

No. 2023-32561

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

**NOTICE OF INTENTION
TO TAKE DEPOSITION BY WRITTEN QUESTIONS**

To Plaintiff by and through their attorney(s) of record: **Tommy Hastings (Hastings Law Firm, P.C.)**
To other party/parties by and through their attorney(s) of record: **Gerald E. Castillo (Serpe | Andrews, PLLC)**

You will please take notice that twenty (20) days from the service of a copy hereof with attached questions, a deposition by written questions will be taken of Custodian of Records for:

**City of Houston - EMS (EMS)
1801 Smith Street, Suite 860
Houston, TX 77002**

**City of Houston - EMS (Billing)
1801 Smith Street, Suite 860
Houston, TX 77002**

**Fondren Orthopedic Group (Medical)
7401 South Main Street
Houston, TX 77030**

**Fondren Orthopedic Group (Billing)
7401 South Main Street
Houston, TX 77030**

**Fondren Orthopedic Group (Radiology)
7401 South Main Street
Houston, TX 77030**

**PAM Health Rehabilitation Hospital of Humble (Medical)
18839 McKay Dr
Humble, TX 77338**

**PAM Health Rehabilitation Hospital of Humble (Billing)
18839 McKay Dr
Humble, TX 77338**

**Better Life Spine & Pain Center (Medical)
12518 Cutten Rd
Houston, TX 77066**

**Better Life Spine & Pain Center (Billing)
12518 Cutten Rd
Houston, TX 77066**

Zion Healthcare of Cypress (Medical)
10851 Crescent Moon Drive
Houston, TX 77064

Zion Healthcare of Cypress (Billing)
10851 Crescent Moon Drive
Houston, TX 77064

Premier General & Colorectal Surgery (Medical)
129 Vison Park Blvd., Suite 212
Conroe, TX 77384

Premier General & Colorectal Surgery (Billing)
129 Vison Park Blvd., Suite 212
Conroe, TX 77384

Modern Heart & Vascular (Medical & Radiology)
18980 N Memorial Dr, 100
Humble, TX 77338

Modern Heart & Vascular (Billing)
18980 N Memorial Dr, 100
Humble, TX 77338

Crimson Heights Health & Wellness (Medical & Radiology)
19279 McKay Dr.
Humble, TX 77338

Crimson Heights Health & Wellness (Billing)
19279 McKay Dr.
Humble, TX 77338

Memorial Hermann Health System (Medical)
Release of Information
7737 SWF C94
Houston, TX 77074

Memorial Hermann Health System (Billing)
Release of Information
7737 SWF C94
Houston, TX 77074

Memorial Hermann Health System (Radiology)
Release of Information
7737 SWF C94
Houston, TX 77074

Texas ENT Specialists (Medical)
10740 N. Gessner Rd., Suite 310
Houston, TX 77064

Texas ENT Specialists (Billing)
10740 N. Gessner Rd., Suite 310
Houston, TX 77064

Texas ENT Specialists (Radiology)
10740 N. Gessner Rd., Suite 310
Houston, TX 77064

Strategic Wound Care (Medical)
700 E. Marshall Ave.
Longview, TX 75601

Strategic Wound Care (Billing)
700 E. Marshall Ave.
Longview, TX 75601

CHI St. Luke's Health - The Woodlands Hospital (Medical)
Health Information Management
17200 St. Luke's Way, Suite 150 (Mail Code 7-204)
The Woodlands, TX 77384

CHI St. Luke's Health - The Woodlands Hospital (Billing)
Attn: Patient Financial Services
17200 St. Luke's Way
The Woodlands, TX 77384

CHI St. Luke's Health - The Woodlands Hospital (Radiology)
Radiology Department
17200 St. Luke's Way
The Woodlands, TX 77384

Texas Surgical Dermatology (Medical)
21009 Kuykendahl Rd. Ste A
Spring, TX 77379

Texas Surgical Dermatology (Billing)
21009 Kuykendahl Rd. Ste A
Spring, TX 77379

IPR Healthcare System, Inc. (Medical)
1328 S. Loop W., Suite 100
Houston, TX 77054

IPR Healthcare System, Inc. (Billing)
1328 S. Loop W., Suite 100
Houston, TX 77054

Pinard Home Health (Medical)
17819 Stuebner Airline Rd., Suite F
Spring, TX 77379

Pinard Home Health (Billing)
17819 Stuebner Airline Rd., Suite F
Spring, TX 77379

HarmonyCares Medical Group (Medical)
8588 Katy Freeway, Suite 226A
Houston, TX 77024

HarmonyCares Medical Group (Billing)
8588 Katy Freeway, Suite 226A
Houston, TX 77024

HarmonyCares Medical Group (Radiology)
8588 Katy Freeway, Suite 226A
Houston, TX 77024

Wound Evolution | Wound Care & Hyperbaric Medicine (Medical)
17450 St. Lukes Way, Suite 360
Conroe, TX 77384

Wound Evolution | Wound Care & Hyperbaric Medicine (Billing)
17450 St. Lukes Way, Suite 360
Conroe, TX 77384

UTMB Health (Medical)
HIM - Release of Information
301 University Blvd
Galveston, TX 77555-0782

UTMB Health C/O Document Access Services (Billing)
Attention: Josh Taylor
14015 Park Drive, Suite 100
Tomball, TX 77377

UTMB Health (Radiology)
HIM - Release of Information
301 University Blvd
Galveston, TX 77555-0782

Baylor College of Medicine (Medical)
Two Greenway Plaza, Suite 900
Houston, TX 77046

Baylor College of Medicine (Billing)
Two Greenway Plaza, Suite 900
Houston, TX 77046

Baylor College of Medicine (Radiology)
Two Greenway Plaza, Suite 900
Houston, TX 77046

Houston Methodist Hospital (Medical)
Health Information Management
Attn: Medical Records
Scurlock Tower
6565 Fannin Street, ST-520
Houston, TX 77030

Houston Methodist Hospital c/o Document Access Services (Billing)
Attention: Amy
14015 Park Drive Ste100
Tomball, TX 77377

Houston Methodist Hospital (Radiology)
Health Information Management
Attn: Medical Records
Scurlock Tower
6565 Fannin Street, ST-520
Houston, TX 77030

Houston Cardiovascular Associates (Medical)
6400 Fannin, Suite 3000
Houston, TX 77030

Houston Cardiovascular Associates (Billing)
6400 Fannin, Suite 3000
Houston, TX 77030

Nexus Neurorecovery Center (Medical & Radiology)
9297 Wahrenberger Rd.
Conroe, TX 77304

Nexus Neurorecovery Center (Billing)
9297 Wahrenberger Rd.
Conroe, TX 77304

Harris County Sheriff's Office (Police report)
Attn: COR/Legal Department
1200 Baker Street
Houston, TX 77002

before a Notary Public for **Liberty Litigation Support LLC**
7171 Highway 6 North, Suite 250
Houston, TX 77095
(281) 200-5320 or (281) 200-5310 Fax (713) 533-8997

or its designated agent, which deposition with attached questions may be used in evidence upon the trial of the above-styled and numbered cause pending in the above named court. Notice is further given that request is hereby made as authorized under Rule 200, Texas Rules of Civil Procedure, to the officer taking this deposition to issue a subpoena duces tecum and cause it to be served on the witness to produce any and all records as described on the attached questions and/or Exhibit(s) and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood

and to turn all such records over to the officer authorized to take this deposition so that photographic reproductions of the same may be made and attached to said deposition.

