

INDEX

Page

DEFENDANT'S WITNESS:

THOMAS J. CONAHAN, M.D.

Direct Examination 2

Voir Dire Examination 12

* * * * *

1 (Whereupon, the following proceedings were
2 held in open court:)

3 * * * * *

4 (THOMAS J. CONAHAN, M.D., was called as a
5 witness on behalf of the Defendant, was sworn and
6 testified as follows:)

7 THE COURT: Doctor Conahan, please state
8 your name and address for the record.

9 THE WITNESS: I am Thomas J. Conahan. My
10 address is 108 North Lexington Avenue, Havertown,
11 Pennsylvania.

12 THE COURT: You may take the witness
13 stand.

14 DIRECT EXAMINATION

15 BY MR. BADOWSKI:

16 Q Good afternoon. What is your profession,
17 please?

18 A I am an anesthesiologist and I am
19 Associate Professor of Anesthesia at University of
20 Pennsylvania.

21 Q Would you give us your definition, for
22 the benefit of the jury and myself, what an
23 anesthesiologist is and what you do on a day-to-day
24 basis?

25 A The practice of anesthesia involves what

1 we generally think of as rendering patients
2 insensitive to pain during operations. It also
3 involves resuscitation. It involves pain therapy in
4 many aspects. It involves the pre-operative care of
5 patients, including pre-operative assessment,
6 determining that somebody is able to be anesthetized
7 and to receive the administration of anesthesia, and
8 the supervision and the recovery from that
9 anesthesia, the administration of anesthesia for
10 labor and other painful procedures.

11 And you ask what I do during my day?

12 Q As part of all that does that include
13 airway management and intubation of patients?

14 A Absolutely. Airway management,
15 intubation of patients is, per se, part of the
16 day-to-day administration in the operating room. And
17 the provision of intensive care services and critical
18 care, which anesthetists also are involved in.

19 Q Where do you currently practice, Doctor?

20 A I practice at the hospital at University
21 of Pennsylvania, Philadelphia.

22 Q How long have you been there?

23 A I have been there at this time
24 twenty-three years.

25 Q And in what capacity do you practice?

1 A I'm an attending physician on the staff
2 of the hospital. I'm a faculty member of the
3 University of Pennsylvania. I practice there and I
4 also teach in that institution.

5 Q How much of your current practice now is
6 devoted to the clinical end of anesthesiology and how
7 much is devoted to your teaching responsibilities?

8 A They are very closely intertwined. I
9 teach in the operating room. So that about sixty
10 percent of my entire time is spent in the operating
11 room and most of that is involved teaching,
12 supervising residents and graduate physicians who are
13 providing care to individual patients.

14 Q Doctor, a little bit about your
15 educational background. Where, beginning with your
16 undergraduate degree, where did you attend college?

17 A I have a Bachelors of Arts in chemistry
18 from Princeton University.

19 Q What year did you obtain that degree?

20 A 1963.

21 Q And when you left Princeton where did
22 your education take you?

23 A I went to University of Pennsylvania
24 School of Medicine and graduated with an M.D. in
25 1967.

1 Q And, thereafter, I take it you performed
2 a residency somewhere?

3 A I did. I did an internship at Genesee
4 Hospital in Rochester, New York. And returned to
5 Philadelphia and did two years of residency and a
6 year of fellowship beyond residency specialty
7 training at the Hospital of the University of
8 Pennsylvania.

9 Q Explain to us, Doctor, what a fellowship
10 is and how that differs from a residency.

11 A A fellowship is the time when someone who
12 has completed the training to make him eligible to
13 take Boards and becomes a specialist in the field. A
14 fellowship year or two years, one year in my case,
15 allows to you concentrate on more specific areas. In
16 my case it was on cardiac anesthesia and on
17 education. So I spent that, and additional year
18 getting additional training and experience in those
19 areas.

20 Q So, all totaled, in terms of your medical
21 school training how many years did you devote just to
22 the learning process?

23 A Four years of medical school and then
24 four years beyond medical school learning the
25 specialty and sub-specialties in anesthesiology.

1 Q That doesn't mean to say you don't
2 continue to learn today.

3 A Absolutely.

4 Q Your formal education took that long?

5 A Yes.

6 Q Now, you indicate on your resume, your
7 C.V., that you served some time in the U.S. Public
8 Health Service and that you were, in fact, staff
9 anesthesiologist at the National Institutes of
10 Health.

