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UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF CALIFORNIA

EFRAIN SALAZAR,  Plaintiff,  v.  DR. KOKOR, et al.,  Defendants.	CASE NO. 1:14-cv-00211-AWI-MJS (PC)  <b>FINDINGS AND RECOMMENDATIONS TO DISMISS NON-COGNIZABLE CLAIMS</b>  <b>(ECF No. 18)</b>
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Plaintiff is a state prisoner proceeding pro se and in forma pauperis in this civil rights action brought pursuant to 42 U.S.C. § 1983. He has consented to Magistrate Judge jurisdiction. (ECF No. 5.) Defendant Winfred Kokor has declined to consent to Magistrate Judge jurisdiction. (ECF No. 26.)

On September 21, 2015, the Court screened Plaintiff's third amended complaint and concluded that it states a cognizable Eighth Amendment claim against Dr. Winfred Kokor. (ECF No. 19.) The remaining claims and defendants were dismissed with prejudice for failure to state a claim. The matter since has proceed through discovery and summary judgment. It presently is set for a settlement conference on January 11, 2018, and trial on June 5, 2018. (ECF Nos. 44, 45.)

1 **I. Williams v. King**

2 Federal courts are under a continuing duty to confirm their jurisdictional power  
3 and are “obliged to inquire sua sponte whenever a doubt arises as to [its] existence[.]”  
4 Mt. Healthy City Sch. Dist. Bd. of Educ. v. Doyle, 429 U.S. 274, 278 (1977) (citations  
5 omitted). On November 9, 2017, the Ninth Circuit Court of Appeals ruled that 28 U.S.C.  
6 § 636(c)(1) requires the consent of all named plaintiffs and defendants, even those not  
7 served with process, before jurisdiction may vest in a Magistrate Judge to dispose of a  
8 civil claim. Williams v. King, 875 F.3d 500 (9th Cir. 2017). Accordingly, the Court held  
9 that a Magistrate Judge does not have jurisdiction to dismiss a claim with prejudice  
10 during screening even if the plaintiff has consented to Magistrate Judge jurisdiction. Id.

11 Here, Defendants were not yet served at the time that the Court screened the first  
12 amended complaint and they therefore had not appeared or consented to Magistrate  
13 Judge jurisdiction. Because the Defendants had not consented, the undersigned’s  
14 dismissal of Plaintiff’s claims is invalid under Williams. Because the undersigned  
15 nevertheless stands by the analysis in his previous screening order, he will below  
16 recommend to the District Judge that the non-cognizable claims be dismissed.

17 **II. Findings and Recommendations on Third Amended Complaint**

18 **A. Screening Requirement**

19 The Court is required to screen complaints brought by prisoners seeking relief  
20 against a governmental entity or officer or employee of a governmental entity. 28 U.S.C.  
21 § 1915A(a). The Court must dismiss a complaint or portion thereof if the prisoner has  
22 raised claims that are legally “frivolous, malicious,” or that fail to state a claim upon which  
23 relief may be granted, or that seek monetary relief from a defendant who is immune from  
24 such relief. 28 U.S.C. § 1915A(b)(1),(2). “Notwithstanding any filing fee, or any portion  
25 thereof, that may have been paid, the court shall dismiss the case at any time if the court  
26 determines that . . . the action or appeal . . . fails to state a claim upon which relief may  
27 be granted.” 28 U.S.C. § 1915(e)(2)(B)(ii).

1           **B. Pleading Standard**

2           Section 1983 “provides a cause of action for the deprivation of any rights,  
3 privileges, or immunities secured by the Constitution and laws of the United States.”  
4 Wilder v. Virginia Hosp. Ass'n, 496 U.S. 498, 508 (1990) (quoting 42 U.S.C. § 1983).  
5 Section 1983 is not itself a source of substantive rights, but merely provides a method for  
6 vindicating federal rights conferred elsewhere. Graham v. Connor, 490 U.S. 386, 393-94  
7 (1989).

