

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF NEW HAMPSHIRE

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IN RE: ATRIUM MEDICAL CORP. *
C-QUR MESH PRODUCTS LIABILITY *
LITIGATION *
* * * * *

1:16-md-02753-LM
September 11, 2019
9:03 a.m.
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REDACTED TRANSCRIPT OF MOTION TO DISMISS
DAY THREE - MORNING SESSION
BEFORE THE HONORABLE LANDYA B. McCAFFERTY

Appearances:

For the Plaintiffs:

Jonathan D. Orent, Esq.
Motley Rice, LLC

Brian A. Glasser, Esq.
Katherine E. Charonko, Esq.
Bailey & Glasser LLP

Susan Aileen Lowry, Esq.
Upton & Hatfield, LLP

D. Todd Mathews, Esq.
Gori, Julian & Associates, PC

For the Defendants:

Mark S. Cheffo, Esq.
Katherine Armstrong, Esq.
Katherine E. Unger Davis, Esq.
Dechert, LLP

APPEARANCES CONTINUED:For the Defendants:

Pierre A. Chabot, Esq.
Wadleigh, Starr & Peters PLLC

Court Reporter:

Liza W. Dubois, RMR, CRR
Official Court Reporter
U.S. District Court
55 Pleasant Street
Concord, New Hampshire 03301
(603) 225-1442

1 P R O C E E D I N G S

2 THE CLERK: The Court has before it for
3 consideration today day three in the motion to dismiss
4 hearing in In Re: Atrium Medical Corporation C-Qur Mesh
5 Products Liability Litigation, MDL docket number
6 16-md-2753-LM.

7 THE COURT: Okay. I think it's time for the
8 cross of Mr. Carlton.

9 And you were under oath, placed under oath
10 yesterday. We don't need to do that, place you -- re --
11 reoath you, do we?

12 THE WITNESS: No, we do not.

13 THE COURT: All right. So I'll just remind
14 you you're under oath.

15 Attorney Orent.

16 MR. ORENT: Thank you, your Honor.

17 CROSS-EXAMINATION

18 BY MR. ORENT:

19 Q. Good morning, Mr. Carlton. How are you?

20 A. Good morning, Mr. Orent. Doing well.

21 Q. You clearly remember my name, so I don't need
22 to reintroduce myself, but I'm glad to talk to you
23 again.

24 You've been here for the last three days,
25 correct?

1 A. Yes, I have.

2 Q. Okay. And you've seen all of the witnesses
3 and heard all of the testimony so far; is that right?

4 A. Yes, I have.

5 Q. Okay. Today, one of your job titles is
6 president of Atrium Medical?

7 A. Yes, it is.

8 Q. Okay. You would agree with me that some of
9 the transactions that are involved in the sale of
10 medical devices that Atrium manufactures are complex
11 transactions, right?

12 A. I would agree they're complex transactions,
13 yes.

14 Q. Okay. In fact, all of the sales, as you
15 described yesterday and under the new contract that
16 began in 2017, all of the sales are fairly sophisticated
17 types of transactions, correct?

18 A. Can -- you said a specific date there?

19 Q. Right.

20 A. I'm sorry.

21 Q. I was referring to the October 21st, 2017,
22 contract --

23 A. Okay.

24 Q. -- where Getinge USA replaced Maquet US Sales?

25 A. Yes.

1 Q. Okay. So let me ask this in two separate
2 questions.

3 The transaction that you discussed yesterday
4 where Atrium produces and sterilizes its medical
5 devices, sells it to Maquet CV LLC, who then sells it to
6 Maquet CV US Sales, who then sells it to customers and
7 then the profit gets returned in the way you described
8 yesterday, that is a fairly sophisticated and complex
9 transaction, correct?

10 A. It's the transfer of funds. I think each
11 individual transaction may not be complex. I think when
12 you're dealing with multiple transactions, you could
13 call that complexity.

14 Q. Okay. Would you agree with me that contracts
15 and documentation for things like that are very
16 important?

17 A. Yeah. As you -- having transactions are
18 important, yeah. I mean, having documentation for
19 transactions is important.

20 Q. Okay. And it wouldn't be a good thing for a
21 medical company to sell its medical devices without a
22 contract, correct? Through a transaction like this.

23 A. You would want a -- I mean, we created
24 contracts for that.

25 Q. Okay. And there were two of them and we'll go

1 through that in a little bit, right? There's the one
2 with Maquet Entities and then there's the one with
3 Getinge US Sales, right?

4 A. I think there's more than just one contract.
5 I think there's multiple contracts with different
6 entities globally.

7 Q. Right. We'll get through that in a minute.

8 A. All right.

9 Q. I also want to just, as a preliminary matter,
10 go through -- we heard a lot of names yesterday and I
11 just want to make sure that I got it straight.

12 So Maquet, which was -- or Maquet Medical
13 Systems, that's not a -- that's not an incorporated
14 entity, correct?

15 A. So Maquet Medical Systems, to my knowledge, is
16 not. It's Maquet Holding would be what some people
17 refer that to. But there's a lot of Maquet -- there's a
18 lot of entities with the name Maquet in them.

19 Q. Okay. When referring to the medical systems
20 unit as Maquet, that's not incorporated, right?

21 A. Not to my knowledge, no.

22 Q. Okay. And that became Acute Care Therapies, I
23 think you testified to yesterday?

24 A. Yeah. And for some clarity, it wasn't the
25 exact structure that became Acute Care Therapies. Some

1 of the businesses that were part of Maquet Medical
2 Systems were no longer grouped in that grouping. So
3 some of them went over to a different division within
4 Getinge Group.

5 Q. Okay. But for simplicity's sake, ACT is the
6 essential replacement of the Maquet Medical Systems
7 group, is this unit?

8 A. Yes. 75 percent, 80 percent of it, yes.

9 Q. Okay. And the Getinge Group, I think you
10 testified also, is not an incorporated entity, right?

11 A. Getinge Group, as I stated, was a -- I
12 consider it a brand name or a -- you know, for
13 encompassing all subsidiaries, indirect and direct, of
14 Getinge AB.

15 Q. Okay. Now, yesterday you were here when
16 Mr. Messina was questioned about his belief and his
17 opinion that mesh liability was known or knowable by
18 Atrium as of sometime in 2014. Do you recall hearing
19 that testimony?

20 A. I do recall hearing that testimony.

21 Q. Okay. Did you disagree with him?

22 A. What, that there was lawsuits on mesh? I
23 would agree that there were lawsuits in mesh in 2014.

24 Q. Okay. In fact, you were aware of substantial
25 litigation around polypropylene mesh in 2014; isn't that

1 right?

2 A. Can you clarify your definition of
3 substantial?

4 Q. Sure. You were aware that there had been some
5 major hernia mesh litigation around Composix Kugel mesh,
6 right?

7 A. Yes.

8 Q. All right. And you were aware that that
9 settled in around I think 2011 or '12 for about
10 \$200 million, right?

11 A. I don't recall exactly the figure, but I'll go
12 with you on that.

13 Q. Okay. And you were also aware that there were
14 tens of thousands of polypropylene mesh cases used for
15 other indications in West Virginia courts against about
16 33 medical mesh manufacturers, right?

17 A. Are you referring to the pelvic mesh?

18 Q. Yes.

19 A. I was aware of the -- the pelvic mesh
20 litigation, yes.

21 Q. Okay. And Atrium had an ongoing concern
22 through 2013 and '14 and even later about the uses of
23 its products because of potential litigation and
24 liability relating to certain uses of its devices,
25 right?

1 A. You mean off-label uses of the device?

2 Q. Potentially, yeah.

3 A. Yeah, there were concerns about off-label
4 usage, yes.

5 Q. Okay. And you were aware that in 2013 --
6 2014, the first of the vaginal mesh manufacturers,
7 polypropylene mesh manufacturers, settled for almost
8 \$830 million, right?

9 A. I'm not sure that I was aware of that. It
10 doesn't recall, but I may have been informed if it did
11 occur.

12 Q. Would you disagree?

13 A. You know, in -- I wouldn't disagree that that
14 happened.

15 Q. Okay. In 2012, you were with Atrium, correct?

16 A. Yes.

17 Q. And you were aware -- John, if I could have
18 exhibit -- Plaintiff's 3, if we could go to the second
19 page, and if you could zoom in on that second paragraph.

20 Sorry. I just called you John. I thought
21 John was there. Hi, Gina.

22 And could we just back up and I want to get a
23 little bit more of the whole paragraph.

24 Thank you.

25 You see here that on this date in December

1 2012, Atrium identified 629 complaint files containing
2 630 complaints. One was filed with two complaints by
3 accident.

4 Do you see that, in the first sentence?

5 A. So Atrium identified a total of 629 files
6 containing 630 complaints. Is that what you --

7 Q. Right. Do you see that?

8 A. Yes.

9 Q. Okay. And if you look at the next sentence,
10 14 of those were specific to one type of complication,
11 that is C-Qur infections, referenced in the FDA warning
12 letter.

13 A. Uh-huh.

14 Q. Right?

15 A. Yes.

16 Q. Okay. And these complaints, these 630
17 complaints, had not been reported to the FDA and Atrium
18 had to go through them to determine how many of those
19 complaints needed to be reported to FDA through the MDR
20 process, right?

21 A. Yeah, they were complaints that were already
22 reported to Atrium. It was just whether they were filed
23 to the FDA.

24 Q. Okay. And it turned out that 231 of those
25 complaints had been determined to require reporting to

1 the FDA, right?

2 A. That is because we managed to become more
3 conservative in our approach to reporting.

4 Q. You would agree with me that based on this
5 letter, 231 complaints were determined to require MDR
6 reporting?

7 A. Based on the method that we used to report,
8 yes.

9 Q. Okay. And MDR reporting is a requirement of
10 FDA, right?

11 A. The -- yes, you are required by the FDA to
12 report MDRs, yes.

13 Q. And just for the record, can you tell us what
14 MDR is?

15 A. Medical device reporting.

16 Q. Thank you.

17 And if we could turn to Exhibit 183 and if we
18 could go to the bottom of page 1, paragraph A.

19 Do you see there in paragraph a: The C-Qur
20 family of surgical mesh devices commercially released
21 and continued to be distributed without adequate
22 verification of sterile package integrity or performance
23 over the labeled shelf life.

24 Do you see that?

25 A. I'm aware of that, yes.

1 Q. Okay. And if we turn the page to observation
2 number 3 on page 4. Excuse me.

3 And here, Atrium -- FDA finds that the
4 procedure for corrective and preventative actions has
5 not been adequately established. And, again, this is
6 with specific regard to C-Qur, correct?

7 If you look at paragraph --

8 A. Yeah, I'm -- I'm trying to read the whole
9 thing.

10 Can you -- can I see the next page, just to
11 read --

12 Q. Absolutely.

13 A. -- what it's all related to?

14 Q. Would you like a paper copy?

15 A. That would -- actually, if you just zoom in on
16 that top part, I think it'll be all right.

17 Okay. Yeah, I -- I'm aware of what that
18 finding is related to.

19 Q. Okay. And corrective and preventative actions
20 are where nonconforming products or nonconformities in
21 process have been identified and they need to be fixed,
22 essentially; is that right?

23 A. The -- you have identified something within
24 your quality system. So we identified a CAPA. We
25 identified that and, yes, the goal was to fix something.

1 Q. Yup. Okay. So I'm going to show you what
2 I've marked as Exhibit 241. And this is a proactive
3 customer letter released on August -- April 29th, 2014,
4 and says: Proactive customer letter. There have been
5 inquiries in regards to Atrium's polypropylene mesh and
6 the release following announcement on FDA's website.

7 Do you see that?

8 A. Yes, I do.

9 Q. And essentially what Atrium is trying to do
10 here in April of 2014 is tell the world that our meshes
11 aren't subject to this and you shouldn't be using it
12 off-label, but for proper use, our mesh is okay. Is
13 that roughly what you're trying to say?

14 A. So can I see -- where does this letter come
15 from --

16 Q. This came --

17 A. -- and when was this sent?

18 Q. This was a draft email, excuse me, a draft
19 letter that was in -- do we have the custodial
20 information?

21 Have you seen this document before?

22 A. I -- I don't know the context with it and the
23 format of it, I'm not familiar with it. So it may have
24 come to me, but I'm just -- I'm only seeing a certain
25 portion of this.

1 Q. Okay. Let's look at Exhibit 242. This is a
2 newspaper article from April 30, 2014, the following
3 day, noting that Endo agrees to a \$830 million
4 settlement of vaginal mesh cases.

5 As president of a medical device company, you
6 would want to be up to date on competitive information,
7 correct?

8 A. I wasn't president at this time, but yes, I
9 would, as president, like to be up to date on
10 significant events in various industries, yes.

11 Q. Okay. But even in your head, in your role in
12 marketing, you would want to be aware of things like
13 this, right?

14 A. Yes, very much so. Yes.

15 Q. Okay. So do you agree with me that mesh and
16 mesh litigation was something that -- that Atrium was
17 aware of and would be concerned about monitoring?

18 A. The -- we were aware of the various items that
19 you have identified. So, yes, we were aware of Kugel
20 and also of vaginal mesh or pelvic mesh, as it's more
21 known.

22 Q. I'd like to turn to Exhibit 192.

23 And before we do that, actually, let me ask
24 you, do you know who Scott Waxler is?

25 A. Scott Waxler, I believe -- yes, I do. He was

1 the -- he's an invest -- I want to call him an
2 investment banker, but he's a banker of some sort to
3 deal with the transactional merger. I can't remember
4 his exact title.

5 Q. And who is Eric Bielen?

6 A. Eric Bielen is our -- he's had a couple of
7 titles recently, so I'm just trying to -- but he's in
8 charge of our mergers and acquisitions and divestitures.

9 Q. And he's an employee of Getinge AB?

10 A. Currently, I think -- I don't -- I can't say
11 that for sure. I think because he's based out of
12 Belgium, he may not be an employee of Getinge AB.

13 Q. Would you agree that at one point he was?

14 A. I know -- I would agree that he's been part of
15 a subsidiary or an indirect subsidiary. I don't know
16 for sure that he was an employee of Getinge AB.

17 Q. All right. Would you agree that -- well,
18 let's look at Exhibit 192.

19 And Scott Walker -- excuse me --

20 A. Waxler.

21 Q. -- Waxler was involved in the project star
22 attempt to sell the mesh unit from -- to outside
23 individuals, correct?

24 A. Can you rephrase that, repeat that?

25 Q. Sure. Scott Waxler was hired as an investment

1 banker to divest the hernia mesh business, correct?

2 A. And, again, the investment banker -- I'm not
3 sure on the exact title, but, yes, I would agree with
4 you on that.

5 Yes, there you are. He's an investment
6 banker.

7 Q. All right. So I want to show you an email
8 from Kai Trompeter to Scott Waxler dated 3/20/17.

9 A. Kai is how you produce his name.

10 Q. Okay. And Kai was one of the interested
11 bidders in the mesh line, correct?

12 A. He has been interested on and off over a
13 number of years, yes.

14 Q. Okay. And he says: Can you give me a brief
15 update on the below? And the title of the article is
16 Ohio Woman Sues Atrium Over C-Qur Hernia Injuries.

17

18

19

20 Do you see that?

21 A. I see that, yes.

22 Q. Okay. And if we could look at the next email
23 in the sequence, it says -- Scott forwards this to
24 Michael Dupont.

25 It says: Michael, can you please provide

1 answer to me on Kai's question below. Have a great
2 weekend. PS, the issue that this question represents
3 seems to be representative of forward deal momentum.

4 Do you see that?

5 A. Yes.

6 Q. Okay. If we turn the page.

7 And Eric Bielen responds to this and says:

8 Dear Scott, [REDACTED]

9 [REDACTED]

10 [REDACTED]

11 [REDACTED]

12 [REDACTED]

13 [REDACTED]

14 Do you see that?

15 A. Insightra.

16 Q. Insightra. Do you see that?

17 A. Yes, I do.

18 Q. Okay. And he is -- Eric Bielen is -- his
19 address is in Göteborg, Sweden, on this document,
20 correct?

21 A. He has a Getinge -- I mean, he has a Göteborg,
22 Sweden, address, but I know he lives in Belgium.

23 Q. Well, at least as of 2017, buyers were
24 concerned about liability for hernia mesh litigation
25 from Atrium's devices, correct?

