1    1	SUPREME COURT OF THE STATE OF NEW YORK
2	BRONX COUNTY: CIVIL TERM: PART 23
3	
4	JESSIE BAH,
5	Plaintiff, INDEX NO. 98557/05
6	- ehinet
7	-against-
8	NOELLE MALAVET, ALONZO MALLOY and VW CREDIT, INC.,
9	Defendants.
10	June 23, 2008 CROSS EXAMINATION
11	OF DR. ISRAEL
12	851 Grand Concourse
13	Bronx, New York
14	BEFORE: THE HONORABLE DOMINIC MASSARO,
15	Justice
16	
17	APPEARANCES:
18	THE TURKEWITZ LAW FIRM 99 Park Avenue, Suite 800
19	New York, New York 10016 BY: ERIC TURKEWITZ, ESQ.
20	Attorney for Plaintiff
21	WILSON ELSER MOSKOWITZ EDELMAN
22	3 Gannett Drive White Plains, NY 10604-3407
23	BY: CARL L. STECCATO, ESQ. Attorney for Defendant -
24	VW CREDIT, INC.
25	(Appearances Continued)

APPEARANCES (cont'd.) VOUTE, LOHRFINK, MAGRO & COLLINS, LLP 170 Hamilton Avenue White Plains, NY 10601-1789 BY: KEVIN P. FITZPATRICK, ESQ. Attorney for Defendant -NOELLE MALAVET б PAMELA ROSS OFFICIAL COURT REPORTER 

(Whereupon, direct examination is completed and cross examination commences.)

THE COURT: We continue.

MR. TURKEWITZ: Thank you, Judge.

### CROSS EXAMINATION

#### BY MR. TURKEWITZ:

- Q Good morning, Dr. Israel.
- A Good morning.
- Q In your report you indicated that you read through the Jacobi Hospital records, correct?
  - A Yes.
- Q And I'll assume you paid particular note to the operative report?
  - A The operative report.
- Q All right, what I want to do briefly with you is reconstruct the injuries she suffered in the accident. Two other doctors have already done this but I want to make sure you're in accord with the prior testimony.

You've seen models of the spine and pelvis and hips such as this many times before, correct?

- A Few times.
- Q Okay. And where the -- this part over here, this is the back and this is the front of the

17

18

19

20

21

22

23

2.4

. 4 Dr. Israel - Defendant - Cross person, correct? Okay. Α Posterior and anterior in medical terms. Right, anterior and posterior. Α When you said "back" I wasn't sure what you meant by back. It is the back, but I think you were referring to the back of the back, and we refer to it as anterior and posterior. What we have here is the femur or thigh bone, correct? That's part of it, it's not the whole  $\mathbf{A}$ thing. Yes, this is not a full scale human body? Q That's correct.  $\mathbf{A}$ We have the top of the femur and the ball Q and socket joint that forms the hip, correct? That's correct. Α And the socket is called the acetabulum? That's correct. Α

- Q And you know from reading, from speaking with Ms. Bah and reading the medical records, she was sitting at the time of the accident in the back seat, correct?
  - A That was my understanding.
  - Q You know she was hit from behind, the car

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

Dr. Israel - Defendant - Cross was hit from behind and she was jammed up against 1 the car in the front -- I'm sorry, the seat that was 2 in front? 3 That's correct, that's what I heard. 4 So when she was in a sitting position the 5 femur would have been roughly at a 90-degree angle 6 depending on whether she was slouching down or not? 7 Roughly, yes. Α 8 And the force of the accident caused the 9 head of the femur to shatter the back of the ΪŌ acetabulum, correct? 11 It fractured. Α 12 Okay. There were multiple pieces, weren't Q 13 there? 14 Yeah, but I'm not sure exactly what you 15 mean by shattered. There were a few pieces. 16 And when that happened it went through and 17 became dislocated outside the joint backwards in the 18 posterior direction, correct? 19 Posterior, yes. 20 So this was not just a fracture of the 21 acetabulum, but also a dislocation, correct? 22 Yes, it's referred to as a fractured 23

24

25

dislocation.

