2023 NJSBA All Conference

Million Dollar PI Settlement - Insights from the Olsen Case

A woman whose thumb was severed in a pit bull attack recently settled her case for \$1.62 million. The plaintiff, Carol Olsen, was injured while visiting a friend who was temporarily caring for the dog while the defendant, 11th Hour Rescue, sought a permanent placement. 11th Hour Rescue is a nonprofit that rescues dogs with a history of aggressive behavior that would otherwise be put down.

As a result of her injury, Ms. Olsen was no longer able to perform her job as a cake decorator or participate in sports and her ability to do daily tasks was impacted.

Hear from the plaintiff's attorney, Christopher D. Girolamo, as he provides insights on this million dollar settlement. He will show you the demonstrative evidence and witness videos that he used, and explain his strategy in creating them and how they helped him obtain such a large sum. You will also hear from an esteemed mediator, who will explain how to best present your client's case in mediation to help obtain the best possible results.

Speakers include: Christopher DiGirolamo, Esq. Maggiano DiGirolamo Lizzi, PC, Fort Lee MAGGIANO, DIGIROLAMO & LIZZI, P.C. Christopher T. DiGirolamo, Esq. (ID# 012141993) Christopher J. Havatian, Esq. (ID# 277582019)

201 Columbia Avenue Fort Lee, New Jersey 07024 (201) 585-9111 Attorneys for *Plaintiffs* Carol Olsen and Michael Olsen 5673-MDL

CAROL OLSEN and MICHAEL OLSEN her husband,

SUPERIOR COURT OF NEW JERSEY LAW DIVISION: BERGEN COUNTY

Plaintiff(s),

DOCKET NO.: BER-L-165-22

ν.

Civil Action

ELEVENTH HOUR RESCUE, ABC CORPORATION, I-X, (said names being fictitious, true names presently unknown), XYZ EMPLOYER, I-X (said names being fictitious, true names presently unknown), MICHAEL CABIBO, and/or JOHN DOES I-X (said names being fictitious, true names presently unknown),

PLAINTIFF'S MEDIATION STATEMENT

Defendant(s).

To: Judge Raymond A. Reddin Park 80 West, Plaza II 250 Pehle Avenue, Suite 410 Saddle Brook, NJ 07663

1. Full name, present address and date of birth.

Carol Olsen 97 Midland Avenue Midland Park, NJ 07432 DOB: 06/19/1964

2. Describe in detail your version of the accident or occurrence setting forth the date, location, time and weather.

With the assistance of Counsel:

On March 13th, 2021, I was an invited guest at Defendant Michael Cabibo's apartment at 1291 Mulberry Drive, Mahwah, NJ 07432. He is my coworker at Stop and Shop. My understanding was that Mr. Cabibo was the foster parent of a Pitbull dog owned by Defendant Eleventh Hour and had been caring for the dog for some time prior to March 13, 2021 and was actively trying to find a permanent home for the dog.

While I was visiting, Mr. Cabibo had said I could give the dog a treat, so I did and as I was walking away, the Pitbull violently and without any warning attacked me, biting my right calf. I was shocked and frightened. It felt like the Pitbull was going to rip my calf off and I knew I had to try and remove the wild dog from my leg as soon as possible. I reached out with my right hand to push it off and immediately the Pitbull chomped and bit at my hand and literally tore off my right thumb. It happened so quickly and violently that I did not even realize the extent of my injury until I felt the blood dripping down my elbow. Once I saw my bloody hand, fear, pain and panic rushed through my mind and body. Things became very surreal at this point as I then frantically searched for my thumb. I was able to find it on the floor and somehow had the clarity of mind to place it in a bag of ice. During this time, Defendant Mr. Cabibio was trying to control the unleashed dog.

My entire hand was covered in blood and my thumb was mangled and the situation was terrifying. Mr. Cabibo drove me to Valley Hospital in Ridgewood, NJ. The hospital quickly determined I needed to be rushed by ambulance to Hackensack University Medical Center because my injuries were far too severe and required very complicated emergency surgery.

I had gone under anesthesia hoping my thumb could be reattached, and the doctor tried very hard to save it, but sadly, due to the severity of the dog bite, my entire right thumb had to be amputated. The surgeon explained to me that unfortunately, the tendons and nerves from my right thumb to my elbow were severely damaged from the ferocious mauling of my thumb, and the severity of the bite prevented any chance to reattach my thumb to my hand. Sadly, when I woke up after the emergency surgery without my right thumb, I knew at that moment that my life had changed for the worse.

In addition to the shock of losing my right thumb as a result of the 11th Hour dog attack, I suffered multiple bites on my right calf and was required to get several stitches to close the wounds. I still have the ugly scars and dents on my right calf.

Please see the Mahwah Township Police Department Operations Report attached as Exhibit A.

3. Detailed description of nature, extent and duration of any and all injuries.

With the assistance of Counsel:

The Valley Hospital 223 N Van Dien Ave Ridgewood, NJ 07450

Mrs. Olsen arrived at Valley Hospital in Ridgewood, New Jersey by ambulance with her right thumb in a bag of ice as well as severe open wounds on her right calf as a result Eleventh Hour Rescue's dog unexpectedly mauling her at Mr. Cabibo's apartment.

The doctors at Valley Hospital diagnosed Mrs. Olsen with complete traumatic metacarpophalangeal (first knuckle) amputation of the right thumb, and laceration of the right lower leg. Mrs. Olsen required an updated tetanus shot for immunization of infection.

Mrs. Olsen received an x-ray of her right tibia fibula which showed a 15 mm defect within the soft tissues at the mid aspect of the lower extremity medially, compatible with a laceration. There are additional mottled lucencies within the soft tissues of the lower extremity which may represent lacerations and/or secondary subcutaneous emphysema.

Mrs. Olsen also received an x-ray of her right hand which showed an amputation of the first digit-thumb beyond the base of the first proximal phalanx.

Mrs. Olsen received three emergency procedures at Valley Hospital which consisted of a digital block of the right thumb, laceration repair at the location identified as 4.0 cm right medial calf, and laceration repair at the location identified as 4.0 cm lateral right calf. Mrs. Olsen received injections of lidocaine for her right thumb and right calf before the procedures.

Due to the damage done to my hand and thumb, the doctors of Valley Hospital ordered Mrs. Olsen to be transferred to a hand trauma center to further treat Mrs. Olsen's injuries. Mrs. Olsen was urgently rushed by ambulance to Hackensack University Medical Center in attempt to reattach her right thumb by trauma surgeon Dr. Winters.

Please see Valley Hospital records as Exhibit B.







Please see photographs of Plaintiff's injuries to her Right Thumb and Right Calf attached as **Exhibit C**.

Hackensack University Medical Center

30 Prospect Ave Hackensack, NJ 07601-1912

Mrs. Olsen was transferred by ambulance to Hackensack University Medical Center from Valley Hospital so Richard M. Winters, M.D., F.A.C.S. may attempt to replant Mrs. Olsen's right thumb. Unfortunately, the right thumb was not replantable because of the severe nerve damage.



Mrs. Olsen required 4mg of morphine that was pushed through IV by Dr. Winters because the pain in her right hand continued to increase. During the initial assessment, Dr. Winters stated Mrs. Olsen suffered from a traumatic complete avulsion and amputation of the right thumb caused by a pit bull bite and doubted the ability to re-plant Mrs. Olsen's right thumb but still explored the possibility in the operating room.

On March 14, 2021, Dr. Winters' preoperational diagnosis was a complete traumatic amputation of the right thumb at the metacarpophalangeal joint. Under anesthesia, Dr. Winters performed a complete right thumb avulsion amputation. During the operation, Dr. Winters explored the right thumb part and stump in the operating room under magnification, performed a resection of the radial and ulnar nerves, performed a metacarpal ostectomy, and performed an advancement flap closure of the amputation stump.

