ORIGINAL TRANSCRIPT

06CR2961

INQUISITION

OF

ANN KRISTIN NEUHAUS,

beginning at 9:00 a.m., on the 8th day of December, 2006, at the A'ttorney General's Office, Memorial Hall, 120 SW 10th Street, in the City of Topeka, County of Shawnee, and State of Kansas, before Kenda K. Falley, Certified Shorthand Reporter.



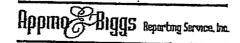


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| | 1 2 | APPEARANCES | 2 | . • |
|--|------|--|---|-------|
| . • | 3 | | | |
| • | 4 | ON BEHALF OF THE STATE OF KANSAS: | | |
| • | . 5 | | | |
| | 6 | Mr. Steven Maxwell | | |
| · ; | 7. | Attorney General's Office | | |
| | 8 | Memorial Hall, Suite 430 | | |
| | . 9 | 120 SW 10th Street | | |
| | · 10 | Topeka, Kansas 66612 | | • |
| | 11 | | - | |
| | 12 | | | |
| | 13 | ON BEHALF OF ANN NEUHAUS: | | • |
| | 14 | | | ! |
| in the second se | 15 | Mr. Jack Focht | | ٠,٠٠٠ |
| | 16 | Foulston Siefkin | | • |
| | 17 | Commerce Bank Center | | |
| · : | 18 | 1551 N. Waterfront Parkway | | , |
| | 19 | Suite 100 | | |
| | 20 | Wichita, Kansas 67206 | - | |
| | 21 | | | |
| | 22 | Also present were Tom Williams and Jared | | |
| | 23 | Reed. | | |
| | 24 | | - | |
| • | 25 | | | |
| • | | · | J | |



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| 1 | (THEREUPON, Inquisition Exhibit-1, |
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| 3 | · · · · · · · · · · · · · · · · · · · |
| 4 | 1 |
| 5 | |
| . 6 | · · · · · · · · · · · · · · · · · · · |
| . 7 | of the office of the Kansas Attorney |
| 8 | General, 120 Southwest 10th Street, |
| . 9 | Topeka, Kansas. |
| 10 | Present in the room is the court |
| 11 | reporter, Special Agent Jared Reed of |
| 12 | the Kansas Attorney General's office, |
| 13 | Special Agent in charge, Tom Williams of |
| 14 | the Kansas Attorney General's office. |
| 15 | And my name is Steven Maxwell. I'm a |
| 16 | Senior Assistant Attorney General |
| 17 | assigned to the criminal division. |
| 18 | Present also is Doctor Kristin Neuhaus, |
| 19 | that is, I believe, N-E-U-H-A-U-S. And |
| 20 | her attorney, Jack Focht, from Foulston |
| 21 | Siefkin. |
| 22 | Ms. Neuhaus, this is this is a |
| 23 | criminal inquisition. A criminal |
| 24 | inquisition is a method by which under |
| 25 | Kansas law prosecutors investigate |
| | • |

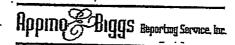


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| • | |
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| | crimes. It's a statutory mechanism. It |
| . : | has certain statutes that apply, those |
| 3 | |
| 4 | |
| 5 | A Kansas criminal inquisition is a |
| 6 | |
| 7 | |
| В | authorized by the Court in this case, |
| 9 | District Judge Richard Anderson. And |
| . 10 | Judge Anderson authorized the subpoena, |
| 11 | and that's what commanded you to appear |
| ·12 | today. |
| 13 | As a witness called in a criminal |
| [.] 14 | inquisition you have certain rights, the |
| 15 | first right of which is that you may be |
| 16 | represented by counsel if you desire. |
| 17 | Obviously you have Mr. Focht here and he |
| .18 | is, I assume, acting as your attorney at |
| .19 | your request. That's at least what he |
| 20 | notified me of. |
| 21 · | DOCTOR NEUHAUS: Yes, correct. |
| 22 | MR. MAXWELL: The second right |
| 23 | you have is that you have the right to |
| 24 | refuse to answer any question which |
| 25 | might personally incriminate you in the |
| | i i i i i i i i i i i i i i i i i i i |



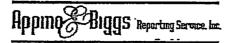
| • | | |
|--------|---|---|
| 1 | commission of any crime in the State of | 5 |
| · , 2 | Kansas. That's commonly called the | |
| 3 | Fifth Amendment, or taking the Fifth or | • |
| · · ·4 | asserting your right to the Fifth | |
| 5 | Amendment of the United States | • |
| 6 | Constitution. Do you understand that? | |
| . 7 | DOCTOR NEUHAUS: Yes, I do. | |
| . 8 | MR. MAXWELL: Do you understand | |
| 9 | that you have the right to an attorney? | |
| · 10 | DOCTOR NEUHAUS: Yes. | |
| . 11 | MR. MAXWELL: Okay. So you have | |
| 12 | both of those rights in a criminal | |
| . 13 | inquisition. We're going to get into | 1 |
| 14. : | some questions here shortly and we'll be | |
| 15 | doing that once we put you under oath. | |
| 16 | The first thing I need to do is identify. | |
| . 17 | you for the record. Could you say your | |
| . 18 | full, legal name for the record. | |
| 19 | DOCTOR NEUHAUS: Ann, A-N-N, | ŀ |
| . 20 | Kristin, K-R-I-S-T-I-N, Neuhaus, | |
| 21 | N-E-U-H-A-U-S. | |
| 22 | MR. MAXWELL: Would you go ahead | |
| 23 | and swear her. | |
| . 24 | ANN KRISTIN NEUHAUS, | |
| . 25 | called as a witness, was sworn and | |
| | | |



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| , | | |
|-----------------|--|---------|
| 1 | testified as follows: | 6 |
| 2 | DIRECT-EXAMINATION | • |
| 3 | BY MR. MAXWELL: | |
| 4 | Q. That's your that's your full | |
| 5 | legal name right now? | |
| 6 | A. Yes. | |
| · . 7 | Q. Have you ever gone by any other | |
| .8 | name? | - |
| .9 | A. I was born Eisenbise, | . |
| 10 | E-I-S-E-N-B-I-S-E, and my stepfather's | l |
| 11 | name was Larson, L-A-R-S-O-N. I used | |
| 12. | that for a while. And then I changed my | |
| 13 | name back to Eisenbise when I was in | |
| 14 | college. That was my father's name. | |
| 15 | Then my first marriage I took the name | |
| 16 | Neuhaus and I just kept that because | |
| 17 | that was my professional name. | |
| 18 | . Q. Understood. Okay. Now you've | |
| .19 | been sworn as a witness under oath which | |
| 20 | means that you that you have to | |
| 21 | answer my questions truthfully, do you | \cdot |
| 22 | understand that? | |
| 23 | A. Yes, I do. | |
| 24 [.] | Q. Okay. Everything that we say is | |
| 25 | being taken down by a court reporter and . | |



| | 7 |
|------|--|
| 1 | ultimately a transcript will be made of |
| 2 | of this interview. It's relax. |
| 3 | It's not a it's not a court |
| 4 | proceeding other than the fact that |
| 5 | we're taking testimony by a court |
| . 6 | reporter. It's not anything formal. |
| 7 | I'm just going to ask some questions. |
| 8 | We'll start with you where do you |
| 9 | live? |
| 10 | . A. I live at the address he |
| 11 | delivered the subpoena. |
| · 12 | Q. Go ahead and say it for the |
| 1,3 | record. |
| 14 | A. Well for many years I have been |
| 15 | subject to death threats, and I would |
| 16 | rather not have it go into a public |
| 17 · | record. I think you're all aware of |
| 18 | where I live and I'd rather have that |
| 19 | not be available readily to the members |
| 20 | of the State of Kansas if I can help it. |
| 21 | Q. This is a sealed court |
| 22 | proceeding. This is not going to be |
| 23 | available to the public. This is a |
| 24 | criminal investigation. It's been |
| 25 | sealed by court order. |
| | |



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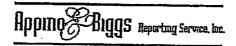
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| - | |
|-----|--|
| | 1. A. If you can promise me that it |
| | never ever will be |
| | MR FOCHT: Wait a minute, you |
| ٠ 4 | |
| 5 | |
| . 6 | |
| 7 | of the anti people who made death |
| : 8 | threats to all of us. |
| . 9 | BY MR. MAXWELL: |
| 10 | Q. Ma'am, all I could tell you is |
| 11 | that you have to answer my questions and |
| 12 | and that this has been sealed by |
| 13 | court order |
| 14 | A. Okay. I live at the address that |
| 15 | you delivered the subpoena, which is on |
| 16 | the subpoena. |
| 17. | Q. Okay. Well that would be |
| ·18 | sufficient. And what's your date of |
| 19 | birth? |
| 20 | A. 4-19-58. |
| 21 | Q. Okay. What do you have any |
| 22 | occupation are you a |
| 23 | A. I'm a physician. I am a |
| 24 | physician. I'm self-employed. |
| 25 | Q. Okay. Do you have a business |



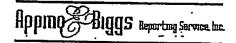
| _ | | | |
|-------|------|--|---|
| | 1 | address? | 9 |
| • | 2 | A. My home is my current business | |
| | 3 | address. I used to have a clinic. It's | |
| | 4 | no longer operating. | |
| | 5 | Q. Okay. Do you practice anywhere | |
| | 6 | currently like another office or or | |
| · · . | . 7 | do you like have a I mean you say out | |
| | 8. | of your home, do you practice out of | |
| · | 9 | . Aont pome; | |
| | 10 | A. No, I'm a consultant. I practice | . |
| • | 11 | at two different places. | |
| | 12 | Q. You don't have any like five | |
| | . 13 | hours a week or | |
| | · 14 | A. I don't see patients at my home. | |
| | .15 | Q or see patients at your home? | |
| | 16 | A. No, I don't see patients at my | |
| | 17 | home generally. Just occasionally. | |
| • | 18 | Q. Are you married? | - |
| | 19 | A. Yes. | |
| | 20 | Q. Okay. Who is your husband? | |
| | 21 | A. Michael Caddell, C-A-D-D-E-L-L. | |
| | 22 | Q. Okay. When you got tell us a | |
| | 23 | little bit about your your | |
| | 24 | educational background up to this day. | 1 |
| • | .25 | A. Well, I went to kindergarten in | |
| | | • | |



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| • | | |
|--------------|---|----|
| - 1 | Hugoton, Kansas, and then we moved to | 10 |
| . 2 | | |
| ·3 | 3 | |
| 4 | | |
| 5 | j | |
| · , 6 | completed high school in the Hugoton | |
| · Ż | school systems: | |
| 8 | Went to Kansas State University from | |
| . 9 | 1976 to 1980. I attended the University | . |
| 10 | of Kansas Medical School from 1981 to | |
| 11 | 1985 and I did my internship with the | |
| 12 | Consortium for Health Education in | |
| 13 | Kansas City, Missouri which was a | |
| 14 | based at Truman Medical Center. | |
| 15 | Q. Maybe I missed it; where did you | |
| 16 | go to undergraduate? | |
| 17 - | A. Oh, Kansas State University in | |
| 18 | Manhattan, Kansas | |
| 19 | Q. Manhattan. Then you went to | |
| 20 | medical school at KU? | |
| 21 | A. Correct. | |
| 22 · | Q. Okay. What year did you | |
| 23 | graduate? | |
| 24 | A. 1985. | |
| 25 | Q. 1985. Are you currently licensed | |
| | | |



| • | |
|--------|--|
| · ; 1 | to practice medicine? |
| . 2 | A. In Kansas, yes. |
| 3 | Q. Anywhere else? |
| ·4 | A. No. |
| 5 | Q. No, okay. · Have you ever |
| 6 | practiced anywhere else? |
| 7 | A. I had a license in Missouri, but |
| . 8 | I didn't actually practice there. |
| . 9 | Q. Okay. That is no longer active? |
| 10 | A. No. |
| , 11 | Q. Okay. Medical school, what was |
| 12 | your specialty or did you have one? |
| . 13 . | . A. There isn't a specialty in |
| 14 | medical school. |
| .15 | Q. My ignorance maybe. |
| . 16 | A. That's okay. No, we just have |
| . 17 | the usual curriculum. |
| 18 | Q. Okay. Sorry. |
| 19 | A. That's okay, sure. |
| . 20 | Q. But, you know, I don't know |
| . 21 | anything about really medical school to |
| . 22 | that extent so I just kind of I mean |
| 23 | do you like do you like I thought |
| . 24 | you kind of like at the last of your |
| 25 | medical school kind of specialized in an |



