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Nevyas, M.D. MR. KAFRISSEN: Well, we haven't got to

that yet.
MS. POST: He just said that, so I think the

MR. KAFRISSEN: What I'm asking is his

general knowledge.
MS. POST: That wasn't your question. Your question was do people or -- I'm paraphrasing, but does one, in evaluating a patient for Lasik, measure corneal thickness, patient for Lasik, measure corneal thickness, and I think that is venturing into the expert issue. If you want to know whether Doctor Nevyas, in 1997, whether that was his practice to do so, I'll allow him to answer that, but whether it's should someone else do it is not an appropriate question, again, considering the fact that he's already testified that he wasn't involved.

MS. NEWMAN: And I would object to the question was it his practice in 1997 because it's irrelevant to this case.

MR. KAFRISSEN: Okay.

As of January of 1997, when you were planning a Simpkins Court Reporting (215) 676-4921

Nevyas, M.D. Lasik procedure, how, if at all, did you consider corneal thickness?

MS. NEWMAN: Objection.
MS. POST: You can answer.
THE WITNESS: I don't recall
specifically in January of 1997 what we did, but, obviously, we examined the patient and if the cornea looked adequately thick, we weren't overly concerned about it. As soon as we had the means to measure ultrasonically, we did since that's the more accurate way to measure corneal thickness, but optically with a slitlamp beam we could gauge thickness, and we did gauge it always. If a cornea looked quite thin, we would be concerned, but it was only after that time that cases became reported that established one should leave 200 to 250 microns.

BY MR. KAFRISSEN:

Q. Now, when what do you mean? Now, when you say it was only after that time,

23 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 22 12 22 3 24 A. There have been reports over the past few years urging us to leave more than 200 or 250 microns in order to avoid the possibility, not probability but the Simpkins Court Reporting (215) 676-4921

Nevyas, M.D. possibility of ectasia where one could have iatrogenic keratoconus where the cornea might not have its normal sphericity but rather be somewhat cone-shaped, and there have been a few cases reported of iatrogenic — that its physician caused - keratoconus from leaving too little cornea. These cases I've seen in the literature have been mostly over the past few years, and I cannot remember exactly whether I had seen cases reported or whether there had been editorials on it in '97 or whether it was '98. I'm not sure, '99. Q.

MS. NEWMAN: Sam, can I go over something that he just said because I missed

the answer.

MR. KAFRISSEN: Sure.

MS. NEWMAN: You said that in looking at the records in July of 1997, the corneas were measured postoperatively, and did you give a number for how many microns they were post-

THE WITNESS: Yes.
MS. POST: He did not give a number.
THE WITNESS: The record had a number.
MS. NEWMAN: Then I won't interject.
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BY MR. KAFRISSEN:

Q. What's the number?

A. The right eye was 447 microns and the left eye was 580 microns. And I might add for clarity that the two eyes are almost always very similar so that we can pretty well assume the right eye prior to any surgery had about 580, and that would just about be what we would expect for the amount of correction.

MS. NEWMAN: Sorry to interrupt.
BY MR. KAFRISSEN:

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Q. I want to clarify one thing. That was in July that measurement was made?
A. Of '97.

11 12 13 14 15 Q. Of '97. Would the thickness of the measurement change at all by virtue of the fact that she had already had a lens replacement at that point in the left eye?

16 17 18 19 Q. Now, prior to March 20th of 1997, which is, from my review of the records, the first Lasik procedure on Cheryl Fiorelli's right eye, had you ever examined or evaluated Cheryl?

20 21 22 23 24 I don't recall ever examining her before then, According to the records, I have not. Q. Okay. Do you have any independent recollection

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of Cheryl?

123456789 I remember her, yes. What do you remember about her? Q. A. She was a thin, young woman, very anxious. Q. Okay. When do you first see in the records that you had contact with Cheryl Fiorelli?

I'd have to look in the records to tell that.

A. According to the record, I first saw her on March 21st of '97, the day after her Lasik procedure. 10

Okay. Now, the Lasik procedure that was performed, we have the records from the Delaware Valley Laser Surgery Eye Institute, or actually Laser Surgery Institute, and in the records you were listed as the assistant in the March 20, 1997 Lasik procedure, and I'm 13

looking at the operative form.

Okay.
May I look at it. I can't find it in my pile.
MS. NEWMAN: Off the record.
(Discussion held off the record.)

16 17 18 19 20 21 22 23 24 BY MR. KAFRISSEN:

Q. Now, before I get to that, do you have any recollection of ever discussing Cheryl Fiorelli with Simpkins Court Reporting (215) 676-4921 36

Nevyas, M.D. Doctor Nevyas-Wallace prior to March 20th of 1997? 123

A. No.
Q. Do you have any recollection, prior to March
20th of 1997, of having any contact with Cheryl Fiorelli?
A. I have no recollection.

Q. Okay. Is there anything in your records that you've seen that indicates that you had any contact or dis — any contact with Cheryl Fiorelli or any

discussions with anyone about her prior to the surgery in March 20, 1997? 10

11 12 13 Did you ever, prior to the March 20 -- the performance of the procedure on March 20, did you ever

14 15 make an independent evaluation of Cheryl as a surgical 16 17

Q. Did you, prior to the March 20 performance of the procedure, ever aid Doctor Nevyas-Wallace in making an evaluation of Cheryl as a surgical candidate?

Ą. I have no recollection of such.

20 21 22 23 24 Q. Okay.
A. We practice in the same office. I guess, theoretically, it's possible I could have seen her at some point in the office, but I've never actually seen Simpkins Court Reporting (215) 676-4921

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