1 A. Yes, they were.

2 Q. Okay. I'm going to show you Plaintiff's
3 Exhibit 200, please. Excuse me, 120.

4 And would you agree with me that this is a
5 Zurich insurance policy that Getinge AB purchased?

6 A. It says policyholder, Getinge AB with Zurich.
7 An insurance policy, yes.

8 Q. Okay. And if we could look down, this is
9 products liability for mesh products?

10 A. Products liability for mesh products, yes.

11 Q. Okay. And who's the policyholder?

12 A. Getinge AB.

13 Q. And who's the insured?

14 A. It says the insured is Getinge AB, including
15 its subsidiaries in the USA.

16 Q. And what is the insured business?

17 A. Manufacturing, marketing, and sales of mesh
18 implants.

19 Q. Okay. And what is the limit of liability?

20 A. It says [REDACTED]

21 [REDACTED]

22 Q. Okay. And if you would turn to Exhibit 122.

23 And if we could pull that up, Gina.

24 [REDACTED]

25 [REDACTED]

1 A. [REDACTED]

2 [REDACTED]

3 Q. Okay. And if you would go to the "whereas"
4 paragraph, does this appear to be for mesh product
5 liability insurance?

6 A. So it says: Whereas the mesh products is
7 covered under the insurance policies.

8 Yes.

9 Q. And if you would read out loud into the record
10 the next line, beginning with "the parties have."

11 A. [REDACTED]

12 [REDACTED]

13 [REDACTED]

14 [REDACTED]

15 [REDACTED]

16 [REDACTED]

17 [REDACTED]

18 [REDACTED]

19 [REDACTED]

20 [REDACTED]

21 [REDACTED]

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[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Q. All right. I want to now talk to you a little bit about your employment.

Yesterday when you were here, you testified that your employment currently was with Vascular Systems as well as Atrium and you mentioned a facility in France. Do you recall that?

A. Can you rephrase that question? Sorry.

Q. Sure. Do you recall yesterday testifying that you're the managing director of Vascular Systems?

A. I testified that I am the managing director of

1 Vascular Systems.

2 Q. And you were asked a question yesterday, can
3 you explain why this agreement -- and if we could bring
4 up Exhibit 7?

5 You were asked: Can you explain why this
6 agreement was with Getinge Group instead of with Atrium
7 Medical?

8 Do you recall that question?

9 A. Yes.

10 Q. And I believe your answer was essentially that
11 you were managing director of Vascular Systems at the
12 time, so you also oversaw La Ciotat.

13 Do you recall that, approximately?

14 A. I don't recall that that's what I responded on
15 this particular document.

16 Q. Let me ask you --

17 A. I responded on the next document that we
18 reviewed.

19 Q. Let me ask you, this agreement is made on
20 November 1st, 2016, by and between Getinge Group and
21 Chad Carlton, right?

22 A. That is correct.

23 Q. And Getinge Group's not a legal entity, is it?

24 A. No, it is not.

25 Q. Okay. So you signed a contract with a

1 nonlegal entity, right?

2 A. Yes.

3 Q. Okay. And if we look at your positions and
4 duties -- Position and Duties. Executive shall serve as
5 managing director of Hudson/Merrimack and as president
6 of Atrium Medical Corporation. Executive shall be based
7 in Merrimack, New Hampshire, reporting to Jens Viebke,
8 president, Acute Care Therapies, and shall have such
9 responsibilities and duties consistent with such
10 position. Executive acknowledges that Getinge may
11 reassign him to a different position in the company
12 based on business requirements.

13 Do you see that?

14 A. Yes, I do.

15 Q. Did I read that correctly?

16 A. Yes, you did.

17 Q. Okay. And you testified earlier today that
18 Acute Care Therapies is not a legal entity, correct?

19 A. Correct.

20 Q. All right. So Jens Viebke is president of an
21 entity that is not a legal entity, right?

22 A. Correct.

23 Q. All right. And Getinge, an entity which is
24 not a legal entity, may reassign you to a different
25 position in the company based upon its requirements,

1 right?

2 A. Correct.

3 Q. Okay. And let's scroll down to the
4 Compensation.

5 In consideration of the agreements made by
6 executive herein and the performance by executive of his
7 obligations under, during the employment term, Getinge
8 agrees to pay executive pursuant to Getinge normal and
9 customary payroll procedures a base salary equivalent
10 to -- and I'm not going to say it because I don't know
11 that this needs to be in the record. The base salary
12 shall be subject to annual review, although any
13 determination to increase the base salary shall be
14 within Getinge's sole discretion.

15 Do you see that?

16 A. Yes, I do.

17 Q. Okay. So in consideration of the agreements,
18 the executive -- and that's you -- and the performance
19 of you under the employment agreement with a nonlegal
20 entity, Getinge, that nonlegal entity is agreeing to pay
21 you; right?

22 A. Yeah.

23 Q. Okay.

24 A. And they still do.

25 Q. Okay. And they -- the nonlegal entities

1 reviews your base salary and adjusts it at its
2 discretion, correct?

3 A. Technically my boss does, yes.

4 Q. And, in addition, if we go down to the bottom,
5 under Standard Benefits: During the employment term,
6 executive shall be eligible to participate in the
7 employee benefits plans currently or hereafter
8 maintained by Getinge of general applicability to other
9 like executives of Getinge.

10 So here, this paragraph, they're saying that
11 the executive -- you can participate in plans maintained
12 by an entity that's not a legal entity, right?

13 A. It -- it's plans they've created as a group,
14 yeah.

15 Q. Okay. It's not a legal entity.

16 And to other executives of Getinge, which
17 isn't a legal entity, right?

18 A. Right.

19 Q. Okay. Let's turn the page.

20 Getinge's group medical, dental, vision,
21 disability, life insurance, and flexible spending
22 account plans are available to you, correct?

23 A. Yes.

24 Q. Okay. And so a nonlegal entity is binding
25 itself to provide you medical, dental, vision,

1 disability, and life insurance under this contract,
2 correct?

3 A. And I happen to get life insurance, dental,
4 vision, all that.

5 Q. Okay. And the Getinge executive vehicle
6 program, you're entitled to a Getinge executive vehicle
7 under this agreement, correct?

8 A. Yes, but I don't utilize one.

9 Q. Okay. But you are entitled to one
10 nonetheless?

11 A. Yes, I am.

12 Q. Okay. And so a -- a nonlegal entity is
13 binding itself to giving you the option of using an
14 executive vehicle, right, under your contract?

15 A. As -- yes.

16 Q. Okay. Executive life and disability program,
17 here Getinge is offering you eligibility to participate
18 in their executive life and disability program, correct?

19 A. Yes, it is.

20 Q. Okay. And, again, this is a nonlegal entity
21 that's binding itself to giving you executive life and
22 disability, correct?

23 A. Yes.

24 Q. And if we turn to the back of this agreement,
25 on page 7, we see that this is signed by Jens Viebke,

1 president of Acute Care Therapies. Do you see that?

2 A. Yes, I do.

3 Q. Okay. And, again, Acute Care Therapies is not
4 a legal entity, right?

5 A. Correct.

6 Q. Okay. And it's also signed by Thomas
7 Marschal, vice-president human resources, Acute Care
8 Therapies; correct?

9 A. Correct.

10 Q. Again, not a legal entity, right?

11 A. Correct.

12 Q. Okay. So these two gentlemen are signing and
13 binding a non- -- an entity that is -- that doesn't
14 exist?

15 A. Yes.

16 Q. Okay. I'd like to turn to Exhibit 41.

17 And this is the indemnity agreement that you
18 spoke about yesterday. If we could zoom in on the front
19 part.

20 Now, yesterday you testified, and I think a
21 moment ago you testified, that La Ciotat facility is a
22 separate entity and I think that's the explanation you
23 offered as to why Getinge was offering the
24 indemnification; is that right?

25 A. Yes. La Ciotat is Intervascular SAS.

1 Q. Okay. So if we look at this indemnity
2 agreement in the first paragraph: Whereas the Getinge
3 Group, acting through its parent company, Getinge AB,
4 together with Atrium Medical Corporation, collectively
5 Getinge, desires Chad Carlton to serve as an officer and
6 director of Atrium Medical Corporation and Getinge
7 further desires to indemnify executive in accordance
8 with the terms and conditions of this indemnification
9 agreement.

10 Do you see that?

11 A. Yes, I do.

12 Q. And so if I understand, your testimony is and
13 from yesterday -- well, strike that.

14 I don't see La Ciotat in that first sentence:
15 Whereas the Getinge Group, acting through its parent
16 company, Getinge AB, and together with Atrium Medical
17 Corporation, desires Chad Carlton to serve as officer
18 and director of Atrium Medical Corporation.

19 Do you see the word La Ciotat in there?

20 A. No, because that's a city.

21 Q. Okay. Do you see the name of the -- the
22 vascular entity, the company?

23 A. No.

24 Q. Okay. In fact, it's nowhere in this
25 indemnification agreement, is it?

1 A. No, it's not.

2 Q. Okay. So what this agreement says within the
3 four corners of the agreement is that Getinge AB,
4 together with Atrium Medical Corporation, desires
5 Chad Carlton to serve as an officer and director of
6 Atrium Medical, right?

7 A. Yes.

8 Q. Okay. It doesn't make any mention of any
9 other facilities, right?

10 A. Not the La Ciotat, nor the Wayne facility --

11 Q. Okay.

12 A. -- that I have products I oversee.

13 Q. So we have no proof other than your word that
14 this indemnification agreement is for anything other
15 than your job at Atrium, right? We have no documented
16 proof.

17 A. It's my indemnification agreement. I know why
18 I had it created.

19 Q. I'm not questioning that, sir, but I'm asking
20 within the four corners of the document, we have no
21 documentation to suggest that this is for what you've
22 said it was for.

23 A. Except for my word.

24 Q. Okay. We talked a little bit ago about
25 contracts and the importance of contracts. Do you

1 recall that testimony?

2 A. The contracts -- are you meaning with selling
3 medical devices?

4 Q. Right. That's all --

5 A. Is that what you're referring back to?

6 Q. Do you recall that?

7 A. Yes, I do.

8 Q. And it's important when you're selling medical
9 devices, excuse me, when you're doing contracts that
10 they be accurate, right?

11 A. I -- I've learned that you always want to be
12 accurate, but I often find that contracts are not always
13 accurate.

14 Q. Okay. Well, I'm going to hand you or show
15 you -- and maybe I should hand you for the purposes of
16 this a paper copy because of the size of this exhibit.

17 Your Honor, may I approach the witness?

18 THE COURT: Yes.

19 A. Thank you.

20 Q. Sure.

21 Okay. So this is a distributorship agreement
22 that has been testified to as being the agreement that
23 sets out the deal that you have set forth on that easel;
24 is that right?

25 A. That easel is a general piece of the

1 high-level standpoint. It is not the specific piece --

2 Q. Right. But this --

3 A. -- of transactions that take place, yeah.

4 Q. I understand. But this is the distributorship
5 agreement --

6 A. Yes.

7 Q. -- that governs --

8 A. Let me review before --

9 This is an agreement between Atrium and Maquet
10 Medical Systems. I'm not sure that I see -- and I'm not
11 completely familiar, I didn't read through this whole
12 document, but I don't see Maquet Cardiovascular LLC on
13 this.

14 Q. Well, that's because they're not on there.

15 This is the only distribution agreement prior
16 to the Getinge USA agreement that we'll get to that
17 later that was produced in this litigation and several
18 witnesses have testified about this agreement as being
19 the operative agreement. Do you disagree with those
20 witnesses?

21 A. If they are more familiar with the contract
22 than I am, I -- I don't know who those witnesses are
23 specifically.

24 Q. All right. So let me ask you, looking at
25 this, you would agree with me that if we look at the

1 first paragraph, Atrium Medical Corporation, a Delaware
2 corporation and part of the Maquet Getinge Group,
3 hereinafter referred to as Maquet, and Maquet Medical
4 Systems USA, established at 45 Barbour Pond Drive,
5 hereafter Maquet SSU, hereby enter into the following
6 agreement.

7 Do you see that?

8 A. Yes, I do.

9 Q. Okay. And you would agree with me that this
10 legal entity is -- excuse me, this is not a legal entity
11 entering into this contract, true?

12 A. If it's Maquet Medical Systems USA, is it
13 USA -- is this the USA Sales that we say, Maquet Medical
14 Systems USA Sales LLC.

15 Q. Medical Systems isn't a -- isn't a legal
16 entity, correct?

17 A. No, but the -- in terms of Maquet Medical
18 Systems USA, maybe. I don't know. This is from
19 December 31st, 2012, so -- whereas that relationship
20 occurred in January of 2014.

21 So I'm just trying to -- I'm trying to mesh
22 this right now.

23 Q. All right. Well, there is no agreement from
24 2014.

25 A. Okay.

1 Q. Have you ever seen an agreement from 2014?

2 A. I wasn't responsible in that area in 2014.

3 Q. Well, you testified about this relationship
4 yesterday, right?

5 A. Yes, I did.

6 Q. Okay. Can you show me anywhere in this
7 document where the profit of 50 percent going back to
8 Atrium is?

9 A. And, by the way, that's an approximate profit
10 that comes back and it depends -- I believe I said
11 yesterday it depends on the product line.

12 Q. But can you show me anywhere where that
13 document -- or this document shows those approximate
14 product profit lines?

15 A. I don't know that there's any prices
16 associated with this document.

17 Q. Okay. And if we look at the agreement, I want
18 you to turn to the signature page, on page 14. Do you
19 see this is dated December 31st, 2012?

20 A. Yes, I do.

21 Q. And what I want to do is I want to pull down
22 the bottom of this page, the document. How is it that
23 this document was created on April 17th, 2013, it is
24 dated and signed December 31st, 2012. Do you have an
25 answer for that?

1 A. I do not have an answer for that.

2 Q. Okay. I'd like to turn to page 8. Excuse me,
3 page 7.

4 A. So, by the way, I did notice that it says
5 Maquet Cardiovascular LLC on the document that you kind
6 of showed down there.

7 Q. On page 8?

8 A. Down at the bottom --

9 Q. You can flip through it.

10 A. -- that you just showed me.

11 Q. Yes. Yes, it does, which is one of the
12 entities there.

13 A. Yeah, that's the first --

14 Q. And that doesn't match up with the entity that
15 is the signatory, correct?

16 A. Again, I don't know if there was any
17 transition or change. This was in 2012 versus 2013 or
18 '14.

19 Q. All right. Can we look at page 7, your
20 applicable law and jurisdiction.

21 So presuming it's Maquet Medical, a nonlegal
22 entity, this agreement is to be construed and governed
23 in accordance with the laws of state of Delaware.

24 Do you see that?

25 A. I'm sorry. Page 7 where?

1 Q. I'm sorry. At the bottom, section 11.

2 A. Section 11. Okay.

3 Yes.

4 Q. Okay. And it lists a place of jurisdiction
5 and it lists that the adjudication will be in Delaware,
6 right, and depositions to occur in New Jersey?

7 A. Yes, it does.

8 Q. Okay. And then if we turn to page 8, on the
9 section 14, first paragraph, we see Maquet agreeing to
10 be bound by and adhere to the laws of the United States,
11 right?

12 A. Yup.

13 Q. Okay. If we turn to page 19, we see Medical
14 Systems Internal Guide and Getinge Corporate Manual.
15 Maquet acknowledges receipt and acceptance of the terms
16 contained in the documents referenced below.

17 And these are the Medical Systems documents,
18 right, the Medical Systems group?

19 A. Again, I'm not familiar with these, but I'll
20 take your word for it.

21 Q. Okay. So if you never saw a contract, how
22 were you able to describe that transaction yesterday?
23 Was that based on practice?

24 A. That was through discussions with Gary Sufat.

25 Q. Okay. So you have no personal knowledge of

1 that?

