No. 71348
IN THE SUPREME COURT OF THE STATE OF Electronjcally Filed Oct 152018 01:40 p.m.

EMILIA GARCIA,
Appellant,
v.

ANDREA AWERBACH,
Respondent.

## Appellant's ApPendix <br> Volume XXV, Bates Numbers 6001 to 6250

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So for that basis, we believe the word "controlled" has to come out of this first paragraph.

THE COURT: I think that you're trying to make a distinction that I don't think exists. I understand the argument.

What else? What other instructions do you object to?

MR. TINDALL: Court's indulgence, please.
We have no others to which we object.
THE COURT: Does Jared Awerbach have any other instructions that we propose that are not being given?

MR. TINDALL: Yes. We submit -- purge with. This one reads, "For the purpose of applying NRS 484.110(3)(9), I instruct you that the term 'marijuana' in the statute refers only to the substance delta-9-tetrahydrocannabinols, also referred to as THC.

THE COURT: Okay. Give it to Alice.
And for the same reasons, I'm not comfortable giving that one because you're trying to draw a distinction between the metabolite and marijuana that I don't think exists.

What else?
MR. TINDALL: Your Honor, that is all.
MS. ESTANISLAO: Your Honor, may I add to our objections?

THE COURT: Sure.
MS. ESTANISLAO: Okay.
THE COURT: You be another one you want to object to now?

MS. ESTANISLAO: Yes.
THE COURT: Okay.
MS. ESTANISLAO: That Instruction Number 25 regarding the medical negligence, one, that this -- this instruction is not supported by the evidence. There is no evidence of medical negligence. The evidence that has been presented goes to plaintiff's burden regarding them having to prove reasonable and necessary treatment.

And I think it's misleading to the jury to throw out the word "medical negligence," particularly when it's not defined for them; and, in light of the testimony regarding reasonable and necessary, they can misperceive that testimony as medical negligence. And, again, particularly because they have no definition of what constitutes medical negligence.

THE COURT: I think that you're correct, that the plaintiff has the burden of proving reasonable and necessary.

The way the testimony came in through one of the defense experts -- I'm thinking specifically of the X-ray that was on this -- on the screen in front of the

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jury with the hardware and the -- the contention by the doctor that there was something wrong with the hardware being off to the left and not parallel with the one on the other side.

I think that there's at least an argument that could -- not an argument. I think that there's at least a possible misunderstanding in the minds of the jurors that a doctor did something wrong. And that's why -the supreme court has indicated that, with regard to jury instructions, if there's any basis or a valid reasonable legal basis for a party to -- to instruct the jury on an issue of law, that the Court should, you know, favor allowing those things.

MS. ESTANISLAO: But my understanding is the doctor testified that it wasn't negligence.

THE COURT: He did.
MS. ESTANISLAO: And that is a concern because, like I said, it's been testimony for a while, but, you know, that's a part that they may forget regardless of how many times we might remind it to them. But they may forget and see this instruction and believe, "Oh, well that's negligence."

But clearly there's no evidence of negligence. Nobody has testified that the doctor fell below the standard of care. And we know that, even if you have
surgery, bad results can happen -- even A screw can be put in loose -- without there being negligence, meaning there was no breach of the standard of care. And there's no testimony of that.

But, again, it can be misleading to the jury. They think, oh, well, they're saying you shouldn't -this surgery shouldn't have been done. That's negligence. Well, they caused it."

You know, but that's not the testimony. Like I said, misleading to the jury particularly when it's never been identified to them what is medical negligence. There's no instruction defining medical negligence, making a distinction between medical negligence and plaintiff's burden of proof to show that all the treatment, all the surgeries are reasonable and medically necessary.

THE COURT: I understand the problem you have with it, but I think that, if the jury thinks that Dr. Gross was negligent in his performance of the surgery, then this instruction takes care of that.

If the jury doesn't believe Dr. Gross was negligent in his performance of the surgery, then this instruction doesn't apply.

I don't know that it's confusing. It's just -- it's going to help them make that decision if

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that's their thought.
MS. ESTANISLAO: And I apologize. This just came into my head. But may I suggest adding an instruction defining what medical negligence is and that -- and telling the jury that there's no testimony regarding medical negligence.

I mean, there is no testimony regarding medical negligence. There's no doctor that stood up, there's no expert that stood up that said any doctor fell below the standard of care.

THE COURT: I agree. You guys are welcome to say that in closing arguments. I don't know we need a -- I think if we define "medical negligence" in the instructions, then we're confusing the jury. Now we're telling them, let's think about what this means and if somebody did that.

MS. ESTANISLAO: Well, I think if we distinguish it between plaintiff's burden of proof and what medical negligence is and say, "Hey, there's no testimony satisfying what medical negligence is."

THE COURT: I understand your request. I'm not going to give it.

Let's talk about verdict forms.
The one that I'm leaning towards is I guess the one that was submitted by the plaintiff. I don't

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know like the way the first paragraph is worded. I think it's confusing. This is how I would propose to change it. You guys see what you think. Because you put the two Emilia Garcia at the end of the sentence, I kind of would -- it seems like, "What amount of damages do you find were sustained by Emilia Garcia (excluding punitive damages) as a proximate result of the auto collision of January 2, 2011?"

MR. ROBERTS: That's fine with us, Your Honor. It is clearer than the way we had it worded.

THE COURT: Audra, can you make that change?
Do you have that up?
MS. RODRIGUEZ-SHAPOVAL: I do. I just one second.

MS. ESTANISLAO: Your Honor, may I address this --

THE COURT: I know you guys are going to argue about it. Give me a second.

MS. ESTANISLAO: Okay.
THE COURT: Since you guys can't agree on something, I had to come up with something. So I --

MS. ESTANISLAO: Well, I generally --
THE COURT: So we're going to put in what I came up with, and then you can make a record on --

MS. ESTANISLAO: Well, plaintiff's and ours is

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not vastly different. It's just certain wording that we wanted to add in there, specifically the preponderance of the evidence, of course taking out the negligence instruction.

MR. ROBERTS: No negligence is in there.
THE COURT: I don't even know which one is

MS. ESTANISLAO: It says, "Defendant Andrea Awerbach's Proposed Special Verdict."

THE COURT: I've got it.
MS. ESTANISLAO: Like I said, I just like having the preponderance of the evidence.

THE COURT: Hold on one second.
Do you want me to read it again, Audra?
MS. RODRIGUEZ-SHAPOVAL: Yes, I would appreciate that.

THE COURT: "What amount of damages do you find were sustained by Emilia Garcia," and then in parenthesis "excluding any punitive damages" close paren, as a proximate result of the automobile collision of January 2, 2011?"

MS. RODRIGUEZ-SHAPOVAL: Okay.
THE COURT: Your Paragraph Number 7 is your general negligence question. So we would eliminate Question Number 7. So then the follow-up would be, "If

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you answered 'yes' to Question 6" --
MS. RODRIGUEZ-SHAPOVAL: Okay.
THE COURT: -- "then answer Question
Number 7." So 8 needs to change to 7.
MS. RODRIGUEZ-SHAPOVAL: Okay.
THE COURT: "If you answered 'no,' skip to the end of the form." Then your next question, instead of being Number 8 would be Number 7.

MS. RODRIGUEZ-SHAPOVAL: Okay.
THE COURT: Your last question would be 8
instead of Number 9.
MS. RODRIGUEZ-SHAPOVAL: There's a reference in 7, "If you answer Question 9," so that should be 8. THE COURT: Yep. Well, that should -- yeah. "If you answered 'yes,' answer Question Number 8."

MS. RODRIGUEZ-SHAPOVAL: Okay.
THE COURT: Correct.
MS. RODRIGUEZ-SHAPOVAL: Okay.
THE COURT: With those modifications, does the plaintiff object to the verdict form that I'm proposing?

MR. ROBERTS: No, Your Honor, no objection.
THE COURT: All right. You guys, I know, submitted a different one.

MS. ESTANISLAO: Correct.
THE COURT: So tell me -- tell me why you

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object to the one that I proposed.
MS. ESTANISLAO: Well, generally we are fine with plaintiff Emilia Garcia's proposed jury verdict but would like to add, for example, with Number 1, "What amount of damages, not including any punitive damages, did you find that plaintiff proved by a preponderance of the evidence that she -- that was proximately caused by the automobile collision?"

We just like having the burden, make sure that the jury is finding, in fact, that it was by a preponderance of the evidence. And that goes to 5 and 6 as well.

Agree with deleting Number 7.
With the new paragraph that's 7, "Did plaintiff prove by clear and convincing evidence that Andrea Awerbach acted with compression or malice express, implied," I would suggest taking out the word "negligently" and inserting "in the conduct that caused the harm to Emilia Garcia."

The standard for punitive damages is you need contact that's willful and deliberate. That's more than gross negligence. That's more than reckless and wanting.

I believe that could be an issue on appeal. But, you know, will give plaintiff -- I mean defense an

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issue on appeal.
THE COURT: I'm not necessarily opposed to that. What do you guys think of that new language in paragraph 7, which was your paragraph 8?

MR. SMITH: Well, the standard of the first part that we have to prove is that she acted negligently. And then this Question 7 says, "In the conduct where you now found she acted negligently, did she act with oppression or malice, express or implied?"

There is no standard of gross negligence. That's adding a standard that we don't have in this case. There are two standards: Did she act negligently? And then once you found she acted negligently, did she act with oppression or malice, which is the standard of punitive damages.

MR. ROBERTS: Your Honor, that's consistent with Instruction 38, which says, "If you find that plaintiff is entitled to compensatory damages for actual harm caused by defendants' breach of an obligation, then you may consider whether you may award punitive damages."

So the defendants' breach of an obligation in this case is negligence.

THE COURT: That's true.
MS. ESTANISLAO: Like I said, I believe it's
going to be confusing to the jury, particularly since they need to find willful and deliberate. That's pretty much the standard on the conscious disregard, oppression, or malice. Both requires willful and deliberate.

MR. SMITH: That's not really the standard, and the standard has been laid out for the jury in the jury instructions. It's more than that -- or it's different than that. I wouldn't say more; it's different from that.

THE COURT: We're not going to incorporate all the jury instructions into the verdict form. I'm okay it as it is.

What other objections do you have?
MS. ESTANISLAO: Like I as suggested, using the word "preponderance of the evidence" in paragraph 1, paragraph 5 and 6. "Did plaintiff prove by a preponderance of the evidence that" --

THE COURT: I think preponderance of the evidence applies to everything other than where we put the clear and convincing evidence, right?

MS. ESTANISLAO: Correct. And they had it in paragraph 2.

MR. MAZZEO: Judge, we're much more familiar with the standard that the plaintiff has to meet in the

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case, but the jurors aren't. And it's easy to get lost when they're looking at this verdict form if that standard not in front of them.

Of course, they're getting an instruction, but they're not all getting the booklet. They're going to hear it once. They're getting one booklet in the back room, in the deliberation room. So I think -- I think it's germane and imperative to put the standard that they have to satisfy, that has to be met by the plaintiff in order to find damages. And that's preponderance of the evidence.

If they have any question about that, they can always go to the book, but if it's not in there, then that may be a fact that's lost on the jury when you're looking at the verdict form.

And they're allowed to award anything unless the plaintiff satisfies that burden, which is preponderance of the evidence. So I don't see where the harm is in putting it in there, but there is harm by not putting it in there. The omission of that could lead the jurors to not consider that burden of proof, preponderance of the evidence.

So even though it's -- even though you have clear and convincing standard for the punitive damages, we should have that standard in every --

THE COURT: I get it. You keep saying the same thing over and over.

You guys object to it?
MR. ROBERTS: I object to it because we've got instructions and we're ready to go, and the jury already knows that it's preponderance except it's clear and convincing. I don't think it would be erroneous to add it if the Court wanted to take 20 minutes to do so, but I certainly don't think it's necessary to add in a preponderance standard every single place that it's required.

It would be unusual to do so. The pattern instructions certainly don't do that. But it is a correct statement of law.

Audra says it will take more than 20 minutes.
MS. ESTANISLAO: Three lines?
THE COURT: We're just modifying the verdict form.

MR. ROBERTS: She misunderstood. She thought it was the jury instructions, and that was my fault, Your Honor. I misunderstood.

THE COURT: We're not changing any
instructions; we're just incorporating --
MR. MAZZEO: Paste that phrase three times, and it's done.

MR. ROBERTS: That's fine, Your Honor. THE COURT: Where do you want it? Which questions?

MS. ESTANISLAO: Item 1, 5, and 6. And it's a lot easier in 5 and 6.
"Did you find that plaintiff proved by a preponderance of the evidence that..."

And in line -- line 1, "What amount of damages did you find that plaintiff proved by a preponderance of the evidence was proximately caused by an automobile collision of January 2, 2011?"

So in the middle right, after -- wanted to change -- okay.

MR. ROBERTS: Your Honor, that gets too
cumbersome. I object to doing that in every place. And then we have to change "theirs," "Did Andrea Awerbach prove by a preponderance of the evidence that she did not give Jared permission to drive her car?"

THE COURT: Let's leave it out.
What else?
MS. ESTANISLAO: That's it.
MR. TINDALL: Your Honor, does 6 still read the same way as it is on the paper? Did we change that at all?

THE COURT: 6, I didn't change.

MR. TINDALL: Okay. 6 is actually two questions. I think that needs to be broken out, because they can find one but not the other.

MR. ROBERTS: And if they do that, then they check "no." We can explain that to them.

MR. TINDALL: They can find that she negligently entrusted the vehicle, but that was not a proximate cause.

MR. ROBERTS: And then they check "no." We can explain that to them.

MR. TINDALL: No, they need to be two separate questions.

THE COURT: I'm okay with that being two separate questions.

MR. ROBERTS: That's fine, Your Honor, go ahead.

THE COURT: Makes sense. "Did defendant Andrea Awerbach negligently entrust her vehicle to an inexperienced or incompetent person on January 2nd?" question mark.

And then we do another question: "Was that negligence a proximate cause of harm to Emilia Garcia?"

So this would be two different questions with two sets of answers there. So that renumbers everything back to the way it was before.

MR. TINDALL: And then regarding Question 2, I make the same objection that I made to the jury instructions. He didn't -- this needs to read either "marijuana metabolite" or something other. I'll submit it.

THE COURT: Okay. And I'm not going to modify that for the same reasons.

Anything else we need to put on the record as far as jury instructions or verdict forms, folks?

MR. MAZZEO: No, Your Honor.
MR. ROBERTS: No, Your Honor.
THE COURT: Let's go off the record.
(Jury entered.)
THE COURT: Welcome back, folks. Back on the record. Case Number A637772. Do the parties stipulate to the presence of the jury?

MR. ROBERTS: Yes, Your Honor.
MR. MAZZEO: Yes, Your Honor.
THE COURT: Ladies and gentlemen, you heard all the evidence. That's been concluded. Now is the time I'm going to instruct you on the law that applies to the case. It used to be we would give every juror their own set of jury instructions and you'd flip through them as I was reading them, and we found that the jurors once they go back to the deliberation room

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everybody throws them in the garbage can and it was just a waste of paper.

So what we're going to do and what we've done for the last probably year is my JEA, Tatiana, is going to flip through the instructions on the ELmo so you can read them as I'm reading them. You will have the original set of instructions that I'm reading that will go back with you to the jury room. You're welcome to look back at any or every jury instruction when you're back there in the deliberation room. If you have any questions, you can refer to them then. All right?

Instruction Number 1: Ladies and gentlemen of the jury, it is my duty as judge to instruct you in the law that applies to this case. It is your duty as jurors to follow these instructions and to apply the rules of law to the facts as you find them from the evidence.

You must not be concerned with the wisdom of any rule of law stated in these instructions. Regardless of any opinion you may have as to what the law ought to be, it would be a violation of your oath to base a verdict upon any other view of the law than that given in the instructions of the Court.

Instruction Number 2: The purpose of the trial is to ascertain the truth.

Instruction Number 3: If in these instructions any rule, direction, or idea is repeated or stated in different ways, no emphasis thereon is intended by me or none may be inferred by you. For that reason, you are not to single out any certain sentence or any individual point or instruction and ignore the others, but you are to consider all the instructions as a whole and regard each in the light of all the others. The order in which the instructions are given has no significance as to their relative importance.

Instruction Number 4: The masculine form as used in these instructions, if applicable, as shown by the context of the instruction and the evidence applies to a male person or female person.

Instruction Number 5: The evidence which you are to consider in this case consists of the testimony of the witnesses, the exhibits, and any facts admitted or agreed to by counsel. Statements, arguments, and opinions of counsel are not evidence in this case. However, if the attorneys stipulate as to the existence of a fact, you must accept the stipulation as evidence and regard that fact as proved.

You must not speculate to be true any insinuation suggested by a question asked of a witness. A question is not evidence and may be considered only as
it supplies meaning to the answer. You must disregard any evidence to which an objection was sustained by the Court and any evidence ordered stricken by the Court. Anything you may have seen or heard outside the courtroom is not evidence and must also be disregarded.

Instruction Number 6: You must decide all questions of fact in this case from the evidence received in this trial and not from any other source. You must not make any independent investigation of the facts or the law or consider or discuss facts as to which there is no evidence. This means, for example, that you must not on your own visit the scene, conduct experiments or consult reference works for additional information.

Instruction Number 7: Although you are to consider only the evidence in the case in reaching a verdict, you must bring to the consideration of the evidence your everyday common sense and judgment as reasonable men and women, thus you are not limited solely to what you see and hear as the witnesses testify. You may draw reasonable inferences from the evidence which you feel are justified in the light of common experience. Keeping in mind that such inferences should not be based on speculation or guess.

A verdict may never be influenced by sympathy,
prejudice, or public opinion. Your decision should be the product of sincere judgment and sound discretion in accordance with these rules of law.

Instruction Number 8: You are not to discuss or even consider whether or not the plaintiff was carrying insurance to cover medical bills, loss of earnings, or any other damages she claims to have sustained. You are not to discuss or even consider whether or not the defendants were carrying insurance that would reimburse them for whatever sum of money they may be called upon to pay to the plaintiff. Whether or not any party was insured is immaterial and should make no difference in any verdict you may render in this case.

Instruction Number 9: If during this trial I have said or done anything which has suggested to you that I am inclined to favor the claims or position of any party, you will not be influenced by any such suggestion. I have not expressed nor intended to express nor have I intended to intimate any opinion as to which witnesses are or are not worthy of belief, what facts are or are not established, or what inference should be drawn from the evidence. If any expression of mine has seemed to indicate an opinion relating to any of these matters, I instruct you to disregard it.

Instruction Number 10: There are two kinds of evidence direct and circumstantial. Direct evidence is direct proof of a fact such as testimony of an eye witness. Circumstantial evidence is direct -- is indirect evidence. That is proof of a chain of facts from which you could find that another fact exists even though it has not been proved directly. You are entitled to consider both kinds of evidence. The law permits you to give equal weight to both, but it is for you to decide how much weight to give to any evidence. It is for you to decide whether a fact has been proved by circumstantial evidence.

Instruction Number 11: In determining whether any proposition has been proved, you should consider all of the evidence bearing on the question without regard to which party produced it.

Instruction Number 12: Certain testimony has been read into evidence from a deposition. A deposition is testimony taken under oath before the trial and preserved in writing. You are to consider that testimony as if it had been given in court.

Instruction Number 13: During the course of the trial you have heard reference made to the word "interrogatory." An interrogatory is a written question asked by one party of another who must answer it under
oath in writing. You are to consider interrogatories and the answers there to the same as if the questions had been asked and answered here in court.

Instruction Number 14: In this case as permitted by law, Plaintiff Emilia Garcia served on the Defendant Andrea Awerbach, a written request for the admission of the truth of certain matters of fact. You will regard as being conclusively proved all such matters of fact which were expressly admitted by the defendant, Andrea Awerbach, or which Defendant Andrea Awerbach failed to deny.

Instruction Number 15: The credibility or believability of a witness should be determined by his or her manner upon the stand; his or her relationship to the parties; his or her fears, motives, interests or feelings; his or her opportunity to have observed the matter to which he or she testified; the reasonableness of his or her statements; and the strength or weakness of his or her recollections.

If you believe that a witness has lied about any material fact in the case, you may disregard the entire testimony of that witness or any portion of this testimony which is not proved by other evidence.

Instruction Number 16: Discrepancies in a witness' testimony or between his testimony and that of

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others, if there were any discrepancies, do not necessarily mean that the witness should be discredited. Failure of recollection is a common experience and innocent misrecollection is not uncommon. It is a fact also that two persons witnessing an incident or transaction often will see or hear it differently. Whether a discrepancy pertains to a fact of importance or only to a trivial detail should be considered in weighing its significance.

Instruction Number 17: An attorney has a right to interview a witness for purpose of learning what testimony the witness will give. The fact that the witness has talked to an attorney and told him what he would testify to does not by itself reflect adversely on the truth of the testimony of the witness.

Instruction Number 18: A witness who has special knowledge, skill, experience, training, or education in a particular science, profession, or occupation is an expert witness. An expert witness may give his or her opinion as to any matter in which he or she is skilled. You should consider such expert opinion and weigh the reasons, if any, give for it. You are not bound, however, by such an opinion. Give it the weight to which you deem it entitled, whether that be great or slight, and you may reject it if in your judgment the

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reasons given for it are unsound.
Instruction Number 19: A question has been asked in which an expert witness was told to assume that certain facts were true and to give an opinion based upon the assumption. This is called a hypothetical question. If any fact assumed in the question has not been established by the evidence you should determine the effect of that omission upon the value of the opinion.

Instruction Number 20: Whenever in these instructions I state that the burden or the burden of proof rests upon a certain party to prove a certain allegation made by him, the meaning of such an instruction is this: That unless the truth of the allegation is proved by a preponderance of the evidence, you shall find the same to be not true.

The term "preponderance of the evidence" means such evidence as when weighed with that opposed to it has more convincing force and from which it appears that the greater probability of truth lies therein.

Instruction Number 21: The preponderance or weight of evidence is not necessarily with the greater number of witnesses. The testimony of one witness worthy of belief is sufficient for the proof of any fact and would justify a verdict in accordance with such

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testimony even if a number of witnesses have testified to the contrary.

If from the whole case, considering the credibility of witnesses and after weighing the various factors of evidence, you believe there is a balance of probability pointing to the accuracy and honesty of the one witness, you should accept his testimony.

Instruction Number 22: As to defendant Jared Awerbach, the plaintiff has the burden of proving by a preponderance of the evidence all of the facts necessary to establish the following: One, that the plaintiff sustained damages; and two, that Jared Awerbach's negligence, which has been established by the Court, was a proximate cause of the damage sustained by the plaintiff.

Instruction Number 23: When I use the expression "proximate cause," I mean any cause which in natural, foreseeable, and continuous sequence, unbroken by any efficient intervening cause, produces the injury complained of and without which the result would not have occurred. It need not be the only cause nor the last or nearest cause. It is sufficient if it concurs with some other cause acting at the same time, which in combination with it causes the injury.

Instruction Number 24: There may be more than

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one proximate cause of an injury. When negligent conduct of two or more persons contributes concurrently as proximate causes of an injury the conduct of said persons is a proximate cause of the injury, regardless of the extent to which each contributes to the injury. A cause is concurrent if it was operative at the moment of injury and acted with another cause to produce the injury.

Instruction Number 25: If you find that a defendant is liable for the original injury to the plaintiff, that defendant is also liable for any aggravation of the original injury caused by negligent medical or hospital treatment or care of the original injury or for any additional injury caused by negligent medical or hospital treatment or care of the original injury.

Instruction Number 26: The Court has taken judicial notice that Sunset on January 2, 2011, the date of the accident that is the subject of this lawsuit occurred at 4:46 p.m. Pacific Standard Time. You are to accept this fact as true and give it the weight you deem it deserves.

Instruction Number 27: Certain charts and summaries have been received into evidence to illustrate facts brought out in the testimony of some witnesses.

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Charts and summaries are only as good as the underlying evidence that supports them. You should therefore give them only such weight as you think the underlying evidence deserves.

Instruction Number 28: There was in force at the time of the occurrence in question a law, NRS 484C.110 which read as follows: It is unlawful for any person who is under the influence of a controlled substance to drive or be in actual physical control of a vehicle on a highway or on premises to which the public has access. It is unlawful for any person to drive or be in actual physical control of a vehicle on a highway or on premises to which the public has access with an amount of a prohibited substance in his or her blood or urine that is equal to or greater than Prohibited Substance H, marijuana metabolite, urine nanograms per milliliter is 15, blood nanograms per milliliter is 5. A violation of the law just read to you constitutes negligence as a matter of law.

