

PLAINTIFF'S MOTION
EXHIBIT 26

1 S. SANGENITI

2 retake it?

3 A. Oh, sure.

4 Q. It happens frequently?

5 MR. RADOMISLI: Objection.

6 A. It happens.

7 Q. Does it happen that the reason
8 why the numbers seem different is because
9 you had a hard time hearing?

10 A. No.

11 Q. No. Then why is it important
12 that the room be quiet?

13 A. It assists you in evaluating the
14 condition.

15 Q. So if a radio was blaring in the
16 background while you're taking blood
17 pressure, that would interfere with your
18 ability to hear or take a blood pressure
19 reading, right?

20 MR. RADOMISLI: Objection.

21 A. Yes.

22 Q. What blood pressure reading did
23 you get from Officer Schoolcraft?

24 A. Like 160 over 120.

25 Q. The record should reflect that

1 S. SANGENITI

2 you're looking at the second page of the PCR
3 and you're looking at assessment for the
4 first of the initial assessment; is that
5 right?

6 A. Correct.

7 Q. You don't, sitting here today,
8 remember getting that reading, you're just
9 relying on the PCR, right?

10 A. Correct.

11 Q. Other than getting the top and
12 bottom number, what else did you do when you
13 were taking Schoolcraft's vitals?

14 A. His pulse, taking his pulse, his
15 respiration, listening to his lungs.

16 Q. Did you listen to his lungs?

17 A. I did.

18 Q. Did you take his pulse?

19 A. I did.

20 Q. Are these readings here, 120 for
21 pulse and 20 for respiration, the readings
22 that you got?

23 A. Yes.

24 Q. Did you make those entries on
25 this chart?

1 S. SANGENITI

2 A. No.

3 Q. Who did?

4 A. Jessica Marquez.

5 Q. Did she do that at the time that
6 the readings were being taken or sometime
7 thereafter?

8 A. No, when they were being taken.

9 Q. So she was in the room with you?

10 A. Yes.

11 Q. And you conveyed this
12 information to her and she wrote it down on
13 the PCR?

14 A. Yes.

15 Q. Did you have any role in making
16 any of the markings on the PCR that you have
17 in front of you?

18 A. No.

19 Q. Who had a role in the markings
20 on the PCR in front of you?

21 MR. RADOMISLI: Objection to
22 form to the prior question. Objection
23 to form to this question.

24 A. Jessica Marquez.

25 Q. So the handwriting on this

1 S. SANGENITI

2 document is all Marquez?

3 A. Correct.

4 Q. None of it's yours?

5 A. Correct.

6 Q. What does the blood pressure
7 reading of 160 over 120 mean to you?

8 A. Person's in hypertensive -- not
9 really hypertensive crisis.

10 Q. What does that mean?

11 A. It's -- normal blood pressure is
12 approximately 110 over 70, 120 over 80, 160
13 over 120 is a little high.

14 Q. Is that an emergency situation?

15 A. We were there so, yeah, sure.

16 Q. No, I didn't ask you about that.

17 A. Is that condition, yes.

18 Q. So 160 over 120 is an emergency
19 situation?

20 A. Yes.

21 Q. Does, in your experience, a
22 blood pressure reading like that require you
23 immediately take the person to the hospital?

24 A. After evaluation, yes.

25 Q. Did you take Schoolcraft to the

1 S. SANGENITI

2 hospital right after this evaluation?

3 A. Of the initial evaluation there
4 was a time that Officer Schoolcraft, after
5 bringing him down to my vehicle, ran back to
6 the apartment.

7 Q. Let me -- you told me that
8 normal blood pressure is what?

9 A. 110 over 70, 120 over 80.

10 Q. Does it depend upon the age of
11 the person?

12 MR. RADOMISLI: Objection to
13 form.

14 A. No.

15 Q. So if 120 over 80 is a normal
16 blood pressure reading, how high do the
17 numbers have to get in order for them to be
18 considered to be an emergency situation by
19 you?

20 A. What other signs and symptoms.
21 It could be a person with 140 over 90 could
22 have other underlying conditions that
23 warrant it as an emergency.

24 Q. I am just asking you --

25 A. There is no really set number.

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S. SANGENITI

Q. So the 160 over 120 depends upon circumstances, right?

A. Correct.

Q. If somebody had just been going through a stressful event in their life moments before taking a reading that yielded a 160 over 120, that wouldn't necessarily tell you that there was an emergency situation; right?

A. Correct.

Q. You remember if Schoolcraft was undergoing a stressful moment at time you took the blood pressure reading?

MS. PUBLICKER METTHAM:

Objection.

A. Well, we entered his home and he was again, agitated.

Q. Fair to say that when a bunch of police officers enter somebody's home that's the kind of circumstance that would increase somebody's blood pressure?

MR. RADOMISLI: Objection.

A. Not in every instance, but yes.

Q. What about having a superior

1 S. SANGENITI

2 officer tell you that you're suspended,
3 would that be the kind of thing that would
4 elevate somebody's blood pressure?

5 MR. RADOMISLI: Objection.

6 MS. PUBLICKER METTHAM:

7 Objection.

8 A. I can't speculate on it. I'm
9 not that person.

10 Q. No, I understand that you're not
11 that person, but you have an enormous amount
12 of experience taking blood pressure
13 readings, don't you?

