1	COURT OF APPEALS
2	STATE OF NEW YORK
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4	KOWALSKI,
5	Appellant,
6	-against- No. 128
7	ST. FRANCIS HOSPITAL AND HEALTH CENTERS, et al.,
8	Respondents.
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10	20 Eagle Street Albany, New York 12207
11	May 28, 2013
12	Before:
13	CHIEF JUDGE JONATHAN LIPPMAN ASSOCIATE JUDGE VICTORIA A. GRAFFEO
14	ASSOCIATE JUDGE SUSAN PHILLIPS READ ASSOCIATE JUDGE ROBERT S. SMITH
15	ASSOCIATE JUDGE EUGENE F. PIGOTT, JR. ASSOCIATE JUDGE JENNY RIVERA
16	ASSOCIATE JUDGE SHEILA ABDUS-SALAAM
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2	Appearances:
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25	Karen Schiffmiller Official Court Transcriber

1	CHIEF JUDGE LIPPMAN: 128, Kowalski?
2	Counsel, would you like any rebuttal time?
3	MS. GALVAO: Three minutes, please.
4	CHIEF JUDGE LIPPMAN: Go ahead, counsel.
5	MS. GALVAO: Good afternoon, may it please
6	the court, my name is Susan Galvao. I'm with
7	Bleakley, Platt & Schmidt in White Plains and I
8	represent the plaintiff/appellant Kevin Kowalski in
9	this appeal.
10	On the afternoon of December 20th, 2006,
11	Kevin Kowalski was a forty-eight year old father of
12	two young children. He had friends and family
13	JUDGE PIGOTT: At what point does proximate
14	cause enter into this?
15	MS. GALVAO: Excuse me?
16	JUDGE PIGOTT: At what point does proximate
17	cause enter into this?
18	MS. GALVAO: It's at the heart of it, but
19	the analysis has to focus first on the duty of care,
20	on the reasonableness under the circumstances of
21	their acts and their omissions, and on the, you know,
22	the chain of events that led him that afternoon out
23	to Route 9.
24	JUDGE READ: Why doesn't the mental hygiene
25	law define the duty of care totally define it?

1	MS. GALVAO: I think that's honestly,
2	Your Honor, where, the Appellate Division went wrong
3	in this case, because the Mental Hygiene Law and its
4	provisions there's a couple of different
5	articles at issue here. Initially, the arguments
6	made below by the medical defendants related to
7	mental illness, involuntary confinement, civil
8	commitment, and they shifted
9	JUDGE READ: Well, the law I guess
10	the law, as I read it, says that you can only retain
11	somebody if they're only empowered to
12	involuntarily retain someone who voluntarily came in,
13	if he's a threat to himself or others. And you're
14	arguing that there's something left to the common
15	law?
16	MS. GALVAO: I think yes, absolutely,
17	the common
18	CHIEF JUDGE LIPPMAN: What's the duty?
19	MS. GALVAO: The duty of care is the
20	standard duty of care that applies to all patients in
21	the State of New York, which is a duty of a health
22	care provider and a hospital to safeguard and protect
23	the patient commensurate with that person's capacity
24	to safeguard and protect himself.
25	JUDGE SMITH: And what what

1	specifically did this hospital do wrong?
2	MS. GALVAO: It was a combination of errors
3	on the part of the hospital staff
4	JUDGE SMITH: What's the biggest one?
5	MS. GALVAO: The biggest one is in failing,
6	frankly, or the clearest one is in failing to
7	implement their own written protocols and procedures
8	for someone with Mr. Kowalski's presentation, his
9	condition on that day, and his reasonable
10	CHIEF JUDGE LIPPMAN: What about when he
11	disregards what they tell him to do, and in this
12	case, just eloped and left? They set out a protocol.
13	They saw him talking to his friend, and then he just
14	leaves. What's their responsibility in that
15	situation?
16	MS. GALVAO: I I think the record
17	isn't as clear as that, that that they set out
18	a protocol. In fact
19	CHIEF JUDGE LIPPMAN: What does the record
20	show about what they did?
21	MS. GALVAO: The record shows that he was -
22	that he had expressed a desire a leave at some
23	point on the afternoon of December 20th. He had
24	presented just a couple of hours before with a .369
25	blood alcohol content

1	JUDGE SMITH: Do you do you concede
2	that if he's absolutely determined to leave, they
3	can't stop him?
4	MS. GALVAO: No. I I don't I
5	don't think that can be concluded on this record, for
6	one.
7	JUDGE SMITH: But you you you
8	say they could have they could have grabbed him
9	and tied him up?
10	MS. GALVAO: I think there's a point, and
11	it's well settled in our in our case law, and
12	it's just the common law duty of care, which says
13	that if someone is in such a condition that they
14	present a danger to themselves or others
15	JUDGE SMITH: And you say you say
16	this record shows the kind of condition that would
17	allow them to tie him to the bed.
18	MS. GALVAO: If it if it became
19	necessary to do that, but frankly, I think they
20	didn't do any of the steps in
21	JUDGE GRAFFEO: So he wasn't brought in by
22	law enforcement. He came in with a friend. He came
23	in
24	MS. GALVAO: Absolutely, and he
25	JUDGE GRAFFEO: completely

1	voluntarily. Isn't that different?
2	MS. GALVAO: I I don't think it's
3	different at all, and that's where I think the
4	the misconception is here.
5	JUDGE GRAFFEO: So anyone that walks in who
6	appears to be inebriated, the hospital takes on a
7	special duty of care to that individual, if they
8	decide after a while they want a drink, so they want
9	to leave?
10	MS. GALVAO: I think that if we were to
11	conclude that there was no duty of care to this
12	patient because he didn't come in the back of a
13	police car, we'd be leaving a gap a gap in the
14	standard in care that's existed all along.
15	JUDGE GRAFFEO: But you can't completely
16	ignore the statute, can you?
17	MS. GALVAO: I think that you have to put
18	this
19	JUDGE GRAFFEO: About whether he's a danger
20	to himself or to others. It makes a difference if
21	they've engaged in some kind of conduct and the
22	police bring them to the hospital.
23	MS. GALVAO: I think no, honestly, I
24	think that the statute has its place. The statute
25	was enacted as part of the chemical dependence and