/s/Sam A. Houston
By permission

Sam A. Houston
State Bar No. 10059550
Email: shouston@schlawyers.com
Cynthia L. Freeman
State Bar No. 00789298
Email: cfreeman@schlawyers.com
Scott Clawater & Houston, LLP
2727 Allen Parkway, Suite 500
Houston, TX 77019
713-650-6600 Fax 713-579-1599
Attorneys for Defendant, Patrick Shih, M.D. and Patrick Shih, M.D., P.A.

I hereby certify that a true and correct copy of the foregoing instrument has been forwarded to all Counsel of Record by hand delivery, email, FAX, and/or certified mail, return receipt requested, on this day.

Dated: July 12, 2023

by Kristen Chumley

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

City of Houston - EMS
1801 Smith Street, Suite 860
Houston, TX 77002 832-394-6860

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all EMS and/or medical records pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to: Patient Care Reports, assessments, medical history, medical conditions, complaints, medications, diagnosis, treatments administered, patient demographics, vitals, signatures of EMS personnel and patient, transport logs and notes.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

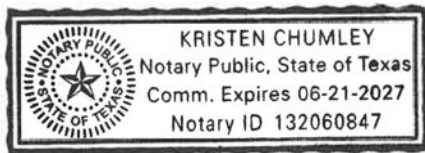
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,
in the following manner: By delivering to the witness _____, a true copy hereof.
Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **City of Houston - EMS**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all EMS and/or medical records pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to: Patient Care Reports, assessments, medical history, medical conditions, complaints, medications, diagnosis, treatments administered, patient demographics, vitals, signatures of EMS personnel and patient, transport logs and notes.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

City of Houston - EMS
1801 Smith Street, Suite 860
Houston, TX 77002 832-394-6860

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

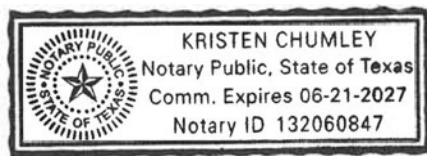
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **City of Houston - EMS**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **City of Houston - EMS** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **City of Houston - EMS** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **City of Houston - EMS** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Fondren Orthopedic Group
7401 South Main Street
Houston, TX 77030 713-799-2300

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

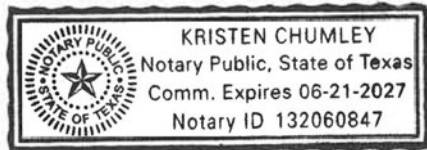
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

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in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Fondren Orthopedic Group**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

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Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

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NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

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7401 South Main Street
Houston, TX 77030 713-799-2300

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

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and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

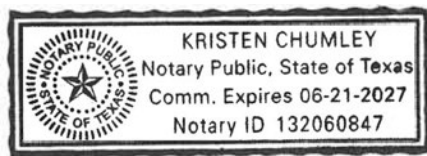
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

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CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
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NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Fondren Orthopedic Group**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Fondren Orthopedic Group** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Fondren Orthopedic Group** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Fondren Orthopedic Group** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Fondren Orthopedic Group
7401 South Main Street
Houston, TX 77030 713-799-2300

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

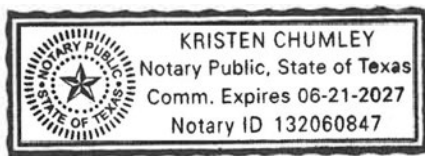
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Fondren Orthopedic Group**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of radiology images/films for this facility?

Answer: _____

4. In general, how long are patient radiology images/films kept by this facility?

Answer: _____

5. Are the radiology images/films outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these radiology images/films as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the radiology images/films mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested radiology images/films?

Answer: _____

9. Are such radiology images/films kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was in the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded, to make the record, or to transmit information thereof, to be included in the radiology images/films.

Answer: _____

11. Were the radiology images/films made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

PAM Health Rehabilitation Hospital of Humble
18839 McKay Dr
Humble, TX 77338 281-446-3655

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

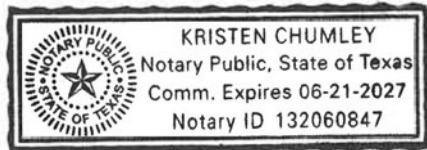
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) *Contempt.* Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **PAM Health Rehabilitation Hospital of Humble**
Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

PAM Health Rehabilitation Hospital of Humble
18839 McKay Dr
Humble, TX 77338 469-241-2100 opt 3

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **PAM Health Rehabilitation Hospital of Humble**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **PAM Health Rehabilitation Hospital of Humble** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **PAM Health Rehabilitation Hospital of Humble** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **PAM Health Rehabilitation Hospital of Humble** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Better Life Spine & Pain Center
12518 Cutten Rd
Houston, TX 77066 (832) 286-4546

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

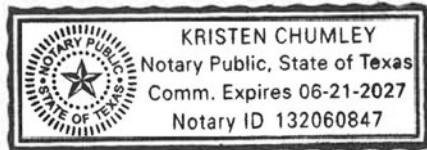
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) *Contempt.* Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Better Life Spine & Pain Center**
Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Better Life Spine & Pain Center
12518 Cutten Rd
Houston, TX 77066 (832) 286-4546

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

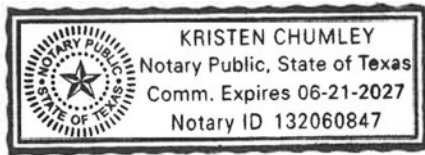
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) *Contempt.* Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Better Life Spine & Pain Center**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Better Life Spine & Pain Center** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Better Life Spine & Pain Center** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Better Life Spine & Pain Center** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Zion Healthcare of Cypress
10851 Crescent Moon Drive
Houston, TX 77064 281-955-4100

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

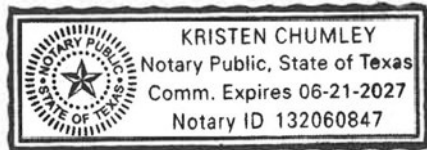
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Zion Healthcare of Cypress**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Zion Healthcare of Cypress
10851 Crescent Moon Drive
Houston, TX 77064 281-955-4100

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

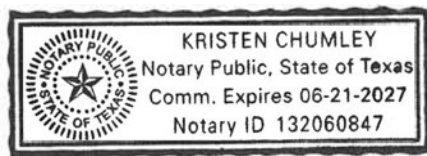
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,
in the following manner: By delivering to the witness _____, a true copy hereof.
Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Zion Healthcare of Cypress**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Zion Healthcare of Cypress** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Zion Healthcare of Cypress** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Zion Healthcare of Cypress** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Premier General & Colorectal Surgery
129 Vison Park Blvd., Suite 212
Conroe, TX 77384 832-617-9454

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

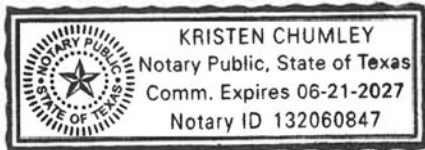
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Premier General & Colorectal Surgery**
Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Premier General & Colorectal Surgery
129 Vison Park Blvd., Suite 212
Conroe, TX 77384 832-617-9454

