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### **COMMONWEALTH OF MASSACHUSETTS**

NORFOLK, ss.

SUPERIOR COURT DEPARTMENT CIVIL ACTION NO. 02-01159A

MARCIA RHODES, HAROLD RHODES, INDIVIDUALLY, HAROLD RHODES, ON BEHALF OF HIS MINOR CHILD AND NEXT FRIEND, REBECCA RHODES,

Plaintiffs

VS.

CARLO ZALEWSKI, DRIVER LOGISTICS, \*
PENSKE TRUCK LEASING CORP., and \*
BUILDING MATERIALS CORP. OF AMERICA\*
d/b/a GAF MATERIALS CORP., \*
Defendants \*

BEFORE: DONOVAN, J. AND A JURY

\*\*\*\*\*\*\*

September 14, 2004 Norfolk Superior Court 650 High Street Dedham, Massachusetts 02026

Produce

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## **APPEARANCES:**

M. FREDERICK PRITZKER, ESQUIRE MARGARET PINKHAM, ESQUIRE On behalf of the plaintiffs,

LAWRENCE BOYLE, ESQUIRE JOHN P. KNIGHT, ESQUIRE On behalf of defendant Zalewski,

RUSSELL POLLACK, ESQUIRE WILLIAM CONROY, ESQUIRE,
On behalf of defendant GAF Building Materials

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1	<u>PROCEEDINGS</u>
2	THE COURT: Good morning.
3	THE CLERK: The case this morning is
4	Civil Action 02-1159, Rhodes et al versus Zalewski
5	et al. The case is on for continuation of trial.
6	THE COURT: Good morning, members
7	of the jury.
8	JURORS: Good morning.
9	THE COURT: Good morning, Counsel.
10	MR. PRITZKER: Good morning, your
11	Honor.
12	MS. PINKHAM: Good morning, your
13	Honor.
14	MR. CONROY: Good morning.
15	MR. BOYLE: Good morning.
16	MR. KNIGHT: Good morning.
17	MR. POLLOCK: Good morning.
18	THE COURT: I have two questions
19	MR. PRITZKER: Your Honor, before I
20	call my next witness
21	THE COURT: Before we do that, I
22	have two questions I have to ask my jurors here.
23	First, from the time we suspended yesterday until
24	this moment, has anyone discussed the case with

1	anyone else? Please raise your hand if you have.
2	No hands have been raised.
3	Has anyone read anything about this
4	case, listened to any form of media or gone on the
5	Internet or anything like that since the time we
6	suspended yesterday until this moment?
7	No hands have been raised.
8	Now, we can proceed.
9	MR. PRITZKER: Before I call my next
10	witness, your Honor, just a couple of undisputed
11	exhibits.
12	The first is the certified medical bills
13	from the various doctors and hospitals and other
14	service providers. I would like to introduce them
15	in a folder in bulk.
16	THE COURT: Certainly. All right,
17	we'll mark those as Exhibit 64 if there's no
18	objection.
19	(Medical bills received and
20	marked Exhibit Number 64.)
21	MR. PRITZKER: The next, your Honor,
22	is a summary of Exhibit 64 by provider.
23	THE COURT: Okay. Any objection?
24	MR. CONROY: No objection, your

1	Honor.
2	MR. BOYLE: No objection.
3	THE COURT: Exhibit 65.
4	(Summary of medical bills by
5	provider received and marked
6	Exhibit Number 65.)
7	MR. PRITZKER: The next is a
8	stipulation between the plaintiffs and the
9	defendant Building Materials Corp. of America,
10	doing business as GAF Materials Corp.
11	THE COURT: All right. That may be
12	marked as Exhibit 66. Has that stipulation been
13	read to the jury yet?
14	MR. PRITZKER: That's my next
15	request, your Honor.
16	THE COURT: Certainly.
17	(Stipulation between plaintiffs
18	and Building Corp. of America,
19	d/b/a GAF Building Materials
20	received and marked Exhibit
21	Number 66.)
22	MR. PRITZKER: May I address the
23	jury, your Honor?
24	THE COURT: Yes, you may.

Before you do that, let me just remind the jurors, when we began, I told you there were three sources of evidence: the answers given by witnesses, the exhibits that you will have with you, and stipulations. So this is a source of evidence for you to consider.

All right, Mr. Pritzker.

MR. PRITZKER: Ladies and gentlemen, this stipulation was entered into by GAF with the plaintiffs on September 2, 2004. Right before this trial.

The plaintiffs Marcia Rhodes, Harold Rhodes, individually, and on behalf of his minor child Rebecca Rhodes, and the defendant Building Materials Corporation of America, Inc., doing business as GAF Materials Corp., hereby stipulate as follows for the purposes of the present action only:

GAF, as the common carrier on whose behalf the tractor-trailer was being operator admits that it is liable for the operation of the tractor-trailer leased by GAF and operated negligently by defendant Carlos Zalewski.

GAF agrees to the entry of judgment

against it. Damages remain to be proven by the 1 2 plaintiffs at trial. 3 GAF does not admit that it is an employer of Carlos Zalewski, or that it has a dual co-employer relationship with Drivers Logistics Services, Inc. with respect to Carlos Zalewski. 7 And it's signed by the parties. 8 THE COURT: All right. 9 MR. PRITZKER: The next exhibit, your Honor, that I would like to introduce is a 10 11 stipulation between the plaintiffs and the 12 defendant Carlos Zalewski and Drivers Logistics 13 Services, Inc. 14 THE COURT: We'll mark that as 15 Exhibit 67. 16 (Stipulation between the 17 plaintiffs and Carlos Zalewski 18 and Drivers Logistics Services, 19 Inc. received and marked 20 Exhibit Number 67.) 21 MR. PRITZKER: And this stipulation, 22 ladies and gentlemen, is as follows: 23 Stipulation between plaintiffs and 24 defendants Carlos Zalewski and Drivers Logistics

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Services, Inc. The plaintiffs Marcia Rhodes,
Harold Rhodes, individually and on behalf of his
minor child Rebecca Rhodes and defendant Carlos
Zalewski and Drivers Logistics Services, Inc.,
referred to as DLS, hereby stipulate as follows:

Carlos Zalewski admits that he was negligent in operating the tractor-trailer that struck Mrs. Rhodes' car on January 9, 2002.

Carlos Zalewski agrees to the entry of judgment against him on Count One of the Third Amended Complaint as to liability. The amount of damages remain to be proven by the plaintiffs at trial.

DLS admits that it is liable for the negligence of its employee Carlos Zalewski in operating the tractor-trailer that struck Mrs.

Rhodes' car on January 9, 2002. DLS agrees to the entry of judgment against it on Count Two of the Third Amended Complaint as to liability. The amount of damages remain to be proven by the plaintiffs at trial.

Your Honor, now having put in those exhibits, I request permission, as I had done earlier in the trial, to hand to the jury a book of exhibits that have been marked to date, including

1	those exhibits that now bring it up to date
2	because we anticipated that they would be
3	marked this morning.
4	THE COURT: All right.
5	MR. PRITZKER: I
6	THE COURT: You may pass those
7	MR. PRITZKER: Counsel all have a
8	copy.
9	THE COURT: Okay.
10	MR. PRITZKER: And just by way of
11	explanation, there are some areas there are
12	some exhibits that have been marked where you'll
13	just see a slip in there identifying what the exhibit
14	is like the skeleton or some of the blowups, and
15	some of the pictures that the defendant had
16	introduced, he did not have copies of, there were
17	just those pictures.
18	Now, I would like to call my next
19	witness, your Honor.
20	THE COURT: You may.
21	MR. PRITZKER: Dr. Dana Hewins,
22	please.
23	THE CLERK: Raise your right hand,
24	sir. Do you solemnly swear the testimony you

	1	
1		shall give to the court and the jury in the case now
2		on trial shall be the truth, the whole truth and
3		nothing but the truth, so help you God?
4		THE WITNESS: I do.
5		THE CLERK: Thank you. You may be
6		seated.
7		DANA HEWINS, sworn
8	DIRE	CT EXAMINATION BY MR. PRITZKER:
9	Q	Would you state your full name, please.
10	A	Certainly. My name is Dana C. Hewins. The last
11		name is spelled H-E-W-I-N-S.
12	Q	What is your address?
13	A	I live in the town of Lakeville, Massachusetts.
14	Q	What is your profession?
15	A	I'm an economist, who specializes in the areas of
16		health care economics, labor economics and
17		forensic economics.
18	Q	Can you briefly describe for me, Dr. Hewins, your
19		education.
20	A	Certainly.
21	Q	Where did you graduate from college?
22	A	I was awarded a Bachelor's degree by Tufts
23		University in 1968, a degree in economics.
24	Q	And after Tufts, where did you go?

	1	
1	A	I went to the University of Illinois, and was
2		awarded a Master's degree in economics in 1970.
3		Would you like me to continue, sir?
4	Q	If you would, please.
5	A	Following that, I spent a year and a half as a so-
6		called traveling scholar at the University of
7		Chicago. I returned to the University of Illinois
8		after that, and completed all requirements for the
9	-	Ph.D. degree in economics in 1975.
10	Q	Did you receive that Ph.D.?
11	A	Yes. It was awarded officially in 1975.
12	Q	So that you're called Doctor, but it's because
13		you're a Ph.D., not because you're a medical
14		doctor?
15	A	Yes, sir.
16	Q	Okay.
17	A	And finally I did two years of post-doctoral study
18		at Harvard University from 1982 to 1984.
19	Q	And when you say post-doctoral, you mean that
20		after you got your Ph.D
21	A	After the Ph.D., that's right, sir.
22	Q	Okay.
23	A	Yes sir.
24		THE COURT: Now, I just have to

1		instruct the two of you, one speak at a time.
2		MR. PRITZKER: I apologize, your
3		Honor.
4		THE COURT: Because this young lady
5		wants to pick up everything both of you are
6		saying, so
7		THE WITNESS: Yes, your Honor.
8		THE COURT: All right, thank you.
9	Q	Okay. After you did your post-doctorate work at
10		Harvard, did you teach?
11	A	I started teaching actually as an instructor in 1972
12		at the University of Illinois. And then I went to
13		Ohio University in 1973. I was on the staff of the
14		faculty at Ohio University from 1973 till 1982.
15		During the academic year 1982-'83, I returned to
16		Massachusetts, my home state, as a visiting
17		professor of health care economics at Tufts
18		University. I then joined the faculty of Regis
19		College in Weston, Massachusetts, and I was on
20	·	the faculty of Regis much of the time. I was
21		chairman of the Economics Department from 1984
22		until I took early retirement in 2002.
23	Q	And since 2002, what have you been doing?
24	A	I've been consulting, writing. I've been a part-time

1		teacher at Stonehill College in town of Easton,
2		Massachusetts. And I am currently a frequent
3		guest lecturer in the Health Care Policy and
4		Management Program at Stonehill.
5	Q	Is it fair to say that your specialty is health care
6		economics?
7	A	Yes, sir.
8	Q	Have you published?
9	A	Yes.
10	Q	In periodicals or
11	A	A wide variety, going back to graduate school, on
12		assorted topics. Health care economics, forensic
13		economics, economic history, and so forth. A
14		wide variety.
15	Q	And have you consulted for numerous
16		organizations and institutions?
17	A	Yes, dating back to my days at Ohio University,
18		I've consulted with a number of private and
19		governmental organizations.
20	Q	In what areas? Can you give us some examples?
21	A	Predominantly health care economics. When I was
22		in Ohio, for example, I was on the Board of
23		Directors of the Area 6 Health Systems Agency,
24		which was the federal agency to try to control

health care spending back in the '70s and '80s. I 1 consulted on medical matters to the Appalachian 2 Regional Commission, the Ohio Nursing Home 3 Association, the Ohio Valley Health Services Foundation, and so forth. So there were a number 5 of projects that I worked on that were health care 6 related. 7 Dr. Hewins, at some point, were you retained by Q 8 my office to do some evaluation economic work? 9 Yes, I was, sir. 10 Δ In the health care economic area? 11 O Yes, sir. 12 Δ And what were you retained to do? 13 Q I was asked to do two things actually. First, to 14 A evaluate or calculate the present value of the 15 future medical and personal care costs of Marcia 16 Rhodes, and secondly, to evaluate the economic 17 value of her lost household services. So there 18 were two components that I looked at, sir. 19 Now, will you explain how you evaluated the 20 Q future expenses of the health care component of 21 your two-prong inquiry? 22 23 Sure. If I --

24

Q

1		MR. PRITZKER: May I, your Honor,
2		use the easel while
3		THE COURT: You may.
4		MR. PRITZKER: Dr. Hewins is
5		testifying?
6	Q	Now, would you go ahead.
7	A	As an overview, there are four basic steps. It's
8		pretty straightforward. The first step in the
9		evaluation of future medical and personal care
10		expenses is to determine what we call the base
11		year or first year cost of care. You need a set of
12		starting numbers.
13	Q	Okay.
14	A	The second step is to determine how long the
15		projection is to go. This is the issue of life
16		expectancy.
17	Q	Okay.
18	A	The third step is to determine health care costs
19		have been rising over the years, in fact, quite
20		rapidly over the past thirty years. So what I have
21		to do is factor in some reasonable growth rates we
22		call them, or the rates at which costs medical
23		costs, physician costs and so forth, are likely to
24		rise in the future. So you have to determine

1		reasonable growth rates for future costs.
2	Q	And another way to put that, cost increases?
3	A	Absolutely. Future costs increases.
4	Q	Okay. And the last one.
5	A	The fourth step is a purely mathematical one, and
6		that involves taking all of the projected annual
7		costs and then reducing them to a single lump
8		sum amount, which people in finance refer to as
9		the present value.
10	Q	Present day value okay?
11	A	Present day value is fine.
12	Q	Now, if we can, Doctor, can we take these one at
13		a time?
14	A	Certainly.
15	Q	How did you determine the base year cost?
16	A	The
17	Q	as it related to the future cost of medical and
18		personal care?
19	A	These base year costs were determined by Adele
20		Pollard. I used the life care plan prepared by
21		Adele Pollard. So every item in her plan had both
22		the item identified, the frequency with which the
23		item would be needed, the duration of time over
24		which it would be needed, and the current cost.

1		So Adele Pollard's life care plan gave me the full
2		set of information that I needed for step one.
3	Q	And how did you determine the life expectancy to
4		use?
5	A	Well, one way was to use the published
6		government life expectancy tables. I have the
7		latest ones here, National Vital Statistics Report,
8		United States Life Tables, 2001. And using this,
9		the life expectancy, and I would stress that my
10		projection is forward-looking. It begins October
11		1st of 2004 and goes forward. And currently, Mrs.
12		Rhodes is 49 years old. And the life expectancy of
13	·	a 49 year old white female, according to the
14		government tables, as we speak, is 33.2 years.
15	Q	So
16	A	So one projection was 33.2.
17	Q	So we put on the right side, if I can get the right
18		pen out, 33.2 years.
19	A	Yes, sir.
20	Q	That is the normal life expectancy for somebody
21		Mrs. Rhodes' present age, but not taking into
22		account her disability?
23	A	That's correct.
24	Q	Okay. Did you do anything else?

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Yes. There was a second projection. Every item was projected two times. Once to the so-called normal life expectancy of 33.2. And the second projection was to the end of -- the actual number of years was 23.1 years. And this was based on the report of Michael DeVivo, who is professor and director of the National Spinal Cord Injury Statistical Center. And in his report, which was discussed yesterday by Mrs. Pollard, he identifies the life expectancy of a spinal cord injured person of her age and sex. And he gave it -- his report was dated April 30th of last year. At that point in time, he calculated 24.4 years. Now, what I had to do, since time has elapsed more than a year since he did his report, I subtracted that amount of time. So beginning on October 1st of this year, there are 23.1 years remaining. So the second projection measured from October 1st of this year, 23.1, sir. I'm going to show you what was marked yesterday as Exhibit 63. And that is at Tab 63 in the new books that I've just handed to the jury. And you'll see, Dr. Hewins, that Exhibit 60 -- you'll see that Exhibit 63 is a letter from Dr. DeVivo to Carlotta Patten in my office, is it not?