1	treatment programs construct, that the State of New
2	York has put in place. There's a whole host of
3	CHIEF JUDGE LIPPMAN: But but counsel
4	
5	JUDGE GRAFFEO: So every everyone who
6	goes to an emergency room, who's inebriated, the
7	hospital's got to put them into treatment?
8	MS. GALVAO: No, absolutely not; that's not
9	our position.
10	CHIEF JUDGE LIPPMAN: Do you agree there's
11	a main distinction between voluntary and involuntary
12	and the circumstances are very different as to how
13	you come in? That is important, isn't it?
14	MS. GALVAO: I agree that if the person
15	comes in in the back of a police car and is being
16	brought in pursuant to the Mental Hygiene Law
17	provisions that permit that, then the standard of
18	care might be looked at in view of the statutory
19	provisions; which, frankly, allow the doctor or the
20	staff of the hospital to retain the person if it's
21	concluded that they do, in fact, represent a danger
22	to themselves or others.
23	CHIEF JUDGE LIPPMAN: But what do we look
24	at when they don't come in under that circumstance?
25	MS. GALVAO: Then you look to well,

1 there's - - - there's two ways to look at it. You 2 look to the common law. The common law says what's 3 reasonable under the circumstances for this patient. 4 If you have a patient who comes in and he is 5 "inebriated", but he shows over the course of the day there's - - - there's reasonable and consistent 6 7 application of protocol to establish that, in fact, 8 he does not present a threat to himself or others, or 9 that his condition is so improved that he would no 10 longer - - -11 JUDGE ABDUS-SALAAM: What does the hosp - -12 13 CHIEF JUDGE LIPPMAN: What's specifically in this record that tells us - - - that supports your 14 15 position as to - - - that they had a duty here to do 16 more than what they did? 17 MS. GALVAO: In terms of his capacity at 18 that given point in time? 19 CHIEF JUDGE LIPPMAN: What is it that jumps 20 out at us that the hospital neglected their duty 21 here? 22 MS. GALVAO: Okay. Initially, to look at 23 his condition, they failed to implement their own 24 protocols in terms of checking their own records as 25 to his last admission into the hospital.

1	JUDGE SMITH: So they they they
2	should have found that he had been suicidal the last
3	time.
4	MS. GALVAO: That a month before he had
5	been in the hospital the same hospital
6	JUDGE SMITH: Okay, but does he how
7	do you connect that let's suppose it was a
8	departure from the standard of care for them not to
9	look up the last visit and say that he came in with
10	sui with suicide problems. How did that
11	proximately cause his injury?
12	MS. GALVAO: Because in failing to to
13	access those records and learn about his recent
14	history, they then failed that failed to
15	trigger them to do what they should have under the
16	protocols with someone with that recent history.
17	JUDGE SMITH: What what is what
18	is that they should you you're say
19	you said they could have tied him up, but short of
20	tying him up, what could they do?
21	MS. GALVAO: They could have and should
22	have implemented a one-on-one surveillance watch,
23	which they've done on other occasions with other
24	patients. They
25	JUDGE RIVERA: And he says he wants to

1	leave. What are they supposed to do?
2	MS. GALVAO: What they're
3	JUDGE RIVERA: He gets up and says, I want
4	to leave.
5	MS. GALVAO: Well, it's it's
6	essentially the same as as any person who's in
7	a pos in a state of mind such that you can
8	conclude, based upon their lab reports, their
9	behavior, their recent history, that they're
10	that they're saying that they want to leave under
11	these circumstances is not good enough. You need to
12	protect them. You have that duty to them.
13	What you would you would counsel them
14	not to leave. You would put in a one-on-one
15	surveillance. If necessary, you could use the
16	nonelastic restraints, which were part of their
17	policy.
18	JUDGE PIGOTT: Well, you have two experts
19	to back you up on that, right? Dr. Yates and Dr.
20	Abramson (ph.).
21	MS. GALVAO: Absolutely. And to that
22	point, the experts that were offered by the
23	defendants in support of summary judgment were
24	addressing the wrong standard. They were addressing
25	the standard of care under the Mental Hygiene Law for

the commitment - - - the civil commitment - - - of 1 the mentally ill. And that's a great and very 2 3 significant decision - - -JUDGE GRAFFEO: Well, why is it if 4 5 somebody's brought in under the Mental Hygiene Law, 6 they have more rights than someone who comes in 7 voluntarily? Because not everyone who's brought in, 8 in a police car is going to be found by two 9 physicians to be a danger to themself or others. 10 They'd be allowed to leave. Here you're saying, the 11 person who comes in voluntarily and has this kind of 12 BAC has got to be bound and - - -13 MS. GALVAO: What - - -14 JUDGE GRAFFEO: - - - and - - - and 15 committed to a treatment program. 16 MS. GALVAO: No, I'm saying that - - - that 17 - - - that the doctor - - -JUDGE GRAFFEO: It doesn't seem to me - - -18 19 it doesn't seem to be balanced here. 20 MS. GALVAO: I'm saying that the doctor and 21 the health care professionals have to apply the same 22 level of judgment, the same level of reasoning that 23 they do to anyone who comes into their care. It's a 2.4 duty to safeguard and protect, commensurate with 25 their capacity. The Mental Hygiene Law, and I

1 started to refer to it before, but has set up - - -2 the treatment system, under the law, has evolved to 3 be a voluntary treatment system. They don't want people being carted off to Four Winds or carted off 4 5 to AA against their will. They don't - - - the State 6 of New York is not endorsing people being treated 7 over their objections. JUDGE GRAFFEO: And they can't - - - they 8 9 can't keep someone either - - -10 MS. GALVAO: They can't - - -11 JUDGE GRAFFEO: - - - at a treatment 12 program. 13 MS. GALVAO: Right, they can - - -14 JUDGE GRAFFEO: If you want to leave and 15 you're a voluntary admission, you get to walk out the 16 door. 17 MS. GALVAO: Absolutely. So - - -JUDGE GRAFFEO: Why is the hospital under a 18 19 much stricter standard? 20 MS. GALVAO: It's - - - it's not a stricter 21 standard, because 2209 simply says that if we have 22 these programs, these treatment centers set up, Four 23 Winds and AA or, you know, a Betty Ford Clinic, and 2.4 police bring someone in. You've been qualified as a 25 clinic; you're a hospital; you have this type of

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service available.

If the police bring you in, in an intoxicated condition, the statute sets up a process. It says, do you want to stick around? Are you here voluntarily? You want to stay, okay. We can set you up and - - - we can set you up at Turning Point or wherever.

