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SC Court of Appeals

THE STATE OF SOUTH CAROLINA
In The Court of
Appeals

APPEAL FROM ORANGEBURG
COUNTY in the Court of Common Pleas
Judge Maite Murphy

Case No.: 2023-CP-38-0033 J

Serge R. Wandji, Plaintiff/Appellant
v.
The Regional Medical Center, Defendant/Respondent

RECORD ON APPEAL
Volume II (Pages 315-593)

Appellate Case No.2025-000108

s/Serge Wandji
Pro se Appellant

STATE OF SOUTH CAROLINA
COUNTY OF ORANGEBURG

) IN THE COURT OF COMMON PLEAS
)
) CASE NO.: 2023-CP-38-00331

Serge R. Wandji,
Plaintiff,
v.
The Regional Medical Center
and Dr. John H. Samies,
Defendants.

DEPOSITION OF
DR. JOHN H. SAMIES

Tuesday, September 17, 2024
4:00 p.m. - 4:38 p.m.

The deposition of DR. JOHN H. SAMIES was taken on behalf of the Plaintiff on the 17th day of September, 2024 at the Orangeburg County Administrative Offices, 1437 Amelia Street, 3rd Floor Training Room, Orangeburg, South Carolina before Amber Scarborough, Court Reporter and Notary Public in and for the State of South Carolina, pursuant to Notice of Deposition and/or agreement of counsel.



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APPEARANCES

Serge R. Wandji
Plaintiff Pro Se

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Attorney for Defendant

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EXHIBITS

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(Letter from Dr. Samies to Roy A. Howell, III, dated 12/5/2022)	
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(Affidavit of John H. Samies, M.D.)	
Plaintiff's Exhibit Number 4	30
(Letter to Commissioner T. Beck, Amended Prehearing Brief dated 1/12/2023)	
Plaintiff's Exhibit Number 5	31
(RMC letter to All Employees regarding COVID and Other Updates (8/6/2021))	
Plaintiff's Exhibit Number 6	32
(Outbreak Line Listing Form for Patients)	
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STIPULATIONS

It is stipulated and agreed that this deposition is being taken pursuant to the South Carolina Rules of Civil Procedure.

It is stipulated by and between counsel and the witness that the reading and signing of the following deposition be, and the same are, hereby waived.



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1 DR. JOHN H. SAMIES, having been duly sworn, deposes
2 and testifies as follows:

3 DR. SAMIES - EXAMINATION BY MR. WANDJI:

4 Q: All right. Dr. John Samies, will you please
5 state your name and title for the record?

6 A: John Hunter Samies, M.D., Medical Doctor.

7 Q: All right. You are under oath, Dr. Samies, and
8 I'm going to ask you some questions and I
9 expect an answer to each of my questions. Your
10 lawyer cannot help you outside any of those
11 questions. If you don't understand any
12 question, please just say so and I will repeat
13 the question. Do you understand, sir?

14 A: Yes.

15 Q: Okay. Dr. Samies, do you practice medicine at
16 the Regional Medical Center?

17 A: The Regional Medical Center no longer exists.
18 I practice at the institution that took over
19 for it.

20 Q: Did you practice when it was still the Regional
21 Medical Center?

22 A: Yes.

23 Q: How long did you practice medicine there?

24 A: Since 1997.

25 Q: How many days a week on average are you at the



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1 Regional Medical Center?

2 A: Probably six.

3 Q: So, when you practice medicine there, do you
4 get paid for your services?

5 A: I bill for my services, yes.

6 Q: Beside practicing medicine, do you have any
7 additional role at the Regional Medical Center?

8 A: At present, no.

9 Q: Did you? Whe- ---

10 A: Yes.

11 Q: What kind of additional role did you have
12 beside practicing medicine?

13 A: I've been on a variety of committees, chaired
14 a variety committees, have served on the Board
15 of Trustees. I've served on the Medical
16 Executive Committee.

17 Q: Did you get paid in those leadership roles that
18 you were part of?

19 A: I was paid a stipend for hours practiced. So,
20 I billed as a contractor, basically.

21 Q: This is Exhibit Number 1. I'm gonna give a
22 copy to Dr. Samies.

23 MS. WILLIAMS: Do you have an extra copy for me?

24 MR. WANDJI: That's another one. You -- you can
25 have this one.



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1 MS. WILLIAMS: Thank you.

2 (Plaintiff's Exhibit Number 1 was marked for
3 identification purposes.)

4 Q: This is a one-page letter, Dr. Samies. Your
5 name is written at the bottom of it. Do you
6 recognize that letter?

7 A: Yes.

8 Q: Did you personally type the entirety of that
9 letter?

10 A: (No audible response.)

11 Q: Did you type it yourself?

12 A: Yes.

13 Q: Every single thing on that letter?

14 A: Yes.

15 Q: Why did you write that letter?

16 A: I was requested to do a review of information.

17 Q: Who requested you?

18 A: It was initially requested by the Infection
19 Control Department ---

20 Q: Okay.

21 A: --- which I served as a consultant for.

22 Q: Okay. Who asked -- requested you to do it?
23 You said initially.

24 A: Well, and then they wanted me to speak to the
25 attorney that's on the letter.



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- 1 Q: Who is they?
- 2 A: Infection Control Department at the hospital.
- 3 Q: Okay. How much did you get paid for writing
- 4 that letter?
- 5 A: Nothing.
- 6 Q: Why would the Infection Control ask you to
- 7 write a letter?
- 8 A: I served as the Hospital Infection Control
- 9 Consulting and Hospital Epidemiologist and they
- 10 had asked me to review information pertinent to
- 11 the epidemiology.
- 12 Q: The letter was written and signed on December
- 13 2022; is that correct?
- 14 A: Yes.
- 15 Q: Okay. How many of such a letter for your
- 16 Infection Disease expertise have you written
- 17 that year, 2022?
- 18 A: I don't know.
- 19 Q: Have you written any?
- 20 A: Yes.
- 21 Q: Beside this one?
- 22 A: Yes.
- 23 Q: That was put into the judicial system of any
- 24 kind?
- 25 A: Not that I'm aware of, no.



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1 Q: But you knew this one had to do with some kind
2 of lawsuit, right?

3 A: I knew that it was information requested.

4 Q: But you knew it was ...

5 A: I did not specifically know what precisely it
6 would be used for. I did an epidemiologic
7 review at the request.

8 Q: Okay. So, you didn't know how I was the
9 Claimant or didn't know ---

10 A: Oh, I knew -- I knew the subject was you in the
11 letter, yes.

12 Q: But you didn't know that it had to do with some
13 kind of judicial process?

14 A: I understood that there was Workers'
15 Compensation questions.

16 Q: So, how many letter after you written like that
17 that in year 2022? How many?

18 MS. WILLIAMS: Object to the form. You can answer
19 the question.

20 A: The -- well, you asked whether or not it was
21 for judicial things. No other for judicial
22 things. I wrote multiple other letters over
23 time about a variety of infection control and
24 epidemiology issues.

25 Q: Okay. Have you ever testified for anybody or



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1 through a letter like this in some kind of
2 judicial process?

3 A: I've never testified, no.

4 Q: So, this was the very first one?

5 A: I ---

6 MS. WILLIAMS: Object ---

7 A: --- did not ---

8 MS. WILLIAMS: --- to form.

9 A: --- testify. I wrote a review at the re- -- at
10 the request of information they provided.

11 Q: In the second sentence of that letter that you
12 wrote, Dr. Samie, you claim that the materials
13 you reviewed to prepare the letter were a
14 COVID-19 Questionnaire from Mr. Wandji -- I'm
15 quoting what you wrote -- and two, additional
16 employees, a log of Behavioral Health Employees
17 and a series of emails; is that correct?

18 A: That's correct.

19 Q: Okay. Beside the material I just read from
20 your letter, did you get any other information
21 from anyone to help you prepare for your
22 letter?

23 A: No.

24 Q: Did you discuss about this assignment you
25 received from the Infection Disease Committee,



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1 did you discuss about that with anyone before
2 preparing your letter?

3 A: No.

4 Q: The last sentence in the last paragraph in your
5 letter, and I'm quoting, you wrote, giving that
6 he, talking about me, had concern about non-
7 employment exposure, which prompted testing
8 only a short time prior to his illness, I must
9 wonder how much other potential non-employment
10 exposure he had. Is that correct what you
11 wrote?

12 A: That's correct.

13 Q: And you say you wrote this entire letter?

14 A: Yes.

15 Q: Who told you that I had concern about non-
16 employment exposure?

17 A: It merely states, given that he had concerns
18 about non-employment exposure, which prompted
19 testing only a short time prior to his illness,
20 I must wonder how much other potential non-
21 employment exposure he had.

22 Q: That's what I read. My question is, who told
23 you that I had concern about non-employment
24 exposure? Who told you that?

25 A: I can't re- -- let's see. Of more importance



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1 in this case is his self-reported exposure and
2 request for testing on 8/16/2021.

3 Q: What is the non-employment exposure there?

4 A: That's what was -- I reviewed the records and
5 that was gleaned from the records of Employee
6 Health.

7 Q: Oh. Employee Health told you that I had non-
8 employment ---

9 A: They did not tell me. They -- they forwarded
10 their documents.

11 Q: Where are those documents?

12 A: I don't have them.

13 Q: You reviewed them and then you gave it back to
14 them?

15 A: No. I reviewed them and they would have been
16 in email, which is no longer existent at the
17 Regional Medical Center. And probably I
18 deleted them at that time.

19 Q: And on those email that said I had non-
20 employment exposure to COVID-19?

21 A: That's what I gleaned from it.

22 Q: What's where you took it?

23 A: That's what I gleaned from.

24 Q: What do you mean gleaned? Can you explain?

25 A: Gleaned means understood from that materials.



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1 Q: Oh, okay. From the materials you got from
2 whom?

3 A: From Employee Health.

4 Q: Oh. Employee Health at the Regional Medical
5 Center at that time ---

6 A: Correct.

7 Q: --- right?

8 A: Correct.

9 Q: Is it possible that you read wrong?

10 A: Certainly.

11 Q: I'm gonna give you a copy. This is Exhibit
12 Number 2.

13 (Plaintiff's Exhibit Number 2 was marked for
14 identification purposes.)

15 Q: This is the testimony of both Employee Health,
16 the only people I talked to about my COVID at
17 the Regional Medical Center and the people you
18 received email and information from. Kelci
19 Caruso, she was the head of the Employee
20 Health. Do you remember her?

21 A: Yes.

22 Q: Good. And then Katie Evans, she's just a staff
23 there. Do you remember her?

24 A: I do not remember her specifically.

25 Q: I know it.



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- 1 A: Okay.
- 2 Q: Now, under oath, the position, this is what
3 Kelci Caruso, the head of Employee Health, said
4 when asked if I told her that I was exposed to
5 COVID-19, this is what she says, no, sir, I
6 don't recall you telling me where you were
7 exposed. That's page 108, line 124.
- 8 A: Okay.
- 9 Q: Just look at this ---
- 10 A: I got it.
- 11 Q: --- page -- part here (indicating). So, let me
12 ask you again, based on what I just told you.
13 Who told you that I had concern about non-
14 employment exposure?
- 15 A: It is what I gleaned from the records that were
16 provided to me by Employee Health.
- 17 Q: Employee Health just said I've never told him
18 that.
- 19 A: I see that.
- 20 Q: So, why did you write that in your letter that
21 I got non- ---
- 22 A: It ---
- 23 Q: --- -employment exposure?
- 24 A: --- it is what I gleaned ---
- 25 MS. WILLIAMS: Object to the form.



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1 A: --- it is what I gleaned from the records
2 provided to me by Employee Health.

3 Q: Gleaned for your truth; is that correct?

4 MS. WILLIAMS: Object to the form.

5 A: It is what I understood from those records.

6 Q: So, did you understand that -- did you
7 understood that wrong?

8 MS. WILLIAMS: Object to ---

9 A: I don't ---

10 MS. WILLIAMS: --- the form.

11 A: --- know.

12 Q: You don't know?

13 A: I don't know. No.

14 Q: Ms. Kelly [sp], those are the only two people
15 working at Employee Health during my tenure
16 there and when I had COVID. On page 115, line
17 68, and I'm quoting, I stated that you talking
18 about Wandji, me, were exposed, I did not say
19 that you stated you were exposed outside of the
20 hospital. That's what she says. That's her
21 testimony. I was exposed to COVID, but not
22 outside of the hospital. She didn't say that.
23 So, let me ask you for the third time, where
24 did you get that I was exposed to COVID ---

25 MS. WILLIAMS: Object ---



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1 Q: --- out of the hospital?

2 MS. WILLIAMS: Object to the form.

3 A: Once again, it is what I gleaned from the
4 information that was provided to me.

5 Q: The head of the Employee Health, Ms. Caruso,
6 that you said you know, also testified that
7 October 16, when I first requested to be tested
8 for COVID-19, it already had several patients
9 and employees at the hospital who had tested
10 for COVID-19. That's the testimony on line --
11 on page 108, line 9 to 10. So, as the
12 infection disease expert, is it possible that
13 me, working as a nurse, between all the up and
14 down with patients, is it possible that, as a
15 full-time nurse there, I was exposed to COVID-
16 19 on or before August 16? Is it at all
17 possible?

18 MS. WILLIAMS: Object to the form.

19 A: I'd have to review the record of your
20 employment dates and your working hours in
21 order to make that determination.

22 Q: I'm telling you I was a full-time employee
23 working there full-time as a nurse. I'm
24 telling you that as I just read, according to
25 Employee Health, before August 18, there were



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1 already both employees and patient who tested
2 positive at that hospital. Is it possible at
3 all as a -- as a nurse at that hospital that I
4 could have been exposed to COVID-19?

5 A: Again ---

6 MS. WILLIAMS: Object to form.

7 A: --- I would need to know your hours of work,
8 where you worked during that time period. That
9 information is not available to me.

10 Q: But you were able to write in your letter that
11 it's unlikely that I got COVID at that
12 hospital. How did you come up with that kind
13 of scientific expertise?

14 A: Of more importance in this case, is his self-
15 reported exposure and request for testing on
16 8/16. This was negative. The details of this
17 exposure are unclear. Certainly, a positive
18 test on 8/27 and symptoms beginning on 8/23 as
19 he initially reported on 8/25 or 8/26, which he
20 subsequently stated, would be consistent with
21 exposure on or near the 8/16 date. Generally,
22 COVID incubation is 2 to 14 days, with onset
23 for most being about 5 to 10 days from
24 exposure. It is highly unlikely that 8/22 was
25 the date of exposure if his symptoms began on



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- 1 8/23 and not possible that 8/24 was the date of
2 exposure for exposure on 8/23. The exposure
3 of 8/22 with onset 8/25 is unlikely being the
4 shortest end of the incubation period and the
5 exposure of 8/24 with onset of 8/25 is highly
6 unlikely being shorter than the incubation
7 period of the virus.
- 8 Q: What you just read justified the fact that, as
9 you said, I didn't get -- I got COVID not at
10 the hospital. What you just read justified
11 that I didn't get COVID at the hospital?
- 12 A: I wasn't justifying anything. I ---
- 13 Q: You said ---
- 14 A: --- was merely discussing the epidemiology ---
- 15 Q: Okay.
- 16 A: --- and the reports that I reviewed from
17 Employee Health.
- 18 Q: Okay. The last paragraph, you said, it is my
19 opinion that a link to employment exposure is
20 here is unlikely.
- 21 A: Based on the information presented to me.
- 22 Q: How did you come up with that?
- 23 A: Of more importance in this case, is his self-
24 reported exposure ---
- 25 Q: You already read that.



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1 A: --- and request for testing ---
2 Q: You already read that.
3 A: --- on 8/16/- ---
4 MS. WILLIAMS: Let him answer the question.
5 A: --- -2021. This was negative. The details of
6 this exposure are unclear. Certainly, a
7 positive test on 8/27 and symptoms beginning on
8 8/23 as he initially reported on 8/25 or 8/26,
9 which he subsequently stated, would be
10 consistent with exposure on or near the 8/16
11 date. Generally, COVID incubation is 2 to 14
12 days, with the onset for most being five to ten
13 days from exposure.
14 Q: You already ---
15 A: It is ---
16 Q: --- read that ---
17 A: --- highly ---
18 Q: --- Dr. Samies.
19 A: --- unlikely that 8/22 is a date of exposure if
20 his symptoms began on 8/23 ---
21 Q: Dr. Samies, you ---
22 A: --- and not ---
23 Q: --- already ---
24 A: --- possible ---
25 Q: --- you already read that for the record. I



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1 don't want you to repeat that. The question
2 is, the -- the question is, how did you come up
3 with the fact that it is unlikely that I got
4 COVID out of the hospital? That's the
5 question.

6 MS. WILLIAMS: Object to the form.

7 A: I did not come to any conclusion. I merely
8 stated that it was unlikely. There is no
9 conclusion there.

10 Q: Okay.

11 A: Of more importance in this case, is the self-
12 reported exposure and request for testing on
13 8/16. I'll read the rest, if necessary.

14 Q: Have you been the Medical Director of the
15 Regional Medical Center?

16 A: Medical Director?

17 Q: Yeah.

18 A: There is no Medical Director.

19 Q: Oh. Have you ever been the Chief of Medical
20 Staff at the Regional Med- ---

21 A: I've been the Chief of Staff.

22 Q: For how long?

23 A: I believe it was two years.

24 Q: Okay. Did you get paid for that?

25 A: I was a contract employee, meaning that I got



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1 paid by the hour for that as a contracted
2 service. Much like if you brought an
3 conditioning specialist over to fix your air
4 conditioner, you would pay him for the time
5 that he spent.

6 Q: This is another Exhibit. This -- this is your
7 Affidavit, Dr. Davis -- Dr. Sammies.

8 **(Plaintiff's Exhibit Number 3 was marked for**
9 **identification purposes.)**

10 Q: Did you prepare, you wrote and signed that?
11 Did you do that on that one?

12 A: Yes.

13 Q: On number five of your Affidavit, you said
14 you've never been an employee of the Regional
15 Medical Center.

16 A: That's correct.

17 Q: That's correct?

18 A: That's correct.

19 Q: You've been a member of the Board of Trustee--
20 -- of Trustees; is that correct?

21 A: That's correct.

22 Q: Since when?

23 A: I have the dates on my thing, but at -- at any
24 point when I was the Chief of Staff or the
25 Chairman of Medical Executive Committee, I was



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1 automatically a Board Member.

2 Q: And you were also the member of the Finance
3 Committee Board of Trustees at the Regional
4 Medical Center; is that correct?

5 A: That's correct.

6 Q: For how long?

7 A: I don't recall.

8 Q: So, you practice medicine there for
9 compensation and you were on the Board of
10 Trustees at that hospital?

11 A: That's correct. It's an elected position.

12 Q: So, with all these financial ties and
13 employment ties with the Regional Medical
14 Center, why did you agree to be a witness in
15 this litigation ---

16 MS. WILLIAMS: Object to the form.

17 Q: --- against the Regional Medical Center?

18 A: I am not financially tied to the Regional
19 Medical Center. I practice medicine there. I
20 am privileged there. I was appointed by
21 election to a position of leadership on the
22 medical staff, but not an employment position.

23 Q: Since you practice there and whatever your
24 company gets paid for your services, why did
25 you agree to be a witness in the litigation



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1 where the Regional Medical Center is the party?

2 A: I agreed to do ---

3 MS. WILLIAMS: Objection to form.

4 A: --- I agreed to do a review, as I stated
5 previously ---

6 Q: And you know ---

7 A: --- on information presented to me.

8 Q: --- and you know it was for the Worker
9 Compensation case?

10 A: I knew that it was going to the Workers'
11 Compensation attorney, yes.

12 Q: Don't you see a conflict of interest in there?

13 A: I ---

14 MS. WILLIAMS: Object to form.

15 A: --- do not.

16 Q: You don't?

17 A: I do not.

18 Q: So, you think that's lawful?

19 MS. WILLIAMS: Object to the form.

20 Q: To be on the Board of Directors of the Trustees
21 of your hospital and still write an expert
22 letter for them in the litigation. You think
23 that's lawful?

24 MS. WILLIAMS: Object to the form.

25 A: I wrote -- I opined on the information that I



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1 was presented for the epidemiology and
2 infectious disease portion of what was
3 submitted to me.

4 Q: So, you give your expertise in the litigation
5 case that the Regional Medical Center is
6 involved in; is that correct?

7 MS. WILLIAMS: Object to the form.

8 A: Again, I opined on the information that was
9 presented to me at the request of the
10 institution.

11 Q: And you knew it's liti- -- that it is a legal
12 case, but still you decided to give your
13 expertise?

14 MS. WILLIAMS: Object to the form.

15 A: I provided what my request was, which was to
16 review and opine on the epidemiology and
17 infectious disease aspects of the information
18 that I was presented with.

19 Q: Knowing that it was a legal case that the
20 Regional Medical Center was involved in; isn't
21 that correct? You knew that. Did you?

22 A: I knew that there was a Workman's Compensation
23 case, but I did not know that it was in
24 litigation.

25 Q: Thank you. On point Number 6 of your



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1 Affidavit, you stated that, and you've been
2 saying that all along, you provide infectious
3 control services to the Regional Medical Center
4 pursuant to a contract with them for those
5 services?

6 A: Yes. I've had a contract ---

7 Q: That's correct.

8 A: --- I've had a contract since 1997.

9 Q: Why didn't you disclose in your Affidavit that
10 you have leadership position at that
11 organization in the past? Like the Chief
12 Medical Officer, like being on the board?

13 A: I was not Chief Medical Officer.

14 Q: Like ---

15 A: I was Chief of Staff.

16 Q: Yeah.

17 A: An elected position for the medical staff.

18 Q: Why didn't you disclose that in your Affidavit?

19 A: The Affidavit said what I thought it needed to
20 say.

21 Q: Okay. And why didn't you disclose that you are
22 on the Board of Trustees in your Affidavit?

23 A: That was a -- again, a leadership position that
24 I was voted to, not a employment issue. And
25 this is describing employment relationships.



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1 Q: Thank you. So, I want to understand here. I
2 want to follow that with a question. You said
3 you are like a contractor for medical services
4 at the Regional Medical Center; is that
5 correct?

6 A: Correct.

7 Q: And you are also a member of the Finance
8 Committee Board of Trustees; is that correct?

9 MS. WILLIAMS: Object to the form.

10 A: At a period of time, I was on the Finance
11 Committee of the Board of Trustees.

12 Q: Is that ethical business practice ---

13 MS. WILLIAMS: Object to the form.

14 Q: --- to be a contractor and in the Board of
15 Finance of the same organization?

16 A: It was a ---

17 Q: Is that ethical?

18 A: --- position I was elected to and among the
19 things that you're required to do is disclose
20 any conflicts of interest when you're a Board
21 member.

22 Q: Is that lawful to be a contract to an
23 organization and still be on the Board of
24 Financial Trustees? Is that legal?

25 MS. WILLIAMS: Object to the form.



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1 A: I believe, yes.

2 Q: Okay.

3 A: I am not aware it's not.

4 Q: Back to Exhibit Number 1, Dr. Sammie.

5 (Plaintiff's Exhibit Number 1 was referenced at this
6 time.)

7 Q: The material which you reviewed before writing
8 that letter, from those material, can you tell
9 when I was exposed to COVID-19?

10 A: I did not opine on that.

11 Q: So you don't even know when I was exposed to
12 COVID-19?

13 A: I do not.

14 Q: Okay. But you know and you wrote in your
15 letter that it is unlikely that I got it at the
16 Regional Medical Center; is that correct?

17 A: In my opinion a link to employment exposure is
18 unlikely based on the information presented to
19 me.

20 Q: So you don't know when I was exposed, but you
21 know that it is unlikely that I got it at the
22 Regional Medical Center; is that correct?

23 A: Of more importance in this case is hi a self-
24 reported exposure and request for testing on
25 8/16/21. This was negative. The details of



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1 this ---
2 Q: We already ---
3 A: --- exposure ---
4 Q: --- we already -- we already had that. I don't
5 want you ---
6 A: --- are unclear ---
7 Q: --- to repeat it.
8 A: --- and that is how this opinion is generated.
9 Q: I'm gonna repeat that question. You don't know
10 when I was exposed to COVID-19?
11 A: That's correct.
12 Q: But you know that it is unlikely that I got it
13 from the hospital?
14 **MS. WILLIAMS:** Object to the form. Asked and
15 answered.
16 Q: Is that correct?
17 A: That is correct, based on the information ---
18 Q: Okay.
19 A: --- presented.
20 Q: On page 107, line 16 to 18, Exhibit -- on
21 Exhibit 2.
22 **(Plaintiff's Exhibit Number 2 was referenced at this**
23 **time.)**
24 Q: This is the head of the Employee Health, Ms.
25 Caruso, RN. She stated, and I quote, we did



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1 not ask you what -- when you were exposed in
2 the Questionnaires. They don't ask when you
3 were exposed. We didn't need to know
4 specifically when you were exposed. So, even
5 the hospital don't know when I was exposed.
6 But you knew for sure I didn't -- I was at --
7 unlikely got it from the hospital. Is that
8 correct?

9 A: What I stated ---

10 MS. WILLIAMS: Object to the form.

11 A: --- again is, in my opinion, that a link to
12 employment exposure here is unlikely based on
13 the information presented to me.

14 Q: So, you didn't know when I was exposed?

15 A: That's correct.

16 MS. WILLIAMS: Object to the form.

17 Q: Okay. Do you regret writing that letter?

18 A: No.

19 Q: You would write it the same as it is today?

20 A: (No audible response.)

21 Q: You need to ---

22 A: I don't know -- I don't know that I can answer
23 that. I don't know.

24 Q: Would you change anything on that letter, given
25 the information you have now?



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- 1 A: I don't know.
- 2 Q: You mentioned a series of emails that you
3 received. How many emails did you received?
- 4 A: I do not know.
- 5 Q: Who wrote those emails?
- 6 A: It would've been information coming from
7 Employee Health and from Infection Control.
- 8 Q: Where are those emails?
- 9 A: I don't have them.
- 10 Q: What happened to them?
- 11 A: The informa- -- the -- the email system of the
12 ho- -- Regional Medical Center sunsetted a
13 fairly long time ago and no longer exists.
- 14 Q: Have you discussed this Worker Compensation
15 case with any other executive in any of your
16 executive letters?
- 17 A: No.
- 18 Q: Have you discussed this Worker Compensation
19 case with any of your Board of Trustees
20 meeting?
- 21 A: No.
- 22 Q: Are you sure?
- 23 A: Yes.
- 24 Q: Did you discuss this Worker Compensation case
25 with anyone at all?



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1 A: No. My attorney.

2 Q: Did you personally hire Ms. Williams to
3 represent you in this case?

4 A: I did not.

5 Q: Who hired her to represent you?

6 A: Medical University of South Carolina.

7 Q: Do you mean the previous Regional Medical
8 Center?

9 A: The organization that took over the Regional
10 Medical Center.

11 Q: Yeah. Okay. This is Exhibit Number 4.

12 (Plaintiff's Exhibit Number 4 was marked for
13 identification purposes.)

14 Q: This is a letter where Dr. Samies was called
15 among the staff of the Regional Medical Center,
16 as witnessed, for the January -- I'm sorry.
17 This is your copy -- January hearing. So, you
18 were called here in page number -- second page
19 ---

20 MS. WILLIAMS: Mr. Wandji, can I interrupt you for
21 just one second?

22 MR. WANDJI: Yeah.

23 MS. WILLIAMS: Have these documents been produced in
24 discovery? I don't recall this being produced.

25 MR. WANDJI: Yeah. I'll send you everything that I



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1 have.

2 Q: So, this is -- is the list of the -- the staff
3 and your name is right there as one of the
4 staff that were called to wait for -- for the
5 hearing. Why didn't you show up?

6 A: I wasn't asked, to my knowledge.

7 Q: Oh. Okay. That's why you didn't show up?

8 A: Correct.

9 Q: Okay. This is another, Exhibit Number 5. Let
10 me see, here's your copy.

11 (Plaintiff's Exhibit Number 5 was marked for
12 identification purposes.)

13 Q: That's just a letter from the Reg- -- Regional
14 Medical Center. That's ---

15 A: Uh-huh.

16 Q: --- back to August 6th. There were already
17 patients all over the hospital with COVID-19.
18 As a nurse working there, is it possible that
19 I could have been exposed to COVID-19 at that
20 hospital?

21 MS. WILLIAMS: Object to the form.

22 A: It's possible that any employee can be exposed
23 when there are patients with COVID-19.

24 Q: Thank you. This is the -- another Exhibit,
25 Number 6.



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1 (Plaintiff's Exhibit Number 6 and 7 were marked for
2 identification purposes.)

3 Q: It's actually two. One for the patients and
4 one for the employees. This is one for the
5 patient and one for the employees. Both are
6 Exhibits. I got it from the Regional Medical
7 Center. Dr. Samie, those are the August
8 infected people in the unit that cared for
9 patients who had COVID-19. Is it possible that
10 I was exposed to COVID-19 at the hospital?

11 A: It's possible.

12 MS. WILLIAMS: Object to the form.

13 Q: It's possible, okay.

14 MR. WANDJI: Dr. Samies, you're a busy and good man.
15 I don't want to waste your time. I'm gonna end
16 this deposition at this point. I want to thank
17 you for your time, sir.

18 DR. SAMIES: Thank you.

19 MS. WILLIAMS: I don't have any questions.

20 (Off the record from 4:34 p.m. - 4:37 p.m.)

21 MS. WILLIAMS: We're back on the record. Exhibits 6
22 and 7, we've noted include patient names that
23 the -- the facility would have concerns about
24 confidentiality and HIPPA violations, so these
25 -- we would maintain these should be protected



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1 and the confidentiality of them maintained.

2 MR. WANDJI: And I want to add that those
3 communication was provided by the facility via
4 email ---

5 MS. WILLIAMS: They ---

6 MR. WANDJI: --- to me.

7 MS. WILLIAMS: --- they were not produced by the
8 facility in the context of this litigation.
9 These are not documents I'm familiar with.

10 MR. WANDJI: They were provided in the Worker
11 Compensation phase of this same case by the
12 Regional Medical Center via email to me.

13 MS. WILLIAMS: Okay. Let me ---

14 MR. WANDJI: I didn't produce this communication.

15 MS. WILLIAMS: I understand that. I just want to
16 confirm, Mr. Wandji, do you have any objection
17 to maintaining the confidentiality of these
18 names if they are produced ---

19 MR. WANDJI: I am saying ---

20 MS. WILLIAMS: --- in the context ---

21 MR. WANDJI: --- it's gonna be blacked out, the name
22 I'm gonna be blacked out before it is publicly
23 exposed.

24 MS. WILLIAMS: Okay. Thank you.

25 (There being no further questions, the deposition



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1 concluded at 4:38 p.m.)
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CERTIFICATE

This is to certify that the deposition of **DR. JOHN H SAMIES**, consisting of thirty-four (34) pages, is a true and correct transcript of the testimony given by said deponent after being duly sworn; said deposition was reported by the method of Stenomask with Backup.

I further certify that I am neither employed by nor related to any of the parties in this matter or their counsel; nor do I have any interest, financial or otherwise, in the outcome of same.

IN WITNESS WHEREOF I have hereunto set my hand and seal on October 2, 2024.



Amber Scarborough
Court Reporter

Notary Public for South Carolina
My Commission Expires: June 13, 2033



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Palmetto Infectious Disease Physicians, LLC

1097 B Cook Road
Orangeburg, SC 29118

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Marie L. Gehling, NP-C, CWOCN

803-539-0505
fax 803-539-0410

Roy A. Howel III
PO Box 2167
Mt Pleasant, SC 29465

December 5, 2022

Dear Mr Howell,

I am writing this letter to you in response to your request for review of materials concerning claimant Serge Wandji. Reviewed were COVID19 Questionnaires from Mr Wandji and two additional employees, a testing log for Behavioral Health Employees and a series of emails. Mr Wandji is claiming work related injury resultant from COVID 19 infection diagnosed 8/27/2021. He reports this as a result of exposure on 8/22/2021 and 8/24/2021 while working at the Behavioral Health Unit of the Regional Medical Center of Orangeburg and Calhoun Counties.

Clearly there were patients on the Behavioral Health Unit who tested positive for COVID 19 in that time period. While the hospital policy required use of protective attire, it is unclear if this was followed by the claimant.

Of more importance in this case is his self reported exposure and request for testing on 8/16/2021. This was negative. The details of this exposure are unclear. Certainly a positive test on 8/27 and symptoms beginning on 8/23 as he initially reported or 8/25 or 8/26 (which he subsequently stated) would be consistent with exposure on or near the 8/16 date. Generally covid incubation is 2-14 days with onset for most being about 5-10 days from exposure. It is highly unlikely that 8/22 was the date of exposure if his symptoms began on 8/23 and not possible that 8/24 was the date of exposure for onset 8/23. The exposure of 8/22 with onset 8/25 is unlikely being at the shortest end of incubation period and the exposure of 8/24 with onset 8/25 is highly unlikely being shorter than the incubation period of the virus.

The recanting of the 8/16 exposure by the claimant and the confusion about date of onset of symptoms puts doubt on all claimant statements in this case. Since the reporting by Employee Health of RMC appears to be a real time event, it would seem that the timing of onset of symptoms should have been quite clear to the claimant.

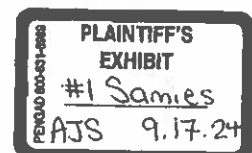
It is my opinion that a link to employment exposure here is unlikely based on the information presented to me. Given that he had concern about non-employment exposure which prompted testing only a short time prior to his illness, I must wonder how much other potential non-employment exposure he had.

If I may be of further assistance in this case, please feel free to contact me.

Sincerely,



John H. Samies, MD FSHEA



57

1 BEFORE THE SOUTH CAROLINA
2 WORKERS' COMPENSATION COMMISSION
3

4 SERGE WANDJI,)
5 Plaintiff,)
6 vs.)
7 THE REGIONAL MEDICAL)
8 CENTER OF ORANGEBURG,)
9 Employer,)
10 and)
11 PALMETTO HOSPITAL)
12 TRUST,)
13 Carrier,)
 Defendants.)

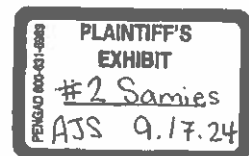
CASE NO.: 2118696

 COPY

14 H E A R I N G
15 DATE: Thursday, February 16, 2023
16 TIME: 2:51 p.m.
17 LOCATION: SC Workers' Compensation Commission
18 1333 Main Street, Suite 500
19 Columbia, South Carolina
20 BEFORE: Commissioner T. Scott Beck
21 REPORTED BY: Megan R. Brown
 South Carolina Court Reporter

22 _____
23 ABC REPORTING SERVICE
 257 Summerland Avenue
24 Batesburg, South Carolina 29006
 1-803-532-5255
25 1-803-730-3015 (cell)

ABC REPORTING SERVICE (803) 730-3015



WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 APPEARANCES:

2

3 ATTORNEY FOR THE DEFENDANTS

4 THE REGIONAL MEDICAL CENTER OF ORANGEBURG
AND PALMETTO HOSPITAL TRUST:

5 TRASK & HOWELL, LLC
6 BY: ROY A. HOWELL, III, ESQUIRE
7 763 Johnnie Dodds Boulevard
Post Office Box 2167
Mount Pleasant, South Carolina 29464

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23 (INDEX AT REAR OF TRANSCRIPT)

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 A. -- on the CDC website.
 2 Q. You don't have it with you?
 3 A. No, sir.
 4 Q. Oh, so how are we going to -- how are you
 5 going to convince the Commissioner that that's what the
 6 CDC says? You just out of your head like how do we
 7 know? What is the CDC guideline?
 8 A. I mean, the CDC guidelines were published on
 9 several websites, news sources, social media sources,
 10 but that is what we use to determine onset of symptoms.
 11 Q. Where is it? I mean, your lawyer sent all
 12 kinds of documentation. He didn't --
 13 A. Yes, sir. I understand. I do not have it
 14 with me. No, sir.
 15 Q. You -- are you a nurse, you said?
 16 A. Yes, sir.
 17 Q. And when all that happened, you had like, as
 18 I said, degree nurse. Is that right?
 19 A. I'm sorry? Yes. Yes.
 20 Q. And that's a nursing degree nurse?
 21 A. Yes, sir. Uh-huh.
 22 Q. So now you decide when I was infected like
 23 you know exactly when somebody is infected, when they
 24 get symptoms with a nursing degree in nursing? What
 25 is --

ABC REPORTING SERVICE (803) 730-3015

WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 A. No, sir. That's what the CDC says.

2 Q. Again, where is that CDC note, madam?

3 A. Again, I do not have the -- I do not have the
4 CDC. I have answered that question.

5 Q. You don't have it?

6 A. No, sir.

7 Q. So you are just making that up, because we
8 have no evidence?

9 A. No, sir.

10 Q. Okay. So under -- on August the 16 --

11 A. Uh-huh.

12 Q. -- when I came to get a test --

13 A. Uh-huh.

14 Q. -- for my school, did you ask me when I was
15 exposed?

16 A. No, sir, we did not ask when you were --

17 Q. Okay.

18 A. -- exposed.

19 Q. You did not ask me when I was exposed. Why
20 not?

21 A. We -- we didn't need to know specifically
22 when you were exposed. You indicated that you were
23 exposed, and that's why you needed a test when we asked
24 what you needed a test for.

