

Nevyas, M.D.

- 1 Institute, May 15, 1997, there was a procedure done,
2 which was a Lasik enhancement done of the right eye, and
3 in those records it looked like you were listed on the
4 intraoperative form as the assistant and also had been
5 the physician's signature on the patient's statement of
6 acceptance and understanding.
- 7 A. Right. I can see that. Let me see this. Yes.
8 Q. And with regard to the May 15 procedure, do you
9 have any independent recollection of having assisted in
10 that procedure?
11 A. No.
12 Q. Do you know why that procedure was being
13 performed, the May 15, 1997 procedure?
14 MS. POST: Did he know at the time?
15 MR. KAHRISSEN: Yes.
16 THE WITNESS: To try to correct the
17 physical corneal structure to recenter or
18 whatever Doctor Wallace felt was necessary to
19 get her seeing better.
- 20 BY MR. KAHRISSEN:
21 Q. And was Doctor Nevyas-Wallace the primary
22 surgeon for that procedure?
23 A. Yes.
24 Q. And can you tell me, in your role as an
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- 1 assistant -- this was a Lasik enhancement is my
2 understanding; is that correct?
3 A. Yes.
4 Q. And can you tell me what would your role have
5 been?
6 A. Exactly the same as with a Lasik. Stand by in
7 case I was needed or to help facilitate things.
8 Q. Okay.
9 A. To observe.
10 Q. Do you know whether Cheryl was having any
11 visual effects in terms of halos, starbursts, glare
12 effects in her right eye prior to the May 15 enhancement?
13 A. I would assume it since usually we don't
14 enhance unless there's a reason.
15 Q. Okay. Can you tell me did you determine the
16 cause of those visual effects prior to assisting in the
17 May 15, 1997 surgery?
18 A. No. I hadn't seen her since the date after her
19 previous surgery.
20 Q. Had you ever discussed her between the previous
21 surgery and May 15 surgery with Doctor Nevyas Wallace?
22 A. Probably there was some discussion but I don't
23 recall. Most likely, Doctor Nevyas-Wallace told me what
24 the situation was and what she had planned, but I don't
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- 1 recall that specifically. She may have mentioned it to
2 me, but she is quite expert on her own and I do not
3 monitor each thing she does. In fact, she's got a
4 national and international reputation particularly in the
5 interpretation of elevation topographies.
- 6 Q. Now, in the 5/15 surgery, the risk form, which
7 is the patient's statement of acceptance and
8 understanding, is that your signature at the bottom
9 right-hand corner of that?
10 A. Yes.
11 Q. And do you know how you came to be the one to
12 sign that form?
13 A. I think as part of the assistant, I signed
14 forms since we were both there together and I was signing
15 that indeed the patient had been presented the form, had
16 gone through it and had signed herself to show that she
17 had read it.
18 Q. Do you know whether you went over the specific
19 risks and/or available alternatives to this procedure
20 with --
21 A. I did not.
22 Q. Do you know who did?
23 A. Doctor Anita Nevyas-Wallace.
24 Q. With regard to the May 15 procedure, which was
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- 1 the Lasik enhancement, can a Lasik enhancement be used to
2 correct decentration?
3 A. Yes.
4 Q. And is a Lasik effective for correcting
5 decentration?
6 A. Depends how it's done. We're still working on
7 it. There is not a perfect way of doing that yet, but
8 hopefully we're getting closer. By increments we have
9 developed techniques to help remedy decentrations. This
10 is a common problem. Also Lasik enhancements can help
11 remedy refractive errors.
12 Q. Was this Lasik enhancement on May 15, to your
13 knowledge, being used to correct a refractive error?
14 A. I do not know.
15 Q. Was there anything that you're aware of that
16 went other than as you would have expected it to go
17 during the procedure of 5/15?
18 A. No.
19 Q. Is there anything from your review of the
20 records that indicates that something did not go as you
21 would have expected it to go on 5/15?
22 A. No.
23 Q. Now, the next time that you saw Cheryl was on
24 5/16, I think you told us, and was that at the office?
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- 1 A. Yes.
2 Q. And on 5/16, can you tell us what you did.
3 A. I examined her.
4 Q. And tell us what you found on your examination.
5 A. Her cornea looked good; her flap was in good
6 position; her vision was good. I had her continue drops
7 and come back.
8 Q. Did you evaluate Cheryl's left eye on the day
9 that you saw her?
10 A. I'm sure I looked at it.
11 Q. Was the right eye still decentered as of May
12 16, '97?
13 A. As I told you, I have no idea. I cannot tell
14 decentration of the ablation or decentration of anything
15 of the cornea, whether it's from the ablation or not,
16 without doing topography, which I did not do and would
17 not do one day postoperative. I'll also mention that as
18 far as I can see from the record, I did not dilate her
19 pupil so I did not evaluate the position of the
20 intraocular lens except as could be seen through the non-
21 dilated pupil, and as of that, it looked fine.
22 Q. Was the right eye still overcorrected as of the
23 May 16th visit?
24 A. I did not refract her. I don't know.
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- 1 Q. Okay. Did you record any visual effects in the
2 left or right eyes?
3 A. Effects?
4 Q. Meaning halo, glare, starbursts, double vision.
5 A. You mean a history, no. I don't have anything
6 down here of a history so I guess I didn't ask her.
7 Q. The lensectomy, to tell if the left eye was
8 decentered, would you also need topography to do that?
9 A. No. It has nothing to do with the cornea.
10 Q. Okay. Were you -- did you have any opinion as
11 to whether, as of May 16, 1997, the left eye that had the
12 lensectomy was decentered?
13 A. You're talking about whether the implant was
14 decentered as opposed to anything else?
15 Q. Right.
16 A. No, I have no opinion. I didn't dilate the
17 pupil, but if it had been significantly decentered, I
18 would have seen it without dilating the pupil, so it
19 couldn't have been much, if at all.
20 Q. Now, when was the next time that you saw
21 Cheryl?
22 A. I have 5/27 here.
23 Q. Okay. And what did you do on 5/27?
24 A. I examined her with a slitlamp. That's all.
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