Q

And in the emergency room they reduced the

Dr. Israel - Defendant - Cross fracture, they reduced the dislocation, they pulled 1 it back into the socket, correct? 2 I believe so. I'd have to refer to those 3 notes. 4 MR. TURKEWITZ: Could I have the 5 Jacobi chart, please? 6 MR. FITZPATRICK: Judge, to expedite 7 I'll stipulate that that is what was done at 8 Jacobi Hospital rather than go through a 9 voluminous record. 10 MR. TURKEWITZ: I'm going to leave 11 it here, Judge, so he can refer to it as he 12 wishes. 13 This is not intended as a memory test. I 14 just want to reconstruct for the members of the jury 15 what it is that happened to the hip, and if you were 16 to read through it you would have seen that they 17 pulled it back into the joint in the emergency room, 18 correct; do you remember that? 19 I know the hip was reduced. I'm not sure 20 exactly where it was reduced. I would have to refer 21 to the records. 22 Please take a moment. Q 23 You can't look through these records in a 24

25

moment.

Q Well, you are just going to concentrate on the emergency room or the discharge summary types of pages.

MR. TURKEWITZ: May I approach, Your Honor, with that one page admission information in my open records? If there's no objection from counsel.

- Q Would that be of assistance?
- A Okay.
- Q I'll also, just to bring you up to speed here on reconstructing what happened at Jacobi, show you a three-page orthopedic consult dated July 10, 2005, the accident having happened the evening before.
  - A Okay
- Q And the other document I'm going to show you is the operative report.
  - A Okay.
- Q All right. Having read through these you feel a little more up to speed on the Jacobi admission?
  - A A little.
- Q Okay. So, what happened at Jacobi is that first in the emergency room they reduced the dislocation putting it back into the joint, correct?

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

2.0

21

22

23

24

A That's correct.

1

2

3

4

5

6

7

8

9

10

11.

12

13

14

15

16

17

18

19

20

21

22

23

24

25

- Q But unfortunately it didn't stay in the joint and it slipped out of the joint and dislocated a second time, correct?
  - A Correct.
- Q And the reason it dislocated a second time is that a portion of the acetabulum is missing, it just slipped out the same way it had been out before, correct?
- A That would have been one of the reasons why.
- Q And because that portion of the acetabulum was missing and because of a need to put the femur back where it's supposed to be they placed -- they did something called a placing of an acetabulum traction pin, correct?
  - A Yes.
- Q Acetabulum traction pin, which you've used before?
  - A Yes.
  - Q Many times, correct?
  - A Enough.
- Q Okay. And that's where a pin is drilled through the femur, one of the bones in the lower leg?

P. 8/35

- A This I believe was the tibia.
- Q I'm sorry?
- A I believe it was the tibia.
- Q Okay, it was drilled through the tibia, and traction was placed in order to keep this in place, correct?

A Yes.

Q Now, the force of the collision didn't only break off pieces of the back of the acetabulum, but it also broke off cartilage, correct? You saw that in the operative reports?

A That's correct, but that's part of the acetabulum.

Q Okay. Now, the cartilage, and this is how it's been described previously in the courtroom, so correct me if I am wrong, but -- or the other doctors, correct me if I am wrong, it acts something like teflon in a pan in that it helps make for a smooth, smooth movement of the femur inside the acetabulum?

A I wouldn't use the term "teflon," but in essence cartilage is important for the joint.

Q Okay, and if you have fractured cartilage or broken cartridge inside the acetabulum and then you put the joint back together you're going to have

1

2

3

4

5

б

7

8

9

10

11

12

13

14

15

16

17

18.