1	A	Yes, it is.
2	Q	And did you review that?
3	A	Yes, I did, sir.
4	Q	And did you, in fact, review the schedule that is at
5 .		the end of Exhibit 63?
6	A	Yes, I did, sir. The table, yes, I did.
7	Q	And when you reviewed it, did you understand
8		what that table was portraying?
9	A	Oh, yes.
10	Q	And what is that?
11	A	Well, this shows the table in question shows
12		survival probabilities, according to the number of
13		years from today. And as he actually explains in
14		his text, Dr. DeVivo explains, for example, if I
15	·	might take the ten year number, which is .8657,
16		there is at least an 86.57 chance that she will live
17		ten years from the time of his report. So what he
18		is saying is the likelihood is approximately 86
19		percent that she will survive at least ten years.
20	Q	Okay.
21	A	And these change. Obviously, the further out at
22		the 20 year mark, there is a roughly two-thirds
23		chance, 666, that she would survive at least
24		twenty years. This was the raw material that went

1		into his calculations of life expectancy.
2	Q	Now here we are talking about his calculations of
3		life expectancy of somebody Marcia Rhodes age
4		who has been rendered a paraplegic.
5	A	Yes, he's matched up exactly the paraplegia she
6		has.
7	Q	Okay.
8	A	So he's got an extensive data set. This guy is sort
9		of the guru of SCI data, and he has an extensive
10		data set, which enables him to custom fit it to the
11	·	exact nature of the spinal cord injury.
12	Q	Okay. If we look at the chart that he uses as the
13		basis for his 23.1 years, first of all, I believe that
14		was as of April 30, 2003? Is that correct?
15	A	Well, as of April 30, you'll see the numbers 24.4.
16	Q	I'm sorry. So you
17	A	I had to reduce it to allow for the time which has
18		elapsed since then.
19	Q	So if we look at the last page of Exhibit 63
20	A	Yes, sir.
21	Q	And we look at the line items between 24 years
22		and 25 years, which is what Dr. DeVivo used as of
23		April 20 April 30, 2003, what survival probability
24		does that show?

1	A	Well, to quote it exactly, at age at 24 years,
2		what he's saying is there's a 56.21 percent chance
3		that Mrs. Rhodes will live at least 50 24 more
4		years, excuse me. So there's a 56 percent
5		chance, approximately, that she'll live at least 24
6		years. A 53 percent chance that she'll live 25
7		years.
8	Q	So am I correct that even under these statistics,
9		Mrs. Rhodes has a better than 50-50 chance of
10		surviving more than 25 years?
11	A	Yeah. If you want to put it in terms of more likely
12		than not, it is more likely than not that she will
13		survive more than 25 years, yes, sir.
14	Q	And if we use the same chart to the actual life
15		expectancy of Mrs. Rhodes if she were not a
16		paraplegic, what is the likelihood that Mrs. Rhodes
17		would survive for that period of time?
18	A	Well, if we're talking about the normal life
19		expectancy, which would be 33.2 years, and we're
20		adding it on to her current age of 49, that would be
21		age 82. She was 48 at this point, so we'd be
22		looking at the 34, the second column of numbers
23		years from today, where it says 34. Again, the
24		number, if I'm reading it correctly, is .2339, and

1		what that says is that there is a 23.39 percent
2		chance that she will live at least 34 more years.
3		That is exactly the way to phrase it.
4	Q	Okay. And that's approximately one in four?
5	A	About a one in four chance, yes.
6	Q	So on the larger of the calculations or the higher
7		life expectancy that you used
8	A	Yes, sir.
9	Q	even on that, there is a probability, a one in four
10		probability that she will survive longer than that?
11	A	Approximately.
12	Q	And is that an accurate reading of Exhibit 63?
13	A	Yes, it is, sir.
14	Q	So you've now determined two life expectancies,
15		which my office asked you to evaluate. What was
16		your next exercise?
17	A	Well, the next step is to select reasonable cost
18		increases. And this is done in the past thirty
19		years I've been monitoring these on a fairly close
20		basis. What I look at is for each category of care,
21		physician services, medications, personal care
22		attendants, the various categories of care. There
23		are extensive historical data that show us what
24		has happened. The publication the government

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puts out, Health, United States, this is the most recent 2003 edition, is a compendium of lots of statistics that enable us to see what has happened over the past thirty years to these costs. There's also a very large literature that tells us what the situation is today in terms of the health care marketplace, what's going on inside the hospital industry, nursing profession and what have you. And there are also forecasts, government forecasts, private forecasts, Social Security Administration forecasts, where these future costs are likely to go. What I do is draw on historical experience, my understanding of current market conditions. I look at the forecasts and generate what I consider to be fair and reasonable growth rates for the future costs.

Q Okay. Now, am I -- do I understand you correctly that some future costs that Adele Pollard projected have a higher probability of increase or a greater probability of increase than others?

A Not a matter of probability. They will all increase.

It's a question of which ones will increase the fastest.

Q Can you give us an example?

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Well, the ones that have and will continue to grow fast are hospital costs, for example, have been a real problem area. Medications, prescription medications. At one point, twenty years ago, they were very good in terms of cost increases. Now they're very, very high, and there's a lot going on in that particular industry. The registered nurses, the wages of registered nurses historically have grown fairly rapidly, and we're expecting one-third of the nursing force to retire, baby boomers, to retire in the next ten years. There's going to be a dramatic shortage of nurses. Shortage means upward pressure on wages. So nursing costs can be expected to rise. On the other hand, routine medical supplies, wheelchairs, transportation, the kinds of things in the plan, those don't increase any faster really than the overall rate of inflation. So you have this variation. Some very rapidly, and others sort of like the overall average.

And part of the reason we need an expert like yourself is to try and figure out which of these is growing at what rate, or is likely to grow at what rate?

A Yes, sir, that's the reason.

1	Q	So that takes care of future increases and future
2		costs increases. Then you have to bring it to
3		present value.

A Yes, sir.

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**Q** What is present value?

The simplest way of thinking of it is to ask, what lump sum amount, if you had a lump sum amount of money, and you invested it conservatively, the idea is how much money would you need to invest to be able to pay the future medical and personal care bills, year by year. Let's take the 33.2 year one. You're going to have to fund 33.2 years of care. You invest a certain lump sum. Interest accumulates, but each year you're making withdrawals. The idea is to calculate how much you would have to invest -- this is the present value -- in order to fund 33.2 years of care, so that. in the last year, when you make that final withdrawal, you empty the account. All of the original investment plus all accumulated interest has been precisely exhausted in that last year. Now, technically, we, for calculation purposes, we used the date of filing of the complaint for this investment. And that would have been in July of

1		2002. So how much money invested in July of
2		2002 would be sufficient to pay out for 33.2 years
3		all of the expenses that will be incurred?
4	Q	Okay. So where did you bring the present value
5		calculation? What date did you use for the
6		present value calculation?
7	A	July 12th of 2002. That is when, again,
8		mathematically, this investment theoretically
9		would take place.
10	Q	And why particularly did you use that date?
11	A	Because that is what I've been instructed by many
12		attorneys in Massachusetts to do, sir.
13	Q	Okay. And do you know whether or not that is the
14	·	date that suit was filed in this case?
15	A	Yes, sir, that is what I've been told.
16	Q	And having done all of those steps, did you reach a
17		conclusion as to what the medical and personal
18		care costs would be to Mrs. Rhodes if she lived for
19		33.2 additional years reduced back to present
20		value as of June of 2002?
21	A	Yes, I did, sir.
22	Q	And what was that value?
23	A	The present value for the 33.2 year projection is
24		1,997,833, or approximately two million dollars,

	1	11.25
1		sir.
2	Q	And did you do the same calculation of the present
3		value as of June of strike that as of June of
4		2002
5	. А	July, sir. Excuse me.
6	Q	June 30th?
7	A	The present value date?
8	Q	Yes.
9	A	That's July 12th of 2002. That's the date of filing,
10		sir.
11	Q	l beg your pardon.
12	A	That's okay.
13	Q	On a 23.1 year basis?
14	A	Yes, I did, sir.
15	Q	And what is that?
16	A	That number is 1,461,267.
17	Q	Okay. Now, you said that you did two different
18		approaches. One was for medical and personal
19		care.
20	A	Yes, sir.
21	Q	And the other was for loss of household services?
22	A	The economic value of lost household services,
23		yes, sir.
24	Q	Okay. What is that? What is economic value of

	1	
1		lost household services?
2	A	Well, the concept is fairly straightforward. When
3		someone is injured and unable to perform
4		household services, they can no longer do the
5		cleaning, the cooking, the shopping, et cetera,
6		that they used to do, there is a loss because these
7		services now have to be provided by someone
8		else. And we value these services at the
9		replacement cost, what would it cost to hire
10		someone else to do the things that you can no
11		longer do because of your injury. It's called the
12		economic value, or the replacement cost of
13		household services.
14	Q	Economic value of household services. So if I
15		understand correctly, you assume what household
16		services Mrs. Rhodes would have been capable of
17		performing.
18	A	Correct.
19	Q	And then you try to calculate or you do calculate
20		what she is now able to perform.
21	A	Yes.
22	Q	And the difference is the economic value of
23		household services that Mrs. Rhodes has lost.

Correct.

1	Q	How did you go about doing that?
2	A	Well, we've got four steps parallel to the four we
3		just went through, only now the language changes
4		a little bit. Instead of base year cost of future
5		medical and personal care expenses, we now have
6		the first year economic value of these household
7		services. So base year value of household
8		services.
9	Q	If I put value in parentheses
10	A	Yup.
11	Q	that's what you do when you're talking about
12		household services?
13	A	Yes.
14	Q	Now, is this something that Adele Pollard dealt
15		with in her life care plan?
16	A	No.
17	Q	So now we're talking about something that wasn't
18		part of Ms. Pollard's presentation?
19	A	That is correct.
20	Q	Okay. And okay. How did you go about
21		determining the base year value of the household
22		services that Mrs. Rhodes had lost?
23	A	Well, the first thing that has to be established is
24	:	how many hours would a woman such as Mrs.

24

Rhodes, on average, devote to household services each week? And there have been, in the last thirty years, a dozen or more major studies that have addressed this issue in a scientific fashion. I reviewed this literature, the best known of these studies have been published by researchers at Cornell University in conjunction with the U.S. Department of Agriculture, they've done a series of three. But there have been others as well. I've looked at this literature, there was a good survey article last year of this literature. I looked at all of the evidence we have. You can make it specific to the individual's sex, the age, the number of children in the home, et cetera, the employment status of the wife. You can get fairly specific. And what I did based on my research was to determine that four hours per day would be a reasonable estimate of the lost household services. Twenty-eight hours a week, four hours a day.

Q Okay. Then what did you do? You had to determine the same life expectancy?

A Well, there's one more step before we finish. I have to convert those hours into dollars. How

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much is that worth? And to do that, I looked at wage rates being paid to maids and housekeeping cleaners, food preparation workers, laundry workers, and others, who do work comparable to what we do in the home. The Massachusetts Division of Employment Security puts out data in its so-called occupational wage statistic series. I looked in the area where Mrs. Rhodes lives. Milford is in the South Worcester service delivery area, and they give it by area. And, determined that a reasonable wage rate to use would be eight dollars per hour. So I used a wage rate of eight dollars per hour, four hours per day. On an annual basis, that's \$11,680 for the annual value, market value of these household services.

- Okay. Now, how then did you determine the life expectancy of this loss?
- Well, household services are projected -- I project them to age 75. Now, her normal life expectancy had she not been hurt, we've said, would have been early 80s, about 82. But there are a number of studies that show us that the years of healthy life, quote, unquote, tend to be significantly less than the years of life. As we get older, we become

1		infirmed and feeble, so that the likelihood of our
2		doing household services to the end is greatly
3		reduced. So what I've done, based on and there
4		are statistics on this, is used age 75 as the ending
5		point, not age 82.
6	Q	So it went to the date of the accident?
7	A	To the age of 75, sir.
8	Q	So that's assuming that if Mrs. Rhodes were not
9		injured.
10	A	That's correct.
11	Q	That even after age 75, she would be spending
12		money for a lot of or all of the household services
13		that you would be calculating?
14	A	Presumably. Yes, sir.
15	Q	What was the next exercise that you undertook in
16		order to determine the economic value of
17		household services?
18	A	Well, we're down to step three, and that one says
19		future cost increase. Well, clearly now what I
20		want is the future increase in the value of these
21		household services. We're talking about wages
22		paid to people who perform these kinds of
23		services. So what I need is a reasonable wage
24		increase. And what I used here was a wage

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increase one percent above the rate of inflation.

It's what economists call a real wage increase.

And that's based on a lot of sources which have shown us that the average American worker receives raises over time, which are about one percentage point higher than the rate of inflation.

So the rate of inflation has been running about three percent over the past decade. The average worker's been getting four percent as a raise. One percentage point higher than the rate of inflation.

So that's -- economists do these things in real terms, so I used a one percent real growth rate.

One percent above inflation.

Q Okay. And then what was the next -- and so then you determined the future cost increase?

I applied it. So now I go to the computer, and I take my starting figure, I know my ending point is age 75, so the projection goes for 28.45 years. I'm going to increase it at a rate one percent above inflation, the real rate of one percent. Now the computer -- with the computer, I'm going to calculate the present value, just as we did before. It's that same lump sum amount conservatively invested, which would be just sufficient to replace

1		or pay for the replacement cost of these services.
2		And at age 75, the final withdrawal empties the
3		account. All interest and original lump sum have
4		been precisely exhausted. The same mathematics
5		as before.
6	Q	And what value did you come up with for the lost
7		or the economic value of household services to
8		age 75?
9	A	The present value, again, stated as of the date of
10		filing on July 12, 2002, the present value was
11		292,379. That's the exact number from the
12		computer printout.
13	Q	And would that be the same whether or not Mrs.
14		Rhodes lived to age 82 or if she lived to age 72?
15	A	Yes. Because this asks the question of what
16	·	would she likely have done had she not been
17		injured. And had she not been injured, the spinal
18		cord injured work life expectancy would not be
19		relevant. So it's only the normal life expectancy.
20		MR. PRITZKER: Could I have the
21	Q	So if we focus on age 83 I'm sorry age 82
22	A	Yes, sir.
23	Q	When Mrs. Rhodes still has a one in four chance of
24		surviving, even after her tragic injury, the loss of

1		household services present value is 292,379?
2	A	That is correct, sir.
3	Q	And the future medical and personal care expense
4		as calculated to present value is 1,997,833?
5	A	Yes, sir.
6	Q	And is the total of that 2,290,212?
7	A	It is, sir.
8	Q	Does any of your work include expenses already
9		incurred by Mrs. Rhodes?
10	A	No, let me stress that my focus is on future
11	·	medical expenses from October 1st of this year
12		onward. I have not included anything that has
13		been incurred to date.
14	Q	So hypothetically, if evidence were presented to
15		this jury that already \$912,000 approximately has
16		been expended on behalf of Mrs. Rhodes for health
17		services, construction, and other related
18		matters related to her injury, that would be over
19		and above the 2,292,012?
20	A	That is absolutely correct, sir.
21	Q	And does any of your work include past or future
22		pain and suffering Mrs. Rhodes has or will endure?
23	A	No. Economists cannot measure that, sir.
24	Q	So that's not in these numbers at all?

1	A	It's not in there in any way, shape or form.
2	Q	Does any of your work include past or future lost
3		consortium claims of Harold Rhodes or Rebecca
4		Rhodes?
5	A	No, sir, it does not.
6	Q	So once again, if there's evidence about that,
7		that's over and above what you've done?
8	A	Entirely separate from what I've done, sir.
9		MR. PRITZKER: I have no further
10		questions.
11		THE COURT: Cross-examination.
12	CRO	SS-EXAMINATION BY MR. BOYLE:
13	Q	Good morning, Dr. Hewins.
14	A	Good morning.
15	Q	We've met before?
16	A	I believe we have, sir.
17	Q	Now, the household services, according to your
18		report and your testimony is for matters involving
19		things like cooking, food preparation, laundry,
20		housekeeping?
21	A	Yes, sir.
22	Q	And you've assumed that you provided an
23		economic number for providing those services to
24		Mrs. Rhodes' household four hours a day seven

	days a week, correct?
A	It's the replacement cost, yes.
Q	Right. But it's every single day until the expiration
	of her life.
A	That's the average, yes.
Q	And you've taken a number of what you call
	replacement costs, what it would cost to pay
	somebody to do all of those things, correct?
A	Based on market wages, yes, sir.
Q	And for the purposes of your economic exercise,
	you assume that Marcia Rhodes will never do any
	food shopping, correct?
A	That's correct.
Q	And never do any cooking?
A	That's correct.
Q	Never do any housework at all ever?
A	That would be negligible, yes, sir.
Q	Okay. So you've given a hundred percent of all of
	those costs over the next either or for that
	household number, it was projected to be 37 years
	into the future?
A	To age 75.
Q	And that's not necessarily the two numbers you
	talked about before, concerning statistical life
	Q A Q A Q A Q A Q A

1		expectancy. That's sort of in between.
2	A	Yeah, that's based on a different set of
3		parameters. We use a healthy life, when people
4		are capable of doing household services.
5	Q	Okay. Now, also in the Adele Pollard life care
6		plan, she also provides an item for household
7		cleaning, correct?
8	A	I believe she did have something in there.
9	Q	And three hours every other week, again, that's for
10		life, correct?
11	A	I believe she did, yes.
12	Q.	And so that's additional to the housecleaning type
13		of services that you've awarded strike that
14		you've
15	A	That would be a separate, yes.
16	Q	So going forward, your plan includes four hours a
17		day, seven days a week, for life, cleaning, cooking
18		assistance, correct?
19	A	To 75, yes, sir.
20	Q	Right. Plus Adele Pollard's household cleaning
21		services three hours every other week, again,
22		that's for life.
23	A	That hour and a half a week, yes.
24	Q	Okay. And the total cost of that you've reduced to

	I	
1		present value.
2	A	Yes.
3	Q	All right. Now, you also took twelve pages of
4		Adele Pollard's life care plan, and you added up all
5		of the expenses that she estimated will be
6		needed. And again, you reduced that to present
7		value, correct?
8,	A	I took each item separately, as I think I explained,
9		but yes.
10	Q	Understood, but
11	A	Yes, sir.
12	Q	End of the day, every single thing that Adele
13		Pollard says Mrs. Rhodes is going to need, you
14		accounted for in your economic analysis, correct?
15	A	Absolutely correct.
16	Q	You left nothing out?
17	A	And I added nothing.
18	Q	Right. And you projected what prudent investment
19		today would generate the income to provide for all
20		of these economic needs, correct?
21	A	Correct.
22	Q	I think you said something in your report like high
23		grade treasury bonds or something, correct?
24	A	I often use those, yes, sir.

