

**STATE OF VERMONT
BOARD OF MEDICAL PRACTICE**

In re:	)	MPC 15-0203	MPC 110-0803
	)	MPC 208-1003	MPC 163-0803
David S. Chase,	)	MPC 148-0803	MPD 126-0803
	)	MPC 106-0803	MPC 209-1003
Respondent.	)	MPC 122-0803	MPC 89-0703
	)		MPC 90-0703
	)		MPC 87-0703

**DR. CHASE’S MOTION IN LIMINE TO EXCLUDE THE TESTIMONY
OF KATHLEEN MICELI**

Respondent, Dr. David S. Chase, hereby requests that the Board exclude the testimony of Kathleen Miceli, a former scribe of Dr. Chase, who played no role in treating any of the 11 patients implicated in the Superceding Specification of Charges. In support of his Motion, Dr. Chase relies upon the following incorporated Memorandum and the attachments hereto.

I. Introduction.

The State has previously argued that the only evidence that is relevant and admissible in this case is evidence that directly relates to Dr. Chase’s treatment of the 11 patients identified in the Superceding Specification of Charges. Accepting the State’s argument, this Board has precluded Dr. Chase from presenting the testimony of any other former patients. In an opportunistic about-face, the State now seeks to introduce the testimony of one of Dr. Chase’s former scribes, Kathleen Miceli. Ms. Miceli played no role in treating any of the 11 complaining patients during her short six-month employment in Dr. Chase’s office. Indeed, Ms. Miceli has specifically disclaimed any knowledge of the treatment provided to those patients. Based on this Board’s prior rulings, Ms. Miceli’s testimony must be excluded on this ground alone.

Moreover, much of Ms. Miceli’s hazy recollection of Dr. Chase’s office and testing procedures is contrary to fact and to the sworn testimony of the other former employees on the

State's own witness list. If she is allowed to testify, Ms. Miceli will create unnecessary confusion that will require many more witnesses, and many more hearing days, to clear up.

II. Discussion

A. The State's Prior Arguments And This Board's Prior Rulings.

The State's Superseding Specification of Charges alleges that Dr. Chase engaged in unprofessional conduct with respect to 11 named patients. The State has abandoned its allegation that Dr. Chase engaged in a pattern of unprofessional conduct apart from these 11 patients. As a result, in its pre-hearing Motion in Limine, the State argued that Dr. Chase should be precluded from presenting the testimony of any other former patients. In support of this argument, the State wrote: "*The only facts that are of consequence to the determination of the instant action are whether Respondent's treatment of the twelve individual patients constituted unprofessional conduct.*"¹ (State's Motion in Limine at 12 (emphasis added).) Dr. Chase argued that the testimony of other patients was directly relevant to the State's charges with respect to the 11 complaining patients. The Board rejected Dr. Chase's argument, granted the State's Motion, and excluded all testimony from Dr. Chase's other patients, holding: "The testimony of patients who are not subjects of the pending allegations is not relevant to Respondent's conduct in relation to the patients who are the subjects of the allegations." (7/12/06 Order at 6.)

B. Kathleen Miceli Played No Role In Treating The Eleven Patients.

The State has recently indicated that it intends to call Kathleen Miceli as a witness in its case-in-chief. Ms. Miceli worked as a scribe in Dr. Chase's office for less than six months in 2001 and 2002. (10/25/05 Trial Testimony of Kathleen Miceli ("Miceli Trial Tr."), at 44,

¹ The State has since voluntarily dismissed its allegations with respect to the twelfth patient, Robert McClain. As a result, the Superseding Specification of Charges now implicates eleven patients.

excerpts attached hereto as Ex. A.) Ms. Miceli worked directly with patients for approximately three-and-one-half of her six months in the office. (*Id.* at 48.) The rest of her short tenure was consumed by training, secretarial duties, and vacation. (*Id.* at 44-46.)

Ms. Miceli played absolutely no role in treating or examining any of the 11 patients identified in the Superceding Specification of Charges. Indeed, the medical records admitted into evidence indicate that she had no contact whatsoever with any of them. (See Respondent's Hearing Ex. 501.) Consistent with those records, Ms. Miceli has testified under oath that she has no knowledge with regard to the treatment provided to any of the 11 patients:

Q. Okay. I'm going to ask you very briefly if you remember anything about the particular patients who are the complaining patients in the medical practice board action; okay?

