

District Judge James L. Robart  
Magistrate Judge Michelle L. Peterson

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF WASHINGTON

JOSUE CASTAÑEDA JUAREZ, et al.,

Petitioners-Plaintiffs,

v.

NATHALIE ASHER, et al.,

Respondents-Defendants.

Case No. 20-cv-700-JLR-MLP

**MOTION FOR APPROVAL OF  
DISCOVERY REQUESTS**

Noting Date: November 4, 2020

Pursuant to the Court's October 7, 2020, order denying Respondents-Defendants' motion to dismiss and ordering the parties to provide proposed discovery requests, Dkt. 124 at 8, Petitioners-Plaintiffs submit and attach the following proposed discovery requests to the Court for approval:

(1) A Set of Interrogatories

(2) A Set of Requests for Production

(3) A Request to Conduct a Facility Inspection of the Northwest Detention Center

Respectfully submitted on this 21st day of October, 2020.

s/ Matt Adams

Matt Adams, WSBA No. 28287  
matt@nwirp.org

s/ David C. Fathi

David C. Fathi, WSBA No. 24893  
dfathi@aclu.org\*\*

s/ Aaron Korthuis  
 Aaron Korthuis, WSBA No. 53974  
 aaron@nwirp.org

Northwest Immigrant Rights Project  
 615 Second Ave., Suite 400  
 Seattle, WA 98104  
 Tel: (206) 957-8611

s/ Tim Henry Warden-Hertz  
 Tim Henry Warden-Hertz, WSBA No. 53042  
 tim@nwirp.org

Northwest Immigrant Rights Project  
 1119 Pacific Ave., Suite 1400  
 Tacoma, WA 98402  
 Tel: (206) 957-8652

Enoka Herat, WSBA No. 43347  
 eherat@aclu-wa.org  
 John Midgley, WSBA No. 6511  
 jmidgley@aclu-wa.org  
 American Civil Liberties Union Foundation  
 of Washington  
 P.O. Box 2728  
 Seattle, WA 98111  
 Tel: (206) 624-2184

s/ Eunice H. Cho  
 Eunice H. Cho, WSBA No. 53711  
 echo@aclu.org\*\*

Lauren Kuhlik\*  
 Joseph Longley†  
 American Civil Liberties Union Foundation  
 National Prison Project  
 915 15th Street N.W., 7th Floor  
 Washington, DC 20005  
 Tel: (202) 548-6616

Omar C. Jadwat\*  
 ojadwat@aclu.org  
 Michael Tan\*  
 mtan@aclu.org  
 American Civil Liberties Union Foundation  
 Immigrants' Rights Project  
 125 Broad Street, 18th Floor  
 New York, NY 10004  
 Tel: (212) 549-2600

My Khanh Ngo\*  
 mngo@aclu.org  
 American Civil Liberties Union Foundation  
 Immigrants' Rights Project  
 39 Drumm Street  
 San Francisco, CA 94111  
 Tel: (415) 343-0774

\*admitted pro hac vice

\*\*Not admitted in DC; practice limited to federal courts

†admitted pro hac vice; not admitted in DC; practice limited to federal courts

**CERTIFICATE OF SERVICE**

I hereby certify that on October 21, 2020, I electronically filed the foregoing and the attached proposed discovery requests with the Clerk of the Court using the CM/ECF system, which will send notification of such filing to those attorneys of record registered on the CM/ECF system.

DATED this 21st day of October, 2020.

s/ Aaron Korthuis

Aaron Korthuis  
Northwest Immigrant Rights Project  
615 Second Avenue, Suite 400  
Seattle, WA 98104  
(206) 816-3872  
(206) 587-4025 (fax)

District Judge James L. Robart  
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UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF WASHINGTON

JOSUE CASTAÑEDA JUAREZ, et al.,

Petitioners-Plaintiffs,

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Case No. 20-cv-700-JLR-MLP

**PETITIONERS-PLAINTIFFS' FIRST  
SET OF INTERROGATORIES TO  
RESPONDENTS-DEFENDANTS**

Pursuant to Federal Rules of Civil Procedure 26 and 33, the Supreme Court's decisions in *Bracy v. Gramley*, 520 U.S. 899, 908–09 (1997) and *Harris v. Nelson*, 394 U.S. 296, 300 (1969), and this Court's October 7 order granting discovery, Dkt. 124, Petitioners-Plaintiffs, by and through undersigned counsel, hereby request that Defendants Nathalie Asher, Matthew Albence, and Stephen Langford, in their official capacities, answer the following interrogatories, under oath and in accordance with the Definitions and Instructions set forth below, by 5pm PT on December 15, 2020.

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**DEFINITIONS**

1  
2 1. All terms used in these requests shall have the broadest meaning accorded to them under  
3 the Federal Rules of Civil Procedure.

4 2. “Cohorting” means grouping or housing persons with a similar condition for observation  
5 over a period of time.

6 3. “Detainee” means civil immigration detainee.

7 4. “ERO” means Enforcement and Removal Operations of U.S. Immigration and Customs  
8 Enforcement.

9 5. “ICE” means U.S. Immigration and Customs Enforcement.

10 6. “Including” means including without limitation.

11 7. “Isolated” or “isolation” means separating persons known or reasonably believed to be  
12 infected with a communicable disease and potentially contagious or infectious from others to  
13 prevent the spread of the communicable disease.

14 8. “NWDC” means the Northwest Detention Center (Northwest ICE Processing Center)  
15 located in Tacoma, Washington.

16 9. “Person” means any individual, corporation, partnership, association, government  
17 agency, and/or any other entity, as well as its/their representatives, agents, employees, and  
18 attorneys.

19 10. “PPE” refers to personal protective equipment, including face masks and gloves.

20 11. “Quarantine” or “quarantining” means separating persons reasonably believed to have  
21 been exposed to a communicable disease but not yet symptomatic, from others who have not  
22 been exposed, to prevent the possible spread of the communicable disease.

12. “Staff” includes employees, contractors, sub-contractors, staff and consultants of ICE, including all employees of the GEO Group working at NWDC.

13. “You,” “Your,” or “Defendants” means Defendants Nathalie Asher, Matthew Albence, and Stephen Langford, together with any of their agents, attorneys, representatives, affiliates, or any other Person acting under their control or on their behalf.

14. The terms “all,” “any,” and “each” shall each be construed as encompassing any and all.

15. The connectives “and” and “or” shall be construed either disjunctively or conjunctively as necessary to bring within the scope of the Request all responses that might otherwise be construed to be outside its scope.

16. The use of the singular form of any word includes the plural and vice versa.

### **INSTRUCTIONS**

1. Any ambiguity as to any Interrogatory shall be construed so as to require the broader response.

2. These Interrogatories seek information that is in Your possession, custody, or control, or that is in the possession, custody, or control of Your agents, attorneys, representatives, affiliates, or any other Person acting under Your control or on Your behalf.

3. You are to furnish all information that is available to You as of the date of Your answers to these Interrogatories. If You are unable to answer any of the Interrogatories fully and completely, after exercising due diligence to secure the information necessary to make such a full and complete answer, so state, and answer each Interrogatory to the fullest extent possible.

4. These Interrogatories are deemed to be continuing in nature, pursuant to Rule 26(e) of the Federal Rules of Civil Procedure, and therefore, require You to furnish supplemental responses whenever You discover additional facts responsive to the Interrogatories.

5. In accordance with Federal Rule of Civil Procedure 33, each Interrogatory shall be responded to fully, unless it is in good faith objected to, in which event the reasons for the objection shall be stated with specificity, and the objection must state whether any responsive materials are being withheld on the basis of that objection. If an objection pertains only to a portion of an Interrogatory, or to a word, phrase, or clause contained in an Interrogatory, You shall state Your objection to that portion only and respond to the remainder of the Interrogatory.

6. If the attorney-client privilege, attorney work-product doctrine, or any other privilege or immunity from discovery is claimed as to any response called for by these Interrogatories, You are requested to provide the information required by Rule 26(b)(5) of the Federal Rules of Civil Procedure.

7. The following Interrogatories, including any subparts, shall be answered individually and separately.

8. Objection will be made at the time of trial to any attempt to introduce evidence which is sought by these Interrogatories and to which no disclosure has been made.