1	Q	Something that's reliable, predictable and stable,
2		correct?
3	A	Yes, sir.
4	Q	So as an economist, you're fairly confident that
5		the amount of money that you give as a bottom
6		line if invested in that type of investment would
7		yield the money needed over her entire life to
8		provide every single one of the services Adele
9		Pollard needs, correct?
10	A	Yes.
11	Q	And in addition to that, you also took from Adele
12		Pollard's life care plan something called potential
13		complications. And there's a number that she
14		attributed to things that could arise in the future,
15		correct?
16	A	Her Appendix C, as she notes, yes, sir.
17	Q	Right. And that's sort of intangibles, correct?
18		Things that may happen, may not happen, but
19		we're going to account for them because it's a
20		possible complication, correct?
21	A	Well, I the way it's explained to me is that
22	Q	No, no.
23	A	these are going to happen, we just don't know
24		when.

1		MR. BOYLE: Objection, your Honor.
2	A	Okay.
3		THE COURT: Sustained.
4	Q	The term was potential complications, and you
5		assumed that those were numbers that needed to
6		be fulfilled in your economic analysis, correct?
7	A	Based on her input, yes, sir.
8	Q	So you included both all of the itemization things
9		she's going to need, doctors, vans, all of that, in
10		your report, plus the so-called potential
11		complications, correct?
12	A	I took everything in her plan. Yes, I did, sir.
13	Q	And that also included a van, handicap van for her
14		projected life, and replacement vans, correct?
15	A	Well, not technically, no.
16	Q	Well
17	A	What I did is, I used the cost of retrofitting the
18		van, not the van itself.
19	Q	Well, she gives a cost in her report, and you relied
20		upon her report?
21	A	For that item. The 48,000, however, is the full
22		cost of the van. People need transportation, even
23		if they're not injured. So the way economists do it
24		there's big literature on this. There'd be incorrect

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2	Q	Well, just stick with my question. Just stick with
3		my question.
4	A	Okay, sir.
5	Q	She allocates an amount of money for a van,
6	·	correct?
7	A	48,000 I believe it was.
8	Q	And she also indicates there's going to be a future
9		cost for van replacement or van refurbishing,
10		whatever.
11	A	Every five to seven years, yes.
12	Q	And everything Adele Pollard addressed as needs
13		about vans is in her report, you accepted and you
14		did an economic analysis, correct?
15	A	Well, to an extent. I accept the item, I accept the
16		cost of the van, but that's not the relevant cost.
17		We look for as economists
18	Q	Just listen to my
19	A	the incremental costs.
20		MR. BOYLE: Objection.
21		MR. PRITZKER: Your Honor, I think
22		he's answering the question.
23		THE COURT: Okay. You've answered
24		the question.

1		THE WITNESS: Excuse me, I don't
2	Q	Let's see if we can agree to this question.
3	A	Okay. I don't know if I'm supposed to talk.
4	Q	Well
5		THE COURT: He's going to ask
6		another question.
7		THE WITNESS: Okay.
8	Q	By the way, Mr. Hewins, you've got a big forensic
9		economic practice, do you not, sir?
10	A	Since I retired two years ago, I've been busy, yes.
11	Q	Well, going back fourteen years ago you were
12		working for lawyers in this state, weren't you?
13	A	On a limited basis, yes, as an adjunct to my
14	Q	And you've testified in trials and depositions over
15		the years, correct?
16	A	Yes, sir.
17	Q	And I've met you in trials
18	A	Yes, sir.
19	Q	over the years; is that right?
20	A	We have, sir.
21	Q	Yes. And you've worked principally in
22		Massachusetts for plaintiffs firms doing personal
23		injury work, isn't that true, sir?
24	A	About 80 percent plaintiff, 20 percent defendant,

1		sir.
2	Q.	Well, you've testified before that you do in
3		Massachusetts mostly for plaintiffs' firms; isn't
4		that true, sir?
5	A	Right. New Hampshire is where I do most of the
6		defense work, that's correct.
7	Q	So in Massachusetts, you work mostly for
8		plaintiffs' firms doing personal injury litigation,
9		correct?
10	A	Mostly, sir.
11	Q	And you've testified before juries many times
12		before?
13	A	Yes, I have, sir.
14	Q	Okay. And you felt you prepare at least as far
15		back as the '80s, you were preparing up to 25
16		reports a year for plaintiffs' personal injury firms,
17		correct?
18	A	At that point, I was affiliated with Commonwealth
19		Research Group in the '80s, so I
20	Q	Go ahead. Is that a correct number, 25 a year
21		back in the '80s?
22	A	It's hard to say because I was supervising at
23		Commonwealth Research the work of a number of
24		associates, so I had more supervisory as opposed

1		to actually performing the evaluation, so it's hard
2		back in the '80s, but 25 might not be an
3		unreasonable number in terms of my actual direct
4		involvement.
5	Q	You've worked with many, many personal injury
6		firms in Massachusetts, correct?
7	A	I have over the years, yes, sir.
8	Q	And you've prepared a lot of reports over the
9		years, up to 25 a year, correct?
10	A	Absolutely, sir.
11	Q	And is that now most of your work is now forensic
12		economics, working for lawyers?
13	A	Predominantly. I do part-time teaching. I'm on a
14		bank board. But predominantly consulting, sir.
15	Q	So if you looked at your income tax return, it
16		would be mostly income retained in connection
17		with personal injury cases and lawyers?
18	A	Yes, during 2003 it was. That was the first year
19		that was true.
20	Q	Well, again, you've been earning monies for many
21		years working for lawyers.
22	A	Yes.
23	Q	You and I have met much earlier than last year,
24		right?

1	A	I don't recall when we met, but yes, sir.
2	Q	Okay. Now, with respect, sir, to Adele Pollard also
3		accepting in her report for something called stair
4		glide expenses, correct?
5	A	Yes.
6	Q	And you again attribute a number for that
7		projected over the life?
8	. <b>A</b>	Yes, sir.
9	Q	Okay. And what it did not include were
10		renovations to her home, correct?
11	A	There was "to be determined" or some such
12	Q	Right.
13	A	I couldn't do that, that's correct, sir.
14	Q	Right. So that's out of your report.
15	A	That's out of the report.
16	Q	Everything else is in the report though?
17	A	Yes.
18	Q	Now, is it fair that the money we're talking about, I
19		think there were two numbers, based upon
20		projected life expectancy, those numbers, you
21		took out nothing for taxes, correct?
22	A	Why would I take taxes out, sir?
23	Q	Right. Because taxes is not something that is
24		going to be taken out of any personal injury award.

1	A	Or household services.
2	Q	Right.
3	A	There's no taxes on household services or
4		medical. It's not like earnings, so there's no
5		income tax liability.
6	Q	Right. Exactly. So the monies that would be
7		awarded to a plaintiff in a personal injury case is
8		not taxable.
9		MR. PRITZKER: Objection.
10		THE COURT: Sustained.
11	Q	Well, you the monies that you
12		MR. BOYLE: May I be heard at side
13		bar, your Honor?
14		THE COURT: No.
15	Q	The monies that you allocated, sir, taxes is not
16		part of your analysis?
17		MR. PRITZKER: Objection.
18		THE COURT: He's already answered
19		that, but I'm going to sustain it.
20	Q	Now, you told us, sir, that with respect to when
21		the analysis started, you said you took a date of
22		the date of the filing of the complaint, 2002,
23		correct?
24	A	No, that wasn't when the analysis started.

1	Q	I mean as far as the calculation where the money
2		would be invested
3	A	Yes.
4	Q	in a theoretical sense.
5	A	That is correct, sir.
6	Q	Now, the court awards interest from the date of
7		the filing, you knew that?
8		MR. PRITZKER: Objection.
9.		THE COURT: Sustained.
10		MR. BOYLE: May we be heard, your
11		Honor?
12		THE COURT: No. And I'm going to
13		exclude that.
14	Q	Sir, you awarded monies to the final number
15		would generate an investment starting in 2002,
16		correct?
17	A	I awarded I don't understand your question.
18	Q	Not awarded, but you your bottom line number,
19		this assumes that it was invested in 2002,
20		correct?
21	A	That is correct, sir.
22	Q	Okay. So starting today, going back a couple of
23		years?
24	A	Yes.

1	Q	And monies that the investment would have
2		generated in the prudent investment that you
3		discussed in your report?
4	. A	Yes, sir.
5	Q	And in connection with the analysis, again, you
6		assumed, based upon the statistics that you had,
7		that Mrs. Rhodes would live, you assume a
8		complete statistical probability of either I think
9		it was 24 or 33 years?
10	A	Yes, there were two projections.
11	Q	Right. And those were the numbers that you
12		based your analysis on, a fulfillment of whatever
13		the life expectancy was on those two different
14		options.
15	A	That is correct.
16	Q	Sir, the number on the higher life expectancy was
17		how much?
18	A	Approximately two million dollars, sir.
19	Q	And that is exclusive of the household service
20		number?
21	A	That is correct, sir.
22	Q	And adding them together is approximately what?
23	A	2.29.
24	Q	Okay.

1	A	Million.
_		
2	Q	And 2.29 accounts for all of the expenses that
3		Adele Pollard had indicated that Mrs. Rhodes will
4		ever need over her projected life, correct?
5	A	It includes that, yes, sir.
6		MR. BOYLE: Thank you, sir.
7		THE COURT: Cross-examination?
8		MR. CONROY: If I may.
9	CRO	SS-EXAMINATION BY MR. CONROY:
10	Q	Dr. Hewins, good morning.
11	A	Good morning, sir.
12	Q	I don't think we've had a chance to meet. My
13		name is Bill Conroy.
14	A	Nice to meet you.
15	Q	One of the attorneys who represents the
16		defendant GAF in this matter. I have just a couple
17		of questions for you.
18	A	Certainly.
19	Q	We're looking at this exhibit here on future
20		expenses, where we have the lost household
21		services identified, present value of \$292,379,
22		correct?
23	A	That is correct.
24	Q	And then we go down to the future medical and

1		personal care number, and you've got this reduced
2		down to the present value. And that's just over
3		1.9 million dollars, correct?
4	A	Correct.
5	Q	And we have a total there of just under 2.3 million,
6		correct?
7	A	Correct.
8	Q	And just so we're clear about this, there is the
9		other number that you used for life expectancy,
10		what we're looking at here assumes a life
11		expectancy of was it 32 or 33 years?
12	A	It was actually 33.2 to be precise, yes.
13	Q	And that was based upon the government life
14		expectation tables?
15	A	Yes.
16	Q	And then you also told us that there was this Dr.
17		DeVivo?
18	A	Yes.
19	Q	And I think you said he was the guru on the issue
20		of
21	A	On the statistical of spinal cord injured data, yes,
22		sir.
23	Q	Trying to sort out how long someone is likely to
24		live in the information available to him with their

1		age and their sex, correct?
2	A	Yes. Well, he has a database that's enormous,
3		where he's got data on who's passed away and
4		how old they were, et cetera.
5	Q	Right. And I think your is it true, Doctor, that
6		when we talk about life expectancy, that it's very
7		hard to predict, isn't it? I mean
8	A	Absolutely.
9	Q	obviously it's very hard to predict.
10	A	Yes.
11	Q	But if we look to Dr. DeVivo's analysis, your
12		understanding is that was requested by the
13		plaintiff's counsel in this case?
14	A	That is my understanding.
15	Q	And there's a letter, I think you said, that was sent
16		by Dr. DeVivo to Carlotta Patten at counsel's firm?
17	A	Yes.
18	Q	And they were asked to do the analysis, in Dr.
19		DeVivo's opinion, based upon all this data
20		available to him, what was the likely life
21		expectancy for Mrs. Rhodes, correct?
22	A	That is correct.
23	Q	And if we go to it's Exhibit 63, I believe, in the
24		book, if we go to the second page, if I'm correctly

1		reading this, it says it says future life
2		expectancy is calculated as the summation of this
3		table of survival probabilities. Based on this table
4		Ms. Rhodes' life expectancy would be 24.4 years
5		from today, right?
6	A	That's what he says.
7	Q	Now, if to for comparison purposes, if we have
8		this exhibit in front of us here, just, it's around 2.3
9		million total future expenses, am I correct, Doctor
10		that this number would come down for total future
11		expenses reduced to present value to just over 1.7
12		million dollars if you were to use the 23 year life
13		expectancy?
14	A	Yeah, my the exact number is 1.75 million.
15		That's right, sir.
16	Q	Okay. And I think you've told us that the way you
17		reduce it to present value, this is accounting the
18		looking into the future as to what the cost will be
19		to finance Mrs. Rhodes' future health care needs,
20		both expected and contingent upon Dr upon Ms.
21		Pollard, which you reduce down to present value,
22		correct?
23	A	That is right, sir.
24		MR. CONROY: Thank you, sir. That's

1		all I have.
2		THE COURT: Any redirect?
3		MR. PRITZKER: Just a few, your
4		Honor.
5	RED	IRECT EXAMINATION BY MR. PRITZKER:
6	Q	Were you aware, Dr. Hewins, that Mrs. Rhodes had
7		no access to the upstairs and has no access to the
8		upstairs of her home?
9	A	I don't think I was aware of that, sir.
10	Q	Did you assume that in calculating the economic
11		value of household services?
12	A	No, I did not.
13	Q	Well, when you said that you assumed that there
14		were certain household services that she was not
15		going to be able to do, and some of them were
16		cleaning
17	A	Mm-hmm.
18	Q	can you tell me, as to the cleaning, what that
19		component is comprised of?
20	A	Well, again, my evaluation was based on the
21		services she would have been able to perform had
22		she never been hurt, in which case she would have
23		had access to the second floor and so forth.
24	Q	And the basement area as well?

1	A	The basement, could have done the vacuuming
2		and the cleaning and the dusting, and tons of
3		things that people normally do, sir.
4	Q	But again, I would stress, it was based on the
5		capability that existed prior to her injury?
6	A	That was what was the lost, that capability.
7	Q	Now the hour and a half a week that Ms. Pollard
8		included in her life care plan, how do you deal witl
9		that?
10	A	Well, I considered it as sort of a rounding thing.
11		Let me explain, the average hours, according to
12		the survey that I mentioned that was done last
13		year by economists by the name of Martin and
14		Baboulis, they came up with an average hours for
15		American female housewives just under six hours
16		per day, 41.5 hours per week is the exact average
17		of eight different studies. When I looked at these
8		studies, I was conservative. I used four,
9		considerably lower. For various reasons. Some of
20		the studies I don't like. The higher ones I think
21		are suspect. But I gave myself enough slack in
22		what I considered as being a reasonable number
23		for the loss, but the 41.5 a week didn't bother me.
24	Q	By the way, Dr. Hewins, have you ever been

1		retained by Mr. Boyle's firm, Morrison, Mahoney
2		and Miller?
3		MR. BOYLE: Objection.
4	A	I've had that privilege.
5		MR. BOYLE: Objection, your Honor.
6		THE COURT: The objection is
7		overruled.
8	Q	So you've actually provided economic analysis
9		services for his firm?
10	A	I have, sir.
11	Q	And have you been retained by the firm of
12		Campbell, Campbell, Edwards and Conroy, Mr.
13		Conroy's firm?
14	A	I've had that privilege as well. Yes, I have, sir.
15	Q	So you've been retained by his firm also to provide
16		economic evaluation services?
7	A	Yes, I have.
8		MR. PRITZKER: Thank you, sir. I
9		have no other questions.
20		THE COURT: Any recross?
21	RECI	ROSS-EXAMINATION BY MR. BOYLE:
22	Q	Every time you and I have ever met in a courtroom,
23		sir, it's been on opposite sides, hasn't it?
24	A	I've never worked for you

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1		seated.
2		HAROLD RHODES, sworn
3	DIR	ECT EXAMINATION BY MR. PRITZKER:
4	Q	Good morning, Mr. Rhodes.
5	A	Good morning.
6	Q	Would you state your full name, please.
7	A	My name is Harold Rhodes, R-H-O-D-E-S.
8	Q	Where do you live, sir?
9	A	l live at 11 Janock Road in Milford, Massachusetts.
10	Q	What is your age?
11	A	I'm fifty years old.
12	Q	Your date of birth?
13	A	I was born on February 24th, 1954.
14	Q	Where did you grow up?
15	A	l was born in Philadelphia, Pennsylvania, but at an
16		early age, my family moved to Indianapolis, and so
17		I consider Indiana as the place where I grew up.
18	Q	Did you go to high school?
19	A	Yes, I did.
20	Q	Where did you go to high school?
21	A	I went to North Central High School of
22		Indianapolis.
23	Q	Did you graduate?
24	A	Yes, I did.

