1	UNITED STATES DISTRICT COURT
2	DISTRICT OF MINNESOTA
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4	IN RE: FLUOROQUINOLONE ) File No. 15-md-2642 (JRT) PRODUCTS LIABILITY LITIGATION )
5	) ) Courtroom 15 East
6	) Minneapolis, Minnesota ) Thursday, August 10, 2017
7	) 2:16 p.m. )
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9	BEFORE THE HONORABLE JOHN R. TUNHEIM
10	CHIEF UNITED STATES DISTRICT COURT JUDGE
11	(STATUS CONFERENCE)
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1	MR. SIMS: Good afternoon. Thomas Sims for the
2	plaintiffs.
3	MR. RICHARDS: Jason Richards for the plaintiffs.
4	MS. WELLS: Devona Wells for the plaintiffs.
5	MS. HIRSCH: Andrea Hirsch for the plaintiffs.
6	MR. WOOL: David Wool for the plaintiffs.
7	MS. FLAHERTY: Good afternoon, Your Honor. Yvonne
8	Flaherty.
9	THE COURT: All right. And for the defendants
10	here at the courtroom.
11	MR. SOLOW: Andrew Solow for the Bayer defendants,
12	Your Honor.
13	THE COURT: Good afternoon.
14	MR. PRICE: Joe Price, Bayer defendants, Your
15	Honor.
16	MS. LESKIN: Good afternoon. Lori Leskin for the
17	Bayer defendants.
18	MS. SCHRECK: Debra Schreck for the Bayer
19	defendants.
20	THE COURT: All right. And now on the telephone.
21	First, for the plaintiffs.
22	MR. CORLEY: Daniel Corley for the plaintiffs,
23	Your Honor.
24	MR. LEE: Dae Lee for the plaintiffs, Your Honor.
25	MS. CORDES: Lindsay Cordes for the plaintiffs.

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1	MS. VINER: Olga Viner for the plaintiffs.
2	MS. GOLDSTEIN: Jamie Goldstein for plaintiffs.
3	MS. GRIFFIN: Katie Griffin for plaintiffs.
4	MR. NIDEL: Chris Nidel for the plaintiffs.
5	MS. STEVENS: Lindsay Stevens for the plaintiffs.
6	THE COURT: That was two at once. Say those
7	again.
8	MR. NIDEL: Sorry. Chris Nidel for the
9	plaintiffs, Your Honor.
10	MS. STEVENS: Lindsay Stevens for the plaintiffs,
11	Your Honor.
12	MR. MALUSH: Greg Malush for the plaintiffs.
13	MS. NEVIN: Barbara Nevin for the plaintiffs.
14	MR. BHASKER: Kedar Bhasker for plaintiffs.
15	MS. LEE: Kathy Lee for plaintiff Dirk Nation.
16	THE COURT: All right. Anyone else?
17	MR. SUFFERN: Good afternoon, Your Honor. My name
18	is Michael Suffern, and I represent Teva Canada and Cobalt
19	in the Actavis case.
20	THE COURT: All right. Anyone else on the phone?
21	All right.
22	All right. Let's go ahead with our proposed
23	agenda, first addressing the status of the litigation.
24	MR. SIMS: Thank you, Your Honor.
25	THE COURT: Go ahead, Mr. Sims.

1	MR. SIMS: We show approximately 265 cases pending
2	in this MDL where Bayer or Merck are listed as a defendant.
3	Of those, approximately 180 are Bayer-only cases, in other
4	words, where Levaquin and Johnson and Johnson are not
5	alleged, and then 85 combo cases where Johnson and Johnson
6	or Janssen is a named defendant.
7	On the Philadelphia state court litigation, there
8	has been some recent activity there.
9	THE COURT: Okay.
10	MR. SIMS: As we discussed at the last hearing,
11	the cases that were filed in calendar year 2015 that would
12	have had trial settings in 2018, all but two of them have
13	been dismissed now is my understanding. Those dismissal
14	orders have been entered. The two remaining cases, of those
15	one of them is a case in which there was a motion to
16	withdraw as counsel by the plaintiff's firm and that motion
17	was granted. My expectation is that eventually that case
18	will be dismissed. Then there is a remaining case, the
19	Bryant case, Your Honor. There was a revised scheduling
20	order entered in that case. I believe at our last status
21	conference we had indicated Judge Younge was willing to push
22	the trial back to April. In the revised order he's pushed
23	it to June. So still not quite back as far as our first MDL
24	trial here, but closer. And there's always the potential
25	THE COURT: June of 2018?