9. If providing a response to any Interrogatory would implicate any of Your or Staff's obligations or restrictions under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), the response to the Request for Production should be provided in a manner that is consistent with HIPAA, including, but not limited to: applying redactions as necessary, providing anonymized information, or seeking an appropriate protective order from the Court.

## **INTERROGATORIES**

### **INTERROGATORY NO. 1:**

Please describe in particularity the sleeping and living conditions at NWDC that may affect Detainees' potential exposure to COVID-19, including without limitation:

- 1 a) The current number of Detainees;
- 2 b) The number of Detainees in each Pod;
- 3 c) The number of Detainees in each occupied cell;
- 4 d) The number of toilets, sinks, and showers accessible to Detainees housed in each Pod;
- 5 and
- 6 e) The description and number of common areas where there might be more than 10
- 7 Detainees or Staff at one time.

8 **INTERROGATORY NO. 2:**

9 Please describe the usage of common areas, dining areas, bathrooms, shower and bathing  
10 facilities, rooms with telephones that Detainees can use, the infirmary, and other areas used by  
11 Detainees, including the length of time and time of day used, any schedule for which individuals  
12 use the space at particular times, the maximum number of individuals using the space at one  
13 time, and the schedules adopted to stagger the usage of these spaces since March 1, 2020.

14 **INTERROGATORY NO. 3:**

15 Please describe specifically and in detail the ventilation/air filtration system in use at  
16 NWDC including: whether there is a mechanical exhaust system (and if so, how it is operated,  
17 whether it is working as designed, and when and how was it last updated); whether NWDC  
18 filters the air or displaces indoor air with outdoor air (and if so, what kind of filters are used and  
19 in what points of the system); the ventilation rates at NWDC by average cubic feet; and, to what  
20 standard NWDC's ventilation/HVAC system is designed.

21 **INTERROGATORY NO. 4:**

22 Please describe specifically and in detail the procedures and frequency for cleaning and  
23 sanitizing all areas and equipment Detainees have access to at NWDC.

**1 INTERROGATORY NO. 5:**

2 Please describe specifically and in detail NWDC's (1) inventory of hygiene supplies  
3 (including, but not limited to, soap, hand sanitizer, and tissues) and PPE, (2) plans or procedures  
4 to maintain sufficient stock of hygiene supplies and PPE pursuant to ICE's ERO COVID-19  
5 Pandemic Response Requirements, and (3) policies and procedures for distributing hygiene  
6 supplies and PPE to Detainees and Staff.

**7 INTERROGATORY NO. 6:**

8 Please identify NWDC's maximum capacity to house Detainees, and identify the number  
9 of Detainees that NWDC has housed per week since March 1, 2020.

**10 INTERROGATORY NO. 7:**

11 Please describe specifically and in detail Your procedures for screening Staff and  
12 incoming Detainees before each instance that they enter NWDC, including if and how it differs  
13 from the protocol required by ICE's ERO COVID-19 Pandemic Response Requirements.

**14 INTERROGATORY NO. 8:**

15 Please describe specifically and in detail how many Detainees You have identified as part  
16 of the At-Risk Population or who meet the CDC's Identified Populations Guidelines as of the  
17 date of your response, the specific demographic factors and/or underlying medical conditions at  
18 issue, whether each Detainee was identified by NWDC or ICE staff as higher risk, the date and  
19 time that each Detainee was booked into NWDC, the date and time that ICE was notified that  
20 each Detainee was higher risk, each Detainee's current custody status, and the reasons why each  
21 Detainee was released or continued in custody despite being higher risk.

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1 **INTERROGATORY NO. 9:**

2 Please provide the number of Detainees at NWDC who were suspected to have COVID-  
3 19, who had symptoms associated with COVID-19, who were exposed to COVID-19, or who  
4 requested COVID-19 testing and have not been provided a test. For each individual who was not  
5 tested, please describe specifically and in detail why a test was not administered.

6 **INTERROGATORY NO. 10:**

7 Please provide the results of and the number of COVID-19 tests that have been  
8 administered to Detainees and Staff at NWDC, including, without limitation, the frequency, the  
9 type and manufacturer of test given, the dates given, the reason the test was given, how the test  
10 was administered, who administered the test, and NWDC's and ICE's actions taken in response  
11 to each Detainee or Staff who tested positive, including whether the positive result was reported  
12 to an ERO Field Office Director (or designee) or Field Medical Coordinator pursuant to ICE's  
13 ERO COVID-19 Pandemic Response Requirements or to state or local public health authorities.

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**PETITIONERS-PLAINTIFFS' FIRST  
SET OF REQUESTS FOR  
PRODUCTION OF DOCUMENTS  
TO RESPONDENTS-DEFENDANTS**

Pursuant to Federal Rules of Civil Procedure 26 and 34, the Supreme Court's decisions in *Bracy v. Gramley*, 520 U.S. 899, 908–09 (1997) and *Harris v. Nelson*, 394 U.S. 296, 300 (1969), and this Court's October 7 order granting discovery, Dkt. 124, Petitioners-Plaintiffs, by and through undersigned counsel, hereby requests that Defendants Nathalie Asher, Matthew Albence, and Stephen Langford, in their official capacities, produce the following documents, under oath and in accordance with the Definitions and Instructions set forth below, by 5pm PT on December 15, 2020.

\*\*\*

**DEFINITIONS**

1  
2 1. All terms used in these requests shall have the broadest meaning accorded to them under  
3 the Federal Rules of Civil Procedure.

4 2. “Cohorting” means grouping or housing persons with a similar condition for observation  
5 over a period of time.

6 3. “Communication” includes any occurrence whereby data, expression, facts, opinions,  
7 thought, or other information of any kind is transmitted in any form, including, without  
8 limitation, in-person conversation, telephone conversation, video chat, correspondence,  
9 discussion, meeting, memorandum, email, text message, chat message, voice message, picture  
10 message, video message, audio recording, video recording, social media posting, or any other  
11 form of in-person, written, or electronic communication.

12 4. “Detainee” means civil immigration detainee.

13 5. “Document” has the meaning set forth in Rule 34(a)(1)(A) of the Federal Rules of Civil  
14 Procedure and includes, but is not limited to, each and every form of Communication and  
15 includes, without limitation, all written, printed, typed, recorded, or visual matter of any kind,  
16 type, nature, or description, in whatever form (*e.g.*, final and draft versions), that is or has been in  
17 Your actual or constructive possession, custody, or control, including, but not limited to, all  
18 printed and electronic copies of electronic mail, text messages, chat messages, notes,  
19 correspondence, memoranda, tapes, handwritten notes, articles, diaries, letters, photographs,  
20 minutes, contracts, agreements, reports, computer printouts, drafts, notebooks, audio recordings,  
21 video recordings, or any written or recorded materials of any other kind, however stored  
22 (whether in tangible or electronic form), recorded, produced, or reproduced, including on backup  
23 tapes, the Internet, or the World Wide Web.



1 6. “ERO” means Enforcement and Removal Operations of U.S Immigration and Customs  
2 Enforcement.

3 7. “ICE” means U.S. Immigration and Customs Enforcement.

4 8. “Including” means including without limitation.

5 9. “Isolated” or “isolation” means separating persons known or reasonably believed to be  
6 infected with a communicable disease and potentially contagious or infectious from others to  
7 prevent the spread of the communicable disease.

8 10. “NWDC” means the Northwest Detention Center (Northwest ICE Processing Center)  
9 located in Tacoma, Washington.

10 11. “Person” means any individual, corporation, partnership, association, government  
11 agency, and/or any other entity, as well as its/their representatives, agents, employees, and  
12 attorneys.

13 12. “PPE” refers to personal protective equipment, including face masks and gloves.

14 13. “Quarantined” or “quarantining” means separating persons reasonably believed to have  
15 been exposed to a communicable disease but not yet symptomatic, from others who have not  
16 been exposed, to prevent the possible spread of the communicable disease.

17 14. “Staff” includes employees, contractors, sub-contractors, staff and consultants of ICE,  
18 including all employees of the GEO Group working at NWDC.