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

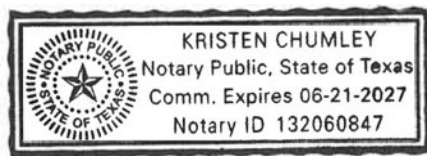
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Premier General & Colorectal Surgery**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Premier General & Colorectal Surgery** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Premier General & Colorectal Surgery** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Premier General & Colorectal Surgery** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Modern Heart & Vascular
18980 N Memorial Dr, 100
Humble, TX 77338 832-664-8930

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical records and radiology films/reports pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to, patient histories, admissions, discharges, nurses' notes, physician's notes, medication logs, toxicology tests and results, any and all reports, notes, tests, test results, diagnoses, prognoses, office records, clinic records, physical therapy records and correspondence, all radiology studies including x-rays, CT scans, MRI scans and any other imaging studies (disk if possible), all radiology reports, all imaging reports, all lab results, progress reports and any other documents reduced to writing.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED]

at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

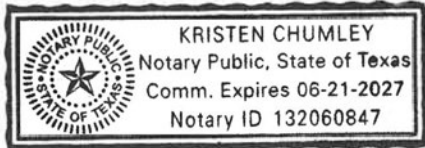
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) *Contempt.* Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Modern Heart & Vascular**
Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical records and radiology films/reports pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to, patient histories, admissions, discharges, nurses' notes, physician's notes, medication logs, toxicology tests and results, any and all reports, notes, tests, test results, diagnoses, prognoses, office records, clinic records, physical therapy records and correspondence, all radiology studies including x-rays, CT scans, MRI scans and any other imaging studies (disk if possible), all radiology reports, all imaging reports, all lab results, progress reports and any other documents reduced to writing.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. Are you a/the custodian for radiology images/films for this facility?

Answer: _____

5. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

6. In general, how long are patient radiology images/films stored/kept by this facility?

Answer: _____

7. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

8. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

9. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 7. Have you complied? If not, why?

Answer: _____

10. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

11. Were such medical records kept in the regular course of business of this facility?

Answer: _____

12. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such record.

Answer: _____

13. Were the medical records made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

14. Are the radiology images/films outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

15. Are you able to identify these radiology images/films as the originals or true copies of the originals?

Answer: _____

16. Please hand to the Officer taking this deposition, copies of radiology images/films mentioned in Question No. 14. Have you complied? If not, why?

Answer: _____

17. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested radiology images/films?

Answer: _____

18. Are such radiology images/films kept in the regular course of business of this facility?

Answer: _____

19. Please state if it was in the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded, to make the record, or to transmit information thereof, to be included in the radiology images/films.

Answer: _____

20. Were the radiology images/films made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Modern Heart & Vascular
18980 N Memorial Dr, 100
Humble, TX 77338 832-664-8930

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

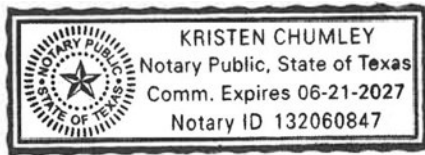
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Modern Heart & Vascular**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Modern Heart & Vascular** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Modern Heart & Vascular** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Modern Heart & Vascular** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Crimson Heights Health & Wellness
19279 McKay Dr.
Humble, TX 77338 346-616-2600

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical records and radiology films/reports pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to, patient histories, admissions, discharges, nurses' notes, physician's notes, medication logs, toxicology tests and results, any and all reports, notes, tests, test results, diagnoses, prognoses, office records, clinic records, physical therapy records and correspondence, all radiology studies including x-rays, CT scans, MRI scans and any other imaging studies (disk if possible), all radiology reports, all imaging reports, all lab results, progress reports and any other documents reduced to writing.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED]

at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

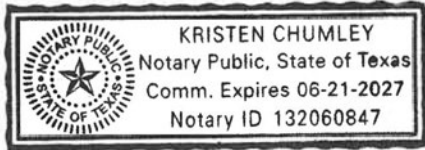
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.




NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) *Contempt.* Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Crimson Heights Health & Wellness**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical records and radiology films/reports pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to, patient histories, admissions, discharges, nurses' notes, physician's notes, medication logs, toxicology tests and results, any and all reports, notes, tests, test results, diagnoses, prognoses, office records, clinic records, physical therapy records and correspondence, all radiology studies including x-rays, CT scans, MRI scans and any other imaging studies (disk if possible), all radiology reports, all imaging reports, all lab results, progress reports and any other documents reduced to writing.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. Are you a/the custodian for radiology images/films for this facility?

Answer: _____

5. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

6. In general, how long are patient radiology images/films stored/kept by this facility?

Answer: _____

7. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

8. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

9. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 7. Have you complied? If not, why?

Answer: _____

10. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

11. Were such medical records kept in the regular course of business of this facility?

Answer: _____

12. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such record.

Answer: _____

13. Were the medical records made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

14. Are the radiology images/films outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

15. Are you able to identify these radiology images/films as the originals or true copies of the originals?

Answer: _____

16. Please hand to the Officer taking this deposition, copies of radiology images/films mentioned in Question No. 14. Have you complied? If not, why?

Answer: _____

17. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested radiology images/films?

Answer: _____

18. Are such radiology images/films kept in the regular course of business of this facility?

Answer: _____

19. Please state if it was in the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded, to make the record, or to transmit information thereof, to be included in the radiology images/films.

Answer: _____

20. Were the radiology images/films made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Crimson Heights Health & Wellness
19279 McKay Dr.
Humble, TX 77338 346-616-2600

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

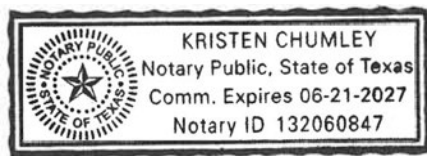
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Crimson Heights Health & Wellness**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Crimson Heights Health & Wellness** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Crimson Heights Health & Wellness** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Crimson Heights Health & Wellness** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Memorial Hermann Health System
Release of Information
7737 SWF C94
Houston, TX 77074 713-456-5576, opt 4

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

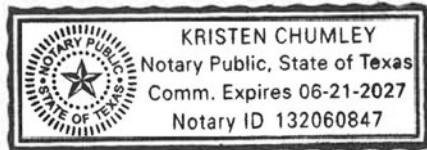
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) *Contempt.* Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Memorial Hermann Health System**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Memorial Hermann Health System
Release of Information
7737 SWF C94
Houston, TX 77074 713-456-5576, opt 4

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

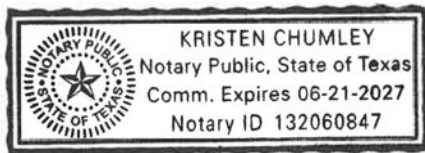
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.



NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.
Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Memorial Hermann Health System**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Memorial Hermann Health System** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Memorial Hermann Health System** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Memorial Hermann Health System** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Memorial Hermann Health System
Release of Information
7737 SWF C94
Houston, TX 77074 713-242-3401 (opt 4)

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

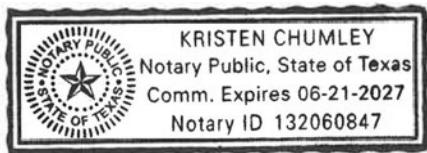
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,
in the following manner: By delivering to the witness _____, a true copy hereof.
Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Memorial Hermann Health System**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of radiology images/films for this facility?

