


EXHIBIT 1



**Georgetown
University
Hospital** 

MedStar Health

August 2, 2006

Ms. Lakeisha Ellis
Patient Financial Associate
Patient Access Department

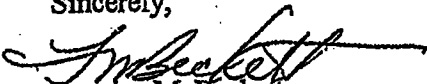
Dear Ms. Ellis:

This letter represents notification that you will be dismissed during your probationary period from your position as Patient Financial Associate effective August 2, 2006. This action is being taken for misconduct while on probation.


Specifically, on August 1, 2006, you failed to follow my instructions to remain at the Leavey Center. When I contacted you at 11:40 am on your cell phone to report back to duty you indicated that you were on the Metro. You did not report back to work until 2:35 pm. Additionally, you indicated that you spoke with Human Resources but failed to report that the Human resources representative strongly recommended that you report back to your work assignment since you were cleared by Employee Health Services on August 1, 2006.

The probationary period is a final and significant step in the examining process for regular employment. During this period, an employee is evaluated to determine whether he/she will be able to fulfill the requirements of the position. You have not satisfactorily fulfilled these requirements.

Sincerely,


Fannice M. Beckett
Patient Access Supervisor

I have received the original of this letter on this date:

Refuse To Sign
Employee Signature 

Date

EXHIBIT 2

1	LAKEISHA ELLIS,	* UNITED STATES
2	Plaintiff,	* DISTRICT COURT
3		* FOR THE DISTRICT
4	vs.	* OF COLUMBIA
5		*
6	GEORGETOWN UNIVERSITY	*
7	HOSPITAL,	* CASE NUMBER:
8	Defendant.	* 1:08-cv-01174-JDB

9 * * * * *

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11 The deposition of LAKEISHA ELLIS was taken
 12 on Friday, December 5, 2008, commencing at 10:20
 13 a.m., at the Law Offices of Crowell & Moring, 1001
 14 Pennsylvania Ave., NW, Washington, D.C. 20036,
 15 before Alfred A. Betz, Notary Public.

16

17 * * * * *

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19

20 Reported by:

21 Alfred A. Betz, Court Reporter.

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF COLUMBIA

LAKEISHA ELLIS, *
Plaintiff, *
*

vs.

* CASE NO.:
* 1:08-CV-01174-JDB

GEORGETOWN UNIVERSITY *
HOSPITAL, *
Defendant. * (Volume 2)

* * * * *

The deposition of LAKEISHA ELLIS took place on Wednesday, March 25, 2009, beginning at 10:15 a.m., at Crowell & Moring, 1001 Pennsylvania Avenue, NW, Washington, D.C., 20004, before Stacey L. Daywalt, Court Reporter.

* * * * *

Reported by:

ORIGINAL

Stacey L. Daywalt, Court Reporter

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF COLUMBIA

LAKEISHA ELLIS, *
Plaintiff, *
*

vs. * CASE NO.:

* 1:08-CV-01174-JDB

GEORGETOWN UNIVERSITY *
HOSPITAL, *
Defendant. * (Volume 3)

* * * * *

The deposition of LAKEISHA ELLIS was taken on Thursday, August 20, 2009, commencing at 9:39 a.m. at Crowell Moring, 1001 Pennsylvania Avenue, NW, Washington, D.C. 20004-2595, before Deborah A. Gurley, Notary Public.

* * * * *

Reported by:

ORIGINAL

Deborah A. Gurley, Court Reporter

1 A. Approximately from 1998 up until the time
2 I transferred to University of Maryland.

3 Q. In 2006 you were also taking classes,
4 correct?

5 A. That is correct.

6 Q. How many classes were you taking in 2006?

7 A. I've always taken two classes.

8 Q. Now, in approximately May of 2006 you were
9 hired as a Patient Financial Associate at Georgetown
10 University Hospital, right?

11 A. That is correct.

12 Q. And how did you learn of the, I'll call
13 it, the PFA position?

14 A. On-line.

15 Q. How did you apply for the position?

16 A. On-line.

17 (Whereupon, Deposition Exhibit 1, document
18 Bates stamped ELLIS000017-20, marked for
19 identification.)

20 Q. Ms. Ellis, I'm showing you what's been
21 marked as Ellis Deposition Exhibit Number 1. Can

1 interviewed with, yes.

2 Q. What happened during your interview with
3 Ms. Beckett?

4 A. Again, I can't recall everything point for
5 point but she basically outlined what I would be
6 doing as a patient financial representative in
7 Gorman and Main and what the job requirements were
8 in that department, and what was expected of the
9 Patient Financial Associates.

10 Q. Did you discuss anything else with Ms.
11 Beckett at that time?

12 A. Aside from the schedule and basic
13 interview questions, that was it.

14 Q. What did you and Ms. Beckett discuss about
15 your schedule?

16 A. That it would be, she determined that she
17 would have me work at Gorman and Main the Tuesday
18 through Saturday shift, from 8:30 a.m. until 5:00
19 Tuesday through Friday and all Saturdays it would be
20 from 8:00 a.m. until 4:30 p.m.

21 Q. Did Ms. Beckett tell you that your

1 schedule would never change?

2 A. No, she did not.

3 Q. You said that she told you that you would
4 only work in Gorman and Main?

5 A. Yes, that is correct.

6 Q. Did she tell you that you would never have
7 to work in the emergency department?

8 A. No, she did not.

9 Q. Is there anything else that you can recall
10 that you and Ms. Beckett discussed?

11 A. Not at this moment, no.

12 Q. Did you interview with anyone else at
13 Georgetown before accepting the position?

14 A. No, not that I can recall.

15 Q. What is your understanding of what a
16 Patient Financial Associate at Georgetown University
17 Hospital does?

18 A. We collect demographic information related
19 to patient assurance and pretty much collect that
20 information to ensure that the hospital is paid.

21 Q. What sorts of demographic information do

1 you collect?

2 A. As far as name, address, insurance
3 information, work information, primary care doctor,
4 things of that nature.

5 Q. And as a Patient Financial Associate if a
6 patient is checking into the hospital is that the
7 first place that a patient would come to be
8 registered?

9 A. Depending upon the service. And in my
10 particular case I was in the lab, so you can imagine
11 a lot of specialty doctors refer their patients to
12 the lab for lab work. So we saw various patients.

13 Q. But the PFA is the first place that a
14 patient goes if he or she is coming in for lab work;
15 is that correct?

16 A. That is correct, yes.

17 MS. CLARK: Objection to form. She's
18 already answered. But go ahead.

19 Q. Can you tell me specifically what sorts of
20 practice areas or specialties were in the Main
21 building when you were there in 2006?

1 A. Can you tell me what do you mean by Main?

2 Q. You said that you worked in Main, right?

3 A. That is correct.

4 Q. What types of patients came to Main?

5 A. Well, actually I only worked in Main
6 temporarily. I worked primarily in Gorman. So in
7 Gorman where I work --

8 Q. Let's talk about Main. Who came to Main
9 when you were there?

10 A. Mainly patients that were scheduled for
11 surgery, whether it was same day surgery or like
12 colonoscopy or things of that nature.

13 Q. Didn't it also include patients who were
14 going to be hospitalized as well?

15 A. Well, if they're scheduled for surgery and
16 they're staying over, then yes.

17 Q. And those patients who came through Main
18 who were going to stay overnight, if you will, some
19 of those patients were sick, weren't they?

