

1 The only purpose of the opening statement is
2 to give you a general outline of the case and
3 what it's about so you will have a better
4 understanding how each piece of evidence fits
5 into it, subject, of course, to your
6 evaluation of the evidence as to its
7 credibility, its accuracy and weight.

8 You're not to conclude that counsel
9 will necessarily be able to prove what they
10 say they expect to prove, nor that the Court
11 will necessarily permit such evidence to be
12 introduced.

13 Now, in conclusion, these
14 preliminary instructions are complete, and as
15 I have indicated earlier, counsel for
16 plaintiff now may present an opening
17 statement.

18 Thank you for your attention.

19 Counsel, you may.

20 MR. STROKOVSKY: Permission to
21 approach the podium?

22 THE COURT: You may proceed,
23 Counsel.

24 MR. STROKOVSKY: It's January 22,
25 2019. Eddie Reginald Parks is being taken

1 back for surgery at Temple University
2 Hospital. His right leg is about to be
3 amputated through his knee. An incision is
4 made through his skin and tissue at his knee
5 and through his ligaments and joint at the
6 knee until the lower part of his leg is
7 removed and disposed of. Just like that,
8 everything changed.

9 Eddie was an active 27-year-old. He
10 had a job in the medical industry. He was a
11 certified nurse's assistant. He had a passion
12 for cooking and he had dreams and goals to
13 pursue that passion and one day make it a
14 career. And he had future plans with his
15 girlfriend Bree. They just found out that
16 Bree was pregnant. Eddie was going to be a
17 dad.

18 This amputation took Eddie's prime
19 from him and replaced it with chronic pain,
20 hardship and strained relationships with his
21 family, his friends and his son. He will
22 always be without his leg. He will always be
23 disfigured. And he will always be haunted by
24 what happened to him.

25 Eddie Parks' leg was cut off because

1 of the medical malpractice by defendants,
2 Temple University Hospital, Incorporated and
3 Defendant Dr. Lorei. No corporation or
4 physician is above the law. The defendants
5 must be held accountable for shattering this
6 young father's life.

7 Good morning, ladies and gentlemen
8 of the jury. This here is trial technician
9 Lee Bitman. My name once again is Jordan
10 Strokovsky. And I have the honor and
11 privilege of representing the plaintiff in
12 this case, Eddie Reginald Parks.

13 It's been almost four and a half
14 years since he lost his leg. He's waited a
15 long time to be here. An we can't thank you
16 enough, ladies and gentlemen of the jury,
17 because without you, none of this is possible.
18 You, as the jury, serve as the conscience of
19 our community. And it is you, the jury, that
20 will hold defendants accountable.

21 Now, this trial is different than
22 most personal injury trials. Most cases it
23 would be my job, plaintiff, to prove that the
24 other side, the defendant, made mistakes and
25 there were injuries and harm as a result. But

1 now today defendants admit liability. That
2 means they admit fault and they admit that
3 their malpractice, their negligence caused Mr.
4 Parks to lose his leg. That will not be an
5 issue at this trial. The sole issue at this
6 trial is determining a fair and full
7 accounting of everything that Mr. Parks has
8 lost and everything that he will be dealing
9 with for the rest of his life.

10 This, as you know, this is a civil
11 case. As you know, you don't have the ability
12 to give Mr. Parks his leg back. But you do
13 have the ability to give him justice by
14 delivering a verdict that fairly and fully
15 accounts for every bit of his loss. And at
16 the end of this trial you will be instructed
17 that you must fully and fairly compensate Mr.
18 Parks for all of his past and future pain and
19 suffering, embarrassment and humiliation, loss
20 of life's pleasures and disfigurement. And
21 all of his future medical costs.

22 And so to understand this trial, Mr.
23 Parks' pain and suffering, you're going to
24 learn about who he was before all this
25 happened. You're going to hear about his

1 horrific experience at Temple University
2 Hospital and you're going to hear about how he
3 has been fighting to live his life every
4 single day since.