Answer: _____

4. In general, how long are patient radiology images/films kept by this facility?

Answer: _____

5. Are the radiology images/films outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these radiology images/films as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the radiology images/films mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested radiology images/films?

Answer: _____

9. Are such radiology images/films kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was in the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded, to make the record, or to transmit information thereof, to be included in the radiology images/films.

Answer: _____

11. Were the radiology images/films made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Texas ENT Specialists
10740 N. Gessner Rd., Suite 310
Houston, TX 77064 281-351-8407

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

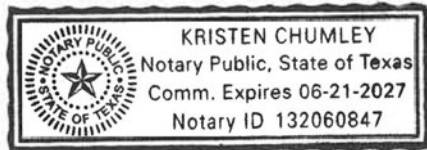
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Texas ENT Specialists**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

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THE STATE OF TEXAS

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Custodian of Records for:

Texas ENT Specialists
10740 N. Gessner Rd., Suite 310
Houston, TX 77064 281-351-8407

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

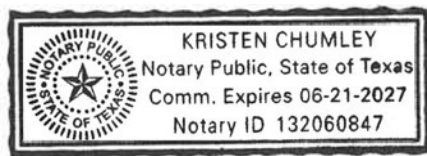
This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Texas ENT Specialists**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Texas ENT Specialists** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Texas ENT Specialists** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Texas ENT Specialists** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

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NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

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Texas ENT Specialists
10740 N. Gessner Rd., Suite 310
Houston, TX 77064 281-351-8407

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

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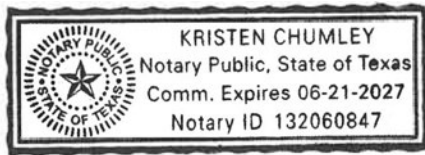
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

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CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

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NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Texas ENT Specialists**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of radiology images/films for this facility?

Answer: _____

4. In general, how long are patient radiology images/films kept by this facility?

Answer: _____

5. Are the radiology images/films outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these radiology images/films as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the radiology images/films mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested radiology images/films?

Answer: _____

9. Are such radiology images/films kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was in the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded, to make the record, or to transmit information thereof, to be included in the radiology images/films.

Answer: _____

11. Were the radiology images/films made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Strategic Wound Care
700 E. Marshall Ave.
Longview, TX 75601 832-465-3514

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

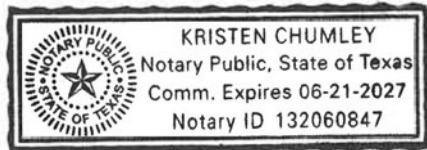
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Strategic Wound Care**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Strategic Wound Care
700 E. Marshall Ave.
Longview, TX 75601 832-465-3514

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

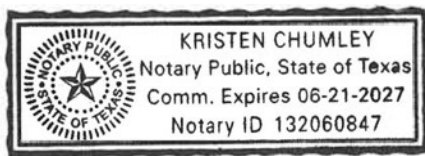
This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Strategic Wound Care**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Strategic Wound Care** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Strategic Wound Care** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Strategic Wound Care** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

CHI St. Luke's Health - The Woodlands Hospital
Health Information Management
17200 St. Luke's Way, Suite 150 (Mail Code 7-204)
The Woodlands, TX 77384 936-266-2000

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence. (Original Treatment Location: St. Luke's Health Springwoods Village Hospital)

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: Carl Patrick Blackwood Date of Birth: [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

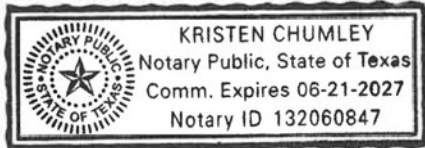
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) *Contempt.* Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **CHI St. Luke's Health - The Woodlands Hospital**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence. (Original Treatment Location: St. Luke's Health Springwoods Village Hospital)**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

CHI St. Luke's Health - The Woodlands Hospital
Attn: Patient Financial Services
17200 St. Luke's Way
The Woodlands, TX 77384 936-266-2000

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format. (Original Treatment Location: St. Luke's Health Springwoods Village Hospital)

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

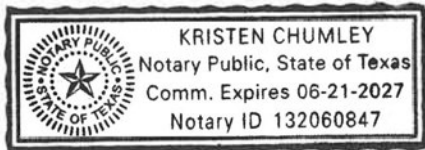
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) *Contempt.* Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **CHI St. Luke's Health - The Woodlands Hospital**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format. (Original Treatment Location: St. Luke's Health Springwoods Village Hospital)**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **CHI St. Luke's Health - The Woodlands Hospital** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **CHI St. Luke's Health - The Woodlands Hospital** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **CHI St. Luke's Health - The Woodlands Hospital** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

CHI St. Luke's Health - The Woodlands Hospital
Radiology Department
17200 St. Luke's Way
The Woodlands, TX 77384 936-266-2000

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays. (Original Treatment Location: St. Luke's Health Springwoods Village Hospital)

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

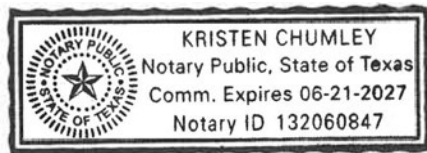
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.
Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

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IN THE DISTRICT COURT OF

VS.

HARRIS COUNTY, TEXAS

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA., HOUSTON NORTHWEST OPERATING COMPANY, L.L.C., D/B/A HCA HOUSTON HEALTHCARE NORTHWEST, A/K/A HOUSTON NORTHWEST MEDICAL CENTER

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **CHI St. Luke's Health - The Woodlands Hospital**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays. (Original Treatment Location: St. Luke's Health Springwoods Village Hospital)**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of radiology images/films for this facility?

Answer: _____

4. In general, how long are patient radiology images/films kept by this facility?

Answer: _____

5. Are the radiology images/films outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these radiology images/films as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the radiology images/films mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested radiology images/films?

Answer: _____

9. Are such radiology images/films kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was in the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded, to make the record, or to transmit information thereof, to be included in the radiology images/films.

Answer: _____

11. Were the radiology images/films made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Texas Surgical Dermatology
21009 Kuykendahl Rd. Ste A
Spring, TX 77379 832-663-6566

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

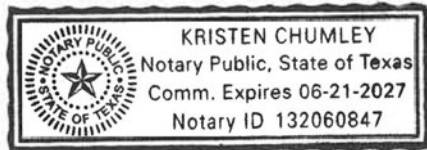
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Texas Surgical Dermatology**
Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Texas Surgical Dermatology
21009 Kuykendahl Rd. Ste A
Spring, TX 77379 832-663-6566

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

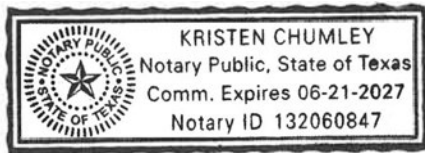
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Texas Surgical Dermatology**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Texas Surgical Dermatology** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Texas Surgical Dermatology** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Texas Surgical Dermatology** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

IPR Healthcare System, Inc.
1328 S. Loop W., Suite 100
Houston, TX 77054 713-592-6776

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

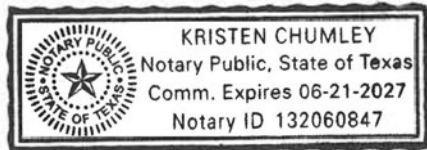
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **IPR Healthcare System, Inc.**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