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| | . : | |
|------|---|----|
| 1 | area. You don't do that? | 12 |
| 2 | A. Well, there are electives that | |
| 3 | you can take. | |
| 4 | Q. Oh, okay. Just like college? | |
| . 5 | A. Right. | |
| · 6 | Q. All right. All right. You got | |
| 7 | out of medical school in 1985. Did you | |
| 8 | have to do like a residency or | |
| 9 | internship or something like that? | |
| 10 | A. The State of Kansas requires that | |
| 11 | you have one year of residency at least | |
| ·12 | at a minimum. | |
| 13. | Q. Okay. What what did you do | |
| 14 | there? | |
| - 15 | A. I did mine in internal medicine | |
| 16 | at Truman Medical Center. | |
| , 17 | Q: And that's in Kansas City? | |
| 18 | . A. Right. I think they call it | |
| . 19 | they have a different name now, .Hospital | |
| 20 | Hill or something, but it's TMC, the | |
| 21 | downtown. | |
| 22 | Q. The one in Kansas City, Missouri | |
| 23 | itself? | |
| 24 | A. Right. In the downtown area, | |
| 25 | right. Not the one that's out west or | 1. |
| | • | |



| | • | | |
|-------------|------|---|----|
| · . | 1 | east. | 13 |
| | .2 | Q. Internal medicine, that is | • |
| | 3 | A. Internal medicine is primary | |
| ··· | 4 | adult medicine that's non-surgical. So | |
| | 5 | it's everything that's not surgical and | |
| | 6 | not some other subspecialty and not | |
| · : | 7 | pediatrics. | } |
| · · · · · · | 8 | Q. Covers everything? | |
| • | 9 | A. Pretty much, except for | |
| | · 10 | pediatrics. | |
| | .11 | Q. Anybody that is in a hospital is | |
| | 12 | what you're saying? | |
| | 13 | A. Generally. | |
| | . 14 | Q. That doesn!t get operated on? | |
| ٠. | . 15 | A. That doesn't need to be operated | - |
| • | 16 | on, right. | ŀ |
| | 17 | Q. Right, okay. Okay. And then | |
| | 18 | after your residency then what did you | |
| | 19 | do? | |
| | 20 | A. I worked for about three years | |
| | 21 | with a D.O. physician in Kansas City, | |
| | 22 | Kansas downtown. | |
| | 23 | Q. D.O. What's what's D.O.? | |
| | 24 | A. Oh I'm sorry. Doctor of | |
| | 25 | osteopathy. There is D.O. and M.D. | |



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He :--1 2 Q. You're an M.D.? 3 Right. They're pretty much 4 equivalent. 5 I knew that. I just didn't 6 understand when you said -- okay. 7 I'm sorry. Anyway he had a small 8 inner city clinic in Kansas City, 9 Kansas, and I worked there for three 10 years to pay off -- primarily to pay off - 11 a scholarship that I had through the 12 University of Kansas. 13 Q. Was that one of those scholarships where they pay for you and 14 then you have to practice in a small 15 16 town? 17 · A . ·Correct, right. 18 I've heard of those. .Q. 19 Under-served area, right. Α. 20 Under-served, okay, and so you 21 were like a small town doctor? 22 Kind of except it was the 23 Strawberry Hill area of Kansas City. 24 Just an older neighborhood that had a 25 high degree of -- of indigent



| | - | | | |
|---|---|-------|--|--|
| | | 1 | population, so it had qualified for a | |
| | • | 2 | long time as part of the public health | |
| | • | 3 | service. | |
| | | 4 | Q. You would have done that from | |
| | • | 5 | about '86? | |
| | | . 6 | A. '86 to about '89. | |
| | • | 7 | Q. Okay. And then and that's | |
| | | · . 8 | kind of like was that was that a | |
| | | 9 | general practice kind of like? | |
| | • | 10 | A. That's a general practice. | |
| | | 11 | Q. Like the sniffles and | |
| | | 12 | A. Pediatrics, geriatrics, everything | |
| | | · 13 | pretty much. He he did the | |
| | | 14 - | obstetrics. | |
| | | 15 | Q. Kind of like a walk in doctor's | |
| | | 16 | office? | |
| • | | 17 | A. We had appointments. It was a | |
| | • | 18 | regular but there were walk ins and | |
| | | 19 | minor injury type things. | |
| | | 20 | Q. Okay. Who was the physician? | |
| | | 21 | A. Malcolm Knarr, K-N-A-R-R. | |
| | | 22 | Q. K-N-A-R R, okay. That was in | |
| | • | 23 | Kansas or Missouri? | |
| | | 24 | A. That's in Kansas. | |
| | | 25 | Q. That's in Kansas. Okay. That | |
| | • | _ | Jacy. Inac | |



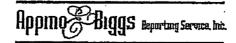
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| • | | |
|------|--|-------------|
| 1. | would have been was that Wyandotte | 16 |
| . 2 | County or Johnson County? | |
| 3_ | A. That's correct, Wyandotte. | |
| 4 | Q. Wyandotte. Okay. So then after | |
| 5 | You were there for three years, then | |
| . 6 | what did you do? | |
| . 7 | . A. Then I worked for two years in | |
| 8 | Westmoreland, Kansas, which is in | |
| . 9 | Pottawattomie County, with a general | |
| 10 | practitioner there. I'm trying to think | |
| 11 | of his name. Anyway his name is | |
| 12 . | escaping me right now, but anyway it was | |
| 13 | general practice including hospital | |
| 14. | patients in an emergency room. Just | |
| 15 | general practice. Kind of everything. | |
| 16 | That was the small town doctors post. | |
| 17 | The old time physicians, but the | . |
| 18 | doctor who was established that practice | |
| 19 | did house calls and did his own | |
| 20 . | tonsillectomies. | |
| 21 | Q. Really. | |
| 22 | A. Yeah, it was a very rural | |
| 23 | practice. | |
| 24 | Q. So then you just kind of did | |
| 25 | everything basically? | |



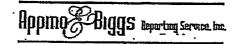
| • | | The state of the s |
|---------|------|--|
| · · · . | 1 | A. Pretty much. |
| | 2 | . Q. Whatever walked in the door? |
| • | 3 | - A. Exactly. |
| | 4 | Q. Okay. You did that for |
| • | 5 | A. I did that for about two years, |
| • | 6 | and I also did some locum tenens |
| - | 7 | THE REPORTER: Some what? |
| | 8 | A. Locum tenens, L-O-C-U-M, T-E-N-E-N |
| · | 9 . | S. |
| | 10 - | BY MR. MAXWELL: |
| | 11 | Q. What is that? |
| | 12 ' | A. Basically when doctors in the |
| | 13 | area wanted to take a vacation they |
| - : ' | 14 | would need somebody to cover their |
| | 15 | their emergency patients, and I would do |
| • . | 16 | that. |
| | 17 | Q. Is that some kind of Latin |
| | 18 . | phrase, or |
| | 19 | A. Yeah, it means taking the place |
| | 20 | of. Locum is place and tenens to hold. |
| | 21 | Q. So you would |
| | 22 | A. It's a common thing for retired |
| | 23 | physicians to do so they can not have a |
| • | 24 | practice to limit them but they can make |
| • | 25 | a little extra income. |



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18 1 So you would -- like somebody 2 would go on two week's vacation and you'd go in and cover their -- their 4 practice? 5 Just the emergency practice, -6 right, on the weekends usually or ·7 sometime when they didn't have a partner 8 in the office. It's a common practice, 9 and there are several -- yeah, I guess 10 they would be like employment agencies 11 for physicians that place people. 12 did that for a while while I was looking 13 for a practice and just kept it up for a 14 little while intermediately between -15 different places. 16 Is that like a network or 17 something? .18 Well, I think -- you know, 19 basically -- I can't even remember. 20 There -- I can't think right now the 21 name of the different organizations. 22 But if you put your name on the list 23 they'll call you and say, you know, 24 Doctor Joe Brown is -- is going to be 25 gone and needs somebody to cover for,



| | 1 | you know, X, Y, Z town, and I did that | 19 |
|-----|--------|--|------|
| • | 2 | for awhile. | |
| | 3 | Q. Is that I mean that just | |
| | 4 | they can send you anywhere they want, | |
| | . 5 | right? | |
| | 6 | A. Anywhere you want to go. It's a | · |
| | 7 | choice if you want to take the | |
| • | 8 | placement. It's just like temping with | |
| | 9 | anything else essentially. | |
| | 10 | Q. I see. Okay, I got it. And you | |
| | 11 | did that for how long? | |
| | 12 | A. I did that kind of on and off | |
| | 13 | from '88 through about, I don't know, | |
| | . 14 . | '91 or so. It wasn't a big part of my | |
| | 15 | practice. | |
| | 16 | Q. And then so then you're still | |
| • ' | 17 | living in Westmoreland at the time? | |
| | 18 | . A. I was living in Kansas City when | · |
| | 19 | I started it, and I continued it for a | . . |
| | 20 | while when I was in Westmoreland. | |
| | 21 | Q. Okay. And then after that | |
| | 22 | concluded, what did you do next? | |
| | 23 | A. I worked for about a year and a | |
| | 24 | half at K-State at the student health | |
| | 25 | center | |
| | | | |



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| • | | | |
|-----|------|--|----|
| | 1 | Q. Okay. In Manhattan? | 20 |
| | 2. | A. Uh-huh. | |
| | 3 | Q. Okay. What is that? | |
| | 4 | A. It's the it's the student | |
| | 5 | health center. We took care of routine | |
| · | ·6 | illnesses for the students. We had an | |
| | 7 | acute care center that operated limited | |
| | 8 | hours that prevented them from having to | |
| | 9 | use the local hospitals for minor | |
| . • | . 10 | Q. Walk in students that sprain | |
| ·· | 11 | their wrist or | |
| | 12 | · A. Right, routine types of | |
| · · | · 13 | illnesses. | |
| • | · 14 | Q. Flu or | |
| • | 15 | A. Right, whatever you would call a | |
| | 16 | general practice for the students. | |
| • | 17 | Anything other than surgery. We did | |
| • | .18 | referrals for surgery when they were | |
| | 19 | necessary. | |
| • | 20 | Q. Okay. And that that was at | |
| | 21 | K-State? | |
| | 22 | A. K-State. | |
| | 23 | . Q. And then you were there until | |
| • | 24 | when approximately? | |
| | 25 | A. I was there until 1993. | |



| 1 Q. Okay. Then what did you do? | 21 |
|---|------|
| | |
| A. Well, early in '93 Doctor Kn | arr, |
| 3 the doctor that I worked with in Kan | |
| City, had some licensing issues and | |
| 5 asked me to come in and do basically | |
| 6 locum tenens for him while he worked | out |
| 7 his license issue. And because his | |
| 8 practice involved abortion, I ended | up |
| having picketers at the office at the | e |
| 10 Kansas State facility. And | |
| 11 Q. Kansas State you mean K-State | ? |
| 12 A. K-State ended up having picke | ters |
| 13 and the building was graffiti'd and | _ |
| 14 authorities at the university were | |
| . 15 harassed. And because of the hullaba | 100 |
| 16 I resigned my position there and ende | d |
| 17 up just staying at the practice with | · |
| 18 Doctor Knarr and moved back to Kansas | |
| 19 City. | |
| . 20 Q. And that would be the Strawber | ry . |
| 21 Hill kind of area? | |
| 22 A. He still did he still have | |
| that clinic? He did. You're right, h | ie . |
| had moved to a different building, bu | t l |
| 25 it was still just a couple of blocks | |



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| • | | |
|------|--|----|
| ·1 | away. " : | 22 |
| . 2 | Q. Okay. And that practice was | |
| 3- | what? | |
| 4 | A. It's a general practice including | |
| . 5 | pregnancy termination, but we still had | |
| · 6 | all the old family practice patients. | |
| 7 · | Q. Okay. How long did you stay | |
| 8 | there? | |
| 9 | A. I'm trying to think. Mid '90's. | ٠ |
| 10 · | I don't know, I can't remember exactly. | |
| 11 . | '96 maybe or '97. Somewhere in there. | |
| 12 | Q. Okay. What did you do after you | |
| 13 | left there? | |
| 14 | A. Well, Doctor Knarr had opened a | |
| 15 | clinic in Topeka, and so I had been | |
| . 16 | working at both the Kansas City facility | |
| 17 | and the Topeka facility. And after I | |
| 18 | quit working at the Kansas City | |
| 19 | facility, I was living in Leavenworth at | |
| 20 | this point. I continued to work at the | |
| 21 | Topeka facility until '97. He lost his | |
| 22 | lease there, so that practice closed. | |
| 23 | But at | |
| 24 | Q. The Topeka facility in Topeka, | |
| 25 | Kansas? | |



| • | | |
|-----|------|--|
| • | 1 | A. Correct, yeah, here in town. |
| · | 2 | Q. Okay. Sorry, I sometimes I |
| | 3 | miss things and I just |
| | 4 | A. I forgot we were in Topeka. |
| | 5 | Q. First off I got my ears are |
| | 6 | I have issues so |
| • | 7 | A. I'll speak up, I'm sorry. I |
| | 8 | mumble. |
| | 9 | Q. That's all right. Topeka, |
| | 10 | Kansas, okay, and so you're working at |
| • | 11 | the office here in Kansas in Topeka |
| | 12 | and that was operated by? |
| | 13 | A. That was one day a week. It was |
| • | 14 | Doctor Knarr's other clinic and I worked |
| • | 15 | here one day a week. That was the only |
| • | 16 | time it was open. |
| _ | . 17 | Q. Okay. |
| | 18 | A. So he lost his lease and lost a |
| | 19 | lease dispute well he won the lease . |
| | 20 | dispute, but then he forgot to renew the |
| • • | 21 | lease. So the practice was closed |
| | 22 | suddenly just with no real notice |
| • | 23 | because of a lease dispute. |
| | 24 | But around that time Doctor Dale |
| | 25 | Clinton from Lawrence called me. He was |