Dr. Winters extensively explored the metacarpophalangeal joint amputation under magnification but determined that the thumb could not be reattached because of the severe nerve damage. Under the microscope, Dr. Winters determined the longus tendon has been avulsed at the musculotendinous junction all the way into the forearm. Mrs. Olsen's ulnar digital artery in the palm was torn at the palmar arch level. Mrs. Olsen's ulnar and radial digital nerves have been avulsed all the way back into the palm to the level of the distal median nerve and proper digital nerve and common digital nerves. Dr. Winters determined that the thumb was not replantable because the nerves would require long vein grafts without any inherent promise of return of sensation.

Mrs. Olsen was taken into the operating room and was put under anesthesia in preparation of the procedure. Dr. Winters stopped the flow of blood to Mrs. Olsen's hand by placing a tourniquet and then evaluated the thumb stump. Then, a rongeur and bone file was

used to create a clean cut at the head of the metacarpal of the badly comminuted fracture through the metacarpophalangeal joint. The adductor tendons then were identified as where what remained of the thumb extensors. The damaged nerves were removed and closed over the thumb metacarpal bone. Dr. Winters then removed damaged skin and dead tissue. Dr. Winters created a volar skin flap to close the amputated thumb stump. During the procedure, Dr. Winters cut back identifiable nerves that were predominantly dorsal. Concluding the procedure, Dr. Winters advanced and closed the skin with multiple interrupted 4-0 nylon horizontal mattress and simple interrupted sutures. Dr. Winters gave the sutures plenty of room for the incision to drain because of the nature of the injury being a dog bite.

Please see Hackensack University Medical Center records as Exhibit D.

Kessler Institute for Rehabilitation

300 Market Street Saddle Brook, NJ 07663

Mrs. Olsen began her occupational therapy on April 30, 2021, to decrease pain, improve function, increase range of motion, increase strength, and learn how to use her right hand without a thumb for activities of daily living. Dana Farino, OT diagnosed Mrs. Olsen with complete traumatic metacarpophalangeal amputation of the right thumb, weakness in the right wrist/hand, and a lack of coordination in the right wrist/hand.

During Mrs. Olsen's Initial Evaluation, Dana Farino, OT found Mrs. Olsen was unable to use her affected right hand to bath herself, carry objects, dress herself, grasp objects, grip objects, lift objects, prepare meals, manipulate objects, feed herself or use tools because of the loss of her right thumb.

Mrs. Olsen's underwent muscle testing by the Five Position Grip Test during the Initial Evaluation by Dana Farino, OT. Mrs. Olsen scored at 0.0 pounds for her right hand compared

to a score of 40.0 pounds for her left hand. Mrs. Olsen's underwent dexterity testing by the 9-hole pegboard test during the Initial Evaluation by Dana Farino, OT. Mrs. Olsen completed the task in 247 seconds with her right hand and completed the task in 33 seconds with her left hand.

Dana Farino, OT treatment plan for Mrs. Olsen consisted of: Active assistive range of motion activities, active range of motion activities, adaptive equipment education, aerobic conditioning, client education, functional activities for activities of daily living, a home exercise program, joint mobilization techniques, joint protection, manual range of motion activities, manual therapy techniques, massages, neural mobilization techniques, neuromuscular reeducation, orthotic fitting and training, passive range of motion activities, postural stabilization training, proprioceptive/closed kinetic chain activities, resistive activities, self-care/home management, soft tissue mobilization techniques, stretching and flexibility activities, therapeutic activities and therapeutic exercise.

The hope of Occupation Therapy was to improve Carol Olsen's score for the Five Position Grip Test to 20 pounds, and to improve her right hand to adaptive assistive levels for her activities for daily living consisting of: bathing, carrying, grasping, gripping, lifting, meal preparation, and object manipulation.

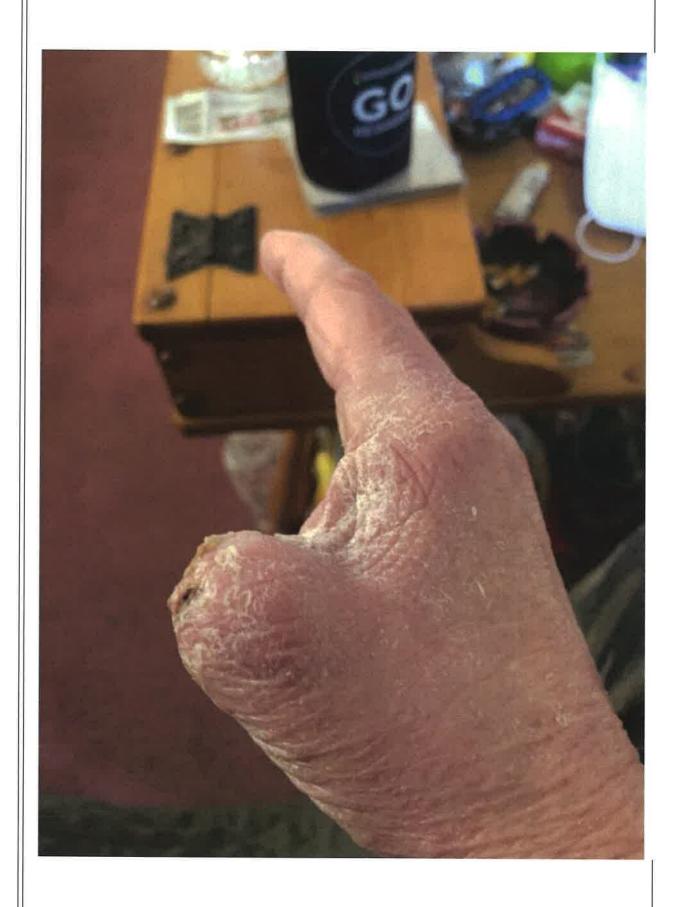
Mrs. Olsen continued to receive Occupational Therapy and due to her significant effort to regain the use of her right hand, she experienced moderate improvement. However, after months of rehab, her right-hand improvement ceased and her recovery plateaued. She remained challenged in doing the most basic personal activities such as bathing, dressing, grasping, gripping, lifting, meal preparation, object manipulation, self-feeding and tool use. Unfortunately, Mrs. Olsen was still unable to use her affected right hand for carrying just about any weight, severely limiting her activities of daily living.

In the many months following the advent of Occupational Therapy, Mrs. Olsen's strength in the right hand slowly improved. However, her strength in the right hand was extremely compromised as well as her physical dexterity. The comparison from her right hand to her left confirmed just how seriously her right-hand strength and dexterity suffered in comparison to her left. Specifically, Mrs. Olsen's underwent dexterity testing by the 9-hole pegboard test during the Initial Evaluation by Dana Farino, OT. Mrs. Olsen completed the task in an improved time of 125 seconds with her right hand and completed the task in 33 seconds with her left hand.

In her final Occupational testing, and as a testament to her will and determination to improve from almost impossible odds, Mrs. Olsen underwent muscle testing by the Five Position Grip Test during the Re- Evaluation by Dana Farino, OT on August 12, 2021. She improved her score to 20.0 pounds for her right hand and also stayed at 50.0 pounds for her left hand. Mrs. Olsen's underwent dexterity testing by the 9-hole pegboard test during the Initial Evaluation by Dana Farino, OT. Mrs. Olsen completed the task in an improved time of 110 seconds with her right hand and completed the task in 33 seconds with her left hand.