20 MS. CLARK: Objection as to form.

21 A. I would assume that they were sick.

1 Q. Now let's talk about Gorman. You said
2 that you spent most of your time in Gorman. What
3 types of patients were registered in Gorman?

4 A. Psychiatric patients, patients coming from
5 the breast center, Lombardi, patients coming from
6 various parts of the hospital. So it was a variety
7 of patients. I can't detail each and every
8 specialty that we saw because we saw a tremendous
9 amount of patients.

10 Q. So you saw a range of types of patients?

11 A. Exactly.

12 Q. And that range of patients that you saw
13 would it be fair to say that some of the patients
14 you saw were sick?

15 A. Yes. But we were protected because we
16 were behind a barrier so there was only a small
17 opening. I wasn't really exposed to the patients.

18 Q. Were you exposed to patients in the Main
19 building?

20 A. Actually, there was again a barrier there
21 that protected us from a lot of the patients and

1 since I didn't spend a lot of time with them and I
2 didn't spend a lot of time with that particular
3 department, I wasn't really exposed to that many
4 patients.

5 Q. But was every one of your interactions
6 behind a glass barrier in Main?

7 A. No.

8 Q. There were times where you interacted with
9 the patient one-on-one, right?

10 A. Because there is no glass barrier. You're
11 in a little booth and there's like two side panels
12 that kind of protect you, then no, the patient is
13 sitting maybe this distance from here to here.

14 Q. Right. But there's no barrier between you
15 and the patient; is that correct?

16 A. No, there isn't. Not in front of you.

17 Q. Now, when you worked as a Patient
18 Financial Associate at Georgetown would it be fair
19 to say that the volume of patients who came to the
20 hospital department where you were working varied
21 from time to time?

1 Georgetown; is that correct?

2 A. Yes.

3 Q. Do you recall the name of the health care
4 provider who performed the physical?

5 A. No, I do not.

6 Q. But after your pre-placement health
7 screening you were cleared to work as a Patient
8 Financial Associate at Georgetown, correct?

9 A. Yes.

10 Q. And there were no limitations or
11 restrictions placed on your ability to work as a
12 Patient Financial Associate, right?

13 A. No.

14 Q. During your pre-placement health screening
15 you disclosed that you have asthma, correct?

16 A. Yes.

17 Q. But you didn't mention any restrictions or
18 limitations that you have as a result of your
19 asthma, correct?

20 A. That is correct.

21 Q. If I could direct your attention to about

1 the middle of the page where it states please list
2 any medications you take, do you see that?

3 A. Yes.

4 Q. It refers to Advair and Albeuterol?

5 A. Yes.

6 Q. Are those asthma medications?

7 A. Yes.

8 Q. And you were taking those in May of 2006,

9 correct?

10 A. That is correct.

11 Q. Those medications that you were taking
12 controlled your asthma, right?

13 A. Yes.

14 Q. Under that it states please list any
15 health problems for which you have been or are
16 currently being treated for, and it states asthma.
17 And then there is some writing after that. That's
18 probably not yours, right?

19 A. No, that isn't my writing.

20 Q. But I'm going to try to decipher it. It
21 states stress, heavy perfume, dust, mold, pollen.

1 I'm not clear on the next word. And then it says a
2 zero with a line through it, episode, in six to
3 seven months. So I'm going to ask you. These words
4 -- stress, heavy perfume, dust, mold, pollen, and
5 the other word I can't read -- are those things that
6 you told the health care provider that trigger your
7 asthma?

8 A. I believe the question was she asked me
9 what triggers my asthma, and I responded to very
10 general things that could trigger asthma, yes.

11 Q. And then do you recall telling the health
12 care provider that you had not had an asthma episode
13 in 6 to 7 months?

14 A. I really don't recall that 100 percent so
15 I can't be exactly accurate on that.

16 Q. Okay. So you don't have a specific
17 recollection one way or the other, right?

18 A. Not as to what timeframe I gave her, no.

19 Q. Now, you also at the bottom of the page
20 after the question do you exercise and you checked
21 yes, and then it says if yes, describe the

1 frequency, and you said cardio at least once a week.

2 Do you see that?

3 A. Yes.

4 Q. So in 2006 you were able to exercise
5 weekly at least?

6 A. Yes.

7 Q. If you look at the bottom of the forms
8 that I've given you where it states Ellis 93 at the
9 bottom, do you see that page?

10 A. Yes.

11 Q. After number one it states do you have any
12 allergies, medication or food. You said yes. And
13 you said Compazine. What is Compazine?

14 A. It's a medication used to treat nausea.

15 Q. You had been on Compazine in the past
16 prior to 2006, right?

17 A. It wasn't on a, it was given to me by a
18 physician because I had presented with nausea and I
19 had a very severe allergic reaction to it.

20 Q. Okay. What were you diagnosed with when
21 you were suffering with the nausea before?

1 that you didn't mention any condition that you had
2 that would prevent you from working in any
3 particular department at the hospital, correct?

4 A. The only thing that I mentioned was the
5 asthma. So --

6 Q. But you didn't tell employee health that
7 your asthma prevented you from working in any
8 particular department, correct?

9 A. No. I --

10 MS. CLARK: Object to the form. Go ahead.

11 A. No, I did not specifically say that my
12 asthma would permit me from working in any
13 department.

14 Q. Because in fact you stated to employee
15 health that your asthma didn't prevent you from
16 participating in any activity, correct?

17 MS. CLARK: Objection as to form.

18 A. I stated to them that with Albeuterol and
19 Advair I was able to control my asthma. That is
20 what I stated to them.

21 Q. Now, you mentioned that you worked in

1 Gorman while you were a Patient Financial Associate,
2 correct?

3 A. Yes.

4 Q. You also worked in Main, you said, for a
5 short period of time, correct?

6 A. Yes.

7 Q. Were there any other departments that you
8 worked in?

9 A. Yes.

10 Q. What were those departments?

11 A. Lombardi, the breast center, and obviously
12 the emergency room. But those were for educational
13 purposes. We had to learn about the different CTP
14 codes and ICD9 codes associated with those patients
15 so that if we saw those patients in Gorman we would
16 be knowledgeable about those codes and conditions
17 associated with those codes.

18 Q. You said that you were sent to Lombardi
19 breast center and the emergency department only for
20 educational purposes, correct?

21 A. Yes, a short period of time.

1 Q. Who told you that it was only for
2 educational purposes?

3 A. Fannice Beckett.

4 Q. What were her exact words to you?

5 A. As stated before, she wanted us to learn
6 about the different types of patients that are
7 assessed in those departments so if those patients
8 came to the lab we would be able to process those
9 patients efficiently and be familiar with the CPT
10 and ICD9 codes associate with those patients.

11 Q. So then she didn't use the words that
12 you're only going to Lombardi breast center and ED
13 for educational purposes, correct?

14 MS. CLARK: Objection as to form.

15 A. She stated that we were going there to
16 learn about the different type of patients that are
17 assessed in those departments.