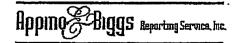


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| • | | |
|------|--|-----|
| .1 | looking for someone to take over his | . 2 |
| . 2 | practice, and after a couple of other | |
| 3 | requests had fallen through he asked me | |
| 4 | if I would like to just take over his | |
| 5 | practice because he wanted to retire. | |
| 6 | He was in his 80's and | |
| 7 | Q. Dale Clinton? | |
| 8 | A. Dale Clinton. He had been in | |
| .6. | Lawrence, Kansas for 30 years. And he, | |
| .10 | you know, had a fairly active practice | |
| 11 | still and wanted someone to take over | |
| 12 | the care of his records and his | |
| 13 | remaining patients. So that turned out. | |
| 14 | to be timely since I had no place to | |
| 15 | · continue that practice in Topeka | |
| 16 | Q. Okay. | |
| 17 . | . A. Okay. So we moved over some time | · |
| 18 | in the spring of when was that. No,. | |
| 19 | probably in the fall of 1997. I'm not | • |
| 20 | certain about that. I know it was on | |
| 21 | the day when that bike shop burned down. | • |
| 22 | That was the day we moved. There was a | |
| 23 | huge fire and all these fire trucks were | |
| 24 | a block away from where we were moving. | |
| 25 | Q. And that was downtown Lawrence? | |
| | | |

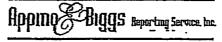
| | • | | |
|---------------------------------------|------|---|----|
| · · · · · · · · · · · · · · · · · · · | 1 | A. Right. | 25 |
| | 2 | Q. Okay. So you moved over there. | |
| | 3 | Did you like physically move or are you | • |
| • | 4 | just talking about move the offices? | |
| | 5 | A. Physically moved the office | |
| • | 6 | well | |
| • | 7 | Q. But you were still living in | |
| • | 8 | Leavenworth? | |
| • • | 9 | A. I was still living in | |
| | 10 | Leavenworth. | |
| | 11 | Q. Okay. So so you you took | |
| | 12 | over his practice? | |
| | 13 | A. Right, correct. | |
| | 14. | Q. And physically that means you | |
| | 15 | just basically go in and start running | |
| | 16 | the place, right? | |
| | . 17 | A. Well, we had an attorney draw up | |
| | 18 | transfer papers, right. | |
| | 19 | Q. Sure. Right, I understand. | |
| | 20 | A. Right, exactly, and he was there | |
| | 21 | for awhile. | |
| • | 22 | Q. And then he retired? | |
| | 23 | A. Kind of slowly. He had patients | |
| | 24 | that I couldn't see. He was a pilot. | |
| | 25 | He could do exams for pilots, and he | |



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26 1 MR. WILLIAMS: FAA certified. . 2 Right, he continued to do that since I wasnit trained to do that. 4 BY MR. MAXWELL: 5 Right, so then you were there 6 from fall approximately of '97 until --7 A. Well, Doctor Clinton had been 8 there for 30 years with no lease and no 9 contract. Just by mutual agreement. 10 Within a year of us moving in somebody 11 new bought the building and they asked 12 some of the tenants to leave 13 essentially. They felt that certain businesses weren't compatible with their 14 15 vision to the building. So we were 16 given six months notice to vacate. 17 our lease was -- or our rent was doubled 18 every month until we moved, so we had no 19 real opportunity. 20 Doubled every month? 21 Something outrageous. It went 22 from 500 to something like 1,500 over a: 23 period of two or three months. So we 24 had to really scramble to find a new 25 building. And we were lucky enough to



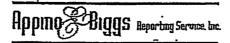
| find a sympathetic landlord within about three months, but the rent was now \$2,500 instead of 5, and that building was for sale also, and the new owner who bought the building increased the rent even further because he knew that there was a doctor's office there, but he didn't know it was an abortion clinic, so he MR. FOCHT: Doctor, I'm going to advise you not to talk about abortion or abortion clinics during this deposition under your rights under the Fifth Amendment. And that the attorney general has said that this investigation will concern doctors involved in abortion or giving referral information, that sort of thing. And in your interests I would advise you to invoke the Fifth Amendment privilege if you wish to. And I have written that out for you. A. On the advice of counsel I | | | |
|--|------|---|----|
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| privilege if you wish to. And I have written that out for you. A. On the advice of counsel I | 19 | And in your interests I would advise | |
| written that out for you. A. On the advice of counsel I | 20 | you to invoke the Fifth Amendment | |
| 22 written that out for you. 23 A. On the advice of counsel I | 21 | privilege if you wish to. And I have | |
| and advised of codinger i | 22 | • • | |
| | 23 | A. On the advice of counsel I | |
| decline to answer that question on the | 24 | decline to answer that question on the | |
| 25 grounds that the answer might either . | 25 | grounds that the answer might either . | |



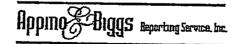
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| 1 | incriminate me or might lead to the | 28 |
|------|--|----|
| ·. 2 | discovery of incriminating evidence. | |
| 3 | | |
| · 4 | Q. Okay. Well let's deal with that. | |
| . 2 | Doctor, what I'm about to hand you is a | |
| 6 | I'll hand you a copy. It's | |
| 7 | MR. FOCHT: Let me see it please. | |
| 8 | MR. MAXWELL: Granted use of | |
| 9 | immunity. I'm going to grant I'm | |
| 10 | going to read it into the record. This | |
| 11 | is signed today by the Attorney General | |
| 12 | of Kansas, Phill Kline. It says it's | |
| 13 | quoted as follows, Grant of Immunity. | |
| 14 | It's on the Attorney General's | |
| 15 | letterhead and it says, I, Phill Kline, | |
| 16 | duly elected, qualified and acting | |
| 17 | Kansas Attorney General on this 8th day | |
| 18 | of December, 2006, on behalf of the | |
| 19 | State of Kansas do hereby authorize and | |
| 20 | grant to Ann Kristin Neuhaus pursuant to | |
| 21 | K.S.A. 22-3415(b)(2), use and derivative | |
| 22: | use immunity, except as hereafter stated | |
| 23 | for any statement or testimony she shall | |
| 24 | be compelled to give in the criminal | |
| 25 | inquisition designated as Shawnee County | |
| | | |



| Case No. 04-IQ-3. Such statements or testimony or any evidence derived therefrom shall not be used against Ann Kristin Neuhaus in any prosecution for a crime under the laws of the State of Kansas or municipal ordinance. This does not provide immunity for future crimes committed. This grant of immunity from prosecution does not extend to perjury or false statement. This grant of immunity does not extend to perjury or false statement. This grant of immunity does not prohibit, prevent or otherwise inhibit the prosecution of Ann Kristin Neuhaus for any charges now pending against her in any court. Further, such immunity does not prohibit or prevent a prosecution of any criminal charges against Ann Kristin Neuhaus already filed and pending before a court of law or is based upon conduct that |
|--|
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| 4 Kristin Neuhaus in any prosecution for a 5 crime under the laws of the State of 6 Kansas or municipal ordinance. This 7 does not provide immunity for future 8 crimes committed. 9 This grant of immunity from 10 prosecution does not extend to perjury 11 or false statement. This grant of 12 immunity does not prohibit, prevent or 13 otherwise inhibit the prosecution of Ann 14 Kristin Neuhaus for any charges now 15 pending against her in any court. 16 Further, such immunity does not prohibit 17 or prevent a prosecution of any criminal 18 charges against Ann Kristin Neuhaus 19 already filed and pending before a court |
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| or prevent a prosecution of any criminal charges against Ann Kristin Neuhaus already filed and pending before a court |
| 18 charges against Ann Kristin Neuhaus 19 already filed and pending before a court |
| 19 already filed and pending before a court |
| l l |
| |
| 21 occurred before this date without the |
| 22 use or derivative use of any statement |
| 23 made herein. |
| 24 This grant of use and derivative use |
| 25 of immunity simply guarantees that |



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| • | nothing that Ann Kristin Neuhaus may say . |
|-------|--|
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| .6 | |
| ·7 | Attorney General. And I have marked it |
| 8 | as Inquisition Exhibit No. 1 and I will |
| . 9 | give it to the court reporter to be |
| · 10 | attached to the transcript. |
| 11 . | Let me explain this. This is |
| 12 | derivative use and derivative use |
| 13 | immunity which you've now asserted your |
| 14 . | Fifth Amendment rights under the Kansas |
| 15 | or the Kansas and United States . |
| 16 | Constitution. That once use immunity |
| .17 , | and derivative use immunity is given |
| 18 . | under this statute by a duly authorized |
| 19 | official, which the Attorney General is. |
| 20 | You can no longer assert the Fifth |
| 21 | Amendment. |
| 22 | I mean because what happens is you |
| 23 · | are no longer what you say here today |
| 24 | can no longer be used against you in a |
| 25 | court of law, so you can no longer |
| | |



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| | | 31 |
|------|--|----|
| 1 | assert the Fifth Amendment as a basis to | 31 |
| 2 | refuse to answer the question. | |
| 3 | And you can feel free to talk to your | |
| . 4 | counsel if you wish to. We can take a | |
| 5 | break if you want to do that. But I'm | |
| . 6 | going to ask questions and that can no | |
| 7 | longer be a basis for refusing to answer | |
| 8 | my questions. | |
| .9 | MR. FOCHT: It could be a basis, | |
| 10 | of course, if any question would | |
| 11 | incriminate her or tend to incriminate | |
| 12 - | her under any federal crime, and it | |
| 13 | could be utilized if this is not an | |
| 14 | adequate grant of immunity. And I | |
| 15 | submit that the last paragraph says that | 1 |
| 16 | it is not a grant of either | |
| 17 | transactional or use immunity in that it | |
| 18 | designates only the criminal inquisition | . |
| 19 | designated as Sedgwick (sic) County Case | |
| 20 | No. 04-IQ-3, and nothing derived from | |
| 21 | that testimony will be used against her. | |
| 22 | That, of course, is not a criminal case. | |
| 23 | That is an inquisition and you are not | |
| 24 | granting her immunity in a criminal | |
| 25 | case. | |
| | • | |



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| | | · |
|-------------------|--|----|
| 1 | MR. MAXWELL: Counsel, I'm not | 32 |
| 2 | going to argue with you but | |
| 3 | MR. FOCHT: That's right. | |
| 4 | MR. MAXWELL: Kansas law says | |
| 5 | that in re: Birdsong or State versus. | |
| 6 | Birdsong says that when the State | |
| 7 | authorized state official grants | |
| 8 | immunity; use or otherwise, to any | |
| 9 | witness that that use immunity extends | |
| 10 | to federal prosecution as well. | |
| 11 | MR. FOCHT: No. There is another | |
| 12 | case that says it doesn't, and you know | |
| 13 | that as well as I do. But that's not | |
| 14 | the major problem. The major problem is | |
| 15 | it doesn't apply to any Kansas case | · |
| 16 | except this inquisition according to | |
| 17 | this. | |
| 18 | MR. MAXWELL: It says that | |
| -19 | nothing she says here today will be used | |
| 20 [.] . | against her for the prosecution of any | |
| 21 | crime or violation of any municipal | |
| 22 | ordinance. So it can't be much clearer | |
| 23 | than that. | |
| 24 | It says it won't be used against her | . |
| 25 | what she says here today in any in | |



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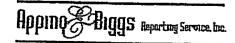
33 1 the prosecution of any crime or 2 violation of any municipal ordinance. 3 So I don't know what else there is to 4 say about it. 5 MR. FOCHT: Okay. If that is the 6 position that you're taking that it 7 can't be used in a criminal case, but 8 the last paragraph says it just can't be 9 used in the inquisition. 10 MR. MAXWELL: Well, no, that's 11 not what it says. It says -- it says in 12 the second -- it says in the second to 13 last statement in paragraph one, such 14 statements or testimony or any evidence 15 derived therefrom shall not be used 16 against Kristin Neuhaus in any 17 prosecution for a crime under the laws 18 of the State of Kansas or any municipal 19 ordinance. I mean that means --20 MR. FOCHT: I understand. 21 MR. MAXWELL: -- that it applies 22 to what she says today can't be used in 23 any future prosecution or any violation 24 of any municipal ordinance anywhere in 25 this State. And this last paragraph