2 A. He signed this contract, but that's his
3 explanation to me.

4 Q. Okay. And when your brother testified, he
5 said: I wouldn't say it was an agreement. It was their
6 integration plan. And they would -- they would pace out
7 what their SSUs, take over sales, so it just started
8 with one or two SSUs and then kept going. And so there
9 was -- it was an overall plan on when -- when the Atrium
10 teams would be -- would be handing off sales
11 responsibilities to the Maquet SSU.

12 And that's at page 207, lines 10 through 25 of
13 his deposition.

14 So would you agree with me that the
15 knowledge -- you're not professing to have more
16 knowledge than your brother, who was president at the
17 time, correct?

18 A. I -- I was aware in certain discussions in
19 terms of integration plans of various SSUs and the time
20 point. I think you probably found that in some of my
21 documents.

22 Q. When your brother says -- so as president of
23 Atrium business unit, did you have any involvement in
24 the discussions as to the terms of the distribution
25 agreement between Atrium and Maquet, page 213, line 16

1 through 214 line 6, when he says: I don't recall, but I
2 don't think there were ever negotiations. I think it
3 was an agreement that was just required to properly
4 transfer the product.

5 Question: So when you say there weren't any
6 negotiations, is it your understanding that this is
7 something that Maquet put in place so that the products
8 could be transferred from Atrium to Maquet and then sold
9 by Maquet?

10 Answer: That would be my assumption.

11 You don't disagree with your brother, do you?

12 A. I disagree that we had no input on it. We set
13 transfer prices.

14 Q. Do you have personal knowledge of that?

15 A. That we set transfer prices?

16 Q. No. Do you have personal knowledge of the
17 negotiation of the contract?

18 A. Of the negotiation contract, no, but I have --

19 Q. Okay.

20 A. -- knowledge that we set transfer prices.

21 Q. Now, if we go back to Exhibit 2, that sales
22 agreement, there's -- there's nothing attached here that
23 is a price list.

24 A. I -- I stated that, yes.

25 Q. Okay. All right. Now, hopefully we can go --

1 we're going to look at Exhibit 66 now, which is the
2 agreement that is in effect now, I believe.

3 You testified yesterday that as of October
4 1st, 2017, Atrium was now setting -- selling through,
5 ultimately, Getinge USA Sales; is that correct?

6 A. Through Maquet Cardiovascular LLC and then
7 through Getinge USA Sales.

8 Q. Okay. And if we look on the first paragraph
9 here on the first page, we see that this agreement is
10 effective October 1st, 2017, commencement date. And
11 that's consistent with what you testified to yesterday,
12 right?

13 A. That is correct.

14 Q. And it's consistent because you would want to
15 make sure that you had an agreement at the time -- you
16 don't want to sell a product -- strike that.

17 It's consistent and you wouldn't want to sell
18 a product without a contract, right, as president?

19 A. As -- as you're aware, they transitioned in
20 terms of their piece to another piece, so we were
21 putting a contract into place to reflect that.

22 Q. Okay. What I'd like to do is I'd like to turn
23 to the signature page. Your signature is -- can be
24 found on Bates ending 2732.

25 Okay. If we could zoom in, Chad Carlton, and

1 that's dated 06 July, 2018, right?

2 A. Yes, it is.

3 Q. And you wrote that?

4 A. Yes, I did.

5 Q. So there's no contract from October 1st, 2017,
6 the commencement date, signed through to 6 July, 2018,
7 right?

8 A. There's no signed contract, no.

9 Q. Okay. So we can't find -- of the two sales
10 agreements, we can't find an accurate agreement that was
11 written without errors, can we?

12 A. I -- as I stated, and I think this probably
13 occurs in many different companies that what you want
14 and put in place may not always seem clear and concise.
15 We try our best.

16 Q. All right. Now, I want to now talk about the
17 sales service agreements. And I think you testified
18 that Atrium participates and receives some services
19 under these agreements, correct?

20 A. Yes.

21 Q. If we could turn to Exhibit 87, please.

22 A. Hang on one second.

23 Okay. Thank you.

24 Q. Okay. So if we look at the first page, this
25 is an agreement between Getinge AB and Atrium Medical

1 Corporation, correct?

2 A. Yes, it is.

3 Q. Okay. And Getinge AB here is called the
4 provider, right?

5 A. Yes, it is.

6 Q. Okay. And then it says where is -- whereas,
7 excuse me -- provider and its affiliated companies
8 constitute a multinational group of enterprises and
9 recipient is a member of this group.

10 Do you see that?

11 A. Yes.

12 Q. And then it goes on to say: All companies of
13 the group have a continuing need for advice and
14 assistance in various areas, including finance,
15 information technology, human resources and management,
16 as set out in Annex 1.

17 Do you see that?

18 A. Yes, I do.

19 Q. Okay. And the service departments of provider
20 are staffed with highly experienced personnel and form a
21 valuable resource which can provide and coordinate a
22 variety of useful and beneficial services in the
23 above-mentioned areas to other companies of the group by
24 drawing on its own resources as well as on those
25 available from other companies in the group or from

1 third parties.

2 Do you see that?

3 A. Yes, I do.

4 Q. And then it says provider is willing to render
5 to recipient -- so, in this case, it's Getinge AB -- is
6 willing to render to recipient -- and recipient being
7 Atrium -- and Atrium desires to use such services.

8 That's what this agreement says, right?

9 A. That's -- you've read it correctly, yes.

10 Q. Okay. Engagement of Provider. Recipient,
11 that would be Atrium, hereby engages provider, that'd be
12 Getinge AB, right --

13 A. Yes.

14 Q. -- okay -- to carry out such of the functions
15 as set in Annex 1 for the company as the recipient may
16 reasonably request and the provider shall agree to
17 perform from time to time.

18 Do you see that?

19 A. From time to time, yes.

20 Q. Okay. And these fees -- excuse me.

21 And we heard earlier, and I think we saw, that
22 there were fees associated with the services, correct?

23 A. Yeah, there are fees associated with the
24 services.

25 Q. Okay. And if we look at Terms and Termination

1 on page 5, we can see that this agreement shall be
2 effective as of November 4th, 2011, right?

3 A. Yes.

4 Q. And that makes sense, because that's the time
5 of the closing of the acquisition by Getinge AB, right?

6 A. Yes, it does.

7 Q. Okay. What I'd like to do is turn the page
8 now and I'd like to zoom in on the signature and the
9 date.

10 So it appears that this agreement was
11 backdated by about two years, correct?

12 A. Well, I think he signed it on that date and it
13 reflected the contract earlier, yes.

14 Q. Okay. Thank you. You can put that aside.
15 I'd like to look at Plaintiff's 89.

16 Okay. So this is a replacement contract that
17 came in and this one, again, is between Getinge AB and
18 the parties listed in Annex 1. And Atrium is a party
19 listed in Annex 1, right?

20 A. Yes, it is. I would believe it is, yes.

21 Q. Okay. At this time, Atrium -- excuse me --
22 Getinge refers to itself as a pass-through entity,
23 right?

24 A. Yes.

25 Q. Otherwise, the process is roughly the same;

1 Atrium -- excuse me, Getinge coordinates services for
2 the benefit of the recipients, right?

3 A. So -- right. Repeat that again. I'm sorry.

4 Q. So, otherwise, despite the name change from
5 provider to pass-through entity, the terms of this
6 agreement are basically the same.

7 A. I'm not familiar enough with the original
8 agreement and this agreement to compare them side by
9 side. The concept is the same, I would agree with you,
10 that they provide services and they serve as a -- as
11 Peter stated in his testimony, as kind of -- they would
12 collect the different invoices and charge that down to
13 us, depending on where it was.

14 Q. They also acted like a general contractor
15 almost, right, coordinating the services?

16 A. I -- I haven't worked with general contractors
17 enough to state if that's how they behave.

18 Q. All right. If you look at the last sentence
19 on the page: Pass-through entity shall provide the
20 services on a continuing basis without any further
21 specific request or whenever recipient places an order
22 for them with any of the group internal service
23 providers.

24 Do you see that?

25 A. Pass-through entity will, through the Getinge

1 internal services provider, render the services to
2 recipients throughout the term of this agreement.
3 Pass-through entity shall provide the services on a
4 continuing basis without any further specific request.

5 So it's meaning it will continue on without
6 having to do multiple requests, yes.

7 Q. Okay. All right. And if we turn to page 4,
8 this agreement was signed on behalf of pass-through
9 entity by Joacim Lindoff on 3/1/2017. Do you see that?

10 A. Joacim, yes.

11 Q. Okay. If we turn the page, we see just a
12 little bit later, on 6 April, 2017, Steve Emery signs
13 for Atrium.

14 Do you see that?

15 A. Yes.

16 Q. And if we turn to page 12, we see: Acute Care
17 Therapies business support services include, but not
18 limited to, the following services.

19 So would you agree with me that these are the
20 types of services that Acute Care Therapies' businesses
21 would be able to receive?

22 A. Give me a second. Sorry.

23 Okay. I'm familiar -- yeah, they can provide
24 some of these, yes, different entities, including our
25 entity, yeah.

1 Q. Okay. And so they provide market analysis,
2 right?

3 A. Yeah, we do that as well.

4 Q. Okay. They provide some global solutions
5 management, right?

6 A. Yeah.

7 Q. Commercial operations?

8 A. Okay. Yes.

9 Q. Okay. Finance and PMO?

10 A. Yeah. We do a lot of that internally, though.

11 Q. But you do receive some support, right?

12 A. Yeah, but it's local, so it's kind of a
13 different transaction.

14 Q. And you receive quality and regulatory
15 compliance assistance, correct?

16 A. Well, that -- again, that's internal, so there
17 may be things like some audits that we may get from
18 other individuals that would be crossed, but a lot of
19 those things are actually done internally to us.

20 Q. Okay. So both internal and external on those?

21 A. Yes.

22 Q. Okay. Going back now to page 4, again, just
23 to reorient us, this was signed on 3/1/2017, right?

24 A. By Joacim.

25 Q. Okay. I want to turn back to page 3.

1 And this agreement is effective 1 January,
2 2016, about a year and two months earlier, right?

3 A. Yes.

4 Q. Okay. So we've now looked at four documents
5 that appear to be backdated today, right?

6 A. They're -- I just want to be careful with the
7 term backdating. They are -- they are dated and they
8 were in effect before that. Backdating has a very
9 negative connotation that you can't do in the medical
10 device industry.

11 Q. The dates on the documents were signed after
12 the effective date began?

13 A. Yes.

14 Q. All right. Now, you also talk about -- talked
15 about the organizational structure of Atrium. I want to
16 hand -- look at Plaintiff's 1, page 2.

17 This is the last org chart that I have been
18 provided with in the discovery in this case. I believe
19 this is from 2017. We used this in --

20 A. It's somewhat outdated.

21 Q. Right. I understand that, but --

22 A. Okay.

23 Q. -- I'm going to ask you, as of 2017,
24 Jens Viebke was president of Acute Care Therapies?

25 A. Correct.

1 Q. And he was the boss, right?

2 A. Yes.

3 Q. Okay. And then there was you, Chad Carlton,
4 managing director, president, Atrium Medical
5 Corporation, right?

6 A. Correct.

7 Q. Okay. And then we see there's a -- if you
8 look at the bottom there, there are three little stars,
9 and they say not Atrium QMS, not on-site, right?

10 A. Correct.

11 Q. Okay. And we see that for chief commercial
12 officer, Acute Care Therapies, marketing, Ajey Atre.

13 Do you see that?

14 A. Correct.

15 Q. All right. And I just want to stop there for
16 a minute.

17 So Ajey's off-site and not an Atrium employee,
18 right?

19 A. Ajey is off-site and not an Atrium employee,
20 correct.

21 Q. Okay. Now, we talked earlier about Acute Care
22 Therapies, right?

23 A. (Nods head.)

24 Q. So Acute Care Therapies -- we've now seen that
25 Acute Care Therapies has a president, right --

1 A. Yes.

2 Q. -- Jens Viebke?

3 A. Uh-huh.

4 Q. They have Thomas Marschal, vice-president of
5 HR, right?

6 A. You're referring to at this time, correct?

7 Q. At this time.

8 A. So at this time there was the creation of
9 that, yes.

10 Q. Okay. There's a chief commercial officer in
11 Ajey Atre, right?

12 A. Yes.

13 Q. Okay. And Gary Sufat was actually made the
14 CFO of Acute Care Therapies, right?

15 A. And he was also -- I believe at this time -- I
16 would have to know when Alistair was made CFO. But he,
17 I believe, was also CFO of Atrium at that time, too.

18 Q. Okay.

19 A. He had joint roles.

20 Q. Okay. But he held the position of CFO of
21 Acute Care Therapies, correct?

22 A. Correct.

23 Q. Okay. So Atrium -- so Acute Care Therapies,
24 though it's not a legal entity, we saw that it has
25 contracts, right? It signs contracts?

1 A. Okay. Yes.

2 Q. Okay. And we saw that it has officers, right?

3 A. Yes.

4 Q. Okay. And we saw that the Getinge Group also
5 has officers, the GET team, right?

6 A. Yes.

7 Q. Okay. And we saw that the Getinge Group has
8 contracts like your agreement, right?

9 A. Yes.

10 Q. Okay. And you get paid pursuant to that
11 agreement, right?

12 A. I get paid by Atrium Medical, yes.

13 Q. You get paid pursuant to that agreement?

14 A. Yes.

15 Q. Okay. All right. Focusing back on Exhibit
16 2 -- excuse me, Exhibit 1 -- want to turn the page,
17 please?

18 And here this is HR, again back in 2007. So
19 we see -- I think this is -- '17, excuse me.

20 This is indicative of, I think, the -- the
21 shared services agreement.

22 We see Thomas Marschal, George Sanders,
23 Andreas Fagher, those three individuals. And Andreas
24 Fagher, if we could highlight.

25 So George Sanders not on-site, not an employee

1 of Atrium, correct?

2 A. Correct.

3 Q. Okay. And that's the top of the HR food
4 chain, right?

5 A. George Sanders at this time --

6 Q. At this time.

7 A. -- yes.

8 Q. Okay. And underneath him was Andreas Fagher,
9 right?

10 A. Correct.

11 Q. Okay. And that's vice-president, human
12 resources, supply chain function, right?

13 A. Correct.

14 Q. Okay. And that was -- again, that person's
15 not on-site, right?

16 A. Correct.

17 Q. Matt Kelly, manufacturing consumables director
18 of HR, that person is on-site, right?

19 A. That is correct.

20 Q. Okay. So Matt Kelly's boss was -- that's a
21 direct line, solid-line report, right?

22 A. You also have other people who are on-site in
23 this piece.

24 Q. Right, I understand. I'm focusing just on the
25 Matt Kelly-Andreas Fagher relationship. That's a direct

1 solid-line report, right?

2 A. At that time, that was a solid line and he had
3 a dotted line to me, correct.

4 Q. Okay. Solid-line means that that person is
5 the boss; they do their year-end reviews, that sort of
6 thing, right?

7 A. Yeah. Oftentimes on a dotted line I may have
8 some contribution to that.

9 Q. Okay. Thomas Marschal -- at this time, okay,
10 and today -- not an Atrium employee, not on-site, right?

11 A. Correct.

12 Q. And Nancy Michael, director of HR, Acute Care
13 Therapies, not on-site, right?

14 A. She's not on-site, no.

15 Q. Okay. Let's turn the page to information
16 technology.

17 Okay. And here we see two different chains
18 here, but we see Ludovic Batal, vice-president, group IT
19 operations, and Matthias Gelsok, chief information
20 officer.

21 Do you see those two individuals?

22 A. Yes, I do.

23 Q. Okay. Both not on-site and not Atrium
24 employees, right?

25 A. Correct.

1 Q. Okay. And they have direct-line reports. So
2 the first person we see that appears to be on-site is
3 Tom McDonnell?

4 A. Yes.

5 Q. Okay. And he's VP of IT Operations for the
6 Americas, so he's on-site, but he also has off-site
7 responsibilities at this time, right?