8           To state a claim under § 1983, a plaintiff must allege two essential elements:  
9 (1) that a right secured by the Constitution or laws of the United States was violated and  
10 (2) that the alleged violation was committed by a person acting under the color of state  
11 law. See West v. Atkins, 487 U.S. 42, 48 (1988); Ketchum v. Alameda Cnty., 811 F.2d  
12 1243, 1245 (9th Cir. 1987).

13           A complaint must contain “a short and plain statement of the claim showing that  
14 the pleader is entitled to relief . . . .” Fed. R. Civ. P. 8(a)(2). Detailed factual allegations  
15 are not required, but “[t]hreadbare recitals of the elements of a cause of action,  
16 supported by mere conclusory statements, do not suffice.” Ashcroft v. Iqbal, 556 U.S.  
17 662, 678 (2009) (citing Bell Atlantic Corp. v. Twombly, 550 U.S. 544, 555 (2007)).  
18 Plaintiff must set forth “sufficient factual matter, accepted as true, to state a claim to relief  
19 that is plausible on its face.” Id. Facial plausibility demands more than the mere  
20 possibility that a defendant committed misconduct and, while factual allegations are  
21 accepted as true, legal conclusions are not. Id. at 677-78.

22           **C. Plaintiff’s Allegations**

23           Plaintiff is incarcerated at Salinas Valley State Prison but complains of acts that  
24 occurred at the California Substance Abuse Treatment Facility (“CSATF”) in Corcoran,  
25 California. Plaintiff alleges that Defendants violated his rights under the Eighth  
26 Amendment by providing him with inadequate medical care. Plaintiff names the following  
27 Defendants in their individual capacities: (1) Chief Medical Officer A. Enemoh, (2) Dr.

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1 Winfred Kokor, (3) Physician Assistant Timothy Byers, (4) Suzette Follett, R.N., and (5)  
2 Dr. Chang.

3 Plaintiff's allegations may be summarized essentially as follows:

4 In December 2006, Plaintiff was diagnosed with post-polio pain syndrome, left  
5 foot deformity, and chronic low back pain. Plaintiff was prescribed morphine sulphate  
6 and neurotine for pain and took them for four years until his transfer to CSATF.

7 Following his transfer to CSATF on or about January 17, 2011, Plaintiff's pain  
8 medication treatment was discontinued by Dr. Winfred Kokor and Physician Assistant  
9 Timothy Byers following an x-ray showing no acute fracture in Plaintiff's hip and lower  
10 back. Without reviewing Plaintiff's medical file, Byers initially decided that Plaintiff's  
11 medication would be cut off at once, but then tapered it down over a 14-day period.

12 Plaintiff filed an appeal over the discontinuation of his pain medication. Defendant  
13 Enemoh reviewed and denied this appeal on September 19, 2011, deferring to the  
14 physician's choice of treatment given his experience and license.

15 From July 2011 through July 2014, Dr. Kokor was Plaintiff's medical provider.  
16 During that time, Plaintiff repeatedly informed Dr. Kokor that the medication prescribed  
17 for him did not help the pain. Despite knowledge of Plaintiff's persistent pain and  
18 ineffectiveness of the medication prescribed, Dr. Kokor repeatedly refused to modify the  
19 treatment plan and denied Plaintiff's requests to be seen by a pain management  
20 specialist because he did not believe Plaintiff's pain allegations. As a result, Plaintiff has  
21 suffered in extreme pain since his arrival at CSATF.

22 Plaintiff has filed numerous grievances concerning the medical care he has  
23 received. On April 10, 2013, he filed an appeal asking for proper medical attention and  
24 pain management treatment. Nurse Suzette Follett partially granted this appeal.<sup>1</sup> On  
25 June 13, 2013, Follett reviewed and denied another appeal.

