

1 Q. And what was your impression?

2 A. That she had giant papillary conjunctivitis in  
3 both eyes and pannus worse in the left eye than in the  
4 right.

Q. What was your plan?

6 A. My plan was to have her leave her contact lenses  
7 out and she was not permitted to swim.

8 Q. Okay.

9 A. That she use artificial tears and stop the flarex  
10 drops which she had been on. And that I wanted to  
11 reevaluate her in four weeks' time.

12 Q. Now, here in the note, the 10th, did you discuss  
13 surgery with her at that point?

14 A. Yes.

15 Q. Do you have any recollection of what your  
16 discussion was at that point?

17 A. I do recall. She said, I can't leave my contact  
18 lenses out for four weeks; I don't like wearing my  
19 glasses. And I said, you cannot safely wear your  
20 contact lenses, you could get an infection, your  
21 epithelium is not intact, a break in the epithelium is  
22 a setup for a serious infection from which you could  
23 lose your eye, do not put your contact lenses in.

24 I recall saying to her, if you don't

1 like your glasses, this might be a time to pick out  
2 glasses you like because I don't want you to have any  
3 reservation about you wearing glasses when you're  
4 having contact lens problems.

5 Q. Now, you said -- is there anything else?

6 A. Yeah.

7 Q. Okay, go ahead.

8 A. And she said that she didn't think there existed  
9 glasses that she'd really like, isn't there another  
10 option. And I said, there is surgery that can correct  
11 nearsightedness and we can assess whether you're a  
12 candidate for that, but we need to get you over this  
13 acute episode, regardless, and don't put your contact  
14 lenses back in. And she said, well, couldn't I come  
15 back sooner than four weeks? Isn't it possible that I  
16 might be doing better sooner? And I said, okay, let's  
17 take a look at you next week and see how you're coming  
18 along but don't wear your contact lenses between now  
19 and then.

20 Q. Now, was there anything else?

21 A. I think that was it.

22 Q. Do you have an independent recollection of Cheryl  
23 Fiorelli, like what she physically looks like?

24 A. Sure.

1 Q. Tell me what you remember?

2 A. Dark hair, average height, medium coloring, brown  
3 eyes, slim. At that point, she was in her 20's.

4 Q. Now, you mentioned during that conversation that  
5 you just said, at least, this is what I thought you had  
6 said. You told her a break in the epithelium can cause  
7 a loss of vision or for her to go blind?

8 A. It can cause a corneal infection which is  
9 potentially vision threatening and eye threatening.

10 Q. Aqua Sight, what's Aqua Sight?

11 A. Aqua Sight is an artificial tear lubricating  
12 solution.

13 Q. Did you do a refraction that day?

14 A. No.

15 Q. The staining in the epithelium, the break in the  
16 epithelium, that you describe --

17 A. Yes.

18 Q. -- how is that treated?

19 A. By removing the offending cause, in this case,  
20 the contact lens, providing aqua lubrication and  
21 observation.

(A short break was taken.)

22 BY MR. KAFRISSEN:

23 Q. Okay. Now, what we were talking about was the  
24

1 treatment of the epithelial defects?

2 A. Yes.

3 Q. The epithelial defects with the treatment that  
4 you had planned, removing the contacts, observation,  
5 lubrication, is that something -- how would you expect  
6 that defect to respond to the treatment?

7 A. I would expect it to heal.

8 Q. And in healing, what would it mean that the  
9 surface would be recovered?

10 A. Yes.

11 Q. So that in healing -- at end of the healing  
12 process you would expect that there not be a layer --  
13 missing?

14 A. Correct.

15 Q. Or any part of the layer missing?

16 A. Correct.

17 Q. Did you make any decision as to whether Cheryl  
18 could wear contact lenses again at no time, at any  
19 point in the future?

20 A. At that visit?

21 Q. At that visit.

22 A. No.

23 Q. Now, during that visit you mentioned that you  
24 said that you had spoken to Cheryl about the surgery,