18 Q. Now, when you worked in Gorman who was
19 your direct supervisor whenever you were working in
20 Gorman?

21 A. The team leader was Rennie McKenzie.

1 A. I was scheduled to work in the emergency
2 department.

3 Q. So on the weekly schedule that came out
4 you were scheduled for the emergency room; is that
5 correct?

6 A. That is correct, yes.

7 Q. Was that your first day, July 25, 2006 was
8 that your first day in the emergency room?

9 A. Yes.

10 Q. Now, tell me about your day in the
11 emergency room on July 25, 2006. What happened when
12 you first got there?

13 A. It started with me meeting with one of the
14 senior persons who basically gave me an overview
15 about the emergency department, because as I stated
16 before we had to learn about the different types of
17 patients that were assessed in all the different
18 departments. And it kind of followed suit with what
19 I had already done with learning about Lombardi, so
20 I worked in Lombardi temporarily learning about the
21 breast cancer center. So I worked there temporarily

1 just to, again, learn. So he basically gave me an
2 overview and I started to register some patients,
3 emergency patients, maybe two or three. I also
4 during the process noticed that there was nurses
5 that were leaving stool and urine samples on the
6 actual desk that I worked at. So I did make a
7 comment to the young man that was assisting me and
8 he said oh, this is norm. This is how the emergency
9 room functions. But I know that that's not meeting
10 the standards for a hospital. You shouldn't expose
11 me to those type of elements.

12 I progressed with registering patients and
13 noticed that I began to cough a little bit and then
14 I started to wheeze. So I could pretty much feel
15 the asthma attack was coming on. I then suffered a
16 full-blown asthma attack and I excused myself to the
17 restroom where I had to use my Albuterol inhaler
18 three times.

19 Q. Okay. So when you had the asthma attack
20 you had been sitting at the desk where the urine was
21 placed; is that correct?

1 did report it to Deborah Felton who was the
2 supervisor.

3 Q. Did you go back to work for a little while
4 or did you immediately report it to Deborah Felton?

5 A. I believe I immediately reported it to
6 Deborah Felton because it concerned me. It was very
7 severe, and I had to use the inhaler three times.
8 Normally I would just need to use it once. So I did
9 report it to her immediately.

10 Q. What did Ms. Felton say in response?

11 A. She was concerned about what transpired as
12 far as what caused the asthma attack. She couldn't
13 pinpoint it, obviously; she's not a doctor or a
14 medical professional. She did ask me if the
15 symptoms had subsided. At that particular time it
16 had. So she said would you be willing to go back.
17 I said I would. And she said once you go back, just
18 go to lunch and after lunch go back to Gorman.

19 Q. So I see you went to Ms. Felton's office
20 to have a conversation with her in person about the
21 asthma attack; is that correct?

1 A. Yes.

2 Q. So you went back to the emergency room
3 after the department after speaking with Ms. Felton
4 and then immediately went to lunch, correct?

5 A. Not immediately. I probably sat there
6 because I had to wait until the person that covers
7 that area came back, so maybe in half an hour to
8 45 minutes, approximately, expired.

9 Q. And were you still fine when you were --
10 in other words, you didn't suffer another asthma
11 attack in the time that you waited for the other
12 person to come back to relieve you for lunch,
13 correct?

14 A. No.

15 Q. When the other person got back, you went
16 to lunch at the hospital's cafeteria or someplace
17 else?

18 A. I went to Leavey Center.

19 Q. Did you eat lunch alone?

20 A. Yes.

21 Q. What did you have for lunch?

1 A. I recall having a Chicken Caesar Salad and
2 a Diet Coke.

3 Q. Anything else?

4 A. No.

5 Q. And how long were you gone for lunch?

6 A. Approximately 30 to 45 minutes.

7 Q. After you left lunch where did you go
8 next?

9 A. I reported back to Gorman.

10 Q. Were you feeling okay when you got back to
11 Gorman?

12 A. Overall, yes, I was feeling fine.

13 Q. So did you begin working when you got back
14 to Gorman?

15 A. That is correct, yes.

16 Q. About how long did you work before you
17 started feeling sick?

18 A. I would estimate about two hours.
19 Approximately.

20 Q. And at some point as you've testified you
21 got sick. What symptoms did you have when you got

1 sick?

2 A. An overwhelming feeling of nausea. My
3 stomach started to hurt. My head started to hurt.
4 I became light-headed and started to sweat. So ...

5 Q. What did you do when you started
6 experiencing these symptoms?

7 A. I tried to shrug it off in the beginning
8 because I wanted to finish work, but as it began to
9 intensify I told Rennie McKenzie that I was not
10 feeling well and I needed to be excused to the
11 restroom. So I actually went to the rest room to
12 see if it was something that I needed to relieve
13 myself of, so to speak, and once in there I just
14 began to feel really lightheaded, faint. Some time
15 expired and she came to check on me to see if I was
16 okay.

17 Q. At that time you were not having an asthma
18 attack, correct?

19 A. I was not having an asthma attack, no.

20 Q. So your only symptoms you were having were
21 the ones you have already described, right?

1 A. That is correct.

2 Q. What did Ms. McKenzie say when she got to
3 the ladies room and found you there?

4 A. She called my name twice. I responded.
5 She asked me was I okay. I told her no. I feel
6 really terrible. She asked me what I wanted to do,
7 if I wanted to go home or to the emergency room.
8 And I told her that I wanted to go to the emergency
9 room because I wasn't exactly sure what caused these
10 symptoms to come on.

11 Q. So at that time did Ms. McKenzie accompany
12 you to the emergency room?

13 A. Yes, she did.

14 Q. Did you speak to anyone besides Ms.
15 McKenzie before you went to the emergency room at
16 that point?

17 A. No, I did not.

18 Q. What happened when you got to the
19 emergency room?

20 A. I was actually checked in by one of the
21 Patient Financial Associates. I sat down in the

1 lobby and Rennie McKenzie sat down with me. Some
2 time expired or transpired and Fannice Beckett came
3 to check on me and see if I was okay.

4 Q. How long were you in the emergency room
5 that day? When you came in for treatment.

6 A. Approximately one and a half to two hours.

7 Q. Did you suffer an asthma attack while you
8 were in the emergency room for that one and a half
9 to two hours?

10 A. I had coughed a lot but I did not suffer a
11 full-blown asthma attack, no.

12 Q. When you got to the emergency room and you
13 were checked in by a Patient Financial Associate
14 what happened next?

15 A. I was told to wait until they called me to
16 the back to be seen by a physician.

17 Q. You weren't triaged beforehand?

18 A. That's a part of the triage process. They
19 have you come to the back initially and get the
20 information. The nurse checks your vitals. And
21 then you're sent back out into the emergency room

1 lobby to wait until the doctor is able to see you.

2 Q. As part of the triage process, did the
3 triage nurse check your breathing and your heart
4 rate?

5 A. Yes.

6 Q. And she didn't note any problems at that
7 time?

8 A. Not that I can recall. But I don't have
9 that, the medical records.

10 Q. Did Ms. Beckett come down to check on you
11 while you were waiting for the doctor or after you
12 had already been back seeing the doctor?

13 A. I believe it was before the doctor.

14 Q. What did Ms. Beckett say to you when she
15 got to the emergency room?

16 A. She asked me what happened and what was
17 going on with me as far as how I felt, and I told
18 her the symptoms that I began to experience in the
19 morning as far as the asthma attack. And I also
20 explained to her how I began to feel when I went
21 back to work in Gorman.

1 Q. Did you tell her anything else?

2 A. No.

3 Q. What was Ms. Beckett's response?

4 A. She said okay, just let me know what
5 happens after you see the doctor, and she left.

6 Q. Did Rennie McKenzie stay with you?

7 A. She left with Fannice Beckett.

8 Q. When you saw the doctor what did the
9 doctor say to you?

10 A. The doctor asked me how was I feeling,
11 what were my symptoms. I explained to her how I was
12 feeling as far as the lightheadedness, the stomach
13 aches, the nausea.