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1	Q	In what year?
2	A	l graduated in 1972.
3	Q	Did you go on to college?
4	A	Yes, I did.
5	Q	And where did you go to college?
6	A	Indiana University.
7	Q	Did you get a degree?
8	A	Yes, I did.
9	Q	What degree and when?
10	A	In 1975, I got a baccalaureate in economics.
11	Q	And did you go on to any higher education?
12	A	Yes, I did.
13	Q	Where?
14	A	I went to business school at Harvard University.
15	Q	Did you graduate?
16	A	Yes, I did.
17	Q	With what degree?
18	A	MBA, Master's in Business Administration.
19	Q	In what year?
20	A	That would have been 1980.
21	Q	Can you just generally track your business work
22		from 1980 on?
23	A	Okay. 1980 to 1983, approximately, I joined Prime
24		Computer, which is in Natick, Massachusetts. I

1		was in marketing and the marketing organization
2		part manager. From 1983 to 1987, I was with a
3		few startups, a few high technology startups,
4		which no longer are around today. From 1987 to
5		1991, I was with a company called Parametric
6		Technology, a successful software startup
7		company. And in 1991 to 1993, I was with Data
8		General Corporation as Vice President of
9		Marketing. At
10	Q	Where is Data General located?
11	A	They're in Westboro.
12	Q	And you were Vice President of Marketing?
13	A	Yes.
14	Q	And did you change direction a little bit?
15	A	Yes. In 1993, I decided I wanted to become an
16		independent marketing consultant, so from 1993
17		until 2002, I was an independent marketing
18		consultant.
19	Q	Can you give us some of the companies that you
20		consulted for?
21	A	Oh, certainly. UPromise, I was one of the very
22		early people with UPromise. A company called
23		Open Market. Another company called Netegrity.
24		These were all small software emerging

	1	
1		companies.
2	Q	High tech?
3	A	Yes, high technology companies. Yes.
4	Q	Where were you working at the time of the
5		accident?
6	A	In mid 2001, I was doing marketing consulting for
7		a company called Visibility, and they were located
8		in Chicago.
9	Q	And I'm going to shift gears for minute. When and
10		where did you meet Marcia?
11	A	I was living in Natick, at the Natick Village
12		Apartments, in 1982, while I was working for Prime
13		Computer, and it was July, 1982, and I went to the
14		pool, and it was, you know, a warm Sunday, and I
15		you know, saw a chair open, and there was a very
16		pretty girl sitting next to the chair, but there was
17		obviously nobody sitting with her, so I asked her if
18		I could sit in the chair, and she said yes. And we
19		struck up a conversation, and that's how we met.
20		And I had the
21	Q	Do you remember the first date?
22	A	Yes, I do. I asked her out, you know, that Sunday,
23		for a date for that Tuesday night to go out to
24		dinner.

1	Q	You still remember that?
2	A	Well, I went over she was living at Natick
3		Marcia was living at Natick Village Apartments as
4		well, so I went over to pick her up, and, you know,
5		the first thing I noticed about Marcia was these
6		red shoes that she had on. And, you know,
7		growing up in Indiana with conservative values, I
8		was just awestruck that someone would be
9		wearing red shoes. And at that moment, well, it
10		was just it just took my breath away.
11	Q	When were you married?
12	A	We were married on April 16th, 1983.
13	Q	Do you remember when Marcia stopped working
14		full-time?
15	A	1990.
16	Q	When was Rebecca born?
17	A	Rebecca was born on April 8th, 1988.
18	Q	Even after Rebecca was born, Marcia continued to
19		work?
20	A	Yes, Marcia continued in her collectibles and
21		antique business and continued with her part-time
22		teaching at Mount Ida College.
23	Q	Now, between the two of you, were you able to put
24		some savings away?

1	A	Yes, we were.	
2	Q	Marcia was saving from her work?	
3	A	Yes, she was.	
4	Q	Did you consider the money joint, pooled, however	
5		you handled your	
6	<b>A</b>	Yes, we had one joint savings account for the two	
7		of us.	
8	Q	Who was in charge of the finances?	
9	A	I mainly handled it.	
10	Q	Where did you maintain your office in 2001?	
11	A	A Well, as an independent marketing consultant, I	
12		had an office in our finished in our semi-finished	
13		basement, as well as I did some consulting work	
14		on-site at a company when necessary. So about	
15		50 percent of the time I was in my office in my	
16		basement, and about half the other time I would	
17		be, you know, at the company that I was working	
18		with site.	
19	Q	When did you move to Milford?	
20	A	In August, 1983. Just after we were married.	
21	Q	So just after you were married, you purchased	
22		your own home?	
23	A	Yes, we did.	
24	Q	And you've lived there ever since?	

1	A	Yes, we have.
2	Q	Can you describe the home, just generally, before
3		any renovations were made?
4	A	Maybe the easiest way is just sort of walk through
5		the house. We have a normal garrison colonial
6		house. It's got two floors. It has a basement and
7		it has a two-car garage.
8	Q	It had a two-car garage?
9	A	Yeah, a two-car garage certainly.
10	Q	Okay. So what was on the first floor?
11	A	Well, as you came in from the two-car garage,
12		immediately to your right would be before the
13		renovations, a half-bathroom. And on your left
14	•	would be a you know, a den. If you proceeded
15		straight past the bathroom, you immediately come
16		into the kitchen. And then if you pass through the
17		kitchen, you get to a breakfast room, dining room.
18		And then you turn left and you come into what was
19		our living room, where Marcia had her piano. And
20		then if you kept so now we're diagonally across
21		from the bathroom to the living room now. So as
22		you come back, we're going to go across the front
23		foyer, where the steps are and the front door is,

and if you keep going, you get back to the den.

24

1		That's sort of a walk around. And then upstairs,
2		there were four bedrooms, as well as a full
3		bathroom.
4	Q	And what was downstairs?
5	A	And downstairs was in two parts. Half of it was
6		finished where I had my office and the other half is
7		unfinished, where we had our laundry room.
8	Q	Now, you said that before the accident you were
9		working for one particular company. What
10		company was that?
11	A	The name of that company was Visibility.
12	Q .	Where were they located?
13	A	They were located in Chicago.
14	Q	And did you have to travel?
15	A	Yeah, I try to avoid generally taking companies
16		working with companies outside of Boston, unless
17		I felt they were very, very special. So I went to
18		Visibility, you know, one or two nights a week, or
19		every two weeks, not very much.
20	Q	About how many hours a day did you work?
21	A	Eight hours normally, sometimes more, sometimes
22		less. Just depending on what was, you know, the
23		requirement to get done.
24	Q	And how many days a week?

1	A	I tried very hard to work just five days a week, but
2		there were sometimes I worked on weekends
3		certainly.
4	Q	So how much time would you say typically you
5		spent in the home office as opposed to on the
6		road, right before the accident?
7	A	In the home office
8	Q	The home office being the office in your home.
9	A	Yeah. And working hours I think I would in
10		terms of working hours. You know, twenty-five or
11		thirty working hours a week. Maybe more if I
12		wasn't traveling to Chicago that week.
13	Q	During the same period of time, can you describe
14		what you did when you weren't working? What
15		kinds of activities were you involved in?
16	A	Well, we spent Marcia, Rebecca and I spent a lot
17		of time together on weekends. Maybe I'll just walk
18		through a typical weekend. Friday night dinner
19		was very important to our family, that we all sat
20		down and had dinner together on Friday night. On
21		Saturdays, typically Rebecca and I would go off
22	·	and do something educational, like the science
23		museum or a zoo. And that would be the time that
24		Marcia would go antiquing and like that. On

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Saturday night Marcia and I would always have dinner together, either together or with friends, either at somebody's house or we would go out.

And then on a, you know, a typical Sunday, you know, if Marcia was going to the Grafton Flea Market, I might go with her. It sort of just depended on what the activity of the day might be.

- Q Did you become involved at all with Marcia's antique business?
- A Oh, yeah. You know, this was the time period -many of you may know, EBay began to become
  very important, and I helped Marcia get started on
  EBay, and put up her collectibles store on EBay, as
  well as, you know, started going to -- I was getting
  more and more interested in her antique business,
  so I started going more and more with her to flea
  markets and auctions.
- Q What about religious activities?
- A Temple is very important to our family. Certainly for me on the religious side, Temple is much more important. For Marcia, for the social and the charity side. You know, I think the year preceding -- well, Rebecca was bat mitzvahed in April, 2001, so the year preceding that, the family, the three of

1		us spent a great deal of time together at the
2	·	Temple, getting Becca ready, or the family ready
3		actually for her bat mitzvah, so it was very
4		important to us.
5	Q	And were there charitable activities over the years
6		that you were involved in?
7	A	Oh, yeah, certainly as part of the Temple, a
8		number of charity organizations that, you know,
9		Marcia mainly participated in.
10	Q	What about interaction at Rebecca's school?
11	A	This was generally Marcia's Marcia's area. I got
12		involved when Marcia when Rebecca needed like
13		math or science homework, but most of it all was
14		with Marcia.
15	Q	And what about chores around the house?
16	A	Well, I guess Marcia and I had a deal. She took
17		care of all the inside chores, I took care of all the
8		outside chores. You know, she took care of all the
9		cleaning, and she took a lot of time transporting
20		Rebecca from where you know, all of her after
21		school and summer activities. I did yard work,
22		home repairs, things like that I guess.
23	Q	And can you describe other interactions with
24		Marcia right before the accident?

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Well, I guess we had what I you know, I guess
we had just, you know, what anybody would call a
normal, caring, warm relationship. You know,
Marcia you know, Marcia's my best friend. And,
you know, we you know, I mean we spent time
together, we you know, I

- Q Did you interact generally on a regular basis?

  A Well, one of the nice things about being a consultant and working at home is that you get to see your family a lot. And, you know, every day Marcia and I, you know, talked about whatever was going on, with Rebecca or with her antiques, or my work. You know, we saw each other quite a lot.
- **Q** What about visiting mutual friends?
  - We had two couple friends that we were very close with. I think Rebecca mentioned Lisa Cowen, her parents. And Rebecca mentioned also Rachel Kramer. Her parents. There was a third couple, Cindy and Andy Grayfield, we spent a lot of time with as well. And we went to -- you know, we did a normal stuff. Family, you know, outings together, and dinners out and dinners at homes and things like that.

1	Q	Visited each others' homes?
2	A	Oh, yeah.
3	Q	You haven't talked about the general bringing up
4		of Rebecca.
5	A	You know, actually the best thing, you know, is to
6		bring up a kid together. And, you know, Rebecca's
7		just a wonderful, wonderful child and is growing up
8		to be a you know, a younger you know, a great
9		young woman. And, you know, we obviously spent
10		a lot of time, you know, doing the best we could as
11		parents bringing her up.
12	Q	Did you take family vacations?
13	A	Well, that that certainly was something that
14		annually we looked forward to a great deal. We
15		rented a house on the Cape for the two summers
16		two previous summers, the earlier one for two
17		weeks and the next one for three weeks, and we
18		were certainly looking forward to continuing our
19		vacations each August, you know, to the Cape.
20		We just loved it there. That was a lot of fun.
21	Q	How would you describe your relationship with
22		Marcia?
23	A	You know, I think I said it. I mean, she Marcia
24		you know, Marcia is my best friend. And, you

1		know, she was the she is the one I can I could
2		count on for anything and everything, and, you
3		know, it was you know, what can I say? I mean
4		it was
5	Q	Did you have arguments?
6	A	Of course we had arguments.
7	Q	How many times? Could you generalize how many
8		times you argued?
9	A	We had arguments, but I don't think anything more
10		than average or normal, but certainly certainly
11		the good times or the normal times well exceeded
12		the any kind of argument times that we might
13		have. I mean, I don't want to
14	Q	When you had arguments, did you ever use the
15		word "divorce"?
16	A	Well, I never used it. Once in a while, once in a
17		great while, Marcia might say divorce, but I knew
18		that was really just get to really grab my
19		attention on a topic.
20	Q	Did she or you ever follow through with anything
21		having to do with divorce or separation?
22	A	Oh no, not not whatsoever.
23	Q	When you had arguments, what were the
24		arguments about?

1	A	You know, it's so hard to remember, but it might
2		have been, you know, stuff about Rebecca, and it
3		might have been, you know I don't know. It's
4		just so hard to remember. You know, nothing
5	Q	Was any of it about your lifestyle when you were
6		working with these large corporations?
7	A	Well, early on, certainly from as I mentioned
8		1980 to when I became a consultant, you know, I
9		became more and more, I guess the terms is a
10		workaholic. You know, I worked very, very hard,
11		and I think I probably didn't spend as much time in
12		those later years with Marcia and the family as I
13		perhaps should have, and that probably was the
14		source of some you know, some concern.
15	Q	Now, you knew that Marcia was using marijuana?
16	A	Yes. I disapproved. I didn't want Rebecca to
17		know about it. I didn't want Rebecca to be around
8		it, even though I knew it was just for Marcia's
9		medicinal use.
20	Q	And was that a source of arguments from time to
21		time?
22	A	Yeah, occasionally.
23	Q	Now, you described the upstairs of your home.
24		When you first was one of the rooms a master

	1	
1		bedroom?
2	A	Yes.
3	Q	And when you first bought the home, did you and
4		Marcia sleep in that larger bedroom?
5	. <b>A</b>	Yes, we did.
6	Q	In that master bedroom?
7	<b>A</b> ,	Yes, we did.
8	Q	And after a period of time did that change?
9	A	Yes, it did.
10	Q	When?
11	A	As best I can remember, about 1996.
12	Q	And what was the reason for the change?
13	A	Well, I'm little embarrassed to say. I have a
14		terrible nasal snoring problem, which is quite
15		predominant I understand it to be.
16	Q	Did you try to do anything about it?
17	A	I had grown up with asthma and allergies anyway.
18		I had a broken nose, and in I think it was like
19		1993, I did a sleep study and was diagnosed with
20		sleep apnea. And then in 1996, or 1997, I went for
21		one of those new surgeries to reduce snoring, but
22		unfortunately it didn't work.
23	Q	Okay. And so what happened as far as the
24		sleeping arrangements?

1	A	I guess, you know, it's fair to say that Marcia slept
•	<b>A</b>	
2		in one room, I slept in another room for
3		convenience factor.
4	Q	Did this mean that there were no displays of
5		affection after that period of time?
6	A	Oh, not not at all. I mean, you know, we saw
7		each other every day, you know. You know, that
8		didn't change anything about our relationship. We
9		loved each other, and, you know, we kissed on a
10		regular basis, I mean, you know, we hugged on a
11		regular basis. We, you know, did stuff that normal
12		husbands and wives do.
13	Q	Did you have sex?
14	A	Intermittently. I mean, you know, I mean who
15		counts, but intermittently certainly.
16	Q	You talked about kissing and hugging. On a daily
17		basis, would you kiss?
18	A	Well, we tried to, I mean especially because
19		Marcia would be going out, you know, and doing
20		her antique business, so we would always talk
21		about what she was doing for the day and maybe
22		what we were doing for, you know, for dinner that
23		night, and then we would kiss good-bye, and she
24		would go off and certainly, you know, at nighttime,

1		kissing too.
2	Q	Hugging, would you hug on a daily basis?
3	A	Well, that's what Marcia liked to do more than
4		anything else.
5	Q	And anything else come to mind about ways that
6		you showed your affection?
7	A	I cannot recall.
8	Q	When you were away, was there contact?
9	A	You know, since I that period of time I was
10		working in Chicago maybe one or two nights a
11		week, every other week, but actually I think we
12		spent more time on the phone when I was away
13		than, you know, when we were together. So we
14		would talk on the phone a great deal in the
15		afternoons or evenings.
16	Q	I'm going to shift gears now, Mr. Rhodes, and
17		direct your attention to the date of the accident.
18		Do you remember where you were?
19	A	Yes, I do.
20	Q	Where were you?
21	A	I was working at home in the basement. It was I
22		was making lunch upstairs actually, and Marcia
23		was getting ready to go out for the afternoon to,
24		you know, go do her antiquing business.