25 Q. Did I tell you where I was exposed?

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 A. No, sir.

2 Q. Okay. I didn't tell you where I was exposed;
3 is that correct?

4 A. I don't recall you telling me where you were
5 exposed.

6 Q. Oh, okay. You are the head of the Employee
7 Health, right?

8 A. Yes, sir.

9 Q. On that day, 16th, we already had a lot of
10 Covid-positive employee at the hospital; is that
11 correct?

12 A. We had several. Yes, sir.

13 Q. We already had patients with Covid positive
14 in the hospital; is that correct?

15 A. Correct.

16 Q. It's amazing. During your testimony here
17 exchanged with your lawyer, you said, Oh, if somebody
18 has their personal protective gears, he cannot get
19 Covid. Where did you --

20 A. I did not --

21 Q. -- get that?

22 A. I did not say he could not get Covid.

23 Q. Oh, what did you say?

24 A. I said that the risk was low if you wore the
25 proper protective equipment.

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 Q. So with that, you can still get Covid; is
2 that correct?

3 A. If you wear the proper corrected -- proper
4 PPE, your risk for Covid is low.

5 Q. But you can still get it; is that correct?

6 A. There is a possibility.

7 Q. Thank you.

8 THE COURT: Anything else?

9 MR. WANDJI: Huh?

10 THE COURT: Anything else?

11 MR. WANDJI: Yes, sir. Yes, sir. I'm not
12 finished.

13 THE COURT: All right.

14 MR. WANDJI: Thank you. This is on my
15 exhibit 47. That will be page 84.

16 THE COURT: Hang on. Hang on. Before you
17 approach the witness, what page are you on?

18 MR. WANDJI: I am on page 84.

19 BY MR. WANDJI:

20 Q. Did you post this? Did you put this list
21 together?

22 A. Yes, sir.

23 Q. You put that?

24 A. Yes, sir.

25 Q. Where did you get those names and your test

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 and everything? How did you get that?

2 A. It is from the employees that we tested or
3 the employees that reported to us that they were
4 positive.

5 Q. Is that the same list that you send to the
6 CDC for employees work who tested positive?

7 A. That was not my responsibility.

8 Q. Whose responsibility is it?

9 A. I'm not sure. I believe it was the lab at
10 the hospital. It was their responsibility to send that
11 information to DHEC once you're tested.

12 Q. Okay. So you are the one who put this
13 together?

14 A. Yes. That was our list that we kept up with
15 on who was out with Covid at the time.

16 Q. And this is the list of all those who tested
17 positive at the hospital in the month of August 2021?

18 A. I believe so, yes.

19 Q. Okay.

20 A. All that were reported to us or that we
21 tested.

22 MR. WANDJI: I have no other question for
23 her, your Honor.

24 THE COURT: Thank you, sir.

25 Mr. Howell, any on --

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 MR. WANDJI: Thank you --

2 THE COURT: -- redirect?

3 MR. WANDJI: -- madam.

4 REDIRECT EXAMINATION

5 BY MR. HOWELL:

6 Q. Any employee that -- that reported a positive
7 test -- well, number one, that list only lists
8 employees who reported a positive test or tested
9 positive. It doesn't indicate where the exposure came
10 from, correct?

11 A. That list does not, no, sir.

12 Q. Okay. Number -- number two, any employee
13 that did have a positive test was quarantined, correct?

14 A. Correct.

15 Q. All right. Until they were safe to come back
16 to work, correct?

17 A. Correct.

18 MR. HOWELL: All right. Thanks. That's all
19 I have.

20 THE COURT: Anything further?

21 MR. WANDJI: No. I am done with her. Thank
22 you, madam.

23 THE COURT: You may step down. Thank you.

24 THE WITNESS: Thank you.

25 THE COURT: Mr. Howell?

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1 MR. HOWELL: Kellie Evans.

2 THE COURT: Your name, ma'am?

3 MS. EVANS: Kellie Evans.

4 THE COURT: K-E-L-L-?

5 MS. EVANS: -I-E.

6 THE COURT: Glad I asked. E-V-A-N-S?

7 MS. EVANS: Yes, sir.

8 THE COURT: I got that right. Would you
9 raise your right hand, please?

10 KELLIE EVANS, being duly sworn and cautioned
11 to speak the truth, the whole truth and nothing but the
12 truth, testified as follows:

13 THE COURT: Again, please state your name for
14 the record.

15 THE WITNESS: Kellie Evans.

16 THE COURT: Okay. Ms. Evans, you may be
17 seated.

18 Mr. Howell?

19 DIRECT EXAMINATION

20 BY MR. HOWELL:

21 Q. By whom are you employed, Ms. Evans?

22 A. The Regional Medical Center of Orangeburg.

23 Q. And what is your job?

24 A. I am the administrative assistant in the
25 Employee Health services office.

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1 Q. Was that your job in August of 2021?

2 A. Yes, sir.

3 Q. Were you in the office on August 16, 2021?

4 A. Yes, sir.

5 Q. And describe what happened.

6 A. Mr. Wandji came in the office stating that he
7 needed to be tested for Covid. Kelci had just come
8 inside from testing several other employees at 11:00,
9 so she came in shortly after. I asked Kelci if she
10 could get him tested.

11 She -- once she processed her lab specimens
12 and took them over, she went out and tested Mr. Wandji.
13 While he was in our office, he did sit in one of our
14 chairs, stated he would wait there until we could get
15 him tested after we asked him to go to same-day.

16 Q. Did Mr. Wandji indicate that he had been
17 exposed outside of the hospital?

18 A. Yes, sir.

19 Q. Did Mr. -- on that day, did Mr. Wandji ever
20 tell you or Kelci that he needed to test for school?

21 A. No, sir.

22 Q. Were you in the office on August 27, 2021?

23 A. Yes, sir.

24 Q. And do you recall when Mr. Wandji called

25 or --

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 A. Yes, sir. He came -- or he called, and I got
2 some information from him to get him registered. We
3 got him registered. He came in for a test. Once we
4 got the results -- it takes about an hour-and-a-half,
5 two hours. We got results. We called Mr. Wandji with
6 results and started to go through that questionnaire.

7 Q. And what was the date that he gave you for
8 symptom onset?

9 A. On the first original date was August 23rd of
10 '21.

11 Q. And did he give any other dates of a later
12 time?

13 A. Yes, sir. As Ms. Caruso stated, he did call
14 back a little later. He gave us a date of August the
15 25th, and then in an email that he sent me on September
16 the 9th, I believe, he -- he stated that he started
17 feeling bad on August 26th.

18 Q. Okay. So he's given three different dates
19 for date of onset; is that correct?

20 A. Yes, sir.

21 MR. HOWELL: That's all I have. Thank you.

22 THE COURT: Mr. Wandji, any questions of this
23 witness, sir?

24 CROSS-EXAMINATION

25 BY MR. WANDJI:

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 Q. Excuse me, madam. What's your name again?

2 A. Kellie Evans.

3 Q. Ms. Evans, you just said that I told you that
4 was -- I was exposed to Covid-19 outside of the
5 hospital. Did I tell you that?

6 A. I stated that you said you were exposed. I
7 did not say that you stated you were exposed outside of
8 the hospital.

9 Q. Oh, maybe I didn't hear very well. I -- I
10 hope it is on the transcript. My bad, because what I
11 heard is you said that I told you that I was exposed
12 out of the hospital, so I didn't tell you that, did I?

13 A. You said you were exposed.

14 Q. Okay. And that was on August the 16th?

15 A. Yes, sir.

16 Q. And you work at Employee Health?

17 A. Yes, sir.

18 Q. And you know we have patients with Covid in
19 the hospital like I --

20 THE COURT: All right. Let -- let me stop
21 right now, because I want to get a clarification.

22 Ms. Evans, my notes indicated that you testified that
23 he said he had been exposed outside of the hospital on
24 your direct examination. I just need clarity on what
25 he actually said to you.

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 THE WITNESS: Okay. All it states is that he
2 was exposed but was not having symptoms.

3 THE COURT: All right. Thank you.

4 THE WITNESS: Yes, sir.

5 MR. WANDJI: Thank you, Commissioner, because
6 that's exactly what I heard. I just thought maybe,
7 because I have Long Covid, I -- I was -- my memory --

8 THE COURT: All right. Let's proceed.

9 BY MR. WANDJI:

10 Q. So -- so -- so the testimony you gave him is
11 wrong. I did not tell you that I was exposed out of
12 the hospital.

13 THE COURT: We -- we've already made that --

14 Q. Is that correct?

15 THE COURT: Mr. Wandji, we've already made
16 the point clear. Let's move on.

17 MR. WANDJI: Okay. Good.

18 BY MR. WANDJI:

19 Q. Who is your supervisor?

20 A. At the time, Kelci was my direct supervisor,
21 and over Kelci was Tina Norris.

22 Q. Was who?

23 A. Tina Norris.

24 Q. Oh, okay. My exhibit, sir, is exhibit -- APA
25 number 60, page number 148.

ABC REPORTING SERVICE (803) 730-3015

WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 THE COURT: 148?

2 MR. WANDJI: Yes, sir.

3 THE COURT: All right.

4 BY MR. WANDJI:

5 Q. , I got this from your lawyer, Mr. Howell. It

6 says it's the final report on all my Covid testing,

7 whatever. Did you put this together or is it

8 something -- did you put that together?

9 A. Ms. Caruso actually put that part together --

10 Q. Oh.

11 A. -- because she was still employed with us at
12 that time.

13 Q. Who's Ms. Caruso?

14 A. Kelci.

15 Q. Oh, okay. She's not an employee at The
16 Medical Center no more?

17 A. Not right now.

18 Q. Okay. On this report, APA 60, this is like
19 a -- it's not like a report that somebody wrote. It's
20 like a cut and paste of different email; is that
21 correct?

22 A. Correct, and I do have the emails that were
23 sent.

24 Q. Why didn't you submit the original email?

25 Why did you have to --

ABC REPORTING SERVICE (803) 730-3015

STATE OF SOUTH CAROLINA

COUNTY OF ORANGEBURG

Serge R. Wandji,

Plaintiff,

vs.

The Regional Medical Center,

Defendants.

IN THE COURT OF COMMON PLEAS

FIRST JUDICIAL CIRCUIT

Case No.: 2023-CP-38-00331

AFFIDAVIT OF JOHN H. SAMIES,
M.D.

I, Dr. John H. Samies, being first duly sworn, deposes and states as follows:

1. My name is Dr. John H. Samies, and I am over the age of eighteen (18) years old and am competent to give sworn testimony.

2. I have personal, first-hand knowledge of the matters set forth in this Affidavit.

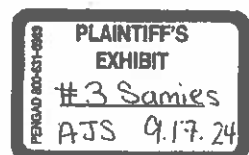
3. I offer this Affidavit in support of Defendant's Opposition to Plaintiff's Motion to Compel.

4. Since 1997, I have maintained and worked as a physician at my own private medical practice, which became known as Palmetto Infectious Disease Physicians, LLC in 2005.

5. I am not now, nor was I ever, an employee of RMC.

6. For many years, I provided infection control services to RMC pursuant to a contract with RMC for those services.

7. On or about November or December 2022, in my role as the head of infection control, I was asked to opine on RMC's infection control procedures, the modes of transmission, timing, and other items of epidemiology of the COVID-19 disease. These opinions were offered as part of a theoretical infection control situation involving a worker's compensation litigation matter filed by Serge Wandji.



8. My role in Mr. Wandji's worker's compensation matter was solely as an expert in infection control and disease epidemiology.

9. I have never had any involvement in the decision to grant or deny any worker's compensation claims submitted by an employee of RMC, including Mr. Wandji.

10. I have never had any involvement in the submission or processing of any worker's compensation claims submitted by an employee of RMC, including Mr. Wandji.

11. I have never had any supervisory authority over Mr. Wandji or any nurse employed by RMC.

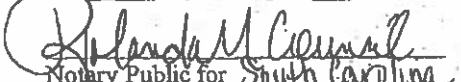
12. I have never had authority to hire or fire employees at RMC, including Mr. Wandji.

13. I have never had any involvement or input into the decision to terminate any employee at RMC, including Mr. Wandji. In fact, I did not learn of the termination of Mr. Wandji's employment from RMC until May 2023 when Mr. Wandji served me with a subpoena for deposition in this lawsuit.

FURTHER AFFIANT SAYETH NOT.


Dr. John H. Samies

Sworn to and subscribed before me
this 5 day of August, 2024


Notary Public for South Carolina
My commission expires: 04/02/2031



TRASK
HOWELL
WORKERS' COMPENSATION DEFENSE

Reply to
Roy A. Howell, III
(843) 881-2236
rhowell@trask-howell.com

January 12, 2023

UPLOAD ONLY

Commissioner T. Scott Beck
S.C. Workers' Compensation
133 Main Street, Suite 500
Columbia, SC 29202-1715

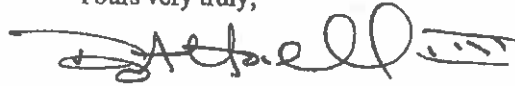
Re: Serge Wandji v. The Regional Medical Center
W.C.C. File No.: 2118696
Carrier File No.: WC2021098080
Date of Accident: August 27, 2021

Dear Commissioner Beck:

Enclosed please find an Amended Pre-Hearing Brief with regard to the above-named matter, which is scheduled for a hearing on January 25, 2023.

By Proof of Service to the Claimant, I am notifying him that I have submitted the Brief, and I am providing him with copies of the medicals and documents that will be submitted at the time of the hearing to be made a part of the record in the case under the Administrative Procedures Act.

Yours very truly,



Roy A. Howell, III

RAHIII/mbm/lth

Enc.

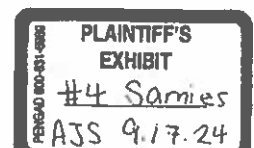
cc: Sandra Axson, Antum Risk (w/enc.) (via upload only)
Jonathan Vallentine (w/ enc.) (via email only)
Serge Wandji (w/enc.) (via certified/regular mail and OneDrive)

763 JOHNNIE DODDS BLVD. | P.O. BOX 2167
P 843.881.4228 | F 843.881.8784



MT. PLEASANT, SOUTH CAROLINA 29465
www.TRASK-HOWELL.com

3842/41BU-PHB



South Carolina Workers' Compensation Commission
1333 Marion Street, Suite 500
P.O. Box 1715
Columbia, South Carolina 29202-1715
(803) 737-5739



PRE-HEARING BRIEF
WCC FILE NO: 2118696

Serge Wandji
Claimant's Name
P.O. Box 523
Address
Columbia, SC 29115

City State Zip
678-612-9649
Home Phone Work Phone

The Regional Medical Center

Employer's Name
3000 St. Matthews Road
Address
Orangeburg, SC 29115

City State Zip
Palmetto Hospital Trust via Antum Risk
Carrier

Roy A. Howell, III
Preparer's Name

(843) 881-4228
Phone #

A claim for workers' compensation benefits is made based on the following grounds:

☐ Injury ☐ Illness ☐ Repetitive Trauma

1. Compensation Rate: \$903.40 2. AWW: \$1,735.47 Date of Injury: August 27, 2021

3. Type of injury and body part(s): Claimant is alleging an infection of the whole body. Claim is denied.

4. Facts in controversy: See attachment.

5. Legal issues involved: See attachment.

6. Unusual aspects: See attachment.

7. Witnesses (designate if expert*): Kelci Caruso, Teresa Noe, Kelle Evan, Wanda Summers, Dr. John Samies, and Jonathan Vallentine

8. Exhibits: See attached Notice of Submissions

9. Medical evidence: (Indicate report pursuant to R.67-612; deposition or appearance) See attached Notice of Submissions

10. Name, address, and specialty, if any, of the treating physician: Roper St. Francis Primary Care, 615 Wesley Drive, Suite 200, Charleston, SC 29407; Roots Psychological Associates, 1531 Laurel Street, Columbia, SC 29201; Orangeburg County EMS; Regional Medical Center, 3000 St. Matthews Road, Orangeburg, SC 29118

11. Impairment rating(s); body part(s); physician and date of opinion:

12. I am amending my Form 50/51 in the following manner:

☐ Mediation

- ☐ a. Mediation is requested to be ordered pursuant to Reg. 67-1801 B
☐ b. Mediation is required pursuant to Reg. 67-1802
☐ c. Mediation is requested by consent of the Parties pursuant to Reg. 67-1803
☐ d. Mediation has been conducted by a duly qualified mediator and resulted in an impasse

Questions regarding mediation may be submitted to mediation@wcc.sc.gov

I verify the contents of this form are accurate and true to the best of my knowledge.

I certify I have served this document pursuant to Reg. 67-211 by delivering a copy to: Serge Wandji, P.O. Box 523, Columbia, SC 29115; sergewandji@gmail.com

on the 12th day of January 2023

by ☒ first class postage ☒ certified mail ☐ personal service ☒ OneDrive.

Signature: [Signature]

Email: rhowell@trask-howell.com

Date of hearing: 1/25/2023

Time needed for hearing: 1 hour

File this form and proof of service on the opposing party according to R.67-611 and R.67-212. Do not send medical reports.

* Commissioners reserve the right to admit expert witnesses at hearings.

APA #50

rmc

Regional Medical Center

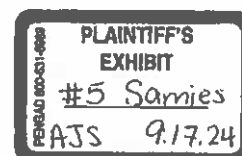
DATE: August 6, 2021
TO: All Employees
SUBJECT: COVID & Other Updates at Regional Medical Center (RMC)

Numbers of COVID positive cases continue to rise across the country and within our state and surrounding areas. As of today, August 6, 2021, we have 12 COVID-19 patients in our hospital.

1. **Personal Protective Equipment (PPE)**
RMC currently has an adequate supply of all PPE. Please discard isolation gowns after each use for precaution patients.
2. **N-95 Masks**
 - N-95 Masks are required to be worn by anyone who has contact with patients. Replacement masks are available on all units and from Employee Health or Nursing Supervisor. A new mask should be obtained daily or when your mask does not fit snugly to your face, the straps are broken or the mask is soiled.
 - Employees should only wear the style/model of mask they have been fit tested for.
 - Staff should continue to maintain social distancing and not congregate without masks in breakrooms, lounges, meetings, etc.
3. **Masking**
Masks are required to be worn while in the facility regardless of vaccination status. Surgical or cloth masks are required at all times for all staff outside of patient care areas. Staff in offices that have multiple individuals where social distancing cannot be achieved are required to wear a mask at all times. In addition to wearing a mask, a face shield is available if necessary. A face shield alone is not an acceptable replacement for a mask.
4. **Patient Care/Transport**
 - When transferring patients, ensure that patient has mask on in the hallway.
 - Use COVID elevator when transporting COVID patients.
 - Negative pressure rooms have been completed in PCU, ICU and CCU.
5. **Virtual Meetings vs. In-Person Meetings**
RMC is transitioning back to virtual meetings. If meetings are in-person, adhere to social distancing, masks and hand hygiene.

"continued on next page"

1



[Handwritten signature]
di

38

Outbreak Line Listing Form

FACILITY

Name

Regional Medical Center

Staff List ☐ Patient/Resident List ☒

Date: 8/25/21 - 9/6/21
(Hospital Onset = 14 days after admission)

Time:

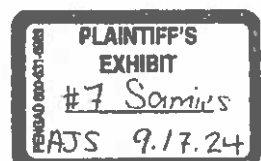
PLAINTIFF'S EXHIBIT
#6 Samies
ATC 012 24

Case Identification				Symptoms (new onset)					Specimens/Diagnostics														
Name of Patient/Resident/ Staff (Surname, Initial)	Sex M/F	Room/ Bed No.	Date of birth DDMMYYYY	Fever	Night sweats	Chills	Sore throat	Cough s of	Shortness of breath	Loss of smell/taste	Diarrhea	Vomiting	Headache	Muscle Aches	Other Symptoms	Symptom Onset DDMM	Initial Swab DDMM	Initial Result	Second Swab DDMM	Second Result	R-Resected R-Hospitalized D-Death	Date DDMM	
[REDACTED]	F	2308 2313 2315 3140	[REDACTED]	8/24							8/24	8/14 One episode, nausea for several days				Dr. 99 called on 8/26. Pt. moved to medical floor 8/27. No COVID symptom	8/24	08/12 prior to admit	Neg	08/24	Pos	Hosp.	Moved 8/25 to inpatient unit
[REDACTED]	M	2311 2314 3353	[REDACTED]				8/27									8/16 prior to admit	Neg	8/25	Pos	Death 8/29			
[REDACTED]	F	2312 2316 2315	[REDACTED]				8/22				8/12 per pt. 8/22 stomach ache		8/19 8/23		No symptoms present	8/12 prior to admit	Neg	8/25	Pos		R-Released to Bishopville Manor		
[REDACTED]	M	2315	[REDACTED]													No Symp			8/25	Pos.	Hosp. Onset	Admitted 5/13/21; 10/27/21	

Name of Patient/Resident/Staff (Surname, Initial)	Sex M/F	Room/Bed No.	Date of birth DDMM/YYYY	Fever	Night sweats	Chest	Sore throat	Cough	Shortness of Breath	Loss of taste/smell	Diarrhea	Vomiting	Headache	Myalgia	Other Symptoms	Symptom Onset DDMM	Initial Swab Result DDMM	Initial Swab Result DDMM	Second Swab Result DDMM	Second Swab Result DDMM	R-Resolved H-Hospitalized D-Death	Date DDMM
[REDACTED]	M	2316	[REDACTED]													No Sympt	8/12	Neg	8/25	Pos	Hosp. Onset	Admitted 8/13
[REDACTED]	M	2313	[REDACTED]													8/25 - completed	Prior to admit 8/12	Neg	8/25	Pos	R-Resolved	Admitted 8/13
156700	M	2311	[REDACTED]	8/24																	H-	
[REDACTED]	M	2313	[REDACTED]						8/25										8/25	Pos	H-	Hospitalized 8/31 due to hematuria
7003355	M	2314 (CDU)	[REDACTED]	8/29													Prior to admit 8/25	Neg	8/29	Pos	H-	Hospitalized 9/4 for sepsis secondary to UTI
23891	F	2307 (CDU)	[REDACTED]												No sympt		Prior to admit 8/25	Neg	8/30	Pos	H-	Hospitalized 9/7 to inpatient unit
7006255	F	2316	[REDACTED]																			
[REDACTED]	F	2308	[REDACTED]												No Sympt		Prior to admit 8/25	Neg	8/31	Neg		
7002551	F	2309	[REDACTED]														Prior to admit 8/25	Neg	8/29	Neg		De 8/9
[REDACTED]	M	2312	[REDACTED]												No Sympt		Prior to admit 8/9	Neg	8/25	Pos	Hospital Onset	Placed 8/25
7002712	M	2312	[REDACTED]																			

F:\313418\Sasato\COVID-19\Behavioral Health Line Listing Form.docx
Updated on: 04/09/2021
Updated By: Preston Tine

Last Name	First Name	Department	Date Tested	Results	Location Where Swabbed
[REDACTED]	[REDACTED]	Behavioral Health	8/16/2021	Negative	RMC Employee Health
[REDACTED]	[REDACTED]	BHU	8/19/2021	Negative	RMC Employee Health
[REDACTED]	[REDACTED]	BHU	8/25/2021	Negative	RMC Employee Health
[REDACTED]	[REDACTED]	BHU	8/27/2021	[REDACTED]	RMC Employee Health
[REDACTED]	[REDACTED]	BHU	8/27/2021	[REDACTED]	RMC Employee Health
[REDACTED]	[REDACTED]	BHU	8/29/2021	Negative	RMC Employee Health-ED
[REDACTED]	[REDACTED]	BHU	8/30/2021	[REDACTED]	RMC Employee Health-ED
[REDACTED]	[REDACTED]	BHU	8/30/2021	Negative	RMC Employee Health
[REDACTED]	[REDACTED]	BHU	8/30/2021	Negative	RMC Employee Health
[REDACTED]	[REDACTED]	BHU	8/31/2021	Negative	RMC Employee Health
[REDACTED]	[REDACTED]	BHU	8/31/2021	Negative	RMC Employee Health
[REDACTED]	[REDACTED]	BHU	9/13/2021	Negative	RMC Employee Health
[REDACTED]	[REDACTED]	BHU	9/18/2021	Negative	RMC Employee Health
[REDACTED]	[REDACTED]	BHU	9/23/2021	Negative	RMC Employee Health





Amanda C. Williams
Partner
t: 843.727.6309
f: 843.727.2680
amandawilliams@parkerpoe.com

Atlanta, GA
Charleston, SC
Charlotte, NC
Columbia, SC
Greenville, SC
Raleigh, NC
Spartanburg, SC
Washington, DC

November 12, 2024

VIA US MAIL AND E-MAIL

Serge Wandji
PO Box 523
Columbia, SC 29202
sergewandji@gmail.com

RE: *Serge R. Wandji v. The Regional Medical Center and Dr. John H. Samies*
Case No. 2023-CP-38-00331

Dear Mr. Wandji:

Enclosed for service upon you, please find the following:

1. Defendant The Regional Medical Center's Responses to Plaintiff's Revised Requests for Production and Revised Set of Interrogatories; and
2. Documents bates numbered RMC-Wandji 0114-0115
3. Defendant's Privilege Log.

Thank you and with kinds regards, I am

Sincerely,



Amanda C. Williams

ACW/cle
Enclosures

PPAB 11694019v1

STATE OF SOUTH CAROLINA	)	IN THE COURT OF COMMON PLEAS
	)	FIRST JUDICIAL CIRCUIT
COUNTY OF ORANGEBURG	)	
	)	Civil Action No. 2023-CP-38-00331
Serge R. Wandji,	)	
	)	
Plaintiff,	)	DEFENDANT'S RESPONSES TO
	)	PLAINTIFF'S REVISED REQUESTS
vs.	)	FOR PRODUCTION AND REVISED SET
	)	OF INTERROGATORIES
The Regional Medical Center, and	)	
Dr. John H. Samies,	)	
	)	
Defendants.	)	

Pursuant to Rules 26 and 34 of the South Carolina Rules of Civil Procedure, Defendant The Regional Medical Center (hereinafter "Defendant"), by and through its undersigned counsel, hereby responds to the Revised Requests for Production of Plaintiff Serge R. Wandji (Plaintiff) as follows:

PRELIMINARY STATEMENT

Defendant has not completed the investigation, discovery or analysis of all facts of this case and has not completed preparation for trial. Accordingly, each of the following Responses is provided without prejudice to Defendant's right to introduce at trial any evidence that is subsequently discovered relating to proof of presently known facts and to produce and introduce all evidence, whenever discovered, relating to the proof of subsequently discovered material facts. Moreover, facts, documents and things now known may be imperfectly understood and accordingly, such facts, documents and things may not be included in the following Responses. Defendant reserves the right to reference, discover or offer into evidence at the time of trial, any and all facts, documents and things notwithstanding the initial Responses and objections interposed herein. Defendant further reserves the right to reference, discover or offer into evidence at the time of trial, any and all facts, documents and things which are not presently recalled but may be recalled at some time in the future.

ANSWERS TO INTERROGATORIES

1. Please provide a complete list of all litigation involving The Regional Medical Center (TRMC) as a defendant, including any Equal Employment Opportunity Commission (EEOC) charges or Department of Labor claims related to employment issues. Each entry must include:

- (a) civil action number or other identifying number;
- (b) jurisdiction and forum in which the action was filed;
- (c) nature of the claim or action; and
- (d) final resolution of the claim or action.

ANSWER: Pursuant to the Court's November 11, 2024 Order, the only lawsuit filed against Defendant during the period March 15, 2020 until March 15, 2022 that involved allegations of wrongful termination, other than this present matter, is the following:

- *Elizabeth A. McKinney v. Regional Medical Center of Orangeburg and Calhoun Counties; Orangeburg County; and Calhoun County; Case No. 5:21-cv-00909-CMC-KDW; District of South Carolina, Orangeburg Division; Discrimination in Violation of the Americans with Disabilities Act; resolved.*

2. Provide a full list of all Workers' Compensation complaints filed with TRMC workers' compensation insurance (Antum Risk) by any of your employees who contracted the COVID-19 virus from January 1, 2021 to Present. The list must include:

- (a) employee's name (if permissible);
- (b) department or working unit; and
- (c) final resolution of each complaint.

ANSWER: Pursuant to the Court's November 11, 2024 Order, Defendant need not respond to this Interrogatory.

3. Provide a full list of all Workers' Compensation complaints filed with the South Carolina Workers' Compensation Commission against TRMC by employees who contracted the COVID-19 virus from January 1, 2021 to Present. The list must include:

- (a) employee's name (if permissible);
- (b) department or working unit; and
- (c) final resolution of each complaint.

ANSWER: Pursuant to the Court's November 11, 2024 Order, Defendant need only identify the total number of COVID-19 related worker's compensation claims filed with the South Carolina Worker's Compensation Commission during the period March 15, 2020 until March 15, 2022 and whether any of those claimants were terminated from employment after filing those worker's compensation claims.

Only one employee, other than Plaintiff, filed a workers' compensation claim with the South Carolina Worker's Compensation Commission after contracting COVID-19. That employee was not terminated from employment after filing the claim with the Commission.

4. Identify all TRMC employees who contracted COVID-19, as reported to the Centers for Disease Control and Prevention (CDC) and other federal and state agencies, from January 1, 2021, to the present. Each entry must specify employee's working unit/department.

ANSWER: Pursuant to the Court's November 11, 2024 Order, Defendant need not respond to this Interrogatory.

5. Produce all COVID-19-related financial reports prepared for insurance reimbursement or government funding, including but not limited to funds received from the CARES Act.

ANSWER: Pursuant to the Court's November 11, 2024 Order, Defendant need not respond to this Interrogatory.

6. Provide a detailed account of all CDC reports submitted by TRMC regarding staff infections with COVID-19 for the year 2021, broken down by month and identifying the working unit/department of each infected employee.

ANSWER: Pursuant to the Court's November 11, 2024 Order, Defendant need not respond to this Interrogatory.

7. Describe any criminal charges brought against TRMC or its representatives from January 1, 2020, to the present. Include the date, jurisdiction, and type of charge.

ANSWER: Pursuant to the Court's November 11, 2024 Order, Defendant need not respond to this Interrogatory.

RESPONSES TO REQUESTS FOR PRODUCTION

1. Produce all documents reflecting communications between TRMC and any third parties, including government agencies, regarding:

- (a) Plaintiff's employment;
- (b) Plaintiff's illness; and
- (c) Allegations set for in the Complaint.

RESPONSE: Defendant objects to this Request to the extent it seeks information, documents or other communications that are protected from discovery by the attorney-client privilege, work-product doctrine, or any other privilege or doctrine. Subject to and without waiving the foregoing objection and pursuant to the Court's November 11, 2024 Order, Defendant directs Plaintiff to Defendant's prior document production bates numbered RMC-Wandji 0001-0113 and supplemental documents bates numbered RMC-Wandji 0114-0115. See attached privilege log for communication withheld on privilege grounds.

2. Produce any documents indicating any statement or representation made by Defendant (or others on Defendant's behalf) that constitutes an objection or denial concerning the facts of this case of any allegations in the Complaint.

RESPONSE: Defendant objects to this Request to the extent it seeks information, documents or other communications that are protected from discovery by the attorney-client privilege, work-product doctrine, or any other privilege or doctrine. Subject to and without waiving the foregoing objection and pursuant to the Court's November 11, 2024 Order, Defendant directs Plaintiff to Defendant's prior document production bates numbered RMC-Wandji 0001-0113 and supplemental documents bates numbered RMC-Wandji 0114-0115. See attached privilege log for communication withheld on privilege grounds.

3. Provide all notes, emails, writings, or other documents created by or for TRMC (or others on Defendant's behalf) that pertain to Plaintiff's employment, illness, or any related matters. Including but not limited to emails and communications made by then Director of Human Resources Mrs. Tina Norris to any person other than the two attorneys who worked on this case, about Plaintiff's employment, illness, or any related matter.

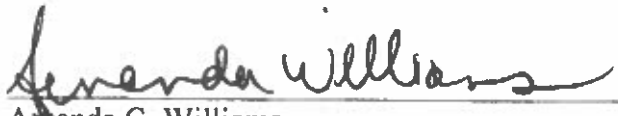
RESPONSE: Defendant objects to this Request to the extent it seeks information, documents or other communications that are protected from discovery by the attorney-client privilege, work-product doctrine, or any other privilege or doctrine. Subject to and without waiving the foregoing objection and pursuant to the Court's November 11, 2024 Order, Defendant directs Plaintiff to Defendant's prior document production bates numbered RMC-Wandji 0001-0113 and supplemental documents bates numbered RMC-Wandji 0114-0115. See attached privilege log for communication withheld on privilege grounds.

4. Produce all diaries, reports, internal emails, calendars, journals, social media postings, text messages, and any other personal or business records maintained by TRMC that relate to Plaintiff's employment or this case. Including but not limited to emails and communications made by then Director of Human Resources Mrs. Tina Norris to any person other than the two attorneys who worked on this, about Plaintiff's employment, illness, or any related matters.

RESPONSE: Defendant objects to this Request to the extent it seeks information, documents or other communications that are protected from discovery by the attorney-client privilege, work-product doctrine, or any other privilege or doctrine. Subject to and without waiving the foregoing objection and pursuant to the Court's November 11, 2024 Order, Defendant directs Plaintiff to Defendant's prior document production bates numbered RMC-Wandji 0001-0113 and supplemental documents bates numbered RMC-Wandji 0114-0115. See attached privilege log for communication withheld on privilege grounds.

5. Produce all documents and information provided to Dr. John H. Samies from TRMC's Employee Health and Infection Control Department regarding Plaintiff's exposure and infection with COVID-19.

RESPONSE: Defendant objects to this Request as being overly broad, unduly burdensome, and not reasonably calculated to lead to the discovery of admissible evidence. Specifically, Dr. Samies had no supervisory authority over Plaintiff, nor did he have any input into the decision to terminate Plaintiff's employment. Plaintiff's only remaining cause of action is for workers' compensation retaliation. As such, any documents or information provided to Dr. Samies by Defendant regarding Plaintiff's exposure and infection with COVID-19 is unrelated to the claims and defenses in this matter. Subject to and without waiving the foregoing objections, Defendant directs Plaintiff to Defendant's prior document production bates numbered RMC-Wandji 0001-0113. Upon information and belief, all documents presented to Dr. Samies for his review are contained in Defendant's prior document production.



Amanda C. Williams

Email: amandawilliams@parkerpoe.com

PARKER POE ADAMS & BERNSTEIN LLP

850 Morrison Drive, Suite 400

Charleston, South Carolina 29403

Phone: 843-727-2650

Fax: 843-727-2680

ATTORNEY FOR DEFENDANT

November 12, 2024

Charleston, South Carolina

STATE OF SOUTH CAROLINA
COUNTY OF ORANGEBURG

Serge R. Wandji,

Plaintiff,

vs.

The Regional Medical Center, and
Dr. John H. Samies,

Defendants.

) IN THE COURT OF COMMON PLEAS
) FIRST JUDICIAL CIRCUIT

) Civil Action No. 2023-CP-38-00331

) **CERTIFICATE OF SERVICE**

I certify that a copy of the foregoing **DEFENDANT'S RESPONSES TO PLAINTIFF'S REVISED REQUESTS FOR PRODUCTION AND REVISED SET OF INTERROGATORIES** have been served upon the following *Pro Se Plaintiff* by emailing and mailing a copy of the same to him addressed as shown below this 12th day of November 2024:

Serge R. Wandji
PO Box 523
Columbia, SC 29202
sergewandji@gmail.com

Pro Se Plaintiff



PARKER POE ADAMS & BERNSTEIN LLP
850 Morrison Drive, Suite 400
Charleston, SC 29403
Phone: (843) 727-2650

From: Tina L. Norris
To: Frederick Thurman
Cc: Laura L. Evans; Tina L. Norris

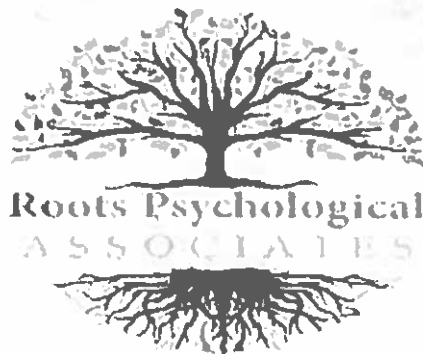
From: Serge Wandji <sergewandji@gmail.com>
Date: March 11, 2022 at 8:28:27 PM EST
To: "Tina L. Norris" <tlnorris@regmed.com>, "Nicole B. Brown" <nbbrown@regmed.com>
Subject: Medical update

Good morning,
Please find attached to this email my latest medical update, from the Psychological Clinic where I was referred to by my Primary Care Provider to receive therapy related to Covid-19 that I contracted at the Regional Medical Center back in August 2021, while providing nursing care to my patient at the hospital.

Please let me know when I can return to work as recommended by the clinician.

Respectfully,
Serge Wandji RN

RMC-Wandji 0114



Roots Psychological Associates
1531 Laurel St. Columbia, SC 29201
Phone: (803) 764-1010

Re: Serge Wandji, DOB: 06/01/1968
Date: 03/11/2022

To Whom It May Concern,

Mr. Wandji has been a client at our practice since 02/10/2022. During that time, we have been working through his complications since contracting COVID-19 in the fall of 2021 and being admitted to the hospital. He has made some progress, but there are still concerns that could mildly limit his functionality at bedside nursing (physical- still waiting to gain back his smell, mental/emotional- acute stress due to COVID-19 experience and hospitalization).