A. Okay.

Q. Do you know anything regarding the treatment provided to William Augood?

A. No.

Q. Franklin Cole?

A. No.

Q. Jean Corning?

A. No.

Q. Richard Gagnon?

A. No.

Q. Marylen Grigas?

A. No.

Q. Janet Kerr, K-E-R-R?

A. No.

Q. Susan Lang?

A. No.

Q. Margaret McGowan?

A. No.

Q. Helena Nordstrom?

A. No.

Q. Judith Salatino?

A. No.

Q. Donald Olson?

A. No.

Q. Joseph Touchette?

A. No.

(4/28/04 Deposition of Kathleen Miceli (“Miceli Depo. Tr.”) at 108-09, excerpts attached hereto as Exhibit B.) Similarly, Ms. Miceli disclaimed any knowledge with regard to Dr. Chase’s treatment of any other patients either before or after her few months as a scribe.

Q. And I take it you don’t know anything about the treatment provided to any patients either before you arrived at Dr. Chase’s office or after you left his employment?

A. Correct.

(*Id.* at 109.)

In short, Ms. Miceli has absolutely no knowledge of the treatment provided to the 11 patients identified in the Superceding Specification of Charges. She cannot, therefore, testify as to whether “Respondent’s treatment of the [eleven] patients constituted unprofessional conduct.” (State’s Motion in Limine at 12.) Consistent with the State’s own prior arguments and this Board’s prior rulings, her testimony must be excluded as irrelevant.

C. Ms. Miceli’s Recollection Of Dr. Chase’s Office Procedures Is Often Incorrect, Is At Odds With The Sworn Testimony Of The State’s Other Witnesses, And Will Cause Unnecessary Confusion.

Nor can Ms. Miceli testify knowledgably with respect to Dr. Chase’s general testing and office procedures. To the contrary, her mistaken testimony on these topics will create unnecessary confusion that will take many additional witness and hearing days to dispel.

As noted above, Ms. Miceli spent only about three-and-one-half months working with patients in 2001 and 2002. She spent most of that time acting as a scribe, rather than performing testing and examinations. (Ex. A, Miceli Trial. Tr. at 45.) She played no clinical role with respect to any patient. (*Id.*) Ms. Miceli has also specifically disclaimed any knowledge of how other scribes and technicians operated, stating: “I had no knowledge of anything that they did when they were in their own rooms” (*Id.* at 89.).

Testifying at the federal trial, where the government unsuccessfully charged Dr. Chase with engaging in a wide-ranging pattern of improper cataract care, Ms. Miceli admitted that she did not have a good memory of what vision tests were performed at what times, or how they were recorded in the charts. (*Id.* at 57-60.) Unsurprisingly, many of Ms. Miceli's admittedly unclear recollections were directly contrary to the truth and to other employees' recollections of Dr. Chase's testing and charting practices. For example, Ms. Miceli testified that Dr. Chase's technicians performed the high-contrast Snellen test using the BAT. (*Id.* at 9.) The remainder of Dr. Chase's former staff members have testified that this is untrue; the BAT was used only with the contrast sensitivity test. She also testified that the technicians were instructed to place two separate Snellen vision scores (one with glare and one without), along with their refractive measurements, on three separate sticky notes within the chart. (*Id.* at 57-58.) Every other employee has testified that the technicians recorded their refractions directly on the chart and placed only their best corrected Snellen vision scores, measured without glare, on a single sticky note in the first instance. Ms. Miceli testified that the BAT had only one brightness level. (*Id.* at 11.) Every other employee accurately recalls that the BAT had three brightness settings, as confirmed by Respondent's Exhibit 615, which the parties agree is the three-level BAT used in Dr. Chase's practice. Ms. Miceli testified that Dr. Chase examined patients before their eyes were dilated, again in contrast to the truth and the sworn testimony of every other witness the Board has heard, and will hear, in this matter. (*Id.* at 71-72.) Ms. Miceli's sworn trial testimony is riddled with other similar mistakes.