5 So let's get started.

6 Prior to this, Eddie was an
7 otherwise healthy and active 27-year-old, did
8 normal things 27-year-olds do. Go out with
9 friends, be outside, play sports. Once in a
10 while ride his bike, go for a walk. And as I
11 already mentioned, he was a certified nursing
12 assistant. He got into that field because his
13 mom had that job before and Eddie really
14 enjoyed it. It was fulfilling work for him.

15 Eddie before all this very much so
16 was a happy-go-lucky guy, a very much so
17 nurturing person and he enjoyed helping people
18 and he enjoyed stories that he would hear from
19 his patients and the experience that they
20 would give him, the wisdom. And he also would
21 treat amputees, which is a bit ironic being
22 here today.

23 Now, Eddie got into being a CNA from
24 his mom --

25 MR. HOSMER: Your Honor, I

1 apologize, I have to object here.

2 THE COURT: Overruled. You can be
3 seated.

4 MR. HOSMER: There is no claim --

5 THE COURT: I beg your pardon.
6 Counsel, please don't respond with some
7 editorial comment after I make a ruling.

8 MR. HOSMER: Okay.

9 MR. STROKOVSKY: So Eddie got into
10 being a CNA from his mom. His passion was
11 cooking and he got that from his dad. Eddie
12 loved to cook. And about a year before all
13 this happened, he would start selling platters
14 in his neighborhood. He wasn't making any
15 money off of it, but he was on the verge of
16 becoming something. And it was his dream, it
17 was his plan to be successful enough with the
18 platters so he could get a food truck, and
19 from a food truck of getting a
20 brick-and-mortar restaurant.

21 And, also, at the time, or prior to
22 everything happening with Temple, Eddie was in
23 a relationship with his girlfriend Breeanca,
24 who we call Bree. They had a solid
25 relationship, and one month before coming to

1 Temple Bree and Eddie found out that Bree was
2 pregnant. Eddie was going to be a dad.

3 He was naturally excited, blessed
4 and they had plans. Eddie's got to work more.
5 He doesn't want Bree to work while she's
6 pregnant. Eddie has to pick up his cooking.
7 Eddie has got to make moves to be there for
8 his family, to build a family for the future.
9 So everything was mapped out. Keep working
10 hard, help people, keep cooking and be the
11 rock for his family and for his baby.

12 But then in late December 2018,
13 everything he knew would be shattered.
14 Defendants Temple and Dr. Lorei, they admit
15 fault. And their negligence caused Mr. Parks
16 to wake up in early January and see that the
17 leg injury that he came into was not fixed,
18 rather it was a lot worse. Part of his leg,
19 his muscles started to die and he had two
20 large open incisions on his leg, some over a
21 foot long and at one point 6 inches deep, and
22 for three weeks before his amputation, he
23 would be stuck in a hospital bed, looking at
24 his leg sliced open like that. And you will
25 see a picture of what his leg looked like in

1 that hospital bed.

2 And during those three weeks, his
3 leg, his muscle would continue to die more and
4 more and more. But he was still hopeful that
5 the leg could be saved. And during this time
6 period, he underwent six debridement and
7 washout procedures. That's a procedure where
8 he's intubated. He is taken back for surgery.
9 They wash out his wounds and they remove dead
10 tissue.

11 After removing dead tissue, after
12 dead tissue, after dead tissue, after fighting
13 to save his leg, being hopeful that his leg
14 will be saved, he is given the news: Mr.
15 Parks, you have two options. Either your leg
16 is amputated or you're going to die.

17 Sadly, Mr. Parks had to choose to
18 lose his leg. He wasn't going to give up on
19 his son.

20 And then he wakes up from his
21 amputation surgery that happened on January 22
22 and he sees his leg is gone. There is horror.
23 There is loss. There is grief. And he is in
24 pain for the three weeks prior. He's in
25 severe pain with his leg sliced open like

1 that.

2 After the amputation, he is still in
3 severe pain. But it's a little bit different.
4 He has what is called "residual limb pain,"
5 which is pain in part of his leg that still
6 remains, starting at the stump and going up
7 the rest of his leg.

8 He also noticed almost immediately
9 after his surgery something called "phantom
10 limb pain." That's where you actually feel
11 the leg that is no longer there. Mr. Parks,
12 Eddie, can feel his toes wiggling that are no
13 longer there. That's why they call it phantom
14 limb pain. It's like a ghost. It's a
15 supernatural experience.