14 Q. Did you mention an asthma attack?

15 A. I don't recall mentioning my asthma attack
16 to the physician, no.

17 Q. And did the physician examine you?

18 A. Yes.

19 Q. And the physician's diagnosis when you
20 went to the emergency room was gastroenteritis,
21 correct?

1 A. That is correct.

2 Q. There were no other diagnoses?

3 A. I had no other symptoms other than the
4 gastroenteritis.

5 Q. So there were no other diagnoses by the
6 physician other than the gastroenteritis, correct?

7 A. That is correct.

8 (Whereupon, Deposition Exhibit 7, document
9 Bates stamped P000011, marked for identification.)

10 Q. I'm showing you what's been marked as
11 Deposition Exhibit Number 7. Please let me know
12 when you're ready to proceed.

13 A. I'm ready.

14 Q. Okay. Ms. Ellis, are you familiar with
15 Deposition Exhibit Number 7?

16 A. Yes.

17 Q. It's the emergency department medical
18 record for your visit on 7-25-06, right?

19 A. Yes.

20 Q. And looking at the document it indicates
21 under Diagnosis, gastroenteritis, which we've

1 already discussed. Right?

2 A. Yes.

3 Q. And then the next line indicates that you
4 should follow up with your regular M.D., right?

5 A. Yes.

6 Q. And then their instructions that you
7 should return to the emergency department if you
8 have vomiting, unable to keep anything down, or
9 fever. Do you see that?

10 A. Yes.

11 Q. Then it also tells you that you can get
12 some Imodium AD without a prescription, right?

13 A. Yes.

14 Q. And the emergency department physician
15 didn't tell you anything other than what was
16 recorded in here, correct?

17 A. No.

18 Q. After you left the emergency room that day
19 where did you go?

20 A. Home.

21 Q. Did you go back to speak with Fannice

1 Beckett?

2 A. Actually, yes, I did speak with her before
3 I left.

4 Q. You told her that you were leaving for the
5 day because you had a stomach flu, right?

6 A. I told her that I was not feeling well and
7 she excused me for the day.

8 Q. Didn't you also tell her that you had the
9 flu?

10 A. I don't recall telling her I had the flu,
11 no.

12 Q. What did she say in response to the fact
13 that you were leaving today? Well, you've testified
14 that she excused you. Did she say anything else?

15 A. Basically because as far as the timeframe
16 that I was scheduled to work had already expired
17 from the time I was in the emergency room, the day
18 was over. So she initially, as I stated before, in
19 the emergency room told me to report to her and to
20 let her know what the situation was. I told her
21 that I wasn't feeling well and that they referred me

1 to follow up with my primary care doctor. She said
2 okay and let me go home.

3 Q. Did you talk to anyone other than Fannice
4 before leaving the hospital that day?

5 A. No.

6 Q. Did you also tell Ms. Beckett that you
7 were going to see your primary care physician the
8 next day?

9 A. Yes, I did.

10 Q. And did you do that?

11 A. Yes, I did.

12 Q. Now, you were out for several days after
13 July 25 before you came back to work, correct?

14 A. That is correct.

15 Q. And can you tell me why you were out for
16 those several days?

17 A. At the recommendation of my physician.

18 Q. Which physician?

19 A. My primary care doctor.

20 Q. Did your primary care doctor provide a
21 note indicating that you needed to be out for

1 several days?

2 A. That is correct.

3 Q. What symptoms, though, if any, were you
4 having during the time that you were off work?

5 A. I still experienced the nausea. I still
6 experienced or actually started to experience severe
7 diarrhea. The light-headedness. I was still
8 experiencing those symptoms.

9 Q. Did you have an asthma attack during the
10 time period that you were off?

11 A. Not that I can recall, no.

12 Q. Now, the primary care physician that you
13 went to see was a Dr. Finkelman; is that correct?

14 A. That is correct.

15 Q. Was that the first time you had seen Dr.
16 Finkelman?

17 A. No.

18 Q. How long had you been a patient of Dr.
19 Finkelman's?

20 A. Approximately 45 years.

21 Q. What kind of doctor is Dr. Finkelman?

1 asthma attack?

2 A. She asked me what type of environment I
3 was working in, and I told her where I was at the
4 time. She was very concerned because, as I stated
5 before, it was a very severe asthma attack where I
6 had to use the inhaler three times. At that
7 particular point she concluded that it would not be
8 safe for my health to be exposed to that type of
9 environment, if that's the type of asthma attack
10 that I experienced.

11 Q. What specifically was it about the
12 environment that she said triggered your asthma
13 attack?

14 A. Well, the fact that at most hospitals as
15 far as my experience you don't do bedside
16 registrations where you're right there with the
17 patient. We were required to go right beside the
18 patient. And on that particular day I assessed a
19 patient who came in with pneumonia or pneumonia-type
20 symptoms. So she was very concerned about that,
21 about me being exposed to that. And she stated that

1 exposes me to many sick patients and puts my own
2 health at risk.

3 Q. And this is the doctor's note you referred
4 to previously, right?

5 A. That is correct.

6 Q. After you saw your treating physician did
7 you have any conversations with Fannice Beckett
8 before returning to work?

9 A. Yes, I did.

10 Q. When did you have that conversation?

11 A. On the day that, or actually the night
12 that I saw -- well, the day that I saw my physician,
13 that night I spoke with Fannice Beckett to give her
14 an update.

15 Q. So it would have been the day after you
16 were in the emergency room, right?

17 A. That is correct.

18 Q. How did you get in touch with Ms. Beckett?

19 A. She provided a pager number.

20 Q. So you paged her?

21 A. That is correct.

1 Q. And when she responded to your page what
2 did you say?

3 A. I let her know what had transpired as far
4 as my physician, which her recommendations were, and
5 Ms. Beckett's immediate response was then we will
6 need to part ways.

7 Q. Did she say, Ms. Ellis, that you would
8 need to part ways or did she say that you were hired
9 initially to work in the emergency room?

10 A. No. She stated that we would need to part
11 ways if I was not able to work in the emergency
12 room.

13 Q. And is that a quote?

14 A. That is a quote, yes.

15 Q. Did Ms. Beckett tell you that you should
16 bring in your doctor's note and that the hospital
17 would assess the doctor's note after you got back to
18 work?

19 A. That is correct.

20 Q. So she didn't make any decision regarding
21 your employment during that phone call, did she?

1 A. As far as her saying we would need to part
2 ways, to me that was her ending my employment at
3 Georgetown. She pretty much made it very clear what
4 her intentions were.

5 Q. That's your opinion, correct?

6 A. I'm going by what she stated.

7 Q. Well, did she say you're fired?

8 A. She said we will need to part ways. That
9 was her exact statement.

10 Q. Did you return to work after you spoke
11 with Ms. Beckett that night?

12 A. I returned to employee health to be
13 cleared.

14 Q. So then you weren't terminated, correct?

15 A. Not at that particular time, no.

16 Q. So then Ms. Beckett didn't terminate your
17 employment when you spoke to her on the phone, did
18 she?

19 MS. CLARK: Asked and answered.

20 Q. You can answer.

21 A. She did not terminate me, but she did make

1 suggestions that she was going that way, that we
2 would need to part ways.

3 Q. The suggestion that she was going her way,
4 that's your opinion, correct?

5 MS. CLARK: Asked and answered.

6 Q. You can answer.

7 A. She stated that she would need to part
8 ways. That is her statement.

9 Q. No. My question was it is your opinion
10 that Ms. Beckett was leaning towards terminating
11 you, right?

12 A. Yes.

13 Q. Now, you said that you returned to the
14 hospital after speaking with Ms. Beckett to be
15 cleared through employee health. What did you mean
16 by that?