In short, Ms. Miceli's recollection of many of Dr. Chase's office practices is so inaccurate as to be hopelessly confusing. If the State is allowed to question her on these general subjects, Dr. Chase will be forced to call many more additional witnesses, and consume many

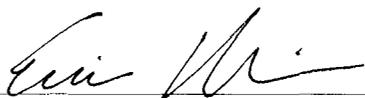
more hearing days, in order to clarify the misimpressions that will be created by Ms. Miceli's testimony. The Board should exclude her testimony on this independent ground as well. *See* V.R.E. 403 ("Although relevant, evidence may be excluded if its probative value is substantially outweighed by the danger of unfair prejudice, confusion of the issues, or misleading the jury, or by considerations of undue delay, waste of time, or needless presentation of cumulative evidence.").²

III. Conclusion

For the foregoing reasons, Dr. Chase requests that the Board exclude Kathleen Miceli's testimony from the merits hearing.

Dated at Burlington, Vermont, this 3rd day of November, 2006.

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² To the extent Ms. Miceli correctly remembers any of Dr. Chase's relevant office procedures, her testimony will be entirely cumulative of that provided by State witness Vicky Oakes, who served as Dr. Chase's technician for over 20 years and treated a number of the 11 patients. The State has indicated that Ms. Oakes is likely to testify in late November.

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF VERMONT

UNITED STATES OF AMERICA *
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DAVID S. CHASE * DOCKET NO. CR 04-135

JURY TRIAL
Tuesday, October 25, 2005
Wednesday, October 26, 2005
Burlington, Vermont

WITNESS:
Kathleen Hart Miceli

BEFORE:

THE HONORABLE WILLIAM K. SESSIONS III
Chief District Judge

APPEARANCES:

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1 A It was very small. It was -- it was similar to a
2 receipt you would get in a store.

3 Q Okay. And then you would do a Snellen vision?

4 A Yes.

5 Q And how would you do the Snellen vision
6 traditionally?

7 A It was the eye chart that most people would
8 recognize with letters. The patient would hold up an
9 occluder so they could only see out of one eye, and you
10 do one eye and then have them switch and do the other
11 eye and recite what they could actually see on the
12 chart.

13 Q And did you also do a Snellen vision with one of
14 those other tests that you spoke about earlier?

15 A Yes, with the -- there would be a glare test done
16 for those individuals who were in their 40s and older.

17 Q And when you said there was a glare test. I am
18 going to unveil what's already been admitted as
19 Government's Exhibit 15.

20 MS. PURDY: May I approach, Judge?

21 THE COURT: Yes.

22 Q I am showing you what's been admitted as
23 Government's Exhibit 15. Do you recognize this
24 instrument?

25 A Yes.

1 Q And what is it?

2 A It's the BAT machine or tester.

3 Q And you just said that she -- that you would do the
4 Snellen vision with the glare tester. Would you do that
5 before Dr. Chase did his examination?

6 A Yes.

7 Q And what type of patient would you do the Snellen
8 with glare test on?

9 A Those who were, I said, in their 40s or older.

10 Q And where would you record that vision?

11 A On a Post-it Note.

12 Q And once it was recorded on the Post-it Note, what
13 would happen to the Post-it Note?

14 A It would be put on the chart.

15 Q And what would happen after it was put on the
16 chart?

17 A I'm not sure what you are asking.

18 Q Did you ever see what happened to the actual
19 physical yellow sticky note?

20 A Oh, at the end of the visit, it would be destroyed.

21 Q And --

22 A Or thrown away, I should say.

23 Q And would you do the Snellen vision with the BAT
24 test when the pupils of the patient were dilated or
25 undilated?

1 A That was undilated.

2 Q And once you did that Snellen vision, did you put
3 that Snellen vision anywhere else on the chart other
4 than the sticky note?

5 A No.

6 Q Okay. And then what would happen after you did
7 these visions and you were doing your duty as a scribe?
8 Or, can I go back. Strike that.

9 What setting did you use when you did the glare
10 tester with the BAT?

11 A I wasn't aware of a setting. I just had -- what I
12 recall was on or off. But I would -- I guess we call
13 turning the button to the right on or to the left off.

14 Q And so as far as you know, you turned it on or off,
15 and that's how you used it?

16 A That's what I recall.

17 Q And can you just briefly do a demonstration of how
18 you would have the patient look through the BAT and how
19 you would turn it on?

20 A Well, I would just turn it on like that.

21 Q And then how would you have the patient hold it?
22 Could you show us?

23 A Well, they would have the occluder up here and they
24 would hold it up to their eye.

25 Q And then they would read what?

1 exact dates that far back.

2 Q Okay. So somewhere between five or six months,
3 correct?

4 A Right.

5 Q And during that six months of employment, there was
6 one month where Dr. Chase and -- was out of town and
7 wasn't in the office, correct?

