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7	UNITED STATES DISTRICT COURT		
8	BEASTERN DISTRICT OF CALIFORNIA		
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10	JASON SMITH,	CASE No. 1:15-cv-01662-LJO-MJS (PC)	
11	Plaintiff,	FINDINGS AND RECOMMENDATION TO	
12	V.	DISMISS ACTION FOR FAILURE TO STATE A CLAIM	
13	DR. JOHAL, et al.,	(ECF NO. 19)	
14	Defendants.	FOURTEEN (14) DAY OBJECTION	
15		DEADLINE	
16 17			
17 18			
10	Plaintiff is a state prisoner proceeding pro se and in forma pauperis in this civil		
20	rights action brought pursuant to 42 U.S.C. § 1983. (ECF Nos. 1 & 5.)		
20 21	The Court dismissed Plaintiff's complaint and first amended complaint for failure		
22	to state a claim, but gave leave to amend. (ECF Nos. 9, 17.) Plaintiff's second amended		
23	I. SCREENING REQUIREMENT		
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		complaint or portion thereof if the prisoner has	
28		nalicious," or that fail to state a claim upon which	

relief may be granted, or that seek monetary relief from a defendant who is immune from
such relief. 28 U.S.C. § 1915A(b)(1),(2). "Notwithstanding any filing fee, or any portion
thereof, that may have been paid, the court shall dismiss the case at any time if the court
determines that . . . the action or appeal . . . fails to state a claim upon which relief may
be granted." 28 U.S.C. § 1915(e)(2)(B)(ii).

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II.

PLEADING STANDARD

Section 1983 "provides a cause of action for the deprivation of any rights,
privileges, or immunities secured by the Constitution and laws of the United States."
<u>Wilder v. Virginia Hosp. Ass'n</u>, 496 U.S. 498, 508 (1990) (quoting 42 U.S.C. § 1983).
Section 1983 is not itself a source of substantive rights, but merely provides a method for
vindicating federal rights conferred elsewhere. <u>Graham v. Connor</u>, 490 U.S. 386, 393-94
(1989).

To state a claim under § 1983, a plaintiff must allege two essential elements:
(1) that a right secured by the Constitution or laws of the United States was violated and
(2) that the alleged violation was committed by a person acting under the color of state
law. <u>See West v. Atkins</u>, 487 U.S. 42, 48 (1988); <u>Ketchum v. Alameda Cnty.</u>, 811 F.2d
1243, 1245 (9th Cir. 1987).

18 A complaint must contain "a short and plain statement of the claim showing that 19 the pleader is entitled to relief" Fed. R. Civ. P. 8(a)(2). Detailed factual allegations 20 are not required, but "[t]hreadbare recitals of the elements of a cause of action, 21 supported by mere conclusory statements, do not suffice." Ashcroft v. lqbal, 556 U.S. 22 662, 678 (2009) (citing Bell Atlantic Corp. v. Twombly, 550 U.S. 544, 555 (2007)). 23 Plaintiff must set forth "sufficient factual matter, accepted as true, to state a claim to relief 24 that is plausible on its face." Id. Facial plausibility demands more than the mere 25 possibility that a defendant committed misconduct and, while factual allegations are 26 accepted as true, legal conclusions are not. ld. at 677-78.

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1 III.

PLAINTIFF'S ALLEGATIONS

Plaintiff is incarcerated at the Correctional Training Facility but complains of acts
that occurred at Wasco State Prison. He names the following defendants in their
individual capacities: (1) A. Johal, M.D., (2) Chief Physician A. Klang, (3) Chief Medical
Executive A. Youssef, M.D., (4) Dr. Zepp.

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Plaintiff's allegations may be summarized essentially as follows.

On October 28, 2014, Plaintiff submitted a Health Care Services Request Form
complaining of pain in his right shoulder and limited movement after exercising. On
October 31, 2014, he was examined by Defendant Johal. Plaintiff advised Johal of his
complaints. Johal prescribed Naproxen for pain and ordered Plaintiff reassigned to a
lower bunk and light duty work for three months.

12 On December 2, 2014, Plaintiff again was examined by Johal. Plaintiff complained 13 of continued pain and inadequacy of the medication. Johal expressed disbelief that 14 Plaintiff's injury was causing so much pain and speculated that Plaintiff was merely 15 seeking morphine. She stated, "All you Blacks are drug addicts." She threatened to 16 activate her security alarm if Plaintiff did not leave. Plaintiff left.