IPR Healthcare System, Inc.
1328 S. Loop W., Suite 100
Houston, TX 77054 713-592-6776

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

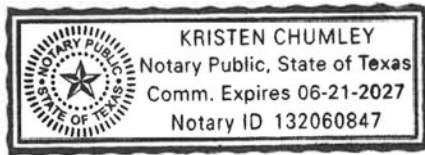
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **IPR Healthcare System, Inc.**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **IPR Healthcare System, Inc.** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **IPR Healthcare System, Inc.** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **IPR Healthcare System, Inc.** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Pinard Home Health
17819 Stuebner Airline Rd., Suite F
Spring, TX 77379 281-205-7948

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

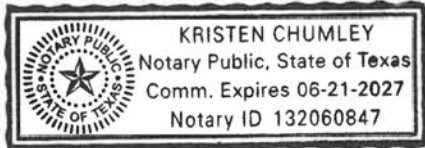
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Pinard Home Health**
Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Pinard Home Health
17819 Stuebner Airline Rd., Suite F
Spring, TX 77379 281-205-7948

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

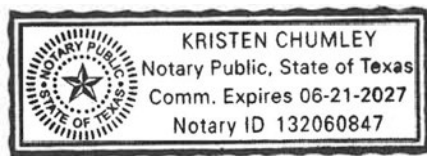
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Pinard Home Health**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Pinard Home Health** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Pinard Home Health** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Pinard Home Health** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

HarmonyCares Medical Group
8588 Katy Freeway, Suite 226A
Houston, TX 77024 713-532-6884

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

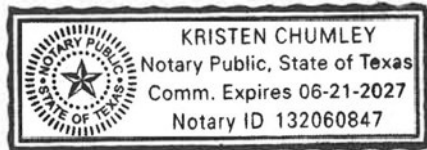
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) *Contempt.* Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **HarmonyCares Medical Group**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

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HarmonyCares Medical Group
8588 Katy Freeway, Suite 226A
Houston, TX 77024 713-532-6884

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

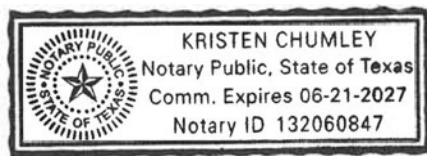
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **HarmonyCares Medical Group**
Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **HarmonyCares Medical Group** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **HarmonyCares Medical Group** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **HarmonyCares Medical Group** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
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to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

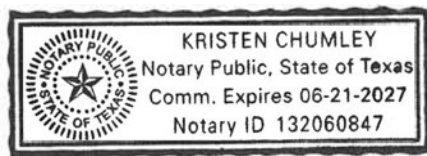
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,
in the following manner: By delivering to the witness _____, a true copy hereof.
Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **HarmonyCares Medical Group**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of radiology images/films for this facility?

Answer: _____

4. In general, how long are patient radiology images/films kept by this facility?

Answer: _____

5. Are the radiology images/films outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these radiology images/films as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the radiology images/films mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested radiology images/films?

Answer: _____

9. Are such radiology images/films kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was in the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded, to make the record, or to transmit information thereof, to be included in the radiology images/films.

Answer: _____

11. Were the radiology images/films made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Wound Evolution | Wound Care & Hyperbaric Medicine
17450 St. Lukes Way, Suite 360
Conroe, TX 77384 281-872-6306

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

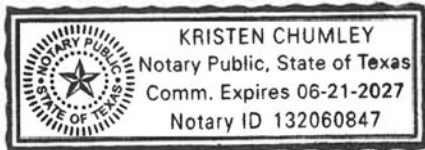
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Wound Evolution | Wound Care & Hyperbaric Medicine**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Wound Evolution | Wound Care & Hyperbaric Medicine
17450 St. Lukes Way, Suite 360
Conroe, TX 77384 281-872-6306

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

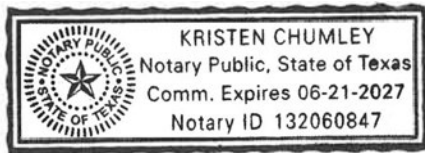
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Wound Evolution | Wound Care & Hyperbaric Medicine**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Wound Evolution | Wound Care & Hyperbaric Medicine** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Wound Evolution | Wound Care & Hyperbaric Medicine** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Wound Evolution | Wound Care & Hyperbaric Medicine** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

UTMB Health

HIM - Release of Information

301 University Blvd

Galveston, TX 77555-0782 409-772-1965

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310

7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

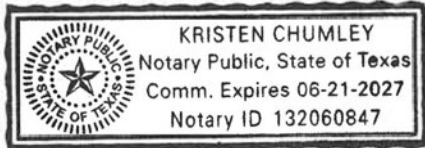
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) *Contempt.* Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

Order No. 5342.040

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

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IN THE DISTRICT COURT OF

VS.

HARRIS COUNTY, TEXAS

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **UTMB Health**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

UTMB Health C/O Document Access Services

Attention: Josh Taylor

14015 Park Drive, Suite 100

Tomball, TX 77377 832-639-8821

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310

7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, physician billing, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

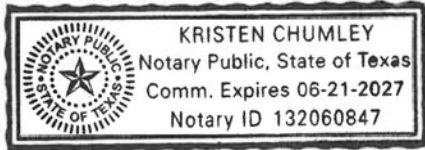
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

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IN THE DISTRICT COURT OF

VS.

HARRIS COUNTY, TEXAS

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **UTMB Health C/O Document Access Services**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, physician billing, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **UTMB Health C/O Document Access Services** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **UTMB Health C/O Document Access Services** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **UTMB Health C/O Document Access Services** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

UTMB Health
HIM - Release of Information
301 University Blvd
Galveston, TX 77555-0782 409-772-1965

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

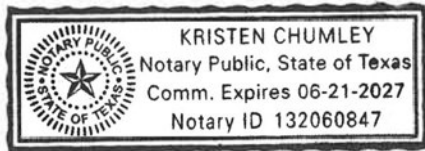
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.
Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **UTMB Health**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of radiology images/films for this facility?

Answer: _____

4. In general, how long are patient radiology images/films kept by this facility?

Answer: _____

5. Are the radiology images/films outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these radiology images/films as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the radiology images/films mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested radiology images/films?

Answer: _____

9. Are such radiology images/films kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was in the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded, to make the record, or to transmit information thereof, to be included in the radiology images/films.

Answer: _____

11. Were the radiology images/films made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Baylor College of Medicine
Two Greenway Plaza, Suite 900
Houston, TX 77046 713-798-5259

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

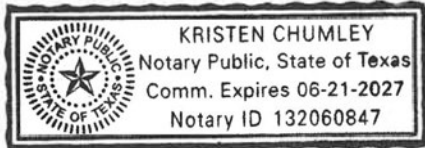
and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) Contempt. Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Baylor College of Medicine**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Baylor College of Medicine
Two Greenway Plaza, Suite 900
Houston, TX 77046 713-798-5259

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

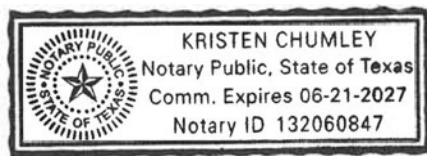
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Baylor College of Medicine**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Baylor College of Medicine** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Baylor College of Medicine** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Baylor College of Medicine** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Baylor College of Medicine
Two Greenway Plaza, Suite 900
Houston, TX 77046 713-798-5259

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

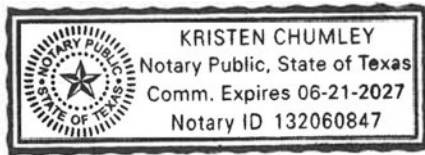
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Baylor College of Medicine**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of radiology images/films for this facility?

