ann, correct?
A. Yes.
Q. But do you recall reviewing it?
A. I don't recall, but I'm sure I did.
Q. Why was Ann Savin given the task of handling the root cause analysis?
A. Ann was the quality and risk -- whatever her title was -- over all of the hospitals, and she tended to be involved in root cause analysis when it occurred in any hospital. That was just a routine part of her job.
Q. Okay. So I want to go back to these notes of yours.

You testified that your notes stated that you needed to remind staff if patients are uncomfortable?
A. Remind the managers to remind their staff.
Q. That if patients are uncomfortable, what?
A. Whatever they're uncomfortable about --

1 let's say it's a caregiver. Change caregivers. If

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it's a staff person taking care of a caregiver and the staff person is uncomfortable, you change the staff person.

You also in the situation remind -- I'm sure it's part of my notes to remind them that because this was a police matter, if media called in, to refer them to the public relations person we had at the hospital.
Q. Why is that?
A. Because we don't speak to the media. That is her job.
Q. When you said "we," who is "we" -- "we" don't speak to the media?
A. Employees. Managers.
Q. Okay. So the employees of Valley Health System or at Centennial Hills Hospital are instructed not to speak to the media?
A. They're not told they can't, but if someone calls on a case, you refer them to public relations. At least the managers do.
Q. Are they allowed to speak to the police?
A. If the police want to talk to somebody, yes, they can talk to somebody.
Q. What if they have something to say to the Page 35
police, and the police don't contact them first? In other words, they contact the police. Is there a problem with that?
A. No. That's their right.
Q. And they didn't need to go through you?
A. No.
Q. So there was no problem with a nurse, for example, picking up the phone and calling the police and telling them they had information regarding Mr. Farmer. Is that correct?
A. If an employee wanted to do that and not inform the administrative team, then that was their right to do that.
Q. Do you recall ever meeting with any of the personnel involved with this matter?
A. No.
Q. And I'll throw some names out to you to see if you remember. If you don't, you don't. Do you remember an individual by the name of Ray Sumera?
A. (Witness shook head.)

Page 36 of Margaret Wolfe?
Q. Is that a no?
A. No. Sorry.
Q. Do you remember an individual by the name

```
A. No.
Q. Do you remember an individual by the name of Karen Goodheart?
A. No.
Q. In terms of your coordination of efforts for your attorneys in this matter, did you obtain certain documents for them?
A. If they requested me to, I would.
Q. For example, did you ever provide any medical records to any of your attorneys in this matter?
A. A medical record? They would ask the medical record department for that record.
Q. Okay. Did you coordinate it though?
A. I don't remember.
Q. Well, wouldn't that be a risk issue?
A. Not necessarily, no.
\[
\text { Page } 37
\]
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Q. Did they need a HIPAA release to do that?
A. I don't know. I don't know if the attorney needed one or not.
Q. Did you ever instruct medical records, "Hey, as part of your risk analysis you're not to give these medical records to anybody without a release?"
A. The director of medical records would do
that -- would tell their staff how to do their job, and what the rules are on that.
Q. But wouldn't you oversee that?
A. No. If there was a problem, then the director would come to me and we would talk with whomever we would need to, to resolve an issue.
Q. Were you involved at all with setting up the procedures in terms of hiring people?
A. No.
Q. Wouldn't you agree with me that's part of risk, to hire the right people?
A. That's an HR function.
Q. But you weren't involved with that at all? going to Centennial Hills twisted my arm and talked to me, and they made a job offer that I really
A. No. Only my two people -- or three people.
Q. Who were they?
A. The infection control practitioner, the performance improvement analyst, and the medical staff office manager.
Q. Who was the performance and improvement analyst?
A. I don't remember her name now.
Q. Why did you leave Centennial Hills?
A. The company that I had worked for prior to
decided I would like. And I had enjoyed working with the company and I knew a lot of people I'd be working with, so I did finally decide to accept their offer.
Q. When the Cagnina incident began, did you start a file on it?
A. I don't remember.
Q. At some point I assume you became aware that it was more than just Roxanne Cagnina, is that correct, who was alleging things about Mr. Farmer?

Page 39
A. I'm not sure I understand what you're referring to.
Q. Well, did you ever become aware that there were other women who alleged improper touching and assault?
A. When Mr. Farmer went to trial and it was on the news, they talked about other women coming forward and stating that he had allegedly inappropriately touched them as well. Then I knew there were other people involved.
Q. So before then you didn't know, is that correct?
A. No.
Q. At all?

MR. PRANGLE: Yes, it's correct? He asked you if it was correct, and you said, "No."

Mr. Farmer?
A. No.
Q. In other words, did you go around and just make sure that this wasn't a facility-wide issue?
A. No.
Q. Why not?
A. Very honestly, I had never heard of going around and asking other patients like that. I never heard of it, never known of anyone who's done it, and no, I did not.
Q. Did you think about it?
A. No.
Q. The conference call that you were on -- was it discussed?
A. Sir, I don't remember that call of seven years ago.
Q. What is your overriding goal of your job at Centennial Hills?

MR. PRANGLE: Objection to form.
Vague. If you understand it, you can answer.
various programs I was responsible for and see that all the people who feed into quality -- which is every employee, your physicians, your managers -- are doing the things that they need to do.

And the managers come to me if they have questions about what they're measuring, how they're doing.

My job was to coordinate all of these things and to see that the right things got reported to CMS.

BY MR. MURDOCK:
Q. But all of that -- using all of that is to just go out and really look out for the safety of the patients, right?
A. Yes. That's what it is all about.
Q. Right. Now, part of your job is to also foresee things. You're the person at Centennial Hills, for example, to put grossly, who's got the crystal ball, and you're looking out for things that might happen, right?

MR. PRANGLE: I object to form.
THE WITNESS: Huh?
MR. PRANGLE: I just made another objection for the record. If you understand the Page 42
question, you can answer it.
THE WITNESS: Well, if you're talking about say a potential for slip and falls, to use your example from earlier -- you know, I would walk the floors, looking around, making sure they weren't wet. You know, making sure things were running, and check with the managers, any concerns, any issues, and things like that. BY MR. MURDOCK:
Q. Right. But overall, again, like you said, it's for the safety of the patients. That's the paramount interest, right?
A. Uh-huh.
Q. Is that yes?
A. Yes.
Q. But in terms of looking out for the safety of the patients, you need to kind of foresee events that could occur.

For example, the reason that you
wanted to re-educate these department managers, to remind them of things, is so that things don't happen Page 43
again, right?
A. That's what you you'd like to try to prevent.
Q. Right. Because you foresee things
happening. If they don't do these things that you reminded them of, things can be foreseen, right?

MR. PRANGLE: Objection to form. You can answer. BY MR. MURDOCK:
Q. Go ahead.
A. Yes. That's what you try to do.
Q. Okay. Prior to starting your job at Centennial Hills, were you a risk manager elsewhere?
A. Yes, I had been.
Q. Where?
A. At Kindred, and California, and -- what was that hospital? Western Medical Center, and I think West Anaheim Medical Center. I had been a risk manager in maybe three.
Q. Is there a -- I don't know, kind of like a magazine that like every risk manager gets? Is that Page 44

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something that you can tell me about?
A. There are various magazines out there. I don't know if any one is any better than the other.
Q. What are the ones that you read?
A. I usually read the National Quality Association one, and for awhile the -- there's a national risk group.
Q. Is there one just for hospitals -- hospital
risk managers?
A. Neither one of those were strictly hospitals.
Q. Is there one out there for strictly hospitals?
A. I don't know.
Q. Have you ever taken any courses in hospital
risk management?
A. A long time ago.
Q. When?
A. It would be maybe 1990, '91, in through there.
Q. So let's say in between 1992 and May of Page 45

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2008, is it safe to say you took no courses regarding risk management?
A. You go to seminars.
Q. I'm sorry?
A. You go to seminars.
Q. Okay. How often did you go to seminars?
A. That one I couldn't even -- I don't know.
Q. Were they yearly?
A. It would depend on when they were offered. I mean sometimes they would be offered once a year; sometimes not for a couple of years before there would be anything offered.
Q. Are you a certified risk manager?
A. No.
Q. Are you a licensed risk manager?
A. No. I don't know of a licensing of risk management.
Q. Okay. Are you a member of a group that puts on seminars?
A. I used to be back in the '90s. I was a member for awhile of the -- whatever the national Page 46
risk group is.