It is my clinical recommendation that he be cleared to start back at the hospital but at part-time hours and starting out in an administrative role. The goal will be to ease him back into his previous role, but in small increments at a time.

Sincerely,

A handwritten signature in black ink, appearing to read "James Stewart Courtney".

James Stewart Courtney, MA, LPC-A
Licensed Therapist
803-764-1010 (Phone)
803-764-0193 (Fax)
Jscourtney.therapy@gmail.com

Date: 03/11/2022

RMC-Wandji 0115

Serge Wandji v. The Regional Medical Center
Privilege Log of Defendant Regional Medical Center

Bates Range	Date	Document	Author	Sent to or Prepared For	Subject Matter	Claim of Privilege
RMC-Wandji 0114-0115	3/12/2022	Email correspondence	Tina L. Norris (tlnorris@regmed.com)	Frederick Thurman, Esq. (fthurman@shumaker.com), Laura Evans, Esq. (levans@shumaker.com)	Communication with counsel seeking legal advice	Attorney-Client Privileged

STATE OF SOUTH CAROLINA)
COUNTY OF ORANGEBURG)

IN THE COURT OF COMMON PLEAS
FIRST JUDICIAL CIRCUIT

Serge R. Wandji,
Plaintiff

Civil Action No.: 2023-CP-38-00331

**MEMORANDUM IN OPPOSITION TO
DEFENDANT'S MOTION FOR SUMMARY
JUDGMENT**

Vs

The Regional Medical Center,
Defendants

FILED FOR RECORD
WINNIE B. CLARK
2024 NOV 21 P 4:54
CLERK OF COURT
ORANGEBURG, SC

I. INTRODUCTION

Plaintiff, a dedicated nurse who risked his life on the front lines of the COVID-19 pandemic submits this memorandum in opposition to Defendant's Motion for Summary Judgment in the context of a workers' compensation retaliation case. Defendant claims that no genuine issue of material fact exists, yet the facts demonstrate otherwise. Defendant's improper reliance on a letter from one of its Board of Trustees members as independent expert testimony, its failure to accommodate Plaintiff's medical restrictions, its unlawful use of a forced leave of absence, its reckless and negligent handling of Plaintiff protected health information (PHI), its coercion and improper settlement practice, and its secret consultation with labor counsel all raise significant legal and factual issues that preclude summary judgment.

II. STATEMENT OF FACTS

Pro see Plaintiff, Serge R. Wandji, commenced his employment at The Regional Medical Center (TRMC) in Orangeburg, South Carolina, on March 8, 2021, as a staff nurse. His job description explicitly noted the high-risk nature of his role, stating that he would be “*regularly exposed to infection, contagious diseases, contact with patients under a wide variety of circumstances,*” placing him in a hazardous working environment (Exhibit #1). In August 2021, a widespread outbreak of COVID-19 occurred at TRMC, during which the Plaintiff was exposed (Exhibit #2) and subsequently tested positive for the virus on August 27, 2021 (Exhibit # 3). As a result, TRMC medically removed him from duty. On August 31, 2021, while suffering from severe COVID-19 symptoms at home, the Plaintiff filed a workers’ compensation claim through TRMC’s online system and emailed an incident report to the Employee Health Department on September 2, 2021 (Exhibit # 4) and both were duly received by TRMC (Exhibit # 5) Following this claim, the Defendant began a series of retaliatory actions against the Plaintiff.

On September 3, 2021, while the Plaintiff was on a workers’ compensation leave, severely ill, isolated at home, and struggling with the virus, TRMC exacerbated his distress by sending him a text message urging his return to work (Exhibit # 6). This unnecessary pressure worsened the Plaintiff’s condition, leading to his hospitalization at TRMC on September 6, 2021, where he was diagnosed with COVID-19 pneumonia and acute stress disorder, as documented in his medical progress notes (Exhibit # 7).

The retaliation persisted even while the Plaintiff was hospitalized. On September 7, 2021, while the Plaintiff was fighting for his life in the intensive care unit, TRMC sent a letter to his home, demanding that the Family and Medical Leave Act (FMLA) paperwork be completed within 15 days (Exhibit # 8). TRMC issued this demand despite knowing that the Plaintiff was incapacitated and hospitalized at their facility. Furthermore, the Plaintiff had never requested

FMLA leave; he was medically removed by TRMC after contracting COVID-19 at work and had already filed for workers' compensation. The Defendant was also aware that the Plaintiff, having worked for only six months, did not qualify for FMLA, making the demand even more unreasonable and indicative of retaliatory intent. Moreover, in a completely illegal move, on September 24, 2012, while Plaintiff has already been on a workers' compensation leave for almost a month, recovering home from a near death COVID-19 experience, Defendant sent a mail to Plaintiff approving a forced leave of absence which Plaintiff never requested, with a retroactive effective date back to when Plaintiff was medically removed by the Defendant from duty due to a work related injury and infection from COVID-19 on August 28, 2021(Exhibit # 8a).

After his discharge from the hospital, the Plaintiff continued to endure retaliatory actions. While recovering from his severe illness and still on workers' compensation medical leave, TRMC required him to make monthly payments to maintain his health insurance. The Plaintiff complied, sending multiple checks to TRMC, despite the ongoing financial and physical hardship (Exhibit # 9). Despite repeated efforts to obtain information about his workers' compensation claim (Exhibit # 10), the Plaintiff's inquiries were met with silence from TRMC. On November 29, 2021, the Plaintiff formally filed a Form 50 with the South Carolina Workers' Compensation Commission, seeking compensation for an occupational disease (Exhibit # 11). During subsequent settlement discussions, the Defendant's attorney, Mr. Roy Howell III, made coercive and improper offers, including a \$100 settlement check in exchange for a general release that would waive the Plaintiff's right to pursue a retaliation claim (Exhibit # 12: Settlement Offer letter). This coercive conduct is detailed further under the "ARGUMENTS" section. The Plaintiff, steadfastly rejecting the Defendant's coercive settlement offers, filed a

renewed Form 50 with the South Carolina Workers' Compensation Commission on September 9, 2022 (Exhibit # 13: Second Form 50 filing). This submission marked the beginning of a new phase in the workers' compensation dispute, during which the Defendant engaged in additional retaliatory actions. One of the most egregious examples of such retaliation involved the unlawful disclosure of the Plaintiff's Protected Health Information (PHI). The Defendant repeatedly sent multiple unencrypted emails to various recipients, thereby exposing highly sensitive details, including the Plaintiff's date of birth, address, health insurance information, lab results, medical diagnoses, and other confidential data.

These disclosures constitute a serious violation of the Health Insurance Portability and Accountability Act (HIPAA) and highlight the Defendant's disregard for legal standards governing patient privacy and data protection. The implications of this violation, along with its retaliatory nature and legal ramifications, are discussed in greater detail under the "ARGUMENTS" section of this memorandum.

Throughout this period, the Plaintiff remained under medical care, providing regular updates to TRMC (Exhibit #15), which were duly acknowledged (Exhibit # 14). On January 17, 2022, the Plaintiff's primary care physician cleared him to return to work with temporary restrictions (Exhibit #16). Despite notifying TRMC of his readiness to return, TRMC refused to reinstate him. On January 25, 2022, the Plaintiff's attorney also contacted TRMC's legal counsel to confirm his ability to work, but this communication went unanswered (Exhibit #17). The Plaintiff made continuous and earnest efforts to resume his employment at TRMC. Demonstrating his commitment, he personally traveled to TRMC on January 26, 2022 to request reinstatement and subsequently sent follow-up emails to senior leadership on February 25, 2022, and March 9, 2022, to reiterate his willingness and readiness to return to work (Exhibit #18; and

Exhibit # 18a: email of March 9, 2022). Despite the Plaintiff's diligent attempts and a psychologist's clearance for him to return to duty on March 11, 2022 (**Exhibit #19**), TRMC refused to reinstate him.

While the Plaintiff was engaged in these good-faith efforts to return to his position, the Defendant was covertly consulting with two undisclosed labor attorneys. These consultations were not disclosed and centered on devising strategies to terminate the Plaintiff's employment under the guise of leave exhaustion (**See Exhibit #20:** Email with secretive labor lawyers). Such actions, undertaken in secret, reflect a calculated approach that contradicts the principles of fairness and good faith that are fundamental to employment law. The Defendant's behavior, which undermines the integrity of the employer-employee relationship, is addressed in more detail under the "ARGUMENTS" section of this memorandum.

Ultimately, on March 15, 2022, TRMC proceeded to terminate the Plaintiff's employment. This termination, which occurred despite the Plaintiff's compliance with all medical clearances and his ongoing efforts to return to work, represents a clear violation of South Carolina law and supports the claim of retaliatory and unjust treatment (**Exhibit #21;** Termination letter).

III. STANDARD OF REVIEW

Under **Rule 56** of the South Carolina Rules of Civil Procedure, summary judgment is only appropriate when "there is no genuine issue as to any material fact and the moving party is entitled to judgment as a matter of law." The evidence and all reasonable inferences must be viewed in the light most favorable to the non-moving party, in this case, Plaintiff.

IV. LEGAL ARGUMENT

A. Plaintiff Presents Sufficient Evidence of Retaliation

To establish a claim under S.C. Code § 41-1-80, the Plaintiff must show: (1) engagement in protected activity (filing for workers' compensation benefits); (2) an adverse employment action (termination); and (3) a causal connection between the protected activity and the adverse action.

1. **Protected Activity:** It is undisputed that Plaintiff filed for workers' compensation benefits due to COVID-19. This clearly constitutes protected activity under the statute.
2. **Adverse Action:** The Defendant terminated Plaintiff's employment, which is an adverse employment action. (Exhibit #21: Plaintiff's Termination letter)
3. **Causal Connection:** Plaintiff can show a temporal proximity between the workers' compensation claim and the termination. This timing supports an inference of retaliation. South Carolina courts recognize that "close temporal proximity between an employee's protected activity and an adverse employment action may give rise to an inference of retaliation" (see *Floyd v. Laidlaw Transit, Inc.*, 321 S.C. 271, 275 (Ct. App. 1996)). Also, Plaintiff in this memorandum set forth other causal connections between his protected activity and the Defendant multiple adverse actions.

B. Defendant's Stated Reason for Termination is Pretextual

1. Introduction

The Defendant claims that the Plaintiff's termination was based on his "inability to meet work standards" and not in retaliation for filing a workers' compensation claim. The Plaintiff disputes this reasoning and provides compelling evidence that the Defendant

failed to accommodate his medically prescribed work restrictions following his workplace injury. This failure violates both state and federal law. Furthermore, after neglecting to provide necessary accommodations, the Defendant used these same restrictions to argue that the Plaintiff could not meet the performance standards required for his position. This conduct strongly suggests that the Defendant's rationale is merely a pretext for retaliation.

2. Legal Standard for Pretext

South Carolina law requires that if an employer provides a legitimate, non-retaliatory reason for termination, the employee must demonstrate that the stated reason is pretextual. See *Hines v. Blue Cross Blue Shield of South Carolina*, 411 S.C. 108, 119 (2014). The Plaintiff will present evidence that the Defendant's reliance on "inability to meet work standards" is not only unsupported but also a cover for retaliatory motives.

3. Evidence of Retaliatory Conduct

In this case, the Plaintiff, a nurse at the Defendant hospital, contracted COVID-19 while working and subsequently filed a workers' compensation claim. Shortly thereafter, while on workers' compensation leave, the hospital forced the Plaintiff into an extended leave of absence, falsely characterizing it as voluntary. The Defendant later cited this involuntary leave as a pretext for termination, claiming "leave exhaustion" as the basis for dismissal.

Under S.C. Code Ann. § 41-1-80, it is illegal for employers to retaliate against employees for filing workers' compensation claims. The Defendant's actions—mandating involuntary leave and using it to justify termination—are clear examples of pretextual retaliation. The Defendant's refusal to accommodate the Plaintiff's medically

recommended restrictions and subsequent termination for alleged failure to meet job standards further underscore this violation.

4. Case Law Supporting Retaliation Claims

South Carolina precedent supports the Plaintiff's position. In *Hinton v. Designer Ensembles, Inc.*, 540 S.E.2d 94 (S.C. Ct. App. 2000), the court held that adverse actions following a workers' compensation claim can demonstrate retaliation when the employer's justification is pretextual. Similarly, *Johnson v. J.P. Stevens & Co.*, 417 S.E.2d 527 (S.C. Ct. App. 1992), affirmed that terminations lacking legitimate justification shortly after workers' compensation claims constitute retaliation. The Defendant's timing and misuse of the forced leave clearly align with the retaliatory practices deemed unlawful in these cases.

5. Unlawful Retroactive Forced Leave of absence

The retaliation against the Plaintiff persisted even during his hospitalization. On September 7, 2021, while the Plaintiff was critically ill in the intensive care unit with COVID-19 pneumonia, TRMC sent a letter demanding he complete Family and Medical Leave Act (FMLA) paperwork within 15 days (**Exhibit #8**). This demand was issued despite TRMC's full knowledge that the Plaintiff was incapacitated and hospitalized in their own facility. The Plaintiff had never requested FMLA leave, as he was medically removed from duty following his workplace-acquired infection. Furthermore, TRMC was aware that the Plaintiff, having worked for only six months, was ineligible for FMLA leave, making the demand baseless and indicative of retaliatory intent. Courts have consistently recognized that requiring involuntary leave, particularly as a pretext for termination, may constitute unlawful retaliation. See *Hines v. Blue Cross Blue Shield of*

South Carolina, 411 S.C. 108, 118-19 (2014).

In an even more egregious maneuver, on September 24, 2021, while the Plaintiff was still recovering from a near-fatal COVID-19 experience, TRMC retroactively approved a fictitious leave of absence that the Plaintiff had never requested (Exhibit #8a). This forced leave of absent was backdated to August 28, 2021, the day TRMC medically removed the Plaintiff from duty due to his work-related COVID-19 infection. Retroactively imposing leave in this manner suggests an effort to create a false narrative of voluntary leave rather than acknowledging the Plaintiff's work-related injury. Courts have condemned such manipulative practices as pretextual retaliation, particularly when they coincide with protected activities. See *Wallace v. Milliken & Co.*, 305 S.C. 118, 406 S.E.2d 358, 360 (1991).

6. Conclusion

By retroactively imposing forced leave and later using it as a basis for termination, the Defendant manipulated the employment records to misrepresent the Plaintiff's circumstances. This conduct not only disregards the fact that the Plaintiff was removed due to a workplace injury but also demonstrates the Defendant's calculated efforts to undermine his workers' compensation claim. Such actions violate South Carolina's workers' compensation retaliation statute, S.C. Code Ann. § 41-1-80, which prohibits adverse actions against employees for filing workers' compensation claims.

The timing of these actions, coupled with baseless demands and retroactive impositions, underscores the Defendant's retaliatory intent. Courts have consistently emphasized that adverse actions masked as administrative measures but motivated by retaliation are unlawful. See *Hinton v. Designer Ensembles, Inc.*, 540 S.E.2d 94 (S.C. Ct. App. 2000).

The Defendant's actions in this case are no different and must be addressed as clear violations of the Plaintiff's statutory rights.

V. ARGUMENTS IN OPPOSITION TO SUMMARY JUDGMENT

1. Termination Timing Supports an Inference of Retaliation

The timing of the Plaintiff's termination strongly supports an inference of retaliation, particularly when considering the proximity between the Plaintiff's filing of the workers' compensation claim and the adverse employment action. Plaintiff officially filed Form 50 for a workers' compensation claim on September 9, 2022, seeking compensation for his contraction of COVID-19 in August 2021, while working as a registered nurse at Defendant's hospital. Shortly after the conclusion of these workers' compensation proceedings, the Plaintiff was terminated on March 15, 2023 (Exhibit #21: Plaintiff's Termination letter). This six-month period between the formal filing of the claim and the termination is suggestive of retaliatory motives. South Carolina law recognizes that temporal proximity between a protected activity, such as filing a workers' compensation claim, and an adverse employment action, such as termination, can create an inference of retaliation. As seen in *Hines v. Blue Cross Blue Shield of South Carolina*, 411 S.C. 108, 119 (2014), the court affirmed that a short time span between the exercise of workers' compensation rights and termination supports a prima facie case for retaliation. The temporal proximity in this case—coupled with the lack of any other legitimate justification for the termination—suggests that the Defendant's decision was retaliatory, aimed at punishing the Plaintiff for exercising his rights under the South Carolina Workers' Compensation Act. This inference is further bolstered by the fact that the Plaintiff was terminated following a contentious workers' compensation process, which relied heavily on biased expert testimony and procedural

missteps by the Defendant. Therefore, the sequence of events gives rise to a strong presumption that the termination was not a coincidence but rather a retaliatory act.

2. Failure to Accommodate Plaintiff's Medical Restrictions Following Workers' Compensation Injury

On January 17, 2022, the Claimant's primary care physician (PCP) cleared him to return to work with temporary restrictions (**Exhibit # 16**). This update was sent to TRMC, but the Defendant refused to reinstate him. On January 25, 2022, Claimant's attorney also contacted TRMC's legal counsel to confirm his readiness to work, but no response was received (**Exhibit # 17**). After repeated attempts by Plaintiff to return to work, including driving to TRMC to request to resume work, he sent an email to leadership on February 25, 2022 and March 9, 2022 (**Exhibit # 18; Exhibit #18a: my return to work III email**). TRMC still denied his return. Despite further clearance from a psychologist on March 11, 2022 (**Exhibit # 19**), the Claimant was terminated on March 15, 2022, in violation of South Carolina law (**Exhibit # 21**).

Defendant's failure to accommodate Plaintiff's medically prescribed work restrictions following a workers' compensation injury violates both state and federal law. The South Carolina Workers' Compensation Act mandates that employers provide reasonable accommodations for injured workers to perform their job duties (*S.C. Code Ann. § 42-9-10*). Under the Americans with Disabilities Act (ADA), employers are required to make reasonable accommodations for employees with disabilities or medical restrictions, provided that such accommodations do not cause undue hardship to the employer (*42 U.S.C. § 12112(b)(5)(A)*). In this case, Defendant failed to accommodate Plaintiff's medical restrictions after the workers' compensation injury, thereby preventing the Plaintiff from performing his job within the scope of

those restrictions. The South Carolina Supreme Court has emphasized the necessity of considering all evidence, including the employer's failure to accommodate, when determining whether a claim of retaliation has merit. *Horn v. Davis Elec. Constructors, Inc.*, 307 S.C. 559, 416 S.E.2d 634 (1992).

Furthermore, despite the Defendant's obligation to provide necessary accommodations, it failed to do so and subsequently weaponized the Plaintiff's medical restrictions against him. The Defendant used these unaccommodated restrictions to assert that the Plaintiff was unable to meet the performance standards required for his position. In the termination letter, the Defendant stated: "*Unfortunately, the organization doesn't not have a part-time administration position available at this time per your (Plaintiff's Physician's) request.* Followed by the following statement "*At this time we have no choice but to end your employment effective 3/15/2022 due to leave exhaustion*". (Exhibit #21: Plaintiff's Termination letter). **There is no mention in that termination letter about Plaintiff not being able to meet work standard as currently alleged by the Defendant.** The refusal to accommodate Plaintiff, followed by a termination letter that blamed his inability to work full-time, supports an inference of retaliatory motive. Thus, this is a **clear example of unlawful retaliation**, as employers are prohibited from penalizing employees for limitations stemming from their on-the-job injuries (*Reeves v. Sanderson Plumbing Products, Inc.*, 530 U.S. 133 (2000)). The South Carolina Supreme Court has recognized that retaliatory conduct based on an employee's medical status or need for accommodations is a violation of both workers' compensation protections and **anti-discrimination laws** (*Layman v. State Workers' Compensation Fund*, 366 S.C. 37 (2005)). This dual misuse of medical restrictions—first failing to accommodate them, and then using them as grounds for adverse action—creates a genuine issue of material fact that must be resolved by a jury.

3. Improper Use of a Letter from a Board of Trustees Member as Independent Expert Testimony

In his pre-hearing brief, as well as throughout both hearings, Mr. Roy A. Howell III, counsel for the Defendant in the workers' compensation proceedings, presented Dr. Samies as an independent and unbiased expert witness in the field of infectious diseases. However, it was subsequently revealed that Dr. Samies holds an executive position on the Medical Staff and serves as a member of the Board of Trustees at TRMC, the Defendant organization. In his deposition, when asked What kind of additional role he had at TRMC beside practicing medicine there? Dr. Samies answered “ *I've been on a variety of committees, chaired a variety committees, have served on Board of Trustees. I've served on the Medical Executive Committee*” (Exhibit # 22: Deposition Transcript Pg. 5, Lines 11-16) . This affiliations were not expressly disclosed in the so-called "expert" letter (Exhibit # 23: Dr. Samies' 'expert' letter), which was introduced as evidence in the workers' compensation proceedings by Mr. Howell, thereby creating a clear and undeniable conflict of interest.

The Defendant with the help of their attorney Mr. Howell, has improperly relied on a letter solicited from one of its own Board of Trustees members (Exhibit # 22: Excerpt from Dr. Samies' deposition Transcript Pg. 6, Lines 15-21; Pg. 7, Lines 1-2), purporting it to be an independent expert opinion, to substantiate its position in this workers' compensation case. Such reliance is inappropriate and legally problematic. A member of the Board of Trustees, who holds a vested interest in the Defendant organization, cannot be regarded as an independent expert witness, as is required under established legal standards.

According to South Carolina's Code of Civil Procedure, expert testimony must be impartial, objective, and devoid of any conflicts of interest. Courts have consistently emphasized

the importance of credibility and independence in expert testimony, noting that biased testimony cannot be used to support a judgment. In *Daubert v. Merrell Dow Pharmaceuticals, Inc.*, 509 U.S. 579 (1993), the court held that expert testimony must adhere to rigorous standards of reliability and independence. As such, the use of Dr. Samies' testimony in this case violates the legal requirement for unbiased expert evidence, further undermining the Defendant's position.

In this matter, the financial and professional relationship between Dr. Samies, a member of the Board of Trustees, and the Defendant (TRMC), gives rise to an inherent conflict of interest that renders Dr. Samies's testimony unreliable and unsuitable for consideration as independent expert testimony. Dr. Samies's deposition unequivocally revealed that his so-called "independent" letter of testimony was, in fact, initiated and generated by the Defendant itself. Specifically, when questioned about who requested that he author this letter, Dr. Samies admitted that the request originated from the Defendant's Infection Control Department, where he not only works but also serves as the chairperson (Exhibit # 22; Deposition Transcript Pg. 6, Lines 15-21; Pg. 7, Lines 1-2). Dr. Samies also admitted he well knew that his letter will be used for a labor litigation involving TRMC stating "*I understood that there was Workers' Compensation Questions*" (Exhibit # 22; Deposition Transcript Pg. 8, Lines 12-15).

Furthermore, Dr. Samies acknowledged in his deposition that, as both a staff member and Board member at the Defendant hospital (TRMC), he received "*nothing*" in compensation for his participation, including the signing of the letter in question (Exhibit # 22; Deposition Transcript Pg. 7, Lines 3-5). This disclosure underscores the conflict of interest that pervades Dr. Samies's involvement, particularly given his dual roles within the organization.

In this case, the Board member's financial and professional relationship with the Defendant creates an inherent conflict of interest, rendering their opinion unreliable and inappropriate as

independent testimony. The South Carolina courts have long recognized that the use of biased or self-serving evidence in a case procedures is grounds for denying summary judgment motion, as seen in *State v. Galbreath*, 359 S.C. 398 (2004). Also, *Hines v. Blue Cross Blue Shield of South Carolina*, 411 S.C. 108, 119 (2014)** discusses pretext in retaliation claims in that: Presenting an expert witness with undisclosed ties to the employer (such as being a member of the board of trustees) could be used as evidence of pretext, where the employer's stated reason for adverse actions is not legitimate and is instead aimed at undermining the employee's workers' compensation claim.

4. Fraud, Misrepresentation and/or Bad Faith and unlawful practices

Dr. Samies' deposition unequivocally reveals that he knowingly provided false statements in his expert report, a pivotal piece of evidence that materially influenced the Commissioner's decision to deny the Claimant's compensation claim. Specifically, Dr. Samies admitted that the Claimant, a registered nurse, was exposed to COVID-19 in August 2021 at TRMC, where multiple patients and staff tested positive (Exhibit # 24; and Exhibit # 24a). The Claimant had been caring for COVID-positive patients on his own unit during this time (Exhibit # 25; Exhibit # 22, Deposition Transcript Pg. 31, Lines 16-23). Also, on Claimant's unit staff members tested positive for the COVID-19 virus (Exhibit # 25a). Dr. Samies himself acknowledged, "*any employee (at the hospital including Claimant) can be exposed when there are patients with COVID-19*" (Exhibit # 22 Deposition Transcript Pg. 31, Lines 22-23). This admission directly contradicts his earlier assertion in his expert testimony letter that it was "*unlikely*" the Claimant's exposure to COVID-19 was related to his employment (Exhibit # 23).

Additionally, during the deposition, Dr. Samies conceded that his statements concerning the timing and location of the Claimant's COVID-19 exposure were inaccurate. He admitted to

asserting in his letter that the Claimant's workplace exposure was "*unlikely*," despite not knowing when the Claimant was actually exposed to COVID-19 (Exhibit # 22 Deposition Transcript Pg. 26, Lines 11-13). In other words, Dr. Samies repeatedly admitted that he lacked critical information about the Claimant's exposure but nonetheless concluded that workplace exposure was improbable (Exhibit # 22 Deposition Transcript Pg. 27, Lines 9-11). Moreover, Dr. Samies admitted that his previous statements were both biased and speculative. In his so-called "expert" letter, he explicitly stated, "*Given that he (the Claimant) had concerns about non-employment exposure, which prompted testing only a short time prior to his illness, I must wonder how much other potential non-employment exposure he had*" (Exhibit # 23: Dr. Samies' Expert Testimony Letter). However, during his deposition, when confronted about the above statement, Dr. Samies changed his account and claimed, "*That is what I gleaned from the records of Employee Health*" (Exhibit # 22 Deposition Transcript Pg. 11, Lines 3-6), later adding, "*It is what I understood from the records*" (Exhibit # 22 Deposition Transcript Pg. 14, Line 5). These admissions indicate that Dr. Samies's statements were not based on any direct information he had read or been told but rather his personal imagination and interpretation of records, further demonstrating the biased and speculative nature of his testimony.

It is imperative to underscore that the defense strategy employed by Mr. Roy Howell hinged primarily on presenting witnesses who would testify that the Claimant reported a potential COVID-19 exposure outside the hospital. This approach was outlined explicitly in Mr. Howell's Pre-Hearing Brief under the "Facts in Controversy" section (Exhibit # 26). At the hearing held on February 16, 2023, the Defendant introduced two employees of TRMC, Mrs. Kelci Caruso, the head of the Employee Health Department, and Mrs. Kellie Evans, staff member of the same department, in an attempt to support this defense strategy.

Contrary to the Defendant's expectations, neither Mrs. Caruso nor Mrs. Evans corroborated Mr. Howell's defense. These two employees, being the only individuals with whom the Claimant discussed his COVID-19 exposure at TRMC, failed to support the notion that the Claimant reported exposure outside the hospital. During her testimony, Mrs. Caruso explicitly stated, "No sir, I don't recall you telling me where you were exposed" (Exhibit # 27: WCC Hearing Transcript excerpt, Pg. 108, Lines 1-4). Likewise, Mrs. Evans testified, "I stated that you (Claimant) were exposed. I did not say that you stated you were exposed outside of the hospital" (Exhibit # 27: WCC Hearing Transcript excerpt, Pg. 115, Lines 6-8). Even the presiding Commissioner, T. Scott Beck, after directly questioning Mrs. Evans for further clarification, noted, "*Mr. Wandji (Claimant) we've already made the point clear*" that Claimant never reported a possible COVID-19 exposure outside the hospital (Exhibit # 27: WCC Hearing Transcript excerpt, Pg. 115, Lines 20-25; Pg. 116, Line 15-16).

It is also crucial to consider Dr. Samies' deposition, where he claimed that his assertion regarding the Claimant's potential non-employment-related exposure to COVID-19 was based on information "*gleaned from the records of Employee Health*" (Exhibit # 22 Deposition Transcript Pg. 11, Lines 3-6). These records, referred to by Dr. Samies, were provided by Mrs. Caruso and Mrs. Evans, who, as demonstrated during their testimonies, did not support Dr. Samies' narrative in his expert letter, of an external or non-employment COVID-19 exposure of Plaintiff (Exhibit # 28: The Records of Employee Health series of emails).

This inconsistency between Mr. Howell's defense strategy and the testimonies of his key witnesses not only undermines the credibility of the Defendant's case but also raises concerns about the ethical integrity of the defense.

The lack of corroboration from Defendant's key witnesses and the misleading reliance on biased and speculative expert testimony calls for a thorough reconsideration of the facts and legal arguments presented in this case. Misrepresentation of facts by an expert witness, as evident in this case, calls into question the integrity of the evidence. Case law, including *Lauderdale v. Dixon* and *Hines v. Blue Cross Blue Shield of South Carolina*, emphasizes the importance of transparency and impartiality in workers' compensation claims, particularly where expert testimony is involved. The failure to disclose a conflict of interest and the fabrication of evidence to bolster a defense may constitute violations of workers' compensation laws and undermine the fairness of the proceedings. The South Carolina Workers' Compensation system, like all judicial proceedings, mandates that claims be supported by credible and honest evidence. According to Rule 702 of the Federal Rules of Evidence and the precedent set in *Daubert v. Merrell Dow Pharmaceuticals, Inc.*, 509 U.S. 579 (1993), expert testimony must be founded on reliable principles and methods. In this case, the defense's reliance on speculative and unsubstantiated assertions falls short of these legal standards. Furthermore, Dr. Samies—who serves on the Defendant's Board of Trustees—made false and misleading statements in his so-called "expert" letter, which evidence an intentional and unlawful act. Courts have recognized that misleading representations can demonstrate intentional wrongful behavior, especially when there is evidence of dishonesty or mendacity. As articulated in *St. Mary's Honor Center v. Hicks*, 509 U.S. 502, 511 (1993), suspicions of deceit accompanying the Defendant's actions can suffice to show such unlawful conduct of retaliation.

Furthermore, Dr. Samies' failure to appear at the original workers' compensation hearing—despite being explicitly listed as a witness in the Defendant's pre-hearing brief (Exhibit # 26)—deprived the Plaintiff of a fundamental procedural right: the opportunity to cross-examine a key

witness. Cross-examination is a cornerstone of due process, particularly in adversarial proceedings such as workers' compensation claims, where the credibility and reliability of expert testimony are often pivotal. The South Carolina courts have long held that denying a party the opportunity to cross-examine a witness can significantly undermine the fairness of the proceedings. As noted in *State v. Hill*, 321 S.C. 455, 460 (1996), the right to cross-examine is essential for testing the accuracy and credibility of witnesses. In this instance, the Defendant's witness, Dr. Samies, stated in his deposition that he was unaware of any request for him to appear at the original hearing: "*I wasn't asked, to my knowledge*" (Exhibit # 22:Deposition Transcript Pg. 31, Line 6). This admission suggests that Mr. Roy Howell III, counsel for the Defendant, listed Dr. Samies as a witness but failed to adequately notify or inform him of the hearing. This conduct deprived the Plaintiff of the critical right to question Dr. Samies about his expert testimony, specifically regarding the contents of his expert letter, which played a central role in the denial of the workers' compensation claim. As established in *State v. Fletcher*, 354 S.C. 555, 562 (2003), the inability to cross-examine key witnesses significantly compromises the adversarial process and may constitute reversible error. In response to this obstruction of cross-examination, Plaintiff subsequently filed a motion in this retaliation case to depose Dr. Samies. Defendant's actions thereafter were equally troubling and suggestive of continued efforts to frustrate Plaintiff's ability to challenge the biased testimony. Defendant retained legal counsel to actively oppose Plaintiff's motion to depose Dr. Samies, expending resources to prevent Plaintiff—who was acting pro se—from asking fundamental questions regarding the so-called "expert" letter. This obstruction persisted despite Plaintiff's multiple motions to compel, leading to a protracted legal battle lasting over a year. The Defendant's objections were ultimately overruled by the court, which ordered Dr. Samies to sit for a deposition (after extensive delays),

underscoring the improper tactics employed by the defense to delay and hinder the deposition process. Such actions raise serious ethical concerns, particularly given the South Carolina courts' emphasis on ensuring that parties are afforded a fair opportunity to present their case and cross-examine witnesses, as emphasized in *In re Evans*, 410 S.C. 614, 620 (2014).

Taken together, these actions—including the false statements, the failure to disclose conflicts of interest, and the obstruction of the cross-examination process—raise substantial concerns regarding the ethical conduct of the Defendant and the integrity of the original workers' compensation proceedings. These actions, when viewed cumulatively, suggest a deliberate **pattern of retaliation**, procedural unfairness, and potential violations of the South Carolina Workers' Compensation Act. As noted in *Hines v. Blue Cross Blue Shield of South Carolina*, 411 S.C. 108, 119 (2014), retaliation against an employee for exercising their workers' compensation rights is prohibited, and the use of unethical legal tactics to obstruct a fair hearing process may itself constitute further evidence of **retaliatory conduct**. The repeated attempts by the Defendant to impede the Plaintiff's case, combined with the improper reliance on conflicted expert testimony, provide compelling grounds for the court to reject Defendant's motion for summary judgment and proceed with a full examination of the Plaintiff's claims.

5. Coercion and Improper Settlement Offers

The Plaintiff, who was employed as a nurse at The Regional Medical Center (TRMC), contracted COVID-19 in the course of employment in August 2021, and subsequently required hospitalization and treatment at TRMC. Despite this being a work-related injury covered under workers' compensation laws, TRMC engaged in improper billing practices by charging the Plaintiff for medical expenses that exceeded the coverage provided by his health insurance. These charges arose following his hospitalization in September 2021, despite TRMC's receipt of

federal funding under the Coronavirus Aid, Relief, and Economic Security (CARES) Act. This funding was specifically intended to cover medical expenses related to COVID-19, as confirmed by TRMC's President and CEO, Mr. David Sutherland, during his deposition (Exhibit # 29; pg. 9, lines 2-25). Nonetheless, TRMC still levied these costs on the Plaintiff (Exhibit # 30; Exhibit # 30a). When questioned about why the Plaintiff was billed for expenses not covered by his insurance, Mr. Sutherland failed to provide a satisfactory explanation, responding repeatedly, "*I can't answer that question*" (Exhibit # 29; pg. 15, lines 19-24; pg. 16, lines 1-4). Such conduct suggests a coercive intent to pressure the Plaintiff, who had already filed a workers' compensation claim, into an unfavorable settlement. Under South Carolina workers' compensation law, settlement agreements and releases must be entered into voluntarily and without undue pressure or improper inducement, as outlined in *Futch v. McAllister Towing of Georgetown, Inc.*, 335 S.C. 598, 618, 518 S.E.2d 591, 601 (1999). Moreover, TRMC used these improper charges as leverage in settlement negotiations, offering to waive the unauthorized medical bills and issue a \$100 check in exchange for the Plaintiff's agreement to sign a general release, waiving his right to pursue a retaliation claim. This attempted settlement is documented in Exhibit # 12 and demonstrates a clear attempt to coerce the Plaintiff into relinquishing valid legal claims, a practice that undermines the fairness required in such agreements. Further compounding the Plaintiff's harm, TRMC reported these disputed and unauthorized charges to debt collection agencies, resulting in significant damage to the Plaintiff's credit standing (Exhibit # 31). The improper billing and subsequent use of these charges in settlement negotiations represent not only a violation of the Plaintiff's rights under the workers' compensation framework but also a potential violation of federal protections established under the CARES Act, which prohibit healthcare providers from imposing fees that are supposed to be

federally covered. South Carolina Law recognizes that Retaliation can extend beyond direct actions like firing; **leveraging unjust pressures** to dissuade legal action may fall into this category if it involves coercion connected to workers' compensation claims like in this case. The Defendant (TRMC), using improper tactics such as **inflated or unjust hospital charges** to offer a token amount in exchange for not filing a retaliation lawsuit may constitute evidence of an attempt to avoid liability through **unethical means**. It could be seen as an indication of coercion or bad faith since they (TRMC) are using hospital charges (which they control) as a weapon in negotiations. *Clark v. Aiken County Hospital* underscores that **any adverse action** (such as termination, demotion, or **undue pressure during settlement**) taken in direct response to a workers' compensation claim can be grounds for a retaliation lawsuit. Thus, coercion and improper settlement offers creates a genuine issue of material fact that must be resolved by a jury.

