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11 Attorneys for Plaintiff

13 **SUPERIOR COURT OF THE STATE OF CALIFORNIA**  
14 **FOR THE COUNTY OF LOS ANGELES – CENTRAL**

16 CHARLES JOHNSON, IV; CHARLES  
17 JOHNSON V, a minor, by and through his  
18 Guardian ad Litem, CHARLES  
19 JOHNSON IV; LANGSTON JOHNSON,  
20 a minor, by and through his Guardian ad  
21 Litem, CHARLES JOHNSON, IV; in their  
22 capacities as Successors in Interest to  
23 KYIRA ADEL DIXON aka KIRA  
24 JOHNSON,

21 Plaintiffs,

22 v.

23 CEDARS-SINAI HEALTH SYSTEM,  
24 CEDARS-SINAI MEDICAL CENTER,  
25 A business organization, form unknown;  
26 AND DOES 11 to 20, Inclusive

26 Defendants.

CASE NO.: **22STCV14868**

**COMPLAINT FOR DAMAGES FOR  
DISCRIMINATION AND DISPARATE  
HEALTH CARE TREATMENT AND  
RACISM IN MEDICINE**

- 1. **Violation of Unruh Civil Rights Act (Cal. Civil Code § 51)**
- 2. **Request for Injunctive Relief (Cal. Civil Code § 52)**

Judge:  
Dept.:

Action Filed:

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**COMPLAINT**

Now come, in their capacities as Successors in Interest to KYIRA ADEL DIXON (also known as, and herein referred to as “Kira Johnson”, Plaintiffs CHARLES JOHNSON, IV; CHARLES JOHNSON V, a minor, by and through his Guardian ad Litem, CHARLES JOHNSON IV; LANGSTON JOHNSON, a minor, by and though his Guardian ad Litem, CHARLES JOHNSON, IV; and bring this action for violation of Kira Johnson’s civil rights and denial of health care she was entitled to because of her race, which resulted in her untimely and wrongful death:

**PARTIES TO THE ACTION**

1. Plaintiffs CHARLES JOHNSON, IV; CHARLES JOHNSON V, a minor, by and through his Guardian ad Litem, CHARLES JOHNSON IV; LANGSTON JOHNSON, a minor, by and though his Guardian ad Litem, CHARLES JOHNSON IV; are the Successors in Interest to KIRA JOHNSON and are authorized to commence this action pursuant to C.C.P. Section 377.30, *et seq.*
2. Cedars-Sinai Health System an Cedars-Sinai Medical Center and Does 11-20 were at all times herein mentioned, duly organized California corporations and partnerships existing under and by virtue of the laws of the State of California. Said Defendants, and each of them, owned, operated, managed, controlled and administered a general medical facility, hospital or 24-hour care facility within said County, State of California, and held themselves out to the public at large and to Plaintiffs herein as properly equipped, fully accredited, competently staffed by qualified and prudent personnel and operating in compliance with the standard of care maintained in other properly equipped and efficiently operated and administered accredited general medical facilities, hospitals and outpatient clinics in said community, offering full,

1 competent and efficient hospital, emergency, clinical, medical, surgical, laboratory, x-ray,  
2 anesthesia, paramedical services and outpatient clinics to the general public and to decedent  
3 herein. Plaintiffs are informed and believe and thereon allege that said Defendants, and each of  
4 them, administered, governed, controlled, managed and directed all the necessary functions,  
5 activities and operations of said general medical facility, hospital or 24-hour care facility,  
6 including its nursing care, intern, resident and house staff, physicians and surgeons, medical  
7 staff, x-ray, intensive care, recovery room and emergency room departments and clinics,  
8 including but not limited to personnel, staff and supplies of said facilities and clinics.

10 3. Cedars-Sinai Health System, Cedars-Sinai Medical Center and Does 11 to 20 qualify as  
11 business establishments under Cal. Civ. Code § 51. Collectively they shall be referred to as  
12 Defendants.

13 4. Plaintiffs are informed and believe and upon such information and belief allege that at all times  
14 herein mentioned, Defendants, and each of them, were the agents, servants, employees and  
15 copartners of their said co-Defendants, and as such, were acting within the course and scope of  
16 such agency, partnership, and employment at all times herein mentioned; that each and every  
17 defendant, as aforesaid, when acting as a principal, was negligent in the selecting, hiring and  
18 maintaining of each and every other Defendant, as its agents, servants, partners and employees.