Q. Were you ever a member of any group that was specific to hospital risk management?
A. I was a member of the quality group. It was a quality risk group -- probably late '90s or early 2000, I would have to guess.

It was a quality risk group. They weren't separate groups. Well, at least not where I was in Southern California, they didn't have separate groups.
Q. What was the name of that group.
A. I don't remember.
Q. Let's make it specific between 2007 and 2008.

When you started at Centennial Hills Hospital -- between the time you started and
let's say May 16, 2008, did you attend any seminars during that time period?
A. I don't remember attending any during that time.
Q. Do you remember attending any seminars at Page 47
all ever specifically with regard to hospital risk management?
A. Not since I've moved to Nevada.
Q. When did you move to Nevada?
A. 2006 .
Q. So before 2006 you might have attended some specific seminars with regard to hospital risk management, is that correct?
A. It's possible, but the meetings were usually quality and risk combined.
Q. And all I'm talking about right now is specific. So let's put it this way.

At least after 2006, or starting around 2006 when you moved to Nevada, you didn't attend any seminars specific to hospital risk; is that correct?
A. Not specific to hospital risk.
Q. Did you ever meet with the risk managers from the other Valley Health System hospitals?
A. Yes.
Q. How often?

Page 48
A. I think Ann had us meet once every other month or once a quarter. At that point in time when I worked for them, we weren't separate. You were quality and risk, and we met together as a group with Ann. Probably about every other month maybe.
Q. So since you started in 2007 in the summer, and you left early fall/late summer of 2008, is it safe to say there were probably approximately six meetings that you attended? Is that correct?
A. Probably, yes.
Q. Was the Farmer situation discussed at any meeting?
A. I don't remember that being discussed. Those were not confidential meetings. Specific instances would not be discussed at meetings like that.
Q. No, but what about things you learned from that incident?
A. Generalities would be discussed, sure.
Q. Right. So was that discussed?
A. I don't remember. I can only tell you I would assume at some point we did, but I can't remember.
Q. And at these meetings did you take notes?
A. No.
Q. Did anybody take notes?
A. Not that I remember.
Q. Would there be an agenda?
A. I don't know. I don't remember if there was even an agenda.
Q. At any of the hospitals that you were at was there ever an incident regarding a sexual assault?
A. At any hospital I've worked at ever?
Q. Yeah.
A. Yes.
Q. Where?

THE WITNESS: Do I name the hospital? MR. PRANGLE: Go ahead. THE WITNESS: Kindred. I remember one at Kindrred. BY MR. MURDOCK:
Q. I'm not asking the patient's name.
A. Yeah. It was at one of the hospitals in Southern California. I honestly don't remember which Page 50

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one. It was way too long ago.
Q. Was it a staff-on-patient sexual assault?
A. It was a patient alleging.
Q. That a staff member sexually assaulted her?

MR. MURDOCK: Thank you. I have nothing further at this time.

MR. VOGEL: No questions.
MR. BIGGAR: No questions.
MR. PRANGLE: We'll reserve signature.
MS. HALL: I don't have any questions.
(The deposition concluded at 3:31 p.m.)

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typewritten transcription of said deposition is a complete, true, and accurate transcription of my said shorthand notes taken down at said time. Review of the transcript was requested.

I further certify that I am not a relative or employee of an attorney or counsel involved in said action, nor financially interested in said action.

IN WITNESS WHEREOF, I have hereunto set my hand in my office in the County of Clark, State of Nevada, this 23rd day of August, 2015.

Carol O'Malley, CCR No. 178

DEPOSITION ERRATA SHEET

File No. J0173225
Case Caption: Doe vs. Valley Health System dECLARATION UNDER PENALTY OF PERJURY

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Signed this day of , 20 •

JANET CALLIHAM

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## TAB 74



| 1 | Deposition of Margaret Wolfe, RN Page 5 |
| :---: | :---: |
| 2 | May 6, 2015 |
| 3 | (Prior to the commencement of the deposition, |
| 4 | all of the parties present agreed to waive |
| 5 | statements by the court reporter, pursuant to |
| 6 | Rule 30(b)(4) of NRCP.) |
| 7 |  |
| 8 | MARGARET WOLFE, RN, |
| 9 | having been first duly sworn, testified as follows: |
| 10 |  |
| 11 | EXAMINATION |
| 12 | BY MR. MURDOCK: |
| 13 Q. Would you please state your name for the14 record? |  |
|  |  |
| 15 | A. Margaret Wolfe. |
| 16 | Q. Ms. Wolfe, have you ever had your |
| 17 deposition taken before? |  |
| 18 | A. No. |
| 19 | Q. Are you represented by counsel here? |
| 20 | A. Yes. |
| 21 | Q. Who is that? |
| 22 | A. John Bemis. |
| 23 | Q. How did you come to be represented by Mr. |
| 24 | Bemis? |
| 25 | A. I believe I was contacted by their office. |
| Q. So he told you that you were going to be |  |
| 2 represented by him? |  |
| 3 A. They did. |  |
| 4 Q. They did? |  |
| 5 MR. BEMIS: I object to form. |  |
| 6 From the aspect of her acceptance |  |
| 7 of the representation, she can talk. But after that |  |
| 8 l 'm going to instruct her not to answer about |  |
| 9 anything we talked about. |  |
| 10 BY MR. MURDOCK: |  |
| 11 Q. Go ahead. |  |
| 12 A. I was offered their representation |  |
| 13 accepted it. |  |
| 14 Q. Okay. Good. How much are you paying? |  |
| 15 A. I'm not paying anything. |  |
| 16 Q. When you were offered their representation, |  |
| 17 did they tell you that they also allegedly represe |  |
| 18 a whole bunch of other people? |  |
| 19 | MR. BEMIS: I object to form and |
| 20 instruct her not to answer anything we discussed. |  |
| 21 BY MR. MURDOCK: |  |
| 22 | Q. Go ahead. You can answer the question, if |
| 23 | you want. |
| 24 | A. I'm going to take the advice of my |
|  | attorney. |

that.
Q. And you said?

10 A. And I said, "Yes."
Q. And what else?
A. I believe at that point she offered the representation, and I accepted.
Q. Did she tell you that you needed representation? MR. BEMIS: Objection to after -MR. MURDOCK: Prior. Prior.
BY MR. MURDOCK:
Q. Did she tell you that you needed representation?
A. No.
Q. Did she advise you that she thought you should be represented?
A. No.
Q. Did you believe you needed to be
represented, for any reason whatsoever?
MR. BEMIS: Calls for speculation.
BY MR. MURDOCK:
Q. Go ahead.
A. I'm not sure if I should answer or not.
Q. Well, did you believe that you needed to be
represented, prior to her offering you
representation?
A. No.
Q. In other words, was there any reason in your head that you thought, "Hey, maybe I should get a lawyer?"
A. No.
Q. But when they offered it, you accepted it, right?
A. Yes.
Q. It's free, right?
A. Well, that was part of it.
Q. Okay. And without telling me the contents of the discussions, did you at some point have a discussion with Mr. Bemis?
A. Yes.
Q. When was that?
A. We've had a few conversations on the phone, and then one yesterday.
Q. When were the phone conversations? Do you remember?
A. Within the last couple of weeks.
Q. Now, your deposition was originally set for last week?
A. Yes.
Q. You're aware of that, right?
A. Yes.
Q. But you did not show up, is that correct?
A. That's correct.
Q. And why didn't you show up?
A. I had a conflict of interest with my
employer. I did try to cancel the deposition, and
apparently was unable to, and I had a choice to make
of where I had to be.
I had a mandatory education that I
had to do with my employer, that had I not shown up
to that, I would have been suspended.
Q. Okay.
A. And so I chose to keep my job.
Q. Did you tell Mr. Bemis that?

MR. BEMIS: I'm going to tell her not
to respond to anything her and I discussed.
BY MR. MURDOCK:
Q. Did Mr. Bemis tell you there was a court
notice for you to be here last week?
MR. BEMIS: I'm going to instruct her
not to answer anything that her and I discussed.
BY MR. MURDOCK:
Q. Did he tell you that?
A. I'm going to take his advice.
Q. Did he tell you that you could be sanctioned?

MR. BEMIS: I'm going to instruct her
not to answer anything that her and I discussed.