1	Q	About what time of the day was this?
2	A	This was I guess a few minutes around one
3		o'clock, maybe a few minutes past one o'clock.
4	Q	Do you have any memory of saying good-bye to her
5		that day?
6	A	We like we did always, we talked about, you
7	:	know, where she was going, when she was going
8		to be back, what we'd be doing for dinner. She
9		has a cute little Allie McGraw hat that I like so
10		much. We kissed goodbye and off she went, and I
11		went back downstairs to, you know, continue my
12		work.
13	Q	What happened next?
14	A	So so a little while later, I guess about a half
15		hour later, I got a phone call from the Medway
16		Police Department.
17	Q	What was what was said by you, and who was on
18		the other end of the phone?
19	A	The Medway policeman told me that Marcia had
20		been involved Marcia had been involved in a
21		serious automobile accident, and could I come
22		over as quickly as possible. He told me that the
23		accident was near Trotter Lane at Route 109, and
24		did I know it. And I told him it was right around

1		our house, and I would I just got everything
2		together to go over there as quickly as possible.
3	Q	Did you go as quickly as possible?
4	A	Yes, I did.
5	Q	What time did you get to the scene?
6	A	I would guess it was about 1, 1:40, 1:45. Marcia
7		hadn't been gone very long, you know.
8	Q	What did you observe?
9	A	Well, Trotter Drive is very close to where we live,
10		so I got over there and parked right on Trotter
11		Drive. But even as I was driving up, you could see
12		that there was a lot of activity right there, so I
13		parked and walked up just as fast as I could to
14		where all the activity was going on. And I saw I
15		saw Marcia's car, her Toyota, in a ditch. It was
16		it was it was horribly mangled up.
17	Q	Did you have an opportunity to speak to her?
18	A	As I was walking up, the Medway policeman asked
19		me if I was Mrs. Rhodes' husband and that she was
20		asking for me, and would I go over over to her.
21		So I walked up to her, and she was still in the car,
22		but the passenger side window glass was blown
23		out, so I was able to reach in to her on the
24		nassenger side and

1	Q	What did you see?
2	A	Well, Marcia was in Marcia was in bad shape.
3		She was sort of hunched over, and there were
4		there was blood and there was cuts and bruises
5		and there was glass everywhere. And she was
6	er i	moaning. She was in pain.
7	Q	And then what happened?
8	A	Well, I was over I was just overcome by
9		everything that was going on right at that moment,
10		and I think the Medway policeman, you know, said
11		could you step back, we're going to try to get
12		Marcia out of the car, so go step step to the
13		side. So I went over to the side.
14	Q	Before stepping to the side, did you have a chance
15		to talk to Marcia at all?
16	A	I think we said a little bit, but not very much.
17		They didn't give me much time because I was
18		beginning to lose control I believe.
19	Q	Did you watch them try to get her out of the car?
20	A	Well, I'm you know, off to the side, and they're
21		beginning to work on the car, and, you know,
22		whatever they were doing, they were doing to, you
23		know, get her out of the car. So yeah, I watched
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her.

1	Q	What did you watch, what did you see?
2	A	Well, I didn't know it at the time, but there was a
3		thing called the jaws of life. I didn't know what it
4		was, but they cut open the roof or the side, I don't
5		remember which, and they dragged her out and put
6	·	her onto a stretcher.
7	Q	And when they put her onto the stretcher, is there
8		anything in particular that you observed?
9	A	So so she's on the stretcher, I'm off to the side,
10		the car's behind us, or behind her, and the EMTs
11		are now taking taking over. And there was a
12		woman EMT who was holding was at the feet
13		side of Marcia, and I didn't know it at the time
14		what she was doing, but she was scratching the
15		bottom of Marcia's feet. I didn't know what that
16		meant, but she was scratching and the EMT
17		woman looked at me and just shook her head no.
18	Q	What did that mean to you?
19	A	Well, I certainly knew it wasn't good news, and it
20		probably meant that she didn't have any feeling in
21		her legs.
22	Q	Did you go in the ambulance with your wife?
23	A	I wanted to, but they said no, that they needed to
24		work on her and would I just follow in the car ever

1		to Milford Hospital.
2	Q	Did you watch Marcia driving away in the
3		ambulance?
4	A	Yes, I did.
5	Q	How did you feel?
6	A	Well, I mean, you just can't imagine. Your whole
7		world comes crashing down on you at that moment
8		because you know there's something wrong, and
9		you don't really know what's going to happen. And
10		you know, you just sort of go on autopilot, I guess,
11		you know. And I followed her in my car, you know,
12		from one side of Milford over to the other side of
13		Milford.
14	Q	Well, you're anticipating my question. Where did
15		they take her?
16	A	Well, they took her to Milford Milford Hospital.
17	Q	What did you do?
18	A	Well
19	Q	Did you do anything on the way to the hospital?
20	A	Well, you know, I called I made a couple of calls
21		from the car. I called Marian Cowan and asked her
22		to pick up Becca at school if she could do that.
23	Q	This is a family friend?
24	A	This is a family friend, Lisa's mother. I called the

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school counselor we knew, and explained briefly what had happened to Marcia because I didn't want -- I didn't want Becca to get home and not know anything that was going on. She was just thirteen at the time. And I called Marcia's sister Sue, who was living in Falmouth, and I asked her to please come up to the house, just so that she could stay with Rebecca. So I made those calls while I was on my way over to --

- Q Okay. And then you got to the Milford-Whitinsville Hospital?
- A Yes.
- Q What did you observe when you got to the hospital?
  - Well, I went immediately into the ER. And they had Marcia out on a bed. She was just covered with glass. And they were working on her, and one of the nurses told me that they were filling her up, giving her IV injections of steroids, which they would hope would hold down the swelling, which was developing in her body. So she's got cuts and bruises, they're trying to stabilize her. She's got glass all over her. They didn't -- they couldn't give her any painkillers -- they told me they couldn't

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1		give her any painkillers and that she was in a lot
2		of pain right now, but they couldn't give her any
3	!	painkillers because they didn't know what was
4		going to be, whether they were going to operate
5		on her or not, so they couldn't sedate her. And it
6		was just a horrifying it's hard to even describe to
7		some people, to see all this going on.
8	Q	Did you learn that she was going to stay at Milford
9		Whitinsville?
10	A	Well, after a while, one of the ER doctors came to
11		me and said that Milford wasn't equipped to deal
12		with this kind of severe trauma, and that she was
13		going to be transported up to UMass Trauma Unit
14		because they were better equipped to deal with
15		this.
16	Q	And, in fact, did that transfer take place?
17	A	Yes.
18	Q	How did you get to the UMass Trauma Unit?
19	A	Well, Marcia was taken away by ambulance. One
20		of the ER nurses gave me directions to UMass. I
21		had never been up there. And so I just drove from
22		Milford up to Worcester, you know, as quickly as I
23		could, but it was the longest drive of my life.

When you got to UMass, approximately what time

1		of the day was it?
2	A	Well, it had to be around like 4:30 I would say.
3		You know, it was about 4:30 in the afternoon.
4	Q	Did you were you able to see Marcia at that
5		time?
6	A	Okay. So I walked in, and the ER nurse at Milford
7		said just go to the emergency room nurse, or the
8		attendant at the emergency room, tell them who
9		you are, they'll be expecting you. So I went in
10		there, and the desk nurse just said go wait in the
11		family room, which was a special room, and that
12		somebody would be down to see me, you know, in
13		a short while. So I went into I went into that
14		family room and waited.
15	Q	And that was about what time?
16	A	So this was about 4:30 p.m. now.
17	Q	While you were in this waiting area, did you make
18		any calls?
19	A	I didn't want to call anybody because I didn't know
20		what was going on. So I didn't want to tell
21		anything to anybody. I think I asked Sue to call
22		her parents, just to let them know what had
23		happened to Marcia, but that I would be calling
24		them later but I hadn't called them yet

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Q Did you talk to Marcia's parents that night?

So the social worker came in just a little while after I got into the family room, and calmed me down, and told me that Marcia was being examined by the doctors, and that as soon as the doctors knew something, they would come and see me and explain what the situation was. So, you know, it's about 5 o'clock now, and they just told me to wait until the doctors came down. So, you know, it was -- I -- you know, I had to make -- I had to make some phone calls, because, you know, everything's going on now. So first -- first I called my brothers and my sister, to let them know, you know, what's going on. Then I had to make what was the second hardest call to Marcia's parents, because they've been waiting to hear from me, to tell them that their daughter had been in a very serious automobile accident, and that I really didn't know what was going on. They told me they were going to make plans to come up to Boston just as soon as they could.

- Q Where were they?
- A They lived in Florida. And then I had to make the hardest call.

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Q To whom?

I called Rebecca because by then Rebecca knew that something was going on, that there was -- Mom was involved in an auto accident. And I didn't know what to say to her, but I knew I had to say something to her because she was going to hear about it because this sort of thing would be all over Milford the next day. So, you know, it was a very tough call.

Q What did you say to Rebecca?

I tried just to be as honest, but as short as I could because I didn't want to get her too upset. But I didn't want to lie to her either, so I just told her that Mom was in an automobile accident, that the doctors were working on her, and as soon as we knew more, we would know more.

Q Did you talk to the doctors that night?

So I'm still -- I'm making phone calls and I'm waiting in the family room, and about 9 p.m. that night, the social worker and two doctors came down to see me. And one doctor was Dr. Bailey and one doctor was Dr. Bloomenkauf. Dr. Bailey was the orthopedic surgeon. Dr. Bloomenkauf was the neurosurgeon. And there was the social

worker there. And they said that Marcia was -had a severe trauma. She was going to need to
have surgery. They didn't know right then, or at
least they told me they didn't know right then the
extent of the damage to her, but that, you know,
they were doing all they could for her. The social
worker -- if I can just continue -- said to me that
there was nothing more that I could do right then,
that I should go home and be with Rebecca. She
said to me, and I remember this, she said to me,
Mr. Rhodes, you're going to be facing a lot of
things, go home and get some rest because there
are going to be a lot of things that are going to go
on. So I went home that night.

- Q Was Rebecca sleeping?
- 16 A No, she waited up for me.
  - Q Did she yet know the details of the accident?
  - A She knew that Mom was in an automobile accident, and she -- and I told her that it was a serious one, but that she was at the hospital and the doctors were taking care of her, and we'd know more when we knew more.
  - Q Was her aunt there at that time?
  - A Yeah, Sue was there taking care of her.

		11-33
1	Q	Did you go back to the hospital the next day?
2	A	Yeah. So next morning I went back up to UMass.
3		And, you know, Marcia Marcia was in the
4		intensive care unit at this time. And, you know,
5		this was pretty scary stuff now.
6	Q	Harold, maybe you should wait for the questions.
7		Did you have an opportunity to see Marcia
8	A	Yes.
9	Q	that day?
10	A	Yes, I did.
11	Q	In the intensive care unit?
12	A	Yes.
13	Q	Are you familiar with a rotor bed?
14	A	Well, I didn't know what it was then, but I do
15		certainly know what it is now.
16	Q	Did you see Marcia in a rotor bed?
17	A	Yes, I did.
18	Q	I'm going to show you two pictures, and ask if you
19		can identify them for me.
20	A	Yup.
21	Q	What are they?
22	A	They're pictures of Marcia in in intensive care on
23		the first day. The first day she was in intensive
24	·	care.

1	Q	On a rotor bed?
2	A	On a rotor bed.
3		MR. PRITZKER: Could I have the
4		picture marked or identified as 3856 marked as
5		the next exhibit, your Honor?
6		THE COURT: All right. Is there any
7		objection?
8		MR. BOYLE: No.
9		MR. CONROY: No objection.
10		THE COURT: That will be marked as
11		Exhibit 68.
12		(Photograph of Marcia Rhodes
13		in intensive care received and
14		marked Exhibit Number 68.)
15		MR. PRITZKER: And the one
16		identified as 3860 as the next exhibit, please.
17		THE COURT: 69.
18		(Photograph received and
19		marked Exhibit Number 69.)
20		MR. PRITZKER: May I publish these
21		to the jury, your Honor?
22		THE COURT: You may.
23	Q	Aside from the pictures, Mr. Rhodes, can you
24		describe what it was that you observed?

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Well, she was on the bed. And a rotor bed sort of goes sideways to sideways, it goes back and forth. Marcia had all sorts of tubes and wires coming out of her. And the ICU nurse told me that they were stabilizing her.

Q Was there an issue about her pulling the tubes out?

Well, I stayed that day, the whole day at the hospital, and then I slept at the hospital that night. And then early the next morning, the attending -- the attending physician or somebody came to see me and asked me to come to see Marcia. And he showed me that Marcia had pulled out one of the tubes, and that this was a really serious problem because they didn't want to be putting it in and taking it out, putting it in the tubes. And that they just had to stop that. And they explained to me in order to stop Marcia having her hands come up to pull out these tubes. they needed to ask my permission -- you know, this was going to be the first hard decision. They asked my permission to strap Marcia's arms down to the sides of the bed, so she couldn't be jerking -- I mean so she couldn't pull out the tubes from her

1		body. And she was
2		Did you give them permission?
2	Q	Dia you give them permission:
3	A	Yeah. Yes, I did. And then, you know
4	Q	Did they strap her down?
5	A	Yes, they did.
6	Q	And what did you observe?
7	A	It's so horrible. She's flailing her arms to try to
8		reach her nose, to try to pull out these body
9		things, and you're just looking at you know, what
10		have you just done to your wife.
11	Q	Do you remember the day of the surgery?
12	A	Yes, I do.
13	Q	Can you tell me if anything in particular sticks out
14		in your mind about the day of the surgery?
15	A	Well, it was about a week later. Dr. Bailey and Dr.
16		Bloomenkauf came to see me and early that
17		morning and said they were going to do spinal
18		cord surgery. Of course, I'd learned a lot more by
19		then, that there was spinal cord trauma, and they
20		were going to do her spinal cord surgery, and that
21		the surgery would take like six or eight hours. So
22		just be patient, and as soon as the surgery was
23		over, they would come out and give me an update,
24	i	you know, as to what was what was what was

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happening. About an hour after they went away and were in surgery, Dr. Bloomenkauf, the neurosurgeon, came down to see me. And he said that the damage to Marcia's spinal cord was so extensive that, as a neurosurgeon, there wasn't anything that he could do, and that Dr. Bailey would be doing orthopedic or spinal cord reconstruction as best as he could, but there was nothing he could do from a neurosurgery kind of

- During the first month of her care at UMass, what
- Well -- well, her parents -- Marcia's parents were up, Marcia's sister was here. My family came. So I was focused on Marcia. You know, other family members were taking care of Rebecca. But it's --
- At some point did you bring Rebecca to the
- So it's now the weekend after the -- it's now the weekend after the surgery, and I hadn't wanted -well, the social worker told me, don't bring -- don't bring Becca to the hospital until Marcia is stabilized and can at least talk to Rebecca

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because -- you know, until after surgery, until she could -- because that just wouldn't be a good thing for Rebecca to see at that point. So we had to tell Marcia that Rebecca was going to be coming up. But in order to tell Marcia that Rebecca was coming up, I had to have a talk with Marcia first.

Q Did you have that talk?