While she was able to improve from zero function to the levels seen in August 2021, she remains nearly totally disabled as to her right thumb and hand. Her objective testing results confirm that her strength and dexterity have been reduced by 3-4 times from her prior level and from her weaker left side. Mrs. Olsen suffers from pain at the distal end of her right thumb and has begun to develop trigger fingers of her right hand due to the constant use of her fingers without a thumb during activities of daily living.

Please the Kessler Rehabilitation Center Records attached as Exhibit E.





4. Detailed description of injury or condition claimed to be permanent together with all present complaints.

By Counsel: As a result of the injuries described in answer to interrogatory #3 above, all of the injuries described are medically deemed permanent in nature and Plaintiff suffers permanent residuals of all of these injuries which are further described in the reports and records attached. Plaintiff will amend these answers as additional records and reports from her treating physicians become available.

With the assistance of Counsel:

Even though I was rushed from one ER to the another to have emergency surgery with the hopes of saving my right thumb, the surgeon was not able to reattach it due to the extensive damage to the tendons and nerves caused by Eleventh Hour Rescue's dog attack at Michael Cabibo's home on March 13, 2021. In additional to losing my right thumb entirely, I also have permanent disfiguring scars on my right calf. I will never have a right thumb again, and my daily life became a million times harder because I do not have my right thumb.

I am committed to getting back to being able to decorate cakes, playing catch, and trying to live a normal life as I had done before the dog attack, but it has been very frustrating for me. I was a super active person and enjoyed doing so many physical activities that now are nearly impossible to do because of the physical limitations caused by the loss of my right thumb and nerve damage to my right hand. My doctor explained that I may need additional surgeries and that I am also causing serious injury to my left hand due to overuse because I am now almost completely dependent on my left hand at work and home. My right hand now is nothing more than a "paddle" because without a thumb, I am unable to have the dexterity I had before Eleventh Hour's dog tore off my right thumb, and the extensive nerve damage has limited the use of my other fingers and right hand.

Due to the extent of damage to my thumb and hand, I was medically disabled from work for about four months. For the past thirty-five (35) years or so, I have worked as a baker for Stop and Shop and loved making, designing and decorating cakes. My store managers always counted on me to not only do the most intricate and detailed cake decorating, but also being able to complete multiple cakes in a quick and expedited manner. Although I have returned to work, as a result of the loss of my thumb, and the recovery time needed after my surgery, I have been unable to return to doing the decorating like I had done for so many years prior. I can no longer use my cake decorating skills that I had mastered over the past 35 years because I have lost my ability to grip, grasp and grab without my right thumb.

I have pain in my right hand every time I attempt to use it as anything more than a paddle. The pain feels as if the bones in my stump are about to tear through my skin. I constantly drop objects that I try and hold with my right hand because of the numbness and pain I feel in the palm and stump area of my right hand.

Every day I struggle with simple activities most people without a disability take for granted. Most aspects of my life are now a constant struggle. Dressing myself, brushing my teeth, bathing, cooking, using utensils to feed myself, making a simple cup of coffee, wrapping gifts for my children, opening bottles of medication, opening jars and bottles, using the zippers on my pants, putting on deodorant, putting on make-up are only a few of the most obvious problems I have with personal activities. I am completely unable to open any type of bottled drink. I am unable to grasp the bottle with one hand and grip the top with another hand at the same time with enough strength to be able to break the protective seal of the

bottle. Please see videos of Plaintiff's daily life before and after she lost her thumb due to the dog attack attached as **Exhibit F**.

The injury to my thumb and hand has also dramatically changed my professional work which has now been completely changed forever. The loss of use in my right hand and thumb has altered how I do everything at work. The inability to grab, grip and grasp with my right hand as I did before the Pitbull tore off my thumb, has completely changed my professional career and duties at work. Today my right hand is nothing more than a "paddle" but before the dog attack, my right hand and thumb were critical components in my ability and expertise in cake creation and completion.

Losing my right-hand dexterity prevents me from doing the fine decorating details that made my work so special and in demand. I have tried to use my left hand to compensate but I will never be able to get back to the high end sophisticated professional bakery skill level I was at before the dog attack. Before I lost my right thumb and the strength in my right hand, I was able to assemble and decorate a cake in less than thirty minutes, but now it takes me hours and I need assistance because I cannot grab the tools necessary to complete the detailed cake projects. The most I can do now is just to write "Happy Birthday", with both hands, on cakes with a small pre-filled piping bag if no other employee is available to help me. Before the attack, not only did I never need assistance, I was the one that was called to assist everyone else in the department.

My surgeon has told me that I will have severe overcompensation issues with my left hand, and I am already starting to experience significant pain and weakness in my left hand and the surgeon said this is only going to continue to get worse. There is no way to avoid this problem if I want to continue working, and it is very important to me that I continue

working, not only because of financial reasons, but more importantly because I love being a baker and creating beautiful designs. If I did not at least have the place to go and try and to do even the smallest design elements of a fancy cake, psychologically I feel like I would lose an important part of my identity.

I am now almost completely unable to use my right hand to decorate cakes and complete my baking duties. This effects my work status as well as my mental psyche. I have always been a very upbeat person, but since the attack, I get very depressed now. Every day, I am not only reminded of the permanent disability, but I come across another daily activity that requires a thumb that I can no longer do. The permanent functional loss I have suffered as a result of the attack by the dog owned by Defendant Eleventh Hour is now a burden on my life forever.

My right hand is numb and in constant pain from the nerve damage caused by the dog bite. I use the fingers on my right hand like a clamp and this is causing me to feel tightness and pain in my right hand because I do not have the support of a right thumb. I am developing bumps and rough skin in my palm because of the way I must use my right hand. I am still learning how to adapt to my new life without the support of my right thumb. I rely on my husband and family with chores around the house. I am wearing sweatpants now or pants that do not have buttons or zippers and there are days where I sleep in my pants and wear them the next day because I do not have the ability to change my pants. My husband or daughter have to put on my jeweler and remove it because I am unable to grab the small and delicate pieces without my thumb and use of the other fingers on my right hand. I am no longer able to use scissors to cut any sort of paper, and I am not longer able to cut my husband's hair. I am thankful to have my husband and family supporting me, but I feel like

a burden to my family. Prior to the attack, I was the one that did everything and solved all the problems. Now I have no independence and must rely on someone for the most basic of assistance.

I am lucky to have a caring and understanding manager at the Stop & Shop Bakery because I have lost so much of the specialized baking skills that made me valuable at work. In addition, I lost approximately four (4) months of work and even though I have returned to the job, my ability to execute my duties at the bakery is very compromised because of the loss of my right thumb and use of my right hand. My manager had to switch his schedule to accommodate me because I no longer can help unload the shipments of baked goods off the delivery truck. This process would take a few hours and would consist of me unloading awkward shaped baked goods and bags that weighted up to 60lbs. I was able to do this task easily and efficiently before I lost my thumb, but now I do not have the strength in my hand to carry the weight of the goods nor the grip to grab and move the goods. Additionally, I would then have to move the baked goods into the bakery, organize the baked goods, and then display them in the bakery for sale. I would have to use a sticker gun with two hands to label the goods, but now I am no longer able to use the sticker gun to label the baked goods.

I was very proud of my personal ability to create beautiful flower cake decorations made of buttercream with a piping bag and a baker's nail. This process not only takes creative ability but demands the physical dexterity to use both thumbs and hands. Prior to the dog attack, I would hold the piping bag with my left hand to squeeze the cream out of the bag and use my right thumb and fingers to twirl the nail to create the pretty flower decoration.

Presently, I am no longer able to twirl the nail to create my beautiful decorations because I do not have a right thumb. I am unable to fill the piping bag with buttercream, and I am unable to use the scissor to cut the tip of the bag to begin my decorating. I cannot cut the pastry bags that I use in the bakery because I am unable to safely grab the scissors with one hand and secure the pastry bag. Another employee must fill the bag for me and cut the tip for me because I am unable to complete this process without the strength and grip in my right hand. Please see the video of Mrs. Olsen creating a flower decorations before losing her thumb attached as EXHIBIT F2.

