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UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

-----X  
ADRIAN SCHOOLCRAFT,  
Plaintiff,

Case No:  
- against - 10 CV 06005

THE CITY OF NEW YORK, ET AL.,  
Defendants.

-----X  
100 Church Street  
New York, New York

January 30, 2014  
10:22 a.m.

DEPOSITION OF CATHERINE LAMSTEIN-REISS, M.D.,  
pursuant to Subpoena, taken at the above  
place, date and time, before DENISE ZIVKU, a  
Notary Public within and for the State of  
New York.

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A P P E A R A N C E S :

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(Continued.)

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Also Present: Magdalena Bauza

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S T I P U L A T I O N S :

IT IS HEREBY STIPULATED AND AGREED by and between the attorneys for the respective parties hereto, that this examination may be sworn to before any Notary Public.

IT IS FURTHER STIPULATED AND AGREED that the filing and certification of the said examination shall be waived.

IT IS FURTHER STIPULATED AND AGREED that all objections to questions, except as to the form of the question, shall be reserved for the time of trial.

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CATHERINE LAMSTEIN-REISS, M.D., a  
Nonparty witness herein, having been  
first duly sworn by a Notary Public  
within and for the State of New York, was  
examined and testified as follows:

EXAMINATION BY  
MR. SMITH:

Q. Will you state your name and  
address for the record, please.

A. Catherine Lamstein-Reiss, M.D.,  
NYPD Psych Evaluation Section, 59-17  
Junction Boulevard, Corona, New York 11368.

MR. SMITH: We are going on the  
record, it's 10:22. We are at Law  
Department at 100 Church Street about  
to begin the deposition of Dr.  
Lamstein.

THE WITNESS: Correct.

MR. SMITH: Before we begin with  
the witness, Suzanna, as we have done  
in the past with other witness who are  
in the employ of the City of New York,

1 C. LAMSTEIN-REISS, M.D.

2 Q. Isn't that what you do?

3 A. That's one type of referral that  
4 we might get.

5 Q. Is that the type of referral  
6 that you got in the Schoolcraft matter?

7 MS. PUBLICKER METTHAM:

8 Objection.

9 A. No.

10 Q. What type of referral did you  
11 get in the Schoolcraft matter?

12 A. That was a telephone referral  
13 from -- I'm sorry, not -- may have been  
14 telephone, but either way that was a  
15 referral from his district surgeon. That  
16 wasn't like a commanding officer, or duty  
17 captain thinking there might be a  
18 psychological problem removing the gun  
19 pending our evaluation. This was the  
20 district surgeon became aware of  
21 psychological issues with the officer and  
22 referred to us for an evaluation.

23 Q. How do you know that the  
24 district surgeon didn't become aware of  
25 psychological issues as a result of

1 C. LAMSTEIN-REISS, M.D.  
2 discussion with a commanding officer in  
3 Schoolcraft's case?

4 MS. PUBLICKER METTHAM:

5 Objection.

6 A. All I know is that -- all I know  
7 is the information that the officer provided  
8 to the district surgeon.

9 Q. What I want know is what  
10 knowledge do you have about the sources of  
11 information that the district surgeon had  
12 available to him when he made the referral  
13 to you?

14 MS. PUBLICKER METTHAM:

15 Objection.

16 A. All I know is the information  
17 that the officer provided to him was  
18 sufficient for the referral. I didn't ask  
19 him did you speak to anybody else about  
20 anything else. If there's anything else  
21 that's relevant, if information comes from a  
22 command, the district surgeon simply would  
23 tell us that. That's the reason for the  
24 referral.

25 Q. Did the district surgeon tell

1 C. LAMSTEIN-REISS, M.D.  
2 you sources of his information that formed  
3 the basis for his referral?

4 MS. PUBLICKER METTHAM:

5 Objection.

6 A. I don't recall. The assumption  
7 is it came from the officer.

8 Q. Doctor, I'm not here to try and  
9 make assumptions. Okay. You're here,  
10 you're under oath and if you have a  
11 recollection of something, please provide  
12 it, but I don't want you guessing, I don't  
13 want you making assumptions; is that  
14 understood?

