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August 26, 1992

Mr. Jim Finch
Texas Medical Liability Trust
P. O. Box 14746
Austin, Texas 78761

Re: TMLT File No.: 9839
TMLT Insured: Shu Ying Turng, M.D.
Claimant/Patient: Erica Portlock, Deceased
Our File No.: 122/23535

Dear Jim:

This letter will serve as our Pre-Trial Report in the above-referenced matter.

INSURED: Shu Ying Turng, M.D.

a. Quality as a Witness:

Dr. Turng should make a good witness at trial. Dr. Turng will appear sincere and will not do anything to anger the jury. The problem Dr. Turng will have is in understanding and responding to questions. As you know, Dr. Turng is Korean and English is her second language. She does have difficulty in understanding and responding to questions. However, Dr. Turng has done a good job in her depositions in this case and the Parvin case. Our overall assessment is that she will do well at trial.

b. Position on Consent/Settlement:

Dr. Turng has indicated to us that she wishes to take this case to trial.

c. Personal Attorney Retained:

No.

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CLAIMS

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CLAIMANT: Raymond Portlock and Mary Portlock

a. DOB/Occupation:

Mr. Portlock is a 41 year old attorney. He has just finished serving a suspension of his license for misappropriation of funds. Mrs. Portlock is a 40 year old lady who works as an administrative assistant to the managing partner at Arthur Anderson..

b. Marital Status/Dependents DOB:

This is the second marriage for both Mr. and Mrs. Portlock. Mr. Portlock has two children from his previous marriage and Mrs. Portlock has one.

c. Quality as a Witness:

The Portlocks make good witnesses and will probably not do anything to harm their position at trial.

**CO-DEFENDANTS-COVERAGE/JOINT/& SEVERAL/INSURANCE
CARRIERS/CODEFENDANT ATTORNEYS:**

Co-Defendants are Duncanville Diagnostic Center, Cheryl Heckerd, R. T. and Linda Cole, R.T. Joint and several liability is a concern, since the radiology technologists, who were employed by Duncanville Diagnostic Center, were the ones responsible for providing the improper dose of chloral hydrate to Erica Portlock. It is very likely that a jury will find one or both technologists and DDC negligent. If Dr. Turng is found to be more than 10% negligent, she will be jointly and severally liable for the entire amount of Plaintiffs' damages.

Co-Defendants are represented by George Carlton of the Godwin, Carlton firm and Wayne Gordon of Touchstone, Bernays. Apparently, these Defendants do not have insurance coverage for this incident, although a claim has been made against the Diagnostic Center's general liability carrier. That carrier has filed a Declaratory Judgment action for a determination that it has no coverage.

INCIDENT:

- a. Chronological date by date summary of insured and co-defendant's treatment:

9/5/89:

Erica Portlock was examined by Dr. Turng at her office for a routine pediatric check-up at age 4 1/2 years. Dr. Turng normally performs a urinalysis as part of her routine examination. The child was unable to give a sample that day, so Dr. Turng requested that a urine sample be brought in at a later date for analysis. The child had no physical symptoms or problems noted on examination.

9/23/89:

A urine sample was brought in by Erica's parents. Microscopic examination by Dr. Turng showed a few red blood cells and white blood cells. Dr. Turng requested a repeat examination within a few days.

9/26/89:

Repeat urine specimen was brought in by Erica's parents. Microscopic examination by Dr. Turng showed "many cells" with 20-30 white blood cells and a few red blood cells. Dr. Turng ordered a urine culture and prescribed Bactrim for possible urinary tract infection.

10/2/89:

Urine culture was reported as showing no growth at three days.

10/17/89:

Another urine specimen was brought in by Erica's parents. Microscopic examination by Dr. Turng showed 10-15 cells, including both red and white blood cells. Dr. Turng noted that the patient apparently had "persistent hematuria and pyuria. To discover what was causing these conditions, Dr. Turng referred Erica to the Duncanville Diagnostic Center for a voiding cystourethrogram (VCUG) and intravenous pyelogram (IVP). Dr. Turng had previously referred a number of patients to DDC for radiological studies without incident.

10/19/89:

Erica was taken by her parents to DDC for the radiological studies ordered by Dr. Turng. After performance of the VCUG, she apparently became restless. The radiology technicians provided her with chloral hydrate to sedate her prior to the injection of contrast dye for performance of the IVP. Apparently, due to errors by the physician and technologists at Duncanville Diagnostic Center, Erica was given a large overdose of chloral hydrate. Later that evening, she died from acute chloral hydrate intoxication.

b. Strengths and weaknesses of case:

The strength of this case lies in the fact that Dr. Turng had no involvement whatsoever in the provision of chloral hydrate to Erica Portlock at the Duncanville Diagnostic Center. Dr. Turng did not request that such sedative be given, was not advised by the individuals at the Duncanville Diagnostic Center that they desired to sedate Erica Portlock, and had no knowledge that the Duncanville Diagnostic Center sedated patients.

Other strengths of our case include the fact that Dr. Turng should make a sympathetic witness at time of trial, that we have an excellent group of experts lined up to testify on her behalf, and that we will be trying this case with a credit of \$1 million toward any damages that might be found as a result of the Plaintiffs' previous settlement with the radiologists who performed these studies.

A possible weakness in the case is the fact that Erica Portlock was asymptomatic at the time the VCUG and IVP were ordered. She had no clinical symptoms of a urinary tract infection or other problem which would in themselves necessitate these studies. Dr. Turng's sole reason for performance of these studies was the continued presence of white and red cells in Erica's urine. Further, the studies proved to be normal in all respects. These facts will allow the Plaintiffs to argue that Dr. Turng ordered unnecessary tests, and that Erica died for nothing. However, these are matters only of perception to lay witnesses who do not know the medical reasons for ordering the tests. Our experts are completely supportive of Dr. Turng's care, and we believe that we can educate the jury as to the necessity for the tests.