8 However, if the police bring you in and you 9 say I don't want that, you're - - - and you're not at 10 that time incapacitated, they have to let you go. 11 But if you are incapacitated, they have to give you 12 that care, that same standard of care, that applies 13 to everyone, reasonableness, care and - - -14 JUDGE ABDUS-SALAAM: Counsel, what was - -15 16 CHIEF JUDGE LIPPMAN: Is there a particular 17 alcohol level that determines whether they're 18 inebriated? It is based on when they see what's in 19 your blood and that's how they determine what they do 20 with you? 21 MS. GALVAO: Um - - -22 CHIEF JUDGE LIPPMAN: What's the deciding 23 factor? 2.4 MS. GALVAO: I don't think that the courts 25 or the medical profession would - - - would

necessarily impose a specific blood alcohol content, 1 2 but what is important on this record, is that this 3 man had nothing less then a .369 when he came in 4 shortly before noon, and .350 when he was brought 5 back on a gurney. Even the expert affidavit 6 submitted by the medical defendants, the 7 toxicologist, even his scenario of the normal rate of 8 metabolism, he opines the - - - Mr. Kowalski would 9 still have had something "below .300" at the time he 10 eloped. 11 JUDGE ABDUS-SALAAM: So is that - - - is that the main point here, that he was inebriated and 12 13 therefore, he - - - the doctors and the hospital 14 violated their duty to this patient? 15 The main point was that the MS. GALVAO: 16 Appellate Division should not have decided as a 17 matter of law that this man was not entitled to the care that any other patient in the State of New York 18 19 would have been entitled to under the circumstances. 20 JUDGE GRAFFEO: Duty's a legal issue, 21 right? The courts can weigh in on duty. 22 MS. GALVAO: Right. And this court - - -23 JUDGE GRAFFEO: Proximate cause may be a 24 jury question, but the duty issue is a legal issue. 25 MS. GALVAO: Ab - - - right. And the way

1 this Appellate Division decision is written by 2 reference to 2209, the Mottau case and the Lawlor 3 case, it's creating a standard of law whereby it, you 4 know, a general counsel to a hospital or a medical 5 professional has to say, wait a minute, okay, how did 6 you get in here today? Did you come in by the police 7 or did you come in on your - - - with your friend's 8 help this morning? 9 JUDGE SMITH: Is this - - -10 JUDGE PIGOTT: If this - - - if this guy 11 had just come in with his fractured nose, and he 12 didn't say anything about being intoxicated, but they 13 obviously learned that later on that he was, would 14 they owe him a duty? 15 MS. GALVAO: They'd owe him the same duty 16 that they'd owe any other patient, if they assessed 17 him and concluded based upon lab or other results. 18 And it really shouldn't be by reference to his 19 history of alcoholism. You could have had a twenty-20 one year old on their - - - you know, on their first 21 night out at the bars, comes in by his friend, very 22 intoxicated, same state. 23 JUDGE SMITH: Is it - - - is it fair to 24 summarize your argument as saying you think this is 25 just a medical malpractice case and they departed

from the standard of care? 1 MS. GALVAO: It's a medical malpractice and 2 3 it's a negligence case. And it's really not about alcohol treatment centers. It's not about 4 5 alcoholism. It shouldn't be about that, but the way it's written by the Appellate Division and the way it 6 7 was decided as a matter of law, Mr. Kowalski, having 8 been an alcoholic, is somehow put into a new category 9 and we have to apply a new standard. 10 CHIEF JUDGE LIPPMAN: Okay, counsel. 11 Thanks, you'll have your rebuttal time. 12 MS. GALVAO: Thank you. 13 CHIEF JUDGE LIPPMAN: Counsel? 14 MR. SPOLZINO: Chief Judge Lippman, may it 15 please the court, my name is Robert Spolzino, and I 16 represent Dr. Chintapalli. 17 CHIEF JUDGE LIPPMAN: Counsel, let me ask you a question. Would it have been a better practice 18 19 for the doctor to have told whoever he was dealing 20 with that they should notify the police? That this 21 guy is terribly drunk, and eloped and left, and that 22 it really may cause problem - - - that would have 23 been better, right? 24 MR. SPOLZINO: Given the facts here, Judge 25 Lippman, there was no reason to do that. The -

if you look at the plaintiff's condition at 3:45 when 1 2 he left - - - not his condition at 11:30 when he came 3 into the hospital - - - he was alert. He had ambulated to the bathroom on his own without a 4 5 problem. He had spoken to the nurse, and he was asked - - - when he was asked by the nurse - - - when 6 she said, don't leave by yourself, call a friend, he 7 8 called his friend. He spoke to his friend, because 9 we know that from the friend's affidavit, and the 10 friend said, I'll come and get you. And when he was 11 actually leaving in the lobby, he ran into Nurse 12 Soto, she - - - her deposition testimony is in the 13 record, and she said, he looked fine, looked 14 appropriate; I thought he'd be discharged. 15 CHIEF JUDGE LIPPMAN: So basically, 16 counsel, didn't you have any responsibility here? Ι 17 mean, is it - - - did - - - did the doctor in the 18 hospital conduct themselves exactly the way they 19 should have? Can anyone just come in, seek 20 treatment, obviously in some distress, and then just 21 leave, you know, without any kind of a - - - any kind 22 of further monitoring? 23 MR. SPOLZINO: It depends, Judge Lippman, 24 on whether the patient is competent. 25 JUDGE PIGOTT: Is what?