At some point during this time period, Defendant Johal told Plaintiff that he wouldbe scheduled for an MRI.

On December 5, 2014, Plaintiff sent a request for interview to Defendant Klang
requesting intervention in Plaintiff's medical concerns. Plaintiff advised Klang that Johal
and Zepp had refused him adequate medication, and also advised Klang of Johal's
derogatory statements. He advised Klang that Johal and Zepp allowed Plaintiff's
prescription to expire and refused to renew it. Klang did not respond.

On December 22, 2014, Plaintiff sent Defendant Youssef an inmate request form
complaining that Klang had not responded to the request for interview. Plaintiff relayed
that Johal and Zepp had refused him morphine and that his medication was inadequate.
He requested an MRI and that Pain Management review his medication. Youssef did not
respond.

1 On January 21, 2015, Plaintiff filed an administrative appeal. Plaintiff complained 2 that Defendants Johal and Zepp did not adequately treat his torn rotator cuff and 3 resulting pain. He requested the MRI that Johal had promised, effective pain medication, 4 and to be placed on a waiting list for surgery.

On January 22, 2015, Plaintiff received an MRI. He was told that results would be
available in two weeks.

On February 4, 2015, Defendant Johal interviewed Plaintiff in relation to his
appeal. Plaintiff expressed his continued pain and his desire for morphine. Johal refused
morphine. She refused Plaintiff surgery, stating that it was because he had filed an
administrative appeal. She referred Plaintiff for an orthopedic consultation.

On February 23, 2015, Defendant Klang granted Plaintiff's appeal in part.
Plaintiff's request for MRI was granted. His request to be referred to a general surgeon
was denied. His request for morphine was denied. His appointment for an orthopedic
consultation was approved and the appointment was pending.

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At some point, Plaintiff was prescribed Tylenol #3 for pain.

On March 5, 2015, Plaintiff submitted his appeal to the second level. He
complained of Johal's indifference and that Tylenol #3 was inadequate. He requested
surgery.

Defendant Youssef denied Plaintiff's appeal at the second level. He stated, "Morphine cannot be prescribed based on current CCHCS guidelines. Your current recommended therapy is within current community standards." According to Plaintiff, this is a reference to the California Prison Health Care Services pain management guidelines. Plaintiff claims he was eligible for morphine under the guidelines. (The portion of the guidelines he quotes do not appear to support this assertion.)

25 On May 26, 2015, Plaintiff was seen by non-party Dr. Paik. Dr. Paik
26 recommended surgery.

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On June 2, 2015, Defendants Johal and Zepp "allowed" Plaintiff's pain medication
 to expire and refused to renew it. Plaintiff was without medication for the eight days
 leading up to his surgery.

On June 10, 2015, Plaintiff underwent surgery and was returned to the prison.
Plaintiff claims that the delay in his treatment resulted in further unspecified injury to his
shoulder and unnecessary pain.

On June 11, 2015, Defendant Johal denied Plaintiff's request for a temporary layin, which would have confined him to his living quarters and relieved him of his work
duty. Johal also denied Plaintiff's request for light duty, and a lower bunk assignment.
Defendants Johal and Zepp typically provide other inmates with similar injuries such
accommodations.

Plaintiff informed Johal that his work supervisor was requiring him to perform full
duty or face a serious rules violation report. Johal then approved light-duty, a lay-in, and
a lower bunk accommodation.

From June 10, 2015 to August 6, 2015, Plaintiff did not receive physical therapy
as ordered by his doctor. Defendants Johal and Zepp failed to follow up on why Plaintiff
was not receiving therapy.

Records attached to Plaintiff's complaint reflect that he received morphine for three days following surgery. From June 13, 2015 to June 16, 2015, Plaintiff was without pain medication. Plaintiff states that Defendants Johal and Zepp refused to renew his medication. Plaintiff believes this was in retaliation for him having filed administrative appeals. (Records attached to Plaintiff's complaint reflect that, on June 17, 2015, he was prescribed a thirty day course of methadone pain.)

On June 17, 2015, Plaintiff saw Dr. Paik. Paik changed Plaintiff's bandage and
recommended pain medication and urgent physical therapy. These recommendations
were relayed to Defendant Youssef.