14 A. Yes.

15 Q. As an EMT you have probably
16 taken tens of thousands of blood pressure
17 readings over the past 25 years, right?

18 A. Correct.

19 Q. Given that background, can you
20 tell me whether or not a person being told
21 by their superior officer that they're
22 suspended is the kind of circumstance that
23 would lead to or could lead to an elevated
24 blood pressure reading?

25 MS. PUBLICKER METTHAM:

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S. SANGENITI

Objection.

MR. RADOMISLI: Objection.

A. It could, but what happened is that the officer told me that was his normal blood pressure.

Q. I'm not trying argue with you.

A. Nope, not at all.

Q. I just want you to answer my question.

A. Okay.

Q. All right. I will restate my question just so it's clear. It's my understanding that you just told me that based on your experience, if somebody is told by his superior officer that they're being suspended that those are the kind of facts that could lead to an elevated blood pressure; is that correct?

MS. PUBLICKER METHAM:

Objection.

MR. RADOMISLI: Objection.

Substance.

Q. Is that correct?

A. Yes.

1 S. SANGENITI

2 MR. SMITH: Going to just stop
3 right now.

4 Q. Was that your voice that we just
5 heard?

6 MR. RADOMISLI: Objection to
7 form.

8 A. Yes.

9 MS. PUBLICKER METHAM: What
10 time did you stop?

11 MR. SMITH: At 10:24.

12 Q. What were the words you just
13 said?

14 A. I'm sorry, I forgot already what
15 you said. Oh, I said what's going on.

16 MR. SMITH: Okay, all right, so
17 picking back up at 10:24.

18 Q. I may stop it at certain points
19 in the recording and ask you some questions
20 about that.

21 A. Okay. I got to pay attention, I
22 know.

23 (Whereupon a recording was
24 played.)

25 MR. SMITH: I'm stopping at

1 S. SANGENITI

2 11:17.

3 Q. Were you in Officer
4 Schoolcraft's bedroom at the time that these
5 events were transpiring that we just
6 listened to?

7 A. Yes.

8 Q. And in the background on the
9 tape I could hear some Velcro. Did you hear
10 that as well?

11 A. Yes.

12 Q. Is that sound of you -- I also
13 heard some other sounds. Is that the sound
14 of you taking out the equipment that you
15 used to do various --

16 A. Well, to remove the BP cuff.

17 Q. So the background noise of the
18 Velcro, that's you're manipulating your
19 equipment; is that correct?

20 A. Correct.

21 MR. SMITH: Proceeding at 11:17.

22 (Whereupon, a recording was
23 played.)

24 MR. SMITH: Stopping it at

25 11:39.

1 S. SANGENITI

2 Q. Did you just hear some other
3 sounds --

4 A. Sure.

5 Q. -- just seconds before I stopped
6 the recording?

7 A. I'm inflating the BP cuff.

8 Q. Okay. That's what I was going
9 to ask you. What were you doing? What does
10 that mean to inflate the BP cuff?

11 A. To initiate starting to take a
12 blood pressure.

13 Q. Is that the sound we heard is
14 the sound of you squeezing that black ball?

15 A. Correct.

16 Q. Inflating the BP cuff?

17 A. Correct.

18 Q. How many times did you inflate
19 it or how many times did you press the
20 little black ball?

21 A. I couldn't tell you that.
22 There's no specific.

23 Q. Did it sound like a lot or a
24 little to you?

25 MR. RADOMISLI: Objection.

1 S. SANGENITI

2 A. It sounded...

3 Q. It sounded regular?

4 A. As I'm trying to inflate, yes.

5 MR. SMITH: Proceeding at 11:39.

6 Q. Oh, before that, you heard the
7 chief saying you're suspended?

8 A. Yes.

9 Q. And seconds later you took his
10 blood pressure, right?

11 MR. RADOMISLI: Objection to
12 form.

13 Q. Is that correct?

14 A. Yes.

15 Q. Is the act of somebody being
16 suspended by their chief the kind of act
17 that would ordinarily, in your experience,
18 lead somebody's blood pressure to go up?

19 MR. RADOMISLI: Objection.

20 MR. LEE: Objection.

21 A. I think anybody telling me
22 something I didn't want to hear would
23 agitate me.

24 Q. When you hear something that
25 agitates you, it's likely to cause your

1 S. SANGENITI

2 blood pressure to elevate?

3 A. Sure, yes.

4 Q. All right. Thank you.

5 MR. SMITH: So I'm now
6 proceeding at 11:39.

7 (Whereupon, a recording was
8 played.)

9 MR. SMITH: Stopping at 12:14.

10 Q. Did you hear a female voice on
11 the recording at the point just before I
12 stopped it?

13 A. Yes.

14 Q. Whose voice did you hear?

15 A. Lieutenant Hanlon.

16 Q. What was she saying to you?

17 A. Sal. Sal.

18 Q. What was she communicating to
19 you at that moment?

20 A. Truthfully, I don't remember.

21 Q. Where was she standing when she
22 was speaking to you?

23 A. Probably along the outside of
24 the room.

25 Q. So she was getting your