19 15. “You,” “Your,” or “Defendants” means Defendants Nathalie Asher, Matthew Albence,  
20 and Stephen Langford, together with any of their agents, attorneys, representatives, affiliates, or  
21 any other Person acting under their control or on their behalf.

22 16. The terms “all,” “any,” and “each” shall each be construed as encompassing any and all.  
23

17. The connectives “and” and “or” shall be construed either disjunctively or conjunctively as necessary to bring within the scope of the Request all responses that might otherwise be construed to be outside its scope.

18. The use of the singular form of any word includes the plural and vice versa.

### **INSTRUCTIONS**

1. Any ambiguity as to any Request shall be construed so as to require the production of the greater number of Documents.

2. In responding to these Requests, You shall produce all responsive Documents which are in Your possession, custody, or control or in the possession, custody, or control of Your employees, agents, attorneys, representatives, affiliates, or any other Person acting under Your control or on your behalf. A Document shall be deemed to be within Your control if You have the right to secure the Document or a copy of the Document from another Person having possession, custody, or control of the Document.

3. These Requests are continuing in nature under Federal Rule of Civil Procedure 26(e). Any Document created or identified after service of any response to these Requests that would have been produced in response had the Document then existed or been identified shall promptly be produced whenever You find, locate, acquire, create, or become aware of such Documents, up until the resolution of this action.

4. In accordance with Federal Rule of Civil Procedure 34(b)(2), each Request shall be responded to fully, unless it is in good faith objected to, in which event the reasons for the objection shall be stated with specificity, and the objection must state whether any responsive materials are being withheld on the basis of that objection. If an objection pertains only to a

1 portion of a Request, or to a word, phrase, or clause contained in a Request, You shall state Your  
2 objection to that portion only and respond to the remainder of the Request.

3 5. Documents that are produced shall be identified according to which Request they are  
4 responsive to, or in the order and in the manner in which they are usually kept or organized.

5 6. Each requested Document shall be produced in its entirety, along with any attachments,  
6 drafts and non-identical copies, including without limitation copies that differ by virtue of  
7 handwritten or other notes or markings. If a Document responsive to these Requests cannot be  
8 produced in full, it shall be produced to the extent possible with an explanation stating why  
9 production of the remainder is not possible. Documents contained in file folders, loose-leaf  
10 binders, and notebooks with tabs or labels identifying such Documents are to be produced intact  
11 together with such file folders, loose-leaf binders, or notebooks. All labels identifying such  
12 Documents, files, folders, or binders shall be copied. Documents attached to each other shall not  
13 be separated, and all such attached Documents shall be produced. Paper Documents may be  
14 scanned and produced as electronic documents in the PDF file format. Documents compiled  
15 onto a disk or drive shall be sent the requesting party electronically.

16 7. If any Document responsive to these Requests has been destroyed, discarded, or lost, or is  
17 otherwise not capable of being produced, identify each such Document and set forth the  
18 following information: (a) the date of the Document; (b) a description of the subject matter of the  
19 Document; (c) the name and address of each Person who prepared, received, viewed, or had  
20 possession, custody, or control of the Document; (d) the date when the Document was destroyed,  
21 discarded, or lost; (e) the identity of the Person who directed that the Document be destroyed,  
22 who directed that the Document be discarded, or who lost the Document; and (f) a statement of  
23 the reasons for and circumstances under which the Document was destroyed, discarded, or lost.

8. If any Document responsive to these Requests is withheld under a claim of privilege (including attorney-client privilege and the work-product doctrine), You shall identify with respect to each Document: (a) the author; (b) the address(es); (c) all other Persons to whom the Document was distributed, shown, or explained; (d) its present custodian; and (e) the Document's number of pages, and attachments or appendices. In addition, all claims of privilege, including the attorney work-product rule, must conform to the requirements of Rule 26(b)(5) of the Federal Rules of Civil Procedure.

9. All electronically stored information shall be produced in accordance with an electronic discovery protocol as agreed to by parties.

10. If no Documents or things exist that are responsive to a particular paragraph of these Requests, so state in writing.

11. Objection will be made at the time of trial to any attempt to introduce evidence which is sought by these Requests and to which no disclosure has been made.

12. Unless otherwise stated in a specific Request, these Requests seek responsive information and Documents authored, generated, disseminated, drafted, produced, reproduced, or otherwise created or distributed, relating to the period of January 1, 2020 through the present.

13. If providing a response to any Request for Production would implicate any of Your or Staff's obligations or restrictions under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), the response to the Request for Production should be provided in a manner that is consistent with HIPAA, including, but not limited to: applying redactions as necessary, providing anonymized information, or seeking an appropriate protective order from the Court.

**DOCUMENT REQUESTS**

**REQUEST NO. 1:**

Documents (including schematics, floor plans and diagrams) portraying the physical layout of the NWDC facility to show the ability of Detainees to practice social distancing, including the features, dimensions, and ventilation of cells, dining rooms and designated eating areas, bathrooms, shower and bathing facilities, rooms with telephones that Detainees can use, hallways, the infirmary, and common areas to which Detainees have access, and the number, dimensions and placement, including vertical and horizontal dimensions, of furnishings (beds/bunks, tables, chairs, toilets, sinks, etc.) and windows within those spaces. These documents shall specifically include the number of bed/bunks per cell, the vertical and horizontal space between beds/bunks, whether beds or other furniture are bolted or moveable, and the unobstructed living space within cells. These documents should also specify the number and location of cells designated for Isolation, Quarantine and Cohorting, as well as Special Management Unit cells in the facility.

**REQUEST NO. 2:**

Documents demonstrating the nature of the ventilation/filtration system in use at NWDC, including its components, locations, the rate at which air is replaced with outside air, the ceiling height and area and population of a given space.

**REQUEST NO. 3:**

Documents demonstrating the capabilities of the medical unit at NWDC to test for and respond to COVID-19 cases at the facility including, but not limited to:

- a) policies and procedures for testing for COVID-19, the number of tests done to date and the results, and the number of tests conducted on a weekly basis since July 1, 2020;

- b) the number of Detainee requests for testing, the number of test kits currently available, the process for acquiring additional COVID-19 tests, and the time between testing and confirmation of results;
- c) the name, manufacturer, and type of the COVID-19 tests used;
- d) the method of sample collection (i.e. nasal or nasopharyngeal swab) of COVID-19 tests used;
- e) number, training, certification, licensing status and shifts of medical staff, and contingency plans for staff absences;
- f) amount and types of PPE available to Staff and Detainees;
- g) policies regarding the use of PPE by Staff and Detainees;
- h) policies regarding usage of Cohorting facilities and individual Quarantine or Isolation cells for individuals who have (a) tested positive for COVID-19, (b) exhibited symptoms of COVID-19, or (c) have come into contact with individuals who have tested positive for COVID-19 or exhibited symptoms of COVID-19;
- i) documents containing Your existing pandemic, influenza, all-hazard, and disaster plans specifically related to NWDC as originally maintained and as revised for COVID-19.

**REQUEST NO. 4:**

Documents showing how You have implemented all applicable COVID-19 Response Requirements required by ICE's ERO COVID-19 Pandemic Response Requirements or have plans to implement those requirements and the date by which those requirements will be implemented.

1 **REQUEST NO. 5:**

2 All reports and other documents related to confirmed or suspected cases of COVID-19 at  
3 NWDC—including all hospitalization information since March 1, 2020—provided by You to  
4 any or all of the following: an ERO Field Office Director (or designee), Field Medical  
5 Coordinator, or local or state health departments or other authorities.

6 **REQUEST NO. 6:**

7 All documents showing that, in accordance with ICE's ERO COVID-19 Pandemic  
8 Response Requirements, NWDC staff and administrators are notifying ICE within 12 hours of  
9 identifying any Detainee who meets the CDC's identified high-risk population, that ICE is  
10 reviewing all such Detainees to determine whether continued detention is appropriate, and the  
11 results of such determinations. Names, A-numbers, and other personal identifying information  
12 may be redacted from responsive documents.

13 **REQUEST NO. 7:**

14 All communications between ICE and NWDC administrators and staff, or between ICE  
15 and any other party, regarding the COVID-19 testing of individuals at NWDC as well as the  
16 positive COVID-19 test of the NWDC staff member that You notified the Court about on  
17 October 1, 2020.