11 A That is correct.

12 Q What did do you there?

13 A I provided anesthesia for operations that
14 were done in the clinical center of the National
15 Institutes of Health, which is the nation's premier
16 research medical institution.

17 Q In your C.V. you list a number of
18 faculties that you enjoyed being with over the years.
19 Can you briefly run through some of those?

20 A After N.I.H. I was on the faculty of
21 University of Pennsylvania for four and a half years.
22 I got recruited at the University of Arizona, where I
23 spent about four and a half years on the faculty. I
24 then came back to the University of Pennsylvania
25 Department of Anesthesiology.

1 Q You have been in the practice of
2 anesthesiology as well as a teacher of anesthesiology
3 for the past twenty-three years?

4 A For more than that. For the past
5 thirty-some years. It has been twenty-three years
6 this time, but add nine years in Arizona before that.

7 Q So in 1982 and 1983 I see on your C.V.
8 one of the hospital employments that you had was
9 attending anesthesiologist, Department of Anesthesia
10 at Children's Hospital, Philadelphia. Did you
11 provide anesthesia services to children?

12 A Yes, I did.

13 Q Your specialty certification listing
14 indicates American Board of Anesthesiology. Are you
15 Board certified?

16 A I'm Board certified.

17 Q Could you explain to us what Board
18 certification means in terms of anesthesiology?

19 A Board certification is a process by which
20 the American Board of Anesthesiology determines that
21 candidates are appropriate practitioners and
22 consultants in the specialty of anesthesiology. In
23 other words, they make sure you are good, to put it
24 simply.

25 Q And when did you first obtain Board

1 certification?

2 A 1972.

3 Q And have you been Board certified ever
4 since then?

5 A Yes, sir.

6 Q Are you PALS certified?

7 A I'm not PALS certified.

8 Q What is PALS?

9 A It is Pediatric Advanced Life Support, I
10 believe. It consists basically of -- It is a
11 teaching program for not necessarily physicians, but
12 for many health care providers, in which they learn
13 most of the skills, or many skills that an
14 anesthesiologist already knows; airway management,
15 choice of drugs for resuscitation, accessing IV's,
16 how to do cardiac compressions on children. Things
17 like that.

18 Q You are a professor of anesthesiology at
19 University of Pennsylvania, is that correct?

20 A Associate professor, if you want to be
21 precise.

22 Q Does the University of Pennsylvania
23 require physicians, all of its physicians, to be PALS
24 certified?

25 A No.

1 Q Despite the number of honors for many
2 years you received the American Medical Association's
3 Physician's Recognition Award. What is that?

4 A That is an award that the American
5 Medical Association gives if you document that you
6 have kept up a minimum amount of continuing medical
7 education. And if you have a minimum -- I forget
8 what it is. I think it is a hundred fifty hours a
9 year of continuing education.

10 Q That keeps you current?

11 A To indicate that you are working to keep
12 current to learn the newest things and to apply them
13 appropriately in your practice.

14 Q In 1981 and 1982 you received the
15 Outstanding Clinical Teacher Award from the
16 Department of Anesthesiology at the University of
17 Arizona?

18 A Yes.

19 Q You also recite a number of professional
20 associations and scientific associations that you are
21 a member of. What are the most significant ones as a
22 whole?

23 A The American Society of Anesthesiologists
24 and International Anesthesia Research Society are two
25 major anesthesia organizations. Which means as new

1 information and new knowledge is discovered workshops
2 are given to update your knowledge.

3 Association of Cardiac Anesthesiologists
4 is another society in which I have been active since
5 its formation. And it provides a lot of information
6 in teaching practitioners.

7 I'm also member of the -- Well, it is
8 the association of University of Anesthesiologists,
9 which is a, a group of physicians and physician
10 anesthesiologists who work in university settings.
11 And this is present research and educational
12 information at their annual meeting.

13 Q Doctor, your C.V. also indicates that you
14 have served a number of times in editorial positions
15 for a number of anesthesiology publications. Can you
16 explain what those were and when you served as editor
17 for these periodicals?

18 A I was on the Editorial Board for
19 Cardiothoracic Anesthesia in its early days. And in
20 that position we helped to generate articles that
21 will be published in the Journal.