17 A. Before returning to work, if you're out
18 for a certain amount of days you have to be cleared
19 through employee health. So I had to be assessed by
20 employee health to be sure that I was fit to return
21 to work.

1 Q. And so you went straight to employee
2 health your first day back; is that correct?

3 A. Actually, can I reference the date?

4 Q. First tell me no matter what day, setting
5 dates aside, right, what is the first thing you did
6 when you went back to the hospital?

7 A. When I went back to the hospital the first
8 thing that I did was basically meet with Cindy
9 Hecker who is the department head because she wanted
10 to assess what had transpired between myself,
11 Fannice and why I had been seen in the emergency
12 room. So we met on I believe it was July the 27th
13 of '06.

14 Q. So the very next day after you and Fannice
15 had the conversation you think you went back to work
16 and had this meeting with Cindy?

17 A. I had to meet with Cindy to have the
18 meeting, yes.

19 Q. Was there anyone else in the room besides
20 you and Cindy when you had the meeting?

21 A. Fannice Beckett was also present.

1 Q. Was anyone else there?

2 A. No.

3 Q. What did Cindy say at the meeting?

4 A. She wanted to again find out what had
5 transpired. I told her that I had an asthma attack,
6 that I also experienced the nausea and the diarrhea,
7 vomiting, and I was seen in the emergency room. I
8 stated that I followed up with my primary care
9 physician and basically stated what my primary care
10 physician's recommendations were as far as me not
11 working in the emergency room. And that's pretty
12 much what transpired during the meeting.

13 Q. Did you have your doctor's note with you
14 when you were in that meeting with Cindy and
15 Fannice?

16 A. I don't recall having it with me, but I
17 believe they did have a copy.

18 Q. How did they get a copy?

19 A. Because we had to provide it, or we were
20 to provide it to employee health, and also Fannice
21 Beckett was supposed to get a copy. So I believe

1 when I initially came back before I even met with
2 Cindy I gave Fannice a copy of that letter.

3 Q. And before you met with Cindy did you also
4 give a copy to employee health?

5 A. Employee health was actually -- because we
6 had to reference what my current situation was like
7 when I could return and when they would allow me to
8 return. I could not return until I was cleared by
9 employee health. They could not see me until I
10 believe it was August the 1st, so I had to wait
11 until they were able to see me. And I was not
12 allowed to return back to work until I was cleared
13 by employee health.

14 Q. So when you were sitting in that meeting
15 with Cindy and Fannice had you at least submitted
16 your form to employee health?

17 A. There was no form to submit. You could
18 not submit any forms at that particular time until
19 you actually saw employee health. But Fannice had a
20 copy of the form.

21 Q. So back to the meeting. You explained

1 what your doctor said. What did Cindy say in
2 response?

3 A. Basically she told me that once employee
4 health treated me, or actually saw me and assessed
5 if I was able to return to work, it was ultimately
6 left up to her and the hospital to decide if they
7 were willing to accommodate me.

8 Q. Did she say anything else?

9 A. Not much. Just basically went over what
10 transpired and asked me what my restrictions were,
11 and stated that ultimately they would make the
12 decision if they were willing to keep me and
13 accommodate me or let me go.

14 Q. After you went through employee health?

15 A. That is correct.

16 Q. Did Fannice Beckett say anything in the
17 meeting?

18 A. No, she did not.

19 Q. Was anything else said in the meeting?

20 A. No, not that I can recall.

21 Q. So after the meeting with Cindy Hecker and

1 Fannice Beckett that day did you meet with Cindy

2 Hecker any more?

3 A. No, I did not.

4 Q. So did you work the day you came in to
5 meet with Cindy and Fannice?

6 A. No, I did not.

7 Q. Did you work again before you went to
8 employee health to be assessed?

9 A. No, not until after I was assessed.

10 Q. So your next day back at the hospital you
11 came and went directly to employee health; is that
12 correct?

13 A. On August the 1st, yes.

14 Q. And what happened when you got to employee
15 health?

16 A. Obviously, they got a copy of the
17 physician's letter. They examined me as far as my
18 breathing, took my temperature, things of that
19 nature, asked me overall how did I feel. And with
20 the recommendation from my physician, stated my
21 restrictions, gave me the form and told me that I

1 needed to give this form to Fannice or Cindy.

2 Q. Okay.

3 (Whereupon, Deposition Exhibit 9, document
4 Bates stamped P000097, marked for identification.)

5 Q. I'm showing you what's been marked as
6 Exhibit Number 9. Please let me know when you're
7 ready to proceed.

8 A. I'm ready.

9 Q. Ms. Ellis, are you familiar with Exhibit
10 Number 9?

11 A. Yes.

12 Q. And it is the statement of work status
13 from employee health in Georgetown Hospital, right?

14 A. Yes.

15 Q. And the signature at the bottom, it's
16 Barbara somebody and I can't read the last name. Is
17 that the person you saw when you went to employee
18 health?

19 A. Yes.

20 Q. And you mentioned a form that was given to
21 you to take to Ms. Hecker, or Cindy Hecker, or to

1 so they were both there. It wasn't a scheduled
2 meeting or anything like that. I just gave it to
3 them.

4 Q. Can you tell me approximately what time
5 you brought the form upstairs and gave it to Cindy?

6 A. I can't approximate. It was two years
7 ago, so I can't give you an accurate occurrence of
8 the time.

9 Q. Can you narrow it to time of day? Do you
10 know time of day? Do you know if it was morning or
11 afternoon when you gave it to Cindy?

12 A. I believe it was in the morning.

13 Q. What did Cindy say when you gave her the
14 form?

15 A. Basically that they were still working on
16 deciding if they were willing to keep me or not.
17 And that ultimately that she needed to, I guess,
18 speak with people from HR and that I can return to
19 work until they made their decision.

20 Q. Okay. And so they did not tell you to go
21 to the emergency department, correct?

1 A. They did not ask me to return to the
2 emergency department, no.

3 Q. Where did they tell you to return?

4 A. Gorman.

5 Q. Did you go to Gorman?

6 A. Yes.

7 Q. How long did you stay at Gorman that day?

8 A. Probably for I would say four hours,
9 approximately. Four to four and a half hours.
10 Something like that.

11 Q. But at some point you left, right?

12 A. Yes.

13 Q. Why did you leave Gorman?

14 A. Because I had to -- basically at this
15 particular point they were going through the
16 decision process to see if they were willing to
17 accommodate me or to let me go. Once returning to
18 Gorman I experienced a lot of -- I wouldn't say
19 aggression but maybe chatter from other employees
20 who apparently were aware of my pending dismissal
21 and they were openly discussing it. So it made it

1 very, very uncomfortable for me. And actually the
2 decision was supposed to be made that day if they
3 were going to terminate me. So it just had me on
4 pins and needles as far as how I was feeling, and it
5 just became disruptive to the environment. So at
6 that particular point I did speak with Fannice
7 Beckett concerning this because she even thought
8 that it was disruptive to the environment, that I
9 should probably leave.

10 So we discussed maybe if I could stay at
11 the Leavey Center or if I wanted to go home, but she
12 said if I went home I would need to return once they
13 made their decision. So I decided to go home.