Creating these flower decorations is a rare skill, and I was one of the only bakers who worked for Stop and Shop that was able to make the flower decoration. I was able to create these flower decorations in less than a minute, but now I cannot even complete a single flower because I cannot grip, grab or grasp the required tools in an accurate manner. Managers from the Stop and Shop bakeries in the area would call my manager and ask for my time so I could decorate their cakes with my flowers. This helped me secure my job and it showed how important I was to Stop and Shop and it gave me intense pride. I have lost this skill and have lost a major key to my job security. I need both hands and thumbs to create the flower to be able to control both tools, but now I must use both hands to even try to use the piping bag. I need both hands to be able to accurately control the piping bag and baker's nail to create the desired flower decoration, but now I cannot use a baker's nail properly because I am unable to twirl the nail with my right hand to complete each layer of the flower. If I grab the nail with my left hand, I am unable to grab a normal sized piping bag nor accurately control a small piping bag to create the flower decorations. Please see

the video of Mrs. Olsen trying to create a flower decorations after losing her thumb attached as EXHIBIT F3.

A personal passion of mine is being a NY Jets fan because my family has had Jets season tickets for twenty years. My family and I still go to a few games a season. One of my favorite parts of game day is playing catch with my children, husband and brother at the tailgate before the game. It was a big part of our family bonding time, we loved throwing and catching the football before the game. I am right-handed and of course throw the football with my right hand. I am unable to even grab a football because my right thumb was torn off by the dog. Our family loved playing catch. We would play with the frisbee, play catch with baseballs and gloves and of course played catch with the football. I had a great arm and precision that always impressed my husband, family and any strangers who happened to see us play. I am no longer able to grip and throw any ball with my right hand, and I cannot play catch because of the severe pain I would feel in my right hand from the impact of the ball. Please see the video of Mrs. Olsen throwing a frisbee before losing her thumb attached

as EXHIBIT F4.

I will never again get that bonding time with my family during football Sundays. The thought of not even being able to hold a hot dog and soda at the same time bothers me, going to a football game will never be the same for me or my family. It will just another reminder that my life has changed for the worst.

Another personal passion of mine was doing home improvement projects, but now I am unable to use the tools that would complete the projects. Before the dog tore my thumb off, I painted all the rooms in my house, I installed tiles in my bathroom, and sanded and painted my kitchen cabinets. I would fix anything and everything in my home. I was great with my

hands and was able to save money by doing renovations on my own. My family will now on have to hire someone to complete the projects in our home. I enjoyed completing the projects because I loved the process and seeing how my work made my home better for my family. I will never again get that satisfied feeling of completing a tough project and feeling the accomplishment knowing I did it personally and for my household.

Cohen | Winters

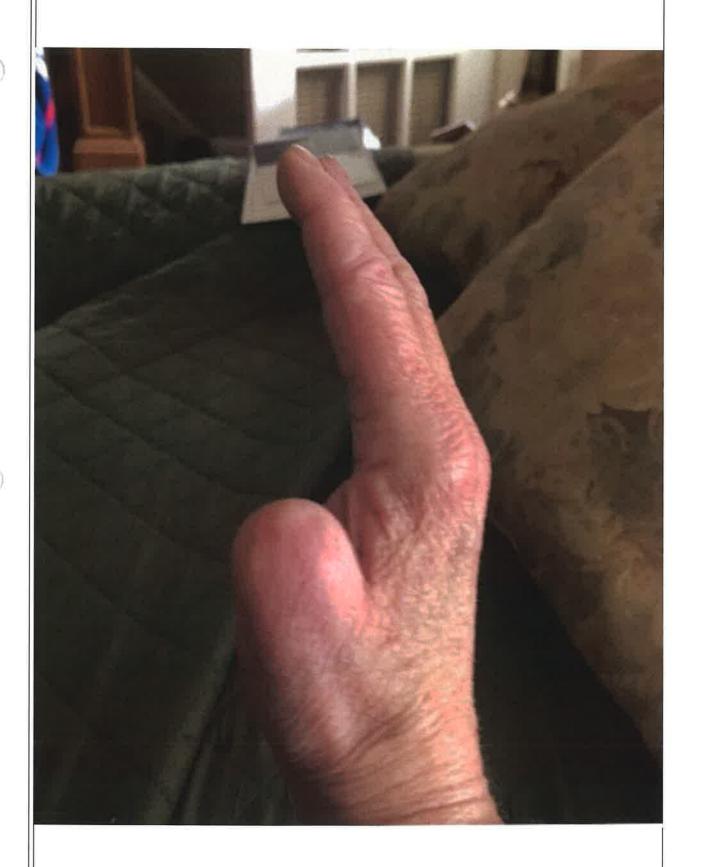
Richard M. Winters, M.D., F.A.C.S. 113 Essex St. Maywood, NJ 07607

Dr. Winters opined that Mrs. Olsen is unable to do anything with her right hand other than use the four remaining fingers as a paddle to assist her non-dominant left hand. The amputation of her right thumb is a permanent disability that is significantly limiting in terms of activities of daily living, both at home as well as at work. Activities such as getting dressed on her own and working as a baker are now nearly impossible without significant modification. The loss of Mrs. Olsen's right thumb has now caused her to be nearly totally reliant on her left hand and Dr. Winter provided an opinion that the reliance will result in aggravation and acceleration of conditions such as osteoarthritis and joint issues, especially because of her age and trade as a baker.

Dr. Winters opines that the horrible right thumb and hand injury suffered during the dog attack, within a reasonable degree of medical probability, found that this dog bite avulsion amputation injury to Mrs. Olsen's right thumb is the proximate cause of all her current conditions and will certainly act as a catalyst for future overuse related degenerative issues. Mrs. Olsen's right hand will only serve as an assist paddle to her left hand, and she will undoubtedly suffer from overuse issues with the left-hand.

Please see Dr. Winters' Narrative Report attached as Exhibit G.









5. If confined to a hospital, state its name and address, and dates of admission and discharge.

The Valley Hospital

223 N Van Dien Ave Ridgewood, NJ 07450

Date of Admission: 3/13/2021

Transferred to Hackensack University Medical Center on 3/13/2021

Hackensack University Medical Center

30 Prospect Ave

Hackensack, NJ 07601-1912

Date of Admission: 3/13/2021

Date of Discharge: 3/14/2021

6. If any diagnostic tests were performed, state the type of test performed, name and address of place where performed, date each test was performed and what each test disclosed. Attach a copy of the test results.

Hackensack University Medical Center

30 Prospect Ave

Hackensack, NJ 07601-1912

- Date:
 - 0 3/13/2021;
- Procedure:
 - Exploration/dissection of right thumb, amputation part, completion amputation at metacarpal;
- Indication:
 - o Right thumb complete avulsion amputation, dogbite.
- Physician:
 - o Dr. Richard M. Winters;
- Description of Procedure:
 - o The specimen is labelled 'right thumb' with proper patient identification on the container. Received in formalin is a right thumb measuring 5.2 x 2.3 x 2.2 cm. A long segment of tendon with some attached muscle extends from the margin of resection measuring 19.5 x 0.9 x 0.4 cm. The specimen appears viable and unremarkable. The attached thumbnail is normal and unremarkable. The margin of resection is linked blue.

Longitudinal section of the specimen is taken. Representative sections are submitted in 2 cassettes after light decalcification.