Instruction Number 29: It has been established as a matter of law that defendant Jared Awerbach, was impaired at the time of the January 2, 2011 collision. After the subject collision, Defendant Jared Awerbach consented to having Las Vegas Metropolitan Police Department take a sample of his

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blood. The Las Vegas Metropolitan Police Department toxicology laboratory tested Defendant Jared Awerbach's blood and determined that at the time of the subject collision, Defendant Jared Awerbach had 47 nanograms of marijuana metabolite per milliliter of blood. This exceeds the legal level of 5 nanograms of marijuana metabolite per milliliter. Defendant Jared Awerbach has been deemed impaired as a matter of law.

Instruction Number 30: In order to establish a claim of negligent entrustment against Defendant Andrea Awerbach, plaintiff has the burden of proving the following elements by a preponderance of the evidence. One, that the defendant Andrea Awerbach knowingly entrusted her vehicle to an inexperienced or incompetent person; and two, that the defendant Andrea Awerbach entrustment of her vehicle was a proximate and legal cause of the damage to plaintiff.

Among other factors, you may consider that fact that Defendant Jared Awerbach was unlicensed as evidence that he was inexperienced or incompetent to drive a motor vehicle on the date of the collision. Entrustment may be established through proof of either expressed or implied permission.

Instruction Number 31: The law provides for a rebuttable presumption that Defendant Andrea Awerbach
gave Defendant Jared Awerbach permission, express or implied, to use her car on the day of the subject accident. The effect of this rebuttable presumption is that it places upon Defendant Andrea Awerbach the burden of proving by a preponderance of the evidence that she did not give Defendant Jared Awerbach permission, express or implied, to use her car on the day of the subject accident.

Instruction Number 32: An owner of a motor vehicle is liable for any damages approximately resulting from the negligence of an immediate family member in driving and operating the vehicle upon a highway with the owner's express or implied permission.

As advised in these instructions, Defendant Jared Awerbach was negligent and caused the accident that gives rise to this case. You must then determine whether or not he was driving with the express or implied permission of Defendant Andrea Awerbach. If you find that Defendant Jared Awerbach did not have such permission, then your verdict must be in favor of Defendant Andrea Awerbach. But if you find that such permission, express or implied, had been given, you must find Defendant Andrea Awerbach also liable.

Instruction Number 33: In determining the amount of loss, if any, suffered by plaintiff as a
proximate result of the accident in question, you will take into consideration the nature, extent, and duration of the injuries or damages you believe from the evidence plaintiff has sustained, and you will decide upon a sum of money sufficient to fairly compensate her for the following items: One, the reasonable medical expenses plaintiff has necessarily incurred as a result of the accident; two, the reasonable medical expenses which you believe plaintiff probably will incur in the future as a result of the accident; three, any loss of household services proximately caused by the accident from the date of the accident to the present and any loss of household services you believe plaintiff will probably experience in the future as a proximate result of the accident; four, the physical and mental pain, suffering, anguish, and disability endured by plaintiff from the date of the accident to the present, including loss enjoyment of life or the lost ability to participate in derived pleasure from the normal activities of daily life, or inability to pursue talent, recreational interests, hobbies, or avocations; five, the physical and mental pain, suffering, anguish, and disability which you believe plaintiff will probably experience in the future as a proximate result of the accident, including lost enjoyment of life or the lost ability to
participate in derived pleasure from the normal activities of daily life or from the inability to pursue talent, recreational interest, hobbies or avocations.

Instruction Number 34: Where plaintiff's injury or disability is clear and readily observable, no expert testimony is required for an award of future pain, suffering, anguish, and disability. However, where an anguish or disability is subjective and not demonstrable to others, expert testimony is necessary before a jury may award future damages.

Instruction Number 35: A person who has a condition or disability at the time of an injury is not entitled to recover damages therefore. However, a plaintiff is entitled to recover damages for any aggravation of a preexisting condition or disability caused by the injury. This is true even if a condition or disability made plaintiff more susceptible to the possibility of ill effects then a normally healthy person would have been, even if a normally healthy person probably would not have suffered any substantial injury. Where a preexisting condition or disability is so aggravated, the damages as to such condition or disability are limited to the additional injury caused by the aggravation.

Instruction Number 36: No definite standard
or method of calculation described by law for which to fix reasonable compensation for pain and suffering nor is the opinion of any witness required as to the amount of reasonable compensation. Furthermore, the argument of counsel as to the amount of damages is not evidence of reasonable compensation. In making an award for pain and suffering, you shall exercise your authority with calm and reasonable judgment. The damages you affix shall be just and reasonable in light of the evidence.

Instruction Number 37: Whether any of these elements of damage have been proven by the evidence is for you to determine. Neither sympathy nor speculation is a proper basis for determine, however, absolute certainty as to the damages is not required. It is only required that plaintiff prove each item of evidence by a preponderance of the evidence.

Instruction Number 38: If you find plaintiff entitled to compensatory harm of defendant's obligation, then you may consider whether you should award punitive damages against Defendant Andrea Awerbach. The question whether to award punitive damages on a particular defendant must be considered separately with respect to each defendant.

You may award punitive damages against Defendant Andrea Awerbach only if plaintiff proves by
clear and convincing evidence that the wrongful conduct upon which you base your finding of liability for compensatory damages was engaged in with oppression and/or malice on part of Defendant Andrea Awerbach. You cannot punish Defendant Andrea Awerbach for conduct that is lawful or which did not cause harm to the plaintiff.

For the purpose of consideration of punitive damage sonly, oppression means despicable conduct that subjects to cruel and unjust hardship with a conscious disregard of the rights of the plaintiff. Malice means conduct which is intended to injure the plaintiff or despicably engaged in with conscious disregard of rights or safety of the plaintiff.

Despicable conduct means conduct so vile, base or contemptible it would be looked down upon and despised by ordinary, decent people. Conscious disregard means the knowledge of the probable harmful consequences of a wrongful act and a willful and deliberate failure to avoid these consequences.

The purposes of punitive damages is deter similar conduct in the future, not to make plaintiff whole for her injuries.

Consequently, plaintiff is never entitled to punitive damages as a matter of right and whether to award punitive damages against the defendant is entirely

1 within your discretion. At this time, you are to decide only whether Defendant Andrea Awerbach engaged in wrongful conduct causing actual harm to the plaintiff with the requisite state of mind to permit an award of punitive damages against Defendant Andrea Awerbach, and if so, whether an assessment of punitive damages against Defendant Andrea Awerbach is justified by the punishment and for deterrent purposes under the circumstances of this case.

If you decide an award of punitive damages is justified, you will later decide the amount of punitive damages to be awarded after you heard additional evidence and instruction.

Instruction Number 39: Clear and convincing evidence is that measure or degree of proof which will produce in the mind of the jury a firm belief or conviction as to the allegation sought to be established. Intermediate degree of proof being more than a mere preponderance but not to the extent as such certainty required to prove an issue beyond a reasonable doubt. Proof by clear and convincing evidence is proof that persuades the jury that proof of the contentions is highly likely.

Instruction Number 40: If you find that plaintiff is entitled to compensatory damages for actual

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harm caused by Defendant Jared Awerbach, breach of an obligation, you may also consider whether you should assess punitive dangs against Defendant Jared Awerbach on the basis of his impairment with a controlled substance. If plaintiff proves that, one, Defendant Jared Awerbach willfully consumed or used marijuana knowing that he would thereafter operate a motor vehicle, and two, Defendant Jared Awerbach thereafter caused actual harm to plaintiff by operating the motor vehicle. The purpose of punitive damages is to punish a wrongdoer that harms the plaintiff and deter it in the future. Not to make plaintiff whole for injuries. Consequently, plaintiff is never entitled to punitive damages as a matter of right and whether to award punitive damages against the defendant is entirely within your discretion.

Instruction Number 41: There are no fixed standards to determine the amount of punitive damage to award. The amount, if any, is left to your sound discretion to be exercised without passion or prejudice and in accordance with the following governing principals. The amount of a punitive damage award is not to compensate the plaintiff for damages suffered but what is reasonably necessary in light of the defendant's financial condition and fairly deserved in light of the

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blameworthiness and harmfulness inherent in defendant's conduct to punish and deter the defendant and others for engaging in conduct such as that warranting punitive damages in this case. Your award cannot be more than otherwise warranted by the evidence in this case merely because of the wealth of the defendant. Your award cannot punish the defendant for conduct injuring others not parties to the litigation or financially annihilate or destroy the defendant in light of the defendant's financial condition.

In determining the amounts of your punitive damage awards, if any, against Defendant Jared Awerbach, you should consider the following guide posts: The degree of reprehensibility of defendant's conduct in light of, A, the culpability and blameworthiness of defendant's fraudulent oppressive and/or malicious conduct under the circumstances of this case; B, whether the conduct injuring plaintiff that warrants punitive damages in this case was part of a pattern of similar conduct by the defendant; and C , any mitigating conduct by the defendant including any efforts to settle the dispute.

The purpose of a punitive damage award is to punish the defendant for the actual harm inflicted on the plaintiff by the conduct warranting punitive

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damages. In this case, since the measure of punitive -excuse me, since the measure of punishment must be both reasonable and proportionate to the amount of harm to the plaintiff and to the compensatory damages recovered by the plaintiff in this case how your punitive damage award compares to other civil or criminal penalties could be imposed to comparable misconduct since punitive damages are to provide a means by which the community can express iteration, outrage, or distaste for the misconduct of a fraudulent, oppressive, or malicious defendant and deter and warn others such conduct will not be tolerated.

Evidence has been presented concerning Defendant Jared Awerbach's 2008 car accident. You cannot use such evidence to award plaintiff punitive damage for conduct injuring others not parties to this litigation or conduct that does not bear reasonable relationship to the conduct injuring plaintiff that warrants punitive damages in this case. You may consider such evidence only with respect to the reprehensibility of the defendant's conduct and only to the extent that conduct is similar and bears a reasonable relationship to the defendant's conduct injuring plaintiff that warrants punitive damages in this case.

Instruction Number 42: The Court has given you instructions embodying various rules of law to help guide you to a just and lawful verdict. Whether some of these instructions will apply will depend upon what you find to be the facts. The fact that I have instructed you on various subjects in this case, including that of damages, must not be taken as indicating an opinion of the Court as to what you should find to be the facts or of as to which party is entitled to your verdict.

Instruction Number 43: It is your duty as jurors to consult with one another and to deliberate with a view toward reaching an agreement if you can do so without violation to your individual judgment. Each of you must decide the case yourself but should do so only after a consideration of the case with your fellow jurors and you should not hesitate to change an opinion when convinced it is erroneous.

However, you should not be influenced to vote in any way on any question submitted to you by the single fact that a majority of the jurors or any of them favor such a decision. In other words, you should not surrender your honest convictions concerning the effect or weight of evidence for mere purpose of returning a verdict or solely because of the opinions of other jurors. Whatever your verdict is, it must be the
product of a careful and impartial consideration of all the evidence in the case under the rules of law as given by the Court.

Instruction Number 44: If during your deliberation you should desire to be further informed on any point of law or hear again portions of the testimony, you must reduce your request to writing signed by the foreman. The officer will return you to court where information sought will be given to you in the presence of the parties and attorneys. Read backs of testimony are time consuming and not encouraged unless you deem it a necessity. Should you require a read back, you must carefully describe the testimony to be read back so that the court reporter can arrange her notes. Remember the court is not at liberty to supplement the evidence.

Instruction Number 45: When you retire to consider your verdict, you must select one of your number to act as foreperson who will preside over your deliberations and be your spokesman here in court. During your deliberation, all the exhibits admitted into evidence, these written instructions, and forms of verdict which have been prepared for your convenience.

In civil actions three-fourths of the total number of jurors may find and return a verdict. This is

1 a civil action. If your verdict is in favor of the

Instruction Number 46: During opening statements, counsel for Defendant Andrea Awerbach stated that, quote, "Just because there's no evidence of any preexisting records doesn't mean none exist," end quote. You should disregard this statement. There is no evidence that plaintiff Emilia Garcia ever sought medical treatment related to back pain prior to the accident. It would be improper for you to speculate that such medical records exist.

Instruction Number 47: Now you will listen to the arguments of counsel as they endeavor to aid you to reach a proper verdict refreshing in your mind the evidence and law. Whatever counsel may say, you will bear in mind it is your duty to be governed in your

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deliberations by the evidence as you understand it and remember it to be and by the law as given you in these instructions and return a verdict, which according to your reason and candid judgment, is just and proper.

Dated now March 8, 2016. I now sign the instructions. We are to the point of closing arguments.

Mr. Roberts, ready to proceed?
MR. ROBERTS: I am, Your Honor.
THE COURT: Just a couple minutes. Okay -MR. ROBERTS: I appreciate it.

THE COURT: -- and then I'm going to interrupt

MR. ROBERTSON: Good morning. Jury in a little while, hopefully today you will go back into the deliberation room and you're going to have three jobs. The first and most obvious job is to answer the questions that are going to be given to you by the court and as the court noted in the instructions, the court has prepared a jury verdict form for your convenience. It's three pages of questions that you need to answer for us that's probably something everyone knew.

Your other jobs can be found also in the instructions of the Court. Let me show you again Instruction Number 1. It is your duty as jurors to follow the instructions and apply the rules of law. It

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is a violation of your oath to base a verdict upon any other view of the law than that given in the instructions.

So your second job when you go back in the deliberation room is to make sure that everyone in the jury room follows the law when you answer the questions and that you answer the questions based on the law the judge has given you.

Your third job can be found in Instruction Number 43. It is your duty as jurors to consult with one another and deliberate with the idea of reaching an agreement if you can do so without violation of your individual judgment. Each of you must decide the case for yourself, but should only do so after consideration of the case with your fellow jurors.

So your third job is -- before you answer any of the questions on the verdict form is to explain to each other why you feel you should be answering the questions each way. So you have to look at the law. You have to make sure everyone follows it, and each of you has to deliberate and explain to the other jurors why you feel that way about the questions. This is the way the process works, and this is the way that justice is ensured.

During the case -- and you've been here for a

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month, and I'm not going to sit here and go through every day and every witness and recap what I think they said. You've been here too. I understand despite my best efforts you may have questions as evidence comes in and certainly after these fine defense lawyers come in giving you their argument today you may have even more questions. So what I've done is put together some of the questions I think someone might raise in the back room and suggest to you what I think the answer to that question is, and the one I want to start with goes back to something that you've heard over and over and over again, and that I addressed in my opening statement.

If you recall, I said in opening statement, You're going to hear evidence, and part of what you're going to hear is an argument that Emilia is lying about something and there was an objection. We're not going to do that.

Let me share with you some lawyer code that you have heard over and over and over again. Subjective complaints which cannot be verified. That's code for don't believe her, she's not telling the truth. That's exactly what that is. And we've heard it over and over and over again for the last month. So if someone in the back room suggests to you, well, isn't all of this pain just a subjective complaint which cannot be verified?

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What I'd like you to tell them is Emilia not lying. I don't think anybody believes that after watching that on the stand --

MR. TINDALL: May we approach, Your Honor? THE COURT: Come on up.
(A discussion was held at the bench, not reported.)

THE COURT: The last comment regarding Mr. Roberts' personal opinion is stricken from the record. You are instructed to disregard that. Go ahead.

MR. ROBERTS: With regard to subjective complaints that cannot be verified, certainly pain is a subjective complaint and the amount of pain that someone perceives is totally subjective, but the fact that Ms. Garcia had an injury is not subjective, and I want you to remember back to the evidence, remember back to the evidence of spasms, palpable spasms which was never explained by any of the defense doctors.

Ms. Garcia when she went to the emergency room three days after when her pain was slowly growing to the point she had to seek help, still had no palpable spasm in her lumbar spine, doctors told you palpable spasm cannot be faked. It's not something reported by the patient. It's something you press in and you feel the
spasm. So three days after the accident, after the accident, after the rebuttal, wasn't asked about spasm. In the examination, didn't feel spasm in the lumbar spine. Now, we go to the 11th, a little more than a week later and the chiropractor feels palpable spasm. The primary-care physician, palpable spasm. Then goes to Dr. Lemper who verified the palpable spasm. Dr. Cash, Dr. Gross, Dr. Kidwell and all three the crash occurred, the doctors testified still had palpable spasm that they can independently verify. This is not subjective, and we know that the palpable guarding is a mechanism of the body to protect itself when the body senses it has been injured. This is not subjective, the fact of injury.

Her pain levels, I agree. That's something that you have to listen to her complaints, you have to listen to the doctors and how they felt about how realistic she was evaluating the pain, but the fact of injury, that's not something subjective and not something in dispute. Two doctors for the defense, Poindexter and Klein. Poindexter and Klein both agreed and acknowledged that Ms. Garcia was injured in an automobile crash. They both said sprain/strain and that was the extent of the injury, so they agreed she was injured. They agreed she is in pain. Klein went so far

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to agree that her pain complaints were real throughout all of this. This is not just suggestive. The doctors looked at the -- I would submit to you that there's real evidence of an injury and real evidence that the injury occurred in the automobile crash.

Sprain/strain is what the two doctors said, Poindexter and Klein, and that's it. Muscle damage, tendon damage, everybody agreed. Every single doctor who took the stand agreed that sprain/strain will resolve over time with or without treatment. You heard 8 to 12 weeks from some doctors. Some doctors a little longer, but we know that all of the doctors agreed that it was just sprain/strain it would have resolved no matter what she did. It did not resolve. It got worse, and it ultimately required treatment that was recommended by her physicians.

If someone says Emilia might have had back pain before the crash, remind them that they're not allowed to speculate. The judge has told you that. He has issued an instruction. He has even issued a special instruction to disregard statements that medical records might have existed before the crash that would indicate that Ms. Garcia received treatment for lower back pain because there's simply no evidence of that and you can't speculate that that exists. There's no evidence of any

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lower back pain suffered by Ms. Garcia before the crash, and there's more to it than that.

You know, we know about the preexisting spondylolisthesis. And we also know that the evidence is undisputed. It was causing her no pain before the crash, but it predisposed her, it made her more easily injured. The doctors all agree that most people with a spondylolisthesis are asymptomatic for the course of their life.

So if you look at treatment necessary to correct the spondylolisthesis because the spondylolisthesis had become painful after the accident then more likely than not, that treatment would have never been required. You heard testimony 80 percent of people with spondylolisthesis never need surgery, never experience pain, stays asymptomatic. And more likely than not, Ms. Garcia, who had lived her life for 32 years without pain from her spondylolisthesis, would have continued to live her life without pain if Mr. Awerbach had not chosen to consume marijuana, get in the car, and crash into her on January 2, 2011.

If someone said that Emilia was inconsistent in statements, remember, Dr. Klein agreed that her pain complaints were real, and he even agreed that they were consistent based on his review of the records. Her pain

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comes and goes. She's testified to that. She's agreed to that. The charts that are prepared by defense counsel show pain came and went, but it never went away and her doctors have told you it will never go away, her entire lifetime.

If someone says, Look at these photographs they've showed you of Emilia, she doesn't look injured. She's having fun. Look at that. She's drinking with her friends, she must be exaggerating. Her subjective reports of her pain must be exaggerated. And if this comes up -- and I'm sure you're going to see a lot of these pictures again. We spent hours going over these pictures with Ms. Garcia that they downloaded from her Facebook account, and you'll see them again, I'm sure.

But there's one I want you to think about and go back to and look at and it's Exhibit AAK2, and you'll probably remember seeing that. And that's her cousin Dolche, and she was helping her with an errand. Do you remember that testimony? And this was in January of 2013. She had surgery on December 26th of 2012. So this is about more or less three weeks after her spine got opened up.

I'm sure you remember what happened.
Dr. Gross told you about the procedure. Where they went in and removed the disk and put in the cages and put

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these screws into her vertebrae. This had happened three weeks before this picture. The doctors had excused her from work for four months. She didn't have to go to work for four months while she recuperated. She was only using the walker for about two weeks and this is three weeks.

And this tells you what you can take from these pictures and whether or not you can believe the arguments about what these pictures showed. Nobody could contend that three weeks away from this Ms. Garcia was not in pain and her mobility was not limited, but here she is helping her cousin out, a smile on her face, putting on the construction worker jackets for a fun photo, doing her best to live her life and help her family. You can't see pain in a picture. You can't see what she's going through in this picture, and you can't see it in any of the other 17 pictures they want to show you in order to contend that she's living a normal life and she's not in pain.

And they'll show you 17 photographs. 17 photographs over five years, that's over 1,800 days, 1,891 days from the crash until today. And they're going to show you 17 photographs and ask you to disbelieve her testimony of her pain and her limited mobility and her limited ability to do the things that

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she needs to do. Seventeen pictures over 1,800 days.
They didn't show you pictures of her using her walker. They didn't show you pictures that they didn't think supported their case. It's all smiles and, you know --

MR. MAZZEO: Objection, Your Honor, assumes facts not in evidence. Referring to the pictures that don't exist.

THE COURT: Sustained. I don't know if there's pictures of her in a walker.

MR. MAZZEO: Thank you.
MR. ROBERTS: So when you look at the pictures, remember that this is the face Emilia Garcia puts on even when she's in pain, and that she helps her family even if that means the pain is worse the next day.

MR. MAZZEO: Objection, Your Honor. That's speculation. That's not in evidence either.

THE COURT: Overruled.
MR. MOTT: And she told you. She said that when she gets up and she does things and she's more active she pays the price the next day, her pain increases. And she also said that she gets up and does it again.

Now, you've heard from Dr. Poindexter, you've

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heard from Dr. Klein, and if someone says that you should listen to them when they tell you that her treatment is not reasonably caused by the crash, I want you to say, no, remember their qualifications compared to the qualifications of the doctors that treated Ms. Garcia and testified.

Dr. Klein, nice old guy, hadn't done spine surgery for 30 years, told you that there are people still doing spine surgery who testify as experts who are available who are even here in Nevada and they go all the way to California and find someone who hadn't done surgery for 30 years to tell you the surgery was not reasonably related to the accident.

And, guess what, they paid him $\$ 93,000$. $\$ 93,000$ they paid to someone who wasn't even qualified to do a spine surgery anymore to come and tell you that the surgery done by a qualified spine surgeon, a board certified spine surgeon, confirmed by Dr. Cash, another board certified orthopedic surgeon, was unnecessary and ill advised.

What about the qualifications of
Dr. Poindexter? I don't need to go into this to a great degree. I don't need to go into this anymore than the first five minutes of my cross-examination. When you found out that Dr. Poindexter had failed his boards two

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times in the specialty that he primarily practices in, in the specialty he wants to talk to you about, he failed his boards twice.

Now, you don't have to be a board certified doctor in order to practice medicine. It's not required. But you heard some of the other doctors talk about the process where you have to take a test and then you have to appear before a panel of qualified physicians in your specialty and convince them that you're knowledgeable and should be board certified, and he failed that twice. And that's the best they can do to find someone that disagrees with all of our board certified treating physicians.

Then there -- the next thing is very telling, the next question. I asked Dr. Poindexter, did you take the boards a third time and fail them again? He told you he did not remember. He told you that I don't remember if I failed the boards a third time in my specialty. That's not credible. Simply not credible. He doesn't know if he took his boards and failed them a third time.

So he's not qualified, he doesn't have the expertise to criticize Ms. Garcia's doctors, and he's not going to be honest with you on the stand. That's what you know about Dr. Poindexter.

MR. TINDALL: Objection. Move to strike the last comment about not going to be honest on the stand. It's a Crusteen [phonetic] violation.

THE COURT: Based on his prior statements I think it's okay. I'll overrule it.

MR. ROBERTS: Okay. I'll talk to you about some of the causation arguments that you've heard. So if someone says that the crash could not have caused her need for treatment because she didn't feel pain immediately at the scene, remind them that the doctors, the board certified doctors were asked about this and they all agreed that it was not uncommon in a case of a spine injury.

The defense doctors, Poindexter and Klein also agreed that it wasn't uncommon to feel pain immediately, but they had different opinions. I think Dr. Poindexter said 24 hours in his experience. He couldn't point to any studies. And then we heard from Dr. Klein who originally said a few hours and then he said up to 12 , and he said, But I can't show you a study. This is just based on my experience. And for Dr. Klein, that's telling because Dr. Klein claims to be a specialist in evidence-based medicine. And evidence-based medicine is -- the theory is doctors shouldn't just rely on their own personal clinical experience, because it's not broad

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enough, and they should be familiar with the literature and they should rely upon studies which show what all the other peer-reviewed literature has established.