14 Q. Now, who was talking about what you called
15 your, I think you said, impending termination?

16 A. Several of my co-workers. One in
17 particular whose name I can't recall but I believe
18 she was a team leader came to me and said you just
19 need to pick yourself up by the bootstraps. I said
20 what are you talking about? She said don't worry
21 about anything. And then I also overheard Rennie

1 discussing it with her saying basically they're
2 trying to get rid of her but they have nothing on
3 her. I actually heard that.

4 Q. You did?

5 A. Yes.

6 Q. Now, the other team leaded that said pick
7 yourself up by the bootstraps, you don't recall her
8 name?

9 A. I don't recall her name. Again, this was
10 more than two years ago.

11 Q. Was there a team leader named Irma Wimbush
12 there?

13 A. That's her name.

14 Q. So it's your testimony that Irma Wimbush
15 and Rennie McKenzie were talking about what you
16 believed was your impending termination, right?

17 A. Yes, they were.

18 Q. Who else was talking?

19 A. Just those two.

20 Q. Did anybody say anything negative about
21 you in Gorman?

1 A. There wasn't anything negative, but a lot
2 of people were kind of avoiding me, and it just felt
3 like a very uncomfortable environment. And to be
4 perfectly, you know, the way I felt at that
5 particular time it was just uncomfortable. It was
6 unbearable. And I couldn't function in that
7 environment knowing that at the end of the day a job
8 that I really loved and really treasured would be
9 gone.

10 Q. So you were uncomfortable because the
11 hospital was assessing whether or not they could
12 accommodate your request for accommodation?

13 A. I was uncomfortable because there was the
14 possibility that I could be terminated.

15 Q. Okay. But it is a fact that they were in
16 the process of assessing --

17 MS. CLARK: I'm going to object as to form
18 and ask you --

19 MS. FAIRLEY: I haven't asked a question.

20 MS. CLARK: I know. But you're
21 testifying. Can you ask a question?

1 someone else. And she told me to go back and speak
2 with Fannice about my current situation. I then
3 proceeded to speak with Fannice and she agreed that
4 the environment was uncomfortable and that it was
5 disruptive to the productivity of the environment.
6 So she gave me two options, to either, A, stay at
7 the Leavey Center or, B, go home and be able to
8 return once they called me. She also stated that
9 she wasn't absolutely sure that they would be able
10 to make a decision by the end of the day, which is
11 why I chose the latter option which is to go home.

12 Q. Now, you mentioned that you told Angela
13 Freeman that the other employees, you were
14 uncomfortable because the other employees knew about
15 your situation. We'll just call it that. Was that
16 your testimony?

17 A. Yes.

18 Q. Do you know how the other employees found
19 out about your situation?

20 A. No.

21 Q. During your conversation with Ms. Freeman

1 did she tell you that you should go back to Gorman?

2 A. She told me to go back and talk to Fannice
3 about returning to Gorman, and that's exactly what I
4 did. I went to speak with Fannice Beckett after
5 that and we both agreed that I should go home.

6 Q. Did Angela tell you to go back to Gorman,
7 though?

8 A. Her exact statement was as stated in the
9 prior answer, go back and speak with Fannice about
10 returning to Gorman and see what she decides.

11 Q. And so it's your testimony that Ms.
12 Beckett told you that you did not have to go back to
13 Gorman; is that right?

14 A. That is correct.

15 Q. Did you ever go to the Leavey Center after
16 speaking with Ms. Beckett?

17 A. As stated in my prior answer, she gave me
18 two options, either to stay at the Leavey Center or
19 to go home. I chose the latter option because she
20 was not exactly sure if they would reach the
21 decision by the end of the day.

1 Q. I understand that. But my question was a
2 little bit different. Did you ever go to the Leavey
3 Center before leaving to go home?

4 A. No.

5 Q. Now, you chose to go home. How did you
6 get home?

7 A. I used metro, metro train.

8 Q. At some point while you were on the metro
9 train did you hear from Fannice Beckett?

10 A. When I got off of the metro train at
11 Greenbelt metro station I received a call from
12 Deborah Felton.

13 Q. What did Deborah say?

14 A. She asked me to return. I then responded
15 and asked her have they made a decision. She just
16 stated we need you to return. I told her that I was
17 already at Greenbelt station and needed to retrieve
18 my car and return back to work. She said okay.

19 Q. Approximately what time did you hear from
20 Deborah Felton?

21 A. Approximately between 11:28 and 11:37 a.m.

1 Q. But you didn't return to the hospital
2 until close to 3 o'clock, correct?

3 A. Approximately I returned maybe 2:25 to
4 2:35. And again keep in mind I told Deborah that I
5 would need to retrieve my car. I live in Laurel.
6 The hospital is in Washington, D.C. I would need to
7 access the interstate, and it's a very, very
8 congested highway, basically. She was aware of
9 this. So she knew that I would be driving all the
10 way back to the hospital. So it took some time for
11 me to get back to the hospital because of traffic.

12 Q. Now, you took the metro to work that day,
13 right?

14 A. That is correct.

15 Q. So why couldn't you get back on the metro
16 to return?

17 A. To be perfectly honest, I didn't have any
18 funds to return back. I would need to use my car.

19 Q. And you explained all this to Ms. Felton?

20 A. I explained to her that I would get my car
21 and I would return to work. So she was aware that I

1 A. She asked me, you know, how did I come
2 back, and I told her. I told Deborah basically that
3 I would drive back. So I had to drive. She was a
4 little bit irritated by it, and she said okay, well,
5 just go to Gorman. That was her response.

6 Q. Did she express any concern that it had
7 taken you a while to get back?

8 A. She asked me, you know, what mode of
9 transportation did you use. Did you catch the
10 train? I told her I drove back. I explained to her
11 that traffic was very heavy. And she pretty much
12 interrupted me and said okay, okay, go back to
13 Gorman.

14 Q. So you completed your day in Gorman and
15 came back the next day, right?

16 A. That is correct.

17 Q. And when you got there the next day where
18 did you report?

19 A. I reported to Gorman.

20 Q. And how long did you work in Gorman that
21 day?

1 satisfactorily fulfilled these requirements is
2 incorrect.

3 Q. Did you make a stop from the time you got
4 your car at Greenbelt metro center -- let me ask it
5 another way. Did you make a stop after you left
6 Greenbelt metro center on your way back to the
7 hospital?

8 A. No.

9 Q. So it's your testimony it took you three
10 hours to get from Greenbelt back to Washington
11 Hospital Center?

12 A. Yes.

13 Q. What route did you take?

14 A. I had to go out to Route 1 so I had to
15 travel all the way out to Route 1. I wasn't very
16 familiar with that area. Had to travel back to
17 Route 1 and access I believe it was 95 and then 495
18 and then I just took the way that I knew. So it's,
19 typically it can be up to two hours or an hour and a
20 half, approximately an hour and a half to two hours
21 to get there anyway just in normal traffic because

1 that's a long route and that's the only route that I
2 knew but with heavy traffic it can take a little
3 longer.

4 Q. Did you have a cell phone that day?

5 A. Yes, I did.

6 Q. Did you call and let them know you would
7 be delayed?

8 A. No, I did not. But I told her I would be
9 coming back using 95 and 495.

10 Q. You told who that?

11 A. Deborah Felton.

12 Q. Okay. It's 1 o'clock and I'm about to
13 shift directions, so I think this is probably a good
14 time for a 30-minute break. Does that work for you?