8 A Correct. One month's worth of time that I
9 remember. I don't know if it was consecutive time or
10 not. I don't recall, but it was about a month's time.

11 Q And during that one month, patients weren't being
12 seen, correct?

13 A Correct.

14 Q And during that one month of time, you took some
15 time off, correct?

16 A I was given the choice that I could come in and do
17 office work, such as filing, or not work.

18 Q And you chose to do both, right?

19 A Correct.

20 Q You did some filing and you took some time off,
21 correct?

22 A As far as I remember.

23 Q Now, your basic job there was to scribe, was it
24 not?

25 A Yes.

1 Q And by scribing, that means your basic job was to
2 go in and write down what Dr. Chase said as he did his
3 examination.

4 A Yes.

5 Q Is that right?

6 A Yes.

7 Q Now, there also were some technicians who worked
8 for Dr. Chase at that time; isn't that right?

9 A Yes.

10 Q And what were their names?

11 A There were two Melissas. Melissa LaCross and
12 Melissa Prue.

13 Q Was Vicky Oakes still working there?

14 A No.

15 Q Now, the technicians had more of a clinical role?

16 A Yes.

17 Q And I mean more than a clinical role than you had
18 as a scribe.

19 A Yes, I didn't have a clinical role.

20 Q So you had no -- as a scribe, you had no real
21 treatment or clinical responsibility; isn't that right?

22 A Right.

23 Q Now, the other person, the person who trained you,
24 was another scribe there; isn't that right?

25 A Yes. Elaine Lampron.

1 Q And she trained you kind of on-the-job training;
2 isn't that right?

3 A Yes.

4 Q And you did that by shadowing her; isn't that
5 right?

6 A I shadowed her for a period of time, and then
7 she -- I started to do some of the work myself, and she
8 sat in the room right next to me observing me doing it.

9 Q So you shadowed Elaine for over a -- over a month
10 anyway, right?

11 A I don't recall exactly how long it was. But I
12 don't think it was under a month. I mean, I'm -- I
13 don't recall the exact amount of time.

14 Q Is your memory of the details of your time there a
15 little vague?

16 A Yes.

17 Q It was a long time ago, in your estimation,
18 correct?

19 A Yes, it was four years.

20 Q And you say you shadowed Elaine for at least a
21 month; is that right?

22 A Again, I don't know how long it was. I shadowed
23 her for a period of time.

24 Q Do you -- would it refresh your recollection to see
25 what you said at your deposition last year?

1 A I remember at my deposition repeatedly being asked
2 to come up with specific times and such, and so I ended
3 up guessing, but I really didn't know. I was pressured
4 to come up with an answer.

5 Q Who pressured you?

6 A Eric Miller.

7 Q This guy -- Mr. Miller here?

8 A Yes.

9 Q How did he pressure you?

10 A He would just keep asking me how long, how long, so
11 I -- I'd come up with a guess, but that that's --

12 Q You were there with your husband, correct?

13 A My husband was present, yes.

14 Q And Mr. Winn, the Assistant Attorney General was
15 there, correct?

16 A Yes.

17 Q Do you remember Mr. Miller asking you, at the
18 deposition, how long it was before you began scribing on
19 your own, and you saying: I don't recall. I'm really
20 not sure. I would say it was more than a month or -- I
21 really don't -- I can't say. It was a while. It was a
22 long time ago.

23 But -- you did feel it was more than a month,
24 correct?

25 A Yes, apparently I did.

1 Q So you probably only worked on your own with
2 patients while you were with -- at Dr. Chase's for
3 somewhere between three and a half and four months; is
4 that right?

5 A That sounds about right.

6 Q And during that time, most of the time you spent
7 scribing, correct?

8 A Correct.

9 Q And apparently you said you also learned how to do
10 some tests; is that right?

11 A Yes.

12 Q Let me ask you this. You said you had an
13 undergraduate degree in health science?

14 A Health education.

15 Q Health education. And then you got your RN degree
16 in 1993, right?

17 A Yes.

18 Q And for a year or two after that, you helped a
19 psychiatrist treat some outpatients or help them deliver
20 services; is that right?

21 A Yes, as an outpatient mental health agency.

22 Q And then for a year or two you did some health
23 screenings and educations for state employees?

24 A Yes, a couple years.

25 Q You were a school nurse for a couple years?

1 Q And then you testified, I think, that after you
2 were done with that, that you took a BAT tester, a
3 hand-held BAT tester and you would take a Snellen with
4 glare test, correct?