15 A. That's understood.

16 Q. All right. So I am going to ask  
17 the question again just so it's clear. Did  
18 the district surgeon, in this case Ciuffo,  
19 tell you what the sources of information he  
20 had which formed the basis for his referral  
21 to you?

22 MS. PUBLICKER METTHAM:

23 Objection.

24 A. I don't recall with certainty.

25 Q. What do you recall about him



1 C. LAMSTEIN-REISS, M.D.

2 telling you the source of his information?

3 A. I don't recall that with  
4 certainty.

5 Q. What do you mean by with  
6 certainty? Do you have any recollection of  
7 the conversation with Ciuffo?

8 MS. PUBLICKER METHAM:

9 Objection.

10 A. I recall getting his --  
11 actually, I would need to refer to the file  
12 to see if I have a telephone referral.

13 Q. So the answer to my question is  
14 sitting here today, you do not have a  
15 recollection of the actual conversation that  
16 you had with Ciuffo about Schoolcraft; is  
17 that correct?

18 MS. PUBLICKER METHAM:

19 Objection.

20 A. I recall deciding doing  
21 administrative matters with the gun removal  
22 -- not the gun removal, the administrative  
23 matters with his duty status. I know he  
24 provided information to us that the officer  
25 had anxiety secondary to stress on the job.

1 C. LAMSTEIN-REISS, M.D.

2 I don't recall with certainty if he said  
3 specifically -- if he specifically said  
4 where he got that information. I don't have  
5 a recollection of that.

6 Q. I'm going to try to be more  
7 clear. If I'm asking you what your  
8 recollection is about something, I'm not  
9 asking you to draw inferences from other  
10 information that you have secondary sources  
11 about what that conversation was. What I am  
12 asking you is sitting here today, do you  
13 have a recollection of a conversation that  
14 you had with Ciuffo about Schoolcraft?

15 MS. PUBLICKER METTHAM:

16 Objection. Asked and answered multiple  
17 times. You may answer again.

18 A. I recall -- the only thing I  
19 recall is the administrative matters. I  
20 don't recall -- I don't directly recall our  
21 conversation administrative referral. That  
22 was a number of years ago. I recall what  
23 the information was. I don't recall him  
24 specifically saying where he got that  
25 information. I would need to refer to the

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C. LAMSTEIN-REISS, M.D.

initial referral, which is in the records.

Q. Your file?

A. Correct.

Q. All right, would you mind taking a look at your file and seeing if looking at that file refreshes your recollection about the subject that I am asking you about, which is, whether or not Ciuffo told you the sources of his information which formed the basis for his referral from the medical division to PES?

MS. PUBLICKER METHAM: I would prefer that you mark the actual production as an exhibit so that we can refer to the Bates Numbers.

MR. SMITH: Yeah, if she could just take a look at her -- I have a full copy of the whole thing.

Q. I just want you to take a look at your originals, see if that refreshes your recollection, that would be helpful.

MS. PUBLICKER METHAM: If it's -- review that, see if you could find that. If it's one of the pages that I

1 C. LAMSTEIN-REISS, M.D.

2 removed, you can review those.

3 THE WITNESS: It shouldn't be.

4 MR. SMITH: While you're doing  
5 that, I am going to mark as Exhibit 68,  
6 the next exhibit, which has been Bates  
7 Stamped NYC 2893 through 3032.

8 (Plaintiff's Exhibit 68,  
9 document, was marked for identification  
10 as of this date.)

11 A. I don't -- I didn't document  
12 that so all I had -- I can tell you what my  
13 assumptions were about it, why I had that  
14 assumption, but I don't have that Dr. Ciuffo  
15 specifically where he -- specifically said  
16 where he got that information.