And he said, I can't cite you to any study that's peer reviewed that says that you will feel pain immediately or within 24 hours or within 36 or 48 hours of the type of injury that Ms. Garcia. He couldn't point to anything other than his personal, anecdotal experience, and remember his experience, he hasn't been a spine surgeon for 30 years.

And the spine surgeons who deal with this every day, whose practice is dealing with spine treatment 90 percent of the time told you in their experience it is not unusual.

And Dr. Oliveri told you one of the reasons that this type of pain can come on slowly and not felt immediately and he showed you that little disk, and he showed you where the pain sensors were around the outside edge. It's called the annulus. And there aren't any pain receptors in the middle. So if you've got some damage in the middle of the disk, you're not going to feel it right away. But as it migrates towards the edge, it comes on slow. There are medical explanations for this, but ultimately, it comes down to common sense.

One of the jury instructions talks about direct evidence versus indirect evidence, probably a different word, but that's what it basically means, and if someone comes in and they're soaken wet, you can have direct evidence I saw them outside, I saw the rain coming down on them, I saw them get wet. That's direct evidence that the rain made them wet.

You can infer that the rain made them wet if there's evidence that it's raining outside, they were outside. They weren't wet before they went out in the rain and they came back in and now they're wet, you can infer that the rain made them wet. Now, maybe the security guard hit them with the hose as they came in the door, but that's not likely, and in this case, the doctors, all of the doctors, relied extensively on the time element as why they inferred that the injuries and the pain were caused by the automobile crash. She's asymptomatic before the accident. She has no pain. Within three days after the incident her pain is coming on and it never goes away. And the doctors could find no other explanation other than the crash.

So you could infer that the crash caused her pain because she had no pain before the crash, it comes on after the crash, and the doctors tell you she would not necessarily have felt pain at the scene of the
accident or even within a day.
And the burden of proof which the court put in the instructions and just read to you, the preponderance of the evidence, is nothing more than more likely than not. What we've been talking about the whole trial, and when I asked the doctors, the treating physicians, more likely than not, did the crash cause the pain, did the crash cause the need for the medical treatment we've discussed in the trial? Every doctor not only agreed but said it wasn't even close. That's what the evidence is. And I see it's noon, so this might be a good break, Your Honor.

THE COURT: Thank you. Let's go ahead and take our lunch break. During the break, you're instructed not to talk with each other or with anyone else about any subject or issue connected with the trial. You're not to read, watch, or listen to any report or commentary on the trial by any person connected with the case or by any median of information, including without limitation, newspaper, television, the Internet, or radio.

You're not to conduct any research on your own, which means you do not talk to others, text others, tweet others, Google, or perform any other kind of book or computer research with regard to any issue, party,

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witness, or attorney involved in a case.
You're not to form or express any opinion on any subject connected with the trial until the case is finally submitted to you.

See you back at 1:15.
(Recess taken from 12:04 p.m. to
1:11 p.m.)
(The following proceedings were held
outside the presence of the jury.)
THE COURT: Let's go back on the record.
We're outside the presence of the jury.
Go ahead, Mr. Mazzeo.
MR. MAZZEO: Thank you, Judge.
Judge, I'm going to move for a directed verdict with regard to the claim for punitive damages against Andrea Awerbach, and the reasons why is because you've heard the evidence presented by the plaintiffs so far. They have not proved and provided any facts to support a claim to satisfy the elements for punitive damages. Pursuant to 42.005, they have not proven oppression or malice.

Both oppression and malice require a finding of despicable conduct with a conscious disregard. Malice as, you know, is either intentional, with intent to injure, or despicable conduct which is engaged in

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with a conscious disregard of the rights or safety of plaintiffs.

So they have to prove both of those for conscious disregard, and -- they have to prove both conscious disregard and despicable conduct if they're seeking to prove either malice or oppression against Andrea.

Now, despicable conduct is conduct so vile and base or contemptible that it would be looked down upon and despised by ordinary, decent people. They didn't prove that.

Conscious disregard requires knowledge of a probable, harmful consequences of a wrongful act and, and a willful and deliberate failure to avoid these consequences.

So we're talking about conduct that is just underneath intentional but more than reckless: willful and deliberate failure. And we don't have that. The facts in this case don't support that --

The plaintiff has rested. They did not establish these facts. And it's a matter of law for the judge to dismiss this claim for punitive damages against Andrea.

Nevada case law requires, with regard to finding conscious disregard, it's conduct that has to

1 exceed negligence --

MS. ESTANISLAO: Gross negligence.
MR. MAZZEO: I'm sorry -- gross negligence or reckless disregard. They have not established that in this case.

Based on that, Your Honor, I request that the Court dismiss plaintiff's claim for punitive damages.

MS. SCHELL: Your Honor, we would object to a motion being made at this time as untimely. Under Rule $50(a)(2)$, motions for judgment as a matter of law may be made at the close of the evidence offered by the nonmoving party or at the close of the case.

We're not at either one of those points right now. You can renew a motion after the trial. We're not at that point.

I'll address it on this on the merits if you want me to, but I believe this is untimely. I've never had someone make a motion for directed verdict in the middle of my closing.

MR. STRASSBURG: Well, I could have waited until after his closing, but we are at the close of the case. And it's before the case is being submitted to the jury, so it is a proper time. So we can hear it now or we can hear it after Mr. Roberts finishes his closing argument, but...

THE COURT: I think it's still an issue of fact for the jury. I think there's at least circumstantial evidence that the key was either given or the key was left out with knowledge that Jared had a drug problem, had taken the car before, had been in an accident before. I think it's up to them. It's going to be up to the jury to decide whether or not it meets the burden.

MR. MAZZEO: That's it, Your Honor.
MR. MOTT: Just one housekeeping matter. The deposition testimony for Jared Awerbach and Andrea Awerbach that was played in the record during our case, this is just a transcript of it. We would like to mark it as a court exhibit if we can.

THE COURT: Okay. A court exhibit.
MR. MOTT: Thanks, Your Honor.
THE COURT: Otherwise, we're ready to get going?

MR. TINDALL: By court exhibit, they mean that's just for court, right?

THE COURT: Yep. It doesn't go back to the jury.

While I'm thinking about it, I just want everybody to look at the verdict form before it goes back to make sure it's the right one, because I had lots

1 of different versions of verdict forms on my desk. You 2 can check now or you can check later. I mean, not going 3 to go back until after closings are all done. I just may forget to remind you again later.

MR. MOTT: I'll remember.
MS. RODRIGUEZ-SHAPOVAL: I'll remember for

MR. MOTT: That's what it really is. Audra will make sure we don't forget.
(Jury entered.)
(The following proceedings were held in
the presence of the jury.)
THE COURT: Go ahead and be seated.
Welcome back, folks. Back on the record, Case Number A637772.

Do the parties stipulate to the presence of
the jury?
MR. ROBERTS: Yes, Your Honor.
MR. MAZZEO: Yes, Your Honor.
THE COURT: All right. Mr. Roberts, you may proceed.

MR. ROBERTS: Thank you, Your Honor.
I'm going to do everyone a favor. I've got some more lists of those points that I was going to go through. I think I'm going to save the rest for my

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rebuttal case if they get mentioned again and try to move through this a little bit more quickly -- not quick but a little bit more quickly.

The photographs -- I do want to address one point that I left out when I was talking about the photographs before. And, as you recall, when Ms. Garcia was being questioned about these photographs, this board was taken up to her time and time again, and she was asked about the report of pain levels somewhere in the area of the time in which the photographs were taken. But one of the things that I'm not sure we've focused on is what those numbers mean.

It is subjective. It's subjective reporting. But when Ms. Garcia was reporting her pain and writing the numbers, there was an explanation for what those numbers meant. And I'd like to go through that with you so that, as you hear the argument made by the defendants, you can judge for yourself whether or not the photographs are inconsistent with the reporting by Ms. Garcia.

So you've seen the pain diagrams, and we've talked about those. And here's the scale. Zero is no pain, 1 to 10 is minimal pain. During a period of time in which they showed Ms. Garcia out and active, the pain was a 3. That's a minimal impact on daily activities.

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A 4 out of 10 , minimal limitation in daily activities. 5 out of 10 is some limitation.

And you go all the way up to 8 out of 10, daily activities are difficult. Not that she can't do them; it hurts and it's hard to do them. So all the way up to 8 out of 10 , Ms. Garcia is not saying she can't do activities; she's saying that activities are made very difficult by her pain.

You go all the way up to 9 out of 10 before you have a limited ability to do daily activities because of the pain. And 10 out of 10 says essentially unable to do any activity.

Now, if you keep this pain scale in mind and the definitions in mind, you'll see that all the pictures they want to show you, which is 17 pictures out of 1,981 days, there's nothing inconsistent in her reporting versus the pictures they're going to show you. Her reporting is not inconsistent with what she testified to.

And, remember, even during the worst period of time, she said 70 percent of limitation. Now, after the rhizotomy, she says 30 percent limitation, which means shed acknowledged she can still do 70 percent of what she used to do. There's absolutely nothing inconsistent or disingenuous about what Ms. Garcia testified to

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during this trial.
So I told you your second job was going to be to follow the law. And if all we had was law, we wouldn't need you; we'd just have a judge. But your job is to take the law and apply it to the facts, because you are the judge of the facts. And I'd like to review with you some of the most important instructions that you're going to have to deal with in order to answer the questions that the judge has given you.

I'd like to draw your attention first to Instruction Number 33.

So, in determining the amount of losses suffered by Ms. Garcia as a result of the accident, here's some of the things that you take into account. And although this instruction says "if any," keep in mind what you've heard what the testimony is so far. There hasn't been now at this point any evidence that there was no injury and no damage. That evidence has not come in.

Because the evidence that you can consider is the -- is what happened after the lawyers gave opening statements. And remember the judge said opening statements are not evidence, and what lawyers told you they thought the evidence would be is not evidence.

So going back to the opening statements,

Andrea Awerbach's attorney told you you would hear from a Dr. Odell. You never heard from Dr. Odell.

Andrea Awerbach's attorney said you would hear from Dr. Scher. You did hear from him a little bit. He was the biomechanic who flew in from Seattle.

And go back to opening statements. They told you that Dr. Scher was going to testify that it was not scientifically probable that the motor vehicle accident caused damage to the lumbar spine or exacerbated any preexisting condition of the lumbar spine. That's what they told you they were going to do.

Dr. Scher came in. He started to give his opinions. The Court struck all his opinions because they were without scientific foundation. So you can't consider what they told you in opening as evidence that there were no injuries.

Similarly, Jared Awerbach's counsel, about Dr. Scher, told you that he's going to do it the way engineers do it. He's got computers. He's got science, science the you-know-what out of it. And he promised you that you were going to hear from Dr. Scher, but you didn't. So there's no evidence that the collision did not cause the injuries.

So the only question for you to consider at this point is how much of the injuries and the treatment

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that you've heard about was proximately caused by the collision.

And we've got the burden of proving that. We have to prove that the things beyond what they've acknowledged -- the strain/sprain -- we have to prove that it was reasonably related to the collision and that the treatment was reasonable and necessary. And I think if you -- strike that.

If you think back to the testimony of all of the treating physicians, you'll remember that every single one of them told you that, in their opinion to a reasonable degree of medical probability or higher, that the treatment that you heard about was caused by the collision and that none of the treatment would have been incurred in the absence of the collision.

So these are the items of damage that you'll need to consider. The reasonable medical expense the plaintiff has necessarily incurred as a result of the accident. The reasonable medical expenses that you believe the plaintiff will probably incur in the future, loss of household services in the past, any loss in the future that you may find.

And the Court has also instructed you that full and fair compensation includes physical and mental pain, suffering, anguish, and disability, including the

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loss of enjoyment of life or the lost ability to participate and derive pleasure from the normal activities of daily life.

And that's what we're going to ask you to do as part of full and fair compensation. This is what the law requires as part of your oath. If you find that Ms. Garcia has suffered this type of damage, the law requires you to try to award the amount of money necessary to compensate for that.

And one way to look at this and look at the types of damage that the Court has instructed you on is you've got harms and losses that we've shown were the result of the accident. And so when you look at the medical expenses, when you look at household services, it's money to fix what can be fixed.

If a surgery or a rhizotomy doesn't fix it and doesn't take away the pain but helps, that's still part of damage, to fix what can be fixed and help what can be helped.

And then what's left are the things that can't be fixed or helped. And that's where physical and mental pain, suffering, anguish, and disability come in.

And if someone says, "Well, the money won't make the pain go away, the money won't give her back the activities," well, if it could, then that would be
special damage. That would be money to fix what can be fixed.

So, by definition, this is money that you need to weigh and balance the harms versus the amount of money to reasonably compensate for that. And I'll talk about some ways that you can do that when we get to our discussion of damages.

And when you consider damages and you consider the harms that were proximately caused by the accident, this is a very important instruction, Number 35.
"A person who has a condition or disability at the time of an injury is not entitled to recover damages for that."

This is where the spondylolisthesis comes in. This is where the claims of age-related changes in the spine that were not causing pain.

So you can't award money due to the fact that she had an asymptomatic spondylolisthesis, but there were no damages that were going to flow from that. There were no costs that she was going to incur, because the scientific evidence is more likely than not it never would have become painful, it never would have been treated.

But the fact that she had this, she is still entitled to recover for an aggravation caused by the

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injury. So if it's asymptomatic and now it requires treatment, under the law she gets all of the treatment unless you find that some of the treatment would have been necessary anyway, simply due to the preexisting spondylolisthesis. And there's no scientific evidence of that. Even the defense doctors agreed.

And the fact that her condition might have made her more susceptible to being hurt in this collision is not a defense. They still have to pay if you find that the spondylolisthesis was asymptomatic before the accident and became symptomatic during the accident.

And I'd submit to you that you have to find that it was asymptomatic before the accident because there's no evidence otherwise. And the Court has instructed you that there is no evidence that Emilia Garcia ever sought medical treatment related to back pain, and it would be improper for you to speculate that such medical records exist.

So the evidence shows that there's no medical treatment before the collision; there's medical treatment after the collision. The defense doctors agree that some of the treatment related to sprain/strain is reasonable, but at some point the causal connection stopped. But they've offered you no

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explanation for why, to a reasonable degree of medical probability.

So what have they done instead? They've criticized the treatment. They've criticized the fact that the doctors can't find the pain generators. They've criticized Dr. Gross and Dr. Cash for recommending surgery.

They've talked about failed back surgery syndrome and claimed that the back surgery made things worse instead of better and that part of the current pain is caused by the surgery and not the accident.

This is where Instruction Number 25 comes in. If you find that a defendant is liable for the original injury, the sprain/strain, the original need to go to the doctor, then that defendant is also liable for any aggravation of the original injury caused by negligent medical or hospital treatment or care or for any additional injury caused by medical injury or care.

MR. MAZZEO: Objection, Your Honor. There's no evidence of negligent medical treatment in this case.

THE COURT: Overruled.
MR. ROBERTS: Thank you, Your Honor.
And I agree with Mr. Mazzeo. There is no evidence of negligent medical treatment. Dr. Klein, although he disagreed with the decision, said it wasn't
negligence, it wasn't malpractice.
But even though the defendants aren't saying it and aren't saying it's negligence, they want to imply it by their doctors saying, shouldn't have done the surgery; now the pain is caused by the surgery.

MR. MAZZEO: Objection, Your Honor.
Misstatement. Mischaracterization.
THE COURT: Overruled.
MR. ROBERTS: So keep this in mind. The evidence that we've submitted is that her treatment was continuous from three days after the collision until today. And all the doctors say that it's causally related. And when they put on evidence and talk about doctors doing things which they don't think are necessary, don't think that, oh, well, this breaks the chain of causation, because it doesn't. If it is related to the accident and she would not have been at the doctor but for the collision, then it's causally related to the collision even if the treatment is negligent, even if it caused additional pain.

We're not saying it did. We believe that the evidence shows that all of the treatment has helped, that the spine surgery immediately resulted in a 70 percent reduction in the symptoms from the spine. It deteriorated 50 percent, and now the rhizotomies have
continued to fix things.
So we think that the treatment has been appropriate. That's what the proof is. There is no negligence. But don't think that the testimony that they've put on breaks the legal chain of causation. It doesn't.

Here's Instruction Number 24. And a lot of legal language in here. There can be more than one proximate cause of the injury. And this is what I want you to take away from this. The court has already found as a matter of law that the collision was Jared's fault. The question is how much injury and damage was caused by that? We're also going to be arguing that it's Andrea Awerbach's fault for negligently entrusting her vehicle to Jared.

And what this instruction says is they can both be at fault. You don't have to choose. If they're acting together, then you can have more than one proximate cause of the injury.

And when you're determining whether or not Mr. Awerbach had permissive use of the vehicle, whether he had permission to drive Andrea Awerbach's car, this is a very important instruction, because we talked a lot about the plaintiff having the burden of proof as a general matter, and we have to prove everything we need

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to prove by a preponderance of the evidence, more likely than not.

For issues dealing with our demand for punitive damages, we have to prove by clear and convincing evidence. That's a standard between more likely than not and beyond a reasonable doubt.

What this says is for this particular issue of permission, express or implied, the defendant Andrea Awerbach has the burden of proof. There's a presumption that he had permission, and they have to prove to you that he didn't. Very important.

And the claim for negligent entrustment requires us to prove one thing other than permissive use. Actually, two things. One and two.

So it's not negligent to entrust the car, to give him permissive use, unless Ms. Awerbach knew that he was an inexperienced or incompetent person.

We would submit to you that she knew or should have known that he did not have a license, which makes him an incompetent person; that she knew or should have known that he was smoking marijuana every day for the four years that he lived at that apartment; and that she knew that when she drug-tested him for a period of time, according to Jared Awerbach, he failed over 75 percent of the tests.

So the evidence is going to be that, if she gave him permissive use, she gave permissive use to an inexperienced or incompetent person. And the Court has already found that Jared Awerbach was at fault for the accident.

This instruction goes to our request for punitive damages. So we know that Jared Awerbach has already been found at fault for the accident and for any harms caused by the collision.

In order to award punitive damages, we have to show a couple more things by clear and convincing evidence. We have to show that Jared Awerbach willfully consumed or used marijuana, knowing he would thereafter operate a motor vehicle.

What is the evidence of that?
The evidence is that he drove his mother's car to Cherise Killian's apartment, and she told you that he smoked a big blunt -- which is a cigar wrapper cut open, filled with marijuana -- and that she saw him do that.

MR. MAZZEO: Objection, Your Honor. That is misstatement of Cherise Killian's testimony.

THE COURT: Overruled.
MR. ROBERTS: So Cherise Killian has told you that he willfully consumed or used marijuana. You can infer that he knew he would thereafter operate a motor

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vehicle because he drove there and needed to drive back and, in fact, he was driving back and driving home.

Number two has already been found as a matter of law, that he caused actual harm to the plaintiff by operating the motor vehicle.

In addition to the statements of Cherise Killian, we've also got in the record Exhibit 1-16, and this is the impaired driving report from Officer Figueroa where he states, "Driver admitted to smoking marijuana prior to driving listed vehicle."

So we have an admission by Mr. Awerbach, and you also heard the deposition of Officer Figueroa where he stated under oath in his deposition that Mr. Awerbach admitted to this.

So we've got Cherise Killian's testimony. We have an admission by the driver against his interest. And Mr. Awerbach has not taken the stand and denied. So the unrebutted evidence, the clear and convincing evidence, is that he smoked marijuana knowing that he was going to drive a motor vehicle.

There's also circumstantial evidence from which you can infer that he had smoked that day, and that's contained in Exhibit 1, Page 11, the impaired driving report, where "Driver had a clear plastic bag with green leafy substance, positive for marijuana,

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8.8 grams."

So seen smoking, 8.8 grams in his possession, admitted smoking.

And, finally, we have his blood work, which the Court has instructed you on, where marijuana metabolite, right here on this line, 47 nanograms per milliliter, the legal standard for impaired, which the Court instructed you on -- I'm not going to pull it up; I know you all saw it -- was 5.

So Mr. Awerbach smoked, was seen smoking, admitted to smoking, and had marijuana metabolite in his blood of almost 10 times the legal limit. Clear and convincing evidence that he intentionally consumed marijuana knowing that he was going to drive a vehicle.

So let's get to the questions and your job to fill out the questions from the judge.

Your very first question that you need to determine is what amount of damages were sustained by Emilia Garcia as a result of the automobile collision on January 2nd of 2011? And then there are various categories that you're going to be asked to fill in, and I'd like to go through those categories with you and review the evidence in support of what numbers goes in each of those blanks.

The first category is the past medical

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expense. And if you remember back in opening, I showed you a chart where we had gone through and totaled up all of the invoices for medical treatment. And I told you that you were going to hear some disagreement about the reasonableness of some of these prices.

And, in fact, we put Dr. Oliveri on the stand, who reviewed all of the invoices for reasonableness. And he told you that he found some of the charges to be excessive or unreasonable, and I wrote those down as he went through it.

In addition, Dr. Oliveri explained that, to get to that number, there were three entries that were not shown on the original chart. And, if you remember, I wrote those down as he went through them: Matt Smith, Surgery Arts, and Valley View. And he found these amounts to be reasonable.

So what I have done for you is I've taken the flip chart. I've taken these new numbers, and I've put them together in a new summary of the evidence. And you'll see that the reasonable medical expense causally related to the accident, which we're seeking, has been reduced from 627,920 at the beginning of trial to $\$ 574,846.01$. Now, Mr. Mott found the one cent last night about midnight as we were going through the spreadsheet.

So this is the number that we would ask you to place in the line for past medical expense causally related to the collision.

You also heard evidence which will help you determine the number to put in the next line for future medical expenses, and this was what Dr. Oliveri called his life-care plan. After reviewing all of the treatment, all of the recommendations of her treating physicians, he came up with a plan that would include all of the medical expenses he found that would more likely than not be necessary as a result of the collision.

And when he was on the stand, we reviewed his summaries. It really wasn't that complicated. He went through, and he planned physician visits for her remaining life expectancy -- spine surgeon visits, some physical therapy, some analgesic medications and high-spasm medications, some MRI costs -- and he came up with the current cost of each of those items and the number of years in which he found that they were needed.

He also planned for repeat radiofrequency ablations. And I actually misspoke during my opening. I think I told you that was two a year, and that was because I thought that's what he had done because Dr. Kidwell and Dr. Gross -- Dr. Gross, rather, had

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stated that she could need them up to every six months, based on his experience.

Dr. Oliveri said, well, up to every six months, but sometimes 18 months. So what's the more-likely-than-not scenario is once every 12 months. So we used a more conservative number, and this is one rhizotomy per year for 48 years in the life-care plan that Dr. Oliveri put together.

She's had one. It was back in November. And when she testified, she told you that the pain was just starting to come back somewhat. The nerves are growing, and so the pain is going to continue to get worse until she needs another rhizotomy. And, according to Dr. Oliveri, more likely than not that will be in September.

We also have the cost of a lumbar reconstructive surgery. All of the treating physicians have said, more likely than not, you have that adjacent section breakdown, which will eventually, more likely than not in 22 years, result in the need for one more surgery like she had already.

Another fusion, this one of the level above at L3-4 because of the additional stress put on this once 4-5 and 5-S1 are fused. And even the defense doctor agrees that, more likely than not, she's going to need
another fusion now that she's had the first.
Both of these treatments will help her pain, but it won't take it away. She's still going to have pain for the rest of her life. And I'd like you to think about the way that pain will present itself.

Right now she came in and testified -- and she's less than six months from her last rhizotomy -she's doing better. She only has a 30 percent loss of her ability to do activities that she's told you about. Her pain levels are better, sometimes as low as 2, 4 on a bad day, which is pretty good. She's off the narcotic medicine.

But now, according to the doctors, to a reasonable degree of medical probability, her pain is going to go up from a 4. It's going to continue to go up. She needs that rhizotomy again in September. It's going to drop back down, and then it's going to do this.

That's going to happen 50 different times over her life -- 48 times over her life, a continued cycle with the pain getting better and then knowing it's coming back and having to deal with that.

The lumbar reconstruction surgery. You've heard the evidence from her doctors. They recommended this. It took her two years to go through it because she was terrified of the thought, terrified of the

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thought of having her back cut open and screws put into her spine.

It took her two years. She's glad she did it. She told me she would do it again based on the relief she got.