19

2.0

21

22

23

24

10 Dr. Israel - Defendant - Cross instead of a smooth surface the way I might have 1 assuming I had no injuries, you would have a rough 2 surface inside the joint, correct? 3 Depends on how it's reconstituted.  $\mathbf{A}$ 4 Well, of course it depends on how it's 5 reconstituted, but this is one of the risks, 6 correct? 7 I don't know what you mean by that. 8 Let me back up a moment. There is a 9 condition that occurs sometimes in patients who have 10 injuries of the hip, such as Ms. Bah, called 11 posttraumatic arthritis, correct? 12 That's correct.  $\mathbf{A}$ 13 And posttraumatic arthritis can occur when 14 15

you have instead of a smoothly working hip you have a rough surface, correct?

That's correct.

In fact, what will happen or what can happen is that the head of the femur can become flattened due to the grinding of bone against bone instead of against cartilage, right?

I think you're using that term improperly, flattened. It has very specific connotations in orthopedics and we would not describe it as flattened.

16

17

18

19

20

21

22

23

24

	pr. Israel - Delendant - Closs
ı    1	Q Well, wouldn't you see if you had
2	MR. TURKEWITZ: Withdrawn.
3	Q Couldn't you see let me do this a
4	different way.
5	You haven't seen any of the X-rays,
6	correct?
7	A That's correct.
8	Q I went through your report and there's no
9	mention of having reviewed any x-rays?
10	A I did not review any of the x-rays.
11	Q Never reviewed any of the x-rays of Dr.
12	Dassa?
13	A No, I was never provided any of those
14	X-rays.
15	Q Okay. Would you agree that a flattening
16	out of the top of the femur
17	MR. TURKEWITZ: Withdrawn.
18	Q If you had a flattening down on the top of
19	the femur that was seen a year or more after an
20	accident such as this, would that be an indication
21	of posttraumatic arthritis?
22	A Counsel, with all due respect I know you
23	are trying to be descriptive about this, the term
24	flattening, when you refer to the head of the femur
25	it probably would represent something other than an

Dr. Israel - Defendant - Cross

arthritic problem, so I don't think you really mean

it, but if you do I'll be happy to respond to it.

Q If you had seen --

MR. TURKEWITZ: Withdrawn.

Q If you had a rough -- if you had the femur going up against the rough surface would you see any deterioration inside the joint as a progressive nature, not necessarily immediately?

when you would follow this type of a problem there are -- there's articular surface, and articular surface when you have a fracture of the acetabulum the most important part of the acetabulum is always the superior weight bearing surface, so if you looked at it from an anterior-posterior point of view you would look at the space in between the femoral head and lip of the acetabulum. That's not quite the same thing as the posterior lip of the acetabulum.

- Q So if you saw a decreased space between the femoral head and the acetabulum --
  - A Well, where?
  - Q Excuse me?
  - A Where did you see that?
  - Q It's a hypothetical question I'm asking

you. 1 Well, where hypothetically did you see Α 2 that? 3 I'm asking you a hypothetical question. 4 I know, and --5 Please, you've testified many times 6 before, correct? 7 I have. 8 You know I'm allowed to ask you 9 hypothetical questions. You've answered, you've 10 been asked and answered hundreds --11 MR. STECCATO: Argumentative. 12 Objection. MR. FITZPATRICK: 13 Counselor, I'm trying to answer your Α 1.4 question, but when you ask me a hypothetical 15 question you have to be precise and descriptive so I 16 can answer it and I would be happy to. 17 Is one of the signs of posttraumatic 3,8 arthritis a decrease in the space between the 19 femoral head and the acetabulum? 20 That's correct. 21 So if a physician saw that on X-ray 22 posttraumatic arthritis would form part of the 23 differential disease after an injury such as this, 24

Dr. Israel - Defendant - Cross

25

correct?