17 Q. What are you looking at?

18 A. I was looking at my -- the note  
19 of my telephone call with him.

20 Q. What's the date?

21 A. April 14, 2009.

22 Q. This is a handwritten note by  
23 you?

24 A. Correct.

25 Q. Dated April 14th?

1 C. LAMSTEIN-REISS, M.D.

2 A. Correct.

3 Q. Can you -- can I take a look at  
4 that, please?

5 MS. PUBLICKER METTHAM: I  
6 believe the page she's looking at is  
7 NYC -- now the Bates Numbers are cut  
8 off on the bottom of this printout you  
9 provided, but it appears to be 2997, is  
10 what she was referring to.

11 MR. SMITH: Thank you.

12 A. About two-thirds down, T/C with  
13 Dr. Ciuffo.

14 Q. Can you read that entry into the  
15 record, please.

16 A. April 14, 2009 telephone contact  
17 with Dr. Ciuffo. Doctor taking MOS off  
18 medical sick and restoring medically to full  
19 duty.

20 Q. And then that's your signature?

21 A. That's my signature, yes.

22 Q. There's some -- can I just see  
23 the original of that, please?

24 A. Then I also reviewed the written  
25 referral he sent to us.

1 C. LAMSTEIN-REISS, M.D.

2 Q. Where is that written referral?

3 A. The top of says: Consultation  
4 referral medical division. Consultant's  
5 report underneath. Looks like this. Should  
6 be one of the oldest things in the file.

7 MR. SMITH: It's Bates Number on  
8 our copy is 2914.

9 Q. Could I see the original to  
10 that, please?

11 A. Sure.

12 Q. This page with the consultation  
13 referral medical division form, that has a  
14 reference to conversations you had with  
15 Ciuffo?

16 A. No, it's a written information  
17 he provided to PES.

18 Q. What is the information that he  
19 provided to PES?

20 A. We were asked to do an  
21 evaluation, because the officer had acute  
22 anxiety secondary distress on the job,  
23 please evaluate.

24 Q. All right, so what you were just  
25 reading that's not your handwriting, that's

1 C. LAMSTEIN-REISS, M.D.

2 Ciuffo's handwriting?

3 A. Dr. Ciuffo, yes.

4 Q. Dr. Ciuffo. What does that mean  
5 acute anxiety second degree stress on the  
6 job?

7 A. Acute anxiety is -- means it's  
8 not a chronic -- yeah, it's not a chronic  
9 long term lifelong anxiety. That he is  
10 going through a period of increased anxiety  
11 due to stress on the job.

12 Q. Was this a diagnosis by Ciuffo  
13 of the Schoolcraft's mental condition?

14 MS. PUBLICKER METHAM:

15 Objection.

16 A. That was Dr. Ciuffo's assessment  
17 as it appears in his writings.

18 MR. SMITH: 2914. You can't  
19 read it in the copy.

20 MS. PUBLICKER METHAM: I  
21 believe it's easier to read in the  
22 first copy that was produced in 2010 or  
23 2011.

24 MR. SMITH: Right.

25 Q. Now that you've looked at those

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C. LAMSTEIN-REISS, M.D.

two entries in your file, does that refresh your recollection at all on the issue of you being told the sources of -- how do you pronounce his name?

A. Ciuffo.

Q. Ciuffo's information about Schoolcraft?

A. Again, I do not recall his specifically stating where he got that information. He may or may not have. I didn't document it. I just had my assumptions.

Q. Right. And the exercise of trying to refresh a witness' recollection is once they said I'm not sure, I don't really remember, if you show them something sometimes they go ah, now I remember and so I'm asking you, after looking at these entries, do you have any recollection that has been recently refreshed by looking at those entries?