15 A. That's fine, yes.

16 MS. FAIRLEY: All right.

17 Luncheon Recess -- 1:00 p.m.

18 Afternoon Session (2:05 p.m.)

19 BY MS. FAIRLEY:

20 Q. Good afternoon, Ms. Ellis. We're back on

21 the record. I just wanted to ask you a couple of

1 Q. When were you first diagnosed with asthma?

2 A. Approximately 1997 or 1998.

3 Q. Other than Dr. Finkelman have you seen
4 other doctors related to your asthma?

5 A. Dr. Finkelman was my primary care doctor,
6 but if she wasn't there I would see an attending
7 physician. Dr. O'Hara is one of the physicians that
8 I saw. And after Georgetown I was treated by
9 another physician.

10 Q. Do you recall that physician's name?

11 A. I don't recall.

12 Q. When was your last asthma attack?

13 A. Actually I suffered an asthma attack about
14 three days ago.

15 Q. Do you know what caused the asthma attack
16 three days ago?

17 A. Probably exposure to hospital setting. I
18 had to take my little sister to the doctor. So ...

19 Q. What hospital did you visit?

20 A. It was a clinic.

21 Q. Other than, or before three days ago when

1 was the last time you had an asthma attack?

2 A. I don't recall.

3 Q. Had it been some time?

4 A. Probably. I'm not exactly sure.

5 Q. Other than working in the emergency
6 department are there any other jobs you can't
7 perform?

8 A. No.

9 Q. Are there any other activities you can't
10 participate in?

11 A. No.

12 Q. Now, when you worked at Georgetown did you
13 ever take elevators around the hospital to go
14 different places?

15 A. Maybe a few occasions where I took an
16 elevator, yes.

17 Q. Did you ever, did you eat in the cafeteria
18 regularly?

19 A. Yes.

20 Q. Were there patients in the cafeteria when
21 you ate there?

1 Dr. Finkleman stated that I had asthma. As I
2 understand it, to me it's a disability because
3 basically if I have a violent asthma attack I can
4 die. If there are environmental elements that
5 affect my asthma I can have a severe asthma attack.
6 I can die. So, to me that's a disability. And
7 again, I'm not a lawyer, but I consider that a
8 disability.

9 Q. Now, you obviously testified a couple
10 times -- so we won't go over it again -- that you
11 were given a choice between remaining in Leavey and
12 going home. Obviously, you chose to go home.
13 Correct?

14 A. Yes.

15 Q. Who did you advise that you were going
16 home?

17 A. Fenice.

18 Q. And what did you tell her?

19 A. Basically, in the conversation that we
20 had she gave me a choice of A or B, stay at the
21 Leavey Center or you can go home and be able to

1 return when we give you a call. I told her that I
2 would rather go home. She said okay. That was the
3 end of our meeting. I left.

4 Q. Did you leave immediately from that
5 meeting?

6 A. I believe so, yes.

7 Q. So, you didn't go back to Gorman or to
8 Main? You left immediately?

9 A. I believe so.

10 Q. So, were you -- did you on August 1st,
11 when you first got to work did you clock in?

12 A. I don't think I clocked in because you
13 had to be cleared through Employee Health to be
14 able to return to work. So, my belief if I
15 remember correctly is that I clocked in when I came
16 back. When she called me I was at Greenbelt. She
17 called me, told me to return to work. I came back.
18 I saw her and she said go to Gorman. I believe at
19 that point is when I clocked back in or clocked in.
20 Excuse me.

21 Q. So, that's your recollection. Right?

1 work.

2 Q. Did she ask you why you left?

3 A. I don't recall that.

4 Q. When you say you don't recall, you don't
5 remember one way or the other. Right?

6 A. I'm saying I can't say I remember one way
7 or the other because I just -- I don't remember.
8 So --

9 Q. Did she ask you why you were on the
10 train? Do you remember that?

11 A. I'm sorry. Can you --

12 Q. Did Miss Felton ask you why you were on
13 the Metro when she called you?

14 A. No, I don't remember her asking that.

15 Q. But she did tell you that you need to get
16 back to work and report to Gorman. Right?

17 A. She told me to come back to work.

18 Q. What was Miss Felton's tone when she
19 talked to you when you were on the phone with her?

20 A. Normal I guess. I can't really remember
21 like how her tone was. I believe it's just like a

1 the other. I just know that I have to be there at
2 a certain time, and I make sure that I'm there on
3 time.

4 Q. Okay. I think my question's a little bit
5 different. So, you're saying you don't have a
6 specific recollection one way or the other of it
7 taking you two and a half hours to get from
8 Greenbelt to D.C. before. Right?

9 A. I don't recall, no.

10 Q. Did you make any stops that day before
11 returning to the hospital?

12 A. No.

13 Q. So, you got in your car and came straight
14 to D.C.

15 A. I got in my car, went up to 197, hit 95,
16 then 495. Again, I can't remember the exit off of
17 495, and then proceeded through side streets to get
18 to Georgetown.

19 Q. Did you call Miss Felton to tell her --
20 to give her a status update on the fact that there
21 was traffic and it was going to take you longer?

1 A. No, and she did not call me.

2 Q. Did you call Miss Beckett to let her know
3 that it was taking you a little longer because of
4 traffic?

5 A. No, and again she did not call me.

6 Q. When you returned to Georgetown that day
7 which manager did you see?

8 A. When I returned on August the 1st I saw
9 Fenice Beckett.

10 Q. What did she say when you saw her?

11 A. Well, she was in the office on the phone
12 conversing about something. I knocked on the door
13 because her door was closed. I knocked on the door
14 and told her that I was back, and I remember her
15 telling me to clock in and go back to Gorman.

16 Q. Okay. Did she ask you what had taken you
17 so long?

18 A. I don't recall.

19 Q. But she could have. You just don't have
20 a recollection. Right?

21 A. I don't remember.

1 Q. Did she ask you why you had left the
2 hospital?

3 A. She wouldn't need to ask me that since
4 she's the person that told me I could leave.

5 Q. My question was did she ask you why you
6 had left the hospital.

7 A. No.

8 Q. Did -- what was Miss Beckett's tone when
9 you were speaking with her after you returned to
10 the hospital? What was her tone?

11 A. She didn't seem very nice. She just
12 basically -- in my opinion she was kind of rude.
13 She said clock in and go back to Gorman. I asked
14 her did they make a decision. She said clock in
15 and go back to Gorman because, again, before I left
16 it was stated that once they made a decision we'll
17 call you and you return.

18 Q. And so, did she let you know that they
19 still had not made a decision?

20 A. No. She told me to clock in and go back
21 to Gorman.

1 A. Yeah.

2 Q. But there are nurses and doctors and all
3 those people moving around the area where the PFA
4 sits. Is that correct?

5 A. I think so.

6 Q. At least in 2006. Correct?

7 A. Yes.

8 Q. And so, when you started coughing and
9 wheezing did anybody notice your coughing and
10 wheezing?

11 A. I don't think so.

12 Q. Did you say anything to anybody about the
13 fact that you were coughing and wheezing?

14 A. No. I got up and went to the restroom
15 and took my inhaler and kind of gathered myself
16 because basically when you have an asthma attack
17 that's what your rescue inhaler is for. You take
18 your inhaler and like within five, ten minutes your
19 symptoms subside.

20 Q. This is the albuterol?

21 A. Yes.

1 of time where you're going to be working for that
2 week.

3 Q. Okay. But I think my question was a
4 little bit different. My question is if you were
5 scheduled to work let's say in Main and you get to
6 work that day and if they need you in Lombardi
7 instead as a PFA, couldn't a PFA be asked to go
8 where she is needed when she gets to work that day?