19 5. Does 1-10 were the employees and/or agents of Cedars-Sinai Health System and/or Cedars-  
20 Sinai Medical and/or Does 11-20 acting at all relevant times within the scope of their  
21 employment and/or agency.

22 6. At all times herein mentioned, decedent KIRA JOHNSON, a Black woman, was in the  
23 exclusive custody and control of Defendants, and each of them. She was dependent on the  
24 Defendants for the lifesaving medical treatment that she needed.

25 7. Plaintiff is informed and believes, and thereon alleges, that at all times mentioned in this  
26  
27  
28

1 Complaint, Defendants were the agents and/or servants and/or employees and/or joint  
2 venturers of their co-defendants, and in undertaking the actions, and failing to act, as alleged in  
3 this Complaint were acting within the course and scope of such agency and employment and/or  
4 ratified the acts of the other.

5 8. The true names, identities or capacities, whether individual, associate, corporate or otherwise  
6 of Defendants DOES 1 through 20, inclusive, are unknown to plaintiffs who therefore sue said  
7 defendants by such fictitious names. When the true names, identities, or capacities of such  
8 fictitiously designated defendants are ascertained, Plaintiffs will ask leave of court to amend  
9 this Complaint to insert the true names, identities and capacities together with the charging  
10 allegations.

11 9. At all times herein mentioned, Defendants and each of them, were the agents, servants,  
12 employees and/or joint venturers of each other and of their said codefendants and were acting  
13 within the purpose and scope of their employment, servitude, agency or joint venture.

14 10. Two or more of the Defendants acted in such a manner and with such unity of interest and  
15 ownership that the separate personalities of the corporation and the individual no longer existed  
16 and, as such, they are the alter egos of the others and adherence to the fiction of separate  
17 existence would, under the circumstances, promote fraud or injustice.

18 11. The conduct of the Defendants and Does 1-10 was ratified by the other Defendants and Does  
19 11-20 so that the ratifying party is liable for the acts of the party to who ratification was  
20 extended.

21  
22  
23  
24 **JURISDICTION AND VENUE**

25 12. The Defendants are founded and/or established and/or incorporated under the laws of the State  
26 of California and have their principal places of business in the County of Los Angeles.

27 13. The events complained of herein took place in the County of Los Angeles.

1 14. The amount in controversy exceeds the jurisdictional threshold of the California Superior  
2 Courts.

3  
4 ///

5  
6 **FACTS COMMON TO ALL COUNTS**  
7

8 15. Kira Johnson was a strong healthy pregnant Black woman who was admitted to Cedars-Sinai  
9 Medical Center on April 12, 2016, to give birth to her second son, Langston, by pre-planned,  
10 regularly scheduled, cesarean. The surgery was done recklessly. The time, start to finish, was a  
11 mere 17 minutes.

12 16. Langston was born on April 12, 2016, at 2:19 p.m. His mother Kira died 12 hours 3 minutes  
13 later on April 13, 2016, at 2:22 a.m. The evidence unequivocally shows that she slowly bled to  
14 death over a period of more than 12 hours.  
15

16 17. This was Kira’s second cesarean as that is how she gave birth to her first son Charles. The  
17 surgery being completed in 17 minutes shocked the health care providers who have been  
18 deposed. Defendants profited off of the surgery and profited off of the reckless care provided  
19 to Kira after birth.

20 18. After the 17-minute surgery, the lead Cedars-Sinai surgeon, Dr. Naim, left Cedars and  
21 employees of Defendants (physicians, nurses, and technicians) became the primary care givers  
22 responsible for Kira Johnson’s care and treatment.  
23

24 19. Because of Kira Johnson’s race (a Black woman) she was not given the care and treatment she  
25 was entitled to. The care she was provided was below that which was/is provided to other  
26 woman who are not Black. She would be alive today if she was a White woman. Sworn  
27 testimony and peer reviewed publications by Defendants’ employees and managing agents  
28

1 have established that systemic racism in the delivery of health care exists in medicine, at  
2 Cedars-Sinai.

3 20. A. Washington, a surgical technician, participating in the care and treatment of Kira  
4 Washington, testified under oath, with candor, integrity and bravery, in the case of Johnson IV  
5 et.al. vs. Cedars-Siana Medical Center, Arjang Naim, M.D. et. al. Superior Court, County of  
6 Los Angeles, Case No BC655107. Relevant portions of her testimony, attached as Exhibit A,  
7 at pps 32-34, included the following, verbatim;  
8

9 “Q. Had you seen women of color treated differently at Cedars before?THE WITNESS: Yes.