So the doctors and the social worker had been pushing me to tell Marcia how she was because, you know, she's been in bed and sedated and she really didn't know how she was doing. Or maybe she knew. Or maybe -- I don't know. So with the doctor's help, and I built up my courage to go see Marcia, and she was just lucid enough that I could talk to her, and I told her. I said, Marcia, the doctors want me to tell you that you're paralyzed and that you're going to be in a wheelchair for the rest of your life. And Marcia said to me -- Marcia said to me, Harold, I know that, I can't feel anything in my legs. So the next day I brought Rebecca up to see Marcia. And I sort of explained to Rebecca in the car as we were going up that she's going to see Mom and it was pretty serious, but when we got there, doctors would meet us and

1 we'd talk about it first. Well, there was a group of 2 us, including the social worker, we took Becca in 3 to see -- Marcia was still in ICU. And that's when I 4 explained to Rebecca that Mom was paralyzed. 5 And Becca just fell apart. 6 THE COURT: Why don't we take our 7 morning recess at this point. 8 (Morning Recess) 9 Q Mr. Rhodes, we've already heard that when Marcia 10 left UMass, she went to Fairlawn Rehab. Center. 11 She was at UMass for how long? 12 Α Twenty-one days. 13 Q Three weeks. 14 Three weeks. Α And I'm not going to spend a lot of time with 15 Q Fairlawn, but when you visited Marcia -- how long 16 was she at Fairlawn? 17 18 Δ Ten weeks. 19 During that ten weeks, when you first started Q visiting Fairlawn, was she with the general 20 21 population? No, she was -- she was in isolation. She was in 22 Α isolation. 23 24 And how long did she remain in isolation? Q

1	A	Well, I think about six or seven six or seven of
2		the ten weeks.
3	Q	So when you visited her, did you have to suit up?
4	A	Yes.
5	Q	What did that mean? What does that mean?
6	A	It's you have to put on a full gown, hair cover,
7		gloves, mask, you know, so
8	Q	During that same period, the first seven weeks,
9		was Marcia wearing the body cast that we've had
10		marked as an exhibit?
11	A	Yes, she was.
12	Q	And did she have any other significant
13		complications?
14	A	I don't remember all the things that were going on
15		with her, but there were a lot there were a lot of
16		things
17	Q	Did she have a swollen leg?
18	A	She she got a blood clot, and her leg was huge.
19		Just huge.
20	Q	Did you have an opportunity to observe Marcia's
21		disposition during this period?
22	A	You know, the only word that comes to mind is
23		just despondent. I mean, she was in pain every
24		minute. Anybody who comes to see her has got to

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get dressed up and keep a distance. She wants to get going and, you know, get active, but she can't. And she's just so unhappy.

- Q During this period, or maybe even back at UMass, how did you prepare for Marcia's ultimate return?
  - The social worker at UMass, when I was there began to tell me about what was going to happen. And the social worker at UMass said she's going to be in a -- she's going to have surgery, she's going to be in the hospital, she's going to go to a rehabilitation facility that I would need to select, and then if our home was modified, she could come home, and if not, she would go to a nursing care facility. So you know, the first thing was I knew Marcia would never want to go to a nursing care facility, so I needed to get the home renovations done just as quickly as possible. So this started while I was at UMass and went all the way through while she was at Fairlawn as well.
- Q What arrangements did you make?
- A So now there are other therapists talking to me and telling me what I've got to do for the home.

  And they said as a bare minimum, you have to -see, they have to certify a home for a patient to

1		return to it, so they've got these things that you've
2		got to do. So they said you've got to have a ramp,
3		you've got to have a handicap accessible
4		handicap accessible bathroom, and you also have
5		to have special flooring because we had, you
6		know, regular carpet, so we had to have like we
7		had grade like what we have here, we had grade
8		flooring put on throughout the house.
9	Q	So how did you go about starting to coordinate
10		this?
11	A	Well, you know, through all our friends, I sent out
12		this giant I don't know, I call it like an SOS e-
13		mail to everybody I knew, just everybody, because
14		I didn't know how to get, you know, construction
15		done. And fortunately, one of the Temple
16		members that I didn't really know very well called
17		me to let me know that he was a design architect
18		and he just happened to have ADA background
19	Q	ADA being?
20	A	Disabilities Association. American Disabilities

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Disabilities Association. American Disabilities Association. And he understood perfectly well what to do, and he would help me in every way to get this done, because it had to be done in six or eight weeks, you know, in a rapid fashion. And

1		this is really a hard thing to get done.
2	Q	What was this fellow's name?
3	A	Manuel Sneiderman. He's called Manny
4		Sneiderman.
5	Q	And in fact, did he help you through this process?
6	A	Yeah. Manny was terrific. He just said, you go be
7		with your wife, you take care of your family, and
8		I'll take care of all the renovations. And I pretty
9		much did what what the social worker tells you
10	-	is you've got to learn to depend on a lot of people
11	ı	to do a lot of things because you just can't do it
12		yourself. So Manny just took care of that, all of
13		that for me.
14	Q	So between the time that you started and the time
15		Marcia came home, what was done?
16	A	So we used up one of the two car garages, the
17		garage side close to the house, and close to the
18		entrance to the house and put in a ramp inside the
19		garage. We remodeled the one-half bath into a full
20		bathroom a full disabled accessible bathroom
21		which now extended into the garage, so we've
22		given up one half of the, you know, the two-car
23		garage. And the rehab. carpet that needed to be
24		put down is a special carpet, so it had to be

ordered. And eventually, we got the carpeting, 1 that carpeting put down as well. So this way 2 3 Marcia could get in, go to the bathroom. I also 4 ordered the medical bed, the bed that Marcia 5 would need to be sleeping on. And, you know, 6 when the occupational therapist came and did a 7 home visit, you know, we decided that the best place to have Marcia go would be in what was our 8 9 living room, where the piano was. So I had to get 10 the piano put into storage, get a hospital bed 11 brought in there, so that when Marcia came home. 12 she could get into the house, go to the bathroom, 13 cross the floor and get into bed. And this was all 14 done in like the space of, you know, eight or nine 15 weeks. 16 Q So the ramp was constructed? 17 Yes. 18 Where was it constructed? Q 19 Α In the garage. 20 Q And the bathroom was enlarged? 21 Α Yes, and it extended into the garage as well, 22 Q Certain doorways were widened? 23 A Yes. Yeah, we had to -- because regular doorways

don't accommodate wheelchairs, so we had to

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1		widen several doorways so Marcia could get
2		through.
3	Q	Was there any other construction that was done at
4		this first initial stage?
5	A	That would be it. We did just enough to get her
6		home.
7	Q	How much did you expend for this initial
8		construction phase?
9	A	So including the flooring to be done, about
10		\$29,000.
11	Q	Now, I'm jumping ahead a little bit, but for this and
12		for all your expenses, Mr. Rhodes, did you keep
13		track of them?
14	A	Yes, I did.
15	Q	Did you keep track of the expenses that were
16		being spent as they were being spent?
17	A	Yes, I did.
18	Q	Did you keep a running list of them?
19	A	Oh, yes, I did.
20	Q	And did you break it down into various areas of
21		either vendors or providers?
22	A	By category and by vendor.
23	Q	And do you have all of those records with you
24		today?

1	A	Yes, I do.
2	Q	Now, going back a little bit, you got all this done
3		while Marcia was in Fairlawn, and then she came
4		home. Did you feel that you were prepared for her
5		coming home?
6	A	Well, as part of Marcia's therapy, there was
7		spouse therapy that they give you while she's at
8		Fairlawn, and they try to teach you as much as you
9		can be taught. And I know that Fairlawn tried to
10		teach me a lot of things, but at the same time,
11		there's so many other things going on. There's
12		Rebecca, there's the house, there's medical
13		issues, there's financial issues, there's just a lot of
14		things going on. So, I mean, I thought I was
15		prepared, you know, for Marcia's coming home. I
16		thought I was.
17	Q	Were you prepared?
18	A	No.
19	Q	When did that become obvious to you?
20	A	So she comes they bring her home by ambulance
21		in the middle of the afternoon.
22	Q	On what date?
23	A	April 16th, 19 April 16th, 2002, because that was
24	·	our 19th anniversary. And the ambulance brings

1 her home, brings her into the living room where 2 the medical bed is, and they get her on the bed 3 and the ambulance leaves, and just a few minutes 4 later, she has a bowel movement. 5 Q Who was with you at this time? 6 Α There was nobody --7 Q Just the two of you? A Just the two of us. 8 9 Q What happened? 10 You know, I mean, it's like there she is, you know, Α 11 with a bowel movement, you know, in her brief, 12 and it's like I didn't know what to do. So, you 13 know, I was like, you know, you're just sort of 14 overcome with everything. So I leave Marcia there 15 and I run over to CVS and they load me up with 16 supplies, and I come back, and they told me how 17 to fix her up, and this was the first bowel change, 18 diaper bowel change that I would do -- of many 19 more that I would do over the next couple of 20 years. And, in fact, are you still doing it? 21 Q 22 A Yes, I am. Were there urinary accidents along the way? 23 Q 24 Α So they teach you about, you know, indwelling

Α

Foleys and things like that, and teach you that you're supposed to keep her skin dry, and they teach you about watching for leakage, so there are certainly times when the home health care -- I mean, the home aide wasn't there that Marcia would wet herself that I would have to change her because she couldn't stay in a -- you know, a wet brief or diaper for very long. I mean you had to change it very quickly, and I did that many times.

- Q By the way, was it just changing her or did you first have to --
- A Oh, it's a whole process because, you know, as you learn, urine has lots of bacteria in it, so you've got to keep Marcia as clean as possible. So there's a whole process for cleaning up either after a bowel movement or, you know, urinary, you know, after wetting herself. There's a big process that you've got to go through.
- **Q** What about menstruation?
  - Well, so Marcia starts her period again. And she can't bend over far enough to insert a Tampax. So I learned how to insert a Tampax, and I do it now for Marcia, you know, whenever the home health aide's not there and evenings and weekends. And

1		I know you didn't ask me this, but the loss the
2	e+	loss of dignity on the part of Marcia, I just know
3		it's excruciating to have your husband change
4		your Tampax. She shouldn't have to do that.
5	Q	How were you dealing with Rebecca during the
6		period after Marcia came home?
7	A	Well, Marcia Rebecca had just I guess she had
8 .		just turned fourteen. And she's just so I mean,
9		she's out of her mind. She doesn't you know,
10		here's her mom in a hospital bed, her legs swollen
11	·	up, there are people coming in our house all the
12		time. I mean, there's I'm doing the best I can to
13		pay attention to her. She's undergoing therapy,
14		but we just we just cope. You know, I mean, she
15		you know, you just cope each day to get
16		through.
17	Q	During this period of time, after Marcia came
18		home, can you describe from then until now how
19		your relationship with Marcia has changed?
20	A	Well, now Marcia is my wife, but we're no longer
21		husband and wife. She is the patient and I'm the
22		caregiver. And that's that's what it is.
23	Q	You're the caregiver when the home health care
24		aide is gone for the day?

	ľ	
1	A	And on weekends, yes.
2	Q	What is the timing of the home health care aide?
3	A	At that time we could afford for a home health
4		care aide to come in at 8 a.m. and stay till 4 p.m.
5		So she would come in at 8, and leave at 4. And
6		then after 4 p.m. and then on weekends, that was
7		my responsibility.
8	Q	So after 4 p.m., until Marcia went to bed, that
9		meant putting
10	A	Well, at night too, in case there was a problem.
11	Q	So if there was a problem, but at least you put
12		Marcia to bed every night?
13	A	Yes.
14	Q	Seven days a week?
15	A	Every night.
16	Q	And are you still doing that?
17	A	Every night.
18	Q	Seven days a week?
19	A	Seven days a week.
20	Q	Has the home health care aide cut back?
21	A	I had to cut her back from eight hours to six hours,
22		yes.
23	Q	Why?
24	A	I'm beginning to run out of money.

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Aside from being the caregiver to Marcia, what else do you do as it relates to her activities -- to her disability?

I end up -- I mean, I end up doing everything. I mean, the first thing here is, you know, the first thing I'm Marcia's patient advocate. I mean, I'm going to find a way every day to try to get Marcia better. So I did everything I could to get Marcia better. I -- we had so many doctors that we saw. And coordinating all those doctors is an enormous task, to make sure that all the doctors know what all the other doctors are thinking and everybody's doing. You know, there's tremendous amount of transportation. I mean, Marcia's got to go here and there, and you've got to take care of that. I didn't mention I had a -- at the same time I had this whole handicap van put together. And it's not just a real easy process. I mean, there's -- you've got to get a van, you've got to get it modified, and you've got to get it specially modified. And it's -that takes a lot of time just to do that. There -you know -- you know, there's nothing that Marcia can do, so I have to do everything.

Do you have a list of doctors that Marcia sees on a

1		regular basis?
2	A	Yes, I do.
3	Q	Do you have it with you? May I see it? Do you
4		have more than one copy?
5	A	That's the one I have.
6	Q	How many doctors are presently is Marcia
7		seeing presently on an ongoing basis?
8	A	She has nine ongoing caregiver doctors.
9	Q	Who are they?
10	A	Well, the first one is Dr. Donna Kraus, and Dr.
11	·	Kraus is Marcia's internist or general practitioner.
12		So she handles all of Marcia's general medical
13		issues. Then there's Dr. Roaf, who's Marcia's
14		physiatrist. Then there's Dr. Mastriani, who's
15		Marcia's orthopedic surgeon who's been handling
16		her broken legs. There's Dr. Kelly Clark, who is
17		Marcia's psychiatrist, who handles medicine
18	-	management for her. And there's Dr. Jill
19		Macinulty, who's Marcia's psychologist. Dr.
20		Neerman, Dr. Mark Neerman who's Marcia's
21		generalist urologist. And there's Dr. Albert
22		Cumaldy, who's Marcia's gastroenterologist, that's
23	·	the person who deals with Marcia's bowel. Then
24		there's Dr. D. Giovanni, who is Marcia's OBGYN.

1		And then there's Dr. Bianicomineau, who's
2		Marcia's podiatrist, because Marcia had several
3		feet problems, which continue. So all these
4		doctors.
5	Q	And you have to coordinate with them?
6	A	Oh, gosh, yes.
7	Q	And what does it entail to coordinate with them?
8	A	Well, you know, you have an orthopedic surgeon
9		like Dr. Mastriani who's putting in certain orders to
10		have Marcia do certain things who Dr. Roaf needs
11		to know what those things are and Dr. Kraus
12		needs to know what those things are, so
13		everybody is working towards the same thing.
14		There's there's you know, there's obviously a
15		lot of discussion about trying to get Marcia to be
16		able to transfer, but with her broken legs and her
17		casts and everything like that, that was, you
18		know, all coordinated to say let's put off all that
19		kind of activity.
20	Q	Are there also special doctors that see Marcia for
21		particular needs like spinal cord needs or other
22		needs like that? You don't have to go through
23		them. I'm just asking you are there?
24	A	Yes, there are certainly are.

1	Q	And how many of those doctors are there?
2	A	So there's five more. The spinal cord injury
3		specialist doctors that I drag Marcia to go see.
4	Q	You have to coordinate appointments with them as
5		well.
6	A	Oh, these are difficult doctors to get in to see.
7		You have to wait many months to see them.
8	Q	And who else do you have to coordinate with
9		besides these doctors that she sees regularly, the
10		special doctors that she sees occasionally?
11	A	And then there's a whole class of doctors called
12	-	event doctors, when some particular event
13		happens to her, like the like Marcia's pressure
14		sores. So we spent a lot of time with Sturdy
15		Memorial Hospital in Attleboro with their Wound
16		Care Clinic. So it was that whole group of people
17		that do event kind of management.
18	Q	Now, in addition to being Marcia's advocate and
19		organizing her medical appointments and making
20		sure that the doctors have updated information,
21		what else do you do?
22	A	Well, now, there's this whole thing about, you
23		know, making sure that trying to be a mom and
24		dad to Rebecca. Trying is well, failing at being a

1		mother
2	Q	She's now sixteen.
3	A	She's now sixteen.
4	Q	So between the ages of thirteen and sixteen,
5		you've been the principal parent?
6	A	Yes.
7	Q	What about her transportation?
8	. <b>A</b> .	I have to take care of that as well because, you
9		know, she has her orthodontist and her after
10		school activities, and you know, everything that
11		kids do. Like this summer when she was
12		volunteering at the hospital, I had to take her and
13		pick her up for all of her volunteering.
14	Q	Do you do much of the shopping?
15	A	I have to do it all.
16	Q	Well, I know there are times when Marcia's tried to
17		do them with her caregiver.
18	A	Yes.
19	Q	Has that been successful?
20	A	Not really.
21	Q	What about the cleaning?
22	A	I take care of all the non-Marcia area kinds of
23		things. The home health care aide takes care of
24		Marcia's bedroom and bathroom, but everything

1		else than that, you know, I'm responsible for.
2	Q	And what about the construction at the house?
3	A	So Marcia it's obvious, you know, Marcia's living
4		in this room with a hospital bed with all of the
5		medicines there. And, you know, it's important
6		that Marcia, you know, have an appropriate
7		amount of space in which now to live. So while all
8		of this is going on, we have a construction plan to
9		make a space so that Marcia could live in a way
10		like she was living before.
11	Q	I'm going to show you what appears to be a floor
12		plan, Mr. Rhodes, and ask if you can identify it?
13	A	Yes. The construction.
14	Q	And does this show the footprint of the first floor
15		after the second phase of construction?
16	A	Yes, it does.
17		MR. PRITZKER: Could we have that
8		marked as the next exhibit, your Honor.
9		THE COURT: Any objection?
20		MR. CONROY: No objection.
21		MR. BOYLE: No objection.
22		THE COURT: Exhibit 70.
23		(Footprint of house received
24		and marked Exhibit Number 70.)