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| | | • |
|------|--|------------|
| . 1 | simply guarantees that it's just a | 34 |
| . 2 | summary and it basically save that it | |
| 3 | just guarantees that what she says here | |
| 4 | today is not going to be used against | |
| 5 | her in courts of law in this State | |
| 6 | and | |
| 7 | MR. FOCHT: And I assume that you | |
| 8 | are guaranteeing since this has some fax | |
| 9 | information on the top that Phill Kline | |
| 10 | did sign this today? | |
| 11 | MR. MAXWELL: Yes. I I faxed | |
| 12 | it to him at where he is located, he | |
| 13 | I talked to him on the phone before I | |
| 14 | faxed it and after I faxed it, he signed | |
| . 15 | it and sent it back. I recognize the | |
| 16 | signature as the Kansas Attorney | |
| 17 | General. | |
| 18 | MR. FOCHT: If that's your | |
| 19 | guarantee then I'll accept that. | |
| 20 | MR. MAXWELL: Okay. | |
| 21 | BY MR. MAXWELL: | |
| 22 | Q. So let's go on. We were back to | |
| 23 | your sort of your history there a | |
| 24 | little bit, and you were working you | . |
| 25 | were talking about where you were | |
| | | <u>.</u> L |



| | | |
|--------------|--|-------------|
| 1 | working in Lawrence beginning in the | 35 |
| . 2 | fall of '97. Can we get back to that | , |
| 3 | area, okay. | |
| 4 | Tell us about you were looking for a | |
| . 5 | lease and started working there and what | |
| 6 | what happened? | |
| 7 | A. Well, I mean, I practiced at the | |
| . 8 | new address. I moved my practice to the | |
| 9 | new address. | |
| 10 | Q. Right, okay. And then you | |
| . 11 | started and then this new building | |
| 12 | you had you got a new lease and it was | |
| 13 | sort of the same practice as this doctor | |
| . 14 | you took over, but you got moved it | |
| 15 | to a new building? | |
| 16 | A. Correct. | |
| . 17 | Q. Okay. And where was that at? | |
| 18 | What was the address, do you remember? | |
| 19 | A. 205 West 8th. | . |
| 20 | Q. The new address? | 1 |
| 2 <u>.</u> 1 | A. Correct. | |
| . 22 | Q. Okay. What kind of practice was | |
| 23 | this? I mean was this | |
| 24 | A. Well it was Doctor Clinton's | |
| 25 | practice, plus patients I had from | |
| | | |



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| . 1 | | 36 |
|-------|--|----|
| 2 | be like a gynecologic practice minus the | |
| 3 | surgery essentially. Well, no, not | • |
| 4 | hospital based surgery. | |
| 5 | · · · Q.: Kind of like OB-GYN, is that | |
| 6 | A. Kind of, only I didn't do | |
| 7 | obstetrics so it would be just | į |
| · .8· | gynecology primarily. | |
| 9 | Q. Okay. Women? | |
| 10 | A. With a little bit of family | |
| 11 . | practice, right. | |
| 12 | . Q. Okay. | |
| 13 | A. Well within the scope of family | |
| 14 | general practice. It just was a more | |
| 15 | specifically related to well | |
| 16 | ninety-nine percent of my patients were | |
| · 17 | women. | |
| 18 | Q. Okay. And how long a time period | |
| 19 | did you stay at that location? | |
| 20 | · A. Until September of 2002. | |
| 21, | Q. So about five years? | |
| 22 . | A. I guess. That sounds about | |
| 23 | right. | |
| 24 | Q. Yeah. Okay. And this practice | i |
| 25. | at this particular clinic was in | |

| | • | | _ |
|-----------|------|--|---|
| • • • • • | 1 | that's where in Lawrence it's located? | 7 |
| | · 2 | A. It's across from the Fire Station | |
| | 3 | No. 1. | |
| • | 4 | Q. Oh, okay. All right. I think I | |
| | 5 | know where that's at. I just | |
| | 6 | A. The library is over there and the | |
| | 7 | post office. | |
| • | .8 | Q. All right. And so then you got | |
| | 9 | you're in this practice for and | |
| • | 10 | you're doing this practice for five | |
| ٠ | 11 | years and then you left or you shut it | |
| | 12 | down or sold it or what? | |
| | . 13 | A. I just shut it down. | |
| • : : | 14 | Q. Shut it down. Okay. And did you | |
| | 15 | move to a new practice or new town or | |
| | 16 | how does that work? | l |
| | 17 | A. Well my son developed diabetes | |
| | 18 | and I needed to be home, so I moved all | |
| | 19 | my records to, you know, my house | |
| | 20 | basically and continued to practice from | |
| | 21 | there, but not an office based practice. | |
| | 22 | Q. You wouldn't see patients then? | |
| • | 23 | A. No, not at my house. | |
| | 24 | Q. Were you living in the same place | |
| • | 25 | you're living now? | |
| | • | | |



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38 1 Uh-huh. 2. Or did you move? 3 A. Yeah, we moved. 4 When did you move there -- to . 5 your current location approximately? 6 The fall of '99 I think. October. ... 8 MR. FOCHT: Speak up, Kristin. 9 I think it was in the fall of 10 It was right after a huge flood in 11 Kansas City where one of the football 12 games got flooded out. That's the time, 13 and I don't remember the year. I think 14 it was '99. 15 BY MR: MAXWELL: 16 Okay. So then you would have 17. moved there and so when you shut your --18 your practice down in Lawrence you would 19 have already lived at your current 20 location? 21 I was already living at my 22 current location. 23 So you took all your files from 24 your current location which -- or the 25. practice and you said you moved them to



| • | . 1 | your house? | 39 |
|-------|------|--|-----|
| | 2 | A. Right. | |
| | 3 | Q. And then you shut down the | |
| | 4 | practice? | |
| | . 5 | A. Correct. | |
| _ | 6 | Q. Did you continue to see patients | |
| · · · | 7 | or not or just | . |
| | 8 . | A. No, not those patients. I had to | |
| | 9 | refer them out to local physicians. | |
| | 10 | Q. Okay. Since that time have | |
| | 11 | have you had an office based practice? | |
| | 12 | A. No. | |
| • | · 13 | Q. That would be starting | |
| • • | 14 . | A. Other than my house, no. No, I | |
| | 15 | don't see patients at my house | |
| | 16 . | Q. Okay. And so that you don't | - : |
| | . 17 | have like a physical office? | |
| | 18 | A. No. | |
| | . 19 | Q. Okay. That was beginning in May | |
| | 20 | of 2002, is that what you said, or | |
| • | 21 | September? | |
| | 22 | A. September. | |
| | 23 | Q. September of 2002 from this date | |
| | 24 | to the present, right? | |
| | 25 | A. · Uh-huh. | |
| • | | | |



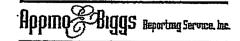
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| | • | | |
|------------|------|--|----|
| | . 1 | Q. You have to answer verbally. | 40 |
| | ·2· | A. Correct, yes, I'm sorry. | |
| | · 3 | She she can't get a shake of | |
| | 4 | the head or the nods, you know, and so | |
| | 5 | | |
| • | 6 | A. I know, I'm sorry. | |
| | 7 | Q. Okay. So now you're you're | 1 |
| | 8 | living there at your current address. | |
| | 9 | You are you're still licensed to | |
| | 10 | practice since September of 2002. What | |
| | 11 | kind of practice between September of | |
| | 12 | 2002 and today do you do? | |
| | 13 | A. I just I do a consulting | |
| · · · · | 14 | practice now. Actually I forgot a job | |
| • | 15 | that I did for years. I don't know if | |
| | 16 | it matters. | . |
| | 17 | Q. Go ahead. | |
| | 18 | A. From '95 until some time in the | |
| | 19 | late '90's I worked at a clinic in | |
| <u>.</u> - | 20 | Wichita, another clinic on Central, as a | |
| | 21 | physician there. | |
| | 22 · | Q. '95 to? | |
| . : | 23 | ·A. I'm trying to remember. I don't | |
| 2 | 24 | know '99 maybe. | |
| . 2 | 25 | Q. Who was your employer? | |
| | | | _ |



| | | · | 41 |
|-----|------|---|-----|
|) j | 1 | A: I was self-employed. The clinic. | - 1 |
| | 2 | was owned by a guy named Dan Herrington | |
| | . 3 | I think. It's been awhile but and he | |
| | 4 | didn't live in the State. | |
| | . 5 | Q. Okay. | |
| | . 6 | A. Just owned and operated the | |
| | | clinic, and I contracted with him | - |
| | . 8 | Q. Did you like work there part time | |
| • | 9 | or something? | |
| | 10 | A. Well I was their clinic physician | |
| | 11 | and I was there once or twice a week. | |
| • | 12 | Q. Okay. Okay. All right, that's | |
| | 13 | fine. | |
| | 14 | MR. FOCHT: You got your plasma | |
| • | 15 | job too. | |
| | 16 | A. Oh, that's new. Right, since | |
| | 17 | this year I also am the center medical | |
| • | · 18 | director at a plasma center. | |
| | 19 | BY MR. MAXWELL: | |
| | 20 | Q. Plasma, is that blood? | |
| • | 21 | A. Right. It's a | |
| | 22 | Q. Blood blood bank? | |
| | 23 | A. Bank like a | |
| | 24 | Q. Blood bank? | |
| | 25 | A. Correct. | |
| • | | | |



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| | 1 | Q. And where is that at? | 42 |
|----------|----------|--|----|
| | . 2 | A. In Lawrence. | |
| ···· · · | . 3 | Q. Okay. Plasma director, is that | • |
| | 4 | like | |
| | ·. 5 | A. Medical director. What they are | |
| | 6 . | is pharmaceutical manufacturing plant. | · |
| | · 7 | . They they manufacture product and | |
| | 8 · | they are required by different statutory | i |
| | . 9 | elements to maintain a physician to | |
| | 10 | supervise medical staff. | |
| | 11 | Q. How often how much is that? | |
| | 12 | Is that like a part-time job or | |
| ~ | . 13 | A. It's about a day a week. | |
| | 14 | ' Q. Okay. So you like go one day a | |
| | 15 | week to that office? | |
| | : 16 | A. I go a couple of times a week for | |
| | 17 | half a day. | |
| | · : 18 · | Q. Half a day, okay. So so from | |
| | . 19 | other than the blood bank from September | |
| | 20 | of 2002 to the present date, what other | |
| | 21 | employment? | |
| | 22 | A. Well, like I said I've been | |
| | ·23 | self-employed all that time, and because | |
| | 24 | my son was sick I had to drastically cut | |
| | 25 | my hours back and so the only thing that | |
| | | • | |



| • | | <u> </u> |
|--------------|--|----------|
| 1 | I could continue under those | 13 |
| 2 | circumstances was my consulting in | |
| . 3 | . Wichita. | |
| . 4 | Q. Okay. Describe that. What do | |
| 5 | you dò, consulting? What what does | 1 |
| .6 | that mean? | |
| 7 | A Well-should I go into the whole | |
| . 8 | history of that? | |
| | MR. FOCHT: No, just tell him. | |
| 10 | Answer his question. | |
| 11 | A. Oh, okay. Well | |
| 12 | MR. FOCHT: Well you can tell him | |
| . 13 | how it came about, yeah. | |
| . 14 | A. Oh, okay. I'm trying to think | |
| 15 | what year that was. 1999 while all | |
| 16 | these other elements are still | |
| 17 | happening, I received a call from Doctor | |
| 18 | George Tiller in Wichita, Kansas, in | |
| . 19 | which he stated that the Kansas Board of . | |
| 20 | Healing Arts had recommended that he | |
| · · 21 | call me regarding some new requirements | |
| . 22 | that his clinic was subject to. And so | |
| 23 | I had some telephone discussions with | |
| 24 | him about what that would entail, and he | |
| . 25 | made his his attorneys available to | |
| | • | |



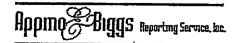
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| | 1 | me to ovalata | 44 |
|-----|------|--|--------|
| | • | me to explain, you know, the legal | |
| | 2 | aspects of all of that. And so over a | |
| | 3 | period of months or weeks or months, | •••••• |
| · | 4 | we, you know, with the full | |
| . • | 5 | understanding and supervision of the | |
| • | 6 | Board of Healing Arts and my | • |
| | 7. | understanding the State of Kansas as | |
| | 8 | well, we came up with some terms under | |
| | 9 | which I would be able to travel to | |
| | 10 | Wichita and use his space at the clinic | |
| | 11 | to consult with his patients regarding | |
| | 12 | late term medical need pregnancy | |
| | 13 | terminations. | |
| | 14 | And after consulting with his | |
| | 15 | | |
| | | attorneys who I was told were | |
| | 16 | specialists in constitutional law, I was | |
| | . 17 | provided with a huge packet of legal | |
| • | 18 | material, I think the oral arguments. | |
| • . | 19 | from the Doe V. Bolton case and the | |
| | 20 | opinions and whatnot, and I was given an | |
| • | 21 | opportunity to ask any questions that I | |
| • | 22 | had regarding all of that, and | |
| | 23 | BY MR. MAXWELL: | |
| • | 24 | Q. Who were those attorneys? | |
| • | 25 | A. I can't remember. | |
| | | | |



