

STATE OF SOUTH CAROLINA

COUNTY OF CHARLESTON

JAVON K. CURNELL, Individually and as Personal Representative of the Estate of Joyce E. Curnell, Deceased, Plaintiff(s)

vs.

CAROLINA CENTER FOR OCCUPATIONAL HEALTH and THEODOLPH JACOBS, MD, Defendant(s)

IN THE COURT OF COMMON PLEAS

CIVIL ACTION COVERSHEET

2016-11-10-11

(Please Print) Submitted By: James B. Moore, III Address: Evans Moore, LLC 121 Screven Street, Georgetown, SC 29440

SC Bar #: 74268 Telephone #: 843-995-5000 Fax #: 843-527-4128 Other: E-mail: james@evansmoorelaw.com scott@evansmoorelaw.com julie@evansmoorelaw.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for the use of the Clerk of Court for the purpose of docketing. It must be filled out completely, signed, and dated. A copy of this cover sheet must be served on the defendant(s) along with the Summons and Complaint.

DOCKETING INFORMATION (Check all that apply)

*If Action is Judgment/Settlement do not complete

- JURY TRIAL demanded in complaint. NON-JURY TRIAL demanded in complaint. This case is subject to ARBITRATION pursuant to the Court Annexed Alternative Dispute Resolution Rules. This case is subject to MEDIATION pursuant to the Court Annexed Alternative Dispute Resolution Rules. This case is exempt from ADR. (Proof of ADR/Exemption Attached)

NATURE OF ACTION (Check One Box Below)

- Contracts: Constructions (100), Debt Collection (110), Employment (120), General (130), Breach of Contract (140), Other (199)
Torts - Professional: Dental Malpractice (200), Legal Malpractice (210), Medical Malpractice (200-CP-), Notice/File Med Mal, Other (299)
Torts - Personal Injury: Assault/Slander/Libel (300), Conversion (310), Motor Vehicle Accident, Premises Liability (330), Products Liability (340), Personal Injury (350), Wrongful Death (360), Other (399)
Real Property: Claim & Delivery (400), Condemnation (410), Foreclosure (420), Mechanic's Lien (430), Partition (440), Possession (450), Building Code Violation (460), Other (499)
Inmate Petitions: PCR (500), Mandamus (520), Habeas Corpus (530), Other (599)
Judgments/Settlements: Death Settlement (700), Foreign Judgment (710), Magistrate's Judgment, Minor Settlement (730), Transcript Judgment, Lis Pendens (750), Transfer of Structured Settlement Payment Rights Application (760), Other (799)
Administrative Law/Relief: Reinstate Driver's License, Judicial Review (810), Relief (820), Permanent Injunction (830), Forfeiture-Petition (840), Forfeiture-Consent Order, Other (899)
Appeals: Arbitration (900), Magistrate-Civil (910), Magistrate-Criminal (920), Municipal (930), Probate Court (940), SCDOT (950), Worker's Comp (960), Zoning Board (970), Administrative Law Judge (980), Public Service Commission (990), Employment Security Comm, Other (999)
Special/Complex /Other: Environmental (600), Automobile Arb. (610), Medical (620), Other (699), Pharmaceuticals (630), Unfair Trade Practices (640), Out-of State Depositions, Motion to Quash Subpoena in an Out-of-County Action (660), Sexual Predator (510)

FILED 2016 FEB 24 AM 9:02 JULIE J. ARSIC CLERK OF COURT

Submitting Party Signature: [Signature]

Date: 02/24/2016

Note: Frivolous civil proceedings may be subject to sanctions pursuant to SCRCF, Rule 11, and the South Carolina Frivolous Civil Proceedings Sanctions Act, S.C. Code Ann. §15-36-10 et. seq.

FOR MANDATED ADR COUNTIES ONLY
Allendale, Anderson, Beaufort, Colleton, Florence, Greenville,
Hampton, Horry, Jasper, Lexington, Pickens (Family Court Only), and Richland

SUPREME COURT RULES REQUIRE THE SUBMISSION OF ALL CIVIL CASES TO AN ALTERNATIVE DISPUTE RESOLUTION PROCESS, UNLESS OTHERWISE EXEMPT.

You are required to take the following action(s):

1. The parties shall select a neutral and file a "Proof of ADR" form on or by the 210th day of the filing of this action. If the parties have not selected a neutral within 210 days, the Clerk of Court shall then appoint a primary and secondary mediator from the current roster on a rotating basis from among those mediators agreeing to accept cases in the county in which the action has been filed.
2. The initial ADR conference must be held within 300 days after the filing of the action.
3. Pre-suit medical malpractice mediations required by S.C. Code §15-79-125 shall be held not later than 120 days after all defendants are served with the "Notice of Intent to File Suit" or as the court directs. (Medical malpractice mediation is mandatory statewide.)
4. Cases are exempt from ADR only upon the following grounds:
 - a. Special proceeding, or actions seeking extraordinary relief such as mandamus, habeas corpus, or prohibition;
 - b. Requests for temporary relief;
 - c. Appeals
 - d. Post Conviction relief matters;
 - e. Contempt of Court proceedings;
 - f. Forfeiture proceedings brought by governmental entities;
 - g. Mortgage foreclosures; and
 - h. Cases that have been previously subjected to an ADR conference, unless otherwise required by Rule 3 or by statute.
5. In cases not subject to ADR, the Chief Judge for Administrative Purposes, upon the motion of the court or of any party, may order a case to mediation.
6. Motion of a party to be exempt from payment of neutral fees due to indigency should be filed with the Court within ten (10) days after the ADR conference has been concluded.

**Please Note: You must comply with the Supreme Court Rules regarding ADR.
 Failure to do so may affect your case or may result in sanctions.**

STATE OF SOUTH CAROLINA) IN THE COURT OF COMMON PLEAS
)
 COUNTY OF CHARLESTON) CIVIL ACTION 2016-N-10- 11

JAVON K. CURNELL as Personal)
 Representative of the Estate of JOYCE E.)
 CURNELL,)
)
 Plaintiff,)

v.)

CAROLINA CENTER FOR)
 OCCUPATIONAL HEALTH and)
 THEODOLPH JACOBS, MD,)
)
 Defendants.)

NOTICE OF INTENT TO FILE SUIT
 IN A MEDICAL MALPRACTICE
 CASE (§15-79-125 SCGA)

FILED
 2016 FEB 24 AM 9:02
 JULIE J. ARMSTRONG
 CLERK OF COURT

The Plaintiff hereby submits this Notice of Intent to File Suit pursuant to § 15-79-125 of the 1976 SC Code of Laws as amended.

I. Venue is proper in this Court because all parties are located in Charleston County, South Carolina, and a substantial part of the alleged acts or omissions giving rise to this action occurred in this County.

II. The Affidavit of an expert witness, subject to the Affidavit requirements established in § 15-36-100 1986 SC Code of Laws as amended, is attached hereto as Exhibit A.

III. A short and plain statement of the facts showing that the Plaintiff is entitled to the relief is as follows:

- a. The 50 year-old decedent, Joyce Curnell, was an African-American female with a history of sickle cell disease, chronic ethanolism, and hypertension. At 12:08 PM on July 21, 2015, Ms. Curnell presented via EMS to the emergency room at Roper St. Francis Hospital with complaints of nausea, vomiting, and diarrhea. Lab work was conducted and IV hydration was administered. Emergency Room physician, Kevin Price, diagnosed Ms. Curnell with gastroenteritis, and hypertension. To help reduce the vomiting and nausea, Dr. Price prescribed Zofran ODT 4 mg Oral Tablet to be taken every 4 – 6 hours as needed. During the course of her hospitalization it

was determined that Ms. Curnell had an outstanding bench warrant in connection with a 2011 shoplifting charge. Thereafter, Charleston County Sheriff's Office responded while Ms. Curnell was still a patient at Roper St. Francis Hospital and placed her under arrest. She was transported to the Charleston County Detention Center for booking at 2:30 PM directly from the Roper St. Francis ER.