Answer: _____

4. In general, how long are patient radiology images/films kept by this facility?

Answer: _____

5. Are the radiology images/films outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these radiology images/films as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the radiology images/films mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested radiology images/films?

Answer: _____

9. Are such radiology images/films kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was in the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded, to make the record, or to transmit information thereof, to be included in the radiology images/films.

Answer: _____

11. Were the radiology images/films made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Houston Methodist Hospital
Health Information Management
Attn: Medical Records
Scurlock Tower
6565 Fannin Street, ST-520
Houston, TX 77030 713-441-2401

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED]

at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

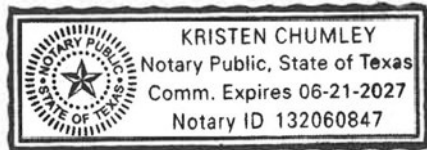
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Houston Methodist Hospital**
Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Houston Methodist Hospital c/o Document Access Services
Attention: Amy
14015 Park Drive Ste100
Tomball, TX 77377 832-639-8821

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

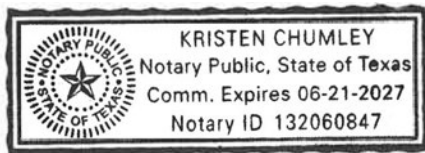
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

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in the following manner: By delivering to the witness _____, a true copy hereof.
Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Houston Methodist Hospital c/o Document Access Services**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Houston Methodist Hospital c/o Document Access Services** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Houston Methodist Hospital c/o Document Access Services** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Houston Methodist Hospital c/o Document Access Services** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Houston Methodist Hospital
Health Information Management
Attn: Medical Records
Scurlock Tower
6565 Fannin Street, ST-520
Houston, TX 77030 713-441-2401

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310

7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED]

at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

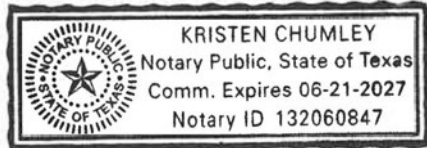
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Houston Methodist Hospital**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all radiology films pertaining to Carl Patrick Blackwood, from 06/11/2011 to the present, including but not limited to, any and all CT Scans, MRI's, arthrography, discography, fluoroscopy, dexa scans, angiographs and barium xrays.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of radiology images/films for this facility?

Answer: _____

4. In general, how long are patient radiology images/films kept by this facility?

Answer: _____

5. Are the radiology images/films outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these radiology images/films as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the radiology images/films mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested radiology images/films?

Answer: _____

9. Are such radiology images/films kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was in the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded, to make the record, or to transmit information thereof, to be included in the radiology images/films.

Answer: _____

11. Were the radiology images/films made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Houston Cardiovascular Associates
6400 Fannin, Suite 3000
Houston, TX 77030 713-790-0841

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED] at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

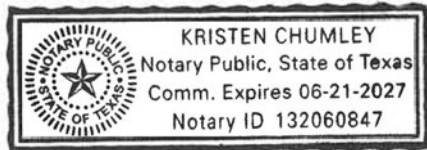
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Houston Cardiovascular Associates**
Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical and emergency room records pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to records, reports, radiology reports, pathology reports, x-ray reports, MRI reports, CT Scan reports, ultrasound reports, memoranda, correspondence, consultations, rehabilitation records, peer review records, physical therapy records, occupational therapy records, speech therapy records, pharmacy records, insurance records and/or claims, workers' compensation records and/or claims, any and all photographs whether color or black and white, including but not limited to any and all documents which may be contained in patient file from other care providers, including patient information sheet, handwritten notes, telephone messages, and any correspondence.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

5. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

6. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

7. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 5. Have you complied? If not, why?

Answer: _____

8. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

9. Were such medical records kept in the regular course of business of this facility?

Answer: _____

10. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such medical records.

Answer: _____

11. Were the medical records made by nurses, doctors and other employees or representatives made at or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Houston Cardiovascular Associates
6400 Fannin, Suite 3000
Houston, TX 77030 713-790-0841

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

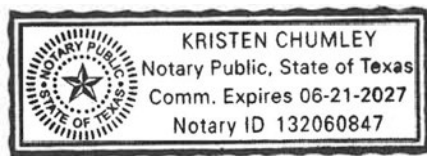
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Houston Cardiovascular Associates**
Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Houston Cardiovascular Associates** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Houston Cardiovascular Associates** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Houston Cardiovascular Associates** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Nexus Neurorecovery Center
9297 Wahrenberger Rd.
Conroe, TX 77304 (936) 788-7770

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all medical records and radiology films/reports pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to, patient histories, admissions, discharges, nurses' notes, physician's notes, medication logs, toxicology tests and results, any and all reports, notes, tests, test results, diagnoses, prognoses, office records, clinic records, physical therapy records and correspondence, all radiology studies including x-rays, CT scans, MRI scans and any other imaging studies (disk if possible), all radiology reports, all imaging reports, all lab results, progress reports and any other documents reduced to writing.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to: **Carl Patrick Blackwood Date of Birth:** [REDACTED]

at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

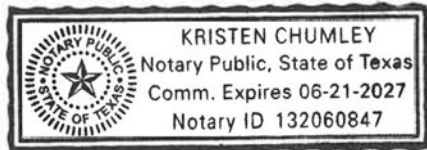
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Nexus Neurorecovery Center**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all medical records and radiology films/reports pertaining to Carl Patrick Blackwood, FROM 06/11/2011 TO THE PRESENT, including but not limited to, patient histories, admissions, discharges, nurses' notes, physician's notes, medication logs, toxicology tests and results, any and all reports, notes, tests, test results, diagnoses, prognoses, office records, clinic records, physical therapy records and correspondence, all radiology studies including x-rays, CT scans, MRI scans and any other imaging studies (disk if possible), all radiology reports, all imaging reports, all lab results, progress reports and any other documents reduced to writing.**

1. Please state your full name and phone number.

Answer: _____

Phone number: _____

2. Please state the name of your employer.

Employer: _____

3. Are you a/the custodian of medical records for this facility?

Answer: _____

4. Are you a/the custodian for radiology images/films for this facility?

Answer: _____

5. In general, how long are patient medical records stored/kept by this facility?

Answer: _____

6. In general, how long are patient radiology images/films stored/kept by this facility?

Answer: _____

7. Are the medical records outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

8. Are you able to identify these medical records as the originals or true copies of the originals?

Answer: _____

9. Please hand to the Officer taking this deposition copies of the medical records mentioned in Question No. 7. Have you complied? If not, why?

Answer: _____

10. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested medical records?

Answer: _____

11. Were such medical records kept in the regular course of business of this facility?

Answer: _____

12. Please state if it was the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof, to be included in such record.

Answer: _____

13. Were the medical records made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

14. Are the radiology images/films outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

15. Are you able to identify these radiology images/films as the originals or true copies of the originals?

Answer: _____

16. Please hand to the Officer taking this deposition, copies of radiology images/films mentioned in Question No. 14. Have you complied? If not, why?