10 Q. For how long?

11 A. All my career.

12 A. I don't think -- if you're not in my skin or a skin of color, of a black African-American in  
13 the O.R. all these years, that's a long time. I can -- I can write a book. I've heard statements.  
14 I've heard throughout the years in the O.R., behind the scenes. I've heard racial comments  
15 toward patients that were asleep. Didn't know their own surgeon or the surgical team was  
16 talking about the anatomy of a black man versus another white man versus another race. "Oh,  
17 well, you know, black folks, they always have these issues." Oh, my God. You know, just so  
18 many in comments, blatant, some underlying. Because of our skin color? And me, if I speak up  
19 -- I'm afraid if I do speak up, I'm going to be in HR written up. Oh, because of-- it's terrible,  
20 because you think your whole job is at risk. But you have to -- as a black woman also working  
21 in O.R., seeing this, **when I see my black --the black patients come in, I say an extra**  
22 **prayer. And that has been my creed of my career to this day; I say a silent prayer that all**  
23 **goes well. Because you do have racism very much so in the operating room.”**

24 21. Dr. Kimberly Gregory, Director of the Division of Maternal Fetal Medicine and the Vice  
25 Chair, Women’s Healthcare Quality and Performance Improvement in the Dept. of Obstetrics  
26  
27  
28

1 and Gynecology, at Cedar-Sanai, and co-author of Reduction of Peripartum Racial and Ethnic  
2 Disparities: A Conceptual Framework and Maternal Safety Consensus Bundle, published in the  
3 *Journal of Obstetrics, Gynecology, & Neonatal Nursing* (May 2018, Vol. 47, No.3) and  
4 *Obstetrics and Gynecology* (May 2018, Vol. 131, No.5) provided sworn testimony,  
5 demonstrating great integrity, under oath in the case of Johnson IV et.al. vs. Cedars-Siana  
6 Medical Center, Arjang Naim, M.D. et. al. Superior Court, County of Los Angeles, Case No  
7 BC655107, at pps. 26-29, that it was a fact that “Racial and Ethnic disparities exist in both  
8 perinatal outcomes and health care quality.” Relevant portions of Dr. Gregory’s testimony are  
9 attached as Exhibit B.  
10

11 22. She also testified as follows;

12 Q. (reading from her publication) “For example, Black women are three to four times  
13 more likely to die from pregnancy-related causes and have more than a twofold greater  
14 risk of severe morbidity than white women. Is that True?

15 A. Yes sir.” . . . .

16 “Q. Can you tell us why black women don’t get the same quality of care as white  
17 women?  
18

19 A. I believe it’s structural racism.

20 Q. And you’ve seen that; true?

21 A. I live that every day.”  
22

23 23. When asked if she was sitting across the table having coffee or tea and one of them asked her if  
24 Kira Johnson was a victim the racism she saw every day, she replied “She should have gone  
25 back to the Operating Room sooner, yes.”  
26  
27  
28

1 24. The testimony and evidence in Plaintiffs' possession establishes that Kira Johnson, while at  
2 Cedars-Sinai, was the victim of this racism and that she was not afforded the life caring  
3 treatment and surgery that she deserved because of the color of her skin.

4 25. Kira Johnson had clear objective signs of internal bleeding within an hour of the reckless,  
5 lightning-fast, 17-minute repeat cesarean surgery that Defendants made money from.  
6 Defendants and their employees gave better care to non-Black patients on this date and told  
7 Kira's husband that she was not a priority when he begged and pleaded for help having seen  
8 blood in her catheter bag and watching her color and life slowly fade hour after hour for more  
9 than 10 hours. Kira Johnson was deprived of life saving care for more than 10 hours because  
10 of her race. Defendants denied Kira Johnson of the full and equal accommodations,  
11 advantages, facilities, health care, surgery, and privileges and/or services she was entitled to.  
12

13 26. Medical negligence is the 3<sup>rd</sup> leading cause of death in America and California. More than  
14 50,000 (an estimate that researchers say is actually on the low end) women in America each  
15 year deal with dangerous or life-threatening, pregnancy-related complications. Black women  
16 are disproportionately likely to face these complications, and they are also more likely to fall  
17 victim to medical negligence and America's ongoing maternal mortality crisis. ***Black women  
18 are three to four times more likely than white women to die from pregnancy-related  
19 complications.***  
20

21 27. The American health care system has a long history of disparate treatment of Black women  
22 whose health struggles have been systemically minimized or dismissed. This is the reason why  
23 so many Black women die each year after giving birth.  
24

25 28. Plaintiffs are informed and believe and on the basis of said information and belief allege that  
26 the Cedars-Sinai Defendants have fraudulently concealed the true maternal mortality statistics  
27 by transferring dying mothers to the ICU so that their deaths count towards the ICU death toll  
28

1 rather than the maternity department. This shocking and egregious conduct is supported by the  
2 sworn testimony of Cedars-Sinai employees who have testified that race was a factor in Kira  
3 Johnson being denied the life-saving treatment she needed and deserved, treatment which  
4 would have saved her life.