BY MR. MURDOCK:
Q. Did he tell you that he could be
sanctioned?
MR. BEMIS: I instruct her not to answer anything that her and I discussed.
BY MR. MURDOCK:
Q. Did he tell you that he attempted to get
the Court to change it by filing a motion, but the
Court refused?
MR. BEMIS: I'm going to instruct her
not to answer anything that her and I have discussed.
BY MR. MURDOCK:
Q. Did he tell you that he was too late in
filing the motion, despite the fact he could have
filed something earlier? Did he tell you that?

| 1 | MR. BEMIS: I'm going to instruct her Page 13 |
| :--- | :--- |
| 2 | not to answer anything her and I discussed. |
| 3 | BY MR. MURDOCK: |
| 4 | Q. Did he tell you that he fell below the |
| 5 | standard of care already in representing you? Did he |
| 6 | tell you that? |
| 7 | MR. BEMIS: I'm going to instruct her |
| 8 | not to answer anything that her and I discussed. |
| 9 | BY MR. MURDOCK: |
| 10 | Q. You're currently a nurse, correct? |
| 11 | A. Yes. |
| 12 | Q. And where are you a nurse at? |
| 13 | A. UMC pediatric ER. |
| 14 | Q. Now, Ms. Wolfe, you have no legal training, |
| 15 | do you? |
| 16 | A. No. |
| 17 | Q. You're not a lawyer? |
| 18 | A. No. |
| 19 | Q. You're not a paralegal? |
| 20 | A. No. |
| 21 | Q. You haven't gone to school for any legal |
| 22 | things? |
| 23 | A. Nothing. |
| 24 | Q. Do you know what perjury is? |
| 25 | A. Yes, I do. |
| 1 | Q. What is perjury? |
| 1 | A. Lying under oath. |
| 2 | Q. Do you know that it is a crime to lie to |
| 3 | the police? |
| 5 | A. Yes, I do. |
| 6 | Q. Do you know that it is a crime to obstruct |
| 7 | justice? |
| 8 | A. Yes. |
| 9 | Q. Do you know that it is a crime to obstruct |
| 10 | justice by lying to the police? |
| 11 | A. Yes. |
| 12 | Q. Prior to this deposition you were sitting |
| 13 | in my lobby, correct? |
| 14 | A. Yes. |
| 15 | Q. And I came to speak with you, correct? |
| 16 | A. Yes. |
| 17 | Q. And at that time I did not have an actual |
| 18 | conversation with you, did I? |
| 19 | A. No. |
| 20 | Q. On the other hand, I spoke, correct? |
| 21 | A. Corrent. |
| 22 | Q. I didn't ask you one question, correct? |
| 23 | A. Right. |
| 24 | Q. Do you know Steven Farmer? |

Q. Who is he?
A. He was a CNA that worked at Centennial Hospital at the same time I was there.
Q. What did he look like?
A. Poppa Smurf. Sorry. He had a white beard, white hair, medium stature.
Q. Did you give a statement to the police a
couple days -- well, actually it would have been
maybe a couple weeks after he was arrested, in 2008?
A. Yes.
Q. Did you lie to the police?
A. No.
Q. Did you make up any stories to tell the police?
A. No.
Q. After you spoke with the police, did you
speak with anybody at Centennial Hills Hospital about
what you told the police?
A. I don't recall.
Q. Who was your director of nursing at the
time? Do you remember?
A. Amy Bochenek.
Q. That's how you pronounce it?
A. (Witness nods.)
Q. Is that a yes?
A. Yes.
Q. Now, do you recall speaking with Amy --
A. Yes.
Q. I'm sorry, let me finish my question.
A. Okay.
Q. The only reason is, she's going to get mad at me.

Do you recall speaking with Amy
about Mr. Farmer?
A. Yes.
Q. Was that before or after he was arrested?
A. It was after, because the situation happened on the same day.
Q. Right. Okay. And you went to Amy to discuss the situation with Ms. Hanna, is that correct?
A. I didn't go directly to Amy, no.
Q. Who did you go to?
A. I went to my charge nurse that was on that shift.
Q. Who was that, by the way?
A. Ray Sumera.
Q. Now, Ray testified the other day that he was a relief charge nurse.
A. Uh-huh.
Q. Okay. Why did you go to Ray to talk about that incident?
A. Because that's my chain of command that I would follow.
Q. Have you seen the transcript of the conversation you had with Detective Saunders?
A. Yes.
Q. Do you recall any mistakes in that
transcript?
A. No.
Q. So you went to Ray because of the chain of command. After you went to Ray, did you go to somebody else?
A. Yes.
Q. Is that when you went to Amy?
A. No.
Q. Is that a yes?
A. Yes.
Q. What is a relief charge nurse?

MR. BEMIS: I object to form. Go ahead and answer.

THE WITNESS: A relief charge nurse
fills in when the permanent charge nurse is not
Q. Who did you go to?
A. I spoke with the nurse that I was giving
report to at shift change.
Q. Who was that? Do you remember?
A. Her name is Julie. I don't remember her last name.
Q. And when did you wind up speaking with Amy?
A. Later that day she called me.
Q. So somehow it got back up to her?
A. Yes.
Q. Were you at home at the time?
A. Yes.
Q. And my guess is that you repeated
everything you told Ray, correct?
A. Yes.
Q. And also everything you told Julie, correct?
A. Correct.
Q. Did you lie to them?
A. No.
Q. Prior to the day you spoke with Amy and the
day you spoke with Julie, and the day you spoke with
Ray when the incident with Ms. Hanna occurred, had
you ever spoken to anybody before about Mr. Farmer?
A. Yes.

## Page 18

Q. Who did you speak to?
A. Ray Sumera, and probably a couple other ER nurses, but I don't recall exactly who.
Q. And when would that have been? Do you recall?
A. Just throughout the course of his employment in the ER.
Q. And do you recall what you discussed?
A. I told them that he made me very uncomfortable, especially around female patients, and I did not want him in my female patients' rooms.
Q. What made you uncomfortable?
A. He was overly helpful with female patients, and it was just a feeling I had that made me uncomfortable and uneasy around him.

He would go into females rooms when there was no need for him to be in there, sometimes with the door or the curtain shut, and I felt that was inappropriate.
Q. And you had voiced this to Ray prior to the incident with Ms. Hanna?
A. Yes.
Q. And would it have been weeks and/or a month prior?
A. Weeks.

MR. SILVESTRI: I'm sorry, what was it?
THE WITNESS: Weeks.
MR. SILVESTRI: Thank you.
BY MR. MURDOCK:
Q. And when you had this discussion with Ray, what did he say -- the discussion weeks before?
A. I don't recall.
Q. Did he say he would take care of it?
A. He did say he would talk to him.
Q. When you had this conversation with Ray several weeks before, why did you have the conversation with Ray?
A. Because I felt it better for a male to be talking to a male about it, than me to be approaching Mr. Farmer.
Q. Was it also because Ray was a relief charge nurse?
A. No.
Q. But nevertheless, Ray was a relief charge nurse?
A. Correct.
Q. Now, a relief charge nurse is not always
the charge nurse?
A. Correct.
Q. It's just when the charge nurse is not

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there, he becomes the relief charge nurse?
    A. Right.
    Q. Now, is that because the charge nurse is
    absent, or for example because the charge nurse has
    gone to lunch, or something like that?
    A. No. The permanent charge nurse is not
scheduled that day.
    Q. Okay. But you knew at the very least when
you had these discussions with Ray, several weeks
    prior to the Denise Hanna discussion, that Ray was a
    relief charge nurse?
    A. Yes.
    Q. He may not have been at the time, but he
    certainly was a relief charge nurse, correct?
    A. Yes.
    Q. Okay. So l'd like to know a little bit
    more about the discussion you had with Ray several
    weeks before.
    A. Okay.
    Q. So I want to talk about that for right now,
okay?
    A. (Witness nods.)
    Q. You said that he was overly attentive --
    that Farmer was overly attentive with female
    patients?
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A. Yes.
Q. Now, you had not seen him assault anyone, correct?
A. No, not at that point.
Q. You had not seen him rape anyone?
A. No.
Q. Now, you said that he would go into rooms
of patients and you weren't there, and close the door?
A. Uh-huh.
Q. How did you know that --

MR. SILVESTRI: Hold on. Ma'am, you
have to answer out loud.
MR. MURDOCK: Yeah, I'm sorry.