A. I do not.

Q. How many times did you speak with Dr. Ciuffo about Schoolcraft?



1 C. LAMSTEIN-REISS, M.D.

2 A. Once.

3 Q. And that was on the 14th of  
4 April, right, according to your notes?

5 A. If that's the date on that note  
6 that I just referred to then, yes.

7 Q. It is.

8 A. Okay, then, yes.

9 Q. Do you have any recollection of  
10 the substance of that conversation, other  
11 than what you've already told me?

12 A. I don't recall.

13 Q. After you stopped seeing  
14 Schoolcraft, did you ever have any  
15 conversation with Ciuffo about Schoolcraft?

16 A. No.

17 Q. Am I correct that the only time  
18 you can recall having any conversation with  
19 Ciuffo about Schoolcraft was that one  
20 occasion?

21 A. Correct.

22 Q. Why don't you take a look at  
23 Exhibit 68, which is a photocopy of your  
24 file, at least I believe it is a photocopy  
25 of your file.

1                   C. LAMSTEIN-REISS, M.D.  
2 necessarily fitness for duty issues. That  
3 for his own sake would be good to discuss  
4 with a therapist should he want too.

5                   I also recommended he see a  
6 psychiatrist for an evaluation 'cause two  
7 different doctors had prescribed psychiatric  
8 medication to him. One he finished taking  
9 and one he hadn't started and it wasn't  
10 clear to me why one of those was prescribed  
11 and, I just, as a matter of course always  
12 think it's better if someone sees a  
13 psychiatrist for psychiatric medication  
14 instead of their primary doctor.

15                Q.       Did you tell Schoolcraft that he  
16 didn't need medication?

17                   MS. PUBLICKER METTHAM:

18                Objection.

19                A.       I told him that after he told me  
20 -- not at the first appointment. I told him  
21 that at the second and third appointment  
22 when he told me he no longer had no  
23 symptoms.

24                Q.       So you did tell him that he  
25 didn't medication, right?

1                   C. LAMSTEIN-REISS, M.D.  
2           to know that should stressful -- when  
3           stressful things happen with his life again  
4           that these symptoms would not reoccur. We  
5           need a significant period of time to know  
6           that things really are calm and it's  
7           possible. It's not something that I had  
8           discussed with supervisors at that point,  
9           but it's possible that we might have been  
10          able to return him to full duty without  
11          being able to speak to the doctor who  
12          prescribed the Seroquel. Some doctor  
13          thought he needed an antipsychotic and it  
14          would not be prudent of us to give someone  
15          back their gun in position of police  
16          authority without knowing why that was.

17                Q.       Well, did you ever find out why  
18                some physician prescribed Seroquel?

19                A.       The officer refused to allow me  
20                to obtain that information.

21                Q.       Who was it that prescribed  
22                Seroquel?

23                A.       Dr. Sure.

24                Q.       How do you know that Dr. Sure  
25                prescribed Seroquel?

1 C. LAMSTEIN-REISS, M.D.

2 Q. Okay. So --

3 A. -- as well as my treatment  
4 recommendations.

5 Q. He came back into your office  
6 after your conversation with Knour and you  
7 told him that his guns were being removed?

8 A. It was a temporary removal  
9 pending a more complete discussion and  
10 supervision the following day with my direct  
11 supervisor, yes. At this point, it was  
12 after hours. It was after normal business  
13 hours. So I was the only one there.

14 Q. What time was this?

15 A. Don't know.

16 Q. Why were you seeing him after  
17 hours?

18 MS. PUBLICKER METHAM:

19 Objection.

20 A. Because we always have coverage  
21 24/7. The way it works is every day there  
22 is someone who is -- who we call the 10 to 6  
23 person, who works 10 to 6 and if the case  
24 comes in too late in the afternoon to be  
25 seen by someone working a regular tour, but

1                   C. LAMSTEIN-REISS, M.D.  
2   report that gets sent out. We have our case  
3   records and we have like a fill in the blank  
4   form that just says that the gun should be  
5   removed. Not any kind of evaluation, just  
6   that the guns were removed and that we're  
7   requesting a new ID card and so on.