But now she knows in 22 years, she's going to have to go through that all over again and face all of those risks again. And Dr. Gross told you it's not just that it, Oh, whoops, we have another segment that's unstable now; we've got to do something about it. It's going to be another, more likely than not, five-year build-up in pain in that segment until you reach the point where it's so unbearable, she has to consent to the surgery again. And she has to look forward to that, and that hangs over her head for her whole life.

The medical treatment in this plan does not fix everything. It helps, but it does not take away the pain, the suffering, the anxiety, and the knowledge of what's coming. It doesn't take away the fact that her activities and restrictions will increase again, not just in 22 years, but every year leading up to that rhizotomy.

Dr. Smith came in, and he reviewed the life-care plan that Dr. Oliveri put together, and he assigned a present value to that. What amount of money

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today do you need in order to pay for all the medical treatment into the future that she's more likely than not is going to need?

And he explained to you how he did that. And, if you remember, this was cumulative up to her life expectancy of 84 years.

And the 593 is the stimulator option, but because the stimulator is that permanent implant that has -- you have to have surgery to change the batteries, Ms. Garcia opted for the rhizotomy instead. Her physician said that was a good option.

So we're not asking you for the 593. This is the number without the stimulator. So the number we would ask for you to put in for future medical care is 2,166,715. We're not asking for the 593.

But to the extent that they're arguing or will argue that she's not really going to need the rhizotomies. She had some pain come back after the rhizotomy. If the nerve roots are burned, the pain can't come back. So if she's got pain, the rhizotomy must not have been effective and she doesn't need any more.

Well, if you take away any of the rhizotomy, then we would ask you give the stimulator at $\$ 593,462$. But the medical evidence simply doesn't support it.

Because, while they want to isolate one note where she said she had a recurrence of pain and where the physician assistant wrote something down about her usual pain taken out of context, remember we showed you the previous visit where Dr. Kidwell said the pain was above and below the rhizotomy site, and she has resumed a lot more activity.

And Dr. Kidwell told you he didn't think her pain indicated the rhizotomies didn't work because it was above and below. And then it was the natural result of her being so limited for so long, that the rhizotomies were so effective, she started doing more things and got sore above and below the site.

So there is no competent medical evidence that the rhizotomies didn't work. The unrebutted medical testimony from her treating physicians is that the rhizotomies are reasonable, they're necessary, and they're causally related to the collision.

So past loss of household services. You've heard testimony from Ms. Garcia. You've heard testimony from Dr. Stan Smith, the economist, which has given you the tools to calculate a number to put in this blank.

Dr. Smith gave you a number of $\$ 19$ an hour, based on his market research, and said that was for service such as Merry Maids, to have someone come in
your house to perform household services.
He then said, based upon tables that economists have studies and created, someone in her demographic would spend about 24 hours a week doing household services. So that's 52 weeks a year. That's 1,248 hours a year. So if there was a full 100 percent loss of household services, that would be a loss of $\$ 23,712$.

And he says he interviewed Ms. Garcia and he asked her about how much time she spent. She said that 24 hours sounded about right. She has told you that herself on the stand.

And then there's some numbers where she told Dr. Smith that she had lost about 70 percent of her ability to do those household services before the fusion. After the fusion, it got better and went up to 50 percent, and that it's currently at only a 30 percent loss after the rhizotomy.

So if you just do the math based on the numbers Mr. Smith gave you and the testimony of Ms. Garcia, it's about 16,000 a year before the fusion, 11,000 a year after the fusion before the rhizotomies, and then just 1,700 for the partial year since then.

You add those up, and this is the number we would ask to put in the blank, $\$ 67,579$ for past loss of

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household services.
Mr. Smith also talked to you about future loss of household services through her life expectancy. And one of the numbers that he gave you -- and he told you that he's not telling you what the percentage is; he's just looking at what she said, he's looking at what Dr. Mortillaro said, and he's coming up with some examples to give you based on what you find to be her probable loss of her ability to do household services into the future.

And, remember, what she can do today and how she appears today is not going to be consistent. There are going to be times that she's worse and times that she's better. She's at one of her best times right now. And right now she's testified she's at about a 30 percent loss.

So if you were to find that that's probably going to be her condition based on her testimony and the medical evidence, there would be 263,000 for loss of household services.

If, due to these periods of time when things were going to be worse, especially that five years approaching her next fusion, 40 percent would be 439,666. If you think that's a little bit high based on what you've seen, 20 percent would be 219,833 .

So these are some numbers that you can use to decide what to put in that blank. I'm going to ask you to put 263,000 in. I think that's conservative, and I think it's fair and justified by the evidence that's before you.

So now we've got pain, suffering, and loss of enjoyment of life into the past and into the future.

This is the hard one. Up until now, the numbers that I've given you are what the evidence shows are money reasonable and necessary to pay her past medical expenses, her future medical expenses, to pay for help around the house.

None of these numbers are intended to compensate, under the law, Ms. Garcia for the noneconomic part of the equation, for the things that can't be fixed or helped.

So how do you go about placing a number on those things? How bad? How much does it hurt? You've seen evidence of the pain charts, of her subjective reporting. You've heard her describe the impact on her life, and you've seen that her pain is 4 to 8 . So I would submit to you, the evidence shows that her pain is on the bad side.

In determining pain and suffering and loss of enjoyment of life, we also have to look at how long.

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The evidence is undisputed that how long in this case is forever. Her pain will not go away until she dies. And that's on the high side of the scale. Pain that never goes away.

And when pain never goes away when the doctors have told you it's never going to go away, then hope goes away, hope that you'll have no pain goes away. And that's part of the equation. And when you've got 3 million for the expenses, the harm here, the pain is the worst harm of all. And it's got to be more than that.

When someone gets a call in the middle of the night and their loved one has been involved in an automobile crash, your loved one has been taken to the hospital, they were in an automobile crash, what is the first thing that a person thinks of? Do they say, "How much is the ambulance going to cost? How much treatment is this going to require? What are the hospital bills going to be?"

That is not what a reasonable person thinks when they are told their loved one has been involved in a crash and is hurt. It's, "How is she? Is she in pain? Is she going to be okay? Is she ever going to get better?"

These are the things that a reasonable person

1 thinks of because these are the most important things.
2 They're more important than the cost of the treatment, and they have to be valued and compensated in accordance with how important they really are.

So Ms. Garcia's pain will continue for 47 years. 4 out of 10 , 8 out of 10 , in that range, more likely than not. It will never go away.

And in thinking about the value of that, think about a reasonable person and they're in a situation like Ms. Garcia where they have pain that's never going to go away for the rest of their life and there's a machine that can take away their pain for a minute. Like a laundromat: You put it in the slot, you turn the knob, and your pain goes away for a moment.

If you would believe it would be reasonable for a person to put a quarter in and turn the slot, if that's a reasonable compensation to make the pain go away -- and this is just one example -- a quarter a minute for 47 years is $\$ 87,600$ a year for a quarter a minute for the pain.

There is no standard by law. You determine what is reasonable, in your enlightened conscience what is reasonable for having to endure life long pain and suffering.

And even though the line on the verdict form

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just says "pain, suffering, and loss of enjoyment of life," I want to take you back to the instructions by the Court, and you'll see "mental pain, physical pain, anguish, grief."

Each one of those elements has a value and are subtly different. The amount that you put in there is totally up to you. But it has to be full and fair compensation. It can't be less just because it's not going to take the pain away. That's not what the law demands.

Loss of enjoyment of life is one of the things here that's included in that line item but which we've put on separate evidence of. And this was Stan Smith, and you heard him talk about the studies and the economic way of trying to value enjoyment of life.

And this is a tool for you to use. You're not bound by it. Give it whatever weight you think it deserves.

Dr. Ireland, who criticizes it, has never calculated loss of enjoyment of life. He's simply not qualified to criticize someone who does. And this is his specialty, following Stan Smith around the country, making extraordinary sums of money criticizing his work without providing there is any alternative.

So Stan Smith said 132,000 a year, more or

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less. You apply a 30 percent reduction in the enjoyment of life, and that's 39,600 a year. \$39,000 a year to have pain every -- every day when you try to do the activities, to have your activities limited.

Even when you're doing the activities and taking your kids out to the beach, you're not enjoying them as much because you're limited and you're in pain and you know the pain is going to be worse the next day because of what you did. $\$ 39,600$ is what you would get using Stan's calculation. And that's a reasonable number.

And I told you at the beginning that this is the type of case where I was going to have to ask for a big award. And this is one calculation of how you could get to a number for future loss of enjoyment of life. $\$ 39,600$ for loss of enjoyment of life based on a 30 percent reduction and Dr. Smith's calculations, 87,600 based on a quarter of minute. And that's only for the 16 hours she's awake. I didn't put anything for when she's sleeping.

Then you've got to talk about the mental pain and suffering that goes along with the physical pain and suffering. We've talked about her grief, her anguish during times -- during times that are bad. And the law requires you to also award for disability, being unable

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to do things in a normal way.
So you add all those up together, and you can't leave anything out under the law if you find the evidence supports it, and that's $\$ 177,000$ a year times 47 years is $\$ 8,328,400$. Again, this is one calculation. The number that you put there is yours, as long as it's full and fair compensation.

So this recaps the numbers. Things add up. This is just the numbers that I've gone through with you, and they add up to $\$ 13,096,540.01$. And this does not yet include any award that you decide to make against Jared Awerbach for punitive damages.

So how do you go about deciding what award of punitive damages is proper?

The degree of reprehensibility of the defendant's conduct. Almost 10 times the legal limit, driving without a license, whether or not the conduct was a pattern of similar conduct by the defendant.

We've heard, by his own testimony, he drove two to three times a week on errands with no license, and you can infer he drove two or three times a week on errands high on marijuana, because he testified under oath that he smoked marijuana every day over the four years he lived at that apartment. So this is a continuing pattern from the time he crashed his mom's
car in 2008 until he crashed it again in 2011.
And then, see, you can determine any mitigating conduct, including any efforts to settle the dispute. These are the things the law allows you to consider, which is why they've been telling you Jared is sorry. He's sorry this happened. He's a changed man. He's made efforts to become better. And this is mitigating conduct which you should consider in deciding either not to award punitive damages.

Because, remember, these numbers here are to compensate Ms. Garcia for her harm. The punitive damages aren't to compensate Ms. Garcia. That's not the purpose under the law. The purpose under the law is to punish Jared Awerbach for what he did and to deter him and others from similar conduct in the future.

So what does the evidence show? Words. "I'm sorry." But what do Mr. Awerbach's actions show? They show that he continues to refuse to accept responsibility for the damage he did that day; that he continues to blame others, from Ms. Garcia to her treating physicians; and that he continues to this day to avoid responsibility for the damage he caused in the crash. And that's a factor that you can consider in deciding to award punitive damages and the amount of punitive damages.

Think about it. Dr. Klein, \$93,000. Dr. Ireland, 23 to $\$ 25,000$. Dr. Poindexter, $\$ 8,000$. Two attorneys for five weeks, attorneys for five years, all in attempt to avoid responsibility for paying the damages he caused by the crash.

The evidence shows that he's not really sorry. And he certainly hasn't completed the 12-step program, which includes admitting responsibility and then making amends.

So the amount has to be sufficient to deter Mr. Awerbach from doing this again. Maybe the evidence shows that it wouldn't take that much to deter him, but it also has to be sufficient to deter others similarly situated.

And we're at a time in Las Vegas, in Nevada, in our community, where medical marijuana is becoming available. And you need to consider what amount is necessary to deter people from smoking marijuana legally.

This isn't about whether marijuana should be legal or not. It's about whether it's okay to violate Nevada law and drive when you're legally impaired.

What amount is necessary to keep truck drivers from driving marijuana and hurting people? For commercial vehicles? For bus drivers? For other people

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out there? For companies to make sure this doesn't happen?

It has to be a big enough number. And it's a number that hasn't been out there. You get to decide how much it should take to deter others from getting this high and hurting people. The number has to bear a reasonable relationship to the harms in this case.

The quantifiable harms that we can add up, \$3 million. It's not including the noneconomic damages that are so hard to value. In order to be proportional, as the law suggests, the award of punitive damages has to be at least $\$ 3$ million. It has to at least equal the actual harm.

And, if you remember in opening, I told you this was the kind of case where I was going to have to ask for $\$ 16$ million. I think I said 16.2. Dr. Oliveri cut some of the expenses a little more than I thought was going to happen. But this is the numbers that I've already showed you. \$3 million in punitives. It leaves a total verdict of 16 million.

And 1 times the actual special damages is not the only proportional that there is. Proportional can mean 2 times actual damages. It can mean 3 times actual damages. It could mean 3 times -- it could be 3 times the 13 million.

It would not be unreasonable for you to decide that people should not choose to smoke, choose to be 10 times over the legal limit, and choose to drive and hurt someone; that that's not okay; and that there needs to be a big message sent to the community that this will not be tolerated and that there will be enough of a punitive award to deter others from getting hurt, others that may never suffer damages like Ms. Garcia, other people that may not die because you tell the community that this will not be tolerated.

The wall downstairs has engravings. I don't know if you notice that when you go downstairs. This is from 1924, right downstairs on the wall of the courthouse. "The moment you have protected an individual, you have protected society."

If you protect Ms. Garcia by awarding fair and full damages and you award punitive damages sufficient to deter others from doing this again, you will have not only protected Ms. Garcia, you will have protected society.

And when you think about punitives, you're also going to have to think about whether or not you assess punitive damages against Andrea Awerbach. And under the way the questions are in the form, you're not going to put in an amount for Andrea Awerbach, even if
you decide that punitive damages should be assessed against her for her conduct.

You first have to make a finding of whether punitive damages may be awarded under the law. And the Court has given you instruction on that. It's Instruction Number 38.

So, if you find that plaintiff is entitled to compensatory damages for actual harm caused by defendant's breach of an obligation, then you can consider whether to award punitive damages.

So first, before you can get to this point, you have to find that she breached an obligation. That's the negligent entrustment. And we've talked briefly about that, but I want to point out again the instructions on negligent entrustment which you've seen from the Court.

There's a presumption that she entrusted her vehicle. And there's also something else. Look at the instructions carefully, and you'll see that the Court deals with the request for admissions that I showed you all, when Andrea Awerbach was on the stand, where:
"Did you give him permissive use?
"Answer: Admit."
And the Court has told you that, as a matter of law, that admission conclusively establishes
permission.

But we don't just need that. We don't just need that admission. Look at the other evidence. You can have implied permission as well as express permission.

He drove the car twice a week. He ran errands. Mom called him up and said, "Hey, while you're out, stop at the grocery store." Mom knew he was driving the car. Mom gave him the keys that morning. She had given him the keys in 2008; he went on a joyride and wrecked another car.

She gave him the keys. She couldn't remember if he gave them back. And he took the car. The story now is, "I thought I hid them. I don't know how he got them." She testified that she's left them on the mantle, which is more of a kitchen counter. She testified that she's hid them. She's been all over the place in her stories under oath.

And because of the presumption, they have to prove, Andrea has to prove, that she didn't give him permission. And the only evidence she didn't give permission is this conflicting evidence under oath that goes both ways.

So I would suggest to you that, if you consider her conflicting evidence under oath, you

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consider the admission she's made, that you will find that she entrusted her vehicle to someone without a license, who is a drug addict, who she knew was a drug addict.

But that's not enough to award punitive damages. You have to find that she acted with oppression or malice. And "malice" means an intent to hurt someone. And we're not claiming that she intended to hurt someone and acted with actual malice.

But there's another type of malice, and that's despicable conduct which is engaged in with conscious disregard of the rights or safety of the plaintiff. And there's a definition the Court has given you of conscious disregard.
"Knowledge of the probable harmful consequences of a wrongful act and a willful and deliberate failure to avoid these consequences."

So the evidence will allow you to find that she knew Jared was dangerous. She told you, "I knew he was dangerous. That's why I hid the keys from him. He crashed my car in the past. I knew he couldn't be trusted. He's dangerous."

She knew that he was dangerous. She knew that, if he was allowed to drive a car high two to three times a week, he was probably going to hurt someone.

And yet she willfully and deliberately failed to keep the keys away from him. She willfully and deliberately allowed for him to continue using her car. And this would allow you to say, "You know, we don't have to award punitive damages, but we think maybe this is conduct that needs to be deterred in the future; that people need to know that, if they entrust their car to a drug addict who is high and who doesn't have a license and he goes out on the streets and hurts someone, they're on the hook too.

Not just for the compensatory damages that the law provides, but also for punishment and deterrence from a jury of their peers. Not just for Andrea Awerbach, but for others similarly situated. And we would ask you to check that block, that punitive damages are justified.

And then there will be a second short phase where you come back and deliberate again. You don't have to do that with Jared because he was high -- strike that -- he was impaired as a matter of law, and so the Court finds conscious disregard as a matter of law. That's one way to look at it.

But you need to find conscious disregard before you can determine whether or not you want to award punitive damages against Andrea Awerbach.

Just a second. Make sure I've covered everything.

There's one more thing that I want you to consider in awarding full and fair compensation for what happened and in determining whether or not punitive damages are justified in the amount of those damages, that Mr. Awerbach, as a matter of law, crashed into Emilia Garcia. She's living her life. She's not in any pain. He chooses to do these illegal acts, runs into her, and now she's in pain the rest of her life.

And then they add to that by fighting responsibility for her injuries. They add to the pain by --

MR. TINDALL: Objection. Improper argument. MR. STRASSBURG: Joined.

THE COURT: I'm going to sustain that.
MR. ROBERTS: They demonstrate that they're not sorry for what they did. They demonstrate that they don't yet -- that they're not yet deterred.

Because what did they do? They put surveillance on Ms. Garcia. They took videos of her and her kids. They downloaded her Facebook pictures. They attack her credibility and her character. They called her fat. They called her lazy. She was driving down the road innocently and got hurt, and she has been put

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They're not sorry. They're still trying to avoid responsibility. They need to be deterred.

And I'm not telling you that you have to award the numbers that I've suggested to you, but you can't award a penny, not even a penny, less than full and fair compensation.

Thank you.
MR. TINDALL: May we approach, Your Honor?
THE COURT: Sure. Come on up.
(A discussion was held at the bench, not reported.)

THE COURT: Let's go ahead and take another quick break, folks. You're admonished not to converse amongst yourselves or with anyone else on any subject connected with this trial or to read, watch, or listen to any report of or commentary on the trial by any persons connected with this case or by any medium of information including without limitations newspapers, television, radio, social media, Facebook or Twitter, or to form or express any opinions on any subject connected with this trial until the cause is finally submitted to you.
(Whereupon, the jury exited the courtroom.)
(The following proceedings were held outside the presence of the jury.)

THE COURT: We're outside the presence. Do you guys want to make a record?

MR. TINDALL: No, Your Honor.
MR. MAZZEO: Yes, Your Honor.
THE COURT: Go ahead.
MR. MAZZEO: During Mr. Roberts' closing argument, he made a reference, a negative reference, to the fact that I had said during opening statement that one of the witnesses I would call would be Dr. Odell and that they didn't hear from Dr. Odell during the course of the trial.

Plaintiff had brought a motion prior to trial, Motion in Limine Number 16, including any negative inferences from failing to call cumulative witnesses. And they had another motion outstanding that was seeking to strike cumulative testimony from the likes of both Dr. Poindexter and Odell, arguing that they were essentially the same specialty, one being physiatrist, physical medicine and rehab doctor, the other one being a pain management and anesthesiologist.

So in light of that ruling, Mr. Roberts should not have made any negative inferences for failure to call cumulative, a motion brought by plaintiffs, it was
granted, but then he made a negative reference during his closing argument which was inappropriate and prejudicial.

THE COURT: The problem is I don't know why you didn't call Dr. Odell. I don't think the negative comment was as much that you didn't call another witness as you said you were going to call somebody that you didn't call.

Now, if it was cumulative, he probably shouldn't have been identified or designated to begin with. But I don't -- I don't find that was violative of a pretrial order. I mean, I guess it would have been violative of a pretrial order if we knew that he was a cumulative doctor and then he said that. But if we knew that it was cumulative testimony, he would have been stricken before trial anyway.

MR. MAZZEO: And he wasn't, and that's why he wasn't stricken. But there was an overlap between the testimonies from Drs. Odell and Poindexter. So -- and then Dr. Odell had other testimony that he was going to offer. Then we elected not to call him due to the length of the trial and due to the testimony received from Dr. Poindexter and Dr. Klein.

THE COURT: And that's fine. But I just don't think that warrants some kind of admonition or

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instruction to the jury about it.
MR. MAZZEO: Okay. I just want to go on the record that they violated an order of the Court that was granted on a motion that they brought, so...

MR. SMITH: In addition to your comments, Your Honor, they knew ahead of time, before trial, what each of their witnesses would say. So if they believed that Dr. Odell would be cumulative of Dr. Poindexter or they had some other reason why they wouldn't call him, they should not have addressed him in opening.

And the comment that Mr. Roberts made was simply that they told you that Dr. Odell would be here at trial and testify and they didn't bring him. It doesn't have anything to do with him being cumulative. It has to do with addressing what was said in opening and whether the defendant actually backed up their assertions in opening.

THE COURT: Anything else?
MR. MAZZEO: No, Your Honor.
THE COURT: All right. Off the record.
(Recess taken from 2:39 p.m. to
2:54 p.m.)
(The following proceedings were held
outside the presence of the jury.)
THE COURT: Let's go back on the record.

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We're outside the presence of the jury.
What do we got?
MR. MAZZEO: All right, Judge. Instruction Number 25, with regard to medical malpractice, and plaintiff's argument improperly tells the jury that they can infer and find defendants' medical evidence argument is equivalent to medical malpractice.

They can't. The plaintiff did not prove medical malpractice or the breach of a standard of care to a reasonable degree of medical certainty. It cannot be inferred from defendants' arguments, and no one testified, that plaintiff's doctors breached the standard of care.

If the jury returns a verdict closer to what plaintiff is seeking, how can they -- how can we tell the jury if they found the unnecessary surgery as a resulting pain is from medical malpractice? It can't be inferred from absent expert -- inferred absent expert testimony to a reasonable degree of medical malpractice, which is a breach of the standard of care.

So if plaintiff believes it's medical
malpractice, then their obligation is to prove it to a reasonable degree of medical certainty. Hence the reason why you included a jury instruction for medical malpractice.

If the defendant is allowed to tell and explain to the jury why plaintiff's doctors did not commit medical malpractice -- but it's difficult when there's no jury instruction as to what medical malpractice is. So -- and this is --

THE COURT: Haven't we argued this a few times already?

MR. MAZZEO: Yeah, we did. And this is just making for the record with regard to this medical malpractice jury instruction.

MS. ESTANISLAO: And his opening statement where he said --

MR. MAZZEO: So we can't explain to the jury the difference between medical malpractice and what the defendants' experts are saying that plaintiff's surgery is unrelated and unnecessary. So...

THE COURT: That's exactly what you can tell them.

MR. MAZZEO: They're two separate things, though.

MS. ESTANISLAO: Well, and plaintiff also stated in his opening statement, told the jury, that they can infer medical malpractice. That was --

THE COURT: The plaintiffs aren't trying to prove there's malpractice.

MS. ESTANISLAO: He said that -- he said, If, from defendants' evidence, you believe that there's -you can infer medical malpractice, then we're still liable." That's what he said.

THE COURT: That's why I allowed the instruction, because you had a doctor that got up there, and while he said that it was still within the standard of care, he implied that Dr. Gross had done something wrong. That's why I allowed the instruction.

MR. ROBERTS: And, Your Honor, just for the record, even if it wasn't negligence, even if it wasn't malpractice, the instructions in my arguments are still correct as a matter of law under the Restatement Second of Torts, Section 457, "Additional harm resulting from efforts to mitigate harm. If the negligent actor is liable for another's bodily injury, he is also liable" -- excuse me -- "he is also subject to liability for any additional bodily harm resulting from normal efforts of third persons in rendering aid, which the other's injury reasonably requires, irrespective of whether such acts are done proper or in a negligent matter."

So even if there's no negligence, even if there's not malpractice, it's still a proper argument that the chain of causation is not broken if increased

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harm was caused by her efforts to mitigate for seeking medical care.

MR. MAZZEO: We've made the record, Judge. We're fine.

THE COURT: You're good to move on?
MR. MAZZEO: Yes, Judge.
THE COURT: All right. Let's bring them back. (Jury entered.)

THE COURT: Go ahead and be seated. Welcome back, folks. We're back on the record. Case Number A637772.

Do the parties stipulate to the presence of the jury?

MR. ROBERTS: Yes, Your Honor.
MR. MAZZEO: Yes, Your Honor.
THE COURT: All right. Mr. Mazzeo, you may proceed with your closing.