MR. SILVESTRI: "Yeses" and "nos,"
because the court reporter will have a difficult time with that.

THE WITNESS: Okay. Sorry.
MR. SILVESTRI: So can we get a clear
answer on these? I'm sorry.
MR. MURDOCK: No, no. That's okay.
BY MR. MURDOCK:
Q. Now, when you said that he would go into rooms of patients and close the doors -- you witnessed that, correct?
A. Yes.
Q. And that was one of the things you
complained to Ray about, correct?
A. Yes.
Q. And why did you go to Ray about that? Not personally Ray, but why did you go to anybody about that?
A. I went to Ray about it because I trusted him. I knew that he would keep it in confidence between he and I, and I knew that he would follow through and speak with him, as I asked him to.
Q. Sure.
A. And he had a little bit of authority, being that he was a relief charge nurse. It gave him a little bit more leverage.
Q. Sure. Did you ever go to speak with the patients of the rooms that Mr. Farmer was in?
A. No.
Q. Why not?
A. I didn't want to accuse somebody falsely of something, and I didn't want to raise any red flags with patients.
Q. Okay. But yet you were concerned about

Farmer?
A. Yes.
Q. Was he also in rooms with patients with the lights out? Is that what I heard you say, or not?
A. No, I never said that.
Q. Okay. That's somebody else.

So he would walk into rooms, close
the door?
A. Yes.
Q. That's not appropriate for a CNA, is it?

MR. BEMIS: I object to form. Go ahead
and answer, if you know.
THE WITNESS: It's inappropriate for a male patient to be in a room with a female patient alone with the door closed.
BY MR. MURDOCK:
Q. Why is that?
A. Because of the fact that allegations can be made and people can be accused of things that may or may not be true.
Q. It's not just allegations can be made, things can actually happen, right?
A. Yes.

MR. SILVESTRI: Ms. Reporter, can you
read back the last answer? Actually, the last question and answer.
(The following was read:)

| 1 | "Q. Was he also in rooms with patients with the |  | with Ray, or both? Page 27 |
| :---: | :---: | :---: | :---: |
| 2 | lights out? Is that what I heard you say, or | 2 | A. I believe both of us, but I know with me. |
| 3 | not? | 3 | Q. And why do you believe both of you? |
| 4 | A. No, I never said that. | 4 | A. Because all the nurses were talking about |
| 5 | Q. Okay. That's somebody else. So he would | 5 | it together. It wasn't just me. It wasn't just Ray. |
| 6 | walk into rooms, close the door? | 6 | All the nurses were concerned. |
| 7 | A. Yes. | 7 | Q. When you say "all the nurses" -- all the |
| 8 | Q. That's not appropriate for a CNA, is it? | 8 | nurses on the shift? |
| 9 | MR. BEMIS: I object to form. Go ahead | 9 | A. Yes. |
| 10 | and answer, if you know. | 10 | Q. Can you identify some of them? I know it's |
| 11 | THE WITNESS: It's inappropriate for a | 11 | been a long time, but could you identify some of |
| 12 | male patient to be in a room with a female | 12 | them, at least by first name? |
| 13 | patient alone with the door closed. | 13 | A. Gina, Kim -- |
| 14 | Q. Why is that? | 14 | MR. SILVESTRI: Kim? |
| 15 | A. Because of the fact that allegations can | 15 | THE WITNESS: Kim. |
| 16 | be made and people can be accused of things | 16 | MS. HALL: Can you just keep your voice |
| 17 | that may or may not be true. | 7 | a a little bit? It's hard for us to hear you down |
| 18 | Q. It's not just allegations can be made, | 18 | here. |
| 19 | things can actually happen, right? | 19 | THE WITNESS: Okay. |
| 20 | A. Yes." | 20 | MS. HALL: Thank you. |
| 21 | BY MR. MURDOCK: | 21 | THE WITNESS: I worked with Karen, but |
| 22 | Q. And your answer was? | 22 | I don't recall if we had any conversations about it |
| 23 | A. Yes. | 23 | or not. |
| 24 | Q. When I say "things can actually happen," | 24 | BY MR. MURDOCK: |
| 25 | that would include sexual assaults, correct? | 25 | Q. Okay. |
|  | Page 26 |  | Page 28 |
| 1 | A. Yes. | 1 | A. I don't recall any other names, it was so |
| 2 | MR. BEMIS: l object to form. | 2 | long ago. |
| 3 | BY MR. MURDOCK: | 3 | Q. Okay. Suffice to say, if I would have |
| 4 | Q. And that's one of the reasons why male CNAs | 4 | aken your deposition much closer in time to the |
| 5 | should not be in female patients' rooms with the door | 5 | vents occurring, you would have been able to give me |
| 6 | closed, correct? | 6 | e names, correct? |
| 7 | MS. HALL: Objection. Lacks | 7 | A. Yes. |
| 8 | undation. Speculation. | 8 | Q. Okay. Now, let's talk about Kim -- |
| 9 | MR. BEMIS: Join. Go ahead and answer. | 9 | Qecifically Kim, and then we'll get to the other |
| 10 | THE WITNESS: Correct. | 10 | eople. |
| 11 | BY MR. MURDOCK: | 11 | But Kim -- you had a discussion |
| 12 | Q. Apparently another nurse also discussed | 12 | with her about Ray? |
| 13 | Mr. Farmer with you, is that correct, prior to the | 13 | A. About Ray? |
| 14 | Denise Hanna situation? | 14 | Q. I'm sorry. That was bad. That was bad. |
| 15 | A. Not to my knowledge. | 15 | (Discussion off the record.) |
| 16 | Q. There was a nurse by the name of Kim, and | 16 | BY MR. MURDOCK: |
| 17 | my understanding is that you told Detective Saunders | 17 | Q. You were telling me about conversations you |
| 18 | that Kim relayed some concerns to you also, and that | 18 | had with Kim about Steven. |
| 19 | would have been the same concerns that Ray had said | 19 | A. Yes. |
| 20 | about his actions were suspicious, especially with a | 20 | Q. Tell me about those conversations. |
| 21 | female patient? | 21 | A. I don't remember exact details, just the |
| 22 | A. Yes, I do recall that now. | 22 | fact that I had shared these same concerns l've |
| 23 | Q. Okay. And who was Kim? Do you remember? | 23 | already voiced, with her, and she felt the same way. |
| 24 | A. Just a staff nurse there in the ER. | 24 | Q. So in other words, he was being overly |
| 25 | Q. And Kim had had a conversation with you or |  | attentive with female patients? |

A. Yes.
Q. And you both were suspicious about him, correct?
A. Yes.
Q. And when I just asked you about being suspicious about him, what were you suspicious of?
A. I think "uncomfortable" is a better word than "suspicious."
Q. Okay. And the reason I'm using the word "suspicious," to be honest with you, is because you
used it in your conversation with Detective Saunders.
A. Okay.
Q. You said that Kim relayed some concern to you, the same concerns that Ray had said, about his actions were suspicious, especially with female patients.

So what were you trying to convey when you used the word "suspicious" in that context?
A. That there could be some actions happening by Mr. Farmer that were inappropriate.
Q. Looking back at it, was it just that he was overly attentive with female patients, or was it a certain type of female patient? In other words, was it a type of female patient who maybe couldn't complain?
A. I didn't notice that.
Q. Okay. Now, you also said that all of the nurses were talking about it.
A. Yes.
Q. So it was pretty common knowledge over at Centennial Hills Hospital, right?
A. Yes.

MR. BEMIS: I object to form.
BY MR. MURDOCK:
Q. And the conversations that you had with
these other nurses were basically all the same, that
he was overly attentive with female patients, correct?
A. Yes.
Q. That he was acting at least in a suspicious manner?
A. Yes.
Q. And that he was -- what was the word you wanted to use besides "suspicious?"
A. "Inappropriate."
Q. "Inappropriate." Is that correct?
A. Yes.
Q. And it was all related to the same thing, where he would go into female patients' rooms and close the door, correct?

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A. Correct.
Q. That he would be overly helpful with putting certain devices on, is that correct?
A. Yes.

MR. BEMIS: I object to form.

## BY MR. MURDOCK:

Q. And those devices were basically -- it
wasn't blood pressure cuffs, correct?
A. No.
Q. It wasn't taking someone's temperature, right?
A. Right.
Q. It was a medical device whereby he would be able to see female private areas. Would that be correct?

MR. BEMIS: I object to form. Go ahead and answer, if you know.