18 **REQUEST NO. 8:**

19 All documents reflecting any discipline administered to any staff due to their failure to  
20 abide by any COVID-19 safety protocols at NWDC.

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1 **REQUEST NO. 9:**

2 Any video recordings or security camera footage from September 21, 2020, to October 2,  
3 2020 for the NWDC entrance/waiting area and for Pod B1, as well as for Housing Units 11, 12,  
4 and 13 in the Lippard Declaration, Dkt. 104 ¶ 38.

5 **REQUEST NO. 10:**

6 All communications or documents regarding the “bi-weekly spot checks” mentioned in  
7 the Lippard Declaration, Dkt. 104 ¶ 71, from August 1, 2020 to the present.

8 **REQUEST NO. 11:**

9 Documents reflecting the number of new admissions to NWDC since July 1, 2020, as  
10 well as the known criminal history for each new admission. Names, A-numbers, and other  
11 personal identifying information may be redacted from responsive documents.

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District Judge James L. Robart  
Magistrate Judge Michelle L. Peterson

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF WASHINGTON

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Petitioners-Plaintiffs,

v.

NATHALIE ASHER, et al.,

Respondents-Defendants.

Case No. 2:20-cv-700-MJP

**PETITIONERS-PLAINTIFFS' FIRST  
REQUEST FOR INSPECTION**

Plaintiffs, by undersigned counsel, pursuant to Rules 26 and 34 of the Federal Rules of Civil Procedure, serve this request for entry onto the property for inspection and request that Defendants permit Plaintiffs entry onto the premises at a date and time mutually agreed upon by the Parties, consistent with this Court's order granting discovery, Dkt. 124, onto the premises of the Northwest Detention Center (NWDC).<sup>1</sup>

<sup>1</sup> Courts have regularly ordered facility inspections by experts in other COVID-19 prison, jail and immigration detention cases. *See, e.g., Braggs v. Dunn*, No. 2:14CV601-MHT, 2020 WL 5909086, at \*2 (M.D. Ala. Oct. 1, 2020) (ordering two-day on-site inspection for experts of each of four facilities); *Santos Garcia v. Wolf*, No. 1:20-cv-821 (LMB/JFA), Dkt. 58 (E.D. Vir. Aug. 18, 2020) (approving inspection protocol by parties' experts); *id.*, Dkt. 59 (E.D. Vir. Aug. 18, 2020) (ordering inspectors be allowed to take photographs during their inspection of the facility);

1 Plaintiffs request access to inspect, measure, photograph, and/or videotape the NWDC  
 2 facilities at 1623 E J Street, Suite 2, Tacoma, Washington, 98421-1615, for a duration of three  
 3 days. Plaintiffs' counsel, assisted by Plaintiffs' expert, Dr. Marc Stern, will participate in the  
 4 inspection. A copy of Dr. Stern's curriculum vitae is attached for the Court's reference. *See*  
 5 Exhibit A.

6 Plaintiffs' counsel and Plaintiffs' expert reserve the right to document their observations  
 7 with photographs, video recordings, written notes, or other necessary means. Throughout the  
 8 Plaintiffs' expert will ask questions of both staff and detainees, and Defendants will make no  
 9 attempt to stop anyone from speaking freely with Plaintiffs' expert.<sup>2</sup>

10 Specifically, Plaintiffs request to inspect:

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 13 *Hernandez Roman v. Wolf*, No. 5:20-cv-768-TJH-PVC, Dkt. 279 (C.D. Cal. Aug. 4, 2020)  
 14 (granting parties' joint stipulation regarding timing of certain depositions and inspection of  
 15 Adelanto ICE detention facility); *Wilson v. Ponce*, No. 2:20-cv-04451-MWF-MRW, Dkt.  
 16 58 (C.D. Cal. July 14, 2020) ("[t]he parties are ordered to schedule a site visit at FCI Terminal  
 17 Island"); *Coreas v. Bounds*, No. 8:20-cv-780-TDC, Dkt. 131 (D. Md. Jul. 6, 2020) (ordering  
 18 parties to submit joint list of proposed experts and proposal as to expert's mandate); *Busby v.*  
 19 *Bonner*, No. 20-cv-2359-SHL, Dkt. 45 (W.D. Tenn. June 12, 2020) (ordering parties to submit  
 20 joint recommendation for an independent expert to inspect the facility); *Costa v. Bazron*, No. 19-  
 21 3185 (RDM), Dkt. 68 (D.D.C. May 1, 2020) (appointing experts for facility inspections); *Gayle*  
 22 *v. Meade*, No. 20-21553, 2020 WL 1949737, at \*4 (S.D. Fla. Apr. 22, 2020) (directing the  
 23 parties to pick a "neutral, Court-appointed expert" to inspect the three facilities), *report and*  
*recommendation adopted in part*, No. 20-21553-CIV, 2020 WL 2086482 (S.D. Fla. Apr. 30,  
 2020), *order clarified*, No. 20-21553-CIV, 2020 WL 2203576 (S.D. Fla. May 2, 2020); *Chunn v.*  
*Edge*, No. 1:20-cv-01590, 2020 WL 1872523, at \*1 (E.D.N.Y. April 15, 2020) (authorized  
 expedited discovery, including expert witness's facility inspection); *Banks v. Booth*, No. 1:20-cv-  
 849, Dkt. 34 (D.D.C. Apr. 9, 2020) (appointing experts for facility inspections).  
<sup>2</sup> *See, e.g., Braggs v. Dunn*, No. 2:14CV601-MHT, 2020 WL 5909086, at \*3 (M.D. Ala. Oct. 1,  
 2020) (providing that Plaintiffs' expert "shall be permitted to speak to prisoners in confidence  
 and outside the presence of [prison] staff or defense counsel," while maintaining an appropriate  
 social distance); *United States v. Erie Cty.*, No. 09-CV-849S, 2010 WL 986505, at \*3 (W.D.N.Y.  
 Mar. 17, 2010); *Coleman v. Schwarzenegger*, No. C01-1351 TEH, 2007 WL 3231706, at \*4  
 (E.D. Cal. Oct. 30, 2007).

1           1. Any housing unit. This includes but is not limited to individual cells, dormitory-style  
2 housing, medical housing, solitary and isolation units, quarantine units, and shared dayrooms.

3           2. Any space used by detainees including but not limited to those spaces used for:  
4 exercise, dining, personal hygiene (including bathrooms and showers), receiving medical care or  
5 medical evaluation (including mental health care), working (including but not limited to kitchens  
6 and laundry facilities), visiting (with legal counsel or friends/family), communicating (including  
7 areas for making phone and video calls), attending court (in person and remotely), and  
8 processing or waiting for transport (including vehicles) to areas in or outside of NWDC. This  
9 request also includes any hallways or paths of travel within NWDC.

10           3. Any documents or records including a sample of sick call requests received, a sample  
11 of grievances received related to the provision of health care, medical records,<sup>3</sup> rosters of  
12 emergency room and hospital visits, admissions to the hospital, infirmary or observation cells,  
13 and chronic care lists.<sup>4</sup>

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22           <sup>3</sup> Should Plaintiffs' expert wish to review healthcare records during the facility inspection,  
23 Plaintiffs will obtain medical records releases from detainees/putative class members while on-  
site and provide them to Defendants at that time.

<sup>4</sup> To preserve the time of all parties involved in the facility inspection, Plaintiffs and Defendants may coordinate to conduct review of records and documents off-site.

# **EXHIBIT A**

MARC F. STERN, M.D., M.P.H., F.A.C.P.

September, 2020

[marcstern@live.com](mailto:marcstern@live.com)

+1 (360) 701-6520

**SUMMARY OF EXPERIENCE****CORRECTIONAL HEALTH CARE CONSULTANT****2009 – PRESENT**

Consultant in the design, management, and operation of health services in a correctional setting to assist in evaluating, monitoring, or providing evidence-based, cost-effective care consistent with constitutional mandates of quality.