- b. Registered Nurse Katherine Hall documented that verbal and written discharge instructions were provided to Ms. Curnell and the arresting Charleston County Police Officer. According to the Roper St. Francis ER Discharge Instructions, Ms. Curnell was to seek PROMPT medical ATTENTION if:
 - i. Increasing abdominal pain or constant lower right abdominal pain
 - ii. Continued vomiting
 - iii. Frequent diarrhea
 - iv. Reduced oral intake
 - v. Weakness, dizziness, fainting
 - vi. Drowsiness, confusion, stiff neck, or seizure
- c. Registered Nurse Brandi McCrae Livingston was the intake nurse responsible for providing the initial medical screening of Ms. Curnell at the Charleston County Detention Center. Although the records indicate Nurse Livingston was informed of Ms. Curnell limited medical history, to include sickle cell disease, hypertension, chronic ethanolism and a recent diagnosis of gastroenteritis, Nurse Livingston reported to SLED that she observed "no acute distress and no complaints of nausea and vomiting, only headache." Nonetheless, the available medical records do not support that a detailed initial assessment, including a complete medical history, physical examination, or treatment plan was performed by the CCOH medical staff, including but not limited to Nurse Livingston. Moreover, there is no indication of medical staff following hospital recommendations and symptoms monitoring according to the Roper St. Francis Emergency Room Discharge Instructions.
- d. During the initial medical screening, Nurse Livingston contacted the on call physician, Dr. Theodolph Jacobs, who provided his orders, via telephone, for "Zofran 4mg BID x 5 days as needed for nausea (twice daily), Tylenol 650mg BID x 7 days as need for headache (twice daily)". Upon information and belief, Dr. Jacobs prescribed an inadequate amount of the anti-nausea medication, Zofran. Instead, Ms. Curnell should have been provided access to the medication regimen as prescribed by the physician who physically examined the patient (Zofran ODT 4 mg Oral Tablet to be taken every 4 – 6 hours) and determined the severity of her symptoms while at Roper St. Francis Emergency Room.
- e. Given Ms. Curnell's medical history, to include gastroenteritis (vomiting, nausea, and diarrhea x 2 days), electrolytes abnormalities (hyponatremia, hypokalemia), uncontrolled hypertension in the setting of sickle cell disease, and ethanolism, the standard of care required that she be evaluated by a licensed physician. If a physician was not available for an evaluation, Ms. Curnell should be transferred to a medical facility where such an evaluation could occur. If the decision was made

that it was medically appropriate to detain her, she should have been detained in a unit with appropriate medical observation. Moreover, medical staff, including but not limited to Dr. Jacobs, should have ensured that Ms. Curnell offered appropriate oral or/and IV hydration and was properly monitored for signs and symptoms of alcohol withdraw and dehydration.

- f. Ms. Curnell was escorted to the B3M unit for housing sometime after the initial medical screening. Detention Officer Charlene Jackson was one of the officers assigned to Ms. Curnell's unit. According to her statement, upon entering the B3M unit on the night of July 21, 2015, Ms. Curnell was unsteady and "trying to keep her balance." She complained of her "stomach hurting" and within minutes "she was in the bathroom throwing up." Ms. Curnell reported to Officer Jackson that she was too weak to submit a sick call request. Additionally, Detention Officer Kristen L. Cook reported that she vomited "through the night" and "couldn't make it to the bathroom." Officer Jackson provided Ms. Curnell with a red trash bag and at approximately 1:30 AM, contacted Nurse Ashley B. Wiley requesting medical assistance. Nurse Wiley informed Officer Jackson that a nurse would be coming to the unit around 5:00 AM and that she would evaluate Ms. Curnell.
- g. Ms. Curnell continued to vomit throughout the night. At or around 4:45 AM, Nurse LaTreece L. Gee arrived to the unit. Officer Jackson informed Nurse Gee of Ms. Curnell's physical appearance and that she had been vomiting throughout the night. Despite the fact that medical staff had been informed on at least two occasions of Ms. Curnell's open and obvious medical condition that included "continued vomiting, increasing abdominal pain, weakness, dizziness, drowsiness" as described in the discharge instructions from hospital as indications requiring "PROMPT ATTENTION", in complete and total disregard of the Roper St. Francis Hospital Discharge Instructions, the medical staff employed with CCOH refused to provide any medical attention to Ms. Curnell whatsoever.
- h. In her incident report, Officer Cook reported that on after breakfast on July 22, 2015, Ms. Curnell was unable hold her breakfast down and "layed down throughout the afternoon, vomiting..." Despite Ms. Curnell's physical appearance as described by detention staff and other inmates, there are no records supporting that Ms. Curnell was physically examined, including an abdominal examination. Moreover, there are no records or statements to support that she was appropriately monitored and offered oral hydration or IV hydration to prevent dehydration.
- i. According to the Charleston County Sheriff's Office incident report, Ms. Curnell was last observed by correctional staff on 2:12 PM and was found, unresponsive, at 5:00 PM.
- j. According to the Autopsy Report, Ms. Curnell died as a result of complications of gastroenteritis. According to Plaintiff's expert, Dr. Maria Gibson, had Ms. Curnell been timely evaluated by a medical professional and properly treated for her gastroenteritis and dehydration, her deterioration and ultimate death would have,

more likely than not based on a reasonable degree of medical certainty, been prevented.

IV. It is more likely than not that the above negligent, grossly negligent, intentional, willful and/or reckless actions or omissions by the Defendants caused the Plaintiff's decedent, Joyce Curnell, to incur damages to include severe pain, suffering and death.

V. Standard interrogatory responses are attached hereto as Exhibit B.

VI. Please take notice that pursuant to the *South Carolina Court-Annexed ADR Rule (Rule 4)*, you are advised that this dispute is subject to pre-suit mediation within 120 days.

Respectfully Submitted,

A handwritten signature in black ink, appearing to read "James B. Moore III", is written over a horizontal line.

James B. Moore III
Scott C. Evans
Evans Moore, LLC
121 Screven Street
Georgetown, SC 29440
Office: (843) 995-5000
Facsimile: (843) 527-4128
Attorneys for the Plaintiff

February 24, 2016
Georgetown, SC 29440

Exhibit A

STATE OF SOUTH CAROLINA)	IN THE COURT OF COMMON PLEAS
)	
COUNTY OF CHARLESTON)	CIVIL ACTION 2016-CP-10-_____
)	
JAVON K. CURNELL, as Personal)	
Representative of the Estate of JOYCE E.)	
CURNELL,)	
)	
Plaintiff,)	
)	
v.)	AFFIDAVIT OF EXPERT WITNESS
)	IN MEDICAL MALPRACTICE CASE
CAROLINA CENTER FOR)	§§ 15-36-100, 15-79-125
OCCUPATIONAL HEALTH and)	
THEODOLPH JACOBS, MD,)	
)	
Defendants.)	
)	
)	
)	

I, Maria V. Gibson, MD, PHD, CPE, being duly sworn depose and says:

1. I am a physician, licensed by the State of South Carolina and the appropriate regulatory agency having jurisdiction over the practice of my profession in the location in which I practice.
2. I am Board Certified by the American Board of Family Physicians, a national association which administers written examinations for certification in the area of practice and specialty about which this opinion on the standard of care is offered.
3. I have actual professional knowledge and experience in the specialty and area of practice in which this opinion is given, as a result of my having been regularly engaged in the active practice in the area of specialty and practice for last fourteen (14) years immediately preceding this opinion. Additionally, I have spent 10 years teaching medical students and Family Medicine residents as a faculty member of the Medical University of South

Carolina in Charleston, SC and two years at the Emory University School of Medicine in Atlanta, Georgia (see attached CV).