THE WITNESS: Yes.
BY MR. MURDOCK:
Q. Okay. And that would include heart monitors?
A. Yes.
Q. And there was a discussion the other day about whether it's a 3-lead heart monitor, a 5 -lead heart monitor, or a 12.

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When you saw him be overly
attentive regarding these heart monitors, was it with
a 3, a 5, a 12 -- all?
A. 5.
Q. It was a 5 ?
A. It was a 5 .
Q. So with a 5 -lead heart monitor, where would
the monitors be placed?
MR. BEMIS: I object to form. Go
ahead.
BY MR. MURDOCK:
Q. Or actually they're not monitors. They're --
A. Patches.
Q. The patches. Where would those patches be placed?

MR. BEMIS: Same objection. Answer, if you can.

THE WITNESS: There's 2 leads that go under both clavicles. There is a lead that goes on both sides.
BY MR. MURDOCK:
Q. The ribs?
A. Yes, on the ribs.
Q. Okay.


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least several weeks before, that's when the
suspicions started -- where he would be in rooms
alone with patients, where he was gone for extended
periods of time when he was transporting patients,
and where he would always offer to help female
patients, as opposed to male patients, correct?
    A. Correct.
    MR. BEMIS: | object to form.
BY MR. MURDOCK:
    Q. And in terms of the gone extended periods
of time with transporting patients, that would have
been with females patients, correct?
    MR. BEMIS: I object to form. Calls
for speculation.
    THE WITNESS: Correct.
BY MR. MURDOCK:
    Q. And the being in rooms alone -- again, that
    would be with female patients, as opposed to male
    patients, correct?
    MR. BEMIS: Same objection. Go ahead
    and answer.
    THE WITNESS: I can't say that it
wasn't ever with a male patient, but we noticed it
more with female patients.
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BY MR. MURDOCK: 1
Q. Okay. And when you say "we," who is "we?"
A. The nursing staff.
Q. Now, who was your charge nurse on the
nightshift? Did you have one?
A. We had a couple of them.
Q. Who were they?
A. One of them was Amy.
Q. Amy who?
A. I don't remember her last name.
Q. Okay.
A. And the other one was Danielle, and I don't
remember her last name.
Q. Okay. And then the relief would have been
Ray?
A. Yes.
Q. Were Amy and Danielle made aware of these
suspicions that were had by the nursing staff about
Steven?

MR. BEMIS: I object to form. Calls
for speculation. Answer, if you know.
THE WITNESS: I don't know.
BY MR. MURDOCK:
Q. In other words, did they know?
A. I don't know.
Q. I mean if everybody was talking about it,
would you assume they knew?
MR. BEMIS: Calls for speculation. THE WITNESS: I don't know what they
knew.
BY MR. MURDOCK:
Q. Okay. In other words, I'd have to ask
them, right?
A. Uh-huh.
Q. Is that a yes?
A. Yes.
Q. Okay. You didn't have any specific conversations with Amy or Danielle that you recall, correct?
A. Correct.
Q. You did have specific conversations with Ray though, correct?
A. Yes.
Q. And that would have been before the
incident with Denise Hanna, correct?
A. Yes.
Q. Now, after the incident with Denise Hanna, you worked at Centennial for about another year or
so. Would that be right?
A. Sounds about right.
Q. And my understanding is that at some point, I want to say -- I could be wrong, but in the summer of 2009, you were terminated by Centennial, is that correct?
A. Yes.
Q. In between the time you were terminated and the Denise Hanna incident, do you recall having any conversations with anybody at Centennial Hills Hospital regarding Steven Farmer? MR. BEMIS: Besides what she already testified to?

MR. MURDOCK: Yeah.
THE WITNESS: Again, all the nursing staff was talking about it, following the case. So I
may have. I don't remember any specific conversations with people, but it's possible.
BY MR. MURDOCK:
Q. Were you ever called in, for instance by risk management, to discuss what you had witnessed with Mr. Farmer?
A. No.
Q. Did any lawyers ever speak with you
regarding Mr. Farmer?
A. No
Q. When was the first time a lawyer ever spoke
with you regarding Mr. Farmer?
A. When I was subpoenaed for his criminal

1 trial.
Q. And before then no lawyers, like for
instance Mr. Bemis -- he never called you?
A. No.
Q. And nobody from risk management had called you?
A. No.
Q. Now, your discussion with Amy Bochenek --
that was after the Denise Hanna incident, correct?
A. Yes.
Q. And you said that occurred that day of the

Denise Hanna incident, correct?
A. Correct.
Q. After that day, speaking with Amy Bochenek,
did you speak with anybody else regarding Mr. Farmer,
in terms of administrators or administration at
Centennial Hills Hospital?
A. Not that I can recall.
Q. Okay. When you spoke with Amy Bochenek, did you tell her that the nursing staff had all been talking about Steven Farmer?
A. I don't recall.
Q. Is that something that you believe that
it's more likely than not that you did?
Page 42
A. I can't recall. I can't answer that.
Q. When Mr. Farmer was arrested, that didn't come as a complete shock or surprise to you, did it?
A. No.

MS. HALL: Objection. Lack of
foundation.
BY MR. MURDOCK:
Q. And it didn't come as a complete shock or surprise because you already basically had these suspicions, correct?

MR. BEMIS: I object to form.
BY MR. MURDOCK:
Q. You can go ahead.
A. Correct.
Q. And these are the suspicions that you had voiced to Ray and others, correct?

MR. BEMIS: Same objection.
THE WITNESS: Correct.
BY MR. MURDOCK:
Q. Now, do you remember Kim's last name?

MR. SILVESTRI: Who?
MS. HALL: Kim.
THE WITNESS: No, I don't. I'm sorry.

BY MR. MURDOCK:
Q. Do you remember, was she an ER nurse?
A. Yes.
Q. When you said the nursing staff all knew, was that the nursing staff down at the ER?
A. Yes.
Q. Because that's basically who you had contact with, correct?
A. Correct.
Q. And that was the nursing staff on your shift?
A. Correct.
Q. So in other words, it wouldn't be up in the med-surg units, right?
A. No.
Q. That would just be down in the ER?
A. Correct.
Q. Had you ever heard about an incident whereby Mr. Farmer was thrown out of a room of a female patient in the med-surg unit, when he was acting as a sitter for an elderly woman?
A. No.
Q. Had you ever heard that there were screams coming from the room, and the nursing staff there didn't lend any credence to what she was alleging?

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MR. BEMIS: I object to form. MS. HALL: Lacks foundation. THE WITNESS: No.

## BY MR. MURDOCK:

Q. Do you know a Nurse Murray -- Christine Murray? Does that name sound familiar at all?
A. No.

MR. MURDOCK: Let's mark this. (Plaintiff's Exhibit 1 marked.)
BY MR. MURDOCK:
Q. Showing you what's been marked as Plaintiff's Exhibit 1 --

MR. MURDOCK: It's the statement of Margaret Wolfe. I figured you should have it. BY MR. MURDOCK:
Q. Ms. Wolfe, I'm showing you what's been marked as Plaintiff's Exhibit 1.

This is the transcript of your statement, is that correct?
A. Yes.
Q. And you said you had seen this before, correct?
A. Yes.
Q. When was the last time you saw this?
A. Yesterday.
Q. And prior to then, do you recall seeing it?
A. No, I do not.
Q. Have you ever listened to the transcript
itself?
A. No.
Q. Was it recorded?
A. Yes.
Q. In fact that's what the transcript comes
from, right?
A. Yes.
Q. Where did this interview take place?
A. At an Einstein bagel shop right near the

Centennial Hospital.
Q. Do you know how Detective Saunders got your name?
A. Yes. I contacted him.
Q. And why did you contact him?
A. Because I was disturbed over the incident
that I saw with Ms. Hanna and wanted it to be brought to his attention.
Q. Because they had put out like a community-wide thing about the assault, is that correct? Were you aware of that?
A. Yes.
Q. And had you seen that?
A. No.
Q. But you knew Farmer was arrested?
A. Yes.
Q. And you wanted to let them know that there were other issues potentially, correct?
A. Yes.
Q. Do you recall what time approximately the

Denise Hanna incident was?