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1	MR. SIMS: Correct, Your Honor.
2	And there's always the potential that it could be
3	pushed further, but under the current revised scheduling
4	order it has a June 2018 trial setting.
5	THE COURT: All right.
6	MR. SIMS: There then are a few, just a handful of
7	cases that were filed in 2016. I believe only one of those
8	has a trial setting in 2018. I could be mistaken. But that
9	case pursuant to an agreement will be dismissed from the
10	Philly state court proceeding and eventually refiled here in
11	the MDL. And we're waiting to kind of see what's going to
12	happen to the remaining 2016 cases. They may follow a
13	similar path.
14	THE COURT: How many?
15	MR. SIMS: I believe there's three, Your Honor,
16	but I can't be certain about that. And I know at least two
17	of those are going to be dismissed. We're waiting on one
18	more to find out.
19	But it, just in terms of trial settings, it looks
20	like the only case is the one that has that June 2018
21	setting. And that's where we are in the Philadelphia state
22	court litigation.
23	THE COURT: Okay. This is the Bryant case, did
24	you say?
25	MR. SIMS: The Bryant case, Kimberly Bryant, Your

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1	Honor. It is my firm's case.
2	THE COURT: And the defendant is?
3	MR. SIMS: Is Bayer HealthCare. It is not a combo
4	case. It is an Avelox case, Your Honor.
5	THE COURT: Okay.
6	MR. SIMS: Unless something from Bayer's counsel,
7	I will move on to Item No. 2.
8	MR. SOLOW: Factually, that's correct, Your Honor.
9	I just want to continue to note our concern. You know, the
10	status quo is as Mr. Sims indicated. There's a trial-ready
11	date of June of 2018 for that Bryant case, but that is now
12	going to be potentially the tail wagging the dog here.
13	Obviously, all the discovery is taking place through Baron &
14	Budd here in the MDL through the PSE, and I think you will
15	kind of have a better appreciation of some of the scheduling
16	issues at the end of this conference. So it is a concern
17	for us still. We have indicated from our side that we will
18	reapproach Judge Younge come this spring, but right now it's
19	looming as a potential issue for us.
20	THE COURT: So that, according to their rules, as
21	I understand it, they're supposed to have those cases done
22	in the calendar year 2018; is that correct?
23	MR. SIMS: That's my understanding, Your Honor.
24	THE COURT: Okay. All right.
25	MR. SOLOW: Thank you, Your Honor.

1	THE COURT: Thanks.
2	MR. SIMS: And I confess, Your Honor, I don't know
3	if it's three years from the date it is filed or the end of
4	that calendar year. It was filed in August of 2015.
5	Item No. 2. I don't think there are any issues to
6	bring to the court's attention. There were a couple of
7	deficiencies, and I've worked with counsel on those cases,
8	and I think we've resolved all but one or two of them and
9	hope to have the rest of them put to bed here shortly.
10	THE COURT: All right.
11	MR. SIMS: With respect to Item No. 3, we have
12	begun to receive documents from Bayer Pharma AG, the German
13	Bayer entity. And, in fact, about a week ago, maybe ten
14	days ago, we received about 2 million pages of documents.
15	So it's a very large production. All told, I think we are
16	at about maybe 11, 11 and a half million pages of documents
17	that have been produced and we're at about 4 million that
18	have been produced just in the last 30 days. So we're
19	we're still receiving a large volume of documents; but other
20	than one issue I'm going to get to in just a little bit,
21	there hasn't been any lingering disputes with respect to
22	document production.
23	On the liability deposition front for witnesses
24	from Bayer and Merck, we have taken so far seven
25	depositions. And there was a request made at the end of