4. This affidavit is made pursuant §15-36-100 of the 1976 SC Code of Laws, which requires that this affidavit must specify at least one negligent act or omission claimed to exist and the factual basis for each claim based on the available evidence at the time of the filing of the affidavit.
5. The evidence made available to me, for my review, prior to the making of this affidavit, includes:
 - SLED Investigative Report with supporting attachments;
 - Autopsy Report;
 - Death Certificate;
 - Roper St. Francis Emergency Room records;
 - Charleston County EMS records; and
 - Carolina Center for Occupational Health records.

Additionally, it is my understanding that discovery is expected to commence immediately and that I can expect to receive further information including depositions or medical records and/or reports. Therefore, upon receipt and review of this information my opinions may be further supplemented, altered or changed.

6. Through my professional standing as set forth above, I am familiar with the applicable standard of care practiced by health care providers generally, including those who practice medicine and evaluate adult patients in a custodial setting. The applicable standard of care requires that:
 - a. In order to formulate the most accurate assessment and appropriate plan of treatment of the inmate in a given clinical situation, the medical staff at a Detention Center must obtain, review, and properly consider all available prior medical records, which document and detail prior medical history and treatment that can be taken into account.
 - b. Upon assuming clinical responsibility for the care of a new patient, the correctional and medical staff at a Detention Facility (including physicians) must, in a timely

fashion, conduct a medical evaluation, including but not limited to comprehensive history, physical examination, and diagnostic testing appropriate to the patient's stated past medical history and current clinical status.

- c. The correctional and medical staff at a Detention Center (including physicians) must, in a timely fashion, formulate a diagnostic and therapeutic intervention plan based upon the clinical and diagnostic assessment. Said intervention plan should take into consideration all reasonable interventions and, in a timely fashion, implement those which are necessary to alleviate suffering and avert clinical deterioration.
- d. In a Detention Center setting, it is the physician's responsibility to ensure that (when clinically warranted) detainees are evaluated for the presence of medical conditions and receive medical care based on current health care standards or /and being transferred in a timely manner to an appropriate medical facility capable to provide standards of care under the clinical circumstances present at the time.
- e. In a Detention Center setting, it is the security and medical staffs' responsibility to comply with and enforce all national, state, and local medical directives, policies, and procedures that are relevant to a given set of clinical circumstances.
- f. During the booking process, the security and medical staff are required to perform an appropriate medical screening of each detainee. This would include the proper observation of the detainee, as well as obtaining the appropriate medical background, history and exam of the patient/detainee.
- g. After obtaining the appropriate history and background of the patient at the screening stage of the booking process, the security and medical staff must ensure that any detainee/patient with an emergent medical condition is seen in a timely fashion by the responsible physician so the patient can be properly evaluated and a plan of treatment implemented. If a patient is noted to be suffering from alcoholism based on the medical history and alcohol withdrawal is suspected on the basis of said medical screening and no physician is available to perform the evaluation, then the detainee/patient must be transferred in a timely fashion to the nearest health care facility where said evaluation can be carried out.
- h. Applicable state and national standards require that, after a patient/detainee has been identified (through previous medical records, an initial intake screening process, or various processes at any time thereafter) as possibly in need of alcohol detoxification, she is to be provided the opportunity for an appropriate assessment and plan of treatment to be created and administered by the proper medical personnel.
- i. The security and medical staff of a Detention Center should not accept or book a patient/detainee into the facility who is physically and/or mentally unstable and or in need of emergent medical care, but arrange for immediate transfer to a medical facility with the capability of providing such stabilization.

- j. Examples of conditions that could require diagnostic and therapeutic management beyond the scope of a Detention Center to evaluate and treat include but are not limited to: substance abuse, liver disease, acute gastroenteritis, nausea/vomiting/diarrhea coupled with sickle cell disease/traits, and hypertension.
 - k. A detainee whose is booked into a Detention Center with an acute or worsening of a chronic medical condition must be seen and evaluated by a qualified physician in a timely fashion so that a proper assessment can be formulated and plan of treatment can be developed and implemented. If a decision is made to book a detainee into a Detention Center with serious medical conditions, she must be closely monitored by qualified medical staff so that any change in condition can be communicated to the physician in a timely fashion. The physician then must make an assessment of the significance of the change in clinical status and ensure that an appropriate management to the change takes place.
 - l. It is a breach of the standard of medical care for a nurse (LPN or RN) to make independent decisions regarding the medical diagnosis and treatment of a patient with serious medical conditions, including substance abuse, alcohol withdrawal, liver disease, sickle cell disease/trait and dehydration without communicating the clinical findings with a physician.
 - m. It is the on-site or on-call physician's responsibility to ensure that the medical directives of Charleston County Detention Center and Carolina Center for Occupational Health are properly followed and enforced.
7. I have reviewed the records as submitted to me, and based upon my expertise, as set forth above, it is my opinion to a reasonable degree of medical certainty that the medical staff working within the Charleston County Detention Center, to include those employed by Carolina Center for Occupational Health (hereinafter referred to as "CCOH"), the Charleston County Detention Center, the Charleston County Sheriff's Office, and/or Charleston County, South Carolina committed the following negligent, grossly negligent, willful, wanton and/or reckless acts and/or omissions, which constituted a failure to comply with the appropriate standard of care:
- a. The 50 year-old decedent, Joyce Curnell, was an African-American female with a history of sickle cell disease, chronic ethanolism, and hypertension. At 12:08 PM on July 21, 2015, Ms. Curnell presented via EMS to the emergency room at Roper St. Francis Hospital with complaints of nausea, vomiting, and diarrhea. Lab work was conducted and IV hydration was administered. Emergency Room physician,

Kevin Price, diagnosed Ms. Curnell with gastroenteritis, and hypertension. To help reduce the vomiting and nausea, Dr. Price prescribed Zofran ODT 4 mg Oral Tablet to be taken every 4 – 6 hours as needed. During the course of her hospitalization, a criminal history search was conducted and it was determined that Ms. Curnell had an outstanding bench warrant in connection with a 2011 shoplifting charge. Thereafter, Charleston County Sheriff's Office responded while Ms. Curnell was still a patient at Roper St. Francis Hospital and placed her under arrest. She was transported to the Charleston County Detention Center for booking at 2:30 PM directly from the Roper St. Francis ER.