Current activities include:

- COVID-19 Medical Advisor, National Sheriffs Association (2020 - )
- Advisor to various jails in Washington State on patient safety, health systems, and related health care and custody staff activities and operations, and RFP and contract generation (2014 - )
- Consultant to the US Department of Justice, Civil Rights Division, Special Litigation Section. Providing investigative support and expert medical services pursuant to complaints regarding care delivered in any US jail, prison, or detention facility. (2010 - ) (no current open cases)
- Physician prescriber/trainer for administration of naloxone by law enforcement officers for the Olympia, Tumwater, Lacey, Yelm, and Evergreen College Police Departments (2017 - )
- Consultant to the Civil Rights Enforcement Section, Office of the Attorney General of California, under SB 29, to review the healthcare-related conditions of confinement of detainees confined by Immigration and Customs Enforcement in California facilities (2017 - )
- Rule 706 Expert to the Court, US District Court for the District of Arizona, in the matter of Parsons v. Ryan (2018 - )

Previous activities include:

- Consultant to Human Rights Watch to evaluate medical care of immigrants in Homeland Security detention (2016 - 2018)
- Consultant to Broward County Sheriff to help develop and evaluate responses to a request for proposals (2017 - 2018)
- Member of monitoring team (medical expert) pursuant to Consent Agreement between US Department of Justice and Miami-Dade County (Unites States of America v Miami-Dade County, *et al.*) regarding, *entre outre*, unconstitutional medical care. (2013 - 2016)
- Jointly appointed Consultant to the parties in Flynn v Walker (formerly Flynn v Doyle), a class action lawsuit before the US Federal District Court (Eastern District of Wisconsin) regarding Eighth Amendment violations of the health care provided to women at the Taycheedah Correctional Institute. Responsible for monitoring compliance with the medical component of the settlement. (2010 - 2015)
- Consultant on “Drug-related Death after Prison Release,” a research grant continuing work with Dr. Ingrid Binswanger, University of Colorado, Denver, examining the causes of, and methods of reducing deaths after release from prison to the community. National Institutes of Health Grant R21 DA031041-01. (2011 - 2016)
- Consultant to the US Department of Homeland Security, Office for Civil Rights and Civil Liberties. Providing investigative support and expert medical services pursuant to complaints regarding care received by immigration detainees in the custody of U.S. Immigration and Customs Enforcement. (2009 - 2014)
- Special Master for the US Federal District Court (District of Idaho) in Balla v Idaho State Board of Correction, *et al.*, a class action lawsuit alleging Eighth Amendment violations in provision of health care at the Idaho State Correctional Institution. (2011 - 2012)
- Facilitator/Consultant to the US Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, providing assistance and input for the development of the first National Survey of Prisoner Health. (2010-2011 )
- Project lead and primary author of National Institute of Corrections’ project entitled “Correctional Health Care Executive Curriculum Development,” in collaboration with National Commission on Correctional Health Care. NIC commissioned this curriculum for its use to train executive leaders from jails and prisons across the nation to better manage the health care missions of their facilities. Cooperative Agreement 11AD11GK18, US Department of Justice, National Institute of Corrections. (2011 - 2015 )

- Co-teacher, with Jaye Anno, Ph.D., for the National Commission on Correctional Health Care, of the Commission's standing course, *An In-Depth Look at NCCHC's 2008 Standards for Health Services in Prisons and Jails* taught at its national meetings. (2010 - 2013)
- Contributor to 2014 Editions of Standards for Health Services in Jails and Standards for Health Services in Prisons, National Commission on Correctional Health Care. (2013)
- Consultant to the California Department of Corrections and Rehabilitation court-appointed Receiver for medical operations. Projects included:
  - Assessing the Receiver's progress in completing its goal of bringing medical care delivered in the Department to a constitutionally mandated level. (2009)
  - Providing physician leadership to the Telemedicine Program Manager tasked with improving and expanding the statewide use of telemedicine. (2009)
- Conceived, co-designed, led, and instructed in American College of Correctional Physicians and National Commission on Correctional Health Care's Medical Directors Boot Camp (now called Leadership Institute), a national training program for new (Track "101") and more experienced (Track "201") prison and jail medical directors. (2009 - 2012)
- Participated as a member of a nine-person Delphi expert consensus panel convened by Rand Corporation to create a set of correctional health care quality standards. (2009)
- Convened a coalition of jails, Federally Qualified Health Centers, and community mental health centers in ten counties in Washington State to apply for a federal grant to create an electronic network among the participants that will share prescription information for the correctional population as they move among these three venues. (2009 - 2010)
- Participated as a clinical expert in comprehensive assessment of Michigan Department of Corrections as part of a team from the National Commission on Correctional Health Care. (2007)
- Provided consultation to Correctional Medical Services, Inc., St. Louis (now Corizon), on issues related to development of an electronic health record. (2001)
- Reviewed cases of possible professional misconduct for the Office of Professional Medical Conduct of the New York State Department of Health. (1999 – 2001)
- Advised Deputy Commissioner, Indiana State Board of Health, on developing plan to reduce morbidity from chronic diseases using available databases. (1992)
- Provided consultation to Division of General Medicine, University of Nevada at Reno, to help develop a new clinical practice site combining a faculty practice and a supervised resident clinic. (1991)

**OLYMPIA BUPRENORPHINE CLINIC, OLYMPIA, WASHINGTON****2019 - PRESENT**

Volunteer practitioner at a low-barrier clinic to providing Medication Assisted Treatment (buprenorphine) to opioid dependent individuals wishing to begin treatment, until they can transition to a long-term treatment provider

**OLYMPIA FREE CLINIC, OLYMPIA, WASHINGTON****2017 - PRESENT**

Volunteer practitioner providing episodic care at a neighborhood clinic which provides free care to individuals without health insurance until they can find a permanent medical home

**OLYMPIA UNION GOSPEL MISSION CLINIC, OLYMPIA, WASHINGTON****2009 – 2014**

Volunteer practitioner providing primary care at a neighborhood clinic which provides free care to individuals without health insurance until they can find a permanent medical home; my own patient panel within the practice focuses on individuals recently released jail and prison.

**WASHINGTON STATE DEPARTMENT OF CORRECTIONS****2002 – 2008**

Assistant Secretary for Health Services/Health Services Director, 2005 – 2008

Associate Deputy Secretary for Health Care, 2002 – 2005

Responsible for the medical, mental health, chemical dependency (transiently), and dental care of 15,000 offenders in total confinement. Oversaw an annual operating budget of \$110 million and 700 health care staff.

- As the first incumbent ever in this position, ushered the health services division from an operation of 12 staff in headquarters, providing only consultative services to the Department, to an operation with direct authority and

responsibility for all departmental health care staff and budget. As part of new organizational structure, created and filled statewide positions of Directors of Nursing, Medicine, Dental, Behavioral Health, Mental Health, Psychiatry, Pharmacy, Operations, and Utilization Management.

- Significantly changed the culture of the practice of correctional health care and the morale of staff by a variety of structural and functional changes, including: ensuring that high ethical standards and excellence in clinical practice were of primordial importance during hiring of professional and supervisory staff; supporting disciplining or career counseling of existing staff where appropriate; implementing an organizational structure such that patient care decisions were under the final direct authority of a clinician and were designed to ensure that patient needs were met, while respecting and operating within the confines of a custodial system.
- Improved quality of care by centralizing and standardizing health care operations, including: authoring a new Offender Health Plan defining patient benefits based on the Eighth Amendment, case law, and evidence-based medicine; implementing a novel system of utilization management in medical, dental, and mental health, using the medical staffs as real-time peer reviewers; developing a pharmacy procedures manual and creating a Pharmacy and Therapeutics Committee; achieving initial American Correctional Association accreditation for 13 facilities (all with almost perfect scores on first audit); migrating the eight individual pharmacy databases to a single central database.
- Blunted the growth in health care spending without compromising quality of care by a number of interventions, including: better coordination and centralization of contracting with external vendors, including new statewide contracts for hospitalization, laboratory, drug purchasing, radiology, physician recruitment, and agency nursing; implementing a statewide formulary; issuing quarterly operational reports at the state and facility levels.
- Piloted the following projects: direct issuance of over-the-counter medications on demand through inmates stores (commissary), obviating the need for a practitioner visit and prescription; computerized practitioner order entry (CPOE); pill splitting; ER telemedicine.
- Oversaw the health services team that participated variously in pre-design, design, or build phases of five capital projects to build complete new health units.

