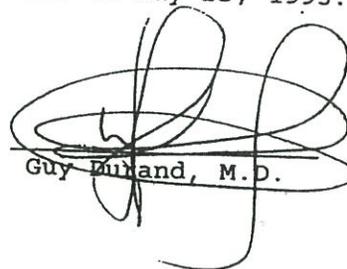


I, Guy Durand, M.D., affirmatively state that:

- 1) I am a physician duly licensed by the State of Florida with an established practice in the City of Plantation, Florida.
- 2) I have been the defendant Ernesto Behrens' personal physician since July 1988.
- 3) On May 08, 1995 said Mr. Behrens underwent excision of two growths from his torso, one from the front and another one from the back. Photocopy of the pathology report is hereto attached.
- 4) The involvement of both the front and the back and the extent of the dissection required the prescription of the painkiller Darvocet N-100 in the quantity of 10 as photocopy of the original script shows.
- 5) In the post-operative period, from May 08, 1995 to May 15, 1995, Mr. Behrens has had a wound check and dressing change every other day, as it is the routine in my practice.
- 6) Two weeks after the surgery there was also a follow-up visit when no abnormality was observed.
- 7) During that post-operative period, Mr. Behrens' whole torso was routinely visualized.
- 8) During those visits (wound checks and dressing changes) there was no disruption of the sutures or any other sign or wound abnormality that would indicate physical stress or trauma that could have resulted from exertion, violent physical contacts or struggle. That would have been against my postoperative instructions.
- 9) In my professional opinion anyone of such circumstances should and would have undoubtedly adversely affected the incision sites to the point of showing signs of trauma or dehiscence that would be manifest to me.
- 10) In conclusion Mr. Behrens was not likely to have been involved in any strenuous activity during the period extending from May 08, 1995 to May 25, 1995.

Affiant further sayeth not.

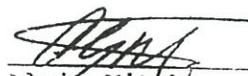


Guy Durand, M.D.

Sworn this 31st Day of March, 1999

Before me, personally appeared, Dr. Guy Durand whose identity is known to me by his State of Florida driving license No. D653-280-40-098-0 and who, under oath, acknowledges that his signature appears above.

Sworn to and subscribed before me this 31st day of March, 1999



Alvin Mitchener
Notary Public

My Commission expires:



ALVIN C. MITCHENER
COMMISSION # CC 488607
EXPIRES JUL 17, 1999
BONDED THRU
ATLANTIC SURETY CO., INC.

FINAL REPORT

Date Received: 05/09/95
Date Reported: 05/11/95

Doctor:

GUY DURAND, M.D.
8251 WEST BROWARD BLVD.
PLANTATION, FL 33324

Unit#:

Patient: BEHRENS, ERNESTO

Age: 30

CLINICAL HISTORY/SPECIMEN LOCATION:

Inclusion cysts back.

GROSS DESCRIPTION:

Specimen designated back. Submitted are two white grey tan to brown irregularly shaped soft cystic appearing, tissue fragments that measure up to 1.5 cm. Representative sections submitted. bt/em

DIAGNOSIS:

Back, biopsy:
INFUNDIBULAR CYST, BENIGN.

This is to certify that this document is a true copy of the original



NOTARY PUBLIC
STATE OF FLORIDA
ALVIN C. MITCHENER
COMMISSION # CC 468607
EXPIRES JUL 17, 1999
BONDED THRU
ATLANTIC SURETY CO., INC.



Ramon E. Gallego, M.D.

OFFICE VISIT BY APPOINTMENT

NAME Const. Bekrens

ADDRESS _____ DATE 05/03/90

R. Darvocet 100
T 94-60 Jan
+ 10

Indicate Drug Expiration Date on Label

Label

Refill _____ times PRN NR

To insure brand name dispensing, prescriber must write "Medically Necessary" on the prescription. M.D.

08/27/89

84704700210

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ALVIN C. MITCHENER
COMMISSION # CC 488607
EXPIRES JUL 17, 1999
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ATLANTIC SURETY CO., INC.

DATE / PROBLEMS
(Number and Brief Description)

FINDINGS (S = Subjective; O = Objective)

TESTS ORDERED and/or PLANNED

8/28/51

Pt in bed for removal lump left
post a posterior lobe

Procedure: (pt in supine position)
The left paravertebral areas prepped
& draped in sterile & sterile
drapes. A 3.5 cm incision was
made following skin crease over
an area corresponding to the
X or XI ribs in the left upper back.
Dissection was carried down thru
the subcutaneous in blunt
fashion by spreading &
hooking the subcutaneous.