- b. Registered Nurse Katherine Hall documented that verbal and written discharge instructions were provided to Ms. Curnell and the arresting Charleston County Police Officer. According to the Roper St. Francis ER Discharge Instructions, Ms. Curnell was to seek PROMPT medical ATTENTION if:
 - i. Increasing abdominal pain or constant lower right abdominal pain
 - ii. Continued vomiting
 - iii. Frequent diarrhea
 - iv. Reduced oral intake
 - v. Weakness, dizziness, fainting
 - vi. Drowsiness, confusion, stiff neck, or seizure
- c. Registered Nurse Brandi McCrae Livingston was the intake nurse responsible for providing the initial medical screening of Ms. Curnell at the Charleston County Detention Center. Although the records indicate Nurse Livingston was informed of Ms. Curnell limited medical history, to include sickle cell disease, hypertension, chronic ethanolism and a recent diagnosis of gastroenteritis, Nurse Livingston reported to SLED that she observed “no acute distress and no complaints of nausea and vomiting, only headache.” Nonetheless, the available medical records do not support that a detailed initial assessment, including a complete medical history, physical examination, or treatment plan was performed by the CCOH medical staff, including but not limited to Nurse Livingston. Moreover, there is no indication of medical staff following hospital recommendations and symptoms monitoring according to the Roper St. Francis Emergency Room Discharge Instructions.
- d. During the initial medical screening, Nurse Livingston contacted the on call physician, Dr. Theodolph Jacobs, who provided his orders, via telephone, for “Zofran 4mg BID x 5 days as needed for nausea (twice daily), Tylenol 650mg BID x 7 days as need for headache (twice daily)”. It is my opinion that Dr. Jacobs prescribed an inadequate amount of the anti-nausea medication, Zofran. Ms. Curnell should have been provided access to the medication regimen as prescribed by the physician who physically examined the patient (Zofran ODT 4 mg Oral Tablet to be taken every 4 – 6 hours) and determined the severity of her symptoms as well as a high risk for developing life threatening dehydration based on her history of sickle cell disease and electrolytes abnormalities at Roper St. Francis Emergency Room.

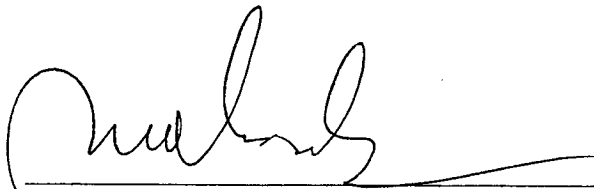
- e. Given Ms. Curnell's medical history, to include gastroenteritis (vomiting, nausea, and diarrhea x 2 days), electrolytes abnormalities (hyponatremia, hypokalemia), uncontrolled hypertension in the setting of sickle cell disease, and ethanolism, the standard of care required that she be evaluated by a licensed physician. If a physician was not available for an evaluation, Ms. Curnell should have been transferred to a medical facility where such an evaluation could occur. If the decision was made that it was medically appropriate to detain her, she should have been detained in a unit with appropriate medical observation. Moreover, medical staff, including but not limited to Dr. Jacobs, should have ensured that Ms. Curnell offered appropriate oral or/and IV hydration and was properly monitored for signs and symptoms of alcohol withdraw and dehydration. Failure to ensure that this was done was a gross deviation of the standard of care.

- f. Ms. Curnell was escorted to the B3M unit for housing sometime after the initial medical screening. Detention Officer Charlene Jackson was one of the officers assigned to Ms. Curnell's unit. According to her statement, upon entering the B3M unit on the night of July 21, 2015, Ms. Curnell was unsteady and "trying to keep her balance." She complained of her "stomach hurting" and within minutes "she was in the bathroom throwing up." Ms. Curnell reported to Officer Jackson that she was too weak to submit a sick call request. Additionally, Detention Officer Kristen L. Cook reported that she vomited "through the night" and "couldn't make it to the bathroom." Officer Jackson provided Ms. Curnell with a red trash bag and at approximately 1:30 AM, contacted Nurse Ashley B. Wiley requesting medical assistance. Nurse Wiley informed Officer Jackson that a nurse would be coming to the unit around 5:00 AM and that she would evaluate Ms. Curnell. Ms. Curnell continued to vomit throughout the night. At or around 4:45 AM, Nurse LaTreece L. Gee arrived to the unit. Officer Jackson informed Nurse Gee of Ms. Curnell's physical appearance and that she had been vomiting throughout the night. Despite the fact that medical staff had been informed on at least two occasions of Ms. Curnell's open and obvious medical condition that included "continued vomiting, increasing abdominal pain, weakness, dizziness, drowsiness" as described in the discharge instructions from hospital as indications requiring "PROMPT ATTENTION", in complete and total disregard of the Roper St. Francis Hospital Discharge Instructions, the medical staff employed with CCOH refused to provide any medical attention to Ms. Curnell whatsoever. The failure to provide timely medical care to Ms. Curnell was grossly negligent and directly contributed to her untimely death.

- g. In her incident report, Officer Cook reported that on after breakfast on July 22, 2015, Ms. Curnell was unable hold her breakfast down and "layed down throughout the afternoon, vomiting..." Despite Ms. Curnell's physical appearance as described by detention staff and other inmates, there are no records supporting that Ms. Curnell was physically examined, including an abdominal examination. Moreover, there are no records or statements to support that she was appropriately monitored and offered oral hydration or IV hydration to prevent dehydration.


- h. According to the Charleston County Sheriff's Office incident report, Ms. Curnell was last observed by correctional staff on 2:12 PM and was found, unresponsive, at 5:00 PM. According to the Medication Administration Records, she received Zofran 4mg twice during her 24 hour detainment at the Charleston County Detention Center.
8. According to the Autopsy Report, Ms. Curnell died as a result of complications of gastroenteritis. The extensive vomiting in the setting of limited hydration due to her deteriorating mental status and abdominal pain caused by her electrolytes abnormalities and dehydration most likely triggered sickling due to her underlying sickle cell disease/trait that worsen already existing dehydration. Additionally, her known and untreated hypertension, ethanolism, chronic liver disease, and coronary artery atherosclerosis contributed to her death. Simply put, Ms. Curnell died because she was deprived of water. She was too sick to tolerate the dehydration as a result of acute gastroenteritis. Had Ms. Curnell been timely evaluated by a medical professional and properly treated for her gastroenteritis and dehydration, her deterioration and ultimate death would have, more likely than not based on a reasonable degree of medical certainty, been prevented.
9. While all of the above mentioned opinions are indicative and examples of a breach in the standard of care, some of them are much worse. They are willful, conscious decisions made in not affording and administering appropriate, proper and emergent medical care to Ms. Curnell. It is my professional opinion that these incidents are not just a single incident of medical negligence but a series of conscious violations of the standard of care and most importantly, written directives, policies and statutes which mandate medical care in circumstances like those facing the Defendants. These gross violations of the standard of care and conscious indifference to Ms. Curnell's medical needs proximately caused her to suffer injuries and die.

[SIGNATURE PAGE TO FOLLOW]



Maria V. Gibson, MD, PHD, CPE

SWORN TO before me this
15 day of FEB, 2016.



(L.S.)

Notary Public for South Carolina
My commission expires: 6/8/22

MARIA V. GIBSON MD, PHD, CPE

OFFICE: MUSCHEALTH PRIMARY CARE

8992 University Blvd, Charleston, SC 29406

Contact cell: 843-819-1635

e-mail:gibsonmv@gmail.com

Qualifications

Practices full time in-and outpatient Family Practice, from newborns to elderly in patient –centered medical home

Proficient in multiple ambulatory procedures, aesthetics, weight management, life style medicine, and group visits

Licensed in SC, GA, CA

Best Doctors of America 2010, 2011, 2012, 2013, 2015

NCQA and ADA Diabetes Physician Recognition award recipient (2007, 2010 2014)

NCQA and AHA/ASA the Heart/Stroke Physician Recognition Program award recipient (2007 and 2010)

Best Doctors in America

Clinical Care (Attending Physician)

2015- current MUSC Health Primary Care (PCMH)

2013-2015 Emory Family Medicine, Emory Healthcare, Emory University School of Medicine, Atlanta, GA (PCMH, in-and outpatient family practice, prenatal care, ambulatory procedures, group visits)

2002-2013 MUSC/Trident Family Medicine Center (2002-2012 0.6 clinical FTE; 2012-2013 1 clinical FTE) Charleston, SC (PCMH, acquired by Trident Health system in April 2013 from Medical University of South Carolina, outpatient care from newborn care to geriatrics, women health, prenatal care, procedures, group visits, with obstetrics 2002-2005)

2009-2013 Physician, part-time, UCI medical affiliates, Urgent care, Charleston, SC

2000-2002 Physician, part-time, Duke Urgent care, Duke University Medical Center, Durham, NC

1999-2002 Resident Physician, Duke University Medical Center, Durham, NC

1990-1996 Physician -faculty, Department of Obstetrics and Gynecology, Tomsk Medical School Hospital, Tomsk, Russia

Consultantships

2010-2011 Physician Advisor -reviewer of health care quality and utilization management, Medicaid Overpayment project. Permedion, HMS inc, New York.