5 29. Kira Johnson would be alive today if she was white.

6 **FIRST CAUSE OF ACTION FOR VIOLATION OF THE UNRUH CIVIL RIGHTS ACT**

7 **(CIVIL CODE § 51) BY PLAINTIFFS AGAINST ALL DEFENDANTS**

8  
9 30. Plaintiffs re-allege as though fully set forth at length and incorporate herein by  
10 reference, all of the allegations and statements contained within this Complaint. Plaintiffs bring  
11 this cause of action as Successors in Interest to Kira Johnson, in accord with *Code of Civil*  
12 *Procedure* § 377.30, *et seq.*, without limitation.

13  
14 31. The anti-discrimination provisions of *Civil Code* Sections 51 apply to the  
15 Defendants.

16 32. The Defendants denied Kira full and equal accommodations, advantages, facilities,  
17 privileges, and services because of her race/color as a Black woman.

18  
19 33. Without limitation, Kira received inferior care to white patients, including but not  
20 limited to a delay and/or denial in treatment because she was Black.

21 34. A substantial motivating reason for Defendants' actions and inactions was Kira's  
22 race/color.

23 35. As a result of the violation of Kira's civil rights and *Cal. Civ. Code* § 51, Kira  
24 suffered intense pain, anxiety, humiliation, fear, and emotional distress as she was dying and  
25 losing her husband and sons.

26  
27 36. The Defendants' conduct was a substantial factor in causing Kira harm.

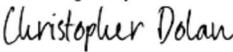


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- 3. Attorneys' fees;
- 4. Punitive damages, according to proof;
- 5. Prejudgment interest;
- 6. For all costs of suit herein incurred;
- 7. For such other and further relief as the Court may deem just and proper.

Dated: May 1, 2022

DOLAN LAW FIRM PC

DocuSigned by:  


---

Christopher B. Dolan M.S.M., J.D.  
 Attorneys for Plaintiffs

Dated: May 1, 2022

TRIAL LAWYERS FOR JUSTICE

DocuSigned by:  


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Courtney Rowley & Nicholas Rowley  
 Attorneys for Plaintiffs

# EXHIBIT A

Atkinson Baker, a Veritext Company  
www.depo.com

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SUPERIOR COURT OF THE STATE OF CALIFORNIA  
COUNTY OF LOS ANGELES

CHARLES JOHNSON, IV; CHARLES )  
JOHNSON, V, a minor, by and through )  
his Guardian ad Litem, CHARLES )  
JOHNSON, IV; LANGSTON JOHNSON, )  
a minor, by and through his Guardian )  
ad Litem, CHARLES JOHNSON, IV, )

Plaintiffs, )

vs. )

CEDARS-SINAI MEDICAL CENTER, )  
a business organization, form )  
unknown; ARJANG NAIM, M.D.; )  
SARA CHURCHILL, M.D.; KATHRYN )  
SHARMA, M.D.; STUART MARTIN, )  
M.D.; BENHAM KASHANCHI, M.D.; )  
and DOES 1 to 100, inclusive, )

Defendants. )

Case No.:  
BC655107

VIDEOTAPED REMOTE DEPOSITION OF  
ANGELIQUE WASHINGTON  
MONDAY, MAY 24, 2021

Atkinson-Baker, a Veritext Company  
(800) 288-3376  
www.depo.com

REPORTED BY: MAXIMILLIAN A. CONTRERAS, CSR #13876  
FILE NO.: AF03D79

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SUPERIOR COURT OF THE STATE OF CALIFORNIA  
COUNTY OF LOS ANGELES

CHARLES JOHNSON, IV; CHARLES )  
JOHNSON, V, a minor, by and through )  
his Guardian ad Litem, CHARLES )  
JOHNSON, IV; LANGSTON JOHNSON, )  
a minor, by and through his Guardian )  
ad Litem, CHARLES JOHNSON, IV, )

Plaintiffs, )

vs. )

CEDARS-SINAI MEDICAL CENTER, )  
a business organization, form )  
unknown; ARJANG NAIM, M.D.; )  
SARA CHURCHILL, M.D.; KATHRYN )  
SHARMA, M.D.; STUART MARTIN, )  
M.D.; BENHAM KASHANCHI, M.D.; )  
and DOES 1 to 100, inclusive, )

Defendants. )

Case No.:  
BC655107

VIDEOTAPED REMOTE DEPOSITION OF ANGELIQUE  
WASHINGTON, taken on behalf of Plaintiffs, via Zoom  
videoconferencing, commencing at 10:08 AM, Monday,  
May 24, 2021, before Maximillian A. Contreras,  
CSR #13876.