1	June for an additional twelve U.Sbased Bayer employees,
2	and so far I think we have received dates back on nine of
3	them, if I have that right, eight or nine of them. And Mr.
4	Solow is working on the remaining group. I think there is
5	one that we may not end up deposing and there is someone who
6	is a former employee that we may have to track down by
7	subpoena, but we are progressing. And those have been
8	scheduled, almost all of them, for September and we will
9	proceed then.

10 We do anticipate proceeding with depositions of 11 the BPAG folks. I have advised Bayer that we would like to 12 proceed with those in October, and I understand that those 13 will most likely go forward in Europe somewhere. We have 14 not submitted names, because we just received this very 15 sizable production of about 2 million documents. And so we 16 would like the opportunity to at least put our eyes on them, 17 some of them, and get a better feel for who we would like to 18 depose. We have some idea, but we would like to look at the 19 There were a couple folks I had asked about documents. 20 earlier, but they are no longer with the company, and so we 21 are looking at folks who are still there. 22 The treater depositions, the first one is --23 MR. SOLOW: Tom, could I just jump in? 24 Sure. Of course. MR. SIMS: 25 MR. SOLOW: Your Honor, I just wanted to note for

1	the record that overwthing Mr. Cime said is correct. I just
	the record that everything Mr. Sims said is correct. I just
2	want to put a fine point on the additional U.S. employees
3	that were requested. The three some of those included
4	former employees, which we have been able to get their
5	cooperation to schedule their depositions without a
6	subpoena. The remaining ones that we have not provided
7	dates with are all former employees. As I have indicated to
8	Mr. Sims, one is coming off of surgery, one has got a busy
9	work schedule, we are trying to work and accommodate that,
10	and there is one who, as of this point in time, will need to
11	be subpoenaed and we are working on getting the last-known
12	address and we will take care of that.
13	And then Mr. Sims did just finish that last point.
14	To be clear on the Bayer HealthCare Pharmaceuticals AG
15	depositions, those will only be current employees, because
16	there is not subpoena power outside and under foreign data
17	privacy laws the company can't compel former employees to
18	testify.
19	THE COURT: All right.
20	MR. SIMS: All right. Turning to depositions of
21	treating physicians. As the court is aware, we have a bit
22	of a dispute about that, but in the interim we went ahead
23	and received a list from Bayer of the prescribing physicians
24	they would like to depose, physicians or nurse
25	practitioners, I should say. There were ten of those. And

## CASE 0:15-md-02642-JRT Document 476 Filed 08/31/17 Page 13 of 30

1	about a week or ten days ago we got a subsequent list of
2	three treating physicians for each of the bellwethers, since
3	the plaintiffs have already said we would be willing to
4	agree to that. And so we have started on the treating
5	physicians and reaching out to them. We have made some
6	progress on the prescribing physicians. There is one who is
7	actually scheduled to be deposed next week I believe on the
8	17th. And there is some other dates out there for some
9	folks. We have run into a couple of issues. Someone's been
10	on vacation, we don't quite know when they are going to be
11	back, things like that. But we are getting close to getting
12	all of those prescribers scheduled and then we are working
13	on treaters.