	Dr. Israel - Defendant - Cross
1	A That would be correct, yes.
2	MR. STECCATO: Your Honor, may we
3	approach for a second?
4	(Whereupon, an off-the-record
5	discussion was held at the bench.)
6	THE COURT: Please continue.
7	MR. TURKEWITZ: Thank you, Judge.
8	Q When you saw Ms. Bah she made complaints
9	of pain when the hip was moving, didn't she?
10	MR. STECCATO: Your Honor, I
11	object.
12	You don't need the model for the
13	question.
14	THE COURT: Come up.
15	(Whereupon, an off-the-record
16	discussion was held at the bench.)
17	THE COURT: Let us continue.
18	Q When you were testifying before I believe
19	that you stated that when you saw Ms. Bah
20	approximately a year after the accident that she had
21	a disability, correct?
22	A That's correct.
23	Q And that this was a disability that was
24	directly related to the accident, correct?
25	A It appeared to be, yes.

- Q And this was a disability that you believe would be permanent, correct?
  - A That's correct.
- Q And the disability that she had -- first of all, she was in pain, correct?
- A Well, the reason that I called it a disability was not due to her complaint, but the physical findings that I had.
  - Q You saw that she was limping?
- A Well, she was using a cane, she said she couldn't walk without a cane, so from that prospective she was limping. Aside from the use of the cane I have no other way of knowing.
- Q Given the nature of the injuries to the acetabulum as well as the sacral fractures, Ms. Bah appearing at 63 years old and using a cane approximately a year after the accident didn't surprise you, did it?

A Well, given the nature of this type of fracture which was a fracture dislocation of the acetabulum, a posterior hip fracture, I would not attribute that to arthritis, and, you know, it is what it is and I made note of it and I made note of the objective findings, and the reason I gave her the disability was because of the loss of motion

	Dr. Israel - Defendant - Cross
·	that was subjective and that was clear.
2	Q Regardless of whether the disability on
3	that date was due to posttraumatic arthritis or
4	simply from the direct insult to her body from the
5	accident, she did have a disability on that date
6	that was related to the accident, correct?
7	A She had a disability related to the
8	accident.
9	Q And this restricted her ability to do
. 0	certain things, didn't it?
. 1	A Fundamentally, no. She had probably
. 2	Q Well
L 3	MR. STECCATO: Let him finish his
14	answer.
15	MR. TURKEWITZ: It was a yes or no
16	question.
17	MR. STECCATO: I don't think so.
18	Q Did it limit her ability to do things or
19	not?
20	A Certain things she probably would have
21	difficulty doing, but not by very much. She had some
22	mild limitation of motion in flexion of the hip.
23	Q Well, you know she was a certified nurse's
24	aid, correct?
2.5	That's correct.

- Q And over the course of your career you have met and seen hundreds of certified nurses aids in action, correct?
  - A That's correct.
- Q And they pick patients up, they wheel patients around, they are doing manual work as well as supporting -- as well as any psychological support that they may provide, correct?
  - A That's true.
- Q And I think you would probably agree that when you saw Ms. Bah in your office approximately a year after the accident that she would not have been suitable -- it would not have been suitable for her to go back to work as a nurse's aide, correct?
  - A I would not agree to that.
  - Q You would not agree?
  - A I would not.
    - Q Let me ask you a hypothetical question:

Let's assume that in March of 2008, two other defense experts examined Ms. Bah finding that she was moderately disabled for one and markedly disabled for the other. Would you agree that that represents a progressive deterioration of her condition from the time that you saw her?

MR. STECCATO: Objection to form.

1.

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

	Dr. Israel - Defendant - Cross
1	THE COURT: If he understands it I'll
2	allow him to answer.
3	MR. FITZPATRICK: Objection also.
4	THE COURT: Overruled.
5	A I don't know what the basis was for that,
6	so I don't know what it represented.
7	Q I want you to assume that a Dr. Haberman
8	do you know Dr. Haberman?
9	A I do know Dr. Haberman.
. 0	Q I want you to assume Dr. Haberman sat in
1	that very chair on Friday and told the members of
12	the jury she was moderately disabled and could no
13	longer do her work as a certified nurses's aid.
14	Would that opinion represent a deterioration of the
15	condition that Ms. Bah is suffering from with
16	respect to her injuries?
17	MR. FITZPATRICK: Continuing
18	objection,
19	MR. STECCATO: Continuing objection,
20	Your Honor.
21	THE COURT: Noted.
22	A I don't know the basis for that opinion.
23	Q You've seen many
24	THE COURT: Counsel, I assume you
25	are assuming that the opinion is accurate for