The Valley Hospital

223 N Van Dien Ave Ridgewood, NJ 07450

- Date:
 - 0 3/13/2021;
- Test:
 - o X-Ray of the Right Tibia Fibula;
- Indication:
 - o Pain, unspecified trauma, dog bite/thumb injury.
- Physician:
 - o Dr. John McGreal, M.D.
- Impression:
 - O There is a 15 mm defect within the soft tissues at the mid aspect of the lower extremity medially, compatible with a laceration. There are additional mottled lucencies within the soft tissues of the lower extremity which may represent lacerations and/or secondary subcutaneous emphysema. The osseous structures are intact.

The Valley Hospital

223 N Van Dien Ave Ridgewood, NJ 07450

- Date:
 - 0 3/13/2021;
- Test:
 - o X-Ray of the Right Hand;
- Indication:
 - Pain, unspecified trauma site amputation R thumb, dog bite/thumb injury.
- Physician:
 - o Daniel P. Walsh, P.A.
- Impression:
 - There is amputation of the 1st digit-thumb beyond the base of the 1st proximal phalanx. The remaining soft tissues and osseous structures are intact.
- 7. If treated by any health care provider, state the name and present address of each health care provider, the dates and places where treatments were received and the date of last treatment. Attach true copies of all written reports provided to you by any such health care provider whom you propose to have testify in your behalf.

The Valley Hospital 223 N Van Dien Ave Ridgewood, NJ 07450 Dates of Treatment: 3/13/2021

Hackensack University Medical Center

30 Prospect Ave Hackensack, NJ 07601-1912 Dates of Treatment: 3/13/2021 and 3/14/2021.

- Date:
 - o <u>3/13/2021;</u>
- Procedure:
 - Right thumb part and stump exploration in the operating room under magnification.
 - o Resection of radial and ulnar digital nerves.
 - Metacarpal ostectomy and advancement flap closure of the amputation stump.
- Physician:
 - o Dr. Richard M. Winters, M.D.
- Indication/Procedure:
 - o The patient was transferred from an outlying hospital late on Saturday night with a traumatic avulsion of her right thumb at the metacarpophalangeal joint secondary to a pit bull bite. The part had been properly cared for. The patient had been given appropriate antibiotics and the stump had been properly dressed. I had a long conversation with the patient prior to taking her to surgery, explaining the nature of her injury and the potential unlikelihood of her thumb being replantable. We also discussed the issues surrounding dog bites and the potential for thumb reconstruction in the future. As such, I took the part to the amputated thumb to the operating room while the patient awaited her COVID testing. In the operating room at a separate back table under magnification, I explored the metacarpophalangeal joint amputation extensively. The flexor pollicis longus tendon had been avulsed at the musculotendinous junction all that way in the forearm. Knowing that I could even get around this potential liability for the patient by multiple fusions in the future, I became concerned at the condition of the neurovascular bundles. As is typical of the thumb amputation, the ulnar digital artery is the more robust of the two digital vessels. Her ulnar digital artery had been torn from the palm at the level of the palmar arch. I did, in fact, cut back on the ulnar artery, dilated and irrigated with a cooled

heparinized saline with excellent tugor being established in the thumb and robust bleeding out of the veins. With the understanding that a replant would require a long vein graft to the more proximal radial artery, the nerves became the most important part of the decision-making process. Her ulnar and radial digital nerves have been avulsed all the way back into the palm to the level of the distal median nerve and proper digital nerve and common digital nerves. Given the fact that in this 55-year-old on top of needing to do a vein graft her ulnar digital, these nerves would require long vein grafts without any inherent promise of return of sensation. As such, I determined that the thumb was not particularly replantable and as such sent it to pathology.

The patient was then taken to the operating room and placed in a supine position. After successful induction of general endotracheal anesthesia, a tourniquet was placed and the right upper extremity was scrubbed, prepped and draped in the usual sterile fashion. Once this was completed, the thumb stump was carefully evaluated. The badly comminuted fracture through the MCP joint was addressed by creating a clean cut at the head of the metacarpal with a rongeur and a file. Once this was completed, the adductor tendons were identified as were what remained of the thumb extensors. These were appropriately debrided and subsequently advanced and closed over the thumb metacarpal bone. Once this was completed, the skin was appropriately debrided of all devitalized tissue and a volar flap was created and advanced to meet the proximal dorsal flap. The torniquet was deflated after meticulous hemostasis was achieved. The identifiable nerves were cut back; these were predominantly dorsal nerves. Once this was completed, the skin was advanced and closed with multiple interrupted 4-0 nylon horizontal mattress and simple interrupted sutures with plenty of room for the incision to drain given the nature of the injury being a dog bite. Bacitracin ointment, Xeroform gauze, bulky cotton dressing and light compression were applied.

The patient was then promptly awakened, extubated and brought to the recovery room in excellent condition having tolerated the procedure well.

Aesthetic & Reconstructive Surgeons, L.L.C.

113 Essex Street, Suite 202 Maywood, NJ 07607

Clinician: Dr. Richard Winters and Dr. Janet Yueh

Dates of Treatment:

3/16/2021, 3/23/2021, 3/30/2021, 4/23/2021, 5/7/2021, 5/21/2021, 5/28/2021, 6/4/2021, 3/8/2022.

Please see Aesthetic & Reconstructive Surgeons, L.L.C. medical records attached as Exhibit H.

Kessler Institute for Rehabilitation

300 Market Street

Saddle Brook, NJ 07663

Clinician: Dana Farino, OT

Dates of Treatment:

 $\frac{4/30/2021,\,5/5/2021,\,5/7/2021,\,5/12/2021,\,5/14/2021,\,5/17/2021,\,5/19/2021,\,5/21/2021,\,5/24/2021,\,5/26/2021,\,5/27/2021,\,6/1/2021,\,6/2/2021,\,6/4/2021,\,6/7/2021,\,6/9/2021,\,6/11/2021,\,6/14/2021,\,6/16/2021,\,6/21/2021,\,6/23/2021,\,6/25/2021,\,6/30/2021,\,7/2/2021,\,7/6/2021,\,7/29/2021,\,8/05/2021,\,8/12/2021,\,8/26/21,\,9/16/21,\,9/23/21,\,9/30/21,\,10/14/21,\,10/28/21,\,11/11/21,\,12/2/21,\,12/16/21,\,1/6/22,\,2/1/22,\,2/15/22,\,2/22/22,\,3/1/22,\,5/3/22.$

8. If still being treated, the name and address of each doctor or health care provider rendering treatment, where and how often treatment is received and the nature of the treatment.

The Plaintiff is no longer receiving active care, however she was given instruction on home exercise routine and advised to do home grip and stretching exercises for her hand for the rest of her life.

9. If a previous injury, disease, illness or condition is claimed to have been aggravated, accelerated or exacerbated, specify in detail the nature of each and the name and present address of each health care provider, if any, whomever provided treatment for the condition.

With the assistance of counsel: As of this date, no doctor has informed Plaintiff that her injuries are an aggravation of any pre-existing condition. However, if any physician who has treated her, examined her, or will examine her, is of the opinion that a prior injury or condition has been aggravated, Plaintiff reserves the right to make this claim.