14 Finally, on the sales representatives. So the 15 court probably recalls when we were negotiating the 16 defendant fact sheet there was some disagreement about the 17 scope and what would be included in there. We have served 18 discovery on Bayer and Merck seeking the production of 19 custodial files from two groups of employees, sales 20 representatives who had direct contact with the prescribing 21 physicians and what I call district managers, so regional 22 managers, essentially. That was served the beginning of 23 July. We received their responses at the beginning of 24 August. There was no documents produced. They did indicate 25 they would produce some documents beginning 30 days from the

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1	date of their response, which would be early next month, and
2	that production would be on a rolling basis. Based on their
3	responses and the objections, there are some disputes. We
4	are going to meet and confer over the coming days regarding
5	that; and if we can't resolve that, plaintiffs will file a
6	motion to compel and ask that that be heard at the next
7	status conference.
8	THE COURT: All right.
9	MR. SIMS: I am also a little worried about the
10	pace of production, but we will just we will see once the
11	documents start rolling in how that works out. And that's
12	where we are on sales representatives.
13	THE COURT: All right. Mr. Solow.
14	MR. SOLOW: Your Honor, we did just receive an
15	email from Mr. Sims a few hours before the conference
16	indicating that they would like to meet and confer over our
17	responses to those requests, and we will do that; and if we
18	need to, there will be motion practice.
19	I would just point out, Your Honor, that Your
20	Honor may recall we had an argument about the scope of the
21	defendant fact sheet. And we started serving defendant fact
22	sheets in 2016, in the fall of 2016. So from our
23	perspective the fact that the requests for these sales rep
24	productions came in July is not really any fault of ours,
25	Your Honor. This information was available. These

1	bellwethers were selected. So to the extent that there is a
2	JML on deadlines is certainly not of our doing. As Mr. Sims
3	indicated, we produced over 11 and a half million pages of
4	documents. There are additional documents rolling out. So
5	the notion that everything should just be dropped to get out
6	these sales rep custodial files in any way is inconsistent
7	with the case management order is just not the case.
8	THE COURT: Okay.
9	MR. SIMS: I'll hold off for rebuttal at this
10	time.
11	THE COURT: All right.
12	MR. SIMS: Thank you, Your Honor.
13	THE COURT: Okay. So we have got a couple of
14	motions today. Mr. Robins.
15	MR. ROBINS: Yes, Your Honor. Bill Robins.
16	I'm just here to talk about the motion to limit
17	treater depositions, and I think I can be pretty brief about
18	this.
19	As we set out in our papers, we have gotten a
20	request from the defendant related to the 10 bellwethers.
21	They essentially have asked for 72 depositions of
22	treater/prescribers, as many as 12 for one plaintiff. We've
23	got one plaintiff that they asked for three and everything
24	else sort of around seven, seven or so, which we just
25	believe is excessive given the nature of the case.

I am arguing this because they've attached some of 1 2 my statements in the earlier conferences concerning some of 3 the things that we said about discovery, and, frankly, what 4 we are saying now is entirely consistent with what I said 5 back then. I had originally told Your Honor that I thought 6 we would need around eight depositions total for each 7 bellwether plaintiff case, and that's more than what we 8 usually do in an MDL. At least in terms of the workup on 9 bellwethers, it's usually we tend to have, you know, one 10 treater, one prescriber, a couple of sales reps or district 11 managers and a plaintiff, so it's usually four to five 12 depositions. I had estimate I thought it would be more like 13 eight, because we did have people that, you know, do have 14 long medical histories and sometimes you got to go take a 15 few more of the treaters for that. But we just think their 16 position that they can, you know, come in and take 12 17 depositions in one case of treaters is just excessive under 18 the circumstances.

We have set forth what we felt was a reasonable proposal, which was one prescriber and three treaters. We are also, of course, open to the notion that if there are other treaters or prescribers that we would, you know, intend to call at trial that we would certainly, you know, say that they needed -- those people would -- they'd have a right to depose those people as well, if they are not

