I

1	
2	
3	
4	
5	
6	
7	
8	IN THE UNITED STATES DISTRICT COURT
9	FOR THE EASTERN DISTRICT OF CALIFORNIA
10	
11	ROBERT CLARK, No. 2:15-CV-0613-JAM-CMK-P
12	Plaintiff,
13	vs. <u>FINDINGS AND RECOMMENDATIONS</u>
14	BENNETT FEINBERG, et al.,
15	Defendants.
16	/
17	Plaintiff, a prisoner proceeding pro se, brings this civil rights action pursuant to
18	42 U.S.C. § 1983. Pending before the court is plaintiff's complaint (Doc. 1).
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. See 28 U.S.C.
21	§ 1915A(a). The court must dismiss a complaint or portion thereof if it: (1) is frivolous or
22	malicious; (2) fails to state a claim upon which relief can be granted; or (3) seeks monetary relief
23	from a defendant who is immune from such relief. See 28 U.S.C. § 1915A(b)(1), (2). Moreover,
24	the Federal Rules of Civil Procedure require that complaints contain a " short and plain
25	statement of the claim showing that the pleader is entitled to relief." Fed. R. Civ. P. 8(a)(2).
26	This means that claims must be stated simply, concisely, and directly. See McHenry v. Renne,
	1

84 F.3d 1172, 1177 (9th Cir. 1996) (referring to Fed. R. Civ. P. 8(e)(1)). These rules are satisfied
if the complaint gives the defendant fair notice of the plaintiff's claim and the grounds upon
which it rests. See Kimes v. Stone, 84 F.3d 1121, 1129 (9th Cir. 1996). Because plaintiff must
allege with at least some degree of particularity overt acts by specific defendants which support
the claims, vague and conclusory allegations fail to satisfy this standard. Additionally, it is
impossible for the court to conduct the screening required by law when the allegations are vague
and conclusory.

8

24

25

26

I. PLAINTIFF'S ALLEGATIONS

10 Plaintiff names the following as defendants: (1) Feinberg; (2) Lewis; (3) Fong; 11 and (4) Sahota. Plaintiff states that he broke his finger in December 2013 but was denied 12 medical care. According to plaintiff, he was seen by defendant Feinberg, apparently a prison 13 doctor, on May 5, 2014, for "severe pain, throbbing in the index finger area." Plaintiff informed 14 defendant Feinberg that his finger had never been set correctly. Plaintiff claims that defendant 15 Sahota reviewed his prison grievance regarding his finger but "denied the medical request for 16 help." Plaintiff also states that defendant Sahota denied surgery. Next, plaintiff claims that 17 defendant Fong reviewed his grievances and also denied medical care. Specifically, plaintiff claims that "no relief was provided for the constant pain after the interview was conduct[ed] by 18 19 Lawrence C. Fong on 7/3/2014." Finally, plaintiff claims that he "sought medical relief" from 20 defendant Lewis by way of a prison grievance but that defendant Lewis also denied care.

Attached to plaintiff's complaint are the defendants' responses to plaintiff's
various grievances. In responses dated May 13, 2014, by defendant Sahota and July 3, 2014, by
defendant Lewis, plaintiff was informed as follows:

In the First Level Appeal, received on 4/14/2014, you indicated that you are requesting to be provided with the medical care that a specialist recommended. Records show that this was a joint replacement in your finger. You are requesting an investigation in why you were not provided medical care for the pain of your fractured finger.

2

During your interview with Dr. Feinberg, your medical history was 1 reviewed. It is noted that orthopedic surgery of the 5th finger was 2 recommended by an orthopedic surgeon on 1/24/14. The request for services was denied by the Institutional Utilization Management 3 Committee (IUMC) on 2/6/14. The IUMC recommended to provide continuous care and to consider buddy taping to the adjacent finger. Records show that due to the deformity of your finger, taping caused more 4 pain than not. Dr. Feinberg resubmitted a Request for surgery on 5/5/145 for a right 5th PIP joint replacement. Your case was discussed in length by the IUMC. The pros and cons of surgery were discussed. The clinical finding of the IUMC was to deny the surgery. It was felt that any 6 recommendation at this stage may not return full function of the finger. 7 The IUMC recommended accommodations to minimize situations causing discomfort. Your request for surgery is denied. 8 9 10 **II. DISCUSSION** 11 The treatment a prisoner receives in prison and the conditions under which the 12 prisoner is confined are subject to scrutiny under the Eighth Amendment, which prohibits cruel 13 and unusual punishment. See Helling v. McKinney, 509 U.S. 25, 31 (1993); Farmer v. Brennan, 511 U.S. 825, 832 (1994). The Eighth Amendment "... embodies broad and idealistic concepts 14 15 of dignity, civilized standards, humanity, and decency." Estelle v. Gamble, 429 U.S. 97, 102 16 (1976). Conditions of confinement may, however, be harsh and restrictive. See Rhodes v. 17 Chapman, 452 U.S. 337, 347 (1981). Nonetheless, prison officials must provide prisoners with "food, clothing, shelter, sanitation, medical care, and personal safety." Toussaint v. McCarthy, 18 19 801 F.2d 1080, 1107 (9th Cir. 1986). A prison official violates the Eighth Amendment only 20 when two requirements are met: (1) objectively, the official's act or omission must be so serious 21 such that it results in the denial of the minimal civilized measure of life's necessities; and (2) 22 subjectively, the prison official must have acted unnecessarily and wantonly for the purpose of 23 inflicting harm. See Farmer, 511 U.S. at 834. Thus, to violate the Eighth Amendment, a prison official must have a "sufficiently culpable mind." See id. 24 25 /// 26 ///