Dr. Israel - Defendant - Cross the purpose of this question? 1 MR. TURKEWITZ: Of course. 2 deterioration. 3 Same objection, Your MR. TURKEWITZ: 4 Is there a question? 5 Is there a question? THE COURT: 6 MR. TURKEWITZ: I thought there was a 7 question. 8 I'm lost already, I'm not sure. 9 If Dr. Haberman told the members of this 10 jury on Friday that she was moderately disabled and 11 could no longer work as a certified nurses's aid 12 would you agree that that would represent a 13 different opinion than the one that you had with 14 respect to her condition just a year after the 15 accident, correct? 16 That's correct. 17 And that would represent the deterioration 18 of her condition, correct? 19 Well, I don't know the basis for his 20 opinion, so I can't say that it would be a 21 deterioration. 22 Do you know Dr. David Kaufman at 23 24 Montefiore? I do not.

25

Α

- 11	
ı	Q I want you to assume he's a neurologist
2	that examined Ms. Bah and found that she was
з	markedly disabled.
4	MR. STECCATO: Objection, Your
5	Honor. Assumes a fact.
6	THE COURT: Let me hear the
7	question.
B	Q Would you agree that that examination and
9	opinion was formed in March of 2008, just a few
10	months ago Would you agree that that opinion of
l I	her condition represents a deterioration and a
12	change from the opinions that you formed two years
13	ago?
14	MR. STECCATO: Objection, Your
15	Honor.
16	MR. FITZPATRICK: Objection also.
17	THE COURT: I think on
18	reconsideration I'm going to sustain the
19	objection.
20	Q You've done many of these exams of
21	medical/legal exams in the past, haven't you?
22	A That's correct.
23	Q Approximately how many do you do on a
24	monthly basis?
25	A It varies. I would say I do about 30 a

### Dr. Israel - Defendant - Cross week on average. 1 Per week? 2 Yes. Α 3 1,500 per year? Q 4 Probably, roughly that. 5 And how much do you get paid for each of 6 these examinations? 7 About 150 an exam. Α 8 And you get paid additional for the 9 report? 10 No. Ā 11 You get paid additional for the 12 consultation with the attorney? 13 What consultation? 14 Any consultation that you might have after 15 you do a report. Doesn't an attorney want to talk 16 17 to you? Sometimes, sometimes not 10 And when you do, do they get charged for 19 that? 20 Yes. 21 A At what hourly rate? 22 \$500 an hour. 23 \$500 an hour? And the report -- and the 24 Q examination and the report itself are only 150? 25

- A That's correct.
- Q And how often do you, in taking the witness stand --

MR. TURKEWITZ: Withdrawn.

- Q Approximately, if you're doing -MR. TURKEWITZ: Withdrawn.
- Q Do you have specific days that you use for doing these medical exams?
  - A Yes.
  - Q What days?
- A Generally Wednesday and Friday, occasionally Tuesday.
  - Q So when you're doing 30 exams per week, that's basically 15 exams on a Wednesday and 15 exams on a Friday?
    - A Yeah, roughly so.
  - Q And in addition to doing the exams you are also dictating the reports?
  - A Well, I do or I make notes and a report is constructed and I review the report and I sign off on it.
  - Q And are you also seeing other patients on those days?
    - A Sometimes I do.
    - Q So you're seeing about 15 medical -- doing