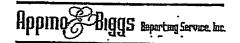
| ٠ | 1 | Q. In Wichita? | 45 |
|----|------|--|----|
| | . 2 | A. Uh-huh, in Wichita. It was a | |
| | . 3 | woman and I remember she was pregnant. | |
| | · 4 | I unfortunately don't remember any other | |
| • | 5 | details than that, so | |
| | 6 | Q. That was in, what, '99 you said? | |
| | 7 | Yeah, probably I'm sorry, I'm. | |
| | 8 | really bad with names. You know, I | |
| | 9 | remember a face. But trying you know | |
| | 10 | if you gave me a list I'm sure I can | |
| | 11 | pick out who it was. | |
| | · 12 | Q. Oh my God, there are probably | |
| | . 13 | 1,000 attorneys in Wichita. | |
| | 14` | MR. FOCHT: 1,600 | |
| i. | . 15 | BY MR. MAXWELL: | |
| | 16 | Q. We don't need to do that. | |
| | 17 | A. Right, okay. I don't remember. | |
| | . 18 | But, you know, it was from a fairly | |
| | 19 | prominent law firm, I think. But where | |
| | 20 | were we? So basically at that point, | - |
| - | 21 | you know, I was informed that I would be | |
| | 22 | probably one of several consultants that | |
| | 23 | would do this work, you know, if I was | • |
| • | 24 | interested and | |
| ٠ | 25 | Q. Did you like, you know, guys get | |



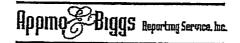
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| · · · · · · · · · · · · · · · · · · · | .1 | reason that they weren't going to the | 47 |
| | 2 | Supreme Court is that the expense and | |
| • | · 3 | the time involved, so this was a | |
| | 4 | situation where both parties agreed that | |
| | . 5 | this additional consultation would be | |
| | . 6 | acceptable as an alternative to having | |
| | 7 | the whole thing struck down That was - | 1 |
| | 8 | my understanding. | |
| | 9 | Because the provisions in Doe v. | |
| • | 10 | Bolton for the additional consultations | |
| | . 11 | were considered unconstitutional by the | |
| | 12 | court by the majority opinion. | |
| | 13. | Q. Okay, so okay. So you you | |
| • • . | 14 | start into this and when did you | |
| | 15 | actually start physically doing that? | |
| | 16 | A. In 1999. | |
| | . 17 | Q. Okay. Tell us how that worked. | |
| · | · 18 · | A. The process has changed over time | |
| | 19 | and I'm not sure that I have all the | |
| • | 20 | details clear.ly. I think in the | |
| | 21 | beginning they may have faxed me the | |
| • | 22 | records before I went down there, but | |
| | 23 | I'm not positive about that. | |
| | 24 | What I would do is be informed of the | |
| ٠. | 25 | day that the late term patients would be | |
| | | | |



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| | there. I would travel to Wichita, and I | 8 |
|------------------|---|------|
| . 2 | was still running my own clinic at that | |
| 3 | same time then. So I would leave days | |
| 4 | open that I could that. I could do that | •••• |
| 5 | either Monday or Tuesday. And like I | |
| .6 | said I was alternating with someone else: | |
| . 7 . | or at least one other person for a | _ |
| 8. | while. | |
| . 9 | So I would get the schedule of what | |
| 10 | days that they were going to be seeing | |
| 11. | late patients in advance, and I would | ŀ |
| 12 | travel down on those days. I would be | • |
| 13 | given the records that I requested, | |
| 14 | which was any information they had | |
| 15 . | pertinent to that patient's medical | |
| 16 | case. Then I would interview the | ľ |
| 17 | patient privately or, you know, with the | |
| 18 | family members depending upon the | |
| 19 | situation. | |
| 20 | MR. FOCHT: Speak up. | |
| 21 | . A. I would interview the patient. | |
| 22 | Then initially I had a letter that was | |
| 23 | drawn up with the assistance of the | |
| 24 | attorneys to make sure that the language | |
| 25 | was in compliance with the law. And I | |
| | | |



49 1 originally brought a computer and 2 printed out my own, but it became just 3 troublesome dragging the computer around, 4 so, you know, at some point I just asked ٠5 them to go ahead and print up the letter 6 and provide that along with the medical 7 records that they provided as part of 8 the consultation. 9 BY MR. MAXWELL: 10 So you say it changed over 11 time. How --12 Because like I said I had a 13 laptop and my battery went dead and, you 14 know, it became a nuisance dragging the 15 thing around. I couldn't leave it 16 So -- and I would have to unattended. 17 run and get .-- use their printer and 18. unhook my printer and hook up, you know, 19 hook up to their printer and it 20 disrupted their process, so I -- just in 21 the interest of simplicity I asked that 22 they just print up this letter which 23 normally I would have printed. And then 24 if the patient was deemed by me to have 25 a medical necessity for the procedure, I

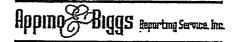


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| 1 | would sign that letter and that would | 50 |
|--------------|--|----|
| 2 | hecome a part of the medical record. | |
| 3 | | |
| 4 | | |
| . 5 | Q. Were you were you compensated | |
| 6 | for your time? | - |
| • | | |
| 7 | A. By the patients, yes. | † |
| 8 | Q. How did that work? | |
| .9 | A. Well they were informed by me | |
| 10 | that there was a separate fee. They had | |
| 11 | been informed over the telephone prior | |
| 12 | that there was a separate consultant and | |
| · · · 13 | that there would be a separate fee for | |
| 14 | that and that would not be included in | |
| 15 | their fees for Doctor Tiller. So they | |
| 16 | would pay me. | |
| 17 | Q. Okay. Would they pay you on the | |
| 18 | spot or how would that | |
| 19 | A. Well at some point during the | |
| 20 . | . consultation I would have to request the | |
| 21 | fee unless they had some prior | |
| 22 | arrangement with an insurance company. | |
| 23 | Q. What were the fees generally? | |
| 24 | A. 250 initially, and then I raised | |
| 25 | it to 300 at some point. | |

| | | | EA |
|------------|------|---|---------|
| • | 1 | Q. All right. So that's this is | 51 |
| | 2 | starting all in 1999 while you still had | |
| | 3 | your clinic here in Lawrence? | |
| | 4 | A. Right. | |
| | 5 | Q. Okay. So how many how often | • |
| | 6 · | would you go down there? | |
| | 7- | A:- A-couple of times a month | |
| | 8 | initially, and there was a period of | |
| | 9 | time that I didn't come at all. | |
| • | 10 | Q. Okay. | |
| | 11 | A. And then after a couple of years | |
| : . | 12 | I think the other consultant or | \cdot |
| • | 13 | consultants whom I never met, but, you | |
| | 14 | know, was aware of their existence at | |
| • | . 15 | least one fellow I know quit because he | |
| • | 16 | was picketed at his office | |
| | 17 | Q. What when you would go down | |
| | . 18 | there would you like keep your own file . | |
| | 19 | or | |
| | 20 | A. Correct, yes, I have all my own | |
| | 21 | files. | |
| | 22 | Q. So when you would see a patient | |
| | 23. | down there you would take you would | - |
| | 24 | create your own file and keep it? | - |
| • | 25 | A. Right, unless the the process . | |
| | | • | _ |



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| | · |
|-------|--|
| 1 | didn't continue past the very |
| 2 | preliminary stages. For example, if I |
| ···3· | could see right off the bat that it |
| 4 | wasn't going to go anywhere, I might not |
| . 5 | generate one. So if we didn't go |
| . 6 | through signing the original consent and |
| 7 | that kind of process. |
| 8 | Q. All right. I understand. Okay |
| 9 | so then so you've got your clinic |
| 10 | going on and you're doing this down |
| 11 | there in Wichita, you've got your own |
| 12 | clinic in Lawrence and in 2002 you |
| · 13 | you quit that? |
| 14 · | A. Right. |
| 15 | Q. So so let's talk from that |
| 16 | point forward had the process changed by |
| 17 | that point? |
| . 18 | . A. Yeah, I think it evolved slowly. |
| 19 | Like I said as far as the laptop and the |
| 20 | printing of the letter. |
| 21 | Q. Right. |
| 22 | A. And the faxing of materials had |
| 23 | to stop because of HIPAA requirements |
| 24 · | for a scrambled fax machine, which I |
| 25 · | didn't have and, you know, and I guess |



| | • | |
|------------|------|---|
| -·. | 1 | somebody can hack things that are going |
| | · 2 | over the air waves. So HIPAA required |
| | 3 | some odd things that I didn't want to |
| | 4 | deal with it. |
| • | . 5 | MR. FOCHT: You had to sign a |
| | 6 | special requirement with HIPAA to allow |
| | 7 | things to be faxed. |
| | 8 | MR. MAXWELL: Okay, I didn't know |
| | 9 | that. |
| | 10 | BY MR. MAXWELL: |
| • | . 11 | Q. Ökay. So then you got year |
| • | 12 | 2002 you quit. You're done with your |
| | . 13 | clinic, you're home. |
| <i>'</i> . | 14 | A. Yeah. |
| | . 15 | Q. You're basically home, and then |
| • | 16 | and then you're you say you were a |
| | . 17 | consultant? You said earlier maybe I |
| | . 18 | missed this wrong, but you were a |
| | 19 | consultant for several people or was it |
| • | 20 | just Tiller? |
| | 21 | A. Oh, no, just you know I guess |
| | 22 | maybe no, no run that by me again. |
| | 23 | Q. I thought you said you had you |
| | 24 | were consulting in several places? |
| | 25 | A. Did I? Can you go back? |
| | | |



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| MR. FOCHT: No, I don't think you | 54 |
|---|--|
| did. I think he misunderstood. | |
| BY MR. MAXWELL: | |
| Q. I may have misunderstood. | •• |
| A. Oh, okay. | |
| Q. So it was just you were just | |
| consulting with Tiller, that was your | \dashv |
| only | |
| A. Correct, at that point, right. | |
| That was the only thing that I was | |
| doing. | |
| Q. Okay. So then you would you | |
| would from your home you would | |
| after you closed your clinic, from your | |
| home you would basically arrange or you | |
| would consult with Tiller from that | |
| point? | |
| A. I continued to do that after I | |
| stopped everything else. | |
| Q. Okay. All right. Continued | |
| to | |
| A. Consult with him. | |
| Q. How often would that happen? | |
| A. At that point I believe I may | |
| have been the only one. At any rate it | |
| | MR. FOCHT: No, I don't think you did. I think he misunderstood. BY MR. MAXWELL: Q. I may have misunderstood. A. Oh, okay. Q. So it was just you were just consulting with Tiller, that was your only A. Correct, at that point, right. That was the only thing that I was doing. Q. Okay. So then you would you would from your home you would after you closed your clinic, from your home you would basically arrange or you would consult with Tiller from that point? A. I continued to do that after I stopped everything else. Q. Okay. All right. Continued to A. Consult with him. Q. How often would that happen? A. At that point I believe I may |



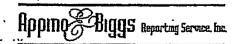
| | • | G.F. |
|----------------|------|---|
| | 1 | would have been two to four times a |
| • | 2 | month. |
| | 3 | Q. Okay. How did that process work |
| | 4 | from your after you closed your |
| • | 5 | clinic, how how did that process |
| | 6 | work? |
| | 7 | A. They continued to notify me when |
| | 8 | I was needed, and I continued to travel |
| • | . 9 | down there. |
| ·. | 10 | Q. Okay. In 2003 your clinic's |
| • | 11 | closed now, and in year calendar year |
| | 12 | 2003 were you doing this? |
| | 13 | A. Yes. |
| : - | 14 | Q. Okay. How many times do you |
| | 15 | suppose that that you went to Wichita |
| • | 16 · | that year, do you recall? |
| | 17 | A. 40 or 50 probably. |
| | . 18 | Q. 40 or 50. Who who would |
| | 19 | Tiller's who would call you and |
| | 20 | coordinate this? Who would talk to you? |
| | 21 | A. Well since I was there every week |
| • | 22 | I would check the schedule and look on |
| | 23 | the calendar and see what the next week |
| • | 24 | would be. So generally at that point |
| • | 25 | they didn't need to call me because I |
| • | | |



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56 1 wasn't alternating with anyone else. 2 Oh; okay. So you were pretty 3 much the only one? 4 A. I think. I'm almost sure by :5 The time when the other guy that I know of -- you know, like I said I am 6 not privy to everything that happened 8 there of course. So I was only there a 9 couple of times a month. There was some 10 period of time when Doctor Tiller had 11 this whole group of federal fire people, 12 you know, the BB -- Bureau of Alcohol 13 Tobacco and Firearms. 14 O. ATF? 15 A. Yeah, he had the ATF there. 16 flew in a big armored vehicle and they 17 had all these guys in flak jackets 18 hanging around for a week or two. 19 was around the time when I became the 20 only person that came. We had a bomb 21 threat. 22 MR. FOCHT: Was that before or 23 after he was shot? 24 Α. This was years after he was shot. 25 Right, this was :-- that's the time when



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57 .1 I became the full-time consultant was 2 with the bomb squad thing. 3 BY MR. MAXWELL: 4 You got to understand I don't 5 know anything about it. I don't need . 6 any of that, so -- so --Well, we're regularly subjected 8 to terrorist threats, but this was one 9 that they took seriously enough that 10 they flew in these --11 Q. ATF guys? 12 Right, and the place that I 13 normally do my consulting, I walked in 14 one day and there were eight 300 pound 15 muscle guys with flak jackets all. 16 sitting around drinking coffee. 17 just remember -- I don't remember the 18 day, but I remember that was the time 19 when I became the full time person, and 20 at that point it wasn't really necessary . 21 to call me because I could just check 22 the schedule. 23 Okay. All right. So you -- you 24 basically would go down there and you 25 would -- what would you do when you



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58 1 would go down there? 2 I would do the same thing. 3 would get the -- the records that I 4 requested prior with the late term 5 patients, review the records and review 6 the patient. Get the paperwork signed, collect the money and decide whether or 8. not it was warranted, provide the letter 9 and go home. . 10 Would you keep a file for all of 11 those cases? 12 Α. Yes. 13 Okay. So you would have files 14 for the year 2003 for all of the cases 15 that you went down there and consulted? 16 Unless they were people that I 17 turned away early in the process. 18 Right. Okay. But anyone who 19 would have gotten a late term abortion 20 as a result of your consultation you 21 would have a file on? 22 Α. Correct. 23 Okay. So tell us about what you 24 would do in these particular 25 consultations, how would that work?