9 A. If the management tells you to go to
10 another area, you're going to go to that area. So,
11 that could take place.

12 Q. When you testified at your last
13 deposition we showed you a job description and
14 asked you if you were familiar with the job
15 description. And I believe -- correct me if I'm
16 wrong -- your testimony was while the job
17 description we showed you encompassed your duties
18 you recalled receiving another job description. Do
19 you remember that testimony?

20 A. I remember saying that the emergency room
21 -- there was a part of the job description that had

1 miles from Laurel to Greenbelt?

2 A. No, I don't.

3 Q. But either way it's correct, isn't it,
4 that it took you from 11:40 to 2:35 to return to
5 Georgetown. Right?

6 A. That is correct.

7 Q. And so, that's just about three hours.
8 Right?

9 A. Closer to two and a half.

10 Q. Well, I think it's actually two hours and
11 55 minutes. Right?

12 A. Yes.

13 Q. Now, when I showed you the schedule which
14 was marked as Exhibit 1 you stated that you weren't
15 sure that it was the right schedule. That was your
16 testimony. Right?

17 A. Yes.

18 Q. And do you have a copy of a different
19 schedule?

20 A. No, I don't have any of the schedules.

21 Q. When you worked at Georgetown how did you

1 street, but it would take me to 95 South and then
2 495 West. Again, I think it's Exit 33. And then I
3 would just follow the streets that I learned from
4 MapQuest because I had no other way of getting
5 there or I didn't know any other way of getting
6 there.

7 Q. Had you ever driven to Georgetown
8 University Hospital from any place other than your
9 home or that day from the metro?

10 A. No.

11 Q. Now, on July 25th you indicated that you
12 had an asthma attack. I think there was some
13 questions about whether there was anyone in the
14 vicinity, and your testimony today is that you
15 don't recall. And I want to make sure I understand
16 as well as Miss Fairley wants to understand.

17 Are you indicating that you don't recall
18 anyone being around or that there was no one around
19 at the time of your asthma attack?

20 A. I know that there were people around. I
21 just don't recall someone actually witnessing my

1 asthma attack. I don't recall that.

2 Q. And do you recall whether another PFA was
3 assigned to the desk in the ER along with you on
4 that day?

5 A. There might have been. I just don't
6 remember who it was.

7 Q. And do you recall, if there was a
8 coworker with you that day, whether you indicated
9 that you were having an asthma attack or you were
10 just leaving to go to the ladies room?

11 A. I don't recall. I don't know if I
12 mentioned to someone that I was getting up or if I
13 just got up and went to the restroom because again
14 I was having an asthma attack. So, I really wasn't
15 concerned about the people around me. I was
16 concerned about getting to the restroom and taking
17 the albuterol and calming myself down.

18 Q. I have a few questions about your work
19 history. The position of PFA, does that involve
20 dealing with patient financial information?

21 A. Yes.

1 trigger my asthma.

2 Q. And how long do the asthma symptoms
3 usually last?

4 A. If I take my albuterol they usually
5 subside within five to ten minutes.

6 Q. Have you ever had an asthma attack where
7 after you've taken the albuterol it's lasted more
8 than that period of time?

9 A. No, not that I can recall.

10 Q. Has asthma ever restricted your --
11 restricted you in any way?

12 A. Well, if I'm unable to breathe, then yes.

13 Q. Do you -- are you normally physically
14 active?

15 A. I'm not the type of person that exercises
16 a lot, but I take walks and just I guess general
17 activities but no real exercise or anything like
18 that.

19 MS. FAIRLEY: I just want to note my
20 objection. I'm a little bit concerned because
21 while I guess you can argue that this part of it at

1 A. Can you clarify?

2 Q. I'm sorry. When you submitted your note
3 to Employee Health and were released to go back to
4 Patient Access no one in Patient Access requested
5 that you return to work in the emergency room at
6 that time, did they?

7 A. There was no conclusion as far as where I
8 would be returning to work because everything was
9 still pending as far as making accommodations for
10 me.

11 Q. Right. But when you got there that day
12 while that decision was still pending no one said,
13 "Today, Ms. Ellis, you are assigned to the emergency
14 room to work," correct?

15 A. No one in management told me to go to the
16 emergency room.

17 Q. Okay. But you were assigned to work in
18 Gorman when you returned on August 1, right?

19 A. Again, I'm not absolutely sure because I
20 did not look at the schedule. I had been out sick
21 since the 25th when I actually had the asthma

1 Q. And some of those hospitals, I believe one
2 was Children's, correct?

3 A. Yes.

4 Q. And can you just remind me of the other
5 ones?

6 A. Children's, Sibley, and now NIH.

7 Q. And prior to coming to Georgetown to work
8 there were no restrictions placed on the work that
9 you were allowed to do at those hospitals that you
10 named, correct?

11 A. No.

12 Q. And prior to Dr. Finkelman no other doctor
13 had restricted any activity that you could perform
14 as a result of your asthma, correct?

15 A. No.

16 MS. FAIRLEY: Let me take one minute.

17 (There was a brief interruption in the
18 proceedings.)

19 MS. FAIRLEY: Could we read -- do you have
20 the last couple of questions?

21 (The court reporter played back the

1 questions and answers as follows:

2 "QUESTION: And prior to coming to
3 Georgetown to work there were no restrictions
4 placed on the work that you were allowed to do
5 at those hospitals that you named, correct?

6 "ANSWER: No.

7 "QUESTION: And prior to Dr. Finkelman no
8 other doctor had restricted any activity that
9 you could perform as a result of your asthma,
10 correct?

11 "ANSWER: No.")

12 BY MS. FAIRLEY:

13 Q. Just out of an abundance of caution and to
14 make sure the record is clear your testimony
15 regarding the other hospitals where you worked, did
16 any other hospital place any restrictions on your --
17 did any other hospital place any restrictions on the
18 type of work that you were able to do?

19 A. No.

20 Q. And prior to Dr. Finkelman did any doctor
21 place any restrictions on the types of activities

1 you were allowed to engage in as a result of your
2 asthma?

3 A. No.

4 (There was a brief interruption in the
5 proceedings.)

6 BY MS. FAIRLEY:

7 Q. A few moments ago we were talking about
8 the fact that you weren't clear on when you went
9 back to Gorman to work on August 1, but you know at
10 some point that day you did, right?

11 A. Yes.

12 Q. And as we talked about before we
13 previously took your deposition and we asked you
14 those same questions about returning to work in
15 Gorman, right?

16 A. Yes.

17 Q. And do you recall testifying that you left
18 Gorman because you were uncomfortable because you
19 thought people were gossiping about you?

20 A. I remember testifying that I knew that it
21 would be disruptive to the environment and I didn't

1 timeline. You came back to work with your doctor's
2 note on August 1, correct?

3 A. That is correct.

4 Q. You took that doctor's note to Employee
5 Health and received a clearance to return to work;
6 is that correct?

7 A. That is correct.

8 Q. What did you do next?

9 A. As I stated before, I went to see Angela
10 Freeman in Human Resources just to kind of get some
11 guidance as to what to do next because at this
12 particular time I wasn't exactly sure what was going
13 on. So after that she advised me to speak with
14 Fannice Beckett. I went downstairs, I spoke with
15 Beckett again. We had a conversation about how I
16 was feeling uncomfortable. I didn't want to disrupt
17 productivity and I just felt that it would be
18 uncomfortable for me.

19 Q. And what was it that you thought was going
20 to make you uncomfortable at that point?

21 A. People knowing basically what would take