5 A On those patients in their 40s and older.

6 Q So, in the same lane, you are saying, with the same
7 Snellen chart projected on the wall, you would do a
8 second Snellen test with this BAT tester, correct?

9 A Correct.

10 Q And then you said that you used -- you would write
11 both of those results on a yellow sticky, right?

12 A Correct.

13 Q So you would write two scores on the yellow sticky?

14 A Well, there were two different stickies. It wasn't
15 on the same sticky.

16 Q There were two stickies?

17 A That's what I recall.

18 Q Okay. So on one sticky, what would you write?

19 A The results of the -- I would just record them as I
20 did the tests.

21 Q Okay. On one sticky, you would write the Snellen
22 without glare, correct?

23 A The first one, yes.

24 Q And then when you did the Snellen with glare, you
25 would write that on a different sticky; is that right?

1 A I believe so.

2 Q And then you would put two stickies in the chart,
3 right?

4 A That's what I recall.

5 Q And then later, you testified, with Dr. Chase, that
6 there would be a third sticky where they would write the
7 refraction on it; is that right?

8 A That was -- yeah, that was later on during the
9 exam.

10 Q So that would be a third sticky you remember,
11 right?

12 A Correct.

13 Q Now, you -- who trained you to do the Snellen test
14 with glare?

15 A Elaine Lampron.

16 Q Are you sure you performed a Snellen test with
17 glare in the lane where they would look up on the wall
18 at a Snellen test with the BAT?

19 A Yes.

20 Q Are you absolutely positive of that?

21 A That's what I remember.

22 Q If every other person who came in here has no
23 recollection of that test ever being performed, would
24 you dispute that?

25 A I don't know.

1 Q If every other witness who came in here testified
2 that there was ever only one score on one sticky note,
3 would you dispute that?

4 A No.

5 Q But you have a distinct memory that there were two
6 scores on two different Snellen tests, correct?

7 A I -- yeah, I guess I'm not as clear. It --

8 Q You are kind of remembering a Snellen test with
9 glare that may never have happened, right?

10 A I don't know.

11 Q You said on your direct testimony under oath that
12 you definitely performed this Snellen test with glare,
13 and then you wrote it down on the sticky that you put in
14 the chart -- one of the stickies you put in the chart,
15 right?

16 A Well, there was very definitely a glare test that
17 we did for people in their 40s and over. I recall that.

18 Q Well, I understand that. And I wouldn't disagree
19 with you on that. But where my problem is is you said
20 that it was a Snellen test with glare on your direct
21 testimony here today. Correct?

22 A Correct.

23 Q And you just told me there were two stickies you
24 put in the chart with two different scores on them,
25 right?

1 A That's what I believe happened.

2 Q But you don't have any recollection of that, do
3 you?

4 A It's hard to remember all these minute details.
5 That's what I am saying about exactly what test happened
6 when.

7 Q Well, you know, these minute -- minute details are
8 very important, do you understand that?

9 A Yes, I do.

10 Q Now, you said that you didn't recall that the BAT
11 tester had a low, medium and high setting; isn't that
12 right?

13 A That's right.

14 Q And nobody -- you don't recall anybody at Dr.
15 Chase's office ever talking to you about that; is that
16 right?

17 A That's right.

18 Q This is the BAT tester; is that right?

19 A That's right.

20 MR. BEHM: Is this Elmo on?

21 THE COURT: I thought you were going to flash
22 the light three times on the --

23 MR. BEHM: I am going to. I'm getting there.

24 THE COURT: Oh.

25 MR. BEHM: I promise.

1 I wasn't watching him closely.

2 Q Was this the point in the exam where he would
3 question the witnesses (sic) about their history?

4 A No, that would happen prior to any -- him doing
5 anything at all.

6 Q Okay. Even before he did the glaucoma test?

7 A Before he did anything.

8 Q The first thing Dr. Chase would do would question
9 the patient about symptoms?

10 A He would often just make some small talk about the
11 weather or something like that, and, yeah, then he would
12 look at the chart to see what had been written down
13 under that top left-hand corner of the chart about why
14 the patient was there or whatever, and then he would
15 often ask them questions.

16 Q And it was then that he would write in the chart,
17 can't see -- or to tell you to write in the chart, can't
18 see to drive safely at night, wants cataracts removed?

