

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

ROBERT M. DUDEK
Chief Appellate Defender

ALAN WILSON
Attorney General

South Carolina Commission on Indigent
Defense
Division of Appellate Defense
PO Box 11589
Columbia, SC 29211-1589
(803) 734-1330

MARK FARTHING
Assistant Attorney General

Rembert Dennis Building
1000 Assembly Street, Room 519
Columbia, SC 29201

ATTORNEY FOR APPELLANT

DAVID M. STUMBO
Solicitor, Eighth Judicial Circuit

Post Office Box 516
Greenwood, SC 29648
(864) 942-8800

ATTORNEYS FOR RESPONDENT

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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:

Elizabeth White, Senior Assistant Solicitor
Carson Penny, Assistant Solicitor
Attorneys for the State

Janna Nelson, Public Defender
Elizabeth Able, Assistant Public Defender
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

PATIENT INFO	ACCOUNT NUMBER 14184-00010		ROOM NO. -	P/C 60	ADMISSION DATE/TIME 07/03/14 0215		ADM. BY JMP		PATIENT TYPE QED		JMT #/APT # 000147451		
	PATIENT NAME AND ADDRESS HOLLOWAY, JANICE D [REDACTED] [REDACTED] SC 29646-4524				BIRTH DATE [REDACTED]	AGE 40Y	RACE 1	SEX F	M.S. X	ARRIVED BY			
					COUNTY GREENWOOD	FATHER'S NAME				MOTHER'S NAME			
	PHONE NO. [REDACTED]		SOCIAL SECURITY NUMBER [REDACTED]			PREV. ADMIT NAME HOLLOWAY, JANICE D							
	MEDICINAL DIAGNOSIS ECC* ASSAULTED						ADMITTING PHYSICIAN / ATTENDING PHYSICIAN MISCELLANEOUS, MISC						
	PRINCIPAL DIAGNOSIS: After study, Condition Chiefly Responsible for Requiring Admission										CODE NUMBER	PHYS. NO.	
MED													
	SECONDARY DIAGNOSIS: All conditions evaluated, tested, treated, or increasing LOS												
COMPLICATIONS													
OPERATIONS/PROCEDURES													

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 14184-00010		PATIENT NAME HOLLOWAY, JANICE D		ADMISSION DATE/TIME 07/03/14 0215		UNIT # / MPI # 000147451	
GUARANTOR	GUARANTOR NAME and ADDRESS HOLLOWAY, JANICE D [REDACTED] [REDACTED] SC 29646-4524			RELATIONSHIP SELF		GUARANTOR EMPLOYER NAME and ADDRESS CAROLINA PRIDE 1 PACKER ST. GREENWOOD SC 29646	
	SOCIAL SECURITY NUMBER [REDACTED]		PHONE [REDACTED]		WORK PHONE (864)229-5611		
RELATIVE	RELATIVE #1 NAME and ADDRESS GRAY, WILLIE [REDACTED] [REDACTED] SC 29646			RELATIVE #1 NAME and ADDRESS			
	RELATIONSHIP FRIEND		PHONE [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

Self Regional Healthcare
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Final

Emergency Department Chart

Patient Name: HOLLOWAY, JANICE D.		MRN: 000147451
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

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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

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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	

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)

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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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		

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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Final

Emergency Department Chart

Patient Name: HOLLOWAY, JANICE D.		MRN: 000147451
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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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)

Self Regional Healthcare
1325 Spring Street
Greenwood, SC 29546
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

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

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]		[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)

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

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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

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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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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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
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[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

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] [REDACTED] 29646-4524	Primary MD: Patient has no PCP. Attending MD: JOHN SHORT DO
Phone: [REDACTED]-6485 [REDACTED]-4414 [REDACTED]-5340 [REDACTED]-5611 [REDACTED]-6890	Arrival Date: 07/03/2014 02:15 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 Ord Diag: assaulted
1789821	0009	70243	CT SPINE CERVICAL WO CONT ONLY Ord Diag: assaulted
1789822	0009	70212	CT CHEST W CONTRAST Ord Diag: assaulted
1789823	0009	70198	CT ABDOMEN & PELVIS W CONTRAST 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

GREENWOOD SC

29646

MISCELLANEOUS, MISC
[REDACTED] SPRING STREET, MIZ-
MIZ-

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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

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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

MISCELLANEOUS, MISC
[REDACTED] SPRING STREET, MIZ-
MIZ-

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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

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MISCELLANEOUS, MISC
[REDACTED] SPRING STREET, MIZ-
MIZ-

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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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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-

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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-

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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.

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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

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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

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Page 1

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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

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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

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

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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

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
MRN : 000147451 LOC: ECD
HISTN: 1418400010 DR : MISCELLANEOUS, MISC DOB : CODE: 199

***** HEMOGRAM *****
TEST: WBC HGB HCT MCV MCH RDW PLT MPV
UNITS: K/UL G/DL % FL G/DL % K/UL FL
REF. RANGE: 4.0-10.5 13.5-15.0 33.3-44.9 80-96 26.5-33 11.5-15.3 150-400 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/1.73M² ML/MIN/1.73M² ML/MIN/1.73M² 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

MRN: 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 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

----- CHEMISTRY PANEL -----

TEST: ALT
UNITS: U/L
REF. RANGE: 5-50

07/03/14
+ 0239 21
STAT

----- CHEMISTRY MISCELLANEOUS -----

TEST: SERUM
ALCOHOL
MEDICAL
UNITS: MG/DL
REF. RANGE: 0

07/03/14
+ 0239 NOT
HCC
MED
STAT

----- MEDICAL URINE DRUG OF ABUSE SCREEN -----

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- 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 EPITHS	MUCOUS	WBC 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-BEM 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 PER IV DOSE	MIC UG/ML	INTERPRETATION --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

WITNESSES

Jeremy Adams
Greenwood Police Department

WARRANT NUMBER

DIRECT INDICTMENT

2014D2400100252

True Bill

Wifera Dye

Foreman of the Grand Jury

Date: *12.8.14*

VERDICT

Foreman

THE STATE OF SOUTH CAROLINA

COUNTY OF GREENWOOD

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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JAN 30 2017

SC Court of Appeals

THE STATE OF SOUTH CAROLINA

INDICTMENT FOR

COUNTY OF GREENWOOD

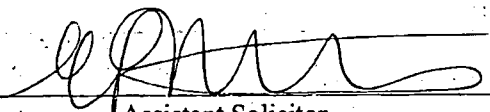
ATTEMPTED MURDER

§ 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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SC Court of Appeals

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	\$ <u>100.00</u>
§ 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	\$ <u>25.00</u>
§ 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)		\$ <u>375</u>

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 VIOLENCE
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.

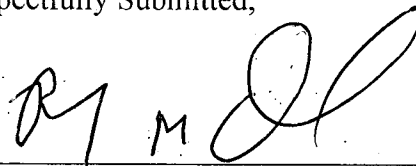
Presiding Judge [Signature]
Judge Code: 2167
Sentence Date: 1/19/17

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