

IADC 2024 MID-YEAR CONFERENCE

| "TIME"S THEY ARE A "CHANGE"N | YOU PUT YOUR GRAPHICS WHERE?!? | THINGS THAT MAKE YOU GO ____ | 3D OR NOT 3D THAT IS THE QUESTION | THAT'S WHAT MAKES THEM BEAUTIFUL | CLOSING TIME |
|---------------------------------|-----------------------------------|---------------------------------|--------------------------------------|-------------------------------------|--------------|
| \$200 | | | \$200 | | \$200 |
| \$400 | | | \$400 | \$400 | \$400 |
| \$600 | \$600 | \$600 | \$600 | \$600 | \$600 |
| \$800 | | \$800 | \$800 | \$800 | \$800 |
| | | \$1000 | \$1000 | \$1000 | \$1000 |

YOU PUT YOUR GRAPHICS WHERE? · \$600

When the other side shouts the
Wayne and Garth mantra
of “They’re Not Worthy!” you need to
show up to this hearing ready to prove
that your expert is **THEE** expert.

YOU PUT YOUR GRAPHICS WHERE? · \$600

What is a Daubert Hearing?

Dr. Elizabeth Shue - Urogynecologist



- Tenured Professor of Urology and Obstetrics/Gynecology, Division
Loyola University Chicago Stritch School of Medicine



- Fellowship Director of Female Pelvic Medicine & Reconstructive Surgery
Loyola University Health System

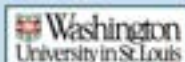


- Doctor of Medicine, MD
St. Louis University School of Medicine

Dr. Elizabeth Shue - Urogynecologist



- Practicing Engineer
Procter & Gamble Manufacturing



- Masters of Science –
Mechanical Engineering
Washington University, St. Louis, MO



- Bachelor of Science –
Mechanical Engineering
University of Missouri-Rolla



- Registered Nurse, RN
Barnes Hospital School of Nursing

Dr. Elizabeth Shue – Publications



105 Peer-reviewed Scientific Research Publications

- Urine trouble: Should we think different about urinary tract infections?
Pooni, A. D., Dine, T. L., **Shue, E.**, Shue, A. J., Boudreau, L., International Urogynecology Journal, February 2014
- Effect of aging on storage and voiding function in women with stress-predominant urinary incontinence
P. J. D. Jones, P. J. Jones, C. Rogers, M. L. Lennick, M. R. Kohn, L. D. M. M. Kohn, D. J. Jones, and **E. L. Shue**, Journal of Urology, August 2014
- Risk Factors for Urinary Incontinence in Women Undergoing Stress Urinary Incontinence Surgery
Under Stress Urinary Incontinence, David B. Shue, Francisco, Heather L. Shue and **Elizabeth Shue**, Advances in Urology, October 2013

Dr. Elizabeth Shue – Publications



Book Chapters, Reviews and Invited Submissions

- Use of Transvaginal Mesh: What the Surgeon Should Consider
Shue, E., Journal of Urology, October 2017
- The Bladder is Not Sterile: History and Current Discoveries on the Urinary Microbiome
Thomas-White, K., Brady, M., Wolff, A., **Shue, E.**, Current Bladder Dysfunction Report, January 2014
- Retropubic Operations for Stress Incontinence
Rango, J. and **Shue, E.**, Pelvic Reconstructive Surgery, 2nd edition, Humana Press, Springer, 2016

Dr. Elizabeth Shue – Research



18 Research Grants/Projects

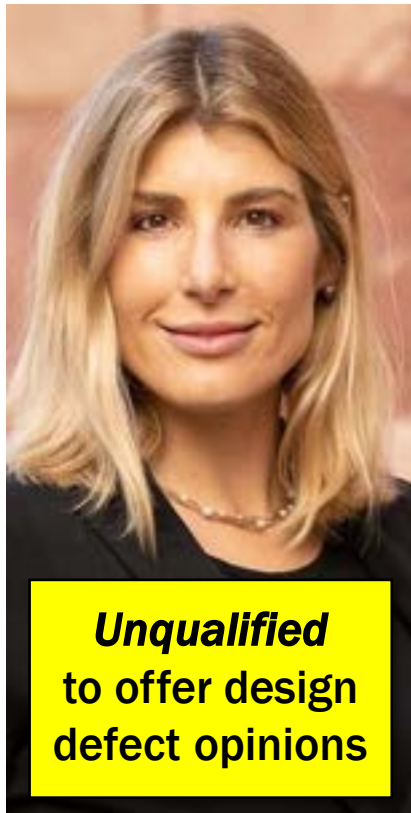
- Federally Funded Investigator
National Institutes of Health (NIH)
- Principal Investigator
Prevention of Lower Urinary Tract Symptoms
Oncology
- Co-investigator of Stress Incontinence Surgical Treatment Efficacy Trial (SISTER)
Directly comparing Burch and bladder neck T-joint slings
- Co-investigator of Trial of Mid-Urethral Slings (TOMUS)
Largest US comparative effectiveness trial evaluating TVT retropubic MUS vs. TIT-D and Mucus transdermal MUS

Dr. Elizabeth Shue – Leadership Positions



- American Urogynecologic Society
Board of Directors, Membership Committee (Chair and Co-Chair), Program Committee (Chair and Co-Chair), Leadership Committee
- Society of Urodynamics, Female Pelvic Medicine & Urogenital Reconstruction
Led the work group who developed a Urodynamics Curriculum for Urology Residents
- American Urological Association
Executive Committee for the core Curriculum and the Committee for Constructive Bladder Practice Guidelines
- Society of Women in Urology
Past President, Member of Executive Committee (8 years)

Janelle Thompson, PhD, PE



**Unqualified
to offer design
defect opinions**

NO

medical doctorate (Ph.D, not an M.D.)

NO

publications on radiation used in surgery

NO

patents for radiation used in surgery

NO

training in esophageal surgery

NO

teaching regarding the use of radiation in surgery

NEVER

worked in product development for a medical radio device

NEVER

consulted with a medical-device manufacturer or government agency on surgical radiation design

NEVER

offered prior expert opinion on risks of using surgical radiation

NEVER

awarded a contract for study or development of surgical radiation

NONE

of her certifications, affiliations, publications, seminars, or patents deal with surgical radiation

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| \$800 | | \$800 | \$800 | \$800 | \$800 |
| | | \$1000 | \$1000 | \$1000 | \$1000 |

3D OR NOT 3D, THAT IS THE QUESTION · \$800

To thine own **data** be true,
And it must follow, as the night the day,
Thou canst not then be false to any **juror**.

3D OR NOT 3D, THAT IS THE QUESTION · \$800

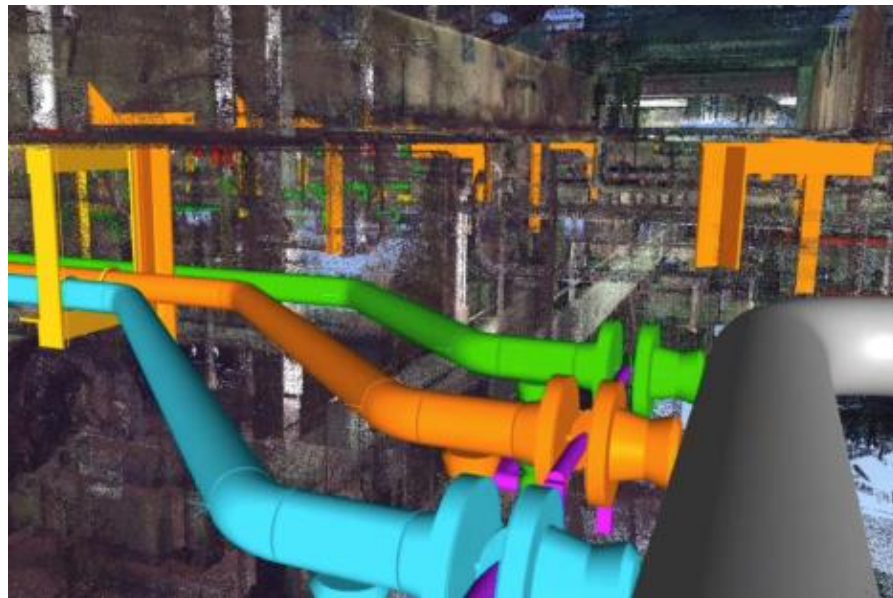
What is the famous quote from
Hamlet about use of data in support of
Expert Testimony?