1	MR. SPOLZINO: If the patient can if
2	the patient is competent.
3	JUDGE PIGOTT: Oh.
4	MR. SPOLZINO: If the patient can a
5	patient has a right to leave.
6	CHIEF JUDGE LIPPMAN: What was he I
7	guess what I'm getting at what was your duty
8	here? Did you have a duty? If so, what was it? And
9	tell us how you met that duty?
10	MR. SPOLZINO: Dr. Chintapalli is a
11	physician. He had a had a duty to treat the
12	plaintiff
13	CHIEF JUDGE LIPPMAN: Right.
14	MR. SPOLZINO: in accordance with the
15	applicable standard of care. What he did here to
16	meet that duty was he evaluated the patient. After
17	discussing the patient, the patient's history, and so
18	forth, he found that the patient was competent.
19	JUDGE PIGOTT: Why did he why did
20	recommend detox?
21	MR. SPOLZINO: Because the patient had a
22	significant blood alcohol content, and had the
23	patient had been told he had told Dr.
24	Chintapalli that he was there for detox, and that he
25	had been detoxed four or five or six times in the

1	past.
2	JUDGE PIGOTT: But the doctor knew that he
3	blew a .36
4	MR. SPOLZINO: The doctor knew that he
5	- right. The doc
6	JUDGE PIGOTT: well, it's not blowing
7	it, but he got a he got a .36, which is dean's
8	list. I mean, I'm surprised he's he's
9	comatose.
10	MR. SPOLZINO: Well, that may be true,
11	Judge Pigott, but there's certainly nothing in the
12	record here that establishes that someone who has a
13	.369 blood alcohol content is incompetent.
14	JUDGE PIGOTT: But if that's true
15	MR. SPOLZINO: By on its own, by
16	itself.
17	JUDGE PIGOTT: Why why did the
18	hospital do what it did a month earlier? In other
19	words, you know, one of one of the things your
20	opponent raises is that when he came in a month
21	earlier, they did the one-on-one, they brought in a
22	shrink, they did a number of things based upon his
23	condition at that time.
24	His condition a month later is worse. So
25	even if they didn't look at his previous month, why

1 wouldn't he have gotten that same care and treatment 2 as her experts say she - - - he should have gotten, 3 and why isn't that a question of fact? 4 MR. SPOLZINO: Well, respectfully, Judge 5 Pigott, when he came in a month before, he ca - - the record noted that he had suicidal ideations. 6 7 That's what he was there for. There was no - - there was no such indication in the record here and 8 9 nothing he said gave the - - -10 JUDGE SMITH: Should - - - shouldn't they -11 - - shouldn't they have looked back at the previous 12 record? 13 MR. SPOLZINO: Dr. Chintapalli testified 14 that the patient was alert, had told him his history, 15 he was - - -16 JUDGE SMITH: Well, you - - - you say that 17 he - - - I - - - supp - - - let us suppose that a 18 jury could find that not looking back at the previous 19 record was a departure from the standard of care. 20 MR. SPOLZINO: I - - -21 JUDGE SMITH: Does that defeat summary 22 judgment? 23 MR. SPOLZINO: I don't think so, Judge 24 Smith, and I thin - - - I don't think so because the 25 - - - if there had been something in the prior record

1 that would have mattered, maybe, but there was nothing. He had been treat - - - he had come in with 2 3 a suicidal ideation, he had been seen by a 4 psychiatrist, and had been - - - satisfied the 5 psychiatrist. JUDGE SMITH: Would you - - -6 JUDGE ABDUS-SALAAM: Well, what about the 7 hospital requirement for - - -8 9 JUDGE GRAFFEO: What was the hospital 10 protocol and did they violate it? 11 MR. SPOLZINO: I'm sorry. 12 JUDGE GRAFFEO: What was the hospital 13 protocol and did they violate it? MR. SPOLZINO: I don't believe they - - -14 15 JUDGE GRAFFEO: I mean, they don't have a 16 protocol to look at previous treatment - - -17 MR. SPOLZINO: I don't believe they 18 violated any protocol - - -19 JUDGE GRAFFEO: - - - of the patient? 20 MR. SPOLZINO: - - - Judge Graffeo. 21 JUDGE ABDUS-SALAAM: Well, is the 22 requirement for one-on-one monitoring only that you 23 have s - - - the patient have suicidal ideation or is 2.4 there some other requirement for one-on-one 25 monitoring?

1	MR. SPOLZINO: That policy, Judge Abdus-
2	Salaam, comes from the policy for the care of
3	psychiatric patients. He was not in the hospital at
4	this point as a psychiatric patient and there's
5	nothing in the record that suggests there was a
6	psychiatric problem at the time.
7	JUDGE SMITH: But wouldn't wouldn't
8	the plaintiff's case be much stronger, if the facts
9	were exactly the same, except when he walked out, he
10	killed himself? He committed suicide?
11	MR. SPOLZINO: I would suggest no, Judge
12	Smith, only because, respectfully only because
13	the the physician can only be responsible for
14	the condition that he observes the patient in. If
15	there was something that someone could point to that
16	Dr. Chintapalli missed that would have indicated that
17	the plaintiff was suicidal, correct.
18	CHIEF JUDGE LIPPMAN: But did he not have a
19	duty to discharge him to a safe place? I mean, is
20	that you know, if they see the condition that
21	he's in, which is not terrific, to see that he got to
22	a to see that the friend comes or whatever it
23	is. Is that not an unreasonable duty that they would
24	have?
25	MR. SPOLZINO: He left voluntarily, Judge

1 Lippman, number one. 2 CHIEF JUDGE LIPPMAN: I know, but I'm 3 talking about - - -MR. SPOLZINO: They didn't discharge him. 4 5 CHIEF JUDGE LIPPMAN: - - - your duty, the duty of the hospital, the doctor, whatever. 6 7 MR. SPOLZINO: But they didn't discharge him. 8 9 JUDGE PIGOTT: But - - - but - - - I'm a 10 layman, but it seems to me .36, red eyes, injuries to 11 right eye, garbled speech, CAT scan showed a swollen 12 nose, head contusions and his nose had been 13 fractured, the clinical impression was detox. He was 14 admitted. It says that ER attempted a final de - - -15 tried to find a detox facility to accept him. It seems to me that there was a pretty intense focus on 16 17 his condition. And now all of a sudden it - - they're saying, well, he was fine; he left. 18 19 MR. SPOLZINO: No, I'm not saying he was 20 fine, Judge Pigott. But he was - - -21 JUDGE PIGOTT: But isn't that a question of 22 fact, I guess, is what - - -23 MR. SPOLZINO: He was - - - I would suggest 24 not. He may have been intoxicated. He certainly was 25 at 11:30. Focusing on his condition at 3:30, he