8 A. Correct. So when we talk about shared
9 services, he's able -- some of his team contracts out
10 and sends some things to other sites as well as here,
11 so --

12 Q. Right. So when we talk about contacts under
13 the -- the -- those two contracts, the shared services
14 agreement, Atrium is both a recipient of services, but
15 then it also provides services back through the
16 contract, through Getinge AB, to other companies in the
17 organization, right?

18 A. That is correct.

19 Q. Okay. So, here, Tom McDonnell would be an
20 example of that, right?

21 A. Yes, he would.

22 Q. All right. Now, I want to look at Shen Lu,
23 vice-president, IS SSC Getinge, and at this point in
24 time, the next person down is an open position, right?

25 A. That's what it appears, yes.

1 Q. Okay. All right. Let's now go to accounting
2 and finance.

3 All right. So Gary Sufat, chief financial
4 officer of Acute Care Therapies and was supervising
5 through a solid line Stephen Emery, right?

6 A. Yes.

7 Q. Okay. Now, we see over to the right,
8 Lena Hagman, EVP Quality -- group quality regulatory
9 compliance, and she's off-site, right?

10 A. Yes, she is. It's --

11 Q. She's a GET team member, right?

12 A. She is a GET team member, correct.

13 Q. Okay.

14 A. So that's -- she's on this because
15 Alistair Ryan not only reports to Stephen Emery, but
16 also reports out elsewhere within the organization. And
17 I believe at -- I don't know for sure, but I believe at
18 this time it may have been also to Lena.

19 Q. Okay. Colleen Hargove, director of finance,
20 budget analysis, also not on-site, not an Atrium
21 employee, correct?

22 A. Correct.

23 Q. Okay. And those two individuals have
24 functions related to remediation of the Atrium facility
25 and performance under the consent decree, correct? In

1 terms of budgeting for that, on this.

2 A. Colleen does? I -- I don't recall Colleen
3 being involved in that. Alistair would.

4 Q. Okay. Alistair, too, not on-site?

5 A. No, Alistair is on-site.

6 Q. All right. Okay. We're done with this
7 exhibit.

8 Gina, can I have Exhibit 174. If we could
9 turn to page 4.

10 Earlier today when we were talking about mesh
11 liabilities and mesh lawsuits, I forgot to ask you this
12 question.

13 Atrium was aware -- Atrium had received a
14 letter in March of 2009, hadn't it -- and you can see
15 there's a lot of deposition testimony on this from
16 Mr. McNamara, so I'll represent to you that this letter
17 found its way to Atrium.

18 From LyondellBasell -- and LyondellBasell,
19 just for the Court, is the manufacturer of the
20 polypropylene used in the -- the C-Qur devices, is it
21 not?

22 A. To my -- it's the -- we usually say Basell,
23 but if it's Basell, I don't know the -- the right
24 terminology.

25 Q. Okay. And the manufacturer data sheet that

1 comes with -- the safety data sheet, rather, that comes
2 with the polypropylene actually warns and has warned for
3 some time not to put in humans, correct?

4 A. The original data sheet said -- did not say
5 that.

6 Q. Okay. Well, in 2004 and 2005, individuals
7 from Atrium actually called the manufacturer and were
8 told not to use this in medical devices, were they not?

9 A. That part, I don't -- I'm not aware of.

10 Q. Okay. Well, I'm going to show you and we're
11 going to skip to it because I just brought this document
12 with me. This is a March 6th document from 2009.

13 And Atrium got this letter and we have a lot
14 of testimony. And it says: I'm writing this letter on
15 behalf of Basell, or Basell USA, a member of the
16 LyondellBasell Industries group of companies, because it
17 has come to our attention that certain users of Basell's
18 Pro-fax 6523 polypropylene resin -- and that's the resin
19 we just talked about that's in C-Qur, right?

20 A. It's the resin used for all of our
21 polypropylene.

22 Q. Okay.

23 That they may be utilizing this material in
24 implantable medical devices. Basell's very clear
25 policy, as expressed in our product data sheets -- and

1 that's the one I was just referring to, right?

2 A. I -- I haven't seen the exact ones, but I'll
3 take your word for it.

4 Q. Okay.

5 Is that our materials, including but not
6 limited to Pro-fax 6523, are never to be used in FDA
7 Class III medical devices and may only be used in FDA
8 Class II medical devices with Basell's prior written
9 approval.

10 Do you see that?

11 A. Yes.

12 Q. Okay. And then it goes on to say: In
13 addition, it has been our long-standing policy that our
14 materials are not -- not -- to be used in implantable
15 medical devices, regardless of their FDA classification.

16 Atrium knows this as of 2009 the latest,
17 right?

18 A. According to this letter, that's -- that's the
19 case.

20 Q. Okay. All right. I'm going to move on from
21 there.

22 All right. Yesterday your counsel asked you
23 some questions about the consent decree. Do you recall
24 those questions?

25 A. Yes, I do.

1 Q. I'd like to bring up Exhibit 209.

2 And we see that this is from the consent
3 decree. You can see the case here, Atrium Medical Corp.
4 vs. Maquet BV Holdings, Maquet Cardiovascular,
5 et cetera, and this is an unopposed motion to remove
6 Gail Christie from the caption of the consent decree and
7 substitute Lena Hagman.

8 Do you see that?

9 A. Yes, I do.

10 Q. Have you read this document before?

11 A. I don't know that I have read that document.

12 Q. Okay. Well, I want to look at the bottom of
13 the first page. It says: Ms. Christie has ceased to be
14 employed by or act on behalf of any of the corporate
15 defendants. So -- and substitute a new individual
16 defendant to the caption, Lena Hagman.

17 Do you see that?

18 A. I see that.

19 Q. Were you aware that Gail Christie represented
20 and was responsible for oversight of the consent decree
21 for all of the corporate defendants?

22 A. She -- yeah, the -- from a quality
23 perspective, yeah, her name was on the consent decree,
24 yes.

25 Q. Okay. So if we turn the page, I want to focus

1 on paragraph 4.

2 Paragraph 30 of the consent decree provides as
3 follows, and I'm not going to read the whole thing. I'm
4 going to start midway through the bottom of the
5 paragraph, kind of in the middle, right here.

6 An individual defendant shall notify FDA
7 within 30 days after said defendant ceases to be
8 employed by or act on behalf of all the corporate
9 defendants.

10 So what this is saying is that Gail Christie
11 should notify FDA within 30 days after she ceases to be
12 employed by or act on behalf of all of the companies
13 that are listed on the front. Is that your
14 understanding as well?

15 A. That's -- my understanding is that the FDA
16 required that.

17 Q. Okay.

18 Once an individual defendant ceases to be
19 employed or otherwise act for all of the corporate
20 defendant entities, corporate defendants shall petition
21 the court to formally remove that individual's name from
22 the caption of this decree and the United States will
23 not oppose such motion, so long as -- so long as -- FDA
24 has sufficient evidence or information that the
25 individual defendant to be removed is no longer directly

1 or indirectly working with or in any way -- this goes
2 onto the next page -- influencing corporate defendant
3 entities.

4 Do you see that?

5 A. Yes, I see that.

6 Q. Okay. It then goes on to say, starting here:
7 United States will not oppose such motion so long as FDA
8 has sufficient evidence or information that the Christie
9 substitute defendant is vested with responsibility for
10 all quality system functions as described in paragraph
11 12.

12 So this is saying that -- that all of the
13 quality system functions have to be vested in this
14 replacement personal defendant, right?

15 A. That is the case, yes.

16 Q. Okay. Let's turn to page 4, paragraph 9.

17 Lena Hagman is now the individual vested with
18 responsibility for all quality systems for the corporate
19 defendants.

20 And that is a defined term, right? That means
21 all of the corporate defendants, including Atrium,
22 right? Correct?

23 A. Correct.

24 Q. Okay.

25 As described in paragraph 12 of the consent

1 decree. Accordingly, and solely -- solely -- because
2 she has that responsibility by reason of her position as
3 executive vice-president for quality regulatory
4 compliance, the corporate defendants hereby petition the
5 court to substitute Gail Christie with Lena Hagman,
6 whose substitution will satisfy both the Christie
7 substitute defendant and substitute individual defendant
8 provisions of paragraph 30 of the consent decree.

9 Do you see that?

10 A. Yes, I do.

11 Q. Okay. And I want to look at the last
12 paragraph -- the last sentence of paragraph 10.

13 THE COURT: We're going to take our break
14 after you --

15 MR. ORENT: Absolutely.

16 THE COURT: -- finish this.

17 Q. And do you see where it says Ms. Hagman
18 consents to giving this court personal jurisdiction over
19 her?

20 A. Yes, I see that.

21 Q. Okay. And I want to just scroll to the
22 caption page here. If we could go to just the front
23 page, please, Gina, and scroll up here.

24 What court is that?

25 A. United States District Court of New Hampshire.

1 Q. And where are we today?

2 A. United States District Court. I mean United
3 States District Court, District of New Hampshire.

4 MR. ORENT: Okay. Your Honor, now's a good
5 time for that break.

6 THE COURT: Okay. Good. We'll take our
7 break. We'll be back --

8 MR. ORENT: Thank you.

9 THE COURT: -- at close to 10:30.

10 (Recess taken from 10:20 a.m. until 10:38 a.m.)

11 THE COURT: Go ahead, Attorney Orent.

12 Q. Mr. Carlton, yesterday you were asked some
13 questions by your counsel and I'm just going to
14 paraphrase briefly, but I believe you testified roughly
15 that Atrium is responsible for the production of the
16 C-Qur mesh devices; is that right?

17 A. Yes, it is.

18 Q. I believe that you testified that Atrium is
19 the one that is responsible for the design of the C-Qur
20 devices, right?

21 A. Yes, we are.

22 Q. And I believe you testified that you were
23 responsible for the -- you being Atrium -- were
24 responsible for the quality systems related to the C-Qur
25 devices, right?

1 A. Yes, we are.

2 Q. And also the packaging of the C-Qur mesh
3 devices, correct?

4 A. That is correct.

5 Q. Okay. What I'd like to do is I'd like to turn
6 to Exhibit 184. And, again, this is a copy of the
7 consent decree.

8 And if you look on page 5, it says here:
9 Specifically, defendants shall take the following
10 actions, among others; number one, establish and
11 maintain procedures to control defendants' devices'
12 designs in order to ensure the specified design
13 requirements are met.

14 Would you agree that establishing and
15 maintaining procedures to control the design of C-Qur in
16 order to ensure that the specified design requirements
17 are met is part of the design of the device?

18 A. Can you repeat that question for me?

19 Q. Sure.

20 A. Sorry.

21 Q. If you look at paragraph -- the first
22 paragraph there, would you agree that establishing and
23 maintaining procedures to control design in order to
24 ensure that specified design requirements are met is an
25 obligation of a medical device manufacturer?

1 A. So we -- we are required to maintain the
2 design procedures and -- yes, we are -- that is
3 something we are required to do.

4 Q. Okay. And would you agree with me under the
5 consent decree that Lena Hagman is personally, in her
6 official capacity, responsible to make sure that
7 defendants establish and maintain procedures to control
8 defendants' devices' designs in order to ensure that
9 specified design requirements are met?

10 A. I believe she gave that responsibility to me
11 locally.

12 Q. Do you see anywhere in the consent decree
13 where she can assign away that responsibility?

14 A. I would have to read through further, but I
15 believe she has the power to do that through regulations
16 in terms of creating a local designate.

17 Q. Let's quickly move to -- you'd be a local
18 designate, not the ultimate responsible party, true?

19 A. I am the management with authority and within
20 the FDA that has a specific connotation associated with
21 it.

22 Q. All right. Let's -- let's turn to paragraph
23 12.

24 Corporate defendants shall vest responsibility
25 for all quality system functions, as designed -- as

1 defined in 21 C.F.R. 8020.3(v) (sic) in the specified and
2 additional facilities an individual who shall be
3 authorized and responsible for all quality system
4 functions at the specified and additional facilities,
5 including establishing, implementing, and maintaining a
6 comprehensive written program -- quality program -- to
7 ensure defendants' continuous compliance with this
8 decree, the Act, and the QS, CR, and MDR regulations.

9 As you sit here today, you understand that
10 Lena Hagman is that individual, correct?

11 A. She has the overall responsibility and she has
12 vested -- she has provided that responsibility to me
13 locally, yes.

14 Q. Okay. But it's her name that's on the
15 caption?

16 A. Huh?

17 Q. Her name is the one that we looked at on the
18 caption.

19 A. Well, on this particular one she's not, but on
20 the other one she is.

21 Q. Right. And that document -- and we can look
22 back at Exhibit 209 -- that document says that she's
23 being substituted in place of Gail Christie, right?
24 That's what we saw.

25 A. Correct.

1 Q. Okay. So this document doesn't say your name,
2 does it?

3 A. It does not have my name, no.

4 Q. Okay. Document 209 does not have your name?

5 A. No, it does not.

6 Q. Okay. Your name has not been submitted by
7 Lena Hagman for approval to the FDA for substitution of
8 her, has it?

9 A. No, it's -- it's documented locally that I am
10 the management with responsibility, though.

11 Q. You are the local management responsibility,
12 but ultimately she is the party on the consent decree.
13 You agree with that?

14 A. She is a party on the consent decree.

15 Q. Okay.

16 A. And Atrium Medical is as well.

17 Q. All right. Let's go back to page 6.

18 Do you agree with me that a manufacturer of
19 medical devices has an obligation to ensure that all
20 devices meet requirements for design, development, and
21 planning? Do you agree with me that?

22 A. We -- yes.

23 Q. And would you agree with me that a medical
24 device manufacturer in the design process has design
25 planning as part of it?

1 A. Are you meaning the next bullet or --

2 Q. No, I'm asking you a question.

3 A. Okay.

4 Q. Would you agree with me that part of the
5 design process is design development and planning?

6 A. Design -- can you elaborate planning?

7 Q. In the way the FDA uses it.

8 A. So it -- in terms of design, design and
9 validate the product, yes, absolutely.

10 Q. Okay. Design inputs, design outputs, design
11 review, those are all functions that a medical device
12 manufacturer has obligations for under MDR regulations,
13 correct?

14 A. Absolutely.

15 Q. Okay. Design verification, a medical device
16 manufacturer has to do that, right?

17 A. Yes.

18 Q. Okay. Design validation, a medical device
19 manufacturer has to do that, correct?

20 A. Yes.

21 Q. Design change, design transfer, those are
22 things that medical device companies have to do,
23 correct?

24 A. Yes, they do.

25 Q. And as well as maintain a design history file,

1 correct?

2 A. That's correct.

3 Q. And Atrium -- strike that.

4 All of this work has been done for the C-Qur
5 device, correct?

6 A. Correct.

7 Q. Okay. And Lena Hagman, via the consent
8 decree, has personal responsibility for each of those
9 under this decree; isn't that right?

10 A. She has personal responsibility for that -- I
11 think that would be a stretch.

12 Q. Well, don't you see here it says:
13 Specifically, defendants shall take the following
14 actions, right?

15 A. And Atrium is one of those defendants.

16 Q. Right. But that's plural, right? If we look
17 back -- let's go back to page 1.

18 The term defendants is a defined term and if
19 we look here, we can see it. We can see that it's both
20 the corporate defendants and the individual defendants,
21 right?

22 A. Yes.

23 Q. Okay. So if we go back to page 5, the way a
24 defined term works is that another way to say that would
25 be specifically the corporate defendants and the

1 individual defendants shall take the following actions,
2 among others.

3 Would you agree with that?

4 A. Specifically the defendants shall take the
5 following actions, among others.

6 Q. Right. And in place of the defined term,
7 defendants, we could use the individual definitions that
8 were given; we could say specifically the corporate
9 defendants and the individual defendants shall take the
10 following actions, among others. Isn't that right?

11 A. I guess so, yes.

12 Q. Okay. Now, if we go to number 2, excuse me,
13 number 3: Conduct design evaluations of all marketed
14 devices to ensure that current designs have been
15 properly validated and transferred into appropriate
16 product specifications.