26 \_\_\_\_\_  
27 <sup>1</sup> Plaintiff references this appeal, which was attached to his complaint filed on February 18, 2014, but is not  
28 attached to the operative third amended complaint. "[A]n amended pleading supersedes the original," see  
Hal Roach Studios, Inc. v. Richard Feiner & Co., Inc., 896 F.2d 1542, 1546 (9th Cir. 1989), and "[a]ll  
changed pleadings shall contain copies of all exhibits referred to in the changed pleadings," E.D. Local

1 Due to ongoing severe pain in his left leg and lower back, Plaintiff has fallen  
2 several times. On February 15, 2013, he was taken to the triage treatment area after  
3 falling on his face and suffering abrasions on his forehead. Plaintiff asked the triage  
4 doctor, Dr. Chang, for a wheelchair to help with mobility. Dr. Chang denied Plaintiff's  
5 request and told him to use a cane instead.

6 Plaintiff claims generally that Defendants failed to respond to his medical needs,  
7 including pain management; denied him the opportunity to have a second opinion from a  
8 different physician; and subjected him to hostility and abuse in apparent retaliation for  
9 Plaintiff's efforts to secure proper medical care. This conduct has included filing false  
10 disciplinary write-ups, placing Plaintiff in administrative segregation, withholding medical  
11 appliances, and denying Plaintiff's requests for a wheelchair.

12 Plaintiff asks for \$250,000 in punitive damages, \$250,000 in compensatory  
13 damages, and \$250,000 in special damages.

#### 14 **D. Analysis**

##### 15 **1. Retaliation and Linkage**

16 "Within the prison context, a viable claim of First Amendment retaliation entails  
17 five basic elements: (1) An assertion that a state actor took some adverse action against  
18 an inmate (2) because of (3) that prisoner's protected conduct, and that such action (4)  
19 chilled the inmate's exercise of his First Amendment rights, and (5) the action did not  
20 reasonably advance a legitimate correctional goal." Rhodes v. Robinson, 408 F.3d 559,  
21 567–68 (9th Cir. 2005) (footnote omitted).

22 Under § 1983, Plaintiff must demonstrate that each named defendant personally  
23 participated in the deprivation of his rights. Iqbal, 556 U.S. 662, 676-77 (2009); Simmons  
24 v. Navajo Cnty., Ariz., 609 F.3d 1011, 1020-21 (9th Cir. 2010); Ewing v. City of Stockton,

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26 Rule 220. While "[p]ermission may be obtained from the Court, if desired, for the removal of any exhibit or  
27 exhibits attached to a superseded pleading, in order that the same may be attached to the changed  
28 pleading," Plaintiff has not sought permission here. Accordingly, the Court will not consider the  
attachments to Plaintiff's prior pleadings in determining the sufficiency of his allegations in the third  
amended complaint.

1 588 F.3d 1218, 1235 (9th Cir. 2009); Jones v. Williams, 297 F.3d 930, 934 (9th Cir.  
2 2002). Liability may not be imposed on supervisory personnel under the theory of  
3 respondeat superior, as each defendant is only liable for his or her own misconduct.  
4 Iqbal, 556 U.S. at 676-77; Ewing, 588 F.3d at 1235. Supervisors may only be held liable  
5 if they “participated in or directed the violations, or knew of the violations and failed to act  
6 to prevent them.” Taylor v. List, 880 F.2d 1040, 1045 (9th Cir. 1989); accord Starr v.  
7 Baca, 652 F.3d 1202, 1205-08 (9th Cir. 2011); Corales v. Bennett, 567 F.3d 554, 570  
8 (9th Cir. 2009); Preschooler II v. Clark Cnty. Sch. Bd. of Trs., 479 F.3d 1175, 1182 (9th  
9 Cir. 2007); Harris v. Roderick, 126 F.3d 1189, 1204 (9th Cir. 1997).