Large Objects – 3D Laser Scanning

Typical Subject Matter Size:
Inches to 10's of Yards

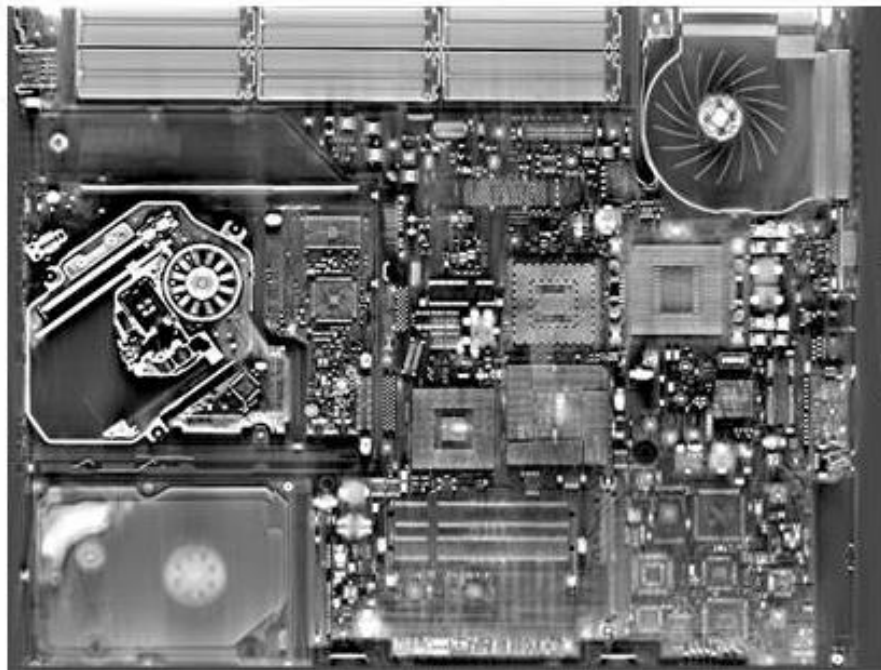


Typical Resolution:
Depends on scan area, but can be
millimeter scale

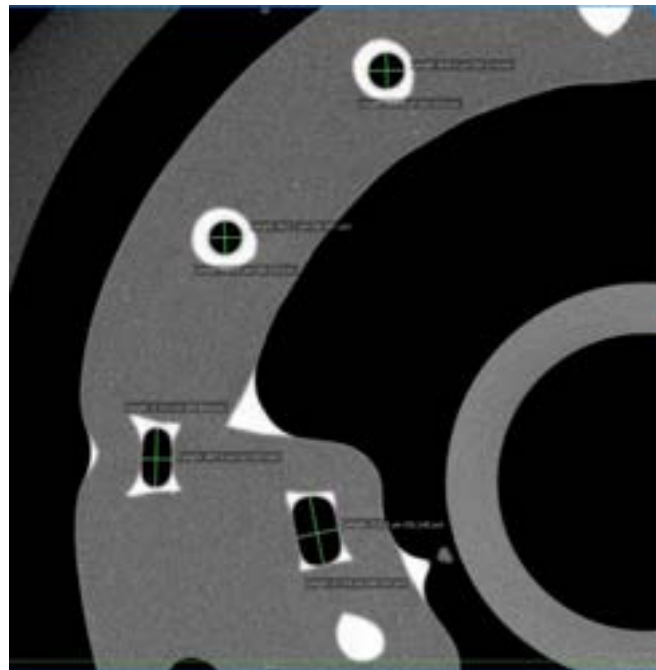


Medium Objects – CT Scanning

Typical Subject Matter Size:
Sub-inch to a few feet

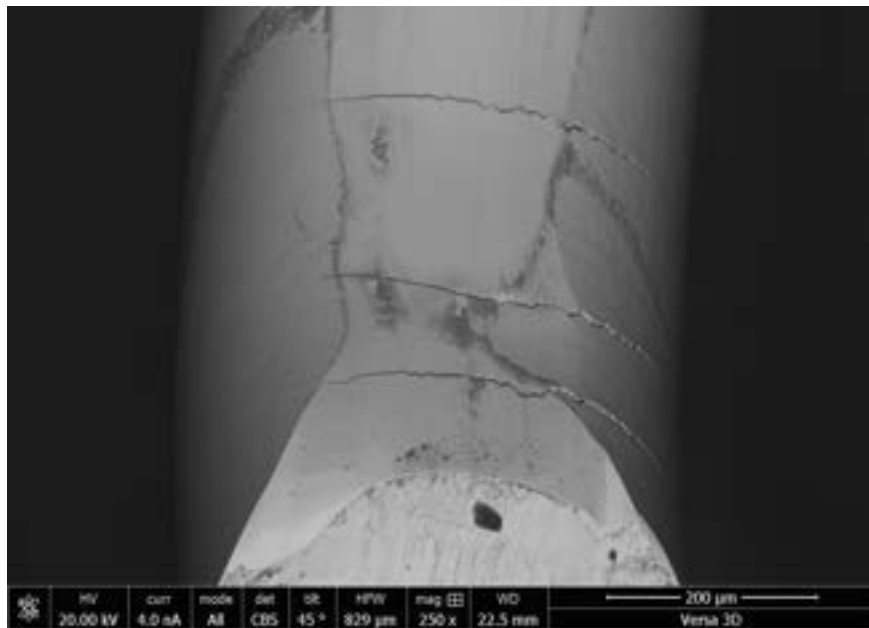


Typical Resolution:
0.001 inches or smaller

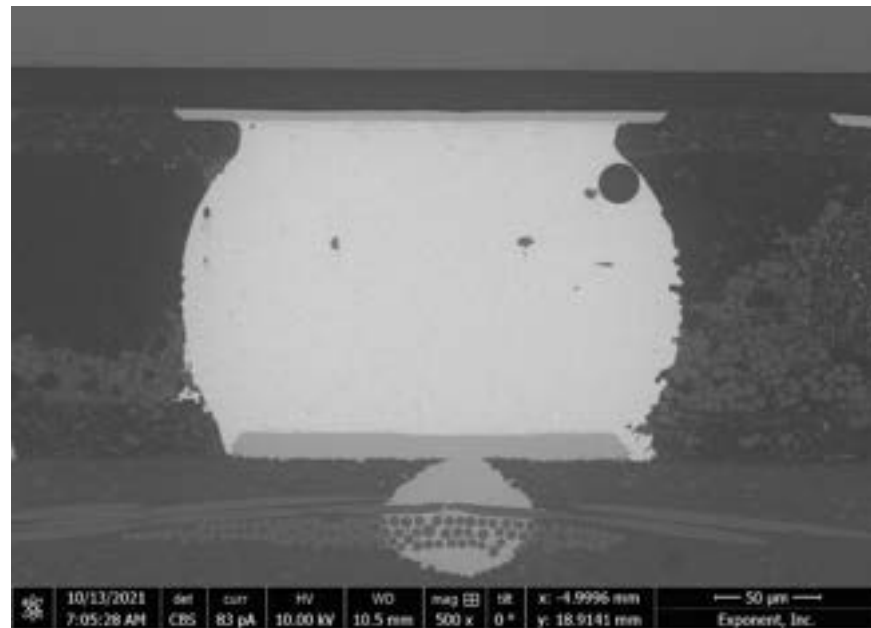


Tiny Objects – Electron Microscopy

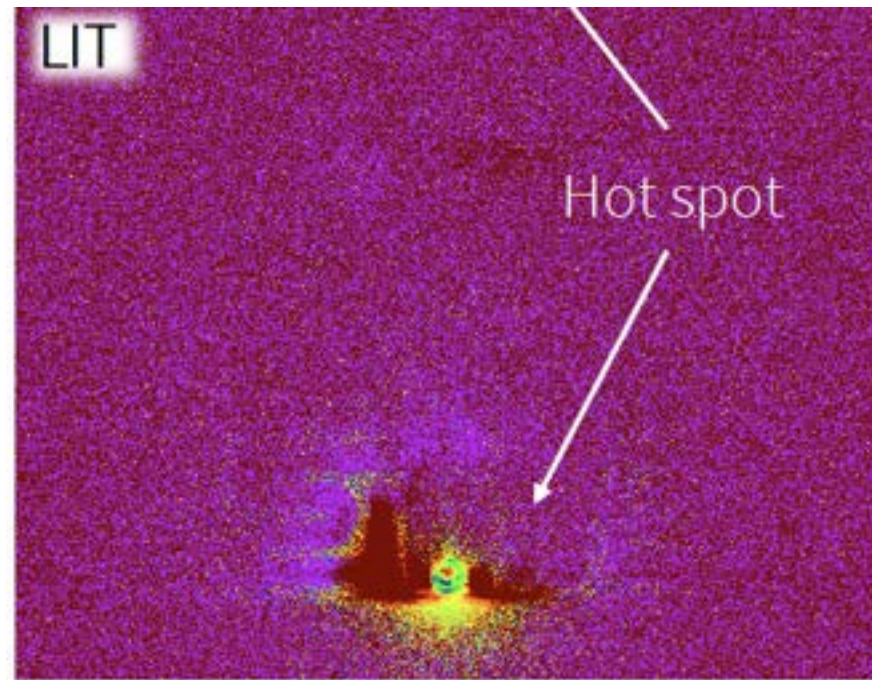
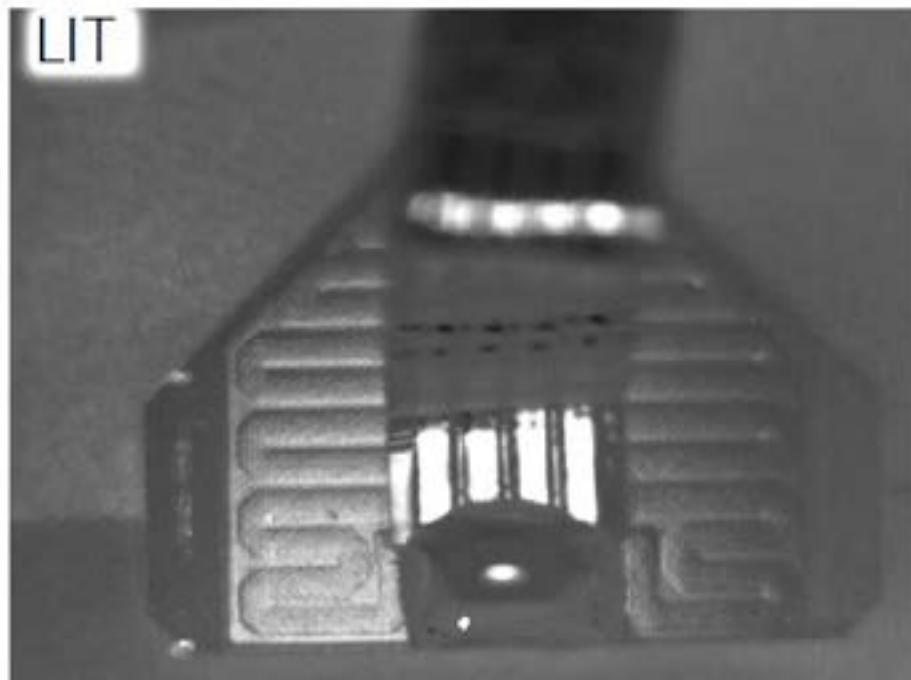
Typical Subject Matter Size:
Up to a few inches



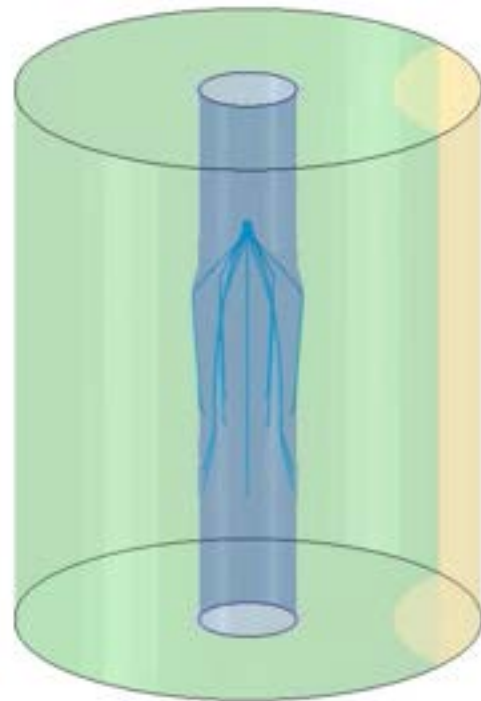
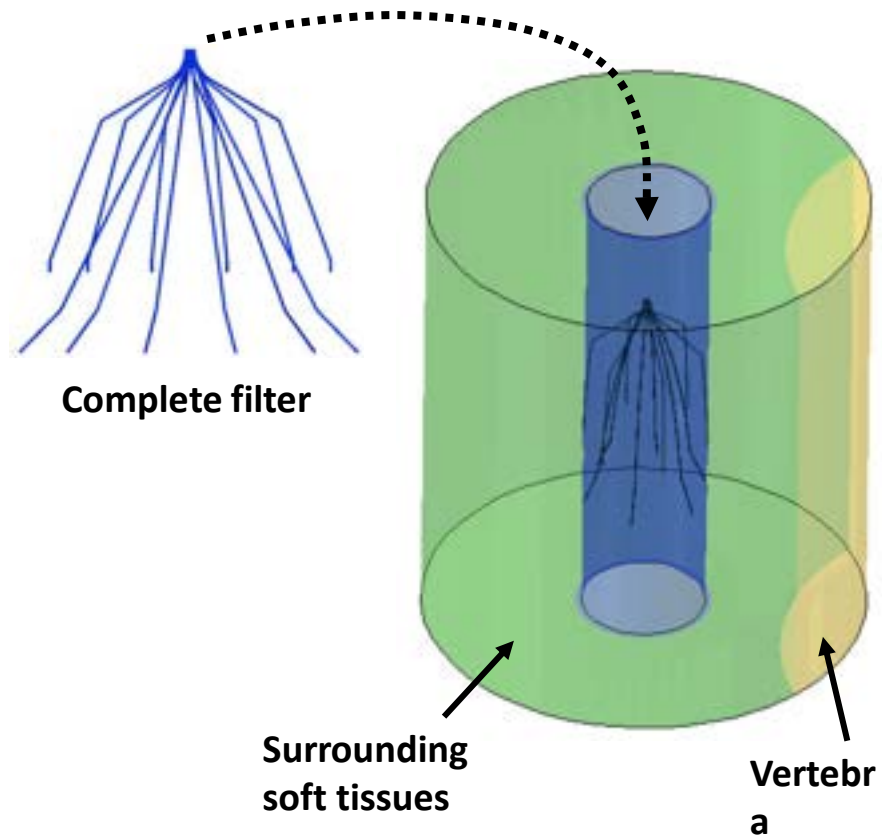
Typical Resolution:
0.0001 inches or smaller



Electrical Shorts Assessment

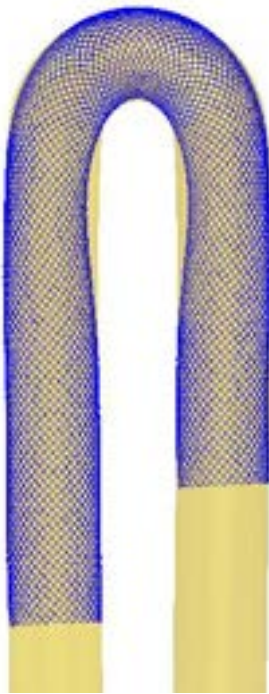


Simulation Uses



Simulation Uses

Stent in
Blood Vessel



Stresses in
Stent



Make Visualizations Easier



Actual
deformed
shape

Motion
scaled
100X



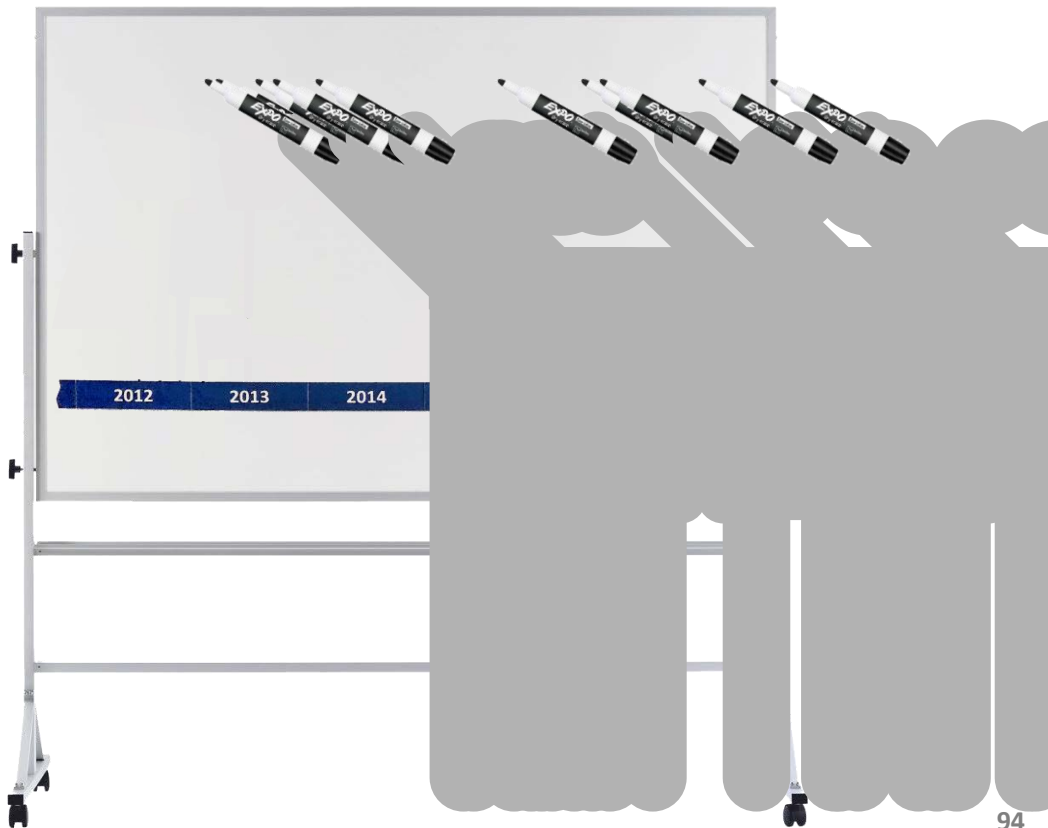


HISTORY
 Patient Name: [REDACTED] DOB: [REDACTED] Age: 56 Date: 9/21/12
☐ Annual Exam ☒ New Patient ☐ Established Patient ☐ Consultation ☒ Report Sent: 10/3/12
 Current Medical: [REDACTED] ☐ HTN ☒ Diabetes ☒ Dr. V [REDACTED]
 Allergies: [REDACTED] ☐ None ☒ Penicillin ☐ Sulfonamide
 Use: [REDACTED] ☐ Normal ☐ D.V. ☐ N ☐ N ☐ N ☐ N ☐ N ☐ N ☐ N ☐ N
 Chief Complaint: [REDACTED] (required on all problem visits) ☐ Pessary Check
 clp vaginal bulge all the time, very uncomfortable. frequency, constipated feeling #2
☐ Urine Culture: Positive Negative

Patient Name: [REDACTED] DOB: [REDACTED] Age: 56 Date: 9/21/12
☐ Annual Exam ☒ New Patient ☐ Established Patient ☐ Consultation ☒ Report Sent: 10/3/12
☒ Primary Care Physician [REDACTED] ☒ Referring [REDACTED] Dr. V [REDACTED]

Chief Complaint: (required on all problem visits) ☐ Pessary Check
 clp vaginal bulge all the time, very uncomfortable. frequency, constipated feeling #2
☐ Urine Culture: Positive Negative
 Current Urinary Symptoms:
☒ Dysuria (0) ☐ Post Void Fullness (A)
☒ Frequency 4 x 2 hrs. ☒ Stress Incontinence (S)
☒ Nocturia x 2 ☒ Urge Incontinence (S)
☒ Urgency (0) ☒ Vaginal Bleeding (F)

10/3/12 Exam: 120.3
 10/3/12 Exam: 247.2



Direct Examination of Witnesses and Experts

Toppem Hat, Professional Engineer

City of Dodge
vs.
Acme Oil Company et al.