## **NEW YORK STATE DEPARTMENT OF CORRECTIONAL SERVICES**

**2001 – 2002**

### Regional Medical Director, Northeast Region, 2001 – 2002

Responsible for clinical oversight of medical services for 14,000 offenders in 14 prisons, including one (already) under court monitoring.

- Oversaw contract with vendor to manage 60-bed regional infirmary and hospice.
- Coordinated activities among the Regional Medical Unit outpatient clinic, the Albany Medical College, and the 13 feeder prisons to provide most of the specialty care for the region.
- Worked with contracting specialists and Emergency Departments to improve access and decrease medical out-trips by increasing the proportion of scheduled and emergency services provided by telemedicine.
- Provided training, advice, and counseling to practitioners and facility health administrators in the region to improve the quality of care delivered.

## **CORRECTIONAL MEDICAL SERVICES, INC. (now CORIZON)**

**2000 – 2001**

### Regional Medical Director, New York Region, 2000 – 2001

Responsible for clinical management of managed care contract with New York State Department of Correctional Services to provide utilization management services for the northeast and northern regions of New York State and supervision of the 60-bed regional infirmary and hospice.

- Migrated the utilization approval function from one of an anonymous rule-based “black box” to a collaborative evidence-based decision making process between the vendor and front-line clinicians.

## **MERCY INTERNAL MEDICINE, ALBANY, NEW YORK**

**1999 – 2000**

Neighborhood three-physician internal medicine group practice.

### Primary Care Physician, 1999 – 2000 (6 months)

Provided direct primary care to a panel of community patients during a period of staff shortage.



**ALBANY COUNTY CORRECTIONAL FACILITY, ALBANY, NEW YORK****1998 – 1999**Acting Facility Medical Director, 1998 – 1999

Directed the medical staff of an 800 bed jail and provided direct patient care following the sudden loss of the Medical Director, pending hiring of a permanent replacement. Coordinated care of jail patients in local hospitals. Provided consultation to the Superintendent on improvements to operation and staffing of medical unit and need for privatization.

**VETERANS ADMINISTRATION MEDICAL CENTER, ALBANY, NY****1992 – 1998**Assistant Chief, Medical Service, 1995 – 1998Chief, Section of General Internal Medicine and Emergency Services, 1992 – 1998

Responsible for operation of the general internal medicine clinics and the Emergency Department.

- Designed and implemented an organizational and physical plant makeover of the general medicine ambulatory care clinic from an episodic-care driven model with practitioners functioning independently supported by minimal nursing involvement, to a continuity-of-care model with integrated physician/mid-level practitioner/registered nurse/licensed practice nurse/practice manager teams.
- Led the design and opening of a new Emergency Department.
- As the VA Section Chief of Albany Medical College's Division of General Internal Medicine, coordinated academic activities of the Division at the VA, including oversight of, and direct teaching in, ambulatory care and inpatient internal medicine rotations for medical students, residents, and fellows. Incorporated medical residents as part of the general internal medicine clinics. Awarded \$786,000 Veterans Administration grant ("PRIME I") over four years for development and operation of educational programs for medicine residents and students in allied health professions (management, pharmacy, social work, physician extenders) wishing to study primary care delivery.

**ERIE COUNTY HEALTH DEPARTMENT, BUFFALO, NY****1988 – 1990**Director of Sexually Transmitted Diseases (STD) Services, 1989 – 1990Staff Physician, STD Clinic, 1988 – 1989Staff Physician, Lackawanna Community Health Center, 1988 – 1990

Provided leadership and patient care services in the evaluation and treatment of STDs. Successfully reorganized the county's STD services which were suffering from mismanagement and were under public scrutiny. Provided direct patient care services in primary care clinic for underserved neighborhood.

**UNION OCCUPATIONAL HEALTH CENTER, BUFFALO, NY****1988 – 1990**Staff Physician, 1988 – 1990

Provided direct patient care for the evaluation of occupationally-related health disorders.

**VETERANS ADMINISTRATION MEDICAL CENTER, BUFFALO, NY****1985 – 1990**Chief Outpatient Medical Section and Primary Care Clinic, 1986 – 1988VA Section Head, Division of General Internal Medicine, University of Buffalo, 1986 – 1988

- Developed and implemented a major restructuring of the general medicine ambulatory care clinic to reduce fragmentation of care by introduction of a continuity-of-care model with a physician/nurse team approach.

Medical Director, Anticoagulation Clinic 1986 – 1990Staff Physician, Emergency Department, 1985 – 1986**FACULTY APPOINTMENTS**

2020 – present	Faculty Associate, Center for Human Rights, University of Washington
2007 – present	Affiliate Assistant Professor, Department of Health Services, School of Public Health, University of Washington
1999 – present	Clinical Professor, Fellowship in Applied Public Health (previously Volunteer Faculty, Preventive Medicine Residency), University at Albany School of Public Health
1996 – 2002	Volunteer Faculty, Office of the Dean of Students, University at Albany



1992 – 2002	Associate Clinical/Associate/Assistant Professor of Medicine, Albany Medical College
1993 – 1997	Clinical Associate Faculty, Graduate Program in Nursing, Sage Graduate School
1990 – 1992	Instructor of Medicine, Indiana University
1985 – 1990	Clinical Assistant Professor of Medicine, University of Buffalo
1982 – 1985	Clinical Assistant Instructor of Medicine, University of Buffalo

#### **OTHER PROFESSIONAL ACTIVITIES**

2016 – present	Chair, Education Committee, Academic Consortium on Criminal Justice Health
2016 – present	Washington State Institutional Review Board (“Prisoner Advocate” member)
2016 – 2017	Mortality Reduction Workgroup, American Jail Association
2013 – present	Conference Planning Committee – Medical/Mental Health Track, American Jail Association
2013 – 2016	“Health in Prisons” course, Bloomberg School of Public Health, Johns Hopkins University/International Committee of the Red Cross
2013 – present	Institutional Review Board, University of Washington (“Prisoner Advocate” member),
2011 – 2012	Education Committee, National Commission on Correctional Health Care
2007 – present	National Advisory Committee, COCHS (Community–Oriented Correctional Health Services)
2004 – 2006	Fellow’s Advisory Committee, University of Washington Robert Wood Johnson Clinical Scholar Program
2004	External Expert Panel to the Surgeon General on the “Call to Action on Correctional Health Care”
2003 – present	Faculty Instructor, Critical Appraisal of the Literature Course, Family Practice Residency Program, Providence St. Peter Hospital, Olympia, Washington
2001 – present	Chair/Co-Chair, Education Committee, American College of Correctional Physicians
1999 – present	Critical Appraisal of the Literature Course, Preventive Medicine Residency Program, New York State Department of Health/University at Albany School of Public Health
1999	Co–Chairperson, Education Subcommittee, Workshop Submission Review Committee, Annual Meeting, Society of General Internal Medicine
1997 – 1998	Northeast US Representative, National Association of VA Ambulatory Managers
1996 – 2002	Faculty Mentor, Journal Club, Internal Medicine Residency Program, Albany Medical College
1996 – 2002	Faculty Advisor and Medical Control, 5 Quad Volunteer Ambulance Service, University at Albany
1995 – 1998	Preceptor, MBA Internship, Union College
1995	Quality Assurance/Patient Satisfaction Subcommittee, VA National Curriculum Development Committee for Implementation of Primary Care Practices, Veterans Administration
1994 – 1998	Residency Advisory Committee, Preventive Medicine Residency, New York State Department of Health/School of Public Health, University at Albany
1993	Chairperson, Dean's Task Force on Primary Care, Albany Medical College
1993	Task Group to develop curriculum for Comprehensive Care Case Study Course for Years 1 through 4, Albany Medical College
1988 – 1989	Teaching Effectiveness Program for New Housestaff, Graduate Medical Dental Education Consortium of Buffalo
1987 – 1990	Human Studies Review Committee, School of Allied Health Professions, University of Buffalo
1987 – 1989	Chairman, Subcommittee on Hospital Management Issues and Member, Subcommittee on Teaching of Ad Hoc Committee to Plan Incoming Residents Training Week, Graduate Medical Dental Education Consortium of Buffalo
1987 – 1988	Dean's Ad Hoc Committee to Reorganize "Introduction to Clinical Medicine" Course
1987	Preceptor, Nurse Practitioner Training Program, School of Nursing, University of Buffalo
1986 – 1988	Course Coordinator, Simulation Models Section of Physical Diagnosis Course, University of Buffalo
1986 – 1988	Chairman, Service Chiefs' Continuity of Care Task Force, Veterans Administration Medical Center, Buffalo, New York
1979 – 1980	Laboratory Teaching Assistant in Gross Anatomy, Université Libre de Bruxelles, Brussels, Belgium

1973 – 1975 Instructor and Instructor Trainer of First Aid, American National Red Cross

1972 – 1975 Chief of Service or Assistant Chief of Operations, 5 Quad Volunteer Ambulance Service, University at Albany.