22 I have been a referee to a number of
23 journals, including Anesthesiology, which is the
24 Journal of the American Society of Anesthesia. And
25 Anesthesia and Analgesia, which is the other journal

1 in the anesthesia field. And in that position
2 someone who does a research project writes a paper
3 about it, sends it to the editor of the Journal. The
4 Journal, the editor then sends the paper out to a
5 group of experts, like myself, who are associate
6 editors or who are referees, and we critique the
7 paper, trying to say whether, to make judgment
8 whether, in fact, whether it should be published, and
9 if it is to be published, what needed to be done to
10 make it the most effective learning device possible.

11 Q Doctor, you have also listed a number of
12 publications that you either authored or co-authored.
13 Can you tell us how many publications you have
14 written, either peer reviewed articles or in book
15 chapters?

16 A I think there are probably, I don't know
17 exactly, I think probably twenty-two or twenty-three
18 peer review articles and at least that many book
19 chapters. Plus a book that I had authored and
20 published on cardiac anesthesia.

21 Q And one of the book chapters I see is
22 Special Anesthesia for Pulmonary Artery Occlusion?

23 A Yes.

24 Q Have you written on the subject of
25 anesthesia and coronary function in other situations?

1 A Well, several of the chapters in the
2 textbook that I edited, quote, and I was co-author
3 on, and several of them relate to coronary disease
4 and cardiac function one way or another.

5 MR. BADOWSKI: I would now offer Doctor
6 Conahan as an expert in anesthesiology and airway
7 management.

8 THE COURT: Voir dire?

9 MR. RONCA: Yes, Your Honor.

10 VOIR DIRE EXAMINATION

11 BY MR. RONCA:

12 Q Good afternoon, Doctor Conahan.

13 You obviously have a lot of credentials,
14 but my interest is more in how your credentials apply
15 to this case.

16 There is no pediatric department at
17 University of Pennsylvania Hospital currently, is
18 there?

19 A No, there is not.

20 Q In fact, the University of Pennsylvania
21 Hospital sits right next to the Children's Hospital
22 of Philadelphia. And, in fact, the two buildings are
23 connected, is that correct?

24 A Only underground.

25 Q Only underground. But they are

1 connected?

2 A Yes.

3 Q And they are totally separate
4 institutions, is that correct?

5 A I do not want to get into the politics of
6 that. There are great -- They actually are very
7 closely related and the anesthesiology facility at
8 Children's Hospital are part of our department.

9 Q Okay. But if you look at the listings of
10 staff at the Children's Hospital of Philadelphia you
11 are not on that list?

12 A I am not on that list at this time.

13 Q And you have not had staff privileges at
14 the Children's Hospital of Philadelphia since 1983,
15 twenty-three years ago?

16 A Correct.

17 Q You are listed on the staff of University
18 of Pennsylvania, correct?

19 A I am.

20 Q So when a child is flown into that
21 complex because, let's say, of respiratory distress,
22 that child goes to Children's Hospital, right?

23 A Correct.

24 Q They don't go to Penn, correct?

25 A That is correct.

1 Q And the anesthesiologists who deal with
2 those problems are at the Children's Hospital, not
3 the anesthesiologists from Penn?

4 A No. There are some who cross over and
5 work both places.

6 Q But that is not you.

7 A Not me.

8 Q Your concentration is in adult anesthesia
9 or in anesthesia associated with surgery, correct?

10 A My current concentration is, yes.

11 Q For the last twenty-three years?

12 A Yes.

13 Q That is what I am talking about. Your
14 most current concentration is surgery and adults,
15 correct?

16 A Correct.

17 Q And if there is no pediatric department
18 in Penn do they do many pediatric surgeries at Penn?

19 A No.

20 Q So you are not doing a lot of pediatric
21 surgery anesthesia, are you?

22 A Only in the grown patients who have
23 maintained smaller, some of the congenital
24 abnormalities that occur in, that have come from
25 children and they grow up and we see them as adults,

1 but they still have those problems.

2 Q You haven't done on a regular basis
3 anesthesia on children since 1983, isn't that right?

4 A That is right.

5 Q The past twenty-three years you have been
6 concentrating on adults, right?

7 A Correct.

8 Q And there is significant differences --
9 anatomically, size, in areas of resuscitation,
10 intubation, et cetera -- between children and adults,
11 isn't that correct?

12 A That is correct.

13 Q You use different size tubes, different
14 dosages of drugs, correct?

15 A That is correct.

16 Q And the different drugs have different
17 effects on people, correct, whether they are children
18 or adults, correct?