Academic appointments

2015-current Clinical Associate Professor, Medical University of South Carolina (MUSC), Charleston, SC

2013- 2015 Associate Professor, Emory School of Medicine, Atlanta, GA

2007-2012 Associate Professor, Department of Family Medicine, MUSC, Charleston, SC

2002- 2007 Assistant Professor, Department of Family Medicine, MUSC, Charleston, SC

1990-1996 Assistant Professor, Department of Obstetrics and Gynecology, Siberian State Medical University Tomsk, Russia

Administrative Appointments

2013- 2014 Medical Director, Emory Family Medicine, Emory Healthcare, Emory University School of Medicine

2012- 2013 Medical Director, Trident Family health, Trident Health, HCA

2006- 2012 Medical Director of ADA recognized Diabetes Self Management Education program "Yes you can", Department of Family Medicine, MUSC, Charleston, SC

2003-2008 Medical Director, University Family Medicine, Department of Family Medicine, MUSC Trident Family Medicine Residency Program, Charleston, SC

2003-2005 Medical Director, Mobile Health Unit, Hollings Cancer Center, Charleston, SC

1995-1996 Medical Director, Department of Perinatology, Semashko Municipal Women's Hospital, Tomsk, Russia

Hospital privileges

2015-current Medical University of South Carolina, Charleston, SC

2013- current Emory University Hospital at Midtown, Atlanta, GA

2002-2013 Medical University of South Carolina Hospital, Charleston, SC

2002- 2013 Trident Regional Medical Center, Charleston, SC

1999-2002 Duke University Medical Center, Durham, NC

Education

Certified Physician Executive (CPE), American College Physicians executives, Tampa, FL, 2007-2013

MARIA V. GIBSON MD, PHD
Emory Family Medicine

cell: 843-819-1635

e-mail:maria.gibson@emory.edu

Fellowship: Faculty Development, Medical University of South Carolina, Charleston, SC, 2003- 2004
Residency: Obstetrics & Gynecology, Siberian State Medical University, Tomsk, Russia, 1983-1987
Family Practice, Duke University Medical Center, Durham, NC, 1999-2002
PhD degree in Medicine: Siberian State Medical University, Tomsk, Russia, 1987-1990
Medical Degree: Siberian State Medical University, Tomsk, Russia, 1977- 1983

Licensure and certifications

Georgia Medical Board Medical License
California Medical License
South Carolina medical license
Permanent Unrestricted License to practice OBGYN, Medicine in Russia
Diplomat of the National Board of Medical Examiners, 2001
Diplomat, American Board of Family Practice, 2002, 2009
Advanced Life support in Obstetrics (AAFP Certified Instructor, Provider)
Advanced Cardiac Life Support (Provider).
Basic Life Support (Provider)
Advanced Trauma Life support (Provider)
Professional Grant Proposal writing (ICI The Grant Institute)
Obstetrics Ultrasound (Russia)
Clinical Psychology (Russia)

Awards

Best Doctors in America 2010, 2011, 2012, 2013, 2015
Teacher of the Year, Trident /MUSC Family Medicine Residency, Medical University of South Carolina, 2012
National Committee for Quality Assurance (NCQA) and American Diabetes Association (ADA) the Diabetes Physician Recognition award recipient, 2007, 2010
National Committee for Quality Assurance (NCQA) and the American Heart Association/ American Stroke Association (AHA/ASA) the Heart/Stroke Physician Recognition Program award recipient, 2007,2010, 2014
Golden Apple Faculty Excellence Award nomination, Medical University of South Carolina, 2007
Golden Oyster Award for Unprecedented Commitment for Residents Education, Medical University of South Carolina 2005, 2007, 2009
Resident Role Model Award. Duke University Medical Center, 2002
Resident Teacher Award, Duke University Medical Center, 2001

Membership in professional societies

American Medical Association
American Academy of Family Physicians
American College of Physicians Executives
South Carolina Academy of Family Physicians
Society of Teachers in Family Medicine
American Diabetes Association
American Society of Diabetes educators
International Balint Society

Committee Memberships:

National and International:

2006-2012 Diabetes Initiative of South Carolina Outreach Council, Member
2004-2011 Society of Teachers of Family Medicine, Central Prenatal Care Group, Member

Regional and State:

2008-2010 SC Academy Family Physicians, Commission of Quality, Member

Institutional:

2014-2015 Clinical Excellence Executive Operations Committee (CEEEOC), The Emory Clinics, Physician-leader
2014-2015 Physician Executives committee, The Emory Clinics, Member
2009-2012 Medical University of South Carolina Faculty, Senator
2009-2012 Communication and Organizational Committee, Member, Medical University of South Carolina
2011-2012 GME Innovation Committee, Medical University of South Carolina, Member
2006-2010 MUSC Women Scholars, Member

MARIA V. GIBSON MD, PHD, CPE

OFFICE: MUSC HEALTH PRIMARY CARE

8992 University Blvd, Charleston, SC 29406

Contact cell: 843-819-1635

e-mail: gibsonmv@gmail.com

2005-2010 Electronic Medical Records Council, EMR Practice Partner, Medical University of South Carolina

Family Medicine Department:

2014-2014 Division leadership group, Emory University School of Medicine,

2003-2011 Continuous Quality Improvement Committee, Medical University of South Carolina Member

2002-2012 Residency Faculty Committee, Medical University of South Carolina, Member

2006-2011 Patient Satisfaction Quality Improvement group, Medical University of South Carolina Chair

2006-2011 Strategic Planning Group in Primary Care, Medical University of South Carolina Chair

2003-2008 Clinical Service Division Committee, Medical University of South Carolina, Member

2006-2008 Faculty Search Committee, Medical University of South Carolina Chair

Trident Medical Center

2006- 2013 Utilization Management Committee, Member

2006-2009 Bylaws Committee, Member

2009- 2013 Clinical effectiveness committee, Member

Community Service

- The C.A.R.E.S clinic – precepting for the third and fourth year medical students. MUSC 2007 - 2012
- Crisis Ministry- precepting for first and third year medical students. MUSC 2006 - 2009

Books published

1. **Gibson MV**. Pelvic pain. Family Medicine. Ambulatory Care & Prevention. Fourth edition. Edited by Mengel M, M: LANGE clinical manual