MR. MAZZEO: Thank you, Judge. Good afternoon, ladies and gentlemen.

THE JURY: Good afternoon.
MR. MAZZEO: Now, I want to thank you again and apologize for how long this trial has taken. We told you three to four weeks -- three to four weeks and, as you know, we're now into the fifth week. And no doubt, ladies and gentlemen, you've had a difficult job.

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You sat here, listened to witnesses, looked at documents. Part of your job is to evaluate the witnesses and the documents, but you also have another job and that's to deliberate on the evidence.

Not only in looking at the evidence, but you've had -- we've had breaks, we've had interruptions we've had side bar conferences with the Court, and no doubt, sitting there I can imagine how frustrating it might be at times when you're told it's only going to go three to four weeks. Well that was -- as you know, that was under estimated, and both Andrea Awerbach and myself want to thank you for the service you're providing. We know that you're undercompensated for your role when serving your civic duty as jurors. So, again, we want to thank you for the time you've spent in this trial and the additional time you're going to spend deliberating in this case.

Now, in the deliberation room you're going to have two tasks. You'll have more, but two tasks immediately come to mind. One, you're going to decide the case. That's what you're going to do. That's number one. You're going to decide the case.

Number two, you're going to explain to each other why you feel they way you do about the case. So this is not a one-person deliberation, two-person,

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three-person. It's an eight-person deliberation. All of you get to deliberate in there. All of you get to express your feelings and your thoughts about the evidence in this case, and part of the reason for the closing argument is to give you some ideas as to how to go about doing that.

There's no doubt when you go in to deliberate you're going to have questions in your minds about -you're going to go into the back and you're going to say, Well, you know, what about this issue, what about that issue? And part of the reason for the closing argument, as you saw from Mr. Roberts' closing argument, is to give you some ideas as to how is best to go about doing it. It's to give you some ideas about ways to look at the evidence that's been presented in this case. So far you've got one viewpoint from Mr. Roberts. Well, now you're going to get two more viewpoints. One from myself and another from Mr. Strassburg. So, during the deliberation, there's two questions that you're going to ask undoubtedly, and I'm going to come up with more questions as I go through my closing argument with you.

First question is: What injuries did Ms. Garcia prove by a preponderance of the evidence related to the motor vehicle accident case? This is in

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three parts. What injuries, number one. She has to prove those by a preponderance of the evidence, two. And they have to be related to the motor vehicle accident case. And then another question you might ask yourselves is what is the reasonable value of the damages based on credible and reliable evidence? Not based on all the evidence, based on the reliable and credible evidence. Those are two questions.

Preponderance of the evidence. A jury instruction that was read to you earlier. It means such evidence as when weighed with that opposed to it has more convincing force, and from which it appears that the greater probability of truth lies therein. This is the standard by which you will apply your application of the law to the facts. This is the burden that the plaintiff has to prove that he -- the damages and the injuries that were sustained by Ms. Garcia.

Now, the first thing that comes to mind, what was the -- what was the biggest focus in plaintiff's case? And it was this spondylo -- no, spondylolisthesis, the slipped vertebrae from the very get-go. That was the main contention in this case.

So the question is: Did Ms. Garcia sustain an injury to the spondylolisthesis? I'm abbreviating as spondylo just for simplicity sake. I don't want to say
that word over and over again today.
So did she sustain an injury to the slipped vertebrae? The spondylolisthesis, the L4-5 or the L5-S1, and the answer, ladies and gentlemen, is no. How do we know that? Because an acute injury -- and let me reference something that Mr. Roberts said during his closing argument.

He said that the doctors looked at the MRI films and verified the injuries. He didn't show you any films. He just said the doctors looked at the MRI films and verified the injuries. I'm going to prove to you and the evidence is going to prove to you that that's not what happened in this case. Because the injuries, the spondylolisthesis, did not sustain an acute injury. How do we know that? Because an acute injury to a preexisting spondylolisthesis results in an immediate onset of pain. We know that. It results in a decreased functionality and it results in an instability of part of the construct of the L5 on top of the S1 by its very nature.

In this case, there was no immediate onset of pain. There was no decrease in functionality for Ms. Garcia, and there was no instability of the spondylolisthesis.

The nerve root, Dr. Klein told you, is the
most susceptible structure, most susceptible to injury in the lumbar spine and he showed you -- he actually showed you films of the spine. Dr. Gross didn't, Dr. Lemper didn't, Dr. Kidwell didn't, and Dr. Cash didn't. It took Dr. Klein to come in here and show you the nerve roots. And what Dr. Klein showed you was that these nerve roots are pristine. They're in great shape at the L4-5 and the L5-S1. There is nothing wrong with the nerve root. There is no compression, there is no radiculopathy, there is no edema, and there is no swelling.

Mr. Roberts in his closing argument just a few minutes ago, he said all -- referring to my client, Andrea Awerbach and Jared Awerbach -- attempt to avoid paying the damages caused by the crash. That's false and I'll say that again. That is false. That's a false statement. The defendants are very willing and responsible for paying for the injuries caused by the crash. Not for the injuries, all the other injuries that they're alleging or conditions or treatment that they're alleging is related to the motor vehicle accident because the evidence proves that it is not. So that was a false statement by Mr. Roberts.

He said you should find full and fair compensation. That's true. I agree with him. Full and

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fair compensation is not $\$ 13$ million. It's not \$8 million. It's not $\$ 3$ million. Full and fair compensation for the injuries sustained from this accident.

Dr. Klein and Dr. Poindexter, he criticized them for their credentials. You heard them on the stand. They came in here. They took an oath to tell the truth, and you heard their ability to articulate and talk about the spine and the diagnosing and treatment of spinal injuries and conditions. They weren't lacking in their ability to articulate with their knowledge of the spine and their experience in dealing with spinal injuries and conditions.

And both of them said, You can't have a progressive worsening where you have an acute injury to an unstable spondylolisthesis. Because the injury to this interarticular joint causes a shifting which results in pressure, compression, impingement of the nerve root. If you have, that's the most susceptible structure, the nerve root. So if you have any pressure impingement on this nerve root, that's what will cause pain. A symptom will arise automatically.

Mr. Roberts, in his closing arguments, said that the defendants are going to suggest that the plaintiff is lying about something. Lawyer code is that

1 the subject of complaints can't be verified. Well, 2 that's his argument. That's not my argument. That's what he assumed we were going to say.

But if he was following the evidence in this case and following the cross-examination of his doctors and experts, he would that know what we're saying is that Ms. Garcia's subjective complaints of pain are not supported by objective medical evidence. That's what

The MRI showed no instability to the spondylolisthesis. We know that. And not just the defense doctors, but the plaintiff's doctors admitted that the MRI did not show any -- and we're going to go through those MRIs in the minute. But it did not show
any acute or traumatic injury to any structure of the lumbar spine.

Now, we know Dr. Cash took the stand, saw the plaintiff once, Ms. Garcia. He did a flexion and extension X-ray of the lumbar spine. Why would he do that? Well, we know from the evidence you do a flexion/extension X-ray of the lumbar spine to determine whether the spondylolisthesis is unstable. What did he say -- and he did it both of the neck and the lumbar spine. He said it was not unstable. That's from their own expert who on the same day said -- met her once. On the same day said, Let's do surgery. To a condition that was not unstable. That's their expert or their treating doctor I should say.

Now, and here's the -- as you saw this picture on the right you have the spondylolisthesis, the slipped vertebrae and it is pars interarticularious defect. There it says fracture. Here you have the slippage.

We're going to look at the films in this case. Mr. Roberts didn't show you any films in his closing argument. He talked about money a lot, but he didn't show you medical evidence in this case.

Now, in looking at this, ladies and gentlemen, we see that -- and this was something that it was Dr. Klein that showed you. None of the plaintiff's

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treating doctors. Dr. Klein, who is an expert in diagnosing and treating these injuries, and also in reading 200 MRI films a year. So he showed you L4-L5 disk bulge and fissure without root compression. He showed you how they're in pristine condition. This is a January 26, 2011 film. There's nothing wrong with any of the nerves at this juncture in this location.

So why -- why then -- and we're going to get to it in a little while as to why would the doctors treat a perfectly fine nerve where there's no compression, no impingement? Where there's no radiculopathy. No pain stemming from this area, and that's the L4-L5. That's fine but Dr. Gross fused it anyway. No need to.

And then we look at the L5-S1. This is the next level. Disk level without root compression. They're perfectly normal. Mr. Roberts brought Dr. Gross back in after Dr. Klein testified. He could have showed him these films. He didn't talk about these films because he couldn't say anything bad about the nerve root in these. He operated on a perfectly good location. The L4-L5 and L5-S1. It was not indicated for this motor vehicle accident. Preexisting condition, okay. Preexisting condition is not a result of this accident. That's preexisting.

So, let's move on. Another question you might ask when you're deliberating amongst yourselves. What were Ms. Garcia's injuries? Well, we know what they were. We know because we had the doctor, the emergency room doctor testify yesterday. Plaintiff wanted to intimate and suggest it to you during opening statement and then when she was on the stand that, Oh, they wouldn't take any diagnostic imaging studies of her because she didn't have the money to pay.

The doctor contradicted plaintiff's testimony. The doctor doesn't have an interest in this case. Plaintiff does. She does. Doctor does not. He said, Of course we would have examined her if I felt based on my physical examination that there was a need to do an X-ray, if there was a fracture. Okay. Or if there was a need to do an MRI or any imaging study they would have done it regardless of the ability to pay.

So that was not -- and this is Mr. Roberts that brought it up about his own client. So his client is not being truthful about this particular situation about, oh, they wouldn't take films of me at the hospital so I had to go out and I had to hire Glen Lerner because the representative for Jared Awerbach wouldn't refer a medical doctor to me. We know that's false too because she spoke to that

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representative for Jared Awerbach the day after she left the hospital, and it was the representative, we know -this is Ms. Garcia being deceptive, deceptive because she spoke to the representative twice. We know that the representative -- representative had asked Ms. Garcia, How are you feeling? She didn't tell you that, did she? I had to ask her on cross-examination. She didn't even remember the so-called conversation even though it was recorded.

And then are you going to follow-up with medical doctors? I don't remember that and then she read it. And that's what was in the transcript. That was the conversation that took place the day after she left the ER. And what did she say? Well, I don't really know. If I do, you know, I'll let you know or whatever. But she was -- she did not inquire. She did not ask on January 6th the day after MountainView Hospital, she did not ask the representative to get her treatment. She wasn't looking for treatment. It was only on January 11th, and that's when the representative offered to give her, for pain medications if that's -when she left MountainView she was prescribed medication -- that's it.

So, yes, I submit that Ms. Garcia has an interest in this litigation, and I'll be open about it.

She has a financial interest. She has a \$13 million financial -- \$16 million financial interest in this litigation. She has a huge interest in this litigation. Does that affect her credibility? You determine for yourselves because that's just one inconsistency from Ms. Garcia, but there's a number of them.

We do question --
MR. ROBERTS: Your Honor, I object to the argument. Mischaracterizes the law. Seeks jury nullification. The Oregon case I cited earlier.

THE COURT: Come on up for a minute. (A discussion was held at the bench, not reported.)

MR. MAZZEO: Thank you, Your Honor. So let me restate that ladies and gentlemen. So, plaintiff, Ms. Garcia has a $\$ 13$ million interest in the compensatory state of this trial, and then she's also asking, as you know, for another $\$ 3$ million for punitive damages. So what were her injuries, sprain and strain. She was diagnosed by the doctor at MountainView.

He didn't have to do films. Contrary to what Ms. Garcia said, they wouldn't do films of her because she didn't have the money. She had -- she was diagnosed with sprain/strain. The extremities were atraumatic.

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No lower extremity edema. No motory sensory deficit. Well, this is key. I mean, if she had an injury -- an acute injury to the spondylolisthesis, then as the doctor said, as Dr. Poindexter and Dr. Klein told you, there would be motor and sensory deficit. There was none three days after the accident.

Dr. Gulitz then on January 12th did a physical examination. Also diagnosed her with a sprain/strain of the cervical, lumbar, and thoracic -- cervical, thoracic, and lumbosacral spine.

Ladies and gentlemen, this is the accident, as you know, that Ms. Garcia sustained sprains and strains from. That's her car, and that's the vehicle where the impact occurred to the side.

And what I want to go over with you -- and I did this in my opening statement. But I'm going to focus on just two of these boxes in this medical intervention flowchart. So we have this flowchart and we have the two boxes I want to point to primarily. The first box over on the left. The complaints and history, which is subjective, and then radiographic or radio-diagnostic tests which is diagnostic. So the subjective is what is reported by Ms. Garcia. We know that. And so she reported. She felt fine. Pain free after the accident. No head injury. No loss of

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consciousness. Symptoms started on $1 / 5$ of 2011. Neck pain, sacrale low back pain, headache. History of depression, anxiety, antidepressants.

And then the objective. So that's all subjective. Then we go to the objective. This is what's key because, you know, the whole issue in contention in this case is whether the subjective complaints of pain are supported by objective medical evidence. We didn't hear a lot about that in Mr. Roberts' closing. He spent about an hour and a half, almost two hours with you in closing argument and very little was spent on the doctors, on the medical evidence in this case.

So if we look at the lumbar spine. And this is in agreement with all the doctors and radiologists. We have disk desiccation, bulges, Grade 2 spondylolisthesis. No evidence of nerve root impingement. No evidence of pressure on any exiting nerve. No acute trauma or trauma -- no evidence of acute trauma -- acute injury or trauma to the lumbar spine.

Now, who's in agreement with this? We know Dr. Cash, Dr. Gross, Dr. Kidwell, Dr. Lemper, Dr. Klein, Dr. Poindexter, all the doctors are in agreement that there's no evidence of any acute injury to this lumbar
spine which involves the spondylolisthesis. It's a fact.

And then the MRI of the lumbar spine on $11 / 19$. Now this is interesting because the very first finding finds new posterior bulges at three levels for the first time. Age-related changes. L1-2, L2-3, and L3-4. These are all new findings. Not from an acute trauma. Not from the subject accident. They're age-related changes.

Then we also have the preexisting.
Preexisting degenerative age-related changes that are showed on the film as well. No evidence of nerve root impingement. No evidence of pressure on exiting nerve. No acute injury or trauma to the lumbar spine.

Now what's the significance of these MRIs? Well, this is objective evidence, ladies and gentlemen. And -- and what's interesting between the two, there was some -- there was some discussion of -- and dispute with regard to whether there is a progressive change of the slippage of the spondylolisthesis, and, again, it wasn't not -- it wasn't Dr. Lemper, Dr. Kidwell, Dr. Gross, or Dr. Cash that showed you these films. They're proving that she has an injury, and they're not showing you the actual structure. It was Dr. Klein, the defense expert.

And what it shows, the film on the left is

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January 26th of 2011. Film on the right is November 19th of 2012. So you have the January 2011, November 2012. And if you look at these structures, Dr. Klein went through all of these. He came down here and he discussed each one. And if you look, these are the exact same condition. There's no 30 percent slippage or change in appearance or progression. If you look at the reference points on the film on the left for the -- this is the L5. Here's the S1. This is the bottom end plate of L5, and it shows the bone spurs, condition of them. Reference points. The end of the edges anteriorly of L5 and S1. Identical with L5 and S1 20 months later. The disk has not changed. The nerve root is still in great condition. These are identical in appearance from one to another.

Yet none -- none of plaintiff's doctors or experts -- and they had five doctors in here, including Dr. Oliveri who was their expert, four treating doctors. None of them showed you any of the films to show you that the structure had changed. That there was a progression. That there was a need for any surgery to this level or that it was a pain generator.

Okay. Then Dr. Klein showed you this as well. Three films. January 2011, August 2011, and November of 2012. And he showed you -- he pointed out the nerve

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roots on each one. He showed you the -- again, the end plates, the bone spurs. He showed you the disks. It's exact same appearance from one to the next. There's no 30 percent change as suggested by Dr. Hachy who actually got his numbers wrong as Mr. Strassburg pointed out on examination.

That the -- these are identical and there's no further slippage from one to the other. And if you look at the reference points, the front and the back of each one, none of them -- you can see that there's no change, and there's three different films taken at three different times.

So objective evidence, yes, we're saying that the subjective complaints do not support the objective evidence for an acute trauma to a preexisting spondylolisthesis. That's exactly -- exactly what we are saying. That's true. We are saying that. That the -- that the objective medical evidence does not support her complaints.

But remember what her complaints are. Her complaints are not specific. She's not saying, Doctor -- Dr. Cash, Dr. Gross, Dr. Kidwell -- I sustained an injury to my L5-S1. She's saying -- it's a nonspecific complaint. I have pain in my lower back. That's what she's saying. That's number one,
subjective, and it's nonspecific.
We'll get to what the treatment protocol was -- actually, we're going to that in a minute. Why the treatment protocol and what the treatment protocol of these doctors was based on. So here you have pictures that are worth thousands of words right here. This is the evidence.

As you're sitting back there and you're listening to Mr. Roberts put up all these numbers and the pain and suffering she's gone through, Ms. Garcia who would have no reason, no medical condition that would prevent her from coming to court. But she's here for money day, she's sitting there. But for the first three and a half weeks she was here for three half days, that's what she said. Three half days as of last Wednesday. And then she was here Thursday and Friday for cross-examination. So for a total of three and a half days up until today. Three and a half days out of the more than four weeks that you all have been here every single day, and that's her interest in this litigation.

So there's no objective evidence that the spondylolisthesis ever became unstable from the motor vehicle accident. They simply did not prove it. Dr. Klein proved that it did not become unstable and

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that it wasn't the pain generator. They never proved that it was. And so you're wondering, Well, why would they keep giving her this treatment? Why didn't the doctors then make this determination that they were treating this condition that was symptomatic?

Let's finish with this. So the diagnosis, based on this medical model of care, there's no nerve root impingement. There's no medical necessity or treatment for any facet joints or nerve roots in the spine because they're fine. They never identify those as a pain generator.

So what was Ms. Garcia's treatment based on? It's based on three things. Her subjective complaints, nonspecific. Then an MRI showing a preexisting condition. So, Ms. Garcia goes to Dr. Cash and then goes to Dr. Gross.

By the way, plaintiff's counsel made a big deal that, Dr. Klein, you only saw the plaintiff once and you're rendering a decision, an opinion with regard to treatment and injuries and diagnosis.

What's interesting is that all of his doctors did the same thing. Dr. Cash, one time. January 16th of 2011. Saw her one time and made an opinion that, oh, previously asymptomatic spondylolisthesis became symptomatic as a result of the accident, notwithstanding

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his flexion and extension x-rays that said, no, it did not.

Notwithstanding the MRIs that said there's nothing wrong with nerve roots. No impingement, no compression of any nerve root. They didn't prove their case. It's as simple as that. I don't have to stand up here for three hours and convince you. They didn't prove their case. The evidence is right here.

No doctor -- no doctor ever confirmed -- her treating doctor -- Lemper, Kidwell, Cash, and Gross -ever confirmed that the spondylolisthesis, L4-L5 or L5-S1, was the source of pain.

We'll get to the injections in a little bit. They were not confirmatory. They were not diagnostic. They all admitted that the spondylolisthesis preexisted the motor vehicle accident. They agreed that the MRI findings showed only preexisting -- this is all of the plaintiff's doctors. That it showed preexisting and degenerative conditions. And that there's no objective evidence of an unstable, pars defect, spondylolisthesis, or a never root impingement.

The problem is that these doctors -Dr. Lemper, Kidwell, Cash, and Gross -- all made a false assumption this pain was coming from this L5-S1, the slipped vertebrae.

Now, it's interesting -- what Kidwell told us was very interesting, very enlightening. I mean, I wasn't surprised. I think it would be enlightening for you jurors because what he said was whenever he gets a medical-legal claim, a patient with a medical-legal claim. He said he always -- what did he say from the stand? He always makes a causation determination. Based on what? Based on the patient telling me, subjective self-report, telling me she was in an accident. He or she, whoever it is. The plaintiff said he was in an accident. He puts that finding in each and every report that he drafts. He doesn't make an independent causation determination. He just got a subjective self-report from the patient and, oh, it's a third party that you're alleging the claim against. Okay. It stems from that. All the treatment I render stems from that. That's not scientific.

And the other doctors I submit to you did the same thing.

So, ladies and gentlemen, her excessive treatment. Another area we have to touch upon and you should discuss in deliberation. Ms. Garcia's excessive treatment is not proof of the source of pain or a necessity, and so I'm sitting back there. I'm listening to the evidence as it comes in. And they parade these

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doctors that come in here that all treated her, and -and I'm wondering, Well, wow, based on the -- based on the numbers, it must sound pretty impressive. They have these doctors that are on the stand. They have these credentials.

They've treated her. They've treated her on a medical lien. And once they treat her on a medical lien, they have an instant interest in the outcome of the litigation. Notwithstanding the fact that Dr. Kidwell had a lien and then sold it immediately after his treatment, but once he treated her, once he gave that treatment, he had an interest in the outcome. Notwithstanding that.

So it must be pretty impressive for these doctors to come in here, testify, are they all wrong? They all treated her the same way but none of them have identified the pain generator and they've been flipping back and forth with these injections, with the fusion, with the trial spinal cord stimulator, and we'll go through that in a few minutes.

Dr. Cash. Dr. Cash, okay, first doctor, what did he do? He did a physical examination, flexion and extension, and he said something that was interesting that was preposterous at the same time. He said that Ms. Garcia's flexion was 20 percent. Basically upright
position from the waist doing the lumbar, 20 percent, 20 degrees, I think, and then backwards, 10 degrees. If that was her limitation, her range of motion for the lumbar spine, she would not be able to engage in all these activities of daily living including work.

I know on the stand she said she had a difficult time. But the fact of the matter is she was working full time for three years and three months after the accident. She didn't even miss the day after the accident. She didn't miss the day after she left the hospital on January 5th. She went to work the next day. Tuesday, Wednesday. So she went Thursday, Friday, Saturday, Sunday, Monday. She kept going for three-and-a-half years.

So if what Dr. Cash says -- he said he eyeballed it. He didn't use -- he didn't use a measurement device. But the fact of the matter is that's not very believable because she wouldn't be able to do anything basically. She wouldn't be able to tie her shoes, get dressed, shower, do her hair, cook, clean, anything. But the fact of the matter is she was working at full-duty capacity after this accident and at the time she was seeing Dr. Cash.

Now, Dr. Lemper in all his treatment notes, you may remember on the ELmo, I put up his records and
all the records, one after another, showed radiating pain. Radiating pain. Radiating pain. He didn't refer to it as radicular pain. We know from the testimony that radicular pain and radiating pain are two different things. Radiculopathy is pressure, compression on the nerve root resulting in symptoms of pain as a result. Radiating pain spreads out from a central area.

Well, he doesn't refer to it as radicular pain. He keeps referring to it as radiating pain. There's a distinction. Dr. Lemper and Kidwell gave multiple diagnostic injections to the plaintiff. But not one of them -- and I asked them: Did you identify the pain generator from this injection? Dr. Lemper 8/30 of 2011, nope, didn't identify. He did multiple levels. He's not saying that she got some relief.

But he admitted -- he admitted -- Dr. Oliveri admitted as well -- that from these diagnostic procedures with a local anesthetic that you're going to get some relief immediately after the procedure. You're going to get anesthetic. It's going to numb nerves. It's automatic you're going to get relief whether or not that's a pain generator. But for none of them, none of these diagnostic procedures, and you can recall back you can ask for, you know, the record, ask yourselves, but none of these diagnostic procedures gave her the

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anticipated or expected relief that these doctors thought she should have gotten because you're injecting a steroid that's going to be in there for several weeks. Never got the relief from that. She got temporary one to two day's relief. Immediate relief right after the procedure, but not the anticipated extent of relief.

So, Dr. Lemper, selected nerve root block on 8/30 of 2011. He said, Well, it didn't give the anticipated relief, but it was still diagnostic. You know, she told me after -- right after the procedure she got relief.

Well, if it was diagnostic, then why two weeks later on 9/14/2011 is he doing the facet block injection? According to him he already identified the pain generator. But we know that's not true because he didn't.

Now he's doing something different. Now he's injecting the facet blocks on 9/14 of 2011. And that's not diagnostic either. And then Kidwell a year later, 9/27/2012, did a selective nerve root block. One to two days of relief. If it was a true pain generator, number one, should have relief for three to four weeks. So that's not a true pain generator, and the relief can be associated with a local anesthetic that could be relieved based on placebo effect.