1	included within the three. But we really think that's a
2	reasonable approach, you know, just given all of the other
3	depositions and the limits Your Honor put on our side, you
4	know, with regard to the number of company witnesses that
5	was ultimately allowed, you know, just in terms of having a
6	balance overall in this. We're essentially saying, you
7	know, 40, 40 depositions of treaters and prescriber. You
8	know, there may be some exceptions that we would be open to
9	a good cause, you know, reason. For example, if a plaintiff
10	had two prescribers where they it was important to go
11	take both of them for some reason, you know, theoretically
12	we could agree to that if it was necessary and it's relevant
13	to the failure to warn issues. You know, of course, the
14	prescribers would get into that issue directly on liability.
15	But to just have sort of open-ended, no limits essentially
16	on treaters for, you know, things like there are examples
17	of, you know, folks have been in car wrecks and, you know,
18	had some kind of numbness prior in their life before they
19	took Avelox and they want to go take that person's
20	deposition, we just think it's excessive and not necessary.
21	Their experts will have all the opportunity they need to
22	review the medical records. And to just sort of be chasing
23	after, you know, large numbers of treaters we just think is
24	not reasonable under the circumstances.
25	So, you know, that's essentially what we would say

1	about it, and we would ask the court to put in just a sort
2	of baseline limit of one prescriber and three treaters,
3	subject to good cause, if we need to come back on, you know,
4	for some reason outside of that.
5	THE COURT: So the group that are proposed for
6	depositions, the treaters, you said there is 72. Is three
7	the minimum in any particular case?
8	MR. ROBINS: There's only one where they ask for
9	three. Then everyone else is seven or above.
10	THE COURT: And these are treating physicians who
11	treated these plaintiffs over what period of time? A long
12	period of time? Short period of time?
13	MR. ROBINS: Essentially any time in their life.
14	Some of these people are people that they saw before they
15	took the drug, but the patient may have had some type of
16	symptom that the defendant says, well, they had numbness or
17	something like that, so we want to go take the treater, even
18	though he was pre-Avelox. Some of these people are in
19	the usual case it's people that they saw afterwards for, you
20	know, various conditions or for their symptoms related to,
21	you know, to the drug. These patients do have complicated
22	histories. There's no doubt about it. They see a lot of
23	these people see a lot of doctors, but it's not unlike a lot
24	of cases we have like this where, you know, by its nature
25	it's involving a pharmaceutical drug, it's involving

1	complicated histories. And normally we have some rule of
2	reason. We gave some examples from some of the other
3	courts, you know, that have looked at this, in terms of
4	putting some reasonable limits on the number of
5	prescriber/treater depositions.
6	THE COURT: All right. Ms. Leskin.
7	MS. LESKIN: Thank you, Your Honor.
8	Your Honor, I want to be clear. Counsel keeps
9	referring to the 12, the 12, the 12. One plaintiff we have
10	asked we listed 11, actually, one of whom is the
11	prescriber, so there are 10 treaters. That plaintiff, Ms.
12	Heller, identified over 30 treaters, 30 treaters in her fact
13	sheet and at her deposition, who she has seen for treatment,
14	diagnosis, evaluation of her condition, some of whom she
15	says gives her causation assessments, some of whom are
16	treating her for everyday pain and other issues.
17	So we are not just going out and naming doctors
18	for the sake of naming doctors. We have taken a very
19	reasoned and thoughtful approach to who we need to depose.
20	This isn't just about failure to warn. This isn't just
21	about causation. Certainly, those are critical to the case,
22	but from the very beginning we have stood here and told you
23	that there are significant statute of limitations issues.
24	And the notice question of the causal association, if any,
25	between the use of Avelox or Cipro and the onset of symptoms

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1	is going to be critical, is going to be very fact-based and
2	deposition-based. This is our one and only time to take the
3	discovery we need in these bellwethers, unlike the cases
4	that plaintiff cite to you. Those MDLs had a provision to
5	do overall discovery do some initial discovery of the
6	plaintiffs and when the trial cases were selected an
7	additional time period to do discovery. We don't have that
8	here. We had proposed that. Plaintiffs rejected that, and
9	that's not the way this bellwether order is written. We
10	have one and only opportunity to do all of our discovery.
11	And so we need to go out and we have the right to establish
12	our witnesses, beyond just the cold record of medical
13	records, to assess the opinions being expressed in some of
14	those records. If there's a causal opinion being expressed
15	one way or the other, we have the right to explore that and
16	what the basis is for having that in the notes. If there
17	are alternative causes for the plaintiffs' symptoms, we have
18	the right to explore that and understand the severity of the
19	preexisting conditions.