Peer -reviewed publications

1. Hendrick AM, **Gibson MV**, Kulshreshtha A Diabetic retinopathy. Primary Care ophthalmology. Primary Care: clinics in office Practice. September, 2015, V.42, 3, 451-464
2. **Gibson MV**. Chery D Lymphadenopathy in urgent care. JUCM, June, 2012; 9- 15
3. Hainer BL, **Gibson MV** Vaginitis: Diagnosis and treatment. Am Fam Physician. 2011; 83 (7):807-815
4. **Gibson MV**, Carek PJ, Solomon B Treatment of Co-Morbid Mental Illness in Primary Care: How to Minimize Weight Gain, Diabetes, and Metabolic Syndrome. IJPM; 2011; 41(2) 127-142.
5. **Gibson MV**, Fritz, Julie, Kachur, V Practical strategies for management of hypertension in the elderly. Geriatrics. 2009;64 (10):10-19
6. **Gibson MV** Evaluation and treatment of bone disease after fragility fracture. CME article. Geriatrics. 2008;63 (7):21- 30
7. **Gibson MV**, Hueston WJ. Recruiting faculty to perform deliveries in the Family Medicine Residencies: results of residency programs survey. Fam Med. 2007; 39(2):548-55.
8. **Gibson MV** Cardiovascular and metabolic implications of polycystic ovary syndrome. Patient care. 2007 Dec:17-24
9. **Gibson MV**, Hebbar KA. Anemia of chronic disease: evaluation and management. Patient care. 2006 Nov. 36-40.
10. Dickerson LM, **Gibson MV**. Are Ace –inhibitors and calcium Channel Blockers better than diuretics and beta-blockers in high –risk patients with hypertension? Commentary to SA edition. SA Fam Pract 2006:48 (5) 49

11. Dickerson LM, **Gibson MV** Management of Hypertension in older persons. SA Fam Pract 2006; 48 (5). 44 - 49.
12. **Gibson MV**, Saeed N, Careccia RE. Fever and Rash as Initial Presentation of Langerhans Cell Histiocytosis. Case &Comment. Patient Care. 2006 May; 56-59.
13. **Gibson MV**. Diagnosis and treatment of Vulvovaginal candidiasis. Women's health in primary care. 2006 Apr; 27-35
14. **Hebbar KA, Gibson MV. Hypercalcemia: A case-based guide to causes. Patient Care 2006 Mar; 33-37**
15. **Gibson MV**. Keys to managing abnormal uterine bleeding. Patient care. 2005 Jul; 35-41.
16. Dickerson LM, **Gibson MV** Management of Hypertension in older persons. Am Fam Physician 2005; 71:469-76
17. **Gibson MV**, Diaz VA, Mainous A, GeesyM. Prevalence of breastfeeding and acculturation in Hispanics: Results from NHANES 1999-2000 study. Birth.2005 Jun; 32:2; 92-98.
18. **Gibson MV**. Vaginitis-a case-based guide to infectious causes. Patient Care.2005 Mar; 47-54.
19. **Gibson MV**. Relief for women with chronic pelvic pain. Patient care. 2004 Nov; 25-32
20. **Gibson MV**, Hainer BL. Managing abnormal PAP smears. Patient care. 2003 May; 37:56-6

Non-Peer-reviewed publications

1. Tepljakova (Gibson) MV, Radionchenko AA The immune status in acute salpingitis. Obstetrics and Gynecology, 1991, 7, 71-75
2. Tepljakova (Gibson) MV, Radionchenko AA, RizhovaA Vaginal secretory immune system in acute salpingitis. Obstetrics and Gynecology (Russia), 1990, 6, 54-55
3. Tepljakova (Gibson) MVUltrasound diagnosis of pelvic inflammatory diseases. Ultrasound Diagnosis in perinatology and Gynecology, Suzdal, 1990, 73
4. Tepljakova (Gibson) MV Congenital malformations in the structure of the prenatal pathology in Siberia. Ultrasound in perinatology. St. Petersburg, 1990, 120

Patents

1. Radionchenko A.A, Tepljakova (Gibson) MV, Rishova GL Method of treatment of Pelvic Inflammatory Disease-Patent of Russian Federation #1500302, PMID: 1500302

Invited Presentations

- 2014 Gibson MV, Cherry DA Stream- line Teamwork: Lean approach. Annual ACPE meeting, Chicago, April 2014
- 2014 **Gibson MV**, Lutz L, Lowell E Patient-centered medical home curriculum for family medicine residents (work in progress). 45 min lecture accepted. STFM Annual conference on practice improvement, Tampa, December 6 2014 Strategies Focused on Reducing Barriers to Pneumonia Immunization in Seniors.
- 2014 Rianot Amzat; Bipin J.S. Bagga; Adebowale Akintayo; **Maria Gibson, Poster accepted. STFM Annual conference on practice improvement**, Tampa, December 6 2014
- 2014: Amzat R, Kulshreshtha A, Newsam A, Beck, T **Gibson M**, Awareness of CVD Risk Factor Goals among Patients attending a Primary Care Clinic: SMART -7 Study. American Academy of Family Physicians (AAFP) Scientific Assembly, National Meeting, Washington, DC, October 2014.
- 2014 Kulshreshtha A, Amzat, R, Beck, T, Lakhani, N, Morgan, T **Gibson M**, Smart-7 Study: A Pilot to Evaluate a Patient Self-monitoring Intervention to Improve Cardiovascular Health.Poster to be presented at: North American Primary Care Research Group (NAPCRG), New York City, November 2014