17 That's something that a manufacturer of
18 medical devices has to do, correct?

19 A. Yes. Yes.

20 Q. In fact, that's -- that was done with C-Qur,
21 correct?

22 A. Yes, it was.

23 Q. And under the consent decree it was redone to
24 make sure that you were compliant with the consent
25 decree, right?

1 A. I -- I think it was redone prior to the
2 consent decree.

3 Q. Okay. Through the regulatory process, the
4 483 process?

5 A. Yes.

6 Q. Okay.

7 A. The 483 process?

8 Q. You understand that there were a series --
9 strike that.

10 All right. Let's go on to the next sentence.

11 Number 4, can we bring that back up, Gina?

12 Validate processes whose results cannot be
13 fully tested by subsequent inspection testing. Still on
14 page 6. Right here. Right there. Thank you.

15 Do you see that?

16 A. Yes, I see that.

17 Q. And that's a responsibility of a medical
18 device manufacturer, correct?

19 A. Yes, it is.

20 Q. And it was placed in here as a -- something
21 that needed to be done under the consent decree as well,
22 correct?

23 A. Yes.

24 Q. Okay. If we go down here to number 5,
25 develop, conduct, control, and monitor production

1 processes, ensure the devices conform to their
2 specifications.

3 That is a -- something that needs to be done
4 with medical devices, correct?

5 A. That is something in the regulations, yes.

6 Q. Okay. And Atrium has done that?

7 A. Yes, it has.

8 Q. Okay. And it's been done with regard to the
9 C-Qur device, correct?

10 A. Yes, it has.

11 Q. Okay. And that is part of manufacture,
12 correct?

13 A. That is part of -- part of the whole process
14 of design and developing and manufacturing a product,
15 yes.

16 Q. Okay. 6, establish and implement adequate
17 written procedures to control devices that do not
18 conform to specified requirements.

19 Do you see that?

20 A. Yes, I do.

21 Q. That's a requirement of all medical device
22 manufacturers, correct?

23 A. Correct.

24 Q. Atrium did that with regard to the C-Qur
25 device, correct?

1 A. Yes, it has.

2 Q. And it was required under the consent decree,
3 correct?

4 A. It's required of the -- they're referring to
5 the C.F.R. earlier in this and, yes, it's part of the
6 regulations and it's part of the consent decree, yes.

7 Q. Okay. 7: Establish and maintain adequate
8 written procedures for corrective and preventative
9 actions, documenting those activities.

10 That is a requirement of medical device
11 manufacturers, correct?

12 A. That is a requirement of the medical device
13 manufacturers, yes.

14 Q. It was done for the C-Qur devices, correct?

15 A. Yes.

16 Q. And it's in the consent decree, correct?

17 A. Yes.

18 Q. Okay. 8: Maintain accurate and complete
19 complaint files and establish and implement adequate
20 written procedures receiving, reviewing, and evaluating
21 complaints.

22 Do you see that?

23 A. Yes, I do.

24 Q. That's a requirement of medical device
25 manufacturers, correct?

1 A. As mentioned earlier, yes.

2 Q. Okay. That was done for C-Qur, correct?

3 A. Yes, it was.

4 Q. And it's required under the consent decree,
5 correct?

6 A. Yes, it is.

7 Q. Okay. Number 9: Develop and implement
8 adequate written MDR procedures in compliance with
9 21 C.F.R. part 803, including but not limited to
10 adequate procedures for management review and ensure
11 that employees are trained on, understand, and properly
12 implement the MDR requirements and procedures.

13 Do you see that?

14 A. Yes.

15 Q. And that's required of medical device
16 manufacturers, correct?

17 A. Yes, it is.

18 Q. It was done with C-Qur, correct?

19 A. Yes, it was.

20 Q. And it's required under the consent decree,
21 correct?

22 A. Yes, it is.

23 Q. Okay. Gina -- okay. If we could bring up
24 page 125 from yesterday and focus on line 6 through 14,
25 please.

1 Yesterday --

2 MS. ARMSTRONG: I'm sorry. What is this
3 document?

4 MR. ORENT: This is the transcript from
5 yesterday.

6 MS. ARMSTRONG: Okay.

7 Q. Yesterday you were asked: Is it unusual to
8 distribute retained earnings to a shareholder?

9 And you stated: No. In fact, when Atrium
10 existed -- when Atrium existed, they sent earnings to
11 shareholders as well.

12 Then your counsel went back and said: When
13 you say Atrium existed, you mean prior to the --

14 And you said: Oh, I'm sorry. Let me correct
15 that. When Atrium was a privately held company, they
16 did the same thing.

17 That was your testimony yesterday, correct?

18 A. Yeah. It was an error.

19 Q. Let's go to Exhibit 238 and let's scroll in
20 under Maquet Vascular Systems.

21 This is your CV, correct?

22 A. Yes. We reviewed this quite extensively
23 during my deposition.

24 Q. Okay. And I want to focus right here on your
25 description of Maquet Vascular Systems. You said it's

1 formally Atrium Medical Corporation on your resume, did
2 you not?

3 A. Yeah, and we discussed this at length.

4 MR. ORENT: I have no further questions.

5 Thank you, your Honor.

6 THE COURT: Okay.

7 MR. ORENT: Thank you.

8 MS. ARMSTRONG: Give me just a minute to get
9 organized and find the pages --

10 THE COURT: That's fine.

11 MS. ARMSTRONG: -- in the consent decree that
12 he was referring to.

13 MR. ORENT: Your Honor, if I may, just one
14 housekeeping item.

15 Formally move in Exhibits 239 through 242 and
16 237 and 238 and 243.

17 THE COURT: Okay. I don't know what those
18 exhibits are, but do defendants have any objection to
19 them?

20 MR. CHABOT: Your Honor, provided we have the
21 opportunity to address them on the exhibit list so that
22 they can be subject to the stipulation that Attorney
23 Orent read at the beginning of the hearing --

24 THE COURT: Okay.

25 MR. CHABOT: -- I think that would be fine.

1 THE COURT: All right.

2 MR. ORENT: Thank you, your Honor.

3 THE COURT: So with that qualification, they
4 are full exhibits. 239, 242 --

5 MR. GLASSER: Do you want to read those to her
6 again, Jon?

7 MR. ORENT: Yes.

8 THE COURT: -- as well as 237, 238 and 243.

9 MR. ORENT: Correct. 239 through 42, 237,
10 238, and 243.

11 THE COURT: 237 to 243.

12 (Plaintiffs' Exhibits No. 237-243 admitted.)

13 MR. CHABOT: Counsel, if you'll provide an
14 exhibit list so that we can make any objections and
15 we'll have them --

16 MS. ARMSTRONG: Your Honor, I just -- Mr. --
17 Mr. Orent was going through the consent decree pretty
18 fast. Can I just get him to point me to the pages,
19 actual pages, in the paper copy that he was reading
20 from?

21 THE COURT: Absolutely.

22 MS. ARMSTRONG: Just show me. I was reading
23 on the screen.

24 MR. ORENT: It's starting on 5 and then 6.

25 MS. ARMSTRONG: Thank you.

1 MR. ORENT: You're welcome.

2 REDIRECT EXAMINATION

3 BY MS. ARMSTRONG:

4 Q. Good morning, Mr. Carlton.

5 A. Good morning, Ms. Armstrong.

6 Q. Do you remember Mr. Orent just now asking you
7 some questions about pelvic mesh litigation?

8 A. Yes, I do.

9 Q. And he threw out some very, very big numbers
10 that have been in the news, right?

11 A. Yes.

12 Q. Was Atrium's products, surgical mesh products,
13 were they ever marketed for pelvic use?

14 A. No, they were not.

15 Q. Is that a very different use than hernia --
16 than use in hernia surgery?

17 A. Yes, it was.

18 Q. Is it one of the indications for your surgical
19 mesh products?

20 A. No, it is not.

21 Q. Do you -- do you know how many -- how many
22 pending litigations you have that involve the -- the use
23 of one of your surgical mesh products in a pelvic
24 application?

25 A. I don't know the exact number, but it's --

1 it's less than probably two percent or one percent of
2 the total --

3 Q. Okay.

4 A. -- litigation, of the lawsuits that are out
5 there. Sorry.

6 Q. Do you have any idea -- I'll stop there.

7 You were also shown an email from Scott Waxler
8 in February of 2017. Do you recall that?

9 A. I recall seeing that here, yes.

10 Q. And who is he --

11 A. I had not seen it before.

12 Q. Who is he with?

13 A. He is with LockeBridge.

14 Q. And it was concerning the mesh litigation; it
15 was a question about the mesh litigation, correct?

16 A. There was a question on the mesh litigation,
17 yes.

18 Q. And it was -- I believe that the document was
19 dated February 2017. Do you recall that?

20 A. Yes, I do.

21 Q. Do you know when the C-Qur MDL was created?

22 A. It was just prior to that time, I believe.

23 Q. Okay. You were also shown a response to -- or
24 I think it was an interim response to the FDA regarding
25 your complaint review procedure and whether or not some

1 should have been reported as MDRs, correct?

2 A. That is correct.

3 Q. Okay. You -- you told us yesterday about your
4 postmarket surveillance and you said it included review
5 of complaints, right?

6 A. Yes.

7 Q. Do you review complaints for postmarket
8 surveillance regardless of their status as MDRs or not?

9 A. Absolutely. We -- we had filed -- so -- so
10 within that particular item related to the -- the 483,
11 we had actually had all of those complaints. We looked
12 and the particular auditor had a different viewpoint on
13 filing and there is some differences, not only within
14 interpretation of the regulations, but different medical
15 device manufacturers will report things in different
16 ways.

17 Q. Okay. Have -- had you already included those
18 complaints -- whether reported as MDRs or not, have they
19 already been reported in your risk analysis for the
20 product?

21 A. Yes, they are also part of our complaint
22 system. They were part of things that we analyzed. It
23 was just not something that was submitted and filed with
24 the FDA.

25 Q. And -- and -- and did your risk analysis

1 change because some then were reported to the FDA as
2 MDRs?

3 A. No, it's not -- when we do our analysis, it's
4 not related specifically to that MDR versus not MDR.

5 Q. And had you noticed anything unusual in
6 complaint reporting patterns that created any kind of
7 alert to you about concerns about your surgical mesh
8 products or specifically the C-Qur products?

9 A. No.

10 Q. Mr. Orent asked you if you were covered by
11 some of the group insurance plans. Do you recall that?

12 A. Yes, I do.

13 Q. Is there a reason why an organization would
14 try to get coverage -- group insurance on the largest
15 scale possible?

16 A. Yeah, it -- it's less expensive typically.

17 Q. Would you explain again what your role is as
18 the managing director -- I think I'm -- I may be
19 misstating your title, so correct me if I'm wrong, but
20 would you explain your role again as the director of
21 Vascular Products?

22 A. You mean in my history?

23 Q. No, just describe what your responsibilities
24 are, please.

25 A. Oh, from -- as managing director of Vascular

1 Systems. So I oversee the -- you know, the design,
2 development, production of not only the Atrium, but also
3 look to the -- from a marketing perspective and the
4 strategic side, the three- to five-year plan for all the
5 vascular products.

6 And I oversee La Ciotat, where those vascular
7 products are manufactured as well.

8 Q. And is it a product line responsibility or is
9 it -- is it primarily a product line responsibility or
10 is it a site responsibility?

11 A. So primarily it's a product line
12 responsibility overseeing those. I mean, I do have the
13 managing director of La Ciotat who reports in to me.

14 Q. Do they make any products other than vascular
15 products?

16 A. No, they do not.

17 Q. So you -- but you also -- vascular -- you said
18 also the vascular products were made by another entity,
19 right?

20 A. Cardiovascular LLC -- Maquet Cardiovascular
21 LLC down in Wayne, New Jersey, yes.

22 Q. Do they make -- do they make other products?

23 A. They make many other products, yes.

24 Q. Do you have any responsibility for them, other
25 than for the vascular products?

1 A. No, I do not, and I do not oversee any of the
2 individuals there.

3 Q. So when Getinge AB undertook to indemnify you,
4 was that in part because of your role for this product
5 line?

6 A. Yes. It extended to multiple entities, yup.

7 Q. Can we pull up Exhibit 122 for a minute?
8 Maybe more than a minute, but let's pull up 122.

9 Are you familiar with this document?

10 A. I was not --

11 Q. Can we blow it up a little bit?

12 Are you familiar with this document?

13 A. I was not familiar with it prior to -- to this
14 litigation, no.

15 [REDACTED]
16 [REDACTED]
17 [REDACTED]
18 [REDACTED]

19 Q. Is Atrium Medical Corporation a party to this
20 agreement?

21 A. No, it is not.

22 Q. To your knowledge, does Atrium Medical
23 Corporation have any ability to enforce this agreement
24 or to go to Getinge AB and do anything with respect to
25 this agreement?

1 A. No.

2 [REDACTED]
3 [REDACTED]
4 [REDACTED]
5 [REDACTED]
6 [REDACTED]
7 [REDACTED]
8 [REDACTED]
9 [REDACTED]

10 Q. Has Getinge AB ever agreed with Atrium AB that
11 it's going to indemnify you, Atrium AB, for the -- I
12 mean Getinge. Has Getinge AB ever agreed that it's
13 going to indemnify Atrium for these liabilities in this
14 litigation?

15 A. No.

16 Q. Mr. Orent asked you about the fact that your
17 employment agreement is with Getinge Group. That's not
18 technically a legal -- you don't disagree that it's not
19 a legal entity?

20 A. No, I don't disagree with that.

21 Q. You get a paycheck every -- periodically?

22 A. I have learned that agreements are much more
23 about trusting the person and interacting with a person
24 that you're involved with there for employment
25 agreements. So --

1 Q. How often do you get a paycheck?

2 A. I get a paycheck, I believe, every two weeks.

3 Q. And who issues that paycheck?

4 A. Atrium Medical Corporation.

5 Q. And what is your understanding of who your
6 employer is?

7 A. Atrium Medical Corporation.

8 Q. Are there occasions -- you're pretty busy in
9 your work, aren't you?

10 A. I am, and being here for three days has taken
11 me away from a lot of that, yes.

12 Q. And all of your managing directors and your
13 direct reports are pretty busy, right?

14 A. Yes, they are.

15 Q. Is it -- is it not necessarily ideal, but is
16 it unusual where transactions get ahead of the
17 paperwork?

18 A. It -- it happens more frequently than I would
19 like. But, yes, it happens frequently, yeah.

20 Q. And when you do create a contract that
21 represents a transaction that's been going on for a
22 while --

23 A. Uh-huh.

24 Q. -- and that contract references an effective
25 date, what is the effective date?

1 A. The effective date is when that contract
2 states.

3 Q. Or does it -- does the effective -- when the
4 activities predate the actual creation of the paper
5 contract, what does the effective date represent?

6 A. It is the date that those activities started.

7 Q. And when you sign it, do you sign it as of the
8 effective date or do you sign it on the date that you
9 actually sign it?

10 A. I always sign on the date that I am signing.
11 I never backdate.

12 Q. What is your understanding of what backdating
13 means?

14 A. Backdating is when you actually write down a
15 date of a prior date than the day that you're actually
16 signing something. And that is an extreme no-no in our
17 business.

18 Q. In any of the documents that you've seen while
19 you've been here these past three days, have you seen
20 any documents that were backdated?

21 A. No, they were not backdated. They took --
22 they were signed after the effective date.

23 Q. Can we put up Exhibit 174, please, Plaintiff's
24 Exhibit 174.

25 This was the email about the Basell resin; is

1 that correct?

2 A. I was not shown this earlier portion, so I --

3 Q. Can we scroll to the part that the witness was
4 shown?

5 Jon, do you remember what page it was?

6 MR. ORENT: I believe it's page 4.

7 MS. ARMSTRONG: Page 4.

8 MR. ORENT: 4, I believe. It's the next page.
9 There it is.

10 Q. Okay. Is this what you were shown by
11 Mr. Orent?

12 A. Yes, it was.

13 Q. Has Atrium done its own testing to determine
14 the appropriate materials to use in its products?

15 A. Yes, just -- that is one of the key things
16 that we do when we're selecting suppliers, and we will
17 do our testing on the different materials that we
18 receive.