A. It was in the early morning hours.
Q. Okay.
A. Possibly around 3:00 a.m. I'm not saying that to be exact, but early morning hours.
Q. Was Marcia Petersen your nurse? Do you remember Marcia Petersen?
A. I don't know that name.
Q. Okay. Was Ms. Cagnina your nurse?
A. My nurse?
Q. I'm sorry. Did I say that the last time,
too?
A. Yes.
Q. Let me start over.

Were you Marcia Petersen's nurse?
A. No.
Q. You don't even know that name, do you?
A. No.
Q. Were you Ms. Cagnina's nurse?
A. No.
Q. Do you know who Ms. Cagnina is?
A. No.
Q. You were Denise Hanna's nurse?
A. Yes.
Q. When this incident occurred with Ms. Hanna, how come you didn't go speak with Ms. Hanna?
A. I didn't want to alert her to something that she may have perceived differently.

I did go into the room, and there was what I perceived as eye contact between her and I, knowing that something had just happened that shouldn't have. But she did not say anything to me about it, and I didn't want to raise concerns to her if it was not an issue to her.
Q. But you did go speak to Ray about it?
A. Yes.
A. Correct.
Q. Do you know why it was done so early?
A. It was after I got off my shift.
Q. Okay. I need to ask you a personal question.
A. Yes.
Q. And I promise you, this will probably be the only personal question I will ever ask you. Have you ever been sexually assaulted?
A. Yes.
Q. Was it before this incident?
A. Many years.
Q. Okay. If you turn to page 2, the detective asked you, "What do you do for Centennial Hills
Hospitai?" And your answer was, "I'm an ER nurse."
Do you see that?
A. Yes.
Q. Was that the truth?
A. Yes.
Q. You didn't lie to the cops when you told
them that, right?
A. No.
Q. Okay. And then as you go down the line it
says, "And what was Steven Farmer's job?" Your answer was, "He was a CNA contracted out through an agency."

Did you lie to the police there?
A. No.
Q. How did you know he was contracted out through an agency?
A. It was just common knowledge with us there that he was an agency CNA, and not a staff CNA.

I don't know how that information
got relayed. We know in the hospital which employees
are agency and which employees are staff.
Q. Agency people back then at Centennial Hills Hospital -- did they have separate badges?
A. Yes.
Q. Is that how you figured out he was an agency nurse?
A. Possibly.
Q. But even that separate badge said
"Centennial Hills Hospital" on it, correct?
MR. BEMIS: I object to form.
THE WITNESS: Correct.

BY MR. MURDOCK:
Q. Was it the night of the 14th going into the day of the 15 th that the incident with Ms. Hanna occurred?
A. Yes, the early morning of the 15 th.
Q. Okay. If you would turn to page 8 in the

Voluntary Statement, there's a question in the middle
of the page. It starts with, "Did a -- excuse me."
It states, "Um, has uh, anybody
else in the ER room that you've worked with, ever
come to you, or have you ever talked to anybody that
shared similar concerns that you do about
Mr. Farmer?"
And your answer was, "Um, the same
nurse, Ray Sumera, had told me another time that
he -- to watch him around my female patients."
Do you see that?
A. Yes.
Q. Did you lie to the police when you said that?
A. No.
Q. Were you being honest and truthful?
A. Yes.
Q. Tell me what Ray told you.
A. That's basically all he told me. There was
not much more to that conversation.
Q. Well, apparently Ray told you that you
should watch him around your female patients. Is that correct?
A. Yes.
Q. Did Ray say anything else about that? In
other words, did he say he was being overly
attentive, the same things you've already told us?
A. I don't recall the specifics of anything else he said. Just that he did tell me that.
Q. Okay. And that was at some point in time several weeks prior to the Denise Hanna situation, correct?
A. Yes.
Q. Okay. And that's when he told you, at the very least, to watch Mr. Farmer being around your female patients, correct?
A. Yes.
Q. And that was something specifically that Mr. Sumera told you, correct?
A. Yes.
Q. And as you go down, here's what he said and maybe this will refresh your recollection.

He states, "That he was concerned because he" -- meaning Mr. Farmer -- "was very overly

Page 52
attentive with female patients, and very anxious to
connect them to the monitors and disconnect them from
the monitors, which would require him" -- meaning
Mr. Farmer -- "to reach into their clothing."
Do you see that?
A. Yes.
Q. Does that refresh your recollection?
A. Yes.
Q. Okay. So let's talk about that for a
second.

## So at some point several weeks

prior to the Denise Hanna situation, Mr. Sumera came to you and told you to watch Mr. Farmer around your female patients, correct?
A. Correct.
Q. And he told you that he was concerned because Mr. Farmer was overly attentive with female patients, correct?
A. Yes.
Q. And he told you that Mr. Farmer was very anxious to connect them to the monitors, correct?
A. Yes.
Q. And when you say "connect them to the monitors," was that the heart monitors that we talked about before?

| A. Yes. Page 53 |  |
| :---: | :---: |
| 2 | Q. The 5 leads? |
| 3 | A. Correct. |
| 4 | Q. And also disconnect them from the monitors? |
| 5 | A. Yes. |
| 6 | Q. And that's the same heart monitors, the 5 |
| leads, correct? |  |
| 8 | A. Correct. |
| 9 | Q. And of course that would require him to |
| 10 reach into their clothing, correct? |  |
| 11 A. Yes. |  |
| 12 Q. Do you rem |  |
| 13 A. No, Idon't. |  |
| 14 Q. Okay. If you turn to page 9, the detective |  |
| 15 asks you basically if there's anything that he might |  |
| 16 have forgotten to ask about Mr. Farmer, and you state |  |
| 17 in the middle of the page |  |
| 18 very suspicious in his activities. Um, such as going |  |
| 19 into rooms with doors closed with female patients, <br> 20 when he was not asked to." Correct? |  |
| 21 A. Correct. |  |
| 22 Q. |  |
|  |  |
| 24 A. No. |  |
| 25 Q. And |  |
| 1 second, to that long sentence in the middle of the Page 54 |  |
| 2 page -- when you told the police that Ray Sum |  |
| d you that you should watch your |  |
| 4 around Farmer, because Ray was concerned that Farmer |  |
| 5 was very overly attentive with female pa |  |
| 6 very anxious to connect them to the monit |  |
| connect th |  |
| police |  |
| 9 correct? |  |
| A. Corre |  |
| Q. You were being and ho |  |
| 12 the police, correct? |  |
| 13 A. Yes. |  |
| 14 | Q. If you turn to page 10, in the middle of |
| 15 | the page the detective asks you, "lf you had to give |
| 16 | me an estimate, how many times would you say that |
| 17 | you've seen him walk into female patients' rooms |
| 18 | where the door is closed, but there's no need for him |
| 19 | to be in that room?" Do you see that? |
| 20 | A. Yes. |
| 21 | Q. And your answer was, "Multiple times. I |
| 22 | couldn't put a number on it." Is that correct? |
| 23 | A. Yes. |
| 24 | Q. You weren't lying to the police when you |
|  | said that, correct? |

A. No.
Q. You were being honest and truthful, correct?
A. Yes.
Q. You said something on page 11 I'd like to ask you a few questions about.

There's a question towards the
middle of the page -- towards the bottom, I guess.
It says, "Okay. Okay." Do you see that?
A. Yes.
Q. It says, "Do you harbor any -- do you have
any personal gain by coming forward to me with this information?"

That's the detective asking,
correct?
A. Yes.
Q. And you answered, "No, I don't. In fact, I" -- something -- "fear that I could possibly get in trouble with my job if I were to give out information, you know, regarding or against" -blank -- "with my patients."

Do you see that?
A. Yes.
Q. I don't know what the blanks say. Do you know what the blanks say, or do you recall what you

Page 56
were telling the police?
A. I would probably have been referring to HIPAA information.
Q. Because you spoke with the police?
A. Yes.
Q. So you were concerned about HIPAA about going to the police, correct?
A. Not necessarily the police. I was concerned just about violating HIPAA laws by speaking with anybody about my patient.
Q. Okay. Prior to going to the police, did you ask anybody if you could go to the police, or would you be violating HIPAA?
A. No, I did not.
Q. Why didn't you?
A. Well, I did feel it was safe to speak with
the police, and I wasn't giving specific information
on her medical condition or things like that.
Q. Right. You were giving specific
information regarding a crime that you believe had
been committed, correct?
MR. BEMIS: I object to form.
THE WITNESS: Right.