20 So there are a lot of issues and there are a lot 21 of reasons why we have selected the physicians we did. 22 Plaintiffs have not pointed you to a single doctor that we 23 requested that is not relevant to the case. That is just 24 simply silly. We are talking about third-party witnesses --25 third-party witnesses who are short. We are not talking

1	all-day depositions. These I think we've agreed total about
2	three hours. We have asked the plaintiffs who have insisted
3	on doing all the scheduling to do them on back-to-back days,
4	to minimize the travel of everyone, but that doesn't mean
5	that we need to impose an arbitrary number for patients with
6	very complex medical histories. We have to be able to
7	assess this. We have to be able to evaluate them.

8 The proposal that I just heard for the very first 9 time is that if there's some treaters that they would call 10 at trial, then we'd get to ask those proposals as well. 11 Today is the first time I have heard them ask that. We 12 provided -- we offered that. We offered as a compromise let 13 us pick our three or four key ones, and then if there are 14 additional doctors that you intend to rely on at trial we 15 would include those as additions, and that was rejected. So 16 we had no choice but to pursue the overall number. We 17 haven't been permitted to talk to the doctors. All we have 18 are records. So we don't have a way to evaluate the 19 importance of those records, other than by sitting and 20 taking those depositions.

Again, we have tried to limit the number. We are not asking for every doctor that's been named. If you take out -- the numbers that you were given included prescribers, so I believe there's one prescriber in each of the 10 cases, Your Honor, so it's a total of 60 -- I think it's actually

1	61 treaters that we had requested over 10 cases.
2	Again, Mr. Robins himself stood in this court and
3	stressed to you the need for flexibility in deciding
4	discovery. The initial orders that we had requested had
5	limits. They fought against that. They didn't want limits
6	on treaters. They didn't want limits on these doctors and
7	stressed the need for flexibility. And that's exactly
8	right.
9	As we go through these records, Your Honor, these
10	are patients that we don't even think necessarily have
11	peripheral neuropathy. These are patients who have
12	preexisting conditions that are very possible likely causes.
13	We have had patients with diabetes, patients with car
14	accidents that's caused disk issues, we have patients with
15	symptoms that their own doctors aren't even calling
16	peripheral neuropathy. So we have to be able to explore
17	what these doctors are saying, how they are treating, what
18	the damages might be, the severity of the injury, and those
19	are the focus of the doctors. If it is a particular one
20	that we have asked for that plaintiffs do not believe is
21	relevant or necessary, then we can meet and confer on that,
22	just as we are doing with the company witnesses, and we can
23	decide if we can drop them or not. But to set an arbitrary
24	limit in a case this complicated with these complicated
25	medical histories simply prejudice us in our ability to

1 develop our class. 2 THE COURT: So are you still supportive of the idea of a limit, so long as you are then able to depose 3 treaters who plaintiffs intend to call at trial? 4 5 MS. LESKIN: I think we would be agreeable to a 6 limit. I think three is a little tight, given what I know 7 about the --8 THE COURT: Yeah, that was my next question. What 9 would be reasonable, do you think? 10 MS. LESKIN: I think in addition to a prescriber 11 we should be allowed to go up to four -- maybe four 12 treaters. We may not need them in every single case. We 13 are not going to name them just for the sake of naming them. 14 But with the caveat that if the plaintiffs intend to rely on 15 any causation opinions in the medical records or call any of 16 the other treaters at trial, then we have the -- they need 17 to identify them now and we need to be able to depose them. 18 THE COURT: So is that reasonable to identify them 19 now, Mr. Robins? 20 MR. ROBINS: To identify the treaters that we 21 might call at trial? 22 THE COURT: Right. 23 MR. ROBINS: I don't know that we can do it this 24 afternoon. 25 THE COURT: No.