On June 22, 2015, Plaintiff saw Dr. Paik who again recommended urgent physical
therapy. Paid advised Plaintiff that he suffered major cartilage damage between his right

shoulder joints. Plaintiff attributes the damage to the treatment deficiencies by Johal,
 Zepp, Klang, and Youssef.

On June 24, 2015, the physical therapist at Plaintiff's institution quit working
and/or quit providing therapy to patients as recommended by Defendant Youssef.

5 On July 8, 2015, Plaintiff submitted a health care services request form to
6 Defendant Zepp. He complained of pain and stiffness and lack of physical therapy.

7 On July 30, 2015, and August 5, 2015, Plaintiff's physical therapy sessions were8 cancelled.

9 On August 10, 2015, Plaintiff saw Dr. Paik. Upon return to the prison, he saw
10 Defendant Zepp. Zepp renewed Plaintiff's medication and recommended physical
11 therapy. Plaintiff advised Zepp that Tylenol #3 was not working and he was in severe
12 pain. On this date, Plaintiff underwent his first physical therapy session.

Thereafter, several physical therapy sessions were cancelled. Defendant Youssef
refused to allow Plaintiff to take a therapy band to his cell to perform therapy. According
to Plaintiff, therapy bands are permitted at other institutions.

On August 31, 2015, Plaintiff saw Dr. Paik. Paik assured Plaintiff he would advise
Youssef of the need for therapy to avoid further surgery.

As a result of the lack of therapy, Plaintiff had poor healing. He believes all of the
 defendants retaliated against him for filing his January 21, 2015 grievance against Johal.
 Plaintiff claims violation of his First and Eighth Amendment rights. He seeks
 monetary relief and a declaratory judgment.

22 IV. ANALYSIS

Α.

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Medical Indifference

The Eighth Amendment's Cruel and Unusual Punishments Clause prohibits deliberate indifference to the serious medical needs of prisoners. <u>McGuckin v. Smith</u>, 974 F.2d 1050, 1059 (9th Cir. 1992). A claim of medical indifference requires (1) a serious medical need, and (2) a deliberately indifferent response by defendant. <u>Jett v.</u> <u>Penner</u>, 439 F.3d 1091, 1096 (9th Cir. 2006). The deliberate indifference standard is met 1 by showing (a) a purposeful act or failure to respond to a prisoner's pain or possible 2 medical need and (b) harm caused by the indifference. Id. Where a prisoner alleges 3 deliberate indifference based on a delay in medical treatment, the prisoner must show 4 that the delay led to further injury. See Hallett v. Morgan, 296 F.3d 732, 745-46 (9th Cir. 5 2002); McGuckin, 974 F.2d at 1060a; Shapley v. Nevada Bd. Of State Prison Comm'rs, 6 766 F.2d 404, 407 (9th Cir. 1985) (per curiam). Delay which does not cause harm is 7 insufficient to state a claim of deliberate medical indifference. Shapley, 766 F.2d at 407 8 (citing Estelle v. Gamble, 429 U.S. 97, 106 (1976)).

9 "Deliberate indifference is a high legal standard." Toguchi v. Chung, 391 F.3d 10 1051, 1060 (9th Cir. 2004). "Under this standard, the prison official must not only be 11 aware of the facts from which the inference could be drawn that a substantial risk of 12 serious harm exists,' but that person 'must also draw the inference.'" ld. at 1057 (quoting 13 Farmer v. Brennan, 511 U.S. 825, 837 (1994)). "If a prison official should have been 14 aware of the risk, but was not, then the official has not violated the Eighth Amendment, 15 no matter how severe the risk." Id. (brackets omitted) (quoting Gibson, 290 F.3d at 16 1188). Mere indifference, negligence, or medical malpractice is not sufficient to support 17 the claim. Broughton v. Cutter Labs., 622 F.2d 458, 460 (9th Cir. 1980) (citing Estelle v. 18 Gamble, 429 U.S. 87, 105-06 (1976)). A prisoner can establish deliberate indifference by 19 showing that officials intentionally interfered with his medical treatment for reasons 20 unrelated to the prisoner's medical needs. See Hamilton v. Endell, 981 F.2d 1062, 1066 21 (9th Cir. 1992); Estelle, 429 U.S. at 105.