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A P P E A R A N C E S

FOR PLAINTIFFS:

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nick@tl4j.com  
henry@czrlaw.com  
(Via Zoom)

FOR DEFENDANTS CEDARS-SINAI MEDICAL CENTER,  
DR. SARA CHURCHILL, DR. KATHRYN SHARMA,  
and DR. STUART MARTIN:

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(213) 580-6334  
kristi.hedrick@lewisbrisbois.com  
(Via Zoom)

ALSO PRESENT:

JEMAL JUDKINS, Videographer  
ATKINSON-BAKER, A VERITEXT COMPANY  
(Via Zoom)

CHARLES JOHNSON IV  
(Via Zoom)

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I N D E X

	PAGE
WITNESS: Angelique Washington	
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E X H I B I T S

NO.	DESCRIPTION	PAGE
1	Medical Record (pg. 46).....	39

CERTIFIED QUESTIONS:

PAGE            LINE

(None)

1 Highlight Mrs. Washington.

2 THE VIDEOGRAPHER: Yes.

3 Ms. Washington, again, right now it's  
4 vertical. If you could turn your device horizontal  
5 and I can get -- yeah, that's perfect for me.

6 Thank you. Okay.

7 MR. ROWLEY: Okay --

8 THE WITNESS: I'm sorry. May I address the  
9 court or you guys? I need to say something.

10 MR. ROWLEY: Sure.

10:13

11 THE WITNESS: I wanted to say there's been  
12 a change. I want to testify freely without any  
13 representation moving forward.

14 MR. ROWLEY: Okay. That's your civil right.

15 BY MR. ROWLEY:

16 Q. I want to go back in time to April 13th of  
17 2016. It's a little bit after midnight. Do you  
18 remember that day? Do you remember that time?

19 A. Yes, I do.

20 Q. What's your role? If we were back in time  
21 standing next to you, I were to say, "Ma'am, what are  
22 you doing here? What's your job? What's your role?"

10:14

23 A. And I will say, "Hi, I'm Angelique Washington.  
24 I'm part of the surgical team. I'm a surgical  
25 technologist and I will be taking good care of you

1 as well helping the surgeon."

2 Q. How much experience do you have in the medical  
3 field at this point in time?

4 A. I have a little over 30 years.

5 Q. What does the surgical tech do?

6 A. Surgical technologist is a -- I would say  
7 they are definitely someone that prepares all of the  
8 equipment, supplies. They critically think throughout  
9 the procedure. We pass instruments. We prep the  
10 patients, if need be. We also assist in circulating 10:15  
11 the room. We're actually making sure that everything  
12 is working, all equipment is in place; that we have  
13 everything -- as much as possible, according to our  
14 preference cards -- ready to give good quality, safe  
15 patient care.

16 Q. Who are the people in the room? Or, to tug  
17 your shoulder, "Who are these folks?"

18 A. Well, here, you have -- at the top of the head  
19 of the table, you have your anesthesiologist who will  
20 administer the general or local anesthesia. 10:16

21 You have your surgeon.

22 You might have his assistant, depending on  
23 what facility you're at.

24 You have, of course, your patient.

25 You have the surgical technologist.

1 and grabs the thoracic trays 1 and 2. We popped those  
2 open, hurrying out there, yelling at me. There's so  
3 much yelling. And meanwhile I'm looking and I'm like,  
4 "Why aren't they --"

5 I connected with Ms. Johnson. I -- let me  
6 say, as a woman of color, I saw -- God forbid, but I saw  
7 myself as a mother as having a son. I saw my daughter-  
8 -in-law, I saw my sisters. I saw so many of us women  
9 that would want the surgeon and the team to fight to  
10 help save me, okay? And I look at this situation and I 10:45  
11 see that they're still collaborating. And I'm thinking,  
12 "Well, is this because this is a woman of color? I hope  
13 this is not because she's black."