1	MR. ROBINS: But I think we can do it within, you
2	know, a week or so. We can take a look at that.
3	THE COURT: So this is not something that's a
4	process that you would decide later, much later in the
5	MR. ROBINS: Yeah. I mean, I guess I should say
6	we probably still I think we'd probably need a little bit
7	more time then just because, you know, we do have some
8	plaintiffs I think we may even still be trying to get
9	last-minute records in and that sort of thing, but I think
10	we could, you know, certainly give notice, you know, within
11	enough time left on the schedule where we can get them
12	deposed still within the time frame.
13	One of the things that I had spoken to counsel
14	about just before we came up today was that in the schedule
15	as we have it right now the case specific deadline is early
16	October. The general liability deadline is at the end of
17	October. And so just given the amount of additional work
18	that we need to do in terms of getting these treaters done
19	and also the sales reps and that testimony, we were talking
20	about approaching the court about just putting that
21	deadline that case specific deadline married up with the
22	remaining fact discovery, so we sort of end everything by
23	the end of October. I think if we were able to adjust the
24	schedule in that way and we had, you know, some time built
25	in for us to make a decision about, you know, who are

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1	treaters that we definitely would want to call, we could get
2	those to the other side and then have enough time, you know,
3	to get those depositions done, if we needed to, assuming we
4	are going to do discovery until the end of October.
5	I wasn't involved in the negotiation, and I spent
6	the last two months in trial with Judge Kennelly in Chicago,
7	so if I have missed some of the negotiations on what went
8	back and forth, I apologize to my opposing counsel. In
9	looking at the papers I didn't see anything, you know, where
10	there was this kind of discussion, but if there was, you
11	know, so be it.
12	My suggestion, again, would be, you know, if we
13	start off with one and three, that's a fair number to start
14	with under the circumstances. That's four depositions.
15	That's 40 depositions across the 10 plaintiffs. And then if
16	we add, you know, the caveat that we, you know, would
17	disclose who we would call and they could do those on top of
18	them, I think that would be a reasonable approach, Your
19	Honor, that we could live with.
20	MS. LESKIN: The only thing I would add, Your
21	Honor, again, I think three is a little small, given what I
22	know about these complex plaintiffs. And, again, we
23	wouldn't name three just for the sake of naming three or
24	four. It would be those that we really think we need.
25	Sometimes you take a deposition and what appears on the

1	records is not necessarily the case, and sometimes you learn
2	something at a deposition that may identify another doctor
3	who becomes important, and so we would, you know, obviously
4	meet and confer and hopefully agree to add that. It
5	wouldn't be a strict limit, whatever it would be, and there
6	would still be some room for flexibility at that point.
7	THE COURT: All right. Yeah, I think some
8	additional flexibility is probably necessary there.
9	I will grant the motion to the extent of limiting
10	the depositions to one prescriber and four treaters, with
11	the proviso that the plaintiffs in a reasonable period of
12	time would identify any additional treaters that they are
13	likely to call at trial, so that their depositions could be
14	taken by the defendants as well during the requisite time
15	period. All right?
16	MS. LESKIN: Thank you, Your Honor.
17	MR. ROBINS: That's fine.
18	THE COURT: Okay. All right. The second motion.
19	Ms. Flaherty.
20	MS. FLAHERTY: Good afternoon, Your Honor.
21	As the court is aware, plaintiffs filed a motion
22	to amend the protective order as it pertains to the
23	privilege log. Since we filed that motion, we continued to
24	meet and confer with defendants literally right up until
25	this status conference. And I am pleased to report that we