August 5, 2019

Robert Redford, Ph.D.
Hydrogeologist

August 5, 2019

Dr. Michael Douglas
Chemical Engineering Expert

August 5, 2019

City of Dodge vs. Acme Oil Company

Jim Swenson

August 5, 2019

City of Dodge vs. Acme Oil Company

David Ross, Ph.D., DABT, FATS
Dean and Vice Provost Emeritus
Professor Emeritus of Environmental and Occupational Health Sciences
University of Iowa

Adjunct Professor
Department of Pharmaceutics & Toxicology
College of Pharmacy
University of Illinois

August 5, 2019

Dr. Michael Phelps - Nematologist (August 12, 2019)



David L. Roth
August 6, 2019

Professor Brian Wilson
Professor of Hydrology,
Department of Earth and Environmental Science,
New Mexico Institute of Mining and Technology



City of Dodge vs. Acme Oil et al.
July 25, 2019

OR

Toppem Hat, Professional Engineer

Direct Examination
City of Dodge vs. Acme Oil et al.
August 5, 2019

Robert Redford, Ph.D - Hydrologist

Direct Examination
City of Dodge vs. Acme Oil et al.
August 5, 2019

Dr. Michael Douglas – Chemical Engineer

Direct Examination
City of Dodge vs. Acme Oil et al.
August 5, 2019

Jim Swenson

Direct Examination
City of Dodge vs. Acme Oil et al.
August 5, 2019

David Ross, Ph.D, DABT, FATS

Direct Examination
City of Dodge vs. Acme Oil et al.
August 5, 2019

Dr. Michael Phelps - Nematologist

Direct Examination
City of Dodge vs. Acme Oil et al.
August 12, 2019

David L. Roth

Direct Examination
City of Dodge vs. Acme Oil et al.
August 6, 2019

Professor Brian Wilson - Hydrology

Direct Examination
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| \$800 | | \$800 | | \$800 | \$800 |
| | | \$1000 | \$1000 | \$1000 | \$1000 |

CLOSING TIME · \$200

Overpaid and overpromising
during their testimony
should be reworded
with this lonely fate.

CLOSING TIME · \$200

What is an expert
on an island?

Plaintiff's Experts

408.4

mother gave Tyler dosages of Motrin for the next 10 days but Tyler did not get entirely better and showed a decrease in energy with a mild cough and sore throat. [Exhibit 1]

By July 20, 2009, Tyler was taken back to his pediatrician who prescribed an antibiotic (azithromycin), an aerosolizer without mask and Flovent and recommended to continue taking QVC Motrin. Tyler took the azithromycin but would vomit after each dose. Tyler was taken back to his pediatrician on July 22nd and the antibiotic was changed from azithromycin to amoxicillin. Also on July 22, 2009 before 1:43 pm, the physician assistant for Tyler's pediatrician recommended that Tyler be given 3 teaspoons of Children's Liquid Tylenol every 4-6 hours. Commencing on 7/22/09, Kendra Robertson thereafter gave Tyler Robertson 3 teaspoons of Children's Liquid Tylenol every 4-6 hours. [Exhibit 1]

On July 24th, because his symptoms were significantly worse, Tyler was again brought to his pediatrician who noted that his oxygen saturation was 77%. He was then sent to the emergency room at St. Mary Medical Center. In the emergency room he was noted to be tachypneic and to have low oxygen saturation. Tyler had extremely high white counts (59,000) with a leftward shift—22% bands, 5% immature granulocytes and 1% mature lymphocytes. The blood sugar was 132 and hemoglobin 12.4. Blood cultures were drawn and intravenous antibiotics were ordered including vancomycin, azithromycin and Rocephin (ceftriaxone). A chest x-ray was ordered which revealed bilateral infiltrates with low lung volumes. Tyler also had acidosis with a blood lactate level of 5.6 and a pH of 7.28. Tyler had a heart rate of 129 on EKG and an elevated troponin of 0.79. [Exhibit 2]

At about 2335 hours, arrangements were made for transport to Loma Linda University Medical Center for a higher level of care. Tyler was transported without incident although he continued to be tachycardic in the 130's and tachypneic in the 30's. His oxygen saturations dropped to a low of 88% (ranging from 88%-92%). Upon arrival at Loma Linda University Children's Hospital, Tyler was admitted to the pediatric intensive care unit (PICU). [Exhibit 3]

His arrival in the pediatric intensive care unit (PICU) at Loma Linda at 2332 hours on 7/24/09. Upon admission, Dr. Eguchi noted that Tyler had significant leukocytosis, dyspnea, and (on chest x-ray) showed pneumonia vs pleural effusion. The admission records also state that Tyler had sepsis. The plan on admission was to treat Tyler with multiple antibiotics including vancomycin, ceftriaxone and azithromycin and to obtain further bacterial cultures and viral studies. Tyler was also to receive IV fluids and respiratory support with the plan to perform

Case 2:11-cv-09050-JAK-SS Document 62 Filed 03/15/13 Page 7 of 105 Page ID #:1219

mother gave Tyler dosages of Motrin for the next 16 days but Tyler did not get entirely better and showed a decrease in energy with a mild cough and sore throat. [Exhibit 1]

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Plaintiff's Experts

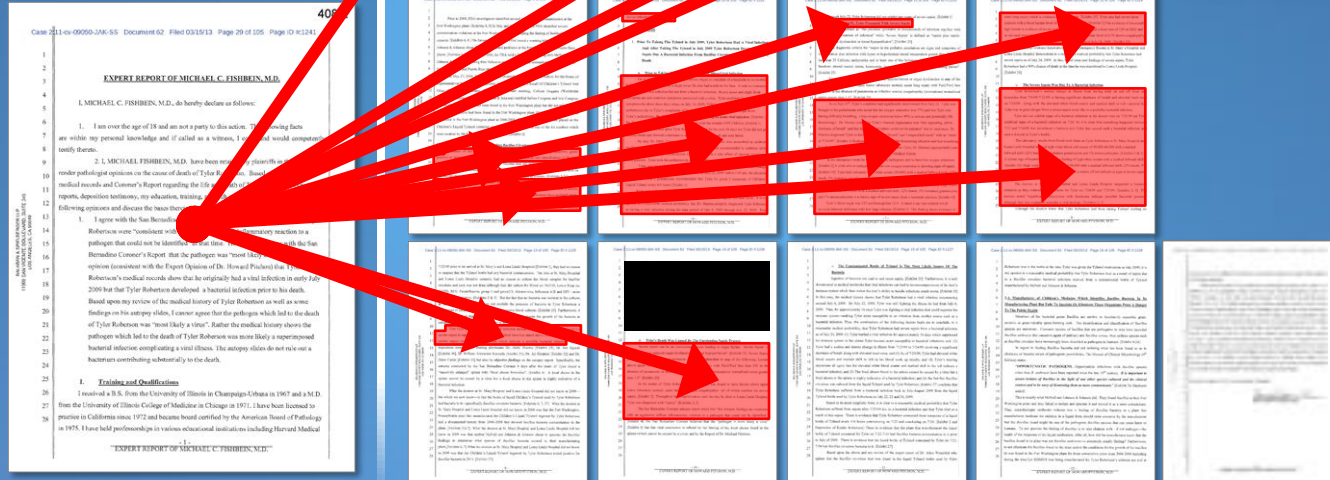


Dr. Carson

30%
of Income
= Testifying
in Lawsuits



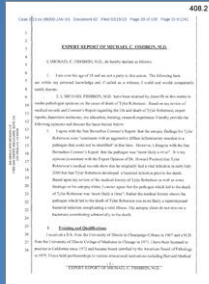
Dr. Smith



Plaintiff's Experts



Dr. Carson



Q. **You didn't actually write most of the report** that was submitted with your name on it in this case; isn't that correct?

A. I wrote the pathology portion but not the summary of the clinical information, that's correct.

Q. **Most of the report was written by somebody else;** right?

A. Yes, that's correct.


Q. And **the lawyers** or somebody associated with Mr. Anderson's office, you don't know exactly who, are the ones who **wrote most of your report;** right?

A. The clinical portion, that's correct.

Q. That would be the whole summary of what happened to this child and the history and all that stuff?


A. Yes.

Plaintiff's Expert Disagrees With Surgeon Consensus



- Synthetic mesh slings treatment of choice for SUI
- Most studied SUI procedure
- Standard of care
- Disservice not to have it

Disagrees with ALL of them



Dr. Amore

Was There a Reason to Remove (or Lower) TCP from D-D While D-D Was on the Market?

| No | Yes |
|---|---|
|  <p>Farmers</p> <p>Government Agencies</p> <p>Distributors</p> <p>Univ. of California Scientists</p>  |  <p>Dr. Boone</p> |

Who Disagrees?

DISAGREE DISAGREE DISAGREE DISAGREE DISAGREE



0 0 0 0 0 1

23 Witnesses Testified In Court / Only 1 Claims Causation




Dr. Moore

The Doctors Agree, Except...

| | Dr. Langley 5/15/16 | Dr. Canella Exam: 3/29/17 | Dr. Johnson IME: 5/16/17 | Dr. McNeill IME: 6/27/17 |
|---------------------|------------------------|------------------------------|-----------------------------|-----------------------------|
| Implanted implant? | Not asked | No | No | Yes |
| Implant visible? | Not asked | No | No | Yes |
| Dysfunctional? | Not asked | No | No | Yes |
| Visible at implant? | Not asked | No | No | Yes |
| General pain? | Not asked | Not enough | Not enough | No |
| Pain with activity? | Not asked | Not enough | Not enough | No |

100% of These 19 Witnesses Claimed PFT-Secur Was Defectively Designed



Over 1,800 Articles Studies on Midurethral Slings With No Mention Of Plastic Being Defective

1
Witness

PFT-S is
Defectively
Designed



Dr. Doublet

Doctors Agree: TVT-O Is The Standard Of Care



Advancing Female Pelvic Medicine
and Reconstructive Surgery

2,300



SOCIETY OF URODYNAMICS,
FEMALE PELVIC MEDICINE
& UROGENITAL
RECONSTRUCTION

700



7,100



3,000



American
Urological
Association

23,000



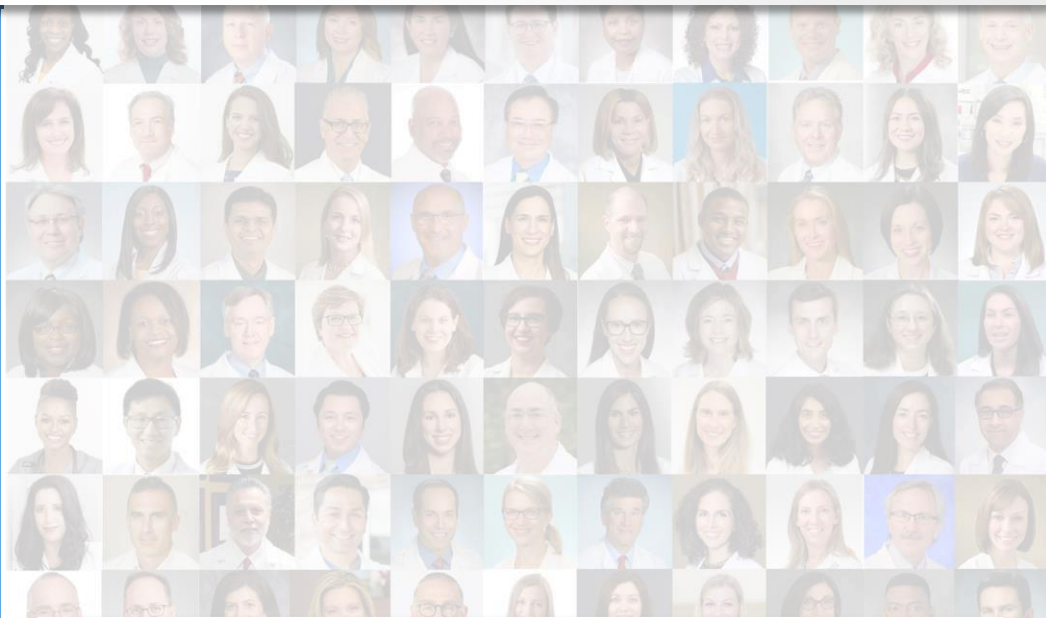
American College
of Obstetricians
& Gynecologists

58,000



Promoting the Highest Standards for Gynecologic Surgical Care

8,000



1

2

1

0

0

0

Who Disagrees?