500 mg
1000 mg
1000 mg

The peri capsular tissue was
grasped & two mosquito clamps
and incised. That allowed
identification of a pink gray
& irregularly shaped nodules
The capsule was grasped &
a baby roller with sharp meso
distributed the cyst walls freed
from surrounding tissue and
delivered thru incision and
excised "in toto"

Subsequent x/o or category 2 is
closed & Steri-Strips a sterile dressing
applied

It was noted the two are essentially
epigastric prepped & draped in similar
fashion. Dissection & closure were
identical. A 1 cm x 1 cm cyst was re-
moved for epifascium in an area
1.5 cm from umbilicus slightly left of
midline. Pt to be a lot of post op
well. Blood loss was insignificant.
At discharge 8-28 pm 10

Wound in 2 days. Hand to keep wound
dry and clean

05/10/95

S: in complaint. TBS lin used
~~to show~~. G/A not seen
to show

O: Wound clean & dry - dact.

A: ST 2 days removal inclusion cysts

P: Encouraged to be patient
bulky dressing removed
wound applied & cleaned
& dressed. Will see again
on Friday



05/12/95

S = Patient good. No complaints

O = Wound clean & dry - dact
change

A: ST 4 days removal cysts
from back & epidermal

P: Wound cleaned & boladine
& JSD applied - Will have
to change dressing on his own over
weekend. Pt given cover for
per change. Was advised
to change dressing on and to
change bandage if shows
Will remove stitches Monday



05/11/95

Wound clean & dry. Skin rubia
removed - Steri-strip applied
Elevision spray. Pt advised
to be clean for 10 on after
RTO in 2 wks



TYPEWRITTEN TRANSCRIPTION FROM EXCERPTS OF MR. ERNESTO BEHRENS' MEDICAL RECORD PERTAINING TO THE 05/08/95 EXCISION BIOPSY OF INCLUSION CYSTS FROM HIS TORSO (05/08 to 05/15/95). (Done for the sake of legibility).

Behrens, Ernesto

05/08/95:

"Pt is here for removal lumps left post and anterior torso.

Procedure: C ("*cum*" = *with*) Pt. in supine position the left para-vertebral area was prepped and draped c (*with*) Betadine and sterile drapes. A 3.5 cm incision was made following a skin crease over an area corresponding to the X or XI rib in the left upper back. Dissection was carried down thru the subcutaneous in blunt fashion by spreading c (*with*) a baby Metzenbaum.

The peri-capsular tissue was grasped c (*with*) two mosquito clamps and incised. That allowed identification of a pinkish gray 2 cm irregularly shaped nodule.

The capsule was grasped c (*with*) a baby Allis. C (*with*) sharp scissors dissection the cyst freed from surrounding tissue and delivered thru incision and excised "in toto".

Sub/q (subcutaneous) closed c (*with*) 4/0 chr (chromic) catgut. Skin closure c (*with*) 5/0 Nylon & sterile dressing applied.

Pt. was asked to turn over and the epigastrium prepped & draped in similar fashion. Dissection and closure were identical. A 1cm plus cyst was removed from epigastrium in an area 15 cm above the umbilicus slightly to left of midline. Pt. tolerated procedures well. Blood loss was insignificant.

Rx. Darvocet 1 (*one*) q (*every*) 4-6° (° = *hours*) prn (*as needed*) # 10.

Will see in two days. Advised to keep wound dry and clean".

(Writing in right-hand "TESTS ORDERED and/or PLANED" column reads: "*biopsy pathology cysts x 2*")

(SIGNATURE)

05/10/95:

S: no complaint, took his med. (Erasure). C/o (*complains of*) not being able to shower.

O: Wounds clean & dry – Nad ("*nothing abnormal detected*")

A (*assessment*): S/P (*status post*) 2 days removal inclusion cysts.

P (*plan*): Encouraged to be patient. Bulky dressing removed. Coverlet (*dressing*) applied p (*after*) cleansing c (*with*) betadine. Will see again on Friday.

(SIGNATURE)

05/12/95:

S= Status quo. No complaint.

O= wound clean & dry – No drainage.

A: S/P (*status post*) 4 days removal cysts from back & epigastrium.

P: wounds cleansed c (*with*) betadine & DSD (*dry sterile dressing*) applied. – Will have to change dressing on his own over weekend. Pt was given coverlet pads for dressing change. Was advised to shower c (*with*) dressing on and to change same p (*after*) shower.

Will remove stitches on Monday.

(SIGNATURE)

05/15/95:

Wound clean & dry – Skin sutures removed – Steri-strip applied p (*with*) Benzoin spray. Pt advised to let them fall on their own.

RTO (*return to office*) in 2 wks.

(SIGNATURE)