- 10. If employed at the time of the accident, state: (a) name and address of employer; (b) position held and nature of work performed; (c) average weekly wages for past year; (d) period of time lost from employment, giving dates; and (e) amount of wages lost, if any.
 - (a) Stop & Shop Bakery

337 Franklin Ave Wyckoff, NJ 07481

- (b) I have been a Baker for 35 years, I am currently employed at the Stop & Shop's Bakery Department in Wyckoff, NJ. As a Baker, I am required to wake up at 3:00 a.m. and to be at work by 4:00 a.m. It is a very hands-on, and physically demanding job. Before the dog tore my thumb off, I would pull out big racks in the refrigerator and place them in the proof box to get the dough to rise. In the freezer, I had to take racks full of dough for bread to place in the oven. I would also have carriages to pull for all the outdated baked goods from the floor for customers and re-organize the display shelves. I would have to use Sticker-guns with both hands to mark and label baked goods. I was required to move long baking sheet pans to bake and then had to bag the goods before I organized the display for customers. I would also help customers bag their groceries at check-out. Sometimes customers would ask for specific baked goods from the back freezer that I would have to pull out. Before I lost my thumb, part of my job duties included unloading frozen goods from a truck that had multiple pallets. The pallets contained about 120 pieces that weighted up to 60lbs. I would have to take off the baked goods from the pallets and put it on a u-boat (carriage), push it into the bakery and place them in the bakery. I was also very skilled in decorating cakes. My specialty was creating decorative flowers. I used both my hands for every duty I had as a baker before the dog tore off my right thumb.
- (c) I earned on average \$1,000.00 a week before taxes.
- (d) Estimated period of time lost from employment was from March 13, 2021, through July 12, 2021.
- (e) Approximate income lost is \$17,000.00.
- 11. If there has been a return to employment or occupation, state: (a) name and address of present employer; (b) position held and nature of work performed; and (c) presently weekly wages, earning, income or profit.

With the assistance of Counsel:

- (a) Stop & Shop Bakery 337 Franklin Ave Wyckoff, NJ 07481
- (b) Baker, please see the answer above at10(b)
- (c) I earn on average \$1,000.00 a week before taxes

12. If other loss of income, profit or earnings claimed: (a) state total amount of the loss; (b) give a complete detailed computation of the loss; and (c) state the nature and source of the loss of income, profit and earnings, and the dates of the deprivation.

With the assistance of Counsel: No other loss of income, profit or earnings is being reported at this time. Plaintiff hereby reserves her right to supplement these answers.

13. Itemize in complete detail any and all moneys expended or expenses incurred for hospitals, doctors, nurses, diagnostic tests or health care providers, x-rays, medicines, care and appliances and state the name and address of each payee and the amount paid and owed each payee.

PROVIDER	AMOUNT PAID
Aesthetic & Reconstructive Surgeons	\$3,132.23
Hackensack University Medical Center	\$44,790.51
Hackensack Pathology	\$63.98
Kessler Institute For Rehabilitation	\$4,403.00
New Jersey Health	\$827.38
The Valley Hospital	\$2,744.35
Valley ER	\$244.42
Radiology	\$21.76
TOTAL	56,227.63

Please see the records of medical expenses attached as Exhibit I.

14. Itemize any and all other losses or expenses incurred not otherwise set forth.

With the assistance of Counsel: The Plaintiff makes claim for those expenses not covered by Horizon Blue-Cross Advance/Advantage (A SELF FUNDED ERISA PLAN), as well as reimbursement for subrogation of Federal ERISA Lien obligation and paid "out of pocket" by Plaintiff.

PROVIDER	AMOUNT	
Hackensack Pathology Assoc., LLC.	\$7.11	
Hackensack University Med. Ctr.	\$91.93	
The Valley Hospital – Valley Health	\$75.00	
System		
Kessler Rehab	\$252.42	
Hackensack Meridian Health	\$587.49	

Aesthetic & Reconstructive Surgery – Dr. Richard Winters	\$588.47
TOTAL	\$1,602.42

*Total of \$57,830.06 for the expenses not covered by the ERISA plan and the reimbursement for subrogation of the Federal ERISA Lien obligation

Please see the records of the expenses attached as <u>Exhibit J</u>.

Please see the Conduent ERISA Medical Lien Ledger attached as <u>Exhibit K</u>.

15. Identify all documents that may relate to this action, and attach copies of each such document.

Objection. On the advice of my attorney, this question may encompass documents protected by attorney work product and/or attorney client privilege. Without waiving the foregoing objection, and from facts within my personal knowledge and from the discovery and investigation available to my attorneys, they advise me and I believe that the following documents may relate to this matter: all documents attached to these or any other answers to interrogatories, including both formal and/or informal amendments thereto; any and all other documents supplied by this party or any other party during the course of discovery, either formally or informally; any documents identified within any other document supplied during the course of discovery; any and all other documents that shall become known to me by way of further investigation, discovery and/or trial.

In addition, Plaintiff will rely upon all medical records, physician notes, medical certificates, narrative reports, police records, and municipal court dispositions, and other documents to be supplied through continued discovery. Plaintiff will also rely on x-rays, MRIs, (negatives and positives) and other diagnostic studies, medical illustrations, anatomical charts or displays of the injured parts of Plaintiff's body, and/or depicting the extent of Plaintiff's disability, the nature of Plaintiff's injuries, her pains, complaints and limitations, and future treatment or surgery, sketches, diagrams charts depicting the Plaintiff's medical treatment.

16. State the names and address of all eyewitnesses to the accident or occurrence, their relationship to you and their interest in this lawsuit.

I am not aware of any witnesses to this incident other than Mr. Cabibo.

17. State the names and addresses of all persons who have knowledge of any facts relating to the case.

Mahwah Township Police Officer Christopher J. Lupo, badge no. 1167; Diane Holmer of the health department; all staff and personnel at Eleventh Hour Animal Shelter in 861 Route 10 East, Randolph, NJ 07869; all the doctors and personnel at Hackensack University Medical/Trauma Center in Hackensack NJ; all the doctors and personnel at The

Valley Hospital in Ridgewood, NJ; all the doctors and personnel at Aesthetic & Reconstructive Services including but not limited to Dr. Winters in Maywood, NJ; all the doctors and personnel at Kessler Rehabilitation in Saddle Brook, NJ; Defendant Michael Cabibo, Joseph A. Mancino, manager at Stop & Shop; Dorothy Coughlin, Kristin Olsen, Plaintiffs' daughter, Kimberly Olsen, Plaintiffs' daughter, conditional witness; and all persons named in depositions taken or to be taken and such other persons as continuing discovery may reveal.

18. If any photographs, videotapes, audio tapes or other forms of electronic recording, sketches, reproductions, charts or maps were made with respect to anything that is relevant to the subject matter of the complaint, describe: (a) the number of each; (b) what each shows or contains; (c) the date taken or made; (d) the names and addresses of the persons who made them; (e) in whose possession they are at present; and (f) if in your possession, attach a copy, or if not subject to convenient copying, state the location where inspection and copying may take place.

Please see attached exhibits.

- 19. If you claim that the defendant made any admissions as to the subject matter of this lawsuit, state: (a) the date made; (b) the name of the person by whom made; (c) the name and address to whom made; (d) where made; (e) the name and address of each person present at the time the admission was made; (f) the contents of the admission; and (g) if in writing, attach a copy.
 - (a) 03/13/2021;
 - (b) Michael Cabibo;
 - (c) Officer Christopher J. Lupo, Mahwah Township Police Department, Mahwah, NJ 07430;
 - (d) Contact with Officer Christopher J. Lupo, Mahwah Township Police Department, please refer to **Exhibit A**;
 - (e) Michael Cabibo, 1291 Mulberry Drive, Mahwah, NJ 07430;
 - (f) In the Mahwah Township Police Department Operations Report referred in Exhibit A, Defendant Michael Cabibo confirmed the dog he fostered for Eleventh Hour Shelter bit Mrs. Olsen and had a history of being protective. Eleventh Hour Shelter stated their dog was placed on a ten-day bite confinement, they will maintain custody of their dog, and will not place their dog for adoption.
 - (g) Please see Exhibit A, the Mahwah Township Police Department Operations Report.
- 20. If you or your representative and the defendant have had any oral communication concerning the subject matter of this lawsuit, state; (a) the date of the communication; (b) the name and address of each participant; (c) the name and address of each person present at the time of such communication; (d) where such communication took place; and (e) a summary of what was said by each party participating in the communication.