14 Now, I wonder if this -- I'm just being honest  
15 with the court. I'm being honest with what you're  
16 asking me and this is what I went -- what went through  
17 my mind. And that's what caused the emotion, all of  
18 the -- the cry out. I tried. And I will say, the  
19 trauma surgeon, he tried. He was the only one that  
20 effectively tried to come in and he -- I ended up 10:46  
21 getting the trays that I need, which took also time.  
22 This was -- this whole thing was not a good patient  
23 safety. The patient safety was out the door.

24 BY MR. ROWLEY:

25 Q. Had you seen women of color treated

1 differently at Cedars before?

2 MS. HEDRICK: Objection.

3 Calls for speculation.

4 Lacks foundation.

5 BY MR. ROWLEY:

6 Q. As a surgical tech, had you seen that before?

7 MS. HEDRICK: Same objection.

8 MR. ROWLEY: Yes?

9 THE WITNESS: Yes.

10 BY MR. ROWLEY:

11 Q. For how long?

12 A. All my career.

13 Q. All of your career?

14 A. Mm-hmm. Yep.

15 Q. I'd imagine that's hard.

16 A. Mm-hmm. Very. Very, very, very hard --

17 Q. Can you give us --

18 A. -- to see -- I'm sorry.

19 I'm sorry.

20 Q. Take some breaths.

21 A. I don't think -- if you're not in my skin or  
22 a skin of color, of a black African-American in the O.R.  
23 all these years, that's a long time. I can --  
24 I can write a book. I've heard statements. I've heard  
25 throughout the years in the O.R., behind the scenes.

10:46

10:47

1 I've heard racial comments toward patients that were  
2 asleep. Didn't know their own surgeon or the surgical  
3 team was talking about the anatomy of a black man versus  
4 another white man versus another race. "Oh, well,  
5 you know, black folks, they always have these issues."

6 Oh, my God. You know, just so many in  
7 comments, blatant, some underlying. Because of our  
8 skin color? And me, if I speak up -- I'm afraid if I do  
9 speak up, I'm going to be in HR written up. Oh, because  
10 of -- it's terrible, because you think your whole job  
11 is at risk. But you have to -- as a black woman also  
12 working in O.R., seeing this, when I see my black --  
13 the black patients come in, I say an extra prayer.  
14 And that has been my creed of my career to this day;  
15 I say a silent prayer that all goes well. Because you  
16 do have racism very much so in the operating room.

10:48

17 Q. Is that something that was a regular thing  
18 up until the point that Kira became one of the patients  
19 in your operating room?

20 MS. HEDRICK: Objection.

10:49

21 Calls for speculation. Lacks foundation.  
22 Assumes facts not in evidence. It's also an incomplete  
23 hypothetical.

24 Go ahead.

25 THE WITNESS: I mean, can you elaborate?

1 BY MR. ROWLEY:

2 Q. I'm going to -- in courtrooms, we deal with  
3 this thing called "admissibility." So for things to be  
4 admissible, we have to lay a foundation; so I have to  
5 ask some specific questions.

6 A. Mm-hmm.

7 Q. Such as how often in the 30 years --  
8 Well, how many years had you been at Cedars  
9 at that point, the night --

10 A. Oh, perhaps just a year. About a year. 10:50

11 Q. In that year, had you experienced racism with  
12 respect to patient care at Cedars-Sinai?

13 A. I -- yes. The answer is yes.

14 Q. Was it something that was just every once  
15 in a while? Or was it something that was frequent?

16 A. I would say at Cedars at that year, it was  
17 something that was frequent, small or large.

18 Q. Did you see that patients of color -- black  
19 patients in particular -- were treated different than  
20 white patients at Cedars-Sinai in the time that you 10:50  
21 were there?

22 MS. HEDRICK: Objection.

23 Calls for speculation. Lacks foundation.

24 Vague and ambiguous.

25 Go ahead.

1 THE WITNESS: I -- before I worked on the  
2 5th floor, I also -- I started out -- my specialty is  
3 open heart. That is my love and my passion. I am an  
4 open heart cardiac surgical technologist for the last  
5 14 years of my career. And I start -- I was hired as  
6 a surgical tech for an open heart team. And that's  
7 where I saw more so the 5th floor. I hadn't up until  
8 Ms. Johnson's case.

9 But on the 5th floor, in open heart team,  
10 I experienced racial discrimination -- I guess you could 10:51  
11 say -- or racial issues pertaining to patients and  
12 myself. And I -- it's very blatant sometimes. I think  
13 it's done from a nursing perspective all the way to  
14 the surgeon. And I don't even think a lot of them  
15 were even aware of it. Comments being made, and it's  
16 insulting. And it takes so much for me to dig deep  
17 within to stay zoned in and give the best possible care,  
18 because you feel so bad.