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| • | 59 |
|--------------|---|
| 1 | You'd review the file that they already |
| 2 | had I assume, right? |
| . 3 | A. Uh-huh. |
| 4 | MR. FOCHT: Answer |
| 5 | A. Correct. |
| . 6 | BY MR. MAXWELL: |
| 7 | Q. And then you would do what as a |
| . 8 | result of after reviewing the file? |
| 9 | A. Interview them. |
| 10 . | Q. Interview the patient? |
| 11 | A. Uh-huh. |
| · 12 | Q. Okay. Anything else? |
| . 13 | A. For example? |
| 14 | Q. I I have no idea. |
| 15 | A. No, I I spoke with them, |
| 16 | sometimes speak with the family member. |
| 17 | Q. Would you like examine them, |
| . 18 | like, or do any, like, physical? |
| 19 | A. Not generally, no. You mean like |
| 20 | check their eyes and ears and things, |
| · 21 | no. |
| 22 | Q. Whatever a doctor does? |
| . 23 | A. Right. No, only if that were |
| . 24 | · warranted and most of the time that |
| 25 | wasn't warranted that I can recall. |



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60 1 Would you like give them tests or 2 anything like that? 3 No, I just interviewed them. 4 What would you like.type -- what 5 -- what would be part of your file, for -6 example? A. Well originally when I first 8 started I just had handwritten notes, 9 and then at some point I decided to use 10 a program that helped just to automate 11 the process. 12 What's -- what's that called? 13 'Actually the -- the program is 14 called Detree (spelled phonetically). 15 It's produced by a company in Canada. 16 And basically it just automates the . 17 entry of questions from the DSM-IV and 18 saves me a lot of typing. 19 Diagnostic tree? 20 A. Right. 21 Okay, and you would use that? 22 I used that to just help save a 23 lot of writing basically. 24 Oh, okay. And so you would --25 your file would contain that material



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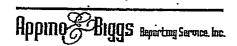
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|------|---|---------|
| 2 | A. Correct. | |
| . 3 | Q. Anything else? | |
| 4 | A. The consents. | |
| . 5 | Q. Consents, okay. What about the | |
| . 6 | letter that you would ultimately sign? | |
| 7 | A No, originally I copied all the | \perp |
| . 8 | letters and then it just seemed | |
| 9 | redundant, so I I quit doing that. | |
| 10 | Q. Okay. | |
| 11 | A. They are all the same. | |
| 12 | Q. All right. What what would | |
| . 13 | you do when how long would these | |
| 14 | consultations you know, this is still | |
| 15 | the \$300 range, right, talking about 300 | |
| . 16 | bucks to charge? | |
| 17 · | A. But it also counts as six hours | |
| 18 | driving and my wear and tear on my car. | |
| 19 | Q. Right. | |
| 20 | A. Obviously if I lived in Wichita | |
| . 21 | the fee would be substantially lower. | |
| 22 | Q. Right. How long for one | |
| 23 | consultation is what I'm asking. | ľ |
| 24 | A. I spent as much as six hours, but | |
| 25 | generally it's in the 45 minutes to an | |
| | • | |



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| 1 | hour and a half range. | 62 |
|---------------------------------------|---|----|
| . 2 | Q. And you would your your | |
| 3 | goal was to evaluate okay. And how | ļ |
| 4 | would you were you still getting | |
| 5 | paid by patients? | |
| 6 | A. Yes; that is the only people that | |
| · · · · · · · · · · · · · · · · · · · | ever paid me other than insurance | - |
| 8 | companies. | |
| .9 | Q. Did you ever get paid by Doctor | |
| 10 | Tiller? | |
| 11 | A. No. | |
| · 12 | Q. For any of the consultations? | Ì |
| . 13 | A. No. | ľ |
| . 14 | Q. Checks by him in any way? | |
| . 15 | A. No. | . |
| 16 | Q. Okay. Would you use his facility | |
| . 17 | did you have to like pay rent or pay | |
| . 18 | him for any part of using his facility? . | |
| : 19 | A. No, we were concerned about the | |
| 20 | perception of impropriety in the | |
| 21 | beginning. So he specifically requested | |
| . 22 | the Board and whomever he was conferring | |
| 23 | with, like I said this was not to do | |
| 24 | with me in the beginning. He told me | |
| 25 | that he had specifically obtained | |
| • | | _ |



| | • | | |
|---------|---------|--|----|
| | · · . 1 | permission because of the high risk | 63 |
| | . 2 | the security risk to the patients and | |
| | 3 | the distance of travel for the | |
| | 4 | consultants, that it was okay with | |
| | 5 | everyone involved that he provide a | |
| | 6. | space for the consultants. | |
| | 7 | Q. So you never paid him any rent or . | |
| | 8 | anything like that? | |
| | . 9 | A. That was never considered to be | |
| | . 10 | necessary by any of the involved parties | |
| | 11 | as I understood it. | |
| | 12 | Q. So you never did? | |
| | 13 | A. I never called Mark Stafford or | |
| <i></i> | . 14 | Carla Stovall to ask. | |
| | · 15 | Q. Did you ever pay him any rent? | |
| | 16 | A. No. | |
| | 17 | Q. All right. So you're you're | |
| | . 18 | in here and you're doing those | |
| | · 19 | consultations, and the idea is the | |
| | 20 | purpose of your consultation is what? | |
| | 21 | A. To decide whether or not they had | |
| | 22 | a medical necessity for a pregnancy | |
| • | 23 | termination. | |
| • | 24 | Q. Okay. What was your | |
| | 25 | understanding of what you needed to | |



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64 1 determine? 2 Whether or not the continuation 3 of the pregnancy would impair their 4 physical or mental health. And that originally was not established that way. That was, you know, like I said when it 6 was presented to me it was based on the termination in Doe v. Bolton that a -8 9 person's health could include their 10 psychological -- let me make sure that I 11 get this right. Their psychological, 12 emotional, familial and their age 13 determinations. So any number of 14 factors could have a permanent and irreversible negative affect on their 15 16 health. 17 I think the statute says, if I'm 18 not mistaken, I'll try to quote it here, it says continuation of pregnancy will 19 20 cause substantial and irreversible 21 impairment of the major bodily function. 22 Is that your understanding? 23 Α. Yes. 24 Q. And so you would try to determine 25 whether or not that occurred -- that was



| • | | · | |
|----------|--------|---|----|
| | . 1 | going to occur, right? | 65 |
| : | 2 | A. Right. | |
| • | 3 | Q. So it wasn't just that it would | |
| | 4 | that it would negatively impact their | |
| | 5 | health, it was | |
| | 6 | A. No, I said that completely wrong. | |
| <u> </u> | 7 | Basically a major organ, and the brain | |
| | . 8 | is a major organ and the person all the | |
| | 9 | things I listed there, emotional and | |
| | 10 | mental and psychological and familial | |
| | 11 | and financial, stay negatively impacted | |
| | 12 | on the brain. | |
| | 13 | Q. Okay. So you understood that had | |
| · · · · | . 14 | to be irreversible? | |
| | 15 | A. Correct. Correct, yes. | |
| | 16 | .Q. Meaning it was never going to go | İ |
| | 17 | away? | |
| | 18 | A. Correct. | |
| | 19 | Q. Okay. So you go in there and | |
| ٠. | 20 | you're doing these. Did you how do | |
| | 21 | these patients you said that they | |
| | · 22 . | would call you. Did you ever did the | _ |
| | 23 | patients ever call you first or who | |
| | 24 | who got called first; you or Tiller? | |
| | 25 | A. Well the logistics would make it | |
| | | | |



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1 really difficult. I could have -- we 2 discussed all this in advance, too. 3 because they have no idea who I am and 4 because his desire was to keep the 5 consultants out of the eye of the public 6 because of the harassment that they would get, the -- the logistics of 8 having the consultant available to just 9 anybody calling on the telephone out of 10 the blue made it prohibitive for any 11 other contact to occur other than - 12 initially through him. 13 Okav. So what -- who 14 would call who first, or would the patient call you or the patient call 15 16 Doctor Tiller? 17 Like I said, he wasn't in the 18 practice of giving out the name of the 19 consultant because then any lunatic 20 could call up and make an appointment 21 and start harassing me, and I don't 22 have, you know, the type of security that many of these providers do. 23 24 So basically what you're saying 25 then is that they would call Tiller,

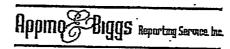


| | | | • |
|----------|-------|--|----|
| | 1 | they would go in and see Tiller and then | 67 |
| | ·2 | he would call you and bring you in? | |
| | 3 | A. Correct. | |
| | 4 | Q. Okay. And you would and it | |
| | 5 | got to a point where you were down there | |
| | . 6 | so often that you didn't really need to | |
| | | call? | |
| | . 8 | MR. FOCHT: Object to the form of | |
| | 9 | the question. Go ahead and answer it. | |
| | 10 | I'm just objecting. | |
| | 11 | A. I was down there often enough | |
| | 12 | that I could review the calendar. | |
| | 13 | BY MR. MAXWELL: | |
| ~ | 14 | Q. Who who was the main person | |
| | 15 | that you coordinated with basically? | |
| | 16 | A. Well I guess the office | |
| | 17 | administrator. | . |
| | · .18 | Q. Which is? | ı |
| | 19 | A. Well now it's Joann. | |
| | 20 | Q. Joann? | |
| | 21 | A. I can't remember I just know | |
| | 22 | her by Joann. I know if you tell me | |
| | 23 | I'll know her last name. I don't need | |
| | 24 | to use it. I don't call her at home or | |
| | . 25 | anything. | |
| | | | _ |



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25

::69 1 initial history, I guess. 2 history? Is that -- doctor's call it a 3 history or their reason for being there 4 or whatever you -- doctors call it, you .5 know, where the patient says here is 6 what I -- here's what I -- here's who I am and -- 8 A. You mean do I take a personal 9 history from them? 10 Q. Right. 11 Yeah, sure. 12 All right. Okay. Q. What I'm 13 saying is that -- do you do that or does 14 Doctor Tiller do that and provide it to 15 vou? 16 Α. Both. 17 0. Both. 18 Basically what I requested when I 19 came down was that I have all records 20 that are available to him from prior 21 consultation. And for the sake of 22 simplicity I asked to receive a copy of 23 his intake form, which has a lot of that



So I use that and then

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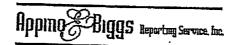
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material on it.

I ask my own questions too.