16 And you will hear in this case that
17 where this amputation was performed is
18 significant. It was amputated through the
19 knee. Typically, amputations are either below
20 the knee or above the knee. Eddie's case it
21 was through the knee, and through-the-knee
22 amputees are essentially considered
23 above-the-knee amputees for purposes of what
24 type of prosthetic you need. And that's
25 important because below-the-knee amputees --

1 don't get me wrong, any leg amputation is
2 horrific and catastrophic -- but
3 below-the-knee amputees it's easier to get
4 prosthetics. It's easier to move around. But
5 in Eddie's case, again, he's through the knee
6 so he's considered an above-the-knee amputee
7 and it makes it much more difficult for the
8 type of prosthetic that he needs and for
9 moving around. You're going to hear about
10 that from our expert who is a physiatrist who
11 devotes her life work to amputees, Dr. Mary
12 Ann Miknevich.

13 You're also going to see a photo of
14 Eddie Parks' limb just after the surgery. You
15 will see the extensive incisions. And not
16 only is it horrible to look at, but as Dr.
17 Miknevich will explain, it's also a
18 significant source of scar tissue and
19 something called "neuromas" because there are
20 so many nerves around the knee and all of them
21 were cut and all of those cut nerves are
22 sources for pain.

23 The phantom limb pain I just
24 mentioned Eddie has been dealing with that
25 ever since, ever since he's been dealing with

1 that. And what is worse than that, though, is
2 his residual limb pain. That pain for him has
3 been a constant. He can always feel it. He
4 is essentially always in pain. It's just a
5 matter of degree. Is it manageable where he
6 can try to put on a smile and try to do
7 things? Is it bad where he is very limited in
8 what he can do? Or is it unbearable where at
9 times it brings him to a point where he
10 doesn't want to do anything but just roll in a
11 ball in his bed and hope the pain goes away
12 while rubbing his limb.

13 After his amputation, Eddie was
14 still at the hospital for about another two
15 and a half weeks. Those were a tough two and
16 a half weeks that he had to endure every day
17 at the hospital. And then he got to leave.

18 He was excited to leave. He wanted
19 to get out of Temple University Hospital. But
20 he was also scared. What was he going to do?
21 What was going to go on with his life? How is
22 he going to take care of Bree and their baby
23 and work? How is he going to move around?

24 For the first year, Eddie didn't
25 have a prosthetic. So he went home and he

1 basically went from being a fully active
2 independent person to being a child again,
3 almost like a baby at first. Couldn't move.
4 He needed his girlfriend or his mom or others
5 to help him get in the bathtub, to help him go
6 to the bathroom. He couldn't go downstairs to
7 get food or water. He essentially had to rely
8 on everyone for most activities of daily
9 living, and there were times where nobody
10 would be around.

11 Still dealing with the pain, still
12 having issues sleeping every night, he has
13 issues sleeping, basically. It's something he
14 still deals with today. It's because of the
15 pain.

16 And Bree, she's pregnant during this
17 whole time. So, again, instead of him being
18 able to help Bree, make Bree's life easier,
19 Bree now has to help him. Eddie can't even go
20 to doctor's appointments with Bree.

21 But Zahir, who Eddie nicknamed
22 Ziggy, he's born in August of 2019. That's a
23 great moment. Such a blessed day. And Ziggy
24 is his life. It's his pride. But there are
25 issues right away with that. Because Eddie

1 wants to be the best possible dad he can, and
2 he is being the best possible dad he can be.
3 But because of his amputation, there are a lot
4 of things he can't do that he would otherwise
5 like to, including when his baby is crying in
6 the middle of the night, Eddie can't get out
7 of bed and go over to the baby and rock the
8 baby to sleep. Bree has to do it.

9 So Eddie is getting around. He is
10 hopping on one foot, and you will hear Eddie
11 had a fair amount of falls during that first
12 year.