DISAGREE

2,300

DISAGREE

700

DISAGREE

7,100

DISAGREE

3,000

DISAGREE

23,000

DISAGREE

58,000

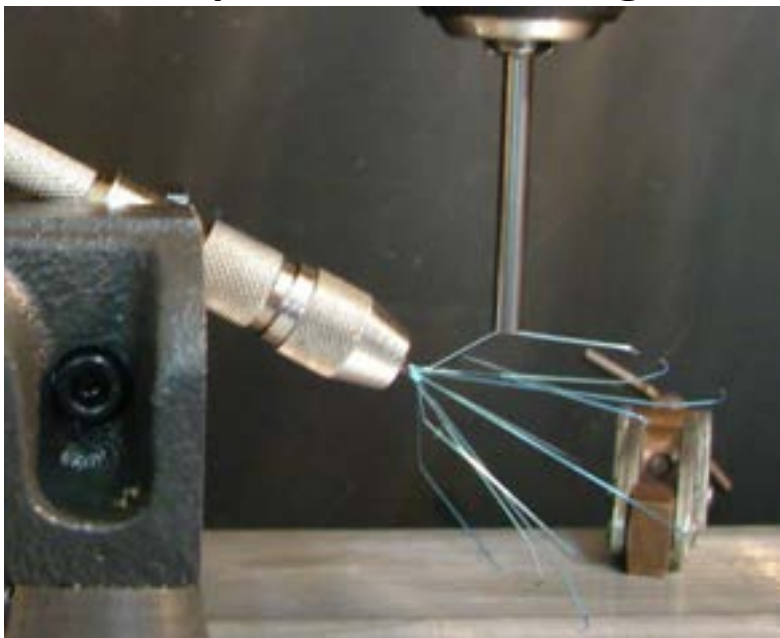
DISAGREE

8,000

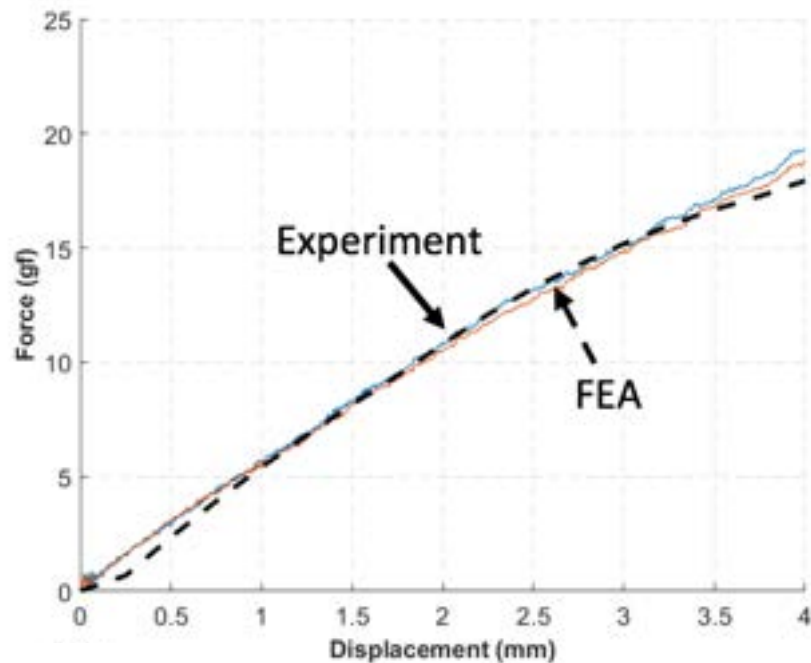


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Experimental Testing



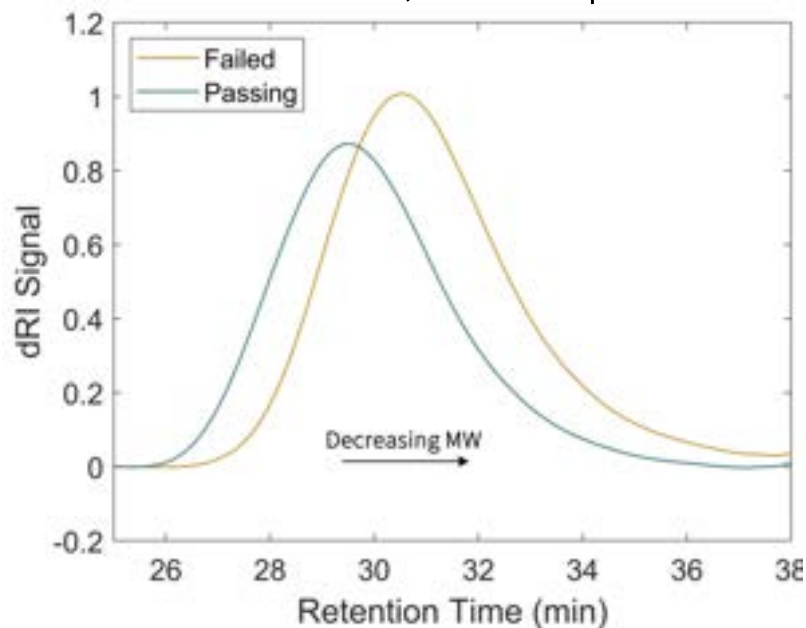
FEA – Experiment Comparison



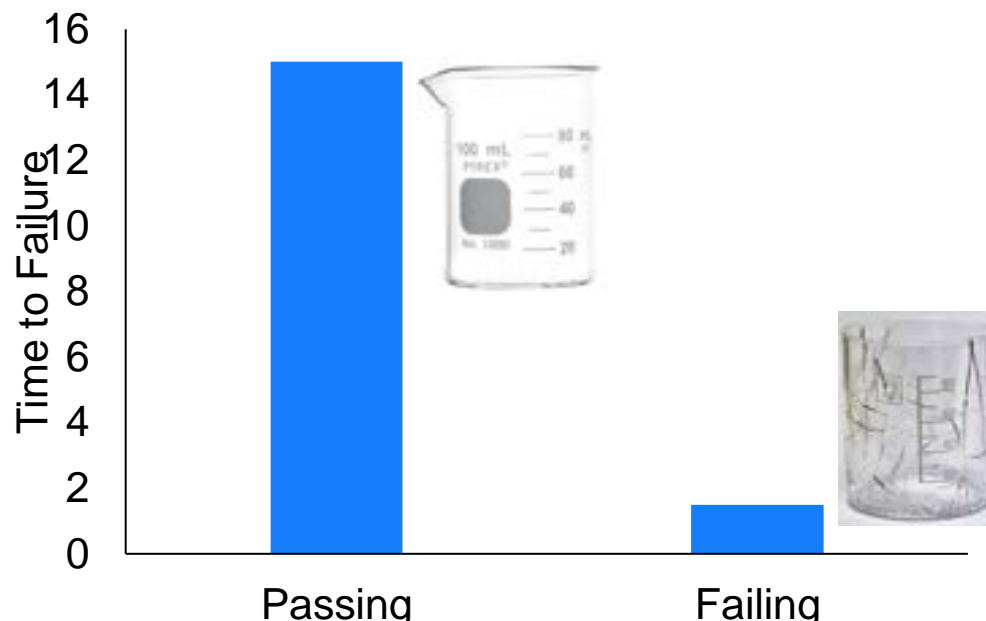
Scientific Imaging

- Goal is engaging, easily understood scientific results

Good Science, Hard to Explain



Good Science, Easier to Explain



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3D OR NOT 3D, THAT IS THE QUESTION · \$600

Jurors, Romans, countrymen,
lend me your **eyes**. I have come to bury **3D**,
not to praise **it**. The **cost** that **3D** do
lives after **it**; The good is oft **negated**
with **its lack of necessity**.

3D OR NOT 3D, THAT IS THE QUESTION · \$600

What is the famous quote
from Julius Ceasar about
cost of 3D vs. actual effectiveness?