An allegation that prison officials deliberately ignored a prisoner's complaint about the ineffective nature of prescribed pain medication and the pain being suffered as a result can, in some circumstances, give rise to a constitutional claim. <u>See Chess v.</u> <u>Dovey</u>, No. CIV S-07-1767 LKK DAD P., 2011 WL 567375, at *21 (E.D. Cal. Feb. 15, (denying summary judgment on Eighth Amendment claim where the doctor "ignored plaintiff's complaint about the ineffective nature of the Tylenol, aspirin and other medications he was being given and the pain being suffered as a result"); <u>Franklin v.</u>

1 Dudley, No. 2:07-cv-2259 FCD KJN P., 2010 WL 5477693, at *6 (E.D. Cal. Dec. 29, 2 2010) (existence of triable issue of fact as to whether defendant violated Eighth 3 Amendment precluded the granting of summary judgment where plaintiff was previously 4 prescribed narcotic pain medication but now was given only Motrin, Naprosyn, and 5 Tylenol under prison's no-narcotic policy). However, a prisoner does not have a 6 constitutional right to the medication of his choice, and a mere difference of opinion 7 regarding appropriate treatment and pain medication is insufficient to give rise to a 8 constitutional claim. Toguchi, 391 F.3d at 1058; Wilson v. Borg, No. 95-15720, 1995 WL 9 571481, at *2 (9th Cir. Sept. 27, 1995); Smith v. Norrish, No. 94-16906, 1995 WL 10 267126, at *1 (9th Cir. May 5, 1995); McMican v. Lewis, No. 94-16676, 1995 WL 11 247177, at *2 (9th Cir. Apr. 27, 1995).

12 Plaintiff's allegation of a torn rotator cuff is sufficient to state a serious medical 13 need. Jett, 439 F.3d at 1096 (a "serious medical need" may be shown by demonstrating 14 that "failure to treat a prisoner's condition could result in further significant injury or the 15 'unnecessary and wanton infliction of pain'"); McGuckin, 974 F.2d at 1059-60 ("The 16 existence of an injury that a reasonable doctor or patient would find important and 17 worthy of comment or treatment; the presence of a medical condition that significantly 18 affects an individual's daily activities; or the existence of chronic and substantial pain are 19 examples of indications that a prisoner has a 'serious' need for medical treatment.").

20 However, the facts alleged regarding the time period leading up to Plaintiff's 21 surgery do not reflect deliberate indifference. According to Plaintiff, he was prescribed 22 Naproxen and, later, Tylenol #3. He was assigned to a lower bunk and light duty work. 23 He was referred for an MRI and a consultation with an orthopedic surgeon. The surgeon 24 recommended surgery, which Plaintiff received. Thus, Plaintiff was not denied treatment 25 or pain medication. Although he desired to proceed to surgery more quickly, the facts do 26 not suggest that the delay is attributable to any of the defendants, or that they could 27 have scheduled Plaintiff for surgery absent input from the surgeon.

1 It is clear that Plaintiff would have preferred a different medication than that which 2 he was offered; however, the facts alleged do not suggest that his pre-surgical pain was 3 managed with deliberate indifference. He was prescribed one medication and, when it 4 was insufficient, was given another. He was told that he did not meet the clinical criteria 5 for morphine. Although Defendant Johal allegedly made disparaging remarks regarding 6 Plaintiff's supposed drug-seeking behavior, she nonetheless offered him treatment. 7 Plaintiff's complaints appear to reflect a mere difference of opinion that does not give rise 8 to a constitutional claim. And, although Plaintiff alleges his prescription was "allowed" to 9 expire eight days prior to his surgery, leaving him without medication during this time, 10 there are no facts to suggest that Defendants were aware Plaintiff was without 11 medication or purposefully denied him medication.

12 Plaintiff raises various allegations regarding the care he received following 13 surgery. Again, he complains of the insufficiency of pain medication. Plaintiff initially was 14 given morphine for pain, then methadone, then at some point Tylenol #3. There was a 15 three day interval between morphine and methadone when Plaintiff was without pain 16 medication. He attributes the denial to Defendants Johal and Zepp; however, he does 17 not state that he saw these Defendants during that interval or otherwise explain how 18 they were involved in denying his medication. He further states that he advised 19 Defendant Zepp on August 10, 2015 that Tylenol #3 was inadequate. He does not 20 describe her response to that request or any reasons given for denying a change in 21 medication. However, Plaintiff also underwent physical therapy on that date. Based on 22 the facts alleged, it is plausible that Defendant Zepp wished to await the results of 23 physical therapy before considering a change in medication. In any event, the facts 24 alleged by Plaintiff are insufficient to allege deliberate indifference to his complaints of 25 pain.