13 So 2019, had some bright moments,
14 still an incredibly painful and dark year for
15 Eddie.

16 2020, there are some progress.
17 There is some hope. The swelling and
18 incisions of his leg are healed, and he goes
19 through the process later in 2019, to get
20 approved for his first leg. So in 2020, end
21 of 2019, early 2020, he gets casted, his limb
22 gets casted and he gets his first prosthetic
23 leg. It's very limited, though, in its use.
24 Eddie is uncomfortable wearing it, thinks he
25 looks like a peg-leg.

1 And it's tough. You have to learn
2 how to use the prosthetic. So he goes to
3 physical therapy. Reaches a point where he
4 can use the prosthetic and so he has some
5 mobility, but not much. He is walking maybe
6 four blocks before he is in pain and can't
7 walk anymore.

8 Still not working. He is still lost
9 without purpose in his life and he still feels
10 stuck and bored.

11 In 2021, he does move on to a more
12 advanced leg and he gets a new leg and goes
13 through that whole process all over again.
14 Gets fitted for it. Goes through physical
15 therapy. And now, give or take, two years
16 later, his mobility granted is a lot better
17 than it once was, but it's still significantly
18 limited. Eddie can walk about 25 minutes at a
19 time before he needs to rest, sit down, take
20 some medicine for his pain. Still having pain
21 constantly. He is still having sleep issues.
22 Still has very limited endurance. There are
23 days where he can't do much of anything
24 because he's in so much pain. There are other
25 days where he tries to be as active as

1 possible, but then he becomes too active and
2 that's a source of pain. Then there are times
3 where the weather kicks in and that's another
4 source of his pain.

5 Still not working. Not able to cook
6 the way he used to. Does care for his son.
7 Takes care of his son, but at times not as
8 well as he would like.

9 And in this case, you're going to
10 hear from Eddie, his parents. You're going to
11 hear from Bree. You will hear about his pain
12 and suffering, what it felt like to have this
13 happen to him. To not be able to work or
14 pursue his dream of cooking, his strained
15 relationships between his family and friends
16 and with his son and his mood. He still tries
17 to be a happy-go-lucky guy and put on a smile,
18 but there are times he just can't. His
19 patience sometimes is shot. He gets irritable
20 easily. He doesn't want to do that. It gives
21 him shame when that happens, but it's just
22 tough for him to deal with the pain and
23 limitations and lack of sleep every single
24 day.

25 And in this case you're going to

1 hear from, as I mentioned, Dr. Miknevich.
2 She's what is called a "physiatrist." Her
3 life's work is serving amputees. She's been
4 doing it for almost 40 years.

5 So she evaluated Eddie. She talked
6 with Eddie. She reviewed Eddie's treatment
7 records. She came up with a list of
8 conditions that Eddie has because of his
9 amputation. And she did what she does with
10 her patients, which is provide an outline of
11 future recommendations of medical care that
12 Eddie is going to need for the rest of his
13 life. He's going to need prosthetics for the
14 rest of his life. He will need to follow up
15 with doctors for the rest of his life. Get
16 some testing done for the rest of his life.
17 Need some procedures to hopefully help reduce
18 some of his pain later in life.

19 And this case is for Eddie's entire
20 life. He's expected to live into his 70s.
21 He's 32 right now. So when he reaches the age
22 of 60, he will start needing some help in the
23 home because of his amputation.

24 And you're also going to hear from a
25 life care plan expert. That's Alex Karras.

1 What he does is take the future
2 recommendations by Dr. Miknevich and he prices
3 it out. So you will hear from him tomorrow.

4 And now the value of Eddie's medical
5 care is all adjusted to future medical costs.
6 It's adjusted to inflation, which I'm sure
7 everyone has been hearing a lot of in the news
8 lately. So we will bring in an economist,
9 Andrew Verzilli. He will take the present day
10 value that Alex Karras provides and map out
11 what that value is over the next 40-plus
12 years. And that value is approximately \$6
13 million for future medical care.

14 You might be wondering if they admit
15 fault, they admit they caused this amputation
16 and debridement procedures, why are we here?
17 What are they going to argue? There is no
18 dispute that he's forever disfigured. I don't
19 think they're going to dispute that he will be
20 in pain. They're not going to dispute he
21 needs prosthetics for the rest of his life. I
22 presume they will claim his pain isn't as bad
23 as the plaintiff says it is, or maybe they'll
24 cite to some of the hurdles he has overcome
25 over the last four-plus years, like he's more

1 active now than he was at the beginning. He
2 can drive. He can ride a bike. Once he did,
3 at least around the block. He can take care
4 of his son to some degree. And sometimes he
5 can wear his leg all day. And he goes on a
6 trip once year.