1972 – 1975 Emergency Medical Technician Instructor and Course Coordinator, New York State Department of Health, Bureau of Emergency Medical Services

#### **REVIEWER/EDITOR**

2019 – present Criminal Justice Review (reviewer)

2015 – present PLOS ONE (reviewer)

2015 – present Founding Editorial Board Member and Reviewer, Journal for Evidence-based Practice in Correctional Health, Center for Correctional Health Networks, University of Connecticut

2011 – present American Journal of Public Health (reviewer)

2010 – present International Advisory Board Member and Reviewer, International Journal of Prison Health

2010 – present Langeloth Foundation (grant reviewer)

2001 – present Reviewer and Editorial Board Member (2009 – present), Journal of Correctional Health Care

2001 – 2004 Journal of General Internal Medicine (reviewer)

1996 Abstract Committee, Health Services Research Subcommittee, Annual Meeting, Society of General Internal Medicine (reviewer)

1990 – 1992 Medical Care (reviewer)

#### **EDUCATION**

University at Albany, College of Arts and Sciences, Albany; B.S., 1975 (Biology)

University at Albany, School of Education, Albany; AMST (Albany Math and Science Teachers) Teacher Education Program, 1975

Université Libre de Bruxelles, Faculté de Medecine, Brussels, Belgium; Candidature en Sciences Medicales, 1980

University at Buffalo, School of Medicine, Buffalo; M.D., 1982

University at Buffalo Affiliated Hospitals, Buffalo; Residency in Internal Medicine, 1985

Regenstrief Institute of Indiana University, and Richard L. Roudebush Veterans Administration Medical Center; VA/NIH Fellowship in Primary Care Medicine and Health Services Research, 1992

Indiana University, School of Health, Physical Education, and Recreation, Bloomington; M.P.H., 1992

New York Academy of Medicine, New York; Mini-fellowship Teaching Evidence-Based Medicine, 1999

#### **CERTIFICATION**

Provisional Teaching Certification for Biology, Chemistry, Physics, Grades 7–12, New York State Department of Education (expired), 1975

Diplomate, National Board of Medical Examiners, 1983

Diplomate, American Board of Internal Medicine, 1985

Fellow, American College of Physicians, 1991

License: Washington (#MD00041843, active); New York (#158327, inactive); Indiana (#01038490, inactive)

“X” Waiver (buprenorphine), Department of Health & Human Services, 2018

#### **MEMBERSHIPS**

2019 – present Washington Association of Sheriffs and Police Chiefs

2005 – 2016 American Correctional Association/Washington Correctional Association

2004 – 2006 American College of Correctional Physicians (Member, Board of Directors, Chair Education Committee)

2000 – present American College of Correctional Physicians

**RECOGNITION**

B. Jaye Anno Award for Excellence in Communication, National Commission on Correctional Health Care. 2019  
 Award of Appreciation, Washington Association of Sheriffs and Police Chiefs. 2018  
 Armond Start Award of Excellence, American College of Correctional Physicians. 2010  
 (First) Annual Preventive Medicine Faculty Excellence Award, New York State Preventive Medicine Residency Program, University at Albany School of Public Health/New York State Department of Health. 2010  
 Excellence in Education Award for excellence in clinical teaching, Family Practice Residency Program, Providence St. Peter Hospital, Olympia, Washington. 2004  
 Special Recognition for High Quality Workshop Presentation at Annual Meeting, Society of General Internal Medicine. 1996  
 Letter of Commendation, House Staff Teaching, University of Buffalo. 1986

**WORKSHOPS, SEMINARS, PRESENTATIONS, INVITED LECTURES**

*It's the 21<sup>st</sup> Century – Time to Bid Farewell to “Sick Call” and “Chronic Care Clinic”.* Annual Conference, National Commission on Correctional Health Care. Fort Lauderdale, Florida. 2019

*HIV and Ethics – Navigating Medical Ethical Dilemmas in Corrections.* Keynote Speech, 14<sup>th</sup> Annual HIV Care in the Correctional Setting. AIDS Education and Training Program (AETC) Mountain West, Olympia, Washington. 2019

*Honing Nursing Skills to Keep Patients Safe in Jail.* Orange County Jail Special Training Session (including San Bernardino and San Diego Jail Staffs), Theo Lacy Jail, Orange, California. 2019

*What Would You Do? Navigating Medical Ethical Dilemmas.* Leadership Training Academy, National Commission on Correctional Health Care. San Diego, California. 2019

*Preventing Jail Deaths.* Jail Death Review and Investigations: Best Practices Training Program, American Jail Association, Arlington, Virginia. 2018

*How to Investigate Jail Deaths.* Jail Death Review and Investigations: Best Practices Training Program, American Jail Association, Arlington, Virginia. 2018

*Executive Manager Program in Correctional Health.* 4-day training for custody/health care teams from jails and prisons on designing safe and efficient health care systems. National Institute for Corrections Training Facility, Aurora, Colorado, and other venues in Washington State. Periodically. 2014 – present

*Medical Ethics in Corrections.* Criminal Justice 441 – Professionalism and Ethical Issues in Criminal Justice. University of Washington, Tacoma. Recurring seminar. 2012 – present

*Medical Aspects of Deaths in ICE Custody.* Briefing for U.S. Senate staffers, Human Rights Watch. Washington, D.C. 2018

*Jails' Role in Managing the Opioid Epidemic.* Panelist. Washington Association of Sheriffs and Police Chiefs Annual Conference. Spokane, Washington. 2018

*Contract Prisons and Contract Health Care: What Do We Know?* Behind Bars: Ethics and Human Rights in U.S. Prisons Conference. Center for Bioethics – Harvard Medical School/Human Rights Program – Harvard Law School. Boston, Massachusetts. 2017

*Health Care Workers in Prisons.* (With Dr. J. Wesley Boyd) Behind Bars: Ethics and Human Rights in U.S. Prisons Conference. Center for Bioethics – Harvard Medical School/Human Rights Program – Harvard Law School. Boston, Massachusetts. 2017

*Prisons, Jails and Medical Ethics: Rubber, Meet Road.* Grand Rounds. Touro Medical College. New York, New York. 2017

*Jail Medical Doesn't Have to Keep You Up at Night – National Standards, Risks, and Remedies.* Washington Association of Counties. SeaTac, Washington. 2017

*Prison and Jail Health Care: What do you need to know?* Grand Rounds. Providence/St. Peters Medical Center. Olympia, Washington. 2017

*Prison Health Leadership Conference.* 2-Day workshop. International Corrections and Prisons Association/African Correctional Services Association/Namibian Corrections Service. Omaruru, Namibia. 2016; 2018

*What Would YOU Do? Navigating Medical Ethical Dilemmas.* Spring Conference. National Commission on Correctional Health Care. Nashville, Tennessee. 2016

*Improving Patient Safety.* Spring Provider Meeting. Oregon Department of Corrections. Salem, Oregon 2016

*A View from the Inside: The Challenges and Opportunities Conducting Cardiovascular Research in Jails and Prisons.* Workshop on Cardiovascular Diseases in the Inmate and Released Prison Population. The National Heart, Lung, and Blood Institute. Bethesda, Maryland. 2016

*Why it Matters: Advocacy and Policies to Support Health Communities after Incarceration.* At the Nexus of Correctional Health and Public Health: Policies and Practice session. Panelist. American Public Health Association Annual Meeting. Chicago, Illinois. 2015

*Hot Topics in Correctional Health Care.* Presented with Dr. Donald Kern. American Jail Association Annual Meeting. Charlotte, North Carolina. 2015

*Turning Sick Call Upside Down.* Annual Conference. National Commission on Correctional Health Care. Dallas, Texas, 2015.