Counsel for Plaintiff has exchanged correspondence with Steven Martino, Esq., Counsel for Co-Defendant Michael Cabibo, see attached as Exhibit L.

21. If you have obtained a statement from any person not a party to this action, state: (a) the name and present address of the person who gave the statement; (b) whether the statement was oral or in writing and if in writing, attach a copy; (c) the date the statement was obtained; (d) if such statement was oral, whether a recording was made, and if so, the nature of the recording and the name and present address of the person who has custody of it; (e) if the statement was written, whether it was signed by the person making it; (f) the name and address of the person who obtained the statement; and (g) if the statement was oral, a detailed summary of its contents.

See admission of Defendant as set forth in the Mahwah Township Police Department Operations Report in Exhibit A.

22. If you claim that the violation of any statute, rule, regulation or ordinance is a factor in this litigation, state the exact title and section.

My attorneys advise me that Defendant, Eleventh Hour Shelter and through their foster, agent, servant and/or employee, Michael Cabibo, was negligent and/or careless in the following manner:

- 1) Violating the provisions of N.J.S.A. 4:19-16 entitled "Liability of Owner Regardless of Viciousness of Dog";
- 2) For negligently permitting dangerous rescue dog to be released to an inadequately trained foster, knowing said dog with known dangerous propensities would be exposed to the public;
- 3) Failure to adequately train the foster before entrusting a dangerous rescue dog with said foster;
- 4) In failing to do background check of foster to confirm if he was appropriately trained to supervise a rescue dog;
- 5) The Defendants were negligent in other ways as continuing discovery may reveal.
- 23. State the names and addresses of any and all proposed expert witnesses. Set forth in detail the qualification of each expert named and attach a copy of each expert's current resume. Also attach true copies of all written reports provided to you by any such proposed expert witnesses.

With respect to all expert witnesses, including treating physicians, who are expected to testify at trial and with respect to any person who has conducted an examination pursuant to Rule 4:19, who may testify, state each such witness's name, address and area of expertise and attach a true copy of all written reports provided to you.

State the subject matter on which your experts are expected to testify.

State the substance of the facts and opinions to which your experts are expected to testify and a summary of the grounds for each opinion.

Please refer to all physicians identified in answer to interrogatory #7 who will be called as experts at the time of trial. Their respective records and reports are attached as exhibits.

The doctors are expected to testify regarding their examinations and treatment of the plaintiff, history given complaints made by plaintiff regarding his injuries, their clinical findings, results of tests performed, course of treatment, diagnosis, permanency, prognosis, proximate cause, the factual basis for each opinion as well as opinions on reasonableness of medical charges, and necessity of treatment rendered. The doctors will also testify as to the effect those injuries have had and will have on the plaintiff's daily activities and lifestyle, both at home and at work. The doctors will also explain to the jury their medical background and expertise and how they relate to the treatment of the injuries involved. They will also explain aspects of anatomy, physiology, his field of expertise, the biomechanics and pathophysiology of trauma, as these bodies of science and medicine relates to the traumatic event and the injuries sustained.

The physicians will also testify in detail, but without limitation, to all information covered in their reports, true copies of which are attached and identified as follows:

Please see attachment index for experts' reports however the named experts will not be limited by the four corners of their reports at the time of trial. For more detail at this time the defense may arrange for their depositions.

State whether you have ever been convicted of a crime. YES () or NO (X). If the answer is "yes", state: (a) date; (b) place; and (c) nature.

CERTIFICATION

I hereby certify that the foregoing answers to interrogatories are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

I hereby certify that the copies of the reports annexed hereto provided by either treating physicians or proposed expert witnesses are exact copies of the entire report or reports provided by them; that the existence of other reports of said doctors or experts are unknown to me, and if such become later known or available, I shall serve them promptly on the propounding party.

07/15/2022

PLAINTIFF

Carol Olsen

EXHIBIT LIST

EXHIBIT A: MAHWAH TOWNSHIP POLICE DEPARTMENT OPERATIONS

REPORT;

EXHIBIT B: THE VALLEY HOSPITAL RECORDS

EXHIBIT C: PHOTOGRAPHS OF PLAINTIFF'S RIGHT THUMB AND RIGHT

CALF;

EXHIBIT D: HACKENSACK UNIVERSITY MEDICAL CENTER RECORDS;

EXHIBIT E: KESSLER, THE REHABILITATION CENTER RECORDS;

EXHIBIT F: VIDEOS OF PLAINTIFF'S DAILY LIFE BEFORE AND AFTER SHE

LOST HER THUMB AND USE OF HER HAND DUE TO THE DOG

ATTACK ATTACHED TO THE USB FLASH DRIVE;

PLEASE ALSO SEE THE TESTIMONIAL VIDEO OF CAROL OLSEN'S STOP AND SHOP BAKERY SUPERVISOR, JOSEPH

MANCINO, ATTACHED TO THE USB FLASH DRIVE

EXHIBIT G: DR. WINTER'S NARRATIVE REPORT;

EXHIBIT H: AESTHETIC & RECONSTRUCTIVE SURGEONS LLC RECORDS;

EXHIBIT I: MEDICAL EXPENSES;

EXHIBIT J: OUT-OF-POCKET EXPENSES;

EXHIBIT K: CONDUENT ERISA MEDICAL LIEN LEDGER

EXHIBIT L: CORRESPONDENCE TO STEVEN MARTINO, ESQ.;

MAGGIANO, DIGIROLAMO & LIZZI, P.C. Christopher J. Havatian, Esq. (ID# 277582019)

201 Columbia Avenue Fort Lee, New Jersey 07024 (201) 585-9111 Attorneys for *Plaintiffs* Carol Olsen and Michael Olsen 5673-MDL

CAROL OLSEN and MICHAEL OLSEN her husband,

SUPERIOR COURT OF NEW JERSEY LAW DIVISION: BERGEN COUNTY

Plaintiff(s),

DOCKET NO.: BER-L-165-22

ν.

Civil Action

ELEVENTH HOUR RESCUE, ABC
CORPORATION, I-X, (said names being fictitious, true names presently unknown),
XYZ EMPLOYER, I-X (said names being fictitious, true names presently unknown),
MICHAEL CABIBO, and/or JOHN DOES
I-X (said names being fictitious, true names presently unknown),

Defendant(s).

PLAINTIFF'S CERTIFIED ANSWERS TO SUPPLEMENTAL INTERROGATORIES

PLAINTIFF RESERVES THE RIGHT TO AMEND, SUPPLEMENT AND MODIFY THESE SUPPLEMENTAL INTERROGATORY ANSWERS UPON FURTHER DISCOVERY AND INFORMATION.

S-1. Did plaintiff, Carol Olsen, accompany Michael Cabibo to Eleventh Hour Rescue to visit Alamo prior to Michael Cabibo fostering the dog?

I believe I visited Eleventh Hour Rescue twice with Michael Cabibo to look at multiple dogs and I may have went one time specifically to visit Alamo with Mr. Cabibo.

S-2. If the answer to S-1 is "yes" how many times did Carol Olsen accompany Michael Cabibo to Eleventh Hour Rescue to visit Alamo prior to Michael Cabibo fostering the dog?

I believe Michael Cabibo and I went one time specifically to visit Alamo.

S-3. If the answer to S-1 is "yes", did the staff at Eleventh Hour Rescue describe Alamo's disposition in Carol Olsen's presence?

I do not recall being told anything specific by Eleventh Hour personnel about the dog's disposition, other than he was a "good" dog.

S-4. If the answer to S-3 is "yes", what words were used to describe Alamo's disposition?

