IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF TEXAS
BEAUMONT DIVISION

FILED
U. S. DISTRICT COURT
EASTERN DISTRICT OF TEXAS
DEC 28 1970
JAMES R. COONEY, CLERK
By DEPUTY

CLARENCE BOREL :

VS. : CIVIL ACTION NO. 6449

FIBREBOARD PAPER PRODUCTS :
CORPORATION, ET AL :

TO: ALL DEFENDANTS AND INTERVENOR IN THE ABOVE STYLED AND NUMBERED CAUSE:

Gentlemen: Please take notice that the deposition of Dr. Richard Kenneth Ricks, 6436 Fannin Street, Houston, Texas, will be taken on behalf of the plaintiffs upon certain written interrogatories, of which a copy is herewith served upon you, and such cross-interrogatories as may be served upon plaintiffs herein, before Dahl & Reed, Court Reporters, Houston First Savings Building, Houston, Texas 77002.

STEPHENSON AND THOMPSON

By _____
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IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF TEXAS
BEAUMONT DIVISION

CLARENCE BOREL	:	
VS.	:	CIVIL ACTION NO. 6449
FIBREBOARD PAPER PRODUCTS CORPORATION, ET AL	:	

DIRECT INTERROGATORIES TO BE PROPOUNDED
TO DR. RICHARD KENNETH RICKS,
HOUSTON, TEXAS

1.

Please state your name, residence and place of business.

2.

Please state your profession.

3.

Please state how long you have been engaged in the practice of such profession.

4.

Please state where you received your preliminary training.

5.

Please state where you received your intern training.

6.

Please state what additional training you have had.

7.

Please state whether or not your license to practice medicine is on record in Harris County, Texas.

8.

Do you practice medicine as a full-time occupation?

9.

Are you associated with any clinic or medical group? If so, please state the name.

10.

Do you belong to any professional society or group? If so, please state which ones.

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11.

Do you practice in any field of medical specialty? If so, please state in which specialty you engage.

12.

If you have had any specialized medical training, please state what it was and where such specialized medical training was taken.

13.

For the benefit of the jury, please state your age and the number of years you have been actively engaged in the practice of medicine.

14.

Have you ever written any articles concernin g your field of specialty, given any lectures, or received any special awards or citations for service in your field of specialty?

15.

Please state where you are presently residing and practicing medicine.

16.

Please state whether or not you have ever had occasion to see and treat Clarence Borel, deceased?

17.

Please state the first date that you saw Clarence Borel.

18.

Please state the history given you by the patient.

19.

Please state the nature of the complaints which the said Clarence Borel made to you at that time.

20.

Please state what your medical examination consisted of, listing the tests and methods used for examining the patient.

21.

Please state your diagnosis of the patient's physical, mental or nervous condition at that time, basing your answers to this and all following questions upon reasonable medical certainty. Include in your answer a description of pain which the patient has suffered, if any.

22.

Please state what your prognosis of the patient's physical, mental or nervous condition was at that time.

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23.

If your examination of the patient consisted of making x-rays and if the x-rays were used in the formation of your medical opinion concerning the patient's condition, please state whether or not these x-rays were taken under your general direction and supervision.

24.

If you have said that you made x-rays and that you used them as a basis for any part of your medical opinion concerning the patient, please state what the x-ray findings were which you considered in forming your medical opinion.

25.

Did you have occasion later to see the said Clarence Borel with reference to the same condition?

26.

Please state the number of occasions and state with some detail what you found on each occasion.

27.

Please give the date of the last time you saw the said Clarence Borel concerning this condition.

28.

Please state your diagnosis at that time and likewise give your prognosis as to the said Clarence Borel's condition.

29.

Did you perform any surgery on Clarence Borel, or assist in any surgery on him? If so, please describe this surgery in detail.

30.

In your medical opinion, did Clarence Borel suffer from mesothelioma?

31.

Was this mesothelioma in the right lung?

32.

Is mesothelioma a form of cancer?

33.

Was it diffuse, or wide-spread, about the body of Clarence Borel?

34.

Did you perform a pulmonary function study on Clarence Borel? If so, please state the result of this study.

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35.

Was the removal of the patient's right lung a medical necessity?

36.

Please state whether or not specimens of the patient's lung were submitted to a pathologist for analysis?

37.

Please state whether or not this analysis revealed that the patient was suffering from asbestosis.

38.

Do you agree that the patient was suffering from asbestosis?

39.

Please state whether or not asbestos bodies were observed which had invaded the lung tissue.

40.

Please hand to the court reporter a copy of your charges for medical services rendered to Mr. Borel.

41.

Were the charges set forth in your statement reasonable charges for the medical services you rendered to the patient?

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POTTER
BOREL
CRAWFORD.

CERTIFICATE OF SERVICE BY MAIL

I, Ward Stephenson, hereby certify that a true and correct copy of the foregoing instrument was on this the 23 day of Dec., 1970, mailed to the following named attorneys:

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