19 Q. And did Atrium satisfy itself that the resin
20 that it was using was the appropriate resin to be used?

21 A. Yes, we did.

22 Q. And that was done by Atrium or by Getinge AB?

23 A. That was done by Atrium.

24 Q. Okay. You can put this document away.

25 Is Atrium part of Acute Care Therapies?

1 A. Atrium is, yeah, one of the businesses that
2 are within Acute Care Therapies.

3 Q. You explained that to us yesterday.

4 A. Yup.

5 Q. Does Acute Care Therapies have officers?

6 A. It -- it does. It has a president. It also
7 has a chief marketing officer, technology officer, and
8 chief operating officer.

9 Q. Are those officers -- Acute Care Therapies is
10 not a legal entity, correct?

11 A. Correct.

12 Q. Are those officers employed by other legal
13 entities within the Getinge group of companies?

14 A. Yes, they are.

15 Q. Are they -- are those officers employed by
16 Getinge AB?

17 A. Not to my knowledge, no.

18 Q. The org charts that Mr. Orent showed you, are
19 those consistent with the fact that there's this layer
20 of Acute Care Therapies?

21 A. The org chart that he showed, no.

22 Q. Okay.

23 A. I mean -- wait.

24 Q. Did he show you org charts that showed other
25 people above Atrium on the org charts?

1 A. Yes.

2 Q. Were they generally officers of Acute Care
3 Therapies?

4 A. He showed a couple of different charts.
5 The -- Jens is the -- he was an officer; Ajey was an
6 officer. The other individuals that they stated were
7 not officers of ACT, to my knowledge.

8 Q. Okay.

9 A. Yup.

10 Q. Okay. But does anything on the org charts
11 that he showed you change anything that you testified to
12 yesterday about who manages and directs the day-to-day
13 operations of the company?

14 A. Not at all.

15 Q. And, in fact, yesterday you explained -- would
16 you explain -- I think you told us about the reporting
17 structure for regulatory. Would you -- regulatory and
18 quality. Would you explain that again?

19 A. So we have a director of quality who reports
20 in to John Costello, who is the vice-president of
21 corporate compliance and -- sorry, corporate quality and
22 compliance.

23 And then you have a senior manager on-site who
24 reports up to the director of regulatory and -- the
25 director of regulatory in Maquet Cardiovascular LLC.

1 Q. And tell us again when that structure came
2 into play?

3 A. So that structure came into place
4 essentially -- it was prior to my taking over as
5 president, but it occurred after the consent decree in
6 the roughly late 2015, early 2016 time frame.

7 Q. And -- and why is that structure created?

8 A. So part of it was as the consent decree, but
9 it also provided greater oversight.

10 Q. But in terms of the day-to-day operations that
11 you described managing -- reporting MDRs to the FDA,
12 preparing 510(k) applications to the FDA, how were those
13 managed by Atrium?

14 A. That's still managed internally locally at
15 Atrium.

16 Q. And is anything in the org charts that
17 Mr. Orent showed you today inconsistent with what you
18 testified to yesterday about the regulatory structure?

19 A. No, not at all.

20 Q. Can we put up 1 -- Plaintiff's Exhibit 184,
21 the consent decree.

22 This is the consent decree, correct?

23 A. Yes, it is, to my knowledge.

24 Q. Is Getinge AB a party to this consent decree?

25 A. Getinge AB, no, it is not.

1 Q. There are -- there are four corporate
2 defendants, correct?

3 A. Yes, there are.

4 Q. So there's Atrium Medical Corporation, Maquet
5 Holding BV and Company KG, Maquet Cardiovascular LLC and
6 Maquet Cardiopulmonary AG; is that correct?

7 A. Yes, it is.

8 Q. Can we turn to page 5, please, paragraph 5A.
9 Actually, paragraph -- let's look at paragraph 5.

10 It says: Except as provided in paragraphs 6
11 and 11, defendants and each and all of their directors,
12 officers, et cetera -- and it goes on to list some
13 responsibilities for defendants, correct?

14 A. Yes, it does.

15 Q. And Atrium was a defendant to this consent
16 decree, correct?

17 A. Yes, it was.

18 Q. And does Atrium have responsibilities pursuant
19 to this consent decree?

20 A. Yes, it very much does.

21 Q. Now, I think Mr. Orent suggested to you that
22 by use of the term defendants here, the FDA intended
23 that all of the defendants would be responsible for all
24 of these activities at all of the sites covered by the
25 consent decree. Is that consistent with your

1 understanding?

2 A. I -- as I said to you earlier, I think Atrium
3 is a defendant and it's responsible for its entity.

4 Q. Well, for example, do you think the FDA
5 intended Atrium to be responsible for the design of
6 products in Rastatt, Germany?

7 A. No, it did not.

8 Q. Do you think that's what it intended by the
9 word defendants?

10 A. No, it did not.

11 Q. Do you think it intended Atrium to be
12 responsible for Atrium's activities?

13 A. Yes, it did.

14 Q. Did the Atrium -- did the FDA insist that
15 there be a -- because there were multiple sites
16 involved, did the FDA insist there be an individual or
17 individuals named in the complaint that would have
18 overall oversight responsibility?

19 A. Yes.

20 MR. ORENT: Objection, personal knowledge.

21 Q. Do you have personal knowledge of the consent
22 decree and how it's been implemented?

23 A. I do.

24 Q. Okay.

25 THE COURT: Okay. Overruled.

1 A. I have -- would you like me to elaborate?

2 Q. So I just want -- no, you don't have to.

3 A. Okay.

4 Q. Did the -- the FDA insist that there be an
5 individual or individuals that have to have oversight
6 responsibility because there were multiple sites?

7 A. Yes.

8 Q. Okay. And were -- did those individual or
9 individuals delegate responsibility to you for the
10 Atrium sites?

11 A. Did they delegate to me for -- repeat that
12 question. I'm sorry.

13 Q. Okay. Did those individuals -- were you
14 delegated responsibility for the Atrium sites?

15 A. Yes.

16 Q. And was that consistent with the consent
17 decree?

18 A. Yes, it is.

19 Q. Was it consistent with the federal regulations
20 governing the medical device manufacturers?

21 A. Yes.

22 Q. And I think we saw yesterday that you were
23 named the managing director of the Atrium sites with
24 full executive authority.

25 A. Correct.

1 Q. Can we pull up Exhibit 166. I'm sorry,
2 Exhibit 66. I apologize.

3 That's not it. The Exhibit 66 that was used
4 by Mr. Orcutt (sic) just now. It's Defendant's Exhibit
5 66.

6 What is this document?

7 A. This is the distributor agreement between
8 Atrium Medical, Maquet Cardiovascular LLC, and Getinge
9 USA Sales.

10 Q. Okay. Now, this has three entities in it,
11 correct?

12 A. Yes, it does.

13 Q. And you're familiar with this structure and
14 this distribution arrangement, correct?

15 A. Yes, I am.

16 Q. Now, if we substituted -- now, yesterday I was
17 asking you questions that were limited to 2014 through
18 2017, correct?

19 A. Uh-huh.

20 Q. If we substituted Getinge USA Sales for Maquet
21 Cardiovascular US -- USA Sales in that chart, would that
22 be the current structure?

23 A. That is, yes.

24 Q. And that's your understanding of how the
25 structure is?

1 A. Yeah. And I -- as I stated, if an agreement
2 doesn't fully outline it, I know how the structure
3 actually works.

4 Q. Okay. And is it your understanding that prior
5 to Getinge USA Sales that point in the chart was
6 occupied by Maquet Cardiovascular USA Sales?

7 A. Yes.

8 Q. Now, you said you spoke to Gary Sufat about
9 that. Do you have a general understanding of how the
10 distribution works?

11 A. Yes, I know where my products go. I know the
12 bases and where we ship them, yes.

13 Q. As the president of the company, you have a
14 general understanding of this?

15 A. Yes.

16 Q. Why did you speak to Mr. Sufat?

17 A. I wanted to just get a greater understanding
18 of the -- the financial transactions going back and
19 forth. I -- I had the general overview and I wanted to
20 make sure that I was correct with -- with my statements.

21 Q. Are you aware that Mr. Sufat has given an
22 affidavit in this litigation?

23 A. I am aware, yes.

24 Q. Can we put up Mr. Sufat's affidavit?

25 And if we look at paragraph 9, please, it

1 says: Since January 1, 2014, Atrium has transferred its
2 products to Maquet Cardiovascular LLC, a distribution
3 center, at standard cost. Maquet -- MCV LLC is an
4 indirect wholly owned subsidiary of Getinge AB.

5 Have I read that correctly?

6 A. Yes, you have.

7 Q. Is that consistent with your understanding?

8 A. That is my understanding, yes.

9 Q. Have you heard any testimony from a fact
10 witness in either the depositions that were played or
11 any other -- any fact witness testimony in this
12 litigation -- not Mr. Messina's, but any fact witness
13 testimony in this litigation that contradicts
14 Mr. Sufat's testimony?

15 A. No.

16 Q. And he would know?

17 A. Yes.

18 Q. Let's look at paragraph 10.

19 From January 1, 2014, through September 30th,
20 2017, MCV LLC then sold --

21 MR. ORENT: Your Honor, I'd like to object
22 that this is hearsay. This is an available witness.

23 THE COURT: I'm going to overrule --

24 MS. ARMSTRONG: It's redirect, your Honor. He
25 was crossed about this.

1 Q. From January 1st, 2014, through September 30,
2 2017, MCV LLC then sold to Atrium products at a markup
3 to Maquet Cardiovascular US Sales LLC, MCV US Sales,
4 at -- a sales entity. MCV US Sales is an indirect
5 wholly owned subsidiary of Getinge AB.

6 Have I read that correctly?

7 A. Yes, you have.

8 Q. And are you aware of any facts that have been
9 presented in this -- in this hearing that contradict
10 this?

11 A. No, it's consistent with what I discussed
12 with -- with Gary, yes.

13 Q. And is it consistent with your general
14 understanding as the president of the company?

15 A. Yes.

16 Q. Paragraph 11: From October 1 through 2017,
17 MCV LLC then sold the Atrium products at a markup to
18 Getinge USA Sales LLC, a sales entity. Getinge USA
19 Sales LLC is an indirect wholly owned subsidiary of
20 Getinge AB.

21 Have I read that correctly?

22 A. Yes, you have.

23 Q. And, again, is that consistent your with
24 understanding as the president of the company?

25 A. Yes, it is.

1 Q. And have you heard anything in the hearing so
2 far that contradicts Mr. Sufat's personal knowledge of
3 this?

4 A. No, nothing.

5 Q. And then in paragraph 12, it says: The
6 distribution center MCV LLC earns approximately half of
7 the margin and the sales entity MCV US Sales, now
8 Getinge USA Sales LLC instead of MCV US Sales, earns
9 approximately half the margin.

10 Have I read that correctly?

11 A. Yes, you have.

12 Q. And, again, is that consistent with your
13 general understanding as the president of the company?

14 A. Yes, it is.

15 Q. And have you heard anything that contradicts
16 that in this hearing?

17 A. No, I have not.

18 Q. And is it consistent with the chart you
19 presented the other day?

20 A. Yes, it is.

21 MS. ARMSTRONG: Your Honor, that's all I have.

22 THE COURT: All right. Excellent.

23 MR. ORENT: Can we have that for a moment?

24 MS. ARMSTRONG: The affidavit?

25 MR. ORENT: Yeah, the affidavit.

1 MS. ARMSTRONG: Sure.

2 MR. ORENT: Okay.

3 THE COURT: Is Mr. Carlton free to leave?

4 REXCROSS-EXAMINATION

5 BY MR. ORENT:

6 Q. Just on that one point, if we could zoom in on
7 that same paragraph there. I believe it was paragraph
8 15.

9 MR. GLASSER: 12.

10 MR. ORENT: 12. Sorry.

11 Q. Mr. Carlton, the distribution center, MCV LLC,
12 earns approximately half of the margin, right? That's
13 what that says, right? And the sales entity, MCV US
14 Sales, earns approximately half the margin.

15 That does not say that Atrium gets half the
16 margin, does it?

17 A. The distribution center earns half of the
18 margin and the sales entity earns approximately half the
19 margin.

20 Can I see the rest of the piece, because
21 that's --

22 Q. If you go down, number 14: Margin returned to
23 Atrium is reflected in the profit and loss statement.

24 A. Right. So -- so then the margin is returned
25 through Maquet.

1 So if you read 13, 13 says: The margin earned
2 by the distribution center, MCV LLC, is returned to
3 Atrium on a monthly basis.

4 Q. You're aware of the profit and loss statements
5 in this case, correct?

6 A. Yes.

7 Q. How do you explain how the cost of goods sold
8 exceeds the sale price?

9 A. The -- the -- the transaction that is taking
10 place is that we are selling from Atrium to Maquet
11 Cardiovascular at what is known as standard cost
12 initially. So that standard cost has some fluctuations
13 and particularly in those years that we've looked at,
14 there have been extraordinary circumstances where our
15 costs at the -- what we estimated for the cost at the
16 beginning of the year versus the costs that have
17 occurred during the course of the year have been much
18 higher. And there were multiple reasons and I can go
19 into those for each year, if you'd like.

20 MR. ORENT: Thank you.

21 No further questions.

22 THE COURT: All right. Done with this witness
23 then?

24 MS. ARMSTRONG: Yes, your Honor.

25 THE COURT: All right. Mr. Carlton, you are

1 free to go.

2 (Witness excused.)

3 THE COURT: And you may call your next
4 witness.

5 MR. CHEFFO: Thank you.

6 THE COURT: Thank you.

7 THE WITNESS: I'm not sure what to do with
8 this.

9 THE COURT: I would hand that back to Counsel.
10 He has a couple of exhibits.

11 MS. ARMSTRONG: Your Honor, if I may approach,
12 I'll grab the exhibits.

13 MR. CHEFFO: We're going to call, your
14 Honor -- we're going to call Mr. Alex Fernandez, your
15 Honor, and just for the -- you may recall, Mr. Fernandez
16 and then Professor Orcutt and then I think that'll be
17 our witnesses.

18 THE COURT: So Mr. Fernandez will go first?

19 MR. CHEFFO: Yes, your Honor.

20 THE COURT: He is the gentlemen for whom there
21 is a sealed portion?

22 MR. CHEFFO: There is, and I -- we're going to
23 try to not seal it --

24 THE COURT: Okay.

25 MR. CHEFFO: -- but I --

1 THE COURT: Excellent.

2 MR. CHEFFO: But thank you for being
3 considerate about that. We're trying to do it at a high
4 enough level that it doesn't really implicate these
5 issues.

6 THE COURT: Okay.

7 MR. ORENT: Your Honor, at this point, a
8 housekeeping item.

9 As the parties have planned to do these
10 closing presentations this afternoon, Mr. Glasser's
11 going to be handling the final witnesses. I'd like to
12 be excused to prepare that argument.

13 THE COURT: That's fine.

14 Do you have any objection?

15 MR. CHEFFO: No, of course not, your Honor.
16 As much as I love Mr. Orcutt -- Orcutt -- Mr. Orent --

17 MR. ORENT: You know, everybody does that to
18 me.

19 MR. CHEFFO: -- I'm -- professor -- you're not
20 the professor yet.

21 My only question, while we're talking about
22 this, we have talked about it and obviously to the
23 extent that the Court would find closings helpful,
24 certainly we're happy to do that. And we also think
25 what might be helpful is some type of posthearing

1 submission -- again, not a hundred pages, but, you know,
2 something within a reasonable period of time to tie some
3 of it together.

4 I -- I think we've both been -- both sides
5 have been very optimistic about -- you know, and there's
6 no fault; I've done it, too. I think I told them
7 yesterday I was going to be an hour and it took longer.
8 I think, you know, Mr. Orent thought it would be 45
9 minutes and obviously it took a little longer.