19 This patient is lying here trusting  
20 Cedars-Sinai, trusting me, trusting the team that 10:52  
21 we're going to give them the fair, effective  
22 high-quality care -- patient care. But yet on the  
23 undertone, this patient is under anesthesia and the  
24 surgeon is saying certain things about black people  
25 or the black race. And it might not even be about

1 the patient per se, it's about events -- current events  
2 going on, you know, at that time. Racial comments  
3 being made.

4 But to see that -- give you an example:  
5 One of our patients, she was -- I felt insulted.  
6 So I -- just give you an example. One of our little  
7 heart patients came in and she was an African-American  
8 lady, a senior citizen, and she was feisty. She was a  
9 little feisty and she was just afraid. So she was very  
10 cold and she kept asking for blankets, warm blankets, 10:53  
11 and that particular nurse at that time was not really  
12 attentive to her. And basically I remember her --  
13 once she gave this patient the blankets that she need,  
14 you know, this patient went under anesthesia and went  
15 to sleep.

16 "I just --," this nurse makes a comment.  
17 "I just, you know, I just don't -- I don't know if it's,  
18 you know, African-Americans or what. But my God, when  
19 they get older, they're just so mean." And, "You know,  
20 I had a mother-in-law that was like that. My mother-in- 10:53  
21 -law was black," and this and that.

22 All of that chatter, all of that unnecessary  
23 comment while that patient just went to sleep -- she  
24 probably could still hear subconsciously. I don't know.  
25 But these are examples -- just one of many examples

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I, the undersigned, declare under penalty  
of perjury:

That I have read the foregoing transcript;  
That I have made any corrections, additions,  
or deletions that I was desirous of making;  
That the foregoing is a true and correct  
transcript of my testimony contained therein.

EXECUTED this \_\_\_\_\_ day of \_\_\_\_\_,  
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REPORTER'S CERTIFICATE

I, MAXIMILLIAN A. CONTRERAS, CSR #13876,  
Certified Shorthand Reporter, certify:

That the foregoing proceedings were taken  
before me at the time and place therein set forth,  
at which time the witness was put under oath by me;

That the testimony of the witness, the  
questions propounded, and all objections and statements  
made at the time of the examination were recorded  
stenographically by me and were thereafter transcribed;

That the foregoing is a true and correct  
transcript of my shorthand notes so taken.

I further certify that I am not a relative or  
employee of any attorney of the parties, nor financially  
interested in the action.

I declare under penalty of perjury under  
the laws of California that the foregoing is true and  
correct.

Dated this 26th day of May, 2021.

---

MAXIMILLIAN A. CONTRERAS  
CSR #13876

# EXHIBIT B

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SUPERIOR COURT FOR THE STATE OF CALIFORNIA  
FOR THE COUNTY OF LOS ANGELES

CHARLES JOHNSON IV; CHARLES JOHNSON V, )  
a minor, by and through his Guardian Ad )  
Litem CHARLES JOHNSON IV; LANGSTON )  
JOHNSON, a minor, by and through his )  
Guardian Ad Litem CHARLES JOHNSON IV, )  
Plaintiffs, )

vs. )

CEDARS-SINAI MEDICAL CENTER, a )  
business organization, form unknown; )  
ARJANG NAIM, M.D.; SARA CHURCHILL, )  
M.D.; KATHRYN SHARMA, M.D.; STUART )  
MARTIN, M.D.; BENHAM KASHANCHI, M.D.; )  
and DOES 1 to 100, inclusive, )  
Defendants. )

Case No. :  
BC655107

Pages 1-39

VIDEOTAPED DEPOSITION OF

KIMBERLY GREGORY, M.D.

FRIDAY, JUNE 4, 2021

Via Zoom Video Conferencing

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REPORTED BY: CANDACE YOUNT, CSR No. 2737, RMR, CCRR  
FILE NO. AF03D7D

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SUPERIOR COURT FOR THE STATE OF CALIFORNIA  
FOR THE COUNTY OF LOS ANGELES

CHARLES JOHNSON IV; CHARLES JOHNSON V, )  
a minor, by and through his Guardian Ad )  
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and DOES 1 to 100, inclusive, )

Defendants. )

Case No.  
BC655107

Deposition of KIMBERLY GREGORY, M.D., taken on  
behalf of Plaintiffs via Zoom Video Conferencing  
commencing at 10:26 a.m., Friday, June 4, 2021, before  
Candace Yount, CSR No. 2737.