3

1 Deliberate indifference to a prisoner's serious illness or injury, or risks of serious 2 injury or illness, gives rise to a claim under the Eighth Amendment. See Estelle, 429 U.S. at 3 105; see also Farmer, 511 U.S. at 837. This applies to physical as well as dental and mental 4 health needs. See Hoptowit v. Ray, 682 F.2d 1237, 1253 (9th Cir. 1982). An injury or illness is 5 sufficiently serious if the failure to treat a prisoner's condition could result in further significant injury or the "... unnecessary and wanton infliction of pain." McGuckin v. Smith, 974 F.2d 6 7 1050, 1059 (9th Cir. 1992); see also Doty v. County of Lassen, 37 F.3d 540, 546 (9th Cir. 1994). 8 Factors indicating seriousness are: (1) whether a reasonable doctor would think that the condition 9 is worthy of comment; (2) whether the condition significantly impacts the prisoner's daily 10 activities; and (3) whether the condition is chronic and accompanied by substantial pain. See 11 Lopez v. Smith, 203 F.3d 1122, 1131-32 (9th Cir. 2000) (en banc).

12 The requirement of deliberate indifference is less stringent in medical needs cases 13 than in other Eighth Amendment contexts because the responsibility to provide inmates with medical care does not generally conflict with competing penological concerns. See McGuckin, 14 15 974 F.2d at 1060. Thus, deference need not be given to the judgment of prison officials as to 16 decisions concerning medical needs. See Hunt v. Dental Dep't, 865 F.2d 198, 200 (9th Cir. 17 1989). The complete denial of medical attention may constitute deliberate indifference. See 18 Toussaint v. McCarthy, 801 F.2d 1080, 1111 (9th Cir. 1986). Delay in providing medical 19 treatment, or interference with medical treatment, may also constitute deliberate indifference. 20 See Lopez, 203 F.3d at 1131. Where delay is alleged, however, the prisoner must also 21 demonstrate that the delay led to further injury. See McGuckin, 974 F.2d at 1060.

Negligence in diagnosing or treating a medical condition does not, however, give
rise to a claim under the Eighth Amendment. See Estelle, 429 U.S. at 106. Moreover, a
difference of opinion between the prisoner and medical providers concerning the appropriate
course of treatment does not give rise to an Eighth Amendment claim. See Jackson v. McIntosh,
90 F.3d 330, 332 (9th Cir. 1996).

4

The gravamen of plaintiff's complaint is his contention that he should have been provided surgery. At best, plaintiff's allegations indicate a difference of medical opinion and not deliberate indifference. To the contrary, plaintiff's allegations as well as documents attached to the complaint clearly show that plaintiff was, in fact, provided medical treatment. Plaintiff's disagreement with the course of that treatment does not give rise to a claim under § 1983.

III. CONCLUSION

Because it does not appear possible that the deficiencies identified herein can be cured by amending the complaint, plaintiff is not entitled to leave to amend prior to dismissal of the entire action. <u>See Lopez v. Smith</u>, 203 F.3d 1122, 1126, 1131 (9th Cir. 2000) (en banc).

Based on the foregoing, the undersigned recommends that this action be dismissed for failure to state a claim.

These findings and recommendations are submitted to the United States District Judge assigned to the case, pursuant to the provisions of 28 U.S.C. § 636(b)(1). Within 14 days after being served with these findings and recommendations, any party may file written objections with the court. Responses to objections shall be filed within 14 days after service of objections. Failure to file objections within the specified time may waive the right to appeal. See Martinez v. Ylst, 951 F.2d 1153 (9th Cir. 1991).

DATED: February 23, 2016

CRAIG M. KELLISON UNITED STATES MAGISTRATE JUDGE