When a patient is seeking out this much treatment and is pursuing this much treatment, there's a certain anticipation that there's going to be relief automatically from any procedure that they do. So there's a certain degree of placebo effect that she gets. Again, he still hasn't identified the pain generator.

And then Dr. Gross, after the surgery, says to Dr. Kidwell, Well, why don't you inject -- this is 12/1/2014 -- the sacroiliac joint and the facet joint at L3-4, and while you're with it, do the hardware blocks. This is after the surgery. Well, he's doing these hardware blocks. Why? Because he suspects a pain generator. It's still not identified, ladies and gentlemen.

Why would Dr. Kidwell continue to give diagnostic injections if Lemper already diagnosed the pain generator on $8 / 30$ or $9 / 14$ of 2011 . None of them have given her long-lasting relief. And that's because they don't know the source of her continuing pain complaints.

Now, Dr. Gross testified he expects a successful fusion surgery to yield 70 to 80 percent decrease in pain symptoms. Well, we know that didn't happen. So she's getting these procedures, she's not
getting the relief because they're not identifying the pain generator.

Gross' surgery was not indicated, and it was not beneficial. We know it wasn't indicated from the start because they're treating her subjective complaints and an MRI that shows no problem with the nerve roots. That's the problem. This treatment is not related to the accident in question. Dr. Gross admitted that smoking, poor conditioning can all contribute to a person's low back pain.

Now, Dr. Kidwell, after he does the radiofrequency ablation on 9/24/15, remember, he did that at two levels -- actually, three. The L3-4, L4-5, and the sacroiliac joint. And then on 11/1, Mr. Roberts says, Well, his PA wrote down flare. You know, it's the usual pain. So it wasn't Dr. Kidwell that did that. It was that was his PA, Jenanwin [phonetic]. So, you know, what she wrote. You know what, we can explain that away. No, we can't explain that away because the specific statement says, Flare-up in usual pain at last office visit. It doesn't say, I had the same pain as I've had for the first time at the last office visit. It says, Flare-up in usual pain at last office visit. That can only refer to usual and regular pain that she's having predating this radiofrequency ablation.

You can't have pain stemming from a radiofrequency ablation if you actually burned the nerve roots at the source of the pain. If the telephone cord is cut, it's not going to send a signal. So there's something wrong with this, and to explain this and the other inconsistencies in his testimony, he sits down with plaintiff's counsel for 3 hours and 40 minutes. He's a treating physician, what's there to explain? He has to explain these inconsistencies.

Then what does Dr. Kidwell tell us, Well -regarding the inconsistencies of Ms. Garcia's reporting of the onset of pain. Well, you know, that's not really inconsistent. I wouldn't call that inconsistent. That's just -- he wanted to explain it. Well, it is inconsistent. When on the one hand she says -- and the self-reporting of a patient close to the time of the event is much more accurate than later on after they've filed a lawsuit and it's in contemplation of litigation where they have a reason exaggerate and embellish. She tells MountainView pain started three days afterwards, no question about it.

And then what does she tell -- what does he tell Dr. Gross on May 25th? She was dizzy, dazed, confused, nauseated, and in shock. Really? Dr. Kidwell is going to still be credible and say that that's not

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inconsistent. There's no -- there's no consistency in it. That's a totally different report of the onset of pain and her constellation of symptoms.

So, why does Ms. Garcia continue to treat for five years, ladies and gentlemen? Well, all statements regarding her injuries and the pain -- and we're not saying -- Mr. Roberts is correct. She was -- she did sustain an injury in this case. That's not in dispute. The nature and extent of the injury, the location of the injury is in dispute. Because we're saying consistent with MountainView, Dr. Gulitz. Primary Care Consultants. We're saying, Yes, sprain and strain, muscular ligamentous tissues that she did injure.

Her routine visits to Dr. Lemper and Kidwell. What were they for? Do you remember? I mean, I'll go over that with you. I'm going to show you. Her routine visits. All these visits to Dr. Lemper and Kidwell. These pain medicine doctors. Pain medicine is to relieve pain and to give pain meds. And it's to give pain meds notwithstanding the fact that the diagnostic procedures do not treat the pain. They're not therapeutic for her. Their injections are not therapeutic because they keep on giving these injections.

And then after the surgery -- I apologize it's

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kind of shifted off the screen there. But after the surgery at the end of 2012 on top. She's still getting all these pain meds, ladies and gentlemen. Then in 2014 and in 2015, she's still on these pain meds for five years.

If these procedures really worked, if they were really appropriate for her to reduce her pain, why does she need -- and Dr. Gross testified the reason for the surgery was to give her enough relief from her pain symptoms so that she could get off the pain medicine, so she wouldn't have to use alternative type of treatment. Well, we know that didn't happen. Because she's still on these pain meds as we sit here today.

None of the interventional treatments resolved her symptoms, and she continues to treat with these injections, the trial spinal cord stimulator. The RFAs. The life -- now a life care plan that needs treatment for the rest of her life.

So why? Dr. Klein put it simply to you and so did Dr. Poindexter. As a result of poor conditioning. As a result of her continued activities of daily living, age-related changes as we saw in the November 2012 MRI. She does have an interest, and that's a fact in this case. She has an interest in this litigation.

However, there's no objective medical evidence

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that she injured her lumbar spine. The objective medical evidence proves that she did not injure her lumbar spine. But yet they're giving her treatment and saying it's related when in fact it's not related to the accident.

Why is she having post-surgical pain? Well, a surgery, as you've heard from Dr. Klein, was only indicated for an unstable spondylolisthesis, and she did not obtain the anticipated benefit of 80 percent relief from it. The films suggests that she may have pseudarthrosis, a nonunion of bone, or an insecure pedicle screw. That's what is suggested.

Dr. Gross' artistic rendition does not match up to this. This is clearly something that, as Dr. Klein pointed out, is not a stable construct, and it was indicated on this film on the right where there's a halo where there may be some loosening of the screw, which may be a source of the pain which may be why Dr. Gross said, Hey, let's inject the hardware to Dr. Kidwell. That's why he wanted to inject it.

All of plaintiff's doctors have a financial interest in this medical-legal claim. Why is that important? It's important, ladies and gentlemen, because if the doctors figured out -- by the way, if the doctors figured out her pain complaints and identified

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her pain generators, then why would she need these continual diagnostic injections to continue to identify a pain generator because they never did. If the surgery was successful, why would she need the pain meds, the injections, and spinal cord stimulator and millions of dollars in a life care plan.

Now, we know that Doctors Cash, Gross, Lemper and Kidwell all of them have a professional relationship with plaintiff's attorney in this case, the law firm, Glen Lerner's office.

What's interesting is Dr. Gross was licensed in March of 2011. He's from California. He used to work at Pacific Hospital. Licensed here in Nevada in March of 2011. He was getting this referral in May of 2011, and I asked him about that, about how he marketed himself to plaintiff's counsel. He said, oh, he didn't. He just talked -- he kind of evaded and avoided that topic. He didn't want to talk about it.

MR. ROBERTS: Objection. Move to strike. MR. MAZZEO: Based on my recollection of the evidence.

THE COURT: I don't know that you can say he evaded. I don't know. I'm going to -- I'm going to grant the objection. Just rephrase it.

MR. MAZZEO: Sure.

Dr. Gross was not inclined to want to discuss his -- how he developed that relationship with Glen Lerner's office in this town.

Dr. Lemper. I asked Dr. Lemper about this, how many clients of Glen Lerner's office do you treat?

MR. STRASSBURG: He said, well, they may have referred one of their employees or a couple of their employees. I said, I didn't ask you that. How many clients do you treat from Glen Lerner's office? Have you treated. What's your pro -- he said, Oh, I don't have one. He kept denying it and denying it. And then he finally admitted that he's treated anywhere from 200 to 500 clients from Glen Lerner's office.

Now, on direct examination Mr. Silver tongue, I want to help out everybody. But on cross-examination he was not honest with you, ladies and gentlemen, and that's a fact to consider as well.

MR. ROBERTS: Objection. Move to strike.
THE COURT: Sustain. It will be stricken.
MR. MAZZEO: Dr. Lemper was not candid with you, ladies and gentlemen, and that's what I submit the testimony shows in this case.

Dr. Kidwell testified he has had upwards of 150 clients from Glen Lerner's office. Again, the medical liens give the doctors an immediate interest in

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the litigation at the time of the services provided.
Dr. Oliveri, he was an expert. He did a life care plan, and he had a financially profitable relationship with Glen Lerner's office doing medical evaluations and life care plans. What's interesting with Dr. Oliveri is that he said he never did a life care plan for a private-paid patient. Only on medical-legal claims. Which is interesting because patients -- he didn't say patients without medical-legal claims don't need life care plans. He just doesn't do it for them. He's not going to get paid for it, ladies and gentlemen. He does it on a case where he can be an expert.

Dr. Cash and Gross. As I said, they met the plaintiff one time and claimed that she had an injury to the spondylolisthesis. Although there was no objective evidence of it. Just because she got all this treatment doesn't mean it was necessary or related to this accident.

Ms. Garcia and the doctors want Jared and Andrea to pay for a preexisting condition that was not made. That did not sustain an acute or traumatic injury and that is not -- that's not justified. That's not part of the full and fair compensation if it's a preexisting condition. That was not. That did not

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develop an acute injury or sustain any injury to it. It's still just a preexisting condition that is stable.

Now, also in this case Ms. Garcia did not prove damages for household services or loss of enjoyment of life. How do we know that? Well, we had Dr. Smith testify, ladies and gentlemen, that -- and basically his entire testimony and his opinion was based on the self-report as far as Ms. Garcia's diminishment in the loss of household services as well as the loss of enjoyment of life.

What Dr. Smith admitted on the stand was that he never used any objective measurement for a baseline for anything. He never established a baseline for what her household services were before. Some general comments from her for what she did. But he never established the baseline with any objective criteria before or diminishment afterwards.

He never established a baseline for her enjoyment of life. He just had his assistant basically ask her, Well, what was your loss of enjoyment of life? And she just gave him a number, a random arbitrary number. That's not proof in this case.

Ms. Garcia even said on the stand, when I asked her specific questions about how often she would do $\mathrm{X}, \mathrm{Y}$, and Z before. Well, I wasn't asked that.

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Well, you weren't because it was your attorney that asked you that on direct examination, and you're right, he did not ask you that. He didn't establish that. She didn't establish that on her direct examination. She didn't prove it.

Her testimony is subjective. Not just
subjective but it's self-serving because of her interest in this case. She hasn't proven that she's had a loss of household services. We've had inconsistencies in her testimony and in Emily's testimony.

She wasn't there so much for her kids after the accident. Well, she wasn't there for her kids before the accident, I'll submit to you. She was working Saturday and Sunday and her kids were in school during the week. So there's a little disconnect there between what her daughter was saying and what the actual evidence in this case shows and proves.

Now another question during deliberation, ladies and gentlemen -- and I appreciate your time. I know it's late in the day. I know it's been an hour. We're into the fifth week. And I just ask you to stay with me for a little while longer. I know it can be distracting. You can lose focus. Because you've heard, you know, closing argument for two hours earlier. You've been waiting around. So I just appreciate your

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time and attention for a little while longer.
These are serious claims that Ms. Garcia has brought against Andrea Awerbach and Jared Awerbach where she's seeking compensation for -- and she's only entitled to compensation for the injuries sustained from this case. Not for unnecessary treatment or symptoms that were caused from unnecessary treatment. That's what she is not entitled to.

And, yes, we're saying that the fusion surgery was not necessary. Dr. Klein and Dr. Poindexter said she's not entitled to that. She's cut off. She's not entitled to any treatment after that first injection by Dr. Lemper on August 30th of 2011.

She's requesting big money. You saw the charts that plaintiff's counsel put in front of you. For her pain, her treatment, her injuries, five years, future pain and suffering. And yet her interest in this case -- well, she showed you, as I said a few minutes ago, for the first three and a half weeks she's here for three half days and for now a total -- including today now a total four and a half days.

MR. ROBERTS: Objection. Irrelevant.
THE COURT: Overruled.
MR. MAZZEO: There is no medical reason why Ms. Garcia couldn't be here. She has a significant

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interest in this case especially since she brought this claim against Andrea and Jared Awerbach who made every effort to be here as much as possible.

She has no problem sitting though. We saw her on the stand quite often, and she got up during the side bar conferences. Feigning, I submit to you and this is my argument. That she was feigning this grunting and groning. That it was not realistic. It was not genuine. It was all for effect and she was playing up to you, ladies and gentlemen.

Now, she wants basically for you to make her rich with these numbers that plaintiff's counsel gave to you, 13-point-something million. 13-something million in compensatory damages.

And then she told you on the stand, you know, when she was testifying some two years ago when she was talking about giving some to her daughter Emily. Well, if she got $\$ 300,000$ she was going to share that with her daughter, Emily.

We're here today at trial because the defendants are contesting the nature and extent of the injuries she claims she sustained from this accident. Because we're disputing that she sustained any injuries to her lumbar spine. Her request for this award, ladies and gentlemen, for these numbers that Mr. Roberts put up

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is random, arbitrary, capricious, it's unconscionable, and it's baseless. There's no basis for the numbers that they're asking for.

You know what's interesting? You know, I don't know if you all have seen the Wizard of Oz. This is the wizard, he made all sorts of claims. He was the powerful and all-mighty wizard. He just didn't want you to look behind the curtain. Because behind the curtain is the objective evidence that the plaintiff's counsel has not shown you, the plaintiff has not shown you and hasn't shown you in this case. The objective evidence behind the curtain to show you that her claims are not supported by objective evidence in this case, and that's what the evidence will show in this case, ladies and gentlemen.

There are inconsistencies in her reporting, and you have to -- we have to consider that. Not ignore it. She has -- she's making these claims, and yet her claims and her subjective self-statements are not consistent, as we know, with the statement she made after the accident as to when the pain started and the nature and extent of the symptoms, and they just developed and -- and increased and were -- increased in size that were not consistent with her initial complaints.

Ladies and gentlemen, she continued with her functionality after this accident, her work, and by the way, you heard about her separating from Aliante, her separating from Fiesta Rancho. It had nothing to do -and this is in evidence. You know this. Nothing to do with her physical condition. Nothing whatsoever.

We even had Jonathan Davis testify from Fiesta Rancho testify last week who admitted that. It had nothing to do with her physical condition. Travel. She talks about travel. Shopping, Circus. Well, she was able to do these things beforehand, and guess what, she was able to do these things after the accident.

Working Saturdays and Sundays before. By the way, three days -- three months, within three months after the accident, she drove to Texas post-fusion.

She moved to a bigger home. If she had a decrease in functionality, well, moving to a bigger home would mean she had more tasks and more responsibility. It would be more time consuming. She didn't talk about that. I did on cross, but she didn't talk about -- she stayed away from that topic on direct examination.

The Facebook photos very, very telling of her post-accident functionality and quality of life. You saw these photos. They were put into evidence last week. So, ladies and gentlemen, you saw these photos

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and they're very telling, very representative.
Plaintiff's counsel wants you to believe that these photos, they just depict 17 days. That's it. Seventeen days out of -- out of 1,800 days in the last -- and it's actually four years. It's not in 2015. So it's over the last scope of four years. Nothing inappropriate. This is a public Facebook account. Nothing inappropriate in looking at the photos.

In light of the claim that Ms. Garcia is making, the defense has the right to contest the nature and scope of her injuries, but her counsel is implying that there's something wrong with that. There's nothing wrong with that. It's totally appropriate.

And so here you see her in various positions that -- when she posted these. She identified when they were taken in relation to when they were posted, relatively, and so you have all of these that are showing. She is out at the racetrack after the accident. She's with her kids. So she's doing these things with her family, with her kids, and she's still enjoying life.

If you look at this one from six months after the surgery, and that's where she's at -- that's where she's at the ETA Lounge at Aliante Casino, and what's significant about that for someone who is saying that
she has, you know, very little flexibility in the lumbar spine and she can't do her -- you know, decreased functionality, and notwithstanding that she has pain in performing her duties at work.

Her hands are behind her back. She testified to that. The objective is to bend over. This requires some agility. To bend over, grab the shot glass in her mouth, kick the head back. So she's doing -- in a whipping-type motion. It didn't work for her, but that was the idea. That's what that shows. And we have action pictures of several of these.

Well, she's having this fun behind the scenes, and we're wrong for showing this picture where she tells you, I'm having all this pain and I have all these limitations I'm going to have for the rest of my life and in 20 years I'm going to have to have another surgery. That's speculation. It's also not related to this accident. She's at the beach. She's outside the water. She's engaging -- she's engaged in these activities.

And if you think that Mr. Roberts is suggesting, Well, she's in pain in all of these. Oh, she's smiling but she's in pain. There's no evidence she's in pain. She's not wincing. She's not crying in any of these. You can see from your --

MR. ROBERTS: Objection.
THE COURT: Sustained. We already talked about this.

MR. MAZZEO: Ladies and gentlemen, you can see for yourselves that -- how she appeared after the accident in 2011, 2012, 2013 after the surgery.

Ladies and gentlemen, I submit that she did exaggerate because the evidence is there in the record, the onset of symptoms, the nature of her activities of daily living before and after the accident. Her work limitations. That is not credible and you're allowed to consider that. There's a jury instruction that allows you to consider that, ladies and gentlemen.

You're allowed to consider the credibility of any witness. Ladies and gentlemen, that's in one of the instructions that's given to you, which is relevant in the case. And it's not just of Ms. Garcia. It's of any witness in the case. You're allowed to consider that.

Now, let's -- let's continue. Let's talk about Andrea Awerbach for a few minutes. We know that she did not give Jared Awerbach permission to use the car on the day of the accident. How do we know that? Well, she testified to that. She testified as to when she found out. When she learned about the accident. She learned when she got the call from the police

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officer.

They're required to prove permissive, implied or express permissive use on the day of the accident. Permissive use to use the car on the day of the accident, and --

MR. ROBERTS: Objection. Misstates law. THE COURT: Sustained. MR. MAZZEO: Withdrawn. There's a presumption. That's correct. Mr. Roberts was correct. There's a presumption of permissive against Andrea Awerbach. There's a presumption. And to rebut that presumption. We had Andrea Awerbach testify, and including Jared Awerbach, you heard testimony from him in way of a transcript. And we rebutted that presumption when Andrea Awerbach told you the circumstances of where she was on the day of the incident. She gave him keys earlier to get something out of the car. Not to drive it.

As a matter of fact, Jared Awerbach asked to drive it, and she said no. And then she went away. She went to shower or something, in her restroom or bedroom.

MR. ROBERTS: Objection. Mischaracterizes the evidence. Never came out.

THE COURT: I don't recall what she said she did so I can't. Sustained. Jury will have to remember

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MR. MAZZEO: So is that overruled for now?
THE COURT: Yeah, it's overruled for now.
MR. MAZZEO: Thank you. May I have the ELmo?
So this is testimony that you've heard. It's been entered into the record, and this is testimony from Jared. So it says -- and let me increase that size, ladies and gentlemen. Mr. Roberts gave you his take on the evidence a few minutes ago.

So, question to Jared during trial:
"Q And on the day of the
accident your mom didn't actually
tell you, no, you couldn't take the
car; isn't that correct?
"A She did.
"Q She did?
"A Yes, sir.
"Q I thought you said she was
in the shower?
"A She was.
"Q Did you ask her?
"A We asked. We had. I had asked
her to take us to the location. She
said no. I said, Can I take myself.
She said no.
"Q Okay.
"A Can I take -- the mother of my children take me and she said no.

She said no. There was no implied permission. There's no express permission. The only thing that was expressed was that she said no. She didn't say he could take the car. So rebutting the presumption of permissive use, it's rebutted.

MR. ROBERTS: Objection. Hearsay to the extent he's offering to the truth.

THE COURT: Overruled.
MR. MAZZEO: Ladies and gentlemen, one of the jury instructions -- one of the jury instructions that you will see is -- and the question -- it's Jury Instruction Number 30. It's this one. Let me decrease it. One of the things that you have to find in order to establish a claim of negligent entrustment is that Andrea knowingly entrusted her vehicle. Knowingly entrusted -- that's one of the elements -- to an inexperienced and incompetent person. But you have to find knowingly entrusted. She did not knowingly entrust the vehicle. We proved that she did not do that. So there was no permissive use. She did not knowingly entrust the vehicle.

Now, the plaintiff's counsel, Mr. Roberts,

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during his closing argument suggested, well, there's an instruction that says that with the request for admission -- you saw that yesterday when Andrea was on the stand. Request for admission where it's deemed conclusively proved, the request for omission about Andrea saying -- that was filed by her attorney then, her then attorney. Saying that Andrea gave Jared permission to use the car. So let's look at that instruction. I don't know if Mr. Roberts showed this to you but I will.

You will regard it as being conclusively proved -- I'm sorry. In this case, as permitted by law, plaintiff served on Defendant Andrea Awerbach a written request for admission of the truth of certain matters of fact, and that was with regard to use of the vehicle, the use, permission to use the vehicle. You remember that from yesterday.

And you will regard that as being conclusively proved, all matters of fact that were expressly admitted or which Andrea failed to deny. Or which Andrea failed to deny.

So that takes us to Jury Instruction
Number 13, the interrogatory. In the interrogatory -MR. ROBERTS: Objection. Misstates Rule 36. THE COURT: We've discussed this already. I'm
going to allow it. Overrule.
MR. MAZZEO: Thank you, Judge.
So the interrogatory that was filed that Andrea signed, verification, she signed that. She specifically -- it was sent -- it was dated two weeks later. Two weeks after the requests for admissions signed by her counsel. It was dated two weeks later. She signed the verification. She told you on the stand yesterday. She expressly stated that she did not give Jared permission to use the car. Your request for admission, she did deny it.

Now we move on to oppression. Let's talk about oppression of malice, ladies and gentlemen. And you're going to get this instruction. Instruction Number 38. This instruction 38. Let's look at it. Let's look at whether the plaintiff proved this instruction -- and, by the way, at the very top. Remember what you -- remember the standard here. Clear and convincing evidence. Not preponderance of the evidence but clear and convincing evidence. That's what the plaintiff has to prove in order to succeed and avail on the punitive damages against Andrea.

So what does he have to show? Oppression. And we're going to define what it means. Despicable conduct. Subjects plaintiff to cruel and unjust

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hardship with conscious disregard. So despicable conduct and conscious disregard. We have two, oppression or malice. And then they define despicable conduct with conscious disregard. Conduct that is so vile, base or contemptible it would be looked down upon and despised by decent ordinary people. All the troubles and tribulations she's had with her son in the past. Hiding keys, hiding her wallet, hiding things because her son was a bit of a -- you know, he was a troubled son. They had a troubled relationship. She had to hide this stuff from him. That's what they're contending is despicable conduct because he took the keys to her car the day of the accident when she first learned about the accident when the police officer called her and told her that her son is being arrested and she asked -- for a DUI.

She said, What is it? Drugs or -- marijuana or alcohol. That's oppression. That's despicable conduct. That's what they're seeking punitive damages from you all from. That's outrageous. That they're actually pursuing this. And then that's just one phrase. They have to prove both conscious disregard and despicable conduct for both oppression and malice, either one, but both of these terms aren't both of these definitions, whether they're seeking it by oppression or
malice.
Well, malice, it's either intention. Intended intent to injure the plaintiff or despicable conduct engaged with a conscious disregard. So you have it in both oppression and malice.

So conscious disregard. Knowledge of the probable harmful consequences of her wrongful act. She's in the bathroom. She's in the shower. She doesn't know he took the keys. She gets a call afterwards from a police officer and they're saying she had a conscious disregard. That's outrageous that they're actually insinuating and pursuing this claim against her.

Probable harmful consequences of a wrongful act, willful and deliberate failure to avoid. Willful and deliberate. Her willful and deliberate failure. Right underneath intentional conduct. Willful and deliberate failure to avoid these consequences. The consequences of Jared taking the car and getting into an accident. Willful and deliberate. There's absolutely no evidence, any evidence in this case of any willful and deliberate failure to avoid the consequences.

And yet Ms. Garcia has the audacity to come to court and pursue a claim for punitive damages against my

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client. That's outrageous. They didn't prove it, ladies and gentlemen. They did not prove punitive damages against my client. That she engaged in conduct so vile biased and contemptible that it's despised by ordinary people. Where's the evidence?

They showed you a board with all these numbers on it. Hey, full and fair compensation. Let's give her this money, and let's give her this. You can give her more. You can go up to 10 times. Really? Based on conscious disregard and willful and deliberate.

It's not about -- Judge, may we switch back to my PowerPoint, please?