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ALSO PRESENT:

Jamal Judkins, Videographer  
Charles Johnson  
Jamie Hill

I N D E X

WITNESS	PAGE
KIMBERLY GREGORY, M.D. Examination By Mr. Rowley	6

E X H I B I T S

EXHIBIT	DESCRIPTION	PAGE
Exhibit 1	(Not marked)	
Exhibit 2	(Not marked)	
Exhibit 3	"Reduction of Peripartum Racial and Ethnic Disparities. A Conceptual Framework and Maternal Safety Consensus Bundle" (13 pages)	26

1 THE VIDEOGRAPHER: All right. 10:53:01  
2 (The document referred to was marked  
3 as Exhibit No. 3 by the Reporter.)  
4 BY MR. ROWLEY:  
5 Q. This is published as a peer review article; 10:53:03  
6 true?  
7 A. Yes, sir.  
8 Q. Based upon information from the years prior to  
9 2018, including 2016; true?  
10 A. Yes, sir. 10:53:13  
11 Q. (Reading):  
12 "Racial and ethnic disparities exist in  
13 both perinatal outcomes and health care  
14 quality."  
15 Is that a fact? 10:53:24  
16 A. Yes, sir.  
17 Q. (Reading):  
18 "For example, black women are three to  
19 four times more likely to die from  
20 pregnancy-related causes and have more than a 10:53:30  
21 twofold greater risk of severe maternal  
22 morbidity than white women."  
23 Is that true?  
24 A. Yes, sir.  
25 Q. Did you know that Kyira was a black woman when 10:53:39

1 you were called?

10:53:47

2 A. No, sir.

3 Q. At the top of the list of what causes black  
4 women to die twice as often as white women -- Actually,  
5 it's three to four times more likely than white women;  
6 true?

10:54:06

7 A. Yes.

8 Q. Up to five times in some places; correct?

9 A. I believe the current statistics are three to  
10 four times, but yes, sir.

10:54:19

11 Q. At the top of the list is hemorrhage after  
12 childbirth; true?

13 A. Actually, the -- Now it's cardiovascular  
14 disease but, yes, hemorrhage is the leading cause.

15 Q. As of 2018, getting information from the prior  
16 years up to 2016, it was hemorrhage; true?

10:54:40

17 (Pause in proceedings.)

18 THE WITNESS: Probably. To be honest, it's --  
19 It's very dynamic.

20 But, yes, hemorrhage is a leading cause of  
21 maternal death, yes.

10:55:02

22 BY MR. ROWLEY:

23 Q. More so in black women.

24 A. Yes.

25 Q. Thank you.

10:55:09



1                   Would you agree?

10:56:47

2                   MR. LYNCH: Well, the question was asked; and  
3 it calls for speculation.

4                   If you can answer the question without  
5 speculating.

10:56:59

6                   THE WITNESS: There's no "yes" or "no" answer  
7 to that. I don't know.

8                   (Pause in proceedings.)

9                   BY MR. ROWLEY:

10                  Q. If I was one of your good friends sitting  
11 across the table from you having coffee or tea and I  
12 asked you that question, what would you say? What do  
13 you think? What do you believe?

10:57:28

14                  MR. LYNCH: The question's been asked and  
15 answered.

10:57:39

16                  (Pause in proceedings.)

17                  BY MR. ROWLEY:

18                  Q. Go ahead.

19                  A. She should have gone back to the Operating  
20 Room sooner, yes.

10:58:04

21                  Q. Thank you.

22                         What is this -- since you've written about  
23 it -- this racism that exists that harms black women in  
24 health care? You know more about it than we do, so  
25 help us understand.

10:58:37

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I, the undersigned, declare under penalty of perjury:

That I have read the foregoing transcript;

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That the foregoing is a true and correct transcript of my testimony contained therein.

EXECUTED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
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Kimberly Gegory, M.D.

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REPORTER'S CERTIFICATE

I, CANDACE YOUNT, CSR No. 2737, Certified  
Shorthand Reporter, certify:

That the foregoing proceedings were taken before  
me at the time and place therein set forth, at which  
time the witness was put under oath by me;

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That the foregoing is a true and correct  
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I further certify that I am not a relative or  
employee of any attorney of the parties, nor  
financially interested in the action.

I declare under penalty of perjury under the  
laws of California that the foregoing is true and  
correct.

Dated this 11th day of June 2021.

\_\_\_\_\_  
CANDACE YOUNT, CSR No. 2737