25

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

2.0

21

22

	Dr. Israel - Defendant - Cross
<u> </u>	about 15 medical/legal exams on each of these days
2	plus you are also seeing regular patients, correct?
3	A Yes, sometimes. I mean it varies my
4	schedule, varies quite a bit.
5	Q And approximately how many times per year
6	do you testify?
7	A Well, I would say I average about once or
8	twice a month. Now, that can vary from month to
9	month, but I would say it averages out to that.
. 0	Q Approximately 15, 18 times per year?
1	A Well, it's one to two a month, it could be
12	any place between, I guess, about 12 to 24. I mean,
13	it's a rough estimate, counselor, I'm not sure
14	exactly.
15	Q How long have you been doing these types
16	of medical/legal exams?
17	A Well, orthopedic surgery, as you probably
18	know, often
19	Q Just how long have you been doing the
20	medical/legal exams?
21	A Since I've been in practice, but as I
22	tried to explain to you, orthopedic surgery involves
23	injuries and injuries involve medical/legal
24	evaluations and reports and very often testimony in
25	court, so since the time I was in practice since I

[]	Dr. Israel - Defendant - Cross	
1   1	left my position as director of sports medicine at	
2	Joint Disease, which was 1980, I've been doing	
3	this. I do it for both plaintiffs and I do it for	Ĺ
4	defendants.	
5	Q This forms a very substantial part of your	
6	current practice, doesn't it?	
7	A It does.	
8	Q And because you are seeing so many	
9	patients	
LO	MR. TURKEWITZ: Withdrawn.	
11	Q Because you are seeing some individuals in	
12	a medical/legal context you cannot possibly remember	
13	all of them, correct?	
14	A Well, I don't remember all my patients	
15	that I am seeing for treatment, that's why I rely	
16	upon notes and things like that.	
17	Q And that's why it's important for your	
18	notes to be accurate, correct?	
19	A That's correct.	
20	Q And I noticed in reading your report that	
21	one of the things you did was you said her scar was	
22	only six inches long?	
23	A That's correct.	
24	Q You have already admitted, I believe, that	:
25	that was an error, correct?	

A I didn't say it was an error. I said it looked like the typical hip incision.

As I told you I do a lot of hip replacements that normally are six inches. Now, I know the operative report said 28 centimeters and I tried to explain to you when I make a hip incision and I dictate an operative report it's not like I measured it to dictate that operative report.

There's a certain protocol that doctors usually use. I don't think the gentleman that did this operation measured it, it was an estimate too, so I have one estimate, they had another estimate.

- Q Are you aware that Dr. Haberman told the jury on Friday that it was a ten inch scar?
  - A I am not.
- Q Are you aware that Dr. Dassa told the jury on Thursday that it was a ten inch scar?
- 18 A I am not.
  - Q In your report did you note that there was a loss of consciousness for Ms. Bah?
    - A That's what she told me.
  - Q Sir, are you aware that there isn't any testimony in any record any place that says she had a loss of consciousness?
    - A Well, there's testimony from me that she

	Dr. Israel - Defendant - Cross
1	told me to.
2	Q Well, this is what you have dictated,
3	correct?
4	A It's what I had in my records.
5	Q Weren't you furnished with something
6	called a Bill of Particulars with respect to her
7	injuries?
8	A I was.
9	Q And there isn't anything about a loss of
10	consciousness there, is there?
11	A I would have to refer to the Bill of
12	Particulars.
13	What I am telling you, when I indicated
14	she lost consciousness that's what she told me.
15	Q When Ms. Bah showed up in your office did
16	she come with an attorney by the name of Ariella
17	Coleman?
18	A She did
19	Q And did Miss Coleman give you a two page
20	recitation of her injuries that you signed that
21	looks exactly like this?
22	A Okay.
23	Q And is that your signature on the bottom
24	of the page?
25	A Looks like it is.

- Q And does loss of consciousness appear any place on the list of injuries that you were given at the time you did your report on those two pages?
  - A Does not mention that.
- Q And did you write in your report that she had a bilateral hip --

MR. TURKEWITZ: Withdrawn.