6. Employer's Secret Consultation with Labor Attorney

The Defendant engaged in undisclosed consultations with a labor attorney, aiming to develop a strategy that could potentially lead to the Plaintiff's termination and undermine the Plaintiff's workers' compensation and employment rights. Evidence of these secretive consultations is documented in an email exchange with the labor counsel (**Exhibit #20**) and details about the attorneys' profile (**Exhibit #32a; Exhibit #32b**). While it is generally permissible for an employer to seek legal counsel, the covert nature of these consultations raises substantial concerns of bad faith, particularly in the context of a workers' compensation retaliation case. The Defendant's CEO, Mr. David Sutherland, compounded these concerns by providing false testimony under oath. During his deposition, he was directly asked whether TRMC had sought any legal advice about terminating the Plaintiff's employment or had

communicated with an attorney to devise a strategy to dismiss the Plaintiff. Mr. Sutherland unequivocally denied both, stating “NO” to each inquiry (**Exhibit #29**; pg. 28, lines 16-24). The concealment and subsequent misrepresentation of these legal consultations are particularly troubling given that courts have long emphasized the need for transparency in labor and employment matters. The Supreme Court, in *Upjohn Co. v. United States*, 449 U.S. 383 (1981), underscored the significance of honest disclosure in legal contexts, noting the potential for abuse when consultations are used to mislead or disadvantage other parties. South Carolina courts have also established that undisclosed legal strategies by employers can be indicative of an improper motive, particularly in cases involving workers' compensation retaliation. In *Miller v. State Workers' Compensation Fund*, 379 S.C. 129 (2008), the court emphasized that employer actions executed in secrecy and intended to disadvantage the employee are contrary to the principles of fairness and good faith inherent in employment law. Such behavior may serve as compelling evidence of bad faith, warranting judicial scrutiny and potentially precluding summary judgment.

The Defendant's failure to disclose its engagement with labor counsel during crucial moments of the workers' compensation proceedings raises substantial concerns regarding the fairness of its actions. The Plaintiff has a right to have these issues thoroughly examined and assessed by a jury to determine whether the Defendant acted with the requisite transparency and good faith required under South Carolina law.

7. Defendant's HIPAA Violations as Retaliatory Actions

The Defendant, The Regional Medical Center (TRMC), engaged in retaliatory actions against the Plaintiff following the filing of his workers' compensation claim. Among these actions were egregious violations of the Health Insurance Portability and Accountability Act (HIPAA),

demonstrating willful neglect and a blatant disregard for privacy laws. On November 23, 2022, at 4:05 PM, Mr. Howell of Trask & Howell, LLC, counsel for the Defendant, sent an unencrypted email to the Plaintiff containing an attachment with the Plaintiff's Protected Health Information (PHI). This attachment included highly sensitive details such as the Plaintiff's full name, date of birth, address, medical record number, insurance information, and personal medical history, including lab results and doctor's notes. Even more disturbingly, this email unlawfully disclosed PHI belonging to other TRMC patients and former co-workers of the Plaintiff. The exposed data included names, dates of birth, lab results, medical diagnoses, and, in some cases, dates of death. These disclosures constitute a Tier-Four HIPAA violation, the most severe category, characterized by willful neglect and failure to promptly address the breach.

Despite being fully aware of the gravity of these disclosures, the Defendant failed to take corrective action. This was not an isolated incident. On November 10, 2022, just two weeks earlier, Mr. Howell had sent another unencrypted email containing similar PHI, once again compromising the privacy of numerous individuals in clear violation of federal privacy laws. On February 2, 2023, the Plaintiff contacted the Defendant via email to inquire about compliance with HIPAA laws and the measures being taken to address this serious breach, which had compromised the PHI of innocent citizens (**Exhibit #33**). The Defendant failed to respond to the Plaintiff's inquiry, further demonstrating a lack of accountability and a disregard for the privacy rights of its employees and patients. These repeated HIPAA violations, coupled with the Defendant's indifference to addressing the breaches, underscore a pattern of retaliatory conduct and negligence. By failing to safeguard the Plaintiff's sensitive information, the Defendant not only violated federal law but also further harassed the Plaintiff following his protected activity of filing a workers' compensation claim. This behavior is contrary to the principles outlined in

Ludwick v. This Minute of Carolina, Inc., 287 S.C. 219, 337 S.E.2d 213 (1985), which recognizes acts of employer retaliation as unlawful. The Defendant's actions were not only negligent but displayed a reckless indifference to the privacy and safety of innocent individuals, escalating the harm suffered by the Plaintiff and further evidencing the retaliatory animus underlying their misconduct, which need to be examined and assessed by a jury.

VI. CONCLUSION

For the reasons set forth above, Plaintiff respectfully requests that the Court deny Defendant's Motion for Summary Judgment. Defendant's improper reliance on biased testimony from a Board of Trustees member, failure to accommodate Plaintiff's medical restrictions, coercion and improper practices, and secret legal consultations all create genuine issues of material fact. These matters should be resolved by a jury, as summary judgment is not appropriate where significant factual disputes exist.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Serge R. Wandji', is written over a horizontal line.

Serge R. Wandji, Pro see Plaintiff
sergewandji@gmail.com
P.O. Box 523 Columbia SC, 29202

Date: November 21, 2024

STATE OF SOUTH CAROLINA)
COUNTY OF ORANGEBURG)
Serge R. Wandjl,)
Plaintiff)
Vs)
The Regional Medical Center,)
Defendants)

IN THE COURT OF COMMON PLEAS
FIRST JUDICIAL CIRCUIT

Civil Action No.: 2023-CP-38-00337

CERTIFICATE OF SERVICE

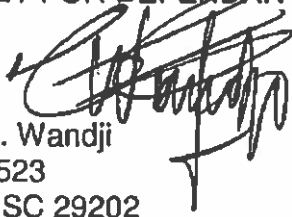
FILED FOR RECORD
MINNIE B. CLARK
2024 NOV 21 1 P 4: 55
CLERK OF COURT
ORANGEBURG, SC



I certify that a copy of the foregoing PLAINTIFF'S MEMORANDUM IN OPPOSITION TO DEFENDANT'S MOTION FOR SUMMARY JUDGMENT have been served upon the following Attorney for Defendant by emailing and mailing a copy of the same to her address as shown below this November 21, 2024:

Amanda C. Williams
PARKER POE ADAMS & BERNSTEIN LLP
850 Morrison Drive, Suite 400
Charleston, SC 29403

amandawilliams@parkerpoe.com
ATTORNEY FOR DEFENDANT

A handwritten signature in black ink, appearing to read 'Serge R. Wandji', written over the printed name.

s/Serge R. Wandji
P.O. Box 523
Columbia SC 29202

**PLAINTIFF'S MEMORANDUM IN OPPOSITION TO DEFENDANT'S MOTION FOR
SUMMARY JUDGMENT**

Civil Action No.: 2023-CP-38-00331

EXHIBITS

1. **Exhibit #1:** Job Requirements for the Plaintiff as outlined by the Defendant.
2. **Exhibit #2:** Group text message from Plaintiff's Unit Program Director confirming the COVID-19 outbreak and exposure.
 - o **Exhibit #2a:** Medical Doctor's assessment of Plaintiff's COVID-19 exposure and infection.
3. **Exhibit #3:** Plaintiff's positive COVID-19 test result, confirming workplace exposure at TRMC.
4. **Exhibit #4:** COVID-19 Exposure 'Incident Report' submitted to Mrs. Evans in Employee Health.
5. **Exhibit #5:** Confirmation from Employee Health acknowledging receipt of the Plaintiff's 'Incident Report'.
6. **Exhibit #6:** Email from Defendant demanding that the severely ill Plaintiff return to work just days after he had filed for workers' compensation claim.
7. **Exhibit #7:** Hospitalization progress notes documenting Plaintiff's pneumonia due to COVID-19 and diagnosis of Acute Stress Disorder.
8. **Exhibit #8:** Letter from Defendant sent to Plaintiff while he was in the ICU, demanding immediate completion of FMLA paperwork, despite Plaintiff not requesting or qualifying for FMLA.
 - o **Exhibit # 8a:** Unlawful Retroactive Forced Leave
9. **Exhibit #9:** Checks written by the Plaintiff to maintain health insurance coverage after being medically removed from work following his COVID-19 infection, even though he had already filed a workers' compensation claim.
10. **Exhibit #10:** Correspondence regarding Plaintiff's inquiries about his workers' compensation claim.
 - o **Exhibit #10a:** Email from Mrs. Caruso (Employee Health) following Plaintiff's visit to inquire about his claim.
 - o **Exhibit #10b:** Plaintiff's email to Mrs. Norris (HR Director) requesting an update on his claim.
 - o **Exhibit #10c:** Plaintiff's fifth email to the HR Director, pleading for information about his claim.
11. **Exhibit #11:** Plaintiff's first Form 50 filed with the South Carolina Workers' Compensation Commission after more than three months of being ignored by the Defendant.
12. **Exhibit #12:** Settlement offer letter from the Defendant (TRMC) to the Plaintiff.
13. **Exhibit #13:** Plaintiff's second Form 50 filed with the South Carolina Workers' Compensation Commission.
14. **Exhibit #14:** Medical condition updates provided by the Plaintiff to the Defendant.
15. **Exhibit #15:** Acknowledgment from Defendant of Plaintiff's post-hospitalization medical updates.

16. **Exhibit #16:** Medical notice clearing the Plaintiff to return to work with certain restrictions.
17. **Exhibit #17:** Email from Plaintiff's attorney to Defendant, specifically inquiring about Plaintiff's return-to-work status.
18. **Exhibit #18:** Emails from Plaintiff to Defendant regarding his attempt to return to work.
 - o **Exhibit #18a:** Follow-up email from Plaintiff on March 9, 2022, regarding his return to work.
19. **Exhibit #19:** Medical clearance from a clinical psychologist recommending Plaintiff's return to work.
20. **Exhibit #20:** Email exchange between Mrs. Norris (HR Director) and two labor attorneys, discussing strategies to terminate Plaintiff's employment under the pretense of leave exhaustion and/or .
21. **Exhibit #21:** Termination letter/email from Defendant to Plaintiff, issued in retaliation for filing a workers' compensation claim.
22. **Exhibit #22:** Excerpts from Dr. John Samies' deposition.
23. **Exhibit #23:** Written 'expert' testimony by Dr. Samies, a member of the Defendant's Board of Trustees, demonstrating bias in the workers' compensation case.
24. **Exhibit #24:** Memo from Defendant regarding COVID-19 patients in the hospital as of August 6, 2021.
 - o **Exhibit #24a:** List prepared by Defendant of TRMC employees who tested positive for COVID-19 in August 2021, the same month Plaintiff was infected.
25. **Exhibit #25:** List of COVID-19 patients cared for by the Plaintiff in August 2021.
 - o **Exhibit #25a:** List of staff members from Plaintiff's unit who tested positive for COVID-19 in August 2021.
26. **Exhibit #26:** Defendant's Pre-Hearing Brief for the workers' compensation case.
27. **Exhibit #27:** Excerpts from the workers' compensation hearing transcript.
28. **Exhibit #28:** 'Series of emails' provided by Employee Health to Dr. Samies.
29. **Exhibit #29:** Excerpt from the deposition of Mr. David Sutherland, CEO of TRMC.
30. **Exhibit #30:** COVID-19-related medical bills unlawfully charged to Plaintiff by Defendant, beyond health insurance coverage.
31. **Exhibit #31:** Debt collection letters sent to Plaintiff, related to the Defendant's unlawful COVID-19 hospitalization charges.
32. **Exhibit #32:** Details of Defendant's First secretive labor attorney involved.
 - o **Exhibit #32a:** Details of the second labor attorney's involvement.
33. **Exhibit #33:** Plaintiff's email to inquire about compliance with HIPAA laws and the measures being taken to address this serious breach.

EXHIBIT

1

APA# 27

THE REGIONAL MEDICAL CENTER
3000 St. Matthews Road
Orangeburg, SC 29118

JOB TITLE: Staff RN
DEPARTMENT: Nursing
Classification: 123
Reports to: Service Line Director



CLERK OF COURT
ORANGEBURG, S.C.

2024 NOV 21 11:05

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WINNIE B. CLARK

I. Job Summary

Provide professional nursing care within an assigned unit and coordinate care planning with other disciplines.

II. Minimum Qualifications

Current RN license in the state of South Carolina or compact state. CPR certification must be obtained within 6 months of hire. Some clinical or hospital experience is preferred but not required.

III. Work Environment

Regularly exposed to infectious, contagious and blood borne diseases. Contact with patients under a wide variety of circumstances. Exposed to unpleasant elements including accidents, injuries and illnesses. Subject to varying and unpredictable situations. Must be able to handle emergency or crisis situations. Must be able to handle emergency or crisis situations. Is occasionally subject to irregular hours. Occasional exposure to radiation.

IV. Supervisory Responsibilities

LPN, CNA, WS, Tech, MOA

V. Financial Responsibilities

Financial stewardship of supplies and resources.

VI. Essential Functions

1. Documents initial nursing histories, assesses patients' conditions per policy requirements and develops individual care plans for patients taking into consideration their physical, psychosocial, environmental, cultural, and spiritual needs.
2. Assists physicians with examinations, procedures and other processes related to direct patient care according to established policies and procedures.
3. Evaluates outcomes of patient care, consult with other specialists as required and revises nursing care processes as necessary to obtain optimal patient care.
4. Coordinates discharge planning.
5. Monitors and records patients' condition. Maintains confidentiality.
6. Using an interdisciplinary approach, formulates a teaching plan based on identified learning needs and evaluates effectiveness of learning [including family teaching] as appropriate.
7. Coordinates patients' ordered diagnostic and therapeutic services. Communicates patients'

Page 38

EXHIBIT

2

APA#6



12 People



Wed, Aug 25, 4:01 PM

Stanley

This is Stanley. Has there been an exposure on the unit? I'm asking because I worked the entire weekend.



+1 (941) 201-8445



Hello Stanley

Stanley



Hello Catherine

+1 (941) 201-8445



**Call employee health,
803 395 2954**

They will let you know about exposure criteria and testing is available



Page 6

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WINNIE B. CLARK
2024 NOV 21 1P 4:55
CLERK OF COURT
ORANGEBURG, SC



EXHIBIT

2a

APA# 26



ASSOCIATES IN INTERNAL MEDICINE

ROPER ST. FRANCIS PHYSICIANS

615 Wesley Drive, Suite 200
Charleston, SC 29407
(843) 577-6880p
www.associatesin.com

(K)

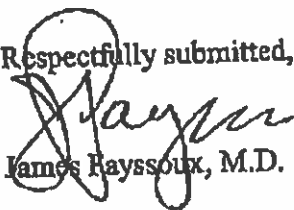
Cary Stanley Hickman, M.D. William Huston Snyder III, M.D.
Charles Leon Smith, M.D. Christopher P. McLain, M.D.
Hugh Edward Thompson, M.D. Nicholas H. Noble, M.D.
James E. Foyssoux, M.D. James Anjia, M.D.

Date: January 17, 2022

To Whom It May Concern,

Serge Wandji (d.o.b. 1 June 1968) is a patient in this internal medicine practice. As you well know he contracted Covid-19 at his place of employment during an outbreak that occurred in one of your inpatient units. He was diagnosed with Covid-19 pneumonia and hypoxemic respiratory failure despite the fact that he was fully vaccinated. He was hospitalized briefly and required supportive treatment including supplemental oxygen. When he was first evaluated in the office he had extreme fatigue and exercise intolerance as well as persistent cognitive changes typical in this patient population. He was reevaluated today via a telehealth visit. He is continuing to recover gradually as expected based on his diagnosis. He has had some improvement in his exercise tolerance and has been able to gradually increase his activity level at home. It is clear from talking with him today that he could not tolerate a return to work at a full-time capacity. I believe he could return to work on a schedule of eight hours a day but could not currently return to work full time floor nursing for numerous reasons. An administrative position would be most appropriate at this juncture. Thank you for your time and consideration in this matter.

Respectfully submitted,


James Foyssoux, M.D.

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EXHIBIT

3

APA#8

4

Regional Medical Center
3000 St. Matthews Road, Orangeburg, SC 29118
Phone Number: (803) 395-2200 | Toll Free in SC: (800) 476-3377
Medical Director: John A. Fant, MD

Name: **WANDJI, SERGE RAQUL**
MRN: 617171
Encounter: 2000020686
DOB/Age/Sex: 8/1/1988 53 years Male

Admit Date: 8/27/2021
Discharge Date:
Ordering: Ostoja, Elizabeth NP
Copy to: Ostoja, Elizabeth NP

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WINNIE B. CLARK
2021 NOV 21 P 4:55
CLERK ACCOUNT
ORANGEBURG, SC

Immunology-Serology

Legend: @=Abnormal !=Critical L=Low H=High c=Corrected !=Comment O=Order Comment !=Interp Data !=Performing Lab

Infectious Disease

	Collected Date	8/27/2021		
	Collected Time	10:35 EDT		
Procedure		Units	Reference Range	
SARS-CoV-2 (COVID-19) PCR (GeneXpert)	Positive		[Negative]	
Employed in healthcare?	Yes			
Symptomatic as defined by CDC?	No			
Hospitalized due to COVID-19?	No			
In ICU?	No			
Group care resident?	No			
Pregnancy status?	Not Pregnant			

Interpretive Data

#1: SARS-CoV-2 (COVID-19) PCR (GeneXpert)

Positive result--The 2019 novel coronavirus (SARS-CoV-2) target nucleic acids are detected. Positive results are indicative of active infection with SARS-CoV-2; clinical correlation with patient history and other diagnostic information is necessary to determine patient infection status. Positive results do not rule out bacterial infection or co-infection with other viruses. The agent detected may not be a definite cause of disease

Presumptive Positive Result--Then 2019 novel coronavirus (SARS-CoV-2) nucleic acids may be present. Sample should be retested. For samples with a repeated Presumptive Positive result, a recollect of the sample will need to be requested. Confirmation testing may be required.

Negative Result--The 2019 novel coronavirus (SARS-CoV-2) target nucleic acids are not detected. Negative results do not preclude SARS-CoV-2 infection and should not be used as the sole basis for treatment or other patient management decisions. Negative results must be combined with clinical observations, patient history, and epidemiological information.

Invalid--SPC does not meet acceptance criteria. Presence or absence of the 2019 novel coronavirus (SARS-CoV-2) nucleic acids cannot be determined

Page 9

EXHIBIT

4

11/13/22, 5:25 PM

APA # 12

Gmail - Incident report

4



Serge Wandji <sergewandji@gmail.com>

Incident report

1 message

Serge Wandji <sergewandji@gmail.com>
To: "Kellie D. Evans" <kdevans@regmed.com>

Thu, Sep 2, 2021 at 2:00 PM

On Sunday 08/22/2021, when I showed up for work at 6:45 am, at BHU, I was fully healthy. I worked that day as the charge nurse for the entire 12 hours shift. I came back to work for another 12 hours shift on 08/24/2021. It wasn't until Thursday 26, that I started feeling really bad. The day before, on Wednesday 25, the unit leadership sent out a text indicating that many of the patients I care for on Sunday and Tuesday have been tested positive for Covid-19. I then made the decision to drive to the hospital on Friday 08/27/21 morning, to get tested, and it came out positive for Covid-19. Since then my health has been deteriorating: severe headache, extreme generalized fatigue, loss of taste, productive cough, fever, shortness of breath, sore throat.

Serge

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WIRNIFA B. CLARK
2024 NOV 21, P 1: 56
CLERK OF COURT
ORANGEBURG, SC



Page 13

EXHIBIT

5

1/13/22, 5:32 PM

APA # 13

Gmail - (no subject)



Serge Wandji <sergewandji@gmail.com>

(no subject)

3 messages

Kellie D. Evans <kdevans@regmed.com>
To: "sergewandji@gmail.com" <sergewandji@gmail.com>
Cc: "Kelci T. Caruso" <ktcaruso@regmed.com>

Thu, Sep 2, 2021 at 2:45 PM

Good afternoon Serge,

Thanks so much for sending me the information for your ESREO, I will work on that today.

Also, I wanted to follow up with you to check in and see how you are feeling? Of course if there is anything we can do for you please feel free to reach out and we will do what we can.

Have a great afternoon.

Kellie D Evans.

Administrative Assistant, Employee Health Services

kdevans@regmed.com

The Regional Medical Center

3000 St. Matthews Road

Orangeburg SC 29118

Phone: 803-395-2251 Fax: 803-395-2438

Website: www.rmchealth.org

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ORANGEBURG, SC

Page 14

EXHIBIT

6

APA# 14

FILED FOR RECORD
WINNIE B. CLARK
2024 NOV 21 P 4: 57
CLERK OF COURT
ORANGEBURG, SC

AT&T 8:10 PM
< Teresa >

Sep 3, 2021, 12:45 PM

Serge, hope you are
feeling better. Trying to
touch base with you to
see when you will be
returning to work?
Please let me know.
Thank you.

Sep 3, 2021, 5:49 PM

It has been exactly just
one week since I tested
positive for the
deadliest disease out
there. The devastated
consequences on my
being is like something
I have never
experienced before in



Page 15

AT&T

8:15 PM



Teresa >

experienced before in
my entire life.

In fact my daily
struggle has been to
stay alive!

Staying alive is my only
concern, not returning
to work or any other
consideration for that
matter!

There used to be a
time where we had
some sense of
HUMANITY in nursing!
Where a nurse was
treated as a human
being, and not just a
physical body to fill up
shifts!

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2024 NOV 21 P 4:51
CLERK OF COURT
ORANGEBURG, SC

I understand how



iMessage



Page 16

AT&T

8:11 PM



Teresa >

How many in nursing?

Where a nurse was
treated as a human
being, and not just a
physical body to fill up
shifts!

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WINNIE B. CLARK

2024 NOV 21 P 4:51

CLERK OF COURT
ORANGEBURG, SC

I understand how
Covid has been very
worrisome these are
very difficult times. Are
you still having
symptoms? Please
make sure you contact
health employee nurse
as your return is
expected to be per
CDC guidelines on
Sunday September
5th. Thank you.



iMessage



Pay



...

Page 17

Serge Wandji <sergewandji@gmail.com>
To: "Kellie D. Evans" <kdevans@regmed.com>
Cc: "Kelci T. Caruso" <ktcaruso@regmed.com>

Fri, Sep 3, 2021 at 9:19 PM

It has been exactly one week that I was positive for the deadliest disease out there, COVID-19. Since then I have been literally fighting for my life every single day. The devastating consequences of this disease on my entire being is like something I have never experienced before. In fact my daily struggle has been to stay alive. As I pray and hold on any iota of vitality to stay alive, I received a demoralizing text message this morning from the leadership of BHU requesting from me when I will be returning to work??? According to that text message, the CDC requires me to resume work on Sunday September 5th. What ever happened to HUMANITY in nursing??? Where nurses were treated as human beings (body, mind, spirit) and not just as a physical body to fill up shifts! Here I am, struggling to just stay alive, and all TRMC is concerned about is to return me to work "because CDC said so"! How Compassionate? I guess the CDC should at least send a physician to my house to assess my health condition (physical, and mental), before making that kind of request. Unless TRMC considered people as human cattle where one "guideline/rule feeds it all, with no consideration whatsoever on individual situation.

I need to be seen by a physician to help me deal with symptoms management especially since I am feeling anemic.

I need to be seen by a mental health doctor. I have been experiencing severe anxiety, nightmares, and flashbacks as a result of this disease.

Respectfully,
Serge
(Quoted text hidden)

Kelci T. Caruso <ktcaruso@regmed.com>
To: Serge Wandji <sergewandji@gmail.com>
Cc: "Kellie D. Evans" <kdevans@regmed.com>

Fri, Sep 3, 2021 at 9:34 PM

Good Evening,

I am very sorry that you are not feeling well. Please follow up with your Primary Care Provider ASAP as we discussed on Sunday if you have not already. Please let us know if there is anything we can do. Thank you and feel better soon.

Sent from my iPhone

Page 18

EXHIBIT

7

APA # 15

Regional Medical Center SC

Name: WANDJI, SERGE RAQUL
MRN: 617171
Encounter: 2000026648

Admit Date: 9/6/2021
Discharge Date:
Attending: Kaleka, Preetinder K MD

Progress Notes

CO2	28	(SEP 09)	27	(SEP 08)	27	(SEP 07)	H 31	(SEP 06)
Cr	1.0	(SEP 09)	0.9	(SEP 08)	0.9	(SEP 07)	1.0	(SEP 06)
BUN	18	(SEP 09)	16	(SEP 08)	19	(SEP 07)	16	(SEP 06)
Glucose Random		H 119	(SEP 09)	H 125	(SEP 08)	H 144	(SEP 07)	H 140 (SEP 06)
PT	H 15.5	(SEP 06)						
INR	1.35	(SEP 06)						
PTT	32.1	(SEP 06)						

Impression and Plan

is a life threatening infection that inflames air sacs in a patient's lung, which may fill with fluid or pus.

Pneumonia due to COVID-19 with associated acute hypoxemic respiratory failure. Continue O2 supplementation to keep SPO2 above 92%; continue remdesivir and dexamethasone.

Chest pain R07.9 Atypical chest pain: For outpatient work-up.

HTN (hypertension) I10 chronic, stable--continue antihypertensives

Hypokalemia E87.6--repleted

Possible acute stress disorder--patient having flashbacks with nightmares, refusing SSRIs at this time; consult psych

DVT prophylaxis Z29.9 wt based lovenox

Full code status Z78.9 FULL CODE

For discharge pending 6-minute walk test

Electronically Signed on 09/09/21 10:25 AM

Mbay, Emmanuel A MD

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ORANGEBURG, SC

(Signature)

Page 19

APA# 17
395-2203

Regional Medical Center SC
3000 St Matthews Rd
Orangeburg, SC 29118-
(803) 395-2200

Name: WANDJI, SERGE RAQUL
MRN: 617171
Encounter: 2000026648
DOB / Age: 6/1/1968 53 years
Sex / Birth Sex: Male Male

Admit Date: 9/6/2021
Discharge Date:
Attending: Kaleka, Preetinder K MD
Location: RMCSC 2E; 2344; 1
Copy to: Myers, Courtney M

Consultation Notes

Document Type:
Service Date/Time:
Result Status:
Document Subject:
Sign Information:

Consultation Note
9/9/2021 13:52 EDT
Auth (Verified)
Consult Note
West, Bryan A MD (9/9/2021 14:02 EDT)

DOB: 06/01/1968
Age: 53 years
Sex: Male
MRN: 617171
Registration Date: 09/06/2021

WANDJI, SERGE RAQUL

Chief Complaint "I am scared"

Reason for Consultation
being scared about COVID+

History of Present Illness

53 yo M COVID+ now off 2L NC and completed remdesivir course who reports that he is still anxious about how sick he felt before arrival. Says he has "PTSD" from "that feeling". The patient denies SI HI AVH. Is somewhat tearful. He reports that he is not interested in starting a new medication. I went over antidepressant options but he reported that he did not want those at this time. Said he "just wants to talk". We spoke about his recovery and how his anticipated DC this afternoon is a positive event. I encouraged the patient to reach out to friends and family for support over the coming days. I also encouraged him to not rush his recovery and have a low threshold for reaching out for further medical help.

Review of Systems

Constitutional: No fevers, Positive for chills, No sweats
Eye: No recent visual problems
ENT: No ear pain, No nasal congestion, No sore throat
Respiratory: Positive for shortness of breath, Positive for cough.
Cardiovascular: No Chest pain, No palpitations, No syncope
Gastrointestinal: No nausea, No vomiting, No diarrhea
Genitourinary: No hematuria
Hema/Lymph: No bruising tendency, No swollen lymph glands
Endocrine: No excessive thirst, No excessive hunger
Musculoskeletal: No back pain, No neck pain, No joint pain, No muscle pain, No decreased range of motion
Integumentary: No rash, No pruritus, No abrasions
Neurologic: Alert & oriented X 4
Psychiatric: Positive for anxiety, Positive for depression

Problem List/Past Medical History Ongoing

Disease caused by 2019 novel coronavirus

Historical

No qualifying data

Medications

Inpatient

amlODIPine, 5 mg= 1 tab, Oral, Daily
dexamethasone, 6 mg= 1.5 tab, Oral, Daily
dextromethorphan 30 mg/5 mL oral suspension, extended release, 30 mg= 5 mL, Oral, BID
gabapentin, 100 mg= 1 cap, Oral, TID
Lovenox, 90 mg= 0.9 mL, Subcutaneous, every 12 hr
MiraLax, 17 g= 1 packets, Oral, Daily, PRN
nitroglycerin, 0.4 mg= 1 tab, SL, every 5 min, PRN
remdesivir

Home

dexamethasone 6 mg oral tablet, 6 mg= 1 tab, Oral, Daily
dextromethorphan 30 mg/5 mL oral suspension, extended release, 30 mg= 5 mL, Oral, BID
hydroCHLOROthiazide 25 mg oral tablet, 25 mg= 1 tab, Oral, Daily
losartan 100 mg oral tablet, 100 mg= 1 tab, Oral, Daily

EXHIBIT

8

APA-56

+rmc
Regional Medical Center

September 7, 2021

Serge Wandji
2038 Lake Murray Blvd
Apt #11-307
Columbia, SC 29212

Dear Serge,

Please have your provider fill out the attached FMLA paperwork and fax it back to 803-395-4022. The paperwork must be filled out within 15 days of the date on the top of this letter, in your case this date would be September 22, 2021.

If you have any questions regarding FMLA please feel free to contact me at (803) 395-2063.

Sincerely,

Ginger Swartz
HR Business Partner

CLEEN ORT
ORANGEBURG, SC

2024 NOV 21 PM 4:5

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132

EXHIBIT

89



the Regional Medical Center

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2024 NOV 21 P 4: 58

CLERK OF COURT
ORANGEBURG, SC

September 24, 2021

Serge Wandji
951 Edisto Avenue
Orangeburg, SC 29115

Re: Leave of Absence

Dear Serge,

This letter is to confirm that we have received paperwork regarding your request for leave. Unfortunately, you are not eligible for FMLA. FMLA (Family Medical Leave Act) provides employees who have been employed for twelve months and have worked 1250 hours, up to twelve workweeks of job-related leave.

You are approved for a leave of absence (LOA) starting 8/28/2021. A leave of absence is available up to 12 weeks. Keep in mind, a leave of absence does not protect your job and your position may be filled at any time. If your position is filled, you may apply for positions that you have the skills, knowledge and abilities to complete. If your position remains open, you would simply return to your position. Prior to returning to work, you will need to provide HR with a notice from the physician that you may return to work without restrictions.

While you are out, you will continue to pay for your benefits. You will be requested to use PTO and extended illness while you are out, which may cover your benefits. If your PTO and extended illness runs out while you are still out, you will need to work with Pranali Nabb in HR to pay for any benefits outstanding. You may contact her at (803) 395-2388.

If you have any questions, please contact me at (803) 395-2063.

Sincerely,

Ginger Swartz
HR Business Partner

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GRANBEBURG. SC

EXHIBIT

9

438

Site	Paid Date	Serial	Routing	PG	Amount	Sequence #	Capture Source
VIEWPOINTE	20220127	297	0100075300345	000080	154.00	8524321208	00007174

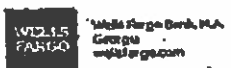
SERGE WANDJI
 2085 LAKE MURRAY BLVD APT 11887
 COLUMBIA SC 29212-0851

2024 NOV 21 P 4:58

297
 54-22/810 8038

CLERK OF COURT
 T. ROMIGEBURG, SC
 01/18/2022

Pay to the Order of One hundred fifty four and 00/100 \$ 154⁰⁰/₁₀₀
 Dollars



For Benefits
 ⑆06 1000 227⑆ 10 1007 53 1034 5⑆00 297

PAY TO THE ORDER OF
 GREAT BRANCH BANKING & TRUST
 06/20/2027
 FOR DEPOSIT ONLY
 REGIONAL SERVICE CENTER
 OF ORANGEBURG - NO. 11 OFFICE 11
 OPERATING ACCOUNT
 14100043697117 ⑆ 00 00 00 00 00 00 00 00

Site	Paid Date	Serial	Routing	Account	PG	Amount	Sequence #	Capture Source
VIEWPOINTE	20211231	270	8100022	Winnif B. Clark	000000	154.00	8521863478	00007174

SERGE WANDJI
2038 LAKE MURRAY BLVD APT 11307
GEORGIA, 305-29212-0051

2024 NOV 21 P 11:58
12/13/2021

270
64-22/610 9098

Pay to the Order of **TRMC** **CLERK OF COURT ORANGEBURG, SC** \$154⁰⁰/₁₀₀

One hundred fifty four and ⁰⁰/₁₀₀ Dollars

WELLS FARGO
Wells Fargo Bank, N.A.
George
wellsfargo.com

For **Benefits payments**

⑆06 1000227⑆10 100753 10345⑈00270

END OF FILE

PAY TO THE ORDER OF
BANK BRANCH BANKING & TRUST
00001607
FOR DEPOSIT ONLY
REGIONAL MEDICAL CENTER
OF ORANGEBURG
OPERATING ACCOUNT 0111.11
12/13/2021 11:58 AM

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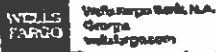
Site	Paid Date	Serial	Routing	Account	PC	Amount	Sequence #	Capture Source
VIEWPOINTE	20211123	263	6100922	100075340-00	000060	154.00	8629538796	00007174

SERGE WANDJI
2038 LAKE MURRAY BLVD APT TT307
COLUMBIA, SC 29212-0651

2024 NOV 21 P 4: 58

263
64-22/510 6096

Pay to the Order of TRM CLERK OF COURT ORANGEBURG, SC \$ 154.⁰⁰/₁₀₀
One hundred fifty four and ⁰⁰/₁₀₀ Dollars



For Benefits for November 2021

[Signature]

⑆06 1000 227⑆ 10 100753 10345⑆00263

ENCLOSURE
PAY TO THE ORDER OF
BRAT BRANCH BANKING & TRUST
ORANGEBURG
FOR DEPOSIT ONLY
REGIONAL MEDICAL CENTER
OF ORANGEBURG
OPERATING ACCOUNT
1410042382

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Site	Paid Date	Serial	Routing	Account	PC	Amount	Sequence #	Capture Source
VIEWPOINTE	20211012	261	8100022	01010075310345	000060	154.02	8123716827	00007174

SERGE WANDJI
2028 LAKE MURRAY BLVD APT T1307
COLUMBIA, SC 29212-1003

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WINNIE B. CLARK

261

04-22/510 8096

2024 NOV 21 10:07:08 2021

Date

Pay to the
Order of

TRM C

CLERK OF COURT
ORANGEBURG, SC

\$ 154⁰²/₁₀₀

One hundred fifty four and 02/100

Dollars

0

Pay to
the
order of



Wells Fargo Bank, N.A.
Orangeburg
wellsfargo.com

For

Benefit for October

[Signature]

⑆06 1000227⑆ 10 100753 10345⑆00261

HL 1111 1430042687 1111 1111

PAY TO THE ORDER OF
BART BRANCH (WINDMILLS TRUST)
053251807
FOR DEPOSIT ONLY
REGIONAL MEDICAL CENTER
OF ORANGEBURG
OPERATING ACCOUNT
1111 1111

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EXHIBIT

10

10/20/21, 3:12 AM

Gmail - eSERO Completion



APA #19

Serge Wandji <sergewandji@gmail.com>

7

eSERO Completion

2 messages

Fri, Oct 1, 2021 at 1:58 PM

Kelci T. Caruso <ktcaruso@regmed.com>
To: "sergewandji@gmail.com" <sergewandji@gmail.com>

Good Afternoon,

Thank you for stopping by today.

I have reached out to Antum Risk, they have received your eSERO via mail. They should be in contact with you soon, the Adjuster that handles all COVID claims is out of the office this week.

Kelci T. Caruso

Employee Health Nurse

ktcaruso@regmed.com

The Regional Medical Center

3000 St. Matthews Road

Orangeburg, SC 29118

Phone: 803-395-2954 Fax: 803-395-2438

Website: www.trmchealth.org

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2024 NOV 21 1P 4:57
CLERK OF COURT
ORANGEBURG, SC

Fri, Oct 1, 2021 at 6:12 PM

Serge Wandji <sergewandji@gmail.com>
To: "Kelci T. Caruso" <ktcaruso@regmed.com>

Mrs. Caruso,
I thank you very much for the update madam. Truly appreciate it.
Serge

[Quoted text hidden]

Page 23



APA-2D

Serge Wandji <sergewandji@gmail.com>

Workers Compensation Claim

3 messages

Sun, Nov 7, 2021 at 7:35 PM

Serge Wandji <sergewandji@gmail.com>

To: "Tina L. Norris" <tlnorris@regmed.com>

Cc: "Joseph N. Dambra" <jndambra@regmed.com>, "Kellie D. Evans" <kdevans@regmed.com>

Mrs. Norris,

On October 31, 2021, I sent you and two other staff at The Regional Medical Center (TRMC) an email pleading for information and or status of my workers compensation claim which I initially submitted more than two months ago. It's been a week since I sent that email and all I have received in response to my plea is: Complete Silence from TRMC. Not even a courtesy reply acknowledging reception of my pleading email.

Since I was medically removed from work following a positive COVID-19 test on October 28, 2021, I have been and still continue to battle with that devastating disease through a hospitalization and a Recovery from Long-Covid, without any income. I am a simple nurse who was exposed, infected and injured at his workplace, while caring for his patients, and who now finds himself in a vulnerable and generalized distressful situation.

Mrs. Norris, I would really appreciate it if you would provide me with any information and/or update on my workers compensation claim, initially filed more than two months ago via the facility online SREO.