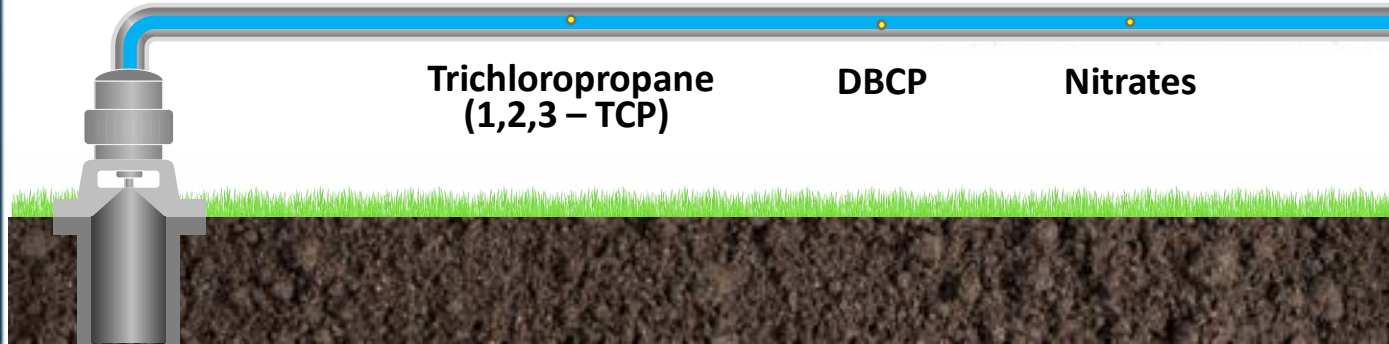
Some Concepts Are Complicated



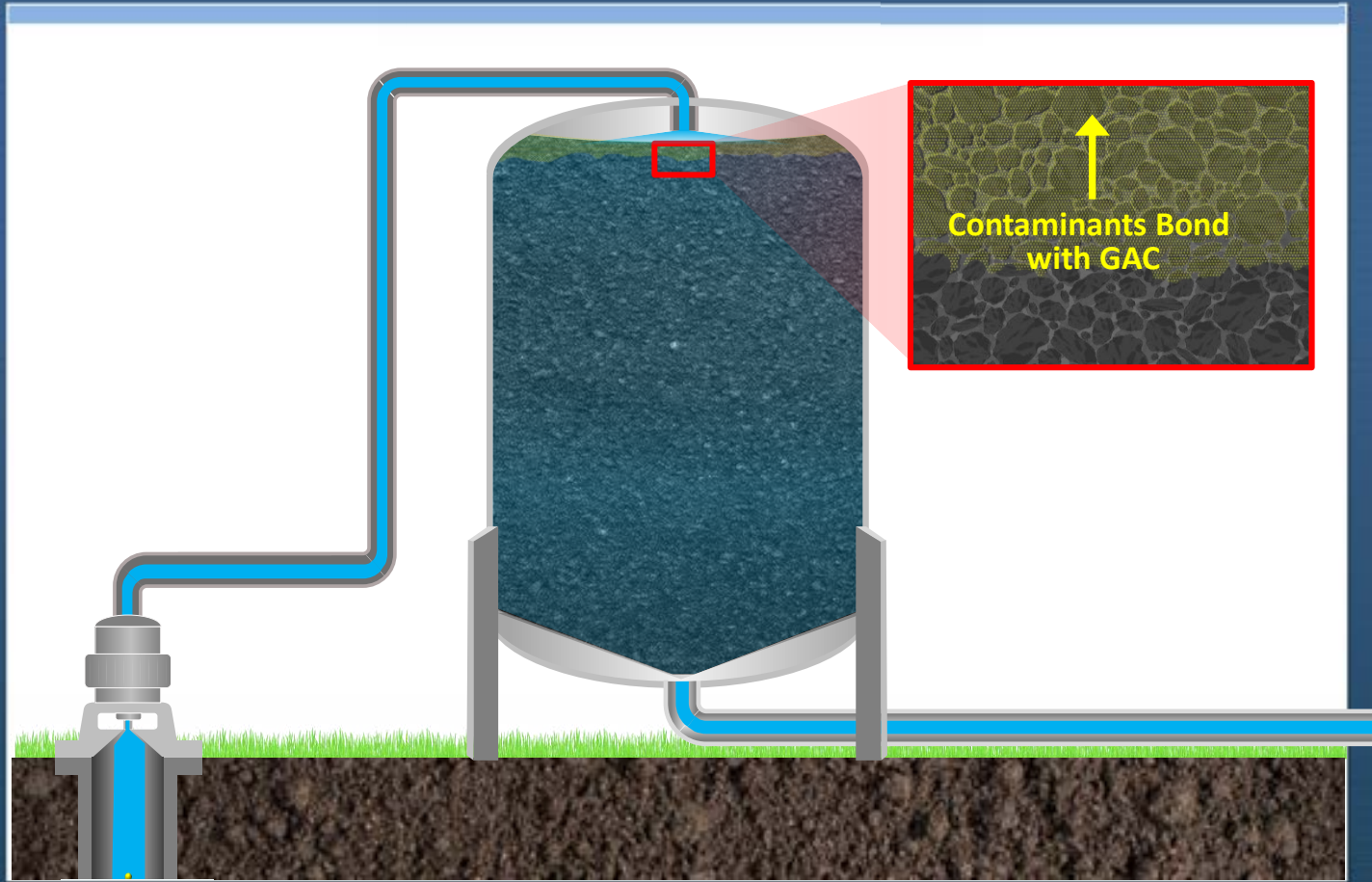
GAC Remediation



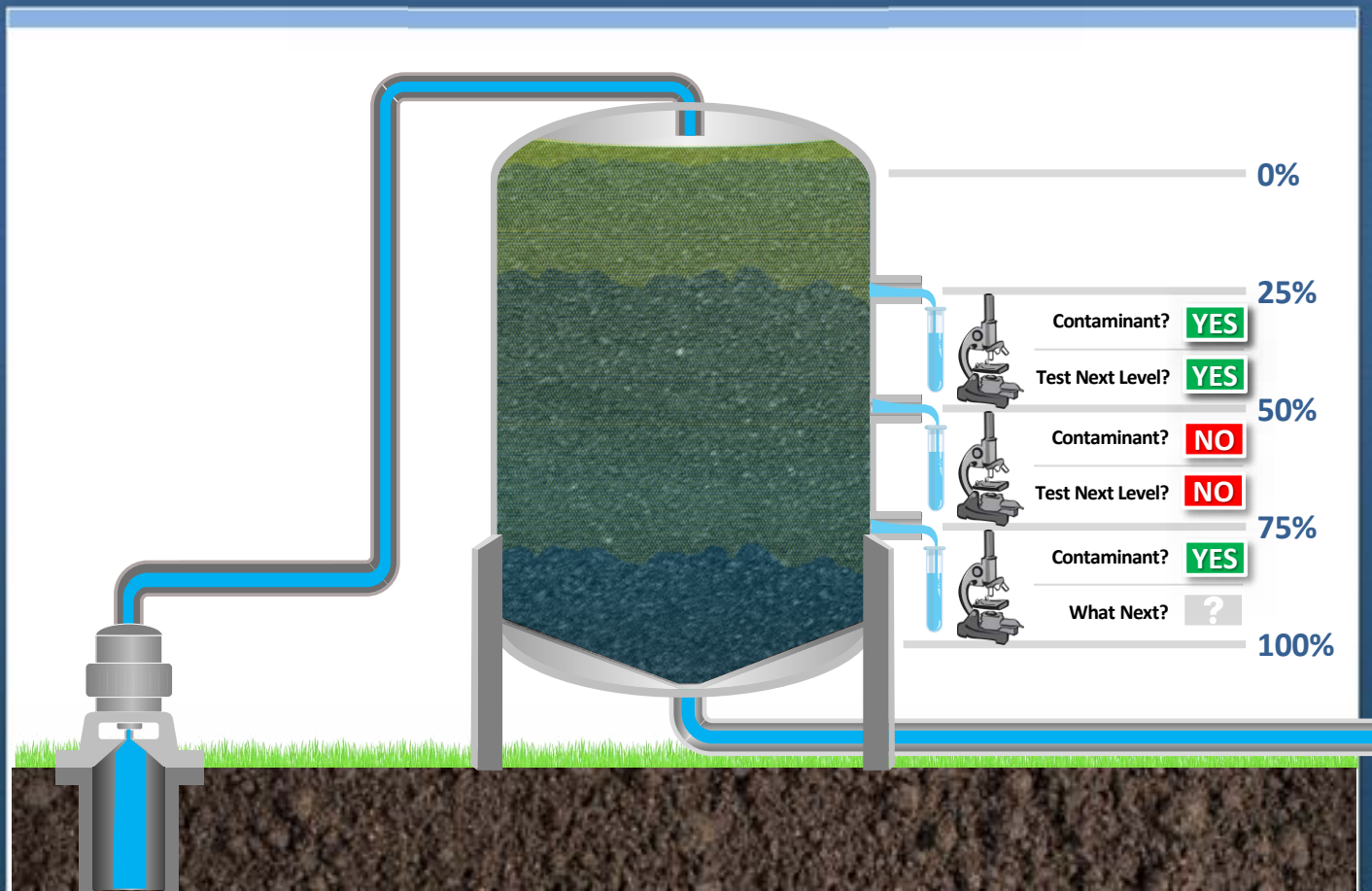
Granular
Activated
Carbon



GAC Remediation



Monitoring is Important



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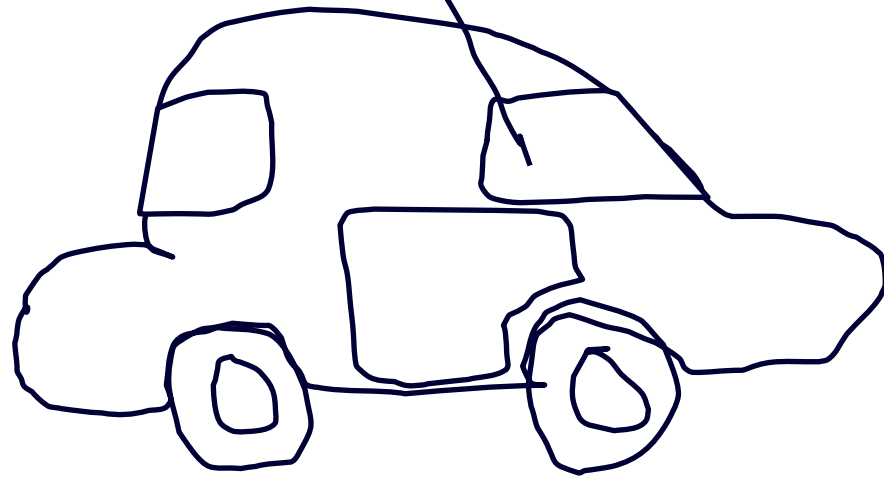
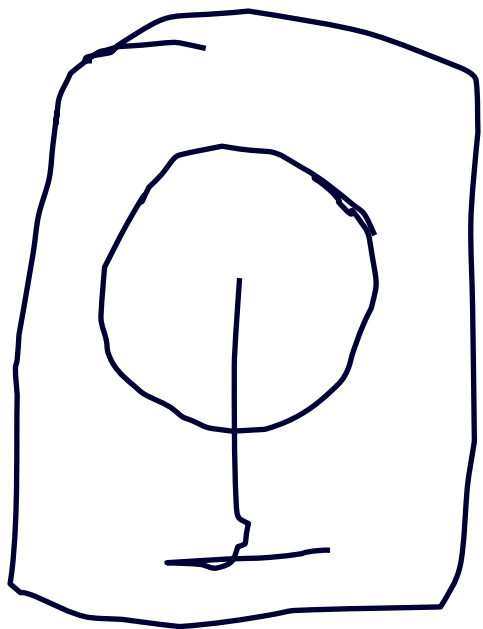
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DAILY DOUBLE

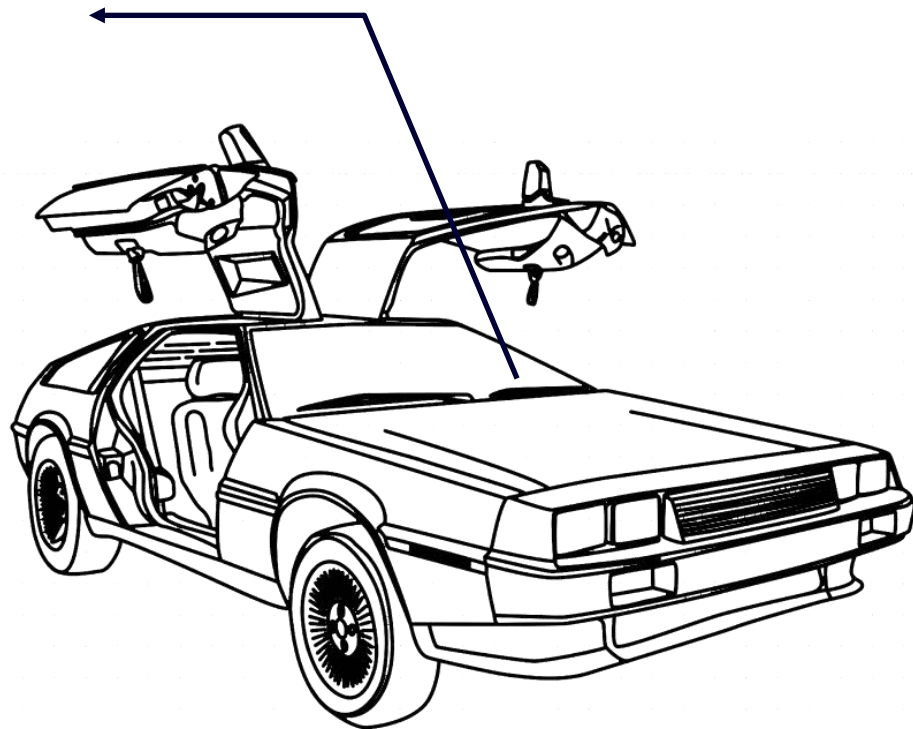
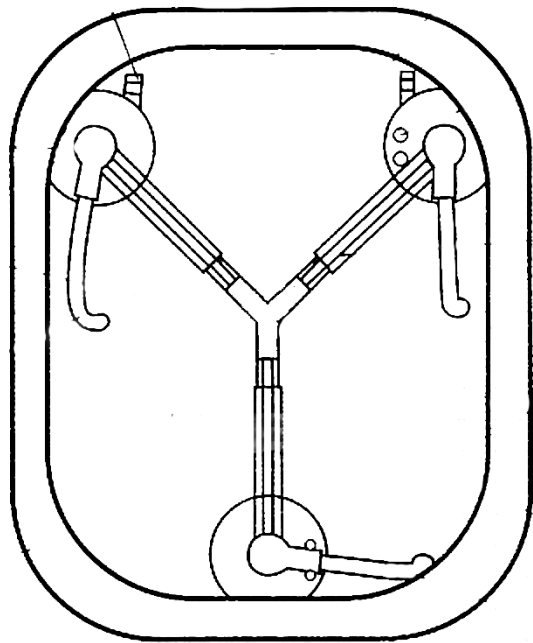
"TIME"S THEY ARE A "CHANGE"N · \$600

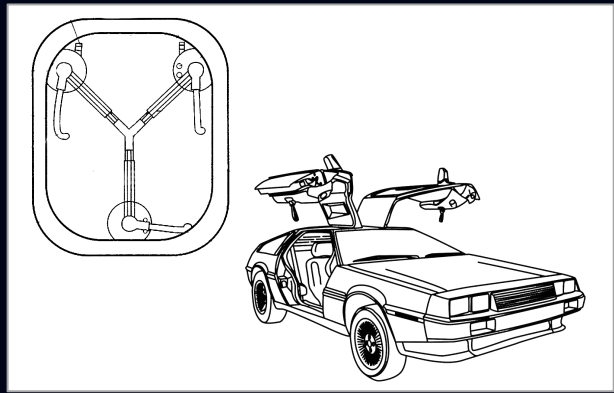
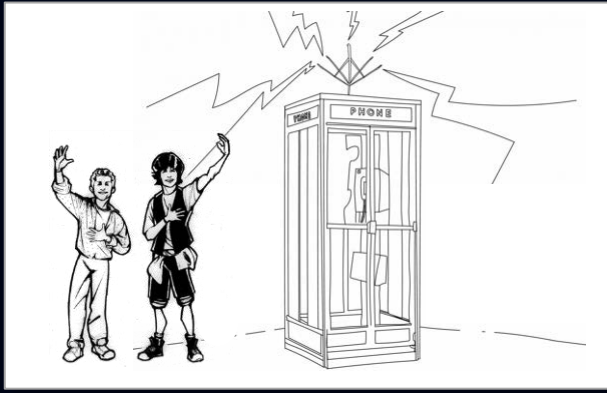
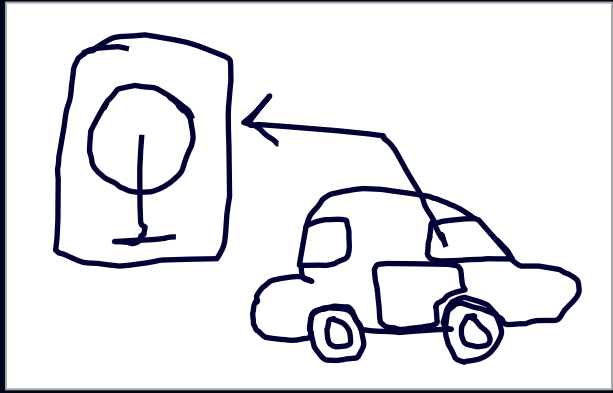
Dr. Emmett Brown patented this 1.21
JiggoWatt requiring time traveling
technology in 1985 to help Marty McFly
travel through time.

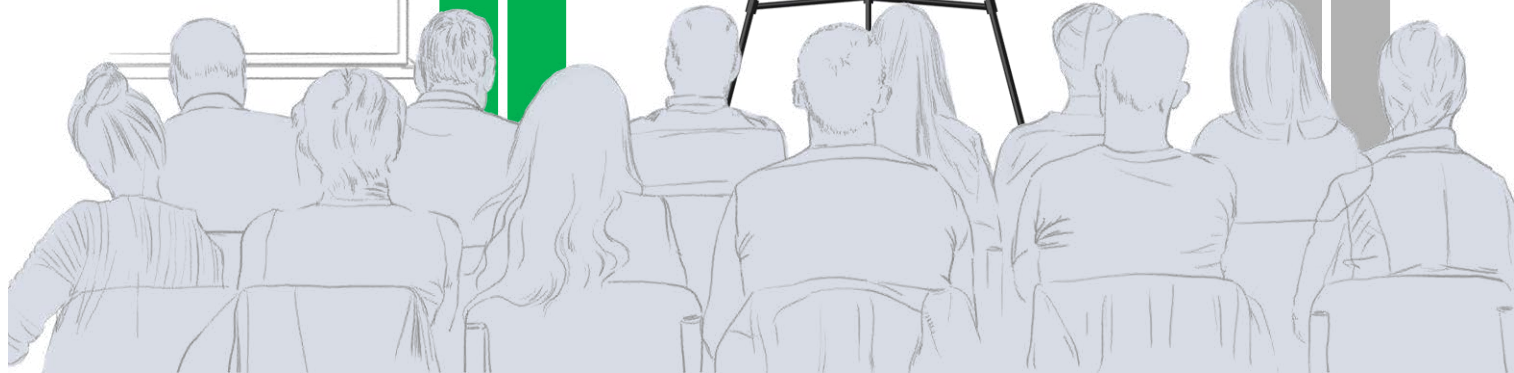
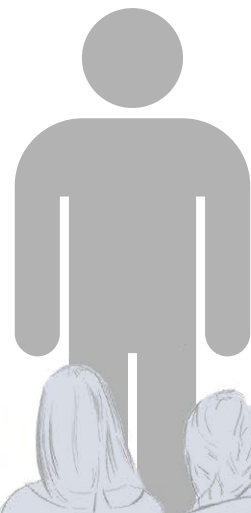
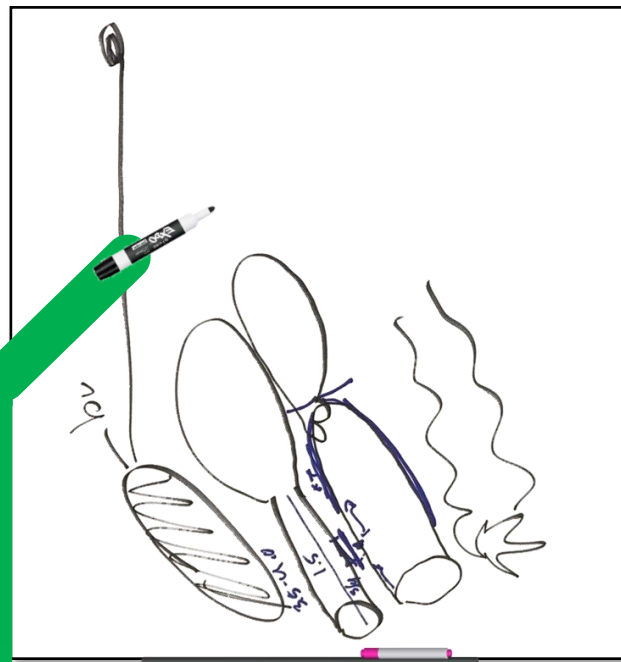
Draw it and name the movie.