DAMAGES (Including Specials):

a. Medical bills (past and future):

Unknown. Not supplemented in discovery.

b. Loss wages (past and future):

Unknown. Not supplemented in discovery.

c. Permanent disability/injury/disfigurement:

Not applicable. This involves death of Erica Portlock.

d. IME results:

Not applicable.

MEDICAL REVIEWS (Consultants and Experts):

a. List key strengths and key weaknesses listed by medical reviewers:

As reported by our reviewers, the strength of case lies in the fact that something needed to be done to explain the consistent presence of red blood cells and white blood cells in Erica Portlock's urine. Performance of a VCUG and IVP is an appropriate method of exploring this occurrence. In addition, our witnesses will testify that use of sedatives in connection with performance of an IVP is not standard practice and that it was not foreseeable to Dr. Turng that an overdose of chloral hydrate would be given to Erica Portlock.

b. Describe witness quality of each defense and plaintiff expert:

Dr. Terry Allen is a pediatric urologist at Children's Medical Center in Dallas, Texas. Dr. Allen is well thought of at Children's Medical Center, can effectively communicate his opinions and thoughts, and should make a good witness.

Dr. Robert Kramer is a pediatrician at Baylor University Medical Center. While Dr. Kramer is not still involved inasmuch clinical pediatrics, Dr. Kramer has a very impressive resume' and the jury will likely be suitably impressed by his credentials. Dr Kramer is a very strong advocate.

Dr. Linda Hanahan is a pediatric radiologist at Trinity Medical Center. Dr. Hanahan has had training in pediatrics and in radiology and makes a good appearance. Her opinions are particularly helpful, since she is the witness who first advised us that the use of chloral hydrate in connection with performance of an IVP is not standard of care.

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Dr. James Aguanna (Ph.D.) is the Director of the Medical Laboratory at Baylor University Medical Center. Dr. Aguanna will be called to testify, if necessary, that Dr. Turng's in-office laboratory procedures were appropriate, and that it was in keeping with the standard of care for her to do a microscopic examination of the urine even though a dipstick may have been negative.

We are lining of a practicing pediatrician as an additional expert.

Plaintiffs' experts are Dr. Lowell King and Dr. Frederick Friedman. Dr. King is a nationally known pediatric urologist at Duke University Medical Center in Durham, North Carolina. Dr. Friedman is a pediatrician at Cedars-Sinai Medical Center in Los Angeles, California. Since we have not had an opportunity to depose Dr. King and Dr. Friedman, we are unable to assess their quality at this time. Dr. King's report may actually help us.

PLAINTIFF ATTORNEY: Les Weisbrod and Mel Morgan.

a. Trial experience and record:

Mr. Weisbrod and Mr. Morgan have tried a few malpractice cases, including one against the undersigned attorney. We are aware of only three cases they have actually taken to trial in the past four years. They lost two of those trials and settled the other one prior to receiving a jury verdict in their favor. However, they are competent attorneys and will be very well prepared for trial.

b. Settlement tendencies (is he/she a settler, will he/she wait until he gets to the courthouse steps?)

Plaintiffs' attorneys would certainly prefer to settle the case. We can expect them to request something far less than Dr. Turng's policy limits before the case reaches the courthouse.

SUIT INFORMATION:

a. Compensatory damages pled:

Yes.

b. Punitive/Exemplary damages pled:

Yes.

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*Why I have to
combine E P R*

c. Is insured in bankruptcy? (Attach copy of order lifting stay.)

No.

d. Cross Actions:

None at this time. Will be filed when we get closer to trial.

DEFENSE COUNSEL'S EVALUATION/RECOMMENDATIONS:

a. Percentage chances of successful defense?

Given the defensibility of this case and the large (\$1 million) credit we will have, we believe that we have an 85-90% chance of prevailing in this case.

Why not high

b. Forecasted realistic verdict range. Anticipated prejudgment interest? % or \$ for \$ credit.

Since it is extremely likely that the jury is going to get mad at the employees of Duncanville Diagnostic Center, and given the fact that Erica's death was totally unnecessary, a verdict range of around \$1 million is a possibility. However, the only damages that are going to be awarded in this case are for Mr. and Mrs. Portlock's mental anguish. Plaintiffs have already been adequately compensated for their damages by their settlement with Dr. McCall, the radiologist, in the amount of \$1 million. We will receive a dollar for dollar credit for that settlement.

c. Pre-Tort reform or Post-Tort reform case.

Post-Tort reform.

d. Your final recommendations.

We recommend that this case be tried.

TRIAL DATE AND LOCATION:

a. Trial date setting:

October 5, 1992.

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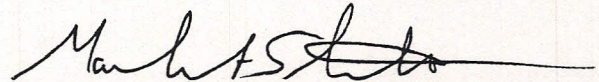
b. Venue reputation:

This matter is set in Dallas County which has a good reputation as a defense venue.

c. Judge's reputation:

This matter is set in the 160th Judicial Court with Judge Mark Whittington presiding. Judge Whittington is an excellent Judge, probably the best in Dallas County, and will give us an extremely fair trial.

Very truly yours,

A handwritten signature in dark ink, appearing to read "Mark A. Stinnett", with a long horizontal flourish extending to the right.

MARK A. STINNETT
RUSSELL G. THORNTON

MAS:clh