Looking forward to hearing back from you

Respectfully,

Serge Wandji, RN

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2024 NOV 21 1P 4:57
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ORANGEBURG, SC

Page 24

Exhibit
#10C

1/15/22, 9:19 PM

Gmail - Workers compensation claim



APA # 21

Serge Wandji <sergewandji@gmail.com>

Workers compensation claim

Mon, Nov 22, 2021 at 2:10 PM

Serge Wandji <sergewandji@gmail.com>

To: "Tina L. Norris" <tnorris@regmed.com>

Cc: dmsoutherland@regmed.com, kspowell@regmed.com, "Ginger A. Swartz" <gaswartz@regmed.com>

Bcc: Serge Wandji <sergewandji@gmail.com>

Mrs. Norris,

This is the fifth email I am sending to The Regional Medical Center (TRMC), and the third one that I am sending to you personally as the leader of the Human Resources/Employee Relations department, with copies to both the hospital CEO and Chief Nurse Executive, pleading for information about the outcome of my workers compensation claim I initially made three months ago. The last email I sent you on this matter was on November 15, 2021. I have not received any reply from you, not even a professional courtesy acknowledgement to a distressed nurse who was exposed, infected and injured at his workplace while taking care of his patients, and who has been out of work without any pay for three months, as a direct consequence of that work exposure and injury.

Can anybody at TRMC tell me what has happened to my workers compensation claim that I initially filed three months ago? I will really appreciate it.

Respectfully,
Serge Wandji, RN

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2024 NOV 21 11:57
CLERK OF COURT
ORANGEBURG, SC



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WINNIEFA B. CLARK

2024 NOV 21 P 4: 58

CLERK OF COURT
ORANGEBURG, SC

EXHIBIT

11

APA # 22

South Carolina Workers' Compensation Commission
1333 Main Street, Suite 500 • Post Office Box 1715
Columbia, South Carolina 29202-1715
(803) 737-5723 www.wcc.sc.gov



WCC File #: _____
Carrier File #: _____
Carrier Code #: _____
Employer FEIN #: _____

Claimant's Name: SERGE WANDTI SSN: 401553514 Employer's Name: The Regional Medical Center
Address: P.O. BOX 523 City: Columbia State: SC Zip: 29202
Home Phone: (678) 612-9649 Work Phone: () Insurance Carrier: ANTUM RISK
Preparer's Name: Serge Wandti Law Firm: Claimant Preparer's Phone #: (678) 612-9649

A claim for workers' compensation benefits is made based on the following grounds:

☒ Injury ☒ Illness ☐ Repetitive Trauma ☐ Occupational Disease ☐ Physical Brain Injury ☐ Concurrent Jurisdiction

1. The claimant sustained an injury to _____ (Part(s) of Body Injured) on 8/27/21 (Month/Day/Year) in Orangeburg county, state of SC.
2. Body part(s) affected are: Lungs + whole body
Briefly describe how the accident occurred: See attached document
3. Both the claimant and the employer were subject to the South Carolina Workers' Compensation Act at the time of injury.
4. The relationship of employer and employee existed at the time of injury. YES
5. At the time of the injury the claimant was performing services arising out of and in the course of employment.
6. Notice of the accidental injury was given to the Employer on 8/28/21 (Month/Day/Year) in the following manner: Text message to the Unit Supervisor and nurse manager Mrs. Theresa Noe

☒ 7. Due to injury, the claimant is in need of (check one):

- ☐ (a) medical examination and treatment for: COVID-19
☐ (b) additional medical examination and treatment for: Long COVID-19

☒ 8. Due to injury, the claimant requests temporary total disability benefits because of lost compensable time from work and wages for the period of:
August 28/2021 to January 2022 and ongoing.

☐ 9. Due to the injury, the claimant has permanent disability of the following nature and extent (check one):

- ☐ (1) General Disability: ☐ Total ☐ Partial ☐ (2) Specific Disability: ☐ Total ☐ Partial ☐ (3) Wage Loss

9a. Claimant at MMI: ☐ Yes ☐ No

☐ 10. Due to the injury, the claimant has a serious bodily disfigurement consisting of:

N/A

10a. At the time of the injury, the claimant was paid weekly wages of \$_____, and demands accounting of days worked and wages earned as provided by law.

10b. Give names and addresses of all employers for whom the claimant has worked since the date of the accident:

11. Further grounds or unusual aspects of claim:

See attached document

11a. List names and addresses of all physicians or other medical specialists who have seen or treated the claimant as a result of the accident:

See attached document

11b. To the best of your knowledge, did you have any prior permanent disability? NO
If yes, describe: _____

12. Appropriate benefits as provided in the Act for the above grounds and other relief as the Workers' Compensation Commission may direct as just and proper.

☐ 13. I am filing a claim. I am not requesting a hearing at this time.

Estimated time needed for hearing: Three weeks

☒ 14. I am requesting a hearing. A \$50 fee is required.

☐ Mediation

- ☐ a. Mediation is requested to be ordered pursuant to Reg. 67-1801 B.
☐ b. Mediation is required pursuant to Reg. 67-1802.
☐ c. Mediation is requested by consent of the Parties pursuant to Reg. 67-1803.
☐ d. Mediation has been conducted by a duly qualified mediator and resulted in an impasse.

Questions regarding mediation may be submitted to mediation@wcc.sc.gov.

I certify I have served this document pursuant to Reg. 67-211 by delivering a copy to

address _____ on the _____ day of _____ 20____ by ☐ first class postage ☐ certified mail ☐ personal service ☐ electronic service

I verify the contents of this form are accurate and true to the best of my knowledge.

Preparer's signature: Serge Wandti Title: Claimant Email: sergewandti@gmail.com Date: 11/29/2021

Questions about the use of this form should be directed to the Claims Department at 803.737.5723. Refer to Regulations 67-204 through 67-211 and Regulations 67-601 through 67-615 as well as Reg. 67-1801.

WCC Form # 50
Revised 1/19

50

Employee's Notice of Claim and/or
Request for Hearing

Page 26

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WINNIEFA B. CLARK

2024 NOV 21 P 4: 58

CLERK OF COURT
ORANGEBURG, SC

EXHIBIT

12

BURRISS**RIDGEWAY**

From: Roy Howell <howell@trask-howell.com>
Sent: Tuesday, May 10, 2022 10:30 AM
To: Hank Burriss
Cc: Crystal Lupton
Subject: RE: Serge Wandji v. The Regional Medical Center and Antum Risk (2118696)

Importance: High

TimeMattersID: MSF03AEB2D239346
TM Contact: Wandji, Serge
TM Contact No: 4182
TM Matter No: 22-4599
TM Matter Reference: Wandji, Serge vs. The Regional Medical Center

WILLIAM H. "HANK" BURRISS
E. WAYNE RIDGEWAY, JR.
ALICIA S. HIGGINS
Attorneys at Law

2024 NOV 21 P 4: 58
CLERK OF COURT
ORANGEBURG, SC

Hi Hank-

I hope you are well. I have finally heard from my clients and received authority to make Claimant an offer to clincher the case on a doubtful and disputed basis. I don't want to argue the merits of the case via email. I will just say that my clients disputes some of the details of your timeline. Having said that, I have authority to offer the Claimant \$15,000 to clincher the case on a doubtful and disputed basis. In addition, the hospital has agreed to write off the charges from Claimant's hospitalization from 9/6/21-9/9/21 to reflect a zero balance. Finally, the employer will need a general employment release as well for \$100.

I look forward to hearing from you.

Best regards,

Roy

**TRASK
HOWELL**

Roy A. Howell, III
Founding Partner
Trask & Howell LLC
P.O. Box 2167
Mt. Pleasant, SC 29465
Ph. 843-881-2236 Fax. 843-881-8784
www.trask-howell.com

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From: Hank Burriss <Hank@burrisslaw.com>
Sent: Thursday, April 21, 2022 8:54 AM
To: Roy Howell <rhoell@trask-howell.com>
Crystal Lupton <Crystal@burrisslaw.com>
Subject: Serge Wandji v. The Regional Medical Center and Antum Risk (2118696)

1

Office: 820 Grecco Road • Columbia, SC 29210 • Phone: 803-451-4000 • Fax: 803-227-0384 • Toll Free: 866-444-6330

EXHIBIT

13



WCC File #: 2118696
Carrier File #: WC202/098080
Carrier Code #: 57-600801D
Employer FEIN #: 57-600801D

Claimant's Name: SERGE WANDJI SSN: 40155-3514
Address: P.O. Box 523
City: Columbia State: SC Zip: 29202
Home Phone: (618) 612-9649 Work Phone: ()

Employer's Name: The Regional Medical Center
Address: 3000 St. Matthews Road
City: Orangeburg State: SC Zip: 29115
Insurance Carrier: ANTUM RISK
Preparer's Phone #: (618) 612-9649

Preparer's Name: Serge WANDJI Law Firm: Claimant

A claim for workers' compensation benefits is made based on the following grounds:
☒ Injury ☒ Illness ☐ Repetitive Trauma ☐ Occupational Disease ☐ Physical Brain Injury ☐ Concurrent Jurisdiction
In Orangeburg County, State of South Carolina

- The claimant sustained an injury to (Part(s) of Body Injured) on 8/27/21 (Month/Day/Year) in Orangeburg County, State of South Carolina
- Body part(s) affected are: Infectious Whole Body
- Briefly describe how the accident occurred: See attached Addendum
- Both the claimant and the employer were subject to the South Carolina Workers' Compensation Act at the time of injury. YES
- The relationship of employer and employee existed at the time of injury. YES
- At the time of the injury the claimant was performing services arising out of and in the course of employment. YES
- Notice of the accidental injury was given to the Employer on 8/28/21 (Month/Day/Year) in the following manner:
Text message to unit manager Mrs. Theresa Noe

- ☒ 7. Due to injury, the claimant is in need of (check one):
☐ (a) medical examination and treatment for: COVID-19
☐ (b) additional medical examination and treatment for: Long COVID-19 complications and PTSD

- ☒ 8. Due to injury, the claimant requests temporary total disability benefits because of lost compensable time from work and wages for the period of: From August 28, 2021 and on going

- ☒ 9. Due to the injury, the Claimant has permanent disability of the following nature and extent (check one):
☐ (1) General Disability: ☐ Total ☐ Partial ☒ (2) Specific Disability: ☐ Total ☒ Partial ☐ (3) Wage Loss
See attached Addendum

9a. Claimant at MMI: ☐ Yes ☐ No

- ☐ 10. Due to the injury, the Claimant has a serious bodily disfigurement consisting of:
N/A

10a. At the time of the injury, the Claimant was paid weekly wages of \$ 4 and demands accounting of days worked and wages earned as provided by law.

10b. Give names and addresses of all employers for whom the Claimant has worked since the date of the accident:
See Attached Addendum

11. Further grounds or unusual aspects of claim:
See Attached Addendum

11a. List names and addresses of all physicians or other medical specialists who have seen or treated the Claimant as a result of the accident:
See Attached Addendum

11b. To the best of your knowledge, did you have any prior permanent disability? NO
If yes, describe:

12. Appropriate benefits as provided in the Act for the above grounds and other relief as the Workers' Compensation Commission may direct as just and proper.
Estimated time needed for hearing: _____

☐ 13. I am filing a claim. I am not requesting a hearing at this time.

☒ 14. I am requesting a hearing. A \$50 fee is required.

- ☐ Mediation
☐ a. Mediation is requested to be ordered pursuant to Reg. 67-1801 B.
☐ b. Mediation is required pursuant to Reg. 67-1802.
☐ c. Mediation is requested by consent of the Parties pursuant to Reg. 67-1803.
☐ d. Mediation has been conducted by a duly qualified mediator and resulted in an impasse.

Questions regarding mediation may be submitted to mediation@wcc.sc.gov.
I certify I have served this document pursuant to Reg. 67-211 by delivering a copy to Roy A. Howell III, attorney for the Defendant
address P.O. Box 2167 Mt. Pleasant, SC 29465 on the 09 day of 09 2022 by ☐ first class postage ☒ certified mail ☐ personal service ☐ electronic service

I verify the contents of this form are accurate and true to the best of my knowledge.
Serge Wandji Claimant SergeWandji@gmail.com 09/09/2022
Preparer's Signature Title Email Date

Questions about the use of this form should be directed to the Claims Department at 803.737.5723. Refer to Regulations 67-204 through 67-211 and Regulations 67-601 through 67-615 as well as Reg. 67-1801.

WCC Form # 50
Revised 1/19

50

Employee's Notice of Claim and/or
Request for Hearing

SEP 13 2022

JUDICIAL

1013-22

ADDENDUM TO NOTICE OF CLAIM AND REQUEST FOR HEARING

Question # 2: Briefly describe how the accident occurred.

I am a registered nurse (RN) and worked as a full time staff nurse on the geriatric behavioral health unit (BHU) at The Regional Medical Center (TRMC) in Orangeburg, South Carolina. On August 22, 2021, I worked a 12 hours shift from 6:45 A.M. until 7:15 P.M. on the BHU, providing direct nursing care to my assigned patients.

On August 24, 2021, I also worked a 12 hours shift on my unit, the BHU as a staff nurse.

During those two dates (08/22 and 08/24/2021) a widely spread COVID-19 outbreak occurred on the unit (BHU), as evidenced by many patents on the units testing positive for COVID-19 on August 25, 2021. All the staff of the unit were informed of the outbreak by the nurse manager Teresa and the Program Director Mrs. Catherine via group test-message. Mrs. Catherine also gave instructions on what to do in regards to COVID-19 outbreak and exposure to BHU staff, on August 25, 2021, which included contacting Employee Health to get tested. Following that outbreak and staff exposure to COVID-19 on the BHU, the unit manager Mrs. Terasa Noe immediately started on August 25, 2021 via our staff test message group to implement a BHU staff 'Safety Protocol', which was not in place before the outbreak and exposure.

On August 26, 2021 at night time, I started presenting with COVID-19 symptoms including: muscle aches, coughing, chills, sore throat, at home where I lived alone, by myself.

On August 27, 2021, I went to the hospital (TRMC/my employer) to get tested at the Employee Health, and the results came out to be positive for COVID-19. My nurse manager was informed and I was immediately 'Medically removed' from work by my employer (TRMC).

My COVID-19 infection got so bad that on September 6, 2021, I was transported to the hospital (TRMC/my employer) via EMS ambulance, where I was hospitalized for "Pneumonia due to COVID-19 with associated hypoxemic respiratory failure, and required supportive treatment including supplemental oxygen. I was also diagnosed with 'Acute Stress Disorder', Anxiety, Depression, and Atypical chest pain.

Following my discharge from the hospital, I have been suffering from Long COVID-19 complications/symptoms including generalized fatigue, shortness of breath, cognitive issues/brain fog, Severe anxiety, depression, anosmia, palpitation, myalgias, and Post-Traumatic Stress Disorder (PTSD). I have been followed by my primary care physician, and have also been referred to a Clinical Psychologist clinic for PTSD treatment.

Question # 9: Due to the injury, the claimant has permanent disability of the following nature and extent:

(2) Specific Disability: 1- Anosmia/Dysosmia or lost/reduce sense of smell; 2- Post-Traumatic Stress Disorder

Question # 10a: At the time of injury, The claimant was paid weekly wages of \$..., and demands accounting of days worked and wages earned as provided by law.

At the time of injury, Claimant was paid \$40.64 hourly. Claimant was paid an average of \$4,154 per paid period (two weeks), thus weekly gross wages averaged \$2,077

Question # 10b: Give names and addresses of all employers for whom the Claiming has worked since the date of the accident:

I worked for a little than a month, between May and June 2022 at:
Tri-County Commission on Alcohol and Drug Abuse
William J McCord Adolescent Treatment Facility
910 Cook Road
Orangeburg, SC 29118

Question # 11: Further grounds or unusual aspects of claim

Shortly after I tested positive for COVID-19 on August 27, 2021, as a direct result of my exposure to an outbreak on the BHU, I was 'Medically Removed' from work by my employer (TRMC) effective immediately. I was actually scheduled to work another 12 hours shift on August 28, 2021.

On August 31, 2021, I filled out my initial worker's compensation claim via my employer online eSERO, followed by an incident report that I submitted to Employee Health.

On September 21, 2021, I filled out another workers' compensation claim: The Supervisor's Report of Report Employee Occurrence (SREO) form which I received from ANTUM RISK (Insurance Carrier), and I mailed it back to Autum Risk.

More than a month after I filled my initial workers' compensation claim, I drove to the Employee Health Office and Human Resources (HR) Office to find out what was happening with my claim, since I had not heard from anyone about it.

Following that visit about my claim, my Employer (TRMC) sent me on October 1st, 2021 an email reassuring me that someone "should be in contact with me soon". But one month after the 'reassuring' email from TRMC, and more than two months after my initial workers' compensation claim, I still did not heard anything from anyone; so, I sent another email to my employer (TRMC) on November 7, 2021, pleading for information regarding my claim.

On November 8, 2021 in the afternoon, I received (finally) a phone call from Mrs. Sandra Axson who introduced herself as a 'senior claim officer at Antum Risk'. During that phone call Mrs. Sandra stated that she 'had received a Report from my employer (TRMC) indicating that weeks before the COVID-19 outbreak and exposure on my Unit (BHU), I "had requested to be tested for COVID-19 **'FOR NO REASON'** for that, my claim would be denied".

On November 15, 2021, I sent an email to Mrs. Norris, Director of Human Resources to share my phone call content with Mrs. Axson, in regards to my workers' compensation claim.

On November 22, 2021, I sent another to Mrs. Norris, copied other leaders at TRMC including the CEO, and the Chief Nurse Officer, in regards to my Workers' Compensation claim and my phone conversation with Mrs. Axson from Antum Risk. I never heard back from anyone. I was then left with no choice but to file a 'WCC Form 50' Employee's Notice of Claim and Request for Hearing with the South Carolina Workers' Compensation Commission, on November 29, 2021.

In the meantime, and following my discharge from the hospital, I have been followed by my primary care provider. Regular medical updates on my health condition were provided to my Employer (TRMC).

On January 17, 2022, I was evaluated by my primary care provider (PCP), at which time he made the medical decision to return me back to work with some temporary work restrictions appropriate at the 'junction'. That medical update was forward to TRMC via certified mail. Also, in addition to returning me back to work with some restrictions, and as part of my treatment plan, my primary care physician also referred me to a Clinical Psychologist Clinic to receive therapy to address my Post-Traumatic Stress Disorders (PTSD) symptoms. That is why and how I started therapy at the "Roots Psychological Associates in February 2022.

Since I had not heard anything back from my Employer (TRMC) in regards to my Medical Notice returning me back to work, I made the decision to drive to TRMC where I met with Mrs. Nicole Brown on January 26, 2022 to request a date when I can start working again, as prescribed by my PCP. Mrs. Brown just told me that she will *"discuss the matter with leadership and get back with me"*.

One month after my meeting at TRMC with Mrs. Brown, I sent another email on February 25, 2022 to the entire leadership of TRMC in regards to my Medical Notice to return me back to work, as prescribed by my PCP.

On March 15, 2022, Mrs. Norris, HR Director at TRMC sent me an email terminating my employment with the Regional Medical Center of Orangeburg, in pure retaliation to my Workers' Compensation claim filing.

Question # 11a: List names and addresses of all physicians or other medical specialists who have seen or treated Claimant as a result of the accident:

- 1- I was hospitalized at The Regional Medical Center (my employer) from September 6, 2021 til September 9, 2021.
The Regional Medical Center
3000 St. Matthews Road, Orangeburg SC 29118
- 2- After I was discharged from the hospital, I was followed by my primary care provider,
Dr. Fayssoux MD.
Dr. James Fayssoux, MD
615 Wesley Drive, Suite 200
Charleston, SC 29407
- 3- I was also referred to and received Post-Traumatic Stress Disorder (PTSD) therapies from
Roots Psychological Associates
Roots Psychological Associates
1531 Laurel St
Columbia, SC 29201

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EXHIBIT

14



**ASSOCIATES IN
INTERNAL MEDICINE**
ROPER ST. FRANCIS PHYSICIANS

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ORANGEBURG, SC

10/22/2021

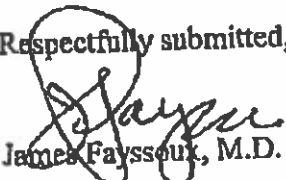
615 Wesley Drive, Suite 200
Charleston, SC 29407
(843) 571-6880p
www.associatesim.com

*Cary Stanley Hickman, M.D. William Huston Snyder III, M.D.
Charles Leon Smith, M.D. Christopher P. McLain, M.D.
Hugh Edward Thompson, M.D. Nicholas H. Noblet, M.D.
James E. Fayssoux, M.D. James Anota, M.D.*

To Whom It May Concern,

Serge Wandji [REDACTED] is a patient in this internal medicine practice. As you well know he contracted Covid-19 at his place of employment during an outbreak that occurred in one of your inpatient units. He was diagnosed with Covid-19 pneumonia and hypoxemic respiratory failure despite the fact that he was fully vaccinated. He was hospitalized briefly and required supportive treatment including supplemental oxygen. When he was first evaluated in the office he had extreme fatigue and exercise intolerance as well as persistent cognitive changes typical in this patient population. He was reevaluated today via a telehealth visit. He is apparently out on sick leave approved through 3 months. He is continuing to recover gradually as expected based on his diagnosis. He has had some improvement in his exercise tolerance and has been able to gradually increase his activity level at home. It is clear from talking with him today that he could not tolerate a return to work at a full-time capacity. We have recommended that he continue to convalesce at home from 10/22/2021 through 11/22/2021. At that time we will reevaluate his progress and hopefully he will be fit to return to work at that time. Thank you for your time and consideration in this matter.

Respectfully submitted,


James Fayssoux, M.D.

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ASSOCIATES IN 2024 NOV 21 P 4: 58

INTERNAL MEDICINE
ROPER ST. FRANCIS PHYSICIANS
ORANGEBURG, SC

11/22/2021

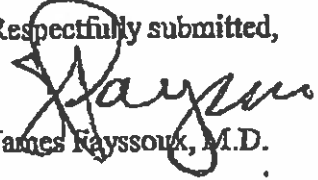
615 Wesley Drive, Suite 200
Charleston, SC 29407
(843) 571-6880p
www.associatesim.com

*Cary Stanley Hickman, M.D. William Huston Snyder III, M.D.
Charles Leon Smith, M.D. Christopher P. McLain, M.D.
Hugh Edward Thompson, M.D. Nicholas H. Noblet, M.D.
James E. Fayssoux, M.D. James Anota, M.D.*

To Whom It May Concern,

Serge Wandji (d.o.b. 1 June 1968) is a patient in this internal medicine practice. As you well know he contracted Covid-19 at his place of employment during an outbreak that occurred in one of your inpatient units. He was diagnosed with Covid-19 pneumonia and hypoxemic respiratory failure despite the fact that he was fully vaccinated. He was hospitalized briefly and required supportive treatment including supplemental oxygen. When he was first evaluated in the office he had extreme fatigue and exercise intolerance as well as persistent cognitive changes typical in this patient population. He was reevaluated today in person. He is apparently out on sick leave approved through 3 months. He is continuing to recover gradually as expected based on his diagnosis. He has had some improvement in his exercise tolerance and has been able to gradually increase his activity level at home. It is clear from talking with him today that he could not tolerate a return to work at a full-time capacity. We have recommended that he continue to convalesce at home from 11/18/2021 through 1/1/2022. At that time we will reevaluate his progress and hopefully he will be fit to return to work at that time. Thank you for your time and consideration in this matter.

Respectfully submitted,


James Fayssoux, M.D.

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ORANGE

EXHIBIT

15



Serge Wandji <sergewandji@gmail.com>

Medical Note!

Serge Wandji <sergewandji@gmail.com>

Wed, Oct 27, 2021 at 11:31 AM

To: "Ginger A. Swartz" <gaswartz@regmed.com>

Good Morning Mrs. Swartz,

I just want to make sure that you have received a fax from my primary care physician office in regards to my health status. I received communication from my Doctor's office confirming that they sent another fax to your attention yesterday afternoon.

Please let me know if you still have not received it.

Serge

Page 30



Serge Wandji <sergewandji@gmail.com>

Medical Note!

Ginger A. Swartz <gaswartz@regmed.com>
To: Serge Wandji <sergewandji@gmail.com>

Wed, Oct 27, 2021 at 2:17 PM

I did receive it this time. I will update your manager. Thank you!

Hope you feel better soon!

[Quoted text hidden]

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EXHIBIT

16



ASSOCIATES IN INTERNAL MEDICINE

ROPER ST. FRANCIS PHYSICIANS

615 Wesley Drive, Suite 200
Charleston, SC 29407
(843) 571-6880p
www.associatesim.com

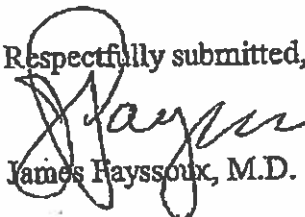
*Cary Stanley Hickman, M.D. William Huston Snyder III, M.D.
Charles Leon Smith, M.D. Christopher P. McLain, M.D.
Hugh Edward Thompson, M.D. Nicholas H. Noblet, M.D.
James E. Fayssoux, M.D. James Anioia, M.D.*

Date: January 17, 2022

To Whom It May Concern,

Serge Wandji (d.o.b. 1 June 1968) is a patient in this internal medicine practice. As you well know he contracted Covid-19 at his place of employment during an outbreak that occurred in one of your inpatient units. He was diagnosed with Covid-19 pneumonia and hypoxemic respiratory failure despite the fact that he was fully vaccinated. He was hospitalized briefly and required supportive treatment including supplemental oxygen. When he was first evaluated in the office he had extreme fatigue and exercise intolerance as well as persistent cognitive changes typical in this patient population. He was reevaluated today via a telehealth visit. He is continuing to recover gradually as expected based on his diagnosis. He has had some improvement in his exercise tolerance and has been able to gradually increase his activity level at home. It is clear from talking with him today that he could not tolerate a return to work at a full-time capacity. I believe he could return to work on a schedule of eight hours a day but could not currently return to work full time floor nursing for numerous reasons. An administrative position would be most appropriate at this juncture. Thank you for your time and consideration in this matter.

Respectfully submitted,


James Fayssoux, M.D.

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2024 NOV 21 PM 4:55
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ORANGEBURG

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CLERK
ORANGEBURG, SC

EXHIBIT

17

Hank Burriss

From: Roy Howell <rhoell@trask-howell.com>
Sent: Tuesday, January 25, 2022 4:02 PM
To: Hank Burriss; Crystal Lupton
Cc: Ginger Posey
Subject: RE: Serge Wandji v. Regional Medical Center of Orangeburg; WCC: 2118696

TimeMattersID: M6C05AE45A3FB396
TM Contact: Wandji, Serge
TM Contact No: 4182
TM Matter No: 22-4599
TM Matter Reference: Wandji, Serge vs. The Regional Medical Center

I will forward this to the employer and let you know. Thanks.

TRASK
HOWELL

Roy A. Howell, III
Founding Partner
Trask & Howell LLC
P.O. Box 2167
Mt. Pleasant, SC 29465
Ph. 843-881-2236 Fax. 843-881-8784
www.trask-howell.com

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From: Hank Burriss <Hank@burrisslaw.com>
Sent: Tuesday, January 25, 2022 1:35 PM
To: Roy Howell <rhoell@trask-howell.com>; Crystal Lupton <Crystal@burrisslaw.com>
Cc: Ginger Posey <gposey@trask-howell.com>
Subject: RE: Serge Wandji v. Regional Medical Center of Orangeburg; WCC: 2118696

Roy:

I hope this email finds you well. Attached hereto is the latest letter from the doctor. My client mailed it to the hospital by certified mail on January 22, 2022. He is ready, willing and able to go back to work under the doctor's restrictions. He has been waiting on the hospital to reach out to him, but has heard nothing. Out of an abundance of caution, I advised him today to go by the hospital to inquire. Can you please let me know what your client's intentions are regarding Mr. Wandji returning to work?

Thanks,

William H. Burriss, Esquire
820 Gracern Rd.
Columbia, South Carolina 29210
tel. (803) 451-4000
fax. (803) 227-0384
toll free: (866) 444-6330
www.burrisslaw.com

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EXHIBIT

18



Serge Wandji <sergewandji@gmail.com>

Reporting for work this morning!

1 message

Serge Wandji <sergewandji@gmail.com>

To: "Nicole B. Brown" <nbbrown@regmed.com>

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2024 NOV 21 P 4:59

Wed, Jan 26, 2022 at 1:50 PM

CLERK OF COURT
ORANGEBURG, SC

Good afternoon Mrs. Brown,

First I would like to thank you for taking the time to meet with me in your office this morning.

Following the latest update on my health situation and the recommendations for my return to work prepared by my primary care provider, I reported to work this morning at the Regional Medical Center. During our meeting we established, confirmed and discussed the following:

- 1- The latest update on my health condition prepared by my Doctor had well been received by the Regional Medical Center days before you sent me your email :subject "LOA Exhausted" on January 25, 2022.
- 2- Unlike what was stated in your email yesterday, a check of \$154 for my health insurance and benefits had already been received by the Regional Medical Center, days before you sent me your email.
- 3- During the meeting you stated that the Regional Medical Center will examine my latest health condition update and doctor's recommendation, and will contact me.
- 4- I also provided you with my new mailing address where all my mails should be sent (at PO Box 523, Columbia SC, 29202) as well as my cell phone (678-612-9649)

Thank you again for meeting with me this morning and I am looking forward to resuming work as soon as possible.

Serge Wandji RN

3/15/22, 9:03 PM

APA # 31

Gmail - URGENT: LOA Exhausted

From: Serge Wandji <sergewandji@gmail.com>

Sent: Friday, February 25, 2022 10:00 PM

To: Tina L. Norris <tlnorris@regmed.com>; Nicole B. Brown <nbbrown@regmed.com>; David M. Southerland <dmsoutherland@regmed.com>; Karrie S. Powell <kspowell@regmed.com>

Subject: Returning to Work!

Good Morning all,

Back in August 2021, I was exposed to and contracted COVID-19 at The Regional Medical Center (TRMC), following an outbreak that occurred in the inpatient unit where I worked as a staff nurse, providing direct nursing care to TRMC's patients. After I tested positive for Covid-19 on August 27, 2021, I was immediately medically removed from work by TRMC. I was officially diagnosed and treated for COVID-19 pneumonia and hypoxemic respiratory failure right here at TRMC. Following my discharge from the hospital (TRMC), I have been receiving follow-up medical treatment from my primary care physician, and periodic medical updates on my health conditions have been provided to TRMC.

On January 17, 2022, I was seen and evaluated by my Primary care Physician (PCP) and a detailed medical notice for my RETURN TO WORK was provided.

On January 22, 2022 I sent my "return to work" Notice by Certified Mail to TRMC.

On January 26, 2022, I drove to TRMC to report for work and was received by Mrs. Brown, Human Resources Manager. Mrs. Brown confirmed reception of my "Return to Work" medical Notice prepared by my PCP. Mrs. Brown also reassured me that TRMC nursing leadership will be updated on my situation and that I will be contacted as soon as possible. All of my contact information (mail, email, cell phone) was provided to Mrs. Brown.

It has been more than a month now since I met and discussed with Mrs. Brown, HR Manager, about my return to work, and yet I have still not heard anything from TRMC about my return to work as prescribed by my PCP. Thus, I am sending this email as a reminder and follow-up to my meeting of January 26, 2022 with Mrs. Brown about my Return to work.

Respectfully,

Serge Wandji, MSN, MBA, RN-BC, NEA-BC, CNL

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2024 NOV 21 P 4: 59

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ORANGEBURG, SC

EXHIBIT

18a

1/12/22, 7:17 AM

Serge Wandji <sergewandji@gmail.com>



My returning to Work- III

1 message

Wed, Mar 9, 2022 at 4:38 AM

Serge Wandji <sergewandji@gmail.com>

To: "Tina L. Norris" <tlorris@regmed.com>, "Nicole B. Brown" <nbbrown@regmed.com>, "David M. Southerland" <dmsoutherland@regmed.com>, "Karrie S. Powell" <kspowell@regmed.com>

Bcc: Serge Wandji <sergewandji@gmail.com>

Dear Mrs. Norris,

First I would like to thank you for returning my call yesterday afternoon, and for the follow-up email you sent me.

Following my multiple pleas to return to work as recommended by my primary care physician since January 17, 2022, you finally emailed me a list of three positions yesterday. I thank you for that. But the only two nursing positions on your list are staff nurse/bedside nursing positions, one at the Emergency department and the other one on unit 3 East. As you should know, since you have a copy of my Physician "Return to work" medical notice, I was medically prohibited to return to floor nursing. Those two nursing positions you sent me are floor/staff nursing positions. As stated in my medical notice, a nursing "administrative position would be most appropriate at this juncture". You also know very well based on my employee's record that in all humility, I am one of the most educated, certified, and experienced nurse at that entire hospital, well capable of handling any administrative nursing role and/or assignment at that facility. The third and last position you sent me was a "Dietary assistant" position. I am not a dietician and I have no qualification or experience in that field.

During our phone conversation, you also asked me to visit our career website and apply for any openings, then interview for it with the hiring manager, just like any other outsider seeking a job at the Regional Medical Center (RMC). In fact, in your follow-up email you wrote and I quote "Please click on the link below to review all open positions at RMC that will include full-time, part-time, and PRN and I would coordinate interviews with the hiring leader", which is just what other outsiders seeking an employment do to compete for any opening at the RMC.

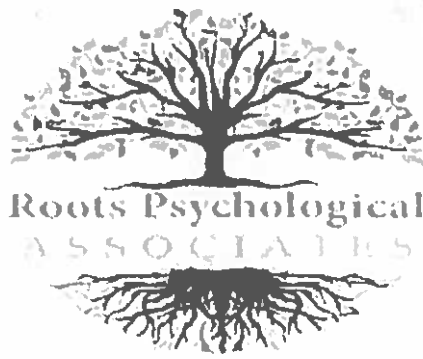
Mrs. Norris, respectfully, I would like to restate a little background information about my situation. Like I have already written in my two previous emails to you, in which I was pleading for my return to work since January, 2022:

I am an employee in good standing at the Regional Medical Center.

In August 2021, following a Covid-19 outbreak on the unit where I worked as a staff nurse, I was exposed to and infected with Covid-19 while providing nursing care to my patients. I was then immediately medically removed from work by the RMC following my positive testing for Covid-19. A few days later, I was admitted and treated at the hospital (RMC) for Covid-19 pneumonia and hypoxemic respiratory failure, and have since been suffering and being treated for Long-Covid.

As you well know Mrs. Norris, a worker's compensation claim was duly filed with the South Carolina Workers' Compensation Commission since November 2021, and it is currently following its procedural resolution course. In the meantime, I was provided by my physician with a medical notice returning me to work for the time being. That is why I don't understand why you are

Exhibit
19



Roots Psychological Associates
1531 Laurel St. Columbia, SC 29201
Phone: (803) 764-1010

Re: Serge Wandji, DOB: 06/01/1968
Date: 03/11/2022

To Whom It May Concern,

Mr. Wandji has been a client at our practice since 02/10/2022. During that time, we have been working through his complications since contracting COVID-19 in the fall of 2021 and being admitted to the hospital. He has made some progress, but there are still concerns that could mildly limit his functionality at bedside nursing (physical- still waiting to gain back his smell, mental/emotional- acute stress due to COVID-19 experience and hospitalization).

It is my clinical recommendation that he be cleared to start back at the hospital but at part-time hours and starting out in an administrative role. The goal will be to ease him back into his previous role, but in small increments at a time.

Sincerely,

James Stewart Courtney, MA, LPC-A
Licensed Therapist
803-764-1010 (Phone)
803-764-0193 (Fax)
Jscourtney.therapy@gmail.com

Date: 03/11/2022

RMC-Wandji 0115

EXHIBIT #20

----- Forwarded message -----

From: "Tina L. Norris" <tlnorris@regmed.com>

To: Frederick Thurman <fthurman@shumaker.com>

Cc: "Laura J. Evans" <levans@shumaker.com>, "Tina L. Norris" <tlnorris@regmed.com>

Bcc:

Date: Sat, 12 Mar 2022 13:06:55 +0000

Subject: Fwd: Medical update

Keeping you updated. Now he has provided another physician's note that's from another physician since beginning his leave.

I called Serge yesterday to have a verbal conversation before sending a term communication to him, but he never responded.

Derick, I will move forward with a term written communication to Serge on Monday as we discussed Thursday of this week unless of course you suggest different.

As I discussed with Serge and following our verbal conversation, I documented that we do not have an administrative part-time role available as he is requesting. He continues to refuse any part-time role offered (dietary assistant) outside of a bedside nursing role.

Thanks for your assistance.

Tina

Sent from my iPhone

Begin forwarded message:

From: Serge Wandji <sergewandji@gmail.com>

Date: March 11, 2022 at 8:28:27 PM EST

To: "Tina L. Norris" <tlnorris@regmed.com>, "Nicole B. Brown" <nbbrown@regmed.com>

Subject: Medical update

Good morning,

Please find attached to this email my latest medical update, from the Psychological Clinic where I was referred to by my Primary Care Provider to receive therapy related to Covid-19 that I contracted at the Regional Medical Center back in August 2021, while providing nursing care to my patient at the hospital.

Please let me know when I can return to work as recommended by the clinician.