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70 1 Q. Okay. All right. Okay, I 2 understand. Okay. Sorry to do this. Can we go off the record for a moment? 3 4 (THEREUPON, a recess was taken.) 5 MR. MAXWELL: Back on the record. 6 BY MR. MAXWELL: We took a six minute break it 8 looks like. Okay, Ms. Neuhaus --9 Neuhaus or Neuhaus? 10 Α. Neuhaus. 11 Neuhaus, sorry. Okay, so we're 12 -- we're talking about these -- these 13 consultations you're doing. How -- I mean, you started in after you closed 14 15 your clinic doing them for Tiller in 2002 or late 2002 after you closed your 16 17 clinic in Lawrence. Do you continue up 18 to this day? 19 I have been doing them since 20 1999, correct. 21 Okay. When was the last time you 22 did them? 23 A. I think it was last -- last week, 24 but I -- I don't remember if it was 25 Monday or Tuesday. I think it was a



| 1 | Tuesday. |
|------|--|
| 2 | Q. Okay. |
| 3 | . A. No, no, wait a minute. Wait a |
| 4 | minute. What is today? |
| 5 | MR. FOCHT: Friday. |
| . 6 | A. Today is Friday. I'm sorry, I'm |
| | really, you know, my schedule has been |
| 8 | disrupted. Let me see, it was what |
| 9 | day was I down there? I was down there |
| 10 | Monday. This past Monday. |
| 11 | BY MR. MAXWELL: |
| 12 | Q. Past Monday, okay. Same type of |
| . 13 | deal, late term abortion, you're |
| . 14 | supposed to be the |
| . 15 | A. Correct, right. I'm asked to |
| 16 | evaluate those patients. |
| 17 | Q. What does referral mean to you? |
| 18 · | A. Referral is when one physician |
| 19 · | asks another physician to evaluate a |
| . 20 | patient. |
| 21 | Q. Okay. When when you do this, |
| 22 | do you still charge \$300, is that the |
| 23. | normal fee still? |
| 24 | A. Generally. Sometimes I discount |
| 25 | the fee. |



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72 1 0. Okay. 2 Α. That's the general stated fee. 3 0. The general stated fee, okay. Okay, so let's talk specifics here. 4 5 as you know from watching the news, that although it took two and a half, three 6 Years T obtained records from Doctor 8 Tiller, you're aware of this? 9 A. Right. 10 Okay. And part of the reason that you've -- you've been asked to 11 12 appear here is that these records 13 contain your name, okay? 14 Α. Correct. 15 I don't know that that probably 16 surprises you whatsoever? 17 A. No. 18 In fact your name is on the very 0. 19 front -- front part of the file? 20 Right, that's a little sticky 21 note. 22 This is how the file came to us. Q. 23 A. Right. 24 So this is just one of the files. 25 I mean, I actually wanted to start with



73 1 -- okay. Tell me about the -- your 2 training in psychiatry before we get to 3 this. Well, all medical students are 5 required to do rotations in psychiatry. 6 It's usually in the third or fourth year. 8 $\mathbf{U}\mathbf{h} - \mathbf{h}\mathbf{u}_{1}\mathbf{h}$... 0. Anything else? 9 I have an undergraduate degree in 10 psychology, so I took graduate level 11 courses while. I was an undergraduate --12 intermediate to graduate. I took 43 basically every psychology course 14 available at K-State with maybe one or 15 two exceptions of the courses that were 16 available to undergraduates, and in that 17 transition level, whatever they are, 700 18 level courses. 19 Anything else?. 20 I had a long-term interest and : 21 have done extensive reading, probably 22 read most of the works of the founders 23 of modern psychological theory, at least some of their writings, Frued, Yoen, 24 25 Maslow. And I actually at several times



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74 contemplated completing a psychiatry residency. It just wasn't economically feasible to -- to take off from a regular practice to do that, but I have read through the DSM IV at least twice completely. 0: Anything else? Other than the usual continuing Α. medical education things. I read articles on psychiatry. I've also done some independent research on pregnancy and unwanted pregnancy in cases like the case -- I can't remember the name again, but the woman who, you know, abandoned her child at a hotel room or whatever. Cases like that I sought out that type of material in the past and studied it. So I would have to say a lot of that was just, you now, self study. Q. Anything else? Not that I can think of right now. Okay.



No, I'm not a psychiatrist, no.

Have you ever practiced

psychiatry?

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| • | 75 |
|-------------|--|
| 1 | Q. Psychology, practiced that |
| | A. As in clinical psychology, no. |
| · 3 | Q. Have you ever treated during |
| . 4 | your clinical years you've been to |
| 5 | various clinics, fair? |
| . 6 | A. True. |
| | Q. And throughout your time I would |
| | guess you practiced about 15 years maybe |
| . 9 | there close? |
| 10 | A. Before you mean 15 I've been |
| 11 | out since '86. |
| . 12 | Q. Well, more than that then? |
| 13 | A. Right, about 20. |
| 14 . | Q. In those what I'm talking |
| 15 | about the clinical where you were in a |
| 16 | clinic and you were seeing patients?. |
| 17 | A. General practice. |
| . 18 | Q. General practice, did you ever |
| 19 | treat people for depression? |
| · 20 | A. Yes. : :::::::::::::::::::::::::::::::::: |
| · 21 | Q. Like maybe prescribe certain |
| 22 | medications? |
| 23 | A. Yes. |
| 24 | Q. Did you treat would it be fair |
| 25 | to say it's common to treat people for |
| | |



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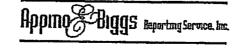
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76 depression in various stages? 2 I would say it's extremely 3 Not for me personally, but I think those drugs rank among the highest 4 5 6 Prescribed medicines, right. that's like drugs like ---8 Celexa, Zoloft. Α. 9 Q. Zoloft, Xanax? 10 . A. Xanax is a tranquilizer for .11 anxiety. 12 Right. But you prescribed those 13 in the past to patients? 14 A. I hardly ever. I can't even 15 count the times I've prescribed Xanax. 16 Maybe in the very remote past. 17 antidepressants in general, you know, a 18. fair amount. My personal philosophy is not geared towards medications except as 19 20 a last resort. 21 Q. But you have treated --22 In general I have wrote prescriptions for those in the past, 23 24 right, correct. 25 And you -- have you seen patients



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| | . 1 | with other types of mental health. | 77 |
|--------|-----|--|----|
| | · 2 | issues, for example, if somebody had | |
| | 3 | different types of psychiatric or DSM IV | |
| • | . 4 | diagnoses like, for example, adjustment | • |
| | 5 | disorder or or depression or anxiety | |
| | 6 | disorder or schizophrenia? | |
| | 7 | A. Sure. | • |
| | . 8 | Q. You've seen patients with all of | - |
| | 9 | that? | |
| | 10 | A. Yes. | |
| | 11 | Q. You've treated those patients? | |
| • | 12 | A. Yes, I have. | |
| | 13 | Q. Okay. All those types? | |
| : • | 14 | A. Everything. | |
| | 15 | Q. Right. | |
| • | 16 | A. Sometimes I would get in the | |
| | 17 | very beginning sometimes I would do | |
| | 18 | psychiatric consultation, but I think | |
| • | 19 | all practices encounter those types of | |
| : | 20 | diagnoses on a regular basis. | |
| • | 21 | Q. Is is depression a treatable | |
| | 22 | disease? | |
| | 23 | A. Absolutely, but that doesn't | |
| • | 24 | necessarily mean that every case is | |
| • | 25 | curable. | |



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78 1 Okav. Sure, but it is treatable. 2 Some people, once treated --3 It's treatable with drugs. 4 Would it be fair to say that some 5 people once treated can get over it and 6 it will never reoccur again? 7 Yes, I think that that does 8 happen. 9 0. Okav. As well as any other 10 pretty much of the standard personality 11 or mental health diagnoses, for example, 12 you know, a woman -- let me just give 13 you an example. A woman goes and gets a. 14 divorce and she's having a problem 15 dealing with it and you've diagnosed her 16 with adjustment disorder, is that --17 that be treated and --18 Α. Yes. 19 And she can be cured, right? 20 Α. Uh-huh. 21 Because her life changes and she 22 gets used to it, right? 23 It might and it might not. 24 All right. Q. Could. 25 A. Right.



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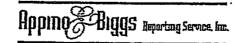
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| . 1 | Q. Is that right? | 79 |
|--------|--|---------------|
| . 2 | A. Well my mom has been divorced | |
| 3 | since I was five and she is a wreck and | |
| 4 | has been, you know, forever and ever and | |
| . 5 | ever. So I would say not in all cases, | |
| · .6 · | but in some cases, yes. | |
| 7 | O. So sometimes you can get over it | . |
| 8 | and you don't really know until a person | |
| .9 | is treated, is that fair? | |
| 10 | A. You don't know at the time when | |
| 11 | you see them whether or not they'll be | |
| 12 | curable. | |
| 13 | Q. All right, but they could be?. | |
| . 14 | A. Theoretically, yes. | |
| ·15 | Q. Certainly not a once you have it, | |
| 16 | it's always | |
| 17 | MR. FOCHT: I'm going to object | |
| . 18 | to argumentative questions. | |
| 19 | BY MR. MAXWELL: | |
| 20 | Q. Go ahead. I'm not trying to | |
| 21 | argue with you. I'm just asking you | |
| 22 | what let me put it this way. It's | |
| 23. | not one of those things where once you | |
| 24 | have it you're going to have it forever | |
| 25 | necessarily? | |



| 1 | A. Not necessarily, no | 80 |
|-----|--|----|
| | | |
| 2 | Q. Okay. It would be more like the | |
| 3 | mumps if you or, no, that's a bad | |
| 4 | example. Let me I can't think of an | |
| 5 | example. But, you know, like childhood | |
| 6 | asthma. You may have childhood asthma | |
| 7 | and it may develop into adult asthma and | |
| 8 | you have it for the rest of your life or | |
| 9 | it may be treated childhood asthma and | - |
| 10 | you grow out of it? | |
| 11 | A. That's fair. Yeah, I would say | |
| 12 | that's fair. | |
| 13 | Q. It could happen either way with | |
| 14 | these kind of diagnoses? | |
| ·15 | A. Correct, assuming, you know, all | |
| 16 | the circumstances went favorably. | |
| 17 | Q. Right. Okay. All right. What | |
| 18 | I'm about to show you is some files, and | |
| 19 | your name is in them. And these files | |
| 20 | are basically records from Doctor Tiller | |
| 21 | that were subpoenaed by the court. | |
| 22 | They're records in 2003 of late term | |
| 23 | abortions that were done that were | - |
| 24 | done in Wichita. That in most of these | |
| 25 | files, at least the ones I'm going to | |
| | | 1 |



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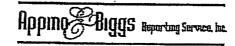
| | _ | | |
|------|------------|--|-----|
| | . 1 | show you have to do with you being on | 81 |
| | 2 | the file or in the file. | |
| | 3 | Let's start with this number one. | |
| | 4 | This is File No. 30-001, and I'm going | |
| | <u>.</u> 5 | to show it to you. Now some of the file | |
| | 6 | just for the record, some of the file | |
| · · | 7 | is blacked out. Okay, and what what | |
| | .8 | that means is the patient is not | • + |
| | 9 | identified, okay. The name is blacked | |
| • | 10 | out so other than the state and the age, | |
| ·. · | 11 | you can't identify any particular name | |
| | 12 | with any of these files. Could you look | |
| | · 13 | through the file especially on the left | |
| | 14 | side where some documents are and see if | |
| . 1 | 15 | you recognize any of your work. | |
| ; | 16 | A. This is my order. | |
| | 17 | Q. Go through the whole side. | |
| _ | 18 | MR. WILLIAMS: Would you | |
| • | . 19 | identify | |
| • | 20 | MR. MAXWELL: We'll do it in just | |
| · | 21 | a minute. I'm going to have her look | |
| | 22 | through it and then we're going to do | - |
| ٠ | 23 | that. | |
| | . 24 | MR. FOCHT: Did you get that? | |
| | 25 | THE REPORTER: What? | |



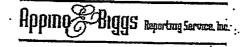
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| | MR. FOCHT: She said it was out |
|-------|---|
| • | 2 of order. |
| | A. The two pages are out of order, |
| | 4 but this is all mine. This this is |
| • | 5 actually this is another other page. |
| (| BY MR. MAXWELL: |
| | |
| | numbers on the bottom of the pages, and |
| | why don't you identify the numbers in |
| . 10 | File 30-001? |
| . 11 | A. 30-005, 30-006 and 30-007. |
| | Q. So that would be |
| . 13 | A. Oh I'm sorry, 30-008. 7 and 8 |
| .: 14 | are out of order. |
| 15 | Q. Okay. |
| :. 16 | MR. FOCHT: There is something |
| 17 | else down here yet. |
| 18 | A. That's not mine. |
| . 19 | MR. FOCHT: Oh, okay. |
| 20 | BY MR. MAXWELL: |
| . 21 | Q. So those four pages are all you |
| 22 | recognize from what you did? |
| 23 | A. Right, correct. |
| 24 | Q. Okay. So that this particular |
| . 25 | file, tell us about this file. Tell us |
| | |



. 83 1 about it. 2 Α. What do you want to know about 3 it? 4 Let me -- tell us what you did in 5 this case. 6 Well, it's a minor, so I would 7 have visited with the mother and/or 8 whoever the person accompanying; the 9 mother or father or guardian. It's hard 10 to say. I would have visited with them 11 together. Obtained the consents. 12 MR. FOCHT: Is that there? 13 No, it would be in my records. 14 And then generally depending on the 15 maturity of the patient, obviously she's 16 Some 14-year-olds are more mature 17 than others. If it seemed that she 18 would not be particularly upset, I might 19 visit, you know, to be alone apart from the guardian. I might interview her 20 21 independently. 22 There are certain situations where 23 that's necessary, because ultimately as a physician our primary -- I guess 24 primary is that we don't hurt somebody. 25