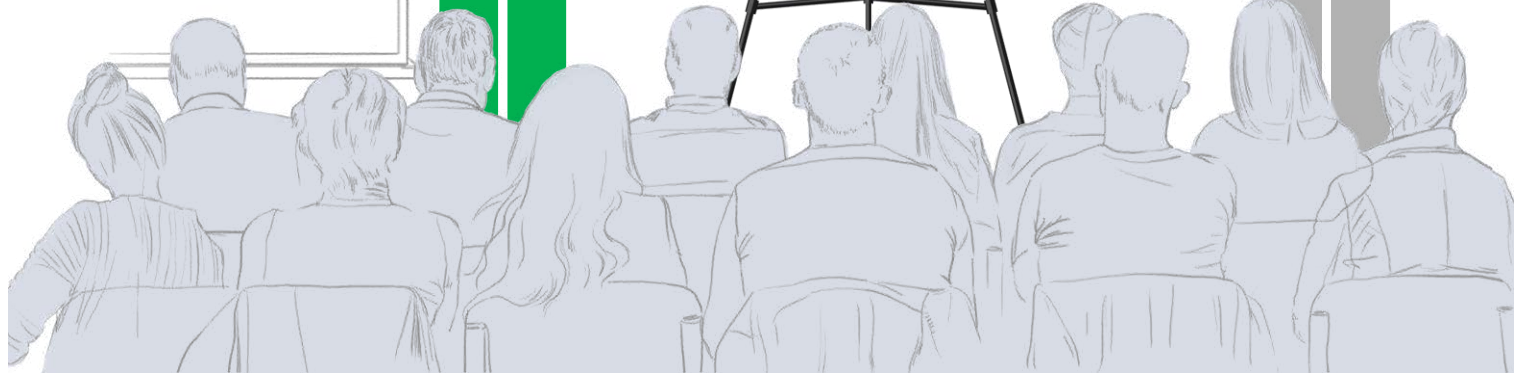
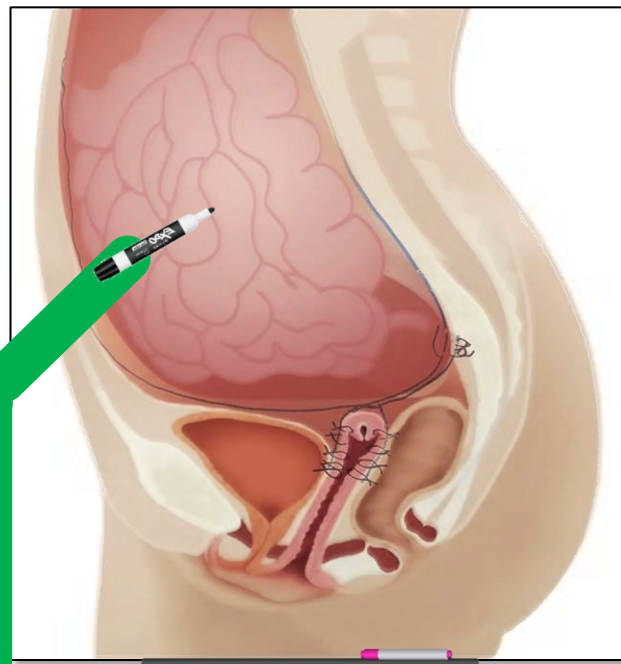












IADC 2024 MID-YEAR CONFERENCE

| "TIME"S THEY ARE A "CHANGE"N | YOU PUT YOUR GRAPHICS WHERE!? | THINGS THAT MAKE YOU GO ____ | 3D OR NOT 3D THAT IS THE QUESTION | THAT'S WHAT MAKES THEM BEAUTIFUL | CLOSING TIME |
|---------------------------------|----------------------------------|---------------------------------|--------------------------------------|-------------------------------------|--------------|
| \$200 | | | \$200 | | |
| \$400 | | | \$400 | \$400 | \$400 |
| | | \$600 | | \$600 | \$600 |
| \$800 | | \$800 | | \$800 | \$800 |
| | | \$1000 | \$1000 | \$1000 | \$1000 |

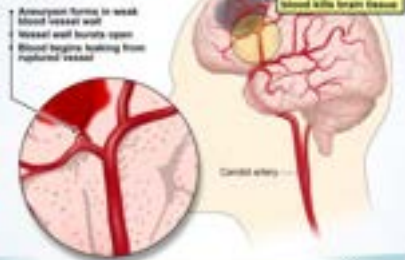
THINGS THAT MAKE YOU GO ____ · \$600

Too cartoony and you risk your audience not taking these graphics seriously. Too realistic and you risk your juror excusing themselves to go
[THROWUP SOUND]

THINGS THAT MAKE YOU GO ____ · \$600

What are anatomical graphics?

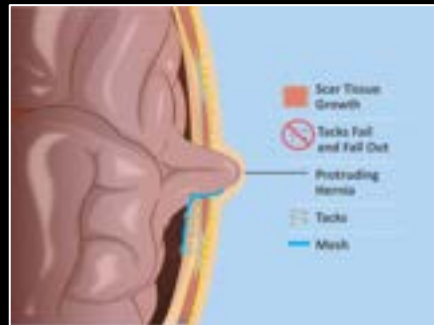
Hemorrhagic Stroke



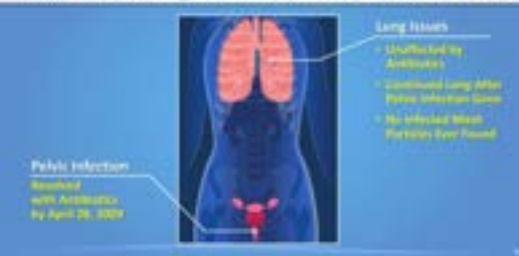
The Liver



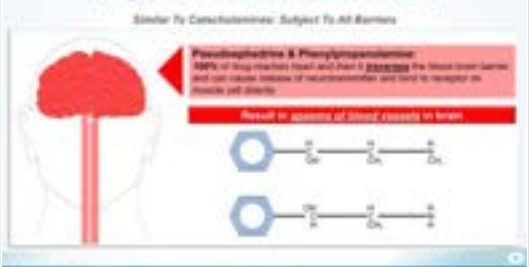
SPINE ANATOMY



Mrs. Carson's Lung Issues Not Related to Pelvic Infection



Phenylephrine Does NOT Cross Blood Brain Barrier



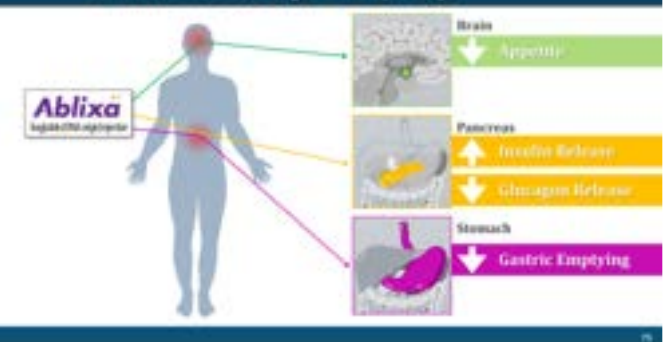
Avascular Necrosis



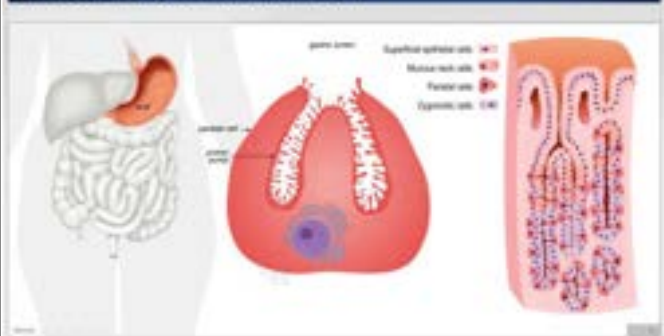
Adult Onset Asthma



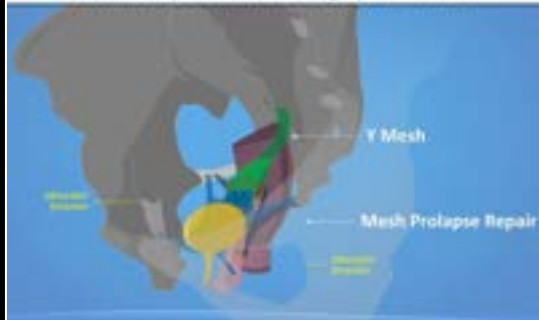
Ablixa Lowers Blood Sugar in Multiple Ways



Parietal Cells Make Up Some of the Stomach Lining



November 9, 2011: Revision Surgery With Y Mesh



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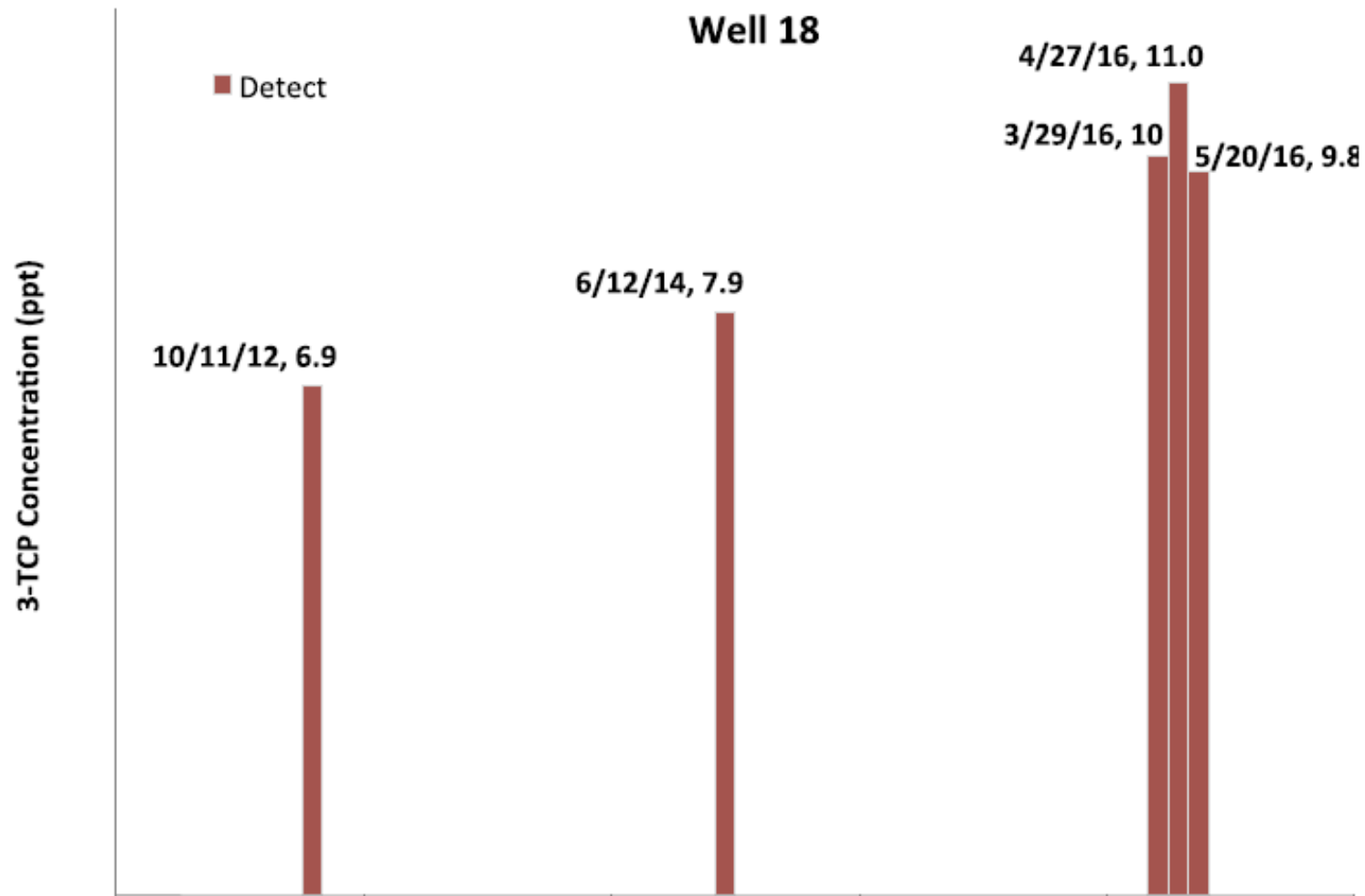
| "TIME"S THEY ARE A "CHANGE"N | YOU PUT YOUR GRAPHICS WHERE!? | THINGS THAT MAKE YOU GO ____ | 3D OR NOT 3D THAT IS THE QUESTION | THAT'S WHAT MAKES THEM BEAUTIFUL | CLOSING TIME |
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| \$200 | | | \$200 | | |
| \$400 | | | \$400 | \$400 | \$400 |
| | | | | \$600 | \$600 |
| \$800 | | \$800 | | \$800 | \$800 |
| | | \$1000 | \$1000 | \$1000 | \$1000 |