1	Q	Now, directing your attention to Exhibit 70, and
2		this is very small, so I'm going to hold it up to the
3		jury while I ask you the questions. Is it fair to say
4		that the footprint of the original house was on the
5		top of the footprint, in very dark outline?
6	A	Yes.
<b>,7</b>	Q	And then the bottom approximate half of the
8		footprint is the new area that was constructed?
9	A	Yes, it is.
10	Q	So if we look at Exhibit 69
11	A	<b>70.</b>
12	Q	70 excuse me the existing what's called
13		the existing living room on the top right corner of
14		the house, that became Marcia's bedroom?
15	A	Right.
16	Q.	And the bath, which was a half bath, was
17		diagonally across the whole first floor of the
18		house?
19	A	Yes, it was.
20	Q	And if I understood your testimony earlier, that
21		bath was enlarged to accommodate Marcia's
22		handicap, a ramp was put in the garage, so that
23		what was a two-car garage is now a one-car
24		garage, correct?

1 A That's correct.

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- Q Now, let's talk about phase two. What was done in phase two?
- Well, the first thing that was important is for 4 A Marcia to have a bedroom and a connecting 5 6 bathroom, so that she would no longer have to --7 you know, so she could maintain some privacy, so she wouldn't have to go across the house to, you 8 9 know, keep private. The second thing is we 10 needed a dining room because we didn't have a 11 place to eat anymore because the house with the 12 living room sort of spilled over to where our 13 breakfast room was, and there wasn't any space in 14 there, so we ate at a card table in the kitchen, 15 until we built a dining room, so we could all eat 16 together and where Marcia could be social with 17 her girlfriends, and we built a family room, which 18 was large enough to accommodate Marcia's, you 19 know, equipment, and so we could all be together.
  - Q And was this -- has this been accomplished?
- 21 A Yes, it has.

20

- Q So right now, the living room is back as a living room?
- 24 A Yes, it is.

1	Q	There's a bedroom, which has been constructed
2		for Marcia?
3	A	Yes, it has. A special one.
4	Q	With an accompanying with a connecting
5		bathroom?
6	A	A connected disabled accessible bathroom.
7	Q	And right outside of Marcia's new bedroom and
8		bathroom, there's a family room?
9	A	Yes, there is.
10	Q	And that has access then to the dining room?
11	. A	Yes.
12	Q	And from the dining room, there's access to the
13		kitchen?
14	A	Yes.
15	Q	By the way, there was some testimony the other
16		day about the need for two handicap exits.
17	A	Yes.
18	Q	Does that require two ramps, or just two
19		handicapped exits?
20	A	It needs two exits from the space.
21	Q	And was this accomplished with the one existing
22		ramp that you had initially constructed before
23		Marcia came home?
24	A	No, the only way for her at that point was to go out

1		through the garage door. I mean, a connecting
2		door to the den.
3	Q	Okay. And is that still available?
4	A	That one is still there, yes.
5	Q	Now is there a second exit?
6	A	Yes, there is a second exit, so in case there's a
7		fire, there is another place for Marcia to exit.
8	Q	And where is that?
9	A	That's off the dining room. There's a sliding door
10		that's handicap accessible, which Marcia can then
11		go out and transfer across deck, down into the
12	:	ramp in the garage.
13	Q	How much did the phase two construction cost
14		you?
15	A	About \$210,000.
16	Q	And in addition to that, did you have to expend
17		money for design and architectural services?
18	A	Yes. Separate from separate from the
19	·	construction was design architecture and
20		construction management. I couldn't be there, so
21		I needed somebody to supervise, and the design
22		and the survey was complex just because of the
23		nature of our of our land and our house.
24	Q	And so you how much was that?

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1	A	About, as I remember, 25 or \$30,000.
2	Q	If I suggest 24,000 to you, does that sound right?
3	A	Yeah, 24 sounds right.
4	Q	And now does this include any money for kitchen
5		renovations?
6	A	No, we haven't started that at all. We're no.
7	Q	So you haven't done anything towards rehabbing
8		the kitchen?
9	A	No, unfortunately.
10	Q	Why not?
11	A	Well, we're running out of money.
12	Q	And have you done the basement modification?
13	A	Other than getting the estimates, we've not done
14		any work on the basement.
15	Q	What is the plan for the basement?
16	Α	Well, it's important that Marcia get as much
17		opportunity to exercise as possible, and the way
18		she has to exercise now is somebody, either me or
19		the health care provider has to take her out to a
20		gym. We want to put in a place where she could
21		have more easy access to exercise equipment.
22	Q	On a daily basis?
23	A	On an absolute daily basis.
24	Q	And is that what's provided for in the basement?

1	A	Right now?
2	Q	No, is that the plan?
3	A	Yes, that is the plan.
4	Q	And is there other space down there that's also
5		being planned for Marcia's use?
6	A	Oh, in addition, we want to make it so that all of
7		Marcia's antiques and collectibles can be sorted
8		out or left out so that she can have access to it,
9		you know, because she can't reach very high, so
10		we're going to put in shelving so she can get to it,
11		and then have a computer office area so she can
12		work there.
13	Q	So you've got the estimates?
14	A	Yes, we have.
15	Q	But you haven't expended the work?
16	A	No, we haven't.
17	Q	What is the average amount of money that you've
18		received by way of estimates to do the work?
19	A	Well, it comes in two parts. The basement
20		renovation portion is about \$30,000. But we have
21		to put in this special ramp lift due to the concern
22		of Marcia transferring to a stair lift. And so that is
23		an expensive thing because the house rewiring
24		that has to happen to it is \$20,000.

1	Q	So now, Mr. Rhodes, you mentioned earlier that
2		you have kept records of the money that you
3		expended in in both health care, medical
4		equipment, medical supplies, the van, the
5		modifications to the home. Were summaries
6		prepared of those numbers?
7	A	Yes, I kept those.
8	Q	Do you have them with you?
9	A	Yes, I do.
10	Q	So tell me what it is that you have in front of you.
11	A	Well, I kept a, you know, daily record of all the
12		monies being spent, you know, for Marcia's, you
13		know, care. And so this is s summary report of all
14		the expenses that I've paid out of our own pocket
15		for.
16	Q	I'm showing you a document, Mr. Rhodes, which
17		appears to be expenses through August 31, 2004.
18		And ask whether or not that is the record which
19		you kept contemporaneous with making the
20		expenses for each item indicated therein?
21	A	Yes, it is.
22		MR. PRITZKER: I'd like to offer this,
23		your Honor, as the next exhibit.
24		THE COURT: Any chiection?

1		MR. CONROY: May I have a moment,
2		your Honor?
3		(Pause)
4		MR. CONROY: No objection, your
5		Honor.
6		MR. PRITZKER: I'm offering it, your
7	·	Honor.
8		THE COURT: All right. There's no
9		objection. It may be marked as Exhibit 71.
10		(Expenses to date received and
11		marked Exhibit Number 71.)
12	Q	Directing your attention, your Honor Mr. Rhodes
13		excuse me to Exhibit 71, I'm going to put a
14		summary in front of you. And the first item on the
15		summary is has nothing to do with you, but that
16		is the items that added up to \$425,235, and they
17		were the total of the medical services that were
18		certified and were introduced into evidence
19		earlier. How much have you spent for home health
20		care, Mr. Rhodes?
21	A	\$95,313.70.
22	Q	And that's from the time that your wife came home
23		until August 31?
24	A	Yes, it is.

		· · · · · ·
1	Q	How much have you spent for medical equipment?
2	A	\$13,074.
3	Q	How much have you spent for medical supplies?
4	A	\$9,722.17.
5	Q	How much have you spent for what's called
6		medical miscellaneous?
7	A	\$4,366.04.
.8	Q	What is medical miscellaneous?
9	A	That would include things like Marcia's adaptive
10		driving, her medical alert, and anything else that
11		might fall into that category.
12	Q	Her medical alert being what?
13	A	Marcia at all times wears a medical alert from
14		Brinks, just in case something happens so she can
15		push a button inside the house, and Brinks is
16		automatically notified to send over police or
17		ambulance, whatever is the appropriate thing.
18	Q	How much did you spend on the handicapped
19		accessible van?
20	A	\$52,932.21.
21	Q	Now, was that just for the van?
22	A	Well, the van cost about \$38,000, but then you
23		have to do substantial modifications to the van, to
24		make it acceptable for a handicap person to drive

1		and be certified as a driveable van by the Registry.
2	Q	Now, you've talked about the modifications to the
3		home, but those were in three parts.
4	A	Right.
5	Q	So the phase one, the part that was done while
6		Mrs. Rhodes was still in the hospital, how much
7		was that?
8	A	Phase one, which did the bathroom, the ramp and
9		the flooring, was \$28,396.54.
0	Q	How much was the survey, the design and
1		construction management?
2	A	\$23,556.50.
3	Q	And how much was the big construction, the
4		phase two construction?
5	A	\$209,996.09.
6	Q	And what does that add up to?
17	A	\$261,949.13.
8	Q	Now, does that include any costs for renovations
19		of the kitchen?
20	A	No, it doesn't.
21	Q	And does that number include any cost for the bids
22		that you've received for the renovation and
23		modification for Marcia's handicap to the
24		basement and for the lift?

1	A	No, it does not.
2	Q	And is that last item included in as the last line
3		item on this chalk that I've put up?
4	A	For the basement, yes.
5	Q	And how much is that?
6	A	\$48,939, including the special ramp lift that needs
7		to be provided.
8	Q	So the total expenses that Marcia has that
9		Marcia and you have either expended or have been
10		expended on your behalf to date, the past
11		expenses, with the exception of the basement
12		modification, which is going to happen next, are
13		\$911,485.58.
14	A	458.50 58.
15	Q	l'm sorry. \$911,458.58.
16	A	Thank you. Yes.
17	Q	How did you pay for all that? Not all of it because
18		I know you didn't pay for all of the medical
19		services. How did you pay for it?
20		MR. BOYLE: Objection.
21		THE COURT: Sustained.
22	Q	How did you pay for all this, Mr. Rhodes?
23		MR. BOYLE: The same objection.
24		THE COURT: Sustained.

1	Q	Do you have any savings left, Mr. Rhodes?
2		MR. BOYLE: Objection.
3		THE COURT: Sustained.
4		MR. PRITZKER: Your Honor, could I
5		introduce a small version of the summary we have
6		been going through as a summary of the expenses
7		that Mr. Rhodes has incurred?
8		THE COURT: You may. Any
9		objection?
10		MR. BOYLE: I've not seen it, your
11		Honor.
12		May we be heard, your Honor?
13		THE COURT: Yes.
14		(CONFERENCE AT THE BENCH, AS FOLLOWS:)
15		THE COURT: I think these are the
16		same figures that are up on that chart.
17		MR. BOYLE: Yes, your Honor. I've
18		just been given this document that was marked as
19	÷	the last exhibit. And I don't have any objection to
20		the expenses, but ${ m I\hspace{1em}I}$ notice that there's things like -
21		- credit cards and interest on credit cards.
22		MR. PRITZKER: I was asking how he
23		paid for these. You objected to it.
24		THE COURT: At side bar you talk to

me.

MR. PRITZKER: I'm sorry, your Honor.

THE COURT: Okay. That document that you're referring to right now is already introduced without an objection.

MR. BOYLE: Yes, your Honor, but I'd ask the court if we could sanitize so much of it as talks about interest on credit cards. I don't have any problem with this, it lists expenses, and I agree with that, but it also contains, and I didn't see it because it's a multipage document, it talks about interest on credit cards. I don't think that's fairly part of what the document is represented to be, which is a document of his expenses. And I want to sanitize much of the credit line and things like that. I don't see how that's part of the case.

THE COURT: Well --

MR. BOYLE: -- like insurance.

THE COURT: If it's an out-of-pocket cost that he's incurred, that in effect happened to be a credit charge, is he not entitled to recover?

MR. BOYLE: Yeah, he can just -- it would be a lump sum on that, but itemizing it as a credit card or a bank, how does that --

1		THE COURT: Well, I don't think the
2		jurors that it will be a great shock to them to
3		find out that maybe he had to refinance the house
4		or he had to use credit cards. I mean, not too
5		many people can probably pull that amount of
6		money out of the air to pay for some of these. So
7		don't think it would shock the jury to see that he
8		used his credit card or whatever else he may have
9		used. But what we're talking about here is this
10		breakdown of these the expenses to date, the
11		compilation, the last one that was do you have
12		any objection to that one?
13		MR. BOYLE: No, your Honor.
14		THE COURT: Okay.
15		(END OF BENCH CONFERENCE)
16		THE COURT: So the small version of
17		the compilation can be marked as Exhibit 72.
18		(Summary of expenses received
19		and marked Exhibit Number 72.)
20	Q	Mr. Rhodes, have you kept track of the medical
21		visits your wife has had since the date of the
22		accident?
23	A	Yes, I have.

How many days have elapsed since the crash?

24

Q

1	A	Nearly 1,000 days.
2	Q	Of that, how many days has Marcia been in the
3		hospital or a rehab. center as an inpatient?
4	A	About a 120 of those days.
5	Q	Of that same 1,000 days, how many days has
6		Marcia been in the I'm sorry, how many trips to
7		the emergency room has Marcia had since the
8		crash?
9	A	We've made fourteen trips to the emergency room
10		over that period.
11	Q	How many blood tests has Marcia had?
12	A	As I remember, about forty blood tests.
13	Q	How many medical visits has Marcia had, aside
14		from the hospital?
15	A	If you add up all the doctors, all the therapists, all
16		the nursing visits, all the exercise, you add up
17		everything, I can't remember exactly the number,
18		but it's over 450.
19	Q	How many home health aide hours have been
20		expended by the home health aide providers since
21		the crash?
22	A	About 5,000.
23	Q	Were you present during the filming of a videotape
24		portraying the typical day in the life of Marcia

	i	
1		Rhodes?
2	A	Yes, I was.
. 3	Q	At the beginning and end of the video, there are
4		some family pictures occurring before the
5		accident.
6	A	Yes.
7	Q	And I'm going to ask you about those, but as the
8		video progresses, but have you reviewed that part
9		of the video?
10	A	Yes.
11	Q	And are those pictures a fair and accurate
12		representation of the family at whatever particular
13		time they portray?
14	A	Yes.
15	Q	And the video, the body of the video itself, is that
16		a fair and accurate representation of the
17		particular activities that are portrayed in that
18		video?
19	A	Yes, it is.
20	Q	Do you remember at the beginning there's some
21		pictures of Marcia and Rebecca when Rebecca
22		was very young?
23	A	Yes.
24	Q	What approximately was the age range of those

1		pictures? What was the age of Rebecca?
2	A	From about one to four or one to six, something
3		like that.
4	Q	And then there are some other pictures of
5		Rebecca and the family at Rebecca's bat mitzvah.
6	A	Yes, when she was thirteen.
7	Q	When was that?
8	A	That was on April 16th, 2001.
9	Q	And that was approximately five or six months
10		before the accident?
11	A	Yes, it was.
12		MR. PRITZKER: Your Honor, with the
13		Court's permission, I would like to have the room
14		darkened, and I would like to set up the videotape,
15		which takes approximately forty minutes.
16		THE COURT: Okay.
17		MR. PRITZKER: I will be asking Mr.
18		Rhodes a few questions during it.
19		THE COURT: If you wish to stand up,
20		you may do so.
21		MR. PRITZKER: Your Honor, could we
22		inquire if Juror 14 can because if not, there is an
23		empty chair.
24		THE COURT: Where are you going to

1		display it? Where are you going to
2		MR. PRITZKER: The screen will be
3		right about here.
4		THE COURT: All right. Why don't we
5		set it up and see if all the jurors can see it.
6		MR. PRITZKER: Thank you, your
7		Honor.
8		THE COURT: If any juror cannot see,
9		just raise your hand, and we'll change your seat.
10		MR. PRITZKER: Could we dim the
11		lights?
12		THE COURT: Let me ask if can you
13		see?
14		JUROR: Yes.
15		THE COURT: Okay. Is there anyone
16		that cannot see? Any juror? All right.
17		MR. PRITZKER: I want to be sure that
18		there's no audio on.
19		Okay.
20		(Videotape played)
21	Q	Mr. Rhodes, this is in two parts. The first date was
22		when, or the first two days?
23	A	May 29th and 30th, 2003.
24	Q	And the second date was when?