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84 1 So it's very important for me to know 2 that the person is aware of their 3 situation and that there is no coercion. 4 So in spite of her age I probably, if 5. possible, would have interviewed her 6 alone to make sure that she wasn't being pressured and didn't have someone 8 else's --9 BY MR. MAXWELL: 10 Can you tell from the file 11 whether you did that or not? 12 Not from Doctor Tiller's file. 13 Q. Okay. Would you have a file that 14 would contain information not contained 15 in this file? 16 Α. Yes. 17 What would you have? 18 I would have copies of the notes 19 . that he had taken. Well, I don't see --20 sometimes in these really young patients they don't do long telephone interviews 21 22 because it's too distressing for them. But it's hard for me to say. This looks 23 24 like it was done in the office. 25 Generally -- the general practice



| | | <u></u> |
|------|--|---------|
| • | because and this is my understanding, | 85 |
| 4 | 2 my interpretation, is that because these | |
| . 3 | people are coming from a distance, for | |
| 2 | example, here in New York, the patients | |
| 5 | are interviewed at length over the | |
| 6 | telephone. And in the case of a minor | |
| . 7 | presumably the interview most of the | |
| . 8 | time is the parent or the guardian. | _ |
| 9 | So then the purpose of that is to | |
| 10 | keep someone who is not a suitable | |
| 11 | candidate from traveling clear to Kansas | |
| . 12 | | |
| 13 | generally there is a lengthy interview | |
| 14. | that's available to me before I meet the | |
| 15 | patient. | |
| 16 | Q. Is that in that file? | |
| 17 | A. Not in this one, and I'm assuming | |
| 18 | there is one that was done at some | |
| 19 | point. You know, whether or not that. | |
| . 20 | was done before or after I can't say. | |
| 21 | MR. FOCHT: Well look at the | |
| 22 | other side and make sure it isn't there. | |
| 23 | You're not looking at the file. | |
| 24 | A. Well this is usually it could | |
| 25 | be. Now, in the cases of very young | |
| | | |



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| | 86 |
|------|---|
| 1 | patients often they'll just evaluate |
| ·2 | basic things like what's the status of |
| 3 | the ongoing criminal investigation anyway |
| 4 | going on, so generally they would |
| 5 | they they will sometimes not have |
| 6 | that lengthy telephone interview with |
| 7 | the patient because it's too distressing |
| . 8 | for them to to go through that. I |
| 9 | don't see that here. Generally those |
| 10 | are present. |
| 11 | BY MR. MAXWELL: |
| 12 | Q. So that such a thing was not |
| 13 · | contained in the file marked 30-001? |
| 14 | A. Not that I can see. No, it's |
| 15. | it would be over here. It should be on |
| 16 | this side if it was here. |
| 17 | MR. FOCHT: When you say this |
| 18 . | side, indicate which side that you're |
| 19 | talking about. |
| 20 | A. That was the left side. |
| 21 | Generally that material is on the left |
| 22 | side. |
| 23 | BY MR. MAXWELL: |
| 24 | Q. Okay. So tell us you would |
| 25 | have reviewed this file before? |



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| 1 | A. You know, I can, but I generally |
|-----------|---|
| 2 | just deal with the material that they |
| 3 | |
| . 4 | nothing once they've signed a consent |
| 5 | |
| 6 | nothing to prevent me from going and |
| 7 | getting the chart. But I don't do it as |
| 8 | a matter of routine. |
| 9 | Q. So what do you think you saw as |
| 10 | part of your review that's contained in |
| 11 | this file? |
| .12 | .A. I would have seen this minor |
| 13 | consent thing here. |
| 14 · | Q. All right. And that's page |
| 15 | A. Page 42 and 43. |
| 16 | Q. Of 30-0.42 and 043, okay. |
| 17 | A. That's not a hundred sometimes |
| 18 | that would happen after seeing me, but |
| 19 | usually it's happened before. I don't |
| 20 | know. I can't tell if this was this |
| 21 | wouldn't I don't think I would have |
| 22 | seen this. |
| 23 . | MR. FOCHT: When you say when |
| 24 | you pat something give it a number. |
| | · |



I'm sorry.

I'm sorry.

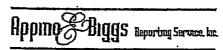
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88 1 Generally what I get is a copy of this 2 sheet. 3 Number of the MR. WILLIAMS: 4 document: 5 Number 30-018 and the result of 6 the telephone interview and any medical 7 records that the patient has had 8 forwarded or brings with them. That's 9 what I generally get. 10 BY MR. MAXWELL: 11 Q. Okay. 12 Α. And if I go and get the chart I 13 would have access to this other 14 material. 15 So it would have been -- it's 16 been represented by the subpoena that 17 this is the entire chart Doctor Tiller 18 It is everything that's contained 19 regarding this patient. So other than 20 the documents you've previously 21 identified, is there anything else you 22 would have seen? 23 Not that I can think of.



other than what's contained in this-

What would you have in your file

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89 1 file? 2 Maybe, you know, depends. Maybe 3 nothing or maybe notes. Generally what 4 I would do is I asked the staff to also make a copy of these interviews that 5 they do in-house. This -- so I 6 7 would also --8 That would be --9 -- have a copy of this. Α. 10. Identify the number; 30-0099 Q. 11 09 and 010, and I often take A. 12 notes on those to amplify any questions 13 that are unclear to me. 14 For the record this is a -- this 15 file is a 14-year-old from New York 16 City, correct? 17 Α. New York State: 18 Q. New York State? 19 I don't know. / It looks like. .. Α. 20 New York State. 14-year-old from New York State, and for the record she . 21 22 was how long -- how far along in her 23 pregnancy? 24 26.4 weeks. : 25 MR. FOCHT: I can't hear you.



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1 Looks like 26.4 weeks. 2 And was the fetus determined to 3 be viable? 4 Yes. Α. 5 THE REPORTER: Did you say 6 viable? A. Yes. 8 BY MR. MAXWELL: 9 Viable. So in order to give this 10 14-year-old a late term abortion after 11 the fetus is determined viable and 26 12 weeks old, basically what has to happen 13 is two doctors have to find that either 14 the abortion is necessary to preserve 15 the life of the pregnant woman or a 16 continuation of the pregnancy will cause 17 a substantial and irreversible impairment 18 of a major bodily function of the 19 pregnant woman, true? 20 Α. Right. 21 Okay. Is there any indication in 22 this file that this abortion was 23 necessary to preserve the life of this 24 14-year-old? 25 Not her physical life, no.



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1 Not forced. But I don't think at 2 14 you can give consent. Isn't the age 3 of consent 16? 4 Yes, ma'am, you're right. 5 question is to you did she report to 6 Doctor Tiller that she was the victim of .7 non-consensual sex? 8 A. Well I think the guardian is the 9 only one that can do that, correct. 10 patient herself can't decide whether it 11 was consensual. 12 Well what did she answer when she 13 was asked the question if you were 14 or 15 years old did you agree to have sex $_{\cdot}$ 14 15 with someone, what did she answer? 16 A. She answered yes. 17 MR. FOCHT: I object to the form 18 of the question unless you have personal 19 knowledge what she answered, you don't 20 know that. BY MR. MAXWELL: What does the form say? Well the form on there -- the answer is circled yes, but it's not determined who circled it.

21

22

23

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| 1 | Q. Okay. If you were 14 or 15 years |
|------|--|
| 2 | old, the next question is did you and |
| 3 | you agreed to have sex with someone, was |
| 4 | your partner 18 years of age or older or |
| 5 | less, and what did she say? |
| 6 | A. Well the answer that's circled, |
| 7 | yes. |
| ٠8. | Q. Okay. And when she was asked if |
| .6 | you were 14 or 15 years old and you |
| 10 | agreed to have sex with someone, were |
| 11 | you physically, emotionally injured as a |
| 12 | result of the sexual activity, what was |
| 13 | her answer? |
| 14 | A. Well her answer was no, but I |
| 15 . | don't know that she actually |
| 16 | Q. I understand. |
| 17 | A understood what that meant |
| 18 . | implications of that. |
| 19 | Q. Are you are you yourself |
| 20 | younger than 14 years of age, and she |
| 21 | said what? |
| 22 | A. No. |
| 23 | Q. No. Okay, so and I guess |
| 24 | okay. Let's talk a little bit about |
| 25 | A. It's hard to say how old she was |



94 .1 when she actually got pregnant. .2 Right, I understand. 3 We don't have a date. 4 I understand. But let's talk a 5 little bit about there is nothing in the file that the physical life of the 6 7 mother was at jeopardy? 8 Other than the fact that, you 9 know, one out of 15,000 woman die in childbirth. Other than that, no. 10 .11 Okay. So let's talk -- so 12 basically what you'll have to -- in 13 order to do a late term abortion on this 14 patient, you have to do the second prong 15 of the statute. Two physicians have to 16 find that a continuation of the 17 pregnancy will cause a substantial and 18 irreversible impairment of a major 19 bodily function of the pregnant woman, 20 correct? 21 Α. Correct. 22 Okay. So what --23 MR. FOCHT: If you don't agree 24 with him just say so, because we will 25 make those argumentative.



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1 Do you remember that amendment to 2 the whole thing where it said that it 3 was understood to mean that a mental 4 function is part of the health. 5 MR. FOCHT: . Tell him that. . Don't 6 tell me. 7 MR. MAXWELL: Here is the 8 statute. 9 Doesn't make any MR. FOCHT: 10. difference what the statute says. You 11 give him your impression of what --12 There -- there was some kind of Α. 13 reinterpretation of that where they made 14 it clear, and it isn't on the internet, 15 but I've seen that document. It made it 16 very clear that nothing in this is meant 17 to construe that a person's mental 18 health is not a part of their overall 19 health. 20 BY MR. MAXWELL: :.. 21 L understand. That's your 22 opinion, right? 23 No, that was written. 24 law. 25 FOCHT: I .think that may have MR.



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| 1 | been in the Alpha and Beta case. I'm |
|----|--|
| .2 | |
| 3 | THE REPORTER: Alpha |
| 4 | MR. FOCHT: and Beta, but I don't |
| 5 | know: |
| 6 | A. Well you have it. You have a |
| 7 | copy of it because you showed it to me. |
| .8 | MR. FOCHT: That would have been |
| 9 | Alpha Beta. |
| 10 | BY MR. MAXWELL: |
| 11 | Q. All right. So let's read |
| 12 | let's read sub-section together, 65-6703 |
| 13 | sub-section 2, would you read it as it's |
| 14 | stated, and it starts right there. |
| 15 | A. A continuation of the pregnancy |
| 16 | will cause a substantial and |
| 17 | irreversible impairment of a major |
| 18 | bodily function of a pregnant woman. |
| 19 | Q. Okay. So we agree that that's |
| 20 | the statute that we're we're talking |
| 21 | about? |
| 22 | MR. FOCHT: Object to the form of |
| 23 | the question. Whether you agree with |
| 24 | him or not is immaterial. |
| 25 | BY MR. MAXWELL: |





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| 1 | Q: Absolutely not, okay. Your |
|----|--|
| .2 | letter basically says that you are |
| 3 | referring that you are referring the |
| 4 | above patient to your organization for |
| 5 | consultation regarding unwanted |
| 6 | pregnancy. What do you mean by that |
| .7 | statement? |
| | |

- A. Well, like I said the attorneys drew this up to be in compliance with the law, so what I understand it to mean is that in my opinion the pregnancy is necessarily -- is necessary, based on substantial and irreversible impairment of a major physical or mental function as we discussed before. Because your mental health impacts on your physical health.
- Q. I guess I'm just talking about the first sentence. The first sentence says I am referring, and this is from you, you signed this letter, right?
 - A. Right.
- Q. And you said I am referring the above patient -- named patient to your organization for consultation regarding



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|------|--|-----|
| 1 | her unwanted pregnancy. | 10 |
| 2 | A. Right. | |
| . 3 | Q. As I understood you earlier that | |
| 4 | Tiller was the one that called you or | |
| . 5 | or had the office | |
| 6 | A. Like I said, I never really | |
| 7 | thought about the wording because I left | • |
| 8. | that up to the attorneys to to make | |
| . 9 | it in compliance with the law. Why the | |
| 10 | word referring is in there, that's a | |
| 11 · | good question. I just didn't question | |
| 12 | : | |
| . 13 | Q. Because you really didn't refer | |
| 14 | that patient? | |
| 15 | A. No, not really, no. I mean, in a | |
| 16 | sense, right. He's the I am the | |
| 17 · | consultant and he is the referring, and | |
| 18 | I just never questioned that. It never | |
| 19 | occurred to me that that would be a | |
| 20 | problem. | |
| 21 | Q. Okay. | |
| 22 | A. So I agree the wording is | |
| 23 | questionable. | |
| 24 | Q. The wording is questionable? | |
| 25 | A. As far as the referring. The | |