Respectfully,

Serge Wandji RN

Exhibit
#21



Serge Wandji <sergewandji@gmail.com>

URGENT: LOA Exhausted

Tina L. Norris <tnorris@regmed.com>

Tue, Mar 15, 2022 at 7:14 PM

To: Serge Wandji <sergewandji@gmail.com>

Cc: "Nicole B. Brown" <nbbrown@regmed.com>, "Tina L. Norris" <tnorris@regmed.com>

Mr. Wandji,

I received your email dated Saturday, March 12, 2022 (see attached) providing another medical update from a different physician than the original treating physician when your leave of absence began in August 28, 2021.

Unfortunately, the organization doesn't have a part-time administrative position available at this time per your request.

At this time we have no choice but to end your employment effective 3/15/2022 due to leave exhaustion. (see term letter attached) Please understand that a separation under these circumstances is in no way punitive and you are eligible for rehire. Please continue to review RMC career postings, and if you see a job that meets your qualifications and experience we welcome you to apply. Your benefits will be active through March 31, 2022 as long as you have continued to pay your benefit premiums. If you have Medical Flexible Spending or Dependent Flexible Spending those benefits will terminate at mid-night.

We wish you all the best.

[Quoted text hidden]

----- Forwarded message -----

From: Serge Wandji <sergewandji@gmail.com>

To: "Tina L. Norris" <tnorris@regmed.com>, HR <hr@regmed.com>

Cc:

Bcc:

Date: Tue, 30 Nov 2021 01:48:30 +0000

Subject: Update on my health condition

Mrs. Norris,

Please find attached an update of my health condition report, prepared by my primary care provider.

Thank you

Serge Wandji RN

----- Forwarded message -----

From: "Tina L. Norris" <tnorris@regmed.com>

To: Serge Wandji <sergewandji@gmail.com>

Cc: "Nicole B. Brown" <nbbrown@regmed.com>, "Tina L. Norris" <tnorris@regmed.com>

Bcc:

Date: Tue, 8 Mar 2022 14:00:57 +0000

Subject: RE: Returning to Work

Hi Serge,

I received your voicemail and I'm in a meeting until 12:30 pm CST. I will call you as soon as I'm out of the meeting.

EXHIBIT

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22

FILED FOR RECORD
WINNIE B. CLARK
CLERK OF COURT
ORANGEBOURNE, SC

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) IN THE COURT OF COMMON PLEAS
)
) CASE NO.: 2023-CP-38-00331

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4:00 p.m. - 4:38 p.m.



479

APPEARANCES

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Plaintiff Pro Se

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EXHIBITS

Plaintiff's Exhibit Number 1	6, 26
(Letter from Dr. Samies to Roy A. Howell, III, dated 12/5/2022)	
Plaintiff's Exhibit Number 2	12
(Workers' Compensation 2/16/2023 Hearing Transcript)	
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(Affidavit of John H. Samies, M.D.)	
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(Letter to Commissioner T. Beck, Amended Prehearing Brief dated 1/12/2023)	
Plaintiff's Exhibit Number 5	31
(RMC letter to All Employees regarding COVID and Other Updates (8/6/2021))	
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STIPULATIONS

It is stipulated and agreed that this deposition is being taken pursuant to the South Carolina Rules of Civil Procedure.

It is stipulated by and between counsel and the witness that the reading and signing of the following deposition be, and the same are, hereby waived.



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1 DR. JOHN H. SAMIES, having been duly sworn, deposes
2 and testifies as follows:

3 DR. SAMIES - EXAMINATION BY MR. WANDJI:

4 Q: All right. Dr. John Samies, will you please
5 state your name and title for the record?

6 A: John Hunter Samies, M.D., Medical Doctor.

7 Q: All right. You are under oath, Dr. Samies, and
8 I'm going to ask you some questions and I
9 expect an answer to each of my questions. Your
10 lawyer cannot help you outside any of those
11 questions. If you don't understand any
12 question, please just say so and I will repeat
13 the question. Do you understand, sir?

14 A: Yes.

15 Q: Okay. Dr. Samies, do you practice medicine at
16 the Regional Medical Center?

17 A: The Regional Medical Center no longer exists.
18 I practice at the institution that took over
19 for it.

20 Q: Did you practice when it was still the Regional
21 Medical Center?

22 A: Yes.

23 Q: How long did you practice medicine there?

24 A: Since 1997.

25 Q: How many days a week on average are you at the



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1 Regional Medical Center?

2 A: Probably six.

3 Q: So, when you practice medicine there, do you
4 get paid for your services?

5 A: I bill for my services, yes.

6 Q: Beside practicing medicine, do you have any
7 additional role at the Regional Medical Center?

8 A: At present, no.

9 Q: Did you? Whe- ---

10 A: Yes.

11 Q: What kind of additional role did you have
12 beside practicing medicine?

13 A: I've been on a variety of committees, chaired
14 a variety committees, have served on the Board
15 of Trustees. I've served on the Medical
16 Executive Committee.

17 Q: Did you get paid in those leadership roles that
18 you were part of?

19 A: I was paid a stipend for hours practiced. So,
20 I billed as a contractor, basically.

21 Q: This is Exhibit Number 1. I'm gonna give a
22 copy to Dr. Samies.

23 MS. WILLIAMS: Do you have an extra copy for me?

24 MR. WANDJI: That's another one. You -- you can
25 have this one.



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1 MS. WILLIAMS: Thank you.

2 (Plaintiff's Exhibit Number 1 was marked for
3 identification purposes.)

4 Q: This is a one-page letter, Dr. Samies. Your
5 name is written at the bottom of it. Do you
6 recognize that letter?

7 A: Yes.

8 Q: Did you personally type the entirety of that
9 letter?

10 A: (No audible response.)

11 Q: Did you type it yourself?

12 A: Yes.

13 Q: Every single thing on that letter?

14 A: Yes.

15 Q: Why did you write that letter?

16 A: I was requested to do a review of information.

17 Q: Who requested you?

18 A: It was initially requested by the Infection
19 Control Department ---

20 Q: Okay.

21 A: --- which I served as a consultant for.

22 Q: Okay. Who asked -- requested you to do it?
23 You said initially.

24 A: Well, and then they wanted me to speak to the
25 attorney that's on the letter.



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1 Q: Who is they?

2 A: Infection Control Department at the hospital.

3 Q: Okay. How much did you get paid for writing
4 that letter?

5 A: Nothing.

6 Q: Why would the Infection Control ask you to
7 write a letter?

8 A: I served as the Hospital Infection Control
9 Consulting and Hospital Epidemiologist and they
10 had asked me to review information pertinent to
11 the epidemiology.

12 Q: The letter was written and signed on December
13 2022; is that correct?

14 A: Yes.

15 Q: Okay. How many of such a letter for your
16 Infection Disease expertise have you written
17 that year, 2022?

18 A: I don't know.

19 Q: Have you written any?

20 A: Yes.

21 Q: Beside this one?

22 A: Yes.

23 Q: That was put into the judicial system of any
24 kind?

25 A: Not that I'm aware of, no.



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1 Q: But you knew this one had to do with some kind
2 of lawsuit, right?

3 A: I knew that it was information requested.

4 Q: But you knew it was ...

5 A: I did not specifically know what precisely it
6 would be used for. I did an epidemiologic
7 review at the request.

8 Q: Okay. So, you didn't know how I was the
9 Claimant or didn't know ---

10 A: Oh, I knew -- I knew the subject was you in the
11 letter, yes.

12 Q: But you didn't know that it had to do with some
13 kind of judicial process?

14 A: I understood that there was Workers'
15 Compensation questions.

16 Q: So, how many letter after you written like that
17 that in year 2022? How many?

18 MS. WILLIAMS: Object to the form. You can answer
19 the question.

20 A: The -- well, you asked whether or not it was
21 for judicial things. No other for judicial
22 things. I wrote multiple other letters over
23 time about a variety of infection control and
24 epidemiology issues.

25 Q: Okay. Have you ever testified for anybody or



1 through a letter like this in some kind of
2 judicial process?

3 A: I've never testified, no.

4 Q: So, this was the very first one?

5 A: I ---

6 MS. WILLIAMS: Object ---

7 A: --- did not ---

8 MS. WILLIAMS: --- to form.

9 A: --- testify. I wrote a review at the re- -- at
10 the request of information they provided.

11 Q: In the second sentence of that letter that you
12 wrote, Dr. Samie, you claim that the materials
13 you reviewed to prepare the letter were a
14 COVID-19 Questionnaire from Mr. Wandji -- I'm
15 quoting what you wrote -- and two, additional
16 employees, a log of Behavioral Health Employees
17 and a series of emails; is that correct?

18 A: That's correct.

19 Q: Okay. Beside the material I just read from
20 your letter, did you get any other information
21 from anyone to help you prepare for your
22 letter?

23 A: No.

24 Q: Did you discuss about this assignment you
25 received from the Infection Disease Committee,



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1 did you discuss about that with anyone before
2 preparing your letter?

3 A: No.

4 Q: The last sentence in the last paragraph in your
5 letter, and I'm quoting, you wrote, giving that
6 he, talking about me, had concern about non-
7 employment exposure, which prompted testing
8 only a short time prior to his illness, I must
9 wonder how much other potential non-employment
10 exposure he had. Is that correct what you
11 wrote?

12 A: That's correct.

13 Q: And you say you wrote this entire letter?

14 A: Yes.

15 Q: Who told you that I had concern about non-
16 employment exposure?

17 A: It merely states, given that he had concerns
18 about non-employment exposure, which prompted
19 testing only a short time prior to his illness,
20 I must wonder how much other potential non-
21 employment exposure he had.

22 Q: That's what I read. My question is, who told
23 you that I had concern about non-employment
24 exposure? Who told you that?

25 A: I can't re- -- let's see. Of more importance



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- 1 in this case is his self-reported exposure and
2 request for testing on 8/16/2021.
- 3 Q: What is the non-employment exposure there?
- 4 A: That's what was -- I reviewed the records and
5 that was gleaned from the records of Employee
6 Health.
- 7 Q: Oh. Employee Health told you that I had non-
8 employment ---.
- 9 A: They did not tell me. They -- they forwarded
10 their documents.
- 11 Q: Where are those documents?
- 12 A: I don't have them.
- 13 Q: You reviewed them and then you gave it back to
14 them?
- 15 A: No. I reviewed them and they would have been
16 in email, which is no longer existent at the
17 Regional Medical Center. And probably I
18 deleted them at that time.
- 19 Q: And on those email that said I had non-
20 employment exposure to COVID-19?
- 21 A: That's what I gleaned from it.
- 22 Q: What's where you took it?
- 23 A: That's what I gleaned from.
- 24 Q: What do you mean gleaned? Can you explain?
- 25 A: Gleaned means understood from that materials.



- 1 Q: Oh, okay. From the materials you got from
2 whom?
- 3 A: From Employee Health.
- 4 Q: Oh. Employee Health at the Regional Medical
5 Center at that time ---
- 6 A: Correct.
- 7 Q: --- right?
- 8 A: Correct.
- 9 Q: Is it possible that you read wrong?
- 10 A: Certainly.
- 11 Q: I'm gonna give you a copy. This is Exhibit
12 Number 2.
- 13 (Plaintiff's Exhibit Number 2 was marked for
14 identification purposes.)
- 15 Q: This is the testimony of both Employee Health,
16 the only people I talked to about my COVID at
17 the Regional Medical Center and the people you
18 received email and information from. Kelci
19 Caruso, she was the head of the Employee
20 Health. Do you remember her?
- 21 A: Yes.
- 22 Q: Good. And then Katie Evans, she's just a staff
23 there. Do you remember her?
- 24 A: I do not remember her specifically.
- 25 Q: I know it.



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1 A: Okay.

2 Q: Now, under oath, the position, this is what
3 Kelci Caruso, the head of Employee Health, said
4 when asked if I told her that I was exposed to
5 COVID-19, this is what she says, no, sir, I
6 don't recall you telling me where you were
7 exposed. That's page 108, line 124.

8 A: Okay.

9 Q: Just look at this ---

10 A: I got it.

11 Q: --- page -- part here (indicating). So, let me
12 ask you again, based on what I just told you.
13 Who told you that I had concern about non-
14 employment exposure?

15 A: It is what I gleaned from the records that were
16 provided to me by Employee Health.

17 Q: Employee Health just said I've never told him
18 that.

19 A: I see that.

20 Q: So, why did you write that in your letter that
21 I got non- ---

22 A: It ---

23 Q: --- -employment exposure?

24 A: --- it is what I gleaned ---

25 MS. WILLIAMS: Object to the form.



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1 A: --- it is what I gleaned from the records
2 provided to me by Employee Health.

3 Q: Gleaned for your truth; is that correct?

4 MS. WILLIAMS: Object to the form.

5 A: It is what I understood from those records.

6 Q: So, did you understand that -- did you
7 understood that wrong?

8 MS. WILLIAMS: Object to ---

9 A: I don't ---

10 MS. WILLIAMS: --- the form.

11 A: --- know.

12 Q: You don't know?

13 A: I don't know. No.

14 Q: Ms. Kelly [spl], those are the only two people
15 working at Employee Health during my tenure
16 there and when I had COVID. On page 115, line
17 68, and I'm quoting, I stated that you talking
18 about Wandji, me, were exposed, I did not say
19 that you stated you were exposed outside of the
20 hospital. That's what she says. That's her
21 testimony. I was exposed to COVID, but not
22 outside of the hospital. She didn't say that.
23 So, let me ask you for the third time, where
24 did you get that I was exposed to COVID ---

25 MS. WILLIAMS: Object ---



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1 Q: --- out of the hospital?

2 MS. WILLIAMS: Object to the form.

3 A: Once again, it is what I gleaned from the
4 information that was provided to me.

5 Q: The head of the Employee Health, Ms. Caruso,
6 that you said you know, also testified that
7 October 16, when I first requested to be tested
8 for COVID-19, it already had several patients
9 and employees at the hospital who had tested
10 for COVID-19. That's the testimony on line --
11 on page 108, line 9 to 10. So, as the
12 infection disease expert, is it possible that
13 me, working as a nurse, between all the up and
14 down with patients, is it possible that, as a
15 full-time nurse there, I was exposed to COVID-
16 19 on or before August 16? Is it at all
17 possible?

18 MS. WILLIAMS: Object to the form.

19 A: I'd have to review the record of your
20 employment dates and your working hours in
21 order to make that determination.

22 Q: I'm telling you I was a full-time employee
23 working there full-time as a nurse. I'm
24 telling you that as I just read, according to
25 Employee Health, before August 18, there were



1 don't want you to repeat that. The question
2 is, the -- the question is, how did you come up
3 with the fact that it is unlikely that I got
4 COVID out of the hospital? That's the
5 question.

6 MS. WILLIAMS: Object to the form.

7 A: I did not come to any conclusion. I merely
8 stated that it was unlikely. There is no
9 conclusion there.

10 Q: Okay.

11 A: Of more importance in this case, is the self-
12 reported exposure and request for testing on
13 8/16. I'll read the rest, if necessary.

14 Q: Have you been the Medical Director of the
15 Regional Medical Center?

16 A: Medical Director?

17 Q: Yeah.

18 A: There is no Medical Director.

19 Q: Oh. Have you ever been the Chief of Medical
20 Staff at the Regional Med- ---

21 A: I've been the Chief of Staff.

22 Q: For how long?

23 A: I believe it was two years.

24 Q: Okay. Did you get paid for that?

25 A: I was a contract employee, meaning that I got



1 paid by the hour for that as a contracted
2 service. Much like if you brought an
3 conditioning specialist over to fix your air
4 conditioner, you would pay him for the time
5 that he spent.

6 Q: This is another Exhibit. This -- this is your
7 Affidavit, Dr. Davis -- Dr. Sammies.

8 (Plaintiff's Exhibit Number 3 was marked for
9 identification purposes.)

10 Q: Did you prepare, you wrote and signed that?
11 Did you do that on that one?

12 A: Yes.

13 Q: On number five of your Affidavit, you said
14 you've never been an employee of the Regional
15 Medical Center.

16 A: That's correct.

17 Q: That's correct?

18 A: That's correct.

19 Q: You've been a member of the Board of Trustee--
20 -- of Trustees; is that correct?

21 A: That's correct.

22 Q: Since when?

23 A: I have the dates on my thing, but at -- at any
24 point when I was the Chief of Staff or the
25 Chairman of Medical Executive Committee, I was



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1 automatically a Board Member.

2 Q: And you were also the member of the Finance
3 Committee Board of Trustees at the Regional
4 Medical Center; is that correct?

5 A: That's correct.

6 Q: For how long?

7 A: I don't recall.

8 Q: So, you practice medicine there for
9 compensation and you were on the Board of
10 Trustees at that hospital?

11 A: That's correct. It's an elected position.

12 Q: So, with all these financial ties and
13 employment ties with the Regional Medical
14 Center, why did you agree to be a witness in
15 this litigation ---

16 MS. WILLIAMS: Object to the form.

17 Q: --- against the Regional Medical Center?

18 A: I am not financially tied to the Regional
19 Medical Center. I practice medicine there. I
20 am privileged there. I was appointed by
21 election to a position of leadership on the
22 medical staff, but not an employment position.

23 Q: Since you practice there and whatever your
24 company gets paid for your services, why did
25 you agree to be a witness in the litigation



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1 where the Regional Medical Center is the party?

2 A: I agreed to do ---

3 MS. WILLIAMS: Objection to form.

4 A: --- I agreed to do a review, as I stated
5 previously ---

6 Q: And you know ---

7 A: --- on information presented to me.

8 Q: --- and you know it was for the Worker
9 Compensation case?

10 A: I knew that it was going to the Workers'
11 Compensation attorney, yes.

12 Q: Don't you see a conflict of interest in there?

13 A: I ---

14 MS. WILLIAMS: Object to form.

15 A: --- do not.

16 Q: You don't?

17 A: I do not.

18 Q: So, you think that's lawful?

19 MS. WILLIAMS: Object to the form.

20 Q: To be on the Board of Directors of the Trustees
21 of your hospital and still write an expert
22 letter for them in the litigation. You think
23 that's lawful?

24 MS. WILLIAMS: Object to the form.

25 A: I wrote -- I opined on the information that I



1 was presented for the epidemiology and
2 infectious disease portion of what was
3 submitted to me.

4 Q: So, you give your expertise in the litigation
5 case that the Regional Medical Center is
6 involved in; is that correct?

7 MS. WILLIAMS: Object to the form.

8 A: Again, I opined on the information that was
9 presented to me at the request of the
10 institution.

11 Q: And you knew it's liti- -- that it is a legal
12 case, but still you decided to give your
13 expertise?

14 MS. WILLIAMS: Object to the form.

15 A: I provided what my request was, which was to
16 review and opine on the epidemiology and
17 infectious disease aspects of the information
18 that I was presented with.

19 Q: Knowing that it was a legal case, that the
20 Regional Medical Center was involved in; isn't
21 that correct? You knew that. Did you?

22 A: I knew that there was a Workman's Compensation
23 case, but I did not know that it was in
24 litigation.

25 Q: Thank you. On point Number 6 of your



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1 Affidavit, you stated that, and you've been
2 saying that all along, you provide infectious
3 control services to the Regional Medical Center
4 pursuant to a contract with them for those
5 services?

6 A: Yes. I've had a contract ---

7 Q: That's correct.

8 A: --- I've had a contract since 1997.

9 Q: Why didn't you disclose in your Affidavit that
10 you have leadership position at that
11 organization in the past? Like the Chief
12 Medical Officer, like being on the board?

13 A: I was not Chief Medical Officer.

14 Q: Like ---

15 A: I was Chief of Staff.

16 Q: Yeah.

17 A: An elected position for the medical staff.

18 Q: Why didn't you disclose that in your Affidavit?

19 A: The Affidavit said what I thought it needed to
20 say.

21 Q: Okay. And why didn't you disclose that you are
22 on the Board of Trustees in your Affidavit?

23 A: That was a -- again, a leadership position that
24 I was voted to, not a employment issue. And
25 this is describing employment relationships.



1 Q: Thank you. So, I want to understand here. I
2 want to follow that with a question. You said
3 you are like a contractor for medical services
4 at the Regional Medical Center; is that
5 correct?

6 A: Correct.

7 Q: And you are also a member of the Finance
8 Committee Board of Trustees; is that correct?

9 MS. WILLIAMS: Object to the form.

10 A: At a period of time, I was on the Finance
11 Committee of the Board of Trustees.

12 Q: Is that ethical business practice ---

13 MS. WILLIAMS: Object to the form.

14 Q: --- to be a contractor and in the Board of
15 Finance of the same organization?

16 A: It was a ---

17 Q: Is that ethical?

18 A: --- position I was elected to and among the
19 things that you're required to do is disclose
20 any conflicts of interest when you're a Board
21 member.

22 Q: Is that lawful to be a contract to an
23 organization and still be on the Board of
24 Financial Trustees? Is that legal?

25 MS. WILLIAMS: Object to the form.



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1 A: I believe, yes.

2 Q: Okay.

3 A: I am not aware it's not.

4 Q: Back to Exhibit Number 1, Dr. Sammie.

5 (Plaintiff's Exhibit Number 1 was referenced at this
6 time.)

7 Q: The material which you reviewed before writing
8 that letter, from those material, can you tell
9 when I was exposed to COVID-19?

10 A: I did not opine on that.

11 Q: So you don't even know when I was exposed to
12 COVID-19?

13 A: I do not.

14 Q: Okay. But you know and you wrote in your
15 letter that it is unlikely that I got it at the
16 Regional Medical Center; is that correct?

17 A: In my opinion a link to employment exposure is
18 unlikely based on the information presented to
19 me.

20 Q: So you don't know when I was exposed, but you
21 know that it is unlikely that I got it at the
22 Regional Medical Center; is that correct?

23 A: Of more importance in this case is hi a self-
24 reported exposure and request for testing on
25 8/16/21. This was negative. The details of



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1 this ---

2 Q: We already ---

3 A: --- exposure ---

4 Q: --- we already -- we already had that. I don't
5 want you ---

6 A: --- are unclear ---

7 Q: --- to repeat it.

8 A: --- and that is how this opinion is generated.

9 Q: I'm gonna repeat that question. You don't know
10 when I was exposed to COVID-19?

11 A: That's correct.

12 Q: But you know that it is unlikely that I got it
13 from the hospital?

14 MS. WILLIAMS: Object to the form. Asked and
15 answered.

16 Q: Is that correct?

17 A: That is correct, based on the information ---

18 Q: Okay.

19 A: --- presented.

20 Q: On page 107, line 16 to 18, Exhibit -- on
21 Exhibit 2.

22 (Plaintiff's Exhibit Number 2 was referenced at this
23 time.)

24 Q: This is the head of the Employee Health, Ms.
25 Caruso, RN. She stated, and I quote, we did



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1 not ask you what -- when you were exposed in
2 the Questionnaires. They don't ask when you
3 were exposed. We didn't need to know
4 specifically when you were exposed. So, even
5 the hospital don't know when I was exposed.
6 But you knew for sure I didn't -- I was at --
7 unlikely got it from the hospital. Is that
8 correct?

9 A: What I stated ---

10 MS. WILLIAMS: Object to the form.

11 A: --- again is, in my opinion, that a link to
12 employment exposure here is unlikely based on
13 the information presented to me.

14 Q: So, you didn't know when I was exposed?

15 A: That's correct.

16 MS. WILLIAMS: Object to the form.

17 Q: Okay. Do you regret writing that letter?

18 A: No.

19 Q: You would write it the same as it is today?

20 A: (No audible response.)

21 Q: You need to ---

22 A: I don't know -- I don't know that I can answer
23 that. I don't know.

24 Q: Would you change anything on that letter, given
25 the information you have now?



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1 A: I don't know.

2 Q: You mentioned a series of emails that you
3 received. How many emails did you received?

4 A: I do not know.

5 Q: Who wrote those emails?

6 A: It would've been information coming from
7 Employee Health and from Infection Control.

8 Q: Where are those emails?

9 A: I don't have them.

10 Q: What happened to them?

11 A: The informa- -- the -- the email system of the
12 ho- -- Regional Medical Center sunsetted a
13 fairly long time ago and no longer exists.

14 Q: Have you discussed this Worker Compensation
15 case with any other executive in any of your
16 executive letters?

17 A: No.

18 Q: Have you discussed this Worker Compensation
19 case with any of your Board of Trustees
20 meeting?

21 A: No.

22 Q: Are you sure?

23 A: Yes.

24 Q: Did you discuss this Worker Compensation case
25 with anyone at all?



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- 1 A: No. My attorney.
- 2 Q: Did you personally hire Ms. Williams to
- 3 represent you in this case?
- 4 A: I did not.
- 5 Q: Who hired her to represent you?
- 6 A: Medical University of South Carolina.
- 7 Q: Do you mean the previous Regional Medical
- 8 Center?
- 9 A: The organization that took over the Regional
- 10 Medical Center.
- 11 Q: Yeah. Okay. This is Exhibit Number 4.
- 12 (Plaintiff's Exhibit Number 4 was marked for
- 13 identification purposes.)
- 14 Q: This is a letter where Dr. Samies was called
- 15 among the staff of the Regional Medical Center,
- 16 as witnessed, for the January -- I'm sorry.
- 17 This is your copy -- January hearing. So, you
- 18 were called here in page number -- second page
- 19 ---
- 20 MS. WILLIAMS: Mr. Wandji, can I interrupt you for
- 21 just one second?
- 22 MR. WANDJI: Yeah.
- 23 MS. WILLIAMS: Have these documents been produced in
- 24 discovery? I don't recall this being produced.
- 25 MR. WANDJI: Yeah. I'll send you everything that I



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1 have.

2 Q: So, this is -- is the list of the -- the staff
3 and your name is right there as one of the
4 staff that were called to wait for -- for the
5 hearing. Why didn't you show up?

6 A: I wasn't asked, to my knowledge.

7 Q: Oh. Okay. That's why you didn't show up?

8 A: Correct.

9 Q: Okay. This is another, Exhibit Number 5. Let
10 me see, here's your copy.

11 (Plaintiff's Exhibit Number 5 was marked for
12 identification purposes.)

13 Q: That's just a letter from the Reg- -- Regional
14 Medical Center. That's ---

15 A: Uh-huh.

16 Q: --- back to August 6th. There were already
17 patients all over the hospital with COVID-19.
18 As a nurse working there, is it possible that
19 I could have been exposed to COVID-19 at that
20 hospital?

21 MS. WILLIAMS: Object to the form.

22 A: It's possible that any employee can be exposed
23 when there are patients with COVID-19.

24 Q: Thank you. This is the -- another Exhibit,
25 Number 6.



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1 (Plaintiff's Exhibit Number 6 and 7 were marked for
2 identification purposes.)

3 Q: It's actually two. One for the patients and
4 one for the employees. This is one for the
5 patient and one for the employees. Both are
6 Exhibits. I got it from the Regional Medical
7 Center. Dr. Samie, those are the August
8 infected people in the unit that cared for
9 patients who had COVID-19. Is it possible that
10 I was exposed to COVID-19 at the hospital?

11 A: It's possible.

12 MS. WILLIAMS: Object to the form.

13 Q: It's possible, okay.

14 MR. WANDJI: Dr. Samies, you're a busy and good man.
15 I don't want to waste your time. I'm gonna end
16 this deposition at this point. I want to thank
17 you for your time, sir.

18 DR. SAMIES: Thank you.

19 MS. WILLIAMS: I don't have any questions.

20 (Off the record from 4:34 p.m. - 4:37 p.m.)

21 MS. WILLIAMS: We're back on the record. Exhibits 6
22 and 7, we've noted include patient names that
23 the -- the facility would have concerns about
24 confidentiality and HIPPA violations, so these
25 -- we would maintain these should be protected



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1 and the confidentiality of them maintained.

2 MR. WANDJI: And I want to add that those
3 communication was provided by the facility via
4 email ---

5 MS. WILLIAMS: They ---

6 MR. WANDJI: --- to me.

7 MS. WILLIAMS: --- they were not produced by the
8 facility in the context of this litigation.
9 These are not documents I'm familiar with.

10 MR. WANDJI: They were provided in the Worker
11 Compensation phase of this same case by the
12 Regional Medical Center via email to me.

13 MS. WILLIAMS: Okay. Let me ---

14 MR. WANDJI: I didn't produce this communication.

15 MS. WILLIAMS: I understand that. I just want to
16 confirm, Mr. Wandji, do you have any objection
17 to maintaining the confidentiality of these
18 names if they are produced ---

19 MR. WANDJI: I am saying ---

20 MS. WILLIAMS: --- in the context ---

21 MR. WANDJI: --- it's gonna be blacked out, the name
22 I'm gonna be blacked out before it is publicly
23 exposed.

24 MS. WILLIAMS: Okay. Thank you.

25 (There being no further questions, the deposition



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1 concluded at 4:38 p.m.)
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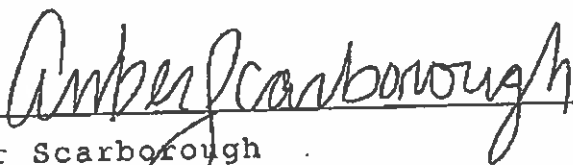
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CERTIFICATE

This is to certify that the deposition of DR. JOHN H SAMIES, consisting of thirty-four (34) pages, is a true and correct transcript of the testimony given by said deponent after being duly sworn; said deposition was reported by the method of Stenomask with Backup.

I further certify that I am neither employed by nor related to any of the parties in this matter or their counsel; nor do I have any interest, financial or otherwise, in the outcome of same.

IN WITNESS WHEREOF I have hereunto set my hand and seal on October 2, 2024.


Amber Scarborough
Court Reporter

Notary Public for South Carolina
My Commission Expires: June 13, 2033



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EXHIBIT

23

Palmetto Infectious Disease Physicians, LLC
1097 B Cook Road
Orangeburg, SC 29118

John H. Samies, MD, FSHEA
Marie L. Gehling, NP-C, CWOCN

803-539-0505
fax 803-539-0410

Roy A. Howell III
PO Box 2167
Mt Pleasant, SC 29465

December 5, 2022

Dear Mr Howell,

I am writing this letter to you in response to your request for review of materials concerning claimant Serge Wandji. Reviewed were COVID19 Questionnaires from Mr Wandji and two additional employees, a testing log for Behavioral Health Employees and a series of emails. Mr Wandji is claiming work related injury resultant from COVID 19 infection diagnosed 8/27/2021. He reports this as a result of exposure on 8/22/2021 and 8/24/2021 while working at the Behavioral Health Unit of the Regional Medical Center of Orangeburg and Calhoun Counties.

Clearly there were patients on the Behavioral Health Unit who tested positive for COVID 19 in that time period. While the hospital policy required use of protective attire, it is unclear if this was followed by the claimant.

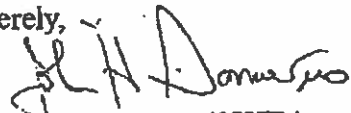
Of more importance in this case is his self reported exposure and request for testing on 8/16/2021. This was negative. The details of this exposure are unclear. Certainly a positive test on 8/27 and symptoms beginning on 8/23 as he initially reported or 8/25 or 8/26 (which he subsequently stated) would be consistent with exposure on or near the 8/16 date. Generally covid incubation is 2-14 days with onset for most being about 5-10 days from exposure. It is highly unlikely that 8/22 was the date of exposure if his symptoms began on 8/23 and not possible that 8/24 was the date of exposure for onset 8/23. The exposure of 8/22 with onset 8/25 is unlikely being at the shortest end of incubation period and the exposure of 8/24 with onset 8/25 is highly unlikely being shorter than the incubation period of the virus.

The recanting of the 8/16 exposure by the claimant and the confusion about date of onset of symptoms puts doubt on all claimant statements in this case. Since the reporting by Employee Health of RMC appears to be a real time event, it would seem that the timing of onset of symptoms should have been quite clear to the claimant.

It is my opinion that a link to employment exposure here is unlikely based on the information presented to me. Given that he had concern about non-employment exposure which prompted testing only a short time prior to his illness, I must wonder how much other potential non-employment exposure he had.

If I may be of further assistance in this case, please feel free to contact me.

Sincerely,


John H. Samies, MD FSHEA

EXHIBIT

24

APA # 50

rmc

Regional Medical Center

DATE: August 6, 2021
TO: All Employees
SUBJECT: COVID & Other Updates at Regional Medical Center (RMC)

Numbers of COVID positive cases continue to rise across the country and within our state and surrounding areas. As of today, August 6, 2021, we have 12 COVID-19 patients in our hospital.

1. Personal Protective Equipment (PPE)

RMC currently has an adequate supply of all PPE. Please discard isolation gowns after each use for precaution patients.

2. N-95 Masks

- N-95 Masks are required to be worn by anyone who has contact with patients. Replacement masks are available on all units and from Employee Health or Nursing Supervisor. A new mask should be obtained daily or when your mask does not fit snugly to your face, the straps are broken or the mask is soiled.
- Employees should only wear the style/model of mask they have been fit tested for.
- Staff should continue to maintain social distancing and not congregate without masks in breakrooms, lounges, meetings, etc.

3. Masking

Masks are required to be worn while in the facility regardless of vaccination status. Surgical or cloth masks are required at all times for all staff outside of patient care areas. Staff in offices that have multiple individuals where social distancing cannot be achieved are required to wear a mask at all times. In addition to wearing a mask, a face shield is available if necessary. A face shield alone is not an acceptable replacement for a mask.

4. Patient Care/Transport

- When transferring patients, ensure that patient has mask on in the hallway.
- Use COVID elevator when transporting COVID patients.
- Negative pressure rooms have been completed in PCU, ICU and CCU.

5. Virtual Meetings vs. In-Person Meetings

RMC is transitioning back to virtual meetings. If meetings are in-person, adhere to social distancing, masks and hand hygiene.

"continued on next page"

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EXHIBIT

24a

APA # 47

**TRASK
HOWELL**
WORKERS' COMPENSATION DEFENSE

Reply to
Roy A. Howell, III
(843) 881-2236
rhowell@trask-howell.com

December 13, 2022

Via Certified Mail

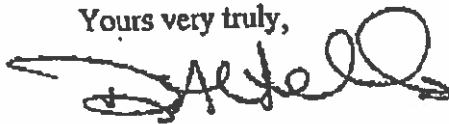
Serge Wandji
P.O. Box 523
Columbia, SC 29115

Re: Serge Wandji v. The Regional Medical Center
W.C.C. File No.: 2118696
Carrier File No.: WC2021098080
Date of Accident: August 27, 2021

Dear Mr. Wandji:

Enclosed please find a list of all employees at the Regional Medical Center testing positive for Covid-19 during the month of August 2021.