8           Q.       Okay. Going back to the  
9   typewritten timeline that you've created.  
10   The entry -- there's an entry 10/31/09. You  
11   were the psychologist on pager duty. You  
12   see that?

13          A.       I do.

14          Q.       And you got a call from Captain  
15   Lauterborn?

16          A.       Yes.

17          Q.       Do you remember getting that  
18   call from Captain Lauterborn?

19          A.       More specifically, Captain  
20   Lauterborn called the sick desk supervisor,  
21   who then called the psychologist on pager  
22   duty requesting I respond and in response to  
23   that request I called Captain Lauterborn  
24   back. So he didn't call me directly.

25          Q.       Did Captain Lauterborn know that

1 C. LAMSTEIN-REISS, M.D.

2 you were the psychologist that had seen  
3 Schoolcraft when he called?

4 MS. PUBLICKER METTHAM:

5 Objection.

6 A. I don't believe he did. What  
7 happens is they call the sick desk  
8 supervisor, who looks up and sees who is on  
9 duty and they call whoever is on duty.

10 Q. So on October 31, 2009, you  
11 happened to be on pager duty?

12 A. Correct.

13 Q. So Captain Lauterborn called the  
14 sick desk and he was looking for somebody  
15 from the psychological evaluation services?

16 MS. PUBLICKER METTHAM:

17 Objection.

18 A. Psychological evaluation  
19 section. Although, the psychological  
20 services section, which does pre-employment  
21 screening, they also do pager duty. He was  
22 looking for a department psychologist to  
23 give him a call to consult about the  
24 situation.

25 Q. Did you tell Captain Lauterborn

1 C. LAMSTEIN-REISS, M.D.  
2 you had evaluated and met with Schoolcraft?

3 A. Yes.

4 Q. And told him that during the  
5 conversation that you had with him on  
6 October 31st?

7 A. Yes.

8 Q. What else did you tell Captain  
9 Lauterborn?

10 A. He was asking me if there was  
11 any reason to be concerned about the fact  
12 that he went AWOL and that he seemed to be  
13 upset and said he had stomach pains and  
14 should they be concerned, do they need to go  
15 look for him, make sure he's okay.  
16 Typically, in that situation they do. He  
17 said he wasn't sure they wanted to suspend  
18 him, because they thought this was more of a  
19 psychological problem as opposed to a  
20 disciplinary one and so he wanted to consult  
21 with me.

22 I told him that as of the last  
23 time I saw him, which was a few days  
24 earlier, I had no reason to think he was a  
25 danger to himself or others. Never

1 C. LAMSTEIN-REISS, M.D.

2 expressed thoughts of suicide. It didn't  
3 seem to be anything that serious that would  
4 lead me to be concerned. However, he had  
5 also never acted like that before. He never  
6 went AWOL, leaving even though he was told  
7 to stay and was now saying he had stomach  
8 pains, while being visibly upset. So I did  
9 not know if that meant something new  
10 happened that led him to be so upset that he  
11 was acting in a different manner going AWOL  
12 and that kind of stuff and led to a  
13 reoccurrence of stomach pains badly enough  
14 that he did that or maybe the stomach pains  
15 never went away to begin with and I wasn't  
16 sure and that my evaluation is -- even  
17 though, I was not saying this person is  
18 suicidal, he's had these thoughts, you must  
19 -- it was nothing like that. I had no  
20 reason to think he was, except my evaluation  
21 was only as good as the last time I saw  
22 them.

23 So if something happened since  
24 then or they're acting different since then,  
25 that may be different. And so I thought he



1 C. LAMSTEIN-REISS, M.D.  
2 absolutely did need to find him and make  
3 sure that he was okay.

4 Q. Was your sharing of information  
5 about Schoolcraft with Lauterborn a  
6 violation of Schoolcraft's privacy?

7 MS. PUBLICKER METTHAM:  
8 Objection.

9 A. No. This is -- they're not  
10 treatment records. Whenever they come to  
11 our office before they -- before I allow  
12 them to open their mouth on all, I make sure  
13 that they know that the interview is on the  
14 record only within the department and only  
15 on a need to know basis, so within that it  
16 is on the record.