10 Plaintiff alleges generally that Defendants retaliated against him in response to his  
11 requests for proper medical care. The alleged retaliatory conduct included filing false  
12 disciplinary write-ups, placing Plaintiff in administrative segregation, withholding medical  
13 appliances, and denying Plaintiff’s requests for a wheelchair. Plaintiff was previously  
14 informed that he must allege specific facts in support of his claims as to each Defendant,  
15 not just base them on personal belief and speculation. He has failed to do so as to this  
16 claim. Following three unsuccessful attempts, two orders pointing out the deficiencies,  
17 and two opportunities to correct them, it appears Plaintiff has no such facts. This claim  
18 should be dismissed without leave to amend.

## 19 **2. Review and Denial of Inmate Grievances**

20 Plaintiff’s claims as to Nurse Follett and Enenmoh are based on their allegedly  
21 improper denial of Plaintiff’s inmate appeals. Generally, denying a prisoner’s  
22 administrative appeal does not cause or contribute to the underlying violation. George v.  
23 Smith, 507 F.3d 605, 609 (7th Cir. 2007). The mere possibility of misconduct is  
24 insufficient to support a claim, Iqbal, 129 S.Ct. at 1949–50; Moss, 572 F.3d at 969, and  
25 there is inadequate factual support for a claim that in denying his inmate appeal, these  
26 Defendants knew of and disregarded a substantial risk of harm to Plaintiff. Farmer, 511  
27 U.S. at 837. Nevertheless, because prison administrators cannot willfully turn a blind eye  
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1 to constitutional violations being committed by subordinates, there may be limited  
2 circumstances in which those involved in reviewing an inmate appeal can be held liable  
3 under section 1983. Jett v. Penner, 439 F.3d 1091, 1098 (9th Cir. 2006). There are no  
4 facts to show that Defendants willfully turned a “blind eye” to constitutional violations.  
5 Jett, 439 F.3d at 1098. Thus, Defendants Follett and Enemoh should be dismissed  
6 from this action.

### 7                   **3. Medical Indifference**

8           The Eighth Amendment’s Cruel and Unusual Punishments Clause prohibits  
9 deliberate indifference to the serious medical needs of prisoners. McGuckin v. Smith,  
10 974 F.2d 1050, 1059 (9th Cir. 1992). A claim of medical indifference requires (1) a  
11 serious medical need, and (2) a deliberately indifferent response by defendant. Jett v.  
12 Penner, 439 F.3d 1091, 1096 (9th Cir. 2006). The deliberate indifference standard is met  
13 by showing (a) a purposeful act or failure to respond to a prisoner’s pain or possible  
14 medical need and (b) harm caused by the indifference. Id. Where a prisoner alleges  
15 deliberate indifference based on a delay in medical treatment, the prisoner must show  
16 that the delay led to further injury. See Hallett v. Morgan, 296 F.3d 732, 745-46 (9th Cir.  
17 2002); McGuckin, 974 F.2d at 1060a; Shapley v. Nevada Bd. Of State Prison Comm’rs,  
18 766 F.2d 404, 407 (9th Cir. 1985) (per curiam). Delay which does not cause harm is  
19 insufficient to state a claim of deliberate medical indifference. Shapley, 766 F.2d at 407  
20 (citing Estelle v. Gamble, 429 U.S. 97, 106 (1976)).

21           “Deliberate indifference is a high legal standard.” Toguchi v. Chung, 391 F.3d  
22 1051, 1060 (9th Cir. 2004). “Under this standard, the prison official must not only ‘be  
23 aware of the facts from which the inference could be drawn that a substantial risk of  
24 serious harm exists,’ but that person ‘must also draw the inference.’” Id. at 1057 (quoting  
25 Farmer v. Brennan, 511 U.S. 825, 837 (1994)). “If a prison official should have been  
26 aware of the risk, but was not, then the official has not violated the Eighth Amendment,  
27 no matter how severe the risk.” Id. (brackets omitted) (quoting Gibson, 290 F.3d at  
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1 1188). Mere indifference, negligence, or medical malpractice is not sufficient to support  
2 the claim. Broughton v. Cutter Labs., 622 F.2d 458, 460 (9th Cir. 1980) (citing Estelle v.  
3 Gamble, 429 U.S. 87, 105-06 (1976)). A prisoner can establish deliberate indifference by  
4 showing that officials intentionally interfered with his medical treatment for reasons  
5 unrelated to the medical needs of the prisoner. See Hamilton v. Endell, 981 F.2d 1062,  
6 1066 (9th Cir. 1992); Estelle, 429 U.S. at 105.

