

23974

STATE OF SOUTH CAROLINA  
IN THE COURT OF APPEALS

ORIGINAL

Appeal from Greenwood County

Donald B. Hocker, Circuit Court Judge

THE STATE,

RESPONDENT,

V.

WILLIE THOMAS GRAY,

APPELLANT

RECEIVED

APPELLATE CASE NO. 2017-000160

JUN 21 2018

RECORD ON APPEAL

SC Court of Appeals

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State of South Carolina                    )  
                                              ) Court of General Sessions  
County of Greenwood                    )

2014-GS-24-1903

State of South Carolina                    )  
                                              ) Transcript of Record  
                                              )  
                                              )  
Willie Thomas Gray                        )  
                                              ) Defendant                                    )

January 17-19, 2017  
Greenwood, South Carolina

B E F O R E:

Honorable Donald B. Hocker, Judge

A P P E A R A N C E S:

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Carson Penny, Assistant Solicitor  
Attorneys for the State

Janna Nelson, Public Defender  
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Attorneys for the Defendant

Joy E. Holston  
Official Court Reporter

1           THE COURT: Okay, ladies and gentlemen, we will be  
2 starting the trial in the case of the State of South  
3 Carolina versus Willie Thomas Gray. Mr. Gray, would you  
4 stand and just very briefly face the jury panel.

5           (Whereupon, Mr. Gray stood and faced the jury panel.)

6           THE COURT: Okay, you can have a seat. Let me  
7 explain to you, ladies and gentlemen, that Mr. Gray has  
8 been indicted by the Greenwood County Grand Jury and  
9 charged or indicted with the offense of attempted murder.  
10 Now, let me explain to you, the fact that Mr. Gray has  
11 been charged, arrested, indicted with a criminal offense  
12 is in no way, is in no indication whatsoever concerning  
13 the guilt or innocence of Mr. Gray. The indictment  
14 serves one purpose and one purpose only. It gets the  
15 case to the point where we are today and that being the  
16 trial on this charge. But the fact that he has been  
17 indicted is in no way proof of any of the allegations that  
18 the indictment contains. But I will read the indictment  
19 for you. It is indictment 14-GS-24-1903. And it states  
20 or alleges rather as follows, that Willie Thomas Gray on  
21 or about July 3, 2014 in Greenwood County willfully and  
22 unlawfully with the intent to kill and with malice  
23 aforethought attempted to kill Janice Diane Holloway in  
24 violation of section 16-3-29, code of laws for South  
25 Carolina. I am going to ask you a series of questions

1 judge of the facts in this case. And, lastly, please keep  
2 an open mind in this case. Don't make any conclusion,  
3 reach any conclusions or make a decision in this case  
4 until all of the evidence has been presented to you, the  
5 lawyers have made their closing arguments, and I have  
6 instructed you on the law applicable to this case. Does  
7 the State have any objections to the Court's preliminary  
8 instruction?

9 MS. WHITE: No, sir.

10 THE COURT: And the Defense?

11 MS. NELSON: No sir, Your Honor.

12 THE COURT: Okay. Thank you very much. The lawyers  
13 now will make their opening, opening arguments to you.  
14 Not evidence in this case. It's just their statement of  
15 what they believe this case is about; what they believe  
16 the evidence will show. So the State will begin first,  
17 okay. Solicitor Penny, you ready?

18 MS. PENNY: I am, Your Honor.

19 THE COURT: You may proceed.

20 MS. PENNY: Early on July 3rd, 2014, a Greenwood  
21 police officer heard a woman scream. He went to  
22 investigate. What he found was a woman beaten, beaten by  
23 her boyfriend, beaten with a lead pipe, beaten in the  
24 street, beaten so badly that her arm was shattered. What  
25 would have happened had that police officer not heard her

1 scream? Did the police find the Defendant, Willie Gray,  
2 that night? No. Willie Gray ran. He ran from Janice  
3 Holloway, the victim. He ran from police. He ran from  
4 what he did to her and from her screaming. We will show  
5 to you today and throughout this trial that Willie Gray is  
6 guilty of attempted murder. You heard a little bit from  
7 the Judge about how we'll do that. We'll do that by  
8 proving to you beyond a reasonable doubt that he is guilty  
9 of all of the evidence, all of the elements of attempted  
10 murder. Now, we need you, the jury to do that for us. We  
11 four lawyers can talk until we are blue in the face. The  
12 Judge can tell you all about the law and make legal  
13 rulings. The bailiffs can keep you in line. The court  
14 reporter can keep records of all of this for you, but we  
15 can't do it without you, the jury. We need you to find  
16 the facts, and you'll do that through applying the burden  
17 of reasonable doubt. So what is a reasonable doubt? I  
18 know you've heard this word a lot now. It's not beyond  
19 all doubt. It's not beyond any doubt. It's not beyond  
20 some imaginary doubt, but it's beyond a reasonable doubt,  
21 reasonable doubt. It's something that leaves you firmly  
22 convinced of his guilt of attempted murder at the end of  
23 the day. So how do we do that? We do that through  
24 testimony that you'll hear up here, evidence. Testimony  
25 through photographs that we introduce through medical

1 records and just like Judge Hocker just said, what I say  
2 is not evidence, only what you hear from here and see up  
3 there. The State will use evidence to show you this.  
4 Now, we cannot tell you what Ms. Holloway is going to say  
5 today. We don't know. We do know that on July 3rd, 2014,  
6 a police officer heard her scream and went to investigate.  
7 We do know that when he pulled up to the scene, Willie  
8 Gray started to walk faster, and then he ran. We do know  
9 that when the police came and she talked to the police,  
10 she talked to EMS, and she talked to hospital staff. She  
11 told them that Willie Gray beat her with a lead pipe.  
12 When she talked to police, she lay in the street, arm  
13 shattered, in such excruciating pain that she was  
14 retching. That's what we know she told people that day.  
15 That's what we know happened to her that day. But we  
16 don't know what she's going to say today. And as we go  
17 about our business of proving to you that Willie Gray  
18 committed attempted murder when he assaulted Janice  
19 Holloway, I want you to think about why she might go back  
20 on what she said to the police, to EMS, and to hospital  
21 staff that day. I want you to think about that. Is it  
22 because she still loves him? Is it because she's forgiven  
23 him? Is it because she's afraid of leaving him? Is it  
24 because she's afraid of him? We're not here to judge  
25 Janice Holloway today. She's not the one who's on trial.

1 Willie Gray is on trial. He's on trial for attempted  
2 murder, and we intend to prove to you that he is guilty.  
3 Thank you.

4 THE COURT: Okay. Thank you, Solicitor. Defense  
5 ready?

6 MS. ABLE: Yes, sir.

7 THE COURT: All right. Ms. Able?

8 MS. ABLE: Thank you, Your Honor. Good afternoon,  
9 ladies and gentlemen. Hell hath no fury like a woman  
10 scorned. We've probably in this room all heard that  
11 statement. We've probably all in our mind when I said  
12 that, something came to our mind. We probably all have an  
13 interpretation of what it means. I think what it means is  
14 a scorned woman is mad, she's angry and probably more  
15 times than not, she's out to get revenge and that's the  
16 kind of case we are dealing with today here in this  
17 courtroom. Ms. Janice Holloway was a scorned woman. Back  
18 in the summer of 2014, Ms. Holloway confirmed that my  
19 client, Mr. Gray, had been running around on her. She was  
20 a scorned woman. She was mad, she was angry, and she was  
21 out to get revenge. On July 2nd, 2014, Ms. Holloway said,  
22 you know what, I'm going to go out, I'm going to have some  
23 fun and that's what she did. She went to a party down on  
24 Greer Street here in Greenwood County. Some of you may be  
25 familiar with that street, and Ms. Holloway is not shy to

1 tell you there was drug use going on, there was alcohol  
2 use going on down there, and Ms. Holloway partook in it.  
3 Now, on that night, a lot of people were there. She kind  
4 of got into it with a few other females down there and the  
5 argument which led to a physical argument, fight, was over  
6 drugs. It had been a long night. She had been drinking.  
7 She had had these drugs. The night had taken a toll. She  
8 said I'm going to go on home. It was about July 3rd at  
9 this point. She's walking home. She happens to see law  
10 enforcement. She sees an opportunity and she takes it.  
11 She's a scorned woman, mad, she's angry, and she's out for  
12 revenge. That's what led us here today, ladies and  
13 gentlemen. Now, we, the Defense, are not here today to  
14 say nothing happened to Ms. Holloway. Something clearly  
15 happened. We're here to tell you it wasn't Mr. Gray that  
16 caused these injuries. There are several things that I  
17 would like you guys to pay attention to during the course  
18 of this trial. Ms. Penny has already touched on one. My  
19 client, Mr. Gray, was never found that night on-scene, and  
20 there are no eyewitnesses to say he was anywhere near that  
21 party. Second, I want you to pay attention to there's no  
22 lead pipe. Law enforcement didn't find a pipe that  
23 magically appeared and went away. There's no pipe and  
24 there's no witness. Again, Ms. Penny touched on the State  
25 has to prove this case beyond a reasonable doubt. As she

1 told you, the State has the burden in our State of South  
2 Carolina and this Nation to prove every element of every  
3 crime they charge. Now, in this case, they've decided to  
4 charge Mr. Gray with attempted murder. They have to prove  
5 to you that he attempted to kill Ms. Holloway. I'm  
6 telling you, ladies and gentlemen, I don't think they can  
7 do that beyond a reasonable doubt. They can't leave you  
8 all firmly convinced of every element of that charge  
9 beyond a reasonable doubt. At the end of the day, as I've  
10 asked, I've asked you to pay attention, pay attention to  
11 those two big pieces, no pipe, no witness and at the end  
12 of the day I want it to resonate with you that Ms.  
13 Holloway was a scorned woman. She was mad, she was angry,  
14 and she was out to get that revenge. I'd like for you to  
15 find my client not guilty. Thank you.

16 THE COURT: Thank you, Ms. Able. Is the State ready  
17 to call its first witness?

18 MS. PENNY: We are, Your Honor. We call Officer Jeff  
19 Crisp.

20 MS. ABLE: Your Honor, can we approach?

21 THE COURT: Sure.

22 (Whereupon, a bench conference was held in the  
23 presence of the jury but out of the hearing of the  
24 jury.)

25 THE COURT: You may proceed, Solicitor.

1 JEFF CRISP, being  
2 first duly sworn, testified as follows:

3 DIRECT EXAMINATION

4 By Ms. Penny:

5 Q Hi, Captain Crisp.

6 A How are you?

7 Q Good. How are you doing today?

8 A I'm well.

9 Q If you will, please state your name for the record?

10 A Captain Jeffrey Crisp with the Greenwood Police  
11 Department.

12 Q It may seem obvious, but what do you do, Captain  
13 Crisp?

14 A Currently, I'm the Captain over Administration at  
15 Greenwood Police Department for eleven years now.

16 Q How long have you been in Administration?

17 A Two years.

18 Q Okay. So before that what were you doing?

19 A I was on patrol as a lieutenant at the time for about  
20 a year-and-a-half.

21 Q Okay. Have you been at the Greenwood Police  
22 Department your whole career?

23 A I have.

24 Q In July 2014, were you working on patrol as a road  
25 officer?

1 A I was, as a lieutenant at the time; supervisor over a  
2 shift.

3 Q Okay. What were your duties then?

4 A As a lieutenant on shift, current duties are to  
5 supervise actions of other officers, make sure everything  
6 goes correctly, approve reports and answer calls.

7 Q Were you out on the road then sometimes?

8 A I was.

9 Q How would those duties be different from the duties  
10 of an investigating officer?

11 A Investigators, like patrol officers and my job at the  
12 time, we take initial reports, document all of the facts  
13 from those incidents. And depending on the case, it would  
14 go forward to an investigator to follow up on any leads or  
15 any other investigations mainly due because patrol  
16 officers don't have time to follow up on cases.

17 Q Do you recall if you were working on July 3rd, 2014?

18 A I was.

19 Q In the early morning?

20 A Correct.

21 Q Were you early that morning involved in an  
22 investigation involving Willie Gray?

23 A I was.

24 Q Do you remember who first arrived on that scene?

25 A Officer Mike Sathre was the first to be there.

1 Q Okay. Could you please tell us why Officer Sathre  
2 isn't here to explain this himself?

3 A This incident occurred on July the 3rd. Officer  
4 Sathre passed away on July 23rd, twenty days later.

5 Q I'm sorry to hear that. Do you know why Officer  
6 Sathre first decided to investigate the Defendant and the  
7 victim that night?

8 A I do.

9 MS. NELSON: Objection, speculation.

10 THE COURT: Solicitor, lay a foundation and see where  
11 that knowledge came from and then we'll see if, whether or  
12 not the Defense wants to renew its objection.

13 MS. PENNY: I would argue that, excuse me.

14 THE COURT: That's all right. Go ahead.

15 Q Can you just tell us how you came to be involved that  
16 night?

17 A I can. I was second officer on the scene. I say  
18 second: I think I was the first one to speak with Officer  
19 Sathre. Sathre arrived on the scene. I made contact with  
20 him and he was actually in the process of getting off  
21 shift. So I took all of the facts directly from him in  
22 order for me to write the incident report so he can go  
23 home.

24 Q Okay. And so in that exchange of facts, did he tell  
25 you how he first---

1 A He did.

2 MS. NELSON: Objection, hearsay.

3 MS. PENNY: Your Honor, I would argue that an  
4 out-of-court statement is not hearsay if it's offered for  
5 the limited purpose of explaining why a government  
6 investigation is started.

7 THE COURT: Okay. Are you suggesting, Solicitor,  
8 that it's not offered to prove the truth of the matter  
9 asserted but just goes to this officer's state of mind  
10 insofar as his initial involvement with the case?

11 MS. PENNY: Yes, Your Honor.

12 THE COURT: Okay. All right. I'll overrule the  
13 objection.

14 Q Again, can you tell us why Officer Sathre first  
15 decided to investigate what was going on that night?

16 A Officer Sathre was on routine patrol in the area of  
17 Holloway when he overheard a screaming. He looked over.  
18 Drove down Holloway Street and saw Ms. Holloway lying on  
19 the sidewalk.

20 Q What drew him to that particular area?

21 A Loud screams coming from Ms. Holloway.

22 Q Okay. When he pulled up to the Defendant and the  
23 victim, did he speak to them initially?

24 A He spoke to Ms. Holloway. He did not speak to the  
25 Defendant.

1 Q Okay. And without telling me her answer, can you  
2 tell me what happened after she answered Officer Sathre?  
3 Was Mr. Holloway still around?

4 A He was not. He had since left the scene. He left  
5 prior to Sathre getting there. Sathre observed the  
6 subject walking off, but he did not get to speak with him.

7 MS. NELSON: Your Honor, this all sounds like facts  
8 offered to prove the truth of a matter, so we would again  
9 renew our hearsay objection.

10 THE COURT: All right. Let's, let's do this. Ladies  
11 and gentlemen of the jury, I'm going to need to, it's one  
12 of these matters that I had indicated to you may happen,  
13 send you back to the jury room. Let me talk with the  
14 lawyers a little bit about this particular legal issue and  
15 we'll get you back out shortly. Again, remind you, don't  
16 begin any discussions about this case among yourselves  
17 and, hopefully, we can get you back out shortly.

18 (Whereupon, the jury was excused from open court.)

19 THE COURT: Okay. Let's do this, I think probably to  
20 make sure we got a good handle on it. Let's take his  
21 testimony in-camera. Start back to when Officer Crisp  
22 arrives at the scene and his dialogue with, is it Vickery,  
23 is that?

24 MS. PENNY: Sathre.

25 MR. CRISP: Sathre.

1 MS. PENNY: S-A-T-H-R-E.

2 THE COURT: S-A, what?

3 MS. PENNY: T-H-R-E.

4 THE COURT: Okay. Sathre. Okay. And go through it,  
5 Solicitor, then he can start testifying as far as anything  
6 he particularly observed. I'll try to get a handle on  
7 this and see if it's going to be allowable or not. Okay.

8 MS. PENNY: And to be perfectly frank, Your Honor,  
9 the next question would be what happened when you arrived  
10 on the scene, what did you see.

11 THE COURT: Right. Right. I want you to go back and  
12 make sure the record is clear as far as what he learned  
13 from whatever Officer Sathre had seen or heard, whatever,  
14 and then we will go from there. So you're going to have  
15 to kind of backtrack a little bit.

16 MS. PENNY: Yes, Your Honor.

17 Q Captain Crisp, do you know who first arrived on that  
18 scene?

19 A I do, Officer Mike Sathre.

20 Q And as we discussed a few moments ago, we know that  
21 Officer Sathre isn't hear to explain to us himself because  
22 he passed shortly thereafter. Do you know why Officer  
23 Sathre first decided to investigate the Defendant and the  
24 victim?

25 A I do. When I arrived on-scene, I spoke with Officer

1 Sathre, personally. He says that he was on patrol when he  
2 heard loud screams coming from the area of Holloway. He  
3 turned on Holloway and observed Ms., I'm sorry, Ms.  
4 Janice.

5 Q Ms. Holloway?

6 A Yeah. Ms. Holloway on the sidewalk there. He asked  
7 her if everything is okay. She said no, he did it and  
8 points down the street and sees a black male walking away.  
9 And that's when this officer went to approach this guy.  
10 He took off running. And he came back to Ms. Holloway and  
11 asked her who it was and that's when she told him it was  
12 Willie Gray.

13 MS. PENNY: And that would be about all, even more  
14 than I would actually intend to illicit. I had hoped to  
15 sort of break it down and say without telling us what she  
16 said to him what happened next. And that's why I was  
17 going about it in that way.

18 THE COURT: Okay. So Officer Sathre tells you that  
19 he heard screaming, sees the alleged victim on the  
20 sidewalk. And then the alleged victim points towards the  
21 Defendant who is walking away, that he's the one that did  
22 whatever was done to her. Is that right?

23 MR. CRISP: Correct.

24 MS. PENNY: And, Your Honor, I'd also say that's not  
25 hearsay because of present sense impression, excited

1 utterance.

2 MS. NELSON: Your Honor, the officer is not under,  
3 the officer is not under the excitement of an event that  
4 causes him to make an excited utterance. Our position is  
5 that what they're trying to get in is Mr. Gray being there  
6 and walking away when all of that occurred before Captain  
7 Crisp got there through back-dooring hearsay from Officer  
8 Sathre, who, obviously can't be here to say what happened.  
9 And by the time Captain Crisp arrived, Mr. Gray was not  
10 there and Captain Crisp never saw anybody, as far as I  
11 know, except Ms. Holloway.

12 THE COURT: Right. All right.

13 MS. NELSON: And, I mean, I think he's going to be  
14 talking to Ms. Holloway himself and have a basis for  
15 looking for Mr. Gray without this impermissible hearsay  
16 testimony from a person who's not present talking about  
17 Mr. Gray supposedly leaving.

18 MS. PENNY: And we disagree that it's hearsay.

19 MS. NELSON: Disagree that what?

20 MS. PENNY: That it's hearsay.

21 MS. NELSON: I don't know what the exception would  
22 be.

23 MS. WHITE: Your Honor, the exception would be  
24 presence sense impression. Officer Sathre is saying this  
25 literally as Officer Crisp is coming on-scene and Mr. Gray

1 is walking away. And Officer Sathre had just witnessed  
2 him walk away. So it's very much a presence sense  
3 impression as to the he did it statement, that was Ms.  
4 Holloway's excited utterance.

5 MS. NELSON: But not to, that wasn't uttered to  
6 Captain at least not at that point. And if that's the  
7 definition of present sense impression then I could come  
8 back and I could testify in Court about anything anybody  
9 told me about what they saw at the time.

10 THE COURT: Well, Rule 803, I'm just going to read it  
11 to you as far as 803(1), Present Sense Impression. A  
12 statement describing or explaining an event or condition  
13 made while the declarant was perceiving the event or  
14 condition or immediately thereafter.

15 MS. NELSON: I would just argue again, Your Honor,  
16 that this person who made these, this present sense  
17 impression statement is not available as a witness.

18 THE COURT: Right. I understand. I understand.  
19 Well, if I were to find that present sense impression  
20 fits, if I were, the availability or lack thereof is not  
21 material.

22 MS. ABLE: Yes, sir.

23 MS. NELSON: Well, while we're on this issue, we're  
24 also, we also have a dispute that Ms. Holloway's  
25 statements were excited utterances, Your Honor, based on

1 other statements that she gave.

2 THE COURT: I'm not going to, if I allow it in, I  
3 don't think excited utterance fits. But I'm looking at  
4 804 now. Present sense impression might get it in, but  
5 let me look at 804. All right. 804 would not be  
6 applicable, so we'll look at 803. Well, let me just ask  
7 you this, Solicitor. At the end of the day is Officer  
8 Crisp going to be able to testify to basically the same,  
9 apart from the Defendant allegedly walking away from the  
10 scene, apart from that, as far as discussions with the  
11 alleged victim, is it going to be pretty much the same  
12 thing that Officer Sathre told him anyway?

13 MS. PENNY: Yeah, actually, he's had independent  
14 conversations with Ms. Holloway starting at the point that  
15 we are right now in time. So starting right where we are  
16 right now, we're not going to continue to have this issue.

17 THE COURT: All right. Okay.

18 MS. PENNY: And he has later conversations with her  
19 himself without that first part of the night.

20 THE COURT: All right. Let me ask you, Captain  
21 Crisp, how much time are we talking about from the time  
22 that Officer Sathre heard the screams, observed Ms.  
23 Holloway on the sidewalk, seeing the Defendant walking  
24 away, from that point till the point in time he was  
25 talking with you and conveying this information, how much

1 time are we talking about?

2 MR. CRISP: Five minutes tops. He was still  
3 searching for the Defendant once I arrived.

4 THE COURT: Okay. All right. I'm going to overrule  
5 the objection and allow it in under 803(1), present sense  
6 impression, because it was so close to the time that  
7 Officer Sathre observed and heard this information. So  
8 I'm going to allow it under 803(1).

9 MS. NELSON: I'm sorry. I was just going to say  
10 while the jury is still out, do we want to go ahead and  
11 address our, I know there will be an upcoming objection  
12 when Captain Crisp starts talking about what Janice  
13 Holloway said to him at the scene.

14 MS. PENNY: And we're not going to get into that at  
15 this point.

16 MS. WHITE: We may need to recall him.

17 MS. PENNY: We may need to recall him after the  
18 testimony, but we're not planning on getting into what she  
19 said to him at this point.

20 MS. NELSON: Okay. From what had already been said,  
21 I thought you were.

22 THE COURT: And, right.

23 MS. PENNY: And we also are not trying to get on the  
24 record, we'll get it in front of the jury, that at this  
25 point she tells Officer Crisp that he did it. We just

1 want to clarify that. That's not what we're trying to do.

2 THE COURT: Okay. All right. Anything else before  
3 we bring the jury out?

4 MS. NELSON: No sir, Your Honor.

5 THE COURT: All right. Very good. Mr. Willingham,  
6 if you'll bring the jury out.

7 (Whereupon, the jury came into open court at  
8 approximately 3:37 p.m.)

9 THE COURT: Okay. Let the record reflect the jury is  
10 back in the courtroom. Solicitor, you may proceed.

11 MS. PENNY: Thank you, Your Honor.

12 CONTINUE DIRECT EXAMINATION

13 By Ms. Penny:

14 Q When Officer Sathre pulled up to the Defendant and  
15 victim, did he speak to them that you know of?

16 A He spoke to Ms. Holloway, correct.

17 Q And without telling me what she said to him, can you  
18 tell me what happened after he spoke or while he was  
19 speaking to Ms. Holloway?

20 A Ms. Holloway pointed down the street as the subject  
21 is walking away.

22 Q So the person that was with ---

23 MS. NELSON: The same objection.

24 Q -- Ms. Holloway---

25 THE COURT: Wait a minute, Solicitor.

1 MS. NELSON: Just renewing my objection for the  
2 record, Your Honor.

3 THE COURT: Sure. Sure. You're protected.

4 Q So the person who is walking, who was with Ms.  
5 Holloway at that point was walking away?

6 A Correct.

7 Q Did they run?

8 A Not at the present time. They started walking fast  
9 and then eventually ran, yes.

10 Q And where was Ms. Holloway when you first made  
11 contact with her?

12 A She was currently lying on the sidewalk when I  
13 arrived.

14 Q Do you know what location she, what street she was  
15 on?

16 A If you turn on Holloway taking a right from Kirkland,  
17 so she was on the left side of the street on the sidewalk.

18 Q And that's in Greenwood County?

19 A It is, in the City of Greenwood.

20 Q What was she doing?

21 A She was lying on the sidewalk moaning as if she was  
22 in severe pain.

23 Q Did she appear to be injured?

24 A She did. She had injuries to her apparent right,  
25 right arm, her right leg and her hip as well.

1 Q Was her, other than moaning, what was her demeanor at  
2 that point?

3 A She was angry at pretty much, she was in pain I think.  
4 was her most concentration at the time.

5 Q Did you smell any alcohol on her?

6 A I don't recall.

7 Q Did she appear to be drunk, on drugs, or otherwise  
8 impaired?

9 A She did not.

10 Q Did EMS come to the scene?

11 A They did.

12 Q What happened when they came to the scene?

13 A EMS arrived, assessed Ms. Holloway. They then loaded  
14 her into the ambulance and transported her to Self  
15 Regional.

16 Q How do you know that they went to Self Regional?

17 A Because I was actually there and after the incident I  
18 went to Self Regional to speak with her.

19 Q Okay. Did she make a statement to you at the  
20 hospital?

21 A She did.

22 Q Did she make a written or recorded statement at the  
23 hospital?

24 A She did not. It was verbally to me.

25 Q Okay. Why is that?

1 A She was in so much pain at the time, she was in no  
2 condition to take a written report at the time.

3 Q Without telling me what she said, was her  
4 recollection of events at the time consistent with what  
5 she, what she had talked about and what she told y'all at  
6 the scene?

7 A It was---

8 MS. NELSON: Objection, hearsay.

9 THE COURT: Yeah. I think at this, I think at this  
10 point in time, you know, based upon what we discussed in,  
11 or outside the presence of the jury a moment ago, probably  
12 need to hold off on getting into anything related to him  
13 and Ms. Holloway at this time.

14 MS. PENNY: Yes, Your Honor.

15 THE COURT: So I'll sustain.

16 Q Was Ms. Holloway able to fill out a Victim's Rights  
17 Form?

18 A She wasn't able to sign one. We did fill one out for  
19 her, but I do not believe she signed one.

20 Q Why was that?

21 A She was unable to do so, because she was in the  
22 hospital in pain.

23 Q Was her demeanor changed in the hospital?

24 A I wouldn't say it changed. She was still upset and  
25 still in severe pain.

1 Q Did you ever see Willie Gray at the hospital that  
2 night?

3 A I did not.

4 Q Did you check with medical staff to discover the  
5 extent of her injuries?

6 A I did. After x-rays came back, it came back that she  
7 had a broken arm and severe bruising on her hips and arms.

8 Q Did you take photos of Ms. Holloway's visible  
9 injuries?

10 A I did.

11 MS. PENNY: Your Honor, may I approach?

12 THE COURT: You sure can.

13 Q I'm going to show you what's been premarked as  
14 State's Exhibits 1 through 4 and 7 through 11. Do you  
15 recognize these?

16 A I do. These are the photos I took at the hospital  
17 myself.

18 Q Are they a fair and accurate depiction of her  
19 injuries that night?

20 A They are.

21 MS. PENNY: Your Honor, I move to admit these  
22 photographs into evidence.

23 THE COURT: Okay. And, and what numbers are those?

24 MS. PENNY: Those are State's Exhibits 1 through 4  
25 and 7 through 11.

1 THE COURT: Okay. All right. 1 through 4 and 7  
2 through 11.

3 MS. PENNY: They've been premarked and already shared  
4 with Defense Counsel.

5 THE COURT: All right. And these are photographs  
6 that Officer Crisp took, is that correct?

7 MS. PENNY: Yes, Your Honor.

8 THE COURT: Okay.

9 MS. NELSON: We do have, we do have some objections  
10 to the photographs, Your Honor.

11 THE COURT: Okay. All right. Is this something that  
12 we can possibly discuss at sidebar?

13 MS. NELSON: Yes, sir.

14 THE COURT: Okay.

15 (Whereupon, a bench conference was held in the  
16 presence of the jury but out of the hearing of the  
17 jury.)

18 THE COURT: Okay. 1 through 4, 7 through 10 and not  
19 11 is into evidence on behalf of the State subject to  
20 objection from Defense.

21 (Whereupon, State's Exhibit numbers 1, 2, 3, 4, 7, 8,  
22 9 and 10 were admitted into evidence.)

23 Q Officer Crisp, I'm going to put these over here so we  
24 can talk about them together and everyone can see. This  
25 is State's Exhibit 1, one of the photos that you took that

1 night. Can you explain to me what you see in this photo?

2 A Severe bruising on her right leg. And especially on  
3 her thigh and right there towards her knee. There's also  
4 bruising on her lower leg as well. You know, the bruising  
5 at the top was the most severe towards her buttocks.

6 Q When you're talking about the most severe, right  
7 there?

8 A Correct.

9 Q This is State's Exhibit 2. Can you, I know some of  
10 the same injuries are shown. Can you explain to me what  
11 you see in this photo?

12 A A lot of the same bruising. Just more of an upper  
13 torso picture, as well.

14 Q What about her demeanor in this photo?

15 A She's in a lot of pain.

16 Q And this is the victim, right?

17 A It is. That is Ms. Holloway and these are, pictures  
18 were taken shortly after she, her arrival at the hospital.

19 Q Can you tell me, Captain Crisp, what you see in this  
20 photograph?

21 A There's more bruising around her buttocks area, like  
22 more in the shape of the weapon that she claimed was used  
23 on her.

24 Q Right there?

25 A All the bruising that was on her left, more towards

1 the hip. Yes, ma'am.

2 Q And then can you talk about this photo, please, and  
3 what you see?

4 A More pictures of her right leg that show us more of  
5 her calf area that also shows bruising.

6 Q Now, can you tell me what you see in this photograph?

7 A It looks like some more injuries to her right arm.  
8 Obviously, she's still in pain.

9 Q What did you, what did you learn about her right arm  
10 that night?

11 A That is the arm that was actually broken that she  
12 claims was struck with the pipe.

13 MS. NELSON: Objection to what she claims as hearsay,  
14 Your Honor.

15 THE COURT: All right. You learned that from medical  
16 personnel?

17 MR. CRISP: Correct.

18 THE COURT: Okay. Sustained. That would, that  
19 testimony will be disregarded by the jury and stricken  
20 from the record based upon hearsay.

21 Q Officer Crisp, what do you see in this photograph?

22 A A scratch on the right side of her neck.

23 Q And this is Exhibit 10, the last photograph. Can you  
24 tell us what, excuse me, what you see here?

25 A It looks like more of the same bruising on her right

1 side.

2 Q Is that a little bit of blood on this area?

3 A It appears so, yes ma'am.

4 Q Are all of these injuries on the same side of her  
5 body?

6 A They are.

7 Q What does that mean to you in your experience as a  
8 police officer? What might she have been doing that all  
9 of the injuries are on the same side of her body?

10 MS. NELSON: Objection, calls for speculation.

11 THE COURT: Well, I guess what we're going to need to  
12 do is if based upon his experience as a police officer, if  
13 he is able to or not. I don't know. I don't know what  
14 kind of experience he has and that sort of thing. So what  
15 we going to have to do then is, ladies and gentlemen, I  
16 once again have to send you back to the jury room and let  
17 me deal with this particular legal issue. Appreciate your  
18 understanding and patience and, hopefully, we can get you  
19 back here shortly.

20 (Whereupon, the jury was excused from open court.)

21 THE COURT: Okay. Solicitor, ask Captain Crisp  
22 concerning his experience and lay a foundation for him if  
23 he's able to testify as to what injuries on one part of  
24 the body would show.

25 Q So, Officer, do you often see people injured in your

1 line of work?

2 A I do.

3 Q When you're on patrol and, and you were on patrol at  
4 this particular point, that's when you saw a lot of folks  
5 injured?

6 A That's right, and also investigations.

7 Q And investigations. So how many years of patrol and  
8 investigations have you done altogether?

9 A Roughly, eight.

10 Q Okay. So over those eight years you've seen lots of  
11 folks injured?

12 A Correct.

13 Q So in this particular case, tell me what you noticed  
14 about her injuries?

15 A It appears as if, by looking at the injuries and the  
16 way some of the bruising are on her leg and being on one  
17 side like she could have been lying on the left side while  
18 he struck her on the right.

19 Q And would that be, in your experience as a police  
20 officer, sort of a protective, a self-protection --

21 A Correct.

22 Q -- measure that she might have taken?

23 A Correct.

24 Q All right.

25 MS. PENNY: I mean, that's about it for that point.

1           THE COURT: Okay. I don't know if that necessarily  
2 needs any particular experience or kind of specialized  
3 knowledge. I think it just kind of maybe stands to reason  
4 that, you know, that if somebody's injured just on one  
5 side they could be, you know, in a certain position to  
6 where the uninjured part of the body would not be exposed  
7 in assault-type situation. Help me out with this, Ms.  
8 Nelson, concerning your objection.

9           MS. NELSON: If that's something that the jury wants  
10 to conclude on their own from the photographs from their  
11 own daily life or observations, but Officer Crisp  
12 testifying that this is how it could have happened is just  
13 pure speculation.

14          THE COURT: All right. Solicitor, let me just turn  
15 it over to you. How does that help you by getting this  
16 officer to say that that would indicate that she was in a  
17 certain position on the sidewalk, possibly in some sort of  
18 self-protective mode. How does that necessarily help you  
19 in proving the elements of this particular charge?

20          MS. PENNY: Well, I think that it, especially like  
21 the opening there, like the Defense has a theory that she  
22 got in a fight with some ladies and that those are not  
23 fight injuries. Those are, I'm taking a beating and I'm  
24 trying to save my life injuries.

25          MS. NELSON: Which, which you could get from a fight

1 if you were taking a beating in a fight and it's not our  
2 theory. It's what she's going to testify to.

3 THE COURT: All right. Okay.

4 MS. PENNY: We can do this on recalling him, call the  
5 doctor and let it go at this point.

6 THE COURT: Okay. All right. Well, if the State's  
7 plan is, is to call the, I guess, the ER treating  
8 physician even though I'm not so absolutely certain that  
9 he can't testify to something like that. I'll go, I will  
10 go ahead at this stage and sustain the objection in light  
11 of the fact that we, the State does plan to have the  
12 treating doctor. Let me just mention and I've noticed  
13 since the jury's been out, Ms. Holloway, that you're doing  
14 a lot of head-nodding and that sort of thing. I don't  
15 know if you've been doing that with the jury here or not,  
16 but make sure you don't. Okay, ma'am? And I'm not  
17 suggesting that you've been doing that, but I have noticed  
18 you, since the jury's been out that you've been doing a  
19 lot of that facial expressions and head-nodding and just  
20 avoid that. Okay. All right. Okay. How much longer do  
21 you anticipate with Captain Crisp from the State?

22 MS. PENNY: And not long at all, Your Honor.

23 THE COURT: Not much. Do you anticipate a very  
24 lengthy cross?

25 MS. ABLE: No, Your Honor.

1 THE COURT: Okay. Let's go ahead and deal with the  
2 issue about Ms. Holloway's testimony being called by the  
3 State. Solicitor White, you're wanting Ms. Holloway to be  
4 declared a hostile witness?

5 MS. WHITE: Yes, sir.

6 THE COURT: Okay.

7 MS. WHITE: And I can either put on the record the  
8 reasons. I can proffer testimony from Ms. Holloway.

9 THE COURT: Okay. Well, as we all know if I declare  
10 her a hostile witness, all that affords you is the right  
11 to ask leading questions as if she were on  
12 cross-examination. Does the State, {sic}, have a position  
13 on this?

14 MS. NELSON: Your Honor, we do. I was looking at  
15 hostile witness in the context of the State being able to  
16 call a witness solely for the purposes of impeachment,  
17 which I think is what they're going to do with Ms.  
18 Holloway. What she tells about the incident has been  
19 different since October of 2014 than it was that night.  
20 And so I think for them to call her as a witness strictly  
21 for the purpose of impeachment is not in accord with good  
22 South Carolina law unless they can show that she's hostile  
23 which requires a showing of surprise about this testimony.  
24 And the State has known since at least, I would say  
25 December of 2014, that she was recanting her original

1 statement.

2 MS. WHITE: And, Your Honor, that was the common law.  
3 However when the Rules of Evidence, specifically Rule 611,  
4 when those were enacted from my research, and I couldn't  
5 find a case directly on point, but there is some  
6 discussion in the comments and I think it's 611 and maybe  
7 also 608 regarding who you can impeach. Now, the old rule  
8 was you couldn't impeach your own witness. But now that  
9 we have these rules, you are allowed to impeach your own  
10 witness. And I think that you don't have to show surprise  
11 to declare someone hostile.

12 MS. NELSON: You do for purposes of impeachment under  
13 those, under this line of cases starting with State versus  
14 Bendoly.

15 THE COURT: Well, you know, as far as her being  
16 declared a hostile witness, I have to assume that at some  
17 point in time she was indicating that the Defendant did  
18 these things. And then at some point after that, she has  
19 recanted. And even though the State pretty much knows  
20 what she's going to testify to, I don't think they can say  
21 one-hundred percent what she's going to say until she gets  
22 on the witness stand under oath, which she has not been  
23 under oath in making previous statements. So I think it's  
24 certainly proper and reasonable to allow the State to have  
25 her declared a hostile witness. Because, Solicitor White,

1 you believe that she is going to say something different  
2 than what she had indicated initially to the police  
3 officers?

4 MS. WHITE: Yes, sir. And, also, Your Honor, she's  
5 been very hostile. The Defendant this entire time and for  
6 a variety of reasons going back to even prior cases.  
7 There is a history of her being hostile. There is a  
8 history of her being a hostile to the State.

9 THE COURT: And insofar as the issue of any sort of  
10 impeachment evidence, we'll deal with that separately.  
11 All I'm going to deal with right now is allowing the State  
12 to have her declared a hostile witness. And, therefore,  
13 entitle the State to ask leading questions as if she were  
14 on cross-examination.

15 MS. NELSON: So strictly for that purpose of asking  
16 leading questions.

17 THE COURT: Right. And then we can deal with  
18 impeachment at another time. Okay. All right. Anything  
19 else? All right, Mr. Willingham, if you'll bring the jury  
20 back out.

21 (Whereupon, the jury came into open court at  
22 approximately 3:59 p.m.)

23 THE COURT: All right. Let the record reflect the  
24 jury is back in.

25 CONTINUE DIRECT EXAMINATION

1 By Ms. Penny:

2 Q Captain Crisp, did you do any investigation after you  
3 saw her in the hospital?

4 A Well, I went back to the hospital after the first  
5 visit and spoke with her again.

6 Q Okay. And then did another Greenwood Police  
7 Department officer also investigate?

8 A Correct. Once I finished my incident report, it got  
9 passed on to Sergeant Tony Gary in Investigations.

10 Q And based on your conversations that night with  
11 Janice Holloway, did you look for Willie Gray?

12 A I did. Numerous officers tried to search for Mr.  
13 Gray that night and couldn't locate him.

14 Q Did you understand from that conversation that Janice  
15 Holloway and Willie Gray lived together?

16 A I did; correct.

17 MS. PENNY: I think that's all I have.

18 THE COURT: Okay. Cross-examination, Ms. Able.

19 MS. ABLE: Thank you, Your Honor.

20 CROSS-EXAMINATION

21 By Ms. Able:

22 Q Good afternoon, Captain Crisp.

23 A Hello..

24 Q Captain Crisp, you just testified based off of this  
25 investigation on the night of July 3rd you were under the

1 impression Mr. Gray and Ms. Holloway lived together?

2 A Correct.

3 Q And in your report you recalled writing that through  
4 those conversations, it was your impression they did not  
5 live together and that Ms. Holloway didn't know where to  
6 find Mr. Gray?

7 A It wasn't that they didn't live together. She didn't  
8 know where he was at at the time.

9 Q And you have testified you didn't see Mr. Gray that  
10 night?

11 A I did not see him, correct.

12 Q And you testified many officers searched, no one saw  
13 Mr. Gray?

14 A Correct.

15 Q And you have testified you came on scene that night  
16 and you hadn't seen Ms. Holloway earlier that day?

17 A I did not.

18 Q So you can't testify as to when or how she got these  
19 injuries?

20 A Other than what was told to me that night, no.

21 Q And you said that you didn't necessarily do any  
22 follow-up investigation on the case, you kind of handed  
23 that off. But as far as that night, no one found Mr.  
24 Gray?

25 A Correct..

1 Q And you are, you were the officer, though, that  
2 sought out the warrant for Mr. Gray, is that correct?

3 A I'm not.

4 Q You were not?

5 A I'm not the one that signed the warrant, no.

6 Q But you sought the warrant?

7 A I knew a warrant would be coming for Mr. Gray.

8 Q Okay. And in your report, you indicated a warrant  
9 would be obtained for criminal domestic violence?

10 A Correct.

11 Q You did not charge Mr. Gray or no officer charged Mr.  
12 Gray with attempted murder?

13 A Say it again?

14 Q You, yourself, did not charge Mr. Gray with attempted  
15 murder?

16 A I did not.

17 Q Okay. As a result of the investigation, he was  
18 charged with domestic violence?

19 A That's correct.

20 Q And going through these photos with Ms. Penny, you  
21 are not a medical doctor?

22 A I'm not.

23 Q You can't make any sort of diagnosis from those  
24 photos, you couldn't make any diagnosis that night?

25 A Correct.

1 Q You can say what you saw?

2 A Other than the visual, correct.

3 Q Yes, sir. And you have also testified you arrived  
4 on-scene that night and based on what was told to you by  
5 Officer Sathre, he indicated he heard the scream and he  
6 further indicated he observed a white female and a black  
7 male walking down the street?

8 A That's correct.

9 Q He didn't say what white female, what black male?

10 A Oh, not to me specifically. But when I got there,  
11 she was still there. The one he had confronted at the  
12 time on the sidewalk was still there.

13 Q Okay. The female, not the male.

14 A Correct.

15 Q And he did not indicate that he saw any sort of  
16 incident or altercation between the two of them?

17 A He did not. He just saw a subject running away from  
18 the scene.

19 Q Prior, he saw them walking together down the street?

20 A He did not.

21 Q He did not tell you they were walking down the  
22 street?

23 A I don't remember him telling me specifically when he  
24 arrived. I think he identified them two as being there  
25 and seeing her scream. And then when he arrives, he sees

1     somebody walking away from the street. I don't think he  
2     necessarily saw them walking together down the street.