17 So in this case, someone is AWOL  
18 and they're upset and they leave and they  
19 say their stomach hurts and they're acting  
20 in that manner, I deemed there was a need to  
21 know, for him to know some basic information  
22 about why he was on restricted duty. Not  
23 information like, you know, whether or not  
24 his father used -- had any kind of drug  
25 problem, whether or not he's had sex in the

1 C. LAMSTEIN-REISS, M.D.  
2 believe you're 2899 and 282, Mr. Smith?

3 MR. SMITH: I'm actually  
4 referring to 2901, with the ledger and  
5 pager.

6 MS. PUBLICKER METTHAM: It is  
7 D282, it is but 2901.

8 Q. So is there a rather long entry  
9 for 10/31 in your file, Doctor?

10 A. I don't know what you consider  
11 rather long, but it's --

12 Q. Four pages?

13 A. One, two, three, four and a  
14 third, yes.

15 Q. All right, can you just read  
16 that into the record.

17 A. Sure. Pager duties regarding  
18 P.O. Adrian Schoolcraft, 10/31/09, on left  
19 of the page I noted that I was on at 17:40  
20 hours. Page number 455 refers to the sick  
21 desk log of my being put on duty. I noted  
22 below that that I was off duty at 21:40  
23 hours. Back to the main text in the body.  
24 10/31/09. Telephone contact with sick desk  
25 Sergeant Kloos.

1 C. LAMSTEIN-REISS, M.D.

2 MS. PUBLICKER METHAM:

3 K-l-o-o-s.

4 A. Yes. I believe that's the  
5 spelling. It's possible I'm wrong about the  
6 spelling. MOS was at work today. He  
7 slammed sick report on the sergeant's desk  
8 and said he was going out sick. Sergeant  
9 told him to stick around. He refused and  
10 left. Didn't follow procedure. Typically,  
11 they called sick desk and get authorization  
12 and wait for command to arrange coverage.  
13 MOS was working on the telephone  
14 switchboard. MOS did not go straight home.  
15 Cops are at his home waiting for his  
16 arrival. They called MOS on his cell phone.  
17 They think he picked up and then hung up.  
18 Since then no answer. They are thinking of  
19 suspending him, but they suspect it is more  
20 of psych problem. XO of MOS's command, the  
21 81 Precinct, is Captain Lauterborn and  
22 requests response from PES and I signed my  
23 name.

24 Q. The is information that you  
25 received from Sergeant Kloos from the sick

1 C. LAMSTEIN-REISS, M.D.

2 desk?

3 A. Correct.

4 Q. All right, please continue.

5 A. It will be more clear as I'm  
6 reading through the notes, but it's possible  
7 that the part about possibly not suspending  
8 him because they thought it might be more of  
9 a psych problem, that may have come  
10 secondhand through Sergeant Kloos. If it  
11 came directly, it would be the rest the  
12 notes.

13 Telephone contact with Captain  
14 Lauterborn. MOS doing a 7 to 3 day tour  
15 today at TS all day, meaning telephone  
16 switchboard all day. All was fine. He  
17 typically keeps to self and doesn't converse  
18 much with other officer and did same today.  
19 Nothing seemed out of ordinary. 2:00 p.m.,  
20 he went down to locker room, changed and  
21 then put a sick report on sergeant's desk  
22 and said going sick. He wrote that he had  
23 stomach pain. Sergeant tried to stop him,  
24 but he left anyway. Underlying issues. MOS  
25 has made allegations against others.