1 didn't exhibit any signs of being unable to take care of himself. He was alert; he was conscious. 2 He 3 spoke to people normally. He did all the things that 4 normal people do, who have a right to say, I'm out of 5 here; I'm leaving the hospital. 6 CHIEF JUDGE LIPPMAN: Okay, counsel. 7 MR. SPOLZINO: Thank you. CHIEF JUDGE LIPPMAN: Thanks. 8 9 Counsel? 10 MR. HASKINS: May it please the court, my 11 name is Robert Haskins. I'm counsel for St. Francis 12 Hospital. 13 CHIEF JUDGE LIPPMAN: Counsel, what's the 14 hospital's duty here? 15 MR. HASKINS: The hospital's duty is - - -I would say that the hospital's duty is to follow the 16 17 policy, which despite a statement by the appellant 18 here, the hospital did do. The specific policies 19 that the plaintiff has - - - or that the appellant 20 has discussed at various points, have gone through 21 various transmogrifications during the way they've 22 been - - -23 JUDGE PIGOTT: Well, your nurse - - - your 2.4 nurse had - - - when - - - when the plaintiff left, 25 your nurse said to Dr. Chintapalli, should we call

1	the police? And he said, no. Now
2	MR. HASKINS: Correct.
3	JUDGE PIGOTT: there must have been a
4	reason why the nurse thought that maybe the police
5	ought to be called, and there must have been a reason
6	why Dr. Chintapalli felt that, you know, the answer
7	is no, and we don't know those answers in isn't
8	that a question of fact?
9	MR. HASKINS: With with the regard to
10	the record, the play the patient was leaving
11	AMA.
12	JUDGE PIGOTT: Right.
13	MR. HASKINS: The question at that point
14	is, if a patient is leaving AMA, is there some reason
15	to bring them back? The determination as to whether
16	the patient should be brought back or not is
17	rightfully that of the emergency department
18	physician, who was discharging the patient, because
19	the patient, irrespective of how he appeared with
20	garbled speech and such in the morning, four hours
21	later
22	CHIEF JUDGE LIPPMAN: Yeah, but but
23	he but he wasn't it wasn't a good
24	practice, was it, to let him be discharged on his
25	own? That's why he was asked to call somebody,

1 right? 2 MR. HASKINS: He was - - - he was asked to 3 call someone, and quite - - -4 JUDGE GRAFFEO: They must have recognized 5 that he wasn't in great enough shape to leave alone without having someone with him - - -6 7 MR. HASKINS: And then he changed his mind. 8 JUDGE GRAFFEO: - - - or they wouldn't have 9 - - - they wouldn't have recommended that he call 10 someone - - -11 MR. HASKINS: Right. 12 JUDGE GRAFFEO: - - - to transport him. 13 MR. HASKINS: I think the case, actually, the Maldonado case down in the Second Department has 14 15 some analogy to here, where there's no obligation. 16 If an individual is in a safe place and has the means 17 and the ability to have someone come and take them 18 home, there's no obligation to detain and watch over 19 him. 20 JUDGE PIGOTT: And that's the question, 21 right? 22 MR. HASKINS: That is the question. 23 JUDGE PIGOTT: And by that I mean, it's not 2.4 - - - it's not the Mental Hygiene Law, which talks 25 about Mental Hygiene facilities, chemical dependence

program, treatment facilities, and services. It's -1 - - that's a whole different animal from what we're 2 3 talking about as your opponent argues - - -MR. HASKINS: Well - - -4 5 JUDGE PIGOTT: - - - where you - - - where 6 someone presents at a hospital with certain injuries 7 and the question then becomes what did the hospital do? 8 9 MR. HASKINS: What the - - - if one boils 10 down what the opponent is saying here, is that we 11 should have kept him. We should not have let him go. 12 JUDGE SMITH: Could - - - could you have if 13 you wanted? I mean, could you have kept him if you 14 wanted to? 15 MR. HASKINS: If he had shown an imminent risk of harm to himself or others - - -16 17 CHIEF JUDGE LIPPMAN: How do we know that -- - how do we know that, whether he's showing an 18 19 imminent risk of harm to himself or others? 20 MR. HASKINS: That - - - that is a matter 21 of clinical - - -22 CHIEF JUDGE LIPPMAN: Totally up to the 23 physician? 2.4 MR. HASKINS: That's a matter of clinical 25 judgment.

1	JUDGE PIGOTT: And Dr. Yates says that
2	- that he was incapacitated. Her her experts,
3	Dr. Yates, said that they "clinically failed to
4	properly evaluate his physical and mental condition,
5	failed to take the necessary and requisite action to
б	protect his safety, deviated from the expected
7	standard of care by failing to abide by hospital
8	policy, and given the plaintiff's known incapacitated
9	condition, failed to monitor him to protect him from
10	eloping from the ER, and when he didn't when he
11	did elope, failing to notify the police, so he could
12	be returned to the hospital."
13	MR. HASKINS: Interestingly
14	JUDGE PIGOTT: All of that sounds like it's
15	a question of fact.
16	MR. HASKINS: Interestingly, Dr. Yates,
17	however, makes no statement with regard to the
18	condition of the plaintiff at the time that he was
19	walking out the door. The only evidentiary expert
20	proof with regard to that was Dr. Muskin, who
21	actually opined as to what his condition was when he
22	left, after he had been evaluated as being capable of
23	walking, talking, being coherent. And the policy
24	with regard to whether someone should be discharged,
25	the standard at the hospital "discharged when patient

1 is able to walk unassisted down the hall, has a destination" - - - he had a home, and had - - -2 3 JUDGE PIGOTT: But Muskin - - - Muskin, if 4 I remember right, is an expert, right, he was not 5 there. 6 MR. HASKINS: Neither - - - neither was, uh 7 8 JUDGE PIGOTT: Yates. 9 MR. HASKINS: - - - neither were the other 10 experts. 11 JUDGE PIGOTT: Exactly. So aren't they the 12 same? In other words, you know, when we talk about 13 who knew what, it's not as if Muskin was standing at 14 the yard, saying, I watched him as he went out and he 15 was fine. 16 MR. HASKINS: Right. 17 JUDGE PIGOTT: He says, based upon the records as I understand them, and he - - - and he 18 19 even goes so far as to say, based upon his blood 20 alcohol content when he was killed, or when he was 21 injured, he must have drunk in between, which is - -22 - there's no evidence of that that we know of, right? MR. HASKINS: That we know of at this 23 24 point. There is - - - I have to say, though, that 25 the court - - - this court in the Romano case, Romano

1 v. Stanley, in citing Burnell v. La Fountain, made a very on-point observation. With regard to the fact 2 that individuals - - - the effects of alcohol 3 4 consumption may differ greatly from person to person, 5 and that the tolerance is subject to wide, individual variation. 6 7 JUDGE PIGOTT: Many of us know that. 8 CHIEF JUDGE LIPPMAN: Okay, counsel, 9 thanks. 10 MR. HASKINS: Thank you. CHIEF JUDGE LIPPMAN: Counselor? 11 MR. BRENNAN: Good afternoon, Tim Brennan 12 13 for Emergency Physician Services of New York. I'd like to, if I may, jump right in with the statute, 14 15 because I believe under the facts and circumstances we have here, it defines the duties specifically and 16 17 it defines exactly when a patient may be held. JUDGE PIGOTT: Do you rise and fall with 18 19 Dr. Chintapalli? 20 MR. BRENNAN: Yes. 21 JUDGE PIGOTT: He's your employee, right? 22 MR. BRENNAN: We absolutely rise and fall 23 with Chintapalli. 24 JUDGE PIGOTT: So is this the same 25 argument?