BY MR. MURDOCK:
Q. Now, then the detective, as you go along on
page 11, starts talking about other people that you 5 had discussed this with prior to the Denise Hanna situation several weeks before, and you talk about Julie specifically. Correct?
A. Yes.
Q. And -- oh, no, actually you don't. Because Julie didn't work the nightshift with you, right?
A. Correct.
Q. Okay. In fact I'm reading that wrong here.

He asked you about Julie. You
didn't tell him about Julie, right?
A. (No response.)
Q. If you look at the question, it says,
"Okay, and that would be Ray Sumera. Did Julie say
she had any concerns?" Do you see that?
A. Yes.
Q. And you said, "Julie hasn't worked with
him, because she works on dayshift." Do you see that?
A. Yes.
Q. And you were being honest and truthful
there, right?
A. Yes.
Q. But then as you go along, you were trying
to think up I guess people's names for the detective,

## correct?

A. Yes.
Q. And then you state -- it's on the top of page 13.

You state, "There's one other
nurse that had come to me, that I'm trying to
remember her name, that had told me some of the same
things."
And then you asked him to turn off
the recorder for one second so you could think about
it, right?
A. Yes.
Q. Were you nervous with the recorder being on?
A. I was just nervous in general. Not so much
with the recorder, but yes, I was nervous.
Q. So you just couldn't think of certain
things real fast, right?
A. Right.
Q. But then it came to you, like it does, and
you came up with Kim, right?
A. Yes.
Q. And you state down towards the middle of the page -- the detective asks you, "And she" -meaning Kim -- "relayed some concern to you also?"

25
A. Okay.
Q. So take your time, and if you want l'll
give you a pen and -- well, actually just bend the
page. Okay?
A. Okay.
Q. Take your time.

MR. MURDOCK: We can go off the record. (Recess.)

## BY MR. MURDOCK:

Q. Ms. Wolfe, you have now had an opportunity to review your voluntary statement in full, is that correct?
A. Yes.
Q. Is there anything at all in the voluntary statement that you believe is wrong?
A. No, but there was a contradiction to something that was said earlier regarding the dates --
Q. Oh, okay.
A. -- of when it happened.
Q. Tell me about that.
A. You had said the 14 th to the 15 th, and it was actually the 15 th to the 16 th.
Q. Okay. Is that something you specifically

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remember, or is it something that --
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A. Something I read in here.
Q. Something you read in here?
A. Yeah.
Q. So in here it says the 15 th to the 16 th?
A. Yes.
Q. But it in actually it was the 14th to the

## 15th?

MR. BEMIS: I object to form. It
misstates her testimony.
BY MR. MURDOCK:
Q. I'm trying to figure it out. I'm not trying to --
A. No, I believe the dates in here are correct, the 15th and 16th.
Q. Okay.

MS. HALL: I believe she said one of your questions said the 14th and 15th.

MR. MURDOCK: Oh, okay. So my question was wrong.
BY MR. MURDOCK:
Q. But anything in the statement itself, outside of my question?

MR. SILVESTRI: So that would mean it would be 3:00 a.m., or thereabouts, on the 16 th?

Page 62

## THE WITNESS: Correct.

MR. MURDOCK: Okay.
MR. SILVESTRI: Thank you.

## BY MR. MURDOCK:

Q. So outside of my question being wrong, is
there anything wrong in the statement itself,
Plaintiff's Exhibit 1?
A. No.
Q. Is there anything in Plaintiff's Exhibit 1
that you lied about?
A. No.
Q. Is there anything in Plaintiff's Exhibit 1
you weren't being honest and truthful about with the police?
A. No.
Q. Okay. This morning before the deposition was started -- right when the deposition was started actually, you gave an oath.
A. Yes.
Q. And you gave an oath to tell the truth, is that correct?
A. Yes.
Q. What does that oath mean to you? MR. BEMIS: I object to form. Calls for a legal conclusion. You can answer.

BY MR. MURDOCK:
Q. What does it mean to you? MR. MURDOCK: Not to you, John. THE WITNESS: I take it very seriously.
That the information I give needs to be true and correct, to the best of my knowledge, and that I'm not to lie about anything.
BY MR. MURDOCK:
Q. Okay. When you gave the statement to the police, even though you weren't put under oath, is that the same standard you held yourself to?
A. Yes.
Q. Okay.

MR. MURDOCK: I have nothing further at this time.

However, for the record, no matter
what happens to the rest of this deposition, I'm not closing this deposition.

Because just for the record, I don't believe that Mr. Bemis can act as your counsel in this matter. I believe he's got a hell of a conflict of interest at this point in this case. Whether or not he continues as counsel in the entire case is up for discussion.

That being said, if need be we'll
have to get a court order, and potentially, if
allowed, come back and ask you questions about your conversations with Mr. Bemis.

But that being said, I'll leave it to Mr. Silvestri.

## EXAMINATION

BY MR. SILVESTRI:
Q. Ms. Wolfe, my name is Jim Silvestri. I represent American Nursing Services.

Why were you terminated from Centennial Hills?
A. I had brought my daughter into work with me one night. I knew it was very busy that time of year, and I didn't want to call off and leave them in a bad situation.

We had rooms in the back that were not being used, and she was -- you know, old enough that she didn't have to be watched continually.

I just put her in one of those rooms to keep an eye on her throughout the night, instead of leaving her home alone.

And she started getting sicker
throughout the night. One of the doctors had suggested giving her a bag of fluid.

A. Yes.
Q. Anybody else?
A. Karen Evanston.
Q. Anybody else?
A. That's all that I can recall right now.
Q. What are your outside activities? Do you
belong to any groups or organizations?
A. I was very active in my church for awhile.

Not so much right now, but I was very active.
Q. Which church is that?
A. The LDS Church, Mormon.
Q. Were you active with any children or youth groups at that church?
A. Yes.
Q. And I'm not in the LDS Church, but in my church I'm involved in some youth groups and we go through some youth training -- youth protection training.

Are you familiar with any type of youth protection training?
A. I am, but I have not had any.
Q. Have you had any youth protection training through any other group?
A. No.
Q. A lot of the questions that you were asked
about whether it's appropriate or not for a male nurse or a male CNA to be in a room of a female patient alone -- a lot of those questions sometimes spoke about the door being closed and the door not being closed.
A. Yes.
Q. I've got a couple questions to ask you about that.

Is it appropriate for a male nurse
or a male CNA to be alone with a female patient with
the curtain closed?
MR. BEMIS: I object to form.
Incomplete hypothetical. Answer, if you know.
THE WITNESS: It would be similar to
the door being closed.
BY MR. SILVESTRI:
Q. And is it my understanding that at the ER
at Centennial Hills in or around January through May
of 2008 -- at least in those dates, some of the rooms
had doors, and some had just curtains. Is that fair?
A. Yes.
Q. If an alarm goes on because a lead is
detached or is not working properly, with respect to
a patient that has, as you talked about, a 5-lead
monitor on a patient, and that alarm goes off -- do
Page 69 to?
you know if that alarm registers anywhere, other than on the little machine where the leads are attached

MR. BEMIS: Incomplete hypothetical.
Are you talking about in the ER specifically?
MR. SILVESTRI: Let's start there, with
the ER.
BY MR. SILVESTRI:
Q. Do you know if that's registered anywhere,
like in a patient's chart, or at the nurses' station?
A. At the nurses' station there's usually a central monitor. Not always.
Q. Well, sometimes the alarm might be going off in a patient's room, and if somebody is not right there they're not going to fix it right away. And that's why I want to know, is that alarm registered anywhere else in the ER?

MR. BEMIS: Same objection.
THE WITNESS: The alarm itself? BY MR. SILVESTRI:
Q. Yeah.
A. No.
Q. is there some other notification though that the nurses' station would get that a lead was not attached properly, or was somehow improperly

Page 72
working?
A. The alarm doesn't necessarily mean that a lead is not attached properly. It just means there's an arrythmia that needs to be addressed, which could be caused from a lead not being attached properly.
Q. Okay.
A. The alarms are very loud, so you would hear it outside of the room.
Q. Is there any other mechanism though that registers that problem or that issue?
A. Sometimes there's central monitors, that an alarm would go off on that central monitor at the nurses' station as well.
Q. Do you know if that central alarm goes off if it's registered in a patient's chart?
A. Occasionally the monitor will print out a strip of what the rhythm is, and that could be placed into the patient's chart.
