

TESTIMONY OF DALTON R. CARPENTER, M.D.
27th of December, 2004

1 Q Gram positive or gram negative?

2 A It's a gram negative, I believe.

3 Q And is it sensitive to Levaquin?

4 A It says there was -- the sensitivity report
5 was that it was resistant to all antibiotics except
6 Levaquin, Cipro, Bactrim, chloramphenicol and
7 Cefatilladine.

8 Q What continuing harm does Mr. Smith have
9 because of, as you describe it, a delay in diagnosing
10 his infection?

11 A The harm is that he can become septic. This
12 organism can get into his bloodstream and cause him to
13 go into septic shock and die.

14 Q So he may in the future become septic?

15 A No. I'm talking about at this point in time
16 when he sees Buza.

17 Q But it didn't happen, he didn't become
18 septic?

19 A No, because Buza took the appropriate
20 action. He put him on the antibiotic, he did the
21 appropriate institution of local care and put him on
22 hyperbaric oxygen.

23 Q My question to you was: What continuing
24 harm, if any, does Mr. Smith have because of the
25 alleged delay in diagnosing his infection?

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1 **A** From this point, what harm has he sustained
2 from this infection?

3 **Q** Yes, sir.

4 **A** Well, I think the pain he is having over the
5 wound site is directly related to that ongoing wound
6 where he got a lot of scar tissue formed.

7 And there is the main nerve through that
8 wound, which called the serial nerve, right beside
9 there. So he has developed a lot of scar tissue
10 that's tugging on the nerve and it's causing the nerve
11 type of hypersensitivity pain.

12 **Q** What other problems does Mr. Smith have as a
13 result of the alleged delay in diagnosing infection by
14 Dr. Ziegler and Dr. Robinson?

15 **A** He may have -- because of the character of
16 the skin not being normal where it has healed, he may
17 have further breakdown as he gets older. This is not
18 normal skin. It has healed with what we call
19 secondary intention, granulation tissue; and that is
20 not normal, healthy skin.

21 So if he does develop diabetes, which it
22 looks like he is, with a blood sugar that I saw in the
23 records of 230 at one point recently, then he is
24 likely to develop a diabetic ulcer at this same
25 location, because that skin is not normal.