- Q -- that she had bilateral hip injuries to both hips?
  - A Yes.
- Q And are you aware that there's not one single claim that the accident caused an injury to the right hip, only to the left?
  - A I understand that, but what I am --
  - Q Would you agree --
- A Counsel, can I answer? This is what she told me.

Now, yet may have put in your Bill of Particulars other than what she told me, but I put down what she told me. You may have given me a list that this is what your claims are and this is what your lawsuit is about. She told me otherwise, and I think you would agree with me that I should have put that down if she told me.

Q Only if it was actually told to you.

NO. 0465 P. 27/35

11	
1	A She told me.
2	Q There was not a stenographer present.
3	MR. FITZGERALD: I object to the
4	argument.
5	THE COURT: One second, one second,
6	please.
7	MR, TURKEWITZ: I offer into
8	evidence a two-page recitation of injuries that
9	was given to Dr. Israel and which he has
10	acknowledged represents his signature on it as
11	Plaintiff's Exhibit 18.
12	MR. FITZPATRICK: I object to this.
13	THE COURT: One second, first share
14	it with counsel.
15	Any objection?
16	MR. STECCATO: Well, Your Honor,
17	this is a letter from Mr. Turkewitz' firm to
18	Dr. Israel listing conditions.
19	We already have a Bill of Particulars
20	as part of the marked pleadings in this case. I
21	don't need to have this admitted into evidence.
22	MR. TURKEWITZ: He signed it, he
23	acknowledged it, and it conflicts with his
24	report.
25	MR. STECCATO: It doesn't conflict.

MR. FITZPATRICK: This is a letter
proposed by Mr. Turkewitz, it's self-serving,
and based on that alone, Judge, it won't go
into evidence, just as a Bill of Particulars
which was prepared by Mr. Turkewitz, it's
self-serving and won't go into evidence.
THE COURT: Please approach.
(Whereupon, an off-the-record
discussion was held at the bench.)
THE COURT: Objection is sustained.
Q Were you handed a copy to keep for your
file?
THE COURT: We will mark it as
Plaintiff's 18 for identification.
(Whereupon, Plaintiff's Exhibit 18,
was marked for identification.)
THE COURT: Please continue.
Q Were you handed a copy for your own files
of this list of injuries?
A I would have to look in my files.
Q I'm sorry?
A I would have to look in my files.
Q Well, you didn't bring your files with
you, did you?
A I did not.

	Dr. Israel - Defendant - Cross
1	Q And as somebody who has testified
2	MR. TURKEWITZ: Withdrawn.
3	Q How long have you been testifying 18 to 24
4	times a year, for how many years?
5	A Well, probably I've been testifying since
6	the beginning of my orthopedic career, so
7	Q Would it be fair to say that you have been
8	a witness in a courthouse hundreds of times?
9	A Probably, yes.
10	Q And the questions that I'm asking you
11	today about where your file is, it's not the first
12	time you've heard those questions?
13	A That's correct.
14	Q Every attorney who comes into court and
15	questions you says, doctor, did you bring your
16	records with you, correct?
17	A That's not correct.
18:	Q Excuse me?
19	A That is not correct.
20	Q Only 90 percent?
21	MR .FITZGERALD: Judge, I object.
22	It's argumentative.
23	Q Did I, in fact, serve you with a subpoens

to make sure that you brought your records to court

serving you with a subpoena on March 25, 2008?

24

	Dr. Israel - Defendant - Cross
ı	MR. TURKEWITZ: If I may approach?
2	Q Does it look exactly like this?
3	A Counselor, I'm not aware of this subpoena.
4	Q Well, who accepted the subpoena for you?
5	A I don't know.
6	MR. TURKEWITZ: I offer the subpoena
7	and the original affidavit of service into
8	evidence.
9	THE COURT: Share them with counsel.
10	MR. FITZPATRICK: Objection.
11	MR. STECCATO: Objection, Your
12	Honor.
13	THE COURT: Over the objection of
14	defense counsel we will mark it as Plaintiff's
15	19 in evidence.
16	(Whereupon, Plaintiff's Exhibit 19,
17	was marked in evidence.)
18	Q Inside the file that you have, the one
19	that you did not bring to court, you have
20	handwritten notes concerning those conversations
21	with Jesse Bah and Miss Coleman, don't you?
22	A Yes.
23	Q Inside that file, sir, you have
24	transmittal letters from the people that hired you,
25	don't you?