MARIA V. GIBSON MD, PHD, CPE

OFFICE: MUSCHEALTH PRIMARY CARE

8992 University Blvd, Charleston, SC 29406

Contact cell: 843-819-1635

e-mail:gibsonmv@gmail.com

- 2014 Lakhani, NA, Blubaugh, S, Kulshreshtha, A, **Gibson, M.** Factors Influencing Glycemic Control Among Patients with Poorly Controlled Diabetes. Poster to be presented at: North American Primary Care Research Group (NAPCRG), New York City, November 2014
- 2013 **Gibson MV**, Gonsalves W Going Lean: Building Family Practice using LeanKit Kanban Method. American College of Physicians Executives Annual Conference, New York
- 2012 **Gibson MV** , Carek PJ, Houeston BJ Teaching Leadership and Practice Management in Patient-Centered-Medical Home. Society of Teachers of Family Medicine Annual Conference, Seattle
- 2012 Gibson MV Leadership and Management training for physicians. American College of Physicians Executives Annual Conference, San Francisco, April 2012
- 2010 **Gibson MV** Management of abnormal PAP smears. Guidelines update. Intensive Review of Family Medicine, Kiawah Island, SC. June 2010
- 2010 **Gibson MV** Cardiovascular diseases in women. Intensive Review of Family Medicine, Kiawah Island, SC. June 2010
- 2008 **Gibson MV** Documentation and coding for Diabetes care. SC chapter of billing and coding, MUSC, Charleston, SC, November, 2008
- 2008 **Gibson MV**, J. Freedy , J. Mayers Medical Home for patients with diabetes; focus on Depression Society of Teachers of Family Medicine Behavior Forum, Chicago, October 2008
- 2008 **Gibson MV**, Cheri Schauman-Singletary, J. Mayers (MS-4) Do patients with diabetes and depression achieve optimal diabetes and blood pressure control after diabetes self-management education? (Poster) 14th Annual Diabetes Fall Symposium for Primary care Professionals in Charleston, SC , September 2008
- 2008 Matthew Mccdermott, (MS-3), **Maria Gibson** , Cheri Schauman-Singletary Is glycemic control, adherence to healthy diet, exercise and medications associated with weight loss after diabetes self-management education? won the 1st place in the students posters category at the 14th Annual Diabetes Fall Symposium for Primary care Professionals in Charleston, SC , September 2008
- 2008 **Maria V. Gibson.** HPV Diseases: prevention and treatment. Intensive Review of Family Medicine, Kiawah Island, SC. June 2008
- 2008 **Maria V. Gibson** Abnormal uterine bleeding. Intensive Review of Family Medicine, Kiawah Island, SC. June, 2008
- 2008 **Maria V. Gibson** Vulvovaginal Infections. Keys to evidence-based management. Intensive Review of Family Medicine, Kiawah Island, SC. June 2008.
- 2008 Donna Kern, **Maria V. Gibson** Teaching Patient Education, behavior Modifications, and collaborative care to medical students: a chronic disease model. Society of Teachers of Family Medicine Predoc Annual Meeting, Portland, January 2008
- 2008 **Maria V. Gibson**, Michael Aho Diabetes Self –management training and diabetes distress. Society of Teachers of Family Medicine Predoc Annual Meeting, Portland, January 2008
- 2007 Cheri Schauman Singletary, Donna Kern, **Maria V. Gibson** Collaborative "Approach to Diabetes Self Management Education training"- won the 1st place in the DSME programs category at the 13th Annual Diabetes Fall Symposium for Primary care Professionals in Charleston, SC , September , 2007. Won the First place among the posters
- 2007 Michael Aho (MS4), **Maria V. Gibson**" Assessing the impact of a Diabetes Self - Management Education Program: behavior change, diabetes related distress and depression" won the 1st place in the students posters category at the 13th Annual Diabetes Fall Symposium for Primary care Professionals in Charleston, SC , September 2007
- 2007 **Maria V. Gibson** Abnormal uterine bleeding. Intensive Review of Family Medicine, Kiawah Island, SC. June 2007
- 2007 **Maria V. Gibson.** HPV Diseases: prevention and treatment. Intensive Review of Family Medicine, Kiawah Island, SC. June 2007
- 2007 **Maria V. Gibson** Vulvovaginal Infections. Keys to evidence-based management. Intensive Review of Family Medicine, Kiawah Island, SC. June 2007.
- 2007 **Maria V. Gibson**, Lori M. Dickerson, William J. Hueston, Liah Jacobson Achieving Treatment Goals in Diabetes Mellitus Management: Patient-Centered Collaborative Diabetes Program for Primary Care. Society of Teachers of Family Medicine Annual Meeting ,Chicago, April 2007
- 2007 **Maria V. Gibson**, Lori M.Dickerson Patient-centered Diabetes care. Lecture for residents ay

MARIA V. GIBSON MD, PHD
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e-mail:maria.gibson@emory.edu

McLeod Family Medicine residency program, Florence. April 2007.

2006 Maria V. Gibson .Patient-Centered Diabetes Care: Focus on Group Visits. McLeod Family Medicine Center, Florence, SC. January 2007.

2006 **Maria V. Gibson**. HPV Disease. Intensive Review of Family Medicine, Kiawah Island, SC. June 2006.

2006 **Maria V. Gibson** .Keys to Managing Abnormal Uterine bleeding. Intensive Review of Family Medicine, Kiawah Island, SC. June 2006.

2006 **Maria V. Gibson** . Vulvovaginal Infections. Intensive Review of Family Medicine, Kiawah Island, SC. June 2006

2006 **Maria V. Gibson**, William J. Hueston Compensation for obstetrical services in Family Medicine academic practices: results of residency programs survey. Poster at the Society of Teachers of Family Medicine Annual Meeting, San Francisco, CA. April 2006

2006 **Maria V. Gibson**, William J. Hueston Compensation for obstetrical services in Family Medicine academic practices: results of residency programs survey. Poster at the Society of Teachers of Family Medicine Annual Meeting, San Francisco, CA. April 2006

2004 **Maria V. Gibson**, Vanessa Diaz, Mark Geesy, Arch Mainous, III Breastfeeding and acculturation in Hispanic women based on NHANES IV survey at NAPCRG, October , 2004

2004 **Maria V. Gibson**, Vanessa Diaz, Mark Geesy, Arch Mainous, III Breastfeeding and acculturation in Hispanic women based on NHANES IV survey at NAPCRG, October , 2004

Exhibit B

STATE OF SOUTH CAROLINA) IN THE COURT OF COMMON PLEAS
)
COUNTY OF CHARLESTON) CIVIL ACTION 2016-CP-10-_____

JAVON K. CURNELL, as Personal)
Representative of the Estate of JOYCE E.)
CURNELL, Deceased,)
)
Plaintiff,)
)
v.)
)
CAROLINA CENTER FOR)
OCCUPATIONAL HEALTH and)
THEODOLPH JACOBS, MD,,)
)
Defendants.)
)

INTERROGATORIES

1. Give the names and addresses of persons known to the parties or counsel to be witnesses concerning the facts of the case and indicate whether or not written or recorded statements have been taken from the witnesses and indicate who has possession of any such statements.

ANSWER:

Javon Curnell
c/o Evans Moore, LLC
121 Screven Street
Georgetown, SC 29440
No Written or Recorded Statement

Sierra Curnell
c/o Evans Moore, LLC
121 Screven Street
Georgetown, SC 29440
No Written or Recorded Statement

Maria Gibson, MD
1357 Deep Water Drive
Mt. Pleasant, SC 29464
Expert Affidavit

Robert S. Roderick
c/o Sheriff Al Cannon Detention Center
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

Brandon Jones
c/o Sheriff Al Cannon Detention Center
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

Brittany S. Butler
c/o Sheriff Al Cannon Detention Center
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

David Y. Breshers
c/o Sheriff Al Cannon Detention Center
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

Kenneth E. Heider
c/o Sheriff Al Cannon Detention Center
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

Sabrina C. Pritchard
1231 Winston Street
Charleston, SC 29407
Statement of SLED Investigative Report 31-15-0070

Alexa K. Green
c/o Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

Dionee K. Starkes
c/o Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

Elizabeth A. Watson
c/o Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

Beronica Hernandez
c/o Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

Heather M. Price
c/o Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

Lynnette M. Morris
c/o Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

Angela M. Rutledge
c/o Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

Brandi Livingston, RN (CCOH)
c/o Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070

Anntinette Ancrum, CMA (CCOH)
c/o Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
Medical Records of Carolina Center for Occupational Health

Theodolph Jacobs, MD (CCOH)
c/o Carolina Center for Occupational Health
3841 Leeds Avenue

**Charleston, SC 29405
Medical Records of Carolina Center for Occupational Health**

**Kevin Price, MD (Roper)
c/o Bon Secours St. Francis
2095 Henry Tecklenburg Drive
Charleston, SC 29414
Medical Records of Roper St. Francis, Bon Secours**

**Thomas Barron (CCOH)
c/o Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070**

**Lynnette Morris, RN (CCOH)
Kathryn Hall, RN (Roper)
Nicholas Batalis, MD (Autopsy-MUSC)**

**Atala Diehl-Moore
c/o Sheriff Al Cannon Detention Center
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070**

**Debra Beamon
c/o Sheriff Al Cannon Detention Center
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070**

**Kristen Leigh Cook
1215 Mosstree Drive, Apt. 21
N. Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070**

**Lisa Rush Hilker
1830 Magwood Drive, #301
Charleston, SC 29407
Statement of SLED Investigative Report 31-15-0070**

**Karen B. Gadsden
514 Hwy 174
Edisto Island, SC 29438-6860
Statement of SLED Investigative Report 31-15-0070**

**Charlene Jackson
c/o Sheriff Al Cannon Detention Center
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070**

**Ashley Wiley
c/o Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070**

**LaTreece L. Gee
c/o Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
Statement of SLED Investigative Report 31-15-0070**

**Various employees of Roper St. Francis
2095 Henry Tecklenburg Drive
Charleston, SC 29414
Medical Records of Roper St. Francis**

**Various employees of Sheriff Al Cannon Detention Center
3841 Leeds Avenue
Charleston, SC 29405
SLED Investigative Report 31-15-0070**

**Various employees of Carolina Center for Occupational Health
3841 Leeds Avenue
Charleston, SC 29405
SLED Investigative Report 31-15-0070
Medical Records of Roper St. Francis**

Plaintiff reserves the right to supplement this response as discovery progresses in this action.

