

Benjamin L. Anderson

Plaintiff(s)

Barksdale Med. Center

Defendant(s)

Submitted By: Benjamin L. Anderson
Address: 445 W. Rebound Road
Lancaster SC 29720

CIVIL ACTION COVERSHEET

2015-CP-23-07324

FILED-CLERK OF COURT
GREENVILLE CO. S.C.
PAUL B. WICKENSIMER

2015 December 14 PM 3:06

SC Bar #:
Telephone #: 480-313-6280
Fax #:
Other:
E-mail:

NOTE: The coversheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for the use of the Clerk of Court for the purpose of docketing. It must be filled out completely, signed, and dated. A copy of this coversheet must be served on the defendant(s) along with the Summons and Complaint.

DOCKETING INFORMATION (Check all that apply)

*If Action is Judgment/Settlement do not complete

- JURY TRIAL demanded in complaint.
NON-JURY TRIAL demanded in complaint.
This case is subject to ARBITRATION pursuant to the Court Annexed Alternative Dispute Resolution Rules.
This case is subject to MEDIATION pursuant to the Court Annexed Alternative Dispute Resolution Rules.
This case is exempt from ADR. (Proof of ADR/Exemption Attached)

NATURE OF ACTION (Check One Box Below)

- Contracts: Constructions (100), Debt Collection (110), Employment (120), General (130), Breach of Contract (140), Other (199)
Torts - Professional Malpractice: Dental Malpractice (200), Legal Malpractice (210), Medical Malpractice (220), Previous Notice of Intent Case # 20-CP-, Notice/ File Med Mal (230), Other (299)
Torts - Personal Injury: Assault/Slander/Libel (300), Conversion (310), Motor Vehicle Accident (320), Premises Liability (330), Products Liability (340), Personal Injury (350), Wrongful Death (360), Other (399)
Real Property: Claim & Delivery (400), Condemnation (410), Foreclosure (420), Mechanic's Lien (430), Partition (440), Possession (450), Building Code Violation (460), Other (499)
Inmate Petitions: PCR (500), Mandamus (520), Habeas Corpus (530), Other (599)
Administrative Law/Relief: Reinstate Drv. License (800), Judicial Review (810), Relief (820), Permanent Injunction (830), Forfeiture-Petition (840), Forfeiture-Consent Order (850), Other (899)
Judgments/Settlements: Death Settlement (700), Foreign Judgment (710), Magistrate's Judgment (720), Minor Settlement (730), Transcript Judgment (740), Lis Pendens (750), Transfer of Structured Settlement Payment Rights Application (760), Confession of Judgment (770), Petition for Workers Compensation Settlement Approval (780), Other (799)
Appeals: Arbitration (900), Magistrate-Civil (910), Magistrate-Criminal (920), Municipal (930), Probate Court (940), SCDOT (950), Worker's Comp (960), Zoning Board (970), Public Service Comm. (990), Employment Security Comm (991), Other (999)
Special/Complex/Other: Environmental (600), Automobile Arb. (610), Medical (620), Other (699), Pharmaceuticals (630), Unfair Trade Practices (640), Out-of State Depositions (650), Motion to Quash Subpoena in an Out-of-County Action (660), Sexual Predator (510)

In infliction of Emotional Distress

Submitting Party Signature: Benjamin L. Anderson

Date: 12-14-15

Note: Frivolous civil proceedings may be subject to sanctions pursuant to SCRCP, Rule 11, and the South Carolina Frivolous Civil Proceedings Sanctions Act, S.C. Code Ann. §15-36-10 et. seq.

EXHIBIT A
Causes of Action
Letter to Barksdale
Discharge - USAF
Medical Records

1 Benjamin L. Anderson
2 445 W. Rebound Road
3 Lancaster, SC 29720
4 (980) 313-6280
5 Plaintiff Pro Se

ORIGINAL

~~ENTERED COMPUTER~~

6 IN THE COURT OF COMMON PLEAS
7 Greenville, South Carolina

2015-CP-23-07324

9 Benjamin L. Anderson,
10 Plaintiff,

COMPLAINT

11
12
13 vs

Attached Exhibit ABC

15 Barksdale Medical Center,
16 Defendant

FILED-CLERK OF COURT ^{WLG}
GREENVILLE CO. S.C.
PAUL B. WICKENSIMER
2015 December 14 PM 3:06

18 The Plaintiff in the above captioned case
19 alleges that Barksdale Medical Center
20 and Rebecca F. Barksdale, MD, in her individual
21 capacity, wilfully and maliciously disparaged
22 the Plaintiff when she documented in his
23 medical records that Plaintiff communicated
24 to her, on a patient visit to her office, that he
25 said that the government, as well as the
26 military "is spying on him through satellites"
27 in California. Further the Plaintiff alleges
28 that Dr Barksdale imbedded into his medical
29 record

SCANNED

1 other untrue diagnosis predicated upon
2 the bogus statements she accused the
3 Plaintiff of making to her on a routine
4 office visit, Dr Barksdale never informed
5 the Plaintiff of the diagnosis and shortly
6 afterwards dismissed the Plaintiff
7 as her patient, and again never informed
8 him of the dismissal.

9
10 First cause of action:

11
12 Intentional Infliction of Emotional Distress

13 The Plaintiff first discovered these ludicrous
14 accusations on June 3, 2014, when Plaintiff
15 requested copies of his medical records.
16 The Plaintiff, at that time, discovered the
17 outrageous and anxiety triggering statements
18 which Plaintiff alleges were done to go
19 along with the accusations. Further she
20 documented that Plaintiff was, "hearing voices."

21
22 Second cause of action:

23
24 Defamation of Character / Libel

25 The Plaintiff alleges that Dr Barksdale used
26 these false allegations because I finally
27 blew the whistle on a big university
28 medical centers' invasion of privacy.

Defamation of Character Continued:

The Physician had knowledge of the fact that I was an inactive Registered Respiratory Therapist and that I had worked for the University medical Center and their "sister" organization in California. Dr Barksdale also knew that I was ^{BBA} in the process of activation of South Carolina's license to return to work as a respiratory therapist. Dr Barksdale also knew that I was in the Air Force stationed in California, which was my last assignment before discharge. The Plaintiff has a reasonable good faith belief that her staff came into knowledge of these documentations because they assist her with computer data input, billing as well as printing out medical records of patient clients. Further, these outrageous documentations were out in the local communities, which violated his privacy although bogus and untrue.

Third Cause of Action:

Fraud

Plaintiff alleges that Dr Barksdale knew that her documentations were false. The Plaintiff had relied on Dr Barksdale's

1 FRAUD CONTINUED

2 Prior physician-patient trust to
3 deal with Plaintiff in good faith
4 and treat him fairly. Plaintiff relied
5 on this much to his detriment as
6 a professional health care individual
7 with forty-three years of experience
8 who now has been hurt in his attempt
9 to return to work because of her
10 false representations in his medical
11 records. Plaintiff must be free of any
12 serious mental health issues to work.

13 Prior to Plaintiff complaining of INVASION OF PRIVACY,
14 there was no documentation of mental health disorders.

15
16 Wherefore, Plaintiff prays for punitive
17 damages and trial by jury and
18 whatever court deems as just.
19
20

21
22 December 14, 2015

Benjamin L. Anderson
Benjamin L. Anderson
Pro Se

Exhibit A

Benjamin L. Anderson
445 W. Rebound Rd
Lancaster, SC 29720

January 13, 2015

RE: Health Documentation

"Spied on by the Military" (California)

"transmitting noises during night that keeps him from sleeping"

"being watched and spied on by the government"

Dear Dr. Barksdale,

I have never informed you regarding the above allegations. This is just not true.

At first glance, I said to myself this must not be me. This is a mistake!

For the record I served 7 years and 27 days in the Air Force during that time I liked it so well that after

4 years I re-enlisted for another three. I was honorably discharged

(see attached) in 1969 (before most were born) after I had an excellent relationship with the Air Force and going to a Navy school for specialized training, I decided to capitalize on that training in the civilian sector.

(1)

I served in Europe and California with ~~any~~ problems.

I have never been stationed on a base that had any satellite transmitters to spy on me. In 1962 there were no satellite technology. only listening technology and surface mounted transmitters to ease deaf.

Now, the government spying on me... that again is patently untrue. I never told you that. Why would the government single me out to spy on me?? I am not AL Queda.

Again for the record I did work for a "high-powered" University Medical Center which group have satellite transmitters one for religious broadcast. The University God only knows. I know that it was (satellite transmitter) (S) ~~is~~ used for criminal federal violations to intrude upon peoples privacy including mine. If I said anything it may have been regarding the University Medical Center in California. This is factually documented thru the (2) FCC & FBI.

Further, no health care practitioner
can produce the evidenced-based
medical diagnosis of: (1) Schizophrenia
(2) Paranoia (3) delusional disorder
respecting me as a patient.

No mental health professional/
practitioner has ever conducted
any diagnostic evaluation, questionnaire
OR subjected me to any meaningful
interview regarding any mental
health disorder. There is none!

Not even "hearing voices."

I am truly sorry that you did not
inform, discuss OR tell me why this
is documented in my medical records.

This includes St. Francis as well.

When I was hospitalized in 2011...

Some physician came in for 3 hot minutes
said he wanted to prescribe a med.
"to calm things down". Never saw him
again.

I am asking you nicely to remove (purge)
these damaging items from my
medical history. I am shocked!

(3)

Should you desire I will go on
record and tell you specifically the name
of the California Medical, which group
was - Sued in two arenas
Federal & STATE including a workers
compensation trial. This is the truth.

Respectfully,

Benjamin L Anderson
Former patient
(864) 328-2280 mobile

THIS IS AN IMPORTANT RECORD
SAFEGUARD IT.

Exhibit B

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME ANDERSON BENJAMIN LOUIS			2. SERVICE NUMBER NA			3. SOCIAL SECURITY NUMBER 579 58 6396		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE REGAF			5a. GRADE, RATE OR RANK SERGEANT	b. PAY GRADE E-4	6. DATE OF RANK DAY MONTH YEAR 1 MAY 68			
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) LAURENCE S.C.			9. DATE OF BIRTH DAY MONTH YEAR 13 MAY 44			
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER NA			b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE NA			c. DATE INDUCTED DAY MONTH YEAR NA		
	11 a. TYPE OF TRANSFER OR DISCHARGE DISCHARGE			b. STATION OR INSTALLATION AT WHICH EFFECTED MARCH AFB CALIF					
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY SDN: 413, PARA 3-8j(2) AFM 39-10			d. EFFECTIVE DATE	DAY	MONTH	YEAR	12 SEP 69	
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND USAF REGIONAL HOSP (SAC)			13 a. CHARACTER OF SERVICE HONORABLE			b. TYPE OF CERTIFICATE ISSUED DDFM 363		
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED NA						15. REENLISTMENT CODE RE: 2		
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY MONTH YEAR NA			17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: <input type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input checked="" type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER			b. TERM OF SERVICE (Years) -4-	c. DATE OF ENTRY DAY MONTH YEAR 7 FEB 66	
SERVICE DATA	18. PRIOR REGULAR ENLISTMENTS ONE		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SERVICE AIRMAN FIRST CLS		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) MARCH AFB CALIF				
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) WASH D.C. 20001			22. STATEMENT OF SERVICE					
	23a. SPECIALTY NUMBER & TITLE 91630 CARTO PULMN TECHN			b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER			c. FOREIGN AND/OR SEA SERVICE		
	24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDSM AFGCM AFOUA								
	25. EDUCATION TRAINING COMPLETED NA								
	26. PAY PERIODS/TIME LOST (Preceding Two Years) NO TIME LOST			b. DAYS ACCRUED LEAVE PAID SIXTY (60)		7 a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input type="checkbox"/> NO NA		b. AMOUNT OF ALLOTMENT NA	
VA. SERVIC.	28. VA CLAIM NUMBER C- NA		9. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE						
	30. REMARKS BLOOD GROUP "B" POS//NAC SEP 62, 4trDIST OSI//M-15 A-30 G-40 E-25								
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) SAME AS ITEM # 21.				32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Benjamin L Anderson</i>				
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER GEORGE E BROWN, CAPTAIN USAF OIC CAREER CONTROL				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>George E Brown</i>				

Patient Basic Information

First Name	BENJAMIN	Email	
Middle Name	L	Home Phone	864-322-3275
Last Name	ANDERSON	Mobile Phone	864-322-3275
Sex	M	Office Phone	
Date of Birth	05/13/1944	Office Extension	
Date of Death			
SSN	579-56-6396		
Address Line 1	521 ANDERSON STREET		
Address Line 2			
City	Greenville		
County/Parish	Greenville		
State	SC		
ZIP Code	29601		
Contact by	Not specified		
Ethnicity	Non-Hispanic		
Preferred language	English		
Race(s)	African or African American		

Comments

Medicare

Payer	Medicare - Medicare	Insured ID Number	579-56-6396-A
Priority	Primary	Group Number	
Type	PPO	Employer Name	
Relationship to Insured	Self	Insurance Payment Type	
Start Date	07/01/2010	Payment Type	Payment Percentage
End Date		Patient Payment Percentage	20%
		Active	✓

Diagnosis History

Chronic Diagnoses

Diagnoses	Start	Stop
401.1 Benign essential hypertension		
585. Chronic renal failure		
280.9 Iron deficiency anemia, unspecified		
296.2 Major depressive disorder, single episode		
600.00 Hypertrophy (benign) of prostate without urinary obstruction and other lower urinary ...		
585.6 End stage renal disease		
784.0 Headache		
300.00 Anxiety		
297.9 Delusional disorder		
297.8 Paranoia querulans		
782.3 Edema		
307.42 Persistent disorder of initiating or maintaining sleep		
788.5 Oliguria		

Acute Diagnoses

There are no recorded acute diagnoses for this patient at this time.

BENJAMIN ANDERSON (PRN: ANDBE000) : SOAP Note

Age on DOS: 69 yrs, DOB: 05/13/1944

Barksdale Medical Center

135 COMMONS WAY Greenville, SC 29611

(864) 269-6949

seen by: Rebecca Barksdale, MD

seen on: Monday 02 December 2013

electronically signed by: Rebecca Barksdale, MD

signed on: Wednesday 18 December 2013 11:27 PM

VS	Height:	Weight:	BMI:	Blood Pressure:	Temp:	Pulse:	Resp Rate:
	67.0 in	142.2 lb	22.3	150 / 90 mmHg	98.0 F	80 bpm	16 rpm

CC ROUTINE VISIT:

S Here for follow up of hypertension. Taking medications without difficulty. He has been under a lot of stress. Has not been sleeping well. He feels that he is being spied on by the military in California through satellites. The says they are transmitting noises during the night that keeps him from sleeping. He also feels that he is being discriminated against while he is at dialysis. He has decreased his days at dialysis to only 2 days instead of 3. He is also complaining of headaches and dizziness. No complaints of chest pain, shortness of breath or blurred vision. Has a possible history of atrial fibrillation. Denies swelling in his legs. No other complaints. Medications reviewed and updated. Family history, Social history and Past Medical History reviewed.

ROS: Negative except for the above positives.

O General: BP elevated, but in no acute distress. PERRL. EOMI. TM's clear bilaterally. Neck: Supple, no masses, no thyromegally, no bruits. Chest: Lungs show no rales, no wheezes, no rhonchi. Heart: RR, no murmurs, no rubs, no gallops. Abdomen: Soft, no tenderness, no masses, BS normal. Extremities: no edema, pulses strong bilaterally, no erythema, DTR 2+ bilaterally. Psych: alert and oriented x 3. Affect is suspicious.

- A
1. Hypertension, not at target.
 2. Chronic kidney disease
 3. Headaches
 4. Anxiety
 5. Paranoia

DIAGNOSES:

Benign essential hypertension [401.1]
 End stage renal disease [585.6]
 Headache [784.0]
 Anxiety [300.00]
 Delusional disorder [297.9]
 Paranoia querulans [297.8]

P Medications reviewed with patient. Continue current medications unchanged. Will start the following medications (see below). Will get recent labs from dialysis on Mills Ave. Will check a CBC, CMP, lipids, HbA1c, and 25 hydroxy vitamin D level. Return in 2 months or sooner if needed.

MEDICATIONS:

Valium (diazepam) oral tablet 5 mg every 4 to 6 hours prn (start date: 12/02/2013)
 prescription: qty 90 of 5 mg every 4 to 6 hours prn (3 refills)

Finalization

- Outpatient encounter
- Office Visit
- Influenza vaccine received
- Med list reconciled during visit

seen by: Rebecca Barksdale, MD
seen on: Friday 25 January 2013

electronically signed by: Rebecca Barksdale, MD
signed on: Wednesday 08 January 2014 9:04 PM

VS	Height:	Weight:	BMI:	Blood Pressure:	Temp:	Pulse:	Resp Rate:
	67.0 in	155.0 lb	24.3	180 / 120 mmHg	97.1 F	76 bpm	16 rpm

CC ROUTINE VISIT

S Here for follow up of hypertension and chronic kidney disease. His blood pressures have been up and down. it was 214/100 on 1/22/12 and 188/100 on 1/23/13. No complaints of headaches, chest pain, shortness of breath or blurred vision. Taking medication without difficulty. He is also complaining of having trouble getting to sleep and staying asleep. He is hearing voices. He thinks he is being watched and spied on by the government. He also has CKD and is complaining of decreased urination. Denies any pain. No other complaints. Medications reviewed and updated. Family history, Social history and Past Medical History reviewed.

ROS: Negative except for the above positives.

O General: BP elevated, but in no acute distress. PERRL. EOMI. TM's clear bilaterally. Neck: Supple, no masses, no thyromegally, no bruits. Chest: Lungs show no rales, no wheezes, no rhonchi. Heart: RR, no murmurs, no rubs, no gallops. Abdomen: Soft, no tenderness, no masses, BS normal. Extremities: trace edema, pulses palpable bilaterally, no erythema; DTR 2+.

- A
1. Hypertension, not at target.
 2. CKD
 3. Peripheral Edema.
 4. Anemia
 5. Insomnia
 6. Oliguria
 7. BPH
 8. Paranoia

DIAGNOSES:

- Benign essential hypertension [401.1]
- End stage renal disease [585.6]
- Edema [782.3]
- Iron deficiency anemia, unspecified [280.9]
- Persistent disorder of initiating or maintaining sleep [307.42]
- Oliguria [788.5]
- Hypertrophy (benign) of prostate without urinary obstruction and other lower urinary tract symptoms (LUTS) [600.00]
- Paranoia querulans [297.8]

P Patient was given Clonidine 0.1 mg po x 1 to decrease his blood pressure. Medications reviewed with patient. Continue current medications unchanged. Continue dietary efforts, exercise. Will start Valium. Refilled the following medications (see below). He will also try OTC Melatonin for sleep. Return 3 months, sooner prn.

MEDICATIONS:

- Flomax (tamsulosin) oral capsule 0.4 mg once a day (start date: 01/25/2013)
prescription: qty 30 of 0.4 mg once a day (5 refills)
- Furosemide oral tablet 20 mg 2 times a day (start date: 01/25/2013)
prescription: qty 60 of 20 mg 2 times a day (5 refills)
- CloNIDine Hydrochloride (cloNIDine) transdermal film, extended release 0.3 mg/24 hr apply patch once a week (start date: 01/25/2013)
prescription: qty 4 of 0.3 mg/24 hr apply patch once a week (5 refills)
- Valium (diazepam) oral tablet 5 mg every 4 to 6 hours prn (start date: 12/02/2013)
prescription: qty 90 of 5 mg every 4 to 6 hours prn (3 refills)

Benjamin Anderson
445 W. Rebound Road
Lancaster, SC 29720
(980)328-5708
Plaintiff Pro Se

FILED IN COURT
GREENVILLE CO. S.C.
PAUL B. WICKENSIMER
2016 APR 19 AM 11 34

**IN THE COURT OF COMMON PLEAS
GREENVILLE, SOUTH CAROLINA**

)	
)	
)	
Benjamin L. Anderson)	CASE NO: 2015-23-07324
Plaintiff)	
)	Plaintiffs Opposition
VS)	To defendants Motion
)	To Dismiss
Barksdale Medical Center)	
Defendant)	Memorandum of Law

Plaintiffs opposition to motion to dismiss complaint pursuant SCRCP 12 (b) (6). Plaintiff's complaint adequately pleads his three causes of actions pursuant South Carolina's tort Law. Plaintiff's claims are justifiable. Plaintiff's facts as alleged in the complaint must be taken as true. The court must accept all material allegations in favor of the complaining party.

Memorandum of Law:

Williams V. Condon, 347 S.C. 227, 233, 553, S.E 2d, 496, 500 (CT. App. 2001)

"Generally, in considering a (12) (b) (6) motion the trial court must base its ruling solely upon allegations set forth on the face of the compliant."

FOC Lawshe Ltd. P 'ship 352 S.C. at 413, 74, S.E. 2d at 230.

McCormick V. England, 328 S.C, 627, 494 S. E. 2d, 431 (CT. App. 1997) "The question to be considered is whether, in the light most favorable to the plaintiff, the pleadings articulate any valid claim for relief." (Concluding that motion to dismiss cannot be sustained if facts alleged in complaint and inferences reasonably deductible there from would entitle plaintiff to relief on any theory of the case".)

EXHIBIT B

Toussaint V. Ham, 229 S.C. 415, 357 S.E. 2d 8 (1987)

Dye V. Gainey, 320 S.C. 65, 463 S.S 2d 97 (CT. App. 1995)

“The cause of action should not be struck merely because the Court doubts the Plaintiff will prevail in the action.”

Memorandum of Law:

Defamation/Libel

Libel is actionable per se if it involves written or printed words which tend to degrade a person that is to reduce his character or reputation in the estimation of his friends or acquaintances, or the public, or to disgrace him, or to render him odious, contemptible, or ridiculous....

Lesene V. Willingham, 83 F. Supp. 918, 921 (E. D. S. C 1949)

“Libel, a tort consisting of a false and malicious publication printed for the purpose of defaming one who is living.”

Law Dictionary, third edition, Steven H. Gifts Associate Professor of Law, Rutgers, The State University of New Jersey, School of Law Newark.

Libel

“A maliciously written or printed publication which tends to blacken a person’s reputation or to expose him to public hatred, contempt, or ridicule, or to injure him in his business or profession.” Black’s Law Dictionary 5th Edition 1983

Memorandum of Law:

Intentional Infliction of Emotional Distress

“Tort of Outrage”

Plaintiff cites: Ford V. Hutson, 276 S.C., 157, 276 S.E. 2d 778 (1981)

(To recover for intentional infliction of emotional distress)

Mack V. South Bound R.R. CO.

52 S.C., 323-335, 29 S.E. 2d, 90

[Emotional Damages]

Memorandum of Law:

Defamation

Plaintiff cites: Swinton Creek Nursery V. Edisto Farm Credit 334 S.C 469, 514 S.E. 2d (1999)

332 S.C., 502, 506 S.E. 2d 497 (1998)

[The Tort of defamation allows a plaintiff to recover for injury to his or her reputation as a result of defendant’s communication to others of a false message about Plaintiff]

Public Policy that individuals should be free to enjoy their reputations unimpaired by false and defamatory attack, injury to reputation.

Memorandum of Law

Deceit (TORT)

“A false representation of material fact made with knowledge of its falsity, or recklessly, or without reasonable grounds for believing its truth.”

Reid V. Harbinson Dev. Corp

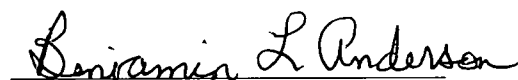
285, S.C. 557-560, 330 S.E. 2d 532, 534 (CT. APP 1985)

Osborne V. Adams, 346, S.C. 4, 550 S.E> 2d 319 (2001)

PUNITIVE DAMAGES

Pursuant to 15-32-52 of the South Carolina Code “in order to receive punitive damages the claim for punitive damages must be asked for in the complaint but specific amount may not be.”

April 12th 2016



Benjamin L. Anderson

Pro Se

Copy

FILED-CLERK OF COURT
GREENVILLE CO. S.C.
PARLOR WICKENSIMER

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Benjamin L. Anderson
445 W. Rebound Road
Lancaster, SC 29080
(980) 328-5708
Pro Se

IN THE COURT OF COMMON PLEAS
Greenville, South Carolina

Benjamin L. Anderson
Plaintiff

VS

Barksdale Medical Center
Defendant

AFFIDAVIT OF PLAINTIFF
CASE NO: 2015-23-07324
DATE: April 25, 2016
OPPOSITION TO MOTION
TO DISMISS COMPLAINT

I make oath and say:
The Plaintiff, Benjamin L. Anderson affirm that
I am an inactive registered respiratory therapist
with forty-three years in the health care
arena. I affirm that I was in the military
almost eight years as a medical service specialist.
I attest that I am preparing to activate my
respiratory care practitioners license to practice
in the state of South Carolina. I affirm that I
discovered on June 3, 2014 disparaging documentation
in my medical records by Dr Rebecca Barksdale.

EXHIBIT C
Affidavit of Plaintiff

1 I also affirm that Dr Barksdale did not
2 inform me of this documentation and
3 concealed the contents from me. Dr Barksdale
4 wrote into my medical records that I was
5 delusional and paranoid to bolster her
6 accusations that I informed her that the
7 "military and "government used satellites
8 to spy on me." I affirm that Dr Barksdale
9 never conducted any evaluation, administer
10 any questionnaire, nor conducted any diagnostic
11 test to ascertain the medical evidence
12 to justify her bogus documentation of
13 Plaintiff. I affirm that she did not request
14 any mental health evaluation from a
15 mental health professional. The Plaintiff
16 affirms that after reviewing his medical
17 records, he suffered mental anguish, stress,
18 anxiety as well as insomnia because of
19 Dr Barksdale's actions against Plaintiff.
20 The Plaintiff has a reasonable good-faith belief
21 that Dr Barksdale did this as pretext. The
22 Plaintiff did tell Dr Barksdale that he was
23 under invasion of privacy by a California
24 university medical center, which group was
25 using their FCC licensed satellite transmitter
26 in conjunction with satellites. The Plaintiff
27 worked for this group and subsequently sued
28 this group in Federal District Court.

1 The Plaintiff because of his whistleblower
2 status in regards to the big medical center
3 has always been the recipient of retaliation
4 by medical providers and branded
5 with bogus terms such as paranoia
6 or schizophrenia.

7
8
9
10
11 The Plaintiff affirms that the foregoing is
12 true and correct, under penalty of perjury,
13 at Lancaster, South Carolina.

14
15 January 5, 2016 Benjamin L. Anderson
16 Benjamin L. Anderson
17 Pro Se

18
19
20
21
22
23 Angela D. Wheeler

24 My Commission Expires November 13, 2023
25
26
27
28

1 Benjamin L Anderson
2 445 W. Rebound Road
3 Lancaster, South Carolina
4 908-328-5708

FILED-CLERK COURT
GREENVILLE CO. S.C.
PAUL B. WICKENSIMER

2016 APR 19 AM 11 35

6 IN THE COURT OF COMMON PLEAS
7 COUNTY OF GREENVILLE

CASE NO: 2015-CP-23-07324

10 Benjamin L Anderson
11 Plaintiff

Judge Letitia Verdine

DATE: April 25, 2016

13 V

15 Barksdale Medical Center
16 Defendants

AFFIDAVIT OF Sammie Hemphill

Board of Trustees

New Independent Methodist
CHURCH

Attached Exhibits: A

19 I make oath and say:

20 I affirm that I am a member of the Board of
21 Trustees at New Independent Methodist Church
22 in Great Falls, South Carolina. I have first-
23 hand knowledge of the facts set forth.

24 I am competent as a witness for Minister,
25 Benjamin L Anderson. I affirm that I have
26 known Minister Anderson for several years
27 as a stable individual, who always demonstrated
28 that he was stable and intact with reality.

EXHIBIT D
AFFIDAVIT OF BOARD OF TRUSTEE
CHURCH

1 Minister Anderson moved from Greenville
2 in February, 2014 and began regular attendance
3 at New Independant Methodist Church.
4 I affirm that Minister Anderson was voted
5 into the Ministerial Staff about October, 2015.
6 by the Board of Trustees. I affirm he has
7 attended and supported the Church's bible
8 study as well as Sunday school study. He
9 has also went to other surrounding
10 communities in support of their Church
11 functions. Minister Anderson is well liked by
12 the Pastor of our Church as well as the
13 assistant Pastor. I affirm that he is
14 mentally sharp and accurate when it comes
15 to presenting scripture from the bible to
16 our Church. I affirm that no one can say
17 he is paranoid and delusional and know him.
18 In the realm of the Kingdom of God. God does
19 not call men into the Gospel ministry who
20 have mental health problems.

21
22 I affirm that the foregoing is true and
23 correct, under penalty of perjury at
24 Great Falls, South Carolina on April 15 2016

25 Sammie Hemphill
26 ~~Sammie Hemphill~~
AFFIANT and Board Member

27 signature notarized by
28 Pamela J. Rummy

State of South Carolina
Court of Choler

on 4-15-2016
My Commission Expires
9-18-2023

Certificate of License

THIS IS TO CERTIFY

Bro. Ben Anderson

who has given evidence that God has called him into

THE GOSPEL MINISTRY

was Licensed to preach the Gospel as he may have opportunity, and to exercise his gifts in the work of the Ministry

by Antioch Missionary Baptist Church

at 7547 Emerald St. Riverside, CA

on the 27th day of April, 1983

Lis. Alicestyne Smith
Clerk

Rev. Jay C. Edwards
Pastor

Certificate of Ordination

Bro. Ben Anderson

having been chosen one "of good report, full of the Spirit and of wisdom," and capable of using the office well, was set apart publicly to the office and work of

DEACON

by Antioch Missionary Baptist Church

at Riverside, California

on the 22nd day of October, 1982

Sis. Alcestyne Smith
Clerk

Rev. Jay C. Edwards
Pastor

1 Benjamin L. Anderson

2 445 W. Rebound Road

3 Lancaster, S.C. 29720

4 980-328-5708

5 A

FILED - CLERK OF COURT

COLUMBIA, S.C. S.C.

PAUL B. WICKENGINER

2016 MAY 9 PM 1 02

6 IN THE COURT OF COMMON PLEAS

7 Greenville, South Carolina

10 Benjamin L. Anderson

11 Plaintiff

13 V

15 Davita Upstate Dialysis

16 Defendant

CASE NO: 2014CP-23-06070

Recusation

Judge Letitia Verdin

Judge Edward W. Miller

18 The Plaintiff/Appellant request that the above
19 mentioned Judges recuse themselves from any
20 future proceeding, hearings, motions with regards
21 to Plaintiff, Benjamin L. Anderson. This is because
22 of the flagrant prejudice, bias towards the
23 Pro Se litigant always tipping the scales of justice
24 towards the defendant to help them. The Plaintiff
25 needs impartiality.

27 May 9, 2016

Benjamin L. Anderson

Pro Se Litigant

EXHIBIT E

FILED-CLERK OF COURT
GREENVILLE, S.C.
PAUL B. WICKENHAUSER
2016 APR 25 AM 10 51

1 Benjamin L. Anderson
2 445 W. Rebound Road
3 Lancaster, South Carolina
4 980-328-5708
5 Pro Se

6 IN THE COURT OF COMMON PLEAS
7 GREENVILLE, SOUTH CAROLINA

8
9
10 Benjamin L. Anderson) CASE NO: 2015-23-07324
11 Plaintiff) Respiratory Care
12) Practitioner
13 V.) License Renewal
14) STATE OF SOUTH CAROLINA
15 Barksdale Medical Center) JUDICIAL NOTICE
16 Defendant) DATE:
17
18

19 The Plaintiff in the above captioned case
20 submits this document to bring the Courts
21 attention to the damaging disparagement to
22 the Plaintiff's ability to return to his profession
23 to earn a living as a Respiratory Care Practitioner
24 in the State of South Carolina and that
25 Dr. Barksdale knew or reasonably should have known,
26 Your attention to line (9) on second page.

27
28 Apr. 22, 2016

Benjamin L. Anderson
Benjamin L. Anderson
D. C.

EXHIBIT F
Application For Rec
License S.C.



S.C. Department of Labor, Licensing and Regulation
Board of Medical Examiners

110 Centerview Drive, Suite 202
Columbia, SC 29210
Post Office Box 11289
Columbia, SC 29211
(803) 896-4500



**APPLICATION FOR A REACTIVATION OF
RESPIRATORY CARE LICENSE**

IMPORTANT: I hereby make application for reactivation of my license to practice as a Respiratory Care Practitioner in the state of South Carolina and submit the following statement of facts with the required supporting documents: *The application form itself is a public document obtainable under the Freedom of Information Act.* The Application fee must accompany the application. **The application fee is non-refundable.**

(Please type or print clearly)

Applicant's Name: Anderson Benjamin Lewis
Last First Middle

Home Address: 445 West Reboard Road
Lancaster South Carolina 29720
City State Zip

Home Phone: (980) 328-5708

S.C. Respiratory Care License Number: 1881

Email Address: [Signature]

S.C. Medical Director: Roger St. Francis @Charleston, SC

Place of Employment in South Carolina: NA

Street _____

City State Zip

Business Phones () _____

*The SSN is not subject to disclosure as public information. The disclosure of the SSN for identification purposes is authorized and mandated by federal statutes requiring state medical boards to report to the Healthcare Integrity and Protection Data Bank (HIPDB) and the National Practitioner Data Bank (NPDB), among other things. (Revised 11/15/12)

CONTROL # _____
CHECK # _____
AMOUNT \$ _____

I. PERSONAL DATA

Answer Yes or No

1. Has your Respiratory Care certificate/license ever been revoked, suspended, reprimanded, restricted or placed on probation by any licensing board or any other entity? NO
2. Have you ever had an application to practice as a Respiratory Care Practitioner denied or refused by another licensing board or entity? NO
3. Have you ever had hospital privileges denied, revoked, suspended or restricted in any way? NO
4. Have you ever resigned from any hospital, institute or health care facility in lieu of disciplinary action? NO
5. Are you currently under any investigation or the subject of pending disciplinary action by any medical licensing board or other entity? NO
6. Is your Respiratory Care Practitioner's certificate/license currently restricted in any way by any medical licensing board, health care facility or other entity? NO
7. Currently or within the last ten years, have you been treated for any physical, mental, or emotional condition that might interfere with your ability to competently and safely perform the essential functions of practice as a Respiratory Care Practitioner? NO
8. Has your ability to practice as a Respiratory Care Practitioner ever been impaired by any physical or mental illness or by the use of alcohol or drugs? NO
9. Currently or within the last ten years, have you developed any disease or conditions, physical, mental or emotional, (e.g. bipolar disorder, schizophrenia, paranoia or any other psychotic disorder) that might interfere with your ability to competently and safely perform the essential functions of practice as a Respiratory Care Practitioner? NO
10. Have you ever discontinued practicing as a Respiratory Care Practitioner for any reason for one month or more? NO
11. Have you ever been arrested, indicted, or convicted, pled guilty, or pled nolo contendere for violation of any federal, state or local law? (other than a minor traffic violation)? NO
12. Have you ever been known by any other name or surname? NO
13. Have you ever voluntarily surrendered a Respiratory Care Practitioner's certificate/license? NO
14. Have you ever been discharged involuntarily from employment? If so, give full details. NO

NOTE: If you answered "yes" to any of the above questions (1-14), you must attach a full written explanation pertaining to that particular question.

POLICY OF THE BOARD REQUIRES INDIVIDUALS WHO HAVE NOT ACTIVELY PRACTICED RESPIRATORY CARE FOR FIVE (5) YEARS OR MORE TO TAKE AND PASS THE NBRC ENTRY LEVEL EXAMINATION. PROOF OF PASSAGE MUST BE PROVIDED TO THE BOARD BEFORE YOUR LICENSE WILL BE REACTIVATED.

II. PROFESSIONAL INFORMATION

1. Do you plan to care for cardio-pulmonary patients in a home care setting? no
If yes, you must attach a statement signed by your physician sponsor detailing the duties that you will perform and type of supervision you will receive in performing these duties.
2. Since your Respiratory Care Practitioner's license was placed on inactive status, list all employment activities in chronological order. Please include your place(s) of employment, date(s) of employment, job title and job duties:

Place(s) of Employment	Dates of Employment	Job Title & Job Duties

(Attach additional sheet if needed)

List all states in which you have ever been licensed or certified to practice as a Respiratory Care Practitioner. All State licenses/certificates must be verified directly from each state board. (form enclosed)

State	License/Certificate Number	Date Issued	Basis of Licensure/Certification	Status Active/Inactive
California	RCP 9302	1980	Clinical practice	inactive
Maryland	L0002611	3-26-97	" "	inactive
South Carolina	1881	1994	" "	inactive

III. REPORT OF CONTINUING EDUCATION

In order to reactivate your Respiratory Care License, you must provide documentation of at least thirty (30) hours of continuing medical education. Proof of attendance must be provided in the form of certificate, diploma or printout. These hours must be obtained within the last 2 years of this application.

Dates Attended	Sponsoring Agency	Name of Topic	Contact Hours
5-5-15	Western Schools	Depression in older Adults	3
5-22-15	Western Schools Cystic Fibrosis-Diagnosis & Treatment	→	3
4-28-15	Western schools	Artificial Airways	5
6-12-15	" "	ABG Interpretation	4
6-12-15	" "	CPAP/BiPAP-Sleep disorders	3
5-5-15	" "	Mechanical Ventilation	4

(Attach additional sheet if needed)

5-5-15 " " Ethical Issues and Decisions for RT 3
TOTAL CONTINUING MEDICAL EDUCATION HOURS Acute Respiratory Distress Syndrome 3
 5-22-15 " " (30 HOURS OF CME REQUIRED)

III. REPORT OF CONTINUING EDUCATION
(continued)

APPROVED CONTINUING EDUCATION PROGRAMS

All programs sponsored or approved by one of the following organizations or their sponsors may be used to meet the continuing education requirement of the South Carolina Respiratory Care Practice Act.

- American Association for Respiratory Care, or its sponsoring organizations:
 - American Thoracic Society
 - American College of Chest Physicians
 - American Society of Anesthesiologists
- American Heart Association
- The Society for Critical Care Medicine
- The American Lung Association
- The South Carolina Society for Respiratory Care
- Allied Health Education Centers of the South Carolina Consortium of Community Teaching Hospitals

Accredited institutional continuing education programs will be accepted with certificate of attendance that specifies total number of contact hours. These continuing education programs must have been accredited by groups such as the Accreditation Council for Continuing Medical Education or the American Nurses Credentialing Center's Commission on Accreditation.

If the program is not approved by one of the above organizations, approval must be sought from the Respiratory Care Committee of the South Carolina Department of Labor, Licensing and Regulation. This approval must be sought 30 days prior to the program. Programs not having prior approval will be subject to review and may be denied. Approval must be applied for on forms provided by the Board. Content for these programs must be relevant to the professional growth and development of the Respiratory Care Practitioner.

Academic courses may not be used to meet the continuing education requirement of the South Carolina Respiratory Care Practice Act. Medical directors no longer have signature approval authority. If your continuing medical education credits are audited, you must show proof of attendance at the programs that are sponsored or approved by one of the above organizations. Proof of attendance must be provided in the form of a certificate, diploma or printout. Please direct any questions regarding the need for approval of continuing education programs to the Board office.

IV. AFFIDAVIT

I, Benjamin Lewis Anderson, being duly sworn, depose and say that I am the person described and identified, that I am of good moral character and that I am the person named in the documents presented in support of this application. By filing this application, I hereby authorize and consent to an investigation of my fitness and qualifications to practice respiratory care in South Carolina.

I hereby authorize all hospitals, medical institutions or organizations, my references, personal physicians, employers (past and present), business and professional associates (past and present) and all governmental agencies and instrumentalities (local, state and federal) to release to this licensing Board any information, files or records requested by the Board for its evaluation of my professional, ethical and physical qualifications for licensure in South Carolina. I hereby release, discharge and exonerate the State Board of Medical Examiners of South Carolina, its agent or representative, and any person or organization furnishing information from any and all liability of every nature and kind arising out of the furnishing of documents, records or other information to the Board in connection with this application.

I have carefully read the questions in the foregoing application and have answered them completely, without reservations of any kind, and I declare that all statements made by me herein are true and correct. Should I furnish any false or incomplete information in this application, I hereby agree that such act shall constitute the cause for denial or revocation of my license to practice in South Carolina.

I hereby authorize the Board of Medical Examiners of South Carolina to utilize my Social Security Number in making necessary reports to the Federation of State Medical Boards' Physician Data Center for compilation of information about applicants and licensees in order to coordinate licensure and disciplinary activities between the individual States' licensing boards and to federal and state entities, as required by law.

Applicant's Signature Benjamin L Anderson

Date 4-20-16

Sworn to me and subscribed before me this 20th

day of April, 2016

Signature of Notary Public [Signature] (L.S.) South Carolina

My Commission Expires: September 12, 2023



LANCE J WALTERS
NOTARY PUBLIC
SOUTH CAROLINA
MY COMMISSION EXPIRES
SEPTEMBER 12, 2023

Shah Associates, M.D., P.A.

Cardiology

Vinod K. Shah, M.D., F.A.C.C.
A. A. Patil, M.D., F.A.C.C.
Mahesh P. Shah, M.D., F.A.C.C.
Anantha K. Rao, M.D., F.A.C.C.
Anil K. Shah, M.D.

Gastroenterology

Umed K. Shah, M.D., F.A.C.G.
Anil R. Shah, M.D., F.A.C.G.
Nayan R. Shah, M.D., F.A.C.G.

Pulmonary

Kiran D. Mehta, M.D., F.C.C.P.

Neurology

Beena A. Shah, M.D.

Rheumatology

Robert W. Timmons, M.D.

Internal Medicine

Bhaskar A. Jhaveri, M.D.
David M. Federle, M.D.
Mary Kramer, M.D.
Avani D. Shah, M.D.
Pranay Patel, M.D.
Mohammad A. Rahman, M.D.
Dhiren Shah, M.D.
Roy F. Bunnies, M.D.

Psychology

John C. Fowles, Ph.D.

Hematology/Oncology

M.V. Pillai, M.D., F.A.C.P.

Gerontology

Anwar I. Munshi, M.D.
Rita B. Jhaveri, M.D.

Pediatrics

Ila V. Shah, M.D., F.A.A.P.
M.F.O. Lateef, M.D., F.A.A.P.
Kirit Patel, M.D., F.A.A.P.
Amit Shefi, M.D., F.A.A.P.
Nitin Chopde, M.D.
Upender K. Munshi, M.D.

Family Practice

John F. Fenwick, M.D.
J. Patrick Jarboe, M.D.
Robert J. Bauer, M.D.
John L. Bennett, M.D.

Radiology

Halappa G. Hakkal, M.D.

Hollywood Office

Philip J. Bean Medical Center
24035 Three Notch Road
Hollywood, MD 20636
301-373-7000

Leonardtwn Offices

Shanti Medical Center
26840 Point Lookout Rd. • Ste. 101
Leonardtwn, MD 20650
301-475-5579 • 301-475-5524

St. Mary's Medical Arts Building

22650 Cedar Lane Court
Leonardtwn, MD 20650
301-475-5021 • 301-475-5023

Prince Frederick Office

Calvert Medical Office Bldg.
110 Hospital Road, Suite 305
Prince Frederick, MD 20678
410-535-4333

Lexington Park Office

22335 Exploration II • Suite 1030
Lexington Park, MD 20653
301-863-7041 • 301-863-9000

California Office

23265 By the Mill Road
California, MD 20619
301-863-5835

Charlotte Hall Offices

Charlotte Hall Medical Center
29795 Three Notch Road
Charlotte Hall, MD 20622
301-884-7322 • 301-884-7330

Village Medical Annex

28160 Old Village Road • Ste. A
Mechanicsville, MD 20659
301-884-4666

Washington Area

851 University Blvd., #32
Silver Spring, MD 20903
301-445-4430

September 25, 1997

RE: BEN ANDERSON

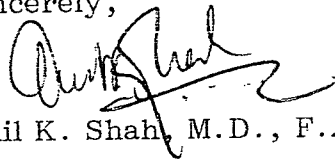
To Whom It May Concern:

It gives me great pleasure to write a letter of recommendation on behalf of Mr. Ben Anderson.

Ben joined St. Mary's Hospital, Leonardtown, MD in March 1997 as Director of Pulmonary and Electroencephalography Department. Being a cardiologist and working in the department on a daily basis with Ben, I had the opportunity to observe and experience first hand the impact of his skills with the department. There was significant improvement in the overall working environment of the department and boost in the employee morale because of his leadership ability. He developed an excellent rapport with the employees and was well liked by everyone. I am confident that Ben will excel at whatever he undertakes.

Please let me know if I can be of any further assistance.

Sincerely,



Anil K. Shah, M.D., F.A.C.C.

AKS:krp
092597



St. Mary's Hospital

September 23, 1997

To Whom It May Concern:

For the period of March 1997 through September 1997 I have worked with **Benjamin Anderson**, Director of Cardiopulmonary. He has conducted the administrative activities in a professional manner including developing a sleep lab proposal and the operating budget. Mr. Anderson has conducted himself in a pleasant and courteous manner during his employment at St. Mary's Hospital.

Sincerely,

Peggy Naleppa
Vice President for Systems Integration

PN:dph

September 25, 1997

To Whom It MAY CONCERN

RE: Letter of Reference

Benjamin L. Anderson, RRT

I have had the opportunity of working under Ben Anderson for 6 months. Within this short period of time he has brought the Cardiop. Department up 3 to 4 grades higher on the scale. He brought with him modern ideas, and teaching skills that we at St. Mary's Hospital will definitely miss. Ben Anderson is a good leader + Boss and will be miss by us all.

Donis McElwain CMA

Benjamin L. Anderson, R.C.P., RRT, BS
Director, Cardiopulmonary/EEG



St. Mary's Hospital

P.O. Box 527, 25500 Point Lookout Road, Leonardtown, Maryland 20630
301/475-6066 (Fax) 301/475-6189

CEDARS-SINAI (C S) MEDICAL CENTER

TO TO WHOM IT MAY CONCERN

FROM

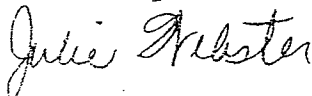
DATE January 26, 1990

RE Benjamin L. Anderson, RCP, RRT
Respiratory Therapy Manager
Day Shift

I have known Mr Anderson for approximately four months. He has always conducted himself in a professional and courteous manner. I have observed him to have excellent rapport and communication with those under his supervision.

It has been my pleasure to interact with him as a night shift supervisor here at Cedars-Sinai Medical Center.

Sincerely,



Julie Webster, RCP, CRTT
Supervisor
Cedars-Sinai Medical Center



EDMUND T. DOMBROWSKI, M. D., F. A. C. S.
ORTHOPEDIC SURGERY
Redlands Medical Center

July 27, 1988

RE: BEN ANDERSON
DIRECTOR, RESPIRATORY SERVICES
LOMA LINDA COMMUNITY HOSPITAL

TO WHOM IT MAY CONCERN:

This will verify that I have known Mr. Anderson for approximately ten years. During that period of time I have called on Mr. Anderson to do many respiratory procedures for me, including pulmonary evaluation, blood gases, pulmonary function, etc.

Mr. Anderson has always been available, has always been cheerful and his work is completely reliable.

Mr. Anderson conducts himself in an extremely professional manner. His department has always been outstanding in every respect.

I cannot give Mr. Anderson too high a recommendation.

Accordingly, this letter will verify, in my opinion, that Mr. Anderson is the most highly qualified person anyone could find to direct a respiratory service anywhere.

Sincerely,

E. T. DOMBROWSKI, M.D.
FORMER CHAIRMAN
DEPARTMENT OF ORTHOPAEDIC SURGERY
LOMA LINDA COMMUNITY HOSPITAL
ATTENDING ASSISTANT PROFESSOR
LOMA LINDA UNIVERSITY

ETD/mk