MR. ROBERTS: I'm going to object. Misstates my argument. I was not allowed to argue an amount to Ms. Awerbach.

THE COURT: Sustained.
MR. MAZZEO: Okay. Ladies and gentlemen, do not consider punitive damages against her. There is no oppression or malice. There's no conscious disregard or despicable conduct that requires willful and deliberate failure. We don't have that. Conduct that is so vile, based or contemptible. We don't have that. There's just no evidence in this case about -- that with regard to Jared's use of the car, taking it without permission on the day of the accident when both he and Andrea

Awerbach both say that he didn't have permission. She didn't know about it until after this. The claim is not about punishing Andrea. She's not entitled to punitive damages. Period.

And then Jared Awerbach. Well, by the way -and you'll see this. It's clear and convincing evidence. Judge, if I may I switch back. Thank you, Judge.

So this is Jury Instruction 39, and it just tells you about clear and convincing evidence, the standard that you have to meet in order to find it. It's more than preponderance of the evidence. It's a firm belief or conviction as to the allegation sought to be established. More than mere preponderance. Proof which persuades the jury the truth of the contentions is highly likely, and they haven't met that burden or any burden in this case with regard to even finding punitive damages against Andrea. So on that question on the jury verdict form, says if you want to consider it, I ask you to just put no, unless there's actually clear and convincing evidence that they're entitled to it, of oppression and malice and conscious disregard, which there isn't any.

Now, with respect to Jared Awerbach. Jared, as you know, you've heard it, and I'm not going to go
over the whole thing with you. You heard Andrea yesterday. You heard Jared for a little bit on Friday. She struggled with Jared with her son, she struggled with him for many years in his formative years as a teenager. He was addicted to marijuana. He was manipulative. He lied. He stole. He was a troubled kid. He certainly was. He just had a bad adolescence and this addiction was certainly a problem.

The reprehensibility of his conduct, though, with respect to when we look at the reprehensibility of the conduct, this same motor vehicle accident -- we all heard about the circumstances surrounding the accident. The same motor vehicle accident, Ms. Garcia testified she was coming down southbound on Rainbow, there was a bus or truck to her right, and after that was the private drive that Jared pulled out of. It's dark out. It's night. It's January 2nd. It's dark at that time of day, that time of year.

And so that accident, I submit to you, could have happened whether a person is impaired and whether a person is not impaired. So when we look at the reprehensibility of his conduct, you have to look at the factors whether this accident could have happened, regardless whether Jared was found to be impaired. Because we all know that accidents happen regardless of

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impairment or not.
And we're going to look at the instruction, notwithstanding Mr. Strassburg, Jared's counsel might go through this with you anyway. This Instruction Number 41, and plaintiff's counsel, Mr. Roberts, showed this to you during his closing argument, so I want to highlight a few things. Your word --

MR. ROBERTS: Your Honor, may we approach? THE COURT: Sure.
(A discussion was held at the bench, not reported.)

THE COURT: Objection sustained. Let's move on.

MR. MAZZEO: All right, Judge. Judge, could we switch back to the computer? I like having the multimedia assistant in the courtroom.

THE COURT: Glad I could help. MR. MAZZEO: All right, ladies and gentlemen. So here we have. Give me a second -- oh, by the way -well, I'll get back to that jury instruction. So medical specials comparison, and I showed you this, ladies and gentlemen, in the opening statement and I'm showing it to you again because the defendant does have a difference in contesting the injuries, the damages, the treatment that plaintiff claims is related to this

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accident. We're saying, no, most of it is not related to this accident. And so I showed you their list.

Now, their list had changed. Dr. Oliveri had made some changes to it. If you look at the second page. Took out the $\$ 627,000$ and it's now $\$ 574,000$. But the important number isn't the 627 or 574 . The important number is $\$ 20,018.52$. That's the important number because none of the work -- if you look at fourteen down. Kidwell and Pacific Hospital, Dr. Gross. The surgeries that were performed. Dr. Mortillaro. She doesn't get any of this. I submit to you they did not prove the case. And it's because the objective medical evidence does not support that she needed medical treatment for those injuries.

So if we go to the accident-related medical treatment.

Your Honor, I apologize. It's cut off on the right for some reason. \$20,018.52 is what we contend are the related medical costs in this case.

And then I showed you this in opening.
Haven't changed any -- the evidence actually supports -now supports this chart that I put up for you.

Plaintiff's damages related to the subject accident for the past medical costs. We still say. \$20,018.52. Past pain and suffering. Not future. Past pain and

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suffering, \$10,000. Alleged future medical costs, zero. Alleged lost services both past and future, zero. She should not get any compensation for that.

The defense submits that this is full and fair compensation. Mr. Roberts, in his closing arguments, said, Well, we're here and they had Dr. Klein -- they paid him so much and the attorneys are here for so long, and all we want is full and fair compensation. Well, guess what, okay, the secret is out. That's what we want. We want full and fair compensation for the injuries related to this accident based on objective medical evidence. Reasonable and reliable evidence, ladies and gentlemen. That's what we're asking for in this case.

Judge, may I -- can you please transfer?
Thank you. You're on it, Judge. Thank you.
THE COURT: I try.
MR. MAZZEO: Okay. The instruction I was
referring to before. It is Instruction Number 15 with regard to the credibility of a witness.
"If you believe that a witness
has lied about any material fact in
the case you may disregard the entire
testimony of that witness or any
portion of that testimony which is
not proved by other evidence."
So that's one thing I was referring to. Now I want to show you the jury verdict form. And I'm going to give you some suggestions as to how to fill it out. What's appropriate in this case. And I've already filled it out. Past medical expenses $\$ 20,018.52$. Future medical expenses, zero. This is based on the medical evidence in this case. Past loss of household services, zero. Future loss of household services, zero. Past pain and suffering, loss of enjoyment of life, $\$ 10,000$ is appropriate for the injuries that are related to this accident. For a total amount of $\$ 30,018.52$.

Number 3 -- we'll move on to Number 5.
"Did Defendant Andrea Awerbach
give express or implied permission to
Defendant Jared Awerbach to use her vehicle?"

No.
"Did Defendant Andrea Awerbach
negligently entrust her vehicle to an
inexperienced or incompetent person?"
She never gave it to him on January 2nd, so the answer has to be -- it has to be no.
"Did plaintiff prove by clear
and convincing evidence that Andrea
Awerbach acted with oppression or
malice?"
The answer is no. And then:
"Should punitive damages be
assessed against Andrea Awerbach for
sake of punishment?"
The answer is no. But if you already answered no to number eight, you skip to the end and you just sign it, but the instructions are there. You'll see it, ladies and gentlemen. You're going to receive this form.

So, finally, ladies and gentlemen -- Judge, one more time.

Ladies and gentlemen, as you know, we dispute the nature and extent of the medical specials, household services, pain and suffering, loss of enjoyment of life.

Pain and suffering, Mr. Roberts kind of went over that with you. You'll have an instruction on it. Physical and mental pain, suffering, anguish, disability endured by plaintiff from the date of the accident to the present related to the accident. It's subjective. There's no definitive standard to affix reasonable compensation. That's for you all to decide amongst yourselves. What's reasonable in this case?

You can use objective factors. Facebook photos, activities of daily living, work, her alleged limitations. You can use her answers on cross-examination as well to come to a conclusion and a figure as to pain and suffering. But it's what you feel is reasonable and just in light of the evidence. It's not what I say. It's not what Mr. Roberts. It's not what numbers he posts on a board or numbers I post. It's what you all come to a conclusion because that's what -- we have chosen you as jurors in this case to make that decision, and you're going to make that decision.

Ladies and gentlemen, and I'll leave you with this.
"Justice requires that if the subjective complaints and medical treatment is not supported by objective medical evidence, then the plaintiff has not proven her claim by a preponderance of the evidence." And you can't award her. You can only award her, as Mr. Roberts says, I'm in agreement, full and fair compensation for the injuries related to the accident and any treatment that is related to the accident. If it's not related, she doesn't get paid for

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it. Thank you.
THE COURT: I think we need a break. Take a quick break.
(Jury exited.)
(The following proceedings were held
outside the presence of the jury.)
THE COURT: Outside the presence of the jury.
Anybody need to make a record on anything that happened during the closings so far?

MR. MAZZEO: No, Judge.
THE COURT: You've got a half hour. Do you want to get started?

MR. STRASSBURG: No. Would it be okay if we just start tomorrow morning when everybody is fresh, including Mr. Roberts who has the last word?

MR. MAZZEO: They look like they're dragging,
Judge. They look --
THE COURT: I agree.
MR. MAZZEO: -- foggy in the eyes.
THE COURT: So start at 9:00?
MR. STRASSBURG: Yeah, that would be great.
THE COURT: You're closing. You finish your
rebuttal and give it to them tomorrow.
MR. MOTT: I do have one thing, Your Honor. THE COURT: Okay.

MR. MOTT: I would request reconsideration. You sustained their objection during my opening. When I said during my opening they were going to call

Ms. Garcia a liar. You sustained the objection and stated to the jury you don't think anyone was going to do that. I think that has just happened about a dozen times.

THE COURT: I don't remember sustaining that and saying that nobody was going to do that.

MR. MAZZEO: And I didn't call her a liar. I said she was not.

MR. MOTT: He said she feigned it. She feigned her pain and exaggerated her symptoms.

MR. STRASSBURG: Judge, there's a jury instruction on credibility.

THE COURT: And, Mr. Roberts, I think you may misremember how that happened because I don't think I sustained the objection.

MR. ROBERTS: I may --
THE COURT: I did?
MR. ROBERTS: I may misremember it, Your Honor, but I think you did, and you told the jury you didn't think that was going to happen.

MR. MAZZEO: I don't. I don't think so. Did he --

THE COURT: Well, he didn't -- he didn't use the word "liar" but he did -MR. MAZZEO: I didn't. THE COURT: -- imply that she was being dishonest, I agree.

MR. MAZZEO: Well, yes, about her antics on the stand when we had side bars. That's correct. I definitely did. Absolutely.

THE COURT: So you can talk about it in your rebuttal.

MR. ROBERTS: Thank you, Your Honor.
THE COURT: Does that fix it? Anything else?
How about I have Kirk send everybody home and we'll just tell them to come back tomorrow at 9:00, okay?

MR. MAZZEO: Okay.
THE COURT: All right. Off the record.
(The proceedings was concluded at
4:28 p.m.)


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# IAS VEGAS, NEVADA, Wednesday, March 9, 2016; 

9:33 A.M.

PROCEEDINGS

*     *         *             *                 *                     *                         * 

THE COURT: Welcome back, ladies and
gentlemen. Sorry for the delay. We're back on the record, Case Number A637772. Do the parties stipulate to the presence of the jury?

MR. ROBERTS: Yes, Your Honor.
MR. MAZZEO: Yes, Your Honor.
THE COURT: Mr. Strassburg, your closing.
MR. STRASSBURG: Thank you, Judge.
I want to thank you for the time that you've devoted to this case. And as the one who has always been going last, I'm doubly grateful for you paying attention and keeping an open mind.

This is closing statement, and I wonder if it would be all right if -- I've moved the table over here because I just need to see the screen while I'm with you because I have to make adjustments. I hope I'm not too close.

What we -- I think what -- this really isn't closing argument in a sense. The arguments happen in the jury room in deliberations, and I think that
probably the best way I can be of assistance to you in conducting your deliberations is to just identify some issues that might come up and the kind of evidence that you may want to point to to reason with anybody that disagrees with you in the jury room just to help you in those deliberations.

Let's start with the law. You know, one of the arguments you can make is it keeps coming back to has the plaintiff met the burden of proof, and they have not. And, here, the plaintiff has the burden of proof in this case to prove -- they have to prove negligence -- I'm sorry. They have to prove causation and they have to prove what their damages are, and that's their burden, and one of the things that you may want to talk about is that they haven't met that burden.

Because, you see, when the plaintiffs have the burden of proof, that means that the defendant has the benefit of the doubt. Because if there's doubt there's not proof, and where there's not proof, plaintiff hasn't met the burden.

So, in this case then, you may want to remind whoever you're talking with that, Hey, look, the benefit -- I'm sorry, the benefit of the doubt is on the defendant because here the burden of proof is on the plaintiff and the burden requires evidence.

Now, let's talk about evidence. One of the things that jurors have told me is helpful is the difference between evidence and assumptions. Because assumptions are not evidence. There's a jury instruction here. It's Instruction Number 20. And it says, what this concept of preponderance of the evidence means. Remember all that stuff on opening about the tipping and all that stuff? I don't see it that way. You have a right to insist that the burden, the weight does not shift to the plaintiff unless you're sure that the weight has shifted. And you see the scales of justice up here that the judge has. That's kind of an image of this shifting, that the weight of the evidence on the plaintiff's scale compared to the weight of the evidence on the defendant's scale. And the burden is satisfied only if you're sure that the scale on the plaintiff's side has shifted in their favor, and here, it has not.

Now, if you think of these scales as -- as piled with evidence, and what I want you to focus on is on the plaintiff's scale, what they say is evidence, it's really assumptions they want you to make, and what I want to show you is don't fall for that. An assumption is not evidence. That's jumping to conclusions rather than insisting it be proven. And

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that's one thing you might want to mention when you deliberate.

Because as you can see what we're talking about is the greater probability of truth, and that's how you tell where the probabilities lie, and here, the probabilities from the evidence, not just the assumptions they want you to make, the probabilities point to this accident didn't cause all of the conditions that the doctors were treating. It just didn't happen. The accident only caused soft tissue strain and sprain. It didn't cause any condition that required a fusion -- bless you -- fusion, injection, rhizotomy, and the like.

The other instruction you might want to point to is Number 20 -- sorry. Number 35. And this is the instruction on preexisting conditions, and here the law says that if a condition is present at the time of the injury, the plaintiff is not entitled to recover for that. And here the evidence shows -- not the assumptions they want you to make, but the evidence shows that the offset in her spine at L5-S1, the bulges in the disk, the condition of the facet joints, that was all present at the time of the accident. It was not caused. She cannot recover for that. That's just the law.

Now, here's my plan. Because I know you want to get to it, and I don't blame you. I'm going to talk about -- don't told me to this, but I'm going to talk about my top 10 assumptions that they want you to make that you shouldn't, and then I'm going to talk to you about my top 10 arguments that you may have and how to deal with them.

Because, you know, people raise all kinds of different arguments in jury deliberations, and I'm saying you need to be ready because there's very sensible reasons for all of them, and they all weigh in favor of Jared Awerbach and his mom, Andrea.

Now let's talk about my first one. Oh, if this is helpful, write it down. I'm not going to waste time writing it down. And if it's not, don't feel like you have to.

Let's talk about the first assumptions they want you to make and that is that the physical forces on her spine from the collision had to be greater than the physical forces on her spine from all those 30-odd years of the activities of daily living.

MR. ROBERTS: Objection, Your Honor. No argument based on all the evidence.

MR. STRASSBURG: I get to point out what's not been proven too.

THE COURT: Come on up.
(A discussion was held at the bench, not reported.)

THE COURT: Okay, folks. I'm just going to reinstruct you again. I'm going to let Mr. Strassburg talk about the forces of -- as he said so far, anyway, but you need to remember that Dr. Scher came and testified about forces of impact, and I struck that testimony and instructed you to disregard it, so you're not to consider any testimony by Dr. Scher as it relates to this argument that is being made.

Go ahead, Mr. Strassburg.
MR. STRASSBURG: Thank you, Judge.
Now, let me talk about this assumption that they want you to make because you've heard testimony -and I can show it to you here by Dr. Oliveri. Remember that was the doctor -- he wasn't a treating doctor. They hired him for a purpose.

Let me show you what Dr. Oliveri -- let me show you his -- and this is right out of the record of the court. It was on February 22, 2016. It was on Page 212. And this was my partner, Tindall, doing this. And in expressing thanks to you, I certainly didn't mean to exclude him. I thank Mr. Tindall for all the work he's put in to this.
"True or false, in order for
plaintiff to have experienced low
back pain due to a slipped vertebra or an offset, the vertebra at L5-S1 would have had to move."

And Dr. Oliveri's answer -- remember the guy who did his residency at Stamford. He said:
"True. If you're talking about
a slipped or moved vertebra by
definition."
So for the plaintiff to prove cause, that the offset to the vertebra was caused by this accident, they have to prove to you that the vertebra moved as a result of the collision, and that they have not done. What they want you to make is an assumption, and that's not proof.

Now, let me show you the plaintiff's logic that I'll prove to you it's wrong. Here's what they want to show you. They want you to assume that the force of the collision was greater than the strength of her spinal structure, and that's this and all the ligaments and the muscles that support it. The force of the collision was greater than the strength of her spine to resist it, and the strength of her spine, that was greater than all the forces of the activities of daily

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living before the accident. Because we know that those forces of daily living, those didn't cause her any pain because she was pain free before the accident.

So, however strong her spine was, it was strong enough for the vertebra not to move during her activities of daily living before the accident. What did those involve? Well, you've heard her say she rode the roller coasters. She rode the roller coasters at New York-New York. She road them at Circus Circus. And that didn't hurt her spine one bit.

And the spondylolisthesis, the offset, was present for all those roller coaster rides, didn't cause her any pain. And they want you to assume that the forces from this fender-bender, you've seen the pictures of the vehicle, those forces caused her spine to move, and those forces were greater than the forces of the roller coasters that she rode before the accident that didn't cause her any pain. They haven't proven it. They want you to make that assumption. You should not do that. And you should look at that scale and you should say, I'm pulling that assumption off that scale on her side because that doesn't belong there because that's not evidence.

Now, let me show you an illustration, a demonstration that makes this point another way. You
also seen count -- bless you.
MR. ROBERTS: Objection. This is -- this was put on the screen during Dr. Scher's testimony and it's been stricken.

MR. STRASSBURG: Permission to approach.
THE COURT: Come on up.
(A discussion was held at the bench, not reported.)

THE COURT: The objection is overruled.
MR. STRASSBURG: Now, on the left side, the forces on the spine from the activities of daily living. On the right side, we know that two equal and opposite forces don't -- can't make something move. If I'm pushing on Mr. Roberts and he's pushing back at me with the same force, there's not going to be motion.

To have motion, the force on one side has to be greater than on the other. Now this is what the plaintiff wants you to assume. Because they know that for all they've shown with evidence, well, it could be this where the red arrow is the force from the fender-bender, and it's less than the forces of activities of daily living, and they want you to make an assumption, but in a courtroom, you don't get assumptions. You have to prove with evidence. So take that assumption off their side of the scale.

They want you to believe that the collision that caused this was greater in terms of force on her spine than riding a roller coaster at New York-New York or Circus Circus or any of the other things she did for years and years before this accident with no pain.

Again, to be fair, a close-up view shows the deflated tire, scrape on the bottom that, I don't know, I can't see it on the left one, but on the right there is. So there you have the picture.

And, you know, they mentioned that now it's been totaled, but as you remember, the car -- her car had over 103,000 miles on it.

Now, there was some testimony about the door, remember that, Mr. Roberts wanted to draw your attention to this because of the door. See, and he wanted you to assume that that happened in the accident. But, his own client, she testified it was March 4th, Page 111:
"Q And I see the back door is
sticking out. Had you opened it?
"A I tried."
So, you see, she changed the conditions. The car wasn't in the same condition it was just after the accident, but he's asking you to make another assumption.

Now, let me show you how they went about

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trying to do this. Remember Dr. Kidwell? He was -- he was this guy. The guy who did all this treatment that didn't work. Well, Kidwell said to you -- and, again, just to be fair, this is Kidwell -- Kidwell's nutshell. So, on February 24, 2016, Page 106. And I'm sorry this takes a little longer doing it this way, but I can't remember what I had for breakfast two days ago. How are you supposed to remember what somebody said on February 24th? I don't know. So I thought just to be safe, I'd show it to you again. And this is the official record of the court. So these were the words you heard. Okay.
"Q Can you explain to us the medical
mechanism that you believe resulted
in the forces of the collision
resulting in the pain?
And what was Dr. Kidwell's answer?
"A It's my understanding" -- oh,
where did he go? He talked to -- "as
part of the collision she was
traveling approximate 35 miles an
hour" -- from her -- "struck by
another vehicle" -- that's true --
"causing her vehicle to spin at least
180 degrees."

That's kind of spin because we know it was only 180 degrees. It wasn't 360 or any more. 180 degrees.

And then Dr. Kidwell says:
"It's pretty high velocity,
probably hyperextended or laterally
flexed her spine. She already had a spondylolisthesis there."

See, there's the preexisting condition. Even Kidwell admits that.

The sequence of events -- okay, remember that. I'm coming back to that. The sequence of events, this is very telling. The sequence of events caused that to become damaged with progressive pain. That's it in a nutshell.

Okay. So that's how Kidwell goes about this.
Now, does Kidwell know what the forces are? I mean, does he know whether the forces are greater in the collision than of daily living? Let me show you what he says, because we asked him about this.

Okay. February 24, Page 07.
"Q When you say the forces of the collision resulted in lateral
movement of her spine, which way do
you believe her spine moved?
"A I don't know. I mean, she spun 180 degrees. If you ever watched a video of people of crash-test dummies, they get flopped all over the place. I mean, nobody is really there to videotape it, but I dare say if you took one of the crash test dummies and put it at in a 180 spin while traveling at 35 miles an hour, it would result in some shaking up, for lack of a better word.
"I am not a biomechanical
engineer. I have done some airline airplane crash reconstructions in my job as a flight surgeon in the Navy, but no, I don't hold myself out to be a biomechanical engineer."

So, use your common sense. Do you think they videotape crash dummies in accidents where nobody gets hurt or do you think they videotape crash tests where the physical forces are enough to cause injury, because that's what they want to study.

Well, Kidwell admits he's not a biomechanical engineer. So what he's giving you is a doctor, treating a patient making an assumption just because a witness

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makes an assumption. That doesn't mean that you make one. Because you make your decision on evidence. And anybody that tries to talk you out of that in the jury room, just gently remind them, are we dealing with assumptions here or real proof?

Now, so where did Kidwell get his knowledge of physical forces? And he said -- he testified February 24th, Page 111, Lines 6 through 9 and he says:
"Well, I've ridden in F4s, F14s and various other plains, and I'm well familiar with g-forces. I pulled 9 Gs in an F16 one time." Did it hurt his spine? Of course not. Page 110:
"Q And those 9 Gs injured your back, did they?
"A Played a little havoc with my neck.
"Q But your spine was okay?
"A Well, I don't know. I haven't had it imaged before and after." So, you see, when it comes to his spine, he's got to see it on an MRI. When it comes to somebody else, he'll make an assumption, particularly if he's getting paid for the treatment.

All right. Now, remember I told you to look for the sequence of events? Here it comes. Here's another one from Dr. Kidwell. And this, again, February 24 th and this is Page 108.
"Q Just to enable us to better understand where you're coming from, is it your belief that the forces of the accident caused the -- this L5 vertebra to slip forward over the disk between it and the S1?
"A Well, absence edema on an MRI you would have to expect that the pars defect was preexisting and was spondylolisthesis to some degree. "Q Could the injury have exacerbated that sheering? "A Sure, I would go that far." Do you see any evidence for him to get that far? No. He's willing to make that assumption, but you are constrained to make the plaintiff show you evidence, real proof. Proof in a courtroom. And he said:
"But what most of my testimony, most of my causation is based on, A" -- okay. Here it comes. Remember the sequence -- "on a temporal
relationship between the onset of symptoms and this traumatic event, and I know of no other preexisting pain. I know of no other traumatic event or any other rational cause to suggest that something else caused this lady's pain."

So what Kidwell wants you to do is follow him down this road of logical fallacy. What Kidwell wants you to say is because it happened before her pain, it must have caused her pain. Kind of like a rooster. Because the rooster crows before Sunset, therefore the rooster caused the Sunset. It's fallacious. It's an assumption. It's not proof.

And just to be complete. Was there an edema?
Well, no. Page 88, February 24:
"Q Is it correct to say that the radiologist respected this MRI --
"A I can say that.
"Q -- didn't -- hold on. Did not
identify any presence of edema?
"A Correct.
No edema. No motions. No cause. Unless you
want to do it Kidwell's way, the rooster's way.
Again, I'll go back to Dr. Stamford,

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Dr. Oliveri that on edema, February 22, 2016. Page 160:
"Q There was no evidence of any hemorrhage or specific finding of edema.
"A Correct.
No edema, no bruising. No physical forces greater than the roller coasters she rode before. No causation. Unless you're willing to make an assumption and that you should not do.

MR. ROBERTS: Objection. Move to strike there the reference of physical forces greater than the roller coaster.