- I'm not sure. Α
- That would be a company called D and D Associates?
  - That's correct.
- And this is a company that hires you to do exams of people who brought lawsuits, correct?
  - Α That's correct.
- You made yourself -- other than making yourself available to D and D Associates, do you make yourself available to any other companies that are busy hiring experts to testify in court?
  - I do. Ά
  - How many other companies? Q
  - About four or five. Α
- And do some of those companies send you correspondence that tells you that they are looking for specific things?
- I don't know exactly what you mean by that. Usually the correspondence is please arrange to examine this patient on such and such date and evaluate their particular problems.
- And those companies always do it for defendants, correct, those four or five companies that hire you?
  - That actually is not true, they do it on

l

2

3

4

5

6

7

8

9

10

11

12

13

14

1.5

16

17

18

19

20

2.1

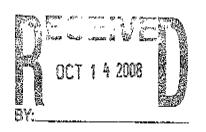
23

24

Dr. Israel - Defendant - Cross occasion for plaintiffs. 1 How many times have those companies hired 2 0 you for plaintiffs? 3 I don't know. A few times. 4 What percentage of the time that you take 5 the witness stand are you doing it for defendants б excluding your own patients? 7 Explain to me exactly what you mean by ₿ that. 9 Referring to those times when you are 10 hired specifically to examine somebody where the 11. person is not your patient. 12 Never. When I'm doing it, if there's a 13 lawsuit and they have asked me to evaluate somebody, 14 it's somebody that I treat. 15 And those four or five companies over the Q 16 course of the last five years have sent to you how 17 many individuals to exam? Has it been about 1,500 a 18 year? 19 We just went through the numbers. You went Α 20 through the numbers, and I would guesstimate that's 21 22 what it is. So all of those --23 Q MR. TURKEWITZ: Withdrawn. 24 I'm not sure if I asked you this question 25 Q

Dr. Israel - Defendant - Cross yet, but when you examined Ms. Bah in your office 1 did you take an X-ray of her hip? 2 I did not. 3 Let me ask you a hypothetical question: 4 Left your say you had seen one of your own 5 patients approximately 20 times over the course of 6 two years and a doctor hired for a lawsuit sees the 7 patient only once for the purpose of the lawsuit. 8 Who's opinion do you think would be more important? 9 MR. STECCATO: Objection, Your 10 11. Honor. The one that's seen her 20 times or the 12 one who's seen her only once? 13 MR. FITZPATRICK: Objection also. 14 THE COURT: Objection sustained. 15 MR. STECCATO: Thank you, Your 16 17 Honor. MR, TURKEWITZ: Nothing else. 18 (Whereupon, the cross examination of 19 Dr. Israel is completed.) 20 21 This is to certify that the foregoing is a true 22 and accurate transcript of the stenographic 23 minutes taken within. 24 PAMELA ROSS Semior Court Reporter 25

BILL



PAMELA ROSS
SENIOR COURT REPORTER
BRONX SUPREME COURT
851 Grand Concourse, Room 206
Bronx, New York 10451
(718) 618-1680
TAX I.D. # 088-52-0857

August 5, 2008

TO: BLANK, GOONICK & DITTENHOEFER ATTM: XINGWEN WU

RE: BAH V. MALAVET Index 98557/05 Cross Examination of Dr. Israel

For original transcript of minutes in the above captioned matter, held before the Honorable DOMINIC MASSARO on June 23, 2008.

Total Amount Due......\$175.00 Total Amount Paid.....\$175.00

THANK YOU!!!!