*Diagnostic Maneuvers You May Have Missed in Nursing School.* Annual Conference. National Commission on Correctional Health Care. Dallas, Texas. 2015

*The Challenges of Hunger Strikes: What Should We Do? What Shouldn't We Do?* Annual Conference. National Commission on Correctional Health Care. Dallas, Texas. 2015

Practical and Ethical Approaches to Managing Hunger Strikes. Annual Practitioners' Conference. Washington Department of Corrections. Tacoma, Washington. 2015

*Contracting for Health Services: Should I, and if so, how?* American Jail Association Annual Meeting. Dallas, Texas. 2014

*Hunger Strikes: What should the Society of Correctional Physician's position be?* With Allen S, May J, Ritter S. American College of Correctional Physicians (Formerly Society of Correctional Physicians) Annual Meeting. Nashville, Tennessee. 2013

*Addressing Conflict between Medical and Security: an Ethics Perspective.* International Corrections and Prison Association Annual Meeting. Colorado Springs, Colorado. 2013

*Patient Safety and 'Right Using' Nurses.* Keynote address. Annual Conference. American Correctional Health Services Association. Philadelphia, Pennsylvania. 2013

*Patient Safety: Overuse, underuse, and misuse...of nurses.* Keynote address. Essentials of Correctional Health Care conference. Salt Lake City, Utah. 2012

*The ethics of providing healthcare to prisoners-An International Perspective.* Global Health Seminar Series. Department of Global Health, University of Washington, Seattle, Washington. 2012

*Recovery, Not Recidivism: Strategies for Helping People Who are Incarcerated.* Panelist. NAMI Annual Meeting, Seattle, Washington, 2012

*Ethics and HIV Workshop.* HIV/AIDS Care in the Correctional Setting Conference, Northwest AIDS Education and Training Center. Salem, Oregon. 2011

*Ethics and HIV Workshop.* HIV/AIDS Care in the Correctional Setting Conference, Northwest AIDS Education and Training Center. Spokane, Washington. 2011

*Patient Safety: Raising the Bar in Correctional Health Care.* With Dr. Sharen Barboza. National Commission on Correctional Health Care Mid-Year Meeting, Nashville, Tennessee. 2010

*Patient Safety: Raising the Bar in Correctional Health Care.* American Correctional Health Services Association, Annual Meeting, Portland, Oregon. 2010

*Achieving Quality Care in a Tough Economy.* National Commission on Correctional Health Care Mid-Year Meeting, Nashville, Tennessee, 2010 (Co-presented with Rick Morse and Helena Kim, PharmD.)

*Involuntary Psychotropic Administration: The Harper Solution.* With Dr. Bruce Gage. American Correctional Health Services Association, Annual Meeting, Portland, Oregon. 2010

*Evidence Based Decision Making for Non-Clinical Correctional Administrators.* American Correctional Association 139<sup>th</sup> Congress, Nashville, Tennessee. 2009

*Death Penalty Debate.* Panelist. Seattle University School of Law, Seattle, Washington. 2009

*The Patient Handoff – From Custody to the Community.* Washington Free Clinic Association, Annual Meeting, Olympia, Washington. Lacey, Washington. 2009

*Balancing Patient Advocacy with Fiscal Restraint and Patient Litigation.* National Commission on Correctional Health Care and American College of Correctional Physicians “Medical Directors Boot Camp,” Seattle, Washington. 2009

*Staff Management.* National Commission on Correctional Health Care and American College of Correctional Physicians “Medical Directors Boot Camp,” Seattle, Washington. 2009

*Management Dilemmas in Corrections: Boots and Bottom Bunks.* Annual Meeting, American College of Correctional Physicians, Chicago, Illinois. 2008

*Public Health and Correctional Health Care.* Masters Program in community-based population focused management – Populations at risk, Washington State University, Spokane, Washington. 2008

*Managing the Geriatric Population.* Panelist. State Medical Directors’ Meeting, American Corrections Association, Alexandria, Virginia. 2007

*I Want to do my own Skin Biopsies.* Annual Meeting, American College of Correctional Physicians, New Orleans, Louisiana. 2005

*Corrections Quick Topics.* Annual Meeting, American College of Correctional Physicians. Austin, Texas. 2003

*Evidence Based Medicine in Correctional Health Care.* Annual Meeting, National Commission on Correctional Health Care. Austin, Texas. 2003

*Evidence Based Medicine.* Excellence at Work Conference, Empire State Advantage. Albany, New York. 2002

*Evidence Based Medicine, Outcomes Research, and Health Care Organizations.* National Clinical Advisory Group, Integrail, Inc., Albany, New York. 2002

*Evidence Based Medicine.* With Dr. LK Hohmann. The Empire State Advantage, Annual Excellence at Work Conference: Leading and Managing for Organizational Excellence, Albany, New York. 2002

*Taking the Mystery out of Evidence Based Medicine: Providing Useful Answers for Clinicians and Patients.* Breakfast Series, Institute for the Advancement of Health Care Management, School of Business, University at Albany, Albany, New York. 2001

*Diagnosis and Management of Male Erectile Dysfunction – A Goal-Oriented Approach.* Society of General Internal Medicine National Meeting, San Francisco, California. 1999

*Study Design and Critical Appraisal of the Literature.* Graduate Medical Education Lecture Series for all housestaff, Albany Medical College, Albany, New York. 1999

*Male Impotence: Its Diagnosis and Treatment in the Era of Sildenafil.* 4<sup>th</sup> Annual CME Day, Alumni Association of the Albany-Hudson Valley Physician Assistant Program, Albany, New York. 1998

*Models For Measuring Physician Productivity.* Panelist. National Association of VA Ambulatory Managers National Meeting, Memphis, Tennessee. 1997

*Introduction to Male Erectile Dysfunction and the Role of Sildenafil in Treatment.* Northeast Regional Meeting Pfizer Sales Representatives, Manchester Center, Vermont. 1997

*Male Erectile Dysfunction.* Topics in Urology, A Seminar for Primary Healthcare Providers, Bassett Healthcare, Cooperstown, New York. 1997

*Evaluation and Treatment of the Patient with Impotence: A Practical Primer for General Internists.* Society of General Internal Medicine National Meeting, Washington D.C. 1996

*Impotence: An Update.* Department of Medicine Grand Rounds, Albany Medical College, Albany, New York. 1996

*Diabetes for the EMT First-Responder.* Five Quad Volunteer Ambulance, University at Albany. Albany, New York. 1996

*Impotence: An Approach for Internists.* Medicine Grand Rounds, St. Mary's Hospital, Rochester, New York. 1994

*Male Impotence.* Common Problems in Primary Care Precourse. American College of Physicians National Meeting, Miami, Florida. 1994

*Patient Motivation: A Key to Success.* Tuberculosis and HIV: A Time for Teamwork. AIDS Program, Bureau of Tuberculosis Control – New York State Department of Health and Albany Medical College, Albany, New York. 1994



*Recognizing and Treating Impotence.* Department of Medicine Grand Rounds, Albany Medical College, Albany, New York. 1992

*Medical Decision Making: A Primer on Decision Analysis.* Faculty Research Seminar, Department of Family Practice, Indiana University, Indianapolis, Indiana. 1992

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*New Perspectives in the Management of Hypercholesterolemia.* Medical Staff, West Seneca Developmental Center, West Seneca, New York. 1989

*Effective Use of Audio-Visual Aids.* Nurse Educators, American Diabetes Association, Western New York Chapter, Buffalo, New York. 1989

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#### PUBLICATIONS/ABSTRACTS

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#### EXPERT TESTIMONY

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Dockery, *et al.* v. Hall *et al.* US District Court for the Southern District of Mississippi Northern Division, 2018 (trial)

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