7 But it's a nice thought thinking
8 that Eddie is just going to get better and
9 better over time, but I submit after you hear
10 the evidence in this case, you realize that's
11 not what is going to happen. And I urge you
12 to use your common sense when evaluating the
13 recommendations of the plaintiff's experts and
14 the defense experts.

15 But I also want to point out that
16 the expert testimony is really just about
17 primarily one component of this case, which is
18 future medical costs. But there are several
19 more components for you to consider, which is
20 his lifetime of pain and suffering,
21 embarrassment and humiliation, loss of life's
22 pleasures and disfigurement, as well as those
23 things for the last four-plus years.

24 Eddie Parks was wronged by Temple
25 University Hospital and Dr. Lorei. We are not

1 asking you to punish them. We are not asking
2 you for a handout. All we are asking is for
3 an honest and thorough assessment of
4 everything that he has gone through and
5 everything that he will go through for the
6 rest of his long life.

7 And not only is doing that your duty
8 under the law as a juror, but by doing that,
9 you are telling Mr. Parks that he is deserving
10 of justice, and you are telling Eddie Parks
11 and defendants in this case no one is above
12 the law and defendants are being held
13 accountable for shattering this young father's
14 life.

15 Thank you.

16 THE COURT: Thank you, Counsel.

17 Counsel, you may address.

18 MR. HOSMER: Thank you, Your Honor.

19 Good morning, ladies and gentlemen.

20 I think everyone who is sitting here
21 is old enough and experienced enough to know
22 that whenever human beings get involved in an
23 endeavor, mistakes can be made. We see it in
24 our families, our governments, our churches,
25 and despite all of the successes we hear from

1 time to time through the media in medicine,
2 medical providers do make mistakes.

3 I'm here on behalf of Dr. Lorei and
4 Temple University Hospital to tell you today
5 that as Mr. Strokovsky correctly pointed out,
6 on December 31, 2018, Dr. Lorei did not in a
7 timely fashion adequately appreciate the fact
8 that Mr. Parks had a popliteal artery injury
9 that unfortunately cut off the flow of blood
10 to his lower extremity, and because of that,
11 he did have to undergo an amputation.

12 Dr. Lorei regrets the mistake was
13 made. And on his behalf, I extend his
14 sympathies to Mr. Parks and his family for all
15 of the difficulties that he has gone through.

16 You may, as Mr. Strokovsky said, ask
17 yourselves why are we here if there has been
18 an admission of a mistake, as well as the fact
19 that it resulted in an amputation. Well, the
20 reason is, ladies and gentlemen, there is
21 another aspect to any kind of personal injury
22 case, and that is that even if there is a
23 mistake and an admission of a mistake, there
24 still has to be a determination as to what
25 constitutes fair and adequate compensation.

1 And that is what, I believe, Judge Crumlish
2 will charge you on at the conclusion of this
3 case.

4 It's you, the jury, that has to
5 determine what constitutes fair and adequate
6 compensation for Mr. Parks because it's
7 something that the plaintiff and the defendant
8 cannot agree on. We agree on the mistake
9 being made unfortunately. We agree that it
10 unfortunately resulted in an amputation. But
11 we can't agree as to what the law requires you
12 to determine what constitutes fair and
13 adequate compensation.

14 So to that end, ladies and
15 gentlemen, you're going to hear, as
16 Mr. Strokovsky pointed out, you're going to
17 hear from the plaintiff and some of his family
18 members and some of his experts, and in all
19 likelihood you will hear from experts on
20 behalf of the defendants. You're going to
21 hear from a physiatrist, a physical medicine
22 and rehabilitation doctor by name of Frank
23 Sarlow. He's Board certified in psychiatry and
24 practices in the Philadelphia area;
25 specifically, in Newark and Wilmington,

1 Delaware.

2 You will probably hear from a life
3 care planner by the name of Kathleen Kuntz and
4 an economist individual with a doctorate in
5 economics by the name of Gerard Olson.