10 So I'm only raising this because by the time
11 we get through here, you know, I'm not sure I'm going
12 to -- maybe I'll finish, hopefully, by around
13 lunchtime --

14 THE COURT: We'll break at noon.

15 MR. CHEFFO: Right. So I'm not sure I'll be
16 done exactly then and then obviously they'll have some
17 questions and then we'll have, you know, Professor
18 Orcutt, you know.

19 So to the extent, obviously, we have time and
20 your Honor has the inclination to hear some -- you know,
21 some 20, 30 minutes of closings each, obviously we'd be
22 happy to do that, but in lieu of that, we certainly can
23 submit or even in addition to that.

24 So that all -- obviously whatever your Honor
25 thinks is best.

1 THE COURT: Okay. We'll cross that bridge
2 when we get there this afternoon. And I'm happy to hear
3 arguments if counsel would like if we have time.

4 MR. CHEFFO: Great.

5 MR. ORENT: Thank you, your Honor.

6 THE COURT: All right.

7 THE CLERK: Mr. Fernandez, would you please
8 rise and raise your right hand.

9 **ALEX FERNANDEZ**, having been first duly sworn,
10 testified as follows:

11 THE CLERK: Thank you. Please state your full
12 name and spell your last name for the record.

13 THE WITNESS: Alex Fernandez,
14 F-e-r-n-a-n-d-e-z.

15 THE CLERK: Thank you very much. Please be
16 seated.

17 DIRECT EXAMINATION

18 BY MR. CHEFFO:

19 Q. It's still morning, Mr. Fernandez. Good
20 morning.

21 A. Good morning.

22 Q. Were you asked to prepare a report in
23 connection with this litigation?

24 A. Yes, I was.

25 Q. And would you please tell the Court what --

1 the general scope of what you were asked to do in terms
2 of what you were asked to address?

3 A. I was asked to address the solvency of the
4 company as well as the company's ability to meet its
5 operating needs and its obligations.

6 Q. And did you work with us and ask us to assist
7 you in preparing some slides that would assist and
8 facilitate your testimony here today?

9 A. I did.

10 Q. So one of those slides, in order to try and
11 move this along, we've prepared a summary of your
12 professional experience and education. Would you be
13 good enough to just explain for the Court and take the
14 Court through some of your experience and education.

15 A. Certainly. I have a bachelor's degree in
16 accounting from the University of Florida, minor studies
17 in economics.

18 I spent the first five years of my career with
19 Coopers & Lybrand, where I had the responsibilities of
20 performing multiple audits of multinational
21 corporations, including addressing their ability to
22 continue as a going concern in each and every case.

23 I then spent the next approximately five years
24 with Deloitte, where I ran -- I was a manager of their
25 litigation service group, which primarily focused on

1 evaluations and due diligence work as well as
2 investigative audits and assessment of damages.

3 Subsequent to that, I started what is now AFC
4 Group. I'm the managing director. It's a specialized
5 firm that focuses on those services as I was performing
6 at Deloitte.

7 I'm a certified public accountant. Obviously
8 you need to be that in order to be able to opine on the
9 fair value of financial statements with these firms.

10 In addition to that, I'm also a certified
11 fraud examiner, which is a certain level of experience
12 and education and continuing education relating to the
13 identification of fraud.

14 And I'm a certified valuation analyst, which
15 focuses on the valuation of companies and allows you to
16 issue certified valuation reports on companies.

17 Q. All right. Are the types of issues, albeit a
18 narrow issue, that you've been asked to render an
19 opinion on here today consistent with your professional
20 training, your work experience, and your education?

21 A. Yes, they are.

22 Q. Is this the first time you've testified in
23 court?

24 A. No, it is not.

25 Q. Would you give us just a general overview of

1 the types of cases that you've testified in and some of
2 the -- the clients, the government entities that you've
3 testified on behalf of?

4 A. Certainly. I've been retained by the federal
5 government, U.S. Government, U.S. Attorney's Office,
6 been retained by the SEC, FDIC, RTC. I was the expert
7 for the Committee of Commerce in the review of financial
8 institutions during the financial institution crisis.

9 I have been retained by foreign governments to
10 review complex financial transactions. I've been also
11 retained by multiple multinational companies in
12 performing either investigative audits, valuation work,
13 or doing assessment of damages in litigation.

14 Q. We don't need to run through all of them, but
15 is it fair to say that in addition to what we've talked
16 about, you've also been a member of several professional
17 associations and affiliations?

18 A. Yes, I have.

19 MR. CHEFFO: Your Honor, I'd move
20 Mr. Fernandez as an expert in solvency and accounting.

21 MR. GLASSER: No -- no objection.

22 THE COURT: All right. Motion granted.

23 MR. CHEFFO: Thank you, your Honor.

24 Q. You are being compensated for your time?

25 A. Yes, I am.

1 Q. And what is your hourly rate?

2 A. It's 475 an hour.

3 Q. And prior to your work in this case, have you
4 ever done work for Atrium Medical?

5 A. No, I have not.

6 Q. Have you ever worked with me before?

7 A. No, I have not.

8 Q. Have you ever worked with Getinge AB?

9 A. No, sir.

10 Q. Any Getinge-related company or entity?

11 A. No, sir.

12 Q. And am I correct you have no financial
13 interest or affiliation with any of the Getinge group of
14 companies?

15 A. That is correct.

16 Q. Now, before we get into the details, would you
17 provide just a brief summary of your opinion in this
18 case?

19 A. I have concluded that as of December 31, 2017,
20 that Atrium was, in fact, solvent. It had adequate
21 capital, it had sufficient liquidity to meet its
22 operating needs and its obligations. That held true for
23 2015 and 2016 as well.

24 Q. Now, let's talk a little bit about some basic
25 accounting principles that are, you know, commonplace to

1 you, but may not be commonplace to many of us who are
2 not CPAs.

3 But what are the types of general accounting
4 principles that are used by businesses? What are they
5 called?

6 A. Clearly in the United States we're obligated
7 to report under general accepted accounting principles
8 that provides uniformity in the way companies report and
9 classify assets in their financial statements.

10 Internationally, they use the -- very
11 comparable rules, a set of rules that are referred to as
12 International Financial Reporting Standards.

13 There's a lot of overlap where they are
14 similar, if not identical, but there are some distinct
15 differences as well.

16 Q. And is one of the -- one of the goals of these
17 rules to try and have some uniformity about how -- how
18 financials are recorded and interpreted?

19 A. Certainly. You know, if not, you would have
20 the wild west out there in how people report revenues,
21 report expenses, you know, how they treat their balance
22 sheet and income statements. So it -- it provides a
23 standardized methodology and a process from which to
24 report.

25 Q. Is it fair to say you're very familiar with

1 these rules?

2 A. Yes, I am.

3 Q. And they're essentially your stock-in-trade;
4 they're the way you have been operating when you've been
5 an accountant?

6 A. Certainly. As a CPA, when you issue an
7 opinion, you're basically attesting to the fact that the
8 financial statements are presented fairly in conformity
9 with either domestic standards or international
10 standards.

11 Q. Now, Getinge AB, you know, is a foreign
12 company, a Swedish company, correct?

13 A. That's correct.

14 Q. What -- what are the standards that govern
15 Getinge?

16 A. They're required to report under international
17 financial reporting standards.

18 Q. And for your benefit and the Court's benefit,
19 I may not say Getinge AB all the time, but that's what
20 I'm going to be referring to when I say Getinge. Okay,
21 Mr. Fernandez?

22 A. That's okay.

23 Q. Now, what types of accounting standards apply,
24 if any, to Atrium?

25 A. Well, Atrium does not issue a separate

1 financial statement, so they're not obligated to report
2 under either GAAP or International Standards. Their
3 reports are prepared for internal consumption, to assist
4 management in the running of the company as well as to
5 assist the shareholders, owners of the company, in
6 gauging the performance of the company.

7 Q. So is that -- would it be different if they
8 were a listed company on NASDAQ or the Stock Exchange?

9 A. Well, they can maintain their statements for
10 internal purposes the way they do, but once they issue a
11 formal report, it would be presented in accordance with
12 those standards.

13 Q. And because they're not, they don't have to
14 follow those, the GAAP standards?

15 A. That's correct.

16 Q. Now, what is a consolidated financial
17 statement?

18 A. Again, if you have a parent company with
19 multiple subsidiaries, they are, in fact, required to
20 consolidate those subsidiaries into one financial
21 statement, one income statement, one balance sheet, one
22 cash flow statement, one set of footnote disclosures.

23 Q. So the IFRS, which -- by which -- which binds
24 Getinge AB, requires Getinge AB to compile consolidated
25 financials; is that right?

1 A. That's correct. Any wholly owned subsidiary
2 or subsidiary where they have a -- control is defined by
3 the regulations would need to be consolidated and rolled
4 into their financials.

5 Q. But you know, and we've seen throughout the
6 last few days and more so in the discovery, that Atrium
7 does maintain financial records, correct?

8 A. They certainly do.

9 Q. And why do they do that?

10 A. As a separate entity, they need to be able to
11 measure -- first of all, they need to have the tools to
12 be able to manage the company. Financial statements
13 provide that tool to the managers. The owners of the
14 company need to have a way to measure their performance.
15 So it's necessary from multiple standpoints.

16 Q. Now, do -- because Atrium doesn't -- is not
17 required to follow GAAP and uses its -- its financials
18 for internal purposes, does that mean that they're
19 somewhat inaccurate or improper or -- or somehow not
20 useful?

21 A. Not at all.

22 Q. And in connection with your work and your
23 evaluation and your deep dive into some of these
24 financial issues, have you found any issues that lead
25 you to believe that the Atrium financial statements are

1 not reliable or inaccurate?

2 A. No, I have not.

3 Q. And that's not a basis of your testimony here
4 today, is it?

5 A. I'm sorry?

6 Q. That -- that -- that's not part of your
7 opinion or your testimony today, correct?

8 A. While I did not perform an independent audit
9 of the statements, I have no reason to believe that the
10 numbers were not fairly presented. I perhaps took
11 issues with a couple of classifications just for
12 purposes of determining solvency, but that's more of a
13 tool than it is a result of the way they managed their
14 internal records.

15 Q. In determining solvency -- and we'll talk a
16 little bit about this later, but in determining
17 solvency, you -- you found it was important to apply the
18 GAAP standards, correct?

19 A. There's -- there's certain measurements --
20 there are certain measurements --

21 MR. GLASSER: Now that we're getting into the
22 opinion, I'd object to leading, like to the exact
23 opinion.

24 THE COURT: Okay.

25 MR. CHEFFO: I'll try and do better, your

1 Honor.

2 THE COURT: Okay. Go ahead.

3 Q. In connection with your -- your -- your
4 analysis and your opinion with respect to solvency, how,
5 if at all, did GAAP come into play?

6 A. Well, to the extent that, you know, 30
7 years -- 38 years of applying and analyzing financial
8 statements, I'm used to seeing them represented in
9 accordance with GAAP. I usually try to get them to that
10 same standard in order to be able to properly analyze
11 them.

12 But more specifically, when you're looking at
13 specific items such as gross profits and gross margins
14 and current ratios, you want to make sure that you're
15 considering the right accounts for those measurements
16 tools.

17 Q. Okay. Now, Getinge AB's financial statements
18 are audited, correct?

19 A. Yes, they are.

20 Q. Do you know who audits them?

21 A. I believe PricewaterhouseCoopers is their
22 auditors.

23 Q. A large, very prominent organization, right?

24 A. One of the final fours.

25 Q. And are Atrium's financial statements audited,

1 to the extent that you know?

2 A. Well, they would be subjected to the same
3 procedures as the parent company. They're not audited
4 on a separate company basis, but they are subjected to
5 audit procedures based on the parent company's audit.

6 Q. Okay. Thank you.

7 Now, as a general matter, what is solvency?

8 A. In the most general way to look at it,
9 solvency is when you have assets in excess of
10 liabilities. That's generally the first thing that you
11 look at.

12 However, you also want to go beyond that and
13 look at the company's ability to meet its current
14 operating needs as far as do they have sufficient
15 liquidity to meet those operating needs and that they
16 can meet their financial obligations as well. And
17 normally we use the term foreseeable period, but that's
18 usually defined as within the next 12 months.

19 Q. Okay. And what is adequate capitalization?

20 A. Again, it goes part and parcel with the
21 entity's ability to meet its operating needs; does the
22 entity has sufficient capital to meet its operating
23 needs and its obligations.

24 Q. And when you are undertaking the task or the
25 assignment of evaluating a company's solvency, how do

1 you go about doing that?

2 A. You start off by going and doing an analytical
3 review of the financial statements, look at the income
4 statement, analyze the income statement, try to identify
5 what the key metrics are, whether the company is a net
6 contributor to capital in each and every year or whether
7 they're actually drawing on capital as a result of
8 operating losses. If there are operating losses to be
9 considered, you want to find out why they're losing
10 money; is this a recurring issue, is this a nonrecurring
11 issue.

12 So you want to be able to do a -- a very close
13 look at the income statement as well as the balance
14 sheet, which will tell you the assets that are available
15 that may be convertible into cash, the liabilities that
16 are going to become due over the next 12 months, does
17 the company have the ability to meet those obligations.

18 Q. Okay. And we'll talk a little more about it,
19 but in addition to looking at -- at the documents, the
20 balance sheet, the income statement, did you also -- in
21 connection with your assignment in this case, did you
22 speak with anyone? Did you look at any other materials?

23 A. Well, certainly. It's not enough to read the
24 statements. You have to have an understanding of how
25 the different accounts are presented, what's captured

1 within the individual accounts, what is the substance of
2 that account, and how would you consider that in a
3 solvency analysis.

4 So I did have interviews with both the tax
5 director and the CFO of the company. In a
6 multinational, you have all the transfer pricing issues,
7 which are primarily tax-related issues or regulated by
8 the tax bodies, I should say. So you have to have an
9 understanding of how that -- how those transfer pricing
10 adjustments are being recorded and are they, in fact, a
11 fair value as required by the taxing authorities, are
12 they in compliance with the various authorities, whether
13 it's European authorities, UK authorities, U.S.
14 authorities.

15 Q. Particularly with a company that's a
16 subsidiary that is not required to follow the GAAP
17 rules, that's not audited, is there anything untoward or
18 improper or nefarious about actually talking to the CFO,
19 the head of tax, and the CEO in order to just understand
20 how the business operates and how the policies and
21 procedures are being implemented?

22 A. I don't see how you can do that without those
23 discussions.

24 Q. And do you believe that the information that
25 you were provided and that you reviewed was sufficient

1 to enable you to assess Atrium's solvency and
2 capitalization through December 31st, 2017?

3 A. Certainly.

4 Q. And would you give the Court just a general
5 overview or as much as you need to to explain what steps
6 you took in order to determine whether the company was
7 solvent up to December 31st, 2017.

8 A. I started by analyzing the income statement.
9 I was trying to make two basic determinations from
10 reviewing the income statement; does the company
11 generate a profit from the sale of the units that it is
12 manufacturing, a gross profit, and does the company
13 generate an operating -- operating income or an
14 operating loss from the total results from operation.

15 If the company is reflecting a loss or
16 reflecting a negative number in any of those categories,
17 then you want to make sure you understand why it is
18 reflecting that negative number and that's where the
19 inquiries and the consultations are important.

20 Q. And that's what you were talking about
21 earlier. To the extent that you have a question about
22 either a positive or a negative number that may need
23 some explanation, that's when you would talk to some of
24 the professionals?

25 A. Each one of those observations may require you

1 to dig deeper. You know, you don't necessarily accept
2 it at face value. You want to know why.

3 So, for example, if a company is reflecting a
4 negative gross profit number, you want to understand
5 why. If the company's losing money every time it sells
6 a product, the more they sell, the more they're going to
7 lose, that's obviously a critical concern in a solvency
8 analysis.

9 If the company's net result, its net income,
10 is a negative number, obviously you want to make sure
11 that the company has sufficient capital to absorb those
12 losses for a foreseeable period or until the point that
13 they can actually turn that around.