		VI-101
1	A	April 20th, 2004.
2	Q	So approximately a year late?
3	A	Yes.
4	Q	During this first period of time that's being
5		portrayed, was this the time that Marcia had her
6		pressure sores and so was confined mostly to
7		bed?
8	Α.	Yes.
9	Q	Was this also a period of time when Marcia's leg
10		was in a cast for her broken bones?
11	A	Yes, it was.
12	Q	Was this also a period of time when Marcia was at
13		one of her heaviest periods?
14	A	Yes, certainly.
15	Q	Is that what has been described in previous
16		testimony as an EZ board?
17	A	Yes.
18	Q	That helps with the transfers?
19	A	Yes, that the EZ transfer board.
20	Q	Was there a particular reason why you tried not to
21		slide Marcia across the board?
22	A	She had those pressure sores, so we couldn't rub
23		up against them. So she had to be picked up.
24	Q	Was this before Marcia had her electric
		$\cdot$

1		wheelchair?
2	A	Yes, it was.
3	Q	Mr. Rhodes, why are you putting a strap on
4		Marcia's leg as she sits on the commode?
5	A	Well, when you're paralyzed, you don't know where
6		your feet are. And since the cast is so very heavy,
7		if that cast were to slip out under her, she'd fall off
8		the commode very quickly.
9	Q	And why are you strapping in Marcia's chest?
10	A	Again, she's going to have to do digital
11		stimulation. She's going to have to reach behind
12		herself and to make a bowel movement, so she'll
13		be leaning forward, and we don't want her to fall
14		forward off the commode.
15	Q	Who are those two guys?
16	A	Those are our proud puppy dogs.
17	Q	Is Marcia particularly attached to them?
18	A	She certainly is. And they to her.
19	Q	Was the inability to slide on the EZ board
20		expanded for the whole time that she had this
21		serious pressure sore?
22	A	Yes, it did.
23	Q	And how long was that?
24	A	Ten months.

	1	
1	A	That's correct.
2	Q	This is right before Marcia's bedtime?
3	A	Yes, it is.
4	Q	Or I should say sleep time?
5	A	Yes.
6	Q	What is that you're doing?
7	A	During the night she has to wear the Lenard boots
8		to keep the sheets from putting pressure down on
9		her toes and to keep her ankle as straight as
10		possible.
11	Q	How about this time? The home health care aide
12		is gone?
13	A	Yes.
14	Q	At this period, which is last May, Marcia's now in
15		her you've got a note. Marcia now uses an
16		electric wheelchair.
17	A	Yes. Due to the tendinitis and bursitis, Dr. Roaf
18		prescribed an electric wheelchair for Marcia.
19	Q	Does she still have her casts on?
20	A	At this point in time, she's wearing the air cast
21		now.
22	Q	Which is what she wears presently?
23	A	Which is what she must wear all the time.
24	Q	What is that apparatus that she's pulling in next
	Ī	

1		to?
2	A	This is either called the standing frame, or this
3		particular is called an EasyStand.
4	Q	Is Marcia using the EasyStand right now today?
5	A	Dr. Mastriani has given an order not for Marcia
6		not to use it at the current time.
7	Q	But it's available for use when she's once again
8		physically able?
9	A	When Dr. Mastriani says it's okay for her to use.
10	Q	Now's she's exiting the second exit from the
11		house?
12	A	She is.
13	Q	And this was installed as part of the phase two
14		construction?
15	A	It was.
16	Q	Mr. Rhodes, if Marcia were to drive or when she
17		practices driving now, she has to put her
18		wheelchair where the driver's seat is, right?
19	A	That's correct.
20	Q	How does the driver's seat get moved?
21	A	I have to move it for her.
22	Q	Before this second phase of renovations, could the
23		family eat dinner together?
24	A	Only if I set up a card table in the kitchen area,

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1	Q	Taken from that night, Mr. Rhodes, that were it not
2		for the fact that this was being filmed, Marcia
3		would have been naked during this period?
4	A	Yes, that's true.
5	Q	Mr. Rhodes, is this the Depends that we had
6		marked as an Exhibit?
7	A	Yes, it is.
8	Q	And is this in the stage before it was fastened
9		together, so it's like a diaper?
10	A	Exactly.
11	Q	And are you able to do this dressing of Marcia by
12		yourself at night?
13	A	Yes, I am.
14	Q	By the way, is this the living room that we were
15		talking about?
16	A	Yes, it is.
17	Q	And at this point, this was Marcia's bedroom?
18	A	Yes.
19	Q	Mr. Rhodes, is Marcia able to reach her feet in
20		order to put warm socks or booties on?
21	A	Not at that time and not currently.
22	Q	So, in order to go outside, someone has to help her
23		get into warm clothes?
24	A	Yes, completely.

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1	Q	Particularly on her lower extremities?
2	A	Yes.
3	Q	She's putting something over her knees right now.
4		What is that?
5	A	It's called a leg brace. As a paraplegic, legs sort
6		of just extend out to each side if left to their own,
7		and they would rub up against the wheelchair.
8		And to prevent getting pressure sores there, she
9		wears a leg brace all the time.
10	Q	Now, she's just exited the handicap ramp which
11		you had installed while she was in the hospital?
12	A	Yes, yes.
13	Q	And there's the van.
14	A	Yes, it is.
15	Q	Equipped with a lift?
16	A	Yes.
17	Q	What keeps Marcia from rolling back when she's in
18		place?
19	A	It's call an easy-lock system. There's a bracket
20		coming down from the bottom of the wheelchair
21		which locks into it so she can't so the
22		wheelchair and she can't be moved.
23	Q	And where Marcia's sitting now in the front
24		passenger's seat, there's no seat there, correct?

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1		and then take it back down.
2	Q	Mr. Rhodes, when Marcia plays the piano, can she
3		use the pedals?
4	A	No, she cannot reach. She cannot use her legs to
5		reach the pedals.
6	Q	And this is now the new bedroom?
7	A	Yes, it is.
8	Q	Typically would the home health care aide be
9		there for Marcia's transfer back to bed?
10	A	No, this is always my responsibility.
11	Q	That ramp is for the dogs?
12	A	It is.
13		MR. PRITZKER: And while that's
14		being taken down, may I check my notes?
15		THE COURT: You may.
16		(Pause)
17	Q	Mr. Rhodes, going back for a minute to the
18		handicap modifications that were made on the
19		house, the first floor today, is it as large as the full
20		house was before the accident which Marcia had
21		access to?
22	A	Are you asking me the size of the renovated area
23		compared to the size of the first floor
24	Q	No. The first floor, the area that Marcia presently

1		has access to, is that larger or smaller than the
2		area that of the house that Marcia had access to
3		including the second floor and the basement prior
4		to the accident?
5	A	It's 50 percent smaller. Before the accident,
6		Marcia could go to the second floor, to the first
7		floor, to the basement. Now she's practically
8		restricted to that one area of the construction,
9		except for occasional use of a few of the other
10		rooms.
11		MR. PRITZKER: Thank you. I have no
12		further questions.
13		THE COURT: All right. Cross-
14		examination.
15	CRO	SS-EXAMINATION BY MR. CONROY:
16	Q	Mr. Rhodes, good afternoon. I think you've told us
17	į	how Rebecca is now dealing with her mom's
18		condition. And am I correct, sir, that they had a
19		warm and close relationship before the accident?
20	A	Yes.
21	Q	And today they have a warm and close
22		relationship, correct? Different, but it's warm and
23		close, correct?
24	A	I wouldn't agree with that.

		VI-139
1	Q	All right. You had mentioned that Rebecca was
2		getting some counseling now?
3	A	Yes.
4	Q	And am I correct that prior to the accident,
5		Rebecca was also getting some counseling for
6		issues that she had before the accident?
7	A	Yes.
8	Q	And you had am I correct, sir, that you also were
9		getting some counseling before the accident?
10	A	Yes.
11	Q	And I think you told us that you and Mrs. Rhodes
12		were married in 1983?
13	A	Correct.
14	Q	And you moved from the bedroom with Mrs.
15		Rhodes to a separate room thirteen years later,
16		1996?
17	A	Actually, Marcia moved into the next-door
18		bedroom.
19	Q	Some thirteen later after you were married?
20	A	1996, 1997.
21	Q	And you say this is because of a snoring issue you
22		had?
23	A	Yes.
24	Q	There are some activities that you've told us that

1		Mrs. Rhodes is doing at this time. We just saw in
2		the video she plays the piano as one of her
3		interests?
4	A	She tries very hard.
5	Q	And I think we've heard that Mrs. Rhodes is now
6	·	taking some driving lessons?
7	A	Yes.
8	Q	And the hope is Mrs. Rhodes will be driving
9		sometime in the next few months?
10	A	If you're asking me if I have that hope or does
11		Marcia have that hope or does the driving
12		instructor have that hope, I'm not sure of whom
13		you're asking that question.
14	Q	Well, Mrs. Rhodes clearly has that hope, correct?
15	A	I can't speak for her.
16	Q	Were you present when Mrs. Rhodes testified at
17		the trial?
18	A	Yes.
19	Q	Mrs. Rhodes is taking driving lessons, correct, Mr.
20		Rhodes?
21	A	Yes.
22	Q	And one of the things that's slowing down her
23		ability to get the driving license she needs is the
24		availability of the instructor, right?

1	A	Yes.
2	Q	And you had told us about some things that you
3		had done as a family prior to the accident, such as
4		Friday evenings you would enjoy dinner with the
5	i	three of you together, yourself, Rebecca and Mrs.
6		Rhodes?
7	A	Previous to the crash, yes.
8	Q	And today, you're able to still enjoy dinner at home
9		on Friday evenings, correct?
10	A	No.
11	Q	If Mrs. Rhodes would like to go out to a restaurant
12		for dinner on the weekend, there are restaurants
13		that you and she and Rebecca, if she cares to join
14		you, are able to go to dinner, correct?
15	A	If you're talking at dinner at a point past 6 p.m. or
16		past 7 p.m., the answer would be no. If you're
17		talking about an early supper, the answer would
18		be yes.
19	Q	My point is, Mr. Rhodes, that though it's different,
20		if you and she would like to go to dinner out of the
21		home, that's something you're able to do, correct?
22	A	It's very difficult to do it.
23	Q	And we saw on the video where Rebecca had
24		come home from school at approximately 3

1		o'clock, and she was showing Mr. Rhodes some of
2		her some of her work assignments. And that's a
3		thing that goes on on a fairly regular basis, unless
4		Mrs. Rhodes is at the doctor's, right?
5	A	I think so.
6	Q	As far as travel, there is a mention that Mrs.
7		Rhodes had taken a trip to Florida with Rebecca
8		and I believe the home care attendant?
9	A	Yes, that's correct.
10	Q	That was not a trip that you went on?
11	A	No, it wasn't.
12	Q	And so is that only time that Mrs. Rhodes has
13		traveled, as far as you know, that required her to
14		travel on an airplane?
15	A	Yes.
16	Q	And would I be correct, Mr. Rhodes, that you
17		would encourage Mrs. Rhodes to travel, even if it
18		had to happen by airplane, to a different facility to
19		learn training and rehabilitation, would you do
20		that?
21		MR. PRITZKER: Objection.
22		THE COURT: Sustained.
23	Q	Mr. Rhodes, I take it from your testimony that
24		there are a lot of things that you're trying to

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1		encourage Mrs. Rhodes to do on a daily basjs?
2	A	I encourage Marcia to do those things that doctors
3		have told me to encourage her to do. I myself play
4		no part in encouraging Marcia to do things or not
5		to do things. I go by what caregivers, professional
6		caregivers tell me what to do.
7	Q	Let me ask you differently. Do you understand
8		that for Mrs. Rhodes' benefit, it's important that
9		she try and condition herself, and strengthen her
10		upper body?
11	A	That's what caregivers have told me, so yes, I
12		believe that's true.
13	Q	All right. And you encourage Mrs. Rhodes to do
14		that as well?
15	A	Not to be repetitive, I don't encourage or
16	·	discourage Marcia to do those things. Those kinds
17		of activities are left to her caregivers, particularly
18		Dr. Roaf, in this case, to do those things. I don't
19		I try very hard not to not to encourage or
20		discourage Marcia from doing things.
21	Q	Well, Mr. Rhodes, what can you please tell us
22		what kind of things then do you encourage Mrs.
23		Rhodes to do?
24	Δ	Those things which doctors and other caregivers

1		have indicated that she is that she should try to
2		do.
3	Q	And can you give me some examples, please?
4	A	Aquatic therapy would be a good example, but we
5		haven't started it. Dr. Roaf has indicated that
6		would be a good idea to do that. So then I would
7		largely be responsible for taking and taking
8		Marcia to and from. But if Marcia were to decide
9		she didn't want to do it, I would neither encourage
10		her or discourage her from that activity. That
11		would be between she and between her and Dr.
12		Roaf.
13	Q	Well, do you think it would be of benefit to Mrs.
14		Rhodes that if she didn't want to do it,
15		encouragement from you may help her in this
16		context?
17	A	According to social workers that have worked with
18		me
19	Q	Yes.
20	A	they have been very specific that I not place any
21		demands on Marcia because we're there each and
22		every day, and she needs to get the
23		encouragement or, you know, the medical care
24		from the caregiver from the doctors and

1		caregivers. So I don't I do not, you know,
2		encourage or discourage her from doing these
3		things. This is this is
4	Q	Well, I take it, Mr. Rhodes, that you're trying to
5		identify goals with Mrs. Rhodes that she can work
6		towards. You do that, don't you?
7	Α.	If what you're asking is if I'm identifying goals, if
8		that's your question, then no, I'm not identifying
9		any goals for her.
10		MR. CONROY: That's all I have, your
11		Honor.
12		THE COURT: Fine. We're going to
13		suspend at this point.
14		Members of the jury, could you fold
15		up those notebooks and put them on your chairs,
16		they'll be there tomorrow morning. We'll start
17		tomorrow morning at nine o'clock. I'd ask you to
18		be in the jury room at quarter of nine.
19		My two instructions, you're not to
20		discuss the case among yourselves or with
21		anyone. You're not read anything about the case
22		or listen to any form of media. The jury may go
23		out.
24		(Jury recessed for the day)

(Without the presence of the jury, as follows:)

THE COURT: Before we suspend, I
just -- you all may be seated. You may step down,
Mr. Rhodes. I just wanted to inquire whether you
people had discussed the verdict slip.

## **WITNESS STEPS DOWN**

MR. PRITZKER: We have, your Honor, and the defendants have indicated that they are withdrawing -- excuse me -- I'm on the record. The defendants have indicated that they are withdrawing their request for a breakdown of future and past damages, but I'd appreciate it if you'd confirm that, your Honor, with the defendants.

MR. POLLOCK: Thank you. Judge, as you instructed, and requested of us, we discussed it last night, and we do want to withdraw the proposed verdict slip that we submitted on the first day of trial. And would request something along the lines of what the court first proposed, you know, without the Penske stuff.

THE COURT: Right. As a matter of fact, I've already deleted the Penske stuff.

MR. POLLOCK: Oh, okay.

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1	THE COURT: So it will just be the
2	damage portion.
3	MR. POLLOCK: Thank you.
4	MR. PRITZKER: And the plaintiff is
5	perfectly satisfied with that simpler jury verdict
6	form.
7	THE COURT: Thank you. Let me ask
8	everyone. How much longer do you anticipate?
9	Now, we have cross-examination left from Driver
10	Logistics of Mr. Rhodes, and then redirect, and
11	whatever else. How long do you're finished, Mr.
12	Conroy.
13	MR. CONROY: Yeah, once we're
14	finished with Mr. Rhodes, then from our client's
15	standpoint, GAF and Building Materials, there will
16	be no additional evidence.
17	THE COURT: All right.
18	MR. BOYLE: I would say, your Honor,
19	under thirty minutes.
20	THE COURT: On cross-examination?
21	All right. And then what about any further
22	evidence from Driver Logistics?
23	MR. BOYLE: Possibly reading
24	portions of the plaintiff's deposition into evidence.

1 -	THE COURT: All right. So we'll go to
2	the jury tomorrow.
3	MR. PRITZKER: It looks that way,
4	your Honor.
5	THE COURT: Very good. All right.
6	What I'll do then is why don't we meet tomorrow
7	morning about 8:30, and we'll just go over the
8	charge, and then we'll be all set.
9	But we will take after we conclude
10	the evidence, we will then take a recess, to give
11	you folks a little opportunity to put things
12	together, and then we'll go into final arguments
13	and instructions.
14	MR. PRITZKER: Your Honor, may I
15	have permission to have the paralegal supplement
16	the exhibit book with today's exhibit?
17	THE COURT: You may.
18	All right. Have a nice afternoon.
19	(HEARING ADJOURNED)
20	****

1	CERTIFICATE
2	
3	
4	COMMONWEALTH OF MASSACHUSETTS
5	NORFOLK, ss.
6	
7	I, Dawna M. Chapin, an Official Court
8	Reporter in and for the Commonwealth of Massachusetts,
9	do hereby certify that the foregoing transcript represents
10	a complete, accurate and true copy of my notes taken in
11	the above-entitled matter, to the best of my knowledge,
12	skill, and ability.
13 14	"Couna M. Ch_
15	Dawna M. Chapin
16	
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