19 A If that's what happened with that particular
20 patient.

21 Q So that would happen before you did any CST with
22 BAT test, right?

23 A Correct.

24 Q That would happen before the patient's eyes were
25 dilated, correct?

1 A Correct.

2 Q And that would happen before Dr. Chase ever even
3 looked into their eyes; is that right?

4 A Yes.

5 Q And that's your -- that's your recollection, right?

6 A Yes.

7 Q And how sure are you of that?

8 A I'm very sure of that, because that's what --
9 that's part of what made me so concerned.

10 Q Are you positive that all of this would occur
11 before the CST test was done and before their eyes were
12 dilated?

13 A Yes.

14 Q Now, before they got to Dr. Chase's office, didn't
15 they have to have visual fields done?

16 A Before an exam started?

17 Q Before Dr. Chase ever saw the patient.

18 A I don't recall. I wasn't involved with visual
19 fields. And I don't really recall. I think that that
20 was done between the first part of the exam and the
21 second part of the exam.

22 Q The first part of the exam was done with the techs,
23 correct?

24 A Or Dr. Chase, depending on who was available. I am
25 talking about the refraction and the glaucoma test.

1 Q You would disagree with them if they said the CST
2 slip went in the chart because you say it was up on a
3 shelf somewhere, right?

4 A There's a difference between if they did it and I
5 did it. If I did it, it went on the shelf. I don't
6 know what they did with it, if they did it.

7 Q You would put that slip on a shelf when you did it,
8 right?

9 A Correct.

10 Q And when they did it, you never noticed what they
11 did with it?

12 A I had no knowledge of anything that they did when
13 they were in their own rooms, or how they --

14 Q You wouldn't notice it when the chart came over to
15 you as the scribe, whether it was in there or not?

16 A It was a -- the flow of the patients, again,
17 sometimes the techs did their thing and sometimes --
18 this was the initial part of the examine. Sometimes
19 they did it, sometimes Dr. Chase did it. I have no
20 knowledge of how anything went when they were doing it.

21 Q You are not saying Dr. Chase did CST with BAT
22 tests, are you?

23 A No, I am saying that he asked me to do it, so I
24 did -- when the techs weren't doing that first part of
25 the exam, then I was doing some of that stuff.

STATE OF VERMONT
BOARD OF MEDICAL PRACTICE

COPY

In Re:)
)
David S. Chase,)
) Docket No. MPC 15-0203
)
Respondent.)
)

DEPOSITION

OF

KATHLEEN MICELI

Taken on Wednesday, April 28, 2004, 10:01 a.m., at
the offices of Sheehey Furlong & Behm, P.C., 30 Main
Street, Gateway Square, Burlington, Vermont.

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ALSO PRESENT: Michael Miceli
David S. Chase
Brienne Chase

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1 of June.

2 Q. And was your last day, in fact,
3 March 29th as predicted in this letter?

4 A. I believe so. I really don't recall.

5 Q. Okay. I'm going to ask you very briefly
6 if you remember anything about the particular
7 patients who are the complaining patients in the
8 medical practice board action; okay?

9 A. Okay.

10 Q. Do you know anything regarding the
11 treatment provided to William Augood?

12 A. No.

13 Q. Franklin Cole?

14 A. No.

15 Q. Jean Corning?

16 A. No.

17 Q. Richard Gagnon?

18 A. No.

19 Q. Marylen Grigas?

20 A. No.

21 Q. Janet Kerr, K-E-R-R?

22 A. No.

23 Q. Susan Lang?

24 A. No.

25 Q. Margaret McGowan?

1 A. No.

2 Q. Helena Nordstrom?

3 A. No.

4 Q. Judith Salatino?

5 A. No.

6 Q. Donald Olson?

7 A. No.

8 Q. Joseph Touchette?

9 A. No.

10 Q. And I take it you don't know anything
11 about the treatment provided to any patients either
12 before you arrived at Dr. Chase's office or after
13 you left his employment?

14 A. Correct.

15 Q. Your knowledge of practices there is
16 limited to the six months you were employed?

17 A. Correct.

18 Q. I want to talk about who else you've
19 talked to with regard to this case. You met with
20 Attorney Winn this morning and he gave you a copy
21 of the investigator's --

22 A. He showed me. He didn't give me.

23 Q. Sorry. He showed you a copy of the
24 investigator's notes of your interview; correct?

25 A. Correct.