1	JUDGE GRAFFEO: Why does this
2	JUDGE PIGOTT: I'm sorry.
3	MR. BRENNAN: So jumping right to the
4	statute, when you look at the statute, we had some
5	discussion about what the experts' opinions were.
6	The statute actually says, when you can when
7	you can hold them, there has to be, not only
8	intoxication, but it's intoxication plus a likelihood
9	to result in harm
10	CHIEF JUDGE LIPPMAN: What's the statute
11	really have to do this? Why why isn't this a
12	general negligence case?
13	MR. BRENNAN: Because the statute actually
14	tells us when we can hold the person.
15	JUDGE PIGOTT: Are you talking about
16	Article 22?
17	JUDGE GRAFFEO: But he wasn't he
18	wasn't brought in, like he was a month earlier with
19	suicidal ideations, where
20	MR. BRENNAN: Exactly.
21	JUDGE GRAFFEO: you might say he was
22	covered by the Mental Hygiene Law. This is separate,
23	isn't it?
24	MR. BRENNAN: Exactly.
25	JUDGE GRAFFEO: What's the connection to

1 the statute - - -2 MR. BRENNAN: The connection to this - - -3 JUDGE GRAFFEO: - - - on this fact pattern. 4 MR. BRENNAN: The statute is actually 5 called, if I'm not mistaken, and I'm paraphrasing, circumstances where you can hold an intoxicated 6 7 person against their will in order to be treated. 8 JUDGE PIGOTT: Not in hospitals. We're 9 talking about clinical - - - "chemical dependence 10 programs, treatment facilities, and services." 11 They're not talking about someone who walks into a 12 hospital with a broken nose, and happens to be drunk. 13 MR. BRENNAN: Well, we are the first step. We are where they would come to get that transfer 14 15 out. We fit that definition of a treatment facility 16 17 JUDGE PIGOTT: But that's - - - I mean, 18 what you're trying to say, though, is that this 19 hospital, if - - - if any patient comes in and is 20 drunk, there's a whole - - - you - - - you put away 21 your standards, and you go to the MHL, and you say, 22 leave, be good, because we can't hold you and we're 23 not responsible for anything that then happens. 24 MR. BRENNAN: I wouldn't say that we can't 25 hold him. I say we - - - I say I agree with you that

1 we go to the Mental Hygiene Law - - -2 JUDGE PIGOTT: No, you don't, is my point. 3 You don't. MR. BRENNAN: To 2209. 4 5 JUDGE PIGOTT: No. MR. BRENNAN: I - - - I believe that we fit 6 that definition of the treatment facility. That we 7 8 are the first step. That we are the treatment 9 facility. 10 JUDGE GRAFFEO: You didn't have a detox 11 arm, right? You're operating certificate - - -12 MR. BRENNAN: No, we were - - -13 JUDGE GRAFFEO: - - - didn't approve a 14 detox facility, did it? 15 MR. BRENNAN: We were going to transfer to Turning Point under the circumstances. 16 17 JUDGE PIGOTT: Yeah, you recommended this -18 – – and – – – 19 MR. BRENNAN: And arranged it. 20 JUDGE PIGOTT: - - - and if he'd gone there 21 - - - if he'd gone there, then 22 would kick in, 22 wouldn't you agree? MR. BRENNAN: I - - - I believe it kicked 23 24 in right away because we had arranged that transfer. 25 We were holding him while he was awaiting transport.

1 CHIEF JUDGE LIPPMAN: So it makes no 2 difference whatsoever that this guy walks in on his 3 own? 4 MR. BRENNAN: It - - - I mean, it makes all 5 the difference - - -6 CHIEF JUDGE LIPPMAN: The statute 7 immediately kicks in? MR. BRENNAN: I think it makes all the 8 9 difference in the world. The statute immediately 10 kicks in and it has two arms. One arm: voluntary -11 CHIEF JUDGE LIPPMAN: It makes all the 12 13 difference in the world that he walks in voluntarily 14 or not? 15 MR. BRENNAN: Under the - - - under the 16 statute, I - - - the statute applies immediately, and 17 then it has two arms: one if you walk in voluntarily, one if you are brought here 18 19 involuntarily. 20 JUDGE PIGOTT: One of the things that we haven't discussed a lot about is - - - as Ms. Galvao 21 22 points out, is no one called the police. Now, is it 23 your - - - is it your argument that under the MHL you 24 had no obligation to call the police either? 25 MR. BRENNAN: I don't believe we did have

1 an obligation to call the police. It's just - - -2 it's - - -3 JUDGE SMITH: Does the MHL govern that, or is that a question of general common law duty? 4 5 MR. BRENNAN: Well, I think - - - I think 6 if you look at - - - at the Mental Hygiene Law, you 7 can get the answer to that question. The Mental 8 Hygiene Law does not require it, but what it requires 9 is - - - is if you're brought in involun - - -10 JUDGE SMITH: But you're - - - you're not 11 saying that no hospital has any - - - ever has a duty 12 to do anything the Mental Hygiene Law doesn't 13 require? 14 MR. BRENNAN: No, I - - - I think that they 15 could have, but I think that the answer is right in 16 the Mental Hygiene Law, and if you'd - - - you'd give 17 me one - - -18 JUDGE PIGOTT: You're saying the Mental 19 Hygiene Law immunizes the hospital from any liability 20 if the person is half nuts? 21 MR. BRENNAN: No, I think the Mental 22 Hygiene Law gives the hospital a playbook to follow 23 under these circumstances given the competing 24 societal interests. 25 That's - - - that's what? JUDGE READ: Ιt