14 Q. And, similarly, you don't -- am I correct you
15 don't take at face value something that somebody tells
16 you from the company if it's inconsistent with your
17 professional experience or documentary evidence, right?

18 A. Well, certainly. I mean, you go in there with
19 your understanding of how it's supposed to be done, how
20 the companies typically do it, and that's the way you
21 pursue your discussions.

22 Q. Now, you indicated that you reviewed Atrium's
23 income statements for 2015 to 2017, right?

24 A. That's correct.

25 Q. And would you just explain for us what an

1 income statement is?

2 A. The income statement in this case is capturing
3 all the transactional data of the company for the prior
4 12 months, so from December -- the 12 months prior to
5 December 31, 2017, 2016, and 2015. It ends up being a
6 scorecard of how it performed that year. It reflects
7 the revenues that they realized, the expenses that they
8 incurred, and any unusual or nonrecurring items that
9 should be further considered.

10 Q. And how is -- what can you determine from an
11 income statement and how is it a component in connection
12 with a solvency analysis?

13 A. Well, again, that's -- part of your task is to
14 determine whether the company has the ability to meet
15 its current operating needs. So, therefore, you want to
16 know whether their performance is indicating a drawdown
17 of capital or an augmentation of capital. And then when
18 you look at the balance sheet, you make the
19 determination whether that capital is there for it.

20 So you look at each and every year
21 historically to try to understand what to expect over
22 the next 12 months.

23 Q. Now, this is -- and I apologize to you and to
24 the Court. These are, admittedly, some small numbers,
25 but we tried to call out the areas that I think we'll be

1 focusing on.

2 Do you recognize this document?

3 A. Yes. These are the internal statements that
4 are produced by Atrium.

5 Q. Okay. And this is a document that you
6 reviewed, correct?

7 A. That's correct.

8 Q. Now, in your report, you prepared something as
9 Exhibit A.

10 So -- before we do that, so the -- the -- your
11 Honor, this isn't that much better, but it -- I don't --
12 you know, I'm not going to go into great detail. If
13 you'd like a copy at any time, obviously just let me
14 know.

15 THE COURT: Okay.

16 MR. CHEFFO: All right. Thank you.

17 Q. So this starts '15 -- I think we'll see this
18 just from a format purpose. I was a little confused
19 initially, right, sometimes when we're used to seeing
20 things left to right, but this is '15, '16, '17 starts
21 on the right, right?

22 A. That's correct.

23 Q. Okay. Now, I want to take a minute just to
24 have you explain what this is and why you went about
25 creating Exhibit A to your report.

1 A. Well, primarily when you're dealing with a
2 multinational company that has transactions with an
3 affiliated company, you have transfer pricing rules
4 that -- that they are obligated to follow in accordance
5 to the tax instructions and according --

6 Q. Let's just stop there.

7 A. -- to the regulatory bodies.

8 Q. Just briefly, when you transfer pricing, just
9 tell us what that generally means.

10 A. If two companies that are part of a group or
11 two affiliates have companies within each other, the
12 rules require those transactions at the end of the day
13 be reflected at fair value. Those rules are critical
14 because without that a company can manipulate its
15 earnings and allocate earnings.

16 Many of the taxing authorities realized that
17 this was a common tool being done about 10, 15 years
18 ago, where multinationals would allocate costs to the
19 high-taxing districts and revenues to the low-taxing
20 districts so they can maximize or pay the least amount
21 of taxes possible.

22 Transfer pricing rules basically came back and
23 said, no, you have to be able to demonstrate to the
24 authorities that those transactions are being valued at
25 fair value. And you -- that obligation is the entity's

1 obligation, the reporting company's obligation.

2 So companies would generally have studies
3 done, generally have agreements, generally have, you
4 know, the -- the documentation to suffice their
5 allocation of revenues and costs at a fair value to the
6 taxing authorities and to the regulatory authorities.

7 Q. Okay. And let's just be clear about what it
8 is Exhibit A is and what it is not.

9 So did you do this to manipulate any of the
10 numbers or the -- the values in -- in the statements?

11 A. No, this -- this was simply done to recast
12 the two line items that pick up the part of the sales
13 revenues that are not reflected in the internal and
14 external sales categories.

15 So to properly reflect a hundred percent of
16 the revenues derived from the sale of the product, we
17 needed to reclassify or to group the transfer pricing
18 adjustments in with the sales.

19 Q. So all the numbers are the same, right?

20 A. The numbers are exactly the same. The net
21 results for the company, as you can see, the \$527,000
22 loss in 2017, was, in fact, what they reflected on their
23 internal. All this is is basically recharacterizing or
24 grouping all the revenue items for the sale of the
25 product within one group so they can properly be

1 measured against the cost of goods sold.

2 Q. And you did that so that they would be in
3 accordance with what you understand the GAAP regulations
4 to be?

5 A. Yeah. GAAP basically requires all your
6 revenues to be reflected together if they're derived
7 from the sale of the same product in the same process.

8 Q. So it's all the same numbers, you only focused
9 on two areas that you believed needed to be -- I think
10 you said reclassified in order to make them consistent
11 with the GAAP rules; is that what you did?

12 A. Without -- without going through that process,
13 on first blush it would appear that the company's
14 actually losing money from the sale of the units. And
15 that's because the company is initially recording the
16 sale at a standard costing process from the originating
17 entity, Atrium, to the distribution center. That does
18 not reflect the total revenues that the company
19 benefitted from. That revenue isn't realized until the
20 sale is completed at the sales affiliate and then
21 transferred back to Atrium through these two accounts
22 through the transfer pricing adjustments.

23 MR. CHEFFO: Okay. May I just approach the --
24 that board there for a minute? I'm going to go a little
25 bit off script.

1 Q. I don't know if you can even see it from
2 back there, but just while we're on this topic, am I
3 generally understanding -- you heard earlier that there
4 was an initial transfer of funds at this stage, correct,
5 when -- when basically the -- the company sent it to the
6 distribution center, correct?

7 A. The first step is Atrium sends the product to
8 the distribution center. At that point, Atrium is
9 recording a profit at standard cost. So it's only
10 recording a portion of the revenues that are being
11 derived from the sale of that profit.

12 Q. So -- so -- so it wouldn't be accurate to just
13 only look at this amount of money that the company
14 received, right, because ultimately we saw the chain.
15 Once it's actually sold to the customers, there's
16 additional funds that get transferred up through the
17 chain back to the company, correct?

18 A. Certainly. The -- the final sales price to
19 the end user is not determined until the sale is closed
20 by the sales entity. So that would be your -- your
21 third circle down. At that point, then there's a
22 true-up, which is basically the -- a determination of
23 here's how much money we made on the sale of the product
24 and we're going to allocate those profits based on their
25 internal agreements, which I believe is approximately 50

1 percent.

2 Q. Right. So if we were to just look at this
3 transaction and say -- and pretend like this didn't
4 exist, right, it would look like the company's getting a
5 lot less than it ultimately is, correct?

6 A. Certainly. It doesn't include the full sales
7 that's being realized by Atrium.

8 Q. So what you tried to do was to basically
9 capture the reality of the situation, correct?

10 A. Correct.

11 Q. And basically not just look at the amount of
12 money that comes at this stage, but figure out exactly
13 the real real-life impact, which is when there's a sale,
14 they actually get 50 percent -- approximately 50 percent
15 of the profits, correct?

16 A. So they're actually deriving revenues at two
17 different stages; the first stage on transfer, the final
18 on the -- on the sale to the end user.

19 MR. GLASSER: I object to the leading. I
20 think the witness should be asked a -- some questions
21 that he can answer.

22 THE COURT: Okay. Overruled.

23 Go ahead.

24 Q. Now -- excuse me, your Honor. I think I just
25 covered some of my outline, so I'm just going to skip

1 through it.

2 So let's -- let me just ask you, what is --
3 what does this slide represent?

4 A. It highlights the two accounts that are
5 reflected within the income statement of Atrium that are
6 part of the sales proceeds that are being derived by
7 Atrium. So I'm basically including them at the top part
8 of the statement so that I can properly analyze the
9 gross profit from the sale of the units.

10 Q. So when it says above the line and below the
11 line, can you just explain what that means?

12 A. Well, above the -- the line basically is, you
13 know, what is the gross profit that the company's making
14 from the sale of each individual unit. So, therefore,
15 we have to consider not only the standard cost in the
16 first stage of revenues that they realize, but also the
17 final sale proceeds that they share or they benefit
18 from.

19 So what this does is it allows me to consider
20 the full revenues that are being realized by the company
21 and comparing it to the cost to manufacture those
22 products and conclude that they are, in fact, being
23 manufactured and sold at a profit.

24 Q. So -- and that's just what we talked about,
25 right, in the sense of how the transaction actually

1 works?

2 A. That's correct.

3 Q. And --

4 A. This is the mechanics of that chart, I guess.

5 Q. And that's -- am I correct that that's all you
6 did in terms of using the same numbers and you just
7 focused on that aspect of the balance sheet and then
8 created Exhibit A?

9 A. Yeah, it would be inconsistent with generally
10 accepted standards to analyze gross profit without
11 analyzing all the revenues derived from the sale of the
12 product.

13 Q. And because -- by virtue of the fact that you
14 looked at these in the way that you did and created
15 Exhibit A, does that mean that Atrium's books are
16 unreliable or inaccurate or somehow should be
17 disregarded?

18 A. No, I didn't change any of the numbers. I
19 mean, these are their numbers. Management is well aware
20 of what items need to be included when analyzing gross
21 profit. I -- I had detailed discussions with their CFO
22 regarding this and he said, of course you have to
23 include those line items in order to analyze gross
24 profit.

25 So, no, it's -- it's just easier for me to

1 reflect that calculation after I make these two
2 adjustments rather than doing a separate, set-aside
3 calculation.

4 Q. And you were asked to perform a solvency
5 analysis, correct?

6 A. Correct. I mean, gross profit from the sale
7 of your product is an important metric to look at in a
8 solvency analysis.

9 Q. And the -- the way the books and records and
10 financial information that's maintained by the company,
11 that has many purposes, right?

12 A. That's correct.

13 Q. Now, for solvency analysis, are we concerned
14 with gross profit?

15 A. Certainly.

16 Q. Would you please tell us why?

17 A. If a company can't make money, if a company
18 can't cover its costs to manufacture a product from the
19 sales price that it derives from it, then you've got an
20 issue. So you've got to -- you know, you've got to do a
21 lot more digging and understanding to find out how it is
22 that they're going to overcome that significant problem.
23 I mean, you could sell a product at a loss for a
24 short-term period of time, but you cannot indefinitely
25 sell a product at a loss.

1 Q. You had an opportunity to hear Mr. Messina
2 testify yesterday?

3 A. I did.

4 Q. And you've read his reports?

5 A. I have.

6 Q. How does what you've done differ from what
7 Mr. Messina did with respect to these issues and would
8 you explain for the Court why you think, if you think,
9 that his view was -- was not the right way to look at
10 this?

11 A. He ignores the transfer pricing adjustments
12 that are reflected in green on this schedule. So he
13 ignores a significant portion of the revenues derived
14 from the sale of the product to conclude that the
15 company is, in fact, losing money on the sale of each
16 and every product. It's just an incomplete assessment.

17 Q. Now, were you able to identify any
18 nonrecurring extraordinary expenses from your review of
19 the income statement?

20 A. I was.

21 Q. And why don't you just tell us, what are
22 nonrecurring extraordinary expenses?

23 A. Well, again, you're analyzing the income
24 statement for purposes of trying to figure out whether
25 the company's going to be using capital over the next 12

1 months or contributing capital. If there are items that
2 are nonrecurring, then you can exclude that from your
3 analysis just when you're thinking about are they likely
4 to need capital or lose capital.

5 If a company is reflecting a net loss, but
6 that net loss is the result of a nonrecurring
7 extraordinary item, you have to consider that in your
8 cash flow demands.

9 Q. So just as an example, that might be, you
10 know, storm damage, correct, or litigation that's a
11 one-time deal; is that the type of thing --

12 A. As long as it's determined that it is a
13 one-time deal and not a recurring event.

14 Q. Now, based on your analysis, your discussions,
15 your experience, your looking at all the information,
16 your analysis of the transfer pricing issues, taking
17 into account Mr. Messina's views and opinions, what
18 opinion did you form from conducting your review of all
19 of that?

20 A. Well, we would have to continue to go beyond
21 the income statement. The income statement showed me
22 that the company did have a drawdown in capital for the
23 three years that I analyzed, but that a large portion of
24 that drawdown in capital resulted from nonrecurring
25 events. But, still, if you anticipate a drawdown in

1 capital, if there's sufficient resources that are
2 reflected on the balance sheet to absorb that drawdown.

3 So the next step would be then to analyze what
4 are the sources of capital, the sources of cash and
5 liquidity available to the company as of that
6 measurement date, December 31, 2017.

7 Q. Okay. And could you just tell us what a
8 balance sheet typically is and what this represents,
9 slide 12, which is Plaintiff's Exhibit 31?

10 A. I mean, these are the real accounts as opposed
11 to the nominal accounts as of a specific point in time.
12 So we are measuring the accounts of the company as of
13 December 31, 2015, '16, and '17. It tells us what
14 assets are convertible to cash within the next 12
15 months, what liabilities are likely to be paid or
16 obligated to be paid within the next 12 months. It'll
17 alert you to any deficiency in that calculation and to
18 see whether there are other sources of -- of assets that
19 can be converted into current assets or liabilities that
20 are convertible into long-term liability that will
21 assist you in meeting your current obligations.

22 And it also tells you what the net worth or
23 the capital position of the capital -- of the company is
24 at a specific point in time.

25 Q. Okay. Now, let's look at this next slide.

1 This is Atrium's internal balance sheet, correct?

2 A. That's correct.

3 Q. And how, if at all, did these balance sheets
4 or this balance sheet factor into your analysis?

5 A. Well, the first thing it tells you is if you
6 go to the total equity number as of December 31, 2017,
7 the company had [REDACTED] in assets in excess of
8 liabilities.

9 Q. Can I just stop you for a minute?

10 A. Certainly.

11 MR. CHEFFO: I had a little trouble. I just
12 want the Court to -- just to orient your Honor that --
13 so we're pulling out, obviously, a section from this,
14 which is line 21-10.

15 Q. I'm sorry, Mr. Fernandez. Please go ahead.

16 A. Okay. So this roughly -- the total equity
17 line item represents the net assets of the company over
18 its liabilities. So the company has [REDACTED] assets
19 on a historical basis in excess of the total liabilities
20 that are reflected in the company's books and records.

21 So that is an early, quick look that you --
22 that you want to get comfortable with; what is the
23 capital position, the net worth of the company, the
24 equity of the company, at these various measurement
25 dates.

1 Q. Even from a lay --

2 A. It's a starting point, though, not a finishing
3 point.

4 Q. Understood. But even from a layperson's
5 perspective, this is basically saying they have more
6 assets than liabilities, right?

7 A. Right. Which, you know, is, in the simplest
8 form, solvency.

9 Q. Now --

10 THE COURT: Attorney Cheffo, we're going to
11 take --

12 MR. CHEFFO: Oh.

13 THE COURT: -- our lunch break. Is that --

14 MR. CHEFFO: No, that's perfect, your Honor.

15 THE COURT: All right. Good. We'll be back
16 then around one o'clock.

17 MR. CHEFFO: Thank you.

18 (Lunch recess taken at 12:00 p.m.)

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C E R T I F I C A T E

I, Liza W. Dubois, do hereby certify that the foregoing transcript is a true and accurate transcription of the within proceedings, to the best of my knowledge, skill, ability and belief.

Submitted: 9/27/19

/s/ Liza W. Dubois
LIZA W. DUBOIS, RMR, CRR

I certify that the foregoing is a true and correct copy of the transcript originally filed with the Clerk of Court on September 27, 2019, and incorporating redactions of personal identifiers requested by the Honorable Landya B. McCafferty in accordance with Judicial Conference policy. Redacted characters appear as a black box in the original transcript and blank lines in the copies.

Dated: 10/28/19

/s/ Liza W. Dubois
LIZA W. DUBOIS, LCR, CRR