6 The point of all that, ladies and
7 gentlemen, from Mr. Strokovsky and myself will
8 be, again, to give you the facts in order to
9 make a determination as to what constitutes
10 fair and adequate compensation. That may at
11 times, ladies and gentlemen, require me,
12 perhaps Mr. Strokovsky, to ask pointed or
13 sharp questions of the witnesses in the case.
14 Please understand that if that happens, sharp
15 or pointed questions have to be asked, it's
16 not because we don't think that Mr. Parks
17 doesn't deserve fair and adequate compensation
18 he does. It's not because we don't have
19 sympathy for Mr. Parks, because we do. But in
20 order for you sometimes to get all the facts
21 necessary, it's necessary to ask questions of
22 opposing witnesses so everything is brought
23 out so you can hear everything that there is
24 to hear in order to make that determination as
25 to what constitutes fair and adequate

1 compensation.

2 I hasten to add in light of
3 Mr. Strokovsky's comment there is no claim, we
4 have an agreement with the plaintiff there is
5 no claim here for loss of earnings or lost
6 future earning capacity or past lost earnings.

7 So what is the evidence that you're
8 going to hear from the defense side? Well,
9 ladies and gentlemen, as I said, you're going
10 to hear from Dr. Sarlow. What Dr. Sarlow will
11 tell you, among other things, ladies and
12 gentlemen, is that among the various knee
13 amputation procedures that are available, what
14 Mr. Parks had was a right knee
15 disarticulation. Of the procedures that are
16 available that, obviously, no one wants to
17 have a leg amputated, but the more
18 advantageous, for lack of a better word, this
19 is a more advantageous procedure in the sense
20 that it retained more bone, muscle and tissue
21 than some of the other amputation procedures
22 that are available.

23 Why that is important, ladies and
24 gentlemen, is it can lead to, and more often
25 than not does, greater functionality on the

1 part of the amputee.

2 That's what you're going to hear
3 from the witnesses for the defense concerning
4 Mr. Parks' functionality. He has regained,
5 ladies and gentlemen, a fair amount of
6 functionality. You're going to hear that from
7 our witnesses.

8 Dr. Sarlow, ladies and gentlemen,
9 will tell you that he examined Mr. Parks on
10 two occasions; one back in 2021, and another
11 time about three or four weeks ago, two or
12 three weeks ago. He will tell you, ladies and
13 gentlemen, that he reviewed the medical
14 records of Mr. Parks, and he will tell you,
15 ladies and gentlemen, that Mr. Parks has had a
16 physiatrist managing him since 2019, by the
17 name of Bradley Tucker at Penn.

18 He will tell you, ladies and
19 gentlemen, that he agrees with almost
20 everything that Dr. Tucker -- you will hear
21 Dr. Tucker's records, all of the conclusions
22 that Dr. Tucker, the managing physician for
23 Mr. Parks, believes to be true.

24 You will hear that Mr. Parks is a K3
25 ambulator. You will hear Dr. Sarlow and

1 perhaps Dr. Miknevich describe to you what a
2 K3 ambulator is.

3 Ambulation, ladies and gentlemen, as
4 I understand it, is rated on a scale of zero
5 to four. It's called K0 to K4. K0 being
6 unable to walk and K4 being an individual who
7 can participate in high energy and high impact
8 kinds of activities, mountain climber,
9 sporting, heavy impact sports.

10 Mr. Parks has been rated by
11 Dr. Tucker and by Dr. Sarlow as a K3
12 ambulator. K3, obviously, is one step below a
13 K4 ambulator, and K3 ambulator, I think the
14 state-of-the-art definition means that it's an
15 individual who has the ability to traverse the
16 environmental barriers that we encounter on a
17 day-to-day basis; specifically, hills, ramps,
18 curbs, steps, that kind of thing, at varying
19 degrees of speed and cadence.

20 You will hear, ladies and gentlemen,
21 that Mr. Parks has what is called a "K3
22 microprocessor prosthesis." It's one of those
23 state-of-the-art, very sophisticated, very
24 advanced prosthesis that actually is
25 programmable to allow the amputee to perform

1 all sorts of activities with his prosthesis,
2 including going to the gym, jog on a
3 treadmill, swimming, and all the other things
4 that Mr. Parks, you will hear, has been able
5 to do.

