

TRIAL 9.14(C):

Todd Wearl v. Dan Kinger

Instructions for the Person Playing the Role of Dr. Pat Stevens

Thank you for agreeing to play the role of a witness in our upcoming trial. Without volunteers like you, we could not conduct these trials and give the law students a realistic courtroom experience. We are very grateful for your participation.

You will be playing the role of the eye doctor who treated Todd Wearl the day after he was pepper sprayed. Please follow these instructions:

1. You should work with the student attorney who asked you to volunteer to serve as Dr. Pat Stevens to determine the appropriate amount you would charge for your testimony in the case. Within reason, you can also work with the student attorney who asked you to volunteer to create a resume reflecting a background that one might expect for an eye doctor. As long as the resulting resume is reasonable, defense counsel will not be permitted to contest it.
2. Your testimony should be based upon your letter to Mr. Wearl's original attorney. A copy is included in these instructions.
3. The student attorney who asked you to volunteer to serve as a witness might ask you questions about what you did to treat Mr. Wearl. You should answer the attorney's questions to the best of your ability.
4. The student attorneys who are opposing the student attorney who asked you to volunteer might try to speak to you about the events that you observed. Please ask the student attorney who asked you to volunteer what

s/he would like you to do if the opposing attorneys ask you to voluntarily talk to them about the case.

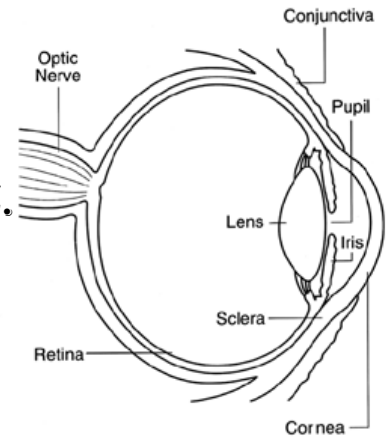
5. The student attorneys who are opposing the student attorney who asked you to volunteer may wish to schedule your deposition. The attorney who asked you to volunteer should work with you and the other attorneys to schedule a mutually agreeable time for your deposition. Please cooperate in the scheduling of this deposition. At a deposition, a witness swears (or affirms) to tell the truth, as at trial. The attorneys ask questions at a deposition and those questions and your answers are recorded and later transcribed in written form.
6. Please do the best you can in testifying based on your understanding of these events. We understand that this might be a challenge, given the nature of this testimony, especially if you have a limited medical background. [Feel free to do additional research if you believe it would help.] All we ask is that you do your best to pretend to be the doctor who treated Mr. Wearl.

UNIVERSITY EYE CARE ASSOCIATES, INC.

2020 E. CLEARVIEW AVE.

UNIVERSITY, ST

573-234-2020



December 29, [-1]

Tom Wynne

123 Lincoln Street

University, ST

Re: Todd Wearl

Dear Mr. Wynne:

You asked me to summarize my treatment of your client, my patient, Todd Wearl. You provided me with the appropriate HIPAA waiver. I am writing in response to that request.

Mr. Wearl initially presented to me as a healthy male approximately 19 years of age. He was seeking treatment and continued monitoring of his myopia and astigmatism. At the time of his first appointment in my office (by referral from his former ophthalmologist), he simply wanted to have an annual check-up and a prescription for soft contact lenses. I found his vision to be 20/200 in his left eye and 20/220 in his right eye. Bilaterally, Mr. Wearl exhibited 20/190 vision and was completely correctable to 20/20 with glasses or with contact lenses. He continued in my care receiving annual checkups without incident until August of [-1].

On August 15, [-1], Mr. Wearl presented at my office complaining of bilateral redness, pain, and edema to his eyes and lids. He explained that he had been "pepper sprayed" by a police officer the day before. I examined his eyes and found injuries consistent with application of an irritating substance (namely oleoresin capsicum) under aerosol pressures. Both eyes remained inflamed and irritated from the pepper spray. Further, upon clinical examination I determined that Mr. Wearl had suffered bilateral corneal abrasions. His left cornea was more severely scratched than the right, but both

sides exhibited serious and painful scratches. I prescribed antibiotic eyedrops and asked Mr. Wearl to return in one week for a follow-up. To a reasonable degree of medical certainty, I believe this injury was caused by the application of the pepper spray by Officer Kinger to Mr. Wearl's eyes.

I next saw Mr. Wearl on August 29, [-1], when he returned to my office complaining of pain and discharge from his left eye. Upon examination, I determined that Mr. Wearl was suffering from severe blepharitis and keratitis, but fortunately without significant stromatic involvement. I prescribed steroidal anti-inflammatory agents and a stronger antibiotic. I requested Mr. Wearl to return two days later, and upon seeing him then he appeared to be much better. I continued the anti-inflammatory and antibiotic regimen for another ten days with one more visit. At that visit, Mr. Wearl had recovered from the infection, and I asked him to return in a few months.

I next saw Mr. Wearl in December of [-1], at which time I determined that he had completely recovered from the pepper spray incident and would have no further improvement. His vision at that time was 20/240 L and 20/240 R with a combined measurement of 20/220. He remains correctable to 20/20 with an appropriate prescription, which I have provided.

Not counting his annual checkups, the total charge for my care of Mr. Wearl connected to his injury and the following infection was \$1,278.15. I have been paid by Mr. Wearl's medical insurance, but will be glad to help him recover those funds from another source if that is appropriate.

Please let me know if I can be of further assistance.

Sincerely,

Pat Stevens

Pat Stevens, MD, AAO