Answer: _____

17. Are the copies which you have handed to the Officer taking this deposition, true and correct copies of all requested radiology images/films?

Answer: _____

18. Are such radiology images/films kept in the regular course of business of this facility?

Answer: _____

19. Please state if it was in the regular course of business of the above-mentioned facility, for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded, to make the record, or to transmit information thereof, to be included in the radiology images/films.

Answer: _____

20. Were the radiology images/films made by this facility, made at, or near the time when the acts, events, conditions, courses of treatment, diagnoses and other information contained therein occurred, were observed, or rendered, or made reasonably soon thereafter?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -
You are hereby commanded to subpoena and summon the following witness(es):
Custodian of Records for:

Nexus Neurorecovery Center
9297 Wahrenberger Rd.
Conroe, TX 77304 (936) 788-7770

to be and appear before a Notary Public of my designation for
Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095
or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

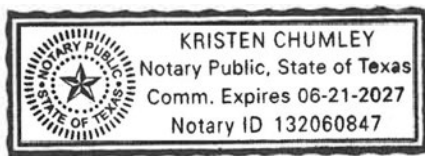
at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD
VS.
PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____, in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD

VS.

PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Nexus Neurorecovery Center**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **Any and all billing records pertaining to Carl Patrick Blackwood, FROM 06/11/2021 TO THE PRESENT, including but not limited to, charges, insurance payments, patient payments and/or co-payments, explanations of benefits, claim form and any and all itemized billing statements whether maintained digitally or in paper format.**

1. Please state your full name.

Answer: _____

2. Please state your position and/or job title.

Answer: _____

3. Please state your employer's name, business address, and telephone number.

Employer's Name: _____

Address: _____

Phone Number: _____

4. Are you authorized by **Nexus Neurorecovery Center** to produce and testify as to the patient accounting records of **Carl Patrick Blackwood**?

Answer: _____

5. Has **Nexus Neurorecovery Center** made, or, caused to be made by billing and accounting records for services rendered to **Carl Patrick Blackwood** from **06/11/2021** to the present, which set out the complete billing history, including, but not limited to, the dollar amount that **Nexus Neurorecovery Center** has adjusted, discounted, and/or written off, any third-party adjustments, and any payments made by, or on behalf of, **Carl Patrick Blackwood**?

Answer: _____

6. Please fill in the following blanks with the requested information concerning medical treatment provided to **Carl Patrick Blackwood** from **06/11/2021** to the present:

A. Total dollar amount charged for all medical services:

Answer: _____

B. Total dollar amount paid by Private Insurer:

Answer: _____

C. Total dollar amount paid by Medicare/Medicaid:

Answer: _____

D. Total dollar amount paid by any other Texas State Agency:

Answer: _____

E. Total dollar amount paid by **Carl Patrick Blackwood**:

Answer: _____

F. Total dollar amount written, adjusted, or charged off:

Answer: _____

G. Total dollar amount still owed:

Answer: _____

H. Who owes remaining balance?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

DEPOSITION SUBPOENA TO TESTIFY OR PRODUCE DOCUMENTS OR THINGS
THE STATE OF TEXAS

To any Sheriff or Constable of the State of Texas or other person authorized to serve subpoenas under RULE 176 OF TEXAS RULES OF CIVIL PROCEDURE. - GREETINGS -

You are hereby commanded to subpoena and summon the following witness(es):

Custodian of Records for:

Harris County Sheriff's Office
Attn: COR/Legal Department
1200 Baker Street
Houston, TX 77002 346-286-1550

to be and appear before a Notary Public of my designation for

Liberty Litigation Support LLC (281) 200-5320 or (281) 200-5310
7171 Highway 6 North, Suite 250, Houston, TX 77095

or its designated agent, by the twentieth day of receipt of the subpoena at the office of the custodian and there under oath to make answers of certain written questions to be propounded to the witness and to bring and produce for inspection and photocopying

The complete investigative file pertaining to Carl Patrick Blackwood, relating to the accident on 06/11/2021, including but not limited to, reports, supplements, notes, video footage including officer's body cams and dash cams, witness statements (whether written or recorded), and photographs.

and any other such record in the possession, custody or control of the said witness, and every such record to which the witness may have access, pertaining to:

Carl Patrick Blackwood Date of Birth: [REDACTED]

at any and all times whatsoever, then and there to give evidence at the instance of the **Defendant Patrick Shih, M.D. and Patrick Shih, M.D., P.A.** represented by **Sam A. Houston**, Attorney of Record, in that Certain Cause No. **2023-32561**, pending on the docket of the **District Court of the 234th Judicial District of Harris County, Texas.**

This Subpoena is issued under and by virtue of Rule 200 and Notice of Deposition Upon Written Questions on file with the above named court, styled

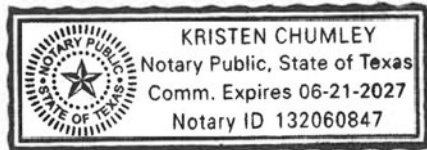
CHERYL DURBIN, AS NEXT FRIEND OF CARL BLACKWOOD

VS.

PATRICK SHIH, M.D., ET AL.

and there remain from day to day and time to time until discharged according to law.

WITNESS MY HAND, this 12th day of July, 2023.





NOTARY PUBLIC

176.8 Enforcement of Subpoena. (a) **Contempt.** Failure by any person without adequate excuse to obey a subpoena served upon that person may be deemed a contempt of the court from which the subpoena is issued or a district court in the county in which the subpoena is served, and may be punished by fine or confinement, or both.

OFFICER'S RETURN

Came to hand this _____ day of _____, 20____, and executed this the _____ day of _____, 20____,

in the following manner: By delivering to the witness _____, a true copy hereof.

Returned this _____ day of _____, 20____.

PROCESS SERVER

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

DIRECT QUESTIONS TO BE PROPOUNDED TO THE WITNESS

Custodian of Records for: **Harris County Sheriff's Office**

Records Pertaining To: **Carl Patrick Blackwood**

Type of Records: **The complete investigative file pertaining to Carl Patrick Blackwood, relating to the accident on 06/11/2021, including but not limited to, reports, supplements, notes, video footage including officer's body cams and dash cams, witness statements (whether written or recorded), and photographs.**

1. Please state your full name.

Answer: _____

2. Please state by whom you are employed and the business address and telephone number.

Answer: _____

3. What is the title of your position or job?

Answer: _____

4. Are these memoranda, reports, records, or data compilations, outlined in the subpoena duces tecum, pertaining to the above-named person, in your custody or subject to your control, supervision or direction?

Answer: _____

5. Are you able to identify these aforementioned records as the originals or true and correct copies of the originals?

Answer: _____

6. Please hand to the Officer taking this deposition copies of the memoranda, reports, records, or data compilations, mentioned in Question No. 4. Have you complied? If not, why?

Answer: _____

7. Are the copies which you have handed to the Officer taking this deposition true and correct copies of such memoranda, reports, records, or data compilations.

Answer: _____

8. Were such memoranda, reports, records, or data compilations kept in the regular course of business of this facility?

Answer: _____

9. Was it in the regular course of business of this facility for a person with knowledge of the acts, events, conditions, opinion, or diagnoses, recorded to make the record or to transmit information thereof to be included in such record?