Plaintiff complains that Defendant Johal initially denied him various
accommodations following his surgery. However, Johal granted the accommodations
upon being advised that Plaintiff was told he was required to perform his regular work.

Thus, Johal took action upon being apprised of Plaintiff's circumstances. This does not
 support a finding of deliberate indifference.

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3 Plaintiff complains that he was denied physical therapy. The the lack of physical 4 therapy as recommended by Plaintiff's surgeon is troubling. However, it is unclear that 5 this deficiency is attributable to any of the Defendants. Dr. Paik recommended therapy 6 on June 17, 2015. On June 24, 2015, the physical therapist at the institution quit, or quit 7 providing treatment to certain patients. Plaintiff eventually underwent therapy on August 8 10, 2015, only to have subsequent sessions cancelled without explanation. There are no 9 facts to suggest that these circumstances were within the Defendants' control. Plaintiff 10 also contends that Defendant Youssef denied Plaintiff's request for use of a therapy 11 band in his cell. However, Plaintiff presents no facts regarding the information contained 12 in his request or any reasons for its denial. These facts are insufficient to state deliberate 13 indifference.

14 Lastly, Plaintiff appears to attribute liability to Defendants Klang and Youssef 15 based on their failure to respond to requests for interview and their responses to 16 Plaintiff's administrative appeal. The failure to respond to a request for interview does 17 not, in itself, reflect deliberate indifference. There are no facts to suggest that 18 Defendants Klang and Youssef received these requests. Even if they did, Plaintiff has 19 not stated a viable claim against any defendant for denying him medical care. Absent the 20 presentation of facts sufficient to show that an Eighth Amendment violation occurred in 21 the first place, Plaintiff cannot pursue a claim against those to whom he complained 22 about the alleged denial.

Similarly, Plaintiff's claims regarding the review of his administrative appeal are
insufficient to state a claim. As Plaintiff already was advised, denying a prisoner's
administrative appeal generally does not cause or contribute to the underlying violation.
<u>George v. Smith</u>, 507 F.3d 605, 609 (7th Cir. 2007). However, prison administrators
cannot willfully turn a blind eye to constitutional violations being committed by
subordinates. Jett v. Penner, 439 F.3d 1091, 1098 (9th Cir. 2006). Thus, there may be

1 limited circumstances in which those involved in reviewing an inmate appeal can be held 2 liable under section 1983. Those circumstances are not presented here. Moreover, 3 Defendant Klang referred Plaintiff for an orthopedic consultation with the doctor who 4 eventually recommended and performed Plaintiff's surgery; Klang's denial of Plaintiff's 5 request for referral to a general surgeon therefore does not reflect deliberate indifference 6 but a difference of opinion as to appropriate care. And, although both Klang and Youssef 7 denied Plaintiff's requests for morphine, allegations in that regard fail to state a claim for 8 the reasons already stated.

9 This is Plaintiff's third attempt to state a cognizable medical indifference claim. He
10 has been advised of the legal standard and pleading deficiencies on two prior occasions.
11 He nonetheless has failed to allege facts to state a cognizable Eighth Amendment claim.
12 Leave to amend should be denied.

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B. First Amendment Retaliation

Plaintiff now claims that certain defendants retaliated against him by providing
inadequate medical care because Plaintiff filed an administrative grievance.

"Within the prison context, a viable claim of First Amendment retaliation entails
five basic elements: (1) An assertion that a state actor took some adverse action against
an inmate (2) because of (3) that prisoner's protected conduct, and that such action (4)
chilled the inmate's exercise of his First Amendment rights, and (5) the action did not
reasonably advance a legitimate correctional goal." <u>Rhodes v. Robinson</u>, 408 F.3d 559,
567-68 (9th Cir. 2005).