sets a floor? It sets a floor of cases - - -1 2 MR. BRENNAN: It sets a floor - - - well, I 3 think it sets the floor, and not only in this 4 situation. When you have these competing societal 5 interests, on the one hand, you have the desire to 6 protect society against somebody who's intoxicated, 7 and on the other, you have this individual freedoms, 8 something our country and our state hold - - - hold 9 dear. And you have these competing principals - - -10 CHIEF JUDGE LIPPMAN: Individual freedoms 11 to go out and kill himself? MR. BRENNAN: No, his individual freedom is 12 13 to go out and - - - and he can drink alcohol and he can decide when and if he wants - - -14 15 CHIEF JUDGE LIPPMAN: But under the 16 circumstances, was that a dereliction of your duty, 17 to let him go out and effectively, you know - - - as good as committed suicide? 18 19 MR. BRENNAN: I think under the statute, 20 you have - - -21 CHIEF JUDGE LIPPMAN: He was a danger to 22 himself was the conclusion that, you know, the doctor 23 could have drawn, but in this case, you think that 24 good practice was consistent with just letting him 25 leave alone, not even - - -

1	MR. BRENNAN: I don't think
2	CHIEF JUDGE LIPPMAN: getting him to
3	a safe place?
4	MR. BRENNAN: I don't think under the
5	statutory definition that Dr. Chintapalli could have
6	concluded, as a matter of law, that this patient
7	could have been
8	CHIEF JUDGE LIPPMAN: Couldn't have said -
9	could he have at least said, you better call the
10	police; this guy's going to hurt himself?
11	MR. BRENNAN: Well, he could have said to
12	call the police, but then the police have to decide
13	whether they can bring bring this person in,
14	and this is a person who had been under observation,
15	and the most significant thing that has been pointed
16	out by counsel that demonstrated a danger, is that he
17	pulled out an IV, something that was treatable with a
18	cotton swab.
19	CHIEF JUDGE LIPPMAN: Counsel, was there no
20	I guess, what what I'm driving at, is
21	there no factual issue about what went on here?
22	MR. BRENNAN: I don't believe there is.
23	CHIEF JUDGE LIPPMAN: In letting this guy
24	just elope and not doing anything about it?
25	MR. BRENNAN: When when you look at

1	the terms of the Mental Hygiene Law and and
2	specifically in 2209
3	CHIEF JUDGE LIPPMAN: You think that's
4	dispositive, the Mental Hygiene
5	MR. BRENNAN: I think it's I think
6	it's dispositive because he does not, as a matter of
7	law
8	JUDGE PIGOTT: If if it's not in
9	there if the Mental Hygiene Law is gone, what
10	does the case look like to you?
11	MR. BRENNAN: If the Mental Hygiene Law is
12	gone, I still think you have to look to those
13	concepts, even under the common law, when can you
14	compel
15	JUDGE PIGOTT: No, take it away. Take away
16	take I want to I want to get you
17	out of the MHL. Now, you got somebody who presents
18	to the hospital with a very high alcohol content and
19	a broken nose, and you're treating him. And he rips
20	out his IV, and he walks out, and did is there
21	any duty on the part of the hospital, separate and
22	apart from the MHL, with respect to a patient who
23	elopes in that fashion, in your view?
24	MR. BRENNAN: Well, I think that there
25	wouldn't be a duty under the circumstances, because I

1 don't think we had any right to retain him - - -2 JUDGE SMITH: Well, yeah, maybe - - - I 3 guess your usage of the right proceeds the duty. I 4 mean, you - - - you - - - there's a limit, obviously, 5 on whether you can physically restrain someone who wants to walk out of the hospital. 6 7 MR. BRENNAN: Absolutely. 8 JUDGE SMITH: Whether - - - whether - - -9 where the MHL has been enacted or not, you can't just 10 grab anybody you think is better off in the hospital. 11 MR. BRENNAN: Um-hum. And this particular 12 patient was, according to the record, told, you 13 should call somebody. In fact, we know that he did. 14 He was exercising some rational judgment. He 15 actually called Jason Herring, his friend. 16 JUDGE SMITH: And he told - - - and he told 17 the nurses, I remember, I'm waiting for my - - -18 waiting for my friend to pick me up. MR. BRENNAN: And Mr. Herring, the friend, 19 20 actually confirmed that that call occurred and that 21 was done, so it's not that this is a completely 22 irrational patient. This is somebody who actually 23 was advised, and understood, and did those things. 24 CHIEF JUDGE LIPPMAN: Okay, counselor. 25 MR. BRENNAN: Thank you.

CHIEF JUDGE LIPPMAN: Thank you, appreciate 1 2 it. 3 Counselor, rebuttal? MS. GALVAO: Yes, Your Honor. Just to 4 5 address a couple of key points. Much has been made about his condition at 3:45, which obviously is 6 7 relevant, but contrary to respondent's position, there is certainly record evidence as to his 8 9 condition at that time and it having been dangerously 10 intoxicated still. 11 As I mentioned earlier, even by their own affidavits - - - experts' affidavit - - - his blood 12 13 alcohol content would still have been in the 14 neighborhood of .300. 15 JUDGE SMITH: Do you not - - - would there 16 not have been, if you - - - if they had restrained 17 him at this point, would there not have been a rather 18 promising false imprisonment suit that you might be -19 - - you'd be standing here arguing that instead of 20 this one? 21 MS. GALVAO: No. Under the circumstances, 22 the record would bear out that it would have been 23 reasonable, at that time and for his own safety and 24 the safety of others, to have undertaken the 25 protocols. It wasn't - - -

1	JUDGE SMITH: So any any time a guy
2	is drunk, it's reasonable if you th if
3	it's reasonable to think he shouldn't be out in the
4	street, you can tie him up and keep him there, if
5	you're a hospital?
6	MS. GALVAO: No, I think that's overstating
7	the position. The what's reasonable under the
8	circumstances is inherently a factual question, but
9	under these circumstances
10	JUDGE SMITH: Yeah, that's what I'm
11	suggesting.
12	MS. GALVAO: where you have a man
13	whose blood alcohol content is in excess of .3, who's
14	ingested six to eight Librium, with the affidavit
15	testimony expert testimony we have as to
16	the interaction of those two, with the admissions of
17	the witnesses for the defendants in testimony
18	deposition testimony as to the effect that
19	would have on someone's judgment and on perception
20	and on on mobility and risk taking when you
21	have reason for alarm
22	JUDGE SMITH: Well, you say you
23	well, you it sounds to me like you're saying
24	you can get a jury to find that it was reasonable to
25	restrain him, and you can get a good jury to find