Answer: _____

10. Were the entries on these records made at or shortly after the time of the transaction recorded?

Answer: _____

11. Was the method of preparation of these records trustworthy?

Answer: _____

WITNESS (Custodian of Records)

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, who being first duly sworn, stated upon his/her oath that the answers to the foregoing questions are true and correct. I further certify that the records attached hereto are exact duplicates of the original records.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

**CHERYL DURBIN, AS NEXT FRIEND OF CARL
BLACKWOOD**

VS.

**PATRICK SHIH, M.D., PATRICK SHIH, M.D., PA.,
HOUSTON NORTHWEST OPERATING COMPANY,
L.L.C., D/B/A HCA HOUSTON HEALTHCARE
NORTHWEST, A/K/A HOUSTON NORTHWEST
MEDICAL CENTER**

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IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

234TH JUDICIAL DISTRICT

WAIVER OF NOTICE

Our client, **Sam A. Houston**, has commissioned Liberty Litigation Support LLC to obtain records on **Carl Patrick Blackwood** from the following custodian for use in the above referenced case.

IF COPIES ARE DESIRED, PLEASE INDICATE BELOW BY MARKING Y OR N. Original records will be held inhouse for 30 days. Copies may not be available after that time.

- _____ 1 City of Houston - EMS (EMS)
- _____ 2 City of Houston - EMS (Billing)
- _____ 3 Fondren Orthopedic Group (Medical)
- _____ 4 Fondren Orthopedic Group (Billing)
- _____ 5 Fondren Orthopedic Group (Radiology)
- _____ 6 PAM Health Rehabilitation Hospital of Humble (Medical)
- _____ 7 PAM Health Rehabilitation Hospital of Humble (Billing)
- _____ 8 Better Life Spine & Pain Center (Medical)
- _____ 9 Better Life Spine & Pain Center (Billing)
- _____ 10 Zion Healthcare of Cypress (Medical)
- _____ 11 Zion Healthcare of Cypress (Billing)
- _____ 12 Premier General & Colorectal Surgery (Medical)
- _____ 13 Premier General & Colorectal Surgery (Billing)
- _____ 14 Modern Heart & Vascular (Medical & Radiology)
- _____ 15 Modern Heart & Vascular (Billing)
- _____ 16 Crimson Heights Health & Wellness (Medical & Radiology)
- _____ 17 Crimson Heights Health & Wellness (Billing)
- _____ 18 Memorial Hermann Health System (Medical)
- _____ 19 Memorial Hermann Health System (Billing)
- _____ 20 Memorial Hermann Health System (Radiology)
- _____ 21 Texas ENT Specialists (Medical)
- _____ 22 Texas ENT Specialists (Billing)
- _____ 23 Texas ENT Specialists (Radiology)
- _____ 24 Strategic Wound Care (Medical)
- _____ 25 Strategic Wound Care (Billing)
- _____ 26 CHI St. Luke's Health - The Woodlands Hospital (Medical)
- _____ 27 CHI St. Luke's Health - The Woodlands Hospital (Billing)
- _____ 28 CHI St. Luke's Health - The Woodlands Hospital (Radiology)
- _____ 29 Texas Surgical Dermatology (Medical)
- _____ 30 Texas Surgical Dermatology (Billing)
- _____ 31 IPR Healthcare System, Inc. (Medical)
- _____ 32 IPR Healthcare System, Inc. (Billing)
- _____ 33 Pinard Home Health (Medical)
- _____ 34 Pinard Home Health (Billing)
- _____ 35 HarmonyCares Medical Group (Medical)
- _____ 36 HarmonyCares Medical Group (Billing)
- _____ 37 HarmonyCares Medical Group (Radiology)

- _____ 38 **Wound Evolution | Wound Care & Hyperbaric Medicine (Medical)**
- _____ 39 **Wound Evolution | Wound Care & Hyperbaric Medicine (Billing)**
- _____ 40 **UTMB Health (Medical)**
- _____ 41 **UTMB Health C/O Document Access Services (Billing)**
- _____ 42 **UTMB Health (Radiology)**
- _____ 43 **Baylor College of Medicine (Medical)**
- _____ 44 **Baylor College of Medicine (Billing)**
- _____ 45 **Baylor College of Medicine (Radiology)**
- _____ 46 **Houston Methodist Hospital (Medical)**
- _____ 47 **Houston Methodist Hospital c/o Document Access Services (Billing)**
- _____ 48 **Houston Methodist Hospital (Radiology)**
- _____ 49 **Houston Cardiovascular Associates (Medical)**
- _____ 50 **Houston Cardiovascular Associates (Billing)**
- _____ 51 **Nexus Neurorecovery Center (Medical & Radiology)**
- _____ 52 **Nexus Neurorecovery Center (Billing)**
- _____ 53 **Harris County Sheriff's Office (Police report)**

I agree that I and/or my firm will be responsible for payment of the copies of records ordered on this waiver. I acknowledge that invoices are due and payable within 30 days of receipt and that actions for collection of services are performable and payable in Harris County, Texas.

_____ I DO AGREE TO WAIVE THE NOTICE PERIOD.
 _____ I DO NOT AGREE TO WAIVE THE NOTICE PERIOD.

Dated: July 12, 2023

 Attorney Signature

 Attorney Name

 Firm Name

 Delivery Address or Email

Please Return To: **Liberty Litigation Support LLC**
7171 Highway 6 North, Suite 250
Houston, TX 77095
(281) 200-5320 or (281) 200-5310 Fax (713) 533-8997
Email: records@libertylitsupport.com

NOTE: RETURN OF THIS FORM IS REQUIRED WITHIN TWENTY (20) DAYS TO PROCESS YOUR REQUEST. ANY CANCELLATION OF THE ABOVE MUST BE IN WRITING. IF THE RECORDS HAVE ALREADY BEEN COPIED AND FEES INCURRED, THEN BILLING WILL BE PRORATED ACCORDINGLY.

Automated Certificate of eService

This automated certificate of service was created by the eFiling system. The filer served this document via email generated by the eFiling system on the date and to the persons listed below. The rules governing certificates of service have not changed. Filers must still provide a certificate of service that complies with all applicable rules.

Envelope ID: 77464528

Filing Code Description: No Fee Documents

Filing Description: Notice of Intention to Take Deposition by Written Questions

Status as of 7/12/2023 4:50 PM CST

Case Contacts

Name	BarNumber	Email	TimestampSubmitted	Status
Tommy Hastings		tommy@hastingsfirm.com	7/12/2023 4:44:13 PM	SENT
Sam A. Houston		shouston@schlawyers.com	7/12/2023 4:44:13 PM	SENT
Sam A. Houston		shouston@schlawyers.com	7/12/2023 4:44:13 PM	SENT
Cari Collins		ccollins@schlawyers.com	7/12/2023 4:44:13 PM	SENT
Cari Collins		ccollins@schlawyers.com	7/12/2023 4:44:13 PM	SENT
Cynthia L. Freeman		cfreeman@schlawyers.com	7/12/2023 4:44:13 PM	SENT
Cynthia L. Freeman		cfreeman@schlawyers.com	7/12/2023 4:44:13 PM	SENT
Gerald Castillo		gcastillo@serpeandrews.com	7/12/2023 4:44:13 PM	SENT
Amanda Johnson		ajohnson@serpeandrews.com	7/12/2023 4:44:13 PM	SENT
Madison Addicks		maddicks@serpeandrews.com	7/12/2023 4:44:13 PM	SENT