1 C. LAMSTEIN-REISS, M.D.

2 Department's investigation of these  
3 allegations picked up this week and it  
4 snowballed from there. This week about four  
5 P.O.'s and two civilian people were called  
6 down for questioning. MOS goes up to them  
7 and asked about it. Notifications are in  
8 telephone message log, so he knows who is  
9 going. When they return, he tries to  
10 intercept them and get information from them  
11 about what he was asked -- about -- it  
12 should have been what they were asked. Or  
13 that thought the person was a he. Anyway,  
14 that's what it says what he was asked.  
15 Today was first tour back after RDOs. Not  
16 sure what happened today that triggered him  
17 to leave like that.

18 Delegates, peers, sergeants and  
19 Captain Lauterborn all left him messages and  
20 asked him to go back to command. A  
21 lieutenant is at him home. His car is  
22 there. Landlord said MOS may have been  
23 there earlier. Can usually hear MOS's  
24 footsteps when home. MOS not home.

25 Next entry, I left a message on

1                   C. LAMSTEIN-REISS, M.D.  
2   MOS's cell phone. I gave my cell number and  
3   Captain Lauterborn's cell phone. I told him  
4   that the Captain said he could just return  
5   to his home if didn't want to go to the  
6   command. I urged him to go home or call his  
7   captain, so this could be resolved quickly  
8   and easily without need for a city-wide  
9   mobilization to search for him or  
10   disciplinary action, like suspension. Much  
11   easier to just resolve it quickly and easily  
12   now. I explained that everyone is just  
13   concerned for his safety and they want to  
14   make sure everyone is okay.

15                   Next entry, telephone contact  
16   with Captain Lauterborn. I informed captain  
17   that I left message on MOS's cell phone as  
18   described above. I suggested that captain  
19   call MOS's father because that's the person  
20   he is closest to and the person who is most  
21   likely to know his whereabouts. Captain  
22   will call undersigned when locates or hears  
23   from MOS, signed my name.

24                   Next entry at 20:15 hours.  
25   Telephone contact with Captain Lauterborn.

1 C. LAMSTEIN-REISS, M.D.  
2 Still no word from MOS. Captain called MOS's  
3 father, who also hadn't heard from him.  
4 Father, quote, had some issues, end quote,  
5 over the phone -- over phone, but eventually  
6 understood captain's point of view and  
7 confirmed. Hoping father will call MOS and  
8 encourage him to go home. Captain will go  
9 to MOS's home. It's possible he's home, but  
10 not answering phone. I asked if the  
11 landlord has a spare key. He said yes and  
12 captain has it, but legal issues with using.  
13 Have to have cause. Hoping to avoid going  
14 that route.

15 Q. What were those legal issues?

16 A. I didn't ask. I don't know.

17 MS. PUBLICKER METHAM:

18 Objection.

19 Q. All right, go ahead?

20 A. And I signed my name. 20:40  
21 hours the next entry -- I'm sorry 21:40  
22 hours is the next entry. Telephone contact  
23 with Sergeant Kloos. Sick desk off duty  
24 since not known when MOS might be located  
25 and I signed my name.

1 C. LAMSTEIN-REISS, M.D.

2 Then next page on the top  
3 regarding Adrian Schoolcraft addendum to  
4 10/31/09 note of telephone contact with  
5 Captain Lauterborn at approximately 17:50  
6 hours. Delayed entry made on 10/14/10. In  
7 reviewing folder, the below information was  
8 found to not be documented in prior note,  
9 but is clear in undersigned's memory.

10 Captain Lauterborn asked if MOS was suicidal  
11 or depressed because he needed to know how  
12 concerned they should be about MOS's safety  
13 given his going AWOL. Not answering phone  
14 calls, not answering door of home, but his  
15 car was there, et cetera.

16 Q. Can I stop you right there.  
17 When did you make this entry?

18 A. October 14, 2010.

19 Q. October what?

20 A. 14, 2010.

21 Q. Can I see the original that  
22 you're reading from?

23 A. Sure.

24 Q. How do you know that you made  
25 this entry on October 24, 2010?