Q. And it would print out this arrythmia?
A. Yes.
Q. Do you know if it's the same system up on the 6th floor of Centennial Hills Hospital?
A. I do not know.

MR. BEMIS: Objection. Foundation.


## A. Yes.

MR. SILVESTRI: That's all I've got. Thank you.

MR. MURDOCK: You have an opportunity to read and sign, if you so desire. I know John will tell you to read and sign, so --

MR. BEMIS: We'll read and sign.
MR. MURDOCK: Very good.
(The deposition concluded at 11:03 a.m.)



## RSPN

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## DISTRICT COURT

## Clark county, nevada

MISTY PETERSEN, AS SPECLAL ADMINISTRATOR OF THE ESTATE OF JANEDOE,

## Mantif,

vs.
VALLEY HEALTH SYSTEMCLC, a Nevada Himited liability company, d/b/a CENTENNIAL HILLS HOSPTTAL MEDICAL CENTER: UNIVERSAI HEALTH SERVICES, INC, a Delaware corporation; AMERICAN NURSING SERVICES, INC, a Louisiana corporations: STEVEN DAIE FARMER, an individual; DOES I through $X$ inclusive; and ROE CORPORATIONS 1 through $X$, inclusive,

Defendants.
DEFENDANT VALLEY HEAETHSYSTEM, LLCS RESPONSESTOMLANTHP'S LEVENTHSETOF INTERROGATORUS


COMES NOW, Defendant, VALLEY HEALTH SYSTEM, LLC, by and through theis counsel of record, the law firm of AALL PRANOLE \& SCAOONVELD, LLC, and herety provides the following responses to Plaintiff's Eleventh Set of Interrogatories:

## INTERROAGORIES

## INTERROGATORY NO. $18:$

Please state when you received the LVMPD Statment of Margaret Wolfe.

## RESPONSE NO 18:

Objection. This Interrogatory seeks information protected by the attomeynclient privilege. Without waiving said Objection, this Answering Defendant has only leamed of the LVMPD Statement of Margaret Wolfe through counsel.

## INTERROGATORY NO. 19.

Please state when you first became aware that Margaret Wolle had spoken with the LVMPD regarding Steven Farmes.

RESPONSE NO. 19:
See Response No. 18.

## HTERROGATORYNO. 20 :

Please identify who transported Jame Doe from the Gmergency Room at Centennal Hills, io her room on the 6 flow on May $13,2008$.

RESPONSE NO. 20 :
Please see CHH00217-222, CHH00212, CHH00197-201.
INTERROGATORY NO. 21 :
Please state exacty where Steven Farmer was assigned to be by Centennial Tills Hospital Trom May 13, 2008 through May 16, 2008.

## RESPONSENO. 21 :

May 13,2008-Steven Farmer was not on schedule to work at Centemial Hills Hospital
May 14, 2008 - Steven Farmer was scheduled to be in the Emergency Department from 7:00 pim -7:00 am the following moming. At 2130, Nr. Famer was floated to the 6 floor.

May 15, 2008 ... Steyen Fomser was scheduled in the Energency Room at Centennial Hills Hospital from 7:00pm - 7:00 am the following morning.

May 16,2008-Steven Famer was continuing fis May 15,2008, shift untl 7:00 am.

## INTERROGATORY NO. $22:$

Pease staie the exact whereabouts of Steven Farmer at Centennial Hills Hospital from May 13, 2008 through May 16. 2008.

## RESPONSE NO. 22:

Objection. This hterrogatory is vague as "exact whercabouts," vague, overbrond and undaly burdensome. Without waiving said Objection, please see Response No. 21, and $\mathrm{CHI} 00322-325$.

DATED this $12^{\text {th }}$ day of Jme, 2015.

## HALL PRANGLE \& SCHOONVELD, LLC

By:
Ss' John Bemis
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Nevada Bar No. 8619
IOHN F. BEMIS, ESQ.
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Atorneys for Defendonts
Centmial Hills Hospilal and
Universal Health Services Inc.

## VERIFICATION

AMANDA BELL, being first duly sworn and upon her oath, deposes and says:
That she is the Risk Analyst at Centennial Mills Hospital Medical Center, a named

That she has read the foregoing Responses to Plaintiff's Eleventh Set of Interrogatories, knows the contents thereof, and the same is true to the best of her knowledge, except as to those maters therein stated on information and belief, and as to those matters, she believes them to bo true. Information for these answers was gathered from various departments and individuals throughout Centemial Hills Hospital. Amanda Bell, Risk Analyst, of Centennial Hills Hospital reviewed same, and is signing these documents in her capacity, based upon information and belief that the information contained herein is accurate.


AMANDA BELL
RISK ANALYST:

## STATE OF NEVADA )

COUNTY OF CLARK ) Defendant in the foregoing District Court action;

DATED this $\} 2$ day of June, 2015.

Subscribed and sworn to before me this - 2 day of June, 2015.
 County of Clark and State of Nevada


## CERTIFICATE OR SERYICE

I GEREBY CRRTIFY that 1 am an employee of HALL PRANGLE \& SCHOONVELD, LLC: that on the $12^{\text {th }}$ day of June, 205 , I served a true and comed copy of the foregoing DEFENDANT VALEEY HEALTH SYGTEM, LEC'S RESPONSES TO PLAINTIFFS ELEVENTH SET OF INTERROGATORTES via ESGervice on Wiznet pursuant to mandatory NEFCR 4 (b) to the following parties;

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Atiomeys for Defendont
Sieven Dale Farmer Attomeys for
Defendant
Steven Dale Farmer

Iv: Diand Cox
An employee of HALL PRANOLE $\&$ SCHOONVELD, LLC



COMES NOW, Defendant, VALLEY HEALTH SYSTEM, LLC, by and through their counsel of record, the law firm of HALL PRANGLE \& SCHOONVELD, LLC, and hereby provides the following responses to Plaintiff's Tenth Set of Interrogatories:

## INTERROAGORIES

## INTERROGATORY NO. 17:

Identify any and all persons present at the meeting between Renato Sumera and Centennial Hills Hospital after Farmer was arrested.

## RESPONSE NO. 17:

Objection. This Interrogatory is irrelevant. Counsel of record met with Mr. Sumera following Mr. Farmer's arrest. Former Centennial Hills Hospital Risk Manager, Janet Calliham, and her staff provided introduction and left the meeting prior to any substantive discussion.

DATED this $10^{\text {th }}$ day of June, 2015.

By:
HALL PRANGLE \& SCHOONVELD, LLC

MICHAELE.PRANGLE, ESQ.
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Attorneys for Defendants
Centennial Hills Hospital and
Universal Health Services, Inc.

## VERIFICATION

| STATE OF NEVADA | ) ss: |
| :--- | :--- |
| COUNTY OF CLARK |  |

AMANDA BELL, being first duly sworn and upon her oath, deposes and says:
That she is the Risk Analyst at Valley Health System, LLC d/b/a Centennial Hills Hospital Medical Center, a named Defendant in the foregoing District Court action;

That she has read the foregoing Responses to Plaintiff's Tenth Set of Interrogatories, knows the contents thereof, and the same is true to the best of her knowledge, except as to those matters therein stated on information and belief, and as to those matters, she believes them to be true. Information for these answers was gathered from various departments and individuals throughout Centennial Hills Hospital. Amanda Bell, Risk Analyst, of Centennial Hills Hospital reviewed same, and is signing these documents in her capacity, based upon information and belief that the information contained herein is accurate.

DATED this 10 day of June, 2015.


Subscribed and sworn to before me this 10 day of June, 2015. Norarande PuBLIC in and for said County of Clark and State of Nevada


## CERTIFICATE OF SERVICE

I HEREBY CERTIFY that I am an employee of HALL PRANGLE \& SCHOONVELD, LLC; that on the $10^{\text {th }}$ day of June, 2015, I served a true and correct copy of the foregoing

DEFENDANT VALLEY HEALTH SYSTEM, LLC'S RESPONSES TO PLAINTIFF'S
TENTH SET OF INTERROGATORIES via E-Service on Wiznet pursuant to mandatory
NEFCR 4(b) to the following parties:
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4818-4405-5844, v. 1