6 He's been able to go on vacations;
7 las Vegas, New Orleans, Atlantic City,
8 Florida. He goes to the gym. He jogs on a
9 treadmill. Does aerobics.

10 Dr. Tucker, you will hear, ladies
11 and gentlemen, has described Mr. Parks as
12 early as August of 2021 as, quote, highly
13 functional.

14 Dr. Sarlow will point out all of
15 those things in his records. He will also
16 tell you, ladies and gentlemen, that in his
17 opinion, to a reasonable degree of medical
18 certainty, Mr. Parks, thankfully, is capable
19 of performing all of the activities that he
20 was doing before the amputation currently.

21 You will hear, ladies and gentlemen,
22 also, from probably from our life care
23 planner, her name is Kathleen Kuntz. Just
24 like the plaintiff's expert life care planner,
25 Ms. Kuntz will come in and she will tell you

1 based on what Dr. Sarlow feels Mr. Parks will
2 need as to future medical care, what that care
3 is and what the present day cost of it is.

4 Dr. Sarlow will tell you that not
5 withstanding his high functionality,
6 unfortunately, Mr. Parks will need future
7 medical care. He has to have his prosthesis
8 replaced, I think, every five or seven years.
9 He will have to have some incidence of
10 physical therapy to accommodate that new
11 prosthesis each time he gets one. And the
12 life care planner will explain to you what
13 future medical care he will need and what the
14 present day cost of it is.

15 After that, you will probably hear
16 from Gerard Olson, a doctor in economics. Dr.
17 Olson will take the medical care that is
18 prognosticated by Dr. Sarlow and Ms. Kuntz and
19 apply economic principles to it, ladies and
20 gentlemen, and tell you what the cost of the
21 future medical care will be. Suffice it to
22 say, at this point, Ms. Kuntz' opinions
23 concerning the extent and duration of care
24 that Mr. Parks will need will be significantly
25 less than what Mr. Karras will prognosticate

1 for you with respect to future medical care.
2 And the numbers that you may hear from Dr.
3 Olson will be significantly less than what you
4 will hear from their economist, Mr. Verzilli.

5 Now, ladies and gentlemen, as I
6 pointed out to you before, and as
7 Mr. Strokovsky correctly pointed out, the
8 issue before you is what is fair and adequate
9 compensation in this case. As I pointed out
10 to you, Mr. Parks is highly functional. He is
11 not taking any pain medications. And it will
12 be your duty, as charged to you by Judge
13 Crumlish, to determine what is fair and
14 adequate compensation.

15 You probably heard me use, and it
16 was not unintentional, the term "fair and
17 adequate compensation" several times during my
18 past seven minutes here. Fair and adequate
19 compensation, ladies and gentlemen, will be
20 charged to you. I believe that's the language
21 that will be used by Dr. Crumlish. We kind of
22 know these things in advance.

23 The word "fair," ladies and
24 gentlemen, implies just that. Suggesting just
25 that fairness, as Mr. Strokovsky correctly

1 pointed out, it's not to punish. The idea is
2 to be fair, to be fair to Mr. Parks. We will
3 request that you be fair. That implies,
4 ladies and gentlemen, looking at the evidence,
5 evaluating it in an objective dispassionate
6 and analytic way. Devoid of sympathy and
7 overt emotion.

8 So I will return in my closing, I
9 will be back here in a couple of days, to ask
10 you to return a verdict for Mr. Parks that is
11 in accordance with the law: Fair and
12 adequate. That is fair to him, fair to Dr.
13 Lorei and adequate to compensate him for his
14 needs in the future.

15 Thank you for your time, patience
16 and attention.

17 THE COURT: Thank you, Counsel.
18 Counsel, you may call your first
19 witness.

20 MR. STROKOVSKY: Thank you, Your
21 Honor.

22 Plaintiff calls, we call plaintiff's
23 father, Lisbon Eddie Parks.

24 THE CRIER: State your name.

25 THE WITNESS: Lisbon, L-I-S-B-O-N,