2. Set forth a list of photographs, plats, sketches, or other prepared documents in possession of the party or counsel that relate to any claim or the defense in the case.

ANSWER:

- a. SLED Investigative Report 31-15-0070;**
- b. Medical Records of Roper St. Francis;**
- c. Medical Billing of Roper St. Francis;**
- d. Autopsy Report;**

- e. **Medical Records of Carolina Center for Occupational Health;**
- f. **Medical Records of Charleston County EMS;**
- g. **Medical Billing of Charleston County EMS;**
- h. **Toxicology Records;**
- i. **Death Certificate.**

Plaintiff reserves the right to supplement this response as discovery progresses in this action.

3. In cases involving personal injury set forth the names and addresses of all physicians who have treated the party and all hospitals to which the party has been committed in connection with said injuries and also set forth a statement of all medical costs involved.

ANSWER:

**Roper St. Francis
2095 Henry Tecklenburg Drive
Charleston, SC 29414**

**Roper St. Francis Physicians
2095 Henry Tecklenburg Drive
Charleston, SC 29414**

**Charleston County EMS
Post Office Box 863
Lewisville, NC 27023-0863**

**Carolina Center for Occupational Health
3841 Leeds Ave, North Charleston, SC 29405**

Plaintiff reserves the right to supplement this response as discovery progresses in this action.

4. Set forth the names and addresses of all insurance companies which have liability insurance coverage relating to the claim and set forth the number or numbers of policies involved and the amount or amount of liability coverage provided in each policy.

ANSWER:

Plaintiff is unaware as to the names and addresses of all insurance companies which have liability insurance coverage relating to this claim at this time. Plaintiff reserves the right to supplement this response as discovery progresses in this action.

5. Set forth an itemized statement of all damages, exclusive of pain and suffering, claimed to have been sustained by the party.

ANSWER:

Plaintiff seek wrongful death and survival damages in an amount to be determined by a finder of fact. Plaintiff reserves the right to supplement this response as discovery progresses in this action.

6. List the names and addresses of any expert witnesses whom the party proposes to use as a witness at the trial of the case.

ANSWER:

Attached to the Notice of Intent please find the Affidavit and CV of Maria V. Gibson, MD to be used for the pre-suit requirements under the Notice of Intent. This response will be supplemented by the Plaintiff upon the determination of final trial expert(s).

For each person known to the party or counsel to be a witness concerning the facts of the case, set forth either a summary sufficient to inform the other party of the important facts known to or observed by the witness, and provide a copy of any written or recorded statements taken from such witness.

ANSWER:

Javon Curnell- As the Plaintiff and son of decedent Joyce Curnell, it is expected Mr. Curnell will testify as to his knowledge of the events and circumstances surrounding the incident in question.

Sierra Curnell- As the daughter of decedent Joyce Curnell, it is expected Ms. Curnell will testify as to her knowledge of the events and circumstances surrounding the incident in question.

Maria Gibson, MD-It is expected Dr. Maria Gibson will testify in accordance with her expert affidavit prepared based on her review of the records of Joyce Curnell.

Robert S. Roderick- As an employee of Sheriff Al Cannon Detention Center, it is expected Officer Roderick will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division.

Brandon Jones- As an employee of Sheriff Al Cannon Detention Center, it is expected Officer Jones will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division.

Brittany S. Butler- As an employee of Sheriff Al Cannon Detention Center, it is expected Officer Butler will testify as to the events and circumstances surrounding the incident in

question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division.

David Y. Breshers- As an employee of Sheriff Al Cannon Detention Center, it is expected Officer Breshers will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division.

Kenneth E. Heider- As an employee of Sheriff Al Cannon Detention Center, it is expected Officer Heider will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division.

Sabrina C. Pritchard- As a witness it is expected Ms. Pritchard will testify to the events and circumstances surrounding the incident in question and in accordance with her statement previously provided to the South Carolina Law Enforcement Division.

Alexa K. Green- As an employee of CCOH, it is expected Ms. Green will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Dione K. Starkes- As an employee of CCOH, it is expected Ms. Starkes will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Elizabeth A. Watson- As an employee of CCOH, it is expected Ms. Watson will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Beronica Hernandez- As an employee of CCOH, it is expected Ms. Hernandez will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Heather M. Price- As an employee of CCOH, it is expected Ms. Price will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Lynnette M. Morris- As an employee of CCOH, it is expected Ms. Morris will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Angela M. Rutledge- As an employee of CCOH, it is expected Ms. Rutledge will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Brandi Livingston, RN- As an employee of CCOH, it is expected Ms. Livingston will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Anntinette Ancrum, CMA- As an employee of CCOH, it is expected Ms. Ancrum will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Theodolph Jacobs, MD- As an employee of CCOH, it is expected Ms. Jacobs will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Kevin Price, MD-As the treating physician at Roper St. Francis, it is expected Dr. Price will testify in accordance with the medical records of Joyce Curnell from Roper St. Francis.

Thomas Barron- As an employee of CCOH, it is expected Mr. Barron will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Lynnette Morris, RN- As an employee of CCOH, it is expected Ms. Morris will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Kathryn Hall, RN- As a treating nurse at Roper St. Francis, it is expected Ms. Hall will testify in accordance with the medical records of Joyce Curnell from Roper St. Francis.

Nicholas Batalis, MD-As the pathologist who conducted the autopsy of Joyce Curnell, it is expected Dr. Batalis will testify in accordance with the autopsy report of Joyce Curnell.

Atala Diehl-Moore- As an employee of Sheriff Al Cannon Detention Center, it is expected Officer Diehl-Moore will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division.

Debra Beamon- As an employee of Sheriff Al Cannon Detention Center, it is expected Officer

Beamon will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division.

Kristen Leigh Cook- As a witness it is expected Ms. Cook will testify to the events and circumstances surrounding the incident in question and in accordance with her statement previously provided to the South Carolina Law Enforcement Division.

Lisa Rush Hilker- As a witness it is expected Ms. Hilker will testify to the events and circumstances surrounding the incident in question and in accordance with her statement previously provided to the South Carolina Law Enforcement Division.

Karen B. Gadsden- As a witness it is expected Ms. Pritchard will testify to the events and circumstances surrounding the incident in question and in accordance with her statement previously provided to the South Carolina Law Enforcement Division.

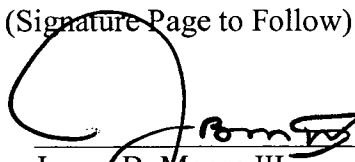
Charlene Jackson- As an employee of Sheriff Al Cannon Detention Center, it is expected Officer Jackson will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division.

Ashley Wiley- As an employee of CCOH, it is expected Ms. Wiley will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

LaTreece L. Gee- As an employee of CCOH, it is expected Ms. Gee will testify as to the events and circumstances surrounding the incident in question and in accordance with their statement previously provided to the South Carolina Law Enforcement Division and the medical records of CCOH.

Plaintiff reserves the right to supplement this response as discovery progresses in this action.

(Signature Page to Follow)



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