THE COURT: He's not relying on Dr. Scher.
He's just using common sense. I'll allow it. MR. STRASSBURG: Speaking of roller coasters, that's turn to Ms. Garcia's testimony, March 2nd, Page 265.
"Q Let's talk about before the accident. Tell the jury what types of things that you used to like to do before the crash" --

You can tell that's Mr. Roberts because he always calls it a crash, we call it an accident, because he wants you to make an assumption. What do you think he wants that assumption to be?
"A Amusement parks, you know, here in town. You've got Circus Circus, you've got New York-New York, and their roller coasters. Swimming, the movies, going to the park. Enjoying activities with them at the park, walking on a daily basis after work, you know, trying to stay healthy." She rode roller coasters at New York-New York at Circus Circus. She rode them before the accident. It didn't cause her any pain before the accident. And if you -- what the plaintiff wants you to assume that the forces of that collision that made that fender-bender were greater than the forces from the roller coasters at Circus Circus and New York-New York. That's an assumption you should not make.

And, you might consider a couple other facts. She testified March 4, Page 79.
"Q In the accident, you were wearing your seat belt and shoulder belt?
"A Yeah. The seat belt covers your shoulder and your chest, yes.

A laptop -- or the lap belt, right? So she's belted in.
"Q The airbags did not deploy?
"A No, sir."
So think about that. Hyundai puts a computer now, that fancy computer, it didn't even know anything had happened that required it to go to work and fire the deployment of the airbag.

Yet the plaintiff wants you to assume that the forces that wouldn't even wake up that computer were greater than the ones that her spine was subjected to on those roller coasters. They're asking you to make an assumption. That you should not do. That's not proof.

And, you know, just in case there's any doubt of what Kidwell was up to, you know, with the rooster, here's what he said, again, February 24th, Page 111:
"Q It sounds as though your opinion
is based most firmly on your
reasoning that she's pain free
before, she hurts afterwards, the
only thing between these two is this
accident, therefore, it has to be the
collision. Right? Stands to reason,
doesn't it?"
"A It absolutely stands to reason.
I agree with you."
She's pain free before; the rooster crows before sunrise. She hurts afterwards; the sun comes up.

The only thing between the two is the accident, therefore, the rooster must have caused the sun to come up. That's what's called an assumption.

Okay. Here, let me do a Kidwell. See how you like this, and this you might want to talk about in your deliberations. At times, Strassburg, he pulled a rooster. Let me show you how logical this really is and then ask yourself, is this the kind of thing we ought to hit somebody for for millions of dollars and his mother?

Remember when Ms. Garcia said she called
Jared's representative, and she called after she went to the ER. And if you don't, March 3, Page 25:
"Q On direct examination you told us
the jurors that you had -- I guess
after you went to the emergency room
at MountainView you would call Jared
Awerbach's representative."
And she said, "I did."
And she said that when she called them she asked for a referral to a doctor. March 3rd, Page 25, and when she was doing that, she managed to forget about any offers of assistance.

March 3, Page 39:
"Q Did Jared Awerbach's
representatives ever offer to pay for
your medication prescription?
"A No, not that I can remember."
She did admit that the representative asked her if she was okay. Page 39 on March 3rd.
"Q In any event, it's correct that when you spoke to Jared Awerbach's representative, based on the recording statement, the rep did ask
how you were feeling, right?
She said "yes."
And the part she left out was that the rep
asked her if she was planning on following up with treatment, and she told them she was just going to go to the hospital clinic. Directing your attention March 3, Page 40.
"Q When the representative asked you
if you plan on seeking any follow-up
treatment, your response, and your
only response to them was you're
hoping it stops hurting and if
anything I would go back to either
the hospital or the clinic. Isn't
that what you said?
Her answer was: If that's what
it says here -- "If that's what it
says on there, yeah."
So, how about this for the rooster, Ms. Garcia gets in a wreck, she calls the representative of Jared. She doesn't get just exactly what she wants, she gets pissed off, and she goes to get a check from Mr. Lerner. That's just about as logical as Dr. Kidwell.

Now, Dr. Kidwell's whole logic -- dare I say, house of cards -- depends upon his assumption that nothing happened between the accident and the surgery, and this raises the issue that you may want to remind anybody who is arguing with you on September 3rd, right here, and it's the day before she runs to Dr. Lemper and he gives her the facet injection, remember the emergency appointment where she said something happened in the shower. And what happened in the shower?

And here there's varying testimony that I just
want to call to your mind and you can decide did it really happen the way she says or not? March 4, Page 72:
"Q The day before you experienced a dramatic increase in your pain level, do you recall?
"A Yes, sir."
And Page 73:
"Q As a result of that experience
you went to Lemper and he gave you an injection, right?
"A Yes, sir."
Now, she was asked in the courtroom, so what
happened? What did -- March 4, Page 73.
"Q Now, what do you recall happened
in the shower the day before?
"A I -- I couldn't remember
whether -- you know, I had bent over
to wash my feet" --
Think about that. Here's the spine. Bending over to wash her feet. Give that a try in the jury room. Stand up, bend over, and try to touch your toes, and tell whoever is asking you to change your mind how your back feels about L5-S1 when you try to. But that's what she said.

She said:
"Wash my feet or my leg and just the shooting pain stopped me from continuing what $I$ was doing, and I had to scream for somebody to come and help me out of the shower."

She had to scream. In the accident, did you hear her screaming on the 911 call? Any witnesses at the accident say she screamed? Oh, no. This pain is

1 different because it made her scream while she was 2 performing an activity that I can't do today. That's 3 what she says. But that wasn't all she said.

5 Page 74. The question was -- I'll skip some of this,
She was showed her deposition. March 4, read of the records, yada, yada, yada. It says:

There's a note in Dr. Lemper's records in about September 2011. So about nine months after the accident that says she, which is referring to you in the records, had a sudden increase of low back pain radiating to both legs when she bent to wash her legs in the shower. Do you recall that?
"And you, your answer was: 'I don't remember bending or I don't remember if there was anything that triggered it that I could have done because I have had problems bending. I just remember being in the shower and hurting.'"

That's not it. That's not all of it. All right let me give you the answer in full. She says:
"I just remember being in the shower and hurting and pretty much crawling, somehow out -- not crawling but got out of the shower slowly and crawled into bed."

You think about whether that's credible. What was she really going to say when she tried to walk it back, and pretty much crawling somewhere out -- not crawling. Do you think she realized that she had spilled the beans and went on that she slipped in the shower, she fell in the shower, and that's how she got to a position in the shower where she had to crawl out of the shower? Use your common sense.

Ask yourself, what probably really happened, because the plaintiff wants you to assume the same assumption Kidwell did. That assumption that there's nothing between the accident and the surgery. That makes any bit of difference, even though September 13, 2011 she's in the shower doing something that makes her scream with pain where she can't walk, and even she admits that she had to crawl to bed. And you ask herself, was she really going to say she had to crawl out of the shower because she fell.

Now, also you might want to say to whoever -if there's some -- and I'm not saying you're going to

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argue. I'm not saying there's anything untort or unpolite about it, it's just when you're having your discussions with your fellow jurors, you might ask yourself how could she bend down and wash her feet or wash her legs? Because, you know, there was an IME conducted by Dr. Stamford, Dr. Oliveri, and Oliveri says.

I'll just give you the part -- so Oliveri sees her in June, June 4 of 2013 and Oliveri testifies that he measured her lower back range of motion.
"I used an electronic device that gave me specific degrees of motion. She had some decreased range of motion in her lower back. Her lower back extension, bending backwards, was 18 degrees. Her lower back flexion, bending forward, was 38 degrees. That's about a 50 percent reduction in her lower back motion."

So, let's see -- bless you. To get to your feet, you've got to bend 90. To get to your knees, I've got to bend 90, and she could only bend 38. How could somebody with a condition that imposed that on her, even after the surgery. I mean, this was the surgery that

Gross did that was wonderful she says. She's still 50 percent reduction.

And then Dr. Cash, he had her do the bending stuff before. March 26, 2016, Page 42. Okay. Now, just so we're clear. This is Dr. Poindexter. I know they don't like him, and they say he flunked his boards, but they never say he couldn't read, and what he's reading here is Dr. Cash who passed his boards so Dr. Cash says:
"Q And so specifically what Dr. Cash
has on the report is 20 degrees
flexion, 10 degrees extension.
Yeah."
Remember Dr. Cash? He saw her back here. Six weeks after the accident. February 2011. The shower incident is in September 2011. And according to Cash's report, assuming Dr. Poindexter can read, I believe he can -- 20 degrees of flexion. That's even worse than 38, right? But she says she's touching her feet or her legs in September, seven months later, in the shower.

So here's my third assumption that you should not -- Mr. Roberts wants you to assume that Ms. Garcia is believable, she's credible, that you can take her testimony that she swore from that witness stand to the bank. And one of the questions you might want to have

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is do you agree with that or is it just another assumption they want you to make?

Let me give you an example. Remember the testimony about her social life? You don't? How could you be expected to, so I brought it. Let's start with the foundational question. March 3, Page 130:
"Q So Kidwell, August 15, 2012,
recall?
"A Okay.
Now, where are we? Right here. August 15, 2012. This is kind of Kidwell's kick off. First visit, assesses her before he starts all this. So that's where we are on the chart in the course of treatment. And he has her fill out a form. Page 130, March 3:
"Q And when you went to Kidwell he
had you fill out some documents,
remember that?
"A Yes.
And one of those questions. One of the
questions was about social life, March 3, Page 131.
"Q And one of the questions was
about your social life, remember?
"A (Witness nods.)
"Q And you answer that you hardly
had any social life because of the
pain.
And her answer was: Oh, no I had plenty of social life. I went to the beach. We did this. We did that with the kids. That's what her answer was, wasn't it? Well, no. Her answer was:
"Correct. I hardly had any
social life."
And, remember, just to make sure to be fair to her, Page 131, March 3:
"Q Now, let me direct your attention
to Exhibit 26, Bates number, do you
see that on the screen?
"A Yes.
"Q Okay. And that's the question
that you answered and you circled it along with some other ones, right?
"A Yeah.
And.
"Q Okay. And you had five options
to characterize how the pain affected
your social life and you picked the
most severe impact on your social
life, true?
"A Correct.
And you probably remember this was the

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document she was shown because I showed it to you from Kidwell's questionnaire. And this isn't just some casual conversation here. This is what you fill out to get medical treatment. You know this history that the doctors are relying upon that's so important to them. Well, this is part of it too. And of all the questions, she said, I have hardly any social life because of the pain. The most severe one.

So, let me direct you, you recall the Facebook photos and this is -- remember, Mr. Roberts was critical of us for getting these Facebook photos. Did we stalk around, hack something, breach a password, sneak into her site, steal her personal -- is that what we did?

No, we went to the public pages of her Facebook page, and, you know, I should probably take lessons from you all because you're probably much more experts at Facebook than I ever will be. So you probably know just from your own common sense in life. If you want something to be secret on Facebook there's ways to do it, and if you want to show the world, there's ways to do it, and that's what she was doing. So -- and just to be clear. Hold on. I have to find this one. Let me give you both of them. Because she wasn't just talking about a point in time here. Let me direct your attention to this evidence

1 March 3, Page 132.

Again I asked her the same stuff we've been talking about. Second question.
"Q And is that an accurate
description, pretty much of the
impact on your social life that the
pain had from the time you started
treating just after the accident
until the time you filled out the
form on August 15, 2012?"
And she said: "Yeah."
So what she swore to -- to you, right here, from the time she started treating down here until the time she shows up in Kidwell, this period of time, hardly any social life. But, you know, didn't stop there. March 3, Page 133.
"Q And is it an accurate description
of the impact the pain has had on
your social life pretty much ever since?"

And the answer was: "Yes."
So -- no, I did it. I've come prepared for you. So while he looks on his screen, let's look at the board. So here you have it. And let's review.

Ms. Garcia went up there on that witness stand, swore to
tell the truth. And then she swore to you hardly any social life. And just so we recall, she's also making a claim for millions of dollars for loss of enjoyment of life, and the Facebook photos, we talked about them. You can remember she described the dates they were taken. These are the Facebook photos shown, hardly any enjoyment and social life. Hardly any social life. And, for example, remember this one here in the French Maid outfit where she had a dinner date. She went over, cooked a guy enchiladas on a date dressed like that. Do you think she was wearing heels in that outfit or was it flats? The romance. You know, when she went into the ER she said she wasn't sexually involved with anybody.

In 2014, we're not just talking about activities of daily living, could you do the ones after that you could do before? Well, here's some new ones, new activities of daily living. She is -- to her credit, God bless her. She has gone on with her life. She has found a man that she's serious with. She said he's serious with her. God love her. But did she tell you the truth when she said I hardly have any social life? That's something you've got to talk about. You ought to ask whoever asks you questions, isn't this just another one of those assumptions Mr . Roberts wants us to

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make? Because it is and you should not.
Now, was that the only one? Mr. Strassburg, after all these days you just picked out one and you jumped on -- is that the only one? Remember the ER where Ms. Garcia said, what? Let me show you.

March 2, Page 245.
"Q So after the lady with the cart
left and took your financial
information, did the doctor come back and see you?
"A No. It was the nurse that came back with prescriptions and no tests were done. I asked and they brushed it off and sent me on my way. Well, that heartless ER. My goodness. But you got to meet the Dr. Sandra, remember him, kind of at the end. Nice kid. He went and got his schooling in Utah.

And he was asked -- and this is Kindle [sic] again, my partner. I should have turned the whole case over to him. March 7, Page 25. To the doctor, he's the guy turning his back on her, according to her:
"Q If somebody were to make an
allegation that MountainView or you
didn't really see her or didn't
really do much for her because
MountainView found out she couldn't
pay, would that be an accurate statement?
"A No."
Was she candid with you? Were her lawyers candid with you or did they want you to make an assumption that MountainView spit in her face because she couldn't pay. That wasn't true.

You're going to see an instruction, Number 15.
And this is -- the Judge read it to you to give you some guidance, to give you the law. What do you do with a witness like this? Any witness.
"If you believe that a witness
has lied about any material fact in
the case, you may disregard the
entire testimony of that witness or
any portion of this testimony which
is not proved by other evidence."
That's the law. If she didn't play square with you, this is the law.

Now here's my fourth assumption that they want you to make that you should not. And, you know, I bet at least one of you -- because you're smart, at least one of you is saying, oh, for the love of Pete, who goes

1 through all of that if it's not real, huh? You're all 2 too polite to respond, but I get it. I can read some of your minds. Who goes through all of that if it's not for real? Why would you do that? Why do all this if it's not for real?

Well, it's because she had complications from that surgery. And all the pain that she's dealing with now and that she will be dealing with for the rest of her life is because of that surgery.

That guy, Gross, I probably don't have to tell you what I thought of him. In fact, I can't. That's not right. But that doesn't stop you from forming your own opinions of the nattily-attired Dr. Gross.

And the defense doctors, they had an opinion on what he did, what he did to her. Because, you know, somebody goes through all this post surgery who doesn't have any choice because that screw moved, that fusion didn't fuse, and Gross is covering up. And let me show

Here's Klein, Dr. Klein. I know they don't think much of him. He's old. But some things are true, even when old people say it. March 2, Page 194.
"Q In your opinion, Dr. Klein, the
complications from the surgery
probably account for Ms. Garcia's
current pain symptoms?
"A Yes.
The complication he identified March 2nd, Page 187, 6: "That screw is loose."

We'll get to it, what he's talking about because there's two angles to this, two considerations. Did Gross put the screw in wrong the first time? Well, remember, Klein criticized that. They brought Gross back, Gross gave a bunch of testimony. It all added up to I felt. I put that screw in the bone and I felt. We're talking L5 right at seven. I'll get to it. You'll see, but that was Gross.

But, you know, what Klein said was the screw moved after Gross put it in. Klein wasn't being critical of Gross as malpractice. You know, there's a jury instruction on this, but that's not the point. They want you to think it's the point but it's not. It's not. What we're doing is we're addressing the reasonable question, who goes through all this who is faking or not in real pain? It's somebody who doesn't have any other choice because the surgery resulted in a loose screw that moved after the doctor put it in and that's what is causing the pain, and that's what causes the adjacent segment disorder, 25 years, it's because Gross misdiagnosed her. He was in too much of a hurry

1 to cut on her and make the big bucks.
And Dr. Klein testified at the time he saw her there was time enough for micromotion to cause some pain. This is March 2, Page 194: Yes.
"Loose screws?"
He said "Yes."
And here is Attorney Smith, but he went after
8 Klein on cross, as is his right. It's his right.
9 March 2, Page 212, Attorney Smith.
"Q The screw that you're saying that
Dr. Gross -- well, let me ask you a
different question first.
"A Sure.
"Q Are you saying he placed it wrong
or it moved after he placed it in
there?
"A He placed it wrong. It moved.
Dr. Klein said, answer: "It's moved after he placed it."

Did Gross address that when they brought him back? No. All he talked about because this one, I placed it right. But they ignore the second issue, the real issue that it moved. That was Klein's opinion. Gross left the stand without explaining it. But, you know, Dr. Gross, he did say February 26th, Page 164:
"Q I wanted to ask you a little bit more about that as to whether you have any opinions whether nonunion of bone grafts in a spinal fusion like she had is a recognized cause of post-surgical pain?
"A It is, yes."
So even Dr. Gross, the nattily-attired Dr. Gross, even he recognizes that nonunion can cause post-surgical problems. Even when the great Dr. Gross does the surgery.

And even Dr. Gross, March -- I'm sorry, February 24, Page 222.
"Q Would you agree that if the surgery is to treat a condition that is not caused by the collision then complications resulting from that surgery are also not causally related to the collision, would you agree?
"A In a general sense, yeah.
So, that's the logic. And that's the truth. That if this offset disk or vertebra or whatever -we'll get to that, but whatever. If this offset, if the motion that was necessary to cause this spondylolisthesis in the accident, if that condition is
not caused by the collision, you know, the slippage because it's degenerative or it's preexisting, so if the offset in the back, if that's not caused by the collision, then the surgery to realign her spine may be perfectly fine, right? Her spine was realigned when Gross was done with her. Okay. But that surgery wasn't caused by the accident any more than the condition the surgery corrected was caused by the accident.

And not only that, the complications from the surgery because of what Gross did, they're not caused by the accident. And if our back didn't cause it, he's not liable for it.

Now, let me show you this. Because you'll have in Exhibit 40 -- I mean, you'll have medical imaging. I mean, I don't know if you can see it, all these volumes here. Those are the documents in the case. All that. Those are just the plaintiff's. So that's what's waiting for you and what do they show?

Let me show you this slide because this was talked about, and it's a slide from June 27, 2014. Here, I'll just show it to you now. Let me show you the slide. Okay. And you can see sagittal image, just to orient you. Here's the spine. Let's look at a vertebra, so you can see, you can kind of see the landmarks on the film. Here, this part, this part here,

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that's the vertebral body they call it. So that's like this, do you see the vertebral body? And then this stuff, well, that goes out to the facets. You can see that. I mean, we've been talking about this for a month, and then the rest of this stuff is the part he removed in surgery.

Remember he talked about he cut off the spinal process and all that stuff, right? That's this stuff. Gross cut it all out. So that's kind of what you've got there. Just so you know the landmarks.

So, what do we know about this surgery? The outcome in the operating room? Well, Dr. Gross did a report, and in that report -- which you'll also have, you're going to have this, this is the Op report, and let me blow it up for you, the part I want to draw your attention to.

And, you see, Gross put it in writing, "I was able to get a complete reduction." Okay? What is that? That's doctor talk for -- what's a complete reduction? Okay. So we start out. You remember the one vertebra slides forward over the top, right? L5 slides over S1, okay? Right? And then a complete reduction is Gross pulls it back into anatomic. That's what's meant by a reduction.

THE COURT: Mr. Strassburg, can I have counsel

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come up for a second?
(A discussion was held at the bench, not reported.)

THE COURT: Folks, I'm going to give you a quick break.
(Jury exited.)
(The following proceedings were held
outside the presence of the jury.)
THE COURT: We're outside the record. Just for the record the primary reason is because Mr. Mazzeo had to run out. He needed a break. I didn't know it was that urgent or I would have interrupted you, but I don't like to go forward without one of the attorneys. MR. STRASSBURG: Totally fine, Judge. No problem. Do you guys need to put anything on the record?

MR. ROBERTS: Yes. That I was overly optimistic about finishing by lunch. THE COURT: Me too. MR. ROBERTS: I don't know if I should do it without Mr. Mazzeo not here.

THE COURT: Let's do it when he comes back. MR. ROBERTS: Okay.

THE COURT: Off the record.
(Recess taken from 11:03 a.m. to

11:15 a.m.)
(Jury entered.)
THE COURT: Welcome back, folks. Back on the record. Case Number A637772. Do the parties stipulate to the presence of the jury?

MR. STRASSBURG: Yes.
MR. ROBERTS: Yes, Your Honor.
MR. MAZZEO: Yes, Your Honor.
THE COURT: Go ahead, Mr. Strassburg.
MR. MAZZEO: Thank you.
And I do apologize for how long this is taking, but I wanted to actually show you the testimony and the evidence.

Also, Dr. Gross -- we'll pick up. What's his description of the condition of her spine, you know, when he's done with the surgery? Complete lumbar facial alignment. Alignment. What he's saying is when he was done, the spine was in alignment because he pulled back that L5.

Now, let's turn our attention to the MRIs, which, you know, you probably seen until you're sick to death of them, but here is the MRI -- real quickly. Here's the MRI, June 27, 2014, all right? And, you know, we talked about what do you see? Kind of in this ghostly outline you see the rectangular vertebral body,

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right? You see the screws, the rods, and you see just what Gross was talking about, alignment, alignment. If you follow down the line of the back, they call it posterior in the record, but it means back. Anterior front, posterior back.

The back of the vertebral bodies is in alignment, okay? That's a pictural representation of what you saw Gross put in the records. So here's an outline of just the alignment we were talking about, and, you know, just so you can see this stuff comparatively.

Okay. Here's the same -- you know, it's the same picture. So you can assure yourself that the red outlines are appropriately placed by looking at the alignment that you see of the spine, and the telltale landmark is this line of the back of the vertebra, the back of the vertebral bodies, that's like right here, this line.

Now, and we know something else. We know which vertebral bodies because we know that Gross said, okay, S1, L5, L4. So we know S1, L5, L4, L3. We also know that if the rods got three screws in it, it's on the left, and if the rods got two screws in it, it's on the right. Because remember he said the screw at L4 on the right side he couldn't get it to take so he had to

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take a -- so that tells us that this rod here that's got three screws in it has to be on the left, and the rod with two has to be on the right. And right and left -and, remember, when you see the anatomical drawing that Gross helped the lawyers do for Ms. Garcia, that's looking down on it and that is true image. By that I mean right is right. Right in the image is right in real life and vice versa, okay? MRIs when you see those that's a mirror image. Left is right, right is left.

Okay. So we're talking about rods down either side in a mirror, but we're seeing it like this. You can kind of see through. You can kind of see through like the rod on the left. Because this is of a -- this is a sagittal image, right? The rod on the left is in front. The rod with two on the right is in back. Are you following?

So, we know where we are, and so we know these are the screws shown in yellow. Screws on the left side. Here's the rod on the left side. We see that. Here are the screws on the right side, and here's the rod on the right side, okay? Now, I want you to -- let me bring this up just so -- how many threads are above the landmark? The rear edge of the L5 vertebral body? How many? One, two, three, four, five. So take a look. Five screws. Threads are showing and what we might do

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is mark out a distance in blue. Distance from the landmark of the vertebral body rear end and the bottom of the bolt, the screw, the bolt that affixes it to the rod, okay? Two landmarks. Five threads. June 27, 2014. And so you know -- you know how this works.

MR. ROBERTS: Your Honor, may we approach? Thank you.

THE COURT: Come on up.
(A discussion was held at the bench, not reported.)

THE COURT: Go ahead.
MR. STRASSBURG: I'm sorry. Was there an objection?

THE COURT: He just asked to approach.
MR. STRASSBURG: Okay. So, let's now look at the MRI from January 21, 2013, a year and a half before, and how many screw threads do you think we're going to see between the back of the vertebral body and the bottom of this securing nut a year and a half before.

MR. ROBERTS: Objection, Your Honor. No medical evidence of that. Mr. Strassburg doesn't have the medical expertise to read the MRIs.

THE COURT: We'll allow him to make the observations. It's fine.

MR. STRASSBURG: Now, let me turn to this

