

1 A. Wait, I want to backtrack. Cheryl Fiorelli had
 2 mild asymmetrical astigmatism, mostly symmetrical, in
 3 both eyes.
 4 Q. Okay.
 A. It was the same in both eye.
 6 Q. Mildly symmetrical?
 7 A. Mildly asymmetrical.
 8 Q. Asymmetrical?
 9 A. Very few people have completely symmetrical
 10 astigmatism and hers was typical asymmetrical.
 11 Q. Now, you use mildly, tell me how do you
 12 differentiate, if there is a way --
 13 A. The way we differentiate --
 14 Q. -- the degrees of astigmatism?
 15 A. We differentiate the -- I don't know what you
 16 mean by degrees.
 17 Q. Well, when you say mild?
 18 A. Variety?
 Q. The variety.
 . The extent?
 21 Q. The extent.
 22 A. The extent of the astigmatism is differentiated
 23 on refraction.
 24 Q. And what would you consider to be, for instance,

you said, Cheryl as a mild astigmatism?
 A. No, I didn't say that.
 3 Q. You said mildly asymmetrical, mostly symmetrical
 4 astigmatism?
 5 A. Yes.
 6 Q. Why do you use the word mildly?
 7 A. Because it's almost completely symmetrical.
 Now, is there a way that you classify the extent
 9 Q. astigmatism?
 A. The extent, yes, in diopters.
 Q. Tell me how much would be -- how do you classify
 and what are the classifications?
 A. Well, it's right here in my refraction. She has
 1.75 diopters of astigmatism in her right eye, and two
 diopters in her left and her glasses and what I got on
 refraction.
 Q. 1.75 and two, is that a severe astigmatism, is it
 a mild astigmatism?
 A. It's moderate.
 Q. Are there any ranges which you would classify
 zero to one and a half, that's stage one -- I don't
 know if they stage those things?
 A. No, you don't. You just list the diopters.
 Q. And the 20 degrees in the right eye, what does

1 that mean?
 2 A. That's the axis of the flat meridian.
 3 Q. What's the flat meridian?
 4 A. Well, astigmatism means that one meridian is
 5 steeper than another -- a bowling ball would have the
 6 same curvature. A football, they certainly wouldn't.
 7 Q. Sure.
 8 A. So you can identify astigmatism by saying where
 9 either the flat or the steep meridian is.
 10 Q. Okay.
 11 A. But identifying the location whether you're
 12 referring to the flat or the steep.
 13 Q. Prior to any of the surgery that you performed,
 14 am I correct that the astigmatism Cheryl had in both
 15 eyes was correctable with spectacles?
 16 A. I'm not sure I can answer that.
 17 Q. Let me change the question. You classified the
 18 astigmatism, can we agree that she did not have any
 19 irregular astigmatism prior to the 3/20 surgery of the
 20 right eye and the 3/27 on the left eye?
 21 A. We haven't defined her regular astigmatism -- we
 22 said the astigmatism is not correctable with
 23 spectacles.
 24 Q. Right.

1 A. But correctable with a contact lens.
 2 Q. Okay. So you're amending the previous definition
 3 of irregular?
 4 A. If I didn't mention the contact lens --
 5 MS. NEWMAN: If she had an irregular
 6 astigmatism, I think that was the question,
 7 before March 20, 1997?
 8 BY MR. KAFRISSEN:
 9 Q. Right. The question is, on the right did she
 10 have an irregular astigmatism prior to surgery on March
 11 20, 1997?
 12 A. This is not a yes/no question.
 13 Q. Why not?
 14 A. Because we define a regular astigmatism as
 15 existing when the hard contact lens vision is better
 16 than soft or spectacle corrected vision. And I don't
 17 have a hard contact lens refraction in my records so I
 18 can't state with certainty that there couldn't have
 19 been some element of irregular astigmatism.
 20 Q. Can the lasik procedure cause an irregular
 21 astigmatism?
 22 A. Yes.
 23 Q. Is causing an irregular astigmatism during the
 24 lasik procedure a complication, a known complication,