7 Plaintiff's allegation that he suffers from post-polio pain syndrome, left foot  
8 deformity, and chronic low back pain is sufficient to allege a serious medical need. Jett,  
9 439 F.3d at 1096 (a "serious medical need" may be shown by demonstrating that "failure  
10 to treat a prisoner's condition could result in further significant injury or the 'unnecessary  
11 and wanton infliction of pain'"); McGuckin, 974 F.2d at 1059-60 ("The existence of an  
12 injury that a reasonable doctor or patient would find important and worthy of comment or  
13 treatment; the presence of a medical condition that significantly affects an individual's  
14 daily activities; or the existence of chronic and substantial pain are examples of  
15 indications that a prisoner has a 'serious' need for medical treatment.").

16 Plaintiff's allegations regarding inadequate treatment may be read to suggest  
17 deliberate indifference to his serious medical need. In the third amended complaint,  
18 Plaintiff alleges that Defendants Dr. Kokor and Byers discontinued Plaintiff's pain  
19 medications upon his arrival at CSATF following a negative x-ray of Plaintiff's hip and  
20 lower back. Construing the pleading liberally, the Court finds that Plaintiff has sufficiently  
21 alleged that Dr. Kokor was aware of Plaintiff's chronic pain and nonetheless  
22 discontinued the medication needed to treat that pain.<sup>2</sup> On the other hand, Plaintiff's  
23 does not allege Defendant Byers was aware of Plaintiff's medical history at the time that  
24 the medication was discontinued. Plaintiff states that Byers "did not even open[] my  
25 medical file before" the medication was reduced. As these are the only charging  
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28 <sup>2</sup> However, to the extent this claim is based on the denial of morphine, the claim has been summarily  
adjudicated in Defendant Kokor's favor. (ECF Nos. 41, 43.)



1 allegations as to Byers, the Court should dismiss this Defendant; for the same reasons  
2 set forth above, the dismissal should be with prejudice

3 Following discontinuation of the medication, Dr. Kokor met with Plaintiff for the  
4 two years and repeatedly refused to modify his pain management plan because he  
5 declined to believe Plaintiff was in pain. He allegedly disregarded, without good cause,  
6 Plaintiff's chronic symptoms and documented medical history of long term treatment of a  
7 long term medical impairment. The Court finds that Plaintiff has stated an Eighth  
8 Amendment medical claim against Defendant Dr. Kokor.

9 Plaintiff's allegations as to Dr. Chang, though, are insufficient to state a claim.  
10 Plaintiff does not allege that this Defendant was aware of Plaintiff's medical diagnosis or  
11 his history of medical treatment. A mere denial of Plaintiff's request for a wheelchair  
12 does not amount to deliberate indifference. Thus, Dr. Chang should be dismissed from  
13 this action.

### 14 **III. Conclusion and Recommendation**

15 In sum, Plaintiff's third amended complaint states a cognizable Eighth  
16 Amendment claim for inadequate medical care against Defendant Kokor but no other  
17 cognizable claims. Accordingly, it is HEREBY RECOMMENDED that this action continue  
18 to proceed only on Plaintiff's cognizable Eighth Amendment claim against Defendant  
19 Kokor, and that all other claims and defendants be dismissed with prejudice.

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

3  
4 IT IS SO ORDERED.

5 Dated: December 1, 2017

1st Michael J. Seng  
6 UNITED STATES MAGISTRATE JUDGE

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