Yours very truly,



Roy A. Howell, III

RAHIII/mbm/lth
Enc.

cc: Sandra Axson, Antum Risk (w/ enc.) (via upload only)
Jonathan Vallentine, The Regional Medical Center (w/ enc.) (via email only)

763 JOHNNIE DODDS BLVD. | P.O. BOX 2167
P 843.881.4228 | F 843.881.8784



MT. PLEASANT, SOUTH CAROLINA 29465
www.TRASK-HOWELL.com

Last Name	First Name	Department	Date Tested	Results	Location Where Swabbed
Toole	Jason	PCU	8/1/2021		Swabbed Outside of RMC
Kennedy	Manuette	PCU	8/2/2021		RMC-Employee Health
Johnson	Audrey	PCU	8/2/2021		RMC-Employee Health-ED
Toole	Angela	DAI	8/3/2021		RMC-Employee Health
Zeigler	Jacquetta	4 West	8/3/2021		RMC-Employee Health
Gregg	Jennifer	Recovery Room	8/4/2021		RMC-Employee Health
Craig	Lucius	SCOI	8/5/2021		RMC-Employee Health
Paulling	Shontiqua	Float Pool	8/5/2021		RMC-Employee Health
Irons	Brittany	ED	8/9/2021		RMC-Employee Health
Carter	Melissa	BBEMC Registration	8/9/2021		RMC-Employee Health
Cooper	Pam	BBEMC-Guest Assistant	8/9/2021		RMC-Employee Health-BBEMC
Crouch	Amy	Administration	8/10/2021		Swabbed Outside of RMC
Folk	Sophia	Cancer Center	8/10/2021		RMC-Employee Health
Deleon	Milagro	Dietary	8/10/2021		RMC-Employee Health
Spires	Kelly	Resource Management	8/12/2021		RMC-Employee Health
Clark	Daloni	Insurance Specialist	8/12/2021		Swabbed Outside of RMC
Wannamaker	Misty	IT	8/13/2021		RMC-Employee Health
Gillam	Ken	IT	8/13/2021		RMC-Employee Health
Cook	Joanne	DAI	8/13/2021		Swabbed Outside of RMC
Whetstone	Glenda	Utilization Review	8/16/2021		RMC-Employee Health
Gillam	Dena	Cancer Center	8/16/2021		RMC-Employee Health
Moore	Jessica	Float Pool	8/16/2021		Swabbed Outside of RMC
Wooten	Kaylee	Emergency Room	8/16/2021		Swabbed Outside of RMC
Thompson	Angela	OR	8/18/2021		RMC-Express Care
Fowler	Brandon	Dietary	8/19/2021		RMC-Employee Health
Moore	Peggy	4W	8/19/2021		RMC-Employee Health
Myers	Anna	ICU	8/19/2021		RMC-Employee Health
Pridgen	Brooke	Her Place	8/19/2021		Swabbed Outside of RMC
Keller	Travis	Security	8/20/2021		RMC-Employee Health-ED
Ferguson	Mary	Pharmacy	8/20/2021		RMC-Employee Health
Ferguson	Mary	Pharmacy	8/20/2021		RMC-Employee Health-ED
Zeigler	Amy	ICU	8/23/2021		RMC-Employee Health
Given	Taylor	OR	8/23/2021		RMC-Employee Health
Coons	Crystal	HIM	8/23/2021		RMC-Employee Health
Staley	Laticia	Dietary	8/23/2021		RMC-Employee Health
Mims	Joy	HIM	8/23/2021		RMC-Employee Health
Carroll	Hannah	ICU	8/23/2021		Swabbed Outside of RMC
Burnsed	James	Engineering	8/24/2021		RMC-Employee Health
McCallister	Victoria	Emergency Department	8/26/2021		RMC-Employee Health
Miller	Christina	SCOI	8/27/2021		RMC-Employee Health
Void	John	BHU	8/27/2021		RMC-Employee Health
Wandji	Serge	BHU	8/27/2021		RMC-Employee Health

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Antley	Teresa	BBEMC	8/28/2021		RMC-Employee Health-BBEMC
Futrick	Steven	Engineering (contractor)	8/30/2021		RMC-Employee Health
Jennings	Tachacine	PCU	8/30/2021		RMC-Employee Health
Curry	Shamariah	PCU	8/30/2021		RMC-Employee Health
Smith	Kimberly	BHU	8/30/2021		RMC-Employee Health-ED
Kiker	Connor	ICU	8/31/2021		RMC-Employee Health

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EXHIBIT

25

APR 7

Outbreak Line Listing Form

Staff List ☐ Patient/Resident List ☒

Date: 8/25/21 - 9/6/21
(Hospital Onset = 14 days after admission)

Time:

Name		Regional Medical Center										admission)											
Case Identification		Symptoms (from onset)										Specimen(s) play positive											
Name of Patient/Resident/Staff (Surname, Initial)	Sex M/F	Room/Bed No.	Date of birth DDMMYYYY	Fever	Night Sweats	Chills	Sore throat	Cough	Shortness of Breath	Loss of smell/taste	Diarrhea	Vomiting	Headache	Muscle Aches	Other Symptoms	Symptom Onset DDMM	Initial Swab DDMM	Initial Swab Result	Second Swab DDMM	Second Swab Result	R-Resolved H-Hospitalized D-Death	Date DDMM	
[REDACTED]	F	2308 2313 2315 3140	01/06/1954	8/24							8/24	8/14 One episode, nausea for several days					8/24	08/12 prior to admit	Neg	08/24	Pos	Hosp.	Moved 8/25 to inpatient unit
[REDACTED]	M	2311 2314 3353	12/31/1945					8/27							Dr. 88 called on 8/25. Pl moved to medical floor 8/27. No COVID sympt.		8/16 prior to admit	Neg	8/25	Pos	Death 8/29		
7002877	F	2312 2316 2315	11/18/1950					8/22			8/12 per pt 8/22 stomach ache		8/19 8/23		No symptoms present		8/12 prior to admit	Neg	8/25	Pos	R- Released to Bishopville Manor	Admit 5/13/21 dc 10/21/21	
[REDACTED]	M	2315	7/21/1959													No Symp				8/25	Pos.	Hosp. Onset	

7-1

Name of Patient/Resident/Staff (Surname, Initial)	Sex M/F	Room/Bed No.	Date of birth DD/MM/YYYY	Fever	Night sweats	Chest	Sore throat	Cough	Shortness of Breath	Loss of smell/taste	Diarrhea	Vomiting	Headache	Muscle Aches	Other Symptoms	Symptom Onset DD/MM	Initial Swab Result DD/MM	Second Swab Result DD/MM	Second Swab Result	R-Resolved H-Hospitalized O-Death	Date DD/MM	
██████████ 3304	M	231B 3304 4103 2313	8/19/1961													No Symp			8/25	Pos	Hosp. Onset	Admitted In June
██████████ 159700	M	2311	9/23/1949	8/24												8/25. congestion to admit	8/12	Neg	8/25	Pos	R-resolved	Admitted 8/13
██████████ 703355	M	2313 3349	5/8/1944						8/26									8/25	Pos	H- Hospitalized 8/31 due to hematuria		
██████████ 23861	F	2314 (CDU) 2308	10/7/1984	8/29												8/29/21	Prior to admit Refeat 8/25	Neg	8/29	Pos	H- Hospitalized 8/4 for sepsis secondary to UTI	9/13
██████████ 7006265	F	2307 (CDU) 2316	2/13/1933												No symp		Prior to admit Refe at 8/25	Neg	8/30	Pos	H- Hospitalized 8/7 to inpatient unit	
██████████ 7002561	F	2309	7/20/1958												No Symptoms		Prior to admit Refe at 8/25	Neg	8/29 8/31	Neg		Dec 9/0
██████████ 7002172	M	2312	9/30/1951												No Symp		Prior to admit 8/19	Neg	8/25	Pos	Hospital Onset	Placed 8/25

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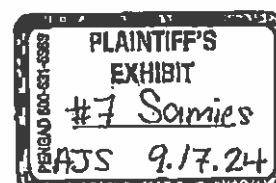
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EXHIBIT

#25a

Last Name	First Name	Department	Date Tested	Results	Location Where Swabbed
Wanjid	Serge	Behavioral Health	8/16/2021	Negative	RMC Employee Health
Rogers	Julia	BHU	8/19/2021	Negative	RMC Employee Health
Rogers	Julia	BHU	8/25/2021	Negative	RMC Employee Health
Vold	John	BHU	8/27/2021		RMC Employee Health
Wandji	Serge	BHU	8/27/2021		RMC Employee Health
Warner	Anna	BHU	8/29/2021	Negative	RMC Employee Health-ED
Smith	Kimberly	BHU	8/30/2021		RMC Employee Health-ED
White Jr.	Rodney	BHU	8/30/2021	Negative	RMC Employee Health
Frazier	Norvia	BHU	8/30/2021	Negative	RMC Employee Health
Ott	John	BHU	8/31/2021	Negative	RMC Employee Health
Warner	Anna	BHU	8/31/2021	Negative	RMC Employee Health
Davis	Meshia	BHU	9/13/2021	Negative	RMC Employee Health
Bell	Artavia	BHU	9/18/2021	Negative	RMC Employee Health
Warner	Anna	BHU	9/23/2021	Negative	RMC Employee Health



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EXHIBIT

26

Carolina Workers' Compensation Commission

3 Marlon Street, Suite 500
P.O. Box 1715
Columbia, South Carolina 29202-1715
(803) 737-5739



PRE-HEARING BRIEF
WCC FILE NO: 2118696

Serge Wandji Claimant's Name			The Regional Medical Center Employer's Name		
P.O. Box 523 Address			3000 St. Matthews Road Address		
Columbia, SC 29115 City State Zip			Orangeburg, SC 29115 City State Zip		
678-612-9649 Home Phone			Palmetto Hospital Trust via Antum Risk Carrier		
Roy A. Howell, III Preparer's Name			(843) 881-4228 Phone #		

A claim for workers' compensation benefits is made based on the following grounds:

☐ Injury ☐ Illness ☐ Repetitive Trauma

1. Compensation Rate: \$903.40 2. AWW: \$1,735.47 Date of Injury: August 27, 2021
3. Type of Injury and body part(s): Claimant is alleging an infection of the whole body. Claim is denied.
4. Facts in controversy: See attachment.
5. Legal Issues involved: See attachment.
6. Unusual aspects: See attachment.
7. Witnesses (designate if expert*): Kelci Caruso, Teresa Noe, Kellie Evan, Wanda Summers, Dr. John Samies, and Jonathan Vallentine
8. Exhibits: See attached Notice of Submissions
9. Medical evidence: (Indicate report pursuant to R.67-612; deposition or appearance) See attached Notice of Submissions
10. Name, address, and specialty, if any, of the treating physician: Roper St. Francis Primary Care, 615 Wesley Drive, Suite 200, Charleston, SC 29407; Roots Psychological Associates, 1531 Laurel Street, Columbia, SC 29201; Orangeburg County EMS; Regional Medical Center, 3000 St. Matthews Road, Orangeburg, SC 29118
11. Impairment rating(s); body part(s); physician and date of opinion:
12. I am amending my Form 50/S1 in the following manner:

☐ Mediation

- ☐ a. Mediation is requested to be ordered pursuant to Reg. 67-1801 B
- ☐ b. Mediation is required pursuant to Reg. 67-1802
- ☐ c. Mediation is requested by consent of the Parties pursuant to Reg. 67-1803
- ☐ d. Mediation has been conducted by a duly qualified mediator and resulted in an impasse

Questions regarding mediation may be submitted to mediation@wcc.sc.gov.

I verify the contents of this form are accurate and true to the best of my knowledge.

I certify I have served this document pursuant to Reg. 67-211 by delivering a copy to: Serge Wandji, P.O. Box 523, Columbia, SC 29115; sergewandji@gmail.com

on the 12th day of January 2023

by ☒ first class postage ☒ certified mail ☐ personal service ☒ OneDrive.

Signature:

Email: rhowell@trask-howell.com

Date of hearing: 1/25/2023

Time needed for hearing: 1 hour

File this form and proof of service on the opposing party according to R.67-611 and R.67-212. Do not send medical reports.
* Commissioners reserve the right to admit expert witnesses at hearings.

(4) Facts in Controversy:

The Claimant worked in the Behavioral Health Unit (BHU) at the Regional Medical Center (RMC). The records reflect that every patient in BHU tested negative for Covid-19 prior to being allowed admission into the unit. In addition, all staff were required to wear N-95 masks when interacting with patients in BHU. It is reasonable to believe that someone other than a patient brought the virus into the unit, given the testing protocols. The Defendants believe that the Claimant was likely the individual who exposed others in BHU considering the timing of events.

On August 16, 2022, the Claimant presented to Employee Health Services and demanded to be tested for Covid-19. Witnesses will testify that he reported a possible Covid-19 exposure outside the hospital. While the Claimant tested negative at the time, he was still presumably in the window of time in which it was too early to test positive.

The Claimant worked in BHU on August 22, 2022. The first report of Covid-19 symptoms by a patient in BHU was on August 24, 2022. The first positive test was also on August 24, 2022. When the Claimant first reported his symptoms to RMC, he said his symptoms began on August 23, 2022, which is just 7 days after he first requested a Covid test. The Claimant tested positive for Covid-19 on August 27, 2022.

The Claimant filed a Form 50 alleging an “injury” or “illness” under the Workers’ Compensation Act because he tested positive for Covid-19. Covid-19, like any other Coronavirus disease (e.g., swine flu), is unfortunately one of the ordinary diseases of life for which more than 1.74 million South Carolinians (more than 32% of the population) have tested positive. However, to be entitled to benefits under the Act, the Claimant must not only prove that his work in the BHU, with its stringent testing protocols, placed him at an increased risk of exposure to Covid-19, but also that he sustained a compensable “injury by accident arising out of and in the course of his employment.” When that alleged injury is “a disease in any form,” the Claimant has a heightened burden of proving that the disease either “results naturally and unavoidably from the accident” under S.C. Code Ann. § 42-1-160(A), or that it otherwise meets the requirements of S.C. Code Ann. § 42-11-10. The Claimant has not alleged that he suffered an occupational disease under §42-11-10.

Regardless, the Claimant must prove to a reasonable degree of medical certainty that his exposure to Covid-19 actually occurred “naturally and unavoidably from [an] accident at work.” Only by resorting to pure, impermissible, speculation could the Commission make such an affirmative finding. Based upon all the above, the Defendants deny that the Claimant is entitled to any benefits under the Act.

(5) Legal Issues Involved:

The Defendants deny the Claimant’s Covid-19 disease resulted naturally and unavoidably from an accident arising out of or in the course of his employment and therefore, deny he is entitled to workers’ compensation benefits pursuant to S.C. Code Ann. § 42-1-160(A).

The Defendants deny the Claimant's Covid-19 disease qualifies as an "occupational disease" under S.C. Code Ann. §42-11-10 because it did "not result directly and naturally from exposure ... to hazards peculiar to" his employment in the BHU and because Covid-19 "is a contagious disease," which even if it resulted "from exposure to fellow employees," it was "a hazard to which [the Claimant] would have been equally exposed outside of his employment." In addition, Covid-19 is plainly "is one of the ordinary diseases of life to which the general public is equally exposed." The Commission should take judicial notice of the fact that more than 1.74 million South Carolinians (32+% of the population) have tested positive for Covid-19 since January 2020.

Pursuant to S.C. Code Ann. § 42-9-10, § 42-9-20, § 42-9-30, and § 42-9-260, the Defendants deny the Claimant has (or ever had) any loss of wage earning capacity as a result of any alleged accident or injury or illness arising out of or in the course of his employment.

Pursuant to S.C. Code Ann. § 42-15-60, the Defendants deny the Claimant is entitled to any unauthorized medical treatment and deny that the Claimant has met his burden of proving that he currently requires any additional medical care or treatment to lessen any alleged period of disability causally related to any alleged accident, injury, or illness arising out of or in the course of his employment.

The Defendants deny the Claimant has any permanent loss of use of any scheduled body member under S.C. Code Ann. § 42-9-30 and the Defendants further deny that the Claimant's current condition is even causally related to his prior Covid-19 diagnosis.

(6) Unusual Aspects:

- (a) The Defendants have scheduled two independent medical evaluations for the Claimant to evaluate his alleged ongoing symptoms due to Covid-19. The Claimant recently advised that he was unable to travel to the Charleston area for these evaluations. The Claimant is scheduled to see Dr. Lind at Post Trauma Resources on January 12, 2023, and Defendants request that the record be left open for his report.

The Defendants have been unable to locate a suitable physician in Columbia to evaluate the Claimant for his other alleged Long Covid symptoms. The Defendants request that the Commission order an evaluation with Dr. Barry Weissglass in North Charleston, SC.

- (b) Defendants have received the Claimant's updated Prehearing Brief and Supplemental APA submissions and reserve the right to depose Dr. James Fayssoux specifically regarding his January 5, 2023 office note which Defendant's did not receive until January 12, 2023.
- (c) Defendants also request the record to be left open for personnel and payroll records from Tricounty Commission of Alcohol and Drug Abuse which is referenced by the Claimant's supplemental APAs.
- (d) The Claimant's updated Prehearing Brief asserts certain facts that are not in evidence and should be disregarded. Regardless, there is no competent evidence that the Claimant's

Covid-19, an ordinary disease of life, resulted naturally and unavoidably from an “accident” arising out of and in the course and scope of employment.

SUPPLEMENTAL APA # DESCRIPTION DATES PAGE

5.	Serge Wandji's Regional Medical Center - Application Form	2/8/2021	31 - 37
6.	The Regional Medical Center, Covid & Other Updates at RMC, Letter	8/6/21	38 - 40
7.	The Regional Medical Center - Leave of Absence Letter	9/24/21	41
8.	U.S. Department of Labor Wage and Hour Division	9/24/21	42 - 49
9.	The Regional Medical Center, Letter	3/15/22	50
10.	Dr. James E. Fayssoux Report	11/18/22	51 - 56
11.	Dr. John H. Samies Letter	12/5/2022	57
12.	Dr. John H. Samies - Resume	Undated	58 - 60

YOU ARE FURTHER HEREBY NOTIFIED that you have the right to cross-examination; should you desire to exercise said right, you are to forthwith schedule the depositions of any of physicians whose reports are submitted, for the purpose of cross-examination.

YOU ARE FURTHER NOTIFIED that the following witnesses may be called on behalf of Defendant:

Kelci Caruso
Teresa Noe
Kellie Evan
Wanda Summers
Dr. John Samies
Jonathan Vallentine



Roy A. Howell, III
Attorney for the Defendant

Date: January 12, 2023

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ORANGEBURG, SC

EXHIBIT

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BEFORE THE SOUTH CAROLINA
WORKERS' COMPENSATION COMMISSION

SERGE WANDJI,
Plaintiff,
vs.
THE REGIONAL MEDICAL
CENTER OF ORANGEBURG,
Employer,
and
PALMETTO HOSPITAL
TRUST,
Carrier,
Defendants.)

CASE NO.: 2118696

 COPY

H E A R I N G

DATE: Thursday, February 16, 2023
TIME: 2:51 p.m.
LOCATION: SC Workers' Compensation Commission
1333 Main Street, Suite 500
Columbia, South Carolina
BEFORE: Commissioner T. Scott Beck
REPORTED BY: Megan R. Brown
South Carolina Court Reporter

ABC REPORTING SERVICE
257 Summerland Avenue
Batesburg, South Carolina 29006
1-803-532-5255
1-803-730-3015 (cell)

ABC REPORTING SERVICE (803) 730-3015

WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 APPEARANCES:

2

3 ATTORNEY FOR THE DEFENDANTS

4 THE REGIONAL MEDICAL CENTER OF ORANGEBURG
AND PALMETTO HOSPITAL TRUST:

5 TRASK & HOWELL, LLC

6 BY: ROY A. HOWELL, III, ESQUIRE

7 763 Johnnie Dodds Boulevard

8 Post Office Box 2167

9 Mount Pleasant, South Carolina 29464

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25 (INDEX AT REAR OF TRANSCRIPT)

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 A. -- on the CDC website.

2 Q. You don't have it with you?

3 A. No, sir.

4 Q. Oh, so how are we going to -- how are you
5 going to convince the Commissioner that that's what the
6 CDC says? You just out of your head like how do we
7 know? What is the CDC guideline?

8 A. I mean, the CDC guidelines were published on
9 several websites, news sources, social media sources,
10 but that is what we use to determine onset of symptoms.

11 Q. Where is it? I mean, your lawyer sent all
12 kinds of documentation. He didn't --

13 A. Yes, sir. I understand. I do not have it
14 with me. No, sir.

15 Q. You -- are you a nurse, you said?

16 A. Yes, sir.

17 Q. And when all that happened, you had like, as
18 I said, degree nurse. Is that right?

19 A. I'm sorry? Yes. Yes.

20 Q. And that's a nursing degree nurse?

21 A. Yes, sir. Uh-huh.

22 Q. So now you decide when I was infected like
23 you know exactly when somebody is infected, when they
24 get symptoms with a nursing degree in nursing? What
25 is --

ABC REPORTING SERVICE (803) 730-3015

WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

- 1 A. No, sir. That's what the CDC says.
- 2 Q. Again, where is that CDC note, madam?
- 3 A. Again, I do not have the -- I do not have the
- 4 CDC. I have answered that question.
- 5 Q. You don't have it?
- 6 A. No, sir.
- 7 Q. So you are just making that up, because we
- 8 have no evidence?
- 9 A. No, sir.
- 10 Q. Okay. So under -- on August the 16 --
- 11 A. Uh-huh.
- 12 Q. -- when I came to get a test --
- 13 A. Uh-huh.
- 14 Q. -- for my school, did you ask me when I was
- 15 exposed?
- 16 A. No, sir, we did not ask when you were --
- 17 Q. Okay.
- 18 A. -- exposed.
- 19 Q. You did not ask me when I was exposed. Why
- 20 not?
- 21 A. We -- we didn't need to know specifically
- 22 when you were exposed. You indicated that you were
- 23 exposed, and that's why you needed a test when we asked
- 24 what you needed a test for.
- 25 Q. Did I tell you where I was exposed?

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 A. No, sir.

2 Q. Okay. I didn't tell you where I was exposed;
3 is that correct?

4 A. I don't recall you telling me where you were
5 exposed.

6 Q. Oh, okay. You are the head of the Employee
7 Health, right?

8 A. Yes, sir.

9 Q. On that day, 16th, we already had a lot of
10 Covid-positive employee at the hospital; is that
11 correct?

12 A. We had several. Yes, sir.

13 Q. We already had patients with Covid positive
14 in the hospital; is that correct?

15 A. Correct.

16 Q. It's amazing. During your testimony here
17 exchanged with your lawyer, you said, Oh, if somebody
18 has their personal protective gears, he cannot get
19 Covid. Where did you --

20 A. I did not --

21 Q. -- get that?

22 A. I did not say he could not get Covid.

23 Q. Oh, what did you say?

24 A. I said that the risk was low if you wore the
25 proper protective equipment.

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~~WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023~~

1 Q. So with that, you can still get Covid; is
2 that correct?

3 A. If you wear the proper corrected -- proper
4 PPE, your risk for Covid is low.

5 Q. But you can still get it; is that correct?

6 A. There is a possibility.

7 Q. Thank you.

8 THE COURT: Anything else?

9 MR. WANDJI: Huh?

10 THE COURT: Anything else?

11 MR. WANDJI: Yes, sir. Yes, sir. I'm not
12 finished.

13 THE COURT: All right.

14 MR. WANDJI: Thank you. This is on my
15 exhibit 47. That will be page 84.

16 THE COURT: Hang on. Hang on. Before you
17 approach the witness, what page are you on?

18 MR. WANDJI: I am on page 84.

19 BY MR. WANDJI:

20 Q. Did you post this? Did you put this list
21 together?

22 A. Yes, sir.

23 Q. You put that?

24 A. Yes, sir.

25 Q. Where did you get those names and your test

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 and everything? How did you get that?

2 A. It is from the employees that we tested or
3 the employees that reported to us that they were
4 positive.

5 Q. Is that the same list that you send to the
6 CDC for employees work who tested positive?

7 A. That was not my responsibility.

8 Q. Whose responsibility is it?

9 A. I'm not sure. I believe it was the lab at
10 the hospital. It was their responsibility to send that
11 information to DHEC once you're tested.

12 Q. Okay. So you are the one who put this
13 together?

14 A. Yes. That was our list that we kept up with
15 on who was out with Covid at the time.

16 Q. And this is the list of all those who tested
17 positive at the hospital in the month of August 2021?

18 A. I believe so, yes.

19 Q. Okay.

20 A. All that were reported to us or that we
21 tested.

22 MR. WANDJI: I have no other question for
23 her, your Honor.

24 THE COURT: Thank you, sir.

25 Mr. Howell, any on --

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 MR. WANDJI: Thank you --

2 THE COURT: -- redirect?

3 MR. WANDJI: -- madam.

4 REDIRECT EXAMINATION

5 BY MR. HOWELL:

6 Q. Any employee that -- that reported a positive
7 test -- well, number one, that list only lists
8 employees who reported a positive test or tested
9 positive. It doesn't indicate where the exposure came
10 from, correct?

11 A. That list does not, no, sir.

12 Q. Okay. Number -- number two, any employee
13 that did have a positive test was quarantined, correct?

14 A. Correct.

15 Q. All right. Until they were safe to come back
16 to work, correct?

17 A. Correct.

18 MR. HOWELL: All right. Thanks. That's all
19 I have.

20 THE COURT: Anything further?

21 MR. WANDJI: No. I am done with her. Thank
22 you, madam.

23 THE COURT: You may step down. Thank you.

24 THE WITNESS: Thank you.

25 THE COURT: Mr. Howell?

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 MR. HOWELL: Kellie Evans.

2 THE COURT: Your name, ma'am?

3 MS. EVANS: Kellie Evans.

4 THE COURT: K-E-L-L-?

5 MS. EVANS: -I-E.

6 THE COURT: Glad I asked. E-V-A-N-S?

7 MS. EVANS: Yes, sir.

8 THE COURT: I got that right. Would you

9 raise your right hand, please?

10 KELLIE EVANS, being duly sworn and cautioned
11 to speak the truth, the whole truth and nothing but the
12 truth, testified as follows:

13 THE COURT: Again, please state your name for
14 the record.

15 THE WITNESS: Kellie Evans.

16 THE COURT: Okay. Ms. Evans, you may be
17 seated.

18 Mr. Howell?

19 DIRECT EXAMINATION

20 BY MR. HOWELL:

21 Q. By whom are you employed, Ms. Evans?

22 A. The Regional Medical Center of Orangeburg.

23 Q. And what is your job?

24 A. I am the administrative assistant in the
25 Employee Health services office.

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 Q. Was that your job in August of 2021?

2 A. Yes, sir.

3 Q. Were you in the office on August 16, 2021?

4 A. Yes, sir.

5 Q. And describe what happened.

6 A. Mr. Wandji came in the office stating that he
7 needed to be tested for Covid. Kelci had just come
8 inside from testing several other employees at 11:00,
9 so she came in shortly after. I asked Kelci if she
10 could get him tested.

11 She -- once she processed her lab specimens
12 and took them over, she went out and tested Mr. Wandji.
13 While he was in our office, he did sit in one of our
14 chairs, stated he would wait there until we could get
15 him tested after we asked him to go to same-day.

16 Q. Did Mr. Wandji indicate that he had been
17 exposed outside of the hospital?

18 A. Yes, sir.

19 Q. Did Mr. -- on that day, did Mr. Wandji ever
20 tell you or Kelci that he needed to test for school?

21 A. No, sir.

22 Q. Were you in the office on August 27, 2021?

23 A. Yes, sir.

24 Q. And do you recall when Mr. Wandji called
25 or --

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 A. Yes, sir. He came -- or he called, and I got
2 some information from him to get him registered. We
3 got him registered. He came in for a test. Once we
4 got the results -- it takes about an hour-and-a-half,
5 two hours. We got results. We called Mr. Wandji with
6 results and started to go through that questionnaire.

7 Q. And what was the date that he gave you for
8 symptom onset?

9 A. On the first original date was August 23rd of
10 '21.

11 Q. And did he give any other dates of a later
12 time?

13 A. Yes, sir. As Ms. Caruso stated, he did call
14 back a little later. He gave us a date of August the
15 25th, and then in an email that he sent me on September
16 the 9th, I believe, he -- he stated that he started
17 feeling bad on August 26th.

18 Q. Okay. So he's given three different dates
19 for date of onset; is that correct?

20 A. Yes, sir.

21 MR. HOWELL: That's all I have. Thank you.

22 THE COURT: Mr. Wandji, any questions of this
23 witness, sir?

24 CROSS-EXAMINATION

25 BY MR. WANDJI:

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 Q. Excuse me, madam. What's your name again?

2 A. Kellie Evans.

3 Q. Ms. Evans, you just said that I told you that
4 was -- I was exposed to Covid-19 outside of the
5 hospital. Did I tell you that?

6 A. I stated that you said you were exposed. I
7 did not say that you stated you were exposed outside of
8 the hospital.

9 Q. Oh, maybe I didn't hear very well. I -- I
10 hope it is on the transcript. My bad, because what I
11 heard is you said that I told you that I was exposed
12 out of the hospital, so I didn't tell you that, did I?

13 A. You said you were exposed.

14 Q. Okay. And that was on August the 16th?

15 A. Yes, sir.

16 Q. And you work at Employee Health?

17 A. Yes, sir.

18 Q. And you know we have patients with Covid in
19 the hospital like I --

20 THE COURT: All right. Let -- let me stop.
21 right now, because I want to get a clarification.

22 Ms. Evans, my notes indicated that you testified that
23 he said he had been exposed outside of the hospital on
24 your direct examination. I just need clarity on what
25 he actually said to you.

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 THE WITNESS: Okay. All it states is that he
2 was exposed but was not having symptoms.

3 THE COURT: All right. Thank you.

4 THE WITNESS: Yes, sir.

5 MR. WANDJI: Thank you, Commissioner, because
6 that's exactly what I heard. I just thought maybe,
7 because I have Long Covid, I -- I was -- my memory --

8 THE COURT: All right. Let's proceed.

9 BY MR. WANDJI:

10 Q. So -- so -- so the testimony you gave him is
11 wrong. I did not tell you that I was exposed out of
12 the hospital.

13 THE COURT: We -- we've already made that --

14 Q. Is that correct?

15 THE COURT: Mr. Wandji, we've already made
16 the point clear. Let's move on.

17 MR. WANDJI: Okay. Good.

18 BY MR. WANDJI:

19 Q. Who is your supervisor?

20 A. At the time, Kelci was my direct supervisor,
21 and over Kelci was Tina Norris.

22 Q. Was who?

23 A. Tina Norris.

24 Q. Oh, okay. My exhibit, sir, is exhibit -- APA
25 number 60, page number 148.

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WANDJI SERGE V. REGIONAL MEDICAL CENTER 2/16/2023

1 THE COURT: 148?

2 MR. WANDJI: Yes, sir.

3 THE COURT: All right.

4 BY MR. WANDJI: ,

5 Q. I got this from your lawyer, Mr. Howell. It

6 says it's the final report on all my Covid testing,

7 whatever. Did you put this together or is it

8 something -- did you put that together?

9 A. Ms. Caruso actually put that part together --

10 Q. Oh.

11 A. -- because she was still employed with us at

12 that time.

13 Q. Who's Ms. Caruso?

14 A. Kelci.

15 Q. Oh, okay. She's not an employee at The

16 Medical Center no more?

17 A. Not right now.

18 Q. Okay. On this report, APA 60, this is like

19 a -- it's not like a report that somebody wrote. It's

20 like a cut and paste of different email; is that

21 correct?

22 A. Correct, and I do have the emails that were

23 sent.

24 Q. Why didn't you submit the original email?

25 Why did you have to --

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2024 NOV 21 P 5:00

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ORANGEBURG, SC

EXHIBIT

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APA # 60

Follow Up:	Last Fever? _____
	Fever free for 3 days? _____
	Improvement in Respiratory Symptoms? _____
	Any new symptoms? _____

8/27/21-Sent the following email to my supervisor and Serge's supervisor regarding his positive covid test and follow up

"Just wanted to ensure I put this to you in an email. Serge tested positive for COVID-19. I called him to go over the quarantine period and additional questions we ask all employees, we received push back from him. He has been sick since Monday, there for he has possibly been contagious since Saturday. He worked Sunday and Tuesday where he could have potentially exposed others. When asked who he could have potentially exposed, he states all of the BHU staff and Patients. When asked if he could provide a list of those individuals that he was around for greater than 15 minutes at less than 6 feet, he states he cannot think right now and I will have to get that information from Teresa. Also, Serge was tested last week in the Employee Health office, on 8/16/21, he came into the office and states he was exposed but was not having any symptoms, he came in around 11:10am, I was just coming in from testing at 11am so I told him we could test him at 2pm. He stated he could not leave his patients because he was getting admission on that day and would wait in the office until we could test him, we finally agreed to test him at that time, but told him it would be a few minutes before we could do it because of other obligations. He would not leave the office until we tested him, we asked him to wait outside of same day surgery for us to come test him and he stated "No, I'll wait here". So, when I called him today, I stated, you have been exposed outside of work and at work correct?", he stated "No, I was only exposed at work" and went on to state all the Patients had tested positive on BHU. I questioned him about getting tested last week for an "exposure" and he stated he was only tested because he needed to be tested for school. We do not test for school, trips, "just because" reasons, therefore he was not telling us the truth last week, or today. This is a concern, considering we now have a unit full of positive BHU patients and no way to determine if he potentially exposed them, or if he was truly exposed to them. I did not push the issue, but simply stated I would send him a eSREO link for him to complete if he felt he was exposed at work, we no longer submit eSREO's on behalf of the Employee when it is COVID related. I have sent him a link to complete the eSREO. Lastly, I asked if he was vaccinated, he stated "that is a personal issue", I did try to explain to him that it is important for us to know that information so we know if it is a breakthrough case, and in certain situations we have to send those swabs to DHEC and report to DHEC if they are vaccinated, so I asked him once again if he was vaccinated, he again stated "It's a personal issue". He then stated he was going to pull over to talk to me, then hung up the phone. I have spoken with Teresa, at this time, due to the date of his symptom onset and possible contagious period, I do not feel the need to send out an additional email since we just sent one to all BHU staff on yesterday regarding the exposure, the dates for this exposure align with the dates for the exposure to the BHU patients. He just called back again, although he told me originally that his symptoms started 4-5 days ago, he has now changed his story and states they started on Wednesday. Kellie was in here and can confirm that he originally states 4-5 days ago and is now stating Wednesday for symptom onset."

8/29/21-Spoke with Employee. He is not feeling any better, suggested OTC medications that he would normally take, suggested follow up with PCP, he inquired about monoclonal antibody treatment, suggested he follow up with his PCP again.

~Kew

8/31/21 I sent the following Email to my supervisor regarding this Employee and the interaction on Sunday and today.

"Just an FYI, I am not comfortable talking with this Employee. I called him on Sunday to check in on him, he was very rude and stated he was not getting any better. Each time I made a suggestion for him, medication, follow up with PCP, etc. he would just not respond to me. He asked me to send him his COVID results, when I let him know I would not be able to do it until Monday, he just did not respond. Today he called and stated we did not send him his COVID+ results as he requested on Sunday, Kellie sent them to the same email she sent his last COVID+ results on yesterday. He then provided

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another email for us to send it to, Kellie resent them today. We also sent him a link to complete the eSREO as he is cert he contracted COVID from RMC on yesterday. He stated that there were technical issues and could not complete it, I asked him to complete it again today and ensure he filled out each highlighted area. Again, he did not respond. I resent him the link again. I try to always have another person in the office with me when I call him since we have had issues with him for 2 weeks now."

7

8/31/21-Serge emailed Kellie back stating he cannot complete the eSERO tool, he states he has tried to submit it x5 and keeps getting an error. Kellie responded as follows:

"Good morning,

I am so sorry for the innocence.

Please send us a detailed email about the potential exposure to COVID. Please try to include all information that is asked on the ESREO, and we will attempt to submit it.

Thank you so much."

He has not completed the eSERO as of today.

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2024 NOV 21 P 5:00

CLERK OF COURT
ORANGEBURG, SC

EXHIBIT

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51 APA + 51

STATE OF SOUTH CAROLINA
BEFORE THE
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION
WCC No. 2118696

Serge Wandji,

Claimant,

v.

The Regional Medical Center,

Employer,

and

Self-Insured,

Carrier/Defendants.

DEPOSITION OF
DAVID SUTHERLAND

Monday, January 9, 2023
10:07 a.m. - 10:53 a.m.

The deposition of DAVID SUTHERLAND, taken on behalf of the Claimant at the Orangeburg Administrative Building, 3000 St. Matthews Road, Orangeburg, South Carolina, on the 9th day of January, 2023 before Travis McLeod, Certified Court Reporter and Notary Public in and for the State of South Carolina, pursuant to Notice of Deposition.



CREEL COURT REPORTING, INC.
1230 Richland Street / Columbia, SC 29201
(803) 252-3445 / contact@creelreporting.com

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APPEARANCES

Serge Wandji, Pro Se

Roy A. Howell, III, Esquire
Trask & Howell, LLC
763 Johnnie Dodds Boulevard #2
Mt. Pleasant, South Carolina 29464
Attorney for the Defendant

Also Present: Jonathan Vallentine

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STIPULATIONS

It is stipulated and agreed that this deposition is being taken pursuant to the Administrative Procedures Act and the South Carolina Rules of Civil Procedure.

It is stipulated by and between counsel and the witness that the reading and signing of the following deposition be, and the same are, hereby waived.



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1 DAVID SUTHERLAND, having been duly sworn, deposes and
2 testifies as follows:

3 MR. SUTHERLAND - EXAMINATION BY MR. WANDJI:

4 Q: All right, good morning, sir.

5 A: Good morning.

6 Q: Can you please state your name for the record,
7 name and title?

8 A: My name's David Sutherland.

9 Q: And what's your position at this hospital, sir?

10 A: I'm the President and CEO of the hospital.

11 Q: Mr. Sutherland, you are under oath and I'm
12 going to ask you some questions and I'm
13 expecting an answer to each question. Your
14 lawyer, Mr. Howell, cannot help you answer the
15 question and he cannot answer for you either.
16 If you don't understand any of my questions
17 just say so and then I'm gonna repeat it. Do
18 you have any questions?

19 A: No.

20 Q: Okay. Can you identify who is in your
21 deposition room? Who is that man? (Indicating)

22 A: Who is this person right here? (Indicating)

23 Q: Yeah.

24 A: His name is Jonathan Vallentine. He's the
25 Director of our Human Resources Department.



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- 1 Q: So why is he here?
- 2 A: I don't know.
- 3 MR. SUTHERLAND: Why are you here, Jonathan?
- 4 MR. VALLENTINE: I'm here because I'm the keeper of
- 5 the record.
- 6 A: Okay.
- 7 Q: Does Mr. Jonathan understand that you are the
- 8 one being deposed and he cannot say a word
- 9 until I say so, until I give him the
- 10 authorization? Does he understand that?
- 11 A: Yeah.
- 12 MR. SUTHERLAND: You don't need to be saying
- 13 anything.
- 14 MR. HOWELL: He understands that he's just here to
- 15 observe.
- 16 Q: To observe. When did you become the CEO of
- 17 this hospital, sir?
- 18 A: I'm gonna take my mask off. I started my job
- 19 in May of 2021.
- 20 Q: Where were you before?
- 21 A: I was the Chief Operating Officer for three
- 22 hospitals in California with the Providence St.
- 23 Joseph Health System.
- 24 Q: What kind of education prepared you for this
- 25 job?



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- 1 A: I received a masters degree in healthcare
2 administration in 1988 from Trinity University
3 in San Antonio, Texas.
- 4 Q: Any certifications?
- 5 A: I'm sorry, I didn't ---
- 6 Q: Do you have any certifications?
- 7 A: I am certified as a -- with the American
8 College of Healthcare Executives as a fellow.
- 9 Q: Have you ever been fired at any leadership
10 role?
- 11 A: Have I ever been fired?
- 12 Q: Yes.
- 13 A: No, sir.
- 14 Q: In your different leadership roles, have you
15 ever been involved in any discrimination
16 complaints?
- 17 A: No.
- 18 Q: Since you took over this hospital, has any
19 employee filed any discrimination complaint?
- 20 MR. HOWELL: Objection, relevance. Don't answer.
- 21 Q: I'm still expecting a question -- an answer.
- 22 MR. HOWELL: Again, you said you were submitting
23 this into evidence at the hearing. So I'm
24 putting all my objections on the record. This
25 is a workers' compensation claim. It's not an



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1 employment or discrimination claim. I'm
2 telling him not to answer.
3 Q: I mean you can object. I'm still expecting an
4 answer. It's gonna be on the record.
5 A: Upon the advice of my attorney, I'm not going
6 to answer the question.
7 Q: There you go. That's an answer. Thank you.
8 Mr. Sutherland, do you care about your -- do
9 you personally care about your nurses in this
10 hospital?
11 A: Would you repeat the question?
12 Q: Do you care about them? Do you care about your
13 nurses?
14 A: I want to make sure I und- -- I'm gonna repeat
15 the question. Do I care about the nurses here
16 at this hospital?
17 Q: Yes.
18 A: Yes, I do care.
19 Q: How many staff member at this hospital has
20 filed for Covid related worker compensation
21 since the Covid?
22 A: I don't understand your question.
23 Q: How many staff members at this hospital have
24 filed for a worker compensation claim, Covid-19
25 related?



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- 1 A: I don't know the answer to that.
- 2 Q: Who knows in this hospital?
- 3 A: Well I'd have to check with my Human Resources
4 Department. But I'm not sure that -- I'm not
5 sure what the number is. I don't know how many
6 have or have not.
- 7 Q: Besides me, has anyone else filed any worker
8 compensation claim ---.
- 9 A: I don't ---
- 10 Q: --- Covid related?
- 11 A: I don't know the answer to that.
- 12 Q: I have Exhibit 1 here. That's an email I sent
13 you, Mr. Sutherland, pleading for help. Why
14 did you ignore that email?
- 15 MR. HOWELL: Hold on. Let him mark it. He needs to
16 mark it as an exhibit first.
- 17 (Claimant's Exhibit Number 1 was marked for
18 identification purposes.)
- 19 A: So what was your question?
- 20 Q: My question was why did you ignore me?
- 21 A: I don't specifically remember reading it. But
22 if I did see it I referred it to our HR
23 Director and asked her to respond.
- 24 Q: I didn't receive any response from anybody from
25 this email. Why do you think that happened?



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- 1 A: I can't answer that question.
- 2 Q: Are you familiar, sir, with the Corona Virus
- 3 Aid Relief and Economic Security Care Act?
- 4 A: Sorry, repeat the question.
- 5 Q: Are you familiar with the Care Act, that's the
- 6 Corona Virus Aid Relief and Economic Security?
- 7 A: Yes, I'm aware that there's an act, yes. I
- 8 don't -- yes, I'm aware. Uh-huh.
- 9 Q: Did this hospital receive any special Covid-19
- 10 pandemic federal funding?
- 11 MR. HOWELL: Can you repeat the question?
- 12 Q: Did the hospital receive any funding from the
- 13 federal government for the Covid-19 pandemic?
- 14 MR. HOWELL: Objection, relevance, but you can
- 15 answer.
- 16 A: Yeah, I don't know exactly the total dollar
- 17 amount. They received funding prior to my
- 18 arrival. Prior to -- before I started they'd
- 19 received some funding.
- 20 Q: Okay. Did you receive any funding in 2021 from
- 21 the federal government connected to Covid-19?
- 22 MR. HOWELL: Objection, same objection, relevance.
- 23 A: We received, like I said before, funding from
- 24 the federal government. We received some
- 25 additional grant money from various agencies



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1 periodically. I don't recall the specific
2 amount. But over the past -- you know, I've
3 been here about 18 months, a little bit here
4 and there.

5 Q: As a recipient of the federal funding,
6 according to the Care Act, this hospital is
7 required to keep and submit periodic Covid-19
8 related reports and records at the federal
9 level. Is that correct?

10 A: I would have to review the requirements of the
11 Act. I don't know right off the top of my head
12 if that's accurate or not.

13 Q: Did this hospital comply with the federal
14 requirement?

15 MR. HOWELL: Objection, relevance.

16 Q: And state requirement of Covid-19 related
17 reporting?

18 MR. HOWELL: Objection, relevance.

19 A: You know, like I said before, I'm sure there
20 are reporting requirements. I'm not aware if
21 those have been completed or not. I have used
22 my Chief Financial Officer and her financial
23 accounting office to do all the appropriate
24 reporting, whether it's to the federal
25 government or to the state of South Carolina or



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1 to the county government.

2 Q: So let me get this right. You don't know
3 whether this hospital has been compliant with
4 the federal requirement of reporting Covid-19
5 reports?

6 MR. HOWELL: Objection, relevance.

7 A: I don't know the specific answer to that right
8 at this moment, that's correct.

9 Q: Which department then, at this hospital, would
10 be responsible for admitting that federal
11 requirement of reporting Covid data to the
12 federal government and the state government?
13 Which department in this hospital is
14 responsible for that?

15 MR. HOWELL: Objection, relevance.

16 A: It's my understanding most likely it would be
17 our Financial Department if it's related to
18 financial matters. If it's related to other
19 matters it would be another department.

20 Q: And how often you have to report that to the
21 federal government?

22 A: I don't know, I don't know.

23 Q: What's the name of the Financial Department
24 head at this hospital? Who would be the head
25 of that Department responsible to file that



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1 requirement from the federal government, Covid
2 related data?

3 MR. HOWELL: Objection, relevance.

4 MR. SUTHERLAND: You want me to answer that?

5 MR. HOWELL: You can answer it.

6 A: Since I have been here since May of 2021 we've
7 had several different Chief Financial Officers.
8 The current Chief Financial Officer, his name
9 is Dennis Pettigrew.

10 Q: Okay. Exhibit Number 2. This is the list I
11 received from you, from your attorney.

12 MR. HOWELL: Let him mark it.

13 (Claimant's Exhibit Number 2 was marked for
14 identification purposes.)

15 Q: He claims those are the staff members at this
16 hospital who were infected by Covid-19 in the
17 month of August of 2021. Exhibit 2.

18 A: So I'm not sure -- what is this? What is this?

19 Q: I received that from you, the Regional Medical
20 Center, through your lawyer. And it says in
21 the letterhead that that's the list of all
22 employees at the Regional Medical Center who
23 were infected and tested positive for Covid-19

24 ---

25 A: Okay.



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- 1 Q: --- in the month of August.
- 2 A: What this letter says is a list of all
3 employees at the Regional Medical Center
4 testing positive for Covid-19 during the month
5 of August. Just says they were tested
6 positive.
- 7 Q: It doesn't say -- what did you say? I didn't
8 hear you.
- 9 A: I'm just reading back the letter. It says the
10 enclosed please find a list of all employees at
11 the Regional Medical Center testing positive
12 for Covid-19 during the month of August 2021.
- 13 Q: Okay. That's what I received from you through
14 your lawyer. Is that correct?
- 15 A: I don't know. I don't know where you got this
16 from.
- 17 Q: The person who signed this ---
- 18 MR. HOWELL: We'll stipulate that we submitted that
19 to you in response to your subpoena, and we
20 received that document from the Regional
21 Medical Center. We'll stipulate to that.
- 22 MR. WANDJI: With all due respect, sir, you are not
23 the one being deposed. He's the one being
24 deposed. You can object. You cannot answer
25 any of my question. Do you understand.



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1 Q: This is my question again, sir. I received
2 that letter from the Regional Medical Center
3 through your lawyer in this case. My question
4 to you, sir, is is that the list, do you
5 confirm that's the list of all the employees at
6 the Regional Medical Center who tested positive
7 for Covid-19 in the month of August, the year
8 of 2021? That's the question.

9 A: If this came from our Employee Health
10 Department or from our HR Department it most
11 likely is accurate. But I personally have not
12 seen this. I personally did not send it to
13 you. I personally did not send this to our
14 attorney to forward to you.

15 Q: So you don't know who put that list together?

16 A: No, I do not.

17 Q: You don't. You cannot confirm that it came
18 from Employee Health?

19 A: I cannot confirm it -- I cannot confirm where
20 it came from.

21 Q: Do you know who put that list together?

22 A: No, I do not.

23 Q: Okay. Will you confirm that that list is
24 identical to the list that this hospital is
25 required to submit to the CDC every month in



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1 terms of the list of the staff members who
2 tested positive for Covid-19? Can you confirm
3 that this list is identical to the CDC list
4 that you submitted?

5 MR. HOWELL: Objection, relevance.

6 A: I cannot confirm that.

7 Q: Thank you. And you don't know who put that
8 list together?

9 A: No.

10 Q: Okay. This is Exhibit Number 3, Mr.
11 Sutherland. This is -- that's just some of the
12 bills that I received from the Regional Medical
13 Center. I was an employee here with the health
14 insurance. And when I got really sick this is
15 where I received my treatment for Covid-19. My
16 ques- -- Exhibit 3.

17 (Claimant's Exhibit Number 3 was marked for
18 identification purposes.)

19 Q: My question to you, sir, is since you received
20 special funding from the federal government for
21 Covid-19, why did this hospital bill me beyond
22 my health insurance coverage? Why did I
23 receive any bill after my health insurance
24 coverage?

25 MR. HOWELL: Objection, relevance.



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- 1 A: I don't -- I can't answer that.
- 2 Q: Why not?
- 3 A: I don't know why. I cannot answer your
- 4 question, I'm sorry.
- 5 Q: You don't know why I was billed beyond my
- 6 health insurance coverage, is that correct?
- 7 A: I do not work in billing and collections. I do
- 8 not work in insurance. So I don't know the
- 9 answer to your question.
- 10 Q: Exhibit 3a.
- 11 MR. HOWELL: It's gonna be what? I'm sorry.
- 12 MR. WANDJI: Exhibit 3a.
- 13 (Claimant's Exhibit Number 3a was marked for
- 14 identification purposes.)
- 15 Q: That's just an example of many collection
- 16 letter from debt collectors that I've been
- 17 receiving trying to collect money from me on
- 18 behalf of the Regional Medical Center following
- 19 my hospitalization for Covid-19. What do you
- 20 have to say about you sending a bill collector
- 21 to collect money from me?
- 22 MR. HOWELL: Objection, relevance.
- 23 A: I'm not sure I understand your question.
- 24 Q: My question is what do you have to say about
- 25 you sending debt collectors to get money from



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1 me following my hospitalization at this
2 hospital?

3 A: It's my understanding we have a standard
4 operating procedures so that when people that
5 do not pay their bills after a certain period
6 of time, then we refer them to an outside
7 agency that tries to collect the money for the
8 hospital.

9 Q: Thank you, sir. This is Exhibit Number 4.
10 (Claimant's Exhibit Number 4 was marked for
11 identification purposes.)

12 Q: Exhibit Number 4 is my medical note from my
13 primary care physician medically clearing me to
14 return to work after my hospitalization from
15 Covid-19. Mr. Suth- -- Suth- -- Sutherland.
16 I'm sorry. For more than a month after I
17 submitted this letter to this hospital, the
18 Regional Medical Center, this hospital
19 continued to refuse me to return to work
20 despite multiple attempts to resume work. Do
21 you approve that behavior of the Medical --
22 Regional Medical Center, treating an employee
23 like that? Do you approve that?

24 MR. HOWELL: Objection. Number one, the question
25 assumes facts not in evidence. You can answer.



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1 A: So can you give me a chance to read the letter?

2 Q: Oh, absolutely.

3 (Deponent reads document.)

4 Q: Exhibit 5, it goes together. Those are the
5 multiple attempts that I made to return to work
6 after I was cleared by my doctor. First one is
7 from the doctor. The second one is from my
8 then lawyer.

9 (Claimant's Exhibit Number 5 was marked for
10 identification purposes.)

11 A: I'm still reading the first letter.

12 Q: I'm sorry.

13 (Deponent reads document.)

14 A: Okay, so what was your question?

15 Q: My question is why did the Regional Medical
16 Center refuse to allow me to return to work?

17 A: I don't know the answer to that.

18 Q: Who would know the answer to that, sir?

19 A: I recall the former HR Director, Tina Norris,
20 had some communications with you either by
21 phone or in writing about your capacity to when
22 and where you could come back to work. But I
23 don't recall any specifics. I referred all of
24 that to Ms. Norris for her direction and for
25 her decision.



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- 1 Q: So you gave her the authority to deal with it?
- 2 A: I'm sorry, I can't understand you.
- 3 Q: So you gave her the authority to deal with it?
- 4 A: Yes.
- 5 Q: And of course you assume the decision that she
- 6 made, is that correct, sir?
- 7 A: Let me finish reading this.
- 8 Q: Oh, okay.
- 9 (Deponent reads document.)
- 10 A: Okay, what was your question?
- 11 Q: My question is, Exhibit 4 was sent to the
- 12 Regional Medical Center in January followed by
- 13 a letter from my lawyer requesting my return to
- 14 work. My question is, the Regional Medical
- 15 Center still didn't want me to come back to
- 16 work. Do you condone that behavior?
- 17 MR. HOWELL: Objection, relevance.
- 18 Q: As the CEO.
- 19 MR. HOWELL: And again it ---
- 20 A: First of all ---
- 21 MR. HOWELL: --- assumes facts not in evidence.
- 22 MR. SUTHERLAND: So you want me to answer the
- 23 question?
- 24 A: So if you would break your question down so I
- 25 can -- it sounded like there were two questions



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- 1 or maybe three questions in your statement. So
2 could you restate it, please?
- 3 Q: It was just one question. I said I had a
4 medical note from my physician ---
- 5 A: Uh-huh.
- 6 Q: --- clearing me to return to work ---
- 7 A: Uh-huh.
- 8 Q: --- after I was sick from Covid-19.
- 9 A: Uh-huh.
- 10 Q: And then I also have another letter from ---
- 11 A: Uh-huh.
- 12 Q: --- my lawyer backing that up, stating that I'm
13 ready for work. The Regional Medical Center
14 received both of those letters.
- 15 A: Uh-huh.
- 16 Q: The first one went to the HR. The second one
17 went to your lawyer.
- 18 A: Uh-huh.
- 19 Q: Still the Medical -- the Regional Medical
20 Center refused to allow me to come back to
21 work. Do you condone that behavior of the
22 Regional Medical Center?
- 23 MR. HOWELL: Let me again pose an ---
- 24 Q: That's the question.
- 25 MR. HOWELL: --- objection. It assumes facts not in



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1 evidence and Mr. Sutherland has already
2 testified that he referred those matters to his
3 HR Director.

4 MR. WANDJI: I'm asking him ---

5 MR. HOWELL: You can answer.

6 Q: I'm asking you, Mr. Sutherland, do you condone
7 that behavior?

8 A: We have a process here at the Regional Medical
9 Center, which is typical of most hospitals
10 around the country ---

11 Q: Okay.

12 A: --- that once we receive correspondence or a
13 letter request from an attorney representing a
14 client or a patient, then we automatically
15 refer that letter to our attorney. And our
16 attorney deals directly with the other
17 attorney. We typically do not engage in
18 further communication with the patient or the
19 client unless our attorney advises us to do so.

20 Q: Okay.

21 A: So that's our process. It's not behavior, it's
22 a process.

23 Q: Okay, okay. Thank you. Exhibit 6. This is an
24 email sent to you and the HR Director.

25 (Claimant's Exhibit Number 6 was marked for



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1 identification purposes.)

2 Q: It wasn't from any attorney. It was straight
3 from me and I was still an employee begging to
4 come back to work. Why didn't you allow me to
5 get back to work, sir?

6 A: I don't recall seeing this. But I'm sure I
7 forwarded it to Tina Norris for her to handle.

8 Q: And who is Tina?

9 A: Tina Norris is the former Human Resources
10 Director.

11 Q: Did you follow through with her to see the
12 outcome of it?

13 A: We met periodically, like every week or every
14 two weeks. And she would update me on any
15 issues that she felt like that was important.
16 So if it was something that she was working on
17 she would report to me on it.

18 Q: So you delegated that to Tina, but you never
19 heard anything back about it from her?

20 A: Every once in a while she would tell me that
21 she had received, you know, some correspondence
22 from you and that she was taking care of it.
23 She was evaluating it and she was moving
24 forward with, you know, with our attorney on
25 what the correct thing to do response. So ...



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1 Q: Exhibit 7.

2 (Claimant's Exhibit Number 7 was marked for
3 identification purposes.)

4 Q: Exhibit 7 is my termination letter from the
5 Regional Medical Center. That was in March.
6 That's approximately three months after I was
7 clear to return to work. The Regional Medical
8 Center fired me. That's a termination letter
9 in your hands, sir, Exhibit 7.

10 (Deponent reads document.)

11 Q: Mr. Sutherland, did you approve my termin- --
12 employment termination at the Regional Medical
13 Center?

14 A: Okay, so in reviewing this letter it says, I
15 received your email dated March 12, 2022
16 providing another medical update from a
17 different physician than the original treating
18 physician when you left for a leave of absence
19 beginning August the 28th, 2021. Unfortunately
20 the organization does not have a part-time
21 position available at this time per your
22 request. At this time we have no choice but to
23 end your employment effective March 15th due to
24 leave exhaustion. Please understand the
25 separation does not, under these circumstances,



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1 is in no way punitive, and you are eligible for
2 rehire.

3 Q: Was that a termination letter?

4 A: It's a termination letter because you did not
5 have anymore leave hours, PTO hours available.
6 So it was -- and there was no part-time
7 positions available. So we had no other choice
8 but to issue this termination letter.

9 Q: Okay. Did you approve my termination?

10 A: I did not approve the termination. I was aware
11 of the situation and I delegated that to Tina
12 Norris to make the decision to move forward.

13 Q: So you delegated that to her ---

14 A: Yes.

15 Q: --- to make the decision on behalf of the
16 hospital?

17 A: Yes.

18 Q: So the hospital terminated me?

19 A: So again if you read the letter it says, there
20 was no part-time positions available at the
21 time per your request. Due to leave exhaustion
22 a separation -- under these circumstances -- in
23 no way punitive and you're eligible to apply
24 for another position and you're available for
25 rehire. So had there been another position you



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1 could have applied for it.

2 Q: Did you approve the termination? That's the
3 question.

4 A: I don't remember signing anything that said,
5 you know, terminate this employee. I don't
6 remember doing that. But I -- like I said, I
7 delegated this to the HR Department for them to
8 handle it.

9 Q: This is Exhibit Number 8. That's the letter
10 that she mentioned in that termination email.
11 (Claimant's Exhibit Number 8 was marked for
12 identification purposes.)

13 Q: That was an update from my psychologist where
14 I was receiving therapy. To put things in
15 context for you, sir, I was out because I was
16 sick from Covid, and that was a letter clearing
17 me to come back to work with some few
18 restrictions. So that's the letter she was
19 talking about. You can also look at the date.
20 She fired me a few days after she received that
21 letter. So I want to put my question to you
22 really clear so you understand the context. I
23 am out because I was sick for Covid, couldn't
24 work. And then this is a physician sending a
25 letter clearing me to work with some



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1 restriction. One of those restriction was I
2 cannot work full-time yet. It's clear in that
3 letter that he says, for the mid-term, the
4 purpose is to slowly get me back to my full-
5 time capacity because of health issues.
6 Because of that letter, Exhibit Number 7, she
7 fired me. So any request for part-time, it was
8 for medical purposes to slowly work me back to
9 my full-time capacity because I was on worker
10 compensation case was already ---

11 MR. HOWELL: Wait.

12 Q: So I'm putting that in context. My question to
13 you now, sir ---

14 MR. WANDJI: Wait until I'm finished.

15 MR. HOWELL: Well you're testifying. You're not
16 asking a question.

17 MR. WANDJI: I am putting context so he'll
18 understand.

19 Q: Now my question to you, sir, is do you agree
20 with this job termination?

21 MR. HOWELL: Let me pose an objection. Number one,
22 there was a lot of testifying going on there in
23 terms of what this letter from the doctor
24 supposedly means. He's asking you to basically
25 read the doctor's mind. He's assumed facts not



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- 1 in evidence, which he's assuming ---
- 2 MR. WANDJI: Are you objecting or testifying?
- 3 MR. HOWELL: I am objecting.
- 4 MR. WANDJI: This is my deposition with all due
- 5 respect.
- 6 MR. HOWELL: He's assuming facts not in evidence
- 7 including Tina Norris' state of mind when she
- 8 elected to terminate Mr. Wandji because his
- 9 leave of absence had been exhausted. But you
- 10 can answer the question if you can.
- 11 A: Okay. Would you restate your question again?
- 12 Q: Again, putting things in context, this is the
- 13 letter from my therapist returning me to work
- 14 with few objections. One of the objections is
- 15 I don't have the strength to work full-time.
- 16 That's what they wrote here. That I am going
- 17 to be working -- in the letter it says, part-
- 18 time for now in an administrative role. The
- 19 goal would be, and I'm reading from the letter,
- 20 to ease him back into his previous role but in
- 21 small increments at a time. That's the letter
- 22 I received from the doctors. And I sent it to
- 23 Tina. She fired me the next day -- a few days
- 24 after that, Exhibit Number 7.
- 25 A: So what's your question?



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- 1 Q: My question is do you condone that?
- 2 A: Mr. Wandji -- is it Wandji?
- 3 Q: Yes, sir.
- 4 A: I've already answered your question once. And
- 5 I'm going to answer it again. In the letter
- 6 dated March 15th it says, unfortunately the
- 7 organization, the Regional Medical Center does
- 8 not -- doesn't have a part-time administrative
- 9 position available at this time per your
- 10 request. At this time we have no choice but to
- 11 end your employment effective March 15th due to
- 12 leave exhaustion. So you received this letter
- 13 on March the 15th.
- 14 Q: Yes, sir.
- 15 A: That's my answer.
- 16 Q: Thank you. Did you seek any lawyer advice to
- 17 terminate my job?
- 18 MR. HOWELL: Objection. It's privileged. Even if
- 19 he did it's privileged.
- 20 A: No.
- 21 Q: Okay. Were you in communication with any
- 22 lawyer to strategize how to get rid of me?
- 23 MR. HOWELL: Objection.
- 24 A: No.
- 25 Q: Okay. All right. I filed for worker



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1 compensation in November with the South
2 Carolina Worker Compensation Commission,
3 November 2022 (sic). I was fired after that in
4 March 2022. I filed for worker compensation
5 November 2021. I was fired a few months later
6 in March 2022. So the Regional Medical Center
7 fired me after I filed for worker compensation,
8 is that correct?

9 A: I don't know the answer to that question. I
10 was not involved in that.

11 Q: Oh, you were not involved in that.

12 A: Huh-uh.

13 Q: Okay. What happened to Ms. Norris, the HR you
14 handed all those matters to?

15 MR. HOWELL: Objection, relevance. But you can
16 answer if you know.

17 MR. SUTHERLAND: Do you want me to answer it?

18 MR. HOWELL: You can answer it if you know.

19 A: She left employment with the Regional Medical
20 Center about three or four months ago.

21 Q: Was she fired?

22 A: No.

23 Q: She resigned?

24 A: Yes.

25 Q: Thank you, sir. This will be all.



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1 MR. HOWELL: Give me a minute to look at my notes.

2 I don't have any question.

3 (There being no further questions, the deposition
4 concluded at 10:53 a.m.)
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EXHIBIT

30

Exhibit 3

REGIONAL MEDICAL CENTER
1000 CORPORATE CENTRE DRIVE, STE 100
FRANKLIN, TN 37067

SERGE WANDJI
951 EDISTO AVE
ORANGEBURG, SC 29115-5318



Statement Information

Statement Date: 2021-12-21
Amount Due: \$2774.01
Due Date: 2022-01-20 00:00:00

Visit Information

Regional Medical Center
Date of Service: 2021-09-06 00:00:00
Type of Service: INPATIENT



Regional Medical Center

Provider Message

Thank you for receiving your healthcare services at Regional Medical Center. Healthcare Financing of America provides payment and financing options for your bill.

Amount Due: \$2774.01

As of: 2021-12-21

Quick and Easy Payment & Support Options

Online at <http://rmc.hfaloan.com>

On the go with your mobile browser

By phone with 24/7 access by calling 803-809-3883

QUESTIONS? Call 803-809-3883 or go to <http://rmc.hfaloan.com>

Paying by check? Use this easy payment slip

Please use this return slip when paying by check.
Credit card payments may be made securely online.
Checks should be payable to Healthcare Financing of America.

Account Number:	2000026648
Minimum Payment Due:	\$2774.01
Payment Due Date:	2022-01-20 00:00:00
Amount Enclosed:	\$ _____

Regional Medical Center
c/o Healthcare Financing of America
1000 Corporate Centre Drive, Ste 100
Franklin, TN 37067

SERGE WANDJI
951 EDISTO STREET
ORANGEBURG, South Carolina 29115

Page 581

HEALTHCARE FINANCING OF AMERICA
1000 CORPORATE CENTRE DRIVE, STE 100
FRANKLIN, TN 37067

rmc Regional Medical Center

000000982 1 AB 0.458
*****AUTO**ALL FOR AADC 290
SERGE WANDJI
2038 LAKE MURRAY BLVD
COLUMBIA, SC 29212-0972



Statement Information

Statement Date: 2021-10-10
Amount Due: \$538.34
Due Date: 2021-11-09 00:00:00

Provider Message

Thank you for receiving your healthcare services at Regional Medical Center. Healthcare Financing of America provides payment and financing options for your bill.

Visit Information

Regional Medical Center
Date of Service: 2021-07-12 00:00:00
Type of Service: OUTPATIENT

Quick and Easy Payment & Support Options

Online at <http://rmc.hfaloan.com>
On the go with your mobile browser
By phone with 24/7 access by calling 803-809-3883

QUESTIONS? Call 803-809-3883 or go to <http://rmc.hfaloan.com>

Paying by check? Use this easy payment slip

Please use this return slip when paying by check.
Credit card payments may be made securely online.
Checks should be payable to Healthcare Financing of America.

Account Number:
Minimum Payment Due:
Payment Due Date:
Amount Enclosed:

Healthcare Financing of America
1000 Corporate Centre Drive, Ste 100
Franklin, TN 37067

SERGE WANDJI
2038 LAKE MURRAY BLVD APT,
COLUMBIA, South Carolina 29212

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SOUND PHYSICIANS EMERGENCY
MED OF S CAROLINA LLC
PO Box 1259 Dept. #165956
Oaks, PA 19456



EZ

Ways To Pay...

SERGE R WANDJI
PO BOX 523
COLUMBIA SC 29202-0523



@ Online
www.mydocbill.com/SPESC



Automated Attendant
1.866.535.5215 (24 hours a day)

For Payments Please Call: 1.866.535.5223 For Billing Questions Please Call: 1.866.535.5215

STATEMENT

Account Number	Amount Due	Statement Date	Date Due
1295386-QSNED-03	\$1,892.00	01/17/22	Upon Receipt

Account Summary

Account Number	1295386-QSNED-03
Patient Payments in Last 30 Days	0.00
Current Statement Balance	1892.00
Charges Pending w/ Insurance	0.00
Total Account Balance	1892.00

See Detail on Back

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Gain the power to pay your bill or update your information at your convenience 24 hours a day. Chat with a representative using our Live Agent Chat feature during normal business hours. This not only benefits the environment, it benefits you and your time!

Insurance Information

PLEASE CONFIRM THAT INFORMATION IS CORRECT
TO UPDATE GO TO www.mydocbill.com/SPESC

PRIMARY

Insurance	BCBS OF SOUTH CAROLINA
Group/Plan	SC State Empl TRMC
ID Number	ZCS23420030

SECONDARY

Insurance	
Address	
City/State/Zip	
Group/Plan	
ID Number	

About Your Statement

Have a billing question or concern about your statement?
E-MAIL us at snedbilling@mydocbill.com.

See Statement Details on Back



148809-167



SOUND PHYSICIANS EMERGENCY MED OF S
CAROLINA LLC
PO Box 1259 Dept. #165956
Oaks, PA 19456

Patient Name: SERGE WANDJI
Invoice Number: 1243170
Billing Questions: 1.866.535.5215

STATEMENT DATE	AMOUNT DUE	ACCOUNT NO.
01/17/22	\$1,892.00	1295386-QSNED-03

CHARGES AND CREDITS MADE AFTER
STATEMENT DATE WILL APPEAR ON
NEXT STATEMENT.

SHOW AMOUNT
PAID HERE \$

MAKE CHECKS PAYABLE / REMIT TO:

SOUND PHYSICIANS EMERGENCY MED OF S
CAROLINA LLC
PO BOX 748996
LOS ANGELES, CA 90074-8996



148809-167

SERGE R WANDJI
PO BOX 523
COLUMBIA SC 29202-0523

0124317000189200000001295386SNED0

Pay Online: www.mydocbill.com/SPESC

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ORANGEBURG COUNTY EMS
PO BOX 5897
FLORENCE, SC 29502

For all billing questions, call: (800)741-6920
Fax: (843) 669-6662 Email: billing@cabems.com
Office Hours: Mon-Thurs: 8:30am-4:30pm
Fri: 8:30am-11:30am
Call Number: 2021-13404

STATEMENT DATE	PAY THIS AMOUNT	ACCOUNT NO.
05/25/2022	\$710.00	19297

CHARGES AND CREDITS MADE AFTER STATEMENT
DATE WILL APPEAR ON NEXT STATEMENT.

SHOW AMOUNT
PAID HERE \$

MAKE CHECKS PAYABLE / REMIT TO:



139499-175

ORANGEBURG COUNTY EMS
PO BOX 5897
FLORENCE, SC 29502



Sarge Wandji
PO BOX 523
COLUMBIA SC 29202-0523

0020 002897

☐ Please check box if above address is incorrect or insurance
information has changed, and indicate change(s) on reverse side.

STATEMENT

PLEASE DETACH AND RETURN TOP PORTION WITH
YOUR PAYMENT IN ENCLOSED ENVELOPE

CALL NUMBER CALL DATE	DESCRIPTION	CHARGES	CREDITS	PAYMENT DATE	BALANCE
2021-13404 09/06/2021	From 951 Edisto St To REGIONAL MEDICAL CENTER	710.00			\$710.00

PAYMENT DUE
\$710.00

This account is 60 DAYS PAST DUE. Your payment must be sent
IMMEDIATELY. If there are problems or questions please call our office so that
we can help to resolve this matter. Thank You.

For all billing questions, call: (800)741-6920
Fax: (843) 669-6662 Email: billing@cabems.com
Office Hours: Mon-Thurs: 8:30am-4:30pm
Fri: 8:30am-11:30am
Call Number: 2021-13404

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STATEMENT

SEE REVERSE SIDE FOR IMPORTANT BILLING INFORMATION

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PALMETTO INFECTIOUS DISEASE
PO BOX 1232

Orangeburg SC 29116-1232

ANY QUESTIONS PLEASE CALL: (301)519-9200

SEND TO:

SERGE R WANDJI
951 EDISTO AVENUE

ORANGEBURG SC 291155318

IF PAYING BY MASTERCARD, DISCOVER, VISA OR AMERICAN EXPRESS, FILL OUT BELOW.

☐ VISA ☐ MASTERCARD ☐ DISCOVER ☐ AMEX		
CARD NUMBER		SIGNATURE CODE
SIGNATURE		EXP DATE
STATEMENT DATE	PAY THIS AMOUNT	ACCT.#
01/24/22	167.25	HF347925620
SHOW AMOUNT \$ PAID HERE		

PALMETTO INFECTIOUS DISEASE
PO BOX 1232

Orangeburg SC 29116-1232

☐ PLEASE CHECK THE BOX IF YOUR ADDRESS IS
INCORRECT OR INSURANCE INFO HAS CHANGED

STATEMENT

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR PAYMENT

PATIENT NAME		SERGE WANDJI	PATIENT ACCT NUMBER		HF347925620		BALANCE DUE	167.25
DATE	CODE	DESCRIPTION OF SERVICE	CHARGE	ADJUSTMENT	INS PYMT	PAT RESP	PAT PYMT	BALANCE
09/09/21		JOHN SAMIES, MD SOUTH CAROLINA BLUE CROSS BLUE SHIELD STATE EMPLO	795.00	524.77	103.98	167.25	0.00	167.25
09/07/21	99222	INITIAL HOSPITAL CARE	404.00	274.95	0.00			
		DEDUCTIBLE				129.05		
09/08/21	99232	SUBSEQUENT HOSPITAL CARE	196.00	124.91	47.10			
		CO-INS				11.78		
		DEDUCTIBLE				12.21		
09/09/21	99232	SUBSEQUENT HOSPITAL CARE	196.00	124.91	66.88			
		CO-INS				14.21		
					103.98		0.00	167.
		CURRENT	30 DAYS	60 DAYS	90 DAYS	120 DAYS	TOTAL ACCOUNT BALANCE	
INSURANCE								
PATIENT					167.25		167.25	

THANK YOU FOR YOUR PAYMENT

PLEASE PAY \$ 167
THIS AMOUNT

Payee 13

PO Box 54028
Los Angeles, CA 90054-0028

APA # 379

Toll Free: 866-206-1336
Mon-Fri 7 am to 5:30 pm PST
www.cmrefsl.com

Reference: 0067979053

VLRA 004239
Wandji, Serge R
PO Box 523
Columbia SC 29202-0523

CMRE Financial Services, Inc. is a debt collector. We are trying to collect a debt that you owe to SOUND PHYSICIANS EMERGENCY MED OF S CAROLINA LLC. We will use any information you give us to help collect the debt.

Our information shows:

You had a medical debt owed to the client listed above with account number 1295388-SNED-7112646.

As of 09/06/21 you owed: \$1,761.00

Between 09/06/21 and today:

You were charged this amount in interests: + \$0.00

You were charged this amount in fees: + \$0.00

You paid or were credited this amount -
toward the debt \$0.00

Total amount of the debt now: \$1,761.00

How can you dispute the debt?

- Call or write to us by 08/04/22, to dispute all or part of the debt. If you do not, we will assume that our information is correct.
- If you write us by 08/04/22, we must stop collection on any amount you dispute until we send you information that shows you owe the debt. You may use the form below or write us without the form. You may also include supporting documents.

What else can you do?

- Write to ask for the name and address of the original creditor, if different from the current creditor. If you write by 08/04/22 we must stop collection until we send you that information. You may use the form below or write to us without the form.
- Go to www.cfpb.gov/debt-collection to learn more about your rights under federal law. For instance, you have the right to stop or limit how we contact you.
- Contact us about your payment options.

How do you want to respond?

Check all that apply:

- ☐ I want to dispute the debt because I think:
 - ☐ This is not my debt.
 - ☐ The amount is wrong.
 - ☐ Other (please describe on the reverse or attach additional information.)
- ☐ I want you to send me the name and address of the original creditor.
- ☐ I enclosed this amount:

Wandji, Serge R
PO Box 523
Columbia, SC 29202-0523

CMRE Financial Services, Inc.
PO Box 54028
Los Angeles, CA 90054-0028

Make your check payable to CMRE Financial Services, Inc.
Include the reference number 0067979053.

0000679790530000000001761001

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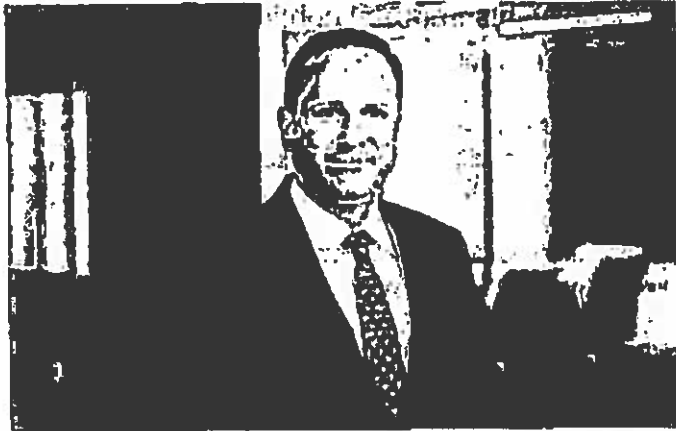
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ORANGEBURG, SC

EXHIBIT

32

Frederick M. Thurman, Jr.

Partner, Labor, Employment and Benefits Regional Service Line Leader



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J.D., Cumberland School of Law of Samford University, 1995

National Institute for Trial Advocacy, Southeast Regional Program, University of North Carolina at Chapel Hill, 2002

B.S., *magna cum laude*, Clemson University, 1992

SERVICE LINES

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Corporate Law / Business Organizations

Government Contracts

Nonprofit Organizations

Labor, Employment and Benefits

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Labor and Employment

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Partner, Health Law National Service Line Leader, Health Care Business Sector Chair

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levans@shumaker.com

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B.A., International Studies,
University of North Carolina at
Chapel Hill, 1991

SERVICE LINES

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Clients call on Laura when they need a health care lawyer who is experienced in the everyday, operational aspects of the industry. After litigating complex health care, toxic tort, and product liability cases for seven years, Laura served as in-house counsel for Roper St. Francis Healthcare, a Charleston-based health care system including two acute care hospitals, as well as numerous ancillary facilities and

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dji v. The Regional Medical Center- HIPAA Violation

Mr. Howell,

JValentine@regmed.com → Jonathon Valentine
valentie@music.edu

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