Eleventh Hour Rescue employees spoke directly to Michael Cabibo that Alamo was a good dog, and that he was friendly. I overheard this discussion. The employees petted Alamo during their visit as he was locked in a cage.

S-5. Did you suffer any injuries before or after the date of this accident? If so, set forth in detail the nature and extent of your injuries and treatment and the date and locations of any accidents.

I did not suffer any injuries before or after this dog attack. As a result of the severity of injury and resulting right hand and arm disabilities, my left arm is being overused to compensate the loss of the use of the right hand and thumb.

S-6. Did plaintiff ever previously suffer from any pain, any discomfort, or any symptoms whatsoever in the areas of the body alleged to have been injured in this accident? If so, describe all symptoms and medical treatment rendered, including dates and health care provider. Attach medical records.

No.

S-7. Before this accident, did the plaintiff undergo any MRI, CT scan, myelogram, x-ray, EMG or any other diagnostic test? If so, identify the test, set forth when and where it was conducted and attach reports and films.

Plaintiff believes she received an MRI over ten years ago for unrelated lower back pain.

S-8. Has the plaintiff ever asserted any *other* claim of physical impairment or personal injuries? If so, set forth in detail the specifics of these claims, and identify counsel and attach pleadings, petitions, discovery, settlement documents, judgments, administrative decisions, and medical records.

No.

S-9. Set forth the names and address of all doctors, including any primary care and/or family doctors and all hospitals where you have been examined or treated in the past ten years, the period of treatment and the nature of your medical problem.

I do not believe I treated with doctors in the 10 year period prior to the dog attack.

S-10. Did you see the other vehicle before impact? If so, specify the distance between the vehicles when you first saw the other vehicle and state the speeds of the vehicles at impact.

Not applicable.

CHRISTOPHER DIGIROLAMO is the Managing Partner at Maggiano, DiGirolamo, Lizzi P.C. and is admitted to practice law in the State and Federal Courts of the State New Jersey, the United States Court of Appeals for the Third Circuit, and the United States Supreme Court. Mr. DiGirolamo has protected the rights of victims of car accidents, fall downs, construction accidents, and on the job injuries, represented the men, women and families that make up the labor force in New Jersey and has helped union workers for over thirty-two years in various types of litigation including construction accidents, product defects, dangerous workplaces, employment disputes and most notably in workers compensation claims. He has achieved a number of multimillion-dollar verdicts and recoveries for workplace accident victims and their families, including serving as co-counsel in the largest personal injury recovery (\$101 million) in a construction accident in United States history. His aggressive style and dedication have earned him numerous awards and recognition from his peers both in New Jersey and nationally, and he considers this his greatest professional compliment. He has been chosen year after year by his peers and colleagues as one of the best litigators in *New Jersey* as well as in the United States. Christopher DiGirolamo has been recognized as one of the best trial lawyers and litigators by his peers and members of the judiciary. Year after year, he has also received numerous accolades and honors, including being recognized by U.S. News and World reports and, over the last fifteen consecutive years, by The Workers Injury Law & Advocacy Group as a Top Injured Workers Attorney and been recognized by 201 Magazine and Bergen Magazine for the past 8 years as one of Bergen County's best personal injury and workers compensation attorneys.





Judge Jose L. Linares

Partner | Newark | 973.639.7944 jlinares@mccarter.com

Business Litigation | Intellectual Property | IP Litigation | Alternative Dispute Resolution & Mediation | False Claims Act | Government Investigations & White Collar Defense | Appellate Litigation | Hatch-Waxman/ANDA Litigation

Judge Jose Linares has more than 40 years of experience in judicial service, private practice, and as a businessman, having owned and managed several successful retail enterprises. Over the course of his career, he has developed an exceptional reputation in the skills necessary to resolve complex disputes, relying on his extensive experience as both a judge and trial lawyer.

The Honorable Jose Linares chairs McCarter's Alternative Dispute Resolution practice. He served as Chief Judge of the United States District Court for the District of New Jersey, having been nominated to the bench by the President and confirmed by the Senate in 2002. Prior to joining the United States District Court, he served as a superior court judge in Essex County, New Jersey. Before joining the bench, Judge Linares headed his own law firm where he litigated products and medical cases.

Judge Linares is experienced in the life sciences and financial services industries, having heard numerous patent cases during his time on the bench, many involving high-stakes disputes between generic and branded drug companies. In addition, he has presided over numerous major bankruptcy appeals, class actions, multidistrict litigations, and securities fraud cases. Since joining McCarter, Judge Linares has participated in the preparation of highly complex patent and commercial litigation cases and has supervised corporate white collar criminal cases and internal investigations.

An acknowledged thought leader, Judge Linares lectures nationally on litigation and patent cases. He has served as an adjunct professor at Seton Hall School of Law and led the New Jersey District Court's 2017 Sentencing Symposium and the 2018 New Jersey District Court National Opioid Symposium. Judge Linares is a fellow of the American Bar Association and has been honored with several prestigious recognitions, including the New Jersey State Bar Distinguished Judicial Service Award, the James J. McLaughlin Professionalism Award presented by the New Jersey State Bar Association, and the Gerald B. O'Connor Award. He is also the recipient of several lifetime achievement awards.

Breaking ground as the first Hispanic to serve as Chief of the United States District Court of New Jersey and the first Cuban-born District Court Chief in the United States, Judge Linares champions diversity and inclusion and has helped change the face of the federal court. He is an active member of the firm and serves on McCarter's Diversity Committee and as a member of the firm's Social Justice Project Team. Judge Linares is also involved in numerous civic and nonprofit activities and regularly volunteers his time to various causes supporting young adults through both educational efforts and local youth sports programs.

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Education

Temple University Beasley School of Law, JD, 1978

New Jersey City University, BA, 1975

Bar Admissions

New Jersey

Court Admissions

U.S. Court of Appeals, Third Circuit

U.S. District Court, District of New Jersey

Memberships & Certifications

American Bar Association

Recognitions

The Best Lawyers in America, Arbitration and Mediation, New Jersey, 2023 and 2024

Federal Practice Award, Essex County Bar Association, 2021

ROI Influencers; People of Color List, ROI-NJ, 2020

Articles

Mediating with and without the Robe: Tips to Maximize Clients' ADR Experience, New Jersey Law Journal, 3.10.2021

Speaking Engagements

How to Represent Clients with Complex Issues in Arbitration, NJSBA, 5.18.2023

The Cuban Missile Crisis – Historic Parallels and Legal Lessons for Today, NJSBA/NJICLE, 4.21.2022

Taking Negotiations to the Next Level, Seton Hall Law, 3.7.2020

Opting for Alternative Dispute Resolutions – A Former Federal Judge's Perspective, McCarter & English CLE Program, 12.3.2019

Webinars

Mediating With & Without the Robe: Tips to Maximize Your ADR Experience, ACCNJ 19th Annual All Month CLE Conference, 9.9.2021

Mediating With and Without the Robe: Tips to Maximize Clients' ADR Experience, Celesq and West LegalEdcenter, 5.24.2021

Videos

Recently Retired Chief Federal Judge Reflects on Career in Public Office, NJTV, 5.21.2019

Quoted

Why Rutgers' Charismatic Star Omoruyi—and 20,000 Other College Athletes—Are Ineligible for NIL Money, ROI-NJ, 5.1.2023

NJ Attorneys Fear Arbitration Clause Issue Will Muddle Retainers, Law360, 4.1.2021

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Cocrystal Pharma's Reforms To End \$27M Stock Plot Suits, Law360, 9.4.2020 Blue-State Judicial Emergencies Surge as Trump Rushes GOP Picks, Bloomberg Law, 8.7.2019

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