19 A I'm sorry, you have to rephrase that.

20 Q A drug might have a different type of
21 effect on a child than it does on an adult?

22 A Very rarely.

23 Q But it can happen, correct?

24 A And as you heard, yes, it can happen.

25 Q So, in terms of your practical

1 experience, you don't have any practical experience
2 with the anesthesia or airway management of children
3 since 1983?

4 A I -- That's not quite true. I deal with
5 newborns on our labor floor and I do deal with
6 congenital abnormalities in teenagers that are
7 brought over from Children's who are smaller airways.

8 Q But we are talking about a four-year-old
9 child. When is the last time you intubated a
10 four-year-old child?

11 A Probably twenty-three years ago.

12 Q One of the reasons you don't have PALS is
13 because you are not dealing with pediatric patients
14 on a regular basis, isn't that right?

15 A I don't know that I can agree with that.

16 Q There is a book chapter on coronary
17 artery disease in patients. Have you ever seen a
18 child at age four with coronary artery disease?

19 A I have not.

20 Q Isn't coronary artery disease a disease
21 either from old age or cholesterol or things like
22 that?

23 A There are many causes of coronary artery
24 disease. You mentioned two of them.

25 Q In fact the vast majority, if not all of

1 that, occurs in adults?

2 A Most of the ones that you mentioned,
3 causes you mentioned, occur in adults, yes.

4 Q Anyway, the patients you see with cardiac
5 problems are all adults, correct?

6 A Adolescents or adults.

7 Q When is the last time you used
8 succinylcholine on a child?

9 A Twenty-three years ago.

10 Q When is the last time you intubated a
11 child in respiratory distress?

12 A A child in respiratory distress, probably
13 twenty-four years ago.

14 Q Now, again, not to take away from your
15 qualifications in other areas, but your main area of
16 interest in medicine for the past ten years or so has
17 been in ambulatory surgery of adults, hasn't it?

18 A No. It's been cardiac anesthesiology and
19 ambulatory surgery of adults.

20 Q I took the time to review your articles
21 that you published on these subjects. And when I go
22 to your published articles it looks to me like the
23 articles published since 1989, I believe, all have
24 related to ambulatory surgery. Am I correct?

25 A I believe you are.

1 Q Okay. And by looking at your book
2 chapters it looks to me like all of your chapters,
3 with the exception of one, since 1995 have dealt with
4 ambulatory anesthesia. Is that correct?

5 A Yes.

6 Q And in addition to your resume you also
7 provided a description and you said in this
8 description that was provided to us, academic
9 interests. Efficiency in the delivery of quality
10 anesthesia to ambulatory surgery patients. This
11 broad topic includes systems to improve pre-operative
12 evaluation, assembly of data, inner-operative record
13 keeping, post-operative tracking, and data
14 acquisition storage and retrieval.

15 Patient orientation includes
16 investigation of pharmacology on ambulatory patients,
17 agents and techniques and procedures which minimize
18 peril to cardiac patients during anesthesia care, and
19 efficient, practical monitoring devices.

20 Q Isn't it true that your main interest has
21 been in ambulatory surgery of adults over the past
22 ten years or so?

23 A No, that is my research interests. This
24 is academic interests. I have also, until the past
25 three years, been very deeply involved in the cardiac

1 anesthesia program at the hospital at the University
2 of Pennsylvania.

3 Q But you have not been associated with it
4 for the last three years, is that correct?

5 A Right.

6 Q So your main interest now is ambulatory
7 surgery of adults, correct?

8 A Yes.

9 Q Ambulatory surgery is surgery where you
10 walk in and walk out the same day, correct?

11 A Yes.

12 Q And that is a particular surgical
13 specialty which has become more and more popular, is
14 that correct?

15 A Yes.

16 Q So it has nothing to do with this case,
17 correct?

18 A It has to do with this case in that it is
19 the airway management and skills which I acquired in
20 my education and training.

21 Q But back -- For pediatric purposes back
22 in 1983 and before, correct?

23 A Correct.

24 MR. RONCA: Your Honor, may we approach?

25 (Whereupon, voir dire examination was

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25

concluded.)

* * * * *

CERTIFICATE

I hereby certify that the proceedings and evidence are contained fully and accurately in the notes taken by me in the proceedings of the above cause and that this copy is a correct transcript of the portion requested to be transcribed.

June 5, 2006
Date

Jane M. Smith
Jane M. Smith
Official Court Reporter