The second element of a prisoner retaliation claim focuses on causation and motive. <u>See Brodheim v. Cry</u>, 584 F.3d 1262, 1271 (9th Cir. 2009). A plaintiff must show that his protected conduct was a "'substantial' or 'motivating' factor behind the defendant's conduct." <u>Id.</u> (quoting <u>Sorrano's Gasco. Inc. v. Morgan</u>, 874 F.2d 1310, 1314 (9th Cir. 1989). Although it can be difficult to establish the motive or intent of the defendant, a plaintiff may rely on circumstantial evidence. <u>Bruce v. Ylst</u>, 351 F.3d 1283, 1288-89 (9th Cir. 2003) (finding that a prisoner establishes a triable issue of fact

regarding prison officials' retaliatory motives by raising issues of suspect timing,
 evidence, and statements); <u>Hines v. Gomez</u>, 108 F.3d 265, 267-68 (9th Cir. 1997); <u>Pratt</u>
 <u>v. Rowland</u>, 65 F.3d 802, 808 (9th Cir. 1995) ("timing can properly be considered as
 circumstantial evidence of retaliatory intent").

The third prong can be satisfied by various activities. Filing a grievance is a
protected action under the First Amendment. <u>Valandingham v. Bojorquez</u>, 866 F.2d
1135, 1138 (9th Cir. 1989). Pursuing a civil rights litigation similarly is protected under
the First Amendment. <u>Rizzo v. Dawson</u>, 778 F.2d 527, 532 (9th Cir. 1985).

With respect to the fourth prong, "[it] would be unjust to allow a defendant to
escape liability for a First Amendment violation merely because an unusually determined
plaintiff persists in his protected activity" <u>Mendocino Envtl. Ctr. v. Mendocino Cnty.</u>,
192 F.3d 1283, 1300 (9th Cir. 1999). The correct inquiry is to determine whether an
official's acts would chill or silence a person of ordinary firmness from future First
Amendment activities. <u>Rhodes</u>, 408 F.3d at 568-69 (citing <u>Mendocino Envtl. Ctr.</u>, 192
F.3d at 1300).

With respect to the fifth prong, a prisoner must affirmatively show that "the prison
authorities' retaliatory action did not advance legitimate goals of the correctional
institution or was not tailored narrowly enough to achieve such goals." <u>Rizzo</u>, 778 F.2d at
532.

20 Plaintiff filed a single administrative grievance complaining of care by Johal and 21 Zepp. According to Plaintiff, Johal stated in relation to the administrative appeal that she 22 was denying Plaintiff morphine because he had filed the grievance. At the same time, 23 however, Johal referred Plaintiff for an orthopedic consultation. She also later prescribed 24 him Tylenol #3 and, after his surgery, granted him various accommodations. Likewise, 25 Zepp offered Plaintiff pain medication, although not his preferred medication. This course 26 of conduct does not reflect a retaliatory animus stemming from Plaintiff's grievance. 27 Furthermore, Plaintiff has not alleged facts to suggest that the decision to deny Plaintiff 28 morphine is unsupported by legitimate correctional goals; to the contrary, the facts

presented suggest that the decision was supported by clinical standards applied within
 the institution.

- Plaintiff fails to state a cognizable retaliation claim, and it does not appear he
 could do so if given leave to amend. Further leave to amend should be denied.
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V. CONCLUSION AND RECOMMENDATION

Plaintiff's second amended complaint does not state a cognizable claim for relief.
He previously was advised of pleading deficiencies and afforded the opportunity to
correct them. He failed to do so. Any further leave to amend reasonably appears futile
and should be denied.

10 The undersigned recommends that the action be dismissed with prejudice, that 11 dismissal count as a strike pursuant to 28 U.S.C. § 1915(g), and that the Clerk of the 12 Court terminate any and all pending motions and close the case.

13 The findings and recommendation will be submitted to the United States District 14 Judge assigned to the case, pursuant to the provisions of Title 28 U.S.C. § 636(b)(1). 15 Within fourteen (14) days after being served with the findings and recommendation, the 16 parties may file written objections with the Court. The document should be captioned 17 "Objections to Magistrate Judge's Findings and Recommendation." A party may respond 18 to another party's objections by filing a response within fourteen (14) days after being 19 served with a copy of that party's objections. The parties are advised that failure to file 20 objections within the specified time may result in the waiver of rights on appeal. 21 Wilkerson v. Wheeler, 772 F.3d 834, 839 (9th Cir. 2014) (citing Baxter v. Sullivan, 923 22 F.2d 1391, 1394 (9th Cir. 1991)).

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IT IS SO ORDERED.

Dated: <u>October 31, 2016</u>

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Ist Michael J. Sen

UNITED STATES MAGISTRATE JUDGE

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