1	have reached an agreement where defendants will provide us
2	with some additional information and we are optimistic that
3	that is going to address our concerns.
4	THE COURT: All right.
5	MS. FLAHERTY: So based on their representations,
6	we will pull our motion down at this time.
7	THE COURT: All right. The record will note the
8	motion having been withdrawn. If there is any issue that
9	arises, we could even have a telephone conference, if
10	necessary, to resolve it. Okay?
11	MS. FLAHERTY: One more item, Your Honor.
12	THE COURT: Yes.
13	MS. FLAHERTY: We have submitted to the court a
14	jointly proposed order regarding the establishment of a bank
15	account for the common benefit fund. We have also forwarded
16	that to Johnson and Johnson's counsel, which we
17	inadvertently left off the initial email. But if the court
18	has any questions regarding the account, we are happy to
19	answer those, otherwise I think that is ready for your
20	review.
21	THE COURT: Western Bank in Bloomington?
22	MS. FLAHERTY: That is correct.
23	THE COURT: Okay. And there is no objection here
24	from the defense, correct?
25	MS. LESKIN: No, Your Honor.

1 THE COURT: Okay. I will sign it and file it this 2 afternoon. 3 MS. FLAHERTY: Thank you. THE COURT: All right. 4 5 MS. FLAHERTY: I believe the last issue would be 6 the scheduling of our next status conference. 7 THE COURT: Okay. All right. 8 Yes, Mr. Solow. 9 MR. SOLOW: On that last agenda item, Your Honor, 10 of scheduling the September conference, we had a moment to 11 speak right before the conference. I didn't get a chance to 12 speak to your clerk about it, but with all these depositions 13 in September --14 THE COURT: It sounds like there's a few going on. 15 MR. SOLOW: Yeah. And the Jewish holidays in 16 September, we were wondering if we could thread the needle 17 on Tuesday, September 12th. 18 THE COURT: Let's see here. 19 Heather, we have the Rozycky trial that day? COURTROOM DEPUTY: It will be day two. 20 They said 21 it might be done in a day and a half, but we may still be in 22 trial. 23 THE COURT: Yeah. If we can do it later in the 24 day on Tuesday the 12th, that would work fine with me, or we 25 could just break during trial if we're -- I think we have

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1	the three days for that, don't we?
2	COURTROOM DEPUTY: Yes, Your Honor.
3	THE COURT: Well, Wednesday I have got a little
4	bit of a problem later in the day. No. That's fine. Let's
5	do it on Tuesday the 12th. We can do it at the same time at
6	2:00. We will just break the trial for give the jury a
7	little extra break in the afternoon.
8	MR. SOLOW: Thank you, Your Honor.
9	MR. ROBINS: Your Honor, Bill Robins again. I'm
10	going to be starting another bellwether trial in front of
11	Judge Kennelly on the 18th, so I most likely won't be here.
12	THE COURT: All right.
13	MR. ROBINS: But my co-counsel will be here at the
14	next hearing.
15	THE COURT: Okay. He's got you on a tight trial
16	schedule this year.
17	MR. ROBINS: Yeah. Kind of going back to back at
18	the moment.
19	THE COURT: How long did the one in July last?
20	MR. ROBINS: Well, we started the first one we
21	started in June. We tried it for about a little over a week
22	and then it was a mistrial, because one of the lawyers
23	involved had a health issue, and we took a short break, and
24	then we started the next case, and I think it in trial I
25	think it ended up being about 13, 14 days, something like

1 that. 2 THE COURT: That's long enough. 3 MR. ROBINS: Yeah. Something like that. THE COURT: All right. Anything else for today? 4 5 MR. ROBINS: Nothing from the plaintiffs, Your 6 Honor. 7 THE COURT: And the 12th works for you, right? MR. ROBINS: It does for our side. 8 9 THE COURT: Okay. Very well. We will see you all 10 on the 12th of September. 11 Court's in recess. Thank you. 12 COURTROOM DEPUTY: All rise. 13 (Court adjourned at 2:51 p.m., 8-10-2017.) 14 \* \* \* 15 I, Renee A. Rogge, certify that the foregoing is a 16 correct transcript from the record of proceedings in the 17 above-entitled matter. 18 Certified by: /s/Renee A. Rogge Renee A. Rogge, RMR-CRR 19 20 21 22 23 24 25