1 that it wasn't. So the hospital's going to lose 2 either way. They lose this case; they lose the false 3 imprisonment case. 4 MS. GALVAO: No, because the State of New 5 York has long recognized that there is - - - there is 6 a common law protection, sort of, exemption where 7 someone is, for their own safety held temporarily, and only for so long as necessary to ensure their 8 9 safety - - -10 JUDGE SMITH: And whether - - - whether it 11 was re - - - and whether this is the case would be a 12 jury question. 13 MS. GALVAO: Exactly, but - - -JUDGE PIGOTT: If the - - - if the question 14 15 was - - - went to the jury - - - if, in fact, as is 16 the evidence that he called the friend and - - - and 17 the hospital had every reason to expect that that 18 friend was going to come to pick him up, do you lose? 19 MS. GALVAO: No, well, the record doesn't 20 really support that type of conclusion, because, for 21 instance, Sue Soto, the nurse who testified - - -22 excuse me, who was deposed, but did not put in an 23 affidavit on the motions - - - her - - - the information as to what she - - - her encounter with 24 25 the plaintiff was put in, in a late entry note

following the accident.

Two nurses came in after the fact and 2 3 recorded this late entry note, which, you know, in -4 - - which actually Nurse Soto acknowledged in 5 deposition was not for purposes of treatment or care of Mr. Kowalski, it was - - - it was the classic case 6 7 of you better cover this; you know, we have a problem 8 here. 9 Nurse Vacca, actually, in deposition 10 testimony, admitted that she put in this late entry 11 note at the suggestion of her supervisor. And when 12 asked why, she said, it should be obvious, because I 13 was worried for the patient; I was worried for the hospital. This - - - there's - - - there's - - -14 15 JUDGE SMITH: Well, you - - - you have the 16 right to - - - to tie up every patient you're worried 17 about? 18 MS. GALVAO: No, you - - - what you have a 19 duty to do is to exercise reasonable judgment to 20 protect, safeguard a patient from that sort of - - -21 JUDGE SMITH: So every time you're worried 22 about a patient you exercise reasonable judgment. Ιf 23 your reasonable judgment tells you he's better off 24 tied to the bed, you tie him to the bed. 25 MS. GALVAO: If - - - only for so long as

1	he's he's attempting to
2	JUDGE SMITH: For as long for as long
3	as your reasonable judgment tells you he better
4	stayed tied to the bed.
5	MS. GALVAO: Right, well, just as in
6	any medical malpractice case, there's always going to
7	be a question of fact arguably what you're
8	going to have competing experts perhaps, and
9	and if if there had, in fact, there had been a
10	reasoned judgment here made consistent with this situ
11	
12	JUDGE SMITH: I mean, aren't you
13	aren't you giving aren't giving hospitals a
14	frightening amount of power over human beings? Every
15	time they reasonably think you they they
16	need to make you a prisoner, they can do it?
17	MS. GALVAO: No, I don't think I'm giving
18	hospitals any more of the burden then they have every
19	day when they operate, and they have to use the best
20	judgment in practice
21	JUDGE SMITH: I didn't say "burden". I
22	said "power".
23	JUDGE GRAFFEO: If his friend had picked
24	him up and brought him to the detox center, and he
25	walked in and said, I don't want to be here; I refuse

1 to be detoxed. They couldn't keep him, could they? MS. GALVAO: They - - - well, under 2- - -2 3 4 JUDGE GRAFFEO: And say he walks out of 5 there - - -MS. GALVAO: If he - - -6 7 JUDGE GRAFFEO: - - - and has the same accident that he has here. 8 9 MS. GALVAO: No, I disagree that - - - that 10 they would have no ability - - -11 JUDGE GRAFFEO: They have - - -12 MS. GALVAO: They have - - - under - - -13 JUDGE GRAFFEO: - - - they have the same 14 standard of care, as well? 15 MS. GALVAO: Under 2209, which - - - which 16 they've relied upon and somewhat - - -17 JUDGE GRAFFEO: I thought you said the 18 statute doesn't apply here. 19 MS. GALVAO: The statute doesn't apply to 20 the circumstances, because they have the duty of - -21 - the hospital has a duty of care to assess and treat him consistent with his - - - and safeguard and 22 23 protect him consistent with his capacity at the time. 24 2209 does not prevent or otherwise abrogate this 25 common law duty.

1	I yeah, I think it's also People v.
2	Warner, which we cited I believe was also cited
3	by respondents at in one fashion or
4	another specifically held this court has
5	held that in enacting the Mental Hygiene Law,
6	the court wasn't wasn't abrogating, wasn't
7	superseding or supplanting the common law. It
8	it has its place, and when it applies, then you look
9	to the statute. But even in that circumstance
10	JUDGE GRAFFEO: But what's the answer to my
11	question? Can the detox center keep him?
12	MS. GALVAO: The detox center
13	JUDGE GRAFFEO: He can walk out of the
14	detox center, can't he?
15	MS. GALVAO: 2209 has a slight ambiguity in
16	the sense that it has one provision that says, if you
17	come voluntarily, but even there, it says, you shall
18	treat you shall treat and provide care, and
19	could be discharged to a home, or a or, you
20	know, to admit, if they come in voluntarily.
21	And then it has a second provision that
22	says, if they come in over their objection, then you
23	do the same assessment. You see where they're at,
24	and then, if only if they've determined to be
25	incapacitated such that they present a danger
1	

1	CHIEF JUDGE LIPPMAN: Okay, counselor.
2	Thanks, counselor. Thank you all, appreciate it.
3	(Court is adjourned)
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2	CERTIFICATION
3	
4	I, Karen Schiffmiller, certify that the
5	foregoing transcript of proceedings in the Court of
6	Appeals of Kowalski v St. Francis Hospital and Health
7	Centers, No. 128 was prepared using the required
8	transcription equipment and is a true and accurate
9	record of the proceedings.
10	
11	Con 1111. 11.
12	Hour tchffmille
13	Signature:
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