THINGS THAT MAKE YOU GO ____ · \$800

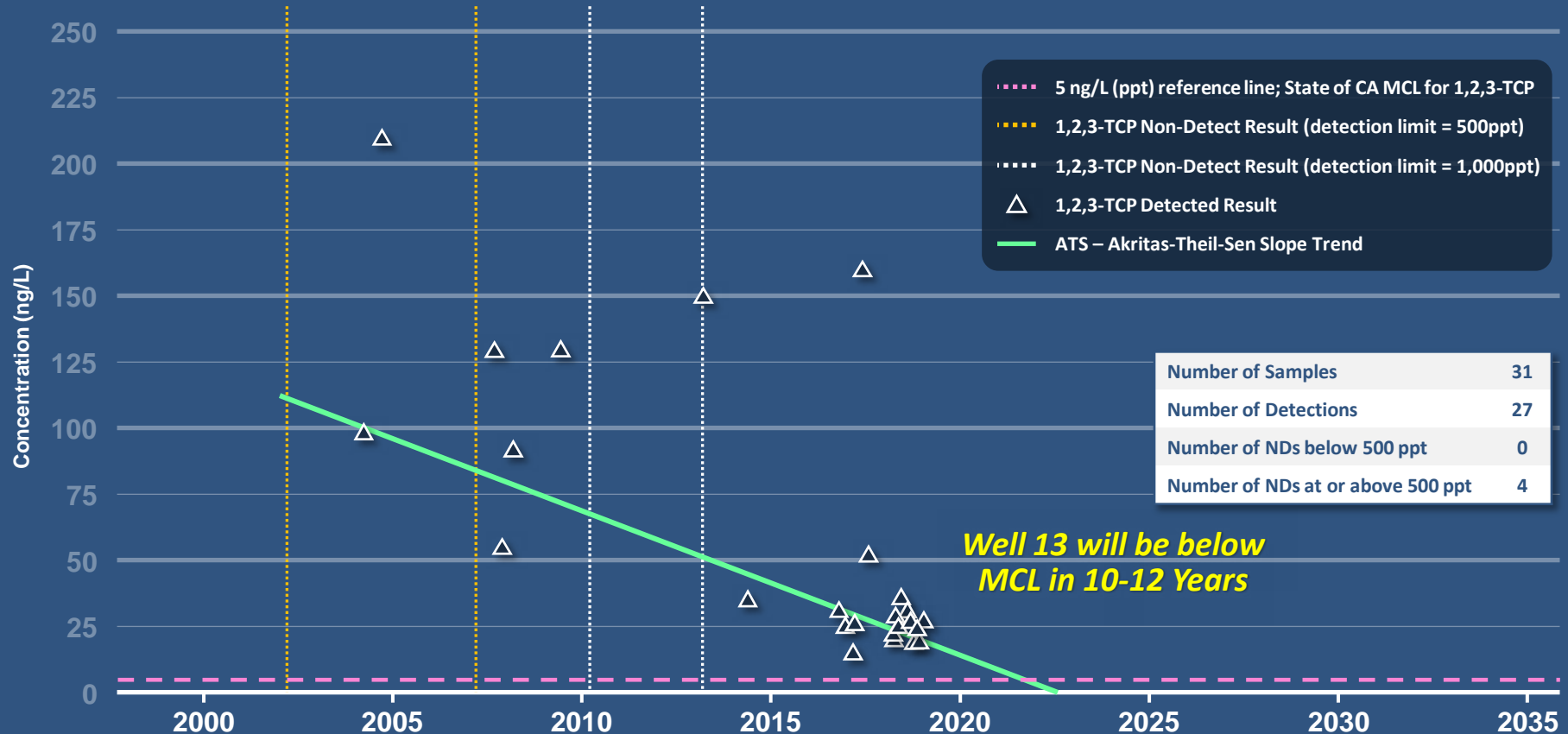
Taught in digestible components, these can have a huge impact and persuade your jury. Presented sloppy or in overwhelming quantities, your jury may be left saying ... **[HUH?]**

THINGS THAT MAKE YOU GO ____ · \$800

What are complex data charts?



City Well AM-13, ATS



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| \$400 | | | \$400 | \$400 | \$400 |
| | | | | \$600 | \$600 |
| \$800 | | \$800 | | \$800 | \$800 |
| | | \$1000 | \$1000 | \$1000 | \$1000 |

CLOSING TIME · \$400

Over-reaching with these in opening
can get your graphics thrown out,
but an effective statement in closing
could just get you the win.

CLOSING TIME · \$400

What are slide titles?

Do Not Argue – Do Not Overpromise



Drug Is Not Responsible for Johnny's Current Issues

- Drug is not responsible for the way Johnny looks today and did not cause him to develop abnormality
- There are no reports in Johnny's medical records of any doctor reporting that he had abnormalities or that Johnny or his mother



What The Evidence Will Show

- There are no reports in Johnny's medical records of any doctor reporting that he had abnormalities or that Johnny or his mother complained prior to this lawsuit
- Only after his case was first set for trial did Johnny's mother

Before You Start... Know What Your Judge Permits

Judge Kennelly

U.S. District Judge
N.D. Illinois

**NO TESTIMONY
IN GRAPHICS!**



Judge Powell
Philadelphia Court
of Common Pleas

**NO GRAPHICS
IN OPENING
OR CLOSING!**



Judge Blake
U.S. District Judge
Maryland

**NO
DOCUMENTS
IN OPENING**



Judge Ungaro
Southern District
of Florida

**EXCHANGE
OPENING
GRAPHICS 30 DAYS
IN ADVANCE**



Judge Fallon

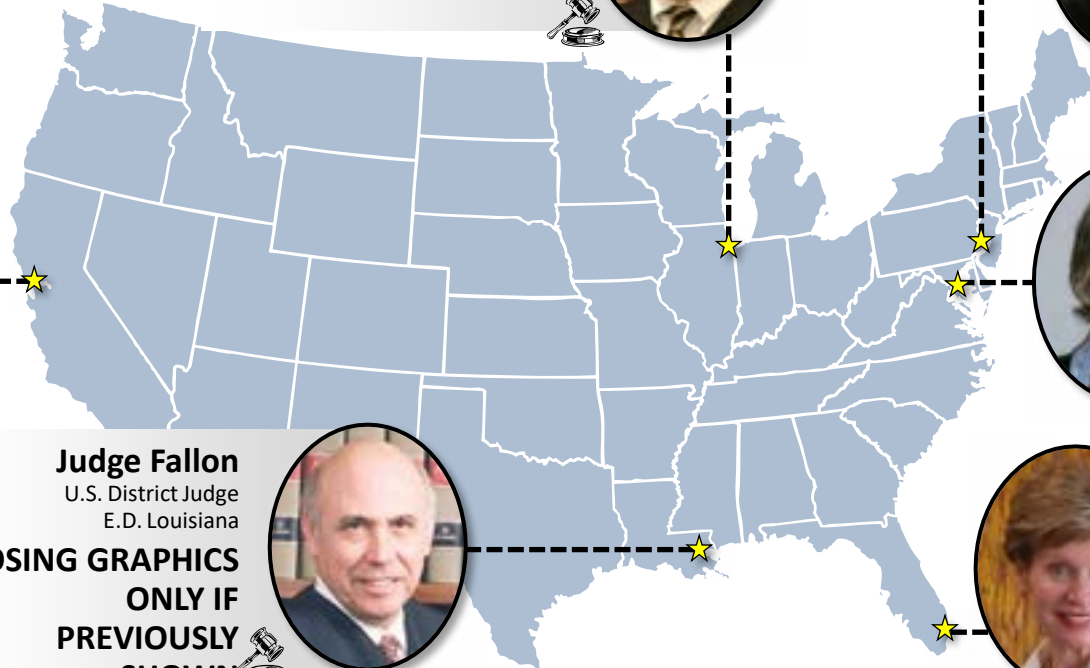
U.S. District Judge
E.D. Louisiana

**CLOSING GRAPHICS
ONLY IF
PREVIOUSLY
SHOWN**



Judge Breyer
USDC ND of California

**SHOW
WHATEVER
YOU WANT**



The Weapons At Your Disposal

ELMO



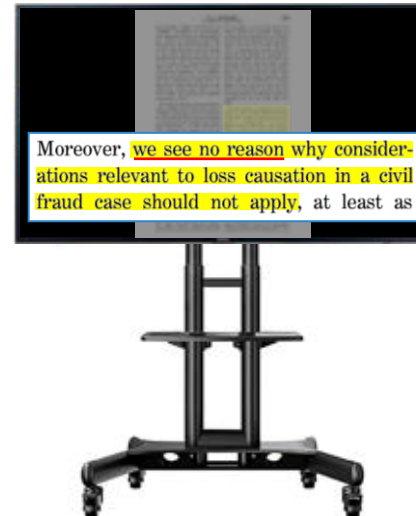
PowerPoint Slides



Flip Charts



OnCue / Trial Director



Boards (Dry Erase/Magnet)



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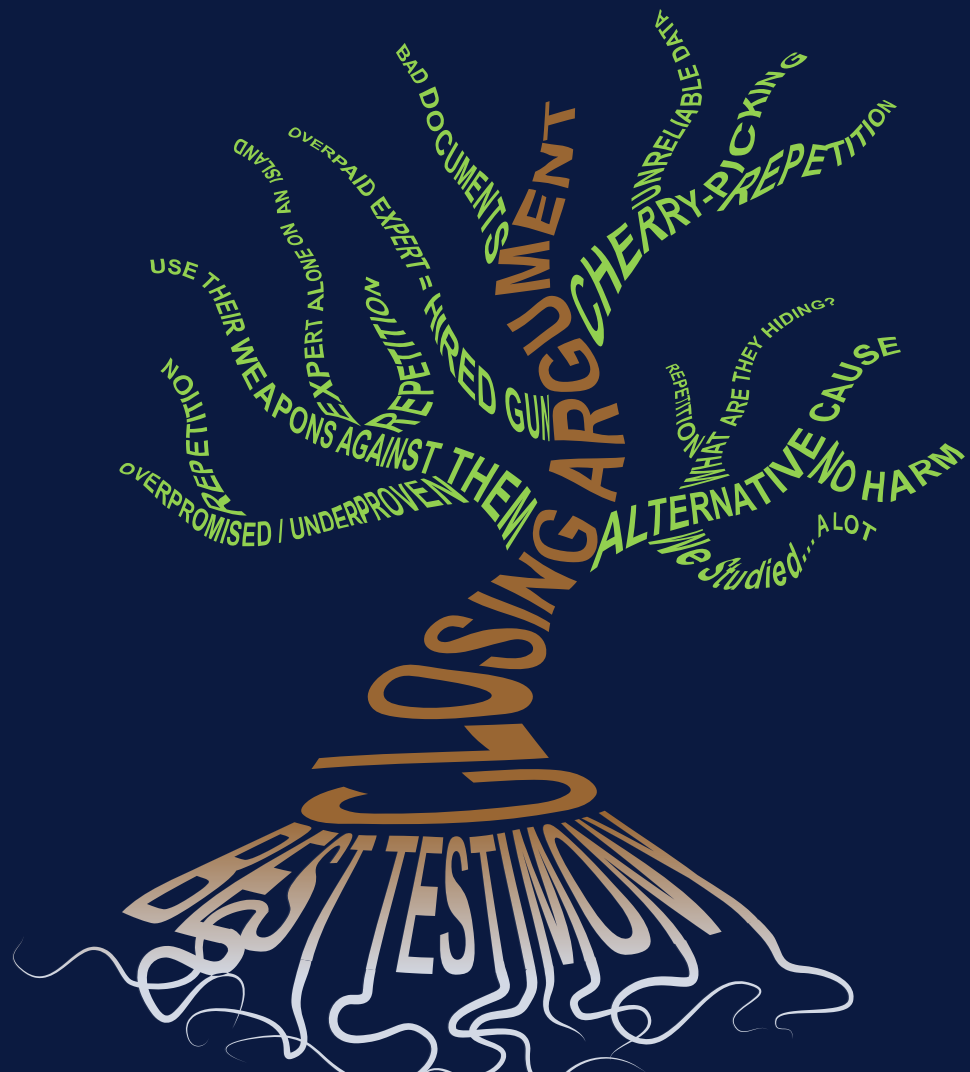
| "TIME"S THEY ARE A "CHANGE"N | YOU PUT YOUR GRAPHICS WHERE!? | THINGS THAT MAKE YOU GO ____ | 3D OR NOT 3D THAT IS THE QUESTION | THAT'S WHAT MAKES THEM BEAUTIFUL | CLOSING TIME |
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| | | | | \$600 | \$600 |
| \$800 | | \$800 | | \$800 | \$800 |
| | | \$1000 | \$1000 | \$1000 | \$1000 |

CLOSING TIME · \$800

Shared by all types of litigation
regardless of Environmental, Products
Liability, Patent, Complex Financial or
Contract Dispute,

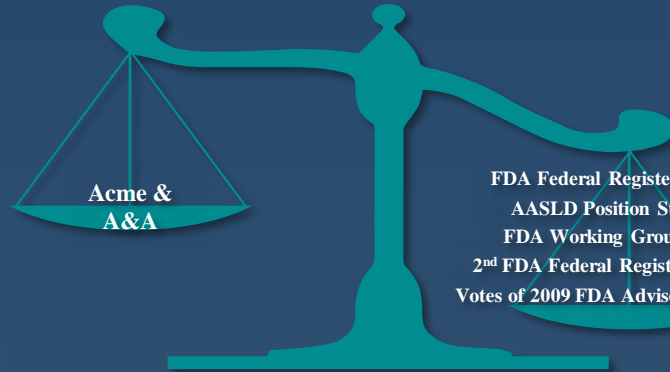
CLOSING TIME · \$800

What are closing themes?



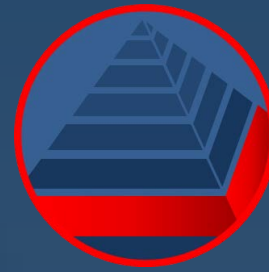
The True Weight of the Evidence

Weighing of the Evidence



Acme &
A&A

FDA Federal Register Statement
AASLD Position Statement
FDA Working Group Report
2nd FDA Federal Register Statement
Votes of 2009 FDA Advisory Committee

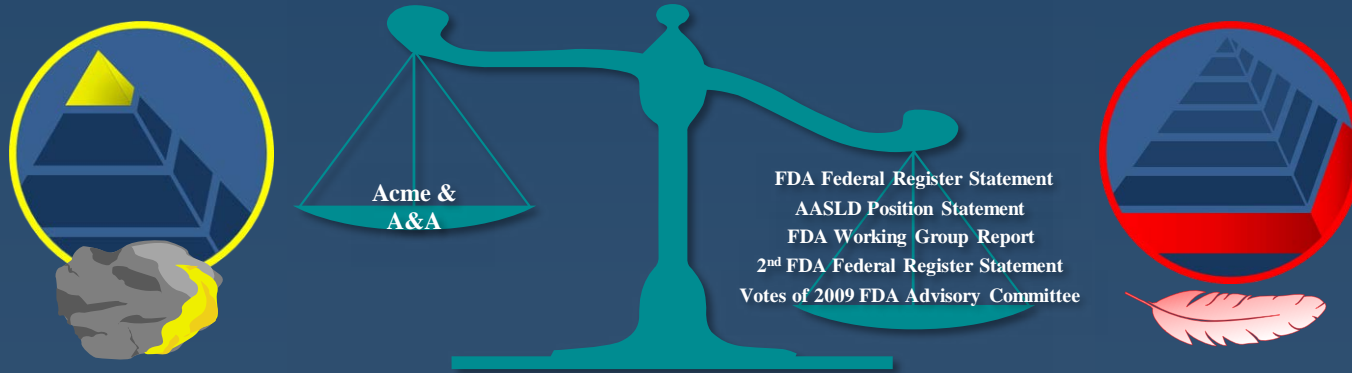


- 150 Clinical Studies
- Animal Studies
- Used in Hospitals Across the Country
- Billions of Doses Each Year
- Used by Doctors and their Families

- AERs
- Registry Reports

The True Weight of the Evidence

Weighing of the Evidence



- 150 Clinical Studies
- Animal Studies
- Used in Hospitals Across the Country
- Billions of Doses Each Year
- Used by Doctors and their Families

- AERs
- Registry Reports

Plaintiff's Story Does Not Add Up

Nylenol: The Basics



**NOT EXTRA
STRENGTH
NYLENOL**

- 500 mg APAP in every pill
- 1000mg (1 gram) in every dose
- (2 pills per dose)



More Likely True Than Not True



50/50

Likely

Reasonable

Plausible

Potential

Possible

Theoretical

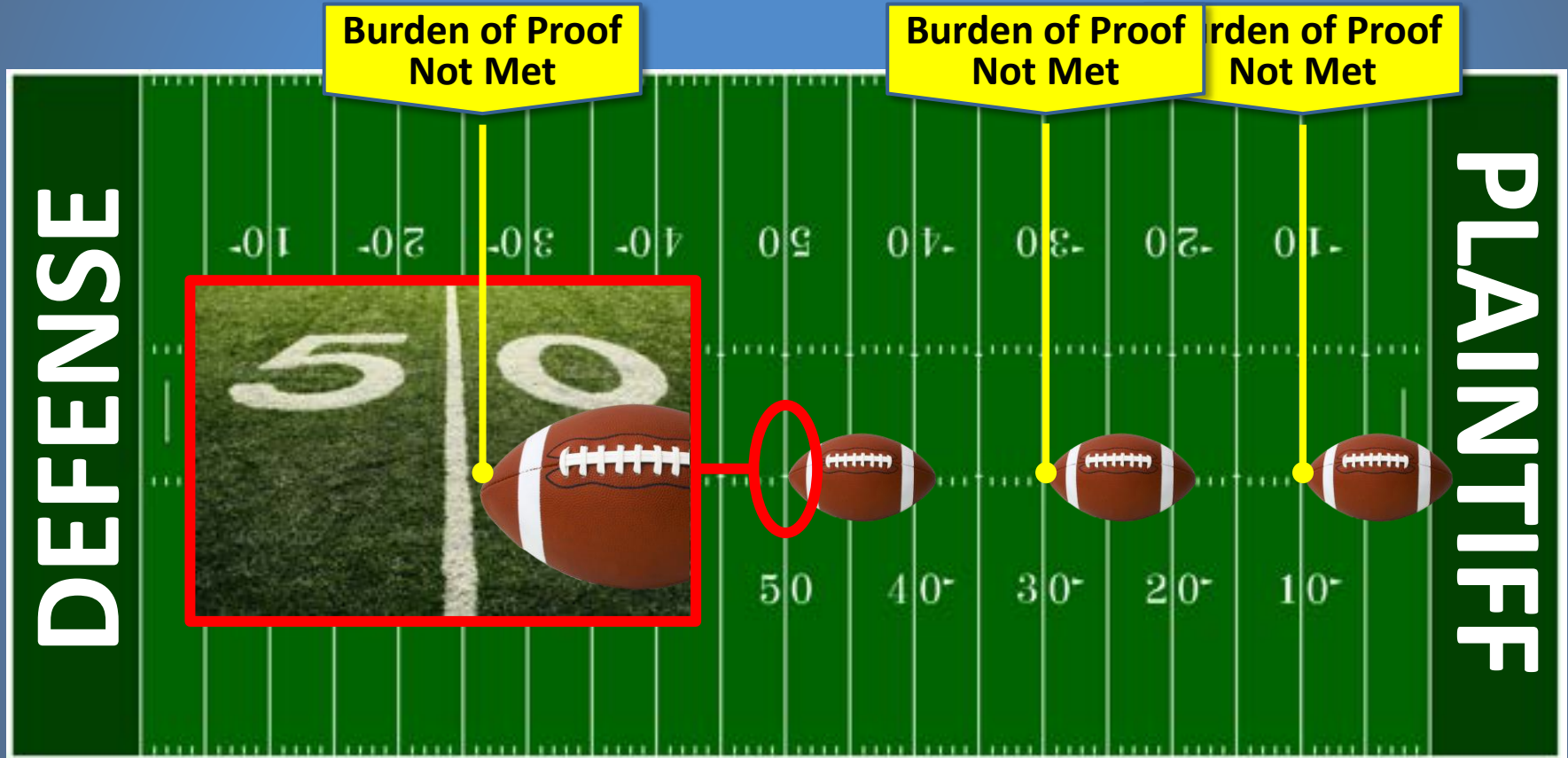
Hypothetical

Suspicious

Unclear

Highly Unlikely

Preponderance of Evidence



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| | | | | \$600 | \$600 |
| \$800 | | \$800 | | \$800 | |
| | | \$1000 | \$1000 | \$1000 | \$1000 |

CLOSING TIME · \$600

Full of questions that you must guide your audience through, but be careful about using them in slides as they are rarely finalized before you present.

CLOSING TIME · \$600

What are verdict forms?

VERDICT FORM

VERDICT FORM

1. PLAINTIFF'S CLAIMS

A. NEGLIGENT DESIGN CLAIM

1. Did Plaintiff prove, by a preponderance of the evidence, each of the three elements of his negligent design claim?
- Yes ☐ No ☒

Regardless of how you answered Question 1, proceed to Question 2.

B. FAILURE-TO-WARN CLAIM

2. Did Plaintiff prove, by a preponderance of the evidence, each of the three elements of his failure-to-warn claim?
- Yes ☐ No ☒

If you rendered a verdict in favor of Defendants on both of Plaintiff's claims, then your verdict is complete.

If you rendered a verdict against Defendants on one or both of Plaintiff's claims, then proceed to Question 3.

Verdict form

We, the jury, find as follows on the claims of the plaintiff, Robert Redford against the Defendants, Acme Inc. and Acme Laboratories:

| | | |
|--|-------------------------------------|--|
| First claim - strict liability: | <input checked="" type="checkbox"/> | for plaintiff Robert Redford for defendants Acme Inc. and Acme Laboratories |
| Second claim - negligence: | <input checked="" type="checkbox"/> | for plaintiff Robert Redford for defendants Acme Inc. and Acme Laboratories |
| Third claim - negligent misrepresentation: | <input checked="" type="checkbox"/> | for plaintiff Robert Rowley for defendants Acme Inc. and Acme Laboratories |
| Fourth claim - fraud: | <input checked="" type="checkbox"/> | for plaintiff Robert Redford for defendants Acme Inc. and Acme Laboratories |

Verdict Form Question 2:

Did Defendant adequately warn Dr. Smith of the risks of the Full Body Repair System?

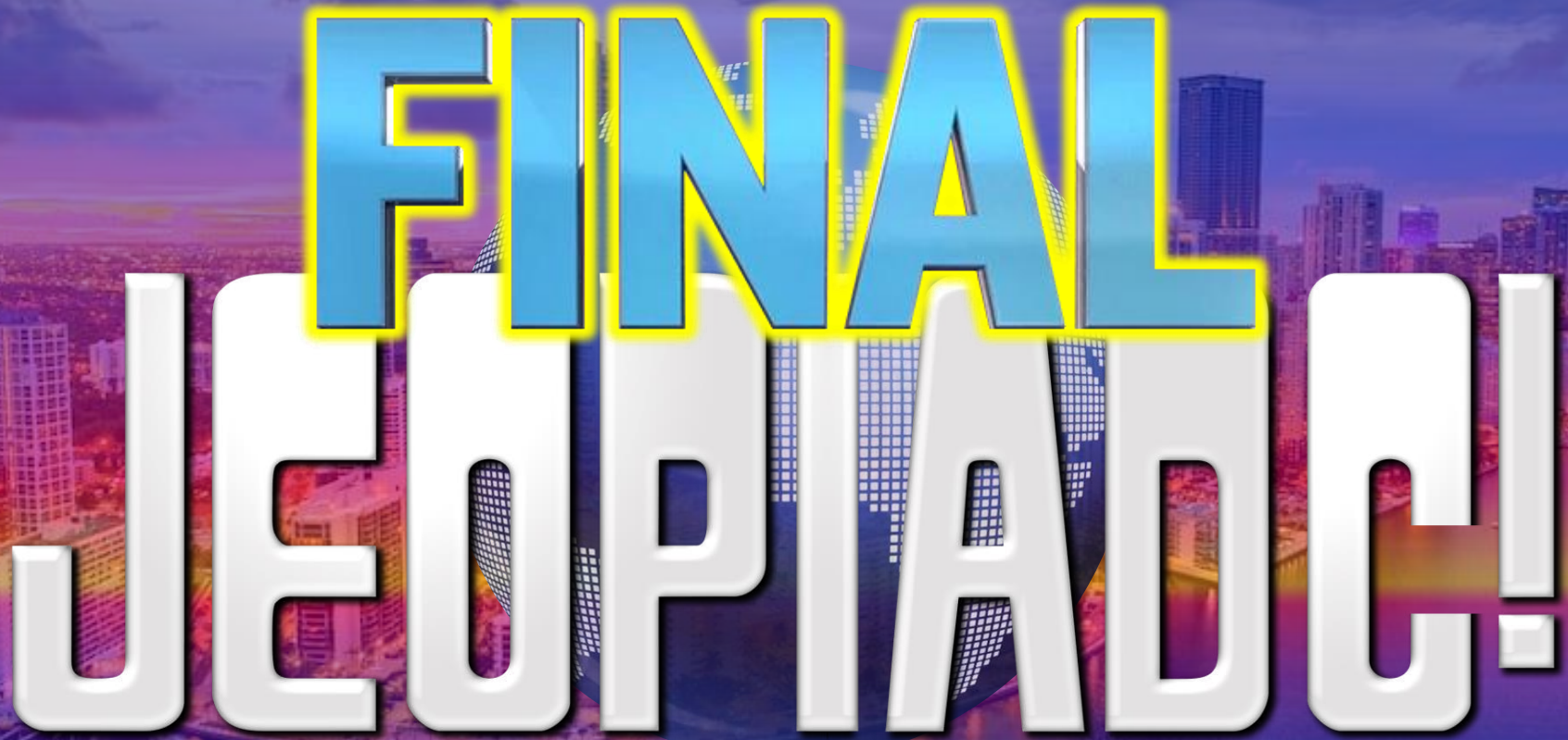


YES



NO





FINAL JEOPARD!

2024 MID-YEAR CONFERENCE

FINAL JEOPARDY

Two Questions: What are you going to say when its on the screen?
What do you need your audience to understand before you move on to the next graphic?

Paul Briant



Michelle Schaffer



James Haase



What is
good,
explainable,
science?

What is a
persuasive
argument?

What are the
questions you need
to ask to create
an effective,
impactful graphic
in litigation?

A Picture is Worth a Thousand Words: Using Visuals at Trials and International Arbitrations

VERIFICATION CODE

MYM%

FOR CLE CREDIT:

1. Write down or take a photo of this Verification Code.

You **MUST** complete the evaluation to earn CLE Credit.

2. Either click the “Evaluation” button from the program on your **Meeting App** to enter the Verification Code and complete the Program Evaluation now.

OR

3. Save the code to take the evaluation later.