3     Q     Okay.

4           MS. ABLE: Your Honor, may we approach?

5           THE COURT: Sure.

6           (Whereupon, a bench conference was held in the  
7     presence of the jury but out of the hearing of the  
8     jury.)

9           MS. ABLE: Thank you, Your Honor.

10          THE COURT: All right.

11         Q     Okay. Captain Crisp, do you have a copy of your  
12     incident report?

13         A     I do.

14         Q     Would you look at that, the first line, and see if  
15     that refreshes your recollection, and I can ask you again.

16         A     That's correct.

17         Q     Okay. Did Officer Sathre observe, you said he  
18     observed a white female and black male, we covered that,  
19     walking down the street prior to the scream?

20         A     Correct.

21         Q     Okay. But he did not say or relate to you he saw  
22     those individuals in any sort of altercation?

23         A     That's correct.

24         Q     And he did not see any sort of weapon?

25         A     Correct. Not that he explained to me.

1 Q Okay.

2 MS. ABLE: Beg the Court's indulgence.

3 THE COURT: Sure.

4 MS. ABLE: Thank you, Your Honor.

5 THE COURT: Any redirect?

6 MS. PENNY: Yes, Your Honor.

7 REDIRECT EXAMINATION

8 By Ms. Penny:

9 Q To be clear, we've already discussed you're not a  
10 doctor and you're not an attorney, right?

11 A Correct.

12 Q So after the police charge comes to our office, is it  
13 often the fact that the charge changes?

14 A Correct.

15 Q So sometimes it's downgraded?

16 A It is.

17 Q Sometimes it's upgraded?

18 A It is.

19 Q And sometimes we drop it altogether?

20 A That's correct.

21 Q Okay. And can I also just, you testified and the  
22 report says that Officer Sathre saw these two people  
23 walking down the street and then heard the screams?

24 A Correct.

25 Q Correct.

1 MS. PENNY: That's all I have, Your Honor.

2 THE COURT: Recross?

3 RECROSS-EXAMINATION

4 By Ms. Able:

5 Q Officer Sathre didn't identify my client?

6 A Not at that time.

7 MS. ABLE: Thank you, Your Honor.

8 THE COURT: Okay. Thank you, sir. You can step  
9 down.

10 MR. CRISP: Thank you.

11 THE COURT: All right. State call its next witness.

12 MS. WHITE: The state calls Janice Holloway.

13 THE COURT: Okay. Come around, please, ma'am.

14 JANICE HOLLOWAY, being  
15 first duly sworn, testified as follows:

16 DIRECT EXAMINATION

17 By Ms. White:

18 Q And if you would introduce yourself to the jury, Ms.  
19 Holloway.

20 A I'm Janice Holloway.

21 Q Ms. Holloway, before we get started, you're here  
22 today pursuant to a subpoena from my office, aren't you?

23 A Yes.

24 Q Investigator Chappell served you at your job last  
25 week?

1 A Yes.

2 Q And it's fair to say you do not want to be here  
3 testifying against Mr. Gray, isn't it?

4 A I'm not going to testify against him.

5 Q You and Mr. Gray have been dating for how long?

6 A Six years.

7 Q And y'all have lived together some during that  
8 time-period?

9 A Yes.

10 Q Were y'all living together on July 3rd, 2014?

11 A Yes.

12 Q And were y'all, are y'all living together today?

13 A Yes.

14 Q Have y'all ever broken up during these six years?

15 A No.

16 Q Now, turning back to July the 3rd or let's go back,  
17 actually, till about July the 2nd, 2014. Had you and Mr.  
18 Gray been having some arguments?

19 A We had some arguments, yeah.

20 Q And maybe some arguments over him messing around with  
21 another woman, is that what those were about?

22 A Yes.

23 Q And he wasn't home all day on July the 2nd of 2014,  
24 was he?

25 A No, he wasn't and I went where he was and I actually

1 caught him and her having sex.

2 Q And what did you do after you caught them?

3 A I told him that I would get even with him.

4 THE COURT: I'm sorry. Could you repeat that answer,  
5 ma'am?

6 A I told him that I would get even with him.

7 Q What did you do, did you leave where you found him?

8 A Yeah, I left.

9 Q What did, where did you go from there?

10 A I went back home, I took a shower, I got dressed and  
11 I went out.

12 Q And where'd you go when you went out?

13 A On Greer Street.

14 Q Okay. Do you remember which house on Greer Street?

15 A It was down in the middle.

16 Q Down in the middle. On the right, left?

17 A On the right.

18 Q What was the address number?

19 A I'm not sure what the address number was.

20 Q Who lived there?

21 A This girl named Keisha.

22 Q What's Keisha's last name?

23 A I'm not sure what her last name is.

24 Q Okay. You're at this house party that you don't know  
25 the number of, you don't know where it is, and you're not

1     sure what the name is. What happened at the house party?

2     A     We was all drinking and doing drugs and there was an  
3     altercation over some drugs. Me and two girls got into  
4     it. Then me and a guy got into it about some drugs. We  
5     all got to fighting.

6     Q     You all got to fighting. Can you explain that a  
7     little bit more?

8     A     Well, me and the two girls got to fighting.

9     Q     When you got to fighting, what, was that with fists,  
10    can you tell me how y'all were fighting?

11    A     Well, at first, it just started out with fists and  
12    then one of them picked up something. I'm not sure what  
13    it was.

14    Q     Okay. And what happened after they picked up  
15    something?

16    A     The girl that had the whatever she had started  
17    hitting me with it. And I rolled over on my side, on my  
18    left side because it was two, it was two against one. So  
19    what was I supposed to do.

20    Q     And how were you able to get away from them?

21    A     After the fight was over, I got up and left.

22    Q     So they just stopped beating you and let you leave?

23    A     Yeah. Because somebody said they were going to call  
24    the police, so that's how that went.

25    Q     Okay. And about what time was that that you left, do

1     you remember?

2     A     Probably about 1:30 in the morning.

3     Q     Okay. So now we're into July 3rd?

4     A     Mm-hmm.

5     Q     Okay. What happened from there?

6     A     I was walking home and I met Mr. Gray coming down the  
7     Street. And he was trying to apologize for the whole  
8     situation. And I hollered, go on and leave me alone. And  
9     then whenever he was trying to get me and take me home and  
10    I told him to go on, I hollered again, go on and leave me  
11    alone. I don't want to be bothered with you. And that's  
12    when the police rolled up.

13    Q     So were you standing up when the police rolled up?

14    A     Yes, I was. I was actually walking down the street.

15    Q     Did you tell the police the story you just told me?

16    A     No, I didn't.

17           MS. NELSON: Objection. Objection, Your Honor. A  
18    matter of law.

19           THE COURT: Okay. You want to come here to sidebar?

20           (Whereupon, a bench conference was held in the  
21    presence of the jury but out of the hearing of the  
22    jury.)

23           THE COURT: All right. Ladies and gentlemen, here's  
24    the plan. Here's what we're going to do. I've got a  
25    legal issue that's probably going to take a little time

1 for me to deal with with the lawyers. And either I can  
2 put you back into the jury room for a period of time so I  
3 can deal with that or we go ahead and break for the  
4 afternoon. And then I'll give you time to come back in  
5 the morning. So I'm kind of siding with going ahead and  
6 just breaking for the afternoon and send y'all on home,  
7 and then have you come back in the morning and we'll start  
8 back up so that's what we are going to do. So we'll  
9 probably want to start back about 9:30 in the morning.  
10 So, ladies and gentlemen, go on and I'm going to excuse  
11 you for the rest of the afternoon. And, again, you  
12 remember when I talked to you before you broke for lunch  
13 about no discussion about this with anybody that you come  
14 into contact with? Tell them you just, you're on the jury  
15 and that's it. Leave it at that. Again, I remind you no  
16 research, independent research into this case and be back  
17 promptly at 9:30 in the morning and we'll probably work  
18 pretty hard tomorrow. And just get some good rest and  
19 we'll see you in the morning at 9:30. Have a good  
20 evening.

21 (Whereupon, the jury was excused from open court for  
22 the day.)

23 THE COURT: All right. Okay. Ms. Holloway, the  
24 standard instruction to a witness when there is a break  
25 and you're still in the middle of the witness' testimony,

1 the standard instruction is, is that you cannot talk with  
2 anybody about your testimony or about this case. That  
3 includes the lawyers. I do realize as you've just  
4 testified to that you currently live with the Defendant  
5 but, again, the standard instruction to a witness when  
6 there is a break in the middle of their testimony that  
7 there can be no communication about the testimony with  
8 anyone.

9 MS. HOLLOWAY: Yes, sir.

10 THE COURT: So I'm giving you that standard  
11 instruction. You can step down, ma'am. Watch your step.  
12 Thank you. All right. We going to be at ease for just a  
13 few minutes and let me kind of do a little looking. And  
14 we can go back on the record before we end for the day and  
15 know exactly how we're headed.

16 MS. NELSON: Yes, sir.

17 THE COURT: So y'all can, if you need to take a  
18 little break, that's fine.

19 (Whereupon, a short break was taken.)

20 THE COURT: Let's go back on the record. Let's make  
21 sure that we all have a understanding of what, the issue  
22 before us. At some point in time Ms. Holloway told law  
23 enforcement and possibly others that, in short, Defendant  
24 attempted to kill her or abused her or whatever. And I  
25 realize he was initially arrested for domestic abuse, and

1 then the State elected to indict him directly for  
2 attempted murder. And, furthermore, it's anticipated, not  
3 knowing one-hundred percent for sure, but it's anticipated  
4 that her testimony would be that he didn't do any of that.  
5 So the objection that the Defense has is whether or not  
6 the State can impeach Ms. Holloway with whatever prior  
7 statements that she allegedly gave. Is that the issue  
8 that we have?

9 MS. NELSON: I think it's more specifically they're  
10 not calling her just to impeach her credibility on one  
11 point. They're calling her to completely impeach her  
12 current testimony for the purposes of getting in her prior  
13 inconsistent statements as substantive evidence to prove  
14 their case.

15 THE COURT: Okay. Well, isn't that what impeachment  
16 does? Impeachment is for the sole purpose of casting some  
17 sort of credibility issue on the witness. If I rule that  
18 the State can impeach her, then you got to look to 613 to  
19 see if that prior inconsistent statement or extrinsic  
20 evidence of that prior inconsistent statement is admitted  
21 to or not. If she says, yeah, I said it, then it stops  
22 right there under 613 as I read the rule. If she denies  
23 it, no, I never told Officer Gary or Officer Crisp that  
24 she said it. If she denies it, then there could be  
25 extrinsic evidence brought in. So when Rule 607 says,

1 credibility of a witness may be attacked by any party  
2 including the party calling the witness, that is  
3 impeachment. So maybe I don't have a good enough handle  
4 on this issue that I thought I had as raised by the  
5 Defense.

6 MS. NELSON: Well, Your Honor, there's still some  
7 South Carolina law that has not been overturned and going  
8 back to State vs. Bendoly, 273 S.C. 47, saying that the  
9 State can't call a witness solely for the purpose of  
10 impeachment unless they can show that the witness is  
11 hostile. And that's not just adverse, that's they have to  
12 show surprise and harm in order to be able to call a  
13 witness solely for the purpose of impeachment. There are  
14 other cases following Bendoly. State vs. Bailey, 377 S.E.  
15 2d 581; State vs. Hamlet, 294 S.C. 77; that absent the  
16 showing of surprise or harm on the part of the State. And  
17 as I've asserted already on the record, the State has  
18 known for over two years now that Ms. Holloway has  
19 recanted and said that she lied to the police when she  
20 gave that statement. I don't see how that element of  
21 surprise can be met so that that witness is hostile for  
22 the purpose of calling her strictly for impeachment for  
23 the purpose of getting in those prior inconsistent  
24 statements.

25 THE COURT: Solicitor?

1 MS. WHITE: Your Honor, I would agree if that was the  
2 current law. But the current law which was enacted in  
3 1995 is Rule 607. There have been cases since Rule 607  
4 became a Rule of Evidence. I'm looking at Okatie River,  
5 LLC vs. Southeastern Site Prep, LLC, at 353 S.C. 327 that  
6 is directly on point. Prior to the adoption of the South  
7 Carolina Rules of Evidence, the law provided that a party  
8 could not impeach its own witness unless they could show  
9 surprise. The rule has changed and also State vs. Meads  
10 where the rule changed while some appeals were pending.  
11 There had been a trial, the rule changed. New trial, they  
12 were able to apply that rule in the new trial and impeach  
13 their own witness.

14 THE COURT: Right. Right.

15 MS. WHITE: So, Your Honor, I think the current South  
16 Carolina law is that I can impeach my own witness, I don't  
17 have to show, I don't even think I have to show that she  
18 was hostile, or surprise, or any of those things.

19 THE COURT: Well, yeah. I mean, my thinking was and  
20 that's why I said earlier on, okay, I'll declare her  
21 hostile for the sole purposes of allowing the State to  
22 lead, and then we deal with the impeachment. I mean, my  
23 mindset was, yeah, the hostility component of this was not  
24 really going to factor in on the impeachment issue. And I  
25 did see that Okatie, that's, Madam Court Reporter, that's

1 O-K-A-T-I-E, Okatie vs. Southeastern. I did find that,  
2 because it's annotated under the rule and it clearly says  
3 a party may attack the credibility of their own witness  
4 without showing surprise. And, quite frankly, I really  
5 have not seen thus far, well, maybe real early in the  
6 testimony of Ms. Holloway, where the State has even led  
7 the witness but that's just kind of an aside comment.  
8 Okay. All right. Here's what we are going to do. We are  
9 going to look at this issue a little bit further. I'm not  
10 telling counsel to email us anything. I think I've got  
11 enough to take a look at and I want to make sure that I  
12 look at it a little bit more thoroughly. So I'll place my  
13 ruling on the record in the morning. But if you really  
14 come up with something really good for your respective  
15 sides other than what you've told me, then send it to me.  
16 But don't send me anything if it's just kind of a  
17 restatement of what you've already given me. Okay. So  
18 let's try to regroup then a little bit before 9:30 before  
19 the jury comes in.

20 MS. WHITE: Your Honor, going back to the issue of  
21 Mr. Gray's bond. She's now testified that they live  
22 together. I don't know where he's going to go if he  
23 doesn't go to the Detention Center tonight.

24 MS. NELSON: He's got somewhere to go.

25 THE COURT: He does? Okay. On this issue of bond,

1 let me put him under oath as far as where he's going to go  
2 tonight. So would you please stand, Mr. Gray. And, Madam  
3 Clerk, will you swear Mr. Gray in.

4 WILLIE GRAY, being  
5 first duly sworn, testified as follows:

6 THE COURT: Okay. Mr. Gray, you know, my earlier  
7 statement to you that even though your relationship with  
8 Ms. Holloway, now, I understand you're living together  
9 that during the course of this proceeding, you are to have  
10 no contact with her. Do you have an alternate place to go  
11 to this afternoon/this evening?

12 MR. GRAY: Yeah. I have an aunt, she's 75 years old.  
13 Like, if I have any problems or anything, I'm welcome that  
14 anytime I want to go.

15 THE COURT: And who is this?

16 MR. GRAY: She's my aunt, she's just like my mother.

17 THE COURT: Okay. What's her name?

18 MR. GRAY: Julia Mae Parkman. Julia Mae Parkman.

19 P-A-R-K-M-A-N.

20 THE COURT: Okay. All right. And where does she  
21 live?

22 MR. GRAY: [REDACTED] Earl, (phonetic), Street.

23 THE COURT: And that's in Greenwood?

24 MR. GRAY: Yes, sir.

25 THE COURT: Okay. All right. Well, you go there.

1 When you leave here, you go there and that's where you're  
2 to stay until you head back to the courthouse in the  
3 morning. You understand?

4 MR. GRAY: Okay.

5 THE COURT: Anything further?

6 MS. NELSON: No, sir.

7 THE COURT: All right. Appreciate y'all's hard work.  
8 We'll see you in the morning.

9 JANUARY 18, 2017

10 THE COURT: Okay. We're on the record in the State  
11 vs. Willie Gray. Let's go ahead and put on the record,  
12 Ms. Nelson, concerning our sidebar conference yesterday as  
13 it relates to the photographs. You had some objection to  
14 admitting the number of photographs because of the  
15 duplicating. So if you want to go ahead and put that on  
16 the record. And then I'll announce my ruling on the  
17 impeachment issue.

18 MS. NELSON: Thank you, Your Honor. As to the  
19 photographs, our argument for the record would be that  
20 Exhibit 1 is cumulative of number 2; that Exhibit 3 is  
21 cumulative of number 7; and Exhibit 10 is cumulative of  
22 both numbers 1 and 2. And just that you, all of the  
23 things depicted in those photos you can see clearly in the  
24 other photos and the only difference is maybe an angle  
25 change or a depth change. So that's the argument and just

1 also for the record, on the impeachment issue, would just  
2 like to add that we sent the Court a law review article  
3 last night asking for your consideration of that.

4 THE COURT: Right.

5 MS. NELSON: It is at 28 William and Mary Law Review,  
6 295.

7 THE COURT: All right. And concerning the  
8 photographs and I overruled your objection simply because  
9 of the fact that it appeared to me that each photograph  
10 had a slightly different angle even though the photographs  
11 pretty much showed some of the same things. Because it  
12 having a different angle, I allowed all those pictures in.  
13 Okay. Concerning the impeachment evidence, and I did read  
14 the article that you sent last night. Solicitor White, I  
15 did read your response email. I did look at the State vs.  
16 Copeland case that you cited. And I have, and I want to  
17 give the basis of my ruling, but I am going to allow the  
18 impeachment evidence in, in considering Rule 607 which  
19 clearly states that the credibility of the witness may be  
20 attacked by any party, including the party calling the  
21 witness. And the Okatie, O-K-A-T-I-E, case and State vs.  
22 Meads case support that, that rule of evidence. Also  
23 considered a, I think it's a little stronger case for the  
24 State's position more so than Copeland is, State vs.  
25 Stokes. That's 381 S.C. 390, which holds that the

1 admission of extrinsic evidence of a witness' prior  
2 inconsistent statement does not violate the Defendant's  
3 Sixth Amendment rights even though the witness denied  
4 making the statement because Defendant was available for  
5 cross-examination. The law review article kind of relies  
6 on a Federal Rule 801 which is, of course, is different  
7 from the State Rule 801. So I'm going to allow the  
8 impeachment evidence in based upon, based upon the State  
9 vs. Stokes, Rule 607; Rule 801 and Rule 613. Okay.  
10 Anything else for the record before we bring the jury out?

11 MS. WHITE: No, sir, Your Honor.

12 MS. NELSON: Not from us, Your Honor.

13 THE COURT: All right. All right. Thank you very  
14 much. Let's bring the jury out, and then you can recall  
15 Ms. Holloway.

16 (Whereupon, the jury came into open court at  
17 approximately 9:38 a.m.)

18 THE COURT: All right. Let the record reflect the  
19 jury is back in. Good morning, ladies and gentlemen. I  
20 hope you had a good, restful evening and ready to get to  
21 work. Solicitor White, I think we're in the middle of Ms.  
22 Holloway's testimony. So, Ms. Holloway, if you'd come  
23 back up to the witness stand. And I remind you that you  
24 are still under oath.

25 CONTINUE DIRECT EXAMINATION

1 By Ms. White:

2 Q Good morning, Ms. Holloway.

3 A Good morning.

4 Q Now, just to go back over a little bit of what we  
5 talked about yesterday so we're all kind of on the same  
6 page. You testified yesterday that you've been dating Mr.  
7 Gray for, I think, about six years. Is that what you  
8 said?

9 A Yes.

10 Q And is Willie Gray in the courtroom today?

11 A Yes, he is.

12 Q Where is he?

13 A Right there.

14 Q You talking about in the gray shirt?

15 A Yeah. Yes, he is.

16 Q Okay.

17 MS. WHITE: Your Honor, let the reflect that she's  
18 identified the Defendant.

19 THE COURT: So noted for the record.

20 Q And you said, now, were you and Mr. Gray living  
21 together on July the 3rd of 2014?

22 A Yes.

23 Q And what was the address y'all were living at?

24 A [REDACTED] South Main Street.

25 Q Okay. Did anybody else live there with y'all?

1 A My sister, her boyfriend, kids.

2 Q And you said there was this fight at a house on Greer  
3 Street, right?

4 A Yes.

5 Q And that after you left that location you bumped into  
6 Mr. Gray?

7 A Yes.

8 Q And had you seen Mr. Gray at all that day until that  
9 point?

10 A No, I hadn't.

11 Q And we're talking about the Mr. Gray that's sitting  
12 over here?

13 A Yes.

14 Q Okay. So he was with you that night on Greer Street?

15 A No, he wasn't.

16 Q You just said you bumped into him on Greer Street?

17 A No, I didn't. I bumped into him on Holloway Street  
18 when I was headed home.

19 Q Oh, okay. Thank you. Thank you for correcting me.  
20 You bumped into him on Holloway Street. And then shortly  
21 thereafter the police rolled up? Is that right?

22 A Yeah.

23 Q And was anything going on when the police rolled up?

24 A I was telling him to go on and leave me alone. I was  
25 still mad at him. I didn't want to be bothered with him.

1 Q Now, I'm going to show you what's already in evidence  
2 as State's Exhibit number 2. Can you see the screen from  
3 up there, Ms. Holloway?

4 A Yeah.

5 Q All right. Would you agree with me that that's a  
6 picture of you, Ms. Holloway?

7 A Yes.

8 Q And that's a picture that was taken on July the 3rd,  
9 2014?

10 A Yes.

11 Q And looks like you're in a pretty good amount of  
12 pain, is that right?

13 A Yes.

14 Q This was taken maybe within an hour after you bumped  
15 into Mr. Gray on Holloway?

16 A No.

17 Q When was this picture taken?

18 A About ten minutes after I bumped into him.

19 Q Okay. Now the story that you told the jury  
20 yesterday, we've kind of gone back over today, is that  
21 what you told the police that night?

22 A No, it's not.

23 Q Do you remember talking to Jeff Crisp at the scene?

24 A The first officer on the scene, yes.

25 Q Okay. Actually, I think he would have been the

1 second officer on the scene, but do you remember talking  
2 to the officers who arrived?

3 A Yes.

4 Q And, again, this was on the side of the road on  
5 Holloway, is that correct?

6 A Well, no. Actually, it was Kirksey.

7 Q Okay. But it was the corner of Holloway and Kirksey,  
8 is that right?

9 A No. It was in front of the house on the corner.

10 Q Okay. Now, do you remember telling Officer Crisp  
11 that you and Mr. Gray had been dating about two years at  
12 the time?

13 A No. He must have misunderstood because I tell  
14 anybody I been with him right at six years now.

15 Q Okay. Do you remember telling Officer Crisp that Mr.  
16 Gray hit you with a pipe?

17 A Yeah, I remember that.

18 Q Okay. So you did tell Officer Crisp that that night?

19 A Yes, I did.

20 Q While you were in this shape in State's Exhibit 2?

21 A Yes. And I told you, I also told you that the reason  
22 I did say he did that, because I walked up and caught him  
23 having sex with someone else.

24 Q Okay. But you told Officer Crisp that night that  
25 Willie Gray hit you with a pipe, correct?

1 A Yes, I did.

2 Q Okay. Now, EMS took you the hospital, right?

3 A Yes.

4 Q EMS asked you what happened that night also, didn't  
5 they; they took a history from you?

6 A Yeah, they did.

7 Q Do you remember telling the EMT's and this is again  
8 on July the 3rd of 2014 on the side of the road, do you  
9 remember telling the EMT's that your boyfriend hit you  
10 multiple times with a lead pipe?

11 A Yeah, I said that.

12 Q Do you remember telling EMT's that you blocked the  
13 pipe from hitting you in the face with your right arm?

14 A No, I don't. But I do remember telling them that I  
15 was smoking crack that night and had a good bit to drink.

16 Q You're sure you told them that?

17 A I'm positive, because they asked me if I had been  
18 using drugs or drinking.

19 Q Well, are you aware that you were able to tell the  
20 EMT's where you were, what your name was, what time it  
21 was, what year it was, all of the above?

22 A Yeah.

23 Q After you got to the hospital, you also gave a  
24 history to the triage nurse, is that right?

25 A What kind of history are you talking about?

1 Q A medical history about how your injuries happened?

2 A I may have. I mean, they gave me pain medication,  
3 and I don't know what I said after they gave me the pain  
4 medication.

5 Q Okay. So do you recall telling Shirolyn Johnson, who  
6 I think now goes by Shirolyn Fredette, that you were  
7 assaulted by your boyfriend with a lead pipe?

8 A No, I don't remember that.

9 Q So you don't remember that?

10 A No, I don't.

11 Q What about your treating physician, Dr. John Short,  
12 do you remember telling him that your boyfriend had  
13 assaulted you?

14 A No, I don't. I don't remember.

15 Q Okay.

16 A Because like I said, they gave me some pain  
17 medication and I was in and out of it. So, I mean, I  
18 don't know what I said.

19 Q Okay. Well, would you agree with me, Ms. Holloway,  
20 that if you're under the influence of pain medicine it  
21 becomes harder to lie and stick to a story?

22 MS. NELSON: Objection, this is knowledge outside the  
23 witness' scope of ability.

24 A No.

25 MS. WHITE: Your Honor, she's testifying that she was

1 out of it and doesn't know what she said.

2 THE COURT: Well, I'll overrule the objection. I'll  
3 allow her to answer it if she feels like she's able to.  
4 So repeat the question, Solicitor.

5 Q Would you agree with me that while you're under the  
6 influence of something, it becomes harder to stick to a  
7 lie?

8 A No.

9 Q Going back to Nurse Johnson, do you remember telling  
10 her that you were scared of Mr. Gray?

11 A No, I don't.

12 Q Okay. Do you remember telling her that you felt  
13 controlled?

14 A No, I don't.

15 Q Do you remember telling her that you were in a  
16 frightening relationship?

17 A No.

18 Q Moving on, back to Officer Crisp came back up to the  
19 hospital and took the pictures that we've already seen,  
20 correct; do you remember that?

21 A I remember talking to him while I was in the  
22 hospital, but I never knew he left.

23 Q Okay. I know you had a lot going on and that's fair  
24 enough, I suppose, isn't it. So you talked to Officer  
25 Crisp again in the hospital. Do you remember telling him

1 in the hospital again on July the 3rd, 2014, that all of  
2 your injuries had been caused by Mr. Gray striking you  
3 with a pipe?

4 A Yeah. I remember telling him that.

5 Q Okay. Do you remember telling him that the scratch  
6 on your neck came from him grabbing you by your hair and  
7 pulling you around?

8 A No. I don't remember that.

9 Q So you do not remember telling him that?

10 A No, because that scratch on my neck was already  
11 there.

12 Q All right. Do you remember telling Tony Gary that  
13 later that same day?

14 A Tony Gary came to my house right after I was released  
15 from the hospital.

16 Q Yeah. You were still in your hospital gown, weren't  
17 you?

18 A Yeah. And they gave me pain meds right before I  
19 left.

20 Q Do you remember telling him that you weren't on any  
21 sort of medicine, or alcohol, or anything that affected  
22 your ability to discuss that with him that day?

23 A Yeah, I said that.

24 Q So now we're talking about the statement you gave to  
25 Tony Gary on July the 3rd at about 11:20 in the morning

1 right after you got out of the hospital, right?

2 A I don't, I don't know what time it was.

3 Q Okay. But it was sometime that same day?

4 A I believe it was earlier than that.

5 Q Okay. And do you remember, did you give that  
6 statement to Detective Gary freely and voluntarily?

7 A Yes, I did.

8 Q And, again, you told him you weren't under the  
9 influence of any drugs, alcohol, medication, anything like  
10 that?

11 A He said drugs or alcohol. He didn't say anything  
12 about medication.

13 Q But he did ask you if you were under the influence of  
14 anything that would affect your reasoning, maybe not in  
15 those exact words. But he asked you that, right?

16 A He asked drugs and alcohol, specifically. I answered  
17 to that.

18 Q And you told Detective Gary that y'all had lived  
19 together, you and Mr. Gray had lived together for six  
20 months, is that right?

21 A I am not sure.

22 Q Would you like to hear your statement?

23 A Not really.

24 Q Well, do you, did you or did you not tell Detective  
25 Gary that you lived with Mr. Gray for six months?

1 A I'm not sure what I told him.

2 Q And now you told Detective Gary, did you tell him  
3 that y'all had been fighting, fussing over this issue with  
4 this other woman?

5 A I don't, I don't, I don't remember.

6 Q Okay. So you don't remember whether you told him  
7 that you got mad at him about this other woman and he  
8 didn't come around on the 1st or the 2nd, so you went to a  
9 cookout?

10 A I remember telling him that later after I went back  
11 and told him the reason I told him that.

12 Q Oh, so when did, are you saying today that you went  
13 back to Detective Gary at some point?

14 A Oh, yes, I did.

15 Q Okay. When was that?

16 A It was a couple of weeks, a couple of weeks later.

17 Q A couple of weeks later after this happened?

18 A Yeah.

19 Q So before Mr. Gray was even arrested?

20 A Yes.

21 Q Okay.

22 A And then I went back to Mr. Gary after Mr. Gray was  
23 arrested.

24 Q Now, you told Detective Gary that you got home around  
25 11:30 or 12:00 that night on the 2nd going into the 3rd,

1 is that correct?

2 THE COURT: Is this the July 3rd conversation?

3 MS. WHITE: Yes, sir.

4 A No. That, that's, that's not the case.

5 Q So that's not what you told Detective Gary?

6 A The incident didn't happen until around 12:30 or 1:00  
7 o'clock that morning.

8 Q Okay. Well, I'm just asking if that's what you told  
9 Detective Gary?

10 A No.

11 Q Okay. That's not what you told him. All right.  
12 Were you aware that he was recording you that day?

13 A No.

14 Q So if on the recording, well, you know what, I'll  
15 strike that. Did you, do you recall telling Detective  
16 Gary that some dude said that Willie was looking for you,  
17 so you went back out to where Willie was?

18 A Oh, yeah, I remember that.

19 Q You do remember that part?

20 A Yeah.

21 Q Okay. And that you told Detective Gary, do you  
22 recall, that when you found Willie he jumped on you, that  
23 he was drunk and mad because you weren't home?

24 A I probably did say that. But, like I said, I was mad  
25 at him and I am very vindictive when I get upset and mad

1 and hurt. And I will do anything I can to hurt anybody.

2 Q And do you recall telling Detective Gary that after  
3 he jumped on you the first time, Mr. Gray left, got a fan  
4 from your house, or something to that effect, and a pipe  
5 and came back to where you were?

6 A I don't remember.

7 Q You don't remember telling him that?

8 A No.

9 Q Okay. And that do you remember telling Detective  
10 Gary that Mr. Gray was calling you names, said you were  
11 going home, then hit you with the pipe multiple times?

12 A Yeah, I said that.

13 Q Do you recall telling Detective Gary that he punched  
14 you in the head?

15 A No, I don't.

16 MS. WHITE: Beg the Court's indulgence.

17 THE COURT: Sure, take your time.

18 Q And you told Detective Gary that you hollered when he  
19 hit you with a pipe and that's when the police officer  
20 pulled up, is that correct?

21 A No.

22 Q You did not tell Detective Gary that?

23 A I don't remember telling him that. But when the  
24 officer rolled up, all they seen was us walking down the  
25 street. He, he hadn't hit me. He had just walked up.

1 Like I said, I wasn't, I admit I told a lie on that man.

2 If that man had tried to kill me, why would I still be  
3 with him now?

4 Q You had just walked up in this condition?

5 A I sure did.

6 Q I'm showing you State's 2 again.

7 A Yes. I was already in that condition when he walked  
8 up. That's why he was trying to take me home. He was  
9 trying to get me to go home, because he was going to get  
10 my sister to take me to the hospital. But when the police  
11 rolled up, they called the ambulance.

12 Q Mr. Gray ran off when the police rolled up, didn't  
13 he?

14 A Yes.

15 Q And that was before you had ever told the police  
16 anything, he ran off right as they pulled up?

17 A Yes.

18 Q Mr. Gray, strike that. Now, the story that you told  
19 the jury yesterday afternoon and today, the first time you  
20 told anyone from my office, well, let me rephrase that.  
21 The first time anyone from my office found out about that  
22 was around about October of 2014, is that correct?

23 A (No response.)

24 Q Let me strike that and ask it a different way. Maybe  
25 this will help you. Did you write a letter on October

1 22nd, 2014, basically stating what you told us yesterday?

2 A I remember writing a letter, yeah.

3 Q And you wrote that letter at Nicole Hurley's house?

4 A Yes, I did.

5 Q Nicole Hurley who's an investigator for the Public  
6 Defender's Office?

7 A Yes.

8 Q So his lawyer's employee, you wrote this letter for?

9 A Well, at the time, I didn't know she worked for them.  
10 Me and Nicole, we live in the same area, and I go to her  
11 house for cookouts and stuff. But I didn't know where she  
12 worked at.

13 Q So the fact that he, you're talking, you know what,  
14 strike that, too.

15 A Well, I have, I---

16 Q You agree with me that's awfully convenient, wouldn't  
17 you?

18 A Okay. But I have tried to get in contact with you  
19 and you wouldn't never be in your office and you would  
20 never return my phone calls.

21 Q Are you aware that I tried to call you six times over  
22 the past month and you've never returned my call?

23 A Nobody's told me you called me.

24 Q I'm calling, the number you leave me is for Ms.  
25 Denise Jones, is your sister, right?

1 A Yes and she's always at work. She works two jobs.

2 Q You've never spoken, other than when you were served  
3 your subpoena, with Ms. Chappell, the investigator from my  
4 office?

5 A No. I've, she came to my job.

6 Q And gave you your subpoena, is that right?

7 A Yeah. And I told her then he didn't do it, and I'm  
8 not, and I'm not going to say he did it when it's a lie.  
9 He didn't do it.

10 Q Now, in the hospital, you'd agree with me you had a  
11 broken arm?

12 A Yeah.

13 Q And you had really severe bruising up and down your  
14 right side?

15 A Mm-hmm.

16 Q And at one point---

17 COURT REPORTER: Is that a yes?

18 A Yes.

19 Q At one point, they even thought your leg might be  
20 broken?

21 A No.

22 Q You don't remember anything about that?

23 A No.

24 Q Did they, did they do any x-rays besides just your  
25 arm, did they do any other tests?

1 A They did alcohol and drug test.

2 Q Oh, they did?

3 A Uh-huh. Because the doctor came back and said that I

4 had cocaine in my system.

5 Q You love Mr. Gray, don't you?

6 A Yes, I do.

7 Q You want to have a future with him?

8 A Yes, I do.

9 Q The women that you say attacked you, what'd they look

10 like?

11 A One was a white girl, and one was a black girl.

12 Q The white girl, was she short?

13 A She was about my height.

14 Q What color hair, blonde?

15 A No, she had brown hair.

16 Q Brown hair. What was her name?

17 A I couldn't tell you because, I don't know, they

18 weren't from here.

19 Q They are not from here?

20 A No. And when you go to a cookout or a party, do you

21 know everybody that's there?

22 Q That's not really the way it works where I answer

23 your questions. But since you asked, yeah, we do. The

24 black girl, what'd she look like?

25 A She was heavy-set and dark-skinned.

1 Q You don't know her name?

2 A No, I don't.

3 Q What about the other people at the cookout; what were  
4 their names?

5 A It was over 30 people there. I don't know everybody  
6 that was there.

7 Q You didn't know anybody's name there?

8 A I knew about three people's name there.

9 Q Okay. You said Freddie Belcher was there?

10 A Yes.

11 Q And Mr. Belcher is dead now, isn't he?

12 A Yes, he is.

13 Q So you can't tell me anything of anybody who was  
14 there that's still alive or who we can get in touch with?

15 A I know this girl named Keisha was there.

16 Q Keisha?

17 A Yes.

18 Q No last name?

19 A No.

20 Q All right. Thank you. No further questions.

21 THE COURT: Okay. Ms. Nelson, cross-examination?

22 MS. NELSON: Thank you, Your Honor.

23 CROSS-EXAMINATION

24 By Ms. Nelson:

25 Q Hi, Janice.

1 A Hi, how are you?

2 Q I'm good. When this, when this happened to you when  
3 you got at this party, did you call the police?

4 A No, ma'am; I did not.

5 Q Will you tell the jury why you didn't do that?

6 A Because I was scared because there was drugs  
7 involved.

8 Q Okay. And you've told us already that you were mad  
9 at Willie?

10 A Yes.

11 Q You've heard Ms. Able talking to the jury at the  
12 beginning of this case and describing you as a woman  
13 scorned. Is that an accurate description?

14 A Yes, it is.

15 Q You were mad at Willie?

16 A Yes.

17 Q And you wanted to get revenge?

18 A Yes, I did. And I told him that I would get revenge  
19 any way I could.

20 Q And you were justifiably mad at him because you  
21 caught him with another woman, right?

22 A Yes, in the act.

23 Q You had, part of the reason you went to Greer Street  
24 to party in the first place is because you were mad at  
25 Willie?

1 A Yes.

2 Q Right?

3 A Yes.

4 Q And you've said there were about 30 people there?

5 A Yes.

6 Q This was, this was at nighttime, of course, right?

7 A Yes.

8 Q And were there people just out in the street in front  
9 of homes?

10 A Yes.

11 Q So this wasn't taking place like in somebody's house,  
12 this was just sort of a street party?

13 A Yes.

14 Q Is that accurate?

15 A Yes.

16 Q And you've described leaving Greer Street and meeting  
17 up with Willie on Holloway?

18 A Yes.

19 Q Right? And you've said already on direct examination  
20 you had not seen him that day until you met on Holloway  
21 Street?

22 A Yes.

23 Q By the time you met up with Willie on Holloway, how  
24 long had it been since you got beat up and got these  
25 injuries in these pictures? About how much time had

1 passed, if you remember?

2 A About 30 minutes had passed, 30-45, minutes,  
3 somewhere along in there.

4 Q Were you hurting?

5 A Yes, I was.

6 Q Did you know your arm was broken?

7 A No, I didn't know it was broken. I mean, I knew it  
8 was swoll, but I didn't know it was broken.

9 Q And when Officer Sathre first rolled up, what he saw  
10 was you and Willie walking down the street?

11 A That's it.

12 Q Down Holloway?

13 A Yes.

14 Q When you met up with Willie, did he have a pipe in  
15 his hand?

16 A No, he didn't.

17 Q Did he have one hidden anywhere?

18 A No, he didn't.

19 Q Let's talk about the injuries you got. Obviously, we  
20 know you had a broken arm.

21 A Yes.

22 Q Is that right?

23 A Yes.

24 Q You can tell from the pictures your arm is bruised  
25 right here from being hit, right?

1 A Yes.

2 Q And you have bruises on your body on this part of  
3 your body --

4 A Yes.

5 Q -- going down your leg? When you went to the  
6 hospital, you went to the Emergency Room?

7 A Yes.

8 Q And you were there for about four hours, is that  
9 right, for them to set your arm? You have to say it out  
10 loud.

11 A Yes. Yes.

12 Q Did they put it in a cast?

13 A They put it in a half-cast.

14 Q Okay. And so with a broken arm, anybody's who's had  
15 one, knows you've got some limited use for a while, right?

16 A Yes.

17 Q How long was it before you could use your arm again?

18 A Six weeks.

19 Q Okay. Since that happened to you, is your arm fully  
20 recovered?

21 A Yes.

22 Q You don't have any residual problems with it at all?

23 A No, I don't.

24 Q This was not a break that required you to have  
25 surgery, was it?

1 A No, it wasn't.

2 Q You were in and out of the hospital in about four  
3 hours?

4 A Yes.

5 Q And when you left the hospital, you went back home to  
6 [REDACTED] Main Street? You left the hospital and went back  
7 home to the house where you lived with Willie and your  
8 sister?

9 A Yes.

10 Q And that's where you were when Detective Gary came to  
11 talk to you later that morning at home?

12 A Yes.

13 Q Your sister's name is Denise Jones?

14 A Yes.

15 Q And that's who you were living with at the time, you  
16 and Willie?

17 A Yes.

18 Q Right?

19 A Yes.

20 Q Within a few days, did you tell your sister what  
21 really happened to you?

22 A Yes, I did.

23 Q So you told her the truth within just a few days?

24 A Yes.

25 Q And then you've testified that you tried to go back

1 and, and let Detective Gary know that your statement was  
2 changing?

3 A Yes.

4 Q You wrote a notarized statement in October saying  
5 that you lied to the police, originally, is that right?

6 A Yes. Yes.

7 Q And that statement got provided to the prosecutor's  
8 office back in October of 2014?

9 A Yes.

10 Q So is it fair to say, Janice, that you, that you  
11 tried to take steps very quickly to let people know that  
12 you had made a mistake when you lied to the police?

13 A Yes.

14 Q Now, at the time this happened, Willie was working at  
15 the packing plant, is that right?

16 A Yes.

17 Q And a few days passed after this incident and you  
18 guys were back together, is that right?

19 A Yes.

20 Q You decided you were going to forgive him for this  
21 cheating incident?

22 A Yes.

23 Q That couldn't have been very easy to do?

24 A No, it's not.

25 Q But that's what you decided to do?

1 A Yes.

2 Q Now, it was about two months before the police ever  
3 arrested Willie, right?

4 A Yes.

5 Q And you were with him when he got arrested in  
6 September?

7 A Yes, ma'am; I was.

8 Q Up until that time, was Willie in town?

9 A Yes, he was.

10 Q Was he going to work like usual?

11 A Yes, he was.

12 Q Was he coming home and staying with you at [REDACTED] Main  
13 Street?

14 A Yes, he was.

15 Q Now, we've heard some testimony about him running  
16 away when the police rolled up. Do you know why he did  
17 that?

18 MS. WHITE: Objection, Your Honor. It calls for  
19 speculation.

20 THE COURT: If he, if she heard him say something,  
21 then I would allow it. But if she's just guessing or  
22 speculating, I will sustain the objection. So without her  
23 saying anything, you may want to lay a foundation and  
24 let's just see.

25 MS. NELSON: Well, I, what I asked her was if she

1     knew and---

2           THE COURT:   Why he ran away from the police.

3     A     Yes.   Yes, I do know why.

4           THE COURT:   Okay.   Without saying how do you know,  
5     and then I'll determine whether or not I'll let you say.

6     Q     How do you know why he ran, Janice?

7     A     Because me and this man has been together, and I know  
8     what he has in his pockets and stuff, so I know why he  
9     ran.

10          THE COURT:   Okay.   I'm, I'm going to sustain the  
11     objection.   It would call for speculation.

12          MS. NELSON:   Okay.   And just a moment, Your Honor.

13     Q     Janice, what did you, what did you think when two  
14     months went by and Willie hadn't been arrested for what  
15     you told the police he did?

16     A     Well, like I say, I went back and told them that I  
17     lied, so I thought they was just going to throw it out.

18     Q     Were you surprised when he got arrested?

19     A     Yes, I was.

20     Q     Was he surprised when he got arrested?

21     A     Yes, he was.

22     Q     And I think it's pretty clear to everybody, Janice,  
23     that you didn't want these charges prosecuted, right?

24     A     No, I did not.

25     Q     Now, let's, let's talk about some of the things Ms.

1 White was asking you that you said to people that night.  
2 Talking to the EMS folks, that there were some things that  
3 you remembered and some things you didn't remember. If  
4 there is something written in that EMS report that you  
5 said, do you, do you dispute it? And if you're just not  
6 sure, that's okay, too.

7 A I'm, I'm not sure.

8 Q Okay. Do you remember telling the EMS folks that you  
9 said you were able to get away and run from the house?

10 A No. I don't remember that.

11 Q Okay. Now, all of these people that you saw, the EMS  
12 folks, the nurse, the doctor at the hospital, this all  
13 happened when you were still mad at Willie, right?

14 A Yes. In the same night, yes.

15 Q Was it within 24 hours of you finding him with this  
16 other woman?

17 A Yes. Well, it was the day before, yes.

18 Q Within 48 hours?

19 A Yes.

20 Q When you talked to Tony Gary at your house the next  
21 day, were you still mad at Willie?

22 A Yes, I was.

23 Q Had you had some time by the time you talked to him  
24 to think more about this story you wanted to tell?

25 A By the time I talked to?

1 Q Tony Gary.

2 A Yes.

3 Q And you, actually, gave him a lot more detail than  
4 you gave to anybody prior to that, right?

5 A Yes.

6 Q Y'all only talked for about five minutes?

7 A Yes.

8 Q But you gave him a lot more detail than anybody else  
9 before that, right?

10 A Yes.

11 Q And one of the things you told him was that you were  
12 on Greer Street at this party, is that right? And you  
13 said Willie came up and just started punching you?

14 A Yeah. That's what I, I think that's what I told him  
15 and, like I say, I'm not quite sure. But I do, I do know  
16 I told him that Willie hit me with the pipe, which I know  
17 was a lie. Like I said, I was trying to get back at him.  
18 I was trying to hurt him like he hurt me.

19 Q Do you remember telling Tony Gary about two separate  
20 incidents with Willie, one where he came up and punched  
21 you, and then when he came back and hit you with a pipe?  
22 If you don't remember, it's okay.

23 A Now, I, I remember telling him that he hit me with  
24 the pipe. I don't remember him, me telling him he punched  
25 me.

1 Q Okay. Do you remember telling Tony Gary that all of  
2 this happened on Greer Street?

3 A Yeah. I do remember that.

4 Q And this is the same Greer Street where this kind of  
5 block party was going on?

6 A Yes.

7 Q You remember telling him it happened right in the  
8 middle of the street, that y'all were out in the street  
9 when it happened?

10 A Yes.

11 Q And you don't mention to him anything, happen to  
12 Tony, you don't tell Tony Gary that anything happens  
13 between you and Willie on Holloway, right?

14 A No.

15 Q And when you did meet up with Willie on Holloway,  
16 after you'd been in this altercation with these two women  
17 you don't know, when the police rolled up, what did you  
18 do, Janice, when you saw the police car?

19 A Well, I hollered go on and leave me alone before I  
20 seen the police, and then at that time, he rolled up.

21 Q Okay. Did you holler again after the police rolled  
22 up?

23 A I told him to go on and leave me alone.

24 Q Were you hollering?

25 A Well, I talk loud anyway.

1 Q When the police came up, Janice, did you see this as  
2 your opportunity to get Willie back for what he'd done to  
3 you?

4 A Yes, ma'am; I did.

5 Q Is it true, Janice, that you never actually ran into  
6 Willie on Greer Street at all?

7 A No. I never seen him on Greer Street.

8 Q When you met up with Willie on Holloway, how far were  
9 you from home at that point? How long would it have taken  
10 you to walk home from there?

11 A About three minutes.

12 Q You were close?

13 A Yes.

14 Q So it wouldn't have taken you that long to get home  
15 from Greer Street?

16 A No. From where I was, all I had to do was walk  
17 straight across the street and I would have been at home.

18 MS. NELSON: And just one moment, Your Honor.

19 THE COURT: Sure. Take your time.

20 Q Janice, Ms. White seems skeptical about you going to  
21 this party on Greer Street and only knowing a few people.

22 MS. WHITE: Objection, Your Honor, to what I may have  
23 seemed.

24 THE COURT: Repeat the question. Don't answer,  
25 ma'am. Repeat the question and so I can deal with this

1 objection.

2 MS. NELSON: Ms. White seems skeptical about Janice  
3 going to a party on Greer Street and only knowing a few  
4 people.

5 THE COURT: Okay. And the nature of your objection,  
6 Solicitor?

7 MS. WHITE: Your Honor, I don't know that my opinions  
8 are necessarily--

9 THE COURT: Can you rephrase the question? I don't,  
10 I don't know if, if Solicitor White's skepticism, if there  
11 is any --

12 MS. NELSON: That's fine, Your Honor.

13 THE COURT: -- you know, would really be relevant.  
14 So repeat the, rephrase your question, if you would.

15 Q Have you ever seen Ms. White at a party on Greer  
16 Street?

17 A No, I haven't.

18 Q Was it unusual to you that you were there and didn't  
19 know a lot of people?

20 A No. It wasn't unusual, because I'm the type of  
21 person, I can, if I pass by your house and you say you can  
22 stop by and have a drink or whatever, I'll do that and I  
23 won't know anybody there. That's how I get to know  
24 people.

25 Q Would you say that, that you believed you could go to

1 Greer Street that night and score some drugs?

2 A Yes.

3 Q And, and you did, right?

4 A Yes, I did. Yes, I did.

5 Q And when, when there was a drug screen done at the  
6 hospital, you did test positive for cocaine, didn't you?

7 A Yes, I did.

8 Q And, and you haven't ever tried to hide that from  
9 anybody, have you?

10 A No, ma'am; I have not.

11 Q Janice, you've got, you've got a tattoo on your neck  
12 right there?

13 A Yes, I do.

14 Q That says WTG?

15 A Yes, I do.

16 Q Those are Willie's initials, aren't they?

17 A Yes, they are.

18 Q And you didn't have that tattoo on July 3rd of 2014?

19 A No, ma'am; I did not.

20 Q And you love him, right?

21 A Yes, I do.

22 Q And being in this trial is not what you want, is it?

23 A No, it is not.

24 Q Janice, you're, you stood over here and put your hand  
25 on this Bible and swore to tell the truth?

1 A Yes, ma'am.

2 Q And you're under oath today. Did Willie beat you on  
3 July 3rd of 2014?

4 A No, he did not.

5 Q Did Willie try to kill you on July 3rd of 2014?

6 A No, he did not.

7 Q Thank you, Janice.

8 MS. NELSON: That's all I have right now, Your Honor.

9 THE COURT: Any redirect, Solicitor?

10 MS. WHITE: And very briefly, Your Honor.

11 REDIRECT EXAMINATION

12 By Ms. White:

13 Q You didn't expect Willie to be at [REDACTED] South Main  
14 when you got out of the hospital, did you?

15 A Yeah.

16 Q Do you remember telling Detective Crisp or, excuse  
17 me, Captain Crisp, that you expected that he would be at  
18 Dennis Lindsay's house on Dole Avenue?

19 A Well, yeah. I, I told him that. I sure did.

20 Q So you didn't think he'd be at [REDACTED] South Main?

21 A I knew he would be there. I knew I was telling a  
22 lie, so why would I actually tell them, if I'm lying, why  
23 would I actually tell them where the man was going to be?

24 Q You told police you would call them if you saw him  
25 again that day, didn't you?

1 A Yeah. I told him that, but they never received a  
2 phone call and he was with me the whole time.

3 Q Was he there when Detective Gary was there?

4 A He went out the backdoor.

5 Q So he's running from the police again after what  
6 happened on July the 3rd, 2014?

7 A Because he didn't do it.

8 MS. WHITE: No further questions.

9 THE COURT: Anything on recross?

10 MS. NELSON: No, sir, Your Honor. I don't have  
11 anything else.

12 THE COURT: Okay. Thank you, ma'am. You can step  
13 down.

14 MS. WHITE: If we can have just a brief minute to see  
15 if our next witness is here?

16 THE COURT: Okay. We can take a short morning break.  
17 All right. Mr. Foreman and ladies and gentlemen of the  
18 jury, we'll take a short morning break. Again, I remind  
19 you no discussion among yourselves about anything related  
20 to this case, and we'll get you back out shortly.

21 (Whereupon, the jury was excused from open court for  
22 a break.)

23 THE COURT: Okay. We'll be in a short recess.

24 (Whereupon, a short break was taken.)

25 THE COURT: Okay. Solicitor?

1 MS. WHITE: Yes, sir. Ms. Nelson and I were just  
2 going through, our next witness is the records custodian  
3 from Self with the medical records.

4 THE COURT: Okay.

5 MS. WHITE: We've agreed to some redactions about a  
6 prior incident or at least one prior incident and other  
7 things that could be construed as prior incidents if the  
8 jury's looking too much into it.

9 THE COURT: Okay.

10 MS. WHITE: So we've agreed to those redactions.  
11 However, I believe Ms. Nelson has some objections to other  
12 things contained in the records. So I thought we could  
13 just go ahead and address that now rather than calling the  
14 custodian and sending the jury back out.

15 THE COURT: Okay. Do I need to look at the  
16 particular record to determine if it needs to be further  
17 redacted? You want some more portions redacted. Do I  
18 need to be looking at it or can you just explain it to me?

19 MS. NELSON: I think I can just tell you. It's not  
20 that many places. It's just the, the areas where they  
21 take, they're taking the history. And she specifically  
22 and they, they note that Janice says boyfriend assaulted  
23 me with lead pipe. I know there is, you know, a hearsay  
24 exception for purposes of diagnosis and treatment. So I  
25 don't know that it's, you know, out of the question for

1 the lead pipe part coming in or the fact that there was an  
2 assault. We're not disputing the assault at all. But the  
3 parts where she, where they're actually saying that she  
4 named, boyfriend. And then other parts where she is  
5 referencing being in an abusive relationship, being  
6 controlled, I don't think any of those are pertinent to  
7 medical diagnosis and treatment. And that's essentially  
8 it, I believe.

9 THE COURT: Okay. All right. So we have one portion  
10 in there where she allegedly says, boyfriend assaulted me  
11 with a lead pipe. The Defense is wanting that redacted.  
12 And then portions where she allegedly said that she's in  
13 an abusive relationship. And something about control, and  
14 I know that was mentioned maybe through testimony.

15 MS. NELSON: It is all in the same paragraph, Your  
16 Honor.

17 THE COURT: Okay. All right. Okay. Well, just as a  
18 general rule, does not the Business Records Act, does that  
19 not kind of trump, even if there is hearsay in there, does  
20 not the business records act kind of trump that or not?  
21 I'm just throwing that out as a question?

22 MS. WHITE: I think it does. If you look at the  
23 business record exception, the only thing that's excluded  
24 there is like an expert opinion, which I think here would  
25 come in because Dr. Short is going to testify. And she's

1 not objecting to any of the opinions testimony that is in  
2 the records. As far as, there's also the hearsay  
3 exception for the statements for medical diagnosis. I  
4 would argue as to the boyfriend part and as to the  
5 paragraph about being in a controlling or abusive  
6 relationship. First of all, that also comes in as prior  
7 inconsistent statement for what she testified today.  
8 She's in love. Everything's great. And it also comes in  
9 as to impeachment of who she says today assaulted her  
10 versus who she was saying two years ago. She did in her  
11 testimony admit to saying some of this and deny saying  
12 some of it.

13 THE COURT: Okay.

14 MS. WHITE: So it was sort of piecemeal, and very  
15 wishy-washy on exactly what she said to whom.

16 THE COURT: Okay. Let me just go back and take a  
17 look. Okay. In her direct examination, we may be kind of  
18 jumping around because we still need to kind of come back.  
19 But in her direct examination she denied that she told the  
20 nurse, I assume nurse at the E.R. itself, that she was  
21 scared of the Defendant, that felt controlled, in a  
22 threatening relationship. She denied all that?

23 MS. WHITE: Yes, sir. So this would be extrinsic  
24 evidence.

25 MS. NELSON: And, Your Honor, my position on that

1 would be that I, as much as I, subject to our previous  
2 arguments about the impeachment issue, in general, as much  
3 as I would like that not to come in given your ruling on  
4 impeachment, I think the nurse can testify to that.

5 THE COURT: Right.

6 MS. NELSON: I think she can say, yes, Janice told me  
7 that. But it actually being in black and white in front  
8 of the jury I think is a different matter.

9 THE COURT: Okay.

10 MS. NELSON: And I do think that just, just because  
11 there is a business record exception, the document still  
12 has to be analyzed for hearsay within hearsay and any of  
13 Janice's statements are hearsay within hearsay.

14 THE COURT: Okay.

15 MS. NELSON: I think somebody can testify as to the  
16 impeachment issue of, over our objection. But I don't  
17 think those things fit the exception for purposes of  
18 diagnosis and treatment.

19 THE COURT: All right.

20 MS. WHITE: And, Your Honor, I don't see how it being  
21 in black and white or in testimony is any different. I  
22 mean, Your Honor, will instruct the jury.

23 THE COURT: And but just to make sure the record is  
24 clear. She also denied on direct telling the nurse that  
25 she was assaulted by her boyfriend with a pipe, as well as

1 denying she told the doctor that she was assaulted by the  
2 boyfriend. Okay. So then I, based upon my previous  
3 ruling, then I think certainly that the nurse and you've  
4 kind of acknowledged that, that the nurse can testify  
5 concerning what she allegedly said. Now, let's go to the  
6 issue of whether or not the record itself can be put in in  
7 addition to the testimony. So give me a chance to look at  
8 that. Okay.

9 (Whereupon, The Court took a short break.)

10 THE COURT: Okay, we are back on the record. The  
11 portion that Defense is wanting redacted in the record, is  
12 that the, what the nurse recorded about the boyfriend  
13 assaulted with lead pipe, abusive relationship, that sort  
14 of thing. Is that what the nurse recorded?

15 MS. WHITE: Some of it's with the nurse and some of  
16 it's with the doctor.

17 THE COURT: Okay. All right.

18 MS. NELSON: That's right.

19 THE COURT: Okay. All right. As far as this  
20 threatening relationship, feeling controlled, is that what  
21 the nurse recorded?

22 MS. WHITE: Yes, sir.

23 MS. NELSON: Yes, sir.

24 THE COURT: Well, I'm going to go ahead and not  
25 redact that. I think based upon my previously ruling, you

1 know, extrinsic evidence certainly is not limited to oral  
2 testimony. I think it would be written evidence such as  
3 the medical records and coupled with the fact the, if the  
4 custodian does testify to the elements of, of business  
5 records or records of regularly conducted activity. And  
6 there are not any sort of objective opinions that is being  
7 requested to have redacted, I'm going to, I'm not going to  
8 redact those particular areas and allow those to come in  
9 with the medical record.

10 MS. WHITE: Your Honor, I'm just going to make a copy  
11 of what we've already redacted.

12 THE COURT: Okay.

13 MS. NELSON: Your Honor, are we on the record?

14 THE COURT: We can be.

15 MS. NELSON: Just a quick, will you be giving the  
16 jury an instruction that, that the redactions in this  
17 record are irrelevant material?

18 THE COURT: I will. Whenever, I guess this is going  
19 to be the next witness dealing with this?

20 MS. NELSON: Yes, Your Honor.

21 THE COURT: Okay. I will explain to them that they  
22 are to place no significance to any portions that have  
23 been marked out. I'll use the word redacted but tell them  
24 marked out, and I'll give them some, some instruction  
25 along those lines.

1 MS. NELSON: Thank you.

2 THE COURT: Okay. Let's bring the juror out, please.

3 (Whereupon, the jury came into open court at

4 approximately 11:10 a.m.)

5 THE COURT: Let the record reflect the jury is back  
6 in. Ladies and gentlemen, we took a longer break than we  
7 had expected, but it turns out, I had a couple of legal  
8 issues that we needed to deal with with the lawyers, so  
9 we've been working. We hadn't just been sitting around  
10 drinking coffee and leaving y'all back in the jury room.  
11 Okay. Solicitor, you ready to call your next witness?

12 MS. PENNY: Yes, Your Honor. We call Sheryl  
13 Haupfear.

14 SHERYL HAUPFEAR, being  
15 first duly sworn, testified as follows:

16 DIRECT EXAMINATION

17 By Ms. Penny:

18 Q Good morning, Ms. Haupfear, how are you?

19 A I'm fine. How are you?

20 Q Good. Thanks. Would you please state and spell your  
21 name for the record?

22 A Sheryl Haupfear, S-H-E-R-Y-L H-A-U-P-F-E-A-R.

23 Q Great. And what is your occupation?

24 A APC Coordinator in Medical Records at Self Regional.

25 Q What, what does that mean, APC Coordinator?

1 A I handle out-patient claims, but I'm also the  
2 custodian of medical records.

3 Q Okay. How long have you done that?

4 A Thirty-six-and-a-half years.

5 Q Is that how long you've been at Self Regional  
6 Healthcare?

7 A Yes.

8 Q Have you been anywhere else in your career?

9 A No.

10 Q Did you receive from our office, the Solicitor's  
11 Office, a subpoena for certain hospital records?

12 A Yes.

13 Q Who were those records of?

14 A Janice Holloway.

15 Q And were those medical records?

16 A Yes.

17 Q Of ER visits from 2012 forward?

18 A Yes.

19 MS. PENNY: May I approach the witness, Your Honor?

20 THE COURT: Sure can.

21 Q Are these those records that I'm handing you right  
22 now?

23 A Yes.

24 Q Did you retrieve these records yourself?

25 A No, I did not.

1 Q Who, who retrieved them for you?

2 A One of our contract employees.

3 Q Okay. Did you review them after they were retrieved?

4 A Yes.

5 Q Okay. Were they maintained throughout their  
6 existence under your care, custody, and control?

7 A Yes.

8 Q And is it the regular practice of the hospital, Self  
9 Regional Healthcare, to keep these business records?

10 A Yes.

11 Q Okay. And these records being of Emergency Room  
12 visits of a particular patient?

13 A Correct.

14 Q Okay. And these are regularly kept and maintained?

15 A Yes.

16 Q All right.

17 MS. PENNY: All right. The State moves that these  
18 records that were previously marked as State's Exhibit 24  
19 be admitted into evidence at this time.

20 THE COURT: Okay.

21 MS. NELSON: Subject to our previous objection, Your  
22 Honor.

23 THE COURT: Certainly. They will come into evidence  
24 on behalf of the State and number 24.

25 MS. PENNY: Thank you, Your Honor.

1 (Whereupon, State's Exhibit 24 was admitted into  
2 evidence.)

3 MS. PENNY: And that's all I have for you, Ms.  
4 Haupfear. Please answer any questions from--

5 MS. NELSON: -- no questions.

6 THE COURT: Thank you, ma'am. You can step down and  
7 you are free to leave the courthouse or you're certainly  
8 welcome to remain with us if you'd like.

9 MS. HAUPFEAR: Thank you.

10 MS. PENNY: The State calls Dr. John Short.

11 THE COURT: Okay. Come around, and she'll swear you  
12 in, Doctor. I failed to instruct the jury, even though we  
13 just had the conversation ten minutes ago. Ladies and  
14 gentlemen, with the last witness, the records custodian  
15 with the hospital and some medical records from Self  
16 Hospital were admitted into evidence. Of course, that  
17 evidence along with other admissible evidence will be with  
18 you when you go back to deliberate in the jury room. You  
19 will notice from those records that there's been some  
20 portions blacked out, I guess, is the manner of redaction,  
21 actually blacking out. I want you to place no  
22 significance to the fact that portions of those records  
23 have been marked out or the legal term, redacted. And the  
24 reason for that is is that you are to consider only the  
25 relevant evidence in the case and that's the only evidence

1 we're going to give you, evidence that is relevant and  
2 material to, to this case. So place no significance to  
3 the fact that some of the portions of the records were  
4 blacked out. You may proceed, Solicitor.

5 DR. JOHN SHORT, being  
6 first duly sworn, testified as follows:

7 DIRECT EXAMINATION

8 By Ms. Penny:

9 Q Good morning, Dr. Short.

10 A Good morning.

11 Q How are you?

12 A I'm doing good. How are you?

13 Q Good. Thank you. If you will, please, state your  
14 full name and spell your name for the record?

15 A John Paul Short, J-O-H-N P-A-U-L S-H-O-R-T.

16 Q Okay. If you would, please, give the jury a little  
17 bit of background information about your education and  
18 training as a doctor?

19 A Okay. I was born in West Virginia and went to  
20 Marshall University, undergrad, West Virginia; Osteopathic  
21 Medical School in Lewisburg. Did a residency in Emergency  
22 Medicine. Been practicing as an attendee for about ten  
23 years and started moonlighting in 2003. Was in the Army  
24 Reserve doing military medicine for about twelve of those  
25 years.

1 Q Okay. Do you have any other training other than that  
2 or licenses?

3 A No. Just Emergency Medicine. I work in urgent  
4 cares, as well. I did do one year of Family Practice  
5 Residency before I did my E.R. Residency, but I've  
6 practiced E.R. ever since 2005.

7 Q Are you board-certified in Emergency Medicine?

8 A Yes, ma'am.

9 Q Are there any other professional associations or  
10 activities you want to highlight for us or, or talk about?

11 A No, ma'am.

12 Q Do you have any teaching experience?

13 A A couple of the job assignments that I've had, we've  
14 had residents who rotate through, you know, kind of  
15 clinical professorships when I first started back in 2005.  
16 Since moving to South Carolina, I just had some med  
17 students rotate through but no specific teaching  
18 experience.

19 MS. PENNY: Your Honor, the State requests that the  
20 witness be introduced as an expert in the field of  
21 Emergency Medicine.

22 THE COURT: Okay. And does the Defense wish to  
23 examine Dr. Short on qualifications?

24 MS. NELSON: No, sir. No objection.

25 THE COURT: And without objection, Dr. Short will be

1 found to be an expert in the area of Emergency Medicine.  
2 Ladies and gentlemen of the jury, let me just briefly  
3 explain to you, and I'll do that in a little more detail  
4 at the conclusion. Typically, witnesses who testify in  
5 cases are only allowed to testify as to what they may have  
6 seen, heard, that sort of thing, but we do have an  
7 exception to that rule when, by virtue of education,  
8 training, experience, a witness has a, an expertise in a  
9 particular field, then we will classify them or designate  
10 them as an expert in that particular field. And,  
11 therefore, they will be allowed to render certain opinions  
12 if so asked in connection with the case. Now, the fact  
13 that I have found Dr. Short to be an expert in the field  
14 of Emergency Medicine does not automatically mean that you  
15 are to consider what he says as true. His credibility,  
16 his believability is to be assessed and determined by you  
17 just as you do with any other witness in this case. So  
18 just because he's an expert, that does not automatically  
19 mean that you will consider or use what he will testify  
20 to. That's up to you as the sole fact finders in this  
21 case. Okay. All right, Solicitor.

22 MS. PENNY: Thank you, Your Honor. I'm handing up  
23 what's been marked as Exhibit 24 to Dr. Short for his  
24 reference.

25 Q Dr. Short, were you working in the Self Regional

1 Healthcare Emergency Room on July 3rd, 2014?

2 A Yes, ma'am.

3 Q Did you see a patient, Janice Holloway that day?

4 A Yes, ma'am.

5 Q Do you recall how she arrived?

6 A Only by looking at the Emergency Room chart. She  
7 arrived via EMS.

8 Q She arrived via EMS?

9 A Yes, ma'am.

10 Q What injuries appeared to be present when she  
11 arrived?

12 A Again, using the reference of the chart and primarily  
13 the main injuries were, give me just a minute.

14 THE COURT: Sure. Take your time, Doctor.

15 DR. SHORT: Thank you.

16 A Primarily, an abrasion noted to the right side of the  
17 neck which would be bruising or some sort of skin/tissue  
18 damage. And also a similar wound to the right lower side  
19 of the abdomen, and then ecchymosis or bruising to both  
20 legs and the right arm.

21 Q Did the Emergency Room staff obtain a history from  
22 Ms. Holloway?

23 A Yes, ma'am.

24 Q And why is a history important when you're speaking  
25 to a patient and treating them?

1     A     It gives you the circumstances under which an injury  
2     occurred. Sometimes histories are variable depending on  
3     the circumstance. Sometimes, a patient can give you a  
4     full history and tell you what happened and tell you how  
5     they got there. You also obtain some history from EMS  
6     records, if they do come by EMS. And then the personal  
7     history, the interview I have with the patient kind of  
8     puts in context what happened. It's like reading the  
9     preface to the story so you understand the circumstances  
10    before you begin your examination.

11    Q     So is it important to know what injured a patient as  
12    part of that history?

13    A     Absolutely. It will determine kind of the force and  
14    the, or the possibility of force and the degree of the  
15    injury and the type of injury that they can have.

16    Q     What history did Ms. Holloway give at the Emergency  
17    Room that day?

18    A     According to my records, it says I obtained the  
19    history from the patient, and I reviewed the Emergency  
20    Room Nurse's Note. The patient presents stating that she  
21    was assaulted by her boyfriend. She states that she was  
22    assaulted and beaten with a lead pipe. States she was not  
23    knocked unconscious, but did sustain wounds to her right  
24    arm, both of her legs and her neck. She complained that  
25    her pain was sharp and it was worse with movements.

1 Q What tests did you then order as a result of that  
2 history and the injuries that you saw her with?

3 A Depending on the circumstances in an EMS patient, the  
4 hospital that I work at here at Self, we have trauma  
5 protocols for patients. And if the injuries appear like  
6 they could be severe enough, there is a trauma panel that  
7 you can select which includes blood work and also x-rays  
8 and CAT scans. The x-rays that were ordered on this  
9 patient were arm x-ray and leg x-ray. The forearm on both  
10 sides, this area, and both femurs, the lower extremity on  
11 the right, and then a simple chest x-ray for the general  
12 x-rays. And then, additionally, CAT scans were ordered.  
13 CAT scans of the head and neck, the chest, abdomen and  
14 pelvis. Typically, we would call that a trauma panel of  
15 CTs over in the Emergency Room.

16 Q Is anything included other than those CT scans in the  
17 trauma panel, any other sort of tests?

18 A There's two separate panels. There's trauma labs,  
19 which include basic metabolic panels, complete blood  
20 counts, a urine test, liver function, drug screen, and  
21 alcohol level.

22 Q So that's part of a panel that you would order, sort  
23 of a package --

24 A Yes, ma'am.

25 Q -- when you see a trauma patient?

1 A Yes, ma'am.

2 Q Okay. Do you see the alcohol test ordered as part of  
3 that panel in the medical record?

4 A Yes, ma'am.

5 Q Can you tell me what that, what that test comes up  
6 with; what it says?

7 A The results?

8 Q The results.

9 A Yes, ma'am. Let me look. I'm sorry. Forgive me.

10 Q Take your time. No hurry.

11 A They print off a little different than they look in  
12 the computer. Zero.

13 Q So the alcohol result was zero?

14 A I'm sorry. Let me make sure this is right.

15 According to the way that I read this, the alcohol level  
16 was 21. The reference range was zero. I'm sorry.

17 Q What does that mean?

18 A The reference range would be the normal range, what  
19 you would expect to see if someone hadn't drank anything,  
20 alcoholic. So the reference range is zero; the patient's  
21 range was 21. I'm sorry. I'm trying to read this  
22 correctly. This looks different than when I see it in  
23 the, on the chart.

24 Q Sure. So in layman's terms, what does that mean to  
25 an average person; had she had alcohol that night or had

1 she not?

2 A You know, I, I believe this says zero. The thing  
3 that I'm seeing that says 21, I think, is a continuation  
4 of this chemistry. So I think the alcohol medical is  
5 zero, that's the only level that I see on here under that  
6 block of tests which would indicate no alcohol.

7 Q Was there any indication in your notes that she  
8 impaired, that she appeared impaired?

9 A According to the general exam, I commented that she  
10 was alert and cooperative. And, generally, if someone is  
11 alert and cooperative, they can tell you why they're  
12 there, what they're there for, you know, tell you their  
13 name, answer simple questions.

14 Q Now, will you please look to the drug screen and tell  
15 us what you see there, specifically, if you'll look at the  
16 result for the test of whether there's cocaine?

17 A Yes, ma'am. The only positive test in the drug  
18 screen that I can see, it says positive for cocaine.

19 Q And in your opinion, in your expert opinion, what  
20 typically happens when someone is on cocaine?

21 A Typically, increased activity, the heart rate goes  
22 up, blood pressure goes up, you know, a little bit  
23 hyperactive, agitated. Somewhat like that. Typically,  
24 not altered as far as being able to answer questions.

25 Q So it would not alter their mental state?

1 A I guess, it would depend on how much of it you would  
2 take. But generally, no.

3 Q And you would expect that somebody who'd had cocaine  
4 could still answer questions and be alert as you noted?

5 A I would expect most of the time. Again, you know, it  
6 would depend on the quantity.

7 Q Sort of moving, moving onto a different topic. In  
8 your expert medical opinion in all of your years of  
9 Emergency Medicine, could you kill someone by beating them  
10 with a pipe?

11 A Yes, ma'am.

12 Q A lead pipe?

13 A Yes, ma'am.

14 Q What are some ways that could happen that you could  
15 kill someone with a lead pipe?

16 MS. NELSON: Your Honor, I'm going to object to this  
17 line of questioning because, as irrelevant, because no one  
18 died.

19 THE COURT: Right.

20 MS. PENNY: We have to show, Your Honor, that she  
21 could have died.

22 THE COURT: Okay. Let me see the lawyers.

23 (Whereupon, a bench conference was held in the  
24 presence of the jury but out of the hearing of the  
25 jury.)

1 THE COURT: Okay. All right. Objection sustained.

2 Q Dr. Short, I'm about to show you some exhibits that  
3 have been previously entered into evidence that the, a  
4 police officer took at the hospital of, of Ms. Holloway's  
5 injuries.

6 A Yes, ma'am.

7 Q And this is, can you see this screen?

8 THE COURT: Doctor, if you need to step down to get a  
9 better look at it that will be perfectly fine. You'll  
10 just need to remember you're away from the microphone, so  
11 you'll need to speak up louder than you normally would,  
12 okay?

13 DR. SHORT: Yes, sir.

14 A Yes, ma'am. I can see them.

15 Q Okay. So this is the first of three photos that I  
16 want to show you and make sure the jury understands what  
17 we're looking at in just a second. In your experience and  
18 expertise, were these injuries consistent with being  
19 beaten with a pipe?

20 A Those injuries would be consistent with being hit  
21 with some form of object, yes ma'am.

22 Q Okay. In your experience and expertise and, in  
23 particular this injury, is this consistent with maybe  
24 cowering or taking a defensive position?

25 A Typically, when you're injured on the forearm,

1 specifically, the front side surface, that would be more  
2 of a defensive position trying to put your arm up to  
3 protect yourself.

4 Q And you, I noticed that you held your hand up like  
5 this?

6 A Yes, ma'am.

7 Q Would you consider it typical to sustain an injury  
8 like that when trying to protect your head or neck?

9 A I mean, generally, to get hit in that direction. I  
10 mean, you certainly could get hit with your arm down that  
11 way. But most of the time, you would have it up here  
12 where the force would come down and give you a lot of  
13 bruising on the outside of the elbow.

14 Q Okay. That's all I have specifically about those  
15 photos.

16 A Okay.

17 Q If it'd be more comfortable to take your seat. What  
18 type of, is this a broken arm from what you can see in the  
19 medical records?

20 A According to the medical record; yes, ma'am.

21 Q What type of break is it?

22 A Radiology report, it is a comminuted fracture which  
23 means multiple pieces.

24 Q Okay. Multiple pieces, is that more than two?

25 A I think probably the definition of comminution would

1 be two or more.

2 Q Two or more?

3 A Yeah.

4 Q Would that be consistent with what a, what a  
5 layperson, what we all might think of as maybe even  
6 shattered?

7 A Sure.

8 Q Is this a common type of break?

9 A In an Emergency Room, certainly, you see a lot of  
10 broken bones, yeah.

11 Q Is this a break that is sort of consistent with  
12 someone having been struck with a great deal of force?

13 A The, the type of break is what's called a mid-shaft  
14 ulnar break which would be this bone right here. So the  
15 break in the middle generally requires direct force to  
16 break that.

17 Q And as part of this history, you understood from Ms.  
18 Holloway that the injuries happened immediately prior to  
19 her coming to the hospital --

20 A Yes, ma'am.

21 Q -- is that correct, from the record? Do you remember  
22 her demeanor that night, do you recall?

23 A I don't recall the specific interview; no, ma'am.

24 Q Were there any other parts of her body that you  
25 suppose might have been broken when you first saw her?

1 A Certainly, just referencing the x-rays of a large  
2 wound on the right thigh, the right arm. There were,  
3 according to the record, there was some ecchymosis or  
4 bruising on the other extremity, as well, hence the x-rays  
5 of the multiple legs and the one arm. There was also, as  
6 you can see in the picture there at the top of the gown  
7 there, right above the top of the leg where there's a dark  
8 bruise, there's also some bruising up under the skin there  
9 which would have necessitated the trauma scan or the CT to  
10 further evaluate any kind of internal injury.

11 Q So, ultimately, though from the record her leg is not  
12 broken?

13 A No, ma'am.

14 Q But, but you considered that it could be because of  
15 the injuries you saw?

16 A Certainly.

17 MS. PENNY: That's all I have right now. Please  
18 answer any questions, Dr. Short, from Counsel.

19 DR. SHORT: Yes, ma'am.

20 THE COURT: Okay. Ms. Nelson.

21 MS. NELSON: Thank you, Your Honor.

22 CROSS-EXAMINATION

23 By Ms. Nelson:

24 Q Hi, Dr. Short.

25 A Good morning.

1 Q I am looking at the, the Abstract Summary Form near  
2 the, it's just the third page of this record, I believe,  
3 or at least it is in mine.

4 A All right.

5 Q One of the secondary diagnoses of, of Ms. Holloway  
6 was long-term use of steroids, is that right?

7 A Let me find what you're talking about here. I'm  
8 sorry.

9 Q No, that's okay.

10 A I'm not sure they're assembled the same way. Would  
11 that be under the, Patient Problem List. Is that what  
12 you're referencing?

13 Q I'm looking at the Abstract Summary Form.

14 MS. NELSON: May I approach, Your Honor.

15 THE COURT: Yeah. Show, show him your page, and then  
16 maybe that'll help him find his page better.

17 A I'm sorry.

18 Q And maybe it's not in your record, if it's not near  
19 the beginning. Is it not in there?

20 A I don't believe so, ma'am.

21 MS. NELSON: Yeah. I'll be, I'll be right back with  
22 it, Doctor. May I approach again, Your Honor.

23 THE COURT: Sure.

24 Q I realize that's not in your copy, but does that look  
25 like a part of the medical record from Self for this

1 visit?

2 A Yes, ma'am.

3 Q For Ms. Holloway? It's got her name on it.

4 A Yes, ma'am.

5 Q And that shows as a secondary diagnosis long-term  
6 steroid use?

7 A Yes, ma'am.

8 Q Is that right? A steroid is something like  
9 prednisone?

10 A Yes, ma'am.

11 Q And your, your record reflects that she actually had  
12 a prednisone prescription?

13 A Prescribed the night of, you mean, or she had a  
14 history of it?

15 Q That she came in with one already.

16 A She may have; yes, ma'am.

17 Q Is one of the side effects of prednisone skin  
18 thinning and bruising?

19 A It can be, certainly.

20 Q Okay. Is it fair to say, Doctor, that Ms. Holloway  
21 came into the E.R. that night without any life-threatening  
22 injuries?

23 A Initially, when you examine someone, you get your set  
24 of vital signs, and then kind of determine if you need  
25 additional testing. I would say at face-value, I would

1 have thought that she did not have any life-threatening  
2 injuries, but then you get the CT scan to see if there's  
3 anything under the surface that you didn't see to start  
4 with.

5 Q Well, with Ms. Holloway, you, you did get a CT scan,  
6 right?

7 A Yes, ma'am.

8 Q And there, there was nothing life-threatening found  
9 in the CT scan, right?

10 A Correct.

11 Q She didn't actually have any, other than the scratch  
12 and bruising on her neck, she did not have any head  
13 injuries?

14 A Yes, ma'am.

15 Q Is that fair?

16 A Correct.

17 Q All of her injuries were from the arm down?

18 A Yes, ma'am.

19 Q And you also mentioned that she could have sustained  
20 this fracture to her arm if it were in a downward  
21 position?

22 A Yes, ma'am.

23 Q It could have been held down by her side?

24 A Yes, ma'am.

25 Q In this position, is that right?

1 A Is possible; yes, ma'am.

2 Q Or even in this position?

3 A And anywhere along the, the plane where that bone  
4 could have been hit directly, yes ma'am.

5 Q Okay. So without actually being there to see when  
6 Janice was struck, you don't know what position her arm  
7 was actually in?

8 A Correct.

9 Q Is that right?

10 A Yes, ma'am.

11 Q And, again, just to reiterate, you did not find any  
12 other fractures other than the broken arm?

13 A Correct.

14 Q That was not a fracture, you've described it as  
15 shattered or you agreed that it could be called shattered  
16 in laymen's terms. It did not require any surgery, did  
17 it?

18 A Not acutely, ma'am. Now, she was referred to  
19 orthopaedics for follow-up.

20 Q As far as you know, do you have any idea what  
21 happened in the follow-up?

22 A No, ma'am.

23 Q So, so you wouldn't know whether that was required or  
24 not?

25 A Right.

1 Q You just know you did not see any immediate need for  
2 surgery in the E.R.?

3 A Yes, ma'am.

4 Q Okay. She was in the E.R. for about four hours?

5 A It looks that way, yes ma'am.

6 Q And when you have this kind of fracture, that's going  
7 to result in some temporary loss of use of that, of the  
8 arm?

9 A Certainly.

10 Q Any reason to think that, that she wouldn't have been  
11 able to regain full use of her arm after it healed?

12 A I don't believe so. I think she should have gain,  
13 regained full use of it.

14 Q Okay.

15 A Yes, ma'am.

16 Q In your, Clinician's History, in the E.R. chart, the  
17 history you took, you mentioned some of the things that  
18 you, that you took as history. One of the other things  
19 you wrote was no history to suggest any head injury, is  
20 that right?

21 A Right.

22 Q And you noted no loss of consciousness?

23 A Yes, ma'am.

24 Q So after you saw Janice, she was there for about four  
25 hours and was discharged home?

1 A Yes, ma'am.

2 Q Is that right? And was told to follow-up with her  
3 Primary Care Physician.

4 A And an orthopedist.

5 Q And an orthopedist?

6 A Yes, ma'am.

7 Q And at that point, your work was done as far as Ms.  
8 Holloway went, right?

9 A Correct.

10 Q And at the time you discharged her after doing CT  
11 scans and x-rays because of, I mean, in the E.R., you want  
12 to rule things out out of an abundance of caution?

13 A Sure.

14 Q And so that was when you discovered there was no  
15 break in the right leg despite there being bruising?

16 A Correct.

17 Q And you ran, and even though you saw no evidence of  
18 head injury, you do the CT just to make sure?

19 A Sure.

20 Q And after you did all of those tests that you do as  
21 part of your standard of care in the Emergency Room,  
22 Janice was discharged home with no life-threatening  
23 injuries, is that right?

24 A Yes, ma'am.

25 Q Her condition was stable when she was discharged?

1 A Yes, ma'am.

2 Q And she left with a prescription for 16 pain pills  
3 and an antibiotic?

4 A Yes, ma'am.

5 Q Is that right?

6 A Yes.

7 MS. NELSON: Just one moment, Your Honor.

8 THE COURT: Sure. Take your time.

9 MS. NELSON: That's all I have. Thank you, Your  
10 Honor.

11 THE COURT: Redirect?

12 MS. PENNY: No, Your Honor.

13 THE COURT: Thank you, Doctor. You can step down and  
14 you are free to leave. Do we need to add that one page  
15 for the record?

16 MS. NELSON: I've got it circled. I've got what I  
17 was asking him about circled. Oh, here we go. Here's a  
18 blank copy.

19 THE COURT: You can just put it as the back page,  
20 Madam Court Reporter. All right, Solicitor?

21 MS. WHITE: State calls Shirolyn Fredette.

22 THE COURT: Okay.

23 SHIROLYN FREDETTE, being  
24 first duly sworn, testified as follows:

25 DIRECT EXAMINATION

1 By Ms. White:

2 Q Good morning.

3 A Good morning.

4 Q What's your name?

5 A Shirolyn Fredette.

6 Q Okay. How do you spell Fredette?

7 A F-R-E-D-E-T-T-E.

8 Q Okay. What about Shirolyn?

9 A S-H-I-R-O-L-Y-N.

10 Q Okay. How were you employed back in July of 2013?

11 A How was I?

12 Q Yes.

13 A Full-time nightshift staffers.

14 Q And you're a nurse at Self Regional?

15 A Yes.

16 Q What department were you assigned to?

17 A The Emergency Department.

18 Q And were you working, I guess, the overnight hours of

19 July 2nd into July 3rd of 2014, do you recall?

20 A Yes.

21 MS. WHITE: May I approach the witness, Your Honor?

22 THE COURT: Sure.

23 Q I'm going to hand you what's already in evidence as

24 State's Exhibit 24. Do you recall seeing a patient that

25 night by the name of Janice Holloway?

1 A After reading, yes.

2 Q And if you, I guess, it's been a long time since July  
3 of 2014, hasn't it?

4 A Yes.

5 Q So if you need to refer to the record feel free.

6 A Okay.

7 Q Were you, generally speaking, when a patient comes  
8 into the E.R. via EMS, so not your typically walk-in, but  
9 somebody who's come in urgent. What sort of steps do they  
10 go through before they see the doctor?

11 A Ambulance will bring them in. We get report from  
12 EMS. We transfer them over to our E.R. stretcher. We  
13 triage them, get vital signs, chief complaint, assessment,  
14 and then the physician will come, assess them, and then  
15 we'll go from there.

16 Q Were you the nurse who handled the triage and  
17 assessment for Ms. Holloway that night?

18 A Yes.

19 Q And as part of triage, do you take a history of, of  
20 their complaint?

21 A Yes.

22 Q What was the history that Ms. Holloway gave you that  
23 night?

24 A I can look back in here?

25 Q Yes.

1 A Well, that she gave me or from EMS or all, in  
2 general?

3 Q Just all in general, what history?

4 A Well, she came to the E.R. around, on this, July the  
5 3rd around 2:15. Possibly assaulted by a boyfriend with a  
6 lead pipe. A possible femur fracture. Denies LSC, loss  
7 of consciousness. She arrived by EMS at 8:30. Her chief  
8 complaints, she had some soft tissue injury to her right  
9 forearm, some abrasions to her right forearm, injury to  
10 her right thigh, some abrasions to her right thigh, injury  
11 to her right shin, and also abrasion injury to her neck  
12 and clavicle area. I triaged her as a level three or ESI  
13 Level 3. She was alert and oriented times three.

14 Q And let me stop you right there.

15 A Yes.

16 Q Alert and oriented times three, is that to person,  
17 place?

18 A Person, place, time, situation. She was not confused  
19 or anything like that.

20 Q Okay.

21 A That's with the GCS of 15. After 20 minutes prior to  
22 her arriving, around 20 minutes prior to her arriving to  
23 the ED--

24 Q -- and is that something she would have told you?

25 A No, that's just from a nurse.

1 Q Okay.

2 A From the report that how long it took. When EMS  
3 gives us a report pretty much. And I, the history comes  
4 from the patient, so I would get report from the EMS. And  
5 then I would also speak with the patient to confirm if the  
6 story was matching up, if there's any other information  
7 that she can give. And that is all within the triage, and  
8 then I do my assessment. Which within the assessment, we  
9 have general questions we have to ask and that's where  
10 that statement under the nursing assessment.

11 Q What was her, in the general questions that you  
12 asked, that first under general, what was her response?

13 A Expresses fear of partner. Patient reports being in  
14 a threatening relationship. Overly protective significant  
15 other. Reports feeling controlled. Has been hit or  
16 shoved. Reports verbal abuse.

17 MS. NELSON: And, Your Honor, just renewing our  
18 previous objection.

19 THE COURT: So noted.

20 Q And what was her demeanor?

21 A She was fully verbal. She was tearful but  
22 cooperative.

23 Q So she was crying but able to---

24 A Answer appropriately, yes.

25 Q Going back up when, to your triage notes, did she

1 have any trouble walking or getting around?

2 A No. Well, it says uses a wheelchair. Oh, I guess,  
3 it, I would say maybe, because it says, gait transferring  
4 is weak. So if I charted that, then she would have had  
5 difficulty. I wouldn't, as a nurse, my object, I wouldn't  
6 have let her just get up and walk because she somehow  
7 appeared weak.

8 Q Okay. So there was some concern that she couldn't  
9 just walk around?

10 A Right.

11 Q Do you administer any sort of pain medication as part  
12 of triage or your assessment?

13 A No. We can't administer without a physician's order  
14 and working in the E.R., patients don't get pain  
15 medication or any medication until they are seen by a  
16 physician.

17 Q Okay. So would she have told you all of this and  
18 would all of this have been done prior to the  
19 administering of any sort of pain meds?

20 A Yes, the triage.

21 Q Can you tell from the record what time, was she  
22 ultimately prescribed pain meds?

23 A Prior or from the physician?

24 Q From the physician?

25 A Yes. Dr. Short, she got Zofran for nausea and

1 Dilaudid for pain.

2 THE COURT: Can you spell that first drug?

3 A Zofran, Z-O-F-R-A-N. He entered that order at 2:26,  
4 and I gave it at 2:33. We usually give that for nausea  
5 before we give any type of pain medication. And she got  
6 pain medication at 2:31 and then again at 3:32.

7 Q And, again, your initial conversation with her was  
8 at?

9 A 2:15 when she, around 2:15.

10 Q Do y'all use a scale to allow a patient to rate pain?

11 A Yes.

12 Q What's that scale? Like, what does a one mean, what  
13 does a ten mean?

14 A It is one, well, zero to ten. No pain to ten,  
15 obviously is severe pain. And we have a chart, a board in  
16 each E.D. room and they could, it has faces and also  
17 numbers.

18 Q Did she -- from your looking at the record, did she  
19 rate her pain?

20 A She should have. That's part of our triage. Ten out  
21 of ten pain when she first arrived.

22 Q So that would be the worst pain she could possibly be  
23 feeling --

24 A Correct.

25 Q -- per y'all's, I guess, definitions?

1 A Yes. And that is off the patient's, not my judgment.

2 Q Okay.

3 MS. WHITE: Please answer any questions Ms. Nelson  
4 has for you.

5 THE COURT: Cross-examination.

6 MS. NELSON: Thank you, Your Honor.

7 CROSS-EXAMINATION

8 By Ms. Nelson:

9 Q Hi, Ms. Fredette.

10 A Hi.

11 Q One of Janice's current medications that she recorded  
12 in her chart was prednisone, is that right?

13 A That she took prior or?

14 Q Yes, ma'am. I'm looking at current medications in  
15 the Emergency Department chart.

16 A Prednisone; yes. That was, that wasn't the same  
17 visit though.

18 Q That was something she'd been prescribed previously  
19 to coming to the E.R.?

20 A Right. Yes.

21 Q And I won't keep you long because we have talked to  
22 the doctor about a lot of this already.

23 A Okay.

24 Q Ms. Holloway's injuries were not life-threatening  
25 were they? Y'all didn't have to call a code or

1    resuscitate her?

2    A     Oh, no.

3    Q     No. Other than the scratch or, and bruise to her  
4    neck, she did not have any head injuries, did she?

5    A     I'll have to look at the CT results to know.

6    Q     That's fine. That's okay. And she was in the E.R.  
7    for about four hours?

8    A     Oh, let's see. She got there at 2:10. What time did  
9    she get discharged? It was about four hours, yes.

10   Q     And she was discharged in stable condition?

11   A     Yes. In a wheelchair with a splint and sling, and  
12   she left with a driver.

13   Q     And you typically discharge people in wheelchairs out  
14   of the, out of the E.R. if they have a broken bone?

15   A     Yes, if they're not able to, stable enough to walk.

16   Q     Okay.

17         MS. NELSON: Just one moment. Thank you, ma'am.  
18   That's all I have.

19         THE COURT: Redirect?

20         MS. WHITE: No, sir.

21         THE COURT: Okay. Thank you, ma'am. You can step  
22   down and you are free to leave.

23         MS. WHITE: The State calls Coray Deblois.

24                 CORAY DEBLOIS, being

25   first duly sworn, testified as follows:

DIRECT EXAMINATION

1  
2 By Ms. White:

3 Q And if you could state your name for the record?

4 A Coray Alexander Deblois.

5 Q And how do you spell Deblois?

6 A It's D-E, B as in boy, B-L-O-I-S.

7 Q Okay. And Coray is with a A?

8 A C-O-R-A-Y; yes, ma'am.

9 Q How were you employed back on July 3rd, 2014?

10 A Greenwood Count EMS.

11 Q And what were your duties with Greenwood County EMS?

12 A I was a paramedic.

13 Q Were you working the, I guess, the night shift of  
14 July 2nd into the 3rd of 2014?

15 A Yes.

16 Q Did you respond to a call in the area of Greer  
17 Street, Holloway, Kirksey, that area?

18 A Yes, ma'am.

19 Q Who was the patient you were called to treat?

20 A Janice Holloway.

21 Q And when you arrived, how did you find Ms. Holloway?

22 A I'm going to reference my report on this. The  
23 patient was found lying on her right side on the ground.

24 Q Did she have any, appear to have any injuries?

25 A Yeah. The patient had multiple, multiple bruising

1 and swelling noted to multiple spots on her body.

2 Q Did she appear, was she alert and oriented?

3 A Yes, ma'am.

4 Q And when you say alert and oriented times four, what  
5 does that mean?

6 A That means she knows her, her name. She knows where  
7 she's at, she knows what time, and any recent event; i.e.,  
8 who is the President of the United States.

9 Q If she had appeared to have any sort of mental  
10 difficulties or, or been in, appeared intoxicated, would  
11 you have noted that in your report?

12 A Yes, ma'am.

13 Q And did you note anything like that?

14 A Not to my knowledge.

15 Q Do you take a history from a patient?

16 A Yes, ma'am.

17 Q And what history did she give you?

18 A She did not give me any history.

19 Q Okay. Did she, did she tell you how she'd come to be  
20 injured?

21 A Yeah.

22 Q Okay. And what was that?

23 A She said that her boyfriend hit her multiple times  
24 with a lead pipe.

25 Q Did she say, did she tell you where that had

1 happened?

2 A I do not believe so.

3 Q And then did she tell you anything about how, how she  
4 came to be injured in the arm?

5 A Yeah. She stated to me that she blocked the pipe  
6 from hitting her in the face with her arm.

7 Q And when, do y'all use the same pain scale that, I  
8 guess, Self Regional uses with zero being no pain, ten  
9 being extreme pain?

10 A Yes, ma'am.

11 Q What did she tell you her pain was?

12 A A ten out of ten.

13 Q And in your experience as a EMT, as a paramedic, do  
14 people, is it common for people to vomit or to be nauseous  
15 if they're in severe pain?

16 A Yes, ma'am. When they're in pain, they, it's a  
17 common reaction to have nausea and vomiting.

18 Q And did she express any nausea?

19 A She did. She told me she had nausea and she tried to  
20 vomit once without success.

21 Q Okay. Does that mean she was dry-heaving, sort of?

22 A Yes, ma'am.

23 Q In your report, did you note any evidence of alcohol  
24 or drug impairment?

25 A No.

1 Q And, again, when you arrived on-scene, she was, she  
2 was laying down?

3 A Yes, ma'am.

4 Q Did she, to your knowledge, did she get up and walk  
5 around any while you were there?

6 A I do not recall.

7 Q Would that have been something you would have tried  
8 to stop even if she'd tried?

9 A Yes, ma'am.

10 MS. WHITE: Please answer any questions Ms. Nelson  
11 has.

12 MR. DEBLOIS: Yes, ma'am.

13 THE COURT: Any cross-examination?

14 MS. NELSON: Thank you, Your Honor.

15 CROSS-EXAMINATION

16 By Ms. Nelson:

17 Q Hi, it's DeBlois?

18 A DeBlois.

19 Q DeBlois, hi, Mr. DeBlois. So when you got to the  
20 scene, Ms. Holloway was lying on her right side?

21 A Yes, ma'am.

22 Q And that's the same side all her injuries were on, is  
23 that right, right arm, right leg, lower right abdominal  
24 area?

25 A Yes, ma'am.

1 Q And one of the additional things she told you,  
2 according to your record was, patient stated that she was  
3 able to get away and run from the house. Is that right?

4 A Yes, ma'am.

5 Q So that's one of the things Janice told you?

6 A Yes, ma'am.

7 Q In your assessment of Ms. Holloway, did she have any  
8 life-threatening injuries?

9 A No, ma'am.

10 MS. NELSON: Thank you, Mr. DeBlois. That's all I  
11 have.

12 THE COURT: Okay.

13 MS. WHITE: Very briefly.

14 REDIRECT EXAMINATION.

15 By Ms. White:

16 Q Going back to your report, who did she say she was  
17 running from?

18 A Running from the house.

19 Q From, who, who was she running from?

20 A I can't make that assumption.

21 Q Well, what did she tell you?

22 MS. NELSON: That's been asked and answered.

23 Objection.

24 MS. WHITE: It hasn't been answered.

25 THE COURT: Okay. Do you want to reference him in

1 his report?

2 Q Oh, when you look at the second line, patient stated  
3 that.

4 A Her boyfriend hit her multiple times with a lead  
5 pipe.

6 Q And then she was able to get away --

7 A Yes, ma'am.

8 Q -- and run from the house?

9 A Yes, ma'am.

10 MS. WHITE: Thank you.

11 THE COURT: Thank you, sir. You can step down.

12 MS. WHITE: May we approach, Your Honor?

13 THE COURT: Sure.

14 (Whereupon, a bench conference was held in the  
15 presence of the jury but out of the hearing of the  
16 jury.)

17 THE COURT: All right. Mr. Foreman, ladies and  
18 gentlemen of the jury, I think this would be a good time  
19 to break for lunch, so we need to start back about 1:30,  
20 so that'll give you an hour-and-a-half. Again, reminder,  
21 and I know you get tired of me saying this, but I have to  
22 say it anyways. No discussion among yourselves about this  
23 case with anybody that comes into contact with you. And,  
24 again, reminder, if you're out in public, local  
25 restaurant, that sort of thing, keep your juror badge on

1 opinions that the State wishes to have or make. So we  
2 still have to get over that issue of whether or not, you  
3 know, that it's, it's permissible testimony and whether or  
4 not she's qualified. So we will need to deal with that,  
5 but just go ahead and throw that State vs. Nicholson case  
6 out to both sides. And we will deal with this when the  
7 time comes. Solicitor, you got your next witness?

8 MS. PENNY: Yes, sir. And do you want us to go ahead  
9 and bring him in the courtroom?

10 THE COURT: Yeah. I'm going to bring the jury out.  
11 I just wanted to make sure you were ready to call your  
12 next witness. Yeah, bring the jury out, please, Jimmy.

13 (Whereupon, the jury came into open court at  
14 approximately 1:36 p.m.)

15 THE COURT: All right. Let the record reflect the  
16 jury is back in the courtroom. Solicitor, call your next  
17 witness.

18 MS. PENNY: We call Captain Jeff Crisp.

19 THE COURT: Okay.

20 JEFF CRISP, being  
21 first duly sworn, testified as follows:

22 DIRECT EXAMINATION

23 By Ms. Penny:

24 Q Welcome back, Captain Crisp.

25 A Yes, ma'am. Thank you.

1 Q We'll sort of backtrack about what we talked about a  
2 little bit just to make sure we're on the same page,  
3 again. You spoke to Janice Holloway in the early morning  
4 hours of July 3rd, 2014, is that correct?

5 A It is.

6 Q At West Kirksey and Holloway Avenue?

7 A That's correct. That's the first time I spoke with  
8 him.

9 Q What was she doing?

10 A When I arrived, she was laying on the sidewalk,  
11 appeared to be in severe pain and EMS was on the way.

12 Q What did she tell you as she laid on the ground?

13 A I asked what happened when I approached her. She  
14 immediately stated that Willie Gray hit her with a pipe.

15 Q What else did she tell you about her relationship  
16 with Mr. Gray?

17 A She stated to me that her and Mr. Gray had been  
18 together for about two years.

19 Q And we have, we have already heard that Ms. Holloway  
20 was then taken from the scene by EMS. After she was  
21 taken, did you conduct a search for the pipe?

22 A I did. Probably about five officers searched the  
23 area for the pipe. Wasn't able to locate it.

24 Q Then, later that early morning, you spoke to Ms.  
25 Holloway at the hospital, too?

1 A I did.

2 Q What did she tell you at the hospital?

3 A Went to the hospital before the doctors were in  
4 there. I asked her again what happened and how it  
5 happened. She, again, stated that Willie Gray hit her  
6 with the pipe. Her answers were very prompt. She didn't  
7 have to think about it. It appeared to be honest to me.  
8 I asked her---

9 MS. NELSON: Objection to that characterization of  
10 honesty, Your Honor.

11 THE COURT: Okay. Sustain the objection. We'll  
12 instruct the jury to disregard that last statement about  
13 honest, honesty and will require that that be taken away  
14 from the record.

15 A I was speaking with her. I asked her directly what  
16 happened. She said Willie Gray hit her with a pipe. She  
17 says that Mr. Gray gets violent when he starts drinking  
18 and that he was actually intoxicated this night.

19 Q Did she, did she say anything further about why he  
20 was mad?

21 A She did. I asked her why she was upset, why he was  
22 upset with her. She said that he was out with his female  
23 cousin most of the day, and that she then accused him of  
24 having sexual relations with that female cousin.

25 Q Did she tell you anything more about the pipe when,

1     when he had the pipe or where he got the pipe?

2     A     I asked her if he had the pipe at the time. She says  
3     he had it before the altercation, but where he picked it  
4     up at, have no idea.

5     Q     And did she explain to you how she received this  
6     injury, the, the bruise and scratch on the right side of  
7     her neck?

8     A     I did specifically ask her about this injury. She  
9     says she obtained the injury during the altercation of Mr.  
10    Gray grabbing her and hit her with a pipe.

11   Q     And then all of her, these injuries that we've seen  
12   before in photos, what were they, how were they sustained?

13   A     I did ask her about each individual, these injuries  
14   that she has. And she stated that all of these injuries  
15   that you see in the photos came from Mr. Gray striking her  
16   with a lead pipe.

17   Q     Now, sort of backtracking to being in the  
18   neighborhood that night. You were the shift supervisor,  
19   correct?

20   A     Correct.

21   Q     Did you receive any noise complaints or reports of a  
22   fight in that area that night?

23   A     We did not and, actually, I got a dispatch run report  
24   to make sure that no reports were called into dispatch  
25   that night on Greer Street.

1 Q So, specifically, you ran a report on what happened  
2 on Greer Street that night?

3 A I did; specifically, Greer Street and none, no calls  
4 came into dispatch for any kind of disturbance, fights, or  
5 altercations on Greer Street or parties.

6 Q And so you were on patrol, and you also could have  
7 seen one that night if it had existed?

8 A Correct.

9 Q And when I say, one, I mean a street party or  
10 anything going on in the street?

11 A In the street. Usually, in those neighborhoods, we  
12 usually get phone calls from parties that get out of hand.  
13 If they get out of hand, we usually do get a phone call  
14 from one of the neighbors. We did not receive any phone  
15 calls that night from Greer Street.

16 Q Now, back to the conversation that you had with Ms.  
17 Holloway at the hospital. Did she know where Willie Gray  
18 was living?

19 A I asked her if she knew where he lived. She did not  
20 know at the time. I asked her numerous times over. She  
21 didn't recall and I asked her if she knew of any place  
22 where she would go looking for him if she wanted to find  
23 him. She then gave me a name and address of where she  
24 would begin to look, and I did go there that night and  
25 wasn't able to locate him.

1 Q Was that address [REDACTED] South Main where she, where she  
2 lived?

3 A It was not.

4 Q It was someone else's house?

5 A That's correct.

6 Q Do you remember whose house that was?

7 A I think it was Dennis Lindsay.

8 Q Did you tell her to call law enforcement if she saw  
9 Willie Gray?

10 A I did.

11 Q Did she tell you she would call law enforcement if  
12 she saw Willie Gray?

13 A She did.

14 Q Did she ever call you?

15 A We never received a phone call from Ms. Holloway.

16 Q All right.

17 MS. PENNY: That's all I have.

18 THE COURT: Cross-examination?

19 MS. ABLE: Yes, Your Honor.

20 CROSS-EXAMINATION

21 By Ms. Able:

22 Q Good afternoon, Captain Crisp.

23 A How are you?

24 Q I'm well. How are you?

25 A Doing well.

1 Q Okay. Captain Crisp, in summation, you'll agree with  
2 me Ms. Holloway admitted to you, she and Mr. Gray had been  
3 in a relationship for two years?

4 A That's correct.

5 Q And when she spoke with you, you've indicated she  
6 said he had this alleged pipe with, with him the entire  
7 time, correct?

8 A That's correct.

9 Q And she told you they didn't live together, correct?

10 A I don't recall asking her specifically if they lived  
11 together. I asked her how long they'd been together. She  
12 says two years.

13 Q Okay. Do you have a copy of your report?

14 A I do.

15 Q Okay. Will you look with me on the second page about  
16 midway down? It's the two-line sentence.

17 A I, that's right. And it asked her. It says, Ms.  
18 Holloway did not know where he lived.

19 Q Okay. So she didn't know where he lived?

20 A Correct.

21 Q Okay. And you, you've testified you asked where you  
22 could find him, and she said what?

23 A She provided me an address of, a known address of, a  
24 name of Dennis Lindsay.

25 Q Okay. Back up to that, that middle section. What'd

1 she say originally where you, where to find him?

2 A Well, she stated she did not know initially.

3 Q Okay. And then later, she changes again and what  
4 does she say?

5 A She gives me an address of a person I can look for  
6 which I, in turn, I looked in our system and found the  
7 address.

8 Q Okay. Thank you. And, I believe, you've testified  
9 regarding the scratch on her neck. The way it's  
10 characterized in your report says you asked where the  
11 injuries came from, correct?

12 A Correct.

13 Q She stated they were all from Mr. Gray striking her  
14 with the pipe?

15 A That's correct.

16 Q Okay. And then on down when you speak with her  
17 later, what does she say about the scratch on her neck?

18 A She said it came when Mr. Gray grabbed her by her  
19 hair and started pulling her around.

20 Q And in that same paragraph it says that you asked if  
21 she wanted a place of safe haven to go for the night?

22 A I did.

23 Q And how did she respond?

24 A I believe she said she did not need one.

25 Q And how, how long, I'm sorry, did you testify you

1 were on the road with the police department?

2 A Total, I was on patrol roughly three years total, and  
3 in investigations for seven-and-a-half.

4 Q Okay. So we'll say ten years?

5 A Correct.

6 Q And in those ten years, can you testify that every,  
7 every fight in Greenwood County was called in or Greenwood  
8 City to the Police Department?

9 A I cannot.

10 Q And was it through your knowledge and experience as a  
11 police officer here in Greenwood, is it common for parties  
12 to be held down on Greer Street?

13 A From time-to-time.

14 Q All right.

15 MS. ABLE: One minute, Your Honor.

16 THE COURT: Sure. Take your time.

17 MS. ABLE: Nothing further. Thank you, Judge.

18 THE COURT: Redirect, Solicitor?

19 MS. PENNY: No, Your Honor.

20 THE COURT: Okay. Thanks; you can step down.

21 MS. PENNY: State calls Tony Gary.

22 THE COURT: Okay.

23 TONY GARY, being  
24 first duly sworn, testified as follows:

25 DIRECT EXAMINATION

1 By Ms. Penny:

2 Q Good afternoon.

3 A How you doing?

4 Q If you would, please state your name and, and title  
5 for the record, please?

6 A Tony Gary, Domestic Violence Investigator for  
7 Greenwood City Police Department.

8 Q Hold on a minute. So with your, with your job as  
9 Domestic Violence Investigator with the City, what, what  
10 exactly do you do?

11 A I conduct follow-up investigations on all domestic  
12 violence cases and the assaults throughout the City of  
13 Greenwood.

14 Q And how long have you done that?

15 A For ten years.

16 Q What did you do before that?

17 A I was a patrol officer.

18 Q How long were you a patrol officer?

19 A About three years.

20 Q So you've been a police officer for a total of 13  
21 years?

22 A Going on 14 years.

23 Q Going on 14. Have you been at the Greenwood Police  
24 Department your whole career?

25 A Yes, ma'am.

1 Q And so you, you talked a little bit about you're now  
2 an investigating officer. Can you talk about the  
3 difference between an investigating officer versus a road  
4 officer?

5 A When I was a patrol officer, normally we'll get  
6 dispatched to calls, anything ranging from a car accident  
7 to loud music to any type of assaults. With the  
8 investigation, I conduct follow-up, like I say, on  
9 domestic violence cases, any, any assaults dealing with  
10 domestic violence.

11 Q Okay. Do you recall if you were working on the, the  
12 morning of July 3rd, 2014?

13 A Yes, ma'am; I was.

14 Q Were you involved that morning in an investigation  
15 involving the Defendant and Janice Holloway?

16 A Yes, ma'am.

17 Q Okay. How, how were you involved?

18 A That morning, my supervisor assigned me the case, the  
19 domestic violence case. I got the incident report. I  
20 read the incident report. After reading the report, at  
21 that time, I did go to the victim's residence.

22 Q Okay. And where, where is her residence?

23 A I went to [REDACTED] South Main Street.

24 Q Okay. And about what time was it that you arrived  
25 there?

1 A About 11:40, I mean, about 11:20 a.m.

2 Q Is that after she was discharged from the hospital  
3 and back at home?

4 A Yes, ma'am.

5 Q Did you take a statement from her as part of that  
6 investigation?

7 A Yes, ma'am; I did. I took a taped statement..

8 Q Okay. And, and you haven't been in the courtroom for  
9 Ms. Holloway's testimony today, have you?

10 A No, ma'am.

11 Q This taped statement, you audio recorded it, right?

12 A Yes.

13 Q Have you listened to the statement since that day?

14 A Yes, ma'am.

15 Q When was that?

16 A On July the 17th, oh, I'm sorry, January the 17th.

17 Q Of this year?

18 A This year.

19 Q Okay.

20 A Yeah.

21 Q So that's probably the most recent time you've  
22 listened to it?

23 A Yes.

24 Q How did you listen to it?

25 A From a CD player, disc, compact disc, CD disc.

1 Q That I gave to you?

2 A Yes.

3 Q Okay. And is, is this the CD that I gave you?

4 A Yes.

5 Q And how can you tell that?

6 A I placed my initials. That's my initials and that's  
7 the disc.

8 Q Okay.

9 MS. PENNY: Your Honor, I move that we introduce this  
10 into evidence.

11 THE COURT: Okay.

12 MS. NELSON: Can we approach, Your Honor?

13 THE COURT: Sure.

14 (Whereupon, a bench conference was held in the  
15 presence of the jury but out of the hearing of the  
16 jury.)

17 THE COURT: Okay. For purposes right now, the CD  
18 will be marked for identification only, whatever number  
19 that is.

20 REPORTER: That's 25, Judge.

21 THE COURT: 25. Thank you, Madam Court Reporter.

22 (Whereupon, State's Exhibit 25 was marked for  
23 identification only.)

24 Q All right. Investigator Gary, so you say that  
25 morning, you took a audio taped statement from Janice

1 Holloway?

2 A Yes.

3 Q Did she know that you were recording this statement?

4 A Yes, ma'am.

5 Q Did she, did you ask her whether she was under the  
6 influence of any alcohol, drugs, or medications?

7 A Yes, ma'am; I did.

8 Q And what was her response to that?

9 A No.

10 Q No as in I'm not under the influence of any of those  
11 things?

12 A Correct.

13 MS. PENNY: Please bear with me as I go through.

14 THE COURT: Sure. And I know what you're doing and  
15 you really pretty much have to do it. So take your time,  
16 okay?

17 Q Did you ask Ms. Holloway about her relationship,  
18 about how long she might have lived with the Defendant?

19 A Yes, I did.

20 Q What did she say to you?

21 A About six months.

22 Q Do you remember what time she told you she got home?

23 A She stated she got home about 11:30 or 12:00 that  
24 night.

25 Q That night. So that was sort of the line between

1 July 2nd and July 3rd?

2 A Yes, ma'am.

3 Q Did she say to you why she remembered that time?

4 A No, ma'am; she didn't.

5 Q Did he get, did Ms. Holloway tell you that Willie  
6 jumped on her?

7 A Willie, Willie assaulted her. He beat her up.

8 Q Do you, did, did Ms. Holloway tell you that the  
9 Defendant left and got a fan from her house or their  
10 house, also got a pipe, and then came back?

11 A Yes.

12 Q She did tell you that?

13 A Yes.

14 Q So that, so what she told you is that, initially, he  
15 jumped on her and assaulted her. And then in the midst of  
16 that he left, got a fan from the house and then got a pipe  
17 and came back?

18 A Yes, ma'am.

19 Q Did she tell you that, that the Defendant punched  
20 here in the head?

21 A Yes, ma'am.

22 Q Did she tell you that she hollered when the Defendant  
23 hit her with the pipe, and then that's when the police  
24 showed up?

25 A Yes, ma'am.

1 Q During your interview of Ms. Holloway, was she  
2 specific, could, could she tell you what street the  
3 assault happened on?

4 A She stated, she stated Greer Street. This was, she  
5 said Greer Street.

6 Q Okay. And did you, could you tell if that was the  
7 entire assault or the first part of the assault before he  
8 came back with a pipe from what she told you?

9 A Based on what she told me, it started on Greer  
10 Street.

11 Q Okay. But, but then it's not entirely clear?

12 A Correct.

13 Q Where it ended?

14 A Correct.

15 Q Now, after you went to her house on July 3rd at about  
16 11:20 a.m., did you ever hear from her again?

17 A No, ma'am.

18 Q So she didn't call you back or call you at all a  
19 couple of weeks, a couple of weeks later after this  
20 happened?

21 A No, sir.

22 Q And you don't have any record of that?

23 A No, ma'am; I don't.

24 Q Do you have any record of her or recall her calling  
25 you or trying to get in touch with you after Mr. Gray was

1 arrested?

2 A No, ma'am; I don't.

3 Q As the domestic violence investigator, if a witness  
4 recants or goes back on the original story she told you,  
5 would you note that in your report?

6 A Yes, ma'am.

7 Q And, in fact, you and I have actually had  
8 conversations about other cases where you are sure to tell  
9 me that a victim has come and recant --

10 MS. NELSON: I'd just object to that as hearsay, Your  
11 Honor.

12 THE COURT: Okay.

13 MS. NELSON: Conversations they've had about other  
14 cases.

15 Q Do you tell the prosecutor when that happens?

16 A Yes, ma'am.

17 MS. NELSON: The same objection.

18 THE COURT: Okay. All right. Keep, keep it to this  
19 particular case, Solicitor, if you would.

20 MS. PENNY: Yes, Your Honor.

21 Q Now, did you take photos of Ms. Holloway?

22 A No, ma'am; I didn't.

23 Q Why didn't you take photos of Ms. Holloway?

24 A When she told me about the injuries that she  
25 received, she had injuries to her lower area. So at that

1 time, I called a female officer to come take the pictures.

2 Q Okay. And did, so did she come and take pictures?

3 A Yes.

4 MS. PENNY: I don't have any further questions at  
5 this time. Please answer any questions that Counsel might  
6 have for you.

7 THE COURT: All right. Cross-examination.

8 MS. ABLE: Thank you, Your Honor.

9 CROSS-EXAMINATION

10 By Ms. Able:

11 Q Good afternoon, Investigator Gary.

12 A Hey.

13 Q Okay. Officer Gary, you have testified you took this  
14 statement from Ms. Holloway about 11:20 the morning of  
15 July 3rd, 2014?

16 A Yes, ma'am.

17 Q To your knowledge, would you agree with me that was  
18 about ten hours or so after this alleged incident?

19 A Yes, ma'am.

20 Q And you've testified that Ms. Holloway told you that  
21 she had been with Mr. Gray for six months, they'd lived  
22 together six months?

23 A They'd been together six months.

24 Q And Ms., strike that. And you've said when Ms.  
25 Holloway spoke to you, her, her statement was that she is

1 on Greer Street, she meets up with Mr. Gray and he beats  
2 her up?

3 A Yes.

4 Q All right. And then he, he runs away?

5 A Yes, ma'am.

6 Q And comes back?

7 A Yes, ma'am.

8 Q And you, he came back with this white pipe, I think,  
9 is, do you recall if she characterized this pipe?

10 A She's, she said white pipe.

11 Q Okay. Did, do you recall asking her how long he was  
12 gone?

13 A I don't recall.

14 Q Do you recall asking her what she did in the  
15 meantime?

16 A She told me she went, she went, she walked away from  
17 him and he came back. I don't know the timeframe, but he  
18 came back.

19 Q Do you recall asking her why she waited in the  
20 street?

21 A No, ma'am..

22 Q Okay. And you've testified you are the domestic  
23 violence investigator for the Police Department, correct?

24 A Yes, ma'am.

25 Q And in this particular case, you went and took this

1 statement. Was there any other follow-up investigation  
2 after you left South Main this day?

3 A I went to South Main; spoke with her.

4 Q Okay. But to your knowledge, there wasn't any,  
5 nobody else went back out there to try to find this pipe?

6 A No, ma'am.

7 Q And did you ever make any attempt to try to talk to  
8 anybody down on Greer Street or Holloway Street or down in  
9 that vicinity that was there that night?

10 A No. She told me there wasn't any witnesses.

11 Q Okay. And in your experience as a police officer in  
12 Greenwood, the area of Greer Street, is it common to have  
13 people out during the night?

14 A Yes, ma'am.

15 Q And did you ever make any attempt to try to talk to  
16 Mr. Gray?

17 A I couldn't, I couldn't locate him.

18 Q Did, did you try to locate him?

19 A I tried to locate him.

20 Q To your knowledge, he was living in Greenwood?

21 A Didn't really know for sure.

22 Q Or to your knowledge, did you know where he worked at  
23 the packing plant?

24 A No.

25 Q And just to confirm, Ms. Holloway told you this

1 incident took place on Greer Street?

2 A Yes.

3 Q Did she mention any other street?

4 A Said Greer Street.

5 Q And you are the officer that, that sought out the  
6 warrant for Mr. Gray --

7 A Yes, ma'am.

8 Q -- for the domestic violence?

9 A Yes, ma'am.

10 Q You didn't get a warrant for attempted murder?

11 A No, ma'am.

12 Q To your knowledge, do you know when Mr. Gray was  
13 arrested?

14 A September the 7th, 2014.

15 Q Were you there when he was arrested?

16 A No, ma'am.

17 Q So you don't have any knowledge of who would have  
18 been there with him?

19 A No, ma'am.

20 MS. ABLE: Beg the Court's indulgence.

21 THE COURT: Sure.

22 MS. ABLE: Nothing further. Thank you.

23 THE COURT: Redirect?

24 REDIRECT EXAMINATION

25 By Ms. Penny:

1 Q Investigator Gary, was Willie Gray arrested at [REDACTED]  
2 South Main Street?

3 A No, ma'am.

4 Q He was arrested somewhere else?

5 A Yes, ma'am.

6 Q Thank you. That's all I have.

7 THE COURT: Thank you, sir. You can step down.

8 MR. GARY: Okay.

9 MS. PENNY: The State calls Kenya Griffin.

10 KENYA GRIFFIN, being  
11 first duly sworn, testified as follows:

12 DIRECT EXAMINATION

13 By Ms. Penny:

14 Q Hi, Officer Griffin.

15 A Hi.

16 Q How are you?

17 A Good.

18 Q Will you state and spell your name for the record,  
19 please?

20 A It's Kenya Griffin, K-E-N-Y-A G-R-I-F-F-I-N.

21 Q What do you do?

22 A I am the Crime Scene and Evidence Technician for the  
23 Greenwood Police Department.

24 Q How long have you done that?

25 A For eight-and-a-half years.

1 Q Okay. Did you do anything with the Greenwood Police  
2 Department before that?

3 A I was just on patrol.

4 Q How long were you on patrol?

5 A Five years.

6 Q Five years?

7 A Yes.

8 Q Anything before that?

9 A No.

10 Q Have you ever worked in another police department?

11 A No, I have not.

12 Q Do you recall if you were working on July 3rd, 2014?

13 A Yes, I was.

14 Q Okay. Were you that morning involved in an  
15 investigation of a Defendant in his alleged crime against  
16 Janice Holloway?

17 A Yes, I was.

18 Q How were you involved?

19 A Detective Tony Gary called and asked if I will come  
20 down with him to take some pictures of some injuries that  
21 were on the victim.

22 Q Do you know why he asked you to take those photos?

23 A It was a female victim, and there were some injuries  
24 in some sensitive areas that he couldn't photograph.

25 Q So the photos you took were of Ms. Holloway's visible

1 injuries?

2 A That's correct.

3 Q I'm going to show you what's been marked as State's  
4 Exhibits 11 through 13 or 11 through 23, excuse me,  
5 premarked. Do you recognize these?

6 A Yes. These are the pictures I took.

7 Q Okay. Are they photos of Janice Holloway's injuries?

8 A Yes, they are.

9 Q Okay. And are they a fair and accurate depiction of  
10 her injuries as you saw them that day?

11 A Yes, they are.

12 MS. PENNY: Okay. Your Honor, I move to admit these  
13 photos into evidence?

14 THE COURT: And what says the Defense?

15 MS. NELSON: We have objections to a few of the  
16 photos, Your Honor.

17 THE COURT: Okay.

18 MS. NELSON: Can, can we, which might be something we  
19 can do at sidebar.

20 (Whereupon, a bench conference was held in the  
21 presence of the jury but out of the hearing of the  
22 jury.)

23 THE COURT: Okay. With exception of 17 and 18, the  
24 remainder 11 through 23 will be into evidence on behalf of  
25 the State.

1           (Whereupon, State's Exhibits 11, 12, 13, 14, 15, 16,  
2           19, 20, 21, 22 and 23 were admitted into evidence.)

3           (Whereupon, State's Exhibit 17 and 18 were marked for  
4           identification only.)

5       Q     All right. Ms. Griffin, we can go through these one  
6       by one.

7       A     Okay.

8       Q     Excuse me. Officer Griffin, I apologize. Can you  
9       explain to me what you see in these photos?

10      A     That's a picture of Ms. Holloway with her arm in a  
11     sling.

12      Q     And do you know why her arm was in a sling?

13      A     I believe it was broken.

14      Q     And what do you see here?

15      A     There's a bruise on her thigh area.

16      Q     Okay. And so maybe some injuries up there?

17      A     Yes.

18      Q     Do you see, is this just a different angle?

19      A     Yes. Just to, yeah, trying to get a better picture  
20     of the bruises.

21      Q     Do you see just maybe a little bit more discoloration  
22     in this photo?

23      A     Yes.

24           MS. NELSON: I object to that leading, Your Honor.

25           THE COURT: I'm, I'm, I'm sorry I didn't hear the

1 question.

2 MS. PENNY: I'll withdraw it.

3 THE COURT: Okay. Withdraw or rephrase.

4 MS. NELSON: The jury can see the pictures.

5 Q Do you see anything different in this photograph?

6 A It was a little closer up to the injuries on her leg.

7 Q Is there an injury right there?

8 A Yes.

9 Q Is there anything you'd like to add about this photo  
10 there?

11 A Just trying to get a little better angle to show the  
12 bruises a little more clearer.

13 Q Were you trying to be thorough?

14 A Yes.

15 Q What is this?

16 A That's an injury to the side of her neck.

17 Q Do you know what type; is that a scratch or a bruise?

18 A Kind of a scratch/abrasion. And that's another  
19 bruising on her calf there.

20 Q Now, do you see multiple injuries?

21 A Yes.

22 Q This is just a closer angle of those upper leg  
23 injuries?

24 A Yes.

25 Q Do you see different kinds of bruises or bruising on

1 top of bruises?

2 A It does appear to be bruises on top of bruises.

3 Q That about the same?

4 A It is about the same.

5 Q What is, what is that?

6 A That is a bruise on her side just above her hip.

7 Q Is there something inside the bruise? Do you see  
8 that from this angle?

9 A Yeah. There's a kind of a contusion in there.

10 THE COURT: Can you speak up, ma'am, please?

11 Q And then this is the, the last photo, is this sort of  
12 her full side?

13 A And that is her whole, her whole side, yes.

14 Q As much as you could get in one frame?

15 A Right.

16 Q While you were there taking photos that morning, did  
17 you see Willie Gray at the house?

18 A I did not, no.

19 MS. PENNY: That's all I have for you.

20 THE COURT: Okay. Cross-examination?

21 MS. NELSON: No, sir, Your Honor.

22 THE COURT: Okay. Thank you, ma'am. You can step  
23 down. Thank you. Okay. Mr. Foreman, ladies and  
24 gentlemen of the jury, let's take about a ten minute  
25 recess. So if you'll go back to the jury room. Again,

1 THE COURT: Solicitor.

2 MS. WHITE: Yes, sir. As to the intent to kill, I  
3 think that the, there's ample evidence in the record both  
4 from Dr. Short's testimony that hitting someone with a  
5 lead pipe can kill them. The fact that there is testimony  
6 that Janice told Detective Gary that he walked away, he  
7 beat her, walked away, got a pipe, came back and kept  
8 beating her with the pipe, that that's evidence of malice  
9 aforethought. And, again, beating somebody with a lead  
10 pipe and the pictures, I think those are evidence that the  
11 jury can find that there was an intent to kill that night.  
12 As far as just the general directed verdict, there is  
13 evidence in the record that she said that her boyfriend  
14 hit her with a lead pipe in numerous places both in  
15 testimony and in the medical records.

16 THE COURT: Okay. Thank you very much. Viewing the  
17 evidence in the light most favorable to the State, the  
18 Court finds that there is evidence sufficient enough to  
19 submit this case to the jury. All right. Let's bring the  
20 jury out, please.

21 (Whereupon, the jury came into open court at  
22 approximately 4:20 p.m.)

23 THE COURT: All right. Let the record reflect the  
24 jury is back in the courtroom. Ladies and gentlemen,  
25 thank you for your patience. We've had some legal issues

1 and when, when I have very good lawyers like I have in  
2 this case, the typically good lawyers will present a lot  
3 of legal issues for the Court to decide and so we been  
4 working. We been working hard to try to resolve those.  
5 So thank you for your patience and at least you guys got  
6 to go outside in this record-setting temperature while we  
7 had to stay in here. So I hope you enjoyed your time  
8 outside. The State have any further witnesses?

9 MS. WHITE: Your Honor, the State rests.

10 THE COURT: Very good. The Defense?

11 MS. NELSON: Your Honor, we renew our previous  
12 motions for the record and the Defense rests.

13 THE COURT: Okay. All right. Very good.

14 MS. NELSON: And renews all prior motions again.

15 THE COURT: Certainly. So noted for the record.

16 Ladies and gentlemen, what that means is that the  
17 evidentiary record in this case is now closed. There'll  
18 be no further evidence presented for your consideration.  
19 What we have left to do, and we're not going to do it  
20 today, we're going to do it in the morning is that the  
21 lawyers will make their closing arguments to you. And  
22 then I will instruct you on the law in this case. And  
23 then I will give you an instruction to begin your  
24 deliberation. But we're going to go ahead and break for  
25 the day because if we were to do the closing arguments and

1 give you the instruction on the law, it's 4:25 now, that  
2 could put us very easily at 6:00 o'clock. And I don't  
3 want to really give you the case to start your  
4 deliberations at 6:00 o'clock. So we are going to start  
5 in the morning and be back at 10:00 o'clock in the morning  
6 and get you a good night's rest. And reminder once again,  
7 no discussion among yourselves about this case or anybody  
8 that you come into contact with. Also, no independent  
9 research of any kind related to this case, and I will see  
10 you in the morning at 10:00 o'clock.

11 (Whereupon, the jury was excused from open court for  
12 the day.)

13 THE COURT: Okay. I've got a draft charge that I  
14 need to go through and probably make some changes, so  
15 we'll try to get it emailed to you first thing in the  
16 morning and let you look at it. But what are ya'll's  
17 thoughts about lesser-includes? Have you given that any  
18 thought?

19 MS. WHITE: Your Honor, we would be asking for  
20 lesser-includes.

21 THE COURT: Okay.

22 MS. NELSON: And I, I wasn't planning to ask for them  
23 but I don't, I think the evidence supports them.

24 THE COURT: Right.

25 MS. NELSON: I don't think I have a basis for saying

1     they can't have them.

2           THE COURT: And, you know, it's more common than not  
3     in an attempted murder case is to do all the  
4     lesser-included. So that was my plan. I just wanted to  
5     hear from both sides on that.

6           MS. NELSON: So you're going all the way down to--

7           THE COURT: -- yeah. Going all the way down. So  
8     we'll try to get you something emailed first thing in the  
9     morning, and let's try to have that kind of ironed out  
10    before, before 10:00 o'clock. Okay.

11          MS. NELSON: Yes, sir.

12          THE COURT: All right. Everybody have a good  
13    evening.

14                                 January 19, 2017

15          THE COURT: Anything we need to put on the record  
16    before we bring the jury out?

17          MS. WHITE: No, sir.

18          MS. NELSON: No, sir.

19          THE COURT: All right. If you'll bring the jury out,  
20    please.

21                 (Whereupon, the jury came into open court at  
22                 approximately 10:10 a.m.)

23          THE COURT: Okay. And let the record reflect the  
24    jury is back in the courtroom. Good morning, ladies and  
25    gentlemen. As I told you when we broke yesterday

1     afternoon, what we have left to do is the lawyers will  
2     make their closing arguments to you and then I will charge  
3     you the law that's applicable to this case. A lot of  
4     times, I'll take a little short break in between the  
5     closing arguments and the, and my charge. The lawyers  
6     have worked very hard, so please give them your close and  
7     undivided attention. Solicitor, are you ready?

8           MS.. WHITE: Yes, sir. May it please the Court?

9           THE COURT: Certainly.

10          MS. WHITE: I really just have one question for y'all  
11     and this is a question y'all are going to have to answer  
12     here in about hour-and-a-half, two hours. Does this look  
13     like a woman scored to you? Does this look like a woman  
14     who is bent on revenge, who is worried about cooking up a  
15     story to get her boyfriend in trouble, or does this look  
16     like a woman who wasn't where she was supposed to be when  
17     her violent, angry, drunk, controlling, abusive boyfriend,  
18     calls him that to the nurse, when he comes looking for  
19     her? What's that look like to y'all? What about here?  
20     What's she look like to y'all? We all know about domestic  
21     violence. It's all over our news, it's all over, if any  
22     of you watch the NFL, they've had the, No More, public  
23     service campaign and those of you who pay attention to the  
24     NFL or even watch the news, probably remember that that's  
25     because the NFL kind of got a black-eye, pardon the pun,

1 from the whole Ray Rice thing where he beat his girlfriend  
2 unconscious in an elevator. They suspended him a couple  
3 of games. Then, the video came out, and they got, the NFL  
4 got a lot of flak and ended up ultimately suspending him  
5 indefinitely. Now, what did Ray Rice's girlfriend do six  
6 weeks after that beating in that elevator? She married  
7 him. She was sitting beside him at all his press  
8 conferences. She was defending him. She was saying she  
9 started it. That's not the only example. Chris Brown and  
10 Rhianna; Tina Turner; Whitney Houston and Bobby Brown;  
11 Dennis Rodman; Carman Electra; Charlie Sheen. I can go  
12 on, and on, and on. This is everywhere. And we all know  
13 that women in this situation often, we use the term  
14 recant. They change their story. They either say they  
15 started it or they say it didn't happen at all. And we  
16 all know why they do those things. Sometimes, it could be  
17 love. What are some other reasons, fear. This happened  
18 to her because she wasn't where she was supposed to be  
19 when she was supposed to be there. What would have  
20 happened to her if she continued saying he did it. So  
21 maybe it's fear, fear of him, fear of losing him. There  
22 are days when I'm sure he's not like this. There are days  
23 that I'm sure are wonderful. Maybe she's scared of losing  
24 those days. She talked about using drugs. Maybe she's an  
25 addict. Maybe she needs him. We all know that women will

1     come in here and change their stories to try to protect  
2     their abuser. So let's talk about first why the story she  
3     told y'all makes absolutely no sense. First of all, you  
4     heard from Detective Tony Gary that she never told him  
5     that story. She never came to him and said, no, I lied.  
6     Never came and said it was these other people. The first  
7     that anybody in law enforcement knew about this other  
8     story was in October of 2014. Where was she when she  
9     wrote that letter y'all heard about? An investigator  
10    working for his lawyer at her house. And she said, oh, I  
11    didn't realize that she worked for his lawyer. Well,  
12    isn't that awfully convenient that she just so happens to  
13    be recanting her story at the investigator's house, isn't  
14    that convenient. So an investigator working for his  
15    lawyer. And the story she concocts and it was, I thought  
16    it was very interesting how, had to drag the details out  
17    of her. She didn't want to get up here and tell y'all all  
18    about these two people who beat her like a dog with a  
19    pipe. Now, I mean, I would think, you know, using your  
20    own common sense, two people beat somebody with a pipe,  
21    they're going to tell you all about it. Yeah. One was a  
22    short white girl with dark hair, and one was a taller  
23    black girl. They tripped me on the sidewalk. They jumped  
24    on me. There was none of that. I had to drag it out, and  
25    I had to offer suggestions. Which house was it? It was

1 on Greer Street. Which house on Greer Street? I, I don't  
2 know. Was it on the right or the left? The right. If  
3 she knew where she'd been beat up, couldn't she have said  
4 third house on the right. It's brick, one-story. Fourth  
5 house on the left, white siding, two-story. She couldn't  
6 say that. She couldn't give those details. She couldn't  
7 give one single solitary name of anybody who was there.  
8 And all right. Fair enough. She goes to a block party.  
9 She may not know everybody there. But y'all remember her  
10 saying this was within, all this happened within about  
11 three minutes of her house, a three-minute walk, and y'all  
12 remember her saying that she's kind of a social butterfly.  
13 She likes to go out. She likes to meet people. She likes  
14 to talk to them. You know, she'll just stop, stop  
15 somebody on the street, a stranger. How you doing? Where  
16 you going? I'm Janice. So within a three-minute walk of  
17 her house where she's lived for we don't really know how  
18 long, but six years they've lived together, she's lived at  
19 this house. She didn't know a single solitary person at  
20 this giant block party well enough to even give us a  
21 nickname. She gave us Keisha. How many Keisha's do y'all  
22 suppose there are in the City of Greenwood, in Greenwood  
23 County. Couldn't give us anything else. The one name she  
24 gave us, oh, conveniently passed away a month ago. So  
25 he's not here. The one name she could give us. And her

1 story, you know, at first it was these two girls. They  
2 got into an argument over drugs and these two girls  
3 assaulted her. Then, somehow a man came in, but then the  
4 man sort of left like she didn't mention him again. So  
5 was it two girls and a guy? Was it a girl and a guy? Was  
6 it just a guy? We don't know and she wasn't giving us any  
7 details, because if you give the details, you can get  
8 caught. And then she wanted y'all to believe that after  
9 being jumped on, beaten with a pipe that magically, you  
10 know, the assault stops. Oh, okay. We're done with you.  
11 You can go home now. After that, she manages to walk from  
12 the house around where she bumps into Willie. Now, y'all  
13 remember the testimony from the EMT's and from the E.R.  
14 personnel. She was in no condition to walk. She was in  
15 no condition. She said it was thirty minutes later she  
16 bumped into Willie. Thirty minutes wandering around in  
17 this condition. Her pain's a 10 of 10. She's in so much  
18 pain she's vomiting or dry-heaving. She doesn't have  
19 anything in her stomach to vomit, but dry-heaving, but  
20 she's walking around. Yeah. Okay. Sure. They think,  
21 and you'll have the medical records. When she gets to the  
22 hospital, they think she might even have a broken leg. So  
23 she's clearly not walking around. It says in her triage  
24 notes that her gait in transferring is weak. But no,  
25 she's just walking around, walking home, bumps into

1 Willie. Ladies and gentlemen, I submit that's not what  
2 happened. And how convenient it would have been for her  
3 to say I'm going to get revenge any way I can, and then  
4 all of this happens. I mean, she's seeking revenge. She  
5 gets beaten by two women with a pipe. Then, just so  
6 happens to bump into Willie. The police just so happens  
7 to wander up. That's a lot of horse manure she's trying  
8 to sell y'all. She said that she hollered, go on and  
9 leave me alone. That's not what Mike Sathre told Jeff  
10 Crisp. He heard a scream. Because what really happened  
11 and what, I believe, we believe the evidence has shown you  
12 has happened is that the scream that Mike Sathre heard,  
13 and I wish he was here to testify, he died 20 days after  
14 this happened. Nobody had a clue that was going to  
15 happen. But the scream that he heard was her getting hit  
16 with a lead pipe, while her boyfriend beat her like a dog  
17 on the street. That's the scream that he heard. And the  
18 details, and I'm sure Ms. Nelson's going to hit on this,  
19 you got to remember when the police first get there, when  
20 EMS first gets there, their main concern is her condition.  
21 EMS has to treat her and has to get her to the hospital.  
22 The hospital's got to find out what's wrong with her.  
23 They're not sitting down and taking detailed statements.  
24 Again, Officer Crisp said she's not in a condition to give  
25 a detailed statement. She hasn't even had pain

1 medication. So they're just getting the bare minimum, who  
2 hit you. Police need to know who hit her because they  
3 need to know if there is a mad man wandering the streets  
4 of Greenwood with a pipe. That's what they're concerned  
5 about. Who do we need to go look for and that's what Jeff  
6 Crisp said. We went and looked for him. We have five  
7 guys out looking. They need to know what kind of evidence  
8 they're looking for. They're looking for a pipe. They  
9 couldn't find one. Why, because he ran off with it. We  
10 don't know what he did with it when he ran off with it,  
11 but that's why there's no pipe. It's in his hand when he  
12 ran away. So that's what the police are worried about.  
13 They know Detective Gary is going to come along the next  
14 day and get the full story. The E.R., they don't care  
15 about the full story. What, what'd you get hit with?  
16 That's what they care about. Why, because Dr. Short said  
17 they need to know what caused it to know what sort of  
18 injuries to look for. So that's why the details are  
19 different. She's in pain, she's dry-heaving, she's  
20 wincing. She can't sit down and, and give out the entire  
21 thing. But, ladies and gentlemen, one of the most  
22 important things y'all take into that jury room is your  
23 own life experience and your own common sense, and when  
24 someone is in pain, serious pain, ten out of ten pain, the  
25 worst pain you've ever felt, doesn't that tend to make

1 people more truthful? I mean, those of you who've had  
2 babies or maybe been, had a wife or a girlfriend, if you  
3 were in the room when she was having a baby. I know when  
4 I had my oldest son, I didn't want my mother-in-law in the  
5 room because I was scared what I might say to her, because  
6 you get real truthful when you're in that much pain. The  
7 police, EMS, the E.R., they were focused on the immediate  
8 problem and the immediate problem was her condition and  
9 finding the person who had done that to her. So then the  
10 next day Tony Gary goes out and he, you know, things have  
11 calmed down. She has the pain medication at that point,  
12 bandaged up. She's good to go. She can stand. You can  
13 see in, I mean, look, this is a different person. Much  
14 better condition now and she gives him the full story.  
15 And what happened was she wasn't where she was supposed to  
16 be. Willie came looking for her and she wasn't home.  
17 She'd gone to a cookout. She came home about 11:30 or  
18 12:00. Some guy came by. Said Willie's looking for you.  
19 She knows what happens when Willie's looking for her, so  
20 she goes to find him, maybe to try to calm him down. He  
21 jumps on her immediately. Breaks off. Goes back to the  
22 house, gets a pipe, and comes back and that's what's  
23 important, ladies and gentlemen. When I talk to y'all in  
24 a minute about the law, that's what's important. Goes to  
25 the house, gets a pipe and comes back and proceeds to beat

1 her black and blue. She told EMS that she blocked one of  
2 his shots with her hand. And if you look at the pictures,  
3 you'll see the bruising. Now, there's some testimony  
4 yeah, it could have been down like this but remember, the  
5 doctor held his hand up and he said it was here, the  
6 bruising. So she's blocking shots to her head and thank  
7 God, Mike Sathre drove by, and he heard her screaming and  
8 he stopped. What do y'all think would have happened to  
9 her if he hadn't stopped? Would somebody who was this  
10 angry have stopped? Would he have let her just get up and  
11 go home? I submit, I don't think so. He was trying to  
12 kill her. You don't beat somebody with a lead pipe if  
13 you're not trying to kill them. Willie ran. He didn't  
14 know what she was going to tell the police. If, if, if he  
15 didn't do it, why'd he run? He started walking away. The  
16 police officer stops. He starts running, because he's got  
17 a pipe in his hand. He knows if he stops, they're going  
18 to see it and he's going to jail right there. He runs.  
19 And she says that he was at the house the next day. Well,  
20 you know, y'all can buy that or not. If he was, though,  
21 if he was, why did he run out the backdoor. She said  
22 because he knew he didn't do it. How did he know what  
23 she's told the police. If she's trying to set him up, why  
24 would she tell him. Why wouldn't she let him just be  
25 sitting there to get arrested right there. He ran because

1 he knew what he'd done. Even in the hospital, she was  
2 still trying to protect him a little bit. You heard Jeff  
3 Crisp testify he still had to drag out where he was. She  
4 said she didn't know at first. She never said, oh, he'll  
5 be at home. And, finally, he got an address. He wasn't  
6 there, but finally, he got an address out on him or a name  
7 that he went and found the address in their system. If  
8 she's trying to set him up, why did he have to drag the  
9 location out of her. She's already protecting him,  
10 because that's what she, that's what she does. That's her  
11 role. That's her role. I'm old-fashioned. I think he  
12 should be the one protecting her. I think if he didn't do  
13 it, he should have been there with her on that sidewalk  
14 while she was in pain, while she was dry-heaving. I think  
15 if he didn't do it, he should have been at that hospital.  
16 All right. What he may have had in his pockets? Fair  
17 enough. Drop it. Go to the hospital. If you didn't do  
18 it, you go sit by her side. If he didn't do it, then he  
19 should have been at that house taking care of her when she  
20 got out of the hospital that morning. But he wasn't  
21 there, because he's more concerned about his own skin.  
22 All he cares about is himself and he's not there, because  
23 he knows he just beat her half to death. And no, she did  
24 not have life-threatening injuries, but it wasn't because  
25 he wasn't trying. When you hit somebody in the head with

1 a pipe, what are you trying to do? And y'all will have  
2 the medical records. Y'all can look, oh, there was a  
3 question on prednisone. Oh, well, if you're on  
4 prednisone, that can cause bruising. Really, really?  
5 Well, look in the medical records. The prednisone  
6 prescribed 7/2, the day before. Her demeanor at the  
7 hospital, she's tearful and cooperative. She's not angry.  
8 She's tearful. Why is she tearful? If she's a woman  
9 scorned, she's angry. She's not tearful. She's tearful,  
10 because the man she loves just did this to her over her  
11 begs and pleas to please stop, over her screams, he kept  
12 doing it to her. There was a question and, and I'm going  
13 to, I guess, I'll go on and talk about the law now.  
14 You'll have four different charges to consider. And I  
15 think, it was Jeff Crisp kind of hit on this a little bit.  
16 The law has, you know, sometimes we can upgrade charges  
17 when police bring them to us and sometimes we downgrade  
18 them. Sometimes we drop them altogether. So you'll have  
19 the highest charge and then those downgraded charges to  
20 consider. What we call lesser includes. What this is,  
21 ladies and gentlemen, what I will submit to you that he  
22 did to her that is an attempted murder. An attempted  
23 murder is attempting to kill somebody with malice  
24 aforethought and that's it. Malice aforethought will tell  
25 you malice is a hatred, an ill-will, an intent to harm

1     somebody. Does this look like malice to y'all? Does this  
2     look like hatred, ill-will, and intent to injure? It's an  
3     intent to injure. Aforethought means that he meant to do  
4     it in the split second before he did it. He doesn't have  
5     to been planning it for weeks. He doesn't have to been  
6     planning it for weeks. He doesn't have to have been  
7     planning it for an hour. It just means that before he  
8     started hitting her with that pipe he meant to kill her.  
9     He went back to the house to get the pipe. He had the  
10    whole walk there and the whole walk back to think about  
11    what he was about to do. He meant to kill her. If you do  
12    not believe that we've proved beyond a reasonable doubt  
13    that this is an attempted murder, the next charge you  
14    consider is ABHAN, and that's basically attempted murder  
15    without the intent to kill is a simple way of saying it.  
16    That he injured her and call, offered or attempted, could  
17    have caused, I think, it's serious bodily injury or death,  
18    great bodily injury or death. And then the other charges,  
19    I'm not even going to talk about them because they don't  
20    apply here. It's assault and battery, second degree and  
21    assault and battery third. Assault and battery third is a  
22    punch. You just injure somebody. Assault and battery  
23    second is maybe a fight and somebody's got a cut and has  
24    to get stitched up. Maybe a black eye. They can't see  
25    for a week. It's temporary loss of use of a body part.

1 She said she couldn't use her arm for six weeks. I don't  
2 think that's temporary.. I think that's protracted which  
3 is in the definition for ABHAN. I know Ms. Nelson will  
4 tell y'all it's temporary. I submit it's not her arm. If  
5 you can't use your right arm for six weeks, that's  
6 protracted. That's over a month, a month-and-a-half. And  
7 it doesn't matter, because ABHAN is also the attempt, the  
8 offer. Not what did happen, but what could have happened.  
9 What could have happened when he was hitting her with a  
10 pipe. We have to prove our case beyond a reasonable doubt  
11 and Ms. Penny touched on this in opening. Beyond a  
12 reasonable doubt doesn't mean all doubt. I could never  
13 prove that to y'all. It doesn't even mean a doubt that  
14 you can put a reason to. It has to be reasonable. It has  
15 to be something real and beyond a reasonable doubt means  
16 you are firmly convinced that he beat her with a pipe on  
17 the side of the road. And, ladies and gentlemen, all of  
18 the evidence points to that.. It would have been, it  
19 should have been apparent yesterday that Ms. Holloway and  
20 I didn't have the easiest relationship as a victim and a  
21 prosecutor and it's really easy to get frustrated and  
22 angry with someone that you're trying to help who doesn't  
23 want help and who won't accept help. It would be really  
24 easy to throw up our hands and say fine, if you want to  
25 live like this, live like this. But I took an oath to

1 seek justice and to protect the citizens of the Eight  
2 Circuit and that includes people who don't want to be  
3 protected. And it would be really easy for y'all to go in  
4 there and say she doesn't, if she doesn't care, why should  
5 we care. If she thinks this is okay, why should we  
6 wrestle with this. But y'all also took an oath the other  
7 day to decide the case on the law and the facts, the law  
8 that the Judge will give to you and the facts that you've  
9 heard and you'll see in the records. Ladies and  
10 gentlemen, I'll submit to y'all that Janice Holloway, she  
11 cannot protect herself. This has been called the greatest  
12 justice system in the world. For all its faults, for all  
13 that we see on television, places where the court system  
14 got it wrong and there have been those instances, it's  
15 still the best thing that human beings can come up with.  
16 And it's because juries come in here and they use their  
17 common sense and they make a difference. And that's what  
18 we're asking you to do, find him guilty. Thank you.

19 THE COURT: Thank you, Solicitor. Ms. Nelson, you  
20 ready?

21 MS. NELSON: Yes, Your Honor. May it please the  
22 Court?

23 THE COURT: Yes, ma'am.

24 MS. NELSON: Did Willie hurt Janice two-and-a-half  
25 years ago? He did. He did hurt her. She walked in on

1 him with another woman, caught him cheating and in a story  
2 that is older than all of us in this room, she wanted to  
3 get him back for that. You've heard stories about people  
4 in domestic disputes when this kind of thing happens, when  
5 there's infidelity, people will throw clothes out in the  
6 road, people will set stuff on fire, put sugar in gas  
7 tanks, make all kinds of accusations. Accuse, accuse  
8 husbands of sexually abusing children. People get mad  
9 when they get cheated on. And Willie hurt Janice by  
10 cheating on her two-and-a-half years ago. She was hurt,  
11 and she was angry, and she had an opportunity to get him  
12 back. When she caught him, she looked him in the face and  
13 said I'm going to get you back. And then circumstances  
14 transpired that gave her a way to get him back. Did  
15 Willie try to kill Janice on January 2nd or 3rd of 2014?  
16 No. Janice caught him. She wanted to go down to Greer  
17 Street to have some fun, score some drugs. You get in an  
18 environment like that and tempers are high, and she got in  
19 a fight with some people. She had to get on that stand,  
20 y'all, for a case that she doesn't want prosecuted. She  
21 had to get on that stand and tell y'all all kinds of  
22 embarrassing things about herself. That could not have  
23 been pleasant or easy for her. She had to get up and tell  
24 you about her man cheating on her. She had to tell you  
25 that she was down there in a not so great part of town

1 looking for drugs, using drugs. She's telling you the  
2 truth about that. It's borne out in her medical records.  
3 She had to talk to y'all about all of that. She had to  
4 get up there, you're starting from a proposition where the  
5 State's entire case is based on what, the words that come  
6 out of this woman's mouth and you're at the starting  
7 proposition of her saying I'm a liar. I lied to the  
8 police that night. I lied to the people at the hospital.  
9 I lied, because my man was with another woman and I was  
10 pissed off. It's an old, old story. Janice goes down  
11 there on Greer Street. She gets these injuries, and I, I  
12 think you have to think about the fact that she was using.  
13 She had been smoking crack at the time this happened.  
14 Maybe that's why she's still able to walk down the street  
15 with a broken arm and bruises on her legs. Maybe that's  
16 why the, the intensity of the pain hasn't set in until a  
17 little bit later. Maybe it's because she was high. She's  
18 in this fight. She's got these injuries. She's walking  
19 home and she meets up with Willie on Holloway Street, and  
20 there's her opportunity to get him back for what he'd done  
21 to her, and she took it. And that lie that she told on  
22 July 3rd to those, to law enforcement and to the folks at  
23 the hospital has ballooned into something that Janice  
24 never expected, because she did decide to forgive Willie.  
25 She forgave him, and then immediately started trying to

1 correct her mistake. But she told that lie and it's  
2 turned two-and-a-half years later into this trial that she  
3 never expected because she thought she was going to be  
4 able to go back and say I made all that up. You don't  
5 need to be trying to do this to him. But here she is  
6 two-and-a-half years later having to tell you all these  
7 bad things about herself because that lie has turned into  
8 Willie fighting for his liberty. And Janice coming in  
9 here and getting on that stand and baring her soul to  
10 y'all and begging you to be finally the twelve people that  
11 believe her when she says she made this stuff up. After  
12 Janice cooled down, and I don't know what happened. She  
13 testified at one point and, I mean she's kind of all over  
14 the place both, on July 3rd. She was all over the place  
15 in some of the things she said on the stand. You've got  
16 the hard job of trying to figure that out. But she says  
17 on the stand at one point that they got back together  
18 after a few days after some days had passed, then she said  
19 Willie's at her house when she gets home from the  
20 hospital. I don't know whether he's at her house or not  
21 or if it's later. It's been two-and-a-half years since  
22 all this happened, and I don't think you can expect Janice  
23 to remember every single detail. So I don't know if she's  
24 got that wrong or right, but what she did get right is  
25 that they're back together and have been for a long time.

1 She cooled down. She forgave him. She, she told you it  
2 was hard, a hard thing to forgive, but that's what she  
3 decided to do. She tells her sister, Doris, just a couple  
4 of days later, I, I made that up. Willie didn't do that  
5 to me. She tells Tony Gary twice, both before and after  
6 Willie is arrested. I lied. I made that up. It takes,  
7 and does she call, there were some questions asked about  
8 did she call the police. Well, of course, she didn't call  
9 the police. She wanted to be with Willie. She had lied  
10 about what she told the police. She didn't want him  
11 arrested. So, of course, she didn't call the police and  
12 say, hey, he's back here at the house, come pick him up.  
13 And it takes so long for Willie to actually be arrested,  
14 this man who's, this, this demon out here with a lead pipe  
15 running around trying to kill people, it takes him so long  
16 to be arrested that Janice thinks the police believed her  
17 when she said I made that up. She thinks this is over.  
18 She tells you she and Willie are both surprised when he's  
19 arrested. He doesn't get arrested until two months later  
20 when he and Janice are over at somebody else's house and  
21 the police come out on a completely unrelated issue.  
22 Isn't that, isn't that interesting that the police didn't  
23 look very hard for Willie. He didn't go anywhere. He was  
24 back with Janice. He was going to work at the packing  
25 plant. You didn't hear testimony from those law

1 enforcement officers that they even tried to find out  
2 where Willie worked, this demon with a lead pipe trying to  
3 kill somebody. I'm not even going to bother to find out  
4 where he works so I can go pick him up. They looked for  
5 him that night on Holloway Street. They look at Dennis  
6 Lindsay's house when Janice throws that name out there.  
7 If there were any follow-up attempts after that, they  
8 weren't documented. They pick him up in September. After  
9 he's arrested, Janice, again, tries to say he shouldn't  
10 have been arrested. I made that up. I lied. Tony Gary  
11 was asked about how if she'd told him that, wouldn't he  
12 have written a report. Well, would he, would he have  
13 written it down? Mr. Gary spent about five minutes with  
14 Janice the morning of July 3rd and took her story down,  
15 her story that had more details than anybody had been  
16 given before, her five-minute story, and he takes out an  
17 arrest warrant and closes his file. It's done. It's  
18 over, and nobody wants to listen to Janice after that.  
19 Nobody wants to hear that they don't have it right. They  
20 don't want to hear that they don't have it right. The law  
21 enforcement doesn't want to hear it, the Solicitor's  
22 Office doesn't want to hear it. So yeah, does our office  
23 get a notarized statement from Janice? Yes. During our  
24 representation of Mr. Gray, Janice was telling us the same  
25 thing she's been trying to tell everybody else, I made

1 this up because I was mad at him. So, of course, we were  
2 the only ones that got, who bothered to get her statement.  
3 So she tells us I lied, but nobody wants to listen to  
4 that, because the State in its infinite wisdom has  
5 substituted its own judgment for Janice's and decided that  
6 the only thing that's worth believing is the first thing  
7 she said. They've decided they know, the government knows  
8 better about our private lives than we do. They know  
9 better than Janice. They can't admit they got this thing  
10 wrong, so they're going to ignore what Janice has told you  
11 and plow forward and try to convict him anyway. You don't  
12 have an easy job. This is, this is hard to figure out  
13 what to believe and what not to believe. Janice said some  
14 contradictory things on July 3rd. She said some  
15 contradictory things on the stand and this whole case,  
16 like I said, relies on her. We don't have any physical  
17 evidence linking Willie Gray to anything other than, you  
18 don't have anything other than Janice's statement and  
19 you've got her injuries. Nobody's disputing that she's  
20 injured. The pictures show it. She went to the E.R. and  
21 stayed there four hours. I'm not going to stand up here  
22 and try to tell you she doesn't have bruises on her body.  
23 Did the prednisone contribute to the bruising, you'll see  
24 in the record it was long-term steroid use. Maybe it made  
25 the bruising look worse than it actually is. Maybe it

1 didn't. I don't know, but nobody's disputing that, that  
2 this lady was injured. What we're disputing is that  
3 Willie did it. And, again, the only thing you've got is  
4 what Janice said, what she said to you, what she said on  
5 July 3rd. And that's what you've got to pick through and  
6 parse through to try to figure out what pieces you believe  
7 and what pieces you don't. And, folks, if you've listen  
8 to all of that and you can't really decide, if you decide  
9 you're, you're not firmly convinced one way or the other.  
10 Well, I don't know if she was telling the truth that  
11 night. I don't know if she's telling the truth when she  
12 says she made it up. If you can't decide which story is  
13 true, that's reasonable doubt and if you're sitting here  
14 right now not firmly convinced one way or the other,  
15 that's reasonable doubt and that means not guilty. The  
16 State has to meet that burden. If you do believe, if you  
17 end up believing that Willie did this to Janice, that he  
18 caused these injuries, if that's what you're convinced of,  
19 then you do have these four charges to choose from.  
20 Folks, if Willie Gray had Janice down on Holloway Street,  
21 or Greer Street, or wherever this is supposed to be and he  
22 was beating her like a dog trying to kill her, why doesn't  
23 she have head injuries? That's where you hit somebody if  
24 you're trying to kill them with a blunt object. No head  
25 injuries at all, a scratch on her neck. If he was able to

1 get her down beating her like a dog, he would have been  
2 able to kill her if that's what he wanted to do. Nobody  
3 was trying to kill Janice that night. Whether you believe  
4 she got in a fight with those women or whether you believe  
5 Willie did something to her, nobody's trying to kill her.  
6 The injuries don't support that at all. You can also  
7 consider if you believe Willie assaulted Janice, you can  
8 consider assault and battery, high and aggravated. The  
9 Judge is going to explain all of these charges to you.  
10 Ms. White told you she wasn't going to bother to get into  
11 assault and battery in the second degree, because it just  
12 didn't apply. But I want y'all to listen when the Judge  
13 talks to you about the charge, because if you do believe  
14 that Willie assaulted Janice, that's actually the charge  
15 that fits the best. Assault and battery in the second  
16 degree is when somebody injures another person, she's  
17 injured, no question, and moderate bodily injury results..  
18 You'll hear about serious bodily injury and you'll hear  
19 about moderate bodily injury. The Judge will define both  
20 of those terms under the law for you and you can decide  
21 what kind these are. Moderate bodily injury can involve a  
22 fracture. It can involve temporary loss of a bodily  
23 member or organ. Janice had temporary loss of the use of  
24 her arm that she gained back in full after her arm healed  
25 and the cast was removed. One of the specific things that

1     our law on assault and battery second degree says is it  
2     applies to an injury that results in a fracture or  
3     dislocation. Janice's most serious injury was a broken  
4     arm, a fracture. This, this law contemplates even more  
5     significant injuries than Janice actually suffered. It  
6     contemplates things that require the use of anesthesia,  
7     which Janice didn't require. It covers things, injury  
8     that involves a prolonged loss of consciousness that  
9     Janice didn't suffer. But one of the specific things in  
10    that statute that the Judge is going to read you is that  
11    assault and battery second is injury, someone that causes  
12    a moderate bodily injury which can be a fracture. If you  
13    believe Willie's guilty after everything you've heard,  
14    that's what he's guilty of, folks. You would also have  
15    the choice of assault and battery in the third degree  
16    which just specifies an injury. That would cover this  
17    case as well. If you, if you believe Janice, if you're  
18    finally the people in this courtroom that believe Janice  
19    when she says I made this up because I was mad at Willie,  
20    then you have to find him not guilty. And why, why should  
21    you believe her? Why should you believe that Janice did  
22    this out of revenge? One of the reasons is that you know  
23    she didn't make this up for the first time on Tuesday.  
24    This didn't come up, this confabulated story didn't come  
25    up to her on Monday night. She's been trying to tell

1 people this for over two years. She came in here on  
2 Tuesday afternoon and put her hand on this Bible and sworn  
3 an oath to tell you the truth, and she did that as best  
4 she could for something that happened to her  
5 two-and-a-half years ago, for something that happened to  
6 her when she was high on crack cocaine. That's the first  
7 time she's put her hand on a Bible and said I'm going to  
8 tell, I'm swearing to tell the truth before God. She  
9 never called the police. If Willie had tried to kill  
10 Janice that night, wouldn't the first thing she would have  
11 done been to get out her phone or, or beg somebody to get  
12 a phone to her so she could call the police and tell them  
13 that her boyfriend tried to kill her. But she didn't do  
14 that because that's not what happened. She got in a fight  
15 at a party on a street where drugs were being sold and  
16 used, and she didn't want to involve the police. She  
17 explained that to you. Think about, think about the other  
18 thing that, that came from the officers on the scene. Ms.  
19 White wants you to believe that Officer Sathre pulled up  
20 in the nick of time just before Willie Gray was going to  
21 kill Janice Holloway. But folks, remember Officer Crisp's  
22 testimony and it is, it is very sad that Officer Sathre  
23 couldn't be here to tell us himself, but he told Officer  
24 Crisp and Officer Crisp wrote it in his report that what  
25 Officer Sathre sees when he pulls up is a couple walking

1 down the street. Officer Sathre observed a white female  
2 and black male walking on Holloway toward West Kirksey.  
3 He doesn't observe a beat-down. He doesn't observe Willie  
4 standing there with a pipe in his hand. He sees these  
5 folks walking down the street exactly like Janice told you  
6 when she came upon Willie on Holloway after she had  
7 already been injured. Folks, the reason there is no pipe  
8 found is because there was no pipe. One of those girls in  
9 that fight picked up something and maybe whatever she  
10 picked up is still there but nobody went to Greer Street  
11 and looked for anything. But Willie didn't have a pipe.  
12 If Officer Sathre had seen something like that in Willie's  
13 hand or had seen any altercation at all going on between  
14 Willie and Janice, he would have told Officer Crisp about  
15 it and it would have been in that report. But what he  
16 sees is walking, this couple walking down Holloway Street.  
17 Janice was still able to walk and she's walking with  
18 Willie, has nothing in his hand. And then she hollers.  
19 She tells you she was telling Willie to get away from her.  
20 She's still mad at him. And Officer Crisp, if you  
21 remember, when he testified about her demeanor and said  
22 she was in pain. And, of course, she's in, her arm's  
23 broken. Of course, she's in pain. He testifies that  
24 she's angry. That's what Officer Crisp tells you. She  
25 tells Officer Crisp that Willie hit her with a pipe. She

1 tells EMS it's a lead pipe. She tells Officer Gary it's a  
2 white pipe that Willie went back to the house and got.  
3 How does she know where he gets anything if she's still on  
4 Greer Street. She tells Officer Crisp they've been  
5 together for two years. She tells Officer Gary it's six  
6 months. She tells Crisp she doesn't know where Willie  
7 lives. She tells somebody else he lives with her. There  
8 are all kinds of inconsistencies in Janice's story that  
9 night. And because it is hard to keep a lie straight, and  
10 the details come out in that five minutes that she spends  
11 with Officer Gary. And that, that seems to be the most  
12 telling thing to me about why, why you know this didn't  
13 happen the way Janice told Officer Gary it happened. She  
14 says Willie just comes up to her on Greer Street and  
15 starts punching her, and then he leaves, and she stays  
16 right there. And then he comes back with a pipe and he  
17 hits her with the pipe. Apparently, he stops at some  
18 point. But, folks, this is on Greer Street where this  
19 block party is going on, where these law enforcement  
20 officers have testified to you that it is not uncommon at  
21 all for people to be hanging out on the street partying.  
22 But not a single person sees these two, not one, but two  
23 altercations. Not a single person sees any of that. Now,  
24 did people see the girl fight that was going on earlier  
25 between Janice and these two other women. We don't know.

1 If they did, they wouldn't be calling the police about it  
2 because it was over. This all happens in the middle of  
3 the street. He comes and punches her and Janice just  
4 waits there for him to come back, and he comes back and  
5 beats her with a pipe. But not one single person who sees  
6 or hears a thing while she's supposedly getting this  
7 beat-down. Folks, you can believe Janice when she tells  
8 you that she did this for revenge. She has given you,  
9 she, she's admitted to you, told you why she made up this  
10 story. She's given you a plausible explanation for where  
11 these injuries came from other than Willie. There isn't a  
12 pipe. If, if Janice had told the officers that night that  
13 Willie had hit her with the pipe and Officer Sathre had  
14 seen that pipe in Willie's hand, you know we would have  
15 heard about it. Ms. White talked about Willie running  
16 away from what happened and, and how, how could he  
17 possibly leave this women he loves who's so injured.  
18 Well, maybe he doesn't know she's so injured. She's  
19 walking along with him on Holloway Street. Maybe he  
20 doesn't realize the extent of her injuries at that point.  
21 Maybe Janice doesn't realize how much she's hurting at  
22 that point, because she's been using drugs. So why does  
23 Willie run away if he didn't do anything. Folks, I'm just  
24 going to be blunt and say what all of us in this room  
25 know. Black men like Willie Gray don't like to have

1 encounters with the police, and I don't say that because  
2 Willie did anything wrong. Black men, in general, don't  
3 like to have encounters with the police in this country  
4 and we all know why. And I'm not, I, I'm not trying to  
5 disparage the police. I'm just telling you what we all  
6 know. Willie didn't want to encounter the police that  
7 night, so he left. Oh, the State doesn't have to prove  
8 any kind of motive to you about why Willie would have done  
9 this to Janice. The, the law doesn't require for you to  
10 have an explanation for why he would have been mad at her  
11 or why he would have done this. But what sense does it  
12 make when he's the one in the wrong. When he's the one  
13 who's been cheating, why does he have any reason to come  
14 after Janice. None. She wasn't home on time. He wasn't  
15 at home either. He's really going to beat her up when  
16 she's not home on time, when she's the one who's furious  
17 with him for cheating on her. That doesn't make any sense  
18 at all. What makes sense is that he came walking down  
19 Holloway hoping he could find Janice to make up with her  
20 and get back together with her. And that they were  
21 walking together down Holloway Street while she, he was  
22 trying to convince her to talk to him and she was saying  
23 leave me alone because she was still mad. Folks, you, you  
24 all get to bring your life experiences to bear as you  
25 decide what to do with this case. You are all entitled to

1 your individual judgments and your individual opinions  
2 about what happened or what didn't happen here. And,  
3 again, if you're torn back in that jury room about which  
4 version to believe, that version that Janice told when she  
5 was mad at Willie on July 3rd or this embarrassing story  
6 she's had to tell you from this stand that she's been  
7 begging people to believe for two years. If you can't  
8 decide between those two, that means you've got reasonable  
9 doubt; that you're not firmly convinced one way or the  
10 other and that means you have to find Willie not guilty.  
11 That's what we're asking you to do. I'd ask you to  
12 remember, you know, there was a lot of talk about women  
13 not leaving and women sticking by their man. Well, you  
14 got to form your judgment of Janice as she was on that  
15 stand. Does she look like some shy, retiring, passive  
16 woman to you who can't take care of herself. There's no  
17 testimony in front of you that she needs Willie for  
18 financial support, that she needs him to take care of  
19 kids. This is a woman who when she got mad at him, she  
20 stuck up for herself. She did it in an immature way, but  
21 Janice can stand up for herself. She doesn't have to have  
22 Willie Gray. Remember what she said on the stand and this  
23 is what I'll leave you with. If that man tried to kill  
24 me, why would I still be with him. I didn't ask her that  
25 question. I didn't say hey, Janice, why are you still

1 with him. She offered that. She volunteered that out of  
2 her mouth. If that man, if that man had tried to kill me,  
3 why would I still be with him. Why would I go get his  
4 initials tattooed on my neck. Folks, she testified after  
5 being under oath that Willie Gray did not assault her on  
6 July 3rd. That he did not try to kill her on July 3rd and  
7 we ask that you twelve folks believe her and find him not  
8 guilty. Thank you.

9 THE COURT: Okay. Thank you, Ms. Nelson. Mr.  
10 Foreman and ladies and gentlemen of the jury, we're going  
11 to take about a ten-minute break before I will charge you  
12 the law in this case. So if you'll go back to the jury  
13 room again, don't begin your deliberations and have no  
14 discussion about this case. And we'll get you back out in  
15 about ten minutes, and I will charge you the law. Okay.

16 (Whereupon, the jury is excused from open court for a  
17 break.)

18 THE COURT: Let's get the jury back in, please.

19 (Whereupon, the jury came into open court at  
20 approximately 11:28 a.m.)

21 THE COURT: Let the record reflect the jury is back  
22 in. Mr. Foreman and ladies and gentlemen of the jury, I  
23 now will charge you the law applicable to this case. You  
24 must consider the charge as a whole and not focus on some  
25 portions to the exclusion of others. The indictment

1 charges the Defendant with attempted murder. I remind  
2 you, once again, the fact that the Defendant has been  
3 arrested, charged and indicted in this case is not  
4 evidence in this case and cannot be considered by you as  
5 evidence of guilt in this case nor does it create any  
6 presumption or inference of guilt. The indictment is  
7 simply the formal written instrument which contains the  
8 charge made against the Defendant. It is the formal  
9 document by which this case is brought into this court.

10 Now, the Defendant has exercised his constitutional  
11 right and has plead not guilty to this indictment.  
12 Therefore that plea puts the burden on the State to prove  
13 the Defendant guilty. A person charged with committing a  
14 criminal offense in South Carolina is never required to  
15 prove himself innocent. I charge you that it is an  
16 important rule of the law that the Defendant in a criminal  
17 trial, no matter what the seriousness of the charge may be  
18 will always be presumed to be innocent of the crime for  
19 which the indictment was issued unless guilt has been  
20 proven by evidence satisfying you of that guilt beyond a  
21 reasonable doubt. This presumption of innocence does not  
22 end when you begin your deliberations, but it accompanies  
23 the Defendant throughout the trial unless you reach a  
24 verdict of guilt based on evidence satisfying you of that  
25 guilt beyond a reasonable doubt. This presumption of

1 innocence is like a robe of righteousness placed about the  
2 shoulders of the Defendant which remains with the  
3 Defendant unless it has been stripped from the Defendant  
4 by evidence satisfying you of the Defendant's guilt beyond  
5 a reasonable doubt. Now, this presumption of innocence is  
6 not a mere legal theory. It is not just a legal phrase  
7 that we use, it is a substantial right to which every  
8 Defendant is entitled unless you, the jury, are satisfied  
9 from the evidence of the Defendant's guilt beyond a  
10 reasonable doubt.

11 Now, what is a reasonable doubt. First of all, some  
12 of you may have served as jurors in civil cases where you  
13 were told that it is only necessary to prove that a fact  
14 is more likely true than not true, such as by the greater  
15 weight or the preponderance of the evidence. In criminal  
16 cases the State's proof must be more powerful than that,  
17 it must be beyond a reasonable doubt. Proof beyond a  
18 reasonable doubt is proof that leaves you firmly convinced  
19 of the Defendant's guilt. Now there are very few things  
20 in this world that we know with absolute certainty and in  
21 criminal cases the law does not require proof that  
22 overcomes every possible doubt. If based on your  
23 consideration of the evidence you are firmly convinced  
24 that the Defendant is guilty of the crime charged you must  
25 find the Defendant guilty. If on the other hand you think

1 there is a real possibility that the Defendant is not  
2 guilty, you must give the Defendant the benefit of the  
3 doubt and find him not guilty.

4 Mr. Foreman and ladies and gentlemen of the jury, I  
5 remind you that during this trial you and I have had  
6 certain duties to perform. As the trial Judge it has been  
7 my responsibility to preside over the trial of this case.  
8 And I also have the duty to rule on the admissibility of  
9 the evidence offered during this trial. You are to  
10 consider only the competent evidence before you. If there  
11 was any testimony ordered stricken from the record in this  
12 case during this trial you must therefore disregard that  
13 testimony. You are to consider only the testimony which  
14 has been presented from the witness stand, any exhibits  
15 which have been made a part of the record in this case and  
16 any stipulations of Counsel if there were any. I have the  
17 additional duty to charge you the law applicable to this  
18 case. As I told you at the outset, as the presiding  
19 Judge, I am the sole Judge of the law of this case. And  
20 it is your duty as jurors to accept and to apply the law  
21 as I now state it to you. If you already have any ideas  
22 as to what the law is or what the law ought to be and it  
23 does not agree with what I now tell you the law is you  
24 must abandon your idea because you are sworn to accept the  
25 law and apply the law exactly as I state it to you.

1           As I also told you at the outset, in every case tried  
2 in this court before a jury, the jury becomes the sole and  
3 exclusive judge of the facts in a case. A trial Judge  
4 cannot intimate, state, comment on, or make any statement  
5 to a trial jury about the facts in a case. Since you, the  
6 jury, are the sole judge of the facts in the case you are  
7 not to infer from what I have said during the progress of  
8 this trial in ruling upon the admissibility of evidence,  
9 or otherwise, or anything that I say now during the course  
10 of this instruction to you that I have any opinion about  
11 the facts in this case. The law does not allow me to have  
12 an opinion about the facts in this case. This is a matter  
13 solely for you, the jury, to determine. As jurors, it is  
14 your duty to determine the effect, value and weight of the  
15 evidence presented during this trial.

16           Now there are two types of evidence which are  
17 generally presented during a trial, that being direct  
18 evidence and that being circumstantial evidence. Direct  
19 evidence directly proves the existence of a fact and does  
20 not require deduction. Circumstantial evidence is proof  
21 of a chain of facts and circumstances indicating the  
22 existence of a fact. Crimes may be proven by  
23 circumstantial evidence. The law makes no distinction  
24 between the weight or value to be given to either direct  
25 or circumstantial evidence. However, to the extent the

1 State relies on circumstantial evidence all of the  
2 circumstances must be consistent with each other and when  
3 taken together point conclusively to the guilt of the  
4 accused beyond a reasonable doubt. If these circumstances  
5 merely portray the Defendant's behavior as suspicious, the  
6 proof has failed. Once again, the State has the burden of  
7 proving the Defendant guilty beyond a reasonable doubt.

8 This burden rests with the State regardless of whether the  
9 State relies on direct evidence, circumstantial evidence,  
10 or some combination of the two.

11 Necessarily, you must determine the credibility of  
12 witnesses who have testified in this case and the evidence  
13 presented. Credibility simply means believability. It  
14 becomes your duty as jurors to analyze and to evaluate the  
15 witnesses and the evidence and determine the credibility  
16 of the witnesses and the evidence. In determining the  
17 credibility of witnesses who have testified in this case  
18 you may believe one witness over several witnesses or  
19 several witnesses over one witness. You may believe a  
20 part of the testimony of a witness and reject the  
21 remaining part of the testimony of that same witness. You  
22 may believe the testimony of a witness in its entirety or  
23 reject the testimony of a witness in its entirety. You  
24 may consider whether any witness has exhibited to you any  
25 interest, bias, prejudice, or other motive in the case.

1 You may also consider the appearance and manner of a  
2 witness while on the witness stand.

3 Now, there has been evidence presented that witnesses  
4 have made prior statements which are not consistent with  
5 the witnesses present testimony. You may use this  
6 evidence to decide whether to believe the witness. You  
7 may also use evidence of the earlier contradictory  
8 statements to determine the truth of those statements. It  
9 is up to you to decide whether to believe the earlier  
10 statements or the testimony given at trial.

11 Now, as I explained to you during this trial, the  
12 rules of evidence ordinarily do not permit witnesses to  
13 testify to opinions or conclusions. An exception to this  
14 rule exists for witnesses we call expert witnesses. A  
15 witness who by education and experience has become an  
16 expert in some art, science, profession, or calling may  
17 state an opinion as to relevant and material matter in  
18 which the witness claims to be an expert and may also  
19 state the reasons for the opinion. You should consider  
20 any expert opinion received in evidence in this case. And  
21 like any other evidence give it the weight you think it  
22 deserves. If you decide that the opinion of an expert  
23 witness is not based on sufficient education and  
24 experience, or if you conclude that the reasons given in  
25 support of the opinion are not sound, or that the opinion

1 is outweighed by other evidence you may disregard the  
2 opinion entirely. An expert witnesses testimony is to be  
3 given no greater weight than that of other witnesses  
4 simply because the witness is an expert. Furthermore you  
5 are not required to accept an expert's opinion even though  
6 it is not contradicted.

7 Now, I instruct you, Mr. Foreman and ladies and  
8 gentlemen of this jury and emphasize, the fact the  
9 Defendant did not testify is not a factor to be considered  
10 by you in any way in your deliberations and in your  
11 consideration on the question of the guilt or innocence of  
12 the Defendant. It must not be considered by you in any  
13 manner whatsoever. A Defendant has the constitutional  
14 right to remain silent. And the assertion of this right  
15 must not be considered by you in your deliberations. I  
16 repeat, under the oath that you took at the beginning of  
17 this case, you are to draw no conclusion whatsoever from  
18 the fact that the Defendant elected not to testify in this  
19 case. The fact that this Defendant did not testify should  
20 not even be discussed in your jury room. The burden of  
21 proof, as I have stated to you several times, is on the  
22 State. The Defendant is not required to prove his  
23 innocence. The burden of proof remains on the State to  
24 prove guilt beyond a reasonable doubt.

25 Now, in order to establish criminal liability

1 criminal intent is required. For example, the mental  
2 state required to be proven by the State for a particular  
3 crime might be purpose, intent, knowledge, recklessness,  
4 or criminal negligence. Criminal intent must be proven by  
5 the State beyond a reasonable doubt. Criminal intent is  
6 always a matter that must be determined by the jury from  
7 the circumstances surrounding the situation. Now, there  
8 is no way to prove intent to a mathematical certainty.  
9 There is no way medical science can dissect a person's  
10 brain and determine what the person had in mind. So the  
11 law says that criminal intent may be inferred from the  
12 circumstances shown to have existed. This is how you make  
13 a determination of whether or not the element requiring  
14 intent was present. It is not necessary to establish  
15 intent by direct and positive evidence, but intent may be  
16 established by inference in the same way as any other fact  
17 by taking into consideration the acts of the parties and  
18 all the facts and circumstances in the case. Criminal  
19 intent is a mental state, a conscious wrongdoing. It is  
20 up to you to determine what the Defendant intended to do  
21 based on the circumstances shown to have existed.  
22 Criminal intent can arise from action or a failure to act.  
23 It may arise from negligence, recklessness, or an  
24 indifference to duty or to consequences that is considered  
25 by the law to be the equivalent of criminal intent.

1           Now, as we have stated and as you know the Defendant  
2           has been charged with attempted murder. In order to prove  
3           this crime the State must prove the Defendant attempted to  
4           kill another person with malice aforethought, either  
5           expressed or implied. Malice is hatred, ill will, or  
6           hostility towards another person. It is the intentional  
7           doing of a wrongful act without just cause or excuse and  
8           with an intent to inflict an injury or under circumstances  
9           that the law will infer an evil intent. Malice  
10          aforethought does not require that malice exists for any  
11          particular time before the act is committed. But malice  
12          must exist in the mind of the Defendant just before and at  
13          the time the act is committed. Therefore there must be a  
14          combination of the previous evil intent and the act.  
15          Malice aforethought may be expressed or inferred. These  
16          terms, expressed and inferred do not mean different kinds  
17          of malice but merely the manner in which malice may be  
18          shown to exist. That is either by direct evidence or by  
19          inference from the facts and circumstances which are  
20          proved. Expressed malice is shown when a person speaks  
21          words which express hatred or ill will for another or when  
22          the person prepared beforehand to do the act which was  
23          later accomplished. Malice may be inferred from conduct  
24          showing a total disregard for human life. Inferred malice  
25          may also arise when the deed is done with a deadly weapon.

1 A deadly weapon is any article, instrument, or substance  
2 which is likely to cause death or great bodily harm.  
3 Whether an instrument has been used as a deadly weapon  
4 depends on the facts and circumstances of the case.  
5 Ordinary objects may become deadly weapons when the facts  
6 show that they have been used to inflict serious bodily  
7 harm or death. If facts are proved beyond a reasonable  
8 doubt sufficient to raise an inference of malice to your  
9 satisfaction, this inference would be simply an  
10 evidentiary fact to be considered by you, the jury, along  
11 with the other evidence in this case and you may give it  
12 the weight you decide it should receive.

13 A specific intent to kill is not an element of  
14 attempted murder, but there must be a general intent to  
15 commit serious bodily injury. Intent means intending the  
16 result which actually occurs, not accidentally or  
17 involuntary. Intent may be shown by acts and conduct of  
18 the Defendant and other circumstances from which you may,  
19 from which you may naturally and reasonably infer intent.  
20 Evidence of the character of the act, the character of the  
21 instrument used, the manner in which it was used, the  
22 purpose to be accomplished, and the resulting wounds or  
23 injuries may be considered in determining the intent with  
24 which the act was committed. Intent may also be inferred  
25 when it is demonstrated that the Defendant voluntarily and

1 willfully commits an act, the natural tendency of which is  
2 to destroy another's life.

3 Now, this has been mentioned to you, we have what is  
4 called lessor included offenses. If you find that the  
5 State has failed to prove that the Defendant is guilty of  
6 attempted murder beyond a reasonable doubt, then you can  
7 decide whether the State has proven that the Defendant is  
8 guilty of assault and battery of a high and aggravated  
9 nature. That being what we call a lessor included offense  
10 of attempted murder. A person commits the offense of  
11 assault and battery of a high and aggravated nature if the  
12 person unlawfully injures another person; and great bodily  
13 injury to another person results; or the act is  
14 accomplished by means likely to produce death or great  
15 bodily injury. Great bodily injury means bodily injury  
16 which causes a substantial risk of death or which causes  
17 serious, permanent disfigurement or protracted loss where  
18 impairment of the function of a bodily member or organ.

19 Now, the next lessor included offense is assault and  
20 battery in the second degree. If you find that the State  
21 has failed to prove that the Defendant is guilty of  
22 attempted murder and assault and battery of a high and  
23 aggravated nature beyond a reasonable doubt, you must then  
24 decide whether the State has proven that the Defendant is  
25 guilty of assault and battery in the second degree.

1       A person commits the offense of assault and battery  
2       in the second degree if the person unlawfully injures  
3       another person or offers or attempts to injure another  
4       person with the present ability to do so, and either  
5       moderate bodily injury to another person results or  
6       moderate bodily injury to another person could have  
7       resulted. Moderate bodily injury means physical injury  
8       that involves prolonged loss of consciousness, or that  
9       causes temporary or moderate disfigurement or temporary  
10      loss of the function of a bodily member or organ, or  
11      injury that requires medical treatment when the treatment  
12      requires the use of regional or general anesthesia or  
13      injury that results in a fracture or dislocation.  
14      Moderate bodily injury does not include one-time treatment  
15      and subsequent observation of scratches, cuts, abrasions,  
16      bruises, burns, splinters, or any other minor injuries  
17      that do not ordinarily require extensive medical care.

18       Lastly, the last lessor included offense is assault  
19      and battery in the third degree. If you find that the  
20      State has failed to prove that the Defendant is guilty of  
21      attempted murder, assault and battery of a high and  
22      aggravated nature and assault and battery in the second  
23      degree, all beyond a reasonable doubt, you must then  
24      decide whether the State has proven that the Defendant is  
25      guilty of assault and battery in the third degree. A

1 person commits the offense of assault and battery in the  
2 third degree if the person unlawfully injures another  
3 person, or offers or attempts to injure another person  
4 with the present ability to do so.

5 Now, there is what we call a verdict form and I am  
6 going to come down in just a minute to show you,  
7 especially Mr. Foreman, because you will be filling it  
8 out, in reaching a verdict, how the verdict is reached in  
9 so far as placing that on the verdict form. Whatever  
10 verdict that you reach must be unanimous among the twelve  
11 of you. And when you have reached a verdict and completed  
12 the verdict form you will knock on the door to inform the  
13 bailiff that a verdict, a unanimous verdict has been  
14 reached. Now, what I have read to you I realize is a lot.  
15 So in order to assist you, Mr. Foreman and ladies and  
16 gentlemen of the jury, what I have just read to you, a  
17 copy will be provided to you when you are in the jury room  
18 engaging in your deliberations to refer to, to use in  
19 whatever manner that you feel like is necessary. Let me  
20 come down and show you this verdict form. It is divided  
21 into four parts. The top part is just a caption of the  
22 case and the indictment number. The first, part A, this  
23 is A, B, C and D. A refers to the indictment, which  
24 charges the Defendant with attempted murder. And you will  
25 either decide guilty or not guilty. Now the fact that

1 guilty is placed first above not guilty is of no  
2 significance whatsoever. Okay. If you find the Defendant  
3 not guilty of this charge then you will go to section B,  
4 the first lessor included offense. If you find the  
5 Defendant guilty of attempted murder then you will stop  
6 and do not complete the rest of the verdict form. If you  
7 find him not guilty of attempted murder then you will  
8 consider the first lessor included offense of assault and  
9 battery of a high and aggravated nature and engage in the  
10 same process. If you find him guilty you will stop and  
11 not complete the remainder of the form. If you find him  
12 not guilty you would go to the next lessor included  
13 offense which is assault and battery in the second degree  
14 and engage in the same process. And then if you find him  
15 guilty of assault and battery in the second degree stop.  
16 If you find him not guilty then you will consider assault  
17 and battery in the third degree. And when you place the  
18 indication, you will just put your initials. Okay, Mr.  
19 Foreman, and then sign the page, it is already dated for  
20 you. Now, what I need for you to do, is all fourteen of  
21 you go back to the jury room, do not start your  
22 deliberations yet, do not start your discussions. I need  
23 to talk to the lawyers to make sure that I do not need to  
24 correct or add to my jury charge. If I need to then I  
25 will bring all fourteen of you back out and I will do

1 that. If I don't have to then when the bailiff brings to  
2 you the verdict form, copy of my charge and all of the  
3 exhibits in this case that will be your cue for two things  
4 to happen. First of all I will need the two alternates to  
5 come out because you will not participate in the  
6 deliberations. And secondly that will be your cue, Mr.  
7 Foreman, to start your deliberations in order to reach a  
8 unanimous verdict. So, if you will go to the jury room,  
9 all fourteen of you, don't start your discussions yet and  
10 let me talk with the lawyers.

11 (Whereupon, the jury was excused from open court at  
12 approximately 11:51 a.m.)

13 THE COURT: Does the State have any exceptions or  
14 objections to the Court's charge?

15 MS. WHITE: No, sir.

16 THE COURT: From the Defense?

17 MS. NELSON: None, Your Honor.

18 THE COURT: Okay, thank you very much. We will go  
19 off the record and if you will get with the Court Reporter  
20 and make sure we got all the exhibits.

21 (Whereupon, the attorneys and the Court Reporter go  
22 over the exhibits.)

23 (Whereupon, the jury start deliberations at  
24 approximately 11:52 a.m.)

25 (Whereupon, the two alternates were excused from the

1 trial of the case.)

2 THE COURT: I understand the jury has a verdict.  
3 Anything we need to put on the record before we bring the  
4 jury out to receive the verdict?

5 MS. WHITE: No, sir.

6 MS. NELSON: No, sir.

7 THE COURT: All right.

8 (Whereupon, the jury came into open court with the  
9 verdict at approximately 12:50 p.m.)

10 THE COURT: Let the record reflect the jury is back  
11 in. Mr. Foreman, it is my understanding that you have  
12 reached a verdict. Is that correct?

13 MR. FOREMAN: That is correct.

14 THE COURT: All right, without telling me what the  
15 verdict is, is the verdict unanimous among the twelve of  
16 you?

17 MR. FOREMAN: It is.

18 THE COURT: Would you hand the verdict form to Mr.  
19 Willingham, please.

20 (Whereupon, the Foreman handed the verdict form to  
21 the Bailiff.)

22 THE COURT: All right, Madam Clerk, would you publish  
23 the verdict, please.

24 CLERK OF COURT: State of South Carolina, County of  
25 Greenwood, in the Court of General Sessions in the Eighth

1 Judicial Circuit. The State of South Carolina versus  
2 Willie Thomas Gray. Indictment number 2014-GS-24-1903.  
3 As to the lesser included offense of assault and battery  
4 in a high and aggravated nature, we, the jury, find the  
5 Defendant guilty. Signed by the Foreperson, James Timms  
6 on January 19th, 2017.

7 THE COURT: All right, ladies and gentlemen, if that  
8 be your verdict, if so signify by raising your right hand.

9 (Whereupon, all jurors raised their hand.)

10 THE COURT: Let the record reflect that all twelve  
11 hands went up. Does either side want individual polling  
12 of the jury?

13 MS. WHITE: No, sir.

14 MS. NELSON: No sir, Your Honor.

15 THE COURT: Okay. Ladies and gentlemen, let me thank  
16 you for your jury service. The verdict that you reached,  
17 the verdict that any jury reaches is of no significance to  
18 me. What is important to me is that a jury perform their  
19 responsibilities conscientiously and that you are  
20 attentive throughout the proceedings as I instructed you  
21 to do. I keep an eye on my juries on a regular basis and  
22 there was never once that I thought that any of you were  
23 not paying attention to what was going on. So, I thank  
24 you for your jury service. I hope that you found it to be  
25 educational, something, you learned some things that maybe

1 you didn't otherwise know. It is difficult, it is not an  
2 easy job to sit on a jury and reach a verdict. But you  
3 have preformed your services very well and I am  
4 appreciative of that. You will be mailed, I think, Madam  
5 Clerk, the check for their service?

6 CLERK OF COURT: It should be by next week.

7 THE COURT: Sometime next week you will receive in  
8 the mail your check for your jury service. Do not make  
9 big plans with that check. And if you need a work excuse  
10 hang around and the Clerk can help you with that. And,  
11 Mr. Foreman, you need to sign one other document so stay  
12 with us. I like to shake the hands of my jury.

13 (Whereupon, the jury was excused from open court at  
14 approximately 12:55 p.m.)

15 THE COURT: Okay, we will take about a ten minute  
16 break to get everything in order. Sheriff, if you will  
17 take Mr. Gray into custody.

18 (Whereupon, a short break was taken.)

19 THE COURT: Okay, we are back on the record in the  
20 sentencing phase. If everybody will come up. Okay,  
21 Solicitor White, Solicitor Peñny, I will be glad to hear  
22 from the State first concerning sentencing and then hear  
23 from the Defense.

24 MS. WHITE: Yes, sir. First of all, Mr. Gray's prior  
25 record going back to 1980. He has an assault and battery

1 in 1980; possession of an unlawful weapon and possession  
2 of marijuana in 1980; grand larceny in 1980, received a  
3 Youthful Offender sentence; housebreaking and possession  
4 of burglary tools in 1984; assault and battery in 1986;  
5 grand larceny in 1986; destruction of jail property in  
6 1986; another assault and battery in '87; possession of  
7 stolen goods in '87; forgery times two in '87, received a  
8 two year sentence for that concurrent. In 1988 he was  
9 convicted of voluntary manslaughter, assault and battery  
10 with intent to kill and first degree burglary.  
11 Significantly, Your Honor, that case involved him beating  
12 a woman to death. He was charged with murder and I think  
13 ultimately convicted of voluntary manslaughter. But that  
14 was a female victim in that case, Your Honor. Simple  
15 assault in 2006; CDV, high and aggravated in 2007. That  
16 may be the case, Your Honor, he ruptured his wife or  
17 ex-wife's eardrum by beating her with a table leg. I  
18 believe that is that conviction. I could be wrong about  
19 that. CDV third offense in 2008; an ABHAN in 2011,  
20 received five years on that. And that is the extent of  
21 his prior record, Your Honor. At least one of these other  
22 incidents involved in breaking another woman's arm also.  
23 So, Your Honor, Mr. Gray has a history of severely beating  
24 woman, at one point to death. And we are just asking for  
25 a sentence that reflects that.

1 THE COURT: Thank you, Solicitor. Ms. Able, I will  
2 be glad to hear from y'all. I am glad to hear from Mr.  
3 Gray.

4 MS. NELSON: Thank you very much, Your Honor. Your  
5 Honor, I understand you just heard Mr. Gray's record. But  
6 I would point out that it has been two and a half years  
7 since this incident occurred. And his record has remained  
8 clear since that time, the last, I believe the last date  
9 read was 2011. It was an incident that did not involve  
10 Ms. Holloway. I believe, Your Honor, after this trial, I  
11 am sure you are clear on Ms. Holloway's position which  
12 would be that she does not want Willie to serve any more  
13 time. They are still together as a couple. She has not  
14 wanted this case prosecuted from the beginning. She is  
15 not in fear of Willie and obviously her position as the  
16 victim in this case would be that she does not want to see  
17 him punished in any additional way, Your Honor. Willie  
18 was in jail from his arrest on September 7th until July of  
19 the following year. It is a total of 298 days, Judge. So  
20 nearly a year from this incident date he was held in the  
21 Greenwood County jail. He works, Your Honor, he works  
22 for, you have got to remind me of the name, Willie.

23 MR. GRAY: Frank Henderson. What we do is we repair  
24 homes, you know, like people move out of homes and we come  
25 into the home and repair for whatever needs to be done for

1 it.

2 MS. NELSON: So, he does home repair for a  
3 contractor, Frank Henderson. Before that he worked at the  
4 packing plant. And Willie provides, he earns money, he  
5 gets out there and works. He is not a person who just  
6 stays at home and does nothing. I sort of inherited this  
7 case from Ms. Bolen when she left us recently. I knew  
8 Willie before and in the short time that I have worked on  
9 the case he has been, it has been a pleasure to represent  
10 him. He has done everything I have asked him to do. He  
11 has been, and I know what Ms. Bolen asked of him he  
12 complied with all the time during our representation of  
13 him. He is at our office when we ask him to be. He is  
14 polite and cooperative, has been polite and cooperative  
15 through this whole trial. Was facing a life sentence,  
16 Your Honor, if he had been convicted of attempted murder  
17 because of that 1988 prior. And he is here, didn't run  
18 away. Your Honor chose to let him remain out on bond and  
19 he honored that privilege that you gave him by not having  
20 contact with Janice and being up here when he was suppose  
21 to be. Your Honor, we are asking that under the  
22 circumstances of this current case and that respecting  
23 Janice's wishes that, and given that these, this happened  
24 in 2014 in the summer and we are now in January of 2017.  
25 And these folks are still together and Willie has no

1 additional offenses. We would ask that you be as lenient  
2 as possible given those considerations, Your Honor. I  
3 don't know if you would be inclined to do this. Willie  
4 has asked if you would allow him to remain out. That if  
5 you do impose a sentence giving him time that you allow  
6 him to remain out for a couple of more days and report  
7 back to start serving his sentence just so he can take  
8 care of, just take care of some personal business before  
9 he was incarcerated if that is what you choose to do, Your  
10 Honor.

11 THE COURT: Thank you very much.

12 MS. HOLLOWAY: Your Honor, --

13 THE COURT: Does Ms. Holloway want to speak?

14 MS. HOLLOWAY: Yes.

15 THE COURT: I need to have you sworn in, Ma'am.

16 JANICE HOLLOWAY, being  
17 first duly sworn, testified as follows:

18 THE COURT: Ms. Holloway, I will be glad to hear from  
19 you.

20 MS. HOLLOWAY: Your Honor, if your decision is to  
21 incarcerate him will you please be as lenient as possible  
22 because this man is being charged for something he didn't  
23 do. It is my fault, I lied and I hate to see this man go  
24 to prison for something he didn't do. And I am not afraid  
25 of him, we are together, we live together, we are still

1 together. And I am going to be with him whether he is  
2 incarcerated or not. So please be as lenient as possible.

3 MS. NELSON: You want to say anything, Willie?

4 MR. GRAY: I just want to say I am sorry. I am too  
5 emotional to say something, I am sorry.

6 MS. NELSON: Your Honor, just a few, a couple of  
7 additional things.

8 THE COURT: Sure.

9 MS. NELSON: She has three children and would just  
10 ask Your Honor, I know you have heard the testimony, you  
11 know what the injuries were that Janice received. I think  
12 that, I understand what the verdict was and respect that.  
13 But I think that the jury could have also come back with  
14 an assault and battery second verdict given the nature of  
15 the injuries in the case and obviously that would make  
16 Willie fall into a much lower penalty category. And would  
17 just ask Your Honor to consider that as well. That is all  
18 I have.

19 THE COURT: Thank you very much. Several comments  
20 before I announce the sentence. Since the jury came back  
21 with a guilty verdict and I accept as true the allegations  
22 made against you, Mr. Gray. Once they came back, the jury  
23 told me that they believed that you committed an assault  
24 and battery of a high and aggravated nature on Ms.  
25 Holloway despite of what she says. And I accept as true,

1 one-hundred percent, that you did commit that offense,  
2 okay, because the jury has told me that. Therefore the  
3 fact that Ms. Holloway states that it did not happen, I  
4 don't accept that, okay. Secondly, the record that you  
5 have is extremely extensive as far as violence. Your  
6 voluntary manslaughter, I realize it is in 1988 but  
7 nonetheless, then you have got CDV's, you have got assault  
8 and battery of a high and aggravated nature in 2011.  
9 Exactly what you were convicted today. I can't ignore  
10 this prior record, sir. I cannot and will not. I will  
11 give some consideration not to Ms. Holloway's statement  
12 that it did not happen but her desire or some leniency on  
13 you. I will give that some consideration. Otherwise, I  
14 would impose the maximum sentence of 20 years, no question  
15 about it. But I am not going to do that, you are going to  
16 get a significant sentence because of your prior record  
17 and the facts of this case. But I am not going to impose  
18 the max simply because of Ms. Holloway's statement that  
19 she wants mercy. It is a sad day for society when someone  
20 beats another person with a pipe, that is a sad day, that  
21 is a sad day. Mr. Gray, sentence of the Court is you be  
22 committed to the State Department of Corrections for a  
23 period of 15 years. I give you credit for 298 days that  
24 you have been incarcerated. Good luck to you, sir.

25 MS. NELSON: Thank you, Your Honor.

**STAFF ALERTS:**



**HEALTHCARE** 1325 Spring Street, Greenwood, S.C. 29646

CONSULTANTS:

I, THE UNDERSIGNED ATTENDING PHYSICIAN, CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THE DIAGNOSIS TREATMENT AND WRITTEN ORDERS OF THIS PATIENT HAVE BEEN COMPLETELY AND PROMPTLY RECORDED.

BY: \_\_\_\_\_ DATE: \_\_\_\_\_

DISCHARGED ALIVE ☐ DIED: < 48 HRS. ☐ > 48 HRS. ☐

AUTOPSY    YES    ☐    NO    ☐

Form: smhrec.dcl B41 07/03/2014 02:15:50

PRINTED BY: C92214

|                               |                                                                                            |                                    |                     |                                      |                             |                                                                                             |  |
|-------------------------------|--------------------------------------------------------------------------------------------|------------------------------------|---------------------|--------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------|--|
| ACCOUNT NUMBER<br>14184-00010 |                                                                                            | PATIENT NAME<br>HOLLOWAY, JANICE D |                     | ADMISSION DATE/TIME<br>07/03/14 0215 |                             | UNIT # / MPI #<br>000147451                                                                 |  |
| GUARANTOR                     | GUARANTOR NAME and ADDRESS<br>HOLLOWAY, JANICE D<br>[REDACTED]<br>[REDACTED] SC 29646-4524 |                                    |                     | RELATIONSHIP<br>SELF                 |                             | GUARANTOR EMPLOYER NAME and ADDRESS<br>CAROLINA PRIDE<br>1 PACKER ST.<br>GREENWOOD SC 29646 |  |
|                               | SOCIAL SECURITY NUMBER<br>[REDACTED]                                                       |                                    | PHONE<br>[REDACTED] |                                      | WORK PHONE<br>(864)229-5611 |                                                                                             |  |
| RELATIVE                      | RELATIVE #1 NAME and ADDRESS<br>GRAY, WILLIE<br>[REDACTED]<br>[REDACTED] SC 29646          |                                    |                     | RELATIVE #1 NAME and ADDRESS         |                             |                                                                                             |  |
|                               | RELATIONSHIP<br>FRIEND                                                                     |                                    | PHONE<br>[REDACTED] |                                      | WORK PHONE                  |                                                                                             |  |
| INSURANCE                     | 1                                                                                          | INSURANCE NAME                     |                     | COMPANY #                            |                             | GROUP NAME                                                                                  |  |
|                               |                                                                                            | INSURED NAME                       |                     |                                      |                             | POLICY NUMBER                                                                               |  |
|                               | 2                                                                                          | INSURANCE NAME                     |                     | COMPANY #                            |                             | GROUP NAME                                                                                  |  |
|                               |                                                                                            | INSURED NAME                       |                     |                                      |                             | POLICY NUMBER                                                                               |  |
|                               | 3                                                                                          | INSURANCE NAME                     |                     | COMPANY #                            |                             | GROUP NAME                                                                                  |  |
|                               |                                                                                            | INSURED NAME                       |                     |                                      |                             | POLICY NUMBER                                                                               |  |
|                               |                                                                                            |                                    |                     |                                      |                             | RELATIONSHIP                                                                                |  |

Self Regional Healthcare  
1325 Spring Street  
Greenwood, SC 29646  
864-725-4111

Final

### Emergency Department Chart

|                                   |           |                                 |
|-----------------------------------|-----------|---------------------------------|
| Patient Name: HOLLOWAY, JANICE D. |           | MRN: 000147451                  |
| Birthdate: [REDACTED]             | Gender: F | Account Number: 1418400010      |
| Address: [REDACTED]               |           | PHN: [REDACTED]                 |
| [REDACTED] 29646-4524             |           | Primary MD: Patient has no PCP. |
| Phone: [REDACTED]-6485            |           | Attending MD: JOHN SHORT DO     |
| [REDACTED]-4414                   |           | Arrival Date: 07/03/2014 02:15  |
| [REDACTED]-5340                   |           | Visit Date: 07/03/2014 02:18    |
| [REDACTED]-5611                   |           |                                 |
| [REDACTED] 6890                   |           |                                 |

### Vital Signs/Data

| Time             | Staff | Temperature | Pulse   | Respiration | Blood Pressure | Pulse Oximetry   | Pain  |
|------------------|-------|-------------|---------|-------------|----------------|------------------|-------|
| 07/03/2014 06:32 | SJ3   |             | 72 /min | 17 /min     | 122/80 mm Hg.  | 100% on Room air | 8/10  |
| 07/03/2014 03:35 | SJ3   |             | 81 /min | 19 /min     | 112/83 mm Hg.  | 98% on Room air  | 10/10 |
| 07/03/2014 02:15 | SJ3   | 97.5 F Oral | 89 /min | 24 /min     | 122/88 mm Hg.  | 99% on Room air  | 10/10 |

### Glasgow Coma Scale

Initial Glasgow Score is 15 (Oriented X 3; Obeys verbal commands; Opens eyes spontaneously). (SJ3 07/03/2014 02:25)

### Allergies

NKA [Confirmed by SHIROLYN JOHNSON 1RN Staff on 07/03/2014 02:25:42.] ( 06/15/2007 06:46)

### Chief Complaint

Soft tissue injury to dorsal aspect of right forearm. (SJ3 07/03/2014 02:20)  
Abrasion to dorsal aspect of right forearm. (SJ3 02:20)  
Soft tissue injury to right thigh. (SJ3 02:20)  
Abrasion to right thigh. (SJ3 02:20)  
Soft tissue injury to right shin. (SJ3 02:21)  
Abrasion to right shin. (SJ3 02:21)  
Injury to anterior neck and supraclavicular area. (SJ3 02:21)  
Abrasion to anterior neck and supraclavicular area. (SJ3 02:21)  
Assault (SJ3 02:21)

### Pre- Hospital Treatment

Scene information: PT ASSAULTED BY BOYFRIEND WITH A LEAD PIPE. POSSIBLE FEMOR FRACTURE. DENIES LOC.  
Intravenous access 20GA LEFT WRIST obtained. Mode of arrival: Arrived by ambulance Greenwood EMS Medic 30. (SJ3)  
07/03/2014 02:15

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Final

### Emergency Department Chart

|                                   |            |                                 |
|-----------------------------------|------------|---------------------------------|
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| Birthdate: [REDACTED]             | Gender: F  | Account Number: 1418400010      |
| Address: [REDACTED]               |            | PHN: [REDACTED]                 |
|                                   | 29646-4524 | Primary MD: Patient has no PCP. |
| Phone: [REDACTED]-6485            |            | Attending MD: JOHN SHORT DO     |
| [REDACTED]-4414                   |            | Arrival Date: 07/03/2014 02:15  |
| [REDACTED]-5340                   |            | Visit Date: 07/03/2014 02:18    |
| [REDACTED]-5611                   |            |                                 |
| [REDACTED]-6890                   |            |                                 |

### Triage

3-Urgent (SJ3 07/03/2014 02:15)  
No language or communication barrier. (SJ3 02:15)  
Glasgow Coma Scale 15 (SJ3 02:25)  
Onset of symptoms was 20 minutes ago. (SJ3 02:15)  
History comes from patient. (SJ3 02:15)  
History is supplied by the patient's ambulance record. (SJ3 02:15)  
No prior psychiatric history. (SJ3 02:15)  
Lives at home. (SJ3 02:15)  
No risk factors identified (SJ3 02:15)  
Fall risk - no history of falling; immediate or within 3 months. (SJ3 02:24)  
Fall risk - secondary diagnosis present. (SJ3 02:24)  
Fall risk - no ambulatory aid used; or patient on bed rest, uses wheel chair, or nurse assist. (SJ3 02:24)  
Fall risk - has IV or heparin lock. (SJ3 02:24)  
Fall risk - gait/transferring is weak. (SJ3 02:24)  
Fall risk - patient is oriented to own ability. (SJ3 02:24)  
Fall risk level - low risk. (SJ3 02:24)  
Fall risk measures BED IN LOW POSITION, CALL LIGHT IN REACH, SIDE RAILS UP X2 implemented. (SJ3 02:24)  
Pain description: (SJ3 02:26)  
Pain radiates to right flank. (SJ3 02:26)  
Complains of RUQ abdominal pain. (SJ3 02:26)  
Presents with RLQ abdominal pain. (SJ3 02:26)  
Patient is triaged directly to Main ECC. (SJ3 02:15)

### Height/Weight

Hgt: 163 cm at 02:15 (SJ3 07/03/2014 02:15)  
Wgt: 95.5 kg at 02:15 (SJ3 02:15)  
BMI: 35.9 (SJ3 02:15)  
BSA: 2.08 sq. m (SJ3 02:15)

### Current Medications

- 1) 07/02/2014 09:49 JDT9 prednisone Oral 20 mg Dose: 3 tablet(s) Every day [Confirmed by JONATHAN DAVID TAYLOR EDMD on 07/02/2014 09:49:14.]
- 2) 07/02/2014 09:49 JDT9 tramadol Oral 50 mg Dose: 1 tablet(s) Every 6 hours Special Instructions: pin pain [Confirmed by JONATHAN DAVID TAYLOR EDMD on 07/02/2014 09:49:15.]

### Prescribed This Visit

- 1) 07/03/2014 05:25 JPS4 hydrocodone-acetaminophen Oral 5-325 mg Dose: 1 tablet(s) Every 6 hours [Confirmed by JOHN PAUL SHORT DO on 07/03/2014 05:25:55.]
- 2) 07/03/2014 05:26 JPS4 ciprofloxacin Oral 500 mg Dose: 1 tablet(s) 2 Times A Day [Confirmed by JOHN PAUL SHORT DO on 07/03/2014 05:26:24.]

### Nursing Assessment

#### GENERAL

Expresses fear of partner. Patient reports being in a threatening relationship Overly protective significant other. Reports feeling controlled. Has been hit or shoved. Reports verbal abuse. (SJ3) 07/03/2014 02:15

#### GENERAL PRESENTATION

Cooperative. Tearful. Fully verbal. (SJ3) 07/03/2014 02:26

Self Regional Healthcare  
1325 Spring Street  
Greenwood, SC 29646  
864-725-4111

Final

### Emergency Department Chart

|                                   |                                |                                 |
|-----------------------------------|--------------------------------|---------------------------------|
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| Birthdate: [REDACTED]             | Gender: F                      | Account Number: 1418400010      |
| Address: [REDACTED]               |                                | PHN: [REDACTED]                 |
| [REDACTED] 29646-4524             |                                | Primary MD: Patient has no PCP. |
| Phone: [REDACTED]-6485            | Attending MD: JOHN SHORT DO    |                                 |
| [REDACTED]-4414                   | Arrival Date: 07/03/2014 02:15 |                                 |
| [REDACTED]-5340                   | Visit Date: 07/03/2014 02:18   |                                 |
| [REDACTED]-5611                   |                                |                                 |
| [REDACTED]-6890                   |                                |                                 |

### Nursing Assessment

#### PULMONARY

No acute respiratory distress. Normal nonlabored respiration. Nonlabored respirations. Normal respiratory effort. No stridor. On room air. No cough. Lungs clear and bilateral breath sounds equal. (SJ3) 07/03/2014 02:26

#### ABDOMINAL

Normal nondistended abdomen. Normoactive bowel sounds. (SJ3) 07/03/2014 02:26

#### NEUROLOGIC

Alert. Awake. Oriented to person, place and time. (SJ3) 07/03/2014 02:26

#### SKIN/SOFT TISSUE

The skin over the following areas: anterior neck, right forearm, right hip and iliac crest, right anterior thigh and right shin is intact without visible abrasion or laceration. There is pain and swelling noted over the following areas: anterior neck, right forearm, right hip and iliac crest, right anterior thigh and right shin. There is a superficial but contaminated and dirty abrasion located over the following areas: anterior neck, right forearm, right hip and iliac crest, right anterior thigh and right shin. No active bleeding noted over the following areas: anterior neck, right forearm, right hip and iliac crest, right anterior thigh and right shin. No local drainage. (SJ3) 07/03/2014 02:26

#### SOFT TISSUE

Normal upper extremity capillary refill (less than 2 seconds). Normal lower extremity capillary refill (less than 2 seconds). Normal pedal pulses. Palpable pedal pulses. (SJ3) 07/03/2014 02:26

### Nursing Continuation Notes - Refer to Orders section for all orders

Transferred from ambulance stretcher to bed # 5. (SJ3 07/03/2014 02:15)

Assisted with undressing for exam. (SJ3 02:15)

Call light provided to patient. (SJ3 02:15)

In bed. (SJ3 02:28)

Bed rails up. (SJ3 02:28)

GREENWOOD LAW ENFORCEMENT AT BEDSIDE. (SJ3 02:28)

Left department to X-ray (SJ3 02:39)

Via stretcher. (SJ3 02:39)

Returns from X-ray (SJ3 03:01)

Via stretcher. (SJ3 03:01)

Left department to CT (SJ3 03:36)

Via stretcher. (SJ3 03:36)

ED tech in attendance when patient out of department. (SJ3 03:36)

Returns from CT (SJ3 04:05)

Via stretcher. (SJ3 04:05)

RN in attendance when patient out of department. (SJ3 04:05)

Dr. SHORT with patient. (SJ3 04:49)

### Clinician History of Present Illness

Exam started at 02:34 Presenting problem started minutes ago. History comes from patient. Have reviewed and agree with RN note. (JPS4) 07/03/2014 02:34 No history to suggest any head injury. (JPS4) 07/03/2014 02:34 Patient presents with assaulted (JPS4) 07/03/2014 02:35 These symptoms are generalized with no specific anatomic localization. Started suddenly. Rates severity as moderate. These symptoms are in the context of pt states her boyfriend was drunk tonight and beat her with a lead pipe, states she wasn't knocked out, sustained wounds to both legs, right arm and neck. pain is sharp, worse with movement (JPS4) 07/03/2014 02:36

Self Regional Healthcare  
1325 Spring Street  
Greenwood, SC 29646  
864-725-4111

Final

### Emergency Department Chart

|                                   |           |                                 |
|-----------------------------------|-----------|---------------------------------|
| Patient Name: HOLLOWAY, JANICE D. |           | MRN: 000147451                  |
| Birthdate: [REDACTED]             | Gender: F | Account Number: 1418400010      |
| Address: [REDACTED]               |           | PHN: [REDACTED]                 |
| [REDACTED] 29646-4524             |           | Primary MD: Patient has no PCP. |
| Phone: [REDACTED]-6485            |           | Attending MD: JOHN SHORT DO     |
| [REDACTED]-4414                   |           | Arrival Date: 07/03/2014 02:15  |
| [REDACTED]-5340                   |           | Visit Date: 07/03/2014 02:18    |
| [REDACTED]-5611                   |           |                                 |
| [REDACTED]-6890                   |           |                                 |

### Patient Problems

Generalized headache (MTL1 07/19/2012 15:37)  
Psychogenic headache (MTL1 15:37)  
Acute maxillary sinusitis (JBC1 07/20/2012 07:21)  
Sinus headache (JBC1 07:21)  
Sprain of wrist (LK1 09/17/2012 17:12)  
Hidradenitis suppurativa (LK1 17:12)  
Carpal tunnel syndrome (SK90 11/09/2012 15:37)

[REDACTED] 5:22)  
[REDACTED] 22)  
[REDACTED] 22)  
Arthralgia of the pelvic region and thigh (JCM2 05/22/2013 09:24)  
Paravertebral muscle spasm (MTL1 06/03/2013 08:36)  
Panic disorder (MTL1 09:01)  
Lumbosacral radiculitis (LK1 06/05/2013 17:43)  
Lumbar trigger point syndrome (LK1 17:43)  
Chronic low back pain (LK1 06/10/2013 13:02)  
Otitis media, acute (RBG9 09/25/2013 12:39)  
Dehydration (BRC9 10/09/2013 15:48)  
Acute gastritis (BRC9 16:06)  
Hypokalemia (BRC9 16:17)  
Low back pain (RDB2 10/14/2013 06:23)  
Sciatica [Confirmed by JOSEPH W LOGAN MD on 11/18/2013 19:13:26.] (JWL9 11/18/2013 19:13)  
Generalized abdominal pain [Confirmed by GREGORY GIVENS MD on 01/12/2014 19:59:42.] (GG99 01/12/2014 19:59)  
Vomiting [Confirmed by GREGORY GIVENS MD on 01/12/2014 19:59:42.] (GG99 19:59)  
Acute urinary tract infection [Confirmed by RICHARD D BROOKSBANK MD on 01/12/2014 21:03:48.] (RDB2 21:03)  
Cough [Confirmed by GARY MORRISON PAC on 02/17/2014 07:54:41.] (GM20 02/17/2014 07:54)  
Nasopharyngitis [Confirmed by GARY MORRISON PAC on 02/17/2014 07:54:41.] (GM20 07:54)  
Acute low back pain [Confirmed by MATTHEW T LOGAN MD on 04/10/2014 20:52:22.] (MTL1 04/10/2014 20:52)  
Hip pain [Confirmed by MATTHEW T LOGAN MD on 04/10/2014 20:52:22.] (MTL1 20:52)  
Anxiety [Confirmed by MATTHEW T LOGAN MD on 04/10/2014 20:58:53.] (MTL1 20:58)  
Acute vomiting [Confirmed by MATTHEW T LOGAN MD on 04/15/2014 14:49:16.] (MTL1 04/15/2014 14:49)  
Diarrhea [Confirmed by MATTHEW T LOGAN MD on 04/15/2014 14:49:16.] (MTL1 14:49)  
Viral gastroenteritis [Confirmed by MATTHEW T LOGAN MD on 04/15/2014 14:49:16.] (MTL1 14:49)  
Neck sprain [Confirmed by MATTHEW T LOGAN MD on 05/12/2014 16:11:19.] (MTL1 05/12/2014 16:11)

Chronic pain [Confirmed by JONATHAN DAVID TAYLOR EDMD on 07/02/2014 09:50:38.] (JDT9 07/02/2014 09:50)  
Acute sciatica [Confirmed by JONATHAN DAVID TAYLOR EDMD on 07/02/2014 09:50:38.] (JDT9 09:50)  
Feeling nervous [Confirmed by JONATHAN DAVID TAYLOR EDMD on 07/02/2014 09:54:09.] (JDT9 09:54)  
Closed fracture of forearm [Confirmed by JOHN PAUL SHORT DO on 07/03/2014 05:25:56.] (JPS4 07/03/2014 05:25)

### Review of Systems

Except as noted, all other review of systems negative. (JPS4) 07/03/2014 02:37

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| Birthdate: [REDACTED]             | Gender: F  | Account Number: 1418400010      |
| Address: [REDACTED]               |            | PHN: [REDACTED]                 |
|                                   | 29646-4524 | Primary MD: Patient has no PCP. |
| Phone: [REDACTED]-6485            |            | Attending MD: JOHN SHORT DO     |
| [REDACTED]-4414                   |            | Arrival Date: 07/03/2014 02:15  |
| [REDACTED]-5340                   |            | Visit Date: 07/03/2014 02:18    |
| [REDACTED]-5611                   |            |                                 |
| [REDACTED]-6890                   |            |                                 |

### Social History

Patient is single. Patient lives with roommate. (JPS4) 07/03/2014 02:37

### Family History

Family history reviewed and not relevant to current problem. (JPS4) 07/03/2014 02:37

### Physical Exam

#### GENERAL:

Vital signs reviewed. (JPS4) 07/03/2014 02:37 Alert. The patient appears to be in no acute distress. (JPS4) 07/03/2014 02:37

#### ENT:

Pharynx normal. abrasion noted right neck (JPS4) 07/03/2014 02:37

#### EYE EXAM:

Pupils are reactive to light. (JPS4) 07/03/2014 02:37

#### CIRCULATORY:

Regular rate and rhythm. No murmur. (JPS4) 07/03/2014 02:37

#### ABDOMEN:

The abdomen is soft and nontender to palpation. laceration noted to right abdomen (JPS4) 07/03/2014 02:37

#### NEUROLOGIC:

Alert, oriented to person, place, and time. Cranial nerves II through XII are intact. (JPS4) 07/03/2014 02:38

#### SKIN:

ecchymotic areas to both legs, right arm (JPS4) 07/03/2014 02:37

#### PSYCHIATRIC:

Mood and affect normal. (JPS4) 07/03/2014 02:38

### Primary Diagnosis

Closed fracture of forearm (JPS4 07/03/2014 05:25)

### Med Orders

#### ECC ondansetron Inj [ZOFTRAN] 4 MG IV ONCE STAT

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) Completed By (SJ3 1RN Staff 02:33) MD Sign (JPS4 DO 02:26) Notes: Dose given IV push. No complications. IV capped and flushed. (SJ3 02:33)

#### ECC HYDROMORPHONE Inj [DILAUDID] 1 MG IV ONCE STAT

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) Completed By (SJ3 1RN Staff 02:31) MD Sign (JPS4 DO 02:26) Notes: Dose given IV push. No complications. IV capped and flushed. Just given ECC HYDROMORPHONE Inj [DILAUDID]. Excruciating pain (Pain scale = 10/10). Awake and alert. No problem post pain med. (SJ3 02:31)

#### ECC HYDROMORPHONE Inj [DILAUDID] 1 MG IV ONCE STAT

Entered By (JPS4 DO 07/03/2014 03:27) Ordered By (JPS4 DO 03:27) Completed By (SJ3 1RN Staff 03:32) MD Sign (JPS4 DO 03:27) Notes: No complications. IV capped and flushed. Just given ECC HYDROMORPHONE Inj [DILAUDID]. Excruciating pain (Pain scale = 10/10). Awake and alert. No problem post pain med. (SJ3 03:32) Dose given IV push. (SJ3 03:33)

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| Birthdate: [REDACTED]             | Gender: F  | Account Number: 1418400010      |
| Address: [REDACTED]               |            | PHN: [REDACTED]                 |
|                                   | 29646-4524 | Primary MD: Patient has no PCP. |
| Phone: [REDACTED]-6485            |            | Attending MD: JOHN SHORT DO     |
| [REDACTED]-4414                   |            | Arrival Date: 07/03/2014 02:15  |
| [REDACTED]-5340                   |            | Visit Date: 07/03/2014 02:18    |
| [REDACTED]-5611                   |            |                                 |
| [REDACTED]-6890                   |            |                                 |

### Non- Med Orders

#### XR FOREARM RT ONCE STAT assaulted

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) MD Sign (JPS4 DO 02:26) Order Cancelled (HB99 SYSTEM MANAGER 06:37) Notes: Taken to X- ray. Patient dressed in gown (SJ3 02:39) Cancel Reason: Patient Discharged (HB99 06:37)

#### XR FOREARM LT ONCE STAT assaulted

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) MD Sign (JPS4 DO 02:26) Order Cancelled (HB99 SYSTEM MANAGER 06:37) Notes: Taken to X- ray. Patient dressed in gown (SJ3 02:39) Cancel Reason: Patient Discharged (HB99 06:37)

#### XR FEMUR RT ONCE STAT assaulted

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) MD Sign (JPS4 DO 02:26) Order Cancelled (HB99 SYSTEM MANAGER 06:37) Notes: Patient dressed in gown Taken to X- ray. (SJ3 02:39) Cancel Reason: Patient Discharged (HB99 06:37)

#### XR FEMUR LT ONCE STAT assaulted

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) MD Sign (JPS4 DO 02:26) Order Cancelled (HB99 SYSTEM MANAGER 06:37) Notes: Taken to X- ray. Patient dressed in gown (SJ3 02:39) Cancel Reason: Patient Discharged (HB99 06:37)

#### XR LOWER LEG RT ONCE STAT assaulted

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) MD Sign (JPS4 DO 02:26) Order Cancelled (HB99 SYSTEM MANAGER 06:37) Notes: Taken to X- ray. Patient dressed in gown (SJ3 02:39) Cancel Reason: Patient Discharged (HB99 06:37)

#### XR CHEST PA & LAT ONCE STAT assaulted

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) MD Sign (JPS4 DO 02:26) Order Cancelled (HB99 SYSTEM MANAGER 06:37) Notes: Taken to X- ray. Patient dressed in gown (SJ3 02:39) Cancel Reason: Patient Discharged (HB99 06:37)

#### CBC W DIFF ONCE STAT

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) Results Back (JPS4 DO 03:07) MD Sign (JPS4 DO 02:26) Notes: Blood drawn. Blood obtained from the left hand. No complications encountered. (SJ3 02:38)

#### COMP METABOLIC PANEL ONCE STAT

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) Results Back (JPS4 DO 03:18) MD Sign (JPS4 DO 02:26) Notes: Blood drawn. Blood obtained from the left hand. No complications encountered. (SJ3 02:38)

#### URINALYSIS REFLEX CX ONCE STAT URINE VOIDED

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) Results Back (JPS4 DO 03:08) MD Sign (JPS4 DO 02:26) Notes: Urine obtained - Clean Catch Voided specimen. (SJ3 02:34)

#### ECC URINE PREGNANCY TEST POC ONCE STAT

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) Completed By (SJ3 1RN Staff 02:34) MD Sign (JPS4 DO 02:26) Notes: Urine pregnancy POC = Negative. Control # . (SJ3 02:34)

#### MEDICAL URINE DRUG SCREEN ONCE STAT

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) Results Back (JPS4 DO 03:23) MD Sign (JPS4 DO 02:26) Notes: Urine obtained - Clean Catch Voided specimen. (SJ3 02:34)

#### ALCOHOL MEDICAL BLOOD ONCE STAT

Entered By (JPS4 DO 07/03/2014 02:26) Ordered By (JPS4 DO 02:26) Results Back (JPS4 DO 03:18) MD Sign (JPS4 DO 02:26) Notes: Blood drawn. Blood obtained from the left hand. No complications encountered. (SJ3 02:38)

#### CULTURE REFLEX ONCE

Entered By (07/03/2014 03:08) Ordered By (JPS4 DO 03:08) Completed By (03:09) MD Sign (JPS4 DO 03:08)

#### VOIDED URINE CULTURE ONCE STAT

Entered By (07/03/2014 03:08) Ordered By (03:08) MD Sign (03:08) Notes: IN LAB (SJ3 03:20)

#### XR CHEST PA ONCE STAT assaulted

Entered By (07/03/2014 03:09) Ordered By (JPS4 DO 03:09) MD Sign (JPS4 DO 03:09) Notes: COMPLETED PRIOR. (SJ3 03:20)

#### CT ABDOMEN & PELVIS W CONT AND/OR WO W CONT ONCE STAT assaulted

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### Emergency Department Chart

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| Birthdate: [REDACTED]             | Gender: F | Account Number: 1418400010      |
| Address: [REDACTED]               |           | PHN: [REDACTED]                 |
| [REDACTED] 29646-4524             |           | Primary MD: Patient has no PCP. |
| Phone: [REDACTED]-6485            |           | Attending MD: JOHN SHORT DO     |
| [REDACTED]-4414                   |           | Arrival Date: 07/03/2014 02:15  |
| [REDACTED]-5340                   |           | Visit Date: 07/03/2014 02:18    |
| [REDACTED]-5611                   |           |                                 |
| [REDACTED]-6890                   |           |                                 |

### Non- Med Orders

Entered By (JPS4 DO 07/03/2014 03:27) Ordered By (JPS4 DO 03:27) MD Sign (JPS4 DO 03:27) Order Cancelled (HB99 SYSTEM MANAGER 06:37) Comments: PO Contast- NO Notes: Taken to CT. Patient dressed in gown (SJ3 03:36) Cancel Reason: Patient Discharged (HB99 06:37)

#### CT HEAD WO CONTRAST ONLY ONCE STAT assaulted

Entered By (JPS4 DO 07/03/2014 03:27) Ordered By (JPS4 DO 03:27) MD Sign (JPS4 DO 03:27) Order Cancelled (HB99 SYSTEM MANAGER 06:37) Notes: Taken to CT. Patient dressed in gown (SJ3 03:36) Cancel Reason: Patient Discharged (HB99 06:37)

#### CT SPINE CERVICAL WO CONTRAST ONLY ONCE STAT assaulted

Entered By (JPS4 DO 07/03/2014 03:27) Ordered By (JPS4 DO 03:27) MD Sign (JPS4 DO 03:27) Order Cancelled (HB99 SYSTEM MANAGER 06:37) Notes: Taken to CT. Patient dressed in gown (SJ3 03:36) Cancel Reason: Patient Discharged (HB99 06:37)

#### CT CHEST W CONT AND/OR WO W CONT ONCE STAT assaulted

Entered By (JPS4 DO 07/03/2014 03:27) Ordered By (JPS4 DO 03:27) MD Sign (JPS4 DO 03:27) Order Cancelled (HB99 SYSTEM MANAGER 06:37) Notes: Taken to CT. Patient dressed in gown (SJ3 03:36) Cancel Reason: Patient Discharged (HB99 06:37)

#### TREATMENT: Arm Sling ONCE STAT

Entered By (JPS4 DO 07/03/2014 03:27) Ordered By (JPS4 DO 03:27) Completed By (GS99 USTC 04:48) MD Sign (JPS4 DO 03:27)

#### SPLINT APPLICATION ONCE STAT

Entered By (JPS4 DO 07/03/2014 03:27) Ordered By (JPS4 DO 03:27) Completed By (GS99 USTC 04:47) MD Sign (JPS4 DO 03:27) Comments: UPPER EXTREMITY OCL Sugar Tong Forearm Notes: Patient instructed to elevate injury, and if they note increasing pain or excessive discoloration of the area to get re- evaluated. The area distal to the splint had good color. Patient instructed to elevate injury, and if they note increasing pain or excessive discoloration of the area to get re- evaluated. Instructed to ice area making sure no direct ice contact. Told to get checked if they develop numbness or excessive swelling. Patient was instructed to return if needed. (GS99 04:47)

### Disposition

xrays neg except right forearm shows midshaft ulnar fx, ct's neg per radiology (JPS4) 07/03/2014 05:24 Disposition decision is discharge. Condition at discharge - stable. (JPS4) 07/03/2014 05:27 Electronically signed by JOHN PAUL SHORT DO. (JPS4) 07/03/2014 05:27 A discharge pain score was documented: Pain 8/10 at 06:32. IV discontinued. IV Catheter intact. Dressing applied to site. IV site without signs or symptoms of infection. IV dressing dry and intact. Discharge vital signs documented: BP: 122/80 at 06:32, P: 72 at 06:32, Resp: 17/min at 06:32, Pulse OX: 100% on Room air at 06:32. D/C INSTRUCTIONS AND PRESCRIPTIONS X2 GIVEN AND EXPLAINED TO PT. PT HELPED TO WHEELCHAIR. PT HAS SPLINT AND SLING ON PROPERLY. PT ESCORTED TO CAR. Disposition status is discharge. Discharge to home. Leaving department with family. Patient received meds causing drowsiness and left with driver DENISE JONES. Reassessment of chief complaint done. Patient condition stable. Patient condition improved from initial presenting chief complaint. IV / Saline lock(s) removed, catheter(s) intact, hemostasis obtained, dressing(s) applied, no redness or swelling noted at site(s). Patient physically left department and was removed from Tracking Board from HEC by SHIROLYN JOHNSON 1 RN Staff. (SJ3) 07/03/2014 06:32 Electronically signed by SHIROLYN JOHNSON 1 RN Staff. (SJ3) 07/03/2014 06:47 Arrange for a follow up appointment with CHRISTIAN JR. RICHARD MD at (864)229-2663 in 3 - 5 days or immediately if your symptoms get worse. (JPS4) 07/03/2014 05:26 Arrange for a follow up appointment with CHRISTIAN JR. RICHARD MD at (864)229-2663 in 3 - 5 days or immediately if your symptoms get worse. (JPS4) 07/03/2014 05:27

### Discharge Prescriptions

hydrocodone-acetaminophen Oral tablet 5-325 mg 1 tablet(s) Oral Every 6 Hours , 16 tablet(s) , No Refills (JPS4 07/03/2014 05:25) Printed (JPS4 07/03/2014 05:25)  
Cipro Oral tablet 500 mg 1 tablet(s) Oral 2 Times A Day , 14 tablet(s) , No Refills (JPS4 05:26) Printed (JPS4 07/03/2014 05:26)

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| [REDACTED]-4414                   | Arrival Date: 07/03/2014 02:15  |
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| [REDACTED]-5611                   |                                 |
| [REDACTED]-6890                   |                                 |

### Discharge Instructions

#### CIPROFLOXACIN - ORAL (CIPRO)

**IMPORTANT: HOW TO USE THIS INFORMATION:** This is a summary and does NOT have all possible information about this product. This information does not assure that this product is safe, effective, or appropriate for you. This information is not individual medical advice and does not substitute for the advice of your health care professional. Always ask your health care professional for complete information about this product and your specific health needs. CIPROFLOXACIN - ORAL (sip-row-FLOX-ah-sin) **COMMON BRAND NAME(S):** Cipro **WARNING:** This medication may rarely cause tendon damage (e.g., tendonitis, tendon rupture) during or after treatment. Your risk for tendon problems is greater if you are over 60 years of age, if you are taking corticosteroids (such as prednisone), or if you have a kidney, heart or lung transplant. Stop exercising, rest, and seek immediate medical attention if you develop joint/muscle/tendon pain or swelling. **USES:** This medication is used to treat a variety of bacterial infections. Ciprofloxacin belongs to a class of drugs called quinolone antibiotics. It works by stopping the growth of bacteria. This antibiotic treats only bacterial infections. It will not work for virus infections (e.g., common cold, flu). Unnecessary use or overuse of any antibiotic can lead to its decreased effectiveness. **HOW TO USE:** Read the Medication Guide provided by your pharmacist before you start using ciprofloxacin and each time you get a refill. If you have any questions, consult your doctor or pharmacist. This medication may be taken with or without food, usually twice a day in the morning and evening or as directed by your doctor. The dosage and length of treatment is based on your medical condition and response to treatment. Drink plenty of fluids while taking this medication unless your doctor tells you otherwise. Take this medication at least 2 hours before or 6 hours after taking other products that may bind to it, decreasing its effectiveness. Ask your pharmacist about the other products you take. Some examples include: quinapril, vitamins/minerals (including iron and zinc supplements), and products containing magnesium, aluminum, or calcium (such as antacids, didanosine solution, calcium supplements). Calcium-rich foods, including dairy products (such as milk, yogurt) or calcium-enriched juice, can also decrease the effect of this medication. Take this medication at least 2 hours before or 6 hours after eating calcium-rich foods, unless you are eating these foods as part of a larger meal that contains other (non-calcium-rich) foods. These other foods decrease the calcium binding effect. Ask your doctor or pharmacist about safely using nutritional supplements/replacements with this medication. Antibiotics work best when the amount of medicine in your body is kept at a constant level. It is important not to miss a dose. To help you remember and to keep the drug at a constant level, take it at the same times every day. Continue to take this medication until the full prescribed amount is finished, even if symptoms disappear after a few days. Stopping the medication too early may allow bacteria to continue to grow, which may result in a return of the infection. Tell your doctor if your condition persists or worsens. **SIDE EFFECTS:** See also Warning section. Nausea, diarrhea, dizziness, lightheadedness, headache, or trouble sleeping may occur. If any of these effects persist or worsen, tell your doctor or pharmacist promptly. Remember that your doctor has prescribed this medication because he or she has judged that the benefit to you is greater than the risk of side effects. Many people using this medication do not have serious side effects. Tell your doctor immediately if any of these unlikely but serious side effects occur: mental/mood changes (e.g., anxiety, confusion, hallucinations, depression, rare thoughts of suicide), shaking (tremors), skin that sunburns more easily (sun sensitivity). Ciprofloxacin may rarely cause serious nerve problems that may be reversible if identified and treated early. Seek immediate medical attention if you develop any of the following symptoms: pain/numbness/burning/tingling/weakness in any part of the body, changes in how you sense touch/pain/temperature/body position/vibration. Tell your doctor immediately if any of these rare but very serious side effects occur: unusual bruising/bleeding, severe/persistent headache, signs of a new infection (e.g., new/persistent fever, persistent sore throat), unusual change in the amount of urine, change in color of urine (red/pink urine), signs of liver problems (e.g., unusual tiredness, stomach/abdominal pain, persistent nausea/vomiting, yellowing eyes/skin, dark urine), vision changes. Seek immediate medical attention if any of these rare but very serious side effects occur: severe dizziness, fainting, fast/irregular heartbeat, seizures. This medication may rarely cause a severe intestinal condition (Clostridium difficile-associated diarrhea) due to a type of resistant bacteria. This condition may occur during treatment or weeks to months after treatment has stopped. Do not use anti-diarrhea products or narcotic pain medications if you have any of the following symptoms because these products may make them worse. Tell your doctor immediately if you develop: persistent diarrhea, abdominal or stomach pain/cramping, blood/mucus in your stool. Use of this medication for prolonged or repeated periods may result in oral thrush or a new vaginal yeast infection. Contact your doctor if you notice white patches in your mouth, a change in vaginal discharge, or other new symptoms. A very serious allergic reaction to this drug is rare. However, seek immediate medical attention if you notice any of the following symptoms of a serious allergic reaction: rash, itching/swelling (especially of the face/tongue/throat), severe dizziness, trouble breathing. This is not a complete list of possible side effects. If you notice other effects not listed above, contact your doctor or pharmacist. In the US - Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088. In Canada - Call your doctor for medical advice about side effects. You may

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### Emergency Department Chart

|                                                                                                    |                                                                |
|----------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| Patient Name: HOLLOWAY, JANICE D.                                                                  | MRN: 000147451                                                 |
| Birthdate: [REDACTED] Gender: F                                                                    | Account Number: 1418400010                                     |
| Address: [REDACTED]<br>[REDACTED] 29646-4524                                                       | Primary MD: Patient has no PCP.<br>Attending MD: JOHN SHORT DO |
| Phone: [REDACTED]-6485<br>[REDACTED]-4414<br>[REDACTED]-5340<br>[REDACTED]-5611<br>[REDACTED]-6890 | Arrival Date: 07/03/2014 02:15<br>Visit Date: 07/03/2014 02:18 |

### Discharge Instructions

#### CIPROFLOXACIN - ORAL (CIPRO)

report side effects to Health Canada at 1-866-234-2345. **PRECAUTIONS:** Before taking ciprofloxacin, tell your doctor or pharmacist if you are allergic to it; or to other quinolone antibiotics such as norfloxacin, gemifloxacin, levofloxacin, moxifloxacin, or ofloxacin; or if you have any other allergies. This product may contain inactive ingredients, which can cause allergic reactions or other problems. Talk to your pharmacist for more details. Before using this medication, tell your doctor or pharmacist your medical history, especially of: diabetes, heart problems (e.g., recent heart attack), joint/tendon problems (e.g., tendonitis, bursitis), kidney disease, liver disease, nervous system disorder (e.g., peripheral neuropathy), seizure disorder, conditions that increase your risk of seizures (e.g., brain/head injury, brain tumors, cerebral atherosclerosis). Ciprofloxacin may cause a condition that affects the heart rhythm (QT prolongation). QT prolongation can infrequently result in serious (rarely fatal) fast/irregular heartbeat and other symptoms (such as severe dizziness, fainting) that require immediate medical attention. The risk of QT prolongation may be increased if you have certain medical conditions or are taking other drugs that may affect the heart rhythm (see also Drug Interactions section). Before using ciprofloxacin, tell your doctor or pharmacist if you have any of the following conditions: certain heart problems (heart failure, slow heartbeat, QT prolongation in the EKG), family history of certain heart problems (QT prolongation in the EKG, sudden cardiac death). Low levels of potassium or magnesium in the blood may also increase your risk of QT prolongation. This risk may increase if you use certain drugs (such as diuretics/"water pills") or if you have conditions such as severe sweating, diarrhea, or vomiting. Talk to your doctor about using ciprofloxacin safely. This medication may rarely cause serious changes in blood sugar levels, especially if you have diabetes. Watch for symptoms of high blood sugar including increased thirst and urination. Also watch for symptoms of low blood sugar such as nervousness, shakiness, fast heartbeat, sweating, or hunger. Check your blood sugar regularly as directed by your doctor and report any changes. If you experience symptoms of low blood sugar, you may raise your blood sugar by using glucose tablets/gel or eating a quick source of sugar such as table sugar, honey, or candy, or drink fruit juice or non-diet soda. Tell your doctor immediately about the reaction and the use of this product. To help prevent low blood sugar, eat meals on a regular schedule, and do not skip meals. This drug may make you dizzy. Do not drive, use machinery, or do any activity that requires alertness until you are sure you can perform such activities safely. Limit alcoholic beverages. This medication may make you more sensitive to the sun. Avoid prolonged sun exposure, tanning booths, and sunlamps. Use a sunscreen and wear protective clothing when outdoors. Caution is advised when using this drug in children because they may be more sensitive to its possible side effects (e.g., joint/tendon problems). Discuss the risks and benefits with the doctor. Kidney function declines as you grow older. This medication is removed by the kidneys. Therefore, older adults may be more sensitive to its side effects such as tendon problems (especially if they are also taking corticosteroids such as prednisone or hydrocortisone) or heart problems. Discuss the risks and benefits with your doctor. During pregnancy, this medication should be used only when clearly needed. Discuss the risks and benefits with your doctor. This medication passes into breast milk. Consult your doctor before breast-feeding. **DRUG INTERACTIONS:** See also the How to Use section. The effects of some drugs can change if you take other drugs or herbal products at the same time. This can increase your risk for serious side effects or may cause your medications not to work correctly. These drug interactions are possible, but do not always occur. Your doctor or pharmacist can often prevent or manage interactions by changing how you use your medications or by close monitoring. To help your doctor and pharmacist give you the best care, be sure to tell your doctor and pharmacist about all the products you use (including prescription drugs, nonprescription drugs, and herbal products) before starting treatment with this product. While using this product, do not start, stop, or change the dosage of any other medicines you are using without your doctor's approval. Some products that may interact with this drug include: live bacterial vaccines (e.g., typhoid, BCG), "blood thinners" (e.g., warfarin), corticosteroids (e.g., prednisone, hydrocortisone), cyclosporine, drugs removed from your body by certain liver enzymes (such as clozapine, duloxetine, phenytoin, ropinirole, tacrine), drugs for diabetes (e.g., glyburide, insulin), methotrexate, nonsteroidal anti-inflammatory drugs (NSAIDs such as ibuprofen, naproxen), probenecid, sevelamer, strontium, tizanidine, theophylline, urinary alkalinizers (e.g., potassium/sodium citrate). Many drugs besides ciprofloxacin may affect the heart rhythm (QT prolongation), including amiodarone, dofetilide, quinidine, procainamide, sotalol, certain macrolide antibiotics (e.g., erythromycin, clarithromycin), and certain antipsychotic medications (e.g., pimozide, thioridazine, ziprasidone), among others. Also report the use of drugs that might increase seizure risk when combined with this medication such as isoniazid (INH), phenothiazines (e.g., chlorpromazine), or tricyclic antidepressants (e.g., amitriptyline), among others. Consult your doctor or pharmacist for details. Avoid drinking large amounts of beverages containing caffeine (coffee, tea, colas), eating large amounts of chocolate, or taking over-the-counter products that contain caffeine to keep you awake and alert. This drug may increase and/or prolong the effects of caffeine. This document does not contain all possible drug interactions. Keep a list of all the products you use. Share this list with your doctor and pharmacist to lessen your risk for serious medication problems. **OVERDOSE:** If overdose

Self Regional Healthcare  
1325 Spring Street  
Greenwood, SC 29646  
864-725-4111

Final

### Emergency Department Chart

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| Birthdate: [REDACTED] Gender: F   | Account Number: 1418400010      |
| Address: [REDACTED]               | [REDACTED]                      |
| [REDACTED] 29646-4524             | Primary MD: Patient has no PCP. |
| Phone: [REDACTED]-6485            | Attending MD: JOHN SHORT DO     |
| [REDACTED]-4414                   | Arrival Date: 07/03/2014 02:15  |
| [REDACTED]-5340                   | Visit Date: 07/03/2014 02:18    |
| [REDACTED]-5611                   |                                 |
| [REDACTED]-6890                   |                                 |

### Discharge Instructions

#### CIPROFLOXACIN - ORAL (CIPRO)

is suspected, contact your local poison control center or emergency room immediately. US residents can call the US National Poison Hotline at 1-800-222-1222. Canada residents can call a provincial poison control center. NOTES: Do not share this medication with others. This medication has been prescribed for your current condition only. Do not use it later for another infection unless told to do so by your doctor. A different medication may be necessary in those cases. Laboratory and/or medical tests (e.g., kidney function, blood counts, cultures) should be performed periodically to monitor your progress or check for side effects. Consult your doctor for more details. MISSED DOSE: If you miss a dose, take it as soon as you remember. If it is near the time of the next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up. STORAGE: Store at room temperature below 86 degrees F (30 degrees C) away from light and moisture. Do not store in the bathroom. Keep all medicines away from children and pets. Do not flush medications down the toilet or pour them into a drain unless instructed to do so. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company for more details about how to safely discard your product. Information last revised September 2010 Copyright(c) 2010 First DataBank, Inc.

#### Fractured Upper Extremity

##### Fractured Upper Extremity

Broken bones take weeks to heal and require protection and proper follow-up. The broken ends must be lined up correctly and kept perfectly still for proper healing. Do not remove the splint, immobilizer, or cast that has been applied to treat your injury until instructed to do so by your caregiver. This is the most important part of your treatment. Other measures to treat fractures include: Keeping the injured limb at rest and elevated as recommended by your caregiver. This will help reduce pain and swelling. Use pillows to rest and elevate your arm on at night.

Applying ice packs to your fracture site frequently for the next 2-3 days.

Pain medicine is often prescribed in the first days after a fracture. Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.

Proper follow-up care is very important, so call your caregiver for an appointment as soon as possible. Follow-up x-rays are generally recommended to monitor healing.

#### SEEK IMMEDIATE MEDICAL CARE IF:

You notice increasing pain or pressure in the injured arm or hand, or if it your extremity becomes cold, numb, or pale.

#### MAKE SURE YOU:

Understand these instructions.

Will watch your condition.

Will get help right away if you are not doing well or get worse.

Document Released: 01/25/2006 Document Re-Released: 03/16/2010  
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Greenwood, SC 29646  
864-725-4111

Final

### Emergency Department Chart

|                                   |                                 |
|-----------------------------------|---------------------------------|
| Patient Name: HOLLOWAY, JANICE D. | MRN: 000147451                  |
| Birthdate: [REDACTED] Gender: F   | Account Number: 1418400010      |
| Address: [REDACTED]               | [REDACTED]                      |
| [REDACTED] 29646-4524             | Primary MD: Patient has no PCP. |
| Phone: [REDACTED]-6485            | Attending MD: JOHN SHORT DO     |
| [REDACTED]-4414                   | Arrival Date: 07/03/2014 02:15  |
| [REDACTED]-5340                   | Visit Date: 07/03/2014 02:18    |
| [REDACTED]-5611                   |                                 |
| [REDACTED]-6890                   |                                 |

### Discharge Instructions

#### HYDROCODONE/ACETAMINOPHEN-ORAL (LORCET, LORTAB, NORCO, VICODIN)

**IMPORTANT: HOW TO USE THIS INFORMATION:** This is a summary and does NOT have all possible information about this product. This information does not assure that this product is safe, effective, or appropriate for you. This information is not individual medical advice and does not substitute for the advice of your health care professional. Always ask your health care professional for complete information about this product and your specific health needs. **HYDROCODONE/ACETAMINOPHEN-ORAL** (hye-droe-KOE-done/a-SEET-a-MIN-oh-fen) **COMMON BRAND NAME(S):** Lorcet, Lortab, Norco, Vicodin **USES:** This combination medication is used to relieve moderate to severe pain. It contains a narcotic pain reliever (hydrocodone) and a non-narcotic pain reliever (acetaminophen). Hydrocodone works in the brain to change how your body feels and responds to pain. Acetaminophen can also reduce a fever. **HOW TO USE:** Read the Patient Information Leaflet if available from your pharmacist before you start taking this medication and each time you get a refill. If you have any questions, ask your doctor or pharmacist. Take this medication by mouth as directed by your doctor. You may take this drug with or without food. If you have nausea, it may help to take this drug with food. Ask your doctor or pharmacist about other ways to decrease nausea (such as lying down for 1 to 2 hours with as little head movement as possible). If you are using a liquid form of this medication, use a medication measuring device to carefully measure the prescribed dose. Do not use a household spoon because you may not get the correct dose. The dosage is based on your medical condition and response to treatment. Do not increase your dose, take the medication more frequently, or take it for a longer time than prescribed. Properly stop the medication when so directed. Pain medications work best if they are used as the first signs of pain occur. If you wait until the pain has worsened, the medication may not work as well. If you have ongoing pain (such as due to cancer), your doctor may direct you to also take long-acting narcotic medications. In that case, this medication might be used for sudden (breakthrough) pain only as needed. Other non-narcotic pain relievers (such as naproxen, ibuprofen) may also be prescribed with this medication. Ask your doctor or pharmacist if you have any questions about using this product safely with other drugs. This medication may cause withdrawal reactions, especially if it has been used regularly for a long time or in high doses. In such cases, withdrawal symptoms (such as restlessness, watering eyes, runny nose, nausea, sweating, muscle aches) may occur if you suddenly stop using this medication. To prevent withdrawal reactions, your doctor may reduce your dose gradually. Ask your doctor or pharmacist for more details, and report any withdrawal reactions immediately. When this medication is used for a long time, it may not work as well. Talk with your doctor if this medication stops working well. Along with its benefits, this medication may rarely cause abnormal drug-seeking behavior (addiction). This risk may be increased if you have abused alcohol or drugs in the past. Take this medication exactly as prescribed to lessen the risk of addiction. One ingredient in this product is acetaminophen. Taking too much acetaminophen may cause serious (possibly fatal) liver disease. Adults should not take more than 4 grams (4000 milligrams) of acetaminophen a day. If you have liver problems, consult your doctor or pharmacist for a safe dosage of this medication. Carefully check the labels of all your medicines (such as pain/fever drugs or cough-and-cold products) to make sure they do not also contain acetaminophen. (See also Side Effects section.) Tell your doctor if your pain persists or worsens. **SIDE EFFECTS:** Nausea, vomiting, constipation, lightheadedness, dizziness, or drowsiness may occur. Some of these side effects may decrease after you have been using this medication for a while. If any of these effects persist or worsen, tell your doctor or pharmacist promptly. To prevent constipation, eat a diet adequate in fiber, drink plenty of water, and exercise. Consult your pharmacist for help in selecting a laxative (such as a stimulant type with stool softener). To reduce the risk of dizziness and lightheadedness, get up slowly when rising from a sitting or lying position. Remember that your doctor has prescribed this medication because he or she has judged that the benefit to you is greater than the risk of side effects. Many people using this medication do not have serious side effects. Tell your doctor immediately if any of these unlikely but serious side effects occur: mental/mood changes, severe stomach/abdominal pain, difficulty urinating. Seek immediate medical attention if any of these rare but serious side effects occur: fainting, seizure, slow/shallow breathing, unusual drowsiness/difficulty waking up. Taking more than the recommended dose of acetaminophen may cause serious (possibly fatal) liver disease. Seek immediate medical attention if you have any symptoms of liver damage, including: dark urine, persistent nausea/vomiting, stomach/abdominal pain, yellowing eyes/skin. A very serious allergic reaction to this drug is rare. However, seek immediate medical attention if you notice any symptoms of a serious allergic reaction, including: rash, itching/swelling (especially of the face/tongue/throat), severe dizziness, trouble breathing. This is not a complete list of possible side effects. If you notice other effects not listed above, contact your doctor or pharmacist. In the US - Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088. In Canada - Call your doctor for medical advice about side effects. You may report side effects to Health Canada at 1-866-234-2345. **PRECAUTIONS:** Before taking this medication, tell your doctor or pharmacist if you are allergic to it; or to other narcotics (such as morphine, codeine); or if you have any other allergies. This product may contain inactive ingredients, which can cause allergic reactions or other problems.

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Greenwood, SC 29646  
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Final

### Emergency Department Chart

|                                   |           |                                 |
|-----------------------------------|-----------|---------------------------------|
| Patient Name: HOLLOWAY, JANICE D. |           | MRN: 000147451                  |
| Birthdate: [REDACTED]             | Gender: F | Account Number: 1418400010      |
| Address: [REDACTED]               |           | [REDACTED]                      |
| [REDACTED] 29646-4524             |           | Primary MD: Patient has no PCP. |
| Phone: [REDACTED]                 | -6485     | Attending MD: JOHN SHORT DO     |
| [REDACTED]                        | -4414     | Arrival Date: 07/03/2014 02:15  |
| [REDACTED]                        | -5340     | Visit Date: 07/03/2014 02:18    |
| [REDACTED]                        | -5611     |                                 |
| [REDACTED]                        | -6890     |                                 |

### Discharge Instructions

#### HYDROCODONE/ACETAMINOPHEN- ORAL (LORCET, LORTAB, NORCO, VICODIN)

Talk to your pharmacist for more details. Before using this medication, tell your doctor or pharmacist your medical history, especially of: brain disorders (such as head injury, tumor, seizures), breathing problems (such as asthma, sleep apnea, chronic obstructive pulmonary disease-COPD), kidney disease, liver disease, mental/mood disorders (such as confusion, depression), personal or family history of regular use/abuse of drugs/alcohol, stomach/intestinal problems (such as blockage, constipation, diarrhea due to infection, paralytic ileus), difficulty urinating (such as due to enlarged prostate). This drug may make you dizzy or drowsy. Do not drive, use machinery, or do any activity that requires alertness until you are sure you can perform such activities safely. Avoid alcoholic beverages. Acetaminophen may cause liver damage. Daily use of alcohol, especially when combined with acetaminophen, may increase your risk for liver damage. Avoid alcoholic beverages. Check with your doctor or pharmacist for more information. Liquid products may contain sugar and alcohol. Caution is advised if you have diabetes, alcohol dependence, liver disease, or any other condition that requires you to limit/avoid these substances in your diet. Ask your doctor or pharmacist about using this product safely. Before having surgery, tell your doctor or dentist about all the products you use (including prescription drugs, nonprescription drugs, and herbal products). Older adults may be more sensitive to the effects of this drug, especially dizziness, drowsiness, urinary problems. During pregnancy, this medication should be used only when clearly needed. Using it for long periods or in high doses near the expected delivery date is not recommended because of the potential for harm to the unborn baby. Discuss the risks and benefits with your doctor. Babies born to mothers who have used this medication for an extended time may have withdrawal symptoms such as irritability, abnormal/persistent crying, vomiting, or diarrhea. If you notice any of these symptoms in your newborn, tell the doctor promptly. This medication passes into breast milk and may rarely have undesirable effects on a nursing infant. Tell the doctor immediately if your baby develops unusual sleepiness, difficulty feeding, or trouble breathing. Consult your doctor before breast-feeding. **DRUG INTERACTIONS:** The effects of some drugs can change if you take other drugs or herbal products at the same time. This can increase your risk for serious side effects or may cause your medications not to work correctly. These drug interactions are possible, but do not always occur. Your doctor or pharmacist can often prevent or manage interactions by changing how you use your medications or by close monitoring. To help your doctor or pharmacist give you the best care, be sure to tell your doctor or pharmacist about all the products you use (including prescription drugs, nonprescription drugs, and herbal products) before starting treatment with this product. While using this product, do not start, stop, or change the dosage of any other medicines you are using without your doctor's approval. Some products that may interact with this drug include: certain pain medications (mixed narcotic agonist/antagonists such as pentazocine, nalbuphine, butorphanol), narcotic antagonists (such as naltrexone). Acetaminophen is an ingredient in many nonprescription products and in some combination prescription medications. Read the labels carefully before taking other pain relievers, fever reducers, or cold products to see if they also contain acetaminophen. Consult your pharmacist if you are uncertain if your other prescription or nonprescription products contain acetaminophen. (Also see adult maximum daily dose information in How to Use section). The risk of serious side effects (such as slow/shallow breathing, severe drowsiness, dizziness) may be increased if this medication is taken with other products that may also affect breathing or cause drowsiness. Therefore, tell your doctor or pharmacist if you are taking other products such as alcohol, allergy or cough-and-cold products, anti-seizure drugs (such as phenobarbital), medicine for sleep or anxiety (such as alprazolam, diazepam, zolpidem), muscle relaxants, other narcotic pain relievers (such as morphine), and psychiatric medicines (such as risperidone, amitriptyline, trazodone). Your medications or doses of your medications may need to be changed. This medication may interfere with certain laboratory tests, possibly causing false test results. Make sure laboratory personnel and all your doctors know you use this drug. This document does not contain all possible drug interactions. Keep a list of all the products you use. Share this list with your doctor and pharmacist to lessen your risk for serious medication problems. **OVERDOSE:** If overdose is suspected, contact a poison control center or emergency room immediately. US residents can call the US National Poison Hotline at 1-800-222-1222. Canada residents can call a provincial poison control center. Symptoms of overdose may include: slow breathing, slow heartbeat, loss of consciousness. **NOTES:** Do not share this medication with others. It is against the law. This medication has been prescribed for your current condition only. Do not use it later for another condition unless your doctor directs you to do so. A different medication may be necessary in that case. **MISSED DOSE:** If you are taking this product on a regular schedule and miss a dose, take it as soon as you remember. If it is near the time of the next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up. **STORAGE:** Store at room temperature away from light and moisture. Different brands of this medication have different storage needs. Check the product package for instructions on how to store your brand, or ask your pharmacist. Keep all medications away from children and pets. Do not flush medications down the toilet or pour them into a drain unless instructed to do so. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal

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Greenwood, SC 29646  
864-725-4111

Final

### Emergency Department Chart

|                                                                                                    |                                                                |
|----------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| Patient Name: HOLLOWAY, JANICE D.                                                                  | MRN: 000147451                                                 |
| Birthdate: [REDACTED] Gender: F                                                                    | Account Number: 1418400010                                     |
| Address: [REDACTED]<br>[REDACTED] 29646-4524                                                       | Primary MD: Patient has no PCP.<br>Attending MD: JOHN SHORT DO |
| Phone: [REDACTED]-6485<br>[REDACTED]-4414<br>[REDACTED]-5340<br>[REDACTED]-5611<br>[REDACTED]-6890 | Arrival Date: 07/03/2014 02:15<br>Visit Date: 07/03/2014 02:18 |

### Discharge Instructions

#### HYDROCODONE/ACETAMINOPHEN- ORAL (LORCET, LORTAB, NORCO, VICODIN)

company for more details about how to safely discard your product. Information last revised May 2010 Copyright(c) 2010 First DataBank, Inc.

### Discharge Summary

Chief Complaint: Soft tissue injury to dorsal aspect of right forearm; Abrasion to dorsal aspect of right forearm; Soft tissue injury to right thigh; Abrasion to right thigh; Soft tissue injury to right shin; Abrasion to right shin; Injury to anterior neck and supraclavicular area; Abrasion to anterior neck and supraclavicular area; Assault.. Primary Diagnosis: Closed fracture of forearm.. Disposition Notes: xrays neg except right forearm shows midshaft ulnar fx, ct's neg per radiology; Arrange for a follow up appointment with CHRISTIAN JR, RICHARD MD at (864)229-2663 in 3 - 5 days or immediately if your symptoms get worse; Disposition decision is discharge; Condition at discharge - stable; Arrange for a follow up appointment with CHRISTIAN JR, RICHARD MD at (864)229-2663 in 3 - 5 days or immediately if your symptoms get worse; Electronically signed by JOHN PAUL SHORT DO.. Discharge Prescriptions: hydrocodone-acetaminophen Oral 5-325 mg tablet 1 tablet(s) Oral Every 6 Hours (16 tablet(s)); Cipro Oral 500 mg tablet 1 tablet(s) Oral 2 Times A Day (14 tablet(s)). ( 07/03/2014 06:47)

### Staff Legend

BRC9 BIBB CAIN MD  
GG99 GREGORY GIVENS MD  
GM20 GARY MORRISON PAC  
GS99 GUSSIE SINGLETARY USTC  
JBC1 JAMES COOK MD  
JCM2 J MCCASLAN PAC  
JDT9 JONATHAN TAYLOR EDMD  
JPS4 JOHN SHORT DO  
JWL9 JOSEPH LOGAN MD  
LK1 LONA KILE PA  
MTL1 MATTHEW LOGAN MD  
NLK1 NICOLE KENNEDY MD  
RBG9 RICHARD GRAHAM MD  
RDB2 RICHARD BROOKSBANK MD  
SJ3 SHIROLYN JOHNSON 1RN Staff  
SK90 SHANA KELLER NP

SELF REGIONAL HEALTHCARE  
Greenwood, S.C.

DEPARTMENT OF RADIOLOGY

Patient Name: HOLLOWAY, JANICE D      Check-in Date: 07/03/14 0334  
Unit Number: A000147451      Location: DIS - ED

Account # 1418400010      BD: [REDACTED]      Age: 40Y      Sex: F

Ordering Physician      SHORT, JOHN PAUL      Admit Phys: MISCELLANEOUS, MISC

SHORT, JOHN PAUL  
[REDACTED] SPRING ST

MISCELLANEOUS, MISC  
[REDACTED] SPRING STREET, MIZ-  
MIZ-

GREENWOOD      SC

29646

GREENWOOD

SC      29646

| Chk-in # | Order | Exam  |                                                       |
|----------|-------|-------|-------------------------------------------------------|
| 1789820  | 0009  | 70223 | CT HEAD WO CONTRAST ONLY<br>Ord Diag: assaulted       |
| 1789821  | 0009  | 70243 | CT SPINE CERVICAL WO CONT ONLY<br>Ord Diag: assaulted |
| 1789822  | 0009  | 70212 | CT CHEST W CONTRAST<br>Ord Diag: assaulted            |
| 1789823  | 0009  | 70198 | CT ABDOMEN & PELVIS W CONTRAST<br>Ord Diag: assaulted |

CT head:

Technique: 5 mm axial image obtained of the head from above vertex to the skull base.

Comparison: CT from 07/20/2012.

Findings: There is preservation of normal gray-white differentiation. A lobulated fat density lesion is redemonstrated within the right ambient cisterna. There is no new focal extra-axial collection, acute intracranial hemorrhage, focal mass effect or midline shift. The ventricles are normal. An ovoid opacification within the right maxillary sinus likely represents mucous retention cyst versus polyp. The visualized portions of the paranasal sinuses along the mastoid air cells are otherwise clear. There is no acute calvarial fracture, large scalp laceration or large scalp hematoma.

Impression:

No acute intracranial findings.  
Probable lipoma versus dermoid within the posterior cranial fossa remains stable.

CT cervical spine:

FINAL

Page 1

SELF REGIONAL HEALTHCARE  
Greenwood, S.C.

DEPARTMENT OF RADIOLOGY

Patient Name: HOLLOWAY, JANICE D      Check-in Date: 07/03/14 0334  
Unit Number: A000147451      Location: DIS - ED

Account # 1418400010      BD: [REDACTED]      Age: 40Y      Sex: F

Ordering Physician      SHORT, JOHN PAUL      Admit Phys: MISCELLANEOUS, MISC

SHORT, JOHN PAUL  
[REDACTED] SPRING ST

MISCELLANEOUS, MISC  
[REDACTED] SPRING STREET, MIZ-  
MIZ-

GREENWOOD      SC

29646

GREENWOOD

SC      29646

Checkin-Exam Code Summary  
1789820-70223, 1789821-70243, 1789822-70212, 1789823-70198

Technique: 2.5 mm axial images were obtained of the cervical spine along with coronal and sagittal re-formations.

Findings: There is preservation normal AP alignment and vertebral body heights. The facet joints are well aligned. There is no acute fracture. The prevertebral soft tissues are normal. There is a broad-based disc bulge/osteophyte complex at C6/C7 which mildly to moderately narrows the central spinal canal.

Impression:

No acute fracture or malalignment.

Degenerative changes at C6/C7 narrows the central spinal canal.

=====

CT chest, abdomen and pelvis:

Technique: After administration of IV contrast, 5 mm axial images were obtained the chest, abdomen and pelvis along coronal and sagittal re-formations.

Findings:

Chest:

The heart and great vessels are normal. There is no evidence of traumatic injury of the thoracic aorta. No mediastinal hematoma is present. There are multiple calcified left hilar lymph nodes, compatible with prior history of granulomatous exposure. There is a minimally enlarged right hilar lymph node, axial image 35. There is a 5 mm nodule within the right lower lobe based along the major fissure, axial image 44. There is a questionable 3 mm nodule within the apical segment the left lower lobe, axial image 40. Additional 2 mm nodular opacity is present within the apical segment right lower lobe, axial image 43. There is no focal airspace consolidation, pleural effusion or pneumothorax.

Abdomen/pelvis:

FINAL

Page 2

SELF REGIONAL HEALTHCARE  
Greenwood, S.C.

DEPARTMENT OF RADIOLOGY

Patient Name: HOLLOWAY, JANICE D      Check-in Date: 07/03/14 0334  
Unit Number: A000147451      Location: DIS - ED

Account # 1418400010      BD: [REDACTED]      Age: 40Y      Sex: F

Ordering Physician      SHORT, JOHN PAUL      Admit Phys: MISCELLANEOUS, MISC

SHORT, JOHN PAUL  
[REDACTED] SPRING ST

MISCELLANEOUS, MISC  
[REDACTED] SPRING STREET, MIZ-  
MIZ-

GREENWOOD      SC

29646

GREENWOOD

SC      29646

Checkin-Exam Code Summary  
1789820-70223, 1789821-70243, 1789822-70212, 1789823-70198

The liver, gallbladder, pancreas, spleen, adrenal glands, kidneys, collapsed urinary bladder, uterus and adnexa are normal. The GI tract is unremarkable. There is no focal wall thickening or wall edema. There is no intra-abdominal or intrapelvic free air or free fluid. Aside from minimal scattered atherosclerotic calcifications, the abdominal aorta, pelvic arteries and abdominal visceral arteries are normal. There is a focal, 3.5 cm, area of hyperattenuation within the subcutaneous fat of the right anterior abdominal wall, within the suprapelvic region. There is subcutaneous fat stranding in the adjacent subcutaneous fat of the right lateral flank. Injection granuloma is noted within the right gluteal subcutaneous fat.

Bones: There are degenerative changes throughout the thoracic and lumbar spine. There is narrowing of the bony spinal canal secondary to congenitally short pedicles. There is grade 1 degenerative anterolisthesis of L4 respect L5 which combined with moderate facet arthropathy, broad-based disc bulge and the congenitally short pedicles results in moderate to severe narrowing of the central spinal canal with severe narrowing of the neural foramina. Degenerative changes at L5/S1 also results in severe neural foraminal stenosis. Significant neural foraminal stenosis is also present at multiple other levels of the lumbar spine. There is no acute fracture or dislocation within the osseous structures of the chest, abdomen pelvis.

Impression:

1. Focal small hematoma within the subcutaneous fat of the lower right anterior abdominal wall with stranding contusion within the subcutaneous fat of the right lateral flank.
2. Otherwise, no evidence of traumatic injury within the chest, abdomen or pelvis.
3. Bilateral pulmonary nodules. Recommend follow-up evaluation in 6 months.
4. Nonspecific right hilar adenopathy.
5. Advanced degenerative changes superimposed on a congenitally narrowed bony spinal canal results in multilevel neural foraminal

FINAL

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SELF REGIONAL HEALTHCARE  
Greenwood, S.C.

## DEPARTMENT OF RADIOLOGY

Patient Name: HOLLOWAY, JANICE D      Check-in Date: 07/03/14 0334  
Unit Number: A000147451      Location: DIS - ED

Account # 1418400010      BD: [REDACTED]      Age: 40Y      Sex: F

Ordering Physician      SHORT, JOHN PAUL      Admit Phys: MISCELLANEOUS, MISC

SHORT, JOHN PAUL  
[REDACTED] SPRING ST

GREENWOOD      SC

29646

MISCELLANEOUS, MISC  
[REDACTED] SPRING STREET, MIZ-  
MIZ-

GREENWOOD

SC      29646

Checkin-Exam Code Summary  
1789820-70223, 1789821-70243, 1789822-70212, 1789823-70198

stenosis and central spinal canal stenosis at L4/L5. There is  
degenerative grade 1 anterolisthesis of L4 respect L5.

Read By- SAMUEL CAREY VENTURELLA M.D.  
Released By- SAMUEL CAREY VENTURELLA M.D.  
Transcriptionist- SAMUEL CAREY VENTURELLA M.D.  
Released Date Time- 07/03/14 0824

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FINAL

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SELF REGIONAL HEALTHCARE  
Greenwood, S.C.

DEPARTMENT OF RADIOLOGY

Patient Name: HOLLOWAY, JANICE D      Check-in Date: 07/03/14 0307  
Unit Number: A000147451      Location: DIS - ED

Account # 1418400010      BD: [REDACTED]      Age: 40Y      Sex: F

Ordering Physician      SHORT, JOHN PAUL      Admit Phys: MISCELLANEOUS, MISC

SHORT, JOHN PAUL  
[REDACTED] SPRING ST

MISCELLANEOUS, MISC  
[REDACTED] SPRING STREET, MIZ-  
MIZ-

GREENWOOD      SC

29646

GREENWOOD

SC      29646

| Chk-in # | Order | Exam  |                     |
|----------|-------|-------|---------------------|
| 1789815  | 0001  | 68846 | XR CHEST PA         |
|          |       |       | Ord Diag: assaulted |

AP portablechest:

Findings: The heart, mediastinum and hila are normal. The lungs are clear of focal consolidation or pleural effusion. No pneumothorax is present. The visualized osseous structures are unremarkable without acute displaced fracture.

Impression: No acute findings.

Read By- SAMUEL CAREY VENTURELLA M.D.  
Released By- SAMUEL CAREY VENTURELLA M.D.  
Transcriptionist- SAMUEL CAREY VENTURELLA M.D.  
Released Date Time- 07/03/14 0828

---

SELF REGIONAL HEALTHCARE  
Greenwood, S.C.

## DEPARTMENT OF RADIOLOGY

Patient Name: HOLLOWAY, JANICE D      Check-in Date: 07/03/14 0309  
Unit Number: A000147451      Location: DIS - ED

Account # 1418400010      BD: [REDACTED]      Age: 40Y      Sex: F

Ordering Physician      SHORT, JOHN PAUL      Admit Phys: MISCELLANEOUS, MISC

SHORT, JOHN PAUL  
[REDACTED] SPRING ST

GREENWOOD      SC

29646

MISCELLANEOUS, MISC  
[REDACTED] SPRING STREET, MIZ-  
MIZ-

GREENWOOD

SC      29646

Chk-in #      Order      Exam  
1789813      0001      68870      XR FEMUR LT  
Ord Diag: assaulted

Left femur: Four views.

Findings: The contours of the femur are preserved without evidence of acute fracture. The hip and knee joints appear to be anatomically aligned. The soft tissues of the thigh are unremarkable.

Impression: No acute fracture.

Read By- SAMUEL CAREY VENTURELLA M.D.  
Released By- SAMUEL CAREY VENTURELLA M.D.  
Transcriptionist- SAMUEL CAREY VENTURELLA M.D.  
Released Date Time- 07/03/14 0832  
-----

SELF REGIONAL HEALTHCARE  
Greenwood, S.C.

## DEPARTMENT OF RADIOLOGY

Patient Name: HOLLOWAY, JANICE D      Check-in Date: 07/03/14 0310  
Unit Number: A000147451      Location: DIS - ED

Account # 1418400010      BD: [REDACTED]      Age: 40Y      Sex: F

Ordering Physician      SHORT, JOHN PAUL      Admit Phys: MISCELLANEOUS, MISC

SHORT, JOHN PAUL  
[REDACTED] SPRING ST

MISCELLANEOUS, MISC  
[REDACTED] SPRING STREET, MIZ-  
MIZ-

GREENWOOD      SC

29646

GREENWOOD

SC      29646

| Chk-in # | Order | Exam  |                     |
|----------|-------|-------|---------------------|
| 1789812  | 0001  | 68871 | XR FEMUR RT         |
|          |       |       | Ord Diag: assaulted |

Right femur: Four views.

Findings: The contours of the right femur are preserved without evidence of acute fracture. The hip and knee joints appear to be anatomically aligned. The soft tissues of the thigh are unremarkable.

Impression: No acute fracture.

Read By- SAMUEL CAREY VENTURELLA M.D.  
Released By- SAMUEL CAREY VENTURELLA M.D.  
Transcriptionist- SAMUEL CAREY VENTURELLA M.D.  
Released Date Time- 07/03/14 0832

---

FINAL

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SELF REGIONAL HEALTHCARE  
Greenwood, S.C.

## DEPARTMENT OF RADIOLOGY

Patient Name: HOLLOWAY, JANICE D      Check-in Date: 07/03/14 0309  
Unit Number: A000147451      Location: DIS - ED

Account # 1418400010      BD: [REDACTED]      Age: 40Y      Sex: F

Ordering Physician      SHORT, JOHN PAUL      Admit Phys: MISCELLANEOUS, MISC

SHORT, JOHN PAUL  
[REDACTED] SPRING STMISCELLANEOUS, MISC  
[REDACTED] SPRING STREET, MIZ-  
MIZ-

GREENWOOD      SC      29646

GREENWOOD      SC      29646

| Chk-in # | Order | Exam                |
|----------|-------|---------------------|
| 1789811  | 0001  | 68885 XR FOREARM LT |
|          |       | Ord Diag: assaulted |

Left forearm: Two view

Findings: There is preservation of the bony contours of the radius and ulna without evidence of acute fracture. The wrist and elbow joints appear to be appropriately aligned within the constraints of this examination. The visualized soft tissues are unremarkable.

Impression: No acute fracture of the radius or ulna.

Read By- SAMUEL CAREY VENTURELLA M.D.  
Released By- SAMUEL CAREY VENTURELLA M.D.  
Transcriptionist- SAMUEL CAREY VENTURELLA M.D.  
Released Date Time- 07/03/14 0824

---

SELF REGIONAL HEALTHCARE  
Greenwood, S.C.

## DEPARTMENT OF RADIOLOGY

Patient Name: HOLLOWAY, JANICE D      Check-in Date: 07/03/14 0309  
Unit Number: A000147451      Location: DIS - ED

Account # 1418400010      BD: [REDACTED]      Age: 40Y      Sex: F

Ordering Physician: SHORT, JOHN PAUL      Admit Phys: MISCELLANEOUS, MISC

SHORT, JOHN PAUL  
[REDACTED] SPRING STMISCELLANEOUS, MISC  
[REDACTED] SPRING STREET, MIZ-  
MIZ-  
GREENWOOD SC 29646      GREENWOOD SC 29646Chk-in #      Order      Exam  
1789810      0001      68886      XR FOREARM RT  
Ord Diag: assaulted

Right forearm: Two views.

Findings: There is a comminuted fracture within the mid diaphysis of the ulna. There is one-quarter shaft ventral displacement of the distal ulna. There is no acute fracture of the radius. The elbow, proximal and distal radio-ulnar joints and wrist appear to be anatomically aligned within the constraints of this examination. There is diffuse soft tissue thickening/edema and/or hematoma within the forearm.

Impression: Comminuted fracture within the mid-diaphysis of the ulna.

Read By- SAMUEL CAREY VENTURELLA M.D.  
Released By- SAMUEL CAREY VENTURELLA M.D.  
Transcriptionist- SAMUEL CAREY VENTURELLA M.D.  
Released Date Time- 07/03/14 0828  
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SELF REGIONAL HEALTHCARE  
Greenwood, S.C.

## DEPARTMENT OF RADIOLOGY

Patient Name: HOLLOWAY, JANICE D      Check-in Date: 07/03/14 0309  
Unit Number: A000147451      Location: DIS - ED

Account # 1418400010      BD: [REDACTED]      Age: 40Y      Sex: F

Ordering Physician      SHORT, JOHN PAUL      Admit Phys: MISCELLANEOUS, MISC

SHORT, JOHN PAUL  
[REDACTED] SPRING ST

MISCELLANEOUS, MISC  
[REDACTED] SPRING STREET, MIZ-  
MIZ-

GREENWOOD      SC

29646

GREENWOOD

SC      29646

| Chk-in # | Order | Exam  |                     |
|----------|-------|-------|---------------------|
| 1789814  | 0001  | 68930 | XR LOWER LEG RT     |
|          |       |       | Ord Diag: assaulted |

Right lower leg: Two views.

Findings: There is preservation of the contours of the tibia and fibula without evidence of acute fracture. The knee and ankle joint appear to be appropriately aligned within the constraints of the examination. The soft tissues are unremarkable. Incidental note is made of a small posterior calcaneal spur.

Impression: No acute fracture.

Read By- SAMUEL CAREY VENTURELLA M.D.  
Released By- SAMUEL CAREY VENTURELLA M.D.  
Transcriptionist- SAMUEL CAREY VENTURELLA M.D.  
Released Date Time- 07/03/14 0832

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SELF REGIONAL HEALTHCARE  
JOHN M. SUNDERMANN, MD, LABORATORY MEDICAL DIRECTOR  
1325 SPRING STREET, GREENWOOD, SOUTH CAROLINA 29646

NAME : HOLLOWAY, JANICE D      AGE : 40Y      SEX : F  
MR# : 000147451      LOC: ECD  
HIST# : 1418400010      DR : MISCELLANEOUS, MISC      DOB :      CODE : 199

\*\*\*\*\* HEMOGRAM \*\*\*\*\*  
TEST: WBC      HGB      HCT      MCV      MCHC      RDW      PLT      MPV  
UNITS: K/UL      G/DL      %      FL      G/DL      %      K/UL      FL  
REF. RANGE: 4.0-10.5      12.0-16.0      37.0-47.0      80-100      32.0-36.0      11.5-14.5      150-400      7.4-10.4

07/03/14  
+ 0239      22.8 \*      4.58      13.9      41.6      90.8      30.4      33.5      13.3      301      6.9 \*  
STAT      STAT      STAT      STAT      STAT      STAT      STAT      STAT      STAT      STAT

\*\*\*\*\* AUTO DIFFERENTIAL \*\*\*\*\*  
TEST: LYMPH      MONO      GRAN      EOS      BASO      ABSOLUTE LYMPH      ABSOLUTE MONO      ABSOLUTE GRAN      ABSOLUTE EOS      ABSOLUTE BASO  
UNITS: %      %      %      %      %       $\times 10^3$        $\times 10^3$        $\times 10^3$        $\times 10^3$        $\times 10^3$   
REF. RANGE:                               0.6-3.6      0.1-0.7      1.4-6.8      0.0-0.7      0-2

07/03/14  
+ 0239      9.2      4.8      85.6      0.1      0.3      2.1      1.1 \*      19.5 \*      0.0      0.1  
STAT      STAT      STAT      STAT      STAT      STAT      STAT      STAT      STAT      STAT

\*\*\*\*\* CHEMISTRY PANEL \*\*\*\*\*  
TEST: CALCIUM      TOTAL PROTEIN      ALBUMIN      GLOBULIN      TOTAL BILIRUBIN      GLUCOSE      BUN      CREATININE      SODIUM      POTASSIUM  
UNITS: MG/DL      G/DL      G/DL      G/DL      MG/DL      MG/DL      MG/DL      MG/DL      MMOL/L      MMOL/L  
REF. RANGE: 8.5-10.1      6.4-8.2      3.4-5.0      1.5-4.0      0.2-1.0      74-106      7-18      0.6-1.3      136-145      3.5-5.1

07/03/14  
+ 0239      8.6      7.5      3.6      3.9      0.2      166 \*      9      1.01      141      3.2 \*  
STAT      STAT      STAT      STAT      STAT      STAT      STAT      STAT      STAT      STAT

\*\*\*\*\* CHEMISTRY PANEL \*\*\*\*\*  
TEST: CHLORIDE      CO2      ANION GAP      CALCULATED OSMOLALITY      EGFR      EGFR      EGFR      ALKALINE PHOSPHATASE      AST  
UNITS: MMOL/L      MMOL/L                ML/MIN/1.73M<sup>2</sup>      ML/MIN/1.73M<sup>2</sup>      ML/MIN/1.73M<sup>2</sup>      U/L      U/L  
REF. RANGE: 98-107      21-32                >60      >60      >60      50-136      7-40

07/03/14  
+ 0239      108 \*      22      11.0      284      >60      >60      EGFR2      92      12  
STAT      STAT      STAT      STAT      STAT      STAT      STAT      STAT      STAT      STAT

---FOOTNOTES---

EGFR2 Estimated GFRs are not intended for use in renal dosing of medication or radiocontrast dye. EGFRs have not been validated for use in patients under 18 or over 70 years of age, or in pregnant women.  
EGFR3 EGFRs are not validated for use in patients with serious comorbid conditions, or in patients with extremes of body size or nutritional status. For additional information and for stratification of Kidney Disease, see the HKDEP website.

JANICE D HOLLOWAY  
OP/OS NEW ACTIVITY ONLY

CONTINUED

MR# : 000147451  
LOC: ECD

07/04/2014

01:00  
PAGE: 1

Patient: HOLLOWAY, JANICE D

MRN: XXXXX7451

Encounter: 1418400010

Page 1 of 6

SELF REGIONAL HEALTHCARE  
JOHN M SUNDERRMAN, MD, LABORATORY MEDICAL DIRECTOR  
1325 SPRING STREET, GREENWOOD, SOUTH CAROLINA 29646

NAME : HOLLOWAY, JANICE D      AGE : 40Y      SEX : F  
MR# : 000147451      LOC: ECD  
HIST# : 1418400010      DR : MISCELLANEOUS, MISC      DOB :      CODE: 199

TEST : ALT  
UNITS : U/L  
REF. RANGE : 5-50  
-----

07/03/14  
+ 0239      21  
STAT

TEST : SERUM  
ALCOHOL  
MEDICAL  
UNITS : MG/DL  
REF. RANGE : 0  
-----

07/03/14  
+ 0239      NOT  
HCC  
MED  
STAT

TEST : AMPHETAMINES BARBITURATES BENZO- COCAINE OPIATES DCP THC NOTE  
DIASEPINE  
UNITS :  
REF. RANGE : NEG NEG NEG NEG NEG NEG NEG

07/03/14  
+ 0234      NEGATIVE      NEGATIVE      NEGATIVE      POSITIVE \*      NEGATIVE      NEGATIVE      NEGATIVE      (a)  
STAT      STAT      STAT      NOT CONFIRMED      STAT      STAT      STAT      (b)  
STAT      STAT      STAT      STAT      STAT      STAT      STAT      (c)

---FOOTNOTES---

MED RESULT MUST NOT BE USED FOR NON MEDICAL PURPOSES (EMPLOYMENT OR LEGAL TESTING)  
NCC NO CHAIN OF CUSTODY  
NOT NONE DETECTED-LIMIT OF DETECTION 10 MG/DL  
(a) NO CHAIN OF CUSTODY  
(b) RESULT MUST NOT BE USED FOR NON-MEDICAL PURPOSES (EMPLOYMENT OR LEGAL TESTING)  
(c) Certain drugs and their metabolites may cause cross-reactivity. Confirmation testing is recommended for presumptive positive immunoassay results, if clinically indicated. STAT

JANICE D HOLLOWAY  
OR/OS NEW ACTIVITY ONLY

CONTINUED

MR# : 000147451  
LOC : ECD

07/04/2014      01:00  
PAGE : 2

Patient: HOLLOWAY, JANICE D

MRN: XXXXX7451

Encounter: 1418400010

Page 2 of 6

SELF REGIONAL HEALTHCARE  
JOHN M SUNDERRMAN, MD, LABORATORY MEDICAL DIRECTOR  
1325 SPRING STREET, GREENWOOD, SOUTH CAROLINA 29645

NAME : HOLLOWAY, JANICE D      AGE : 40Y      SEX : F  
MR# : 000147451      LOC: ECD  
HIST# : 1418400010      DR : MISCELLANEOUS, MISC      DOB :      CODE: 199

MEDICAL URINE DRUG OF ABUSE SCREEN

TEST: CUTOFF  
UNITS:  
REF. RANGE:

07/03/14  
+ 0234

(d)  
(e)  
(f)  
(g)  
(h)  
(i)  
(j)  
(k)

| TEST:       | TYPE | COLOR  | CHARACTER | GLUCOSE  | BILE     | KETONE   | SPECIFIC GRAVITY |
|-------------|------|--------|-----------|----------|----------|----------|------------------|
| UNITS:      |      |        |           |          |          |          |                  |
| REF. RANGE: |      |        | CLER      | NEG      | NEG      | NEG      | 1.005-1.030      |
| 07/03/14    | VOID | YELLOW | HAZY *    | NEGATIVE | NEGATIVE | NEGATIVE | 1.011            |
| + 0234      | STAT | STAT   | STAT      | STAT     | STAT     | STAT     | STAT             |

---FOOTNOTES---

(d) DRUG SCREEN CUT-OFF VALUES  
(e) AMPHETAMINES 1000 ng/mL  
(f) BARBITURATES 200 ng/mL  
(g) BENZODIAZEPINES 200 ng/mL  
(h) COCAINE 300 ng/mL  
(i) OPIATES 300 ng/mL  
(j) PCP 25 ng/mL  
(k) MARIJUANA 50 ng/mL STAT

JANICE D HOLLOWAY  
07/03 NEW ACTIVITY ONLY

CONTINUED

MR# 000147451  
LOC: ECD

07/04/2014 01:00  
PAGE: 3

Patient: HOLLOWAY, JANICE D

MRN: XXXXX7451

Encounter: 1418400010

Page 3 of 6

SELF REGIONAL HEALTHCARE  
JOHN M. SUNDERMANN, MD, LABORATORY MEDICAL DIRECTOR  
1325 SPRING STREET, GREENWOOD, SOUTH CAROLINA 29646

NAME : HOLLOWAY, JANICE D      AGE : 40Y      SEX : F  
MR# : 000147451      LOC: ECD  
HIST# : 1418400010      DR : MISCELLANEOUS, MISC      DOB :      CODE: 199

| TEST:       | HEMOGLOBIN | PH      | PROTEIN | UROBIL-<br>INOGEN | NITRITE | LEUKOCYTE |
|-------------|------------|---------|---------|-------------------|---------|-----------|
| UNITS:      |            |         |         |                   |         |           |
| REF. RANGE: | NEG        | 5.0-8.5 | NEG     | NEG               | NEG     | NEG       |

07/03/14  
+ 0234      SMALL \*      5.5      1+ \*      NEGATIVE      POSITIVE \*      LARGE \*  
                 STAT      STAT      STAT      STAT      STAT      STAT

| TEST:       | WBC  | RBC  | SQUAMOUS<br>EPITHS | MUCOUS | WBC<br>CLUMPS |
|-------------|------|------|--------------------|--------|---------------|
| UNITS:      | /HPF | /HPF | /HPF               |        | /HPF          |
| REF. RANGE: | STF  | STF  | STF                |        | NEG           |

07/03/14  
+ 0234      50-100 \*      0-5      5-10 \*      TRACE      SMALL \*  
                 STAT      STAT      STAT      STAT      STAT

\*\*\*\*\* URINE CULTURE REFLEX \*\*\*\*\*

TEST:      CULTURE REFLEX

UNITS:

REF. RANGE:

07/03/14  
+ 0234      CULTURE ORDERED, SEE SEPARATE ACCESSION NUMBER

\*\*\*\*\* URINE CULTURES \*\*\*\*\*

07/03/2014      VOID URINE CULT      PRELIMINARY  
collected      ACC. NO.: H28375  
+ 0234      SPECIMEN DESCRIPTION:      VOIDED URINE STAT  
                 SPECIAL REQUESTS:      NONE STAT  
                 CULTURE:      1. PEND

END OF REPORT

JANICE D. HOLLOWAY  
OP/OS-REM ACTIVITY ONLY

MR# : 000147451  
LOC: ECD

07/04/2014      01:00  
PAGE: 4

SELF REGIONAL HEALTHCARE  
JOHN M. SUNDERMANN, MD, LABORATORY MEDICAL DIRECTOR  
1325 SPRING STREET, GREENWOOD, SOUTH CAROLINA 29646

NAME : HOLLOWAY, JANICE D      AGE : 40Y      SEX : F  
MR# : 000147451      LOC: ECD  
NIST# : 1418400010      DR : MISCELLANEOUS, MISC      DOB :      CODE: 199

\*\*\*\*\* URINE CULTURES \*\*\*\*\*

07/03/2014 VOID URINE CULT      PRELIMINARY  
collected ACC. NO.: H28375  
\* 0234 SPECIMEN DESCRIPTION: VOIDED URINE STAT  
SPECIAL REQUESTS: NONE STAT  
CULTURE: 1. CC >100,000 COL/ML GRAM NEGATIVE RODS STAT

JANICE D HOLLOWAY  
OP/OS NEW ACTIVITY ONLY

END OF REPORT

MR# : 000147451  
LOC: ECD

07/05/2014 01:00  
PAGE: 1

Patient: HOLLOWAY, JANICE D

MRN: XXXXX7451

Encounter: 1418400010

Page 5 of 6

SELF REGIONAL HEALTHCARE  
JOHN M. SUNDERMANN, MD, LABORATORY MEDICAL DIRECTOR  
1325 SPRING STREET, GREENWOOD, SOUTH CAROLINA 29646

NAME : HOLLOWAY, JANICE D AGE : 40Y SEX : F  
MR#: 000147451 LOC: ECD  
HIST#: 1418400010 DR : MISCELLANEOUS, MISC DOB : CODE: 199

\*\*\*\*\* URINE CULTURES \*\*\*\*\*  
07/03/2014 VOID URINE CULT  
collected ACC. NO.: W28375 FINAL 07/05/2014  
+ 0234 SPECIMEN DESCRIPTION: VOIDED URINE STAT  
SPECIAL REQUESTS: NONE STAT  
CULTURE: 1. CC >100,000 COL/ML ESCHERICHIA COLI STAT

SUSCEPTIBILITY (VTMIC)

1. CC >100,000 COL/ML ESCHERICHIA COLI STAT

| DRUG           | COST<br>PER IV DOSE | MIC<br>UG/ML | INTERPRETATION<br>--BLOOD-- | --URINE-- |
|----------------|---------------------|--------------|-----------------------------|-----------|
| AMPICILLIN     | \$ 1                | >32          | R                           |           |
| UNASYN         | \$ 13               | 16/8         | I                           |           |
| ANCEF          | \$ 2                | <4           | SS                          |           |
| ROCEPHIN       | \$ 70               | <1           | SS                          |           |
| CIPROFLOXACIN  | PO \$6              | <=0.25       | SS                          |           |
| GENTAMICIN     | \$ 1                | <1           | SS                          |           |
| IMIPENEM       | \$ 26               | <=0.25       | SS                          |           |
| TOBRAMYCIN     | \$ 8                | <1           | SS                          |           |
| TRIMETH/SULFA  | \$ 8                | >=16/304     | R                           |           |
| FORTAZ         |                     | <1           | SS                          |           |
| LEVOPLOXACIN   |                     | <=0.12       | SS                          |           |
| NITROFURANTOIN | PO \$ 1             | <16          | SS                          |           |
| ESBL           |                     | NEG          |                             |           |
| ERTAPENEM      |                     | <=0.5        | SS                          |           |
| CEFEPIME       |                     | <1           | SS                          |           |
| ZOSYN          |                     | <=4/2        | SS                          |           |
| AMIKACIN       | \$ 33               | <2           | SS                          |           |

JANICE D HOLLOWAY  
OP/OS NEW ACTIVITY ONLY

END OF REPORT

MR#: 000147451  
LOC: ECD

07/06/2014

01:00  
PAGE: 1

Patient: HOLLOWAY, JANICE D

MRN: XXXXX7451

Encounter: 1418400010

Page 6 of 6

Date: 07/04/14  
Time: 0826

SELF REGIONAL HEALTHCARE  
Abstract Summary Form

Page : 1  
Report: EPABFA

Patient: HOLLOWAY, JANICE D Address: [REDACTED]  
DOB: [REDACTED] Fin Class: BLUE CROSS GROUP GREENWOOD  
x: FEMALE Ins. Plan: BLUE CROSS SC, 296464524  
Guarantor: SELF Phone #: [REDACTED]

Adm Date: 07/03/14 Adm Source: NON HEALTH FACILITY Acct. #: 1418400010  
Adm Time: 02:15 Adm Type: EMERGENCY Unit. #: 000147451  
Dis Date: 07/03/14 Trans From: Pt. Type: EMERGENCY  
Dis Time: 06:37 Service: EMERGENCY SERVICES Trans To:  
LOS: 1 Dis Status: HOME - OP Coder: KAM  
Admitting DR: MISCELLANEOUS, MISC Referring DR: MISCELLANEOUS, MIS  
Attending DR: MISCELLANEOUS, MISC Discharge DR: MISCELLANEOUS, MIS  
ER Physician: MISCELLANEOUS, MISC Primary DR: MISCELLANEOUS, MIS

ICD-9 DRG v31.0: 563 FX, SPRN, STRN & DISL EXCEPT FEMUR, HIP, PELVIS & THIGH W/O M  
Admit Diagnosis: 813.80 FX FOREARM NOS-CLOSED  
Principal Diagnosis: 813.80 FX FOREARM NOS-CLOSED POA:  
Secondary Diagnoses/POA:  
E968.8 ASSAULT NEC/ 300.00 ANXIETY STATE NOS/  
793.11 SOLITARY PULMONRY NODULE/ V58.65 LONG-TERM USE STEROIDS/  
922.2 CONTUSION ABDOMINAL WALL/

Principal Procedure: Date: Primary Surgeon:

Secondary Procedures:

HCPCS: Modifiers: Date: Surgeon: Pre APC:

Consultants: Date: Specialty:

End of Report

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**WITNESSES**

Jeremy Adams  
Greenwood Police Department

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**WARRANT NUMBER**

**DIRECT INDICTMENT**

2014D2400100252

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*True Bill*

*Wifera Dye*

Foreman of the Grand Jury

Date: *12.8.14*

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**VERDICT**

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Foreman

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**THE STATE OF SOUTH CAROLINA**

COUNTY OF GREENWOOD

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**COURT OF GENERAL SESSIONS**

December Term, 2014

Indictment # 14GS24- *1903*

---

**THE STATE**

vs.

Willie Thomas Gray

---

**INDICTMENT FOR**

**ATTEMPTED MURDER**

§ 16-03-0029

CDR: 3410

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SC Court of Appeals

THE STATE OF SOUTH CAROLINA

INDICTMENT FOR

COUNTY OF GREENWOOD

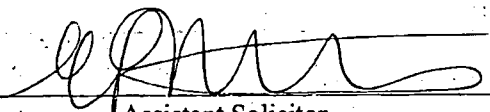
ATTEMPTED MURDER

§ 16-03-0029

At a Court of General Sessions, convened on the 8th day of December, 2014, the Grand Jurors of Greenwood County present upon their oath:

That Willie Thomas Gray, on or about July 3, 2014, in Greenwood County, willfully and unlawfully, with the intent to kill and with malice aforethought, attempted to kill Janice Diane Holloway, in violation of Section 16-3-29 of the South Carolina Code of Laws, 1976, as amended.

Against the peace and dignity of the State, and contrary to the statute in such cases made and provided.

  
Assistant Solicitor

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252

STATE OF SOUTH CAROLINA

COUNTY OF Greenwood  
STATE VS.  
Willie Thomas Gray  
AKA: \_\_\_\_\_  
Race: \_\_\_\_\_ Sex: M Age: 55  
DOB: \_\_\_\_\_ SS#: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: Greenwood, SC  
DL#: \_\_\_\_\_ SID#: \_\_\_\_\_

\*CDL Yes ☐ No ☐ CMV Yes ☐ No ☐ Hazmat Yes ☐ No ☐  
In disposition of the said indictment comes now the Defendant who was  
TO: Assault /Assault & Battery of a High and Aggravated Nature

IN THE COURT OF GENERAL SESSIONS

INDICTMENT/CASE#: 14GS24-1903  
A/W#: 2014D2400100252  
Date of Offense: 7/3/2014  
S.C. Code § : 16-03-0029  
CDR Code #: 3410

SENTENCE SHEET

☒ CONVICTED OF or ☐ PLEADS

in violation of § 16-03-0600 of the S.C. Code of Laws, bearing CDR Code # 3411  
☐ NON-VIOLENT ☒ VIOLENT ☒ SERIOUS ☐ MOST SERIOUS ☐ Mandatory GPS(CSC w/minor 1st or Lewd Act) ☐ §17-25-45

The charge is: ☐ As Indicted, ☒ Lesser Included Offense, ☐ Defendant Waives Presentment to Grand Jury. (defendant's initials)  
The plea is: ☐ Without Negotiations or Recommendation, ☐ Negotiated Sentence, ☐ Recommendation by the State.

ATTEST: [Signature] 7/1/82 [Signature] 70306  
White, Elizabeth SC Bar# Defendant Attorney for Defendant PD SC Bar#

WHEREFORE, the Defendant is committed to the ☒ State Department of Corrections, ☐ County Detention Center,  
for a determinate term of 15 days/months/years or ☐ under the Youthful Offender Act not to exceed \_\_\_\_\_ years  
and/or to pay a fine of \$ \_\_\_\_\_; provided that upon the service of \_\_\_\_\_ days/months/years and/or payment  
of \$ \_\_\_\_\_; plus costs and assessments as applicable\*; the balance is suspended with probation for \_\_\_\_\_

months/years and subject to South Carolina Department of Probation, Parole and Pardon Services standard conditions of  
probation, which are incorporated by reference.

☐ CONCURRENT or ☐ CONSECUTIVE to sentence on:  
☒ The Defendant is to be given credit for time served pursuant to S.C. Code § 24-13-40 to be calculated and applied  
by the State Department of Corrections. Credit 298 Days

☐ The Defendant is to be placed on the Central Registry of Child Abuse and Neglect pursuant to S.C. Code § 16-25-20 (Domestic  
Violence) to ship, transport, possess, or receive a firearm or ammunition.

SPECIAL CONDITIONS:

☐ RESTITUTION: ☐ Deferred ☐ Def. Waives Hearing ☐ Ordered  
Total: \$ \_\_\_\_\_ plus 20% fee: \$ \_\_\_\_\_  
Payment Terms: \_\_\_\_\_  
☐ Set by SCDPPPS \_\_\_\_\_

Recipient: \_\_\_\_\_

\*Fine: \_\_\_\_\_ \$  
§ 14-1-206 (Assessments 107.5 %) \_\_\_\_\_ \$  
§ 14-1-211(A)(1) (Conv. Surcharge) \$100 \$ 100.00  
§ 14-1-211(A)(2) (DUI Surcharge) \$100 \$  
§ 56-5-2995 (DUI Assessment) \$12 \$  
§ 56-1-286 (DUI Breath Test) \$25 \$  
Proviso 61.6 (Public Def/Probation) \$500 \$  
§ 14-1-212 (Law Enforce. Funding) \$25 \$ 25.00  
§ 14-1-213 (Drug Court Surcharge) \$150 \$  
§ 50-21-114 (BUI Breath Test Fee) \$50 \$  
§ 56-3-2942(J) (Vehicle Assessment) \$40/ea \$  
3% to County (if paid in installments) \$ 375

TOTAL \$ 128.75

PTUP \_\_\_\_\_ days/hours Public Service Employment  
Obtain GED ☐  
Attend Voc. Rehab. or Job Corp. \_\_\_\_\_  
May serve W/E beginning \_\_\_\_\_  
Substance Abuse Counseling ☐  
Random Drug/Alcohol testing ☐  
Fine may be pd. in equal, consecutive weekly/monthly  
pmts. of \$ \_\_\_\_\_ beginning \_\_\_\_\_  
\$ \_\_\_\_\_ paid to Public Defender Fund  
Other: \_\_\_\_\_

TESTA TRUE DOMESTIC  
CHASTITY COPELAND  
CCCP AND GS  
GREENWOOD COUNTY  
S.C.

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☐ Appointed PD or appointed other counsel  
Proviso 61.6 requires \$500 be paid to Clerk  
during probation and shall be collected before  
any other fees.

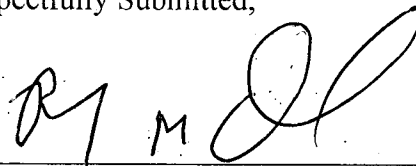
Presiding Judge [Signature]  
Judge Code: 2167  
Sentence Date: 1/19/17

Clerk of Court/ Deputy Clerk Kayla Inger  
Court Reporter: Jay Huiston  
SCCA/217 (07/2016)

## CERTIFICATE OF COUNSEL FOR APPELLANT

Counsel for appellant certifies that this Record on Appeal contains all material proposed to be included by any of the parties and not any other material and that this Record on Appeal complies to the best of my ability with the April 15, 2014 order from the South Carolina Supreme Court entitled "Revised Order Concerning Personal Identifying Information and Other Sensitive Information in Appellate Court Filings."

Respectfully Submitted,



Robert M. Dudek  
Chief Appellate Defender

South Carolina Commission on Indigent Defense  
Division of Appellate Defense  
PO Box 11589  
Columbia, S.C. 29211-1589

ATTORNEY FOR